

features. There is no form of alienation in which an intimate knowledge of the individual from the time of birth is of greater importance as an aid to diagnosis than dementia præcox.

It has been stated that we might expect to find the future patient rather dull in early youth. However, we frequently find the reverse to be the case. This fact, especially when there is also no serious taint in the antecedents, is thought to throw some doubt on the hereditary basis of the disease.

Recently a hypothesis has been promulgated concerning a possible toxic factor in the psychosis. As the disease is so closely associated with puberty, it was thought that some toxin originating in the testicle or ovary might produce these symptoms, after the analogy of the toxin of thyrodism. However, this is at present considered very doubtful.

General Symptomatology.

The prodromal symptoms usually extend over a period of years, during which time there is gradual mental decline. Attacks of migraine, particularly in girls, may precede or usher in the attack. Following this there is usually some mental depression.

One of the early and most important symptoms is the failure of voluntary attention. Jung, in his "Psychology of Dementia Præcox," says: "When the power of attention disappears, the perception of external objects, the perception of our own personality and judgment, the ideas of relationship, faith, and certitude disappear." From this lack of attention things in the environment are often not perceived at all; but, when perceived, they are usually understood. Consequently, these patients are well oriented in all three spheres—temporal, spacial, and personal—and show no evidence of clouding of consciousness. The attention is readily attracted, but it is only with the greatest difficulty that one can hold his continued interest. Sommer states that the patient places such an excessive value on his mental pictures that he can only with difficulty rid himself of them.