The evil influences of heredity are most beget further disorders. marked in general paralysis. Tigges presents a number of these genealogies which show the hereditary transmission of nervous diseases in a striking manner. The following has been given by Jörger: Andreas Zero was born in 1639; both he and his son Ernst married women of the Lauter family. With these two men there was nothing abnormal on record. In the Lauter family, in 1713, one woman became insane and committed suicide. In a branch of the same family two sisters and three brothers were either insane or nearly so. The children of one of the brothers were most erratic—one daughter dull of hearing, besides this one was dumb, one weak-minded, one idotic, one insane. It was this Lauter family that brought the heredity taint into the Zero family. While the eldest son of Andreas Zero and the youngest of Ernst Zero, by a second marriage, were the progenitors of a flourishing family of from seventy-six to ninety members, the son of Ernst Zero, by his first wife Lauter, Paul Alexius, was the progenitor of an abnormal family. He himself led a vagabond life with his wife. They had six sons and one daughter; from these seven children came a progeny of over 200 vagabonds, drunkards, thieves, prostitutes, idiots, weak-minded, beggars, murderers, infanticides, homicides, besides a series of lunatics, epileptics, paralytics, many squinting children—in one family eight of them. The feeble-minded members married several times and had a large number of children, amongst whom the mortality was great. Some of the children of the Zeros were boarded into private families, without any benefit.

Assuming that there is in the general population one insane person for 250 inhabitants, it would be only those who are married, widowed, or divorced who could give opportunities for hereditary transmission to their descendants; these constitute about 50 per cent. of the admissions into asylums. This proportion must be lower in the population outside, as the idiots form one half of the total insane, and it is only the more intelligent imbeciles, about 10 per cent., who become married. We have thus to reckon with one insane person in the 500. If these abnormal persons had the average number of children as the sane, the proportion would be 0'2; instead of this the direct cases of insanity in German asylums give us 10 to 11 per cent. of insane children. Calculated at 10 per cent., the incidence of insanity with those who have a direct hereditary predisposition is ten times 0'2, equal to fifty times more insane persons than occur in families without hereditary predisposition.

WILLIAM W. IRELAND.

On Nervous and Psychical Injuries through Electrical Discharges from the Telephone. (Allgem. Zeits. f. Psychiat., B. lxiii, H. 1.) Kurella.

Dr. Kurella described to the Psychiatric Society of the Rhine provinces seven cases which he had observed from 1900 to 1904 in which mental or nervous injuries had been experienced by professional telephonists. Five of these cases were owing to high electric discharges from the telephone, three being from a strong electric current and two of them through an atmospheric discharge. None of these cases ended

fatally, but in one there was atrophy of the muscles affected in the left arm. Kurella cites other observations, going to show that multiple sclerosis and an affection like general paralysis has been occasioned by the discharge of an electric current from the telephone, in opposition to Gellinek, who treated such injuries as of nervous or mental character. Kurella contends that the strong currents used have actually caused physical lesions of the heart and nerve tissues, especially small ruptures and hæmorrhages.

Kurella's paper, which has been published in a separate form by A. Barth, Leipzig, led to a discussion in which Dr. Hoffmann argued that these effects following the use of the telephone were of mental origin. Steiner sustained Kurella's view, but he does not consider that lightning passes through the telephone wire. There was a little epidemic in Cologne in which many telephonists suffered injury, but there was no thunderstorm at the time.

WILLIAM W. IRELAND.

3. Clinical Psychiatry.

Contribution to the Clinical Study of the Pharyngeal Reflex [Contributo allo Studio Clinico del Riflesso Faringeo]. (Annali dell Instituto Psichiat. della R. Univ. di Roma, vol. iv, 1905.) Forli, V., and Guidi, G.

That the pharyngeal reflex is not by any means a constant phenomenon is very well known to users of the laryngoscope.

The authors of this paper first examined 98 subjects free from any nervous disorder, with the object of finding out the influence of age on its appearance, with the following interesting results:

In the subjects under fifty the reflex was well marked in nearly 50 per cent., absent in 15 per cent., and feeble in the remaining 35 per cent.

In those over fifty, it was well marked in 40 per cent., absent in 31 per cent., and feeble in the remaining cases.

They next give the results of examination of 331 cases suffering from some functional or organic form of nervous disease. Most notably in hysteria, and to a lesser extent in hysteroid neurosis, was there a great alteration in its exhibition.

Kattiwinkel, in a recent publication on the same subject, gave the results of his examination of 104 cases of hysteria. In 100 of these the pharyngeal reflex was abolished. He at the same time noted that the pharyngeal sensations of touch, temperature, and pain, were unimpaired, and deduced from this that the abolition of the reflex for nausea did not point to anæsthesia of the mucosa, as was generally held, but was a sign of interruption of the reflex arc, and of cerebral origin.

The authors' experience in their hysteria and hysteroid cases was very similar, more especially in the graver forms of hysteria. In epilepsy, also, the absence of the reflex was frequently noted, and that this was not due to the bromides was proved by control experiments. The same results were found in neurasthenia. In patients suffering from tabes and chronic alcoholism, there was little apparent alteration, and the same applied to the early forms of general paralysis. In the