

AN ADLERIAN VIEW OF THE SCHREBER CASE

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This is an attempt at an interpretation of the Schreber case from the Adlerian viewpoint, made possible by the recent translation of Schreber's *Memoirs* (18). The case has become famous in the history of psychopathology since it furnished the basis on which Freud presented his theory of paranoid schizophrenia (11).

Daniel Schreber, a jurist, stood as candidate for election to the German Reichstag in 1884. In 1885, he suffered an illness which was diagnosed as hypochondria. All we know about the illness is that it had no elements of the "supernatural," i.e., there were seemingly no gross paranoid symptoms. After several months Schreber gradually recovered. In 1893 he became *Senatspraesident* of the court at Dresden (Chief Justice of the Supreme Court of Saxony). Several months after assuming his post, he again became ill. The details of this illness are described, from his point of view, in his *Memoirs*, published in 1903, a remarkable document. His descriptions are thorough, clear and perhaps chronologically correct; but his interpretations of the symptoms are, of course, the delusions of a psychotic. Chiefly, he felt he was being forcibly transformed from a man into a woman ("unmanned"). He was "persecuted" first by his physician, Dr. Fleschig, later by God. Eventually he believed himself to be the Redeemer who, by becoming a woman, would save the world from evil that had taken place. Schreber's report includes a world-destruction delusion and shows his gradual paranoid reconstitution and partial reacceptance of (or return to) reality. Macalpine and Hunter (16), the translators and editors of the English edition, point out that Schreber had almost every symptom of paranoid schizophrenia. When he partly recovered, in 1901 or 1902, he was successful in having his rights restored to him by pleading his case well before the court. The court found him still insane but competent to manage his own financial and social affairs.

FREUD'S INTERPRETATION

According to Freud (11) the exciting cause of Schreber's illness was a passive homosexual wish for intimacy with or love from his physician, Dr. Fleschig. Why this wish appeared at this time was not known. The attraction for Fleschig was a feeling "transferred" from either Schreber's brother or father, or both. The homosexual impulse or fantasy was, however, unacceptable to Schreber. Thus an intense defensive struggle resulted which became manifest in the symptoms, especially the delusions.

Delusions of persecution to ward off a homosexual wish-fantasy are characteristic of paranoia. While social humiliation and slights

are "prominent features," the main problem in paranoia is the homosexual component of the affective life.

The delusions of persecution were followed by delusions of grandeur. Schreber began to think of himself as a Redeemer, and of God (a father symbol) as his persecutor. The delusion of "being unmanned" (to be explained later) by God was more acceptable than "being unmanned" by Fleschig, and so Schreber found a more satisfactory paranoid solution to his paranoid dilemma.

The mechanism characteristic of paranoia is projection. The paranoiac is fixated at the narcissistic stage and has regressed from sublimated homosexuality back to narcissism. The precipitating cause of the breakdown is a frustration in personal relationships with either sex, accompanied by an intense wave of libido. As a result of the regression, the libidinal cathexes to the outside world are withdrawn. The internal catastrophe is projected, and the patient feels that the world has been destroyed. The delusions are, then, attempts to reconstitute the world, attempts at recovery. The fixing of the libido on the self results in megalomania.

These are the major items in Freud's theory of paranoia. He also discusses "dementia praecox" briefly, stating that there the point of fixation is earlier than in paranoia. The two conditions may occur together when there are two or more points of fixation.

CRITIQUE OF FREUD

Freud's theory of paranoia became so generally accepted by psychoanalysts that in 1940 Knight could write: "Perhaps no psychoanalytic theory of a psychosis rests on firmer foundations or has been less frequently attacked by critics of Freud" (14). Indeed, most psychoanalysts have either accepted Freud's position in all major points or have discussed the topic in terms of "object relations" (10). But even in wider psychiatric circles the view of paranoia advanced by Freud in his discussion of the Schreber case is regarded as if it were fully validated (17, p. 231).

How firm are these foundations? How well is Freud's view validated?

