A brief general account of the disorders from which they suffered, of the auspices under which they came, and of what was done with or for them will give a fair idea of the immediate usefulness of the clinic to the community. The clinic is in no way exceptional in these respects, but is typical of the nearly two hundred that are in operation in the United States.*

*For the data regarding this clinic and its patients the writer is much indebted to Dr. W. W. Richardson, its psychiatrist, and Mrs. Morris S. Guth, the prime mover in its establishment in Erie, Penna.

II

The general types of disorder from which these patients were suffering, and their wide variety, are characteristic of those seen in almost all mental out-patient clinics, though the relative numbers of patients afflicted with each differ somewhat in different places.

In the hundred cases seen, twenty-two separate medical diagnoses were made, not including the category of "undiagnosed," under which heading seventeen patients were grouped. Twenty years ago, at the Boston Dispensary, Dr. Channing* reported 54 diagnoses in 372 patients, with 32 not diagnosed. Dr. Myerson† reported 106 diagnoses in addition to 55 "undiagnosed psychoses," 68 "deferred" diagnoses, and 303 with "no disease" in the 1577 patients that came to the Out-Patient Department of the Boston Psychopathic Hospital in 1919.

Of our hundred patients 47 were diagnosed as feeble-minded, 9 as mentally retarded, and 1 as a moral imbecile. This is a rather large proportion of defectives. There were a psychopathic child, a neurotic child, with aberrant tendencies, and three borderline cases. Nine frank psychoses were reported (an acute depression, 4 dementia praecox cases, a general paralytic and 3 syphilitic psychoses) and a probably symptomatic depression, one eccentric with mild mental symptoms, an old alcoholic with general nervousness and eccentricity, and a traumatic neurosis. There were two cases of chronic alcoholism and a drug addict. There was a case of cerebral lues, one with Meniere's syndrome, a spastic paralysis, and an old poliomyelitis. A neurological case not otherwise diagnosed completes the list.

The clinic is young and has treated only a small number of patients. There will unquestionably appear cases of other types of constitutional psychopathic states and psychoneuroses, other types of neurological cases, epileptics, and cases in which distinguishable disturbances of the functions of the endocrine glands and other bodily organs are found.

In considering these diagnoses it must be borne in mind that many are tentative and subject to change on further investigation or observa-

^{*}Channing, Walter, Dispensary Treatment of Mental Diseases. Amer. Jour. Ins., July, 1901. Myerson, Abraham, Out-Patient Psychiatry, Amer. Jour. Ins. July, 1920.