

OBSERVATIONS ON
PARANOIA, PARANOID DEMENTIA PRAECOX, and PARANOID
CONDITIONS OCCURRING IN EUROPEANS and NATIVES in
SOUTH AFRICA.

A THESIS

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OBSERVATIONS ON
PARANOIA, PARANOID DEMENTIA PRAECOX, and PARANOID
CONDITIONS occurring in EUROPEANS and NATIVES in
SOUTH AFRICA.

DELIMITATION. The classification followed is that in use throughout the Mental Hospitals in South Africa (adapted from that of the American Medico-psychological Association) (Appendix 1).

Paranoia. is essentially the Paranoia of Kraepelin and it is diagnosed in cases which "show development of the peculiar connected delusion formation, the excellent preservation of intelligence as well as order in the train of thought, in conduct and in activity". The delusional system is inaccessible to ordinary reasonable argument and true hallucinations do not occur.

Paranoid Dementia Praecox is the Paranoid Dementia Gravis of ^{2/}Kraepelin and it is diagnosed in cases which "begin with simple delusions, in the further course, however, exhibit always more distinctly the peculiar disintegration of the psychic life and in especial also the emotional and volitional disorders in the form characteristic of Dementia Praecox". The delusions very irrelevantly and fantastically; conduct is conspicuously disordered and hallucinations are common.

Paranoid Conditions

provides a group for intermediate states and in it are placed cases which show systematized delusions with some slight disintegration of intelligence and conduct less in accord with the Dementia Praecox manifestations - hallucinations are a usual feature of this group. Some cases described by Kraculin in the groups Paraphrenia, and Dementia Paranoides Mitis² are here included. Care has been taken to exclude cases of Psychopathic Personality and Psychoses of Degeneracy. In Psychopathic Personality the excluding phenomena are the emotional instability, the discontented mood, the vagueness and absence of elaboration of the delusions. The Psychoses of Degeneracy (as described by Birnbaum and quoted by³ Glueck) are readily excluded by attention to the short life of even well systematized delusions and the readiness by which they are influenced by extraneous circumstances.

INCIDENCE.

In a series of 372 European admissions at the Mental Hospital, Bloemfontein	}	10 cases of Paranoia 44 cases of Paranoid Dementia Praecox 9 cases of Paranoic conditions.
In a series of 660 Native admissions at the Mental Hospital. Bloemfontein	}	No cases of Paranoia 29 cases of Paranoid Dementia Praecox 5 cases of Paranoic condition.

(Admissions with diagnoses of mental defect have not been included in the series)

Paranoia accounts for 2.69 % of all European Psychoses

Paranoid Dementia Praecox	"	"	11.83 %	"	"	"	"
Paranoic condition	"	"	2.42 %	"	"	"	"

Paranoia accounts for 0 % of all Native Psychoses

Paranoid Dementia Praecox	"	"	4.39 %	"	"	"	"
Paranoic Condition	"	"	.76 %	"	"	"	"

(In 372 European admissions 136 cases of Dementia Praecox (all forms) or 36.53%)
 (In 660 Native " 361 cases of Dementia Praecox (all forms) or 54.70%)

SEX DISTRIBUTION

Paranoia (Europeans)	women	2 cases		
	men	8 "		
Paranoic Conditions (Europeans)	women	2 cases	(Natives)	women 2 cases
	men	7 "		men 3 "
Paranoid Dementia Praecox	women	12 "	"	women 3 "
	men	32 "	"	men 23 "

NOTES ON THE INVESTIGATION OF THE CASES AND DIFFICULTIES
WHICH HAVE ARISEN.

Physical The MARITAL STATE and REPRODUCTIVE HISTORY is given in all cases except in Male Natives where information is frequently unreliable.

Noting the POORLY NOURISHED CONDITION in many Paranoid disorders, the height and weight have been given in each case and a note added where poor eating or lack of sleep could be attributed directly to hallucinations and delusions.

Various symptoms, in isolated cases suggesting ABNORMAL FUNCTION OF THE ENDOCRINE GLANDS AND OF THE VEGETATIVE NERVOUS SYSTEM led to an attempt to discover the Endocrine Type ^W (Crichton Miller) of these patients, and an attempt to identify in them a predominance of one or other division of the vegetative nervous system ^S (Eppinger & Hess). The more intricate means to this end, had to be abandoned as too great a proportion of the patients were suspicious of and resistive towards administration of adrenalin (Goetsch reaction), Harrowers Thyroid function test etc. It must be pointed ^{out} in this connection that the usual suspicious attitude of these Paranoid patients is reinforced in South Africa by the prevalence of ideas of witchcraft which still persist to an extraordinary degree among Boers and Natives, and any slightly unusual procedure in clinical examination arouses a remarkable degree of resistance. The average pulse rate and blood pressure have been recorded,

however, along with any obvious manifestations of disturbance of the vegetative nervous system.

PHYSICAL DISEASE has been noted where it occurs.

Mental

Description of CONDUCT is based on the report of nursing staff and personal observation.

CONVERSATION ON EXTRANEIOUS MATTERS deals with items of local, political, literary and sporting interest .

It was intended to ESTIMATE THE INTELLIGENCE of the patients according to one or other of the usual scales, and some of the cases were accordingly tested by the Porteus maze tests and by Moll's modification of the Knox cube tests (Appendix 2) These were used in preference to any of the Binet Simon modifications, as they provided a fairer basis of comparison between Natives and Europeans.

Application of the Porteus tests had to be discontinued among the natives owing to difficulties with the pencil, few of the patients having learned to write.

One European patient by loud and voluble disapproval, spoiled the application of the cube tests in one whole ward, and the test was further discredited by some poor results irreconcilable with the patients' apparent standard of intelligence. It was concluded that the test was too fatiguing on the attention to be fair. It was decided then to make a rough estimate of the more obvious mental processes, based on the clinical records of the cases, the reports of the nursing staff, and the impression given in several apparently

casual conversations which were really calculated to test these processes.

The results naturally are comparative, and to avoid confusion, are given in 3 denominations only, "good", "fair", and "poor". Judgment, however, called for further description, and has at times been given a third denomination, "impaired for delusional field" -- in these instances it is to be presumed, that when it was possible to avoid the delusional field, sound judgment was found. In some cases the assessment of judgment was aided by use of the point scale test Nos. 12, 15 and 18 - (Yerkes, Bridges, Hardwick).

Insight in each case refers to the patient's own morbid condition.

Heredity records are unreliable as the great majority of the patients, both European and Native, have been admitted from a distance and there has been no means of checking the patients' statements.

Abbreviated reports of investigated cases will be found on page 19 et seq.

INFORMATION OBTAINED

FROM TABLES OF INCIDENCE AND CLINICAL REPORTS.