(a) Macalpine and Hunter accuse Freud of having selected from the available material only those parts which supported his contentions. Later studies generally did not go to the original source but merely re-examined Freud's one-sided selections. "All confirmatory studies of Freud's paper . . . are based exclusively on manipulating

those parts of Schreber's memoirs which Freud extracted in order to prove his point" (16, p. 371). It is precisely in order to make a fresh interpretation from all the original Schreber data possible, that Macalpine and Hunter provided their translation of the *Memoirs*.¹ From an examination of these complete data Landis arrived at the conclusion: "Anyone who reads Schreber's *Memoirs* cannot help having doubts about Freud's interpretations of Schreber's experiences" (15).²

(b) New material has generally not confirmed the relationship between paranoia and homosexuality postulated by Freud. In a study of 80 cases diagnosed as paranoid schizophrenia Klein and Horwitz found: "The paranoid mechanism cannot be explained solely by homosexual conflict despite the convincing evidence of its pertinence in certain cases. It is so obvious in the cases in which it occurs, that the limits of its application are all the more surprising" (13). Dreikurs also found some paranoid schizophrenics who exhibited overt homosexual behavior and admitted homosexual desires, and points out that in such cases it is not possible to consider the delusions to be a defense against homosexual feelings (9).

Grauer (12) examined the Rorschach protocols of 31 paranoid schizophrenics for signs of homosexuality. Since the delusion was considered by Freud a defense against the appearance of the homosexual behavior, one should *not* expect more overt homosexuality in paranoid psychosis. Since the Rorschach is assumed to reveal unconscious phenomena, on the basis of Freudian theory the hypothesis would appear justified that cases of paranoid schizophrenia should reveal more indices of homosexuality in their Rorschach protocols. Grauer found, however, no statistical difference in homosexual content between the records of paranoid patients and nonparanoid psychotics.

From such studies in general Walters concludes: "A very large discrepancy has been demonstrated between the generally accepted relationship and the quantitative studies of paranoia and homosexuality;" it was "the prestige of Freud's backing," rather than empirical fact, which "has continued to give his hypothesis a dominating role in the psychodynamic interpretation of paranoia" (20, p. 337, as reported in 17, p. 231).

¹Macalpine and Hunter's own reinterpretation is in terms of a reactivation of unconscious, archaic procreation fantasies (16, p. 386).

²In this connection it is interesting to note that Freud ends the introduction to his analysis of the Schreber case with the request: "I would ask my readers to make themselves acquainted with the book by reading it through at least once beforehand" (11, p. 389).—Ed. note.

ADLER'S THEORY OF SCHIZOPHRENIA AND PARANOIA

Before offering our interpretation of the Schreber case an outline of Adler's theory of schizophrenia and paranoia would seem to be indicated.

Self-centered, high personal goal. Life style is the term eventually chosen by Adler to denote his conception of personality structure. Drawing particularly on Adler's later writings, Kurt Adler (8) characterizes the development of the schizophrenic life style as follows: The individual has a relatively great feeling of inferiority. By way of compensation for this, an extremely high goal emerges. To maintain such a goal in the face of reality requires special safeguarding devices. Increased self-centeredness is engendered which interferes with the development of social interest. The outside world is then seen as increasingly hostile and frustrating and the pre-schizophrenic withdraws from real life-problems which require cooperation for their solution. Failing to develop his social capacities and communication, he fails to develop common sense and logic which are social functions. Instead he develops a private logic in the service of his personal goal, and his fantasy increases. To maintain the idealized aggrandized picture of himself, he shifts the responsibility for his failure to solve his problems to the people around him, whom he already considers hostile. He commits himself to the apparent objectivity of the hallucinations and thus frees himself from responsibility for his condition. The schizophrenic despairs of ever being of significance in the real world. Alfred Adler considered hopelessness such an important element in the development of schizophrenia that he believed, "We could probably, by systematic discouragement, make any child into a person who behaved like a schizoid" (6, p. 46).

Regarding paranoia specifically, Adler listed twenty-three characteristics of the "paranoid attitude" (5). Briefly summarized, these are: The paranoid is fighting against a possible or anticipated defeat in life. He feels halted in his progress toward his desired and expected goal. He has a profound feeling of dissatisfaction with life and with his degree of success in it. He manifests a belligerent type of psychological activity, directed toward a goal of personal superiority. To compensate for his impending defeat, he develops an attitude of criticism and hostility toward others who are made responsible for his own lack of success. He has as a guiding line the idea that he must always be given special consideration, and tends to picture himself as the center of his surroundings. These attitudes are "prepared early in

childhood, tested, blunted and protected against the most serious objections of reality" (5, p. 255). Every outbreak of paranoia occurs when the patient finds himself in a dangerous situation where he perceives that the place in life he seeks is definitely lost. "This happens as a rule on the eve of some undertaking, during its course, or when anticipating either a demotion or the coming on of old age" (5, p. 258). This is what Dreikurs has called a "crisis situation" (9). According to Adler:

