transient inflammation in the fibrous tissue or joint, the stiffness persisting after the inflammation has subsided, as a hysterical symptom. In these cases the pain is no longer due to the inflammation but to the cramped positions assumed by the muscles in consequence of the stiffness. This is proved by the fact that pain disappears on removal of the stiffness. In this category are included those cases in which pain persists after trench fever.

Treatment consists in explaining to the patient exactly how his present disability has arisen. The rigid muscles are demonstrated to him and his coöperation is invited in learning to relax them. Passive movements are carried out while the patient is urged to allow full relaxation. These movements should not be attended with much pain. When passive movement is free active movement must be started and should be persisted with till movements are freely carried out. The completion of treatment in one sitting is the key to success for thereby the patient sees what he can do and feels that it is worth while to persist. The reason why massage and electricity so often fail in such cases though persisted in for months is that so little improvement is produced at one sitting that the patient is not sufficiently interested to maintain this and he relapses before the next treatment commences. After treatment consists in appropriate employment or hobby which will retrain the part to efficiency in delicate manipulations. Illustrative cases are described. [Author's abstract.]

Damade and Dunot. ASTASIA-ABASIA IN THE SERVIAN ARMY. [Jl. Méd d. Bordeaux, July 10, 1919.]

Astasia-abasia, a hysterical affection, in which the patient immediately collapses on attempting to stand or walk, although he may be able to move his legs normally when lying or sitting, is described by the authors and said to have been remarkably frequent among the Servian troops. They observed no less than 115 cases among 500 cases of functional nervous disorder. It appeared in troops overworked, exhausted and exposed to distressing circumstances, or suffering from cerebral concussion. In addition to the classical form, they describe "the quasi-paraplegic," "the man who breaks in two," "the arm-chair walker," "the pseudo-tabetic," who has phobic Rombergism, "the Parkinsonian" and the man who walks like "a sailor in a storm." All these manifestations are hysterical, all thrive on a basis of physical exhaustion and all can be removed by psycho-therapy.

Krisch, H. SPECIAL TREATMENT OF HYSTERICAL PHENOMENA. [D. Zschr. f. Nervhik., 1918, Vol. 60, p. 240.]

This article is a summary of the results obtained in 129 cases treated from February, 1916, on at the Greifswalder psychiatric clinic. The methods used were chiefly waking suggestion with support by electric