

definition. The practical point to be determined with regard to a person whose sanity was in question owing to anti-social conduct, was whether such conduct was the result of mental disorder. That was to proceed beyond the mere consideration of the person's conduct. Histories showed that patients fell into certain mental attitudes which tended to result in certain types of conduct. For a long time patients struggled against the logical outcome of their mental condition. He believed that a considerable time before a patient would admit it in words, and long before he committed any antisocial act, he was subject to a definite mental attitude, and it was the duty of the physician, by watching small indications, to detect this tendency and seek to obviate the impending evil by suitable treatment. The alienist did not focus his attention and his decision on the saying of a wrong word or the doing of a little wrong thing, but studied the patient as a whole. The feature on which Dr. Mercier had insisted was only one of the criteria; it was not the whole matter.

Dr. MERCIER promised to send a full reply to the association's journal.

Reviews.

WAR NEUROLOGY.

Oorlogsneurologie (War Neurology),¹ by T. VAN SCHELVEN, is a summary in five chapters of much of the recently published neurological experiences of German and French military doctors. From the chapters on injuries of the peripheral nerves, spinal cord, and brain, we are left with the impression that in Germany not much advance has been made in treatment, and but little in diagnosis, in spite of the large amount of material which the war has provided. It is stated that the variety of injuries of the peripheral nerves has been extraordinarily great, and that there is much risk of nerve injury being overlooked unless definitely sought for. Nerve injuries may be followed by nutritional disturbances (muscle degeneration, decalcification of bone, etc.), and by functional disturbances (vasomotor upsets and irregular action of sweat glands). These effects are more frequent and pronounced when a nerve is caught in scar tissue, and conduction is incompletely interrupted, than when it is completely divided. "In other words, trophic and vasomotor disturbances are rather signs of nerve irritation than of nerve paralysis." Accordingly, excision of the strangled part of the nerve and union of the divided ends might be followed in a few days by the disappearance of pain and of trophic and vasomotor symptoms. Complete recovery after suture may take eighteen months in the case of the sciatic nerve. The author holds that if a nerve is incompletely divided, the healthy nerve fibres must not be touched, and that suture is, therefore, out of the question, since it might "sacrifice" the sound fibres. Operation for freeing the nerve from compression gave good results. On the other hand, in more than 10 per cent. of cases nerve suture was not followed by regeneration. Clinical examination alone can determine whether operation is necessary. The nerve may be recovering spontaneously, though there is no indication of this. The difficulties of diagnosis are discussed at length. Of injuries of the spinal cord it is said that they remain as formidable as ever. Expert examination, even with the aid of radiography and lumbar puncture, often left it doubtful whether the condition was concussion, compression, or complete division of the cord. Therefore some surgeons performed exploratory laminectomy at once, risking sepsis; others waited three to four days or eight to ten weeks, risking permanent damage from removable compression. The worst complication is urinary decomposition, best avoided by sterile catheterization thrice daily, and the exhibition of hexamine. As a shot which grazes the surface of the skull may splinter the internal bony surface so as to tear the dura mater or penetrate the brain, an apparently trivial wound may have a disastrous effect, and in war practice trephining for slight grazes of the external table must be the rule. Different operations for the

¹ *Oorlogsneurologie: Ervaringen over Verwondingen van het Zenuwgestel en over Neurosen.* Door T. van Schelven. Amsterdam: Scheltema and Holkema's Boekhandel. (Pp. 164.)

removal of a foreign body from the brain are described, and it is asserted that after trephining the patient must wait at least fourteen days before being moved, or he will die. Results are unsatisfactory—cures are "surgical, not functional."

In the last chapter the possible effects, mechanical and psychical, on the nervous system of explosions which cause no visible external injury to the patient are discussed.

THE PREVENTION OF FUTURE WARS.

The settlement of personal disputes by force of arms is gradually giving place to more rational means, but national quarrels are still determined by methods of barbarism scientifically applied. Under modern conditions the loss, even to the victors, would seem to outweigh the gain. To seek for some system by which such a catastrophe may in future be averted is a task worthy of the best efforts of practical men of all shades of opinion and of all nationalities.

The formation of the American League to Enforce Peace has been followed by the establishment in this country of the League of Nations Society, the first meeting of which was held in Westminster, under the presidency of Viscount Bryce, last May. Simultaneously a series of *Proposals for the Prevention of Future Wars*² has been published, to which Lord BRYCE and many other leaders of thought have contributed; the object is to start certain fundamental principles as a basis of discussion.

Briefly, it may be said that the first essential is the formation of a healthy public opinion throughout all civilized countries. An international agreement between all or most of the Powers of both hemispheres might through moral and economic forces lead to the establishment of arbitration. The anger of nations, like that of individuals, is apt to be cooled by delay. The establishment of an international moratorium would give time for anger to subside and for a better understanding on all hands of the points at issue.

The scheme, as outlined by Lord Bryce, is a further development of that of the Hague Conference, but tends towards definite action whereby the public opinion of the combined States could be enforced by other means than those of warfare. The time is not yet ripe for action. The difficulties of organization are many and call for the best thoughts of practical minds from every quarter of the globe.

NOTES ON BOOKS.

THOSE—and they must be many—who, while recognizing the value of the central aim of Pacifism,³ are impatient of the blindness of its typical adherents to awkward facts, may be recommended to study Dr. NORDENTOFF'S attempt to outline a practical programme for the gradual supersession of the appeal to force as a means of settling international disputes, as well as for the systematic study of the economic and other causes of war, with a view to their ultimate removal. No sane man will quarrel with Dr. Nordentoff's brand of pacifism, seeing that in the closing sentence of his book he frankly admits that "a just decision through war is to be preferred to an unjust decision through peace."

Dr. W. M. BARTON has brought together a quantity of useful information in his little book on the testing of vital functions.⁴ It contains readable summaries of the various clinical and laboratory methods that have been devised for testing the functional integrity of such organs as the liver, kidney, pancreas, heart, and the chief ductless glands. Naturally, such a book must partake of the nature of a compilation; the literature dealing with such tests as these has become very extensive during the last two decades, and Dr. Barton has made excellent use of much of it. He also gives in most cases some indication of the value that is to be attached to the results of the tests he describes, for which clinicians will be grateful.

² *Proposals for the Prevention of Future Wars.* By Viscount Bryce and others. London: George Allen and Unwin, Ltd. 1917. (Demy 8vo, pp. 53. 1s. net.)

³ *Practical Pacifism and its Adversaries.* By Severin Nordentoff. With an Introduction by G. K. Chesterton. London: George Allen and Unwin, Ltd. 1917. (Cr. 8vo, pp. 219. 4s. 6d. net.)

⁴ *Manual of Vital Function Testing Methods and Their Interpretation.* By W. M. Barton, M.D. Boston: R. J. Badger; Toronto: The Copp Clark Company, Ltd. 1916. (Cr. 8vo, pp. 255; 1 figure. 1.50 dollars net.)