

these associated movements he rejects the possibility of their production by means of bilateral innervation. He considers that such associated movements develop very early in the evolution of the individual, being overlaid in process of time by other movements more recently acquired. After a hemiplegic shock the memory of the more recent movements is abolished, but the power of more primitive movement is retained. These movements are then in reality voluntary in origin. Their symmetry in the contralateral cases he attributes to a tendency to symmetrical movement which is developed at a very early age, as is shown in the case of the invariable closing or opening of both eyes in a young child.

R. S. GIBSON.

*The Treatment of Obstinate Trigeminal and Occipital Neuralgia [Le traitement des neuralgies trigéminales et occipitales rebelles]. (Fourn. de Neur. et Psychiat., July, 1927.) Muskens, L. F. F. (Amsterdam.)*

While admitting that the ætiology of trigeminal neuralgia is still in many cases uncertain, the author considers that the abnormal excitations which are responsible for the pain are produced at centres either in the medulla or midbrain. He casts doubt on the observation of Horsley and Schwab on the Gasserian ganglion.

He points out that in many cases excision of part of the affected branch or the injection of alcohol produces only temporary relief, due to the fact that regeneration of the nerve takes place rapidly, especially when the break in continuity is produced far from the centre. This regeneration he states is also much more rapid when the nerve is divided or alcoholized than when it is crushed.

The operation which he advises, and of which he gives his successful experience, consists in crushing the two lower branches of the trigeminal and subsequently sectioning them distal to the point of crushing. The operation is described in some detail, and five illustrative cases are given.

Similar treatment is suggested for occipital neuralgia, and two cases quoted.

R. S. GIBSON.

*Early Pain in Disseminated Sclerosis [Les algies initiales dans la sclérose en Plaques]. (L'Encéph., September-October, 1927.) Koukoff, A. E.*

Attention is called to the fact that sensory disturbance of the nature of pains and anæsthesias are of frequent occurrence in disseminated sclerosis, and are frequently early symptoms. Four cases are described in all of which sensory disturbance was marked, and in three of which it was the initial symptom.

The author considers that the general lack of recognition of such facts may in some cases lead to errors in diagnosis.

He considers that the sensory symptoms are probably of root origin.

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