ABSTRACTS

He is convinced that Menière’s disease has nothing to do with the labyrinth itself, considered as a peripheral organ. His explanation is that it is caused by central disorder of the otolith nuclear complex in the medulla oblongata, and that it is akin, with migraine, to epilepsy, though not strictly either otic migraine or aural epilepsy. The supposition is that the diseased condition is preceded by toxic ear trouble and the existence of dominant irritation bombarding the medullary centres; when tension has reached a certain point, a sudden discharge occurs, viz., the Menière attack. Vomiting and the so-called ictus laryngeus are subsidiary phenomena. S. A. K. W.

PROGNOSIS AND TREATMENT.


Dr. Bordier’s treatment consists of a combination of spinal radiotherapy with diathermy. After determination of the main spinal site or sites of the lesions of poliomyelitis appropriate X-ray radiation is applied; for children under two years the dose is about 200 units R per seance, for those who are older, an increase in proportion; for the adult, 1000 units R. The direction of the rays is at right angles to the vertebral laminae. After three successive irradiations an interval of about 25 days elapses ere a second series is undertaken.

The diathermy part of the treatment is intended to favour the nutrition of the tissues of the paralysed limb. It should be utilised from the outset, independently of the radiotherapy, and treatment should be performed daily, for about ten minutes. Dr. Bordier also employs the sinusoidal current. He gives figures derived from the results of this treatment in other hands than his own, according to which cures are claimed in 15 per cent. of cases, and amelioration in 75 per cent. (total number of cases treated, 65).

S. A. K. W.


The interest of this brief communication resides in the description of the treatment of acute cases of epidemic encephalitis by dye-therapy. A solution of neutral acriflavine is freshly prepared, dissolved in normal saline, boiled and cooled to body temperature and given preferably by syringe with a fine needle and injected slowly. The author begins with 10 c.c. of 0.5 per cent. solution of neutral acriflavine in normal saline, and repeats the intravenous injections daily with a gradual increase till 25 c.c. is reached. He gives details of several cases in which excellent results were promptly obtained.

S. A. K. W.