

his case, but whether this man ---

- Q It would seem to you rather simulation of sanity than insanity, wouldn't it? A. That is perhaps the problem with regard to this case.
- Q I only ask you that one question, if you could limit yourself to that. It certainly would seem to you as likely to be a simulation of sanity as a simulation of insanity? A. Yes.
- Q It would. Certainly it would not be described as a highly intelligent method of accomplishing one's purpose if one had in mind to deceive physicians, first to invent symptoms and then declare they were invented? A. Or else it would be a very cunning method of simulating a transitory disorder.
- Q It would be so cunning you would hardly expect it from a man of his general type and education? A. Hardly.
- Q Hardly. To come to another and perhaps more serious aspect of this matter, I suppose that any man's diagnosis of any mental condition, especially one which has not developed into a definite classified type -- if there is any such thing -- of mental diseases, the history of the case is of extreme importance, is it not? A. Yes, sir.
- Q There may be types of insanity where a short personal observation, owing to the degree in which it has developed or to the definite nature of the symptoms, might be sufficient to identify the disease without any history? Of course, there might be such cases? A. Yes.
- Q But in view of the extreme complexity of this type of disorder, a knowledge of the previous condition of the patient -- especially as observed by trained observers -- of importance for any man, however acute in observation, does it not? A. If he is