

which is unknown to us; further, heredity in the narrow and wider sense; these prepare the ground which is further acted on by syphilis, so that through the influence of several exciting causes, especially emotional disturbance, the disease is brought out. The congenital brain constitution seems to be the condition *sine quâ non*.

W. W. IRELAND.

*On the Infective Origin of Acute Delirium* [*Sulla origine infettiva del delirio acuto*]. (*Ann. di Nervol.*, fasc. I—II, 1899.) *Bianchi and Piccinino*.

This is the third communication which the authors have made on this subject since 1893. In the present paper, two more cases of very acute fatal delirium with the bacteriological examinations are given. The first case was admitted on February 26th, 1896: the symptoms were those of acute delirious mania with marked motor excitement and with hallucinations; on February 29th temperature 39·2°, respirations 44, pulse 136, arhythmic, tossing the head, tremors of the lips so that her words could not be made out, tongue dry and furred, breath smelt of acetone; sensibility was much impaired; pupils small and fixed; abdomen tumid, meteoric. About one gramme of blood was withdrawn from the arm for the cultures. The temperature rose subsequently to 40·2°, and she gradually collapsed and died on March 4th. The second case was admitted on October 1st, 1898. There was intense motor excitement, marked incoherence in speech; rectal temperature 37°; pulse small, feeble, and rapid; abdomen tumid. She became gradually unconscious, pupils rigid, breath smelt of acetone, tremors of the muscles, collapse, and death occurred on October 3rd. The post-mortem examination showed marked post-mortem rigidity. The cerebral meninges were slightly anæmic—small collections of subarachnoid fluid, grey matter pale rose-colour, white somewhat soft, heart normal, lungs slight hypostasis, spleen softened; other organs were practically normal. Cultures were made from the blood and also from the subarachnoid fluid. They showed a bacillus either isolated or in groups of two or three, or united in chains. They stain by all aniline dyes and by Gram's method, but the best result is by Ziehl's fluid: they do not spore. This is the organism they described in their previous papers. Injections from these cultures proved fatal to rabbits, an enormous infiltration of the bacilli occurring in the meninges. The authors state that "the whole morbid picture, the rapidly fatal course of the disease, the presence in the blood of large numbers of bacilli, the strong virulence of the cultures, and the infiltration by the bacilli of the meninges in animals dead from inoculation, constitute an accumulation of facts of great value in the genesis and pathology of acute delirium." J. R. GILMOUR.

*On the Elimination of the Ethereal Sulphates by the Urine in Epilepsy and in Sitiophobia* [*Sulla eliminazione degli eteri solforici per le urine negli epilettici e nei sitofobi*]. (*Ann. di Nervol.*, fasc. I—II, 1899.) *Galante and Savini*.

The ethereal sulphates in the urine (compounds of sulphuric acid with organic radicals, of which the best known are indol, skatol, and

phenol) derive their importance from the fact that they form an excellent index of the degree of intestinal putrefaction and absorption. The authors estimated them by Salkowsky's method in the urine of four epileptics, and in three cases of sitiophobia. The epileptic cases were specially chosen from cases showing clinically gastro-intestinal disorder. With the approach of an epileptic fit or of the disturbance which may replace it, the quantity of the ethereal sulphates was increased, reaching its highest point with the onset of the fit, returning slowly in some cases, immediately in others, to a normal degree of elimination. The cases of sitiophobia were associated with marked hallucinations in one case, with melancholia in another, and in the third with delusions of persecution and poisoning. The authors, taking into consideration the composition of the diet on which they were forcibly fed, come to the conclusion that there is in these cases disturbance of intestinal function and especially putrefaction of the albuminoids, as evidenced by the increase of the sulphates excreted. Whenever food was taken spontaneously, the tables show a marked decrease of these decomposition products.

J. R. GILMOUR.

*Alkalinity of the Blood in Certain Mental Diseases [L' alcalinità del sangue in alcune malattie mentali]. (Riv. di Patol. nerv. e ment., July, 1899.) Lambranzi, R.*

The writer has examined the blood in several groups of cases. The results obtained were that the alkalinity varied within physiological limits in hypochondria (3 cases), in adolescent insanity (6 cases), in senile insanity (5 cases), in hysteria (3 cases), and in imbecility (10 cases). In alternating cases (9) the alkalinity varied in the two periods, being lower during the state of excitement, especially when accompanied by marked motor signs, but within physiological range. The alkalinity was reduced in seven cases of general paralysis. It was also probably below normal in a case of myxœdema with imbecility. The most interesting cases were the epileptics (10 cases). In them, the author found that the alkalinity of the blood was reduced during the convulsion, and also for a short period both before and after it. He considers that, in epilepsy and general paralysis, the diminution is due to substances in direct relation to the disease, these being periodic in the former class, and permanent in the latter.

J. R. GILMOUR.

*Brain of an Epileptic Idiot [Cerveau d'idiote épileptique]. (Journ. de Méd. de Bord., Jan. 7, 1900.) Gentes.*

The clinical record of this case is incomplete. The patient, however, had numerous signs of degeneration (malformation of the pinna, arched palate, irregular dentition, etc.), and she suffered from typical epileptic fits.

The brain was asymmetrical, the left half being smaller than the right; the lumen of the cerebral arteries was narrower on the left side than on the right, and there was evidence of premature synostosis of the bones on the left side of the cranial vault. In addition to this there was a subarachnoid cyst, the size of a hen's egg, situated at the postero-superior extremity of the left fissure of Sylvius.