The following inferences from my sleep-willing trials are drawn from the afternoon series alone :

(1) That a time-sense exists. For chance would hardly enable one to wake at the predetermined minute in 16% of the trials ; nor would chance enable one to wake within 3 min. of the resolved-on time in 37% of the trials.

(2) Persistent practice tends to diminish accuracies, probably through staleness. This is against the theory that habit accounts for success.

(3) Habit is further discounted by the facts that the afternoon trials were made at ever-varying times, and that, in 72 of them, irregular periods of sleep were willed.

(4) Accuracies were nearly twice as frequent when an irregular period of sleep was willed as when a regular period was willed (18 to 10·71). But tiredness, as well as staleness, may account for this result.

(5) Approximate successes were slightly less in the irregular-period section than in the regular-period one (37·41 to 39·1).

Conclusions.

These experiments in watch-guessing, in time-willing and in willed waking seem to warrant the following conclusions :

(1) That a time-sense exists.

(2) That the time-sense works best below the threshold of consciousness.

(3) That the time-sense, therefore, is evidence of a subconscious self.

Clinical Notes and Cases.

An Unusual Form of Suicide. By G. A. Auden, M.D., Ph.D., F.R.C.P.

From time to time cases of suicide occur in which the methods employed to bring about death have considerable psychological interest. The following case appears to fall within this category, and to be worthy of permanent record :

X. Y. Z., æt. 24, carried on a fish business in conjunction with his father, who suffered from epilepsy. So far as is known he appeared to be perfectly normal in health, mental capacity and behaviour, belonged to a local football club, and possessed a motor bicycle. On the morning of February 4, 1927, a police constable called at his house to verify his address in reference to an inquiry from the police of a neighbouring town, where he had been reported.

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as driving a motor cycle without an efficient silencer. No summons was being issued, and " he appeared quite right and jovial." Apart from this trivial incident no anxiety or trouble was known, and he was described as of a cheerful disposition.

On the date above-mentioned his father left the shop early to go on his daily fish sale round, leaving the man in charge of the shop. He was there at 11 a.m., when he spoke to a charwoman from the cellar. On his return at 6.30 p.m. his father found him lying dead in the front bedroom. The body was on its back, with the feet extended away from the bed. Placed across the throat was a woman's high-heeled suede outdoor shoe, which was laced on to a bootmaker's iron boot-last. Upon this was resting a stout piece of wood which was packed into the shoe by means of newspaper. Over the boot-last, and round the base of the wood, was a woman's stocking. Upon the upper end of the wood was balanced the bottom end of a heavy double bedstead, in such a way that the whole weight of the bed was transmitted to the shoe, and so to the throat. The right foot of the bed was resting upon a chair which had fallen upon its side, the left foot being in the air; the chair on which it had rested was lying on its side, having evidently been pulled away. The body was stiff and cold, and the man had evidently been dead for some hours.

Death had resulted from asphyxia due to compression. There were no fractures of the larynx or trachea. The bedstead was perfectly balanced upon the wood, and it would appear that this was the result of careful measurement, if not of previous experiment, for to effect his object it is clear that the length of the wood, together with that of the boot-last and shoe when placed upon the neck, must necessarily have been adjusted so as to be slightly greater than the height of the cross-bar of the bed when resting upon the two chairs, in order that sufficient pressure could be exerted to keep the arrangement in position while he worked the two chairs away with his arms, until the whole weight of the bed was balanced upon it.

The choice of these objects of a woman's clothing for the purpose seems undoubtedly to point to a masochistic impulse, a view which is further borne out by the symbolism of subjection suggested by the shoe pressing upon the throat—a symbolism which is so clear and self-evident that it admits of no doubt as to its meaning. The whole apparatus appears to represent, through the shoe and stocking, a woman's foot and leg, and the implications of the arrangement are indubitable. The evidence afforded by the care with which the apparatus was fitted together and the accuracy with which the bed was balanced upon it rather point to previous

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experiment or use to induce some pleasurable gratification. It is not known to whom the shoe and stocking belonged. These were not the property of anyone living in the house, nor to the young woman with whom he was "walking out." So far as could be ascertained, the man's habits were in every way regular, and socially satisfactory. The bedroom was not in general occupation and the bed-clothes were not disturbed.

Though the verdict returned at the inquest was "suicide during temporary insanity," if the above surmise is correct, it is open to question whether death may not have been due to misadventure rather than to an impulse to self-destruction.

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*A Case of Pellagra.** By E. BARTON WHITE, M.R.C.S.Eng., L.R.C.P. Lond., Medical Superintendent, Bristol Mental Hospital, and GEOFFREY HADFIELD, M.D., M.R.C.P.Lond., Pathologist, Bristol General Hospital, and Bristol Mental Hospital.

ALTHOUGH still a rare disease in this country, there is little doubt that the incidence of pellagra amongst mental patients is considerably higher than in the rest of the population, and the opportunities for its study have been largely in the hands of the medical officers of mental hospitals. That these opportunities have been utilized is fully borne out by many careful and scientific records published from our mental hospitals since Prof. G. M. Robertson, of the Royal Hospital, Morningside, recognized the first case—a Shetland girl—in this country, in 1909, which case was published by Brown and Cranston Low in the same year. The foundations of our knowledge of the spinal cord changes were laid by the late Sir Frederick Mott, and following this pioneer work, reports of cases from mental hospitals in many parts of the country have been published, culminating in the well-known investigations of Watson, of Rainhill Mental Hospital, who has studied with great care 54 cases occurring in that institution over a period of twelve years. In spite of the fact that the exact cause of the disease is still hotly disputed, the mass of published detail and accumulated experience supports a few legitimate generalizations. Kimber emphasizes a growing belief that pellagra, especially a mild type, is more common amongst the population of mental hospitals than has hitherto been supposed. Most observers have previously been unwilling to diagnose the condition until the skin rash became manifest. Several of Kimber's cases were diagnosed before this sign appeared, its appearance at a later date clinching the diagnosis. The importance

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