the albumen by the trichloracetic acid. In the normal fluid the ring enlarges after a few minutes, but does not diffuse through the fluid, becoming more attenuated until it is dispersed in the tiniest flakes and disappears, colouring all the fluid a yellow colour. In pathological cases the opaque ring remains compact and forms a suspended skein from the wall. Taccone distinguishes two types of reaction—a meningitic type characterized by the persistence of the dense opaque ring, and an encephalitic type characterized by the formation of a whitish ring. Vizioli found the reaction invariably negative in non-organic cases, and even in some cases of epilepsy, of post-encephalitic Parkinsonianism, of dementia præcox, of acquired hydrocephalus and of progressive muscular atrophy. The author obtained the meningitic type of reaction in almost all cases of general paralysis, in some cases of tabes, in three cases of spinal syphilis, also in a case of acute epidemic encephalitis, in one of trigeminal neuralgia, in a case of syphilitic cerebral arteritis and in a case of paraplegia.

The encephalitic type of reaction was found in a case of epilepsy, in some cases of post-encephalitic Parkinsonism, in a case of syphilitic pseudo-bulbar paralysis, in some cases of tabes, in all cases of general paralysis in which the amount of albumen was less than 0·1%, in four cases of katatonic dementia præcox and in all cases of disseminate sclerosis examined, of which five showed an otherwise normal fluid. G. W. T. H. Fleming.

The Bi-coloured Guaiac Test. (*Brain, July*, 1929.) *de Thurzo, E.*

The author points out the value of diagnostic tests of the spinal fluid. Mras and Landsteiner picked out by the colloidal tests future subjects of general paralysis. De Thurzo himself picked out by the colloidal reactions in the spinal fluid two cases which two and a half years later showed well-marked clinical signs of general paralysis. He describes a new colloidal test using tincture of guaiac resin, naphthol green and brilliant fuchsin. In general paralysis in the first four to six tubes of the series there is complete deviation of the colour to green. In tabes dorsalis and in syphilitic myelitis the greatest deviation occurs mostly in tubes 2, 3 and 4. In other nervous diseases the results were negative.

G. W. T. H. Fleming.

5. Treatment.

Unattended Wards [*Pflegerlose Abteilungen*]. (*Psych.-Neur. Wochenschr., No.* 45, *November* 10, 1928.) *Mönkemöller.*

Dr. Mönkemöller gives further details of his system of open wards without continuous supervision (*vide Journ. Ment. Sci.*, 1928, p. 813). He deals at length with a number of criticisms, and points out the advantages of the system as follows: It provides the greatest measure of freedom possible for chronic, harmless patients; it encourages in them a sense of responsibility and self-confidence

https://doi.org/10.1192/bjp.76.312.164-a Published online by Cambridge University Press