

and physicians of the Army Medical Corps requiring the aid of osteopaths "to treat sprains, rheumatic shoulders and wrists, and lumbago!" This would do credit to German arrogance or self conceit. It would be the limit of the descent from the sane to the ridiculous to remove the care of such cases from the care of highly-trained men forming the Army Medical Corps to that of osteopaths whose training has been so imperfect and limited in scope. This is surely an example of Autolycus outdone.

But the humor of it all is that it makes good advertising matter. They pose as capable of taking a place with the doctors at the front, and they ask the papers to publish this.

THE COMMOTIONAL BRAIN SYNDROME.

Physicians and surgeons have often met with a remarkable group of symptoms that follow injuries to the head, causing at the time commotion or shaking-up of the brain. On this subject the following from the *British Medical Journal* of 31st July is timely and deals with cases arising during the present war:

"Numerous cases of cerebral traumatism comparable in many ways to 'commotio cerebri' have occurred during the war. In these there is no external injury to the brain, but the cerebral functions are very seriously upset in various manners. Quite recently forty-eight patients exhibiting the 'commotional syndrome' have been studied at Montpellier by Mairet, Piéron, and Bouzansky. These authors divide its nervous signs and symptoms into six groups, as follows: First, sensation is almost commonly affected, usually in the direction of diminution or abolition of function—blindness, deafness, loss of taste and smell, partial or complete anæsthesia, have all been noted; usually the distribution of the disturbance is asymmetrical. Various degrees of hypoæsthesia, hypoalgesia, loss of sensitiveness to pressure, heat, or cold, limited to zones or areas of the body, or affecting (as is most common) only one side of the body, perhaps with the loss of the superficial reflexes, are all more frequently seen than the hyperæsthesias, which involve as a rule the existence of areas painful on pressure. Secondly, these authors describe on the motor side increased reflex excitability of the tendons and muscles, oftenest unilateral, in rare cases going on to the production of hysterical or epileptiform attacks; less often paresis or paralysis of groups of muscles, with or without contracture, has been recorded. Thirdly, vasomotor disturbances have been very general in these patients; chilliness and cyanosis that may be unilateral, dermatography, and cardiac irregularity are mentioned under this heading, and it is added that