Periscope.

CLINICAL NEUROLOGY.

DES CRISES GASTRIQUES TABÉTIQUES (Tabetic Gastric Crises). Dr. Mathieu (Revue de Thérapeutique, June 1, 1900).

The history of the differentiation of gastric crises from ordinary digestive disturbances is given *in extenso*, and the author enumerates the five different varieties of these crises which were defined by Charcot. The two last of these five groups include those in which the crises occur daily, and those in which the attacks are prolonged. The author considers that those cases in which the duration of the crisis is lengthened are associated with the employment of morphia. The pain is soothed by the use of the hypodermic syringe, but when the patient is not under the influence of morphine he becomes morbidly anxious about the return of the crisis, and by brooding over each individual symptom, he ends by provoking a renewed attack. This is, the author thinks, the great drawback to the use of morphine; it tends to make the attacks not only longer, but more frequent. And yet there is no other means at once so easily employed and so effective against the terrible attacks which are known as gastric crises. Another interesting point concerning gastric crises relates to the latent character of the general symptoms during the continuance of the crises. It may be that the disease itself makes little or no progress while the gastric crises are acute and frequent. Cases are quoted by the author in which locomotor ataxia has been present for twenty years, and during this long period no other symptoms beyond the gastric have ever appeared. It would seem to be that it is the same with the gastric crises as with the eye symptoms; for it is well known that in cases of tabes in which early optic atrophy and resulting blindness are present the general symptoms are frequently very mild, and sometimes are entirely in abeyance. It is necessary, further, that in dealing with periodical, long-continued, and obstinate "bilious attacks," the possibility of locomotor ataxia being behind the symptoms be borne in mind, and in all such cases a careful examination of the knee-jerks, of sensation, and of the eyes should be made.

JELLIFFE.

IL TRAUMA NELLA PATOGENESI DELLA SYRINGOMIELIA (Trauma in the Pathogenesis of Syringomyelia). V. Cito (Gi' Incurabili, March 15, 1900).

The author gives a summary account of the identification as a substantive disease of syringomyelia, from which it appears that the name was first used in 1820 by Ollivier d'Anger. Many cases are brought forward in which the symptoms arose in connection with or soon after injuries to the spinal column. In support of the view that trauma has much to do with the production of the symptoms of syringomyelia is the fact that it occurs particularly in those who are exposed to accidents and injuries—in males of adult age and in those who live by bodily labor. Further, cases are recorded in which, as a result of fracture of the cervical vertebræ, cavities resembling those found in syringomyelia are developed in the spinal cord. It may be,