THE

# JOURNAL OF MENTAL SCIENCE

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## SUPPLEMENT

MARCH, 1938.

## THE ROYAL MEDICO-PSYCHOLOGICAL ASSOCIATION.

### QUARTERLY MEETING.

THE QUARTERLY MEETING of the Association was held on Thursday, February 17, 1938, at 11, Chandos Street, Cavendish Square, London, W., under the presidency of Dr. DOUGLAS MCRAE.

The minutes of the previous meeting were taken as read and confirmed.

### OBITUARY.

The PRESIDENT said that since the previous meeting in the autumn of 1937 the Association had had to mourn the passing of an unusual number of colleagues and friends.

### SIR JAMES CRICHTON-BROWNE.

First of all, the death of Sir James Crichton-Browne had taken away one who must be considered a human phenomenon. Sir James Crichton-Browne became an ordinary member of the Association as long ago as 1863; he was made an honorary member in 1878, and in that same year he became President. He was the first Maudsley Lecturer. For very many years he was Lord Chancellor's Visitor. He was Medical Superintendent of Wakefield Asylum, which was long recognized as the premier asylum in England, as affording an example of how things ought to be done. Sir James had extraordinary mental abilities and a wonderful memory. One noteworthy thing about him was his capacity to speak on a subject for an hour or more without a single note. He remembered him once telling him that he ascribed this faculty to his early training in his Scottish home. On returning from church the children on Sunday afternoon were required to go completely over the sermon they had heard. That was his training—to listen to what was told him and make sure that he had grasped it, and could repeat it when necessary. He ascribed to that early experience his ability to listen to discussions and grasp and recapitulate the essential points. Another very striking feature in his character known to the speaker was the intense interest he took in all his relatives and acquaintances. He would describe and discuss the doings of his relatives belonging to two generations later than his own; he knew where they all were, and what activities engaged them. Sir James was a man of immense ability, and took a very prominent part in the progress of the treatment of the insane. In him the Association had lost a very notable figure.

### DR. DANIEL RAMBAUT.

Another member who was in much more intimate association with those now engaged in the working of the Association was Dr. D. F. Rambaut, who passed away at the end of last year. Dr. Rambaut had been an ordinary member since 1894;



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he became Registrar in 1924, and was Chairman of the South-Eastern Division in 1933–34, and President of the Association in 1934–35. Many of those present would recall the fine meeting they had at Northampton under his presidency. Rambaut was a very able, conscientious and diligent man, thorough in everything he undertook. He was a man of very few words. It was astonishing to many of them to see the tremendous amount of work he did as Registrar, and yet he had very little to say about it beyond presenting the typewritten report of the results of the examinations and a few letters with which he had had to deal. His ability was on an equality with his modesty. The Association had lost in Rambaut a very valuable member, and one whom they all held in the greatest affection, esteem and admiration.

### Dr. J. Francis Dixon.

The next name on his list was Dr. J. Francis Dixon, a man of forcible character and full of original ideas. He had not been seen much of late at the meetings, but he could remember him twenty years ago as an able and critical debater. He was a participant in some very sharp arguments in that room, but he always had a considerable amount of humour, and the speaker had never known him say things that really hurt, because he got his opponents and everybody else to see the humorous side. The Association had lost in him an honoured and valuable member.

### Dr. J. H. Earls.

Yet another member whose death they had to mourn was Dr. J. H. Earls, late Resident Physician at Fenstanton, and well known as Resident Medical Officer of Ticehurst. He was a strong supporter of the Association and a very loyal member, but had not attended the meetings very constantly because he had a good many other interests. He was prominent in the Craft of Freemasonry, and in that way he had made a very large number of friends and acquaintances in the south of England. In him the Association had lost a greatly respected member.

### Mr. Henry Dickinson.

The last name he had to refer to was that of Mr. Henry Dickinson, who had served as reporter at the meetings of the Association for thirty years. He took very careful reports of what transpired at the meetings, and was indeed so conscientious in what he recorded that occasionally matters too personal to be published had to be eliminated from the reports. Mr. Dickinson was a valuable reporter to the Association, and his death was greatly regretted.