Psychosis may be regarded as the intellectual suicide of an individual who feels himself unequal to the demands of society or the attainment of his own goal. In his backward movement there is discoverable a secret *actio in distans*, a hostility toward reality. . . . The self-evaluation of the paranoic [in line with his active, self-centered striving for universal superiority] is intensified to the point of similarity to the deity . . . [This compensation] shows its weakness in its speedy renunciation . . . of the demands of society, . . . the transference of the field of action to the domain of the non-real The patient clearly lacks faith in himself, and his mistrust and unbelief . . . force him toward the construction of cosmogenic and religious ideas. . . . These ideas of the paranoic are very hard to correct because the patient needs them just in this particular form if he is to establish his point of view They permit him . . . to adhere to his fiction of superiority without putting it to the test, for he can always ascribe the blame [for his failure] to the hostility of others (5, pp. 257-258).

Masculine protest. Adler's objections to the libido theory, used by Freud to explain paranoid schizophrenia, included three major points (3): (a) Libido is not the motive force behind mental illness; instead, the patient is motivated by the "final goal" he has chosen. (b) Sexual impulses do not cause illness. The sexual symptoms in the mentally ill originate in the imaginary antithesis between "masculine" and "feminine." Their sexual behavior in life and fantasy follows the direction of the imaginary goal of enhanced masculinity, the "masculine protest," in men as well as women. The picture of the sexual neurosis—which would include Schreber's delusions—is "nothing more than a portrait depicting the distance which the patient is removed from the imaginary goal of masculinity and the manner in which he seeks to bridge it" (3, p. x). The sexual symptoms are therefore a "jargon," a *modus dicendi*. (c) The assumption that the patient is under the control of infantile wishes is an error. "In reality, these infantile wishes stand under the compulsion of the imaginary goal" (3, p. x).

Adler's concept of masculine protest is often misunderstood. It embodies the neurotic's "wish to be a complete man," and should be

seen in connection with one of the fundamental hypotheses of Adlerian theory (6) which has its roots in biology. The hypothesis states that all life tends to move from "low" to "high," all living beings attempt to compensate for defects which have low survival value, and that man tries to compensate also for subjectively perceived defects, realistic or not (the feeling of inferiority), by trying to attain a compensatory and equally subjectively perceived position of strength or security.

The masculine protest includes the patient's idea that if he were a "real man" he would no longer be inferior or defective or at a disadvantage in life. If he makes being a "real man" (according to his private conception) his goal in life, he overvalues masculinity and its symbols, and tends to rebel against anything which, he fancies, makes him less masculine. Since this kind of goal corresponds to one of absolute superiority, the patient never succeeds in finding a satisfactory integration among his fellows. Therefore, the patient's quest for strength, security and significance is doomed to failure, and he never overcomes his inner feeling that he is inferior, no matter how much he deludes himself to the contrary.

Adler considered the particular form of striving for superiority which is expressed in the masculine protest to be a cultural phenomenon, resulting from the unequal position of the sexes in our society, with the higher value assigned to masculinity (4, p. 21).

The secondary, increased masculine protest. As early as 1910 Adler (1) pointed out that men as well as women have the capacity to be submissive as well as aggressive and that the former is frequently taken as being "feminine," the latter as being "masculine." When in a child and later in the adult there is uncertainty as to his sexual role, and the individual tends toward neurosis, "the natural uncertainty, the vacillation and doubt, become fixed and reinforcements are carried to both poles of the hermaphrodite nature" (4, p. 22). This is "psychological hermaphroditism."

