Loss of interest in his surroundings with marked introspection and depression.

Duration. Since about December 1st, 1906. In the family history there is nothing of special note.

Personal History. Was educated in a Church School in Birmingham, England, which he left at the age of 12. He then went into a merchant's office and did work of a clerical character, which he followed until he came to Canada in 1904. During this time he had an occasional nervous breakdown and his nervous system has never been robust. On first coming to Canada, he worked for a time on a farm, but later occupied a clerical position, and in the begining of December, 1906, he began to feel that he could not do his work satisfactorily. He was unable to concentrate his mind and felt that he was not doing his duty, although his employers had no complaint against him. This feeling has been becoming more pronounced since that time, and the patient gave up his position about the third week in January, 1907.

Habits. Has been a temperate man all his life. He has taken beer and tobacco in moderate quantities, but never to excess. No specific disease or excesses of any kind. Thinks he may have had the ordinary diseases of childhood, but cannot remember definitely. Was always a nervous child and even in childhood can remember not being able to sleep well. Except for an occasional nervous breakdown, he has been fairly well.

Present illness and condition. Since December 1st patient has not been able to sleep well and has felt unable to concentrate his mind on his work. He feels that he cannot do his work properly and this worries him. For a few weeks previous to giving up the work he has felt that he was not doing right to accept his salary. The fact that he cannot properly support his family weighs heavily on his mind, and he feels very despondent and cannot see any hope ahead. He does not think he can get better. There is constantly a "feeling of confusion" in his headso that he cannot settle down and plan out any proper line of action. He always feels that he is not doing what he should do and regrets that he has not done better in the past. His memory he does not think is as good as it was-thinks it has gradually been failing in the past few years. His appetite has been poor lately—at times he cannot eat at all but he has never suffered from any marked digestive disturbance that he knows of. He says that although very despondent at times, he has not thought seriously of suicide.

Physical Examination. Patient is a man apparently about 45 years of age. Height, 5 feet 9 inches. Weight, 125 pounds. Complexion, facial expression, decidedly dull and apathetic.