1. The incidence of Paranoia among Europeans in South Africa appears unusually high. Figures for comparison are scarce, probably as a result of vague delimitation. Kraepelin's cases number less than 1% of his admissions.
2. Paranoia appears to be unknown among Natives. This has been

commented upon by ²J.T. Dunston in the discussion of Native mentality.

3. The incidence of the Paranoid form of Dementia Praecox in Europeans in South Africa is not remarkable.
4. The incidence of the Paranoid form of Dementia Praecox is low in Natives, while that of the other forms is high.
5. Paranoid Condition is rare in Natives.
6. The distribution of disorders between the sexes shows the usual preponderance of males.
7. The conjugal state and reproductive history in the cases of Paranoia do not indicate a tendency to failure of reproductive power ; but such a tendency is indicated in the Paranoid Dementia Praecox group - ⁸(Mott- Reproductive Organs in Mental Disorders) There is no demonstrable tendency in the Paranoid Conditions.
8. Six out of ten cases of Paranoia, show poor nutrition to a marked degree, two to a slight degree, two show normal height-weight ratio. (Table of comparison is that of ⁹Huthison & Rainy) (Appendix 3).

In one case only, the Psychosis influenced appetite and sleep. The ten cases show a slight increase above normal in pulse rate, with blood pressures approaching the normal for the respective ages ; in one case in which there is arteriosclerosis the blood pressure is high.

Health is good in three cases, fair in four and poor in three. Prominent eyeballs occur four times. Enlarged Thyroid Gland, blepharitis, arteriosclerosis occur in one case each.

Mitral disease occurs in two cases.

Unsteadiness of gaze as recorded by ¹⁰Stoddart, is not observed. Neither of the women in the group showed menstrual or obstetric abnormalities. Stigmata of degeneration were not observed.

9. Fifteen out of twenty two cases of Paranoid Dementia Praecox show poor nutrition in greater or less degree, but in the majority of these cases, hallucinations and delusions could be shown to affect sleep and appetite.

The pulse rate shows many variations from the normal in both directions. In sixteen cases blood pressure is abnormally low (this accords with the findings of ¹¹Kott).

In three cases it approximated to normal, in two it was high. Health is good in eleven cases, fair in nine and poor in two. Prominent eyeballs do not occur.

Osteomyelitis, unaccountable pyrexia, arterio-sclerosis and cardiac dilatation occur in one case each.

Five out of nine women show menstrual or obstetric abnormalities.

10. Six out of eight cases of Paranoid condition show poor nutrition in greater or less degree, in two of these hallucinations or delusions could be held responsible. All pulse rates show abnormally low blood pressure, the remaining four approximate to normal. Health is good in five cases, fair in two and poor in one. No diseases are noted. In one of the four women there is menstrual and obstetric abnormality.

In one case there is prominence of eyeballs with markedly

hairy ears.

11.

In nine cases of Paranoia, the onset of the Psychosis was insidious, one in the second, three in the third, four in the fourth, and one in the fifth decade ; mode of onset is unknown in the tenth case. In nine cases the delusional system has shown much elaboration. All cases show delusions of persecution, and in five there co-exist delusions of grandeur. In three cases the persecutors are of different sex from the patient. Hallucinations do not occur. Conduct is invariably orderly when not activated expressly by the delusions, i.e., all these patients, realising the limitations of institution life, to a certain extent, make the "best of a bad job", and find regular occupation for themselves. Conversation outside the delusional field is invariably rational and of good quality. Beyond failure of judgment for the delusional field and for that field only (noted, ofcourse, in every case) there is no deterioration of intelligence, although the duration is usually more than ten years. Mood is variable and in accordance with the delusional system, and undue intensity of emotion is not observed.

12.

In thirteen out of twenty two cases of Paranoid Dementia Praecox the onset was insidious, in three sudden, in six unknown. The majority of cases began in the third decade. The delusions are varying, vague, and fantastic and show no elaboration. Hallucinations are very common. Disorderly conduct/^{is} also common and tends chiefly towards listlessness, three only working, ten failing entirely to occupy

themselves. Five behave foolishly and shew mannerisms.

Conversation is good only in two cases.

In all cases there is deterioration of intelligence, attention and comprehension being most frequently disturbed. Increased suggestibility is noted in four cases. Emotional apathy or irascibility is shewn by the majority of the patients.

Homosexual tendencies appear in one case.

13. In six of the eight cases of Paranoid Condition onset of the Psychosis was insidious, occurring equally in the third and fourth decade, in two cases the type of onset is unknown. In four of the cases there is elaboration of the delusional system. In six of the cases hallucinations are elicited, in the remaining two suspected. Four of the cases shew tendency to listless behaviour and only two occupy themselves consistently. Conversation in six cases is good, in one there is undue loquacity, and in one there is difficulty of language. Deterioration is not marked in attention, comprehension or memory; judgment is poor as a rule in and outside the delusional field. Suggestibility is not increased. It is noteworthy that deterioration is best marked in the long standing cases. Emotional apathy is noted in two cases, irascibility or elation in five and in one case mood is unremarkable.

CONCEPTIONS OF THE NATURE AND CAUSES OF PARANOIA IN THE
LIGHT OF THIS INVESTIGATION.

Only the views of those Psychiatrists whose delimitation of the Psychosis approximates to that considered here can profitably be discussed.

✓ KRAEPELIN appears to believe the psychosis depends upon insufficiency of intellectual functioning in consequence of partial development inhibitions, resting on heightened self-consciousness. He fails to suggest a reason for the heightened self-consciousness, and lays stress on the importance of "undeveloped" thinking, to which he attributes the failure to criticise the childlike reactions to visionary frustrations. It is difficult to assess his estimate of the part played by emotions.

This view would suggest the frequent appearance of this psychosis in an immature people brought into contact with delimitations of European civilisation. The psychosis, however, fails to occur in South African Natives, and this fact appears as admissible evidence against the influence of undeveloped thinking in producing the psychosis.

(The childlike mentality of the Native is attested by J. F. Dunston who says "They display a little foresight, worry little about the future, and learn very little by experience in the larger sense --- they are oriented in time in the vaguest way --- they have never had a written language. Their art is of the crudest.")

The heightened self-consciousness is difficult to detect and was not evident in the cases in this series outside the delusional field, and the appearance of grandiose delusions in only five of the ten patients appears to discount the influence of this factor.

¹² FREUD thinks the condition closely allied to Dementia Praecox and due invariably to repressed homosexual tendencies.

The repression varies from that in hysteria and the obsessional neuroses by being projected instead of being converted or substituted. He fails to make clear what factors determine the fate of the depressions; the date of fixation in this connection seems unconvincing and inadequate.

