

*Encephalography with Ethylene.* (*Journ. Amer. Med. Assoc.*, vol. cviii, p. 461, Feb. 6, 1937.) Newman, H.

Encephalography with ethylene was carried out in thirty cases, without mortality or serious sequelæ and with radiological results equal to those obtained with air. Although the discomfort of the period of injection is not noticeably lessened, the severity and duration of the post-injection headache is markedly reduced.

T. E. BURROWS.

*Mechanism of Narcolepsy.* (*Journ. Nerv. and Ment. Dis.*, vol. lxxxv, p. 424, April, 1937.) Lion, E. G.

The writer studied the physiology of the neuro-endocrine system of 12 narcoleptics and 12 normals. He found 83% were vagotonic, and the remaining 17% were isoneurotonic. Six narcoleptics showed a vasomotor instability, and 4 had endocrine disturbances. Among the narcoleptics a pyknic body-build was found in 58%. No pure types of sympathicotonic or vagotonic people were found. The writer considers that emotional and other affective disturbances may upset the balance of the autonomic nervous system, producing a more marked vagotonic condition in individuals with a parasympathetic predisposition which precipitates a sleep or cataplectic attack. This would account for the mechanism of narcolepsy on the basis of the pathological physiology of the autonomic nervous system, but the pathways involved await further research into the connections between the hypothalamus and cerebrum.

G. W. T. H. FLEMING.

*Incidence and Differential Diagnosis of Hypoglycæmic Convulsions.* (*Amer. Journ. Med. Sci.*, vol. cxcii, p. 600, Nov., 1936.) Ziskind, E., Hollombe, B. S., and Bolton, R. O.

The writers draw attention to a hypoglycæmic symptom which calls for special comment, namely that the occurrence of profuse perspiration before an epileptic seizure should strongly arouse suspicion of an underlying hypoglycæmia. Mental confusion for a variable period preceding the convulsion is another symptom suggestive of hypoglycæmia. Variability in the type of attack is in favour of hypoglycæmia.

The relation of the attacks to feeding is very important; the longer the interval since the last meal, the greater the likelihood of the attack being hypoglycæmic. Convulsions occurring only during the early morning or before breakfast should arouse suspicion, especially if the patient has profuse night-sweats or is frequently confused on arising in the morning. Suspicions aroused by the history should be verified by an attempt to produce convulsions through fasting for 36 hours.

G. W. T. H. FLEMING.

## 5. Pharmacology and Treatment.

*Snake Venom (Moccasin) in the Treatment of Epilepsy.* (*Journ. Lab. and Clin. Med.*, vol. xxii, p. 572, Mar., 1937.) Finkelman, I.

The author treated 8 institutionalized epileptics for 9 weeks with snake-venom. Injections of a 1/3,000 venom solution were given. During the administration of venom the frequency and severity of the seizures were greater than during other periods and the patients were more irritable. There was no correlation between the seizures and the eosinophilic response.

G. W. T. H. FLEMING.

*The Effect of Intravenous Injections of Sucrose Solution (50%) on the Cerebro-spinal Fluid Pressure, the Blood-pressure and Clinical Course in Cases of Chronic Hypertension.* (*Amer. Journ. Med. Sci.*, vol. cxcii, p. 510, Oct., 1936.) Murphy, F. D., Herschberg, R. A., and Katz, A. M.

After the injection of 300–500 c.c. of 50% sucrose solution, there was a prompt and prolonged reduction of spinal fluid pressure followed by a gradual return to