case of normal brains, as has been observed by others, but also in the pathological and atrophic brains. From Table I it will be seen that in the series of five normal and sixteen pathological brains examined, there is considerable variation in the amount of water not only in different brains but also, though to lesser extent, in different portions of the same brain. In the case of the pathological brains the amount of water is, in the majority of cases, greater than in the corresponding portions of the normal brains. This is most evident in the case of brains 19, 21, 33, and 37. In Table II are given the average percentages of water in the grey and the white matter of the different portions of the cerebral hemispheres of the brains in the two series. The pathological series shows the greater water content in both grey and white matter in all the portions. Further, the increase in the amount of water in the pathological series is greatest in the white matter of the frontal and occipital regions. The grey matter of these regions also shows a marked increase in water.

It was found that the more marked the degree of atrophy of the brain the greater was the amount of water in the brain tissue. The amount of water was always increased in brains which showed marked atheroma of the basal or other arteries.

(1) Read at a meeting of the Scottish Division of the Medico-Psychological Association of Great Britain and Ireland at Edinburgh on November 17th, 1916.

Clinical Notes and Cases.

Crime in Dementia Præcox.

By RALPH M. TOLEDO, Assistant Physician, Government Lunatic Asylum, Malta.

CRIMES connected with dementia paralytica and dementia of senility are relatively common, and many text-books speak of "medico-legal periods" in describing these diseases.

Having followed the progress of cases admitted in the Criminal Section of our asylum during the last few years, I desire to put on record several of these which serve to illustrate the relationship between "criminal acts" and those peculiar "psychical states," characterised by a rapid impoverishment of the entire mental life, which Kraepelin included under the name of "Dementia Præcox."

The "crimes" of violence in the cases under review were all

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committed in the "predemented stage" of the disease, very often under the influence of a "fleeting delusion," and the reasons alleged by the patients always "silly and changeable."

CASE 1.—Man, æt. 30, shot dead his wife at 3 p.m. in a crowded street. He tried to run away. He accused his wife of adultery, but failed to bring forward "proofs." During his period of detention he told the police that he "heard voices" gossiping about his late wife's character. The judges appointed experts to report on his mental state. He was declared insane and sent to our asylum.

His mental condition deteriorated rapidly, and he is now a dement with the characteristic signs and symptoms of the paranoid form of dementia præcox, and subject very often to impulses of a very dangerous character.

CASE 2.—Lad, æt. 20. Charged with having dangerously wounded with a knife a friend of his, as the latter had refused to return to him (for just reasons) a toy worth 1½*d*. The accused was examined by experts by order of the magistrate and declared insane.

The jury, curiously enough, found the prisoner "responsible," and the judge had to "convict him." After serving a year in prison he was released, but had to be certified insane six days after he left the prison, as he fiercely assaulted his mother.

He is a typical case of hebephrenic dementia, silly in his way of thinking and acting, and at times exhibiting impulses of a dangerous character.

CASE 3.—Man, æt. 30. Convicted for having wounded his wife. After a few months stay in prison he was sent to our asylum as insane. On admission he complained of hearing people at night gossiping about his wife's character, and of his inability to satisfy her sexual desires.

He is at present a typical case of præcox, fond of neologisms and stereotypies, and worried by auditory hallucinations.

CASE 4.—Man, æt. 29. Convicted in Alexandria, Egypt, for having wounded with a revolver an intimate friend. Certified insane after eight months' stay in gaol, and sent to the Malta Asylum. His mental condition rapidly deteriorated, and he is now a dement with characteristic catatonic attitudes. Has dangerous impulses.

The following two cases may serve to illustrate the changes of the moral faculties that very often precede the demented stage of the disease. They are both characterised by a sort of abnormal suggestibility on the part of the would-be dements.

CASE 1.—Lad, æt. 19. Labourer, of a very good character. Contracted quite unexpectedly a friendship with persons of suspicious character. Convicted soon after for circulating counterfeit coins manufactured by his new friends.

After a few months' stay in prison he commenced to complain of "impairment of vision" and to refuse to leave his cell, stating that he "was unable to walk alone."

Exhibited resistiveness and wetted his bed. He was at first looked

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upon as lazy and also as a malingerer. The examination of the patient by Dr. Xuerets, our Chief Physician, squared matters at once, and the "poor dement" was sent to us for care and treatment. He is now destructive, of wet habits, exhibits stereotypies, and at times impulses of a dangerous nature.

CASE 2.—Man, æt. 26. A mechanic, described as a good father and husband. Contracted friendship with a man notorious for his bad character. Convicted with him for frauds.

After a few months' stay in prison he changed his humour, complained very often of headache, and called the doctor several times, thinking that he was dying of "typhoid." Refused food, believing it was poisoned. He was transferred "under observation" to our asylum.

On admission he was hallucinated, passed sleepless nights hearing the voices of his wife and child, and answering "hostile voices" coming out from the walls of his cell.

He is now a dement, very dangerous, wet in his habits, troubled very often by "voices," and destructive of clothes.

Remarks.—The crimes in the cases quoted above should not, I think, be taken as the outcome of mere impulses.

Impulsive acts of a dangerous or harmless character form a prominent symptom in all the forms of dementia præcox.

They are, of course, unpremeditated, motiveless, and very seldom accompanied by signs of emotion. Their occasional appearance breaks, so to say, the monotony in the patient's stereotyped and much circumscribed life.

On the other hand, the "crimes" referred to by me in the first four cases cited seem to have been the ultimate result of a faulty process of reasoning, and there was in all a certain amount of premeditation.

In the latter two cases the offenders had exhibited such a degree of malice as to make the prison officers suspect that the prisoners were feigning insanity.

Part II.—Review.

Organic to Human: Psychological and Sociological. By HENRY MAUDSLEY, M.D. London: Macmillan & Co., Ltd. Price 12*s*.

When in years to come the progress of scientific thought in the nineteenth century has to be described, there should—and there probably will—be found an honourable position in the roll of fame for Dr. Maudsley. To many whose worship is given to false but specious gods, this may appear hyperbolical and fulsome eulogy. Time will show. At present we are still too devoted to mysticism and

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