Though the Paranoid Conditions of this series suggest a link between Paranoia and the Paranoid Dementia Praecox, close investigation reveals a nearer approximation to Dementia Praecox in most of the cases. The blood pressure in half the cases is low, as in Dementia Praecox, and the *general* health is better than in the cases of Paranoia. Peculiarities of conduct are abundant and deterioration of intelligence is demonstrable in many instances and the whole group can reasonably be regarded as mild or early Dementia Praecox. Further, a comparison of advanced cases of Paranoia and of Paranoid Dementia Praecox (where the durations are comparable) presents the widest possible divergence in the clinical pictures. This series of cases then, supports the view that the two psychoses are entirely different entities with only superficial similarities.

The persecutors in this series are of both the same and opposite sexes and by this criterion no wholesale charge of homosexuality can be made. Practice of homosexuality is not observed. Freud's view of the psychosis is notably supported by ¹²Stoddart, but his explanations, though serving to elucidate Freud's description, fail in adequacy at precisely similar points.

¹³BIANCHI assumes that Paranoia depends on excess of the primary emotions, suspicion, vanity, pride and fear, which come to dominate the personality in a rigorously logical fashion. The existence of the excess is accounted for only by vague invocation of inherited disposition, and the reason for its production of Paranoia rather than of obsessional neuroses is not given. The possibility that such an excess would be likely to produce a psychopathic personality or hysterical manifestations rather than Paranoia is not considered. In this series emotional intensity is not a feature, but it is of course allowed that it may have been so at an early date in the psychosis.

¹⁴WHITE favours the view that Dementia Praecox and Paranoia may be regarded as the two extremes of one process; for him the impairment of judgment is tantamount to impairment of intellect. An attempt has been made above to differentiate between the two conditions. The attention given to judgment in this investigation, emphasizes that where it is possible to avoid the delusional field judgment is not impaired.

¹⁵ de FURSAC professes a "morbid germ" theory which he does not elaborate.

¹⁶ JUNG while pressing the claims of careful psychological investigation admits a definite doubt as to the exclusively functional nature of Paranoia.

SERIEUX, CAPGRAS, MAGNAN, KRAFT EBING, PERCY SMITH, CRAIG and others complicate the delimitation by introducing numerous varieties "the early, late, hallucinatory, persecutory, expansive, querulous, litigious, acquired, original, eccentric, egocentric, les folies raisonnantes, the délire d'interprétation, the délire de revendication" and so on almost ad infinitum.

Kraepelin's delimitation admits most of these conditions without unnecessary clouding of the essential nature of the psychosis.

¹⁷ HART'S cleanly cut and neatly explained states of dissociation cannot and were probably not intended to cover this complicated psychosis.

TREATMENT AND ITS LIMITATIONS.

No treatment has been carried out in these cases.

Physical symptoms have been dealt with where possible, by the usual methods.

Intractability is universally admitted, but it is also well agreed that detention in an institution is not indicated in most cases, and is resorted to, chiefly in the public interest .

This intractability is specially disappointing in the hands of Freud and Jung. Their failure and Kraepelin's in this

matter of treatment and the inadequacy of their respective causal conceptions amounts to a declaration of the limitations of the psychological investigation of Paranoia.

SUGGESTIONS BROUGHT FORWARD BY THIS INVESTIGATION.

Allowing for the exaggerations or "bias" of the different enthusiasms, the psychological interpretations of the condition become inadequate at the same point, and it is difficult to see why the phenomena invoked as causing Paranoia should not have caused the functional disorders, hysteria, obsessional neuroses or ordinary psychopathic inferiorities.

Undeveloped thinking, the most acceptable of the hypotheses has been to a great extent discredited by the investigation. It is submitted that this investigation suggests a physical basis for the determination of the development of the psychological manifestations of Paranoia.

¹¹ MOTT has shown physical causes for mental disorders are not necessarily to be looked for in the brain, and the high incidence of physical abnormality and disease in these cases of Paranoia suggest a physical rather than a psychic insufficiency.

It has been shown that Paranoid Dementia Praecox presents a different physical picture, poor nutrition in these cases being less marked and more readily accounted for by behaviour.

⁵ Neither vagotonia or sympatheticotonia are demonstrated, but, the failure of a very high proportion of the cases of Paranoia to enjoy robust health, the poor nutrition,

the tendency to dry sallow skin with much lined faces, the frequent occurrence of protruding eyeballs, and the prevalence of disease suggest disturbance of the vegetative nervous system.

The idea does not seem so fantastic when it is noted that deficiency of one internal secretion alone (parathyroid) is made responsible, by as competent authorities as ¹⁹Grove and Vines, for failure to combat many varied chronic physical diseases.

Reassurance that the slenderness of the evidence with the absence of accurate scientific investigation, is not wholly impertinent, is taken from ^WOrichton Miller's assertion that progress in this field must be necessarily slow and unsupported by scientific demonstrations, but it is to be achieved by "individual observation of psychic and endocrine factors and the criticism and comparison of hypothetical conclusions that can be drawn".

SUMMARY.

1. Paranoid conditions may be regarded as mild or early cases of Paranoid Dementia Praecox.
2. Paranoid Dementia Praecox approximates more closely to Dementia Praecox in other forms than to Paranoia.
3. The Kraepelin grouping of Paranoia apart from Paranoid Dementia Praecox finds additional confirmation in this investigation.
4. The psychogenic ^{views} of Paranoia's development as at present postulated are inadequate.

SUMMARY (Contd.)

- 5. The most acceptable hypothesis (that Paranoia is based on undeveloped thinking) is discredited by this investigation.
- 6. Physical insufficiency is as easily demonstrable in Paranoia as psychic insufficiency.
- 7. Demonstrations of the correlation between the mental manifestations and loss of endocrine balance or interference with sympathetic control, in the condition, may be expected in the future



It may be added in parenthesis, since no figures can be found to support the contention, that disorders of endocrine and sympathetic function are rare in natives.

The writer has not seen or heard of in natives, cases of acromegaly, Cretinism, myxoedema, Grave's disease or diabetes.



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ABBREVIATED REPORTS OF INVESTIGATED CASESPARANOIA

Male European 363

Married - no children - age 45 years - height 5 ft 2 ins. - weight 140 lbs - average pulse rate 90 - blood pressure 130 - prominent eye-balls - sallow complexion - bodily health fairly good - onset of psychosis insidious at approximate age 20 to 25 years - Governor General's Decision patient - crime, assault with intent to murder - believes himself dismissed from the Civil Service through the animosity of Lord Gladstone and some women who masqueraded as judges. Since admission over 20 years ago has elaborated his ideas of persecution to include most members of the staff and many fellow patients - frequently complains to highly placed officials - he is quiet, self-absorbed and difficult of access - occupies himself well chiefly in reading and writing - can converse intelligently on extraneous matters. Orientation correct, attention, comprehension and memory good - judgment sound where delusional field can be avoided - no increase of suggestibility - no insight - heredity negative.