At the instance of the President those present stood for a few moments in silence, and it was resolved to instruct the Secretary to write to the relatives expressing the Association's condolence, and its appreciation of the work which these deceased gentlemen had done on its behalf.

### Matters Arising Out of the Council Meeting.

Dr. W. G. Masefield (Hon. General Secretary) read the following report on the matters discussed at that morning's Council meeting :

The Educational Committee's Memorandum on the Nursing Examinations was sent to all training establishments ; 108 replies were received. At the meeting of the Educational Committee yesterday the Memorandum was again discussed and approved.

The Handbook Committee reported that 500 copies of the Brochure on Occupational Therapy had already been sold. Good progress has been made with the preparation of the new Handbooks.

*Recruitment and Training of Mental Hospital Nurses.*—Drs. Petrie, Drury and Masefield attended a Joint Committee with the representatives of the Mental

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Hospitals' Association, on the question of the recruitment and training of mental hospital nurses. A resolution was passed that the constitution of the Inter-Departmental Committee is such that it is not competent to make recommendations regarding mental hospital nurses. This resolution had not, however, been adopted by the Mental Hospitals' Association Executive.

The Council this morning agreed that our delegates be asked to continue their work and to continue to meet in conference with representatives of the Mental Hospital and Institutional Workers' Union and (if they will) of the Mental Hospitals' Association, and to frame a report as the result of their deliberations.

In the event of the Association being asked to give evidence before the Departmental Committee, no definite answer will be given until after the Council meet again.

*Alleged inadequacy in numbers of medical officers to mental hospitals.*—A Joint Conference was held with the Mental Hospitals' Association to discuss the alleged inadequacy in numbers of medical officers in mental hospitals. The meeting was adjourned in order that the matter could be placed before the Council of the R.M.P.A., to decide whether it would be possible for the Association to give a definite opinion on the subject. The Council resolved to have papers read on the subject, followed by a discussion, at the May Quarterly General Meeting.

*Asylums Officers' Superannuation Act*, 1909.—At the Joint Conference of the Mental Hospital and Institutional Workers' Union, Association of Clerks and Stewards of Mental Hospitals and the R.M.P.A., it was resolved that the Scottish Division of the R.M.P.A. be invited to send a representative member to sit on this Joint Standing Committee.

The Council agreed that a letter be sent to the Scottish Division asking them to appoint a representative.

*Responsibilities of medical officers in mental hospitals.*—The opinion of Counsel (Mr. G. J. Lynskey, K.C.) has been received on this matter. It is to the effect that medical officers are afforded no protection by their Committee, and all members of the Association are therefore advised to join a medical protection society.

The Council agreed that notices to this effect shall be circulated to all members with the agendas of the May meeting. A notice to this effect will also appear in the Journal, and Secretaries of Divisions will be asked to make announcements.

*Infanticide Act.*—A proposed amendment to the Infanticide Act was considered by the Parliamentary Committee and received their whole-hearted support.

Dr. Norman Phillips has agreed to continue as Acting Registrar until the Annual Meeting.

The Council appointed a Committee to consider a recommendation by Dr. Helen Boyle and correspondence from Mr. Claude Mullins. Dr. Boyle's recommendation was—" That it be a recommendation to the Home Secretary that every first offender be offered the opportunity of examination by a psychiatrist." The Committee consists of Drs. Nathan Raw, Saxty Good, G. W. Smith, F. Douglas Turner, Helen Boyle and R. M. Macfarlane.

Prof. Golla and Dr. Walk have been asked to represent the Association at the Congrès des Médecins Aliénistes et Neurologistes being held at Algiers, April 6–11, 1938.

Dr. C. J. Thomas has agreed to represent the Association at the Health Congress of the Royal Sanitary Institute, Portsmouth, July 11–16, 1938.

Dr. Silverston will be asked to represent the Association at the Congress of the Royal Institute of Public Health and Hygiene at Blackpool, May 31–June 4, 1938.

