Fibrous Tumour of the Bulb [Tumeur fibreuse du Bulbe]. (Rev. de Psychiat., July, 1908.) Vigouroux, M. A.

The rare condition of a fibroma in the bulb is recorded. It occurred in a man, æt. 51, a drunkard who had received several head injuries, of which the most important and most recent had taken place six years previously, i.e., a fracture of the right temporal bone. Mentally, for the eight months previous to his death, he was violently excited with hallucinations and ideas of persecution and grandeur. He died in a coma which followed a short convulsive attack of the right side. Several weeks before his death he had shown signs of defective equilibrium; he tended to fall to the left, stood on a broad base and was not able to stand erect alone.

At the autopsy no sign of the fracture could be seen, but the tumour could be seen in the angle of the bulbar protuberance, and there was some atrophy of the over-lying cerebellum, the left hemisphere weighing 30 grms. less than the right. On section it was found to be conical in shape, the base, measuring or cm. in diameter, being superior. It lay in the left lateral half of the bulb, but did not reach the tubercle. It extended to just above the decussion of the pyramids. The overlying pia mater was thickened and contained a number of vessels.

The tumour was of firm consistency but without being hard, and its centre showed no liquefaction or calcification. Although to the eye it was easily discernible, yet it could not be shelled out. It had destroyed the nerve-fibres of the left restiform body, and those of the eighth and ninth nerves, but the olive and acoustic fibres were undisturbed. No other cranial nerve nuclei were affected.

Histologically it consisted of elongated fibres joined in loose bundles, crossing each other in different directions, and in its midst were a number of congested vessels, certain of which seemed to be undergoing a hyaline degeneration. The overlying pia was thickened, congested and fibrous, and connected with the tumour, which appeared to arise from it.

The author considers it possible that the growth was of traumatic origin.

SIDNEY CLARKE.

Contribution to the Pathological Anatomy of Multiple Sclerosis, with Particular Regard to the Cerebral Cortex [Zur pathologischen Anatomie der multiplen Sklerose mit besonderer Berucksichtigung der Hirnrindenherde]. (Neur. Cbl., Nr. 19, 1908.) Oppenheim, G.

The examination of the cortex of the brain in multiple sclerosis shows that there exists a peculiar condition of the affected areas, in that these contain no compact fibrous glia proliferation, but an increase of the net-like protoplasmic glia structures. Ætiologically it is of particular importance, that in three of the four cases cited there was found a diffuse perivascular infiltration of plasma cells analogous to those seen in progressive paralysis (Nissl, Alzheimer), and in trypanosomic diseases (Speilmeyer). A principal difference, however, lies in the fact that in these diseases there are very marked degenerative changes of the ganglion cells, while in multiple sclerosis these changes are inconsiderable, but in spite of this difference, the diffuse infiltration