

FUNDAMENTALS OF A NEO-JACKSONIAN CONCEPTION OF PSYCHIATRY AND NEUROLOGY. HENRI EY'S "ORGANO- DYNAMISM"

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Since the Spencerian views on evolution were applied by Hughlings Jackson to the field of neurology as a hypothesis to increase the comprehensibility of the existing facts, these views have been expounded in psychopathology and neurology as an explicit Jacksonism (by Ribot, Head, Monakow and Mourgue, Levin, etc.), or implicitly in disguised forms (by Janet, Kretschmer, Bleuler, Baruk, Delay, etc.). In none of these implicit or explicit approaches an overall comprehensive, and all invading attempt had been undertaken, and particularly in reference to psychiatry the far reaching consequences of Jackson's views had never been fully investigated. Since his collaboration with Claude², his book on "Hallucinations and delusions"⁴, and particularly after the publication of his monograph on Jacksonism with Rouart⁵, Henri Ey has endeavored to propose, through the modification of the Jacksonian theme, a compendious and coherent system which could, while containing the major trends of contemporary psychopathology, surpass them^{6, 7, 8}. His originality rests on his elaboration of the evolutionary theme, and its application to all fields of psychopathology — in short, a pan-Jacksonism. In the following argument, as the essential net of a working hypothesis, Ey tries to summarize this new approach which he has called "organo-dynamism": "...Abandoning the Cartesian dilemma which strangles the very notion of mental disease, psychiatry should be neither mechanistic nor psychogenetic, because mental disease is neither an aggregate of mechanical symptoms without human signification, nor a simple variation of behavior under the influence of psychologic or social causes. The mental disease is a form of psychic activity conditioned by an organic process. In this respect it is analogous to a dream which is liberated by sleep"^{7d}.

Working quite closely with Henri Ey, it seemed to me relatively essential to bring forth his system of psychiatry, which has not been, so far as the knowledge of the present writer goes, well appreciated in Anglo-Saxon countries. To avoid all doctrinal vagueness and absolutism, enwrapped in tautological "calembours", I shall try to present "organo-dynam-

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ist" conception of neurology and psychiatry in its most simplified and condensed form, which H. Ey himself has proposed in some of his works, and explained to me personally. Obviously this system, like any other one yet forwarded, is not empty of criticism, but here no attempt has been made to reveal any of its insufficiencies, but to mark its substance*.

The concept of organo-dynamism was developed mainly as a reaction towards the abuses of the mecanicists and psychogeneticists schools, particularly in France; therefore, it seems necessary to present very briefly the main theses of these two opposite doctrines before proceeding to the discussion of the "reconciling" position which organo-dynamism maintains.

What Is Mecanicism? — This doctrine which took its roots in Cartesian dualism of the age of enlightenment, found its highest vogue at the 2nd part of the 19th Century, and still continues to flourish here and there, in its absolute shape, particularly in a nation where materialism and pragmatism reign relatively supreme. In brief it contains (and here I will be quoting mostly from Ey) three main postulates:

1) Psychological elementarism, i.e., that all psychopathological states are reduced to smaller and smaller elements, the collection of which, later, in a reverse process will form that particular psychopathological state. Thus according to this "pointilistic" analysis, all mental diseases are considered as the result of isolated symptoms, and a true clinical analysis is the one which reaches the smallest of elements. Good examples of this are the reduction of the aphasic phenomena to the play of images, hallucination to the elementary interplay of sensations, and delusion to the elementary erratic ideas.

2) Mechanical genesis of symptoms, i.e., that an anatomical lesion creates "by itself and immediately" the clinical psychopathic forms: general paresis is purely and simply syphilitic meningo-encephalitis; alcoholic intoxication creates zoopsies by the excitation of some sensory centers, etc. No doubt this concept could be applied to some elementary disorders (anesthesia as the result of the section of a sensitive nerve) but it is far from being adequate for the higher functions levels.

