Current Literature

I. VISCERAL NEUROLOGY

4. ENDOCRINOPATHIES.

Stocker, A. ON A CASE OF ACUTE MANIA CURED BY THYROIDECTOMY. [Revue Neurologique, No. 8, August, 1919.]

The case was that of a young girl 18 years of age. From the somatic viewpoint the following was noted: indications of Basedow's disease (exophthalmia, hypertrophied thyroid body) and absence of menstrual difficulties. The patient was in general well proportioned.

From the psychic point of view she showed acute maniacal excitement, of the clear typical form, which caused her detention.

After staying in hospital for about a month and a half she underwent a hemithyroidectomy. Her psychic state had continued the same. After the operation the agitation ceased; she kept quiet; her condition had clearly ameliorated. Some ten days later she came back to the hospital cured.

The excised gland showed changes recalling those of the Basedow thyroid: tall cells, festooned follicles, diffuent colloid. There was very rich capillary vascularization.

The clinical picture interspersed with thyroidal symptoms, the therapeutic outcome, and the results obtained from histopathologic examination combine to form the basis of the thyreogenic theory of affective psychoses set forth by Professor Parhon.

It seems that in this case the absence of ovarian difficulties, etc., favored the success of the intervention. The more advanced the case the greater the need for the intervention, since a diseased thyroid secretion would not fail to produce pluriglandular troubles. [Author's abstract.]

Roorda Smit, J. H. SYPHILIS OF THE THYROID GLAND. [Nederl. Tydschr. voor Geneeskunde, 1921, LXV, 41, 156.]

The writer records two cases of syphilis of the thyroid gland in women, aged respectively 34 and 52. In addition to the triad of the symptoms of Graves's disease, both patients showed excentric hypertrophy of the heart, a psychosis of querulant persecution type, obstinate sleeplessness, anorexia and dyspepsia, emaciation, and large inactive pupils. The younger woman had had a goiter since the age of ten years; her acute toxic symptoms began eight months ago; she has all four incisor teeth of the type of congenital lues described by Borneville and

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