An Observation Visit has been arranged by the Mental Deficiency Committee to Hortham Colony, Bristol, on Thursday, April 28. Members will be entertained by the Lord Mayor to luncheon, and all members of the Association will be invited to attend the visit.

It has been decided to hold the May meeting in London, the Quarterly General Meeting on May 20, Committees on the 19th.

The Annual Meeting will be held at Ilkley, commencing Wednesday, July 6.

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## Election of Members.

The following members were elected by ballot *en bloc*, Dr. W. M. Ford Robertson and Dr. J. H. MacDonald acting as scrutineers :

Coats, Percy Murray, M.D., B.S.Durh., Medical Officer, H.M. Prison, Liverpool.
*Proposed by* Drs. W. Norwood East, J. S. Hopwood and J. S. Knox.

Russell, Leonard William, M.B., Ch.B.Leeds, D.P.M., Assistant Medical Officer, St. Bernard's Hospital, Southall.
*Proposed by* Drs. J. B. S. Lewis, W. Gordon Masefield and R. G. Riches.

Bailey, Kenneth Cyril, M.A., M.B., B.Ch., M.R.C.S., L.R.C.P., D.P.M., Assistant Medical Officer, Warlingham Park Hospital, Upper Warlingham, Surrey.
*Proposed by* Drs. T. P. Rees, R. M. Macfarlane and W. Gordon Masefield.

Shepley, William Hadfield, M.B., Ch.B., D.P.M.Vict., Assistant Medical Officer, Warlingham Park Hospital, Upper Warlingham, Surrey.
*Proposed by* Drs. T. P. Rees, R. M. Macfarlane and W. Gordon Masefield.

Mason, James Johnston, M.B., Ch.B.Edin., Medical Superintendent, Brentry Colony, Westbury-on-Trym, Bristol.
*Proposed by* Drs. E. O. Lewis, G. de M. Rudolf and R. M. Bates.

Grace, Richard Fairfax T., M.D., Ch.B.Edin., M.R.C.P., Part-time Medical Officer, Maudsley Hospital; Clinical Assistant, The Tavistock Clinic, 50, Wimpole Street, W. 1.
*Proposed by* Drs. T. Tennent, A. Walk and M. A. Walsh.

Van Someren, Gerald Antony, M.R.C.S., L.R.C.P., Assistant Medical Officer, Leicestershire and Rutland Mental Hospital, Narborough, near Leicester.
*Proposed by* Drs. K. K. Drury, D. Prentice and T. Wishart Davidson.

McGuiness, John Plenderleith, L.R.C.P.&S.Edin., L.R.F.P.S.Glasg., Assistant Medical Officer, Leicestershire and Rutland Mental Hospital, Narborough, near Leicester.
*Proposed by* Drs. K. K. Drury, D. Prentice and T. Wishart Davidson.

Gilmour, David, M.B., Ch.B.Edin., Deputy Medical Superintendent, Murray Royal, Perth.
*Proposed by* Drs. W. D. Chambers, A. MacNiven and D. K. Henderson.

Hutton, Effie Lilian, M.B., B.S.Lond., D.P.M., Research Medical Officer, Malaria Therapy Centre, Horton Hospital, Epsom.
*Proposed by* Drs. W. D. Nicol, F. Golla and S. W. Hardwick.

Anderson, Rupert George, M.D.Edin., D.P.M.Lond., Deputy Medical Superintendent, Horton Hospital, Epsom.
*Proposed by* Drs. W. D. Nicol, S. W. Hardwick and J. J. Laws.

Meade-King, Michael Liddon, M.R.C.S., L.R.C.P., D.P.M., Assistant Medical Officer, Springfield Mental Hospital, S.W. 17.
*Proposed by* Drs. R. Worth, G. Warwick Smith and H. C. Beccle.

Jefferson, Gertrude M., M.R.C.S., L.R.C.P., D.P.M., 33, Belfield Road, Didsbury, Manchester.
*Proposed by* Drs. H. Dove Cormac, P. M. Crowe and T. P. Curran.