Psychological hermaphrodites tend sometimes in the feminine and sometimes in the masculine direction. Along with this they will make efforts toward self-consistency . . . This usually initiates a compromise: feminine behavior in men (e.g. shyness and submission, masochism, homosexuality, etc.), masculine role in women (emancipation tendencies, polyandry, compulsion neurosis as disturbance of the feminine role, etc.). Or one finds an apparently random co-existence of masculine and feminine character traits (1, p. 76; 7, p. 47.) The neurosis breaks out when the masculine protest has failed in a main line. The feminine traits then apparently predominate, but only under continuous increase of the masculine protest and pathological attempts to break through along masculine side lines. The outcome of such attempts differs. Either they succeed without bringing real satisfaction

and harmony, or they fail likewise, as often in neurosis, and force the patient further into the feminine role, into apathy, anxiety, and mental, physical and sexual insufficiency, etc.—which are further on exploited as means toward power (1, p. 79; 7, p. 50).

This phenomenon of striving for masculine power through feminine means is what Adler called the “secondary, increased masculine protest through detours” (1, p. 80). It is understood as “the occasion for all perversions” (4, p. 22), including homosexuality, and may be found in all mental disorders, including paranoia (1, p. 77).³

The function of hallucinations. Regarding the phenomenon of hallucinations found in schizophrenia Adler stated:

This quality [the ability to hallucinate] is more clearly apparent and more easily discerned in childhood than afterwards. We [adults] are compelled either greatly to limit or even completely to exclude hallucination as such because of its contradiction with rational thinking . . . Only in those cases where the self has separated itself from the community and approximates a condition of isolation, are the clamps removed (2, p. 53). We regard the hallucination as the expression of a personality when in a peculiar position (2, p. 54).

“Both hallucinations and dreams . . . prove to be contrivances for objectifying those subjective impulses to whose apparent objectivity the patient unconditionally surrenders himself” (5, p. 259), allowing himself to move in his chosen direction without feeling responsible for such action.

SULLIVAN'S THEORY OF SCHIZOPHRENIA AND PARANOIA

The work of Harry Stack Sullivan, though independently conceived, in many respects is strikingly similar to the views of Adler, and advances, expands and adds to these views. According to Sullivan: “The paranoid dynamism is rooted in (1) an awareness of inferiority of some kind, which then necessitates (2) a transfer of blame onto others” (19, p. 54).

Sullivan, like Adler, dismisses the contention that repressed homosexuality causes paranoia, and explains, instead, that such a patient cannot face the idea of being intimate with anyone (19, p. 157). The frequent concern with homosexuality in such patients is ascribed to incomplete development of the personality in the preadolescent and adolescent phases (19, p. 150).

Sullivan says that the essence of the schizophrenic state is the failure of the self-system (a concept similar to Adler's life style) to reserve attention to the types of referential processes that can be consensually validated. Sullivan and Adler both consider “private sense” or “private logic” as key concepts. The psychotic operates according to a personal logical system which does not have “consensual meaning.” In Adler's words, it does not make “common sense.” It is,

³Freud, in his analysis of the Schreber case, mentions Adler's 1910 paper, stating that at one point Schreber manifests “a true masculine protest, to use Adler's expression” (11, p. 426), but otherwise briefly dismisses the paper.—Ed. note.

nevertheless, a system that the psychotic considers valid and which he constructs in such a way that reality is effectively disposed of and cannot interfere with the private logic.

"What we discover in the self-system of a person undergoing schizophrenic change is then, in its simplest form, an extremely fear-marked puzzlement . . . [using] rather generalized and anything but exquisitely refined referential processes in an attempt to cope with what is essentially a failure at being human—a failure at being anything that one could respect as worth being" (19, pp. 184-185). Thus Sullivan stresses, even more than Adler does, the extreme feeling of inferiority from which the schizophrenic suffers.

When he discusses the paranoid attitude, Sullivan says: "Here the paranoid dynamism—the transfer of blame—has come into being through shifting the mythological and diffusely focused thinking in the direction of one's being the apotheosis of all that one has wished to be" (19, p. 337). Thus, Sullivan also considers that the private goal of superiority is the key factor in paranoia.

One difference from Adler is that Sullivan uses the psychoanalytic concept of regression although without the ideas of fixation at developmental stages, whereas Adler speaks about "backward movement." For Sullivan the psychotic moves back to the private mental state of infancy. Adler is less concerned with the backward movement in *time*, but focuses on the social *distance* that the patient generates between himself and others; thus, "backward movement" is social withdrawal into a state where reality is discarded.