Male European 374.

Age 60 - widower - one child - height 5 ft. 10 ins. - weight 170 lbs. - pulse rate 110 - blood pressure 170 - bodily health good - Governor General's Decision patient - crime, murder - onset of psychosis insidious at approximate age 50 to 53 - he admits crime and believes it justifiable because his victim was in league with the devil against him.

(patient) - believes he is in hospital as the agent of the King and the Governor General - has become suspicious of staff and fellow patients whom he alleges to be jealous of him - occupies himself well in workshops and in leisure reads - can converse intelligently on extraneous matters - orientation correct - attention, comprehension and memory good - judgment impaired, delusional influence being all-pervading - no increase of suggestibility - no insight - heredity unknown.

Male European 293.

Age 53 - Single - height 5 ft. 1 in. - weight 120 lbs. - average pulse rate 96 - blood pressure 130 - suffers from blepharitis, otherwise bodily health fairly good - is almost entirely bald - eye-balls prominent - character of onset of psychosis doubtful - Governor General's decision case - crime, rape - patient admits intercourse but maintains consent was given and considers the whole thing "a put up job". Beyond this assertion, delusions of persecution did not definitely appear till 3 years after admission. Believes most people are against him owing to their jealousy of his attractiveness to women and his artistic abilities - Since admission has become suspicious of staff, accusing them of attempts to poison him. Believes he has from time to time suffered from cancer, leprosy and plague through carelessness of staff - good unremarkable - occupies himself well in workshop, employs leisure in reading and drawing - can converse intelligently

on extraneous matters - orientation correct, attention, comprehension, memory good - judgment impaired for delusional field - no increase in suggestibility - no insight - heredity negative.

Male European 297.

Age 62 years - single - height 6 ft. - weight 190 lbs. - average pulse rate 90 - blood pressure 130 - bodily health good - onset of psychosis probably insidious at approximately age 45 to 47 - Governor General's decision patient - crime, murder - admits crime but considers it justifiable as his victim was a member of an American conspiracy against him - the murdered man and others played upon him and used his mental and physical strength - Since admission has elaborated his system of persecutory delusions to include many members of the staff and fellow patients - mood sullen - occupies himself well chiefly in reading and writing - does a little ward work - constantly complains to highly placed officials of his detention, also of petty annoyances - mood taciturn - occasionally can be induced to converse well on extraneous matters - orientation correct, attention, comprehension and memory good - judgment impaired for delusional field - no insight - no increase of suggestibility - heredity unknown.

Male European 287.

Age 55 years - married - three children - height 5 ft. 6 ins.
 - weight 135 lbs. - average pulse rate 72 - average blood
 pressure 135 - suffers from chronic rheumatism and mitral
 incompetence - no history of acute rheumatism - onset of
 psychosis insidious at approximately age 33 to 35 years -
 Governor General's decision patient - crime, murder of a
 friend which he has always denied - believes himself a
 powerful Spiritualist medium - Since admission has
 elaborated his delusional system to account for his
 detention here by believing he is on Government business
 and has been asked to place his powers at the country's
 service - he has invented a wonderful secret code which has
 been the country's salvation - Mood quietly cheerful -
 occupies himself well in workshops, reads and plays cards
 in leisure time - converses well on extraneous matters -
 Orientation correct, attention comprehension and memory
 good - judgment impaired for the delusional field - no
 insight - no increase of suggestibility - heredity negative.

Male European 236.

Age 57 years - single - height 5 ft. 6 ins. - weight 150 lbs.
 - average pulse rate 102 - blood pressure 120 - bodily
 health good. - Onset of psychosis insidious at approximately
 age 38 to 42 years. Governor General's decision patient -
 crime, murder which he admits but justifies, believing his

victim a member of a secret conspiracy to ruin him physically and mentally. Since admission 14 years ago has included many members of the staff in his delusional system, believing them hostile to him, and has often been violent, but will never fully explain the objects of the supposed conspiracy against him. Mood taciturn - occupies himself well, reads a great deal, can seldom be induced to converse but on rare occasions is found to express himself well - Orientation correct, attention, comprehension and memory good - judgment difficult to assess on account of patient's taciturnity - shews no increase of suggestibility - no insight - heredity negative.

Male European 261.

Age 65 years - married - two children - height 5 ft. 6 ins. - weight 124 lbs. - average pulse rate 108 - blood pressure 138 - bodily health fair - very bald - complexion sallow - face much lined - onset of psychosis insidious at approximate age 48 to 50 - believes his wife conspired with unknown men to rob him - Since admission 11 years ago system has not elaborated to include others, but remains fixed and delusions of reference have appeared. Mood cheerful - occupies himself well in garden - reads in leisure time - Orientation correct, attention, comprehension and memory good - judgment impaired for the delusional field - no increase of suggestibility - no insight - heredity negative.

Male European 286.

Age 77 years - single - height 5 ft. 6½ ins. - weight 110 lbs. - pulse rate 84 - blood pressure 176 - bodily health poor - suffers from arterio sclerosis - onset of psychosis insidious at approximate age 47 to 50 - Governor General's decision patient - crime, assault committed under the delusion that victim had put people against him - Since admission 25 years ago has elaborated delusional system to include suspicion and jealousy of staff and fellow patients - has grandiose ideas of literary abilities - occupies himself in reading and writing - mood irascible - seldom can be induced to discuss extraneous matters - Orientation correct - attention impaired by impatient preoccupation with his own affairs - comprehension and memory good - judgment impaired for delusional field - no increase of suggestibility - no insight - heredity unknown.

Female European 304.

Age 53 years - married - 3 children - height 5 ft. 3½ ins. - weight 95 lbs. - pulse rate 90 - blood pressure 125 - believes at times she ought not to eat - bodily health fairly good - presystolic mitral bruit - eye-balls prominent - complexion very sallow - menstrual and obstetric history unremarkable - face much lined - onset of psychosis insidious at approximate age 43 to 45 years - believes herself divinely appointed to an official position in the

Church of England and is "spiritually married" to one of its clergy - believes the Criminal Investigation Dept. is trying to prevent her from filling these positions - Since admission 4 years ago delusional system has elaborated to involve the medical staff whom she considers in the pay of the C.I.D. - mood cheerful - occupies herself with housework and sewing - converses well on extraneous matters - reads a great deal - Orientation correct; attention, comprehension and memory good - delusion impaired for delusional field - no increase of suggestibility - no insight - heredity negative.

Female European 376.

