In his case the author believes to find a cause in dilatation of the veins of the lower limbs

FRANKEL.

Contributions to the Pathology of Progressive Pseudo-Hypertrophy and Muscular Dystrophy. Schultze (loc. cit.).

A review of eleven cases of muscular dystrophy, especially of the pseudo-hypertrophic type, which came under observation in the clinic of the author. In five cases the disease showed plainly the family character, occurring once in three brothers (two twins) and another time in two brothers. The disease began in the twins at the same time and had a different course, showing plainly the relationship of the different clinical forms of dystrophy. While one of the cases was the classical picture of a pseudo-hypertrophy, there was in the other a general atrophy, including some muscles of the face.

Two cases represented the form of juvenile dystrophy.

Regarding the muscles involved, the masseters were affected twice, once there was macroglossia, once the first interossei of both hands were atrophied, once hypertrophy of both scaleni antici majores. Once, a very rare occurrence, an extensive hypertrophy of the hand muscles. The electrical reactions proved normal in all the cases, excepting a partial De R. of the right deltoid in one case. As other points of clinical importance the author noticed a weak fixation of the caput humeri in the glenoid cavity and constriction of the deltoid muscles below the acromion.

Mentally, no marked changes were observed. Abnormalities of the skull and skeleton are to be seen quite often.

FRANKEL.

Paralytic Dementia.—Henry J. Berkely (*Journal of Insanity*, January, 1895) reports on the pathological investigation of a comparatively recent case of paralytic dementia; that is, one that died in a comparatively early stage of the disease. He found no inflammation, but indications of the vascular origin of the trouble. He construes the course of the disease as follows:

1. A period in which the nerve structures begin to receive an insufficient supply of nutrient material from the blood, and in which the more active and recently acquired mental functions begin to fail; to which is added a certain degree of irritability, both muscular and mental.

2. A period in which the loss of nutrient material has become so pronounced that the starving tissues begin to feed on themselves; disturbed cellular metabolism results, which is clinically shown in the increased motor excitement and motor grandiose ideas.

3. A period in which the nutrient supply is so diminished and the tissue changes have become so far advanced that there is actual disintegration of the nerve cell and beginning overgrowth of the support substance, the stage of terminal dementia, and pronounced muscular paresis.

PHELPS.

Restitution of Pathologically Changed Ganglionic Cells.—Proceedings of the Section of Nervous and Mental Disease of the Fifth Congress of Russian Physicians in remembrance of Pirogoff. Lubinow (*Neurologischeski Wiestnik*, 1894, p. 113).

L. starved a dog for a period of ten days in such a manner that it lost from 20 to 30 per cent. of its bodily weight. Then a trepanation was performed, a small piece of brain tissue removed and examined. Then the animal was fed again so as to make it return to its normal condition. In the period of refeeding pieces of brain tissue were removed for examination four, six and one-half and eight weeks after the end of the starvation period, and each time a new trepanation opening was made.

The specimens were hardened in two per cent. potass. bichrom., and stained with carmine hematoxylin, Ehrlich's mixture and Merkel's mixture.