

EPILEPSY WITH LUXATION OF THE JAW.

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THE following case of epilepsy does not materially differ in its history from hundreds of cases of the disease, except for a singular accompanying accident, namely, luxation of the lower jaw. Dislocation of the jaw from any cause, at any period of life, and especially in the young, is rather a rare occurrence. Few cases have been recorded resulting solely from the muscular contractions of epilepsy.

Minnie S., aged 27; native of Brooklyn, N. Y.; education meagre; can read and write; mother died of phthisis at the age of thirty-five; father was intemperate; has one sister living and healthy. Her general health was uniformly good up to the age of fourteen years. At that time the menses appeared and were ushered in by an epileptic seizure of considerable severity. According to the patient's statement, this first convulsion resulted in a partial dislocation of the jaw. As she was unable to speak and the trouble was not immediately recognized by either her friends or physician, it was attended with great suffering. Subsequently, the convulsions occurred at irregular intervals, but did not prevent her from earning a living. She was employed in the Brooklyn City Hospital, where she was also treated for epilepsy. No other evidence of degeneration was elicited.

In May, 1888, during a journey by rail from New York to New Haven, she had a series of epileptic convulsions followed by maniacal excitement, in which she was violent and disorderly, and, consequently, was committed to the Connecticut Hospital for Insane. For three months following her commitment, mental excitement seemed to take the place of the convulsions. At the end of that period, she again began to have epileptic seizures followed by no mental disturbance.

August 14, 1888, she had a seizure in which two

molar teeth were loosened, necessitating extraction, and on April 28, 1890, the lower jaw was dislocated during a severe convulsion. Thereafter, luxation of the jaw attending a seizure was the rule rather than the exception. During four years' residence in the hospital, twenty-two seizures were recorded; of these, eighteen occurred during the day and four at night. The convulsions were of a severe type, and, during the initial tonic spasm, the depressor muscles of the jaw seemingly acting inordinately lifted the condyle out of the glenoid fossa, resulting usually in a bilateral and complete luxation. Previous displacements together with the absence of the molar teeth rendered the occurrence of the accident both easy and frequent, and, the absence of the molars, particularly of the lower jaw, also greatly facilitated the reduction of the displacement.

In June, 1892, the patient was discharged and returned to Brooklyn, where she found employment. Nothing further was heard from her until three years later (July, 1895), when she visited the hospital and gave about the same history of herself as related above, except that she had had no return of mental aberration. A letter received from her since, states that she is now a candidate for the epileptic colony at Sonyea, N. Y.