

seau's, Chvostek's or Hoffman's were constantly present. The author adopts the etiological classification of Frankl-Hochwart. The pathogenesis of tetany is still conjectural, but in one of the cases in this series there was found evidence of abnormal activity of the cells of the parathyroid gland, a suggestive finding.  
C. D. CAMP (Philadelphia).

RESEARCHES ON THE BLOOD OF EPILEPTICS. By B. Onuf, M.D., and Horace Lograsso, M.D. (The Amer. Jour. of the Med. Sciences, February, 1906).

The study of the formed elements of the blood was carried out on one patient, a hystero-epileptic colored man. It was found that a leucocytosis may be present directly before a seizure and is then, of course, not a purely secondary phenomenon produced by the seizure. A grand mal seizure need not necessarily be preceded or ushered in by a leucocytosis. There is no absolute parallelism between seizure and leucocytosis in so far as, even when a distinct leucocytosis is present, such may reach its height at different periods in different seizures. The leucocytosis is in part at least independent of the seizures.  
C. D. CAMP (Philadelphia).

ABSCESS OF THE BRAIN, WITH A REPORT OF FIVE CASES. By H. F. Stoll, M. D. (The Amer. Jour. of the Med. Sciences, February, 1906).

Five cases are reported in detail and a general review is given of the course, symptoms, diagnosis and differential diagnosis of the disease. The interesting feature of the first case is the etiology, which is considered to have been a slight trauma to the head. The second was metastatic, the primary focus being in the lung. In the fourth case, abscess of the right temporo-sphenoidal lobe, the patient lost the use of English and was able to understand only Swedish, his mother tongue. The treatment recommended is a prompt operation when the diagnosis is "reasonably certain."  
C. D. CAMP (Philadelphia).

GENIUS AND DEGENERATION. By H. Edwin Lewis (The Alienist and Neurologist, February, 1906).

Genius—stated to be the capacity for spontaneous imagination, or imagination *de novo*, therefore unreal.

Talent—is skilful technique, applied to material or pre-existing things, and is essentially real. As geniuses, Poe, Whitman, Rembrandt and Wagner are contrasted with Shakespeare, Tennyson, Goethe, Holmes, Bonheur, Alma Tadema, Sargent, Reynolds, Beethoven, Gounod, considered talented. Genius is thought to be evidence of a degenerate and unhealthy mental state, exhibited by the former ones mentioned, in certain of their productions, also by their varied erratic or insane characteristics, and manners of life. As a preventative measure of possible mental retrogression, the cultivation of more healthful tastes in literature, art and music is urged, particularly in the training of young minds.

J. E. CLARK (New York).

GENERAL CONDITIONS AND INSANITY. By H. A. Tomlinson (Journal A. M. A., March 17).

The author emphasizes the importance of general pathologic conditions, especially of general metabolism, in insanity. "Mental aberration," he says, "in its clinical and pathologic aspects, has to do primarily with the potentiality of the nervous organization of the individual, and secondarily, with the perverted or defective processes of metabolism, as they affect the nutrition of the nervous system. In other words, we have to recognize that the degenerative process which makes mental aberration apparent is primarily a general one, affecting the vegetative functions." An analysis of the record of the patients received at the St. Peter's Hospital during the past nine years is used to illustrate his argument, and he concludes from all the data

that: "In dealing with insanity and its manifestations we are concerned with the cerebral potentiality of the individual in considering its nature; with heredity and environment in determining its form and sequence; while the evidence of the involvement of the general organism in the degenerative process must be our guide in anticipating its progress and termination."

**SPINAL ATROPHY AND JUVENILE DYSTROPHY.** By L. H. Mettler (Journal A. M. A., June 16).

Dr. Mettler reports a case of amyotrophic lateral sclerosis, notable because associated with pupillary inequality, and one of juvenile dystrophy in a lad of nineteen, which is discussed at some length. The cause was obscure and Mettler thinks it possible that a transient infectious polymyositis may have been present as its antecedent. The evidence is against a primary cord or nerve degeneration and rather in favor of a primary muscular affection. He discusses the differentiating points between spinal and muscular atrophies and believes that localization of the atrophied areas is an insufficient guide for distinguishing different types of this disease. Typical cases are in fact very rare, and he agrees with Gowers that it is undesirable to make a separate variety of juvenile muscular atrophy, as Erb has proposed. Spinal atrophies may also be juvenile and so may myositis atrophies.

**HYPERTROPHY OF THE BRAIN.** By J. H. Haberlin (Journal A. M. A., June 30).

The author reports the case of a child, aged two, dying in convulsions, in which the apparently symmetrically enlarged brain weighed 1,712 grams (53½ ounces). The membranes were not adherent, there was no flattening of the convolutions, no disproportionate increase in the size of the ventricles and the gray and white matters were developed proportionately. Clinically, the case could not be differentiated from hydrocephalus.

**PROGNOSIS IN MENTAL DISEASE.** By Robert Jones (The British Medical Journal, Dec. 16, 1905).

The average age of admission to the London County Asylum is forty-two years. At this age the expectation of life in the sane is twenty-four years, but the average age of those dying in the asylum is 50.7 years, or about 15 years less. It is proven by statistics that there is always some mental weakness after an attack of insanity. In cases of insanity under twenty years of age, relapses occur with much greater frequency than after this age. The author finds the average duration of general paralysis of the insane to be two years. Favorable factors in any case of insanity are: Normal sleep; gain in weight, accompanied by lessening of mental symptoms, with no lessening of mental symptoms it is a bad sign, especially in adolescents indicating dementia; a restoration of natural facial expression and affection for friends; and increased interest in his surroundings and appearance. The cause of the insanity has a direct bearing on the prognosis.

C. D. CAMP (Philadelphia).

**DRUG ADDICTIONS.**

In the preliminary report of the Committee on Drug Addictions of the Section on Nervous and Mental Diseases of the American Medical Association (Journal A. M. A., March 3), Dr. Smith Ely Jelliffe, the chairman, states that it was not thought best to consider the whole enormous subject of drug habits at this time, but rather to confine the inquiry to the subject of opium addiction. All the committee can do at present is to formulate a series of suggestions concerning lines of fruitful inquiry, and, therefore, they have limited themselves to certain problems that seem at present most promising for solution. The first of these concerns the spread and distribution of the habit, and it is suggested that valuable data may be obtained