

body. The area of cardiac pulsation is increased. In one case hypertrophy and dilatation of both ventricles developed.

It is thus seen that this disease is essentially a combined psychosis and neurosis. At any rate almost all the disease manifestations point to a cerebral basis, and hence the term "railway-spine" should be abolished. Nor should traumatic hysteria, or Page's traumatic neuræsthenia be substituted. Under the conception of traumatic neurosis and traumatic psychosis the greatest majority of the cases may be included. One limitation should be made for those cases which, few in number, show bladder disturbance, iridoplegia, and optic nerve atrophy; cases which show material changes in the central nervous axis concerning which we have not yet been enlightened.

N. E. B.

PRIMARY ACTINOMYCOSIS OF THE HUMAN BRAIN (Munchner Med. Wochenschrift, 1887, No. 41).

The patient, a female of sixteen years, complained one year before death of severe headache, to which there was added a paresis of the left abducens. Six months after this she was delivered of a healthy boy. The headache progressively increased in severity, and attacks of unconsciousness, short in duration, supervened. Later there were vomiting, coma, death. The diagnosis was a cerebral tumor.

The autopsy showed a tumor the size of a hazel nut in the third ventricle, chronic internal hydrocephalus, with marked distension of all the cerebral ventricles. The tumor contained an albuminous mass, containing mucin and large granulation cells and innumerable characteristic colonies of actinomyces.

N. E. B.

THE DIAGNOSIS OF PREMATURE CRANIAL SYNOSTOSES.

At a meeting of the Imperial Society of Physicians in Vienna, Meynert presented two cases of premature closure of the cranial sutures. The one a boy of $9\frac{1}{2}$ years, who was also hydrocephalic, and whose cranium, as a result of synostosis of the entire sagittal sutures, was remarkably