

*Conjugal Syphilis with General Paralysis and Tabes in Husband and Wife.* (*Bull. Soc. Clin. Méd. Ment.*, May, 1910.) Leroy. (*Idem*, November, 1910.) Bonhomme.

Of late years numerous cases have been recorded in which the occurrence of syphilis in husband or wife has been followed by general paralysis or tabes in both. No stronger evidence could be advanced in favour of the view that syphilis is the essential factor in the production of these diseases.

Dr. Leroy's paper deals with the case of a married couple, previously healthy, of whom the husband acquired syphilis at the age of thirty-one. Both he and his wife were vigorously treated by Fournier, and had a healthy child five years later. Eight and a half years after infection the man developed a rapid form of tabes, with all the classical symptoms. Two years later the wife showed signs of general paralysis of the demented type, with tremor, pupillary signs, increased knee-jerks and speech defects. The woman had been considered rather weak-minded originally, and the writer suggests that this fact may have predisposed her to this disease rather than to tabes. He is also in favour of the view that a special neuro-toxic strain of syphilis exists, and adduces the analogy of the ordinary pyogenic staphylococcus, which, if taken from a suppurating joint and passed through a series of animals, only gives rise to joint infections.

Dr. Bonhomme records two groups of cases of a similar kind. In the first, the husband had a chancre four years before marriage, and developed general paralysis twenty years later. His wife bore him four children, of whom the first died at one month, the others were healthy. She became tabetic sixteen years after marriage. In the second case the man developed general paralysis thirty years after infection; his wife had no children, and had no suspicion that she was infected, yet she showed well-marked signs of tertiary syphilis when examined. As a pendant to this paper, Dr. Marie mentions that the history of a pair of conjugal general paralytics, which he recorded a year ago, has recently been completed by the admission to his asylum of their daughter as a case of juvenile general paralysis with well-marked signs of hereditary syphilis.

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*Psychopathic Pains [Des Différents Espèces de Douleurs Psychopathiques].* (*L'Encéphale*, Sept. 10th, 1911.) Maillard, etc.

A discussion on this question was introduced by Maillard at the Amiens Congress of French Alienists and Neurologists last August. A psychopathic pain is symptomatic of an abnormal psychic state, whether it is altogether formed in the psychic organism or whether it is manifested as a disproportioned reaction to an insignificant irritation. Maillard divides psychopathic pains into four groups: (1) *Hallucinatory*, the pathological element here being the hallucination and not the pain; the intoxications and systematised persecution cases furnish classical types. (2) *Mythomaniac*, recognised in the first place by their exaggeration and discordance in relation to the assigned cause, also by the mode of appearance and evolution; auto-suggestion (as in the hysterical) presides over the genesis of the pains, which by force of attention and