tion in these cases, yet in the counties of Cumberland and Westmoreland much intermarriage has taken place, and during the year 1873 hereditary predisposition was known to exist in 42 per cent. of the cases admitted. In both these cases the mental state was almost identical both as to the primary symptoms and also as to the progress of the case. Great depression, suicidal longings, feelings of abdominal discomfort, and costiveness were the prominent symptoms.

In J. W.'s case the stricture of the large intestine appears to me fully to account for the mental phenomena; and in the case of T. W., the occlusion of the bile duct stopping the supply of bile to the intestines, and thus defrauding them of their natural stimulus, and also causing a certain amount of blood poisoning, seems to me an ample cause for an attack of melancholia. No doubt the patients were both advanced in years, which rendered them more liable to be affected mentally by their physical state. As to the visceral lesions, the stricture of the large intestine was in all probability the result of a dysenteric ulcer.

The occlusion of the bile duct was probably the result of some acute inflammatory mischief, but as most of the relatives and friends of both these patients were dead, or have left the locality in which they lived, I have been unable to get an account of their former bodily health, or

a history of any former illness.

Nitrite of Amyl in Epilepsy. By James A. Philip, M.B., Assistant Medical Officer, County Asylum, Gloucester.

The following notes of my experience of this drug may be interesting:—

It was tried in several cases, all epileptics of some stand-

ing, and in doses varying from 3 to 20 drops.

At first a chloroform inhaler was used, but an oil-silk cone, with blotting paper inside, was found more convenient. Three male epileptics inhaled twice a day, for about six weeks, beginning with three drops and rising gradually to 20 drops. In none of these cases did any benefit result.

In several other cases nitrite of amyl was used. I may

mention the following:—

A male patient had a fit during the night, four before 11 a.m., an inhalation of amyl at 11 o'clock, and another fit at

3.30 p.m.

In a second case the fits were somewhat peculiar. He first uttered a humming noise, then began to run and jump about, shouting all the time and taking no notice of anyone. He soon fell down, and was convulsed for a short time, after which he soon began to return to his usual state.

He inhaled 5 drops, whilst standing with his head down, and wearing a confused, sullen expression. Pulsation of the carotids, &c., followed, and a sensation of sickness, which warned him of an approaching fit, passed off. However, in three minutes after, he had a fit of the usual character. He had several fits before and after the inhalation.

On another occasion he had a fit two hours before an in-

halation, and another four hours after it.

Another patient had an inhalation at 10.30 a.m., after having had six fits that morning. Ten minutes after, he had another fit. Nitrite of amyl was again inhaled at 1 p.m., followed by a fit at four, and another at five o'clock, the same afternoon.

A female epileptic inhaled 5 drops with the usual physiological effect on the circulation. The fluid had nearly all disappeared when she lay back saying, "Oh, my—" and in three seconds began to slide gradually out of her chair until she came upon her knees. Her face had now become pale, her lower lip trembled violently, and her teeth chattered.

Tonic spasms came on, passed off quickly, and were followed by violent convulsions, and afterwards temporary insensibility.

The nitrite of amyl was tried in epileptic mania with no benefit.

An equally unsatisfactory result followed the use of chloral

hydrate in a few cases of epilepsy.

In two cases having every night several fits, 25 grain doses were given at bed time, in whiskey and water. The patients had the fits as frequently as before.

PART II.-REVIEWS,

The West Riding Lunatic Asylum Medical Reports. Edited by J. CRICHTON BROWNE, M.D., F.R.S.E. Vol. iv.

This volume is made up of contributions by gentlemen, some of whom are connected with the Wakefield Asylum, and some of whom have never enjoyed that advantage. As it professes to be "The West Riding Lunatic Asylum Medical Reports," it would seem more fair to the former gentlemen, in our notice of this collection of papers, to confine our attention to their productions alone, thus letting them stand on their own very decided merits, and removing them from under the shadow of the great names that figure