

### Clinical Notes and Cases.

*A Note on the Use of Luminal in Epilepsy.* By J. B. STRAFFORD LEWIS, M.A.Camb., M.R.C.S.Eng., L.R.C.P.Lond., Assistant Medical Officer, Claybury Mental Hospital.

LUMINAL has been used in the treatment of insane epileptics in a number of patients at Claybury Mental Hospital during the last three years. A perusal of the results obtained shows that this drug would appear to have a definite value in diminishing the number of seizures, but that it hardly deserves the encomiums showered upon it in some quarters, *e.g.*, it does not reduce fits to the level of "rare occurrences," and in some cases the fit-incidence is increased during its administration.

Two main groups of cases are tabulated below. In Table I are given the results in cases where luminal was added to an already existing daily dose or doses of bromide in one form or another. In Table II luminal alone was given, and any previous medication stopped.

A word of explanation is perhaps necessary to show how some of the figures were obtained; thus, the "fit-incidence before and after

TABLE I.

Initials.	Sex.	Daily dose in grs.	Number of months under treatment.	Fit-incidence per month.			
				Before.	During.	After.	Result.
F. C— . . .	F.	1½	8	16·4	14·5	12	Im.
G. B— . . .	F.	1½	10	15·7	3·5	9·3	M.I.
F. W— . . .	F.	1½	22	5	3·1	—	Im.
E. B— . . .	F.	3	19	13·1	5·4	—	M.I.
E. B— . . .	F.	3	17	5·2	2·4	10·1	M.I.
E. F— . . .	F.	1½	23	8·5	7·5	—	Im.
E. T— . . .	F.	3	29	3·8	1·8	—	M.I.
A. S— . . .	F.	1½	12	21·2	4·6	4	M.I.
M. H— . . .	F.	3	23	24·5	18·4	—	Im.
F. S— . . .	F.	1½	22	10·3	13·8	—	W.
C. B— . . .	F.	3	20	41·4	19·4	—	M.I.
C. H— . . .	F.	1½	12	5·2	3·6	9·7	Im.
M. C— . . .	F.	3	10	15	10·6	15·7	Im.
G. K— . . .	F.	3	23	6·3	4·3	—	Im.
L. M— . . .	F.	6	16	12·8	18·3	—	W.
E. C— . . .	F.	1½	23	8·5	2·9	—	M.I.
E. A— . . .	F.	1½	20	7·8	3·8	—	M.I.
M. R— . . .	F.	1½	31	6	4·9	—	Im.
L. W— . . .	F.	1½	10	8	9·4	9·3	W.
A. C— . . .	F.	3	7	30·9	16	—	Im.
E. C— . . .	F.	1½	14	35	28·2	18	Im.

treatment" represents an average taken over a period not less than six and in most cases as much as twelve months. In several cases these spaces are left blank, because either (1) the cases are still undergoing treatment, or (2) they were new admissions, and details of their previous history were not available.

Those cases whose fits were diminished by more than half were regarded as much improved. The results of this group may therefore be summarized as follows :

Much improved . . . 8, or 38 per cent.  
Improved . . . 10, ,, 47 ,,  
Worse . . . 3, ,, 14 ,,

An additional group of patients, 11 in number, have been similarly treated for periods too short to justify any very decided conclusion, but of these 8 show improvement, 1 remains *in statu quo*, 1 is worse, and 1 has died from *status epilepticus*.

TABLE II.

