

even the same shape of letters in a word, can have two (or more) entirely separated and different meanings. Most children grasp this spontaneously, but some do not, and the various meanings they hear attached to the sound or shape run together into a blurred confusion which makes it impossible for them either to recognize when printed, or to reproduce in writing, that word or phrase.

Considering how serious an effect this disability, if it persists, can have upon a child's practical future, it might be well worth while to set afoot some research on this point. Research in this case should be directed not so much to investigation of the efficacy of remedial teaching as towards study of the imagery of these children. If a child's imagery is very vivid and concrete, and his interest in the benefits of understanding abstractions is not aroused, my experience goes to show that a certain number of these children do not emerge spontaneously from this stage to develop a capacity for abstract thought; instead they become increasingly hopeless about their failure to grasp what is so obvious to their neighbours, and the help given them in remedial teaching, by its further emphasis upon abstract thinking, only increases their confusion.

Opportunity to express their ideas in concrete material can both give the observer information about the processes going on in the children's heads and give the children a possibility of sorting out their ideas without the, to them, puzzling intervention of abstract symbols. In my experience, when the confusion and hopelessness are lessened, appreciation of the meaning and use of symbols begins to dawn upon the children, and, if at this point good remedial teaching is given, in many cases normal reading and writing can follow.—I am, etc.,

London, W.11.

MARGARET LOWENFELD.

Meyer and Bleuler

SIR,—While fully supporting your reviewer's opinion (January 5, p. 32) that the translation of the late Eugen Bleuler's book *Dementia Praecox or the Group of Schizophrenias* is of great importance, I think he is mistaken in inferring that the late Adolf Meyer's conception of "reaction types" was in any way antithetical to the "pluri-dimensional" approach which developed in Europe on the basis of Bleuler's work.

From the early years of this century Meyer put Bleuler's views before American psychiatrists. In 1906 and 1908 Meyer put forward descriptions of a number of mental "reaction types" rather than "diagnoses," and at the same time wrote that every such abnormality had "its intrapsychic components (somatic disorders or disorders of special organs, including nutritional and histological disturbance of the nervous system) and components which are fully sized up only with psychological conceptions, either overt or substitutive." Meyer attracted Bleuler to read a paper to the opening of the Henry Phipps Psychiatric Clinic in 1913. There teaching from its opening was directed to the question, How much and what is structural, functional, somatic, metabolic, neurogenic, constitutional, psychogenic, social, etc., in any reaction? In tracing the evolution of the dementia praecox concept at the 1925 meeting of the Association of Research in Nervous and Mental Disease, Meyer stated that in his belief "the line of progress would lie in following the pluri-dimensional character of the facts involved." In the textbooks of his pupils the Meyerian attitude to diagnosis is summed up thus (Muncie, 1939): "The diagnostic formulation stresses factual statements of actual overt and implicit performance as action and reaction pointing out the principal and incidental disorders and how they have come about in a genetic-dynamic fashion . . . the formulations of empirical reaction sets of various sorts which are in no way mutually exclusive."—(Kanner, 1935): "Psychiatric diagnosis is a synthetic procedure and differs from non-psychiatric diagnosis by the virtue of the greater complexity and manifoldness of psychiatric symptoms . . . psychiatric diagnosis is a reformulation of the complaint on the basis of the available data . . . taking in the whole situation with its genetic-dynamic aspects, and speaks of the person rather than of his disease." Bleuler and his followers on the Continent were certainly dynamically and pluralistically oriented, but Meyer and all those he stimulated in America and elsewhere were also.

I think it is worth while mentioning these facts, as soon Meyer's collected works will be on the bookstalls for the

first time and it is to be hoped that they will be very widely read by young psychiatrists.—I am, etc.,

London, S.W.7.

W. CLIFFORD M. SCOTT.

Hypnosis and Asthma

SIR,—I would like to comment on the reply in "Any Questions?" (January 19, p. 173). The questioner asked, "Is there any evidence that hypnotic treatment can benefit sufferers from chronic asthma? What might be its danger, particularly with children?"

As I have been using hypnosis as a form of psychotherapy for bronchial asthma for several years, my own answer to part one of the question is strongly in the affirmative. In answer to the second part the reply given was, "The child may develop a habit of having anaesthesia, disturbance of memory, or tetany which may continue in the waking state." In a long experience dealing with many children I have never seen this happen. Children are good subjects for hypnosis and the results are excellent. In time this will be the method of choice in the treatment of this psychosomatic symptom.—I am, etc.,

London, W.1.

A. P. MAGONET.

SIR,—You have been kind enough to publish letters from me in the past (*Supplement*, March 12, 1949, p. 142; *Journal*, August 25, 1951, p. 497) dealing with the controversial subject of hypnosis.

Now that hypnotherapy has been accepted by the B.M.A. as a recognized medical procedure and semi-positive steps in the right direction have taken place to prevent the technique of hypnosis from being displayed on stage, film, and television, it seems absurd that the issue is still raging in the Press, radio, and television. I venture to suggest, and humbly of course, that had the medical authorities taken a more positive stand several months ago, and when stage hypnotism was obviously getting out of hand, the issue would now be clear cut and any legislation contemplated would have been easier to achieve. I would also suggest that even at this late hour, if a really positive attitude is taken by the profession itself, stage hypnosis, which is so obviously dangerous, degrading, and lowering to a recognized therapy used by many physicians, surgeons, and psychiatrists, would cease.

It is, of course, the medical profession which is largely to blame for this state of affairs. I have spoken to lay people who are appalled at the lack of interest displayed by the profession to the abuse of hypnosis by unqualified persons. It is not good enough to dismiss the subject by saying, "It's not important enough." It is important enough, as witness the constant barrage of rubbish written by, and to, the popular press on this subject. The public should be guided by a strong and understanding profession and not led by stage hypnotists and the Press to a knowledge of the subject.—I am, etc.,

London, N.15.

GORDON AMBROSE.

Are Neurotic Symptoms Imagined?

SIR,—Your leading article entitled "The Bottle of Medicine" (January 19, p. 149) was interesting and pertinent. But surely to describe symptoms as either "real" or "imagined" betrays a lack of understanding of modern psychiatric thought. No matter how convenient these terms may be, they should have no place in a serious discussion of neurosis. Can symptoms ever be unreal, outside frank malingering? The neurotic will not thank you for telling him that his pain, weakness, paraesthesiae and fears are unreal, and in fact he is liable to contradict you loudly by demonstrating his "imaginary" flatulence, breathlessness, or diarrhoea in unmistakable fashion.

One has often felt that some at least of the patients seen at psychiatric out-patient departments would be better treated by the general practitioner, as attendance at hospital seems to confirm them in illnesses which otherwise might