

these as *hallucinations*, auditory or visual, *e. g.*, the result of certain cases of alcoholic delirium, of general paralysis of the insane, of melancholia, etc. (2) As of *the nature of fixed ideas*. Such are witnessed in many cases of melancholia, and in the subjects of delusions of persecution, also in senile dementia, general paralysis, etc.

In the neuroses of hysteria and neurasthenia the impulse may exist, and may be put into execution; it is necessary, therefore, to beware of regarding the patient's statements as play-acting.

The treatment of this affection necessitates the most careful moral training of the child in whose family history the suicidal tendency exists. J. J. Rousseau's wise precepts should be inculcated, and the mind specially trained to resist the impulse which may come.

The impulse being in full swing, the authors discuss, or rather enumerate, the various means which have been essayed—vesicatories, emetics, prolonged baths, and other methods of displacing the morbid idea by the shock of the physical impression. But the main endeavour must be to discover the disease of which this impulse is a symptom, and the motives which, evoked by the disease, have stirred the impulse; and to treat both the one and the other.

The most careful surveillance—the common room and *not the cell*, bed, feeding (forced if need be); these are among the routine treatment of every case, no matter what its ætiology.

HARRINGTON SAINSBURY.

Symptomatology and Treatment of the Refusal of Food [*Sémiologie et traitement du refus d'aliments*]. (*Gaz. des Hôp.*, October 23rd, 1900.) *MM. Garnier et Cololian*.

The causes of sitiophobia are physical and psychical. Gastro-intestinal disturbances constitute the former, and may cause the anorexia which subsequently develops into a refusal of food.

The psychical causes are intimately associated with suicidal ideas. The authors discuss the forms of derangement which are attended by sitiophobia, and then they pass on to the treatment.

They do not agree with the prolonged waiting adopted by some authorities, but advise forced alimentation if the refusal to eat exceed forty-eight hours. Throughout the period of forced feeding, they endeavour at each administration to use moral influence in one or other form—coaxing, reasoning, commanding, as may seem most advisable. The patient should be confined to bed throughout. The feeding must be œsophageal, either by mouth or nose, preferably by mouth (if feasible), as the danger of introducing food into the air-passages is less by this method.

HARRINGTON SAINSBURY.

On the Therapeutics of Light [*Ueber Lichtbehandlung*]. (*Monats. f. Hygien., Aufklär. ü. Reform.*, Jan., 1901.) *Buschan, Georg*.

The history of the development of the use of light as a means of cure is surveyed, and we are taken back to very early times—Greco-Roman—to behold the sun-bath in full swing. The value of light disappears, as we should expect, in the Dark Ages, to make its reappearance and to assume unexpected proportions within recent years. The scientific basis of the treatment rests on the observations of numerous investi-

gators into the effect of the actinic rays on vegetable and animal protoplasm; of these observations many instances are given. The analysis of white light and the reference of the activities to one or other end of the spectrum is dwelt on, as also is the similarity in action of the electric arc light and sunlight. This similarity is so close that the electric light can be substituted for sunlight, and the dose regulated with the nicety of a dose of medicine.

The value of Kellogg's electric-light bath, the first of its kind, is next treated of, and the apparatus described and its modifications. As a means of promoting perspiration it promises to supersede the usual vapour and hot-air baths, and it possesses the great advantage of being much safer in respect of its action on the heart. In addition, however, to its use as a sudorific, it must exert a penetrative action upon the tissues, as, indeed, has been established. In numerous affections the electric bath has been tried, *e. g.*, acute and chronic rheumatisms, chills, catarrhs, intoxications (including auto-intoxications), gout, diabetes, etc. We learn that neurasthenics do not bear the ordinary electric bath well; but even these can be treated by modifications, *e. g.*, Kattenbracker's, and the bath in which the arc light is employed can, by means of blue glass, be made even sedative to the nervous system. Finsen's light treatment of course finds mention. The paper is a very interesting one.

HARRINGTON SAINSBURY.

Mercurial Injections in Syphilis [*Les injections mercurielles dans la syphilis*]. (*Journ. de Méd. de Bord.*, Nos. 4 and 5, 1901.) Guérin, A.

This method of treatment finds much greater favour abroad than in this country, though, according to weighty authorities, it is a very powerful means of cure. Guérin gives as indications for the hypodermic treatment, the rapid progress of the disease with early visceral or nervous developments, and with the tendency to frequent relapses. Injections are also to be employed to save the stomach where this is irritable. Guérin suggests that the injection may be employed as a legitimate ruse when the patient refuses to undergo the usual mercurial course. To the patient the suggestion is then made of a serum treatment by injections, and the bichloride of mercury is added to preserve the serum! Some authors advise the mercurial injection so soon as the diagnosis of the hard chancre has been established. The use of mercury in the insoluble and soluble form, in the massive or the fractional dose, is then discussed, and suitable formulæ are appended. The importance of the technique is insisted upon, and the details are briefly given. Upon the whole, where this method is determined upon the bichloride of mercury dissolved in sodium chloride solution 0.7 per cent. would seem to be as useful a preparation as any, and it is by far the simplest.

HARRINGTON SAINSBURY.

Two Hundred Operative Cases—Insane Women. (*Trans. Amer. Med.-Psych. Assoc.*, May, 1900.) Bucke, R. M.

The author here reports the gynæcological work accomplished at the Asylum for the Insane, London, Ontario, up to the present date. Operations have been performed in 200 cases, including curettage,