After having divided the psychic structure, mecanicists try to maneuver back the mental symptoms by the juxtaposition of the elements, as for example, by constructing catatonia from disturbances of muscular tone, or dementia from the disorders of attention, or in general by developing psychoses from some central foci of excitation. This sort of approach, which makes psychic life in itself a "contingent phenomena", is particularly

* For the major criticism and major works inspired by this conception see 8, 9, 10, and 1, 3, 11, 12, 13 in bibliography, respectively.

prevalent in some schools where biological investigation of mental illnesses (in itself most fundamental) leads the authors to base a whole psychic structure upon one or few chemical abnormalities such as disturbances of K metabolism (Hoagland, etc.), or oxygen consumption (Hoskins, Looney, etc.), or carbohydrate metabolism (Gottfried, Willner, etc.), without even a clear cut evidence of such abnormalities.

3) Nosographical entities, i.e., distinct and clearcut mosaics of symptoms, each forming a definitive disease. Here the atomistic point of view provokes necessarily an "a-psychologism", and a "nosographism", changes psychopathology to "cerebral mechanics", as says Ey, by ignoring the influence of totality, the notion of "functional equilibrium", the "dynamics of preexisting functions", and, most of all, excluding the possibility of the idea of "psychic structure", which transforms the psyche to an "epiphenomena", in regard to matter. In other words, reducing psyche to "nothing at all", reducing the forms of psychoses to the pathogenic agent, and purging its very existence from any mental structure*. Psychiatry in this regard becomes either neurology, or something entirely alien to it "purely psychic". Hysteria becomes purely psychic without possibility of an organic basis; a delusion or hallucination is ignored as a particular structure, and what is searched for are the chemistry and physics of the body, and thus mental illness, insists H. Ey, becomes physical "two times" in its symptomatology as well as in its etiology.

What Is Psychogeneticism? — In this doctrine the mental diseases are, contrary to mecanicist view, psychogenic "two times" in their etiology as well as in their symptomatology. They are the direct result of purely psychological factors be it the repressed unconscious energies, or "reaction" to some environmental or social factors, or both. It is along this line that a persecutory delusion is taken as the projection of some conflicts, or the paralysis of a limb in a hysteric a conversion. So that the "understanding" of the psychoses becomes equivalent to "explaining" it. Obviously the merit and utility of psychologism is beyond doubt and is not the topic of discussion here. What we consider is the doctrinal aspect of it, its explanatory validity, and its comprehensibility in regard to the facts.

The psychosomatic school with the elimination of a "trait d'union" cannot, with all the sincerity of its endeavor, remain outside of the debacle of dualism and handicaps of monism, because in its very essence it is a psychogenetically oriented method. Psychosomatic medicine which constantly repudiates the dichotomy and pertains to monism, refers incessantly to this very dualism to explain the "variability" and "varieties", because

* In organo-dynamism the notion of structure is taken as the "overall perturbations lived by the patient as events (proportional to his capacities) and observed by the physician as a typical psychopathological state" 5.

it cannot evade the observation that the body is not uniform, or even holistically uniform; it is organized and reveals itself to us through a "composit order".

"Psychiatry does not exist either for the former (the mecanicism) or for the latter (psychogeneticism). As a pure and simple aspect of general pathology it is rejected by the psychogenetists. As a pure psychology it is denied by the mecanicists"^{7b}. So far as a more satisfactory solution has not been found between these two inherently irreconcilable concepts, which could surpass monism as well as dualism, the problem of "mental disease" will oscillate haphazardly in the field of doctrinal amalgams.

Organo-dynamism maintains that diseases are "somatoses", but they have for an objective "somatoses of different structure"; psychoses and neuroses are somatoses with mental structure. To understand that physique "is a necessary part but not the sufficient substratum of psychic, and that it is the very movement of life which makes us go from organic to psychic"^{7a} we have to comprehend this very movement, this "dialectic" between "vital infra-structures" and "psychic supra-structures". This living dialectic, according to organo-dynamism, becomes evident if Nature is considered as *Naturing* ("naturante") rather than *Natured* ("naturée").

The essence of this dialectic is nothing new; it has its origin in hypocratic medicine, but it never has been fully formulated, and comprehensively applied to psychiatry. In the following pages we shall try to formulate it briefly.

