De Quervain. ORGANOTHERAPY IN FROEHLICH'S SYNDROME. [Schw. med. Woch., July 15, 1920. Med. Rec.]

A boy of ten had hypophysis tumor. The left eye had become quite blind, with vision impaired in the right. There was headache and very large sella. Diabetes insipidus was marked. The appearance was typical of Froehlich's syndrome. Neither hypophysis nor thyroid tablets gave material relief. Surgical intervention after some years was apparently limited to decompression. The *status quo ante* returned with death under symptoms of compression. Autopsy revealed a calcified epithelioma of the duct with destruction of most of the hypophysis. The second patient was a girl of twelve who at the age of seven began to develop Froehlich's syndrome. At the period of complete evolution the child resembled a fat woman at the menopause. Hypophysis extract was begun, alternating the anterior and posterior lobes and tablets and fresh substance over a long period. The subject began to lose weight while she began to increase in height. The gain was over 12 cm. in one year as against 10 cm. in the preceding four years. Injury of the posterior lobe will cause fat deposit and that the same lobe also plays a rôle in skeletal growth.

Parhon, C. J., and Stocker, A. ON A CASE OF ACROMEGALOGIGANTISM WITH MANIC DEPRESSIVE PSYCHOSIS. [Revue Neurologique, No. 6, 1919.]

The authors first lay stress upon the facts that call for the intervention of the endocrine glands in the pathogeny of the psychoses and especially upon the part played in the manic depressive psychosis by disturbances of the thyroid. The disturbances are indicated by:

1. The presence of thyroid phenomena in the patients suffering from this psychosis. Goiter is frequently observed, exophthalmia and even tachycardia.
2. There is a resemblance in psychic state of these patients to that of Basedow cases.
3. There is coexistence of the manic depressive psychosis with Basedow's syndrome.
4. The mean weight of the thyroid in the psychosis in question is found to be at the upper limit of the maximum weight of the normal thyroid.
5. The frequency of occurrence of these two affections in women.
6. Their coincidence with hyperthyroidal epochs (puberty, menopause, etc.).
7. The hyperexcitability of the nervous system in the manic depressive psychoses which resembles that of experimental hyperthyroidism.
8. The therapeutic effect of thyroidectomy.

They then give an account of their observations on a patient who had acromegalogigantism (height 6 feet). This individual was twice in