EPITOME.

Sulphanilamide Therapy in Meningococcic Meningitis. (Journ. Amer. Med. Assoc., vol. cx, p. 630, Feb. 26, 1938.) Willien, L. J.

The author reports six cases of meningococcic meningitis treated with sulphanilamide. The response to treatment by all patients was satisfactory, even with oral administration alone. T. E. BURROWS.

Clinical Features and Treatment of Functional or Nervous Vomiting. (Journ. Amer. Med. Assoc., vol. cx, p. 476, Feb. 12, 1938.) Wilber, D. L., and Washburn, R. N.

A review of 140 cases of functional vomiting reveals that in most cases there are characteristic clinical and diagnostic features, predominant among which are nervous emotional or cardiovascular instability, the absence of associated abdominal pain or nausea and its association with periods of nervous stress or fatigue. The majority of the patients were women between the ages of 20 and 40 years, and in 43% of the cases an abdominal operation had been performed without benefit to the patient. The treatment is psycho-therapy. 50% of the cases who were followed for a period of from two to eight years after treatment had complete relief from vomiting. T. E. BURROWS.

Tryparsamide Therapy of Neuro-syphilis and Atrophy of the Optic Nerve. (Journ. Amer. Med. Assoc., vol. cix, p. 1793, Nov. 27, 1937.) Mayer, L. L.

From observation of 155 patients with various types of syphilis of the central nervous system, treated with tryparsamide and under rigid ocular control for a reasonable period of years, the following conclusions are drawn : Subjective reactions are not infrequent but are often due to suggestion. Severe objective signs of damage to the optic nerve occur infrequently with reasonable ocular control. Of patients treated with tryparsamide the percentage benefiting so far as the optic nerve is concerned is far greater than the percentage of those in whom damage may occur. Patients with optic atrophy due to syphilis should have the advantage of the use of tryparsamide when the drug is indicated.

T. E. BURROWS.

The Oral Administration of Prostigmin in the Treatment of Myasthenia Gravis. (Journ. Amer. Med. Assoc., vol. cix, p. 1956, Dec. 11, 1937.) Viets, H. R., Mitchell, R. S., and Schwab, R. S.

Oral administration of prostigmin in daily doses of from three to twelve tablets of 15 mgrm. each is stated to be safe, and to maintain a greater degree of muscular efficiency than any other treatment, provided that doses are carefully spaced. No ill-effects were noted in 23 cases treated from one to seventeen months.

T. E. Burrows.

Therapy of Myasthenia Gravis. (Nederland. Tijdschr. Genees., vol. lxxxii, 1, pp. 622-33, 1938.) Verbiest, H.

Five cases of myasthenia gravis were treated with endocrines, prostigmine (2.5 mgrm). and ephedrine (0.6 mgrm. atropine is sometimes added to the prostigmine). Prostigmine invariably relieves severe cases but only for a short time; tolerance is developed. In four out of five cases 50 mgrm. of ephedrine-HCl gave lasting improvement. Cortin, cestrin and cysteine gave no improvement. R. BEUTNER (Chem. Abstr.).

Nicotinic Acid in the Prevention of Pellagra. (Journ. Amer. Med. Assoc., vol. cx, p. 2064, June 18, 1938.) Schmidt, H. L., and Sydenstricker, V. P.

The authors treated 16 cases of chronic pellagra with nicotinic acid in doses of 100 mgrm. twice weekly. Seventeen cases were used as controls and given 90 grm. of brewers' yeast daily. The observation period was six weeks. Only one of the cases