

and physical deterioration, scepticism may close avenues to knowledge of far-reaching importance. Caution and open-mindedness are the necessary safeguards of those who, in the interests of scientific progress—the sole legitimate motive, and a call not to be neglected—undertake investigations into psychical phenomena, and, above all, avoidance of hasty conclusions, remembering the wise counsel of Myers—"Let them follow fearlessly wherever truth may lead, and beware of pre-constructing, from too few factors, their formula for the Sum of Things."

EDWARD J. HOCKLY.

Part III.—Epitome of Current Literature.

1. Neurology.

On Sclerosis of the Cornu Ammonis [Über Ammonshornsklerose].
(*Zeitschr. für die ges. Neur. und Psychiat.*, February, 1923.)
Bratz, E., and Grossmann, W.

In the search for an anatomical basis of epilepsy there has long been noticed a typical finding, known as sclerosis of the cornu ammonis, in addition to certain generalised changes in the brain. The authors give a detailed *résumé* of previous researches on the subject, classified according to the various theories of the connection between the anatomical findings and epilepsy; these theories regard the pathological condition as (1) the cause, or (2) the result of the fits, or (3) as being, like the fits, a result of some unknown cause, or (4) as having no demonstrable connection with the fits. In spite of a great quantity of data no definite conclusions have been reached. The earlier work, before finer methods were available, is unsatisfactory, but even with modern technique no really conclusive results have been obtained. The authors have examined 100 cases in which the typical findings of this sclerosis were present, and in only 6 of these was the condition bilateral. They divide their cases into those with and without convulsions, and various conditions other than epilepsy were examined for comparison, including 14 infants that had died in convulsions.

The pathological findings are described in considerable detail, and the most constant and typical changes are present in the epileptics, though quite similar changes are found in a variety of other conditions. They come to the conclusion that no specific connection between this condition and epilepsy can be established, but that the cornu ammonis is a region of special susceptibility which suffers in a marked degree in all conditions affecting the cortex generally, even where convulsions do not occur; moreover that in all cases where an acute exacerbation of the disease occurs, such as status epilepticus, or an attack of general paralysis, even without convulsions—signs of fresh degeneration are found in this region. The authors regard the sclerosis as being simply a chronic secondary process in a part of the brain especially susceptible, and attribute to it no special diagnostic importance.

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