complicated organization, he will be instructed, we believe, not by the be-
wildering expressions of the psychopathologist and the methods of syn-
thesis of dissociated aggregates, but by the plain language and clear ex-
position of facts set forth by such masters as Benjamin Rush, who called
bleeding bleeding; purging, purging; and a spade a spade.

Compared with the recently issued volume of Janet upon the “Mental
State of Hystericals,” whose understandable diction and clear expositions
place it among the classics of medical literature, the Researches of Boris
Sidis suffer. The inimitable Mr. Dooley, when charged by his friend
Hennessy with saying too much upon a subject of which he professed to
know little, replied: “The raison I’ve said so much is that I know so little.
Be hivins, when I think iv how little I know, I’m surprised at me own
modration.”

*Klinische Studien und Erfahrungen betreffs der Familiaren Myoklonie und
damit Verwandten Krankheiten.* Von Herman Lundborg. (Clinical
Studies and Deductions concerning Family Myoclonia and Related

This second monograph by Lundborg is more exhaustive and pretentious.
He has had the excellent advantage over other observers in the clinical
research field of myoclonus in that he has obtained data of some seven-
teen cases of the affection in one family, fourteen of whom were of the
association disease (myoclonus-epilepsy type). The genealogical sketch
of the family is one of extraordinary degeneration, there being some sev-
enty cases of nervous and mental disease in the one family during the
century.

The author cites in abstract the historical cases of simple myoclonus by
Frederich, Homen and the myoclonus-epilepsies of Unverrech, Sepilli
and Bresler, the latter being both familial and sporadic in type, although
the former predominates. A brief resume of the views of different authors
on the nature of the affections is given. Lundborg argues very plausibly
for the interrelationship of myoclonia, paralysis agitans, myxoedema,
Basedow’s disease and dementia praecox; there are certainly many path-
ological similarities and his comparison tales are striking.

The structural alteration of the thyroid in many of the allied neuroses
causes the author to suggest that myoclonus is due also to some thyroidal
defect. This monograph of 98 pages is accompanied by photographs and
ingenious genealogic and metabolic tables. The author concludes that
family myoclonia is a distinct form of myoclonia, autotoxic in nature, the
pathology of which rests in the spinal cord as suggested by Frederich.

L. Pierce Clark.

*The Treatment of Tabetic Ataxia by Means of Systematic Exercise.* By
Dr. H. S. Frenkel. Translated and Edited by L. Freyberger, M. D.
(Philadelphia: P. Blakiston’s Son & Co., 1902.)

This very interesting book of 185 pages is divided into two parts; the
first, or General Part, contains sections upon The Various Types of Tabetic
Ataxia, On Co-ordination, Definition of Ataxia, The Causation of Tabetic Ataxia, The Examination of Sensibility, The Examination for Ataxia, Muscular Hypotonia in Tabes, The Influence of Hypotonia on the Attitude of the Body, The Importance of Hypotonia from the Point of Differential Diagnosis, The Relation between Loss of Sensibility and Ataxia, and Theory of Ataxia. The second, or Special Part, gives directions for the performance of the movements which the author considers efficacious in the treatment of tabetic ataxia, and occupies two-thirds of the book. From the preface we learn that the first favorable results achieved by this treatment were published by the author in 1889 in a paper read at the Congress in Bremen, and that since that time the method has been improved and simplified. Frenkel's method of treating tabetic ataxia differs from that of Von Leyden and Goldscheider in that the greatest stress is laid upon practice or the frequent repetition of movements and not on the athletic strengthening of muscles; and secondly, it requires very little apparatus. In the first, or general, part of the book, the author lays stress on disturbances of sensibility and on muscular hypotonia, a term which he introduced in 1896 to denote the diminution of muscular tone which enables tabetics to execute movements which healthy persons could never perform, such as raising the stretched lower limb so high that it almost touches the face. From a perusal of this general part it is easy to understand the rationale of the author's theory of movements. This he states as follows: "The treatment of tabetic ataxia is based upon the education of the central nervous system by means of repeated exercises, whereby it is enabled to receive sufficiently distant stimuli from the limbs as to their position and so on, although the available quantity of sensation is rather small. It is necessary, of course, that the movements be attempted and carried out repeatedly and with great attention."

A certain minimum of sensation is absolutely indispensable, but cases in which there is complete anæsthesia are rare. The greater the loss of sensation the longer and more difficult will be the treatment, and the more uncertain the result. The author shows how the patient's eye and attention are necessary to counterbalance the loss of sensibility. Careful and minute directions are given for carrying out the exercises, a great number of which require no apparatus. In the beginning the patients go through the exercises with the aid of the physician, later they perform them unaided. An elaborate belt has been devised to support severe cases during the walking exercises. Accidents are very rare but may occur when the patient attempts to perform the exercise undirected, fractures being the most frequent. While these movements can be carried out at home under the physician's direction, they have been found to be most successful in sanitaria where the patient can be under more constant supervision. As to the value of this form of treatment there can be no doubt and this book should be studied by every one who undertakes to treat tabetic ataxia. It is is attractively printed and is very well illustrated.

W. R. D.