chloroform, while completely eliminated, has injured the cells of the central nervous system, making them more susceptible to barbiturates.

XVIII: A Peripheral Action of Barbiturates. (Ibid., pp. 128–34.) Linegar, C. R., Dille, J. M., and Koppanyi, T.

Amytal, pernocton, moderate doses of pentobarbital and large doses of barbital may paralyse the peripheral vagus but not the central vagus, whereas phenobarbital has no paralytic effect. Pilocarpine and acetylcholine still slow the heart. Vagus excitability is restored by physostigmine. Conclusion : The barbiturate action is in the peripheral ganglionic cells of the heart.

XIX: The Barbiturate-picrotoxin Antagonism. (Ibid., pp. 199–228.) Koppanyi, T., Linegar, C. R., and Dille, J. M.

A review and extension of data. Metrazole is of value in mild cases of barbiturate poisoning, picrotoxin also being required in the treatment of more severe poisoning. T. H. RIDER (Chem. Abstr.).

6. Pathology and Biochemistry.

Effect of Encephalography on Blood-sugar Level of Children. (Amer. Journ. Med. Sci., vol. cxciii, p. 259, Feb., 1937.) Bradley, C.

The writer found that encephalography as usually carried out in children consistently resulted in hyperglycæmia with blood-sugar levels often in the vicinity of 200 mgrm.%. The blood sugar rises rapidly during spinal fluid replacement, reaches its peak within an hour and falls over a period of several hours. This hyperglycæmia bears no evident relationship to the anæsthetic used, the clinical condition or age of the child studied, the amount of fluid withdrawn or air injected. G. W. T. H. FLEMING.

Vital Staining of the Central Nervous System (Sulla colerazione vitale del sistema nervoso). (Riv. di Neur., vol. ix, p. 253, Oct., 1936.) Giordano, F.

After injecting during life mercuric chloride and cantharidin, the author studied their effects upon the choroid plexus in rabbits. He found, as others before him, that cantharidin selects the connective tissue of the villi, while corrosive sublimate attacks the epithelium. He describes and discusses the lesions found.

H. W. Eddison.

Creatinuria in Post-encephalitic Parkinsonism [Sul ricambio dei corpi creatinici nel parkinsonismo post-encefalitico]. (Riv. Sper. di Freniat., vol. lx, p. 388, Sept., 1936.) Porta, V., and Pelliecioli, V. G.

The authors state that they have frequently found creatinuria in post-encephalitic cases. They consider that treatment with atropine reduces the amount of both creatine and creatinine in proportion to the degree of improvement obtained. H. W. EDDISON.

The Iso-electric Point of Protein in the Cerebro-spinal Fluid [Il punto isoelettrico della proteina del liquido cefalo-rachidiano]. (Riv. di Neur., vol. ix, p. 368, Oct., 1936.) Tornu, A.

The iso-electric point of the total protein offers difficulties owing to the different value of each individual protein and variations in their proportion.

The highest degrees of precipitation are seen in general paralysis, acute encephalitis and tubercular meningitis. In G.P.I. the zone of precipitation reaches its maximum at pH $5 \cdot 1-5 \cdot 4$. In meningitis it tends towards the acid side with maximum precipitation round about pH 4 7. In normal and in non-inflammatory cases the zone of precipitation is narrowly limited to about 4.7. The readings are not constant in tabes. H. W. EDDISON.

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