WHAT ARE THE NEO-JACKSONIAN THESES?

They are 5 in number, three of them Jacksonian, and the latter two, only implicitly sketched by Jackson himself, more strictly speaking neo or pan-Jacksonian.

1st thesis — Hierarchy of psychic structure. In classical conception of Jackson it was as if the organism was spatially composed of different levels of integrative configuration from an inferior to a superior level; the hierarchy being stablished along the evolutionary lines. In pan-Jacksonism, to this spatial dimension a "temporally" more elaborated dimension has been added for the superior levels where "functional evolution operates... as an energetic system developing in time". The idea of this temporality is more or less similar to what Bergson had maintained in his system of psychology.

2nd thesis — The concept of psychic dissolution, i.e., that psychopathological states represent different episodes of a movement of psychic dissolution.

3rd thesis — The dissolution of superior instances liberates the inferior instances, and thus the organism regresses to an inferior level of evolution, or stops at a level of non-evolution.

The necessary continuity of the latter two concepts implies two sorts of manifestations or symptoms in all psychopathological state: a) negative symptoms, or symptoms of deficit, in direct relationship to the pathological agent, and as such the result of dissolution, e.g., in organic brain diseases and schizophrenia; the detection of these deficit-symptoms is difficult in higher levels of dissolution as in paranoia or neurosis; b) positive symptoms, or the manifestation of “reactional toil of subsisting instances”, as the direct result of liberation; these are the common clinical symptoms of the diseases.

4th thesis — This concept vaguely announced by Jackson, but highly developed by Ey, consists of a distinction between “global or apical dissolution” and “partial or basal dissolution”. According to this view overall relation-functions of an organism are represented in two planes and in two functional levels: A — The plane of “instrumental functions”⁸, localized as apparatuses in the nervous system, which have three main characteristics: 1. Partiality of desintegration (a hemiplegia, a chorea); 2. Basality of desintegration (disturbances of primitive and elementary functions, leaving the superior global functional levels intact); 3. Great localizing value. B — The plane of “energetic functions”, operating the vastest of functional synthesis, which has also three main characteristics: 1. Globality of dissolution (a mental confusion, a delusion); 2. Apicality of dissolution; 3. No localizing value.

Thus it becomes convenient to envisage neurology as the science of “instrumental functions”, and psychiatry as the science of “global dissolutions”, their difference being only the “structural diversity of neurological datum and psychiatric datum in the more general framework of nervous pathology”⁸.

5th thesis — Antonosographism. This conception, the necessary outcome of the preceding ones, also was hardly worked upon by Jackson. The thesis of the liberation of subjacent instances which produces the outstanding observable (clinical) signs and symptoms (positive symptoms) and forming a clinical entity, a disease, is but indirectly related to the causative agent, which produces only the symptoms of deficit (negative symptoms). What the clinic studies “are more or less typical *levels of dissolution* engendered by different biological factors. Now this syndromic nature of psychoses... is against the hypothesis of specific anatomic-clinical entities”^{7d}. There are no clear-out entities in psychiatry, all “mental diseases” are but mal-comprehended myths!

WHAT IS ORGANO-DYNAMISM?

In continuation to what went above, mecanicism does not and cannot explain the constitutive psychological elaboration of mental disturbances (in the sens of Jasper's "comprehensibility" of psychic phenomena). Psychologism does not and cannot explain "other things" than psychic movement and eduction which intervene in the production of psychoses and neuroses. "We repudiate", writes Ey, "at the same time the dualism which separates too much, and the monism which does not separate enough the psyche from life". "It is convenient to see in an organism, as far as a form of *existence*, not only an architecture but a *becoming*, a movement which carries us from the order of vitality to the one of humanity. In other words, we should consider the psychic life as a form of organization of which organic life is a necessary but not sufficient condition"^{7d}. This perpetual dialectic between physique and morale constitutes the core of organo-dynamism because it explains conveniently, as far as the present data indicate, that "all neuroses like all the psychopathological forms require for their formations, at once and as a whole, a primordial organic disorder *sine qua non* condition) and psychologic structure which constitutes their phenomenology, their existential basis"^{7d}. We emphasize this notion of structure and "existence" which a pure psychologism is incapable of explaining. Organo-dynamism as its name indicates contains two parts: organicism and dynamism, which we will briefly represent.

