ments which report characteristic "increase" or "diminution" of any of the above-mentioned urinary constituents as associated with any particular mental disorder. From a general physiological point of view, he believes the data contained in his tables I to XLVII of value, as giving the complete composition of a large number of urines.

MISCELLANY

ACUTE MENINGITIS. W. T. Councilman (Journal A. M. A., April 1).

The author describes the conditions of acute meningitis with more special reference to that form produced by the *Diplococcus intracellularis meningitis*, which he believes is constantly occurring in a sporadic form, aside from the not infrequent epidemic aggravations. The infecting organism, he states, is one of low vitality and incapable of a purely saprophytic existence. The statistics fail to give any adequate idea of the frequency of the infection in ordinary years. His experience, however, leads him to believe that with rare exceptions all cases of primary meningitis are due to this micro-organism, and that it would be impossible without sporadic infection to bridge over the intervals between the epidemics. It is possible, too, that the germ may even inhabit the normal mucous membranes of the nose, for example, as has been shown in a few cases where it produces a rhinitis, and infection of the meninges may take place through the lymphatics or by continuity of surface. We can only explain the epidemics of the disease, he says, either by an increase of virulence of the diplococcus or by a decrease in the resistance of the tissues. The underlying causes of epidemics are unknown, and even atmospheric conditions cannot be excluded. He discusses to some extent the relations of meningitis to pneumonia, as shown by the Massachusetts health statistics, and illustrates with a chart. Primary meningitis from the pneumococcus or staphylococcus is rare; secondary types are not so infrequent. The paper concludes with a description of the pathologic conditions in acute meningeal disease.

TREATMENT OF IDIOPATHIC EPILEPSY. D. R. Brower (Journal A. M. A., March 25).

Brower says that spontaneous cure of this disease is possible, and mentions one of several cases in his observation. He calls attention to the necessity of more care as to the prevention of the trouble, especially in infants suffering from convulsions. The proper treatment and environment in these cases may prevent the later development of the disease. The treatment of the individual convulsions is also important, and the aura may afford a warning that enables the patient to abort the attack. He advises the carrying by epileptics of nitrite of amyl pearls for this purpose. Other methods may also be effective in special cases. In epilepsy there is an auto-intoxication, usually of gastro-intestinal origin, and the diet should be carefully regulated. These patients are usually very hearty eaters, and it is advisable to restrict the diet in quantity, to regulate periods of eating and to insure thorough mastication and digestion. Intestinal elimination must also be attended to, and for intestinal antiseptics he finds salol combined with phytolacca often very useful. For combating the nervous irritability the bromids are most useful, and he prefers the sodium salt. Their overuse, however, is dangerous, and Brower refers much of the existing epileptic insanity to this cause. The dose should seldom exceed sixty grains daily in plenty of water after eating, and he sometimes adds fl. ext. of *Solanum carolinense* in $\frac{1}{2}$ to 2 dram doses to the bromid mixture. Strychnia is also a valuable remedy for meeting the circulatory and vasomotor defect, and he specially recommends fluid extract of *Adonis vernalis*. Cerebral sclerosis calls for alteratives. In conclusion, he insists on the importance of allowing plenty of time, at least five years after disappearance of symptoms, before claiming a cure of epilepsy.