

good risks. If they had not improved, however, it would be highly improbable that their experience at the front would be anything but temporary. Although I have seen many cases showing neurotic tendencies who improved under training and became excellent soldiers, I have not seen one who failed to improve under training whose condition became better when he was actually in the firing line.

The next problem in connexion with prophylaxis has to do with lightening so far as possible the strain that is inevitable in trench warfare. It is of course an easy matter for the physician to say that the soldier must have frequent relief from duty and be given all possible distractions, and equally easy for the staff officers to reply that such coddling of the men is incompatible with the conduct of a campaign. Obviously this problem is at once both a military and a medical one. At the present time the line officers of the British Army are as acutely aware of the necessity for rest and distraction as are the physicians, and the reason for this is that they have discovered that no matter how much men may be forced and no matter how willing they may be to continue in the trenches they nevertheless become inefficient when subjected to more than a certain amount of fatigue. If at all feasible, a system of relief should be worked out in conference between psychiatrists and the staff. If also practicable, a certain laxity in the arrangements should be left whereby psychiatrists might be allowed the privilege of removing certain men from trenches earlier than they would their fellows. If possible, this would be of great military advantage, as the history of many patients shows that when they have an opportunity to rest they quickly recover from the premonitory symptoms of a war neurosis and return to fight again quite competently. Once the disease has progressed beyond a certain point, however, there seems to be no return except after a long period of treatment. The best criterion I have been able to discover for permanence of symptoms is the presence of repeated nightmares of actual fighting. I was not able to find a single patient who had once shown these symptoms and subsequently improved without regular and protracted treatment. These remarks refer of course