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*Nerve Lesion in Anemia.*—In four cases of pernicious anemia examined post mortem, Weigert-Pal sections of peripheral nerves showed evidence of degeneration. (E. A. C.)

ALLGEMEINE ZEITSCHRIFT FÜR PSYCHIATRIE UND IHRE GRENZGEBIETE


Aufgaben und Grenzen von Gesetzgebung, Rechtsprechung und Heilkunde, erörtert an den Beziehungen zwischen Eheanfechtung, Erbkrankheits- und Ehegesundheitsgesetz. (Medico-legal aspects of marriage and sterilization.) F. Neukamp. 3.

Die Eltern der Hilfsschulkinder. (The parents of backward children.) W. Busse. 42.

Über Dauerschäden nach Hirntrauma bei Kindern und Jugendlichen. (Permanent lesions following cerebral trauma during childhood and youth.) F. Faust. 72.

*Die traumatische Epilepsie, unter besonderer Berücksichtigung der an der Psychiatrischen und Nervenklinik zu Jena in den Jahren von 1920-1935 behandelten Fälle. (Cases of traumatic epilepsy admitted to the Jena Mental and Neurological Hospital from 1920 to 1935.) W. Seydel. 94.

*Disposition und Belastung zur Progressiven Paralyse. (Hereditary disposition to G.P.I.) A. Stießmann. 115.


Die Breite Wiese bei Lüneburg. Ein Beitrag zur Kenntnis der Irrenpflege in Niedersachsen von 16 bis 18 Jahrhundert. (The Breite Wiese Mental Hospital. Psychiatric treatment in the 16th-18th centuries in Lower Saxony.)

Traumatic Epilepsy.—The total number of patients with traumatic epilepsy within 15 years was 250. In 76 per cent. there was a severe trauma with fracture of the skull and coarse lesions of the brain. The free interval between trauma and first attack was on the average 2 years 7 months. In the 102 cases from the war (gun-shot, shell) the interval was even larger, with an average of 3½ years; 30 out of the total number had only epileptic equivalents; in 21 per cent. the attacks were of Jacksonian type; 40 per cent. showed definite psychological changes; 6 per cent. developed a true dementia. (K. S.)

Hereditary Predisposition to G.P.I.—In 88–3 per cent. of 206 male patients and in 92–1 per cent. of 64 female patients there was a higher percentage of psychoses in the family than in the average population. The majority of the patients showed traces of mental abnormality before the time of the luetic infection. (K. S.)

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Adjustment and its Limits. E. Kahn. 1,277.

*Clinicopathological Considerations for Differential Diagnosis between Juvenile Paresis and Other Forms of Encephalitis.* A. Ferraro, S. E. Barrera, and H. S. Gregory. 1,291.

Abstract of “One Hundred Years of Non-Restraint.” E. Messinger and M. A. Amdur. 1,307.
The Pharmacological Shock Treatment of Chronic Schizophrenia. I. Murray-Rossen and W. B. Cline. 1, 123.


*The Use of Intravenous Methylene Blue in Status Convulsivus. L. Kaijdi and C. V. Taylor. 1, 369.


The Organic Background of Obsessions and Compulsions. P. Schilder. 1, 397.

The Dynamic of the Combination of Personality Types. E. E. Hadley. 1, 417.

Psychoanalytic Contributions to the Conception of Disorder Types. N. L. Blitzen. 1, 431.


Juvenile Paresis and Other Forms of Encephalitis.—A case is described of a nine-year-old boy presenting a syndrome indicating general involvement of the C.N.S. and progressing with a febrile reaction to a fatal termination within a few months. The pathological process involved predominantly the smaller blood vessels of the cortex, the ganglion cells, and the microglia. The blood-vessel changes showed perivascular infiltration with round cells and plasma. The nerve-cell changes varied from slight swelling to acute cytolysis. The microglial changes included formation of rod cells and numerous nodules distributed through the entire nervous system including the spinal cord. On the basis of the rapidly progressive course, the negative serological findings, the presence of numerous nodules throughout the nervous system, a diagnosis of juvenile tabo-paresis was considered unjustified. A diagnosis of acute polioencephalitis was given.

Mental Disorders and Metrazol Convulsions.—A series of determinations of pH, lactic acid, glucose, CO₂, phosphorus, calcium, and chloride was obtained in nine patients who were being treated by metrazol convulsions. Blood was drawn at varying intervals during the convulsions. At the onset the findings indicate lowering of the pH during active tonic convulsions. The maximum decrease of pH occurs from 2 to 4 minutes after the metrazol injection. The pH returns to the pre-injection level after about 20 minutes. In some patients there is an over-compensation of the acidosis, so that the blood becomes more alkaline. Within 3 minutes after the injection, the blood lactic acid reaches a value of 100 mg. per cent. or more and continues to rise. In one case it reached 160 mg. per cent. in 16 minutes. After 15-20 minutes it decreases, reaching normal in 45-60 minutes. After the tonic convulsions are over and clonic convulsions are proceeding, the conversion of lactic acid to glucose goes on rapidly and the blood glucose increases. The maximum attained at the end of the clonic stage was 206 mg. per cent. The CO₂ values during the convulsive stage decrease owing to hyperventilation. The inorganic phosphorus of the serum showed an increase during the convulsions. The calcium values remain within normal limits during the fits. The blood chlorides also remain within the normal range.

Rabies Vaccine in Epilepsy.—An attempt is made to verify the claims of Nikitin that epilepsy is beneficially affected by antirabic treatment. Thirteen patients suffering from epilepsy received a course of 21 doses administered daily. The vaccine was prepared by the Semple method. None of the patients became free from fits for any length of time, and there was no change in the frequency or severity of the attacks as a result of the anti-rabic therapy in 12 cases; the attacks ceased, however, for 2 months in one patient.

Intravenous Methylene Blue in Status Convulsions.—Many writers have reported favourably on the intravenous use of methylene blue in cases of poisons like cyanide and carbon monoxide. These results might suggest that methylene blue could be used to combat anoxia in the C.N.S. The authors have attempted to apply this treatment to the anoxemia which is alleged to occur in the C.N.S. in status convulsivus. Only those cases where the patient was completely unconscious between the attacks were accepted as being status. Twenty-two such cases of status were treated by intravenous injection of 1 per cent. methylene blue, the volume injected ranging between 2-20 c.c. It is claimed that the injection was followed by a rapid restoration to consciousness in 13 patients (59 per cent.), and rapid complete control of convulsions in 13 (59 per cent.), and a 66 per cent. reduction of status mortality in a chronic epileptic group.
*Relation between Precipitating Situation and Outcome in Manic-Depressive Psychosis. R. C. Hunt. 65.
The Symptoms and Treatment of Barbiturate Intoxication and Psychosis. F. J. Curran. 73.
Per cental Relationship between Blood and Sugar and Spinal Fluid Sugar in Mental Disease. E. P. Joppes and C. H. Stevenson. 117.
The Psychiatrist's Roles with his Patients. G. S. Sprague. 135.
Clinical Studies of Instinctive Reactions in New Born Babies. M. A. Ribble. 149.
The Morbidity Incidence of Degenerative Somatic Diseases in Psychotics in Comparison with the Same Type of Disease in Comparable Age Groups in Civil Life. F. S. Caprio. 185.
Mental Changes in Chorea Minor. D. Shakkan. 193.
*Results of Non-Specific Treatment in Dementia Praecox. C. O. Cheney and P. H. Drewry. 203.
The People versus Robert Irwin, Charged with the Murder of Three Persons. 219.

Auditory Apparatus in Auditory Hallucinations.—Patients experiencing auditory hallucinations have been known to have disorders of the auditory apparatus. The purpose of this study is to determine the incidence, nature, and possible causes of these disturbances. A hundred cases were studied. The clinical material was unselected except for the requirements that the patient had suffered from auditory hallucinations recently. The series included 62 males and 38 females, ranging in age from 14 to 58 years. The auditory apparatus was carefully examined. Thirty-one patients were found to have an impairment of hearing, 19 cases of toxic deafness, and 2 of nerve deafness. Of the 19 cases of toxic deafness, 18 patients gave a history of a definite toxic factor, 16 alcoholism, 1 drug addiction, 1 toxæmia with a septic infection of the throat. No evidence of auditory hyperæthesia was noted. Some of the cases experienced hallucinations only in one ear, but the monaural hallucinations did not bear a constant relation to the deafness of the respective ears.

Precipitating Situation in Manic-Depressive Psychosis.—The author accepts the view of Rosanow as to the etiology of manic-depressive psychosis. He agrees that the bulk of the cases occur on an hereditary basis either under ordinary conditions of life or under the influence of external factors which are for the most part of psychogenic nature. The possibility of influencing the course of psychosis by therapy aimed at relieving the environmental stress is still a question of some practical importance. In order to study this problem the clinical records of 105 cases of manic-depressive psychosis are analysed. Of these cases 67 did not experience a serious precipitating situation, 15 had a serious situation which was relieved, and 23 had a serious situation which was not relieved. In the group without a serious precipitating situation 73 per cent. recovered with an average duration of 9-8 months. In the group with a serious situation which was relieved all recovered with an average duration of 9-4 months, but recovery did not always coincide with the time at which the situation was relieved. In the group with a serious situation which was not relieved 74 per cent. recovered with an average duration of 18-8 months.

