in the hospital becomes an important deterrent so far as suicide is concerned. Many suicides have talked about it, or already made an abortive attempt. The dangerous hours appear to be between 5 and 7 a.m. The authors found the following essential features consistently present in their group of suicides: (1) Severe hypochondriacal and nihilistic ideas, with veiled death wishes in the trend; (2) insomnia—not the actual sleeplessness itself, but the apprehension and agony concerning its possible effects; (3) persistent belief in losing control of oneself, of "going insane" and analogous ideas; (4) sense of guilt with persistent belief and concern about punishment, especially by torture of one kind or another; (5) evidence of aggressiveness, as indicated by surly, impatient and irritable attitudes with assaultive tendencies. As danger-signs should be noted sudden improvement in a depressed, hopeless and perhaps deluded patient, and previous attempts.

G. W. T. H. FLEMING.

Eugenic Problems in Practical Psychiatry [Die eugenischen Aufgaben der praktischen Psychiatrie]. (Zeits. f. psych. Hyg., vol. vi, p. 97, 1933.) Roemer, H.

According to the author the duties of the eugenist are of three kinds: (1) To advise in eugenic matters and issue certificates; (2) to help in the eugenic education of the public; (3) to prosecute research on heredity.

In private practice, advice on the suitability of marriages is given with the help of doctors in mental hospitals. Germany has 49 "marriage advisory bureaus" (Eheberatungsstellen), 29 of which offer medical advice. Their advice covers matrimonial and sexual problems, and is not strictly confined to eugenic questions. With regard to education of the public, the author warns us not to stress the physical side too much, but to consider the moral importance of eugenics as well. Research in this direction is being carried out by means of keeping careful clinical records and co-operation with the genealogical department of the German Institute for Psychiatric Research in Munich.

S. L. Last.

Hereditary and Environmental Factors in the Causations of Dementia Præcox and Manic-depressive Psychoses. Chapter I: Family Stock of Manic-depressive Patients. (Psychiat. Quart., vol. viii, p. 76, Jan., 1934.) Pollock, H. M., Malzberg, B., and Fuller, R. G.

The authors investigated 155 cases of manic-depressive insanity in Utica State Hospital. Sixty were male and 95 female—the usual proportions. The occupational classification of the men corresponded with the economic status of the majority of the patients. $61^{\circ}3\%$ of the whole group were married, compared with $39^{\circ}7\%$ for all first admissions.

The statistical results, as regards the parents, etc., were not impressive. When, however, the siblings were considered, the results were of greater significance. There was a preponderance of mental disorders over that expected in a random sample. The female siblings have a relatively higher rate of mental disease than the males. The rate of incidence of manic-depressive psychoses among the relatives was considerably higher than the expected rate. The authors conclude that the sex element enters into the transmission of manic-depressive psychoses, although how it works is not understood.

G. W. T. H. Fleming.

The Family Constellation as a Predisposing Factor in Psychosis. (Psychiat. Quart., vol. viii, p. 121, Jan., 1934.) Katz, S. E.

From an examination of the histories of 194 successive admissions at the Hudson River State Hospital, the author concludes that (1) the size of the family does not appear to be correlated with the incidence of psychoses; (2) the order of birth of the siblings seems to bear no relation to the incidence of psychoses; (3) a preponderance of older sisters in the family is suggested as a predisposing factor in male dementia præcox.

G. W. T. H. Fleming.