

Douglas said that the most valuable use of hypnotics was to be found in that period which preceded the state in which a patient could be certified. They could often tide over a crisis at such a time by means of drugs. He had found croton chloral and bromide of the greatest value. He also recommended tetronal in 10-grain doses as a hypnotic.

PATRICK.

26. SATURNINE ENCEPHALOPATHY TREATED BY VENESECTION AND SERUM INJECTION.

M. Desplats (*Journal de Médecine*, Nov. 10th, 1896) recommends the injection of serum associated with bleeding in this trouble, and mentions the case of a man who had had two attacks of colic, followed by an epileptiform crisis characteristic of saturnine encephalopathy. The urine contained no albumen. After the patient had been bled, 600 cubic centimetres of artificial serum was injected subcutaneously. There were no further attacks, and in a few days the case was discharged cured. The author considers it legitimate to attribute the cure, in this instance, to the association of the two means, which he says, have never before been employed in eclampsia, either puerperal or renal. He believes that whatever may be the pathology of this condition, whether due to deficient urinary elimination, or the presence of too much lead in the blood, or to functional derangement of the liver, or some other gland, under the influence of a toxic agent, it is certain that when the attacks occur, the constitution of the blood is abnormal, and it contains noxious principles which should be eliminated. If we wait for the organism to relieve itself by the natural emunctories, the attacks continue and may terminate in a fatal manner. The most energetic purgations, diuretics and diaphoretics act too slowly, while the treatment suggested by Desplats is more prompt and sure. By the latter means elimination takes place rapidly, and the serum injected modifies the composition of the blood. He considers this method also applicable in puerperal or renal eclampsia, and in other affections where toxins play the principal rôle. FREEMAN

27. EPILEPSY: ITS SURGICAL TREATMENT. McGrew. (*Medicine*, May, '97.)

A man of 36, received, in 1882, an injury to the head, about which little could be learned except that he was not trephined. A half hour after the accident he had a convulsion, and from then to the time of the operation, except for one short period, he had at least one fit a day. In 1894 he was operated upon, with unsatisfactory result. When first seen by the author, later in that year, he was having numerous fits, preceded a few minutes by a peculiar headache as an aura. Examination showed, on the left side of his head, two scars, one linear, the other horseshoe-shaped, commencing about 2 cm. laterally from the junction of the posterior and middle thirds of the line joining the glabella and theinion, and passing forwards and downwards. These were sensitive on pressure. On March 28, 1895, the patient had a fit, and lost the power of speech and hearing, but could read and express his wishes in writing. This condition persisting, on Dec. 5, 1895, the author exposed the bone in the left parietal area by a large horseshoe flap. The dura was found adherent to the bone about the margins of a semilunar opening, 2 cm. long by 8 mm. wide at its widest part, left from the earlier operation. The opening was rounded and enlarged to the size of a silver dollar, the dural adhesions separated and clipped away, and the edges of the bone made smooth. The dura was not opened. The outer table of the skull was beveled, a thin silver plate shaped like a watch glass was fitted over the opening, and the flap closed over it. The patient made a good recovery. As soon as he came from under the anæsthetic he could speak and hear, and during the fifteen months which have elapsed during the operation he has had no fits.

C. L. ALLEN.