

of mental derangement. Both arms could be freely moved ; there was no loss of co-ordination, and no traces of the former paresis. Speech was somewhat affected ; there was a loss of words or wrong words were used. Some degree of mental blindness was suspected. Both hands were found useless to perform complex actions, while it appeared that the apraxy did not implicate the motor cranial nerves. Westphal tells us that in the great majority of instances of apraxy the deficiency is confined to the left hand, or the right hand is less affected. It requires some subtle analysis to distinguish between the loss of mental conception and that of the due performance of the designed action. There were several nervous incapacities in this patient ; but, according to Westphal, the motor apraxy ran like a red thread through the whole disease.

The patient died after the article was written. The author was able in a note to record the result of the examination. The most important changes found were sclerosis of the arteries and a considerable hydrocephalus internus. The widening was greater in the left ventricle. The corpus callosum to the naked eye did not appear to be affected.

WILLIAM W. IRELAND.

*A Case of Impaired Sense of Perspective* [*Über ein en Fall von partieller Störung der Tiefenwahrnehmung*]. (*Allg. Zeits. f. Psychiat.*, Bd. 64, H. 1.) Kramer.

Dr. Kramer describes a patient who had an apoplectic attack accompanied by aphasia and asymbolia. These symptoms soon passed away, leaving only a slight slowness in finding the words, and a dulness in writing and reading. The patient was found to be incapable of recognising the perspective in drawings. Looking at engravings he recognised the outlines, but the whole image appeared flat. Thus, in stereometrical drawings he only saw the bare lines. He had no difficulty in recognising letters. Thus the sentiment of depth and space seems to have been, in this case, somewhat deranged. The case was reported to the East German Association.

WILLIAM W. IRELAND.

*Case of Cysticercus in the Brain* [*Ueber einen Fall von Hirncysticercus*]. (*Allg. Zeits.*, Bd. 64, H. 2.) Cramer.

A woman, æt. 47, previously healthy, was suddenly seized with pains in the head, giddiness, inability to walk and occasional vomiting. When admitted into the Klinik for mental and nervous diseases at Göttingen, she was found to be affected by loud noises in the head, pain in the left occipital region and thereabout. These pains were altered by position—they were aggravated when she rose up. The head was held to the left. No alteration was noticed in the cranial nerves or in the eyes. There was increased sensibility to pin-pricks on the left side of the body, also tremulous motions of the tongue, and the reflexes in the arms and legs were increased. The vomiting became more frequent and with violent headaches. On one occasion, there was noted itching and a pain in the fingers with a stiffness of one of them. At the same time there was inequality of the pupils. These symptoms were followed by spasm of the fingers of both hands. Then suddenly there came relaxed paresis of the right arm without change in the reflexes. Next day there super-