NEGRO AND WHITE ADMISSIONS TO CINCINNATI GENERAL HOSPITAL.—A survey of such data as are available gives no support to the view that an innate hereditary difference exists between the negro and the white man with respect to his mentality, his instinctive expression, his potential adaptability. The present study is undertaken to discover whether the behaviour in psychopathic states, including the extremes of instinctive expression, and the disruption of the personality indicate the existence of modes of reaction peculiar to the coloured man. The analysis of a year's admissions to the Psychiatric Pavilion of the Cincinnati General Hospital corroborates the observations of Malzberg, who found the total annual incidence of psychosis among negroes in New York City to be about twice that among the white population. The individual clinical records of negroes suffering from psychoses indicate no characteristic types of psychopathic behaviour. The authors consider that the preponderance of psychoses among negroes is probably of environmental origin, though they adduce little evidence in support of this conclusion.

Non-Specific Treatment in Dementia Praecox.—Five hundred cases of dementia praecox were studied at a private hospital where the patients were offered facilities for intensive treatment which the majority of psychiatric hospitals did not find it possible to provide. The results are classified as regarding much improved, improved, and unimproved, and are offered as a basis for comparison with those obtained by specific treatments such as the insulin and cardiazol methods. In order to obtain a reasonably long period of observation, no patients admitted since 31st December, 1935, were included. Some of the 500 patients had a course of observation of 12 years and none less than 2 years. The general conclusions from the tables given would show that in a hospital giving intensive individual care and treatment it might be expected that at the end of their hospital residence 16 per cent. of the total number of cases will be improved, 14 per cent. much improved, and 7 per cent.
recovered. Of the catatonic patients, 13 per cent. will be improved, 19 per cent. much improved, and 10 per cent. recovered. Of the paranoid cases, 15 per cent. improved, 10 per cent. much improved, and 4 per cent. recovered. Of the hebephrenics, 26 per cent. improved, 10 per cent. much improved, and 2 per cent. recovered. In simple deterioration, 23 per cent. will be improved, 13 per cent. much improved, and none recovered. If the patients have shown symptoms for not more than 6 years before admission, half of them will be benefited and 10 per cent. will recover.

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A Theoretical Field-Analysis of Automobile-Driving.
J. J. Gibson and L. E. Crooks. 453.


Binocular Depth Contrast and the Conditions of the Binocular Field. H. Werner. 489.

Conditioned Discrimination: The Effect of Knowledge of Stimulus-Relationships.
E. S. Hilgard, R. K. Campbell, and W. N. Sears. 496.


Some Factors in Size-Constancy. N. M. Locke. 514.

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*Des Ulcérations Gastriques chez les Aliénés. (Considerées comme l'une des Causes du Refus de Nourriture.) (Gastric ulcers in the insane. Considered as one of the causes of refusal of food.)

*A Propos de l'Hygiène Mentale. (Quelques Réflexions.) (Some considerations on mental hygiene.)
Minkewy. 467.

Proceedings of the Société Médico-Psychologique.
L'Enseignement de Mangan a l'Asile Clinique St. Anne. Quelques Souvenirs. (The teaching of Mangan at the St. Anne's Clinic. A few souvenirs.) A. Filliassier. 487.

Scotoma avec Hallucinations Lilliputiennes d'Origine Épileptique. (Scotoma with lilliputian hallucinations of epileptic origin.) Laignel-Lavastine and Mignot. 491.


Gastric Ulcers in the Insane.—A clinical history of 10 cases of insanity is given. These cases had a common symptom in the refusal to take food. All were found post mortem to have ulcerative lesions of the gastric mucosa. All the 10 cases showed more or less pronounced vascular lesions in the floor of the third ventricle. Five of the cases appear to have been schizophrenics, three were general paralytics, and two were arteriosclerotic dments.

Retinal Circulation in Senile and Presenile Dements.—Basing their conclusions on the experimental evidence furnished by Lambert and later by Riser, Coriadeau, and Meriel, the authors assume that the arteries of both the retina and the cortical meninges have identical vasomotor reactions, although they both differ from the peripheral vascular reactions. They proceeded to investigate the retinal circulation in cases of mental disorder due to vascular lesions. They examined the retinal vessels in 25 cases of arteriosclerotic dementia. All these cases had lesions of an atheromatous type in the retinal vessels. Thirteen patients suffering from senile parenchymatous dementia had a normal fundus oculi in nine cases. The vascular abnormalities in the other four cases were attributable to age and general physical conditions. There is evidence of a parallelism between the state of the retinal vessels and those of the meninges in arteriosclerotic dementia.

Vol. 1. No. 5. May 1938.

Des Modifications qui Pourraient Être Apportées à la Loi du 30 Juin, 1838. (Modifications which could be made with regard to the law of 30th June, 1838.) J. Hamel and J. Lauzier. 561.


Syndrome Prénatal au Cours d'une Psychose Hallucinatoire Chronique: Hémorragies Menin- 


*La Rôle de la Syphilis dans la Génese de Certains Syndromes Psychopathiques de l'Adulte. (Forms of Frustes de la Syphilis Cérébrale.) (The role of syphilis in the genesis of certain psychopathological syndromes of the adult. Abortive forms of cerebral syphilis.) J. Dublineau. 1.


*Une Forme de Glossolalie. (Glossolalia par Suppression Littérature.) (A form of glossolalia. Consisting of suppression of words.) G. Tuelie. 31.


Action Favorable d'une Infection Rigue. (Ostéomyélite du Maxillaire Inférieur) sur et Dénommé Précoc Évoluant depuis Cinq Ans. (Favourable influence of an acute infection of osteomyelitis of the lower jaw in the case of a patient suffering from dementia præcox for five years.) G. Demay and J. Naudascher. 52.


Guérison et Réembauchage des Psychopaties. (The problem of re-employment of cured psychotics.) P. Courbon and J. Assued. 64.

La Phonopsychographie. ("Psychophonography.") P. Courbon. 67.

Grève de la Faim Poursuivie depuis 8 Ans par un Revendicateur pur. (Hunger strike carried on for 8 years.) Mile. S. Roussel, G. Daumezon, and J. Masson. 76.

Apparition Tardive de Troubles Psycho-Sensoriels et d'un Syndrome Parkinsonien chez une Kétomé- 
mane Vinf. Fois Condamnée. (The delayed appearance of psycho-sensory disturbances with a Parkinsonian syndrome in a ketomaniac convicted 20 times.) P. Scherrer. 88.

Dépersonnalisation, Déstabilisation, Aprooceptivité. Étiologie Anatomoclinique. (Depersonalization, etc. An anatomoclinical sketch.) M. Didé. 95.

Quelques Traitements de Maladies du Type Démence Précoc par l'Insuline et le Cardiazol. (Treatment of dementia præcox patients with insulin and cardiazol.) Leuiller, Leclerç, and Casalis. 103.

L'Épreuve de Lombard Appliqué en Psychiatrie. (Contribution à l'Étude des Reflexes Condition- 

Syphilis in Certain Psychopathic Syn-
Sclerosis and Other Diseases. N. Blackman and T. J. Putnam. 54.
*Intellectual Deterioration in the Psychoses. W. Malamud and E. M. Palmer. 68.
Malignant Tumor Within the Third Ventricle: Three Cases of Unusual Type with Invasion of the Ventricular Walls. F. R. Ford and W. Munroe. 82.

Vesical Activity associated with Cataplexy.—Cystometric readings were made on nine patients with catatonic schizophrenia associated with cataplexy. The resting intravesical pressure was usually high during filling of the bladder. Abnormal waves of contraction of the muscle were observed. The bladder in these cases had a greater capacity than normal. Although waves of contraction carried the pressure to 60 cm. of water, no fluid escaped from the urethra. The patients showed no ability to produce voluntary contraction of the muscle at the end of filling. The records showed distinct deviations from the normal. The changes in the vesical activity paralleled the degree of cataplexy. (R. M. S.)

Velocity of Blood Flow in Schizophrenia.—The authors' observations on the rate of blood flow in patients with schizophrenia do not corroborate the conclusion of Freeman that schizophrenia is characterized by an abnormal slowing of the circulation time. (R. M. S.)

Diseases of Muscle.—Feeding experiments on patients with progressive muscular dystrophy led to the following conclusions: When creatine is ingested, the absolute amount retained is not fixed, but is relative and dependent on the amount, within fairly wide limits, of creatine administered. The percentage retention, however, is constant. Only when very large amounts are ingested is the amount retained no longer proportional to the amount administered. In these instances, the absolute amounts retained are constant and apparently represent the maximum capacity of the body to hold exogenous creatine. (R. M. S.)

Enostoses of Calvarium.—A review of 3,250 protocols from hospitals for mental disease shows calvarial enostoses in 230 patients, or 7 per cent. Of these 230 patients, 181 were women and 49 men. The weight of the liver was lowered in 105 cases, the average being 815 gm. One hundred patients were under 5 feet and 6 inches (167.5 cm.) in stature. Seventeen patients were obese, but 53 were emaciated, while the majority were in the "fairly" or the "poorly" nourished group. Seventy-four patients had atrophy of the frontal portion of the brain (a common change in mental disease, but not in mental defect), while 156 did not. In 20 cases in which the pituitary was examined histologically, no constant change was observed. (R. M. S.)

"Silver Cells" in Multiple Sclerosis.—"Silver cells" are characteristic of multiple sclerosis. They appear to be phagocytes of glial origin, as Steiner described, and often contain yellow pigment. They are not confined to multiple sclerosis and syphilis, however. They may occur also in vascular lesions under conditions which appear substantially to exclude the possibility of local phagocytosis of micro-organisms.

