

case of melancholia in a girl of good heredity, which recovered under the influence of an attack of erysipelas.

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MANIA TRANSITORIA.—Drs. Verga and Gonzales (Atti del Quarto Congresso de la Societa Freniatria Italiana) define mania transitoria as a psychosis of short duration, which, under the influence of an immediate cause, leaps suddenly into existence once in a lifetime with great violence, without febrile disturbance, in a healthy individual who, during the attack, has no consciousness of his state. The affection is cured at the end of a deep slumber. They report two cases, and a third is added by Brunati.

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TYPHOMANIA.—Dr. B. Ball (*L'Encéphale*, No. 2, 1885) believes that typhomania is closely allied to the infectious fevers, and that in all probability it is of microbic origin, and appears only in neurotic subjects.

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REFLEXES IN PARETIC DEMENTIA.—Dr. A. Betten Court-Rodrigues (*L'Encéphale*, No. 2, 1885) says that he has examined sixty-eight paretic demented. In forty-three he found a marked exaggeration of the knee-jerk, and in two of these spinal trepidation was present eleven times. The knee-jerk was abolished, but of these cases two had developed from locomotor ataxia. In the cases the reflex was nearly normal. Expansive ideas were more frequent among the cases in which there was exaggeration. The cutaneous reflexes were very frequently abolished.

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CEREBRAL LESIONS IN THE CHRONIC INSANE.—Dr. H. E. Allison Willard, New York (*Alienist and Neurologist*, July, 1885) says that: "There are probably no fixed and constant pathological conditions, in unvarying connection with every type of insanity, as the forms of mental alienation are now named and recognized; but to some degree a classification, depending upon brain lesions, has already been made, and, although this may not become the sole basis of distinction, its bounds will be enlarged in the future. While it is not true that we can determine before death, or after, the nature of these changes in all cases, neither is it true that insanity is a disease so evanescent and ethereal in character as to always leave no trace, or traces so slight as to be entirely microscopical, of its destructive action upon brains long affected by mental disorder. Aside from diseases naturally incident to its coverings and envelopes, from traumatism and constitutional disease, undoubtedly, the excessive functional use of the brain leads to alterations of structure, which eventually become more or less evident to view, and which are often capable of being demonstrated."