A) *Organicism* — This organicism supposes, by hypothesis, that the origin of all psychopathological phenomena is an alteration of organic substratum which results in dissolution, but it does not imply any dichotomy. "The organicism and psychism are not two heterogenous substances, but two structural planes of diferent levels"^{7b}. The doctrinal consequence of this view is evident: "the world presents itself to us as a hierarchy of structures and forms which unroll and organize in such a manner that the superior structures imply the inferior ones but surpase them, and that an inferior structure, while constituting a necessary condition for the one which is higher in the hierarchy, never is sufficient to explain it". Psychic structures cannot be reduced to molecular and atomic planes of organic structures, as organic structures cannot give an account of what is necessarily based upon them, and to which they are the elemental beginning, but goes far beyond them in structurization.

Psychopathologically speaking, organo-dynamism follows relatively Main De Brian's and Bergson's conceptions, but outweighs them. "In the mass of psychic functions there are two poles: 1) those functions which are intimately related to the structure of nervous system whose form they spouse, and are the instrumental functions of relation's life (gnosia, praxia, language, etc.); 2) energetic psychic functions (overall integrative activity of function of reality)". Organic perturbation of central nervous system

provoke regression, or non-evolution, of these superior energetic instances, and the variations of infra-structures which manifest themselves in the form of regressive activity are the object of psychiatry.

This organicism which infers all etiologies of mental syndromes to the organic disorders, brings under one general hypothesis the two, till now, different fields of neurology and psychiatry. The only discriminative basis between these two sciences is the "structural differences which separate partial from global dissolution of the functions of *vie de relation*. The most authentic and easily deciferable type of global dissolution is a dream which is liberated by sleep, and it remains valuable as an explicatory scheme for all series of psychopathological states".

The object of neurology is the study of the functionally partial or "instrumental desintegration, without substantial modification of the psychic life; while the object proper of psychiatry is the global dissolution of superior psychic functions which alter or else alienate the psychic life" ^{7d}.

As far as the question of "cerebral centers" is concerned, organo-dynamism distinguishes between the centers of "instrumental functions" (perceptif analyzers, speech centers, etc.), and the "energetic centers", the strict localization of which is not a necessity because a regulation center could indifferently occupy one point or correspond to an infinity of points. As an example we could mention *tabes dorsalis* as a form of partial instrumental desintegration, and general paresis as a global dissolution whose major symptoms are essentially the regression of personality as a whole. The same goes for schizophrenia. In an organo-dynamist conception schizophrenia cannot be explained by a purely psychogenic theory which makes it a "reaction", a "flight into the disease", a "withdrawal from reality", etc.; in so doing it renders impossible to explain any "comprehensible" psychic variations ("comprehensibility" in Jaspers's sens of the word), and leave unintelligible the appearance of negative symptoms. Only through a structural, and "dasein-analysis" these symptoms acquire a more comprehensible shape and appear as the result of dissolution, or non-evolution, the direct consequence of an organic disorganizing process in central nervous system. On the other hand schizophrenia is not a "neurological disease", and cannot be explained neurologically, because the elemental analysis of an atomistic method could not render comprehensible why such and such states of mind, states of "existence", are produced. This incomprehensibility between the organic alteration and clinically observed, and subjectively lived symptoms is what H. Ey has called an "organo-clinical digression"; "this margin of indeterminacy, of elasticity which intersperse between the direct and deficitary action of encephalitic or more generally somatic process and their clinical expression" ^{7d}.

B) *Dynamism* — This thesis of dynamism is taken as an antithesis of mechanicism, and comports three aspects:

1) "By hypothesis we admit that psychoneuroses and psychoses are the effect of *energetic deficit*"; there is a certain "psychological tension" which holds in equilibrium the relationship of the organism with the reality, and there is, by definition, two states of higher and lower tension. The development of higher forms of psychic tension is well demonstrated genetically and ontologically in the growth processes of the child, whereim one observes a state of evident "becoming". The yielding and the dissipation of this "system of real forces" (real in the sens of an observable "becoming existent") engenders the regression of mental functions to the inferior levels of once-a-becoming.