Age 40 years, single - height 5 ft. 4½ ins. - weight 116 - average pulse rate 90 - average blood pressure 118 - complexion very sallow - face much lined - enlarged thyroid gland - markedly protruding eye-ball - Harrower's Thyroid function test negative - shews inordinate appetite for sugar - onset of psychosis insidious at approximate age 34 to 36 years - believes her relatives, especially her mother, behave immorally and hate her because she is "straight" - considers them selfish, untruthful and cruel - Since admission nearly 2 years ago she has come gradually to include every member of the nursing and medical staff in her list of persecutors - mood irascible - occupies herself well in sewing, reading and writing - converses well

on extraneous subjects - Orientation correct - attention,
comprehension and memory good - judgment impaired for
delusional field.

PARANOID DELIRIUM PRALCOX.

Male European 664.

Age 51 years - married - 2 children - height 5 ft. 10 1/2 ins. - weight 140 lbs. - average pulse rate 118 - blood pressure 170 - bodily health good - some arterio sclerosis. Onset of psychosis probably insidious at approximate age 38 to 41 years - believes he is a wonderful wireless instrument and that he has been brought to hospital for protection till the spirits perfect him - he is then going to England and expects to become famous - hears voice of a London scientist, has long conversations with him - mood elated - walks about unoccupied all day - seldom reads - converses fairly well on general topics - Orientation correct; attention and comprehension good, memory and judgment good - has no insight - suggestibility not increased - heredity unknown.

Male European 320.

A Jew - age 36 years - single - height 4 ft. 11 ins. - weight 114 lbs. - average pulse rate 108 - blood pressure 115 - bodily health fairly good - Onset of psychosis insidious at approximate age 20 to 25 years - believes he has discovered a process for combining the forces of nature into a new explosive and is the victim of a conspiracy to rob him of his discovery - under this delusion he committed assault with intent to murder - further believes he is a special deputy of heaven and has already led 60 holy lives

on earth - mood is elated and behaviour is often quarrelsome - occupies himself in writing lengthy letters full of irrelevance and often incoherent - writes bad verse - and reads a little - spends much time praying (three or four hours daily) - conversation on extraneous matters poor - Orientation correct; attention and comprehension (? language difficulty) poor - memory good - judgment poor - some increase of suggestibility - heredity unknown.

Male European 387.

Age 34 years - single - height 5 ft. 8½ ins. - weight 120 lbs. - average pulse rate 100 - blood pressure 105 - bodily health fair - onset of psychosis presumably sudden at age 30 years after arrest on a charge of rape - expresses varying delusions of visceral interference and believes he is constantly mesmerised and is an object of persecution by the Nationalist Party - hears electric voices and can talk with spirits - mood variable, at times elated and irascible, at times asocial - sits about unoccupied - seldom reads - will not work - conversation on extraneous matters fair - Orientation correct; attention and comprehension poor - memory fairly good - judgment poor - no increase of suggestibility - father and brother mentally disordered.

Male European 330.

Age 36 years - married - no children - height 5 ft. 1½ ins. - weight 114 lbs. - average pulse rate 108 - blood pressure 110 - bodily health fairly good - onset of psychosis comparatively sudden at age 28 years - expresses vague delusions of persecution and believes there is conspiracy afoot to make him change his religion - some girls are involved in the conspiracy - he is asocial and usually apathetic - grimaces, gesticulates and mutters to himself - at times becomes bad tempered, apparently under influence of hallucinations - conversation often incoherent - Orientation correct; attention, comprehension, memory and judgment poor - no increase of suggestibility - heredity doubtful, probably rational.

Male European 305.

Age 58 years, - married - no children - height 5 ft. 2 ins. - weight 128 lbs. - average pulse rate 94 - blood pressure 110 - bodily health good - Onset of psychosis insidious approximately at age 36 to 40 years - expresses the delusion that every one is against him and he is persecuted by spirits and acted on by magnetic force - Asocial and inaccessible - talks to himself - decorates his clothing with mystic letters and signs - conversation on extraneous matters poor - Orientation for self and place correct, faulty for time, attention fair, comprehension good - memory and judgment poor - no increase of suggestibility -

heredity unknown.

Female European 116.

Single - age 71 years - height 4 ft. 10 $\frac{1}{2}$ ins. - weight 94 lbs. - average pulse rate 84 - blood pressure 110 - bodily health poor - subject to periods of unaccountable pyrexia - menstrual history unremarkable. Onset of psychosis insidious approximately at age 45 years - believes herself possessed of much wealth and many enemies - receives messages from different people at a distance, by means of a telephone in her head, holds long conversations with them - sits about unoccupied, interested only in snuff - conversation on extraneous matters impossible - Orientation for self and place correct, faulty for time, - attention, comprehension, memory and judgment poor - no increase of suggestibility - heredity unknown.

Female European 157.

Age 56 years - married - no children - height 5 ft. 7 ins. - weight 116 lbs. - average pulse rate 92 - blood pressure 113 - bodily health good - menstrual history unremarkable - onset of psychosis insidious at approximately age 40 to 42 years - believes herself married to God and persecuted by her own husband - recently has asserted the hospital staff are murderers of children - hallucinations not elicited - she is dull and asocial, fails entirely to occupy herself - will not converse - orientation faulty - attention, comprehension, memory and judgment poor - no increase of

suggestibility - heredity unknown.

Female European 150.

Age 56 years - married - no children - height 5 ft. 7 ins. - weight 150 lbs. - average pulse rate 90 - blood pressure 105 - bodily health good - periods were regular but always painful - she has had one miscarriage, no full-time births - onset of psychosis insidious approximately at age 40 to 43 years - expresses vague fantastic delusions - believes she is married to John the Baptist or his counterpart - hallucinations doubtful - mood asocial and irascible - occupies herself entirely in embroidering her clothes in mystic designs - will not work - conversation on extraneous matters impossible - orientation faulty, attention, comprehension, memory and judgment poor - no increase of suggestibility - heredity negative.

Female European 165.

Age 48 years - married - 1 child - height 5 ft. 7 ins. - weight 117 lbs. - average pulse rate 98 - blood pressure 120 - bodily health fairly good - periods always irregular, painful and scanty - has had one normal birth - onset of psychosis insidious at approximately 30 to 38 years - and believes herself the subject of persecution by Malay witch doctors who interfere nightly with all her abdominal and thoracic organs - she hears her unseen persecutors talking

exultingly about her sufferings - fails to occupy herself - can converse fairly well - orientation correct, attention and comprehension fair - definite increase of suggestibility - heredity negative.

Female European 276.

Age unknown - estimated 52 years - single - height 4 ft. 8 ins. - weight 110 lbs. - average pulse rate 102 - blood pressure 110 - bodily health fair - (old osteo-myelitis) - menstrual history unknown - character of onset unknown - believes herself the object of persecution by police, believes staff keep her here for gain - hears a divine aeroplane passing judgment on her persecutors - is resistive towards institution regulations and threatening to staff - occupies herself in reading, usually the same page all day - will not work - conversation on extraneous matters impossible - orientation correct, attention, comprehension, memory and judgment very poor - no increase of suggestibility - heredity unknown.