The authors have not been observed by previous investigators in cases of a great variety of other conditions used as controls. Small though the material is, it appears sound enough to justify the conclusion that the argentophilic particles are not necessarily of spirochetal or bacterial origin. Their occurrence in vascular lesions, the fact that similar cells contain yellow pigment, and the demonstration in them of what is presumably iron by means of micro-incineration suggest that the silver-staining material may be of haematogenous origin. (R. M. S.)

Intellectual Deterioration in the Psychoses.—The present study is an analysis of the performance on the short form of the Stanford-Binet scale of a series of 200 deteriorated psychotic patients and 100 subnormal subjects, in the attempt to find significant differences which may be described in terms of objectively recognizable patterns of scatter differentiating deterioration from congenital defect and giving some insight into its functional nature. The findings may be summarized as follows: The performance of deteriorated psychotic patients differs both quantitatively and qualitatively from that of subnormal subjects at the same mental age level. Not only do psychotic patients tend to scatter more than subnormal persons, but some tests are found to be significantly easier for psychotic than for subnormal subjects and others more difficult. These differences can be described in terms of objectively recognizable patterns of scatter. Such patterns are useful, first, as supplementary diagnostic aids in differentiating deterioration and congenital defect and, second, as means of gaining some insight into the qualitative nature of deterioration. The patterns show a low but definitely positive relationship to the degree of deterioration. No significant relation is found between the patterns and the duration of the disease or the differential diagnosis. On the basis of analysis of the patterns, the hypothesis is advanced that deterioration manifests itself in the material studied in activities requiring the directional control of thought. The study shows the value of psychometry, as furnishing not measurements expressed as a single number or quantity without
meaningful relationship to the phenomena being examined but indexes to both quantitative and qualitative changes in underlying psychic function. (R. M. S.)

Friedrich's Ataxia.—Hasson concludes that the differences in the cord changes in Friedrich's ataxia and subacute combined degeneration are quantitative and are due to the time element; one is chronic degeneration and the other subacute. The medulla, pons, and cerebellum are not involved in Friedrich's disease, but are affected in Marie's ataxia. Lesions observable in the spinal cord in Friedrich's disease often occur in Marie's form, but the olivopontocerebellar changes so typical of the latter do not occur in the former. Friedrich's and Marie's ataxia are different morbid conditions: the one is a disease of certain tracts of nerve fibres, and the other of certain groups of ganglion cells. The degeneration of the posterior roots which often occurs in cases of Friedrich's disease of long standing is secondary to that of the posterior columns, in which it is primary. (R. M. S.)

Minerals in Brain Tissue.—Pathological tissue previously studied in micro-incineration work was subjected to spectroscopic analysis with the following results. The normal cerebral grey matter of the human adult is richer than the white matter in iron, calcium, magnesium, and sodium, while normal white matter is richer in phosphorus. The brain of the new-born human infant is richer in most elements, but poorer in iron, than that of the adult. The lowered iron content seems to correspond to the lesser vascular density of the brain of the new-born. In foci of ischemic necrosis, softening, and multiple sclerosis the alteration in the spectroscopic picture is surprisingly significant as compared with the intensive demineralization of the tissue demonstrated by micro-incinerated preparations in these conditions. However, while the tissue itself appears demineralized in micro-incinerated preparations, ample mineral is demonstrated in hypermineralized scavenger and glia cells, which stand out against the otherwise demineralized background of these lesions. Spectroscopic studies justify the conclusion that these scavenger and glia cells contain most of the minerals in about the proportions which normally are distributed evenly within the tissue, except for potassium, which is diminished in freshly softened areas, and for iron, which is increased in all these lesions. The iron in these lesions is probably hematogenous and points to vascular dilatation, stasis, or thrombosis in the areas involved. In dementia paralytica there is no absolute increase of iron. This tends to indicate that the loss of iron by decrease of the volume of the vascular bed due to narrowing and obliteration of cerebral blood vessels, especially capillaries, in this disease is greater than the increase of iron by perivascular and intraglial tissue deposits. In lead encephalitis, more lead is deposited in the grey than in the white matter of the brain. In edematous brain tissue, sodium and calcium are increased. This increase is relatively greater in the white than in the grey matter. The ash of a meningioma was found to be ten times as rich in calcium as the normal grey matter, while the other elements were diminished. The ash of a spongiosomal of mixed type, with a great deal of protoplasmic and fibrillary astrocytic differentiation, showed more potassium, but less phosphorus and magnesium, than the normal grey matter. (R. M. S.)


Familial Neurosyphilis of the Dementia Paralytica Type. W. C. Menninger and M. Grothahn. 343.


Treatment of Athetosis by Section of Extrapyramidal Tracts.—A series of 23 patients suffering from involuntary muscular movements of an athetoid character were subjected to section of the anterior column of the spinal cord, the operation being designed to sever the extrapyramidal motor fibres. There were three deaths in the series: 17 of the survivors have shown ranging degrees of improvement for periods up to five years. In the four cases in which there was no improvement, Parkinsonian tremor was present. (R. M. S.)

Blood of Schizophrenic Patients.—The distribution of carbon dioxide in schizophrenic patients is essentially lower than
in normal subjects. So far as the supply of oxygen is concerned, they do not differ from normal subjects, but show a certain degree of dysfunction in its utilization. (R. M. S.)

**Blood in Deficiency Diseases.**—The lipoids of the blood serum of 12 patients presenting severe symptoms of deficiency disease were studied. No evidence was obtained to indicate that prolonged subsistence on diets sufficiently lacking in vitamins B₁, B₂ (G), and possibly A to produce changes in the nervous system has an effect on the lipid content of the blood except that due to malnutrition. (R. M. S.)

**Cutaneous Localization in Man.**—Tactile stimulation of cutaneous sense organs involving pain and warmth endings, respectively, leads to a lesser error in localization than does nontactile stimulation of the same sense organs. This seems to be due to the fact that the touch sense is involved in the tactile experiments, although no conscious touch sensation is elicited. The significance of this phenomenon is discussed. (R. M. S.)

**Vol. 39. No. 3. March 1938.**

- Relation of the Cerebral Cortex to the Grasp Reflex and to Postural and Righting Reflexes. J. Bieber and J. F. Fulton. 433.
- Organization of Memory Traces in the Korsakoff Syndrome. L. Bender, F. J. Curran, and P. Schilder. 482.
- References to Sex Organs and Functions in Speech Productions of Two Preschool Children. A. A. Low. 519.

**Gerstmann Syndrome.**—The Gerstmann syndrome is characterized by finger agnosia, agraphe, confusion of right and left, and acalculia. Nielsen reviews the literature to which he contributes five personally observed cases. (R. M. S.)

**Relation of Cerebral Cortex to Grasp Reflex.**—Animal experiments led the authors to the following conclusions concerning the mechanism of the grasp reflex: The grasp reflex varies with the position of the body in space, directly with the righting reflexes. The grasp reflex is also to some extent influenced by the neck and labyrinthine reflexes when these are present. The skin receptors are unessential for elicitation of the grasp reflex and evidently play little part in its ordinary production. Stretch of the digital tendons is the most effective stimulus for the grasp after complete deafferentation of the arm muscles, tension on the shoulder muscles serves to evoke the grasp in an animal exhibiting the thalamic reflex pattern. When the shoulder muscles have, in addition, been deafferented, the grasp can be elicited by moving the animal rapidly through space. Since the grasp varies, as do the other righting reflexes, with the position of the body and since, if the animal succeeds in grasping an object when in the lateral position, the body is drawn automatically into the horizontal posture, it is concluded that the grasp is an integral part of the body righting reflex mechanism. (R. M. S.)

**Experimental Temporary Vascular Occlusion.**—The ash residue of anterior horn cells is altered after the spinal cords of rats are subjected to periods of total vascular occlusion. Periods of nonfatal ischemia result in excessive increase in minerals within the nerve cell, which persists in a disorganized manner for about one week. Reorganization of the mineral structure commences in one week and is not complete until after one month. Periods of fatal ischemia result in loss of minerals, which continues until the intra- and extracellular and the extracellular salts are equal. Functional activity is regained after sublethal injury at a time when excessive mineralization has begun, and the increase in minerals continues for several days longer. Vascular endothelial and neuroglia cells exhibit hypermineralization at a time when they are most actively proliferating. (R. M. S.)

**Histopathologic Changes in Brain in Hyperinsulinism.**—The pathologic changes induced by hyperinsulinism appear to be the result of anoxaemia—not anoxaemia from lack of oxygen following vascular disturbance, but intracellular anoxaemia, i.e. the inability to utilize oxygen in the presence of large doses of insulin. (R. M. S.)

**Memory Traces in Korsakoff Syndrome.**—The authors conclude that the psychology of the Korsakoff syndrome cannot be understood merely from the point of view of the
fading of memory traces. There is a different type of organization comparable with organizations in childhood and, under special conditions, in the normal person. (R. M. S.)

Circulation Time in Normal and Schizophrenic Subjects.—On the average, schizophrenic patients have an abnormally slow and a highly variable rate of blood flow. (R. M. S.)

Psychologic Structure of Catatonia.—Four common, definite, and related symptom groups found in catatonic patients were investigated by a psychopharmacological method. In these patients, who are otherwise approached with difficulty, a supporting structure was sought for the symptoms presented. Inability to choose among different lines of action was the only constant, fundamental factor found and is considered the most constant psychological basis on which the catatonic reaction rests. The other phenomena noted did not occur with sufficient frequency to be considered as other than conditioning factors which, with the psychosomatic peculiarities of a given patient, determine the variations noted clinically within the diagnostic limits of the catatonic group. (R. M. S.)

