

PUERPERAL NEURITIS.

P. J. Möbius (*ibid.*) has added another case of puerperal neuritis to those described by him several years ago. The patient had had a perfectly normal labor and the puerperium was free from fever. She first complained of pains and paraesthesia in the upper extremities with diminution of motor power; two weeks later the same symptoms in the legs; no anæsthesia, reflexes normal, also the response of the muscles to mechanical irritation; muscles somewhat atrophied in upper extremities, but not in the lower.

Recovery under treatment by iodide of potash. Later, a mild form of neurasthenia, but without any of the above symptoms of neuritis, except tenderness on pressure of the brachial plexus.

Möbius considers the initial localization of the illness as characteristic, for in the later course all forms of neuritis may become general and give us the same picture.

There seems no reason to suspect puerperal infection as an etiological factor in this case; at all events, the patient was entirely without fever throughout the illness. Auto-infection has, however, been suggested by the observations of other writers, who have described similar cases of neuritis, some even occurring during pregnancy itself. J. W. B.

DISEASE OF THE VAGUS IN ANGINA PECTORIS.

N. Obolensky (Centralblatt f. Nervenheilkunde, June, 1890) reports the following case: The patient was admitted to the hospital with palpitation of the heart, dyspnœa, pain in the sternal region and thoracic walls, and in the arms. His distress occurred periodically, and was increased by movement; during the attacks great anxiety and cyanosis of hands and lips. The vagus nerve was extremely sensitive to pressure in the cervical portion.

Obolensky diagnosed a primary syphilitic affection of the vagus, and under specific treatment the patient was rapidly and completely cured. J. W. B.

INJURY OF THE FRONTAL LOBE.

In the "Edinburgh Medical Journal" for October, Dr. Thomas Leishman reports a case of extensive injury of the left frontal lobe from the bursting of a gun-barrel. The cavity in the frontal bone extended upwards from the middle of the left supra-orbital ridge for a distance of two inches transversely, at the upper margin one and a half

inch, and at the lower margin nearly one inch. The injury to the brain substance was very considerable, spiculæ of bone being driven down into it, which were with great difficulty removed. The left eyeball was completely destroyed. For two weeks the patient was in a semi-comatose state. The pupil of the right eye reacted to light. At the end of that time the discharge from the wound became very offensive, and the mass of protruding brain substance sloughed. Cicatrization finally began to take place, with an improvement in the physical and mental condition of the patient. Eighteen months after the accident he was able to go about, and finally did farm work. His condition had remained stationary for several months, when he began to notice some loss of power in the right hand, with failing memory and severe periodical headaches. These symptoms had progressively increased in severity, showing undoubted retrogressive lesion of the brain. B. M.

THERAPEUTICAL.

CROTON-CHLORAL IN NEURALGIA.

In the "Medical News" (August 30, 1890) Dr. H. A. Hare calls attention to this remedy for insomnia due to painful affections, as in cranial neuralgia. The active dose is five grains, though forty may be given. In migraine, sick headache and bilious headache Ringer recommends it. In true migraine with hemianopsia it is one of the most useful remedies. It is a perfectly safe drug, and moderate doses can be used in heart disease. L. F. B.

CURATIVE TREATMENT OF EPILEPSY BY SURGICAL MEANS.

The "Canada Medical Record" (September, 1890) has a paper with this title by Dr. Casey A. Wood. The removal of necrosed or depressed bone and foreign bodies, the exsection of scars, tenotomy of ocular muscles, nerve-stretching, the application of ligatures and the actual cautery, tracheotomy, etc., all receive attention as surgical measures offering more or less hope of cure. L. F. B.

CODEINE AS A SUBSTITUTE FOR MORPHINE.

H. Loewenmeyer (Centralblatt f. Nervenheilkunde, May, 1890) has been experimenting with codeine in the Jewish