

of luetic ataxia may be preceded by psychical phenomena bearing a more or less complete resemblance to paretic dementia.

TYPHOID FEVER AMONG THE INSANE.—Dr. Rath (*Allgemeine Zeitschrift für Psych.*, B. xli., Hft. 3) states that an epidemic of typhoid fever occurring among the insane was marked by the absence of psychical symptoms. The fever was brief, and roseola occurred in one case only. Convalescence was rapid. Under the influence of the fever twenty-one per cent. of the cases attacked recovered, forty-two per cent. had a temporary remission of the symptoms, twenty-nine per cent. remained unimproved, and eight per cent. died. These results are much the same as those obtained by Campbell (*Journal of Mental Science*, 1882-83), and de Monteyel (*Annales médico-psychologiques*, s. vi., t. ix.), and seem to hint at the possibility of good results from energetic therapeutic measures, with allied effects to those of typhoid fever.

TRIPLE DIATHESIS IN A MELANCHOLIAC.—Rousseau (*L'Encéphale*, No. 6, 1884) mentions a melancholiac who had been badly treated by her husband, and acquired syphilis from him. She was then attacked with atrophy of the optic nerve; motor together with sensorial impairment. The patient died, four years after the beginning of psychosis, from lung disease. The autopsy showed a gummy swelling of the dura at the base, and it had become adherent to the left half of the cerebellum. The same part of the cerebellum was also the seat of an isolated, centrally located carcinoma; the central ganglia, especially the thalami, were discolored and softened. Besides the syphilitic and carcinomatous diatheses, there appeared a third, tuberculosis, which was limited to the lungs.

BLOOD OF THE INSANE.—Dr. H. Sutherland (*Journal of Mental Science*, April, 1884) concludes that in the insane generally a leucocythæmic condition frequently exists; that any great increase in the number of leucocytes at the expense of the red, and an absence of rouleaux from the blood of the insane, are conditions which generally indicate a very low degree of vitality; that in paretic dementia, epileptic insanity, and hebephrenia, the blood is most deteriorated and the vitality lowered in the male. In mania, melancholia, and dementia the same is the case with the female. It is obvious that the conditions designated under mania, melancholia, and dementia are not clearly demarcated from each other and from various other forms of insanity, and that this vitiates the value of these results.

THE KANKAKEE SYSTEM OF INSANE HOSPITAL CONSTRUCTION.—Dr. F. H. Wines (Eighth Biennial Report of the Illinois