

DIFFERENTIAL DIAGNOSIS OF MULTILOCULAR CEREBROSPINAL AFFECTIONS.

M. CHARCOT.

In the subjoined Table we have written in *italic letters* the symptoms to which greatest importance should be attached.

*Multilocular Cerebro-Spinal Affections.*

	TABETIC SERIES.	MULTILOC. SCLEROSIS.	DISSEMIN'D SYPHILOSIS.	GENERAL PARALYSIS.
CEPHALIC SYMPTOMS.	Epileptiform Apoplectic Attacks.	<i>Epileptiform Apoplectic Attacks</i>	Epileptiform Attacks..	Epileptiform Apoplectic Attacks.
	.....	.....	Par. Hemiplegic Epil'y	.....
	Vertigo .....	<i>Vertigo</i> .....	<i>Vertigo</i> .....	<i>Vertigo</i> .
	<i>Diplopia, Strabismus</i> .....	<i>Diplopia</i> .....	<i>Amblyopia, Optic Neu-</i>	Diplopia.
	.....	<i>Nystagmus</i> .....	<i>ritis</i> .....	Amblyopia.
	<i>Amaurosis</i> .....	Amblyopia, White Atrophy .....	<i>Diplopia</i> .....	<i>Inequality of Pupils.</i>
	<i>Inequality of Pupils</i> .....	.....	.....	.....
	<i>Facial Anæsthesia</i> .....	.....	<i>Headache, Fixed Pain</i>	Headache.
	<i>Deafness</i> .....	.....	.....	.....
	<i>Meniere's Vertigo</i> .....	.....	.....	.....
Laryngismus .....	<i>Embarrassment of Speech</i> .....	.....	<i>Embarrassment of Speech.</i>	
Embarrassment of Speech .....	<i>Difficult Deglutition</i> .....	.....	.....	
.....	Pneumogastric Palsy .....	Total Facial Palsy .....	.....	
VISCERAL SYMPTOMS.	<i>Gastric Crises</i> .....	<i>Gastric Crises</i> .....	Non-nervous Crises .....	.....
	<i>Nephritic Crises</i> .....	.....	.....	.....
	<i>Vesical Crises</i> .....	.....	.....	.....
	<i>Paresis of Bladder</i> .....	.....	.....	Paresis of Bladder.
	<i>Cystitis</i> .....	.....	.....	.....
SPINAL SYMPTOMS.	<i>Girdlepain</i> .....	Lightning Pains .....	<i>Pseudoneural Pains</i> ..	<i>Lightning Pains.</i>
	Hyperæsthesia, Anæsthesia .....	<i>Plaques</i> .....	<i>Spinal Hemianæsthes.</i>	<i>Tingling.</i>
	<i>Incoordinated Movement</i> .....	Incoordination .....	.....	<i>Incoordination.</i>
	Contractures and Trepidations .....	<i>Special Trembling</i> .....	<i>Spasmodic Paraplegia</i>	<i>Paresis. Trepidation.</i>
	.....	Spasmodic Paraplegia .....	<i>under form of Hemiparaplegia</i> .....	<i>Special Trembling of Hand.</i>
TROPIC SYMPTOMS.	Eschars .....	Eschars .....	.....	Eschars.
	Arthropathies .....	Arthropathies .....	.....	.....
	Fractures .....	.....	.....	.....
	Muscular Atrophy .....	Muscular Atrophy .....	.....	Muscular Atrophy.

We should be guided chiefly by the symptoms which are, so to speak, characteristic. Thus, if we observe, in a patient, ataxy with nystagmus we must think of multilocular sclerosis and not of locomotor ataxy (tabetic series), because nystagmus is a valuable symptom of multilocular sclerosis. In the same way spasmodic paraplegia (recognized by the continual trembling movements which are produced when a single blow is struck upon the soles of the feet) is much more characteristic of syphilosis than of multilocular sclerosis, especially if accompanied by *fixed pain*, which always indicates a phenomenon of compression. Ex.: paraplegia consecutive to Pott's disease.—*Gaz. des Hôp.*