Female European 316.

Age 50 years - single - height 4 ft. 10½ ins. - weight 121 lbs. - pulse rate 106 - blood pressure 118 - bodily health poor - eats very little on account of delusions - periods, since age 25 years scanty and irregular - onset of psychosis insidious at approximately 42 to 46 years - believes she is persecuted by spirits, is given human flesh to eat and sometimes poison. She is covered with spiders sent by

spirits who laugh and mock at her - mood variable -
 entirely fails to occupy herself - conversation on ex-
 traneous matter impossible - orientation correct, attention
 good, comprehension and memory fair, judgment poor - no
 increase of suggestibility - heredity negative.

Female European 301.

Age 55 years.- married - 2 children - height 5 ft. 6 ins. -
 weight 160 lbs. - average pulse rate 92 - blood pressure
 130 - bodily health good - menstrual and obstetric histories
 unknown - onset of psychosis insidious at approximately age
 46 to 48 years - believes she is under the spell of
 "Hottentot-Malays" who shake her about and pull her thoughts
 away from her - talks to herself - mood irascible and
 suspicious - sits all day alone with head covered up -
 orientation correct, attention, comprehension, memory and
 judgment poor - no insight - no increase of suggestibility -
 heredity doubtful, one daughter said to be "queer".

Male Native 299.

Age 64 years - height 5 ft. 4 ins. - weight 110 lbs. -
 average pulse rate 90 - blood pressure 130 - bodily health
 fairly good - onset of psychosis insidious at approximately
 age 46 years - history of addiction to Dagga - expresses
 varying and often fantastic delusions of grandeur - he is
 God, he is the owner of the hospital, he has many beautiful
 wives - dementia has progressed since admission -

hallucinations admitted - mood variable - fails to occupy himself - conversation on extraneous matters very poor - orientation correct; attention, comprehension, memory and judgment poor - shews no insight - suggestibility increased - heredity unknown.

Male Native 674.

Age 29 years - height 5 ft. 7 ins. - weight 148 lbs. - average pulse rate 70 - blood pressure 108 - bodily health good - shews homosexual tendencies - onset of psychosis doubtful, probably insidious at approximately age 23 years - charged with assault on European woman whom he erroneously held responsible for a friend's imprisonment - expresses delusions of grandeur and wealth, believes he should have European wives - mood elated - behaviour at times aggressive and quarrelsome - refuses to work - conversation on extraneous matters very poor - orientation correct, attention and comprehension fair, memory and judgment poor - shews no insight - no increase of suggestibility - heredity unknown.

Male Native 543.

Age 46 years - height 5 ft. 4 $\frac{1}{4}$ ins. - weight 145 lbs. - average pulse rate 100 - blood pressure 115 - bodily health fair - suffers from hernia, has had one attack of acute nephritis - onset of psychosis unknown - charged with theft of a goat - expresses delusions of wealth and shews cause-

less animosities - deterioration since admission is marked - fails to occupy himself - conversation often irrelevant and incoherent - orientation faulty; attention, comprehension, memory and judgment poor - shews no insight - no increase of suggestibility - heredity unknown.

Male Native 677.

Age unknown.- probably over 50 years - height 5 ft. 4½ ins. - weight 117 lbs. - average pulse rate 72 - blood pressure 110 - bodily health fair - onset of psychosis unknown - charged with theft of pigs which he declares were his own - expresses varying delusions of wealth and grandeur, he is a king, the owner of the hospital, etc. - mood irascible - conduct shews mannerisms and he fails to occupy himself - conversation on extraneous matters very poor - orientation faulty, attention, comprehension, memory and judgment very poor - shews no insight - suggestibility not increased - heredity unknown.

Male Native 712.

Age 50 years - height 5 ft. 9 ins. - weight 136 lbs. - average pulse rate 90 - blood pressure 120 - bodily health good - onset of psychosis insidious at approximately age 34 years - expresses delusions of wealth admits auditory hallucinations and ideas of visceral persecution - mood unremarkable - works fairly well - conversation on extraneous matters poor - orientation for place correct, for

time very faulty - attention, comprehension, memory and judgment poor - shews no insight - no increase of suggestibility - heredity positive.

Male Native 970.

Age 34 years - height 5 ft. 6½ ins. - weight 130 lbs. - average pulse rate 72 - blood pressure 120 - bodily health good - onset of psychosis presumably sudden at age 31 years - killed his brother's wife, apparently without motive, but according to his own story, in response to the order of the "Iron" which he says, is a large frying pan in Basutoland, which can cut people to pieces and then restore them to life - has admitted hallucinations - for past year, has denied hallucinations and professes to discredit the delusion, but has recently attributed the finding of dagga in his possession to the "Iron" - mood often depressed - usually works well - orientation correct; attention, comprehension, memory and judgment fair - has probably no real insight - no increase of suggestibility - heredity unknown.

Male Native 976.

Age 35 years - height 5 ft. 6½ ins. - weight 159 lbs. - average pulse rate 72 - blood pressure 118 - bodily health good - onset of psychosis insidious at approximately age 20 to 25 years - charged with assault - expresses delusions of grandeur, is a special agent of God, who constantly speaks to him and often advises him to punish people -

mood elated - behaviour aggressive and shews mannerisms, grimaces and gesticulations - conversation often irrelevant - orientation correct, attention variable, comprehension, memory and judgment poor - no insight - no increase of suggestibility - heredity unknown.

Male Native 1191.

Age 39 years - height 5 ft. 1 in. - weight 118 lbs. - average pulse rate 60 - blood pressure 115 - bodily health good - onset of psychosis doubtful - expresses many delusion of grandeur and persecution, he is an apostle and a prophet, he is bewitched, people have dragged away his thoughts; God and the devil talk to him - mood elated - fails to occupy himself - conversation on extraneous matters very poor - orientation correct, attention variable, comprehension, memory and judgment poor - shews some insight - saying his head is upset by many things - suggestibility increased - heredity unknown.

Female Native 445.

Age about 50 years - height 5 ft. 2 ins. - weight 115 lbs. - average pulse rate 86 - blood pressure 102 - bodily health poor, heart is dilated - no children, menstrual history doubtful - onset of psychosis unknown, found wandering and destitute - expresses delusions of persecution by various natives with fantastic hallucinations of friendly, heavenly and earthly ghosts who echo her thoughts - mood usually depressed, at times irascible - refuses to work and fails

to occupy ^{her} ~~himself~~ - conversation on extraneous matters very poor - orientation correct, attention good, comprehension, memory and judgment poor - shews no insight - slight increase of suggestibility - heredity unknown.

