

source of the supposed embolus of emboli. There is no adequate evidence of softening, red or otherwise, and regarding the cerebral vessels about the only pertinent statement made is that "a thrombotic condition of the arteries and veins of the cortex existed throughout." If there may be such an entity as "a thrombotic condition" it is entirely too uncertain and illusive in its nature as presented by the authors to be of any use to the reader. Finally there is some description of findings by means of the Golgi or probably a modified Golgi impregnation. To those conversant with the uncertainties and difficulties of this method in pathologic (and purely anatomic) research, this report of cell changes as well as the accompanying reproductions from photomicrographs are of little interest and less value.

PATRICK (Chicago).

LES MYELITIS INFECTIEUSES. By Dr. T. B. Crocy. *Journal de Neurologie et d'Hypnologie*, Nos. 1 and 3.

In tabulating all cases of myelitis reported in which the disease came as in connection with infectious disease, C. comes to the conclusion that by far the most cases have been observed in connection with diphtheria. Variola comes in the second order as to frequency; then comes intestinal affections, pneumonia, blenorrrhagia, staphylococcism, typhoid fever, erysipelas, influenza, measles and finally as the least frequent cause articular rheumatism.

C. finds that the prognosis of these "infectious" myelitides is relatively less grave than that of the other myelitides.

Those cases in which no post mortem proof existed were not considered in the table. The cases observed in connection with scarlet fever and with malarial fevers were not included for this very reason.

Be it understood that under the title of myelitis C. includes (clinically speaking) infantile spinal palsy, the acute spinal palsy of the adult, the tabes dorsal spasmodique, diffuse acute or chronic myelitis, etc.

ONUF.

Ueber Rückenmarkserkrankungen bei Keuchhusten. (Lesions of the Spinal Cord in Pertussis). *Verein für innere Medicin, Berliner klinische Wochenschrift*, No. 45. By Bernhardt.

Spinal lesions in whooping-cough are rare. Bernhardt reports the case of a child, who on the tenth day of the disease suddenly lost power over its lower limbs. There was neither fever, nor convulsions, nor disturbance of consciousness. The upper extremities were not affected. The tendon reflexes in the leg were exaggerated and sensation was less acute. The vesical functions were impaired. After a few years the child entirely recovered. The writer thinks the cause may have been hemorrhage into the spinal canal or cord, secondary infection, or intoxication from the products of the bacteria.

SPILLER.

#### EMOTIONAL DYSGRAPHIA.

M. Féré (*Médecine Moderne*, Nov. 18, 1896), at the Soc. de Biologie, communicated his observation of a patient presenting the phenomenon of writers' cramp, if watched by anyone or writing from dictation. Under these conditions the hand became immovably fixed and the patient could not write a word. After a minute or two of effort he could write without difficulty and no trace of the disability in his handwriting. The same trouble was not experienced if the patient wrote in a room by himself. No statement is made as to whether this difficulty was accompanied by pain or not, and M. F. considers it in "no way analogous to writers' cramp."

MITCHELL.