

was accompanied by a moderate morphine dosage for some 13 days. The sodium bromide dose varied between 30-60 grains every three, four, or six hours, it was then continued for another five days without the morphine; from that time on no drug of any kind was given. The patient passed through a longer period of prostration, delirium, hallucinations, confusion, etc. On April 17th of this year, just over six weeks from the time of admission, he left the hospital, and 10 days later he left Shanghai feeling quite well and delivered of his habit.

Dr. Macleod claims for this treatment that it does away with the suffering of enforced abstinence; that the patient's cunning, a formidable bar to treatment, is circumvented; that it requires careful nursing, but no special institution or specially trained attendants; that no violence or excitement is likely to result.

ITALIAN RETROSPECT.

By W. Ford Robertson, M.D.

The Advisability and Efficacy of Chirurgico-Gynæcological Treatment in Hysteria and Insanity.—G. Angelucci and A. Pierracini (*Rivista Sperimentale di Freniatria*, 1897, p. 290) have reported "the results of an international enquiry" into this question. The observation of some cases, in which removal of the uterus and appendages for hysteria had been followed by violent insanity, and the want of agreement which they found among the authorities who had written about the subject, led the authors to undertake their task. They appealed to alienists, surgeons and gynæcologists throughout Europe and America for exact accounts of their experiences, and received in reply a large number of valuable contributions, for which they desire publicly to express their thanks. They enquired of each person, to whom their circular was sent, if during the last ten years he had had any cases in which ablation of the uterus and its appendages had been practised, with a view to curing hysterical neuroses; whether in the event of this having been so, the uterus and appendages had been found healthy or diseased; if they had performed this operation in any case of insanity without manifestations of hysteria; and, lastly, they asked for a personal opinion as to the advisability and efficacy of such surgical interference in hysteria.

The authors give a long and interesting analysis of the reports submitted to them. They have collected accounts of 109 cases in which ablation of the internal organs of generation was undertaken for the cure of hysteria or insanity. The result was beneficial in only 17 cases. The remaining 92 were either uninfluenced or affected injuriously. Insanity afterwards developed in 44 of these women, 20 of whom had suffered from hysteria before the opera-

tion, while 24 had not. Other 23, who were insane and hysterical prior to the operation, were worse after it. Two, not previously hysterical, had become so. Finally, 23 who had been in part insane and in part hysterical, remained in the same state after operation.

The authors are inclined to considerably discount the reports of the 17 favourable results. They observe that 12 of the cases were represented as "cured of nervous disturbances," an expression which makes it probable that they were not cases of true hysteria, or at least not cases of grand hysteria. Further, nine of these 12 were operated upon because of disease of the organs. Of the remaining five cases, two were reported as having undergone "sensible amelioration," while three were spoken of as showing "apparent cure."

In addition to the reports of these 109 cases, the authors received accounts of six cases of hysteria which were favourably influenced by suggestion, through simulation of the operation, and they therefore think that there is strong reason to believe that the improvement which has been attributed to operation is in many cases rather the result of suggestion.

There were 76 alienists who sent in opinions as to advisability of surgical interference in hysteria. Of these 56 were unfavourable to such interference; 12 declined to commit themselves to an opinion; five said they were uncertain upon the question; only three were in favour of operation. Replies were also furnished by 18 surgeons and gynæcologists, of whom 13 were against operative treatment, while five were favourable to it under certain conditions.

The authors sum up their conclusions as follows:—(1) Ablation of the normal uterus or appendages is to be entirely proscribed as a means of cure in hysterical neuroses and insanity. (2) The existence of hysteria constitutes a contraindication to surgical operation for the cure of gynæcological conditions. (3) Such operations are only indicated when there is grave disease of the organs, and they are to be undertaken independently of any considerations based upon hopes of eventually benefiting the neuropathic state of the patient. (4) In cases in which operation is rendered indispensable by pathological conditions of the generative organs, one can only hope to favourably influence the neuropathic state by the operative act through the exercise of suggestion. (5) After all known means of reputed efficacy for combatting hysteria have been tried without success, one may endeavour to influence the patient by such suggestion, by simulating the operation of laparotomy.

Condition of the Thyroid Gland in the Insane.—Amaldi (*Rivista Sperimentale di Freniatria*, 1897, p. 311) has made a histological examination of the thyroid gland in 107 cases of insanity and in 22 persons who were mentally sound. He describes a number of pathological changes which he has found to occur in a much larger

proportion of the cases in the former series than in the latter. He thinks that there is very frequently evidence of a chronic morbid process leading to atrophy of the parenchymatous portion of the gland and to alteration or arrest of its function. In 60 cases out of the 107 in the series from the insane there was evidence of a more or less grave alteration of this kind, while it was present in seven out of the 22 cases in the series from the mentally sound. He believes that this morbid condition of the thyroid gland is a factor of some importance in many cases of insanity, and therefore advises that where such thyroid insufficiency seems probable, thyroid extract be given in small continuous doses, as distinguished from the ordinary mode of administration in "thyroid feeding."