Female Native 432.

Age about 40 years - height 5 ft. 2½ ins. - weight 112 lbs. - average pulse rate 68 - blood pressure 110 - bodily health good - vague menstrual irregularities, no children - onset of psychosis insidious at approximately 38 years - expresses various delusions and hallucinations, says she has been bewitched and robbed, can see and talk with spirits who tell her to dance on her baby - mood apathetic - fails to occupy herself - conversation on extraneous matters impossible - orientation correct - attention variable, comprehension fair, memory and judgment poor - shews no insight - no increase of suggestibility - heredity unknown.

PARANOID CONDITION.

Male European 566.

Age 43 years - married - 2 children - height 5 ft. 10 $\frac{1}{2}$ ins. - weight 117 lbs. - average pulse rate 96 - blood pressure 120 - bodily health good - eye-balls prominent, ears very heavy - insidious onset of psychosis at approximately age 38 years - he believes that a mysterious conspiracy is going on against him, and that there is some secret about the origin of his family - he hears voices of kings and dukes, and people who talk with him constantly interpose some mumbling which is unintelligible to him - mood resentful and irascible - sometimes reads, watches games etc., but chiefly spends his time brooding - conversation on extraneous matters good - orientation correct - attention variable, probably much distracted by hallucinations, comprehension and memory good, judgment impaired for delusional field - no insight - no increase of suggestibility - heredity negative .

Male European 22 7.

Age 52 years - single - height 5 ft. 6 $\frac{3}{4}$ ins. - weight 140 lbs. - average pulse rate 88 - blood pressure 118 - bodily health good - onset of psychosis insidious at approximately age 32 years - believes himself the subject of persecution by Johannesburg spiritualist who has set everyone against him and has robbed him of his sleep - makes definite charges recently against the Physician Superintendent who is in

league with the spiritualist and causes him to hear denouncing voices - reads and writes, occupying himself perfunctorily - conversation on extraneous matters good - mood often apathetic - orientation correct - attention, comprehension, memory and judgment (except for delusional field) good - no insight - no increase of suggestibility - heredity unknown.

Female European 369.

Age 51 years - married - 2 children - height 5 ft. 6½ ins. - weight 100 lbs. - average pulse rate 88 - blood pressure 116 - eye-balls prominent - menstrual and obstetric histories unremarkable - bodily health fair - onset insidious at approximately 40 to 42 years - believes her sons are ill-treated, has heard them calling to her from neighbours' houses; since admission here has accused staff of abducting and detaining them - believes her letters and food are tampered with - distrusts entire staff - mood variable - occupies herself well in knitting and sewing - conversation on extraneous matters good - orientation good, attention variable, comprehension and memory good, judgment poor - shews no insight - suggestibility not increased - heredity negative.

Female European 445.

Jewess - age 45 years - married - 2 children - height 5 ft. 3 ins. - weight 100 lbs. - average pulse rate 82 - blood

pressure 110 - bodily health indifferent - fails to eat enough - onset of psychosis insidious at approximately age 40 years - believes her husband whom she now hates, ill-treats her sons, hears people saying ill of her - sometimes talks to herself - is restless and asocial - mood apathetic at times - fails to occupy herself - conversation precluded by language difficulty - orientation correct - comprehension, memory and judgment difficult to assess - shews no insight - no increase of suggestibility - heredity negative.

Male Native 292.

Age 48 years - height 5 ft. 5 ins. - weight 192 lbs. - average pulse rate 110 - blood pressure 110 - bodily health fairly good - character of onset of psychosis unknown - expresses fantastic delusions of wealth and grandeur, does not admit hallucinations, but is at times impulsively violent - mood elated - works fairly well - is somewhat loquacious in conversation - orientation correct, attention, comprehension and memory fair - judgment poor - no increase of suggestibility - no insight - heredity unknown.

Male Native 401.

Age 60 years - height 5 ft. 7 ins. - weight 127 lbs. - average pulse rate 90 - blood pressure 125 - bodily health good - onset of psychosis insidious at approximately 46 to 47 years - believes himself to bound to perform religious sacrifices and considers himself the victim ^{of} ~~from~~ religious

enemies and staff - wears symbolic badges - hallucinations not admitted but suspected - mood elated and irascible - he occupies himself fairly well but frequently instigates insubordination - conversation on extraneous matters good - orientation correct - attention, comprehension and memory fair, judgment poor - no insight - no increase of suggestibility - heredity unknown.

Female Native 212.

Age 52 years - height 4 ft. 6½ ins. - weight 96 lbs. - average pulse rate 86 - blood pressure 130 - bodily health good - menstrual and obstetric histories unremarkable - onset of psychosis insidious at approximately 37 to 39 years - believes she is the victim of general persecution - the police, her late employers, the staff ill-treat and insult her, she is given food unfit to eat - hears voices calling her names - mood exalted - refuses to work at times, at times occupies herself well - conversation on extraneous matters fairly good - orientation correct; attention, comprehension and memory good, judgment very poor - no insight - no increase of suggestibility - heredity unknown.

Female Coloured 35.

Height 4 ft. 6 ins. - weight 105 lbs. - average pulse rate 88 - blood pressure 150 - bodily health good - menstrual history doubtful, patient complains of scanty irregular periods with occasional pain - character of onset unknown, found destitute - believes herself a victim of ^a conspiracy

to murder her because she refused to lead an immoral life - believes she is unjustly detained - claims supernatural powers of communication with people at a distance - mood irascible - works fairly well - conversation on extraneous matters fairly good - orientation correct; attention, comprehension, memory and judgment fair - no insight - definite of increase of suggestibility - heredity unknown.

(1) Psychological state.
 (2) Physical and mental condition.
 (3) History of red - hair - skin - tone.
 (4) Family history.
 (5) Social history.
 (6) Other notes.
 (7) Summary of clinical observations.
 (8) Summary of laboratory.
 (9) Summary of physical findings.
 (10) Summary of mental findings.
 (11) Summary of other findings.
 (12) Summary of treatment.
 (13) Summary of prognosis.
 (14) Summary of follow-up.

APPENDIX 1.CLASSIFICATION OF MENTAL DISEASESFOR USE IN MENTAL HOSPITALS INSOUTH AFRICA.

