Bernard, A. REACTION TO EPINEPHRIN IN HYPERTHYROIDISM. [Prog. Méd., 34, May 10, 1919.]

In hyperthyroid states there is some special susceptibility to adrenalin by the sympathetic vascular effectors. Epinephrin in 0.5 mg. doses will cause tachycardia and raise the blood pressure. This reaction is valuable in testing out potential hyperthyroid cases. Many of these show on microscopical study small adenomata. The positive reaction to epinephrin calls for exploratory operation at least with microscopical examination of the excised bits.

Zimmern, A. RADIOSUSCEPTIBILITY OF THE ADRENALS. [Bull. de l'Acad. de Med., 81, June 10, 1919.]

This investigator reports he has been able to expose successfully the adrenals to X-ray action and thereby produced retrograde changes in these organs of such a degree as to reduce hyperfunctioning, thus reducing high blood pressures without any deleterious effects upon the skin or the kidneys. The fall in blood pressure in some of his patients has persisted several months at least.

Morquio, L. PINEAL TUMOR. [Arch. Lat. Amer. d. Pediatria., 13, 1919, No. 2.]

A boy twelve years of age began to complain of headache and then had further meningeal symptoms suggestive of a tuberculous meningitis. After a rapid course the autopsy showed a sarcoma of the pineal.

Del Campo, E. THYMUS FUNCTION. [Zeit. f. Biologie, 68, 1919, 285.]

The specific effect of thymus extract in relieving the fatigue of frog muscle was also demonstrated for the soleus muscle of the rabbit narcotized with urethane. Long series of muscular twitches were recorded by Kronecker's method—the rate of stimuli being 1 every 4 seconds. After the initial staircase effect the height of the contractions was maintained for long periods before the linear descent characteristic of fatigue. The appearance of the latter was checked or completely removed by the intravenous injection of thymus extract or thyroglandol. Other nucleoproteins were inactive, indicating the specificity of thymus extract. The motor end organ was the site of the action, for the muscle on direct stimulation evinced no fatigue.

Naegeli. OSTEOMALACIA AS A PLURIGLANDULAR SYNDROME. [Münch. m. Woch., 1918, No. 22.]

The author explains osteomalacia as pluriglandular disease. In connection with this he points out in a condensed systematic review the great and many-sided involvement of the different organ systems. In the skeletal system may be observed constitutional inferiority, hyper-

plasia of the bone marrow decalcification, softening and bending of the bones, enormous sensibility of the periosteum. The muscle system shows dystrophy with functional weakness and, probably as a consequence, fatty degeneration almost to total lipomatosis. In the nervous system may be mentioned psychic disturbances, exaggeration of reflexes, spasms, tremor, high pulse rate, disturbances of the temperature center in the oblongata, sweating and paresthesias. Metabolism is also altered. The disease is usually found in people of poor constitution. Mineral metabolism is seriously affected in advanced cases and so also in the metabolism of albumin and fat. Alteration in blood formation is manifested in changes in the bone marrow whereby hypofunction follows upon an incipient hyperplasia. In the early stages polyglobulin may be observed, in late cases severe anemia. In one portion of the cases leucocytosis exists, more often with abundant myelocytes. Further, there is present eosinophilia and lymphocytosis, further changes in the albumin-globulin relationship in the serum with increase of the globulin. In the anamnesis chlorosis is discovered more often than not. The organs of inner secretion are likewise more or less involved. There are anatomical changes in the hypophysis, which have not been proved so far. The author observed in one man hypophyseal obesity with nanism. Relation to hyperthyrosis which have been affirmed appear doubtful. The epithelial bodies are frequently hypertrophic. A case of diabetes points to a disturbed pancreatic function. The very strong pigmentation observable in some people must be brought into relationship with the adrenals. Hyperfunction of the reproductive glands has been shown to be beyond question by the effectual results of the Fehling treatment by castration.

II. SENSORI-MOTOR NEUROLOGY

1. PERIPHERAL NERVES.

Kennedy, R. PROGNOSIS OF NERVE INJURY. [Lancet, July 5, 1919.]

Kennedy draws attention to the length of time required for the functional recovery of nerve injuries, the reason being two-fold: the occurrence of nerve degeneration after all but the most trivial injuries and the necessity of nerve regeneration before conductivity is regained, and the degeneration in the muscles supplied by the damaged nerve. This degeneration of muscles takes place with great rapidity, and is such that the muscle cannot become functional again until it has regenerated and this restoration cannot begin until the nerve has already regained its conductivity. Then there is the difficulty of keeping the case under observation long enough—usually for several years—to estimate properly the prognosis. In nerve injuries many factors enter into the prognosis. (1) Sepsis or asepsis. Sepsis, though one of the most unfavorable factors, is not a complete bar to recovery, but it is apt to lead to changes in the nerve trunk and its surroundings, resulting in the formation of