

to learn the patient's normal mental make up, and, second, to learn in what way the patient's present condition differs from the normal.

To ascertain the first it is necessary to go fully into the family and personal history of the patient. A clear running account is of the greatest value; in women the age of puberty and menstrual history should be carefully noted, because menstrual anomalies are often associated with the prodromal periods of certain of the psychoses.

The use of isolated descriptive terms such as : excited, depressed, noisy, violent, etc., should be carefully avoided—describe what happened—do not name it.

Patient's friends often conceal information from best possible motives; that this is an erroneous view should be explained to them, and no one is in a better position to do this than the family physician.

CONSANGUINITY.

One of the studies being taken up at Toronto Asylum at the present time is that of consanguinity.

The work will be greatly advanced if physicians filling in Forms of History will be careful to obtain all the facts possible regarding consanguinity. Negative evidence is just as valuable in the interests of true science as that of the positive order; in other words, accuracy should be aimed at.

The subject of consanguinity has never been thoroughly worked up and much information regarding it is necessary before its importance in relation to neurotic diseases is determined.