2) *The release of subsisting parts.* Madness liberates, it sets free. This is the core of Jackson's profoundest intuition, upon which H. Ey elaborates: "psychosis is made of the anarchic liberation of the sub-jacent inferior instances. Any diminution of the superior psychic forces entails the liberation of the energies designated by the terms of unconscious or instinct"^{7d}. As sleep liberates dreams, the dissolution of higher mental instances liberates the states of existences which we call psychoses (indeed "states of existences" where all of the existing states of relationship with the world is deranged; where the "dasein", the "being-in-world" is no longer in its former ways, and has become "another" being-in-world). It is to this natural explanation which organo-dynamism refers itself to account for, in psychopathology, the major phenomena of madness which is an "escape from control".

3) *Elaborative work of psychoses.* "We call thus the transformations which operate in patient's consciousness and personality under the double influence of energetic deficit and levely reactions of subsisting instances, or yet the tendencies which constitute its personality". In this manner psychoses and psychoneuroses are considered as typical forms of evolution, with each level of dissolution undergoing an elaborative work according to the underlying system of personality.

This *becoming* could be visualized hapening in a system whose two coordinates are "the field of consciousness" and "the trajectory of personality". The field of consciousness represents the "point of application of psychic energy to each instant of our existence. It is susceptible to intensity variations which ensures the setting of reality". This field depends upon, and its dynamic evolution is, a correlate of the nervous system maturity and congenital capacities inherent in this system. The trajectory of personality is that "constant" whose variables are the oscillations of the field of consciousness; it is that angle through which the world opens itself to us. In this way any psychopathological state could happen either because of a structural perturbation of consciousness which permanently alters the personality (either through an arrest of development as in oligophrenia where the field of consciouness is altered in its noetic infra-structure, or through a dissolution as in schizophrenia), or because of some imprints of already eradicated disorder which, nevertheless, in the originality

of its "lived experience" has oriented the personality in some particular direction. In the latter instance the negative symptoms, the results of the eradicated deficit, are hard to detect and only the positive symptoms, clinically observable, remain, as in paranoia where the personality is affectively directed and polarized.

In the field of consciousness, i.e., the transverse section of the happenings in the psyche, we could distinguish 4 levels of dissolution which correspond in their phenomenological aspects to what Jaspers has called "primary delusional experiences" (primäre Wahnerlebnisse). These 4 levels each are correlated to definite clinical symptomatology, and are as follows: 1) "Dissolution of higher functions which insure the integration of personality on social levels". It corresponds clinically to disorders of behavior. 2) "Dissolution of functions which insure thymic equilibrium, i.e., the integration of instinctivo-affective forces in adaptation to reality". It corresponds clinically to maniac-depressive states. 3) "Dissolution of functions which insure the perceptive organization of external and internal world, and the clear discrimination of the subjective and the objective". It corresponds clinically to oniroid hallucinatory states, and delusional states of inference and depersonalization. 4) "Dissolution of fundamental intellectual functions". It corresponds clinically to confuso-oniroic and mental confusions.

These levels, phenomenologically speaking, are the portals of entry to the changing significance of the perceived reality, and are psychologically "lived experiences" which come forth in the *actuality* of the "encounter" (begegnung, in phenomenological terminology) with the psychiatrist.

In 1936 Ey and Ruart gave a tentative list of the psychopathological structures in the form of a hierarchy based upon the degree of dissolution of the psychic functions. This table of hierarchy is the following: 1 — Neurotic structures; 2 — Paranoic structures; 3 — Oniroid structures; 4 — Dysesthesia structures; 5 — Maniac-depressive structures; 6 — Confuso-stuporous structures; 7 — Schizophrenic structures; 8 — Demential structures.

It should be noted that the structures with the deepest degree of dissolution could contain, at their onset or during their regressive trend, the more superficial degrees of dissolution with their symptomatology, e.g., a schizophrenic structure could begin with maniac-depressive, oniroid, or other structural forms of dissolution. Also any structural level of global dissolution could ascend or descend on the regressive scale, and thus the clinical syndrome may show an improvement or an aggravation.

