

usual tests, seemed to be better than would be expected. This is especially true in the dorsal position. In the standing position the balance is lost immediately on closing the eyes. As in tabes, the tendon reflex is absent, while the cutaneous reflex is present. It may even be exaggerated. The symptoms are especially pronounced in the upper extremities. Speech is but slightly disturbed in one, and nystagmus is to be seen in none. Hence the condition in question is a slowly progressive process of upward direction. Two of the patient's relations are scoliotic. In contrast to the weakness of the lower extremities the gross strength of the muscles was striking, for the resistance offered was quite considerable. Only in one was a weakness of the ilio-psoas muscle to be discovered of both sides. This was also probably true to a less extent of the pelvic muscles, especially of the glutei. All the senses of the patients were good, only one of them presenting a slight limitation of the field of vision. If to these symptoms there be added that the affection ran a painless course, without atrophy and alteration of the electric reaction of the nerves and muscles, that no trophic changes were to be discovered, that the bladder and rectum functionated regularly, then the picture of hereditary ataxia was filled in its chief points. —*Norsk Magazin f. Lægevidenshaben*, No. 5, 1892. F. H. P.

### SEQUEL TO A CASE OF MYXŒDEMA.

At a meeting of the Clinical Society of London, April 22, Sir Dyce Duckworth reported the sequel to a case of myxœdema, which he had presented to the Society two years previously. The patient was a female, and the earliest signs of myxœdema had been noticed some fifteen years before, and she had been under observation at intervals for about eleven years. The principal symptoms were progressive enfeeblement, and gradual onset of most of the well-known concomitants of the disease. Temperature was constantly sub-normal, intractable gastric catarrh and dyspepsia and a tendency to diarrhœa. The features became more and more bloated and the hands larger and more clumsy. The hair fell off and left a spare and very coarse covering on the scalp. Voice hoarse and guttural and the speech slow. Skin harsh and dry. Plantar reflex all right, knee-jerk first noticed to be absent in Feb., 1891. A little albumen constantly in the urine and the urea was several times

found to be excreted at the rate of one per cent. Teeth fell out, rectum became much loaded, aggravated piles developed, and finally bronchitis set in, which was followed by death.

At the autopsy there was no noteworthy change in any of the organs. Arteries somewhat thickened, "distension" ulcers in cæcum and colon, kidneys slightly granular and small, submucous hæmorrhages in the bladder, uterus normal and ovaries hard and white. Some dilatation was found in the central canal of the cervical cord. The thyroid was small, white, and weighed two and one-half drachms. Duration of disease was probably fifteen years or longer.

J. C.

### CASE OF EXOPHTHALMOS, FOLLOWING EPILEPSY.

Nius (Brain, 1892). A patient who had an attack of apparent *grand mal*, was taken two weeks afterward with giddiness, continual headache on left side of head, fixed and staring eyes, non-association of lid and eyeball in movement (Von Graefe's symptom) no enlargement of the thyroid gland. There was a fairly clear history of early syphilitic infection. Under bromides this patient did not progress favorably, but when potassium iodide was given in x gr. doses, three times daily, improvement was soon manifest.

The peculiar point of interest is the supervention of typical exophthalmos unaccompanied by any other of the usual signs of vaso-motor disturbance.

J. C.

### A CASE OF MYXŒDEMA SUCCESSFULLY TREATED BY MASSAGE AND INJECTION OF THE THYROID GLAND OF A SHEEP.

W. Beatty (Brit. Med. Journ., March 12, 1892). The patient, a married lady, aged 45, had been suffering from the symptoms of myxœdema, which had been steadily progressing for upward of four years. The symptoms and signs of myxœdema were so characteristic as to be unmistakable, and the diagnosis was corroborated by other physicians. An examination of the blood showed the percentage of hæmaglobin to be but 70 per cent. of the normal. She was first treated by massage for some weeks, and although this was attended by some benefi-