

then went back to the morphia habit, and had a recurrence of the same hysterical and somnambulistic symptoms as in the previous attack. During one of these phases of dream consciousness she set fire to the farm of her father-in-law, who had been the special object of her antipathy during her delirious attacks.

Commenting on the case, Dr. Cullerre draws attention to the remarkably long interval—nearly ten years—intervening between the appearance of the pyromaniac obsession and its realisation in the criminal act.

W. C. SULLIVAN.

*Tumour of the Pituitary Body with Röntgen Photograph [Fall von Hypophysis Tumor mit Röntgen-Photogramm]. (Neurol. Cbl., Nr. 18, 1907.) Schuster.*

It is a signal triumph that through the discoveries of physical science we can obtain a visible representation of what is going on at the base of the brain. Dr. Schuster first saw the patient whom he describes on March 25th, 1907. He was a man, æt. 33, who had suffered from diminution of vision for three years and from headache for about two years and a half. The sight of both eyes was now entirely lost. There had been hemianopsia. The patient remarked that during the last year his gloves had become tight, and his rings did not fit. There had been frequent vomiting during the preceding months.

On examination the skin appeared pale and dry as in myxœdema; hair in axilla and pubis scanty. Nose somewhat enlarged. There was divergence of the left eye, and the light reaction was diminished, but more so on the right. There was atrophy of both optic nerves. Mentally the patient was in a state of indifference, and easily wearied. The diagnosis of tumour of the pituitary body with symptoms of acromegaly was confirmed by the Röntgen rays. This is illustrated by two engravings, one giving the normal appearance of the sella turcica, the other of the case in question showing the sella enlarged to three times the usual size and the hollow altered in form. Dr. Schuster explains that the engraving is but a faint reproduction of the Röntgen photograph, which may well be.

In the same number of the *Centralblatt* Dr. Ludwig Löwe, of Berlin, discusses the methods of removing tumours of the pituitary body, which he holds may best be done through the nasal passages.

WILLIAM W. IRELAND.

*Maniacal Chorea. (Dublin Journ. of Med. Sci., May, 1907.) Finne, J. Magee.*

The patient whose case is here described as suffering from this rare disease, chorea insaniens, was an unmarried girl, æt. 17, whose occupation is not stated. She suffered from rheumatic pains in her legs for a fortnight, upon which chorea supervened. A mitral systolic murmur audible on admission and of varying loudness was present until her death, which occurred nine days afterwards. The pulse was quiet and regular until the last three days, and her temperature normal or sub-normal until the day before her death, when it rose to 103.4° F.

The choreic movements were slight for about forty-eight hours, after which they became extremely violent. The psychical phenomena were

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prominent, out of all proportion, and at first quite overshadowed the motorial. They differed, however, by the absence of incoherent speech, and wild garrulity, from the forms one is accustomed to associate with the acute delirium of fever or acute mania. Up till three days before her death she would occasionally grow calmer for a little time, understand what was said to her, and answer "yes" or "no" intelligently. Drugs had no effect on the course of her disease, but chloral proved the most useful in securing a few hours' sleep and muscular rest.

The autopsy revealed a small quantity of mixed clot in the longitudinal sinus, engorgement of the vessels of the cortex, a very small amount of fluid in the lateral ventricles, thrombosis of some of the small vessels of the cortex in the Rolandic area; while in others, cells with oval nuclei lay heaped up in the perivascular lymphatic spaces, which also contained clumps of broken-up nuclear material.

The spinal cord and the other organs of the body were normal, except the heart, which was very atrophic, and some calcified tubercular glands in the mesentery and root of lung. Careful bacteriological examination of the cerebro-spinal fluid yielded negative results, and no micro-organisms were found in the meninges on section. The author regrets that so many standard works of reference on medicine and on insanity do not mention maniacal chorea at all, or else give a very short description of it.

He thinks that the embolic theory as causative of any form of chorea is no longer tenable, but that all choreic manifestations must be recognised as due to the presence of a toxine.

He quotes the conclusions arrived at by Poynton and Holmes that, in the first place, chorea is a manifestation of acute rheumatism, and secondly, that the *Diplococcus rheumaticus* is the infective agent in acute rheumatism.

He admits that his own case does not exactly add support to these views (which he apparently shares), as no micro-organisms were found on bacteriological examination of the brain and spinal cord.

A. W. WILCOX.

*Visual Hallucinations on the Blind Side in Hemianopsia. (Medicine, July, 1906.) Burr, Charles W.*

After referring to those cases exhibiting the above condition already recorded, the author proceeds to describe the case of a white man, æt. 20, admitted to his wards in the Philadelphia Hospital in March, 1906, complaining of severe headache and blindness on the right side and of seeing devils, angels, and bright lights in the blind field. He knew that the objects seen were unreal. They were not persistent, but came and went. Sometimes they appeared for only a minute or two, sometimes remained for hours. They were never visible on the left side. They were small, sometimes movable, sometimes stationary. They first appeared several months after an attack of unconsciousness occurring in July, 1905, which attack was preceded by sudden illness and vomiting. He was unconscious for a short time only and then became delirious, and on the following day stuporose, in which condition he was admitted to the Episcopal Hospital. He could be roused, and when roused became confused. Light disturbed him.