pallidum. Here also, the more the germ is deprived of its dermatropic affinity, the more easily does it become acclimatized to the brain (general paralysis) or to the spinal marrow (tabes dorsalis), and vice versa.

2. CRANIAL NERVES.

Roger and Reboul-Lachaud. HERPES ZOSTER OF GENICULATE GANGLION. [Paris Médical, October, 1921, XI, No. 40.]

In this clinical paper the author reports a case of herpes zoster affecting the geniculate. Pain and an eruption in the ear, with the general symptoms of herpes zoster, facial paralysis and transient disturbance in hearing on that side were present.

Dragotti. SEASICKNESS. [Policlinico, February 16, 1920, XXVII, No. 7. J. A. M. A.]

Dragotti recalls that all movements of the body liable to sway the lymph in the semicircular canals may induce symptoms like those of seasickness. A cold or hot douche of the ear may not only produce the same symptoms but may arrest them when they have been brought on by the movement of the ship. Infants escape seasickness as their semicircular canals and the endolymph are not completely developed. Prevention and treatment of seasickness can aim, he says, only to reduce the excitability of the semicircular canal system, as we are unable to prevent the endolymph from being swung about. The bromids therefore, he declares, are the most effectual means in prevention, and strontium bromid irritates the stomach least of the various salts. Small doses are best, 1 gm. three times a day, beginning a week before going on board the ship and keeping it up during the entire voyage. Other sedatives might also be used. The labyrinth in time loses its extreme excitability. The same effect might be realized on land with the revolving chair or other means to train the semicircular canals to bear the swinging of the endolymph without reaction.

Benedict, W. L. RETINITIS OF HYPERTENSION PLUS NEPHRITIS [Jl. Am. Med. Assoc., June 3, 1922.]

Albuminuric retinitis does not always indicate an incurable disease of the kidneys or of the cardiovascular system. The essential features of the composite pictures that make up albuminuric retinitis, however, can be studied singly, in connection with the general vascular system and the kidneys. The nature and course of the retinal disease can be conveyed to the internist more accurately through a careful description of the fundus than by any term that cannot be defined fully. The single features which in their entirety compose the retinal pictures have a definite significance, and the association of groups of features gives the best indication of the processes that are active in their production. Vascular changes are present in varying degree in all types