Andrews, Gordon Frank, M.R.C.S., L.R.C.P., Assistant Medical Officer, Severalls Hospital, Colchester, Essex.
*Proposed by* Drs. A. G. Duncan, R. C. Turnbull and W. Gordon Masefield.

Garner, Algernon Ronald, M.R.C.S., L.R.C.P., Assistant Medical Officer, Severalls Hospital, Colchester, Essex.
*Proposed by* Drs. R. C. Turnbull, A. G. Duncan and W. Gordon Masefield.

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ANNESLEY, DUDLEY THOMAS, M.B., B.Ch.Dubl., Assistant Medical Officer, Severalls Hospital, Colchester, Essex.
*Proposed by* Drs. A. G. Duncan, R. C. Turnbull and W. Gordon Masefield.

BROOKES, MATTHEW JAMES, M.R.C.S., L.R.C.P., Assistant Medical Officer, Severalls Hospital, Colchester, Essex.
*Proposed by* Drs. R. C. Turnbull, A. G. Duncan and W. Gordon Masefield.

HAWORTH, NORAH A., M.A.Camb., M.R.C.S., L.R.C.P., D.P.M., Assistant Medical Officer, Severalls Hospital, Colchester, Essex.
*Proposed by* Drs. R. C. Turnbull, A. G. Duncan and W. Gordon Masefield.

PAPER.—**" Some Observations on the Theory of Perception,"** by Dr. S. SHARMAN, Assistant Medical Officer, Mapperley Mental Hospital, Nottingham (see p. 273).

## DISCUSSION.

The PRESIDENT said that Dr. Sharman's had been an exceedingly difficult paper to follow. Personally, it was only at intervals that he himself had come to terms with what he meant. Nevertheless, he appreciated this contribution very much because he had struggled for many years to understand what psychology really was. Even as a boy he used to read books on psychology, and all he could find out was that each book expressed a separate set of ideas, and after reading one of them one turned to the next, and found the subject treated in a totally different manner with no relation to what had already been written. That had been his experience of writings on psychology throughout his life. Each author appeared to show that the ideas of others on the subject were all wrong.

All that he could say was that psychology was a study of human nature; it could not be called a science. The writer of the present paper had quoted a number of authors, and shown, to the satisfaction of the speaker at all events, that their various statements were very largely opinions, and opinions he thought they would remain to the end of time.

The real objection to the study of the mind was that it had to be studied by means of the same instrument—that is, the mind must be studied by the mind itself. There were no other means of studying it, and no means of determining whether the results of the study were correct or otherwise. Indeed, he was going to be so rude as to say that psychology in practice was nothing more nor less than an intellectual parlour game. It was of no use in any application to human life and conduct, although, of course, it had its great intellectual interest. It was simply speculating into the way in which the mind seemed to work. Dr. Sharman's paper had at any rate satisfied him that a great deal yet remained to be discovered before psychology could ever be called a science.

Dr. J. H. MACDONALD considered that the President had been a little too iconoclastic. He was obliged to Dr. Sharman for his paper. After all, perception was the most important fundamental element in psychology. It was unfortunate that it so often happened that when they spoke of the perceptive faculty they spoke of it as appertaining to the adult individual, and perception in the adult individual never existed alone, it was always complicated by other mental reactions. This matter had to be looked at objectively. A distinction was commonly made between the inert and the living. He thought those who had studied this matter would agree that where any vital response which could be called perception was to be seen, there was evidence at once of the function of the nervous material. A beginning might be made in the lowest scale of animal life, the amœbæ and infusoria. Certain actions were seen in these organisms when stimulated from without. If some of them were placed in a basin of water, certain infusoria, if there was a

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shadow side, would move away from the light, while others would move towards the light. There was definite action and reaction. But it was not considered that these were nervous responses. They were vital phenomena which could be explained on a chemical or molecular basis. To take another vital aspect of life in the vegetable kingdom, he instanced the *Drosera* genus of plants, which immediately responded to the insect alighting upon them so that the insect became engulfed and digested. There again one had an instance of response to stimulus from without, but one did not even attribute sensation to it. On following up the scale of animal life, however, one did discover definite response to an action from without, and such reaction had about it not only definiteness, but constancy, and it became evident that something more than action and reaction was involved, that there was an element of awareness, and with awareness one had sensation and then perception.

