of 104° F. the author considers to be the ideal course of treatment. In these cases where inoculation failed, the author recommends the use of diathermy. G. W. T. H. FLEMING.

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6. Neurology.

Intracranial and Spinal Metastases in Gliomas of the Brain. (*Brain, December*, 1931.) *Cairns, H., and Russell, D. S.*

The authors found spinal metastases in 8 out of 22 successive necropsies on cases of glioma. These 8 cases included the less malignant and more highly differentiated types of glioma, such as astrocytoma and ependymoma, as well as the more primitive and malignant types, such as neuro-epithelioma of the retina, medulloblastoma and glioblastoma multiforme. The proximity of the tumour either to the ventricular system, or to the basal cisterns, is probably as important in promoting metastases as the intrinsic malignancy of the tumour-cells. Lumbar puncture showed an increased protein content in the cerebro-spinal fluid of 3 out of 5 cases. Tumour-cells were not recognized in the fluid in any of the cases. G. W. T. H. FLEMING.

Chronic Subdural Hæmatoma. (*Brain, December*, 1931.) *Kaplan, A.*

The author describes 8 cases, and points out that it is a more common condition than middle meningeal hæmorrhage. Trauma, often trivial, is the important ætiological factor. The most characteristic clinical symptom is a peculiar lethargic state, which alternates between drowsiness or coma and periods of alertness. The author prefers to use the term "chronic subdural hæmatoma," since true pachymeningitis hæmorrhagica interna is non-traumatic.
G. W. T. H. FLEMING.

Degenerative Chorea [*Corea degenerativa*]. (*Rassegna di Studi Psichiat., May–June*, 1931.) *Poppi, U.*

The author discusses the pathological findings in 8 cases of Huntington's chorea. He pays particular attention to the cyto-architectural arrangement of the cortex, the lenticular nucleus, the sub-thalamic body, the substantia nigra and the dentate nucleus.

He considers that the degeneration frequently found in the fifth and sixth strata of the cortex is not the cause of the mental symptoms common in this disease. He attributes these symptoms to lesions in the third layer of the cortico-frontal region, advancing arguments in favour of this hypothesis.

Lesions of vascular origin were more frequent in the lenticular nucleus (putamen) than in other parts of the nervous system. Perivascular necrosis, miliary softenings and enormous dilatations of the lymphatic spaces were demonstrated. These lesions may also be found in senile and arteriosclerotic brains. This, of course, is to be expected, if one considers the anatomy of the blood-supply of the striate region.

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