

The degree of fever never rose above 40° , and seldom reached 39.6° .

The lungs, heart, abdomen, and genital organs were examined, but no abnormality could be discovered to account for the rise of temperature. Various means were adopted to reduce the fever, such as baths, cold applications, and drugs, but all without effect.

The case of a woman, æt. 22, is described, who began to suffer from acute delirium after post-partum hæmorrhage. The temperature rose to 38.5° , the pulse was small and frequent, the mouth was dry, and the tongue coated. Her speech was incoherent, and she refused all food. Opium and quinine had no effect on either the temperature or restlessness.

The author thought the condition might be of an infective nature, and he consequently determined to try injections of antistreptococcus serum. After the first injection of 10 cm. the temperature became normal, and after the third injection the delirium ceased. The negative result of the blood-culture examination was no argument against the employment of the serum, as the blood was taken from the arm eleven days after the illness began. Dr. Mongeri recommends this form of treatment, but admits that the result does not help towards the elucidation of the vexed problem as to the real cause of puerperal psychoses.

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On the Question of Salt in the Alimentation of Epileptics [*Du sel dans l'alimentation des épileptiques*]. (*Gaz. des Hôp.*, July 21st, 1900.) *Toulouse, Ed.*

Dr. Toulouse summarises his more recent results with this his treatment of epilepsy by the withdrawal of salt from the food, whereby the bromide administered medicinally appears to take greater effect, Dr. Toulouse's theory being, that under these circumstances, the bromide enters more intimately into contact with the tissues by substituting itself for the sodium chloride withdrawn. He gives details of the diets appropriate for this hypochlorinisation of the food supply. A regimen of 3 litres of milk and 1 to 2 lbs. of bread supplies about 5 grammes of sodium chloride, a quantity well adapted for this treatment. This diet with 2 grammes of bromide may yield excellent results; but by the temporary increase of the bromide, or temporary further reduction of the sodium chloride of the food, it is possible, if need be, to produce a greater effect. Dr. Toulouse uses by preference sodium bromide; he has not found any special advantage from strontium bromides. Where a milk diet is not tolerated, the original paper must be consulted for a suitable regimen (p. 826, *loc. cit.*). HARRINGTON SAINSBURY.

Symptomatology and Treatment of the Suicidal Impulse [*Sémiologie et traitement des idées de suicide*]. (*Gaz. des Hôp.*, October 16th, 1900.) *M.M. Garnier et Cololian.*

The dictum *mori licet cui vivere non placet* is no longer admitted, and the suicidal impulse is now generally accepted as a symptom of mental derangement. Suicidal ideas are described by the authors as (1) *false* or *simulated*, some hypochondriacs and hysterics exhibiting