The Treatment of Epilepsy by Hot Air Baths.—The subject of the relation of epilepsy to auto-intoxication is one that has within the last few years assumed much importance owing to the results of the experimental observations which have been made upon it by numerous workers, especially in France and Italy. It has been proved that the blood, the urine, and the gastric juice in cases of idiopathic epilepsy have a greatly increased toxicity about the time of the occurrence of the fits. It has further been established that this increased toxicity is not merely a result of the convulsive seizure but a precursor of it. The general inference has been that in such cases the fits are produced by the action of the toxins upon a nervous system which is in some unknown respect congenitally abnormal and unstable. Various therapeutic measures have been advocated with the object of preventing the formation or accumulation of these toxins in the body, such as the free use of purgatives, diuretics, intestinal antiseptics and washing out of the stomach. Many important questions suggested by the experimental results already obtained are still unsolved. One of the latest contributions to the further elucidation of the subject is that of Cabitto (*Rivista sperimentale di Freniatria*, 1897, pp. 36 and 52), who has also deduced from his experimental results a method of treatment which appears to be of considerable importance. This observer has investigated the toxicity of the sweat of epileptics at various periods in relation to their fits. He caused the sweat glands to act by putting the patient into a hot-air bath. The chief conclusions to which his observations have led him are as follows: The sweat of epileptics in the prodromal period of the fits displays a very greatly increased toxic action. Thus while 100 c.c. of sweat from a healthy person injected into the circulation of a rabbit was not sufficient to kill the animal, 18.5 c.c., and often a much smaller quantity, from epileptics who were having fits, caused death preceded by convulsions. The toxic and convulsive power of the sweat increases as the time of the fit approaches, and diminishes shortly after the paroxysm. At a distant period from the occurrence of a fit the sweat of epileptics has no greater toxicity than that of healthy persons.

These observations led Cabitto to give the hot-air bath a careful and systematic trial as a therapeutic agent in epilepsy with a view to eliminating the toxins by way of the skin. The patient was generally kept in the bath for about half an hour. The experiments were varied in numerous ways, and the treatment was occasionally stopped in order to ascertain if the natural course of the disease was really being modified. Cabitto states that the results of his observations have convinced him that the hot-air bath is an excellent means of preventing and interrupting epileptic attacks. He recommends its use whenever the prodromal symptoms manifest themselves. He has observed that the beneficial result is not merely transitory, and therefore he believes that the bath has more than a mere diaphoretic action, probably exerting upon other organs, in addition to the cutaneous glands, an influence which causes them to eliminate the poison more rapidly. He does not recommend this mode of treatment as a substitute for the various measures that have been found of service for the prevention of auto-intoxication, but on the contrary urges that these should also be energetically carried out.

A Simple Method of Estimating the Toxicity of the Urine.—The fact that the urine of the insane has in general a much greater toxicity than that of the mentally sound has now been established by numerous observers. Pelligrini (*Rivista Sperimentale di Freniatria*, 1897, p. 114) has made a series of experiments, which go to show that the amount of potassium indoxyl sulphate present in the urine is a reliable index of the degree of its toxicity. An easy method of estimating the toxicity of the urine in any particular case is thus placed within reach of the clinician. Pelligrini recommends the use of Primavera's test for potassium indoxyl sulphate, which is as follows: Pour from 4 to 5 c.c. of urine into a test tube, and add slowly one-third the volume of pure concentrated sulphuric acid. Cool the mixture by dipping the end of the test tube into cold water. Add 1.5 c.c. of pure chloroform. Mix thoroughly, and then allow the chloroform to settle to the bottom of the tube. When the salt in question is present in normal amount the chloroform has a light blue tint. When a deeper blue is obtained it is present in abnormal quantity, in proportion to the depth of the colour. For exact quantitative estimation he uses Jaffé's method.

Pelligrini maintains that the increased toxicity of the urine of the insane is due for the most part to abnormal fermentation within the gastro-intestinal tract, and he urges that one of the chief aims that we should put before us in treating insanity is to correct any existing disorder of the digestive functions. When there is evidence of auto-intoxication suitable measures should be employed to secure proper disinfection of the whole gastro-intestinal tract.