Consider a newborn infant. No one would say that it perceived anything, but it sensed things, such as the proximity of its mother. A little later in its existence evidence was found not only of sensing but of awareness. When the organism, whatever it was, directed itself towards the stimulating object, and the difference between the ego or that which was self and that which was not self became apparent; when, in other words, there arose a distinction between the inner self and the outer world then we had perception and the dawn of consciousness. There was no doubt that the phenomenon of perception could not be isolated, because immediately on the emergence of consciousness other factors such as attention and memory came in. If these vital phenomena were studied, one could not help being struck by the fact that the more complicated they were, the more they became of a mental or psychical character, the individual becoming possessed of a nervous system of increasing complexity.

The distinction between man and other animals was to be found in his perceptive capacity, and that went along with an enormously increased complexity of the nervous mechanism. They, as psychologists who were constantly dealing with mental phenomena, must always have in mind what was meant by perception. It was a vital phenomenon and a nervous phenomenon, and it was unfortunate that in so many papers, and in the works of nearly all psychologists, what was dealt with very largely was the adult human being in whom the process of perception never stood alone. Perception was a biological and evolutionary phenomenon which had to be studied from the point where it stood alone right up to most complex manifestations in the adult human being. He thanked Dr. Sharman for his paper. What he had brought forward was well worth repeating from time to time.

The PRESIDENT said that Dr. MacDonald had used the word "vital". It would be interesting to know what exactly he meant by it. It seemed to him that the only evidence of something vital was outward movement. Unless there was movement of some kind one was not aware of the existence of life and mind.

Dr. MACDONALD said that by "vital" he meant, in this case, reaction *plus* the element of consciousness. The difference between self and not-self did not belong to a plant.

The PRESIDENT pointed out that there could be no knowledge that an individual was conscious unless he chose to show it.

Dr. MACDONALD said that what he desired was that someone would take up the study of the question of personality, and what it meant in reference to perception.

The PRESIDENT instanced the difficulty of learning what exactly the memory was. It was so difficult to abstract it that one could not give it a place in the mind at all. Mercier had left it out as a faculty all by itself. What was memory? How did it come about? Was it that certain vibrations were set up which produced a familiar set of vibrations somewhere in the brain?

Dr. MACDONALD urged that the same question might be posed with regard to electricity. No one knew what it was, but we knew laws that governed it.

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Dr. J. S. I. SKOTTOWE said that, like the President, he regarded all this psychology with the gravest suspicion. In fact, he would go further than the President and say that there was really no such thing as psychology, and that what went by that name was nothing but the subjective aspect of biology. That was a very important point, and he congratulated Dr. Sharman on bringing it forward with such force. He doubted whether anything approaching an exact science would ever be reached in that particular field of biology which had so far been called psychology, because, as the President had pointed out, they were compelled to examine an instrument—the mind—with an instrument exactly similar.

He was sorry that no mention had been made of the work of Adolf Meyer, because from the practical point of view, as opposed to the theoretical, it was of very great importance. Meyer, in 1907, addressed the British Medical Association on the biological outlook in psychiatry, and although his language was a little difficult to understand for various reasons, it was perfectly clear on reflection what he meant. Arising out of his remarks and bringing them into relation to Dr. Sharman's paper, it was quite unnecessary to bother about what was mind, memory or anything else, as long as one remembered that, as Adolf Meyer said, mind was the subjective economizing function of the individual. It might just be left at that. He did not see how one could get nearer to it than the mere recognition that the mind of the individual had a subjective function, and it was an economizing function because its particular capacity was a capacity for phantasy; in other words, we could live in our minds in events which had no existence, no reality at all.

Dr. MACDONALD was understood to say that that could not be done; it was a psychological impossibility.

