Sollier. Treatment by anti-thyroidal serum and by iodine and bromine preparations had failed. She responded extraordinarily quickly to a mercurial and arsenical treatment; her psychosis and insomnia gave way in five days. The woman of 52 had, in addition to the signs of exophthalmic goiter, plus reflexes and greatly diminished motor power in her limbs, cataract in both eyes, bilateral optic neuritis, central deafness of right ear, increased blood pressure. After five days of the mercury-arsenical treatment her psychosis and insomnia yielded. After 110 days of this treatment her goiter disappeared, her pulse came down from an irregular one of 140 to a more regular one of about 70, and her hearing returned in her affected ear. The writer concludes that the striking result in these two cases shows that lues must be admitted as one of the causes of the Graves-Basedow disease. [Leonard J. Kidd, London, England.]

Leriche, R. PERITHYROID SYMPATHECTOMY. [Lyon Chirurgical, January-February, 1920.]

With the view to isolate the thyroid from its vegetative nerve supply, in order to influence a parenchymatous goiter in a young adult who had had it since infancy, this operator resected the sheath of the superior thyroid artery from the cervical sympathetic to the thyroid. The artery underwent retrograde change and also the external carotid. The connected lobe of the thyroid seemed to be congested primarily, but then it began to atrophy rapidly. After thirty days there was little left. But the enlarged lobe of the other side had not altered. The results in this unilateral sympathectomy justify further intervention of the kind to modify goiters is the author's general conclusion.

Loeb, L., and Hesselberg, C. COMPENSATORY HYPERTROPHY OF THYROID. [Jl. Med. Research, January, 1920.]

The authors here discuss hypertrophy of the thyroid chiefly in their response to homoiotoxins, rather than compensatory hypertrophy as a part of a physiological or pathological process to relieve an endocrine inferiority in another part of the constitutional endocrine balance.

Labbé, M. DIABETES AND HYPERTHYROIDISM. [Ann. de Méd., 1920, 7, No. 2.]

Hyperglycemia and glycosuria are frequently related to hyperthyroid function and the author here reports upon five cases where this relationship appears. He further presents some animal experiments in which it appears that thyroid treatment reduced the capacity for sugar combustion, other times it increased it; in others thyroidectomy had a similarly variable effect. The hyperthyroidism exaggerates the nitrogen metabolism, and this explains the special tendency to acidosis. Iodine