Ludwig G. Kempe

multiple sclerosis. The author states: 'I discovered no cases in the literature of haemorrhage alone as a primary cause of this syndrome. It does, of course, occur secondary to thrombosis or tumour in the area affected.' We have been unable to find a single case in the literature with clinical and surgical correlation. The hypothesis that the lesion was the result of a small vascular malformation destroying itself at the time of rupture seems most acceptable.

SUMMARY

One case of the Wallenberg syndrome is reported. The pneumoencephalographic study showed a mass lesion of the fourth ventricle and at operation an intramedullary haematoma was found and evacuated. The possibility of a small arteriovenous malformation being the aetiology is discussed.

REFERENCES


The December 1963 Issue

THE DECEMBER 1963 ISSUE CONTAINS THE FOLLOWING PAPERS

The relationship between enzyme activity and neuroglia in the prodromal and demyelinating stages of cyanide encephalopathy in the rat M. Z. M. IBRAHIM, PHILANDER B. BRISCOE, JR., OLGA B. BAYLISS, and C. W. M. ADAMS

The descending respiratory pathway in man P. W. NATHAN

Effect of alpha methyl dopa on experimental tremor H. SCHNIEDEN

A controlled clinical trial of alpha methyl dopa in Parkinsonian tremor D. O. MARSH, H. SCHNIEDEN, and JOHN MARSHALL

Hereditary spastic ataxia simulating disseminated sclerosis MOHSEN MAHLOUDJI

Veterinary workers and disseminated sclerosis A. M. G. CAMPBELL

Hereditary spastic paraplegia PETER F. ROE

Nerve fibre size in the carpal tunnel syndrome P. K. THOMAS and P. M. FULLERTON

Aberrant nerve fibres within the spinal cord J. TREVOR HUGHES and BETTY BROWNELL

Cerebral pathology in subarachnoid haemorrhage BARBARA SMITH

A perceptual maze test sensitive to brain damage A. L. BENTON, A. ELITHORN, M. L. FOGEI, and M. KERR

Studies in spina bifida Part IV The frequency and extent of paralysis P. A. DORAN and A. N. GUTHKELCH

Proceedings of the Society of British Neurological Surgeons: 68th meeting

Book reviews

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BRITISH MEDICAL ASSOCIATION, TAVISTOCK SQUARE, W.C.I., price 18s. 6d.

W. RITCHIE RUSSELL


Many will welcome this new venture under the editorship of Dr. Graeme Robertson. This first volume has been published at the expense of Ciba Limited, and as no price is mentioned presumably the way to get a copy is to write for a free issue to The Editor, 33 Collins Street, Melbourne, C.1, Victoria, Australia. If this is to grow into a more formidable journal, it will probably be necessary to widen the scope substantially beyond a report of the proceedings. However, we wish those concerned every success.

SYMPOSIUM NEUORADIOLOGICUM (VII)

The seventh Symposium Neuroradiologicum will be held in New York City at the Waldorf-Astoria Hotel from 20 to 25 September 1964.

In addition to essays on subjects of diagnostic and therapeutic neuroradiological interest, there will be a symposium on Radiation and the Nervous System. The latter will include essays on radiobiology, effects of radiation encountered in outer space, and the use of ultra-sound and radioisotopes in diagnosis and therapy.

The official languages of the Symposium will be English, French, German, and Spanish. Application forms may be obtained from the President, Dr. Juan M. Taveras, Neurological Institute, 710 West 168th Street, New York 32, New York.

The New York World’s Fair will be in progress at the time of the Symposium.

CORRECTIONS

There are certain printing errors in the paragraphs from the paper ‘Nerve fibre size in the carpal tunnel syndrome’ by P. L. Thomas and P. M. Fullerton (J. Neurol Neurosurg. Psychiat., 26, 520) in the section ‘Electrophysiological Studies’. The corrected paragraphs are as follows:—

In a normal subject, when the median nerve is stimulated at the wrist, the average latency to the onset of the action potential recorded from the abductor pollicis brevis is 3.8 msec., with a range of 2.9 to 5 msec. (Thomas, 1960). The normal conduction velocity in the fastest motor nerve fibres to this muscle between the elbow and wrist is 57.2 m./sec. with a range of 51.8 to 67.1 m./sec. (Thomas, Sears, and Gilliatt, 1959).

When the right median nerve of the patient described here was studied, the shortest latency from the wrist was found to be 9 msec. (Fig. 1). Conduction velocity between the elbow and wrist for these fibres was 31.3 m./sec. There was thus marked slowing of conduction distal to the wrist; conduction velocity was also below the lower limit of the normal range in the forearm, as is commonly found in patients with the carpal tunnel syndrome with considerable slowing below the wrist (Thomas, 1960).

The values for the motor nerve fibres to the left abductor pollicis brevis were within the normal range, the latency from the wrist being 3.5 msec. and conduction velocity over the forearm 66.6 m./sec.

The authors of ‘Studies in spina bifida’ Part IV (J. Neurol. Neurosurg. Psychiat., 26, 545) wish to make an amendment to the sixth line of the first paragraph of the Discussion. It should read ‘Two cases out of 15 operated upon during the first week of life...’

NOTICE TO CONTRIBUTORS

Would intending authors kindly note that in future they are requested to put in their lists of references the full title of the paper quoted together with the numbers of the first and last pages. An example of how references should now be set out can be seen on the inside front cover under the general instructions to contributors.