ARCHIV FÜR PSYCHIATRIE UND NERVENKRANKHEITEN


*Statistisches zur Frage der akuten und chronischen Encephalitis epidemica. (Statistical investigation on acute and chronic epidemic encephalitis.) H. Nagel. 94.

Eine rasche Bindgewebsimpregnationsmethode des Zentralnervensystems, besonders für Geschwülste. (Rapid impregnation method for the mesodermal tissue in the central nervous system, particularly for tumours.) A. Bonkálo. 102.

Zur Frage der chronischen Poliomyelitis. (On chronic poliomyelitis.) H. Lange. 103.

Chemie und psychiatrische Shocktherapie. (Chemistry and psychiatric shock treatment.) J. Schuster. 120.

*Ueber eine systematische Atrophie der Oberen Olive. (Atrophy of the superior olive.) E. Weinschedel. 219.

*Ueber eine systematische Atrophie der Oberen Olive. (Atrophy of the superior olive.) E. Weinschedel. 219.

Formen des Aberglaubens im Schwarzwald. (Superstition in the Black Forest.) K. Beringer. 228.

Ueber 2 Fälle von Trigeminustumoren mit Zwischenhirnsymptomen. (On two cases of trigeminal tumours with diencephalic symptoms.) W. Birkmeier and J. Silberpfennig. 255.

Systematized Atrophies of Central Nervous System.—An attempt is made to delineate atrophic processes from degeneration, necrobiosis, and so forth. Atrophies of system character include conditions such as Pick’s disease, olivoponto-cerebellar atrophy (now called atrophy of the pes pontis and inferior olive), posterior tract degenerations, atrophy of the peripheral motor neurone, and so forth. Many of these conditions are hereditary diseases, but it would be a mistake to postulate an anatomical criterion for heredity. The paper is rich in detail which must be read in the original. (A. M.)

*Statistics of Epidemic Encephalitis.—Details of 362 encephalitics who were treated in one hospital in Munich are summarized. The largest number of acute cases occurred during the period 1918–1920 and the months of January, February, and March show the highest incidence. The frequency with which various symptoms occurred are given. The more interesting findings regarding the chronic stage are as follows: Sluggish reaction to light with good reaction to accommodation was found in 17-7 per cent., nystagmus in 20-4 per cent., facial palsy in 30-6 per cent., sensory disturbances in 5-4 per cent., compulsion symptoms in 8-3 per cent., and epileptiform seizures in 2-8 per cent. When the interval between acute and chronic stage was investigated it was shown that 36-5 per cent. of the patients had some signs of Parkinsonism immediately following the acute stage. (S. L. L.)

Atrophy of the Superior Olive.—In eight cases of Huntington’s chorea, one case of Friedreich’s ataxia, and one case of atrophy of the cerebellar cortex a primary symmetrical atrophy confined to the superior olive was found. The involvement of this centre does not interfere with the function of hearing. (A. M.)
Effect of spiraea ulmaria and allisa plantago upon the central nervous system. R. Adelheim, C. Amsler, E. Rentz, V. Nicolajev. 338

Leberschädigung durch Impf malaria. (Damage to the liver following malaria treatment.) J. Jung and A. Krawczyk. 346.

Zur Frage der Schädigung des Zentralnervensystems durch Kurzwellenbehandlung. (Damage to the central nervous system following treatment by ultra-short waves.) O. Schiersmann. 363.

Fehldiagnosen bei Stirnhirntumoren. (Fallacies in the diagnosis of tumours of the frontal lobe.) R. Lemke. 381.

Der Markgehalt von Hirnzentren bei der makroskopischen Färbermethode von Mulligan. (The myelin content of brain centres demonstrated by the macroscopic method of Mulligan.) H. Scheibe. 391.


Das Schweizerische Strafgesetzbuch (21. Dez. 1937) verglichen mit der Strafrechtsreform in Deutschland vom psychiatschen Standpunkt. (The Swiss penal code (21st December, 1937) compared with the German penal reform from the psychiatric viewpoint.) E. Schultz. 469.

Microchemical Method for Determination of Alcohol.—By means of Widmark's micromethod it was found that under normal circumstances the alcohol content was five times greater in the blood than in the cerebrospinal fluid. There was no significant difference in various psychoses except in delirium tremens. After intake of ¼ litre of a 15 per cent. solution of alcohol the amount in the cerebrospinal fluid reached higher values than that in the blood and decreased more slowly to the norm. Even after 64 hours there was still an increase in the cerebrospinal fluid, at a time when the blood values were again normal. The authors point out the practical significance of their findings.

(M. A.)

Damage to Liver Following Malaria Treatment.—The authors studied the damage done to the liver of paretics who had been treated with malaria. Recent as well as late cases show marked parenchymatous changes. A reduction of the mortality has been brought about by giving glucose injections and avoiding the intravenous route for the inoculation. (S. L. L.)

Diagnosis of Tumours of Frontal Lobe.—Details of three cases are given. In two of them the diagnosis was only made when calcified tumours were shown by X-ray. In the third case a diagnosis of schizophrenia was made and treatment with insulin was started. The patient died during treatment and a large glioma was found. The author stresses a fact that extra-frontal tumours can produce psychoses which are very unlike the usual exogenous reaction type. (S. L. L.)

The Electro-encephalogram in Man.—In the first part of this paper Berger deals with the findings in epilepsy. He reports his failure to obtain electrencephalograms (E.G.G.) during a complete fit. The fit, however, is followed by a period during which the alpha-waves have disappeared while the beta-waves have increased. This is followed by slow alpha-waves which according to the author are identical with the delta-waves of others. During petitmal the alpha-waves are often replaced by high beta-waves also, or they combine to form slow waves. In the second part more general problems are discussed and the author repeats his statement that the alpha-waves do not originate in the occipital lobe or any other areas, but in the lower layers of the whole cortex, whereas the beta-waves come from the upper three layers. (S. L. L.)

BRAIN


"Aphasia" in a Partial Deaf-Mute. M. Critchley. 163.

Gliomatosis Cerebri. S. Nevin. 170.

Subacute Diffuse Ependymitis. R. M. Stewart. 192.

The Central Pathway in Man of the Vasomotor Nerves. T. Takeno, S. O. Marquis and D. J. Williams. 203.

Vasomotor Control of Cerebral Vessels. H. S. Forbes and S. S. Cobb. 221.

Observations on Headache.—An analysis of 100 consecutive cases of brain tumour showed that headache was the initial symptom in 83 per cent. of posterior fossa tumours and in 30-40 per cent. of supratentorial tumours. Headache was never the initial symptom in 9 cases of acoustic neurinoma. In 42 cases with unilateral headache the tumour was situated on the same side in 32 cases and in 6 cases was in the mid-line. Pain in the neck was present in 22 per cent. of supratentorial tumours and in 49 per cent. of infratentorial. In most cases frontal headache was also present. Headaches could not be related to the absolute level of the C.S.F. pressure, but was associated with sudden changes in pressure. This was thought to be due to the disturbed autonomic control of the intracranial vasomotor pressure relationship. The sensation was thought to arise from the cerebral rather than from the dura vessels, because tying the middle meningeal artery did not influence histamine headache. Histamine injected into the internal carotid artery produced headache, but not when injected into the external carotid. The afferent pathway for the sensation of headache appeared to vary because unilateral section of the 5th nerve was successful in abolishing histamine headache on that side in only three out of five cases. (J. D. L.)

"Aphasia" in a Partial Deaf-Mute.—A
left-sided vascular lesion developed in a man of 42 who had been deaf since the age of 7. He was subsequently unable to write and had a marked defect in the ability to make signs, and what little vocal speech had remained was also disturbed. Associated with the aphasia was a slight right-sided facial weakness and hemihypesthesia. The cause of the aphasia appeared to be not apraxia but a disturbance in the preverbal processes. (J. D.)

Gliomatosis Cerebri.—A full report of three cases of diffuse neoplastic overgrowth of cerebral glial cells is presented, together with a review of the literature. The condition is probably a primary blastomatous malformation arising upon a congenital developmental defect. (J. D.)

Subacute Diffuse Ependymitis.—A case of subacute diffuse ependymitis is reported. The ependyma of the ventricular system was the site of a marked subacute inflammatory process which had caused partial occlusion of the iter with subsequent internal hydrocephalus. (J. D.)

Vasomotor Response to Pain.—The vasomotor response of the digital vessels in response to a painful stimulus has been investigated

archipallium has been stressed along with the variations in it due to the development of the corpus callosum and lateral ventricles. (J. D.)

Refractory Period of Olfaction and Vision.—The relative refractory period of visual processes is described and attributed to a central mechanism. This is correlated to the refractory period of other nervous processes. (J. D.)


Reflected Pain arising from Muscle.—Pain from deep structures was induced by the injection of hypertonic saline. Fascia and tendons give localized pain, while muscles give diffuse pain which is referred. The area of reference is associated with tenderness which is abolished by the injection of novocaine into the area while the pain is not affected. The distribution
of the pain follows a segmental pattern which differs from that of the segmental innervation of the skin. (J. D.)

Delay of Pain Perception in Tabes.—The length of the delay of pain perception in tabetics has been measured and the time found to correspond to that necessary for the appreciation of second pain in normal subjects. It was concluded that the delay in tabes was not due to an abnormal slowing of the impulses, but to a defect in those pain fibres which conduct rapidly. (J. D.)

