

hallucinations of hearing. It is invariably accompanied by commencing arterio-sclerosis of the brain, other brain disease, or it is found in persons of a psychopathic disposition.

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*An Attack of Pain originating in the Central Nervous System, and accompanied by High Fever, in a Case of Progressive Paralysis [Zentral bedingte Schmerzattacke mit hohem Fieber bei progressiver Paralyse]. (Neurol. Zentralb., 1912, No. 12.) Patschke, F.*

The case described is one of typical general paralysis occurring in a woman, æt. 38. She was suddenly seized with an attack of severe pain affecting principally the extremities on the left side. The temperature rose rapidly while the attack lasted. The duration of the attack was comparatively short, viz., six to seven hours. There were no convulsive movements or motor paralysis. There was hypalgesia from the middle of the left femur downwards, and by piercing the skin of the calf no sensation was produced. Although the pains abated and the temperature became normal in a few hours, sensibility was not completely restored three days after the attack.

In spite of the fact that anatomical investigation was not possible, there can be no doubt that the pains were due to a disturbance originating in the central nervous system. No traces of a peripheral momentum could be discovered.

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*Anatomico-clinical Study of Presbyophrenia [Étude anatomo-clinique de la presbyophrénie]. (L'Encephale, Feb., 1912.) Marchand, L., and Nouët, H.*

Three cases presenting the presbyophrenic syndrome described by Wernicke, Kalbaum, Arndt, Kraepelin and others, were made the object of particular study, clinical and *post-mortem*. Whilst some authorities regard presbyophrenia as a clinical entity, others consider it a clinical form of senile dementia, and others again as an insidious and chronic psycho-polyneuritis similar to Korsakoff's psychosis. The patients were æt. 70, 84, and 71 respectively, and each presented the symptoms which, according to Kraepelin, characterise presbyophrenia, viz., amnesia of fixation and of evocation, confabulation, disorientation and illusions of recognition. The first two patients had never been given to excesses of any kind, and the third was addicted to alcoholic excesses during several years before the commencement of his illness, and in his case alone was there any possibility of doubt as to the diagnosis between presbyophrenia and Korsakoff's psychosis. Senility and cerebral atheroma were the only ætiological factors discovered in the other two. Examination failed to reveal any indication of polyneuritis in any of the patients, and no history of former paralytic troubles was obtained. The continuity of the disorders of memory, the absurdity of the conceptions resulting from these disorders, the rapidity and facility with which the patients comprehended and responded to the questions put to them, the weakening of judgment, reasoning and affective sentiments, excluded the presence of mental confusion, and indicated a state of dementia related to diffuse and severe lesions of the cortex. Both macroscopi-