TREATMENT.


Twelve cases of general paralysis treated by malaria are here reported on. The writer candidly admits that the remedy is empirical and quotes the claims of Wagner von Jauregg and Weygandt in respect of its value.

Blood was obtained from a malarious patient by vein puncture during a paroxysm; in the general paralytics the site of injection was the loose skin below the angle of the scapula. In every case the infection ‘took’ and parasites were recovered from the blood. The infection was allowed to run its course unimpeded for any number of paroxysms up to twelve, and was arrested by quinine hydrochloride. In no case was there a relapse. The results were as follows. Two patients died, one of peritonitis and one of general paralysis; two improved both mentally and physically; four improved slightly; and three remained in statu quo.

Jauregg’s finding that the condition of the blood and cerebrospinal fluid is uninfluenced by the treatment is confirmed.

None of the patients was the worse for the treatment, and although none could be said to be cured, it is claimed that with improvement in six cases the experiment is justified. The writer concludes with the questions: Is it the high temperature that is incompatible with the well-being of the spirochetes? Is the permeability of the choroid plexus influenced by the malaria? Or, if neither, what is the subtle change?

David Matthew.


While admitting the impossibility of the restoration of degenerated cells, the author hoped for the destruction of the spirochaetes and the complete and permanent arrest of degeneration. The hypothesis is tentatively put forward that the modus operandi is by high temperature and impoverishment of the blood, with its sequel the reactivation of the immunity processes. This is what is aimed at. After experimental inoculation, a certain strain of benign tertian malaria was found to meet the conditions and was used to inoculate forty cases. The ages of the patients ranged between twenty-one and fifty-six years. Where possible the blood of the malarial patient was injected directly into the general paralytic, otherwise was citrated. It was found that the attacks of malaria could be controlled by quinine, and no relapses took place.

In all cases the diagnosis was confirmed by serological tests and a complete examination of cerebrospinal fluid. Five cases are summarised shortly in detail. Of the forty cases, three patients were discharged to their homes, and are now following their usual occupation. Three formerly ‘wet and dirty’ are now cleanly in their habits. Two formerly confined to bed are now ‘up and about.’

The author claims to have recorded preliminary observations only, in the hope that he may refer to them later. In conclusion he states that experiments on similar lines are being carried out, using the virus of relapsing fever, to which he hopes to refer on a future occasion.

David Matthew.

Focal infections of the cervix are regarded as one of the most frequent causes of nervous and mental diseases in women. The writer figures that approximately 40 per cent. of all parous and 18 per cent. of all nulliparous women are carrying a chronic infection of the cervical endometrium, which may at any time, under an increase of either a mental or physical load, produce the most disastrous results. It is stated that the following results were in evidence from the treatment of fifty cases. Improvement was noted in eighteen cases after removal of foci in teeth, tonsils, etc., but no case was cured. From removal of the focus in the cervix twenty-one cases were improved; fifteen of these had shown no improvement from the removal of the other foci, the other six had shown some. After the removal of their infected cervical endometrium seventeen cases are reported to have recovered mentally; eleven of these showed their first improvement after removal of foci in the teeth, etc., the other six showed no improvement until the cervix operation was done; then they recovered. The 21 cases improved were of the following mental groups: Unclassed, 3; exhaustion delirium, 1; manic-depressive insanity, not classified, 3; manic-depressive insanity, depressed, 4; epilepsy, 2; constitutional inferiority, 1; dementia praecox, 3; paranoid condition, 2; psychasthenia, 1; imbecile, 1. The 17 cases reported cured were as follows: Manic-depressive, not classified, 4; manic, 2; depressed, 5; toxic psychosis, 1; hypomania, 1; neurasthenia, 2; dementia praecox, 1; unclassified, 1. It is said that 14 of the 17 cases reported as mentally recovered have remained so four years later. It must be understood that these cases were thoroughly cleared of all other known areas of infection before they reached the gynaecological department.

C. S. R.