

ally remain unaffected, though with the progressive dulness these may be involved.

In children the disease has varied in duration from six months to eight and a half years. Of twenty-eight fatal cases, ten lasted over five years, and fifteen lasted four years. The microscopical findings do not differ materially from those found in the adult. An excellent bibliography is appended.

56. LA PARALYSIE GÉNÉRALE PROGRESSIVE DANS LE JEUNE AGE (avant 20 ans). General Paresis in the young (before the age of 20). C. Thiry. *Gaz. hebdomadaire de méd. et de chir.* 1898, No. 45 (Also Thèse de Paris, 1898).

A thorough search through the literature since 1877 has enabled the author to bring together the histories of some 67 cases of general paresis occurring in the young under the age of twenty. In the majority of his cases a neuropathic family history is to be found and syphilis plays an important factor, especially in its effects upon the general nutrition of these young cases which would seem to predispose them to degeneration of their nervous tissues. He shows that the clinical pictures resemble closely those found in the adult both with reference to the cerebral and spinal symptoms. The general progress of the disease, the author holds, is so characteristic even in children, that no mistakes need be made in the diagnosis. Remissions he thinks do not occur in the young and the prognosis is always of the gravest. There would seem to be no special therapeutic measures available. Thorough antisyphilitic treatment, which, according to the author, may be of some avail in the adult type of the disease, in the young is unavailing.

57. UN CASO DI PARALISI PROGRESSIVA IN UN BAMBINO E TABO PARALISI NELLA MADRE (General Paresis in the Child and Tabes in the Mother). A. Grannelli (*Rivista quindicinale di psicologia, psichiatria, neuropatologia*, 2, 1898, p. 213).

The author here reports the clinical histories of mother and child. The father was alcoholic and infected the mother with what was apparently syphilis some three or four years before the birth of the child. At the age of 44 the mother developed a typical case of tabes and at the age of 7, following a severe attack of scarlatina with nephritis, the child showed signs of beginning dementia. Her disposition soon underwent a change and she developed a general fine tremor. Later she had an epileptiform attack and subsequently developed into a more or less typical case of general paresis. The autopsy which was incomplete seemed to verify the diagnosis.

JELLINE.