Initials.	Sex.	Daily dose in grs.	Number of months under treatment.	Fit-incidence per month.			
				Before.	During.	After.	Result.
A. B— . . .	F.	1½	8	15	3·4	—	M.I.
M. H— . . .	F.	1½	25	6·2	6·1	—	I.S.Q.
D. S— . . .	M.	3	22	6·3	3·1	13	M.I.
W. P— . . .	M.	1½	11	—	5·3	7·5	x.
J. C— . . .	M.	½	20	8·3	8	—	I.S.Q.
H. Z— . . .	M.	3	6	42·8	30·8	—	Im.
G. B— . . .	M.	3	16	15·1	8·5	—	Im.
W. C— . . .	M.	3	15	13·3	15·1	—	W.
L. W— . . .	M.	3	13	27	2·6	—	M.I.
A. A— . . .	M.	3	6	8	5·8	11·5	Im.
H. C— . . .	M.	3	10	26·7	10·5	—	M.I.
H. B— . . .	M.	3	18	26·2	7·7	11	M.I.
A. M— . . .	M.	1½	8	—	2·4	5·9	x.
A. K— . . .	M.	3	20	64·2	68·9	—	W.
A. H— . . .	M.	1½	16	4·2	5·7	—	W.
T. P— . . .	M.	3	15	3·7	1·2	—	M.I.
N. B— . . .	M.	3	8	6·5	4·5	—	Im.
G. H— . . .	M.	4½	8	9·4	8	—	Im.
C. Mc— . . .	M.	3	9	21·5	18·2	21	Im.

These may be summarized as follows :

Much improved . . . . . 6, or 31 per cent.  
Improved . . . . . 6, ,, 31 ,,  
x = Better on luminal than on other medicine 2, ,, 10 ,,  
*In statu quo* . . . . . 2, ,, 10 ,,  
Worse . . . . . 3, ,, 16 ,,

Out of 5 additional patients similarly treated for shorter periods, 3 appear benefited, and the other 2 *in statu quo*.

## SUMMARY AND OBSERVATIONS.

1. In 40 cases given luminal alone or in conjunction with bromides, 32 cases (or 80 *per cent.*) showed diminution in fit-incidence.
2. It would appear that as a rule luminal plus bromide is better than luminal alone.
3. No marked difference was found in the effect of the drug on major and minor seizures.
4. When luminal was stopped the fit-incidence fell in 3 cases, remained stationary in 1 case, and rose in 10 cases.
5. No poisonous symptoms or rashes at all were noted in this series.
6. No mental or physical amelioration was observed in any of the patients, other than was to be expected concomitantly with the fit reduction.
7. One case having luminal died with *status epilepticus*.
8. The principal moral to be drawn from these observations is that it is the patient who should be treated and not the disease. Epilepsy is not cured by luminal, but many epileptics are benefited by it.

I wish to express my thanks to Dr. G. F. Barham, the Medical Superintendent, for permission to publish the notes on these cases.

---

---

*Mental Symptoms following Evacuation of Cerebral Blood-Cyst.*<sup>(1)</sup> By W. CALWELL, M.D., Physician to Royal Victoria Hospital, Belfast.

A. B—, æt. 42, governess, of a neurotic family. Had been in France and England with an American family, and consulted several doctors for some vague illness, sciatica, etc.

Seen first October 12, 1923, in consultation with Dr. Watson, Belfast. She was suffering from very severe headache and complained at times of being in agony, at times getting some relief. This headache came on very suddenly. She had then definite left hemianopia and left hemiparesis and left hemianæsthesia; there was no optic neuritis.

October 25, 1923: Admitted to the Royal Victoria Hospital in a semi-comatose condition. In the more conscious intervals she still had attacks of the agonizing pain already complained of; there was still the hemianopia, hemiparesis and hemianæsthesia. Some vomiting during the first few days. Some blurring of the discs was now seen, and retina was noted as congested. Towards the right she was able to count fingers at three feet, towards the left not at all, but she could make out movements at three inches.

On November 1 little change is noted in her sheet. Still complains of headache in her more conscious periods; at other times she is wildly delirious; optic neuritis more marked. Blood-pressure, temperature, were all normal; cerebrospinal fluid escaped under some pressure; both it and the blood were negative for Wassermann. X-ray examination of the skull showed nothing abnormal. She had some vague delusions about this time: she refused to take fluid out of a feeding-cup, and subsequently it was discovered that she thought that there was urine in the cup.