ADLERIAN INTERPRETATION OF THE SCHREBER CASE⁴

Adler seems to have mentioned the Schreber case only once (3, pp. 261-262), while describing the masculine protest: "The antithesis masculine-feminine was the important factor" in the development of Schreber's illness (3, p. 262).

An Adlerian interpretation of the case unfortunately suffers from the fact that, although Schreber did write about his family, this important information was at the time not acceptable for publication in the *Memoirs*, and is now lost. Nor do the *Memoirs* contain a single early recollection. Thus, the familiar material used by Adlerians to arrive at an understanding of a person, the family constellation and early recollections, are unavailable. Only the symptoms, the content of the delusions and hallucinations, an account of the course of the illness, and the report of Dr. Weber to the court are available.

Exalted goal. Throughout the *Memoirs* one finds hints, implications and sometimes definite statements which illumine Schreber's underlying values and his attitudes toward life. He evaluates himself highly, "a human being of high intellect, of uncommon keenness of understanding and acute powers of observation" (p. 62). His high standards are indicated when he stresses that on becoming *Senats-*

⁴In this section, page numbers without a reference number refer to the *Memoirs* (18).

praesident he wanted to do his job with "unquestionable efficiency" (p. 63). Since he states that the other judges with him were older and he felt he had to show his worth, one surmises that he needed an unquestionably superior position to be content and that in his moment of greatest success he most questioned his ability to succeed as he wished. Throughout, Schreber defends his own prestige and esteem, excuses all his behavior, rises—through his delusional reasoning—to a position superior to all, even to God. God is seen as the powerful creator who, out of ignorance, goes contrary to the "order of the world" (p. 75), but Schreber wins out over this powerful antagonist and competitor by reason of his superior intellect and natural morality.

Schreber frequently mentions his superior morality and his interest in order. "Few people have been brought up according to such strict moral principles as I, and throughout life practiced such moderation especially in matters of sex, as I venture to claim for myself" (p. 208). He pictures himself as the only person who knows the truth, and in his over-evaluation of the importance of knowing everything, he explains every event he observes in his own terms. "Order" is an important value. He prefers it to be *his* order; an order in which he is moral, pure, all-knowing; an "order of the world" which is more sublime than anyone else's (p. 54). He "proves" over and over again that he is "right," "truthful," "moral" and otherwise superior.

Masculine protest. Schreber who must have always doubted his masculinity was much concerned with the question of superiority-inferiority, expressed in the antithesis masculine-feminine. He refers to the higher value of masculinity, and his own worth as expressed in his masculinity. He describes the "male state of blessedness" (p. 52) as superior to the female state. During the early part of his illness, he tried to "act like a man," but the "voices" decried his lack of manliness (p. 108).

For Schreber, being "unmanned" (p. 99) was equated with "killing me" and "destroying my reason." "Unmanning" equalled "allowing my body to be prostituted like that of a female harlot." At the same time, all his nerves were pure and his purpose holy; therefore he was safe from permanent harm. He feared for "my life, my manliness, my reason" (p. 114). "I suppressed every feminine impulse," "timidity" and "feminine anxiety" (p. 129). Any indication of weakness whatever Schreber assigned to the female gender. All this accords with the concept of masculine protest.

Secondary masculine protest (psychological hermaphroditism). At a certain point Schreber decided he could better achieve his superior goal by being the female Redeemer of mankind rather than by continuing to "protest" his maleness. "Every other aim of manly ambition, and every other use of my intellectual powers in the service of mankind, is now all closed to me" (p. 149). It is, therefore, logical to behave like a woman. He thus took on the feminine role, which he then exploited as a means toward his goal of exalted superiority. He almost states in his own words the dynamics of this arrangement when he writes: "I would like to meet the man who faced with the choice of either becoming a demented human being in male habitus or a spirited female, would not prefer the latter" (p. 149).

The "order of the world" *requires* Schreber to experience the "voluptuous" sensations of a female having intercourse (p. 208). Thus he defends the integrity of his sexual morality while better playing the role of a woman (a person who in his eyes is naturally voluptuous, less moral and of lower intellect). The concept of "unmanning" is central to the development of his case. He first mentions a dream, or fantasy while half asleep, that it would be nice to be a woman having intercourse (p. 63). This foreshadowed the first illness. In the second illness he developed the delusion that his doctor and attendants were conspiring to turn him into a woman and abuse him sexually. Later it was God who wanted to "unman" him by means of divine rays and by first destroying his reason.