Unilateral Retraction of Upper Lid in Graves' Disease.—Upper lid retraction and exophthalmos have been found to occur independently in cases of Graves' disease. The characteristics of each have been examined in unilateral cases. Lid retraction is manifested by the upper lid being separated from the pupil by a greater gap than normal, by elevation of the lower lid, and by a wrinkle of skin across the upper lid. Exophthalmos is characterized by protrusion of the eyeball and exposure of the sclera between the cornea and lower lid. (J. D.)

Familial Periodic Paralysis.—In two further cases a fall in serum potassium has been found to be associated with an attack of familial periodic paralysis and relief was obtained by the administration of potassium. During attacks potassium at which paralysis became evident in different cases varied and lower values have been found in ketosis without paralysis. Changes in phosphorus metabolism paralleled those in potassium and it appeared that the mechanism of the attacks was related to an abnormality involving hexosephosphate. (J. D.)
Electro-encephalographic Studies of Hysterical Anæsthesia.—On applying a sensory stimulus to the normal half of the body, the Berger rhythm was interrupted; stimulation of the anaesthetic region caused no similar change in Berger rhythm. In the second case cerebral action potentials of greater amplitude were obtained than in the normal subject: these were not altered by applying a stimulus to the anaesthetic half of the body. The author discusses these observations. (E. A. C.)

JOURNAL OF CLINICAL INVESTIGATION


The Effect of Eclamptic Blood upon the Urinary Output and Blood Pressure of Human Recipients. E. W. Page. 207.


The Late Effects of Bilateral Carotid Sinus Denervation in Man. R. B. Capps and G. de Takats. 385.

The Renal Factor in Arterial Hypertension with Coarctation of the Aorta. D. A. Rytand. 391.

The Effects on the Cardiovascular System of Fluids Administered Intravenously in Man. II. The Dynamics of the Circulation. M. D. Altschule and D. R. Gilligan. 401.

Changes in Blood and Interstitial Fluid Resulting from Surgical Operation and Ether Anesthesia. J. D. Stewart and G. M. Rourke. 413.


On the Action of Synthetic Calcium D_{2} (Calciferol) in Chronic Parathyroid Tetany. G. Klatkin. 431.

Cyanoisis without Sulf- or Methemoglobinemia in Patients Receiving Sulfanilamide Treatment. L. C. Chesley. 445.


A Study of Some of the Physiological Effects of Sulfanilamide. I. Changes in the Acid Base

An "Acid" Phosphatase Occurring in the Serum of Patients with Metastasizing Carcinoma of the Prostate Gland. A. B. Gutman and E. B. Gutman. 473.


Tissue Pressure (Intracutaneous, Subcutaneous, and Intramuscular) as Related to Venous Pressure, Capillary Filtration, and other Factors. H. S. Wells, J. B. Youmans, and D. G. Miller. 489.


**Voluntary Muscle in Muscle Disease.**—There was a greater variation from the normal in the chemical composition of muscles from cases of progressive muscular dystrophy than in secondary atrophy of the muscle. This was shown in a diminution of creatin and acid extractable substances in progressive muscular dystrophy. (J. N. C.)

**Bilateral Carotid Sinus Denervation.**—Two cases with bilateral carotid sinus denervation and bilateral cervico-dorsal sympatheticcotomy have been studied. Some months after the operations, no elevation of blood pressure or of pulse rate was observed, but a marked postural hypotension was found. (J. N. C.)

*Proceedings of 30th Annual Meeting.*

Among a number of papers, the following were of interest:


Chemical studies of the blood were undertaken in single cases and a low potassium content of the blood found during attacks. No other significant chemical abnormalities were found.

- **Choline Esterase of Muscle in Myasthenia Gravis.** W. C. Studie and M. Jones. 536.

The muscle esterase content in a case of myasthenia was found to be normal. The beneficial effect of prostigmine was not due to an inhibition of muscle esterase. (J. N. C.)

**JOURNAL OF COMPARATIVE NEUROLOGY**

Vol. 68. No. 3. April 1938.

*Efferent Connections of the Flocculonodular Lobe in the Macaca Mulatta.* R. S. Dow. 297.

*The Relations of the Fascia Dentata, Hippocampus and Neocortex and the Nature of the Subiculum.* A. A. Abbie. 307.


**Flocculonodular Lobe.**—Discrete lesions were made in the flocculonodular lobe of the M. mulatta and the degenerated fibres subsequently traced. It was found that the flocculus sends all its fibres to the nuclei of Deiters and Bechterew. The nodulus and uvula send fibres to the fastigial nucleus, to the dorsal reticular formation, to the vestibular nuclei and to the medial longitudinal bundle. (J. D.)

**Hippocampus and Neocortex.**—Serial sections of the brains of a group of primitive mammals have been examined. It appeared that the fascia dentata, hippocampus, and adjoining neocortex develop from the same layer of cells, but the arrangement is distorted by the development of the corpus callosum. (J. D.)

Vol. 68. No. 4. June 1938.

*A Nervous Structure in the Pineal Body of the Monkey.* P. M. Levin. 405.


*The Optically Excitable Cortex in the Rabbit.* J. L. O'Leary and G. H. Bishop. 422.

*Further Determinations of the Numbers of Fibres and Cells in the Dorsal Roots and Ganglia of the Cat.* D. Duncan and L. L. Keyser. 479.


**Nervous Structure in Pineal Body of Monkey.**—It has been found that the pineal body of several species of monkey contains a structure composed of fine myelinated fibres, a few unmyelinated fibres, and numerous ganglion cells. Its connections are described. (J. D.)

**Origin of Cortico-Spinal Tract.**—By means of retrograde cell degeneration it has been found that the cortico-spinal tract in the monkey arises mostly from area 4 of Brodmann. However, some 20 per cent. arises from pyramidal cells in the parietal cortex. Area 4 may be divided into a narrow anterior zone which has no pyramidal system and a broad posterior zone which gives rise to the pyramidal projection. (J. D.)

**Optically Excitable Cortex.**—On electrical stimulation of the optic nerves changes in potential are found in the occipital cortex. The structure of this area of cortex in the rabbit has been studied as has also the spread of electrical activity in it. The possible correlations of the results of the two methods are indicated. (J. D.)
Dorsal Root Fibres and Cell Ratios.—The previous finding of a 1:1 ratio between the dorsal root fibres and the cells of the posterior root ganglia has been confirmed in the cat. The percentage of unmyelinated fibres in the posterior roots was found to vary from 2:8 in the first cervical to 7:6 in the eleventh thoracic. (J. D.)

Corpus Striatum and Rhinecephalon.— Destruction and stimulation of the corpus striatum in cats and guinea-pigs which had previously had excision of the ipsilateral motor cortex gave no results attributable to the corpus striatum itself. It was suggested that this system has no autonomous function, but only acts in conjunction with other forebrain systems. The results of stimulation of the brain stem in seven decorticated cats are reported. After removal of the neocortex certain aspects of the normal disposition were retained. (J. D.)

JOURNAL OF MENTAL SCIENCE

Vol. 84. No. 349. March 1938.

*The Impedance Angle and its Relation to Thyroid Function and the Mental State. H. Mannheim. 522.

Impedance Angle.—By means of the impedance angle it was possible to select cases of mental disorder suitable for thyroid therapy and to control the dosage of thyroid. (E. A. C.)


Vitamin C Content of Urine.—The average daily output of Vitamin C in the urine was examined in 50 patients: (1) depression, (2) epilepsy, (3) involutional depression, (4) Korsakow's syndrome, and 2 cerebral arterio-sclerosis. The output of these patients was lower than the output of members of the staff on the same diet. (E. A. C.)

JOURNAL OF NEUROPHYSIOLOGY


Electro-Encephalography in Cerebral Lesions.—The authors summarize by stating that “intracranial lesions are indicated and may usually be localized by the following electro-encephalographic phenomena: (1) very slow swings, 1 to 2 in five seconds; (2) slow waves from 1 to 3 per second; (3) spikes and saw-tooth forms; (4) electrical manifestations of localized epileptic seizures; (5) absence of or marked difference in the alpha rhythm on the two sides; (6) marked diminution or localized absence of electrical activity. Eleven cases are presented, in all of which the lesions have been localized more or less accurately by this method and which collectively show most of the above features.” (E. A. C.)

Cell Changes in Fever.—Experimental hyperthermia has been produced in dogs mainly by means of injection of typhoid toxin. A variable amount of chromatolysis was observed in three nuclei of the hypothalamus. (E. A. C.)
CURRENT JOURNALS


Zur Elektrodenanordnung bei den Registrierungen bioelektrischer Potentialschwankungen der Hirnrinde. (The arrangement of electrodes for the registration of action potentials of the cortex.) A. E. Kornmüller and J. A. Schäder. 287.


The Distribution of the Alpha Rhythm over the Cerebral Cortex of Normal Man. M. A. Rubin. 313.


Inhibition and Impulse Summation at the Mam-


JOURNAL OF NERVOUS AND MENTAL DISEASE


The Emotional Factor in Skin Diseases. E. T. Bernstein. 1.


Vol. 87. No. 2. February 1938.

The Significance of the Convulsive Reaction during the Insulin and the Cardiazol Therapy of Schizophrenia. I. v. Meduna. 133.


The Incidence of Pilonidal Sinuses in Mental Defectives. W. J. Johnson. 156.