1. TRAUMATIC PSYCHOSES.
 - (a) Traumatic Delirium.
 - (b) Traumatic Constitution.
 - (c) Post-traumatic Mental enfeeblement (Dementia).
 - (d) Other types.
2. SENILE PSYCHOSES.
 - (a) Simple ^e deterioration.
 - (b) Presbyophrenic type.
 - (c) Delirious and confused types.
 - (d) Depressed and agitated types.
 - (e) Paranoid types.
 - (f) Pre-senile type.
 - (g) Other types.
3. PSYCHOSES WITH CEREBRAL ARTERIOSCLEROSIS.
4. GENERAL PARALYSIS.
5. PSYCHOSES WITH CEREBRAL SYPHILIS.
6. PSYCHOSES WITH HUNTINGTON'S CHOREA.
7. PSYCHOSES WITH BRAIN TUMOUR.
8. PSYCHOSES WITH OTHER BRAIN OR NERVOUS DISEASES.
 - (a) Cerebral embolism.
 - (b) Paralysis agitans.
 - (c) Meningitis tubercular or other forms (to be specified).
 - (d) Multiple sclerosis.
 - (e) Tabes dorsalis.
 - (f) Acute chorea.
 - (g) Other diseases (to be specified).
9. ALCOHOLIC PSYCHOSES.
 - (a) Pathological intoxication.
 - (b) Delirium Tremens.
 - (c) Korsakow's Psychosis.
 - (d) Acute hallucinosis

- (e) Chronic hallucinosis.
 - (f) Acute Paranoid type.
 - (g) Chronic Paranoid type.
 - (h) Alcoholic Deterioration.
 - (i) Other types, acute or chronic.
10. PSYCHOSES DUE TO DRUGS AND OTHER EXOGENOUS TOXINS.
- (a) Opium (and derivatives), cocaine, bromides, chloral, etc., alone or combined (to be specified).
 - (b) Metals, as lead, arsenic, etc., (to be specified)
 - (c) Gases, (to be specified).
 - (d) Other exogenous toxins, (to be specified).
11. PSYCHOSES WITH PELLAGRA.
12. PSYCHOSES WITH OTHER SOMATIC DISEASES.
- (a) Delirium with infectious diseases.
 - (b) Post-infectious psychosis.
 - (c) Exhaustion delirium.
 - (d) Delirium of unknown origin,
 - (e) Cardio-renal diseases.
 - (f) Diseases of the ductless glands.
 - (g) Other diseases or conditions (to be specified)
13. MANIC-DEPRESSIVE PSYCHOSES.
- (a) Manic type.
 - (b) Depressive type.
 - (c) Stuporous type.
 - (d) Mixed type.
 - (e) Circular type.
 - (f) Other types.
14. INVOLUTION MELANCHOLIA.
15. DEMENTIA PRAECOX.
- (a) Paranoid type.
 - (b) Catatonic type.
 - (c) Hebephrenic type.
 - (d) Simple type.
 - (e) Other types.
16. PARANOIA OR PARANOID CONDITIONS.
17. EPILEPTIC PSYCHOSES.
- (a) Epileptic deterioration..
 - (b) Epileptic clouded states .
 - (c) Other epileptic types (to be specified)
18. PSYCHONEUROSES AND NEUROSES.

- (a) Hysterical type.
 (b) Psychasthetic type.
 (c) Neurasthenic type.
 (d) Anxiety Neuroses.
 (e) Other types.

19. PSYCHOSES WITH PSYCHOPATHIC PERSONALITY.

20. PSYCHOSES WITH MENTAL DEFICIENCY.

21. UNDIAGNOSED PSYCHOSES.

22. WITHOUT PSYCHOSIS.

- (a) Epilepsy without psychosis.
 (b) Alcoholism without psychosis.
 (c) Drug addiction without psychosis.
 (d) Psychopathic personality without psychosis.
 (e) Mental deficiency without psychosis.
 (f) Others (to be specified)

23. DEFECTIVE MENTAL DEVELOPMENT.

- (a) Feeble-mindedness (not amounting to imbecility)
 (1) With Epilepsy.
 (2) Without Epilepsy.
 (b) Imbecility.
 (1) With Epilepsy.
 (11) Without Epilepsy.
 (c) Idiocy.
 (1) With Epilepsy.
 (11) Without Epilepsy.

APPENDIX B.

MODIFICATION OF KNOX'S CUBE TEST.
 (As suggested by Dr. J. Marius Moll).

Line	Movements	Maximum Marks	Number of times shown	Approximate Age Level.
A	1234	4	3	4
B	12343	5	3	5
C	12342	6	3	6
D	1324	8	4	8
(New)D	14231	10	5	9-10
E	134231	12	6	11
(New)F	2142314	15	7	14.

METHOD OF SCORING

Begin with A line and work up.

To succeed in a line, the person examined must not only copy it correctly but also repeat it at once without being shown again.

If he fails to copy, or fails to repeat, the movement is shown again.

Successful performance of the movement is indicated by an x : failure by a minus sign.

Thus to succeed in a line he must score xx.

A maximum number of marks is allotted to each line (see above) and when xx is scored the full number of marks is credited, and for each minus sign one mark is deducted.

When line A, B, or C is shown three successive times without an x being scored, no marks are given. Similarly with D, four times ; E, five times ; F, six times ; F, seven times.

It is permissible to discontinue the test after an absolutely negative result (no x being scored) and to count no marks for the following lines.

15a /

Moll gives the following provisional year values :-

Marks Year

20.....	6
22.....	7
27.....	8
32.....	9
34.....	10
38-39.....	11½
44.....	13
50.....	16

Examples.

		plus	minus
A.	xx	4	
B.	xx	5	
C.	xx	8	
D.	- xx	8	1
D'	-----	0	
E.	.	0	
F.	.	0	
		23	1

		plus	minus.
A.	xx	4	
B.	xx	5	
C.	- xx	8	1
D.	xx	8	
D'	x-xx	10	1
E.	-- xx	12	2
F.	-----xx-x	15	6
		60	10

Marks 22

Marks 50

APPENDIX 3.TABLE OF STANDARD HEIGHTS AND WEIGHTS

MALE

HEIGHT AGE 20 AGE 30 AGE 40 AGE 55

ft.	in.	lb.	lb.	lb.	lb.
5	0	114	121	125	128
5	1	117	124	128	132
5	2	121	128	133	136
5	3	125	132	137	141
5	4	128	136	141	145
5	5	132	140	145	149
5	6	136	144	149	154
5	7	140	148	154	158
5	8	144	153	158	163
5	9	148	158	163	168
5	10	153	163	168	173
5	11	158	169	173	178
6	0	163	172	178	183
6	1	168	177	184	188
6	2	173	182	189	194
6	3	178	188	195	200

FEMALE

5	0	110	115	120	128
5	1	113	118	124	132
5	2	116	122	128	136
5	3	119	126	132	140
5	4	123	130	136	144
5	5	127	134	140	148
5	6	131	138	144	153
5	7	135	142	148	158
5	8	139	146	152	163
5	9	143	150	157	168
5	10	147	154	162	173
5	11	151	159	167	178
6	0	156	164	172	183
6	1	161	169	178	188
6	2	-	-	-	-
6	3	-	-	-	-
