

that vaccine has shown itself of very considerable value, though there are cases which do not appear to be much influenced.

DR. A. BUSCHKE and DR. HARDER. "Provocative Action of Sublimate Injections in Syphilis and their Relation to the Wassermann Reaction." *Deut. Med. Woch.*, July 1, 1909.

In 1902, Herxheimer and Krausel showed that, when the roseola of secondary syphilis showed but poorly, an injection of mercury caused