CONCLUSIONS

In the preceding pages an attempt was made to represent in the briefest possible way the major theses of a neo, or pan-Jacksonian conception applied to neurology and psychiatry, known as *organo-dynamism*.

Organo-dynamism does not search any novelty of "isms", nor any originality in astonishing psychopathological discoveries. It simply, by placing itself in the center of the contemporary psychopathological currents, tries to reconcile diverging roads of doctrinal controversies. It utilizes Jacksonian themes, but elaborates them in all directions and specially by introducing a dynamic component into them, it applies it vigorously to the field of psychiatry. In this dynamism it includes all apparently scattered conceptions of psychopathology from dynamo-genetic views of Meyer, to dasein-analysis of Binswanger and existential analysis of Jaspers, including also, and naturally the fundamentals of psychoanalysis. But organo-dynamism repudiates both mecanicism and psychogeneticism. Mental diseases are, according to this conception, all "somatoses", i.e., affections with an acquired or hereditary "etiology" which provoke a regression, or a non-evolution of psychic functions, so that psychoses and psychoneuroses are, at the onset of their movement, dependant upon a somatic pathology. But all of psychiatry will remain incomprehensible if a genetic psychology of evolution of psychic functions, the reverse of which would be psychoses, is not considered. This requires: 1) the necessity of envisaging the liberation of the dynamic of instinctivo-productive processes, and a subsequent "psychic-work" indispensable for the production of particular symptoma; 2) the substitution of the classical analytical semeiology by a "structural phenomenology" wherein the emphasis is based upon the penetration of the "significant ensembles" and "lived experiences" in each level of morbid personality and its "being-in-world (dasein) at that moment.

The consideration of thesis of the negative and the positive symptoms (the former being the result of somatic deficit, and the latter the result of the elaborative work of subsisting instances and subject to "strutural change" and "structural analysis" clinically), and global and partial dissolution brings three general consequences of some import:

1) *Antinosographism*: it denies the existence of any "entity" in psychiatry. An entity is a group of symptoms with a definit etiology; here the emphasis is based mainly upon the etiology regardless of how significant the clinical expression is. Antinosographism maintains that "mental disease is defined essentially by psychic disorder and not by its etiology". "Psychic disorder, i.e., a certain pathologic structure of consciouness and personality, constitutes the reality of a psychiatry clinic; psychic etiology, on the other hand, remains conjectural"^{7b}. The result is the following pregnant principle: *psychoses and psychoneuroses have an organic etiology and a psychic pathogenesis*. In other words what determines psychopathology is not the etiology (therefore, no nosographism) but the pathogenesis (therefore, the structural analysis of functional dissolution).

2) *Distinction between psychiatry and neurology*: not as two sciences, one "purely" psychic and the other "purely" organic, but as two sciences having for objects the study of different levels of dissolution of an orga-

nism. Psychiatry has for its object the study of global dissolutions of energetic psychic instances; neurology, the dissolution of instrumental functions.

3) *Limits of psychiatry.* In an integral mecanicist conception, psychiatric disorders are the diseases of the cerebrum as all other diseases are the result of the disorders of such and such organs. The same point of view, but in a reverse order, is held by an integral psychogeneticist conception which considers all mental diseases as the result of psychological perturbations. In the former with its organic finality, and in the latter with its psychic finality there are no limits for psychiatry, and cannot be.

In an organo-dynamist conception albeit there is considered an organic causality of mental diseases, these are not identified with that organic etiology. There exists an "organo-clinical digression" which is inexplicable by a pure organically considered causality. There remains a fossa, a digression between what an organic agent *does* and *appears* afterwards. This delimitation imposes itself by the disavowing of pure psychologism, particularly in regard to superior human activities (esthetic, mystic, etc.). In this regard, says Henri Ey, "the domain of psychiatry opposes itself to the domain of freedom and without this opposition psychiatry cannot exist". Psychiatry, in other words, is the *pathology of freedom*.

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