ACROMEGALY AND VON RECKLINGHAUSEN'S DISEASE

ACROMEGALIE ET MALADIE DE RECKLINGHAUSEN

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De Castro comments on the association of acromegaly with von Recklinghausen's neurofibromatosis and refers to some 12 cases recorded in the literature, including one which he described in 1916. It is pointed out that modern radiological investigations have advanced our knowledge of the bony disorders of this malady. The bony changes may be placed in two distinct groups:

1. Disorders of development of no characteristic type, such as defects of ribs, vertebral anomalies and the formation of exostoses.

2. Bony changes characteristic of neurofibromatosis which depend directly or indirectly upon the disease, e.g., atrophy and hypertrophy, local erosion from pressure exerted by neurofibromata, and osteoporosis of the vertebrae. In the cases associated with acromegaly there was evidence of an intrasellar tumour as shown either by radiological examination or at autopsy. This association is not considered to be merely one of two distinct morbid conditions occurring by chance in the same individual but a definite pathological association between two diseases.

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THE CHANGES IN THE CONCENTRATION OF INORGANIC CALCIUM AND PHOSPHORUS DURING CONVULSIONS OF EXPERIMENTAL ORIGIN, IN CATS, BEFORE AND AFTER THYROPARATHYROIDECTOMY, WITH AND WITHOUT BROMIDE THERAPY.

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The minimal convulsant and total dosage of a drug needed to elicit convulsions is much less in cats after thyroparathyroidectomy than in control animals. The number of electrical excitations of the cortical motor area possible in cats after thyroparathyroidectomy is much smaller than in controls. The number of occlusions of the head arteries which can be done in animals after thyroparathyroidectomy is also much smaller than in controls. The administration of sodium bromide for two weeks before thyroparathyroidectomy prevents postoperative tetany, and, if continued, prolongs life for at least three or four weeks without other remedial measures. In cats after thyroparathyroidectomy, the calcium-phosphorus ratio is almost 50 per cent. lower than in controls. This ratio in cats under bromides before operation is, however, less changed and may even approach the ratio of the controls. While there is always a rise in calcium and phosphorus of the blood serum following experimentally induced convulsions, both in controls and after simple thyroparathyroidectomy, previous administration of bromides causes a fall of calcium and phosphorus following convulsions, in both sets of conditions.

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