Diagnosis of the Diseases which Clinically resemble Tabes Dorsalis (Pseudo-Tabes, Neuro-Tabes, &c.). By Dr. PAUL BLOCC. *Gaz. des Hôpitaux*, March 22, 1890.

To simplify the differential diagnosis of the above affections a preliminary classification is adopted according to the presence of ataxy in

- (1) Spinal affections; (2) diseases of the peripheral nerves; (3) neuroses.

In the following table the diseases in which tabetic symptoms are found are arranged in convenient order.

A. Diseases in which tabetic (ataxic) symptoms occur.	1. Spinal.	{ Locomotor ataxy. { Friedreich's hereditary ataxy. { Combined sclerosis of the cord. { Syringomyelia.		
	2. Peripheral nerves.	Pseudo-tabes.	{ a. Toxic. { Alcohol. { { Arsenic. { { Lead. { { b. Infectious: Beriberi. { { Diabetes.	
	3. Neuroses.	{ "Neuro-Tabes." { Neurasthenic Pseudo-Tabes. { Hysterical Tabes.		
B. Diseases in which Tabetic (ataxic) symptoms are simulated.		{ Abasia. { Paramyoclonus Multiplex. { Thomsen's Disease.		
		Ataxy of Cerebellar type in	{ Cerebellar Tumours. { Menière's Disease. { Disseminated Sclerosis.	

The author considers at length the diagnosis of these affections and gives a useful summary of the leading symptoms of each. With regard to the cases described by some authors under the title of pseudo-tabes, Dr. Blocq thinks that this name may now be abandoned, the cases really falling into two groups, the large majority being instances of paraplegia from peripheral neuritis, due to alcohol, lead, &c., the *paraplégies toxiques à type de flexion* of Professor Charcot, the others, at present comprising only a small number of cases, forming a provisional group, "*Ataxie périphérique*" of Déjérine, the exact nature of which must at present be regarded as doubtful.

J. MICHELL CLARKE.

Dana on the Cause of Chronic Degenerative Disease of the Spinal Cord.

In a paper read before the Congress of American Physicians and Surgeons (October, 1891), primary degenerations are classified as follows:—