Dr. SKOTTOWE said that the member was unlucky; he certainly himself could live the phantasy life. But he quite agreed with Dr. MacDonald when he said that perception could not be divorced from other mental processes and looked at, as it were, in a test-tube. Above all, it could not be divorced from conception. He was rather surprised that no reference had been made to quite a valuable and valid suggestion made by Max Levin, of Philadelphia,* on the actual genesis of hallucinations. He put forward a theory to the effect that inasmuch as the conceptual mechanism is the higher one, if an individual is in a state of toxæmia and his capacity for conceptual thinking has disappeared, he has only his perceptual mechanism left. If such an individual thought at all he must think in terms of percepts, and as a percept could not be divorced from its space-time relationship, in the experience of the person concerned the hallucination was exactly as if actually present to his senses. This was a remarkable paper by Levin because it did not involve any of the "parlour games" to which the President objected, but only the principles recognized throughout the whole of psychology, pathology and ordinary medicine, and it dealt with the recognizable facets of the individual which could be spoken of in terms of psychology because they could not be spoken of in terms of anything else.

On the question of what was "vitality" he would not enlarge. Dr. MacDonald had mentioned the plant kingdom. He imagined that the sex life of an artichoke must be a fascinating thing if they could only get at it, but even their highly-developed perceptual mechanisms would not allow them to do that, and he could not really believe that they could divorce from essentially human values these physiological processes, for such they must ultimately be. He did not think that they could in the long run be successfully divorced from human values. If only they could speak, not in the jargon of this, that, and the other thing, but in ordinary everyday language of what they saw and heard, and bring this into real relation with their common experience of life, they would get much further than they ever could by fanciful excursions into what was practically metaphysics. Nevertheless, he had been practising these "parlour games" for a considerable time, and sometimes the consequence was that the patient got better.

* "Pathogenesis of Hallucinations and Delusions," *Arch. Neurol. and Psych.*, xxxvii, p. 839, April, 1937.

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Dr. R. D. CLARKSON said that he remembered reading William James on the necessity for somebody to put psychology together and get some principle on which it could work. All the psychology he had come across had been of very little practical value. Whitehead had some opinions about perception which he thought would have to be taken into account, and although he could not recall them very exactly, he thought his contention was that there were two ways in which things were perceived, namely, ordinary immediate perception, and also the perception of everything as a brute fact of nature with which it was necessary to establish some sort of relation if we were to go on living at all. Whitehead claimed that the more primitive form of perception had very little to do with the actual sensory effect on the brain. The example given was a chair. The artist conceived of a chair as a thing of so many planes, and so many surfaces and colours, which he had all docketed out. But a puppy dog that ran into the room immediately jumped on the chair, perceiving it as a piece of furniture on which to make itself comfortable, and Whitehead contended that the puppy-dog perception of the thing was much more important in many ways than the artist's. The speaker believed that there was something to be learned along those lines. He had nevertheless enjoyed listening to the paper because it epitomized so many different views of so many important people who had been trying to arrive at the essential facts of the matter.

It was extraordinary that mental defectives were often found perceiving things which it might be thought, especially after what Dr. MacDonald had said, they could not perceive. He had in mind an idiot, who showed affection for another idiot, and both of them were pleased to be in each other's company. It had always puzzled him as to how, in the unconscious, if there was such a thing, some sort of perception might be functioning which never became really conscious.

The PRESIDENT said that a word he missed from the paper was the word " choice ".

Dr. J. H. MACDONALD took up the allusion to the dog and the chair. If a man was born blind he could have no visual sensation of the chair at all. Every perception was brought back to an ultimate sensation, and one might just as well conceive it to be a function of nervous matter. No one denied that an idiot perceived, but it was incomplete perception.

