4. Neurology.

A New Syndrome Consequent on Vitamin D Deficiency in Rats. (*Arch. Neerland. Physiol., vol. xxii, pp.* 594–600, 1937.) *Boer, J., Arons, Ph., and van der Rijst, M. P. J.*

Rats on a diet sufficient in all respects except a lack of vitamin D showed after 4 to 10 weeks a paralysis of the hind legs. Control animals receiving vitamin D in addition showed no such symptoms. On autopsy, all the paralysed rats showed hæmorrhages in muscles and spinal marrow. In the spinal marrow were found microscopic hæmorrhages that always started in the dorsal (" pyramidal ") tract of the thoracic marrow. Then the hæmorrhages spread in the direction of the other parts of the spinal marrow. It is suggested that they are probably a consequence of the lack of vitamin D. F. L. DUNLAP (Chem. Abstr.).

The Various Cerebral Dysrhythmias of Epilepsy, and Measures for their Control. (*Trans. Amer. Neur. Assoc., vol. lxiii, pp.* 129–31, 1937.) *Gibbs, F. A., Gibbs, B. L., and Lennox, W. G.*

Sodium phenobarbital, in 5–10-gr. doses, slows the rate of the cortical brain-waves and is fairly effective in preventing the fast activity which occurs in *grand mal*. Sodium phenobarbital is at best only temporarily effective against *petit mal*, and may actually precipitate psychomotor attacks. The existence of various types of cortical dysrhythmia in the convulsive state is a reason for the lack of uniform results from the use of a single antiseizure drug or agent. Carbon dioxide prevents the appearance of the wave and spike formation characteristic of *petit mal*, possibly owing to an increase in nerve-cell acidity by the carbon dioxide. Production of hyperglycæmia by intravenous injection of glucose prevents *petit mal* waves, while severe insulin hypoglycæmia causes them to become almost continuous.
M. HORN (Chem. Abstr.).

A New Test in Hemiparesis [*Nouveau signe dans les hémiparésies*]. (*L'Encéphale, vol. xxxiii, p.* 132, *Mar.*, 1938.) *Herman, E.*

The writer describes a new sign for the detection of hemiparesis of pyramida origin. This test bears some relation to Raimiste's sign, but has the advantage that it can be carried out in the unconscious subject. Briefly the test consists in passively abducting the sound limb, when, in a case of paresis, the paralysed leg is spontaneously adducted. S. M. COLEMAN.

The Vestibulo-Visual-Parietal Syndrome of Traumatic Origin [*Le syndrome vestibulo-visuel-parietal d'origine traumatique*]. (*L'Encéph., vol. xxxiii, p.* 57, *Feb.*, 1938.) *de Morsier, G.*

Observations on three cases of cerebro-cranial trauma in which irritative lesions were localized in the cortex, and in which surgical exploration permitted the localization and nature of the lesion to be verified. Clinically, these cases showed disorder of equilibrium, vertigo and visual disturbances. One case exhibited Lilliputian hallucinations. It is concluded that in man there is an important vestibular centre located in the inter-parietal sulcus. If the lesion also involves the angular gyrus, disturbance in the visual sphere may be produced by radiation. The parietal lobe being a point of convergence for visual, vestibular and somatognostic impressions, it is suggested that an abnormal inter-relation between these three pathways is probably necessary in order to produce Lilliputian hallucinations.
S. M. COLEMAN.

Role of Anoxia in Production of Epileptiform Seizures. (*Arch. Int. Med., vol. lxi, p.* 208, *Feb.*, 1938.) *Simpson, I., and Barker, M. H.*

The writers investigated the effects of prolonged anoxia on thirteen epileptic patients. Every patient showed considerable excitation phenomena during severe