Measurement of Intelligence. T. Braatoy. 265.

The Clinical Significance of Lumbar Radiculitis and of Neuritis of the Femoral Nerve. J. B. Doyle. 283.


Vol. 87. No. 4. April 1938.


Psychoses Among Followers of Father Divine. L. Bender and Z. Yarrell. 418.

Vol. 87. No. 5. May 1938.

Is There a Relative Increase in Mental Disease? B. Malzberg. 545.

Blood Pressure and Pulse Rate in Prison Psychosis. R. Schwarz. 556.

Insulin in the Treatment of Acute Mania. L. C. Grosh. 559.


Hemidecortication in Chimpanzee, Baboon, Macaque, Potto, Cat, and Coati. A. E. Walker and J. F. Fulton. 677.

Studies of Neuropsychiatric Data in Relation to the Motion of Growth: the Insulin Hypoglycemia
Thalamic and Subthalamic Syndromes.—Two cases are described clinically and anatomically. The first case showed the syndrome of the rubro-thalamic artery, the second case showed the syndrome of the rubro-thalamo-geniculo-cortical tract. Lesion of the n. ruber produced disturbance of posture of the contra-lateral head, trunk, and arm. Lesion of the ventral thalamic nucleus and subthalamic formations (corpus subthalamus, red nucleus, substantia nigra) produced intention tremor and ataxia. Circumscribed lesion of the posterior central ventral nucleus produced a circumscribed sensory disturbance. Both cases suffered from spontaneous unpleasant sensations (pain and temperature). Emotional disturbances are explained by the lesions of the ventral nuclei. Spastic crying is explained by lesion of the centre median or by bilateral lesion of the anterior segment of the internal capsule. Disturbance of consciousness is, according to the authors, due to lesions of the central grey matter and massa intermedia. (K. S.)

Hemiathectomia.—In a case of a localized atrophy of the four ulnar fingers of one hand autopsy revealed a tubercle occupying the homolateral dentate nucleus, its hilus, and the most oral quarter of the tegumentum of the pons, and the superior peduncle up to the decussation. Another small tubercle was found in the head of the caudate nucleus on the contralateral side. (K. S.)

Olfactory Disturbance and Horner’s Syndrome.—Twelve cases are described clinically. Simple unilateral or bilateral anosmia is mostly due to lesions of the olfactory bulbs. Symptoms of the neighbourhood are: mental symptoms due to frontal lobe lesions. Horner’s syndrome due to lesion of the carotid plexus (three cases), disturbances of taste, reflex differences, and sensory disturbances. Olfactory hallucinations are explained by cortical lesions. In only one case paradoxia combined with an intact sense of smell was observed. This is possibly explained by a lesion of the insula. (K. S.)

Huntington’s Chorea.—Nine families with Huntington’s chorea showed frequent occurrence of diabetes. In one case both diseases occurred in the same individual. Psoriasis also occurred more frequently than in the average population; in several cases the patient’s brother or sister or daughter suffered with psoriasis. (K. S.)

Tumour Cells in the C.S.F.—It is shown that a method first described by Alzheimer is considerably better for the demonstration of tumour cells in C.S.F. and cyst fluids than the simple stained smear preparations. (K. S.)

Tabetic Optic Atrophy.—According to Sobanski the diastolic pressure in the central retinal artery is abnormally low in the majority of cases of tabetic optic atrophy. The intraocular pressure is often higher than normally. These two factors are regarded as important for the pathogenesis of the disease. Therefore Sobanski proposed to lower the intraocular pressure by “cycloidalysis” (operative procedure which has been successfully applied against glaucoma) and following pilocarpine treatment. The authors tried this procedure in 30 patients. In six cases the visual fields were slightly improved. In three cases they became smaller after the treatment. Visual acuity improved very slightly in seven cases, and became worse in seven cases. (K. S.)

PHYSIOLOGICAL REVIEWS

Hormones and the Placenta. W. H. Newton. 419.

PSYCHIATRIC QUARTERLY

*Improvement and Recovery Rates in Dementia Præcox without Insulin Therapy. D. Whitehead. 409.

Some Comparisons between Insulin-Treated and
Recovery in Dementia Praecox without Insulin.—In this paper an attempt has been made to provide a study of control cases with a view to evaluating the efficacy of insulin treatment of schizophrenia. Ninety consecutive cases of dementia praecox entering the Utica State Hospital were studied. The admissions were in the fiscal year 1935-36 and the survey was made in January 1937 allowing from 6 to 18 months observation of each case. None of the cases had been treated by insulin. Of these 90 cases 9 recovered completely, 7 improved greatly, 20 improved, and 62 showed no improvement. When the cases were classified as to the duration of the psychoses it was found that: Under 6 months, improvement took place in 30 per cent. and 22 per cent. recovered. From 6 to 18 months 38 per cent. improved with no recovery. Over 18 months improved in 22 per cent. with no recovery.

Another survey was made of 105 consecutive admissions of dementia praecox cases during the fiscal year 1931-2. None of the cases were treated with insulin. The diagnoses were changed in three cases leaving 102 cases to be considered. Again classifying the cases according to the duration of the psychoses, it was found that when the duration was under 6 months improvement occurred in 61 per cent. with 5 per cent. recoveries. From 6 months to 2 years improvement occurred in 61 per cent. with no recoveries took place. Over 2 years' duration there was a 30 per cent. improvement with no recoveries. Thus in the survey of 102 consecutive cases of dementia praecox 5 years after admission, 51 per cent. improved, 27 per cent. were much improved, and 2 per cent. recovered.

Spontaneous Remissions in Dementia Praecox.—The material for this study consisted of the case records of 677 consecutive first admissions diagnosed as dementia praecox. These cases were admitted to the Rochester State Hospital between July 1927 and June 1934. For various reasons 36 of these cases were discarded from the statistical study. None of these cases had received any insulin treatment. In 101 catatonic cases 41.6 per cent. were much improved and 12.9 per cent. improved. In 151 hebephrenics 19.2 per cent. were much improved and 20.5 per cent. improved. In 218 paranoias 10.5 per cent. were much improved and 19.3 per cent. improved. In 161 cases of less than 6 months' duration 35.4 per cent. were much improved and 19.2 per cent. improved. In 150 cases of 6 to 18 months' duration 18.6 per cent. were much improved and 16.7 per cent. improved. In 350 cases of over 18 months' duration 10 per cent. were much improved and 15.4 per cent. improved. In all the 641 cases, 18.4 per cent. were much improved and 16.7 per cent. improved. The remissions developed on an average of 9.5 months after admission.

Insulin Treatment of Dementia Praecox.—This study is based on the histories of 1,039 patients with dementia praecox who were treated with insulin in several civil state hospitals. Of the 1,039 patients 12.9 per cent. were reported as recovered at the end of the treatment; 27.1 per cent. were much improved; and 25.3 per cent. were improved. 33.4 per cent. showed no improvement. Thirty per cent. died during treatment. Rates of recovery and improvement varied widely in the several hospitals. The control group consisted of 1,039 first admissions with dementia praecox, almost all of whom were admitted during the year July 1st, 1935, to July 1st, 1936. Each patient in this control group was under observation for at least 1 year, and most patients had been observed for 2 years. Of the control group, 3.5 per cent. were described as recovered, 11.2 per cent. as much improved, and 7.4 per cent. as improved. The paper includes a number of statistical tables dealing with the various correlations of the results of treatment.

Prognosis in Dementia Praecox.—The suitability of a dementia praecox patient to be given parole and the ability to complete successfully a full year on parole were the objective criteria used in this study of the prognosis of schizophrenia. The result of treatment was assessed on the ability of the patient to return home on parole and remain there for a year. 15 per cent. of such patients made a good remission, 38 per cent. a fair remission, and 47 per cent. either made a poor remission or were returned to hospital before completion of 1 year on parole. Insulin therapy was completed in 74 cases and
there was a control group of 638 cases. 62 per cent. of the 40 insulin treated patients who had suffered from dementia praecox for less than 2 years could be put on parole whilst in a control group of 638 cases with symptoms of similar duration, 54 per cent. were paroled. The authors consider that the quality and duration of the remissions in the two groups of cases must be studied before they can pronounce on the value of the insulin treatment at King’s Park State Hospital.

**REVUE NEUROLOGIQUE**

Vol. 69. No. 5. May 1938.

*Sur l’Idiote Amaurotique Juvenile. (Juvenile amaurotic idiocy.) G. Marinesco. 449.
Le Complexe Epithalamo-Épiphysaire. (The epithalamo-epiphyseal system.) G. Roussy and M. Mosinger. 459.
*Des Hematomes Sous-Duraux. (Sub-dural hematomata.) Riser, Ducuing, and Géraud. 471.
*De la Sclérose en Plaques Chez l’Enfant. (Disseminated sclerosis in a child.) L. Rimbaud, Riser, and Géraud. 477.

**Juvenile Amaurotic Idiocy.—A discussion by the author of the various classifications**


*Reconnaissance et Contrôle des Troubles Pupillaires Utilisables en Sémiologie et Neurologie. (Recognition and control of pupillary disturbances occurring in neurology.) Bollack and Monbrun. 590.*

**Valeur Sémiologique et Diagnostique des Troubles Pupillaires dans les Affections Neurologiques d’Ordre Médical et Neuro-Chirurgical. (Semiological and diagnostic value of pupillary abnormalities in neurological and neurosurgical conditions.) Velter and Hartmann. 629.*


L’Hémiballisme et le Corps de Luys. (The relationship of acute hemichorea to the body of Luys.) H. Marcus and H. Sjogren. 1.

