

**Vincent, S., and Arnason, J. S.** RELATIONSHIP BETWEEN THYROID AND PARATHYROIDS. [Endocrinology, April-June, 1920.]

These experiments show the nonsense of certain reports that parathyroid tissue is converted into thyroid tissue after thyroidectomy.

**Herzfeld, E., and Klinger, R.** CHEMISTRY OF THYROID SECRETION. [Schw. Med. Woch., July 1, 1920.]

These authors conclude from tadpole experiments that the iodine is not a necessary part of the thyroid biological reaction. [For tadpoles.]

## I. SENSORI-MOTOR NEUROLOGY.

### 1. PERIPHERAL NERVES.

**Knapp, Albert.** PROXIMAL CEREBRAL BRACHIAL PARALYSIS. [Monatsschrift für Psychiatrie und Neurologie, January, 1920.]

Paralysis of the fingers is usually most prominent in hemiplegia, as opposed to the musculature of the upper arm and shoulder. There is a proximal type of cortical brachial paralysis in which contrary to the observations on usual hemiplegias the motion of the shoulder joint is more impaired than in finger joints. The individual muscle groups and sections of the arm as well as of the leg are projected on to the cortex of the front central convolution. Proximal brachial paralysis therefore should seek its focus upon or in or close beneath the brain cortex. Usually a tumor is causing it, more rarely an encephalomalacia or traumata. Almost invariably the proximal brachial paralysis is associated with paralysis of the entire leg or its proximal joints. This latter selection usually follows the predilection type.

**Sett, Erwin.** CONCERNING THE ETIOLOGY AND SYMPTOMATOLOGY OF POLYNEURITIS. [Archiv. f. Psychiat. u. Nervenk., 1920, Vol. 61, p. 564.]

The author describes fourteen cases of unmistakable polyneuritis selected by him from the clinical material in the Königsberg clinic from 1914 to 1919. The first four cases were of postdiphtheritic neuritis. In one of these there was, beside vagus neuritis, myocarditic changes resulting in death. (Death was the result also in another case in which there was vagus involvement.) Specially noteworthy in these cases was the affection of certain motor brain nerves—in three cases of the eye musculature, in two of the facialis and trigeminus, in one of the hypoglossus with abducens paralysis. While the accommodation paralysis is typical of postdiphtheritic neuritis, the involvement of the other brain nerves is extremely rare. Case 5 was a severe amyotrophic polyneuritis of