

condition before the onset of fits, which could generally be traced to some definite morbid process affecting the brain. Occasionally the seizures were epileptiform and rarely constant; rhythmic tremors were noticed. Paralysis was often present. The author found that the prognosis as to mental improvement was intermediate between that in the two former groups, and was dependent upon the time of occurrence, site, extent, and nature of the lesion, and upon the severity and frequency of the fits.

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*Nasal Epilepsy [Epilepsie Nasale]. (Gaz. des Hôp., Oct. 22nd, 1904.) Sarvonat, M.*

Nervous heredity and social standing are important factors in the etiology of this disease. Locally, almost any pathological condition of the nasal fossæ may be an exciting cause, including traumatism (operative and other). Local lesions act mostly as mechanical stimuli; but in some cases this is not evident, and smells, dust, etc., may excite an attack. The erectile tissue of the nose plays an important part in the pathogeny of nasal epilepsy, and the posterior situation of this tissue would explain the frequency of nocturnal attacks, on account of the increased congestion which occurs in the dorsal or recumbent position. The enthusiasm of Hack in the treatment of the nose by the galvano-cautery, and the subsequent cure of secondary neuroses, led Fraenkel to write in 1881 that the platinum loop had become a universal panacea; but a reaction against this view soon occurred. Nasal epilepsy is most common in children and young adults; nocturnal attacks are frequent; the attacks may resemble petit mal, or be restricted to simple vertigo; on the other hand, they may be typical of grand mal; the attacks are generally infrequent. It is interesting that no instance of an olfactory aura is recorded. The diagnosis is frequently made by chance: some nasal lesion is observed casually in an epileptic, and treatment effects a cure. Cocaine in temporarily checking reflex neuroses of nasal origin is important in diagnosis. The prognosis of nasal epilepsy is relatively favourable, because the nasal lesion is often susceptible of efficacious treatment—even in cases of long duration. The treatment is usually surgical, and directed to the nasal lesion discovered. General treatment should not be neglected, and very often the administration of bromides, which had been given without benefit before surgical intervention, is followed by rapid improvement after cure of the local lesions.

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*The Hypochondriacal Idea [De l'Idée Hypochondriaque]. (Rev. de Psychiat., 1904, No. 5.) Marchand, L.*

Hypochondriacal ideas are to be differentiated from melancholic ideas and those of persecution, and may be defined as ideas with self-accusing tendencies, provoked by a sad emotional state, without any character of negation and relating only to the personality of the patient. They are of importance in helping to appreciate the intelligence of the subject. In a few cases, an organic affection may determine the mental disorder in hypochondriasis, but in the vast majority of cases the mental disorder is the only one present. According to the varying intellectual

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