La Mérallgie Paresthésique au Cours de l’Anevrisme de l’Aorte Abdominale. (Meralgia paraesthetica in the course of aneurysm of the abdominal Aorta.) A. de Castro. 29.


**RIVISTA DI NEUROLOGIA (NAPOLI)**

Vol. 11. No. 2. April 1938.

*La Reazione di Donaggio nell’ Epilessia. (Donaggio’s reaction in epilepsy.) P. Jedlowski. 145.*

*Sindromi Neurologiche da Intossicazione Emetica. (Neurological syndromes from emetine poisoning.) F. Vizzioli. 145.*


Il Problema delle Allucinazioni all’XI Congresso Internazionale di Psicologia. (The problem of hallucination discussed at the 11th International Congress of Psychology.) M. Gozzano. 166.

**Donaggio’s Reaction in Epilepsy.**—Donaggio’s precipitation reaction, due to the abnormal amounts of colloids in the urine and cerebrospinal fluid, has been investigated in epilepsy. The reaction is positive or if previously positive increased immediately after the fit. The maximum reading is generally found from 12 to 24 hours, though sometimes it occurs in 6 hours and sometimes as late as 42 hours. The intensity of the reaction on Donaggio’s scale is on the average 33, sometimes being as high as 45 to 51. In 88 cases the direction of the reaction was on the average 106 hours with a minimum of 42 and a maximum of 192. If the test is done at frequent intervals each patient shows a similar curve of intensity and duration for his fits which differ from the curves of other patients. Cardiazol convulsions produce a positive reaction, but it is much less intense and lasts a much shorter time than a true epileptic fit. Unless the fits are very prolonged hysterical convulsions produce no reaction and even if present in such prolonged attacks it is feeble and of short duration. (R. G. G.)
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Emetine Poisoning.—A brief review of the literature is given and two cases described. One, which had a very pro-
longed treatment, showed a polyneuritis of Dejerines pseudo-tabetic type, and the other, which had a maximal dose by the
intravenous route, developed a spastic para-
paresis. (R. G. G.)


Vesicular Cells of Mesencephalon.—The author shows that with the superior staining properties of Donaggio's method the
neurofibrillary network in the primitive "vesicular" cells of the mesencephalon extends throughout the cell and into the
axis cylinder and is not localized as was stated by Dide and Bauduin. (R. G. G.)

RIVISTA DI PATOLOGIA NERVOSA E MENTALI


Progressive Paralyses and Endemic Malaria.—The important question as to whether endemic malaria protects the
population from general paralysis is examined especially in relation to the malaria infested island of Sardinia. The
author concludes definitely that endemic malaria is not associated with diminution of incidence of general paralyses. Endemic
malaria is generally associated with a low grade of civilization and in such regions

syphilis may spread more readily and be treated less efficiently. But, however, such
considerations and the question of the dermotropism of the spirochete in lower
grades of culture and its neurotropism in higher grades complicate the statistical
records, the conclusion that the fact of having had malaria does not protect from
G.P.I. is not affected. (R. G. G.)

Brain and Spinal Cord Lesion Induced by
Potassium.—Parenteral administration of potassium cyanide will produce dis-
seminated demyelinating lesions of white matter throughout the nervous system.
Donaggio's technique shows the stages through which the degenerated areas pass.
These resemble the lesion of Schilder's disease and the author suggests that this
represents one of the rare occasions on which experimental lesions in animals and
acquired human disease are identical. (R. G. G.)

Optic Nerve Changes in Quinine Intoxication.—The ambliopia and blindness which may occur when quinine hydrochloride is
administered is due to primary degenerations of the nerve fibres which may be
demonstrated by Donaggio's technique and is not due to secondary effects induced
by vascular changes. The initial stage of
Pathological Anatomy of Guillain-Barre Syndrome.—A typical case suddenly died when she was beginning to get better. The only lesion discoverable in the nervous system was in the roots especially in the lumbar region, the anterior being affected as much as the posterior. There was no indication of inflammation, but only a noteworthy vascular congestion which resulted in rupture of the neighbouring capillaries with small extravasations of blood. This would explain the flaccid paralysis without atrophy, the only partial loss of sensation, the spontaneous disappearance of all symptoms, and the dissociation of albumen and cell increase. It is unlikely to be due to a neurotropic virus, but may be an allergic reaction such as possibly may explain a post-diphtheritic neuritis. (R. G. G.)

Acute Febrile Polyneuritis.—A case with a complete post-mortem examination is presented. The main incidence of the lesion is on the peripheral nerves, but changes also occur in the grey matter of the spinal medulla and of the cranial nerve nuclei. These changes are not severe and are limited to single cells. In this case, in contrast to those of other authors, the alterations were of a degenerative and not of an inflammatory type. A very comprehensive survey of the literature is given with the object of separating acute febrile polineuritis from other infections of the nervous system. (R. G. G.)

Sommophane Test in Symptomatology of Nervous Disease.—The author claims that if 3-3 c.c. dissolved in 10 c.c. of distilled water is slowly injected intravenously it is possible to demonstrate much more minute differences especially in sensibility but also of motor power and reflex activity between the two sides than can be shown without the injection. If therefore there is a lesion in a silent area it may be possible to localize it. He thinks this may be useful not only in cerebral tumours but also in Parkinsonism and other extrapyramidal lesions, but also perhaps in the psychoneuroses. (R. G. G.)

Familial Dwarfism and Epilepsy.—A patient with chondrodystrophia, obesity, and hypogonitalism developed Alzheimer’s disease and epileptic attacks at the age of 57. The same syndrome or parts of it could be observed in several members of the same family in four generations. (K. S.)

Cerebral Injury and Schizophrenia.—1,554 cases of cerebral injury from the war form the basis of this investigation. The total percentage of schizophrenia and symptomatic psychoses of schizophrenic character was more than four times as high as in the average population. True schizophrenia, however, was not more frequent than in the average population. There was no relation between localization and severity of the cerebral lesion on one side and the psychosis on the other. The single case reports, especially the various relations between symptomatic epilepsy and schizophrenic psychosis, are most interesting, but cannot be abstracted in detail. (K. S.)

Sommophane treatment with Cardiazol.—In 14 cases there was a full recovery which lasted to the time of this report (on the average 66 months). Of 10 cases in which the psychosis had lasted for less than 6 months, 9 showed a complete recovery. In cases of a duration of more than 3-4 years, recovery cannot be expected. In almost every case, however, the treatment had a transient symptomatic effect. (K. S.)

Psychology of Murder and Manslaughter.—In 51 cases relatives of the criminals had already committed crimes. The cases are grouped according to the motivation of the crime. (K. S.)

Alcohol in the C.S.F.—Alcohol was given by mouth, and its concentration estimated in intervals of 10–20 minutes in the blood,


Ergebnisse einer siebten Messungsserie zur Frage des Zusammenhangs zwischen Radioaktivität und Kropf. (The results of a seventh series of measurements on the relations between radioactivity and goitre.) T. Lang. 72.

*Zur Frage cerebraler Kreislaufstörungen nach Hirntumorentfernung. (Disturbances of cerebral circulation after operations for brain tumour.) O. Kaufmann. 89.


Ein Fall von reinem Hemiballismus auf dem Boden eines degenerativen Nervenleidens. (A case of pure hemiballismus with an underlying degenerative nervous disorder.) C. Baumann. 126.


*Über die Gliaverhältnisse des Nucleus dentatus und der Olive. (The glia ratio in the nucleus dentatus and olive.) Fr. Tefebur. 252.


Beitrag zur Frage des Heiratskreises der Schizophrenen. (The question of the marriage circle of schizophrenics, a demographic and psychiatric study of the close biological family of married schizophrenics.) P. Leistenschneider. 289.

Über die Möglichkeit des Auftretens von Kinderreihen mit Schizophrenen unter der Nachkommenschaft Schizophrenen. (The possibility of the appearance of a succession of schizophrenic children in the descendants of a schizophrenic.) B. Schulz. 327.

Hypoglycaemic States in Schizophrenia. — The author studies the temporary amelioration of mental symptoms under the influence of the hypoglycaemic state in insulin treatment. There is an immediate reaction which occurs near the beginning of the treatment in which the improvement is of short duration and only during the hypoglycaemic period. The late reaction occurs later in the treatment, lasts longer, and is present apart from the hypoglycaemic state. He uses this as a criterion of possible recovery, and finds that the best remissions occur when the immediate reaction appears soon (in three or four days), lasts longer, and recurs with nearly every insulin injection. (G. M. G.)

Disturbances of Cerebral Circulation after Brain Operations. — Some cases are discussed, where death follows soon after operative interference for brain tumour. In these softening or hemorrhages have occurred distant from the tumour in a region with a different vascular distribution. These lesions are caused by the abnormal reaction of the circulatory system. The
disturbances are not necessarily lethal, and may be reversible, depending on the topography and intensity of the reaction. (G. M. G.)

Glia Ratio in Dentate Nucleus.—A study of the types of glial cell found in the dentate and olivary bodies in the brains of executed persons and those dying of bodily disease with normal brains shows that there are variations in the type of cell in both areas. In some cases there was found a difference in the glia between the regions of the neo- and paleocerebellar dentate. In some brains there was a difference in type of cell in the dorsal and ventral parts of the olive. The author thinks that the variations have a constitutional basis and are independent of age or type of illness. (G. M. G.)

