

which the symptoms are of sudden onset, and remain stationary, whereas in syringomyelia the symptoms develop slowly and are progressive.

The author believes that traumatism is a frequent cause of syringomyelia, but all cases of hæmatomeylia do not become cases of syringomyelia.

The question whether syringomyelia may be due to some obstetrical injury is next dealt with, and evidence is brought forward showing that the condition not infrequently occurs with difficult labour; but although the seat of this lesion and syringomyelia tends to be the same—viz., the cervical region, it cannot be asserted that such birth injuries are the cause of syringomyelia in later life. The presence of blood pigment in the wall of the cavity does not necessarily prove that the cavity is of hæmorrhagic origin, for hæmorrhage may occur into a syringomyelic cavity.

The author believes that the rôle which traumatism plays in the production of syringomyelia in some cases is as clear as the part played by ascending neuritis in the production of syringomyelia in others; and these conclusions are not only of theoretical interest, but have a very real importance from a medico-legal point of view.

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A Text-book of Insanity. By CHARLES MERCIER. (London: Swan Sonnenschein, 1902. Small 8vo, 6s.)

THIS book presents the usual characteristics of Dr. Mercier's work, keenness and originality of thought, closeness of reasoning, and perfect clearness of style. The distinction which the author always shows is present here in full measure. Coming as it does immediately after his longer work, "Psychology, Normal and Morbid," we expect it to be a practical supplement to that work. In the preface we are told that this little book is intended for students whose guides in this subject have hitherto been too bulky and voluminous. "Moreover," says the author, "I was anxious to put forward the distinction that I have drawn in this book between forms of insanity and varieties of insanity, a distinction which, I think, goes far to solve the difficulties of classification."

The book is divided into three parts: The Institutes of Insanity, Forms and Varieties of Insanity, and Legal Relations of Insanity. The first part deals in four chapters with Conduct, Mind Certifiability, and Causation. The author insists upon the importance of conduct. "Special stress," he tells us in the preface, "is laid upon observation of conduct, which is, in my opinion, the key to the subject." Again in the introduction—"Conduct is the main thing that is disordered in insanity." The statement is no doubt true and it is important, chiefly because it seems to keep the observer to plain practical points; but if we give, as Dr. Mercier appears to do, the fullest extension to the term conduct and make it cover not only, like Matthew Arnold's morality, three-fourths of life, but really the whole scene of human activity, it is open to question whether the generalisation is not too large for practical use. A very able analysis of conduct begins with the statement, "Conduct is the pursuit of ends," and goes on, "All life is teleological, and the great end to which all life is directed . . . is the continuation of the race to which the individual belongs," the self-preservative activities coming next in importance. It would, perhaps, bring us too far afield if we were to ask whether the "end" of life, in this sense, can be its mere continuance, racially or individually, since the acceptance of this view—is it not merely to place the elephant on the tortoise once more? And, besides, in the long history of our earth innumerable races of living things have ceased to exist just as individuals cease to exist. Therefore, the "end" of life cannot be racial continuance any more than individual existence; the "end" of life, apparently, is the continuance of life—the existence of life—life, and so our teleological circle ends where it began. But it is more important to see that the keen reasoning of Dr. Mercier on these great philosophic points is, in a somewhat different sense, teleological. It is the explicatory reasoning of the philosopher who contemplates, as it were, from the outside, the trend of events. "Conduct is the pursuit of ends." If this means cosmical or even racial ends, it is no doubt in the widest sense true, but it seems to lead us, as Carlyle used to say, nowhither. Applied to the individual, on the other hand, the motive force of life is not the pursuit of ends. Will, desire, impulse, are not to be so explained, and while the philosophers tell us that happiness is our being's end and aim, or that the continuance of the race is the end of individual life, man, who in action is quite unconscious that he is the conduit-pipe for the stream of tendency, acts as he wills—"so fondly he believes."

