c.—THERAPEUTICS OF THE NERVOUS SYSTEM.

A NEW OVARIAN COMPRESSOR.—In the *Prog. Méd.* Nov. 26th, Ch. Féré gives a historical résumé of the various substitutes for the manual compression of the ovaries in hystero-epileptics.

In the *Prog. Méd.*, 1878, p. 993, M. Poirier advocated a compressor similar to a tourniquet for the abdominal aorta. The great drawback to this was the fact that during its application the patient must preserve a dorsal decubitus. Ballet advocated a girdle with iron arms and compresses, but although it was portable, it was costly.

Féré's compressor is a good deal like a truss, only stiffer. The *point d'appui* is on the spine, where the spring is broad and padded, while to the anterior extremity, which is bent back and downward, is fixed a rubber pad which presses into the ilio-pelvic region. The girdle is completed by a strap. In case double compression is needed a suitable modification can readily be made. This compressor causes little inconvenience and does not interfere with the clothing. A trial in the service of Prof. Charcot at the Salpêtrière shows that with it his hystero-epileptic patients have escaped attacks for long periods of time.

CHARCOT'S TREATMENT OF MÉNIÈRE'S DISEASE.—In the *Rev. de Méd.*, for Oct., 1881, p. 796, Ch. Féré and A. Demars in a brief clinical paper outline the disease and adduce illustrative cases to substantiate their claim as to the value of the treatment.

They give .60 to .80 of quinine a day in .10 doses for eight to fifteen days, not allowing an exacerbation of the symptoms to interrupt treatment at all. They then stop treatment for an equal period and then resume again.

At first there is always increased tinnitus and vertigo, and even falls occur. During the first stoppage of treatment there is generally a notable diminution of tinnitus, but the vertigo usually remains. During the second administration the aggravation of the symptoms is less marked than the first time, and may be wanting. During the second rest there is great diminution in the noise and often in vertigo.

Gradual improvement is seen with each period of repose. The vertigo is the last to disappear. Finally both tinnitus and vertigo cease, but still the patient has not perfect equilibrium and presents an unstable attitude.

It is important to warn the patient of the first effects of the treatment, and also impress him with the fact that only by a long persistence can he hope for lasting improvement.

STATIC ELECTRICITY.—Dr. W. R. D. Blackwood (*Phil. Med. T.*, Oct. 22, 1881) presents some cases treated by his Holtz machine. Of a case of melancholia, after having been simply "charged" for one half an hour three times a week for four months, the doctor says: "Although to my mind she is yet abnormally depressed at times, she is in every way better."

Of a case of hystero-epilepsy, treated tri-weekly and part of the time daily for two months, "marvellously improved" (according to mother), the doctor remarks: "I have every reason to expect a perfect cure in her case."

A case of periodical supra-orbital neuralgia, worse at menstrual epoch, was cured by simple charging and taking sparks from the brow. The duration of treatment is not mentioned. A case of intercostal neuralgia, treated by sparks from a small Leyden jar, became in "three weeks a different-looking man," "in two months relieved completely," but afterward, "at long intervals he has slight twinges."

A neuralgia of the testicle, cord, and perineum was cured in two months.

Dr. A. Arthuis (Paris) treats, in a memoir on static electricity and hysteria, in the first part, of the historical aspects of the question, and in the second, of the operative procedures and therapeutic applications. On p. 68 he says: "I believe it has been sufficiently demonstrated that the electric bath is entirely devoid of curative virtues. The doctor who persists in administering it in any affection, nervous or otherwise, commits an extremely grave fault." On p. 70 he says, "the electric bath in electro-therapy is only an '*entre en matière*.'"

NERVE-STRETCHING.—At the Soc. Biol., Oct. 29, 1881 (*Prog. Méd.*, Nov. 12, 1881), the results of stretching the pneumogastric in a dog were presented in the name of M. Wiett. There followed acceleration and irregularity of the cardiac contractions after traction on the trunk. On cutting the stretched nerve it was not possible, by applying the strongest electrical current, to stop the heart.

At the Soc. de Chirurgie (Nov. 2, 1881), Dr. M. Ledentu showed a patient in whom he had elongated the lingual nerve for a tic douloureux of five years' standing. He elevated the nerve 12 mm. on a hook. No return of the pains had taken place for thirteen days.

At the same society Nov. 9, 1881, M. Polaillon told how he, in a case of epileptiform neuralgia of the fifth nerve, trephined the inferior maxilla, and stretched the inferior dental, and obtained complete relief.

In the *Lancet*, Oct. 8, 1881, F. A. Southam narrates the results of nerve-stretching in a case of lateral sclerosis. The left sciatic was stretched, and there immediately followed a cessation of a pain in the abdomen and legs which had resisted morphine. In two weeks the ankle clonus and knee reflex reappeared, but at the expiration of six weeks there had been no recurrence of pain. In a case of locomotor ataxia there was no immediate improvement, but in ten (!) days the pains stopped, other symptoms unchanged. In a case of periodic facial spasm, stretching caused paralysis, which improved under electrical treatment. The spasm did not recur.

E. Ricklin, in the *Gas. Méd. de Paris*, Dec. 31, 1881, in an article on nerve-stretching in the treatment of the principal symptoms of locomotor ataxia, says that a congress of German savants at Salzbourg, in September last, decided that this new treatment gave "illusive results," and that the "progress of the disease was unchecked." Some Berlin physicians have confirmed this decision, and assert that the amelioration is very temporary. It would seem that they think the operation chiefly does good by the psychical impression on the usually sanguine tabetic.

R. W. AMIDON, M.D.

BOOKS AND PAMPHLETS RECEIVED.

Experimentelle und Kritische Untersuchungen zur Electrotherapie des Gehirns insbesondere über die Wirkungen der Galvanization des Kopfes, von Dr. L. Löwenfeld, specialarzt für Nervenkrankheiten und Electrotherapie in München. München: Jos. Ant. Finsterlin, 1881.

Recherches Cliniques et Thérapeutiques sur l'Épilepsie, l'Hystérie, et l'Idiotie, compte rendu du Service des Épileptiques et des Enfants Idiots et Ariérés de Bicêtre Pendant