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Über cerebrale Endarterien. (Cerebral end-arteries.) E. Scharrer. 401.

Nanosomia pituitaria hypoplastica hereditaria. (Hereditary hypoplastic pituitary infantilism.) W. Dzierżynski. 411.

Kolloquien-Polyneuritis. (Colocynth cerebrale.) E. W. Kröll. 422.


Empfindung und Vorsstellung im Seh- und Hörbereich. (Sensation and image in the realm of seeing and hearing.) O. Goebel. 443.

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Zur Frage solaraktiver Einflüsse auf die Psyche. (The problem of solar influence on the psyche.) B. Düll and T. Düll. 495.

Cerebral End-Arteries.—A study of the vascular system of the American opossum shows that end-arteries only are present throughout the brain. They do not extend strictly in the midline, but may pass over it, and the angio-architectonics do not entirely correspond to the cytoarchitectonics. (G. M. G.)

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Erbanlage und Epilepsie. 5. Beitrag zur Frage der "epileptoiden" Psychopathie. (Heredity and epilepsy. 5. A contribution to the question of "epileptoid" psychopathy.) K. Conrad. 505.


Untersuchung über die Art und Häufigkeit der Remissionen bei Schizophrenie mit besonderer Berücksichtigung der Frühentlassungen und der Dauerschlaftherapie. (An investigation into the type and frequency of remissions in schizophrenia, with observations on early discharge and treatment by prolonged narcosis.) O. Briner. 582.


Angeborene halbseitige Zungenhyperplastie (Hyperplase). (Congenital hemihypertrophy of the tongue. Hyperplasia.) F. Langsteiner. 603.

Zur Klinik der Stigmatisierungen (Ein weiterer Beitrag zur Frage des psychocerebralen Bauplanes). (Clinical aspects of stigmatisation, a further contribution to the question of psychocerebral planes of structure.) F. Pollak. 606.


Über die Hirnschwellung. (Brain swelling.) M. de Crécy. 646.

Studies über den Vitamin C-Gehalt im Liquor cerebrospinalis. 4 Mitteilung. Der Vitamin C-Gehalt im Liquor bei experimenteller Poliomyelitis. (Studies in the vitamin C content of the C.S.F. Part 4. The vitamin C content of the C.S.F. in experimental poliomyelitis.) M. Kasahara and I. Gamo. 671.

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Studien über den Vitamin C-Gehalt im Liquor cerebrospinalis. 5 Mitteilung. Der Einfluss von Narkose auf den Vitamin C-Gehalt im Liquor. (Studies in the vitamin C content of the C.S.F. Part 5. The influence of narcosis on the vitamin C content of the C.S.F.) M. Kasahara and I. Gamo. 673.

Brain Swelling.—The volume enlargement, brain swelling, is found in several conditions—uraemia, status epilepticus, toxic states, and as pseudo-tumour or with tumours. Dehydration methods may clear up the symptoms due to the swelling, while fluids by mouth or otherwise may precipitate the condition. Histological study shows that urea plays a part in the production of brain swelling, as demonstrated by crystals formed in sections treated by a xanthhydril method. These crystals were found in 27 cases of brain swelling from various causes, also in experimental states produced by electrical and other means. It is a physico-chemical problem of the relation of protein to the water absorption, the possible production of urea from brain proteins is considered. (G. M. G.)

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*Studien zur Pathologie der Hirngefälle. 1. Fibrose und Hyalinose. (Studies in the pathology of brain vessels. 1. Fibrosis and hyaline change.) W. Scholz and D. Nieto. 675.

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*Studien zur Pathologie der Hirngefälle. 11. Die drusigen Entartung der Hirnarterien und-capillaren. (Eine Form semiler Gefäßerkrankung.)* (Studies in the pathology of brain vessels. 11. Plaque-like...
degeneration of brain arteries and capillaries. A form of senile vascular degeneration.) W. Scholz. 694.

über die sogenannte "religiöse Kurve" (Klages) Kritischer Beitrag zur Ausdruck psychologie der Hand schrift. (The so-called "religious curve" of Klag es. A critical contribution on psychological expression by handwriting.) G. Kloos. 716.

Amnestisches Syndrom nach Insulin-Cardiazolbe handlung. (Amnesic syndrome after treatment by insulin and cardiazol.) P. Plattner. 728.


über Fixierungsmittel in den Zentralnervensystem. (Fixation artefacts in the central nervous system.) F. Tabellis. 767.

Bemerkungen über den zwangsnervösen Charakter. (Notes on the compulsive neurotic character.) N. Praeger. 775.

Formveränderungen der überlebenden Nervenzellen infolge einer der H-Ionkonzentration. (Alterations in the form of surviving nerve cells after changes of H ion concentration.) S. Hamsoot. 789.

Zur Periodizität der manisch-depressiven Irresein. (The periodicity of manic-depressive psychoses.) E. Slaters. 794.


Kritisches und Experimentelles zur Deutung der Potentialschwankungen des Elektrocorticograms. (A critical and experimental study of the interpretation of fluctuation of potential of electrocorti -

grams.) J. G. Dusser de Barenne and W. S. McCulloch. 815.

Pathology of Brain Vessels, Fibrosis, and Hyalnosis.—A discussion of hyaline fibrous and collagen changes in brain vessels. The hyalin change in the wall of smaller arteries is found between the elastica interna and the intima and shows as a yellow homogenous area with van Giesen stain; fat stains show red colour in the outer parts. The condition is associated with arteriosclerosis. (G. M. G.)

Pathology of Brain Vessels, Plaque-like Degeneration.—In brains of old people changes were found in the larger arteries consisting of a rhythmic ring-like thickening with a crystalloid, doubly-refracting substance, having the staining reactions of senile plaques. The crystalloid substance sometimes forms a plaque in the degenerated muscular coat or outside the vessel wall. The change was also found in capillaries. It was found mostly in the cerebral cortex and less in the cerebellum cortex and a little in the striatum, but none in the vessels of the white matter. The change was found in 12 per cent. of senile brains, and may form the bases of senile plaques. (G. M. G.)

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*Atrophie optique primitive par méningiome à distance de la région opto-chiasmatique. (Primary optic atrophy due to meningioma situated at a distance from the optic chiasma.) C. Vincent, E. Hartmann, J. Le Beau. 145.

*Zur Frage der Varizes spinales und ihrer operativen Therapie. (The varicose veins of the spinal cord and their operative treatment.) L. Puisoep. 158.

*Die angiomatösen Gewächse der Wirbelkörpeme. (The angiomatous growths of the vertebral body.) E. Koch-Grünberg. 188.

*Die angiomatösen Gewächse der Wirbelkörpeme. (The angiomatous growths of the vertebral body.) E. Koch-Grünberg. 188.


*Über epileptische Anfälle beim Tumor cerebri. (Epileptic attacks associated with cerebral tumour.) O. Pedersen. 204.

Primary Optic Atrophy.—Primary optic atrophy associated with increased intracranial tension invariably suggests that the region of the optic chiasma is being directly compressed. The authors have recently seen two cases in which this syndrome was produced by meningioma situated at some distance from this region. One was in the rolandic area, the other in the occipital lobe. The possible mechanisms responsible for this syndrome in these two cases are discussed. It is remarkable that in both cases visual disturbances were the first symptoms of the disease. (G. J.)

Cerebral Tumours and Age.—An investigation of 250 tumours forms the basis for a stimulating discussion of the relationship which exists between the histological characteristics of tumours, their place of origin, and the age of the patient. A formal division of cerebral growths into static groups is found to be both difficult and unsatisfactory. Investigation of different parts of the same tumour will reveal transitional characters belonging to more than one type. The anatomical study of the nervous systems of members of one family who succumbed to von Recklinghausen's disease at different age periods leads the author to express the view that most cerebral tumours are congenital and become evident when they have been stimulated to growth. A life-cycle of tumours is suggested during which their characters may undergo fundamental changes, and the parallelism of the ageing of the individual with changes in the tumour is pointed out. (J.)

Epilepsy and Cerebral Tumours.—The literature dealing with this subject is presented. Epileptic (epileptiform) fits are
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found in about 25 to 30 per cent. of all cerebral tumours. The anatomical structure of the growth and its localization determine the incidence and type of the attacks. The epileptic manifestations must be regarded as expressions of local disturbances and are not due to the increased intracranial tension. Unanimity has not been reached in correlating the more detailed localization of tumours with the frequency of epileptic attacks, although the temporal lobes appear to be particularly prone to give rise to fits. The diagnosis from genuine epilepsy and the prognosis of patients suffering from cerebral tumour with epilepsy are briefly discussed. Benign tumours are more apt to give rise to epilepsy than are malignant. (J. S.)

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Circulation double d’un Angiome cerebral. (Double circulation in a cerebral angioma.) E. Moniz. 217.


Die Vasomotorik der Hirndurchblutung. (The vasomotor mechanism of the cerebral circulation.) D. Schneider. 248.

Brain Lesions after Arteriography.—The brains of 35 patients who had died at varying periods after the performance of an arteriography were examined microscopically. In 60 per cent. of cases Thorotrast was found in some vessels and in six brains parenchymatous lesions could be correlated with the presence of Thorotrast in the form of small intravascular clots. The authors believe that central expansive lesions aid the retention of the Thorotrast and that a reduction in the thrombocyte count may be an important factor. No extravascular deposits of Thorotrast could be found. In the opinion of the authors some of the deaths were directly due to the arteriography. (J. S.)