Brain Bankruptcy of Business Men. (*Alien. and Neur., July*, 1899.) *Hughes, C. H.*

A consideration of the early symptoms of brain exhaustion, with a practical discussion on the follies of mismanagement as regards treatment, frequently seen in the termination of such cases.

G. A. WELSH.

Alcoholic Epilepsy [*Alkohol und Epilepsie*]. (*Allgem. Zeitsch. f. Psych., B. lvi, H.* 3.) *Bratz.*

In this long article of fifty-one pages, he arranges his cases, sixty-seven in number, into three groups:—1. Patients who before the beginning of the habit of drunkenness have had some epileptic attacks. 2. Patients who before drunkenness had an unhealthy nervous system or mental weakness. 3. Patients who before drunkenness were quite healthy. A heredity neurosis of one kind or another was noted in 88 per cent. of Bratz's cases of alcoholic epilepsy. In most instances of epilepsy directly caused by the misuse of alcohol, the tendency to convulsions passes away with the drunkenness, or returns with it. The first epileptic attack generally occurs about the end of a bout of drinking, but it is commoner amongst steady soakers than amongst those who only get drunk occasionally. In those affected with alcoholic epilepsy there are other nervous disorders, such as a feeling of pressure upon the nerve-trunks, dulness of touch or hyperæsthesia, a low or over-great sense of pain, cramps, tremors, and startings of the muscles. The vision was impaired in nine cases out of thirty-one. Headaches and sleeplessness were frequent. There was much mental dulness in those admitted to the hospital, but this wore off in part in a few days. Most of them, however, continued to suffer from general listlessness, weakness of memory, and obtuseness of the moral sense, similar to that which is observed in habitual drunkards who are not epileptic. Dr. Bratz observes that the weakening of the mental faculties in alcoholic epilepsy is generally not so marked as in cases of ordinary epilepsy coming on between the twentieth and fortieth years of life. Some of those affected with alcoholic epilepsy have little toleration of alcohol and suffer severely from the after effects of indulgence, though incapable of abstaining from drink. He tells us that alcoholic epileptics are a very low class, outcasts from their families, beggars and vagabonds, or have fallen into the hands of the police. In those cases in which the epilepsy has become fixed and outlasts the indulgence in liquor, the pathological lesion has been found to be arterial sclerosis, especially affecting the walls of the finest vessels of the brain.

W. W. IRELAND.

Mongolian Imbecility in Infants. (*Pract. Dec.*, 1899.) *Sutherland, G. A.*

This paper embodies the result of the writer's observations upon Mongolian imbecility in infants. In this variety, he tells us that the ligaments of the large and small joints are loosely strung, so that on fting a foot one can rattle the bones of the knee and hip-joints, hyperextend the knee, and find the ankle and toe-joints abnormally mobile.

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In the cases examined after death, he has found the thymus, the thyroid, and the supra-renal glands to be healthy. Treatment by the thymus and thyroid extracts has been found useless. W. W. IRELAND.

Trophœdème chronique héréditaire. (*Nouv. Icon. de la Salpt., Nov.—Dec.*, 1899.) *Meige, H.*

He describes two young women who had tumefaction confined to the right leg. Some instances of this perversion of nutrition have also been described by Drs. Melroy, of New York, Vigouroux, and Falcome. From cases published of this rare affection, it is clear that it runs in families. In the cases described it seems to have descended from the maternal side. Engravings are given of eight members of the same family so affected in some parts of the lower extremities.

W. W. IRELAND.

Chronic Thyroidal Fibrosis [*L'Hypothyroïdie benigne chronique, ou Myxœdème fruste*]. (*Nouv. Icon. de la Salpt., July—Aug.*, 1899.) *Hertoghe, E.*

This is a long article on an affection which has been already described by Dr. George Murray, under the title of the *Diagnosis of Early Thyroidal Fibrosis*. Dr. Hertoghe remarks that there is an infinity of degrees between the perfect health of the thyroid gland and pronounced myxœdema. In some cases where the gland is insufficient there is still much intellectual activity and tolerable health. Generally, however, there is habitual apathy with a tendency to corpulence. In children so affected the growth is retarded, puberty is delayed, and even when they grow up they retain an infantile appearance. Dr. Hertoghe's descriptions are illustrated by numerous engravings, which are very clear and striking. In this disease the use of the thyroid by the mouth is almost always attended with benefit. W. W. IRELAND.

Folie à Trois. (*Neur. Cbl., No.* 12, 1899.) *Bouman, L.*

He records the case of three brothers who were received at the same time into the asylum at Bloemendal on March 7th, 1897. The youngest of them was first affected. At the beginning of the year it was noticed that his character was changed. He lost the desire to work and complained of lasting weariness. On February 21st he began to have maniacal attacks. Eight days later he disturbed the worship in a church, and when turned out began to take off his clothes in the streets. They put him into a strait jacket. The second brother, who had to look after him, was much excited, and on February 28th became restless and unmanageable. The day after the oldest brother also became maniacal. On admission the three brothers were violent; sometimes their fury ceased and they blessed one another, always using the same words. The youngest brother was unquiet, incoherent, destructive, resistive, and refused food. He improved slowly, so that he could be discharged on July 21st; from later accounts it appeared that the recovery continued. The second brother remained quiet for a while after being separated from the others. He was dismissed on September 14th, almost completely recovered. The oldest brother also showed incoherent speech, with ideas of grandeur and religious notions.

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