Dr. SHARMAN, in reply, said with regard to the remarks of Dr. MacDonald about perception and nervous tissue, he was hoping to make it clear that perceptual ability was a fundamental property of living matter before even nervous tissue was developed. When he had mentioned the mnemonic property as a fundamental distinguishing thing, he did not accept memory as the sole distinguishing thing between living and non-living matter. The perceptive capacity which led to a choice of reaction was a property of living matter. Every cause had an effect, and every effect a cause, but in living matter every cause had a plurality of effects and every effect a plurality of causes. Everything in the world, living or otherwise, had certain properties. The mnemonic property was a property of living matter, as was also perceptual ability. As for the difference between these, he thought there was a primordial perception which was, like Bleuler's mnemonic property, below the level of what was ordinarily held to be consciousness. He instanced the example of the primitive form of mind discussed by Bleuler, namely, the reaction of the paramœcium. A little trick had been played upon this organism. If certain granules were placed near it, some of them angular and others rounded, the latter being digestible and the former not, the paramœcium at first surrounded them all with its cilia, engulfed all the granules, and later from its primitive stomach got rid of the waste products, including every one of the angular granules, while the round granules were absorbed in its system. With the repetition of this process the organism more and more rapidly got rid of the angular granules until the time came, as experiment had shown, when it would take in only the round granules and sweep away the angular ones at the beginning.

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There were two vital functions taking place, one being the memory and the other a discriminating function involving perceptual ability. The embryonic nervous system from its first acquirement of such ability developed gradually into the complicated nervous system of the adult man, but he took it that perceptive ability was the primary thing, and the sense organs were developed to enable this perceptual ability to become larger and to react better and more efficiently from a biological point of view.

He was conscious, especially after what Dr. Skottowe had said, of the omissions from his paper, but he was asked to talk only for thirty minutes, and he found when he came to work on the subject that it might well occupy an oration of thirty hours. If, however, he had emphasized his point that there was a future for psychology as a study for medical men on biological lines, then the chief object of his paper had been achieved. He did not accept the President's view that because the mind was necessarily the instrument with which mind must be studied, therefore the study could not properly take place. He thought that a biological psychology might still be built up. An understanding of it, which still required a great deal of work before it was complete, would increase their armamentarium for their tasks as medical men. If they did not set about it he thought they would be entitled to the reproach which he heard from the lips of the first mental patient he ever saw. This was twelve years ago in a mental hospital. The patient was being demonstrated to a number of students, himself among them, by Dr. MacDonald, and he stood up before them and said, "Gentlemen, the art of medicine is the art of pouring drugs about which you know little into the human body, about which you know less". For their own purposes they had got a certain amount of material with which they could build up a biological psychology. If it was never complete, that was not their fault, but the more complete it was, the more they would find practical use for it in their work.

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## MIDLAND MENTAL PATHOLOGICAL SOCIETY.

The eighth meeting of the Midland Mental Pathological Society was held in the Anatomy Department of the University of Birmingham on Thursday, March 24. W. Grey Walter, Esq., M.A. (Research Fellow at the Central Pathological Laboratory of the London County Mental Hospitals), gave a lecture on "The Electro-Pathology of the Brain". He described in detail the apparatus employed and discussed the findings with the aid of a considerable number of illustrations. He also gave a practical demonstration on a case, in which rhythmic disturbances characteristic of epilepsy were well shown. The lecturer's able exposition made the simplicity of the apparatus and the ease of its application a pleasant surprise to the members, and the discussion which followed showed the interest that had been taken and the possible practical usefulness of the apparatus in mental hospitals. A vote of thanks to the lecturer was enthusiastically carried.

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## TENTH INTERNATIONAL MEDICAL CONGRESS FOR PSYCHOTHERAPY.

THIS Congress will be held at Balliol College, Oxford, from Friday, July 29, to Tuesday, August 2, 1938, under the presidency of Prof. C. G. Jung. The General Secretary is Dr. C. A. Meier (Zurich); Chairman of Organizing Committee, Dr. H. G. Baynes; Hon. Secretary, Dr. E. B. Strauss; Hon. Treasurer, Dr. H. C. Squires, C.M.G.; Business Secretary, M. H. Gibbs-Smith. Office (until July 28): 106, Brompton Road, London, S.W. 3. Telephone: Kensington 2433.

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