

anoxia. The symptoms and acid-base balance of these patients during anoxia were no different from those of dogs or normal human beings. The acid-base balance during the interparoxysmal period was normal. The writers conclude that anoxia *per se* is not a factor in the production of epileptic seizures.

G. W. T. H. FLEMING.

*Carbon Disulphide Poisoning.* (*Journ. Amer. Med. Assoc.*, vol. cx, p. 1543, May 7, 1938.) Gordy, S. T., and Trumper, M.

In the six cases reported there was a relative paucity of neurological signs. Two patients showed corneal anæsthesia, two complained of "wavy vision", two had retro-bulbar neuritis, and in one acute case Lilliputian and Brobdingnagian hallucinations were present. Psychotic episodes were of a periodic or cyclic character, and accompanied by paræsthetic or hallucinatory phenomena and occurred as sequelæ in four cases. Asthenia occurred in two cases, amnesic features in two and progressive mental deterioration in one. Four cases showed diminution or loss of libido and all the cases are invalids.

T. E. BURROWS.

*Head Trauma.* (*Journ. Amer. Med. Assoc.*, vol. cx, p. 1727, May 21, 1938.) Gotten, N.

The author reports 141 cases having either a fracture of the skull or a period of unconsciousness of more than five minutes. He concludes that the most important feature in treatment is good nursing care. Operation should be avoided whenever possible, and the reduction of intra-cranial pressure carried out by conservative methods. Complications occurring in what appears at first a mild injury should receive particular attention. The age of the patient is the greatest factor favouring recovery, the prognosis being best in the young.

T. E. BURROWS.

*Meralgia Paræsthetica.* (*Journ. Amer. Med. Assoc.*, vol. 110, p. 1650, May 14, 1938.) Ecker, A. D., and Woltman, H. W.

This condition is a neuritis of the lateral femoral cutaneous nerve, and is usually caused by pressure or tension of the overlying fascia. It most commonly affects obese middle-aged men, and usually begins as a sense of numbness over the anterior lateral aspect of the thigh. Later paræsthesiæ and pain occur which are aggravated by movement. There is usually slight impairment of all sensations over the area involved. The condition may be bilateral and is usually self-limited, but if necessary can be relieved by severance or resection of the nerve.

T. E. BURROWS.

*Fatality Rates in Cerebro-spinal Meningitis.* (*Journ. Amer. Med. Assoc.*, vol. cx, p. 1894, June 4, 1938.) Walsh, G.

The experience of some twenty million urban dwellers over a period of sixteen years is recorded. The fatality rate varied between 67.7% and 38.1%, with an average of 51.2%. Several clinicians of wide experience have expressed the view that the fatality-rate in the pre-serum era varied between 20% and 80%. Rosenau listed six thousand cases during the years 1904 and 1905 with a fatality-rate of 51%. The author believes that the fatality-rate during the years 1920 to 1936 has altered little if at all, and that the use of recent treatments may be harmful rather than beneficial.

T. E. BURROWS.

*The Control of Meningococcic Meningitis Epidemics.* (*Journ. Amer. Med. Assoc.*, vol. 110, p. 484, Feb. 12, 1938.) Kuhns, D. M., Kisner, P., Williams, M. P., and Moorman, P. L.

7,339 enrollees in 48 different camps in Missouri were given intradermal tests; 53% showed a "1 plus" reaction. 3,517 of the original positive reactors were retested after an interval of approximately two months, and the reaction of 78.9% had changed from "positive" to "plus-minus" or negative. All enrollees with a "1