

4. Neurology.

Intracranial Neoplasms: their Incidence and Mental Manifestations. (*Psychiat. Quart.*, vol. xi, p. 561, Oct., 1937.) Hoffman, J. L.

Amongst 2,000 autopsies at St. Elizabeth's Hospital there were 69 intracranial neoplasms, i.e., 3.45%. The writer points out that there is no psychosis characteristic of brain tumours. The usual symptoms, such as euphoria, facetiousness, *witzelsucht*, uncinata phenomena, dreaming states, etc., are merely suggestive, and have to be confirmed by a neurological examination. The symptoms most suggestive of a brain tumour are confusion, aphasia and sphincter disturbances, together with hypersomnia.

G. W. T. H. FLEMING.

Epidemic Encephalitis. (*Arch. Neur. and Psychiat.*, vol. xxxviii, p. 1135, Dec., 1937.) Holt, W. L.

The writer followed up 78 cases of acute epidemic encephalitis at the Boston Psychopathic Hospital. He found 11.5% alive and without known sequelæ after from 10 to 16 years. The prognosis for lasting recovery appears not to be altered appreciably by the prominence of mental symptoms during the acute attack. Of 90 patients with sequelæ observed again after from 10-17 years, 7.7% had apparently recovered. Children with behaviour disorders constitute the only group with sequelæ of epidemic encephalitis in whom improvement may reasonably be expected.

G. W. T. H. FLEMING.

Familial Total External Ophthalmoplegia [*Oftalmoplegia esterna totale congenita familiare*]. (*Il Cervello*, vol. xvii, p. 72, Mar., 1938.) Galli, G. M.

Five cases in one family are described. A brother and sister were affected, while a remaining sister escaped. Their male first cousin, father and paternal grandmother were the other sufferers. The symptoms were confined to those of external ophthalmoplegia plus slight adductor paresis of the vocal cords. The blood and cerebro-spinal fluid Wassermann tests were negative in all the cases; the usual chemical and biochemical tests were negative in the cerebro-spinal fluid, and the colloidal benzoin test showed 000022120000.

H. W. EDDISON.

Friedreich's Ataxia. (*Arch. Neur. and Psychiat.*, vol. xxxix, p. 116, Jan., 1938.) Hassin, G. B.

The pathological feature of Friedreich's disease is degeneration of the posterolateral columns of the cord, which is also usually seen in subacute combined degeneration. The differences in the two diseases are quantitative: one is a chronic degeneration, the other subacute. The medulla, pons and cerebellum are not involved in Friedreich's disease, but are in Marie's ataxia, which is a morbid condition of certain groups of ganglion cells. The degeneration of the posterior roots which often occurs in cases of Friedreich's ataxia of long standing is secondary to that of the posterior columns.

G. W. T. H. FLEMING.

Electrical Signs of Cortical Function in Epilepsy and Allied Disorders. (*Amer. Journ. Psychiat.*, vol. xciv, p. 835, Jan., 1938.) Jasper, H. H., and Nichols, I. C.

The writers found epileptiform seizure waves on the electro-encephalograms of patients who were not subject to paroxysmal loss of consciousness or to convulsive movements. On the other hand, this makes possible the diagnosis of epileptoid disorders in patients who would not otherwise be diagnosed as epileptic. The