

Behandlung der Psychosen mit Elektrizität. Von Dr. TIGGES, in Sachsenberg (*Zeitschrift für Psychiatrie*, xxxiv., Band, 6 Heft).

(Concluded from Oct., 1883.)

In a recent number (Oct., 1883) we reviewed part of Dr. Tigges's article, and we now proceed to notice briefly the remaining portion.

Dr. Tigges describes one patient afflicted with chronic mania with delusions who had sounds in the ears. The electrode applied in front of the auditory meatus caused the sounds to become less audible, sometimes to cease entirely. When the anode was applied to the forehead, and the kathode to the neck beneath the occiput, the sounds were lessened; by filling the ear with water, and placing the opposite poles alternately in the ear, they were made to disappear. Another patient had melancholia with delusions. She had a variety of sounds in the ear, with voices telling her, amongst other things, that she could not die. The application of galvanism caused a complete cessation of these abnormal sounds, but the voices came back sometimes in from half-an-hour to seven hours after the application. After the voices returned, the knocking was again heard in the ear, whilst the murmurs, ringing, and other sounds were later in recurring. In a case of insanity there were subjective noises which had endured for three years. Under the constant current they almost disappeared, whilst the murmurs in the ear were still heard.

Dr. Tigges found that in the greater number of cases treated the sounds in the ear either totally disappeared or became much fainter. Less frequently the only change observed was an alteration in the quality of the sounds, or they passed to the other ear. Sometimes they promptly returned after the sitting, sometimes they came back the following day; but, by continuing the treatment, the murmurs in the ears either disappeared or became much less. Occasionally the hallucinations of hearing disappeared along with the sounds in the ear; but the one might come back without the other, or the sounds would disappear, leaving the voices. In one case, with vocal hallucinations there were no subjective sounds, and the voices disappeared at the first application. In many cases, which he does not detail, Tigges tells us that he found the effect of electricity upon

the sounds in the ear to be little marked, and the hallucinations of hearing not to be affected at all. When there were organic lesions of the ear accompanied by voices little improvement was effected. In these cases he was able to make out "Brenner's sound-reaction," which he had failed to do with patients who had noises in the ears without any organic lesion. Brenner found; as explained in a former Retrospect, that a sensation of hearing was excited when the chain was closed if the kathode was placed in the ear, or near the ear; but when the anode was applied the sensation of hearing was only produced by the opening of the chain.

Dr. Tigges treated some cases of melancholia with apathy, passing into melancholia with stupor, by passing the constant current through the brain; more rarely the interrupted current was used. He was not able to make out clearly on what spots it was best to apply the electrodes. Sometimes one method of placing them was found to do well, and then its efficacy seemed to pass away for another location. Currents were passed through the head, or the sympathetics of the neck were acted upon, or the electrodes were placed on the neck and over the dorsal vertebræ. He found that by such treatment the motor rigidity was relaxed, and the sensibility to pain appeared to be increased; the patient became more lively and less averse to talk. Sometimes this favourable influence soon passed away, sometimes it was more enduring. In one case the increased liveliness lasted for two months. With another patient marked improvement began after twelve days' treatment, and in eighty days all the uneasy sensations disappeared. This was a lad of eighteen, suffering from headache, sounds in the ears, nightly hallucinations, melancholy, and loss of memory. He had been in the asylum for six months without any improvement until the electric treatment was begun. This is the only cure recorded. In another case there was great improvement. In six more there was amelioration of the symptoms without any decided effect on the general character of the disease. Two patients died while under treatment. Dr. Tigges does not describe or tabulate all his cases, but selects such instances as he deems will illustrate his remarks. He is inclined to believe that some of the results observed to follow the treatment, such as the cessation of pains in various parts of the body, are of a reflex character; but where this improvement has followed

application of the electrode to the parts around the ear, he thinks that it must be due to the current passing through the sensory or motor centres of the hemispheres.

Lectures on the Localisation of Cerebral and Spinal Diseases.
By PROFESSOR CHARCOT. Translated and Edited by
WALTER B. HADDEN, M.D.Lond. The New Sydenham
Society. 1883.

This work is marked by the usual characteristics of M. Charcot's observations—original research, remarkable insight, and those powers of generalisation and of expression which are essential to a successful teacher. As he truly says of himself, he is no believer in the efficacy of generalities deprived of their material substratum. On no subject is the Professor more at home than on the localisation of cerebral diseases, and every clinical student of pathology must be glad to have such a guide in the fascinating study of the regional diagnosis of affections of the brain. M. Charcot's nomenclature is always precise and well defined—an essential requisite in this field of research, but one not sufficiently recognised, or at least acted upon, by many physicians. We could have wished that the same desire to be lucid had induced him to adopt the practice of labeling the regions themselves, in the plates, instead of following the customary but troublesome course of reference letters. This really involves the reader's translation of a language of signs instead of seeing the names of the various regions at a glance.

The early lectures give a rapid but clear sketch of the topography and microscopical appearances of the healthy brain. Then follows a description of lesions in the encephalon and cord. Lectures V.—IX. are devoted to the arterial circulation of the cerebrum, and the central grey nuclei and their lesions. Cerebral hemi-anæsthesia, crossed amblyopia, and lateral hemiopia form the subjects of the tenth lecture, and secondary degenerations of the eleventh. This completes Part First of the book. The Second Part is devoted to Spinal Localisations, and contains a vast amount of information in a small compass. We do not attempt to give a detailed notice of M. Charcot's views and descriptions. Our object in this short notice will be secured if we induce our readers to possess themselves of the work itself. It is well translated by Dr. Hadden, whose notes and introductory re-