centres, or to a want of motor and acoustic attention. He recommends for those so affected a special scheme of instruction in the formation of sentences. The study of special mental deficiencies pursued by medical men has thrown a new light upon psychology. As a contribution to this interesting line of observation the subtle analysis of observed cases in the little book of Dr. Hinshelwood on letter-, word-, and mind-blindness seems most worthy of attention. W. W. IRELAND.

Low Temperatures in Epilepsy [*Ipotermie nell' Epilessia*]. (*Riv. Sperim. di Freniat., fasc. iv*, 1900.) *Ceni, C.*

In this paper Ceni describes a new symptom in epilepsy. It consists in the sudden fall of the body temperature to 35° or even to 34° C. This fall lasts for about an hour. It is repeated at irregular intervals, sometimes several times daily, more frequently every two or three days. It was present in sixty-six per cent. of cases examined. He has not been able to establish any relationship between the occurrence of fits and the fall in temperature. A similar lowering of temperature has been noted as the result of the injection of blood or serum into animals. The serum from epileptics, however, gave largely negative results. In only one case did the serum, extracted during the phase of lower temperature, have a greater power of reducing the body heat than the serums extracted at a normal temperature. There was also no difference in this power between cases showing the phenomenon and those in which it was absent. The author regards the symptoms as a true epileptic condition. J. R. GILMOUR.

Inhibition in Mental Diseases: an Experimental Research [*L' inibizione nelle malattie mentali*]. (*Ann. di Nevrol., fasc. i*, 1901.) *Libertini, G.*

This research was carried out on the spinal reflexes. The author found—(1) That the reflex time in the upper limb is markedly reduced in all forms of mental disease, and that it diminishes proportionately to the gravity of the condition and to the degree of mental decadence. The minimum time was found in classical types of microcephaly. In these it approached very closely to that found in the apes. (2) In paralytic cases it is reduced, varying with the condition and localisation of the lesion. (3) In epileptics it is reduced, but there is always an increase of the reflex time after the fit. (4) As a general rule, states of excitement have a greater reduction than states of depression, and this is especially so in women. (5) The reflex time can be diminished by causing a cerebral area to functionate, as by fixing the attention on a given sign. (6) It seems that the inhibitory waves from the higher centres to the lower do not pass by the pyramidal tracts, but probably by the cortex, pons, and cerebellum. (7) This inhibition may be considered as one of the exponents of the mentalisation of the individual. The more this is lost, the more the latent period of the spinal reflex is reduced.

J. R. GILMOUR.