

pressure to pain in the muscles and nerve trunks, there was an ataxia which lasted for years. The patient 67 years of age was addicted to alcohol. Wasserman negative. The ataxia of the upper and lower extremities developed gradually and afterward there was a certain degree of recovery. From the hyperalgesia on pressure of the muscles and nerves and the ischialgia, the author, after excluding other diseases which might be suggested by the symptoms, as, tabes dorsalis, myelitic or cerebellar pathological processes, assumed the case to be one of chronic polyneuritis, although this diagnosis could not be made with absolute certainty. The second case was that of a carpenter, forty-three years of age. The anamnesis showed there was no abuse of alcohol. At the age of thirty-four he had slipped on an oiled floor and hit the back of his head and his left side on a planing bench. He did not become unconscious but had bleeding of the nose. Afterward symptoms of pain in the tendons and disturbances of sensibility set in, followed by an excitement with pain in the whole body and disturbances of motility. He was taken to an insane asylum where various other symptoms manifested themselves, among them disturbances of vision, including diplopia. When the patient came to the author's observation various diagnoses had been made "Lues cerebrospinalis," "tabes dorsalis combined with dementia paralytica," "traumatic hysteria," "probable organic disease due to syphilis or alcohol, set into activity by the accident." The author thinks all syphilitic processes, strictly speaking, could be excluded with certainty, and he made a diagnosis of chronic polyneuritis, though certain symptoms, as the psychic disturbances at the beginning of the disease and the nystagmus, indicated a degree of involvement of the brain and cortex. Under observation the condition of the patient improved to a great degree. The course of this case was remarkable. First was a stormy beginning with pain, severe psychic symptoms, paralysis of the arms and legs and bulbar symptoms. After two and one half years a slight improvement set in, which afterwards made steady and slow progress. The author thinks that probably the disturbances were connected with the trauma. A peculiar symptom was a color-blindness which seemed not to be congenital; both the author and Dr. Alfred Moll who also examined the patient were of the opinion that the color-blindness was acquired.

Dide, M., and Courjon. HYPERTROPHIC NEURITIS. [Rev. Neur., Nov., 1919.]

Five cases (with illustrations) are given. The extreme atrophy of muscles began in the hands and arms in five personal cases while Long and Hoffman had four. In thirteen known cases no inherited or familial taint was discoverable. In ten the onset was between 30 and 40. The disease may assume various types in adults, and complicating cerebellar symptoms are rare.