

AERZTLICHES ÜBER SPRECHEN UND DENKEN. Von Prof. G. Anton, Halle.  
Carl Marhold, Halle.

A rich reward is offered for the teaching to man the real actions of mind. The normal is frequently enlightened by the diseased. The vocal organs are innervated by the excitations of the mind, the vocal vibrations call up similar mental phenomena in another man. Speech can continue with one side of the vocal cords and tongue paralyzed, but a small portion of certain brain areas destroyed will cause a cessation of all speech. Words, according to the author, before being spoken are heard in the mind, hence with lesions in the first and second temporal gyri, the patient loses the power of choosing words; speech becomes confused, he is unable to think word sound pictures. Words are wrongly used; therefore, correct thinking is difficult. This can be balanced by sign speech. With a lesion of the lower frontal convolution, the patient is unable to pronounce words. With this location affected there is also diminished capacity to write thoughts or to write at dictation, but the patient can often copy. The lower third frontal is a component in writing as well as in speaking, for the symbols used in writing and speaking have a similar mental meaning. In other cases the patient may be word blind and this affects in a proportionate manner the mental content.

S. D. LUDLUM (Philadelphia).

NERVOUS AND MENTAL DISEASES. For Students and Practitioners. By Charles L. Potts, M.D., Professor of Neurology in the Medico-Chi College of Philadelphia. Second Edition, thoroughly revised. In one 12mo volume of 570 pages with 133 engravings and 9 full page plates. Price, cloth, \$2.50 net. Lea and Febiger, Publishers, Philadelphia and New York.

In the second edition of this well-known manual Dr. Potts has added many new and important features, bringing the subject matter well up to date. We are glad to see, for instance, that he has incorporated the term Serous Meningitis in his article on Meningitis. Few text-books, if any, make reference to this condition. Many other subjects we find presented, as lumbar puncture, concerning which the author discusses in detail the indications and technique. The illustrations here should prove valuable. Aphasia is presented well, the writer giving a special chapter on the development of speech in the child. Among other commendable chapters are those on cerebral localization, spinal localization, the vascular distribution of the brain and dementia præcox.

The book is well balanced, save that we think the author gives too few references to the literature, and that illustrations of the pathology of tabes would have been more appropriate than of Friedrich's ataxia, a disease somewhat rare.

For the student and general practitioner this volume, enhanced by the latest views, should prove most useful and valuable.

S. LEOPOLD.

SPEECH DISTURBANCES AND SPEECH THERAPEUTICS. Contributions to the Knowledge of the Physiology, Pathology and Therapeutics of Speech. Reprint from the *Monatsschrift für Sprach Heilkunde*, Bd. XVII. Verlag von S. Karger, Karlstrasse 15, Berlin.

This reprint from the *Monatsschrift für Sprach Heilkunde*, Bd. XVII,

in honor of the 70th birthday of Albert Gutzman, director of the State Institute for the Deaf and Dumb in Berlin, does not lend itself readily to abstracting. It comprises a series of articles by friends and former students of Dr. Gutzman. The articles embrace divers subjects relating to speech disturbance and their treatment.

Among the more noteworthy are to be mentioned, "The True Relation of Divers Forms of Language," by George Rouma. "The Phonomimic Method," by Dr. A. v. Sarbo; and "Speech Disturbances in a Case of Chronic Bulbar Paralysis and the Method of Treatment," by Dr. H. Knopf and Pauconelli Calgia.

S. LEOPOLD.

DISEASES OF THE NERVOUS SYSTEM. By H. Campbell Thomson, M.D. (Lond.), F.R.C.P. Keener & Co., Chicago, 1908.

In this work the author presents to the third and fourth year student the essentials of nervous diseases in a concise and readable manner. It is clearly written and well arranged, taking up the etiology, pathology, symptomatology, differential diagnosis, and treatment of each disease. The chapter on Tabes is particularly good. Here the author refers to Ford Robertson's researches on the infective origin of general paralysis of the insane and locomotor ataxia, as still an open question. In discussing the sensory neurones he adopts Head's classification of epicritic and protopathic sensibility. This volume should be invaluable to medical students.

ZUR DIFFERENTIALDIAGNOSE DER POLIOMYELITIS ANTERIOR ACUTA. (Myatonia congenita [Oppenheim] und Polyneuritis.) Inaugural Dissertation, von J. Victor Haberman, A.B., M.D. Verlag von S. Karger, Berlin.

As the title would suggest, the monograph is concerned primarily with the clinical picture presented by the three diseases, and their differential characteristics. Unfortunately, little knowledge of real value has been contributed to their etiological or pathological aspects. The subsequent investigations upon myatonia have merely confirmed, but added little new to the facts already described by Dr. Spiller. The author is convinced that a "polyneuritic" form of poliomyelitis does exist and that the peripheral nerves in such cases show no evidence of inflammatory changes. From a clinical point of view the author has presented a very careful and thoughtful study of his own and reported cases. His analytical work is good and the differential points are well chosen. Wickman's studies on poliomyelitis have been freely consulted. The article reads like a good "text-book" chapter, and will no doubt be helpful to the general practitioner in moments of hesitation.

Six cases are reported from Professor Oppenheim's clinic; one in which no diagnosis was made, two of myatonia congenita, one of idiopathic polyneuritis, and two of poliomyelitis. The first resembled poliomyelitis, with its acute onset, fever, and slight disturbance of function, but the entirely negative objective findings made the diagnosis uncertain. Patient recovered after eight days without electrical changes. He emphasizes the not infrequent occurrence of such cases, and the necessity of waiting to determine whether the muscle weakness be permanent or transient.

The two cases of myatonia congenita with marked paralysis of the