casional attacks of faintness, of a swimming sensation in the head, and of a tingling in left leg up to the knee.

The apex beat was outside the nipple-line and an aortic direct murmur was present. Intelligence, memory and attention were good; he understood all questions and answered them promptly and correctly in writing, but could not utter a word. He could understand what he read, copy words and figures, write spontaneously and from dictation.

Although his general condition improved and he resumed work, loss of speech remained absolute until nine weeks after its disappearance. While at work he fell a distance of six feet, landing on his head. He was somewhat stunned, but almost immediately called his companion by name, and from that time was able to talk. The author reaches no conclusion as to the nature of the case. PATRICK.

HEMIANOPSIA IN CEREBRAL ABSCESS OF OTIC ORIGIN. Lannois and Jaboulay. *Gaz. Med. de Paris*, 37, 1896.

The authors report a case of cerebral abscess due to extension from an otitis purulenta, which, according to their researches, is the ninth case in literature giving right-sided hemianopsia.

Further symptoms were agraphia, alexia, optic aphasia and right-sided facial paralysis. Upon autopsy there was found diffuse encephalitis of the central lobe of the left hemisphere and at the base of the first frontal convolution; and in addition a large abscess involving the greater part of the central portion of the left occipital lobe. JELLIFFE.

EXPERIMENTS ON OPERATIVE EXPLORATION OF THE BRAIN. Payr. *Centralb. für Chirurgie*, No. 31, 1896.

To determine what could be learned by exploration through very narrow openings in the skull, the author performed a series of experiments upon dogs. He made use of drills 1 and $1\frac{1}{2}$ to 2 mm. in diameter, with adjustable shields (to prevent sudden perforation and wounding of underlying structures), operating with all aseptic precautions. The questions which he attempted to decide were: 1. If it was possible with straight and curved exploring needles to reach collections of fluid beneath the membranes or in the brain substance. 2. If using little harpoons of special construction, particles of brain substance or membranes could be removed and examined microscopically. 3. If it could be determined whether the dura pulsated or not. For this latter purpose he used little glass tubes filled with sterilized water, and also closed tubes with end drawn fine, and bent at a right angle, to serve as indicators. The five dogs operated upon recovered promptly, and seemed to have experienced no ill results. All the questions were decided affirmatively. To determine how far he could reach with the exploring needle, he injected through the drill-hole the brain of a dog—dead from another experiment—with alcoholic methylene blue solution, and found on section that the fluid was distributed over 10 to 12 cm. of surface, and penetrated 4 to 6 cm. An autopsy made three weeks after the operation, showed healing with adhesion between dura and bone, and with but a slight depression where the brain substance had been removed by the harpoon. The opening in the bone was filled with a firm reddish-yellow mass. He does not attempt to say how far this procedure is applicable to human beings, but suggests that it may be of use in locating hemorrhages, cysts, or tumors, and obtaining specimens for microscopical examination; also for tapping the lateral ventricles. C. L. ALLEN.

POLIENCEPHALOMYELITIS.

The disease is most common in persons between 20 and 60 years of age. It is usually subacute in onset, rarely acute or insidious, at