Schreber now becomes God's protagonist (Fleschig having long since been relegated to an unimportant position). He assumes that he is the only living human left since the world was partially destroyed in the titanic struggle between himself and God. In his delusions of grandeur he thus allocates himself a supreme role in which only God is worthy to be his opponent. Schreber found a reconciliation in the idea that he was a Redeemer who had to allow himself to be transformed into a female in order to carry out his mission.

He discovered that he can avoid the necessity of playing the male role by "proving" that God is transforming him into a woman and that this is a beneficial act for the whole universe because he will give birth to a new race of humans to repopulate the world. In this way Schreber can now be a person of even greater worth *by not being masculine*. He is even more important than God, because the latter now has to depend on Schreber to repopulate the world. Thus in one

stroke he established his divinity and excused himself from his perceived responsibilities of masculinity at the same time.

This is the point at which Schreber "broke down," the so-called "schizophrenic break" or the "fragmentation of the ego," the withdrawal from reality. It is at this point that the patient decides to disregard reality. The rest is attempts at restitution in line with his private logic.

Theme of the delusions. Here the author will develop a point, consistent with Adlerian theory, that the chief content of the schizophrenic's delusions and/or hallucinations shows the crucial mistake in his life style. The delusions point to the "imperative" goal that he believes is absolutely necessary to his worth as a human being; its lack would make him irrevocably inferior to his fellow men. For this imagined lack he constantly and unsuccessfully tries to compensate or cover up. The attainment of this superiority is the fixed goal he constantly pursues. Thus, if one patient's delusions center around money and wealth, we would expect that in his past life he always considered wealth or affluence a necessity without which he could not feel worthwhile. Another patient's delusions may be primarily religious, and we would expect a deep underlying concern with problems such as morality, eternal life, etc., depending on the particular religious training and conviction of the patient. The rule would be: What is most highly valued by the patient as making him worthwhile and having a place of significance among his fellows (whether it be masculinity, power, godliness, etc.) becomes in his delusions of persecution, what his persecutors try to destroy and what he usurps to himself in his delusions of grandeur.

The important issue for Schreber is his personal value which he equates with masculinity, intellect and morality. It is these which he fears he will lose; which he assumes his enemies are trying to destroy.

Having found his solution in slowly becoming a female in order to give birth to a new race of beings, this being the "true order of the world," Schreber now relates that he *has to work at being female* "in order to *prevent* the withdrawal of those divine rays" that are effecting the sexual transformation. If he tries to avoid behaving like a woman, his sense of well-being decreases (p. 210).

This passage has been overlooked by other commentators who have apparently only assumed that Schreber was rationalizing and justifying his playing the role of a woman. Actually, it is much more

than that. A delusional system needs constant reinforcement or it will dissolve under the impact of reality. This is especially true when enough restitution has occurred so that reality is not completely denied by the patient. From the Adlerian view, any symptom must be continually nurtured in order to maintain its effectiveness in accomplishing its purpose. Each patient finds justification for the existence of his symptoms in his own particular way. Schreber, by play-acting a woman, maintains and reinforces his delusion of being slowly transformed and keeps himself in training for the role he has chosen, just as a martyr type confirms his nobility and self-sacrifice by seeking to expose himself to situations where he can suffer. Whenever any stress occurs, he has one solution: He acts like a woman and he feels better. Even when no stress is apparent he may act like a woman in order to keep himself in training, so to speak, like a conscientious athlete. And yet his deep-down opinion of femininity is again apparent in his choice of cheap trinkets with which he bedecks himself when he acts the woman.

SUMMARY

According to Adlerian theory, Schreber did not at all become psychotic because he had homosexual impulses. He became psychotic because (a) he was isolated from his fellow men, (b) he overvalued the importance of his masculinity, his intellect and his morality, and (c) he felt completely lost when these were threatened when he was in positions of responsibility and faced with perhaps the most severe test of his actual abilities.

The moralistic, righteous, probably sexually inhibited Schreber finds surcease from his unsuccessful struggle to be a significant *male* by being transformed into a female of supreme significance, and justifies his abdication from his previous goal of intellectually and morally superior masculinity by convincing himself that feminine "voluptuousness" is a higher duty to God (18, p. 210).

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