

with that in Penfield's acute swelling. The areas of severe degeneration showed a complete destruction of the myelin, which was phagocytosed by scavenger cells of microglial origin. The axis-cylinders were partially preserved. The oligodendroglia had entirely disappeared. The neuroglia had hypertrophied in number and size of the cells, and formed a thick, fibrous network. The perivascular spaces were enlarged, and were filled with scavenger cells and a few lymphocytes. In the areas of severest destruction there was formation of a scar of connective tissue. The author thinks this disease is probably caused by an ultra-microscopic virus.

G. W. T. H. FLEMING.

Forced Conjugate Upward Movement of the Eyes following Epidemic Encephalitis. (*Arch. of Neur. and Psychiat.*, January, 1928.)
Taylor, E. W., and McDonald, C. A.

Taylor and McDonald report 13 cases of upward movement of the eyes in post-encephalitic Parkinsonism. In 8 out of the 13 the movement was only upward, in 4 this was combined with lateral movement, in 1 case there was a slight external rotation of the right eyes, and in 1 case downward alternated with upward movement. Associated movements of the head occurred in 5 cases. Usually the interval between attacks was more than twenty-four hours. The treatment, largely by scopolamine, was effective in 8 cases; in 2 it was without result. The disappearance of the spasm when the patient lay down was striking in several cases.

G. W. T. H. FLEMING.

The Evolution of an Encephalitic Dystonia into a Hypertonic Akinetic Syndrome resembling Wilson's Progressive Lenticular Degeneration. (*Journ. of Nerv. and Ment. Dis.*, November, 1927.)
Brock, S., and Katz, S.

The authors describe a case of encephalitic dystonia, with little evidence of hypertonus and insignificant striatal-bulbar symptoms, which developed into a syndrome with hypertonus, restriction or loss of movement, dysarthria and dysphagia, which resembled Wilson's disease. Apart from a slight euphoria there was no psychic disturbance. They point out that the Vogts and Jakob have called attention to partial striatal lesions progressing to a complete strio-pallidal degeneration.

G. W. T. H. FLEMING.

Lesions of the Epiconus. (*Journ. of Nerv. and Ment. Dis.*, November, 1927.) Alpers, B. J.

The epiconus region, which includes segments from the fifth lumbar to the second sacral inclusive, differs materially in an anatomical way from the conus. The symptoms are those of involvement of the sacral plexus (the nervus peroneus being most affected) absence or diminution of the knee-jerks, integrity of the sphincters, and integrity of the patellar reflexes. Alpers' own cases showed that the glutei and hamstrings were involved in all his cases, also the extensors of the toes. The extensors of the thighs and legs are