In other words, there seems to be a double meaning in Dr. Mercier's description of conduct and of the great "end" of life. It would perhaps be truer to say that conduct is the endeavour to fulfil desire, though there is probably a fallacy here too.

The second, and very much the larger part of the work, is given to forms and varieties of insanity. As we have seen, the author considers this distinction of high importance. "A form of insanity corresponds with what is called, in ordinary medical phraseology, a symptom; a variety corresponds with what is called a disease." The forms of insanity are, (a) weakmindedness, (b) stupor, (c) depression, (d) excitement, (e) exaltation, (f) suspicion, (g) systematised delusion, (h) obsession and impulsiveness, (k) moral perversion. The varieties, (1) idiocy and imbecility, (2) dementia, (3) stupor, (4) acute delirious mania, (5) acute insanity, (6) fixed delusion, (7) paranoia, (8) *folie circulaire*, (9) insanity of reproduction, (10) insanity of times of life, (11) insanity of alcohol, (12) general paralysis, (13) insanity of epilepsy, (14) insanity of bodily disease.

It is not easy to see how this classification is an improvement upon several of the earlier attempts. To the writer of this review, it appears only to emphasise the difficulty of the question. In his preface, Dr. Mercier says: "I hold that there are not insanities but insanity only." Therefore, a form and a variety cannot be very distinct. In his divisions "stupor" actually occurs under both rubrics. In what sense is "dementia" a variety comparable to general paralysis? The description of dementia is chiefly applicable to a secondary state. It seems, therefore, inappropriate to class it as anything corresponding to a disease. The section upon dementia concludes thus: "The only form of dementia which has a true clinical distinctness, and constitutes a separate clinical entity, is that which is known as stupor." One might, therefore, be justified in supposing that the "variety" called "dementia" is not a clinical entity. That an author so acute and logical as Dr. Mercier should thus be entangled, appears to show that the difficulty of classification is at present insoluble. The old objection to eclectic classifications, that they are formed by adding together things that have no common denominator, seems to apply. Again, the objection that some varieties are very distinct, and others are mere "refractory wards" cannot be altogether avoided where such divisions occur as "acute insanity" and "dementia." The difference made between "fixed delusion" and "paranoia," that in the former "the delusion has practically no effect upon conduct," would

appear to be only a question of degree. Though an excellent description is given of senile dementia under the heading "dementia," yet where it is referred to under causation, and under the heading "insanity of times of life," it is not sufficiently distinguished from other conditions of mental aberration occurring in old age. Yet it would appear to the writer of this notice, that there is no variety of insanity which is more distinct than senile dementia, distinct in symptoms, in course, and in pathological anatomy. The classification cannot be perfectly natural which associates this incurable organic disease of the brain with other conditions occurring, indeed, in old age, but often quite curable.

In a chapter of the highest excellence on the causes of insanity, Dr. Mercier discusses, among other things, the question of vulnerability, predisposition, heredity. Wisely, no doubt, he has not returned to this point with regard to classification, for the Continental authors who have endeavoured to differentiate hereditary and degenerative insanity do not seem to have fully proved their thesis.

The last part of this book, which treats of the legal relations of insanity, is probably sufficient though short, and deals with this intricate subject in a very clear and able way.

In his preface, the author has, as it were, challenged criticism on certain points on which we therefore dwell, and, as they are moot points, freely express dissent. But his claim to credit for brevity must be admitted, and no critic can but admire his terseness and vigour, and the clear emphatic style so valuable in a book for students.

Space does not allow of reference to the numerous keen and original observations scattered through the volume. Treatment is not separately dealt with, but many valuable therapeutic notes appear throughout. "Neurologists," says Dr. Mercier, "who are frequently consulted about cases of insanity, though it is a subject of which they have no special knowledge, almost invariably advise that the patient should travel. . . . Traveling is, however, almost always detrimental in the early stages of insanity." Perhaps he might have gone a little further, and referred to cases of acute melancholics who ought to be in their beds, and who are trotted round to various diversions till they are driven to suicide or worse, to incurability.

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