

states passing into incurable deliria of autoaccusation, hypochondria, or negation. The condition as a whole frequently occurs in association with neurasthenia and hysteria, but must be clearly distinguished from them. An essential feature of the emotional constitution is that it represents, not organic lesions, but deficiencies of functional equilibrium. When clearly recognized by the physician in given case it enables him to understand the patient's entire personality.

Valdizan, H. NEUROSES IN OLD PERU. [Ann. d. l. F. Med. Montevideo. I, 1918, No. 1.]

The history of hysteria and epilepsy in Peru, during the seventeenth and eighteenth centuries is here given by the author. In many particulars the reported miracle cures follow the usual rules which are known in the history of France during the fifteenth and sixteenth century.

Bernheim, P. PAINS AND AUTOSUGGESTION. [Progrès Médicale, Vol. 33, 1918, 21, May 25.]

This author gives some examples of what he erroneously calls [There are no imaginary pains—or rather all pains are always mental images, but of different causation. Bernheim here would best utilize the term psychogenic pains] imaginary pains, pains grafted on a primary organic pain from some lesion. Two of the patients nine years old; one screamed whenever the umbilicus was touched [why B. does not seem to know]. A small healed excoriation explained the trouble. The other complained of pain in the back and hand, sequels of acute articular rheumatism. In the adults the pain developed after a physical effort or joint lesion. In each case waking suggestion cured the pain immediately, or it subsided more gradually, but all yielded in time. In another group of cases the psychogenic pain, following some fall or gunshot wound or without appreciable organic lesion, had lasted up to twenty years, and had become compulsory. Bernheim then gives a naive interpretation which explains nothing and then goes on to say that every psychoneurotic pain, single or multiple, primary or secondary, is amenable to psychotherapy unless of such long standing that it has become an obsession as it were. It is important to recognize the nature of these disturbances; when the physician tries one remedy after another on the assumption of an organic basis and the patient feels no relief, the latter is confirmed more and more in the belief that his pain is obsessive.

Damaye, H. WAR NEURASTHENIA. [Progrès Médicale, 33, 1918, May 25.]

In an analysis of 123 patients in the Amiens section suffering from what Damaye terms "neurasthenia" a partition is made into pure and mixed cases. The fatigue develops along four different lines according as it affects the predisposed or develops after a concussion or bom-