as a premonitory sign of an attack. Where the leucocyte conditions are nearly normal there is usually freedom from acute psychopathic disturbances and a subjective feeling of health. After the attack there is very often an increase of these elements up to a general leucocytosis of varying duration, though usually the normal conditions are restored after a short period. The eosinophile elements seem to be diminished with noteworthy regularity before the paroxysmal attacks. The lowest values being found during the paroxysms, with an increase to above normal immediately after the attack. The results obtained during the acute psychopathological symptom complex which, to a certain extent, replaces the spasms, were similar to those obtained during the typical paroxysms. Here, too, the blood symptoms permitted prognostic conclusions. The behavior of the white blood cells in the epileptic symptom complex shows noteworthy analogies with the specific blood picture during the anaphylactic traumatic process in the parenteral decomposition of albumin. The so-called "genuine" epilepsy may, in the author's opinion, be explained from the viewpoint of an intoxication from decomposition of albumin, and as essentially founded on such a basis. [J.]

Tramer, M. PATHOLOGICAL ANATOMY IN EPILEPSY. [Schweizer Archiv. f. Neur. u. Psych., 1918, Vol. 2, p. 202.]

The author found no changes of the central nervous system which could be considered pathognomic for epilepsy, although there seemed to be a parallelism between certain anatomical changes and the severity of the clinical pictures. These anatomical changes were more particularly in the form of a degeneration of Betz's cells and a gliosis of the subpial margins. Defects of development in the ganglion cells and neuroglia were evidence of the important etiological rôle played by the congenital weakness in the brain of epileptics, and the writer was able to distinguish certain groups in which the various individual cases presented resemblances anatomically, or both anatomically and clinically. Among these groups was the so-called "spastic epilepsy," in which, on the anatomical side there were specially pronounced injuries of Betz's cells and on the clinical a particularly unfavorable prognosis. The problem of the etiology, however, probably lies beyond these changes in the vessels, neuroglia and cells, involving dynamic factors. It is therefore a problem in which energies have to be taken into consideration, and to discover their nature psychological or physicochemical methods are needed which are not at the disposal of neurologists. While microscopic methods reveal chemical factors, they work with dead substances and dynamic energies are properties of living tissue. [J.]

Siebert, H. ON EPILEPSY. [D. Ztschr. f. Nervhik., 1918, Vol. 60, p. 260.]

The writer gives a loosely correlated series of observations on epilepsy after scarlet fever and encephalitis in the fourteenth year; the