normal speakers 81% had a right lead, and amongst 17 stutterers only 15·6% had a right lead. Amongst the normal 9% had a left lead and 10% a simultaneous lead; amongst the stutterers, 53% had a left lead and 31% a simultaneous lead.

G. W. T. H. Fleming.

Progressive Degenerative Subcortical Encephalopathy (Schilder's Disease). (*Arch. of Neur. and Psychiat., December*, 1928.) *Globus, J. H., and Strauss, I.*

The authors consider 4 cases of their own and discuss 22 from the literature. They point out that the pathological alterations are restricted to the white matter and are degenerative in nature. This degeneration consists of a diffuse demyelination and a destruction of axis cylinders, with changes in the latter not unlike those seen in multiple sclerosis, combined sclerosis and familial degenerative diseases. As the parenchyma undergoes dissolution it is replaced by diffuse glial hyperplasia and other glial alterations in which fibroblastic astrocytes and compound granular cells play a prominent *rôle*, with the participation of microglia in its various modifications. There is no infiltration by mesodermal elements. The disease may be due to a toxic factor of unknown nature, which affects the normal growth of the parenchymatous structures in the subcortical regions of the brain, causes their dissolution and results in proliferative glial changes. The disease occurs in young children, and is characterized by a rather abrupt onset, which often takes the character of a gastro-intestinal disturbance, followed by a series of cerebral manifestations—mental dilapidation, spastic paralysis accompanied by advancing rigidity, contractures and convulsive seizures. Advancing blindness with or without optic atrophy, deafness and aphasia may develop at any stage of the illness. The authors consider that this disease includes some of the conditions described as chronic encephalo-myelomalacia, diffuse sclerosis, perivascular myelin necrosis, encephalitis periaxialis diffusa, sclerosing encephalo-leukopathia and interlobar symmetrical sclerosis.

G. W. T. H. Fleming.

Encephalitic Respiratory Sequelæ. (*Journ. of Nerv. and Ment. Dis., October*, 1928.) *Wolff, H. G., and Lennox, W. G.*

The authors studied three patients who showed respiratory phenomena following encephalitis. One had respiratory seizures of rapid breathing without apnœa, and generalized convulsive attacks occurring independently of, or following, the respiratory disturbance. The other two patients had paroxysms of apnœa in full inspiration with spasm of the respiratory muscles, followed by loss of consciousness and convulsive movements. The authors think that convulsions produced in experimental animals by greatly increasing the intrathoracic pressure are comparable to the symptoms observed in the last two patients. In one of these patients the intensity of respiratory seizures, like convulsions occurring in other conditions, could be altered by changes in the chemical composition of the blood.

G. W. T. H. Fleming.