attempts to weigh up and assign relative importance to the three features of delirium, psychosis and dementia as they tend to appear in general paralysis. Hereditary factors are mentioned as being of significance for the type of psychosis which is developed, and the responsibility of the malaria for delirium and possible subsequent psychosis is weighed up against the recoveries.

W. McC. HARROWES.

Treatment of Dementia Paralytica with Typhoid H Antigen Vaccine. (Arch. Neur. and Psychiat., vol. xxxi, p. 579, Jan., 1934.) Schnitker, M. T.

The writer used a water-clear saline filtrate containing the flagellar (H) antigen, the somatic (O) antigen having been blocked by phenol. The reaction after H antigen consists in a slightly higher level of fever which is more constant and is maintained at its peak for a longer time, while the decline in temperature is more gradual. The systemic reaction is much less severe than with whole vaccine. The contra-indications to the use of H antigen are four : (1) Severe cardio-renal disease, (2) active pulmonary disease, (3) severe cachexia, (4) acute infections with rapid sedimentation. Tryparsamide can be given at the height of the fever, with better clinical results and no increase in the dangers of complications. The results obtained in 25 cases were just as good as with malaria.

G. W. T. H. FLEMING.

Indications for Treatment in Manic-Depressive Depressions [Richtlinien für die Behandlung Manisch-depressiver Depressionen]. (Acta Psychiat. et Neurol., vol. viii, p. 425, 1933.) Tomasson, H.

Four basic symptoms of depression are recognized : abnormality of mood, inhibition, anxiety phenomena and somatic reverberations.

Forty-six cases were carefully studied, and in each case the author attempted to analyse which of the basic symptoms could be regarded as subjective complaints of the patient. The cases were then treated with sympathetic and parasympathetic stimulants and depressants according to the symptoms. The parasympathetic system was either found to be normal or showed diminished activity. The action of the sympathetic was generally normal, but in cases where anxiety was present a definite sympatheticotonia occurred in all instances. The treatment in mild cases of depression gave the following results :

(I) A combination of bromide and codeine had an unfavourable effect on all basic symptoms.

(2) Pilocarpine (given in the form of inf. jaborandi) favourably affected the mood, to a less extent also the inhibition (retardation) and the somatic reverberatives. Anxiety was lessened only in very mild cases.

(3) Anxiety is increased, even in the mildest cases, by ephedrine.

(4) Acetyl choline had not the slightest effect on the anxiety.

(5) Ergotoxin (depressant of sympathetic) considerably improved the anxiety and to a less extent also the other basic symptoms. R. Ström-Olsen.

States of Mental Confusion : Considerations upon their Treatment Without and Prior to the Mental Hospital [Los estados de confusión mental : consideraciones sobre su tratamiento fuera y antes del manicomio]. (La Semana Méd., vol. xli, p. 977, March 29, 1934.) Ferrer, C. O.

There exists a group of illnesses which have, as a common factor, conditions of mental confusion of toxic origin. The general practitioner allows himself to be unduly influenced by the mental picture, and hurries the patient to the mental hospital, without having taken the smallest therapeutic precaution, and without having made any investigation of the most important physical organs. Death often occurs within a few days of admission, and various untreated physical conditions are often found at the post-mortem. For the benefit of general practitioners the author describes some of the affections which commonly lead to these disasters, and suggests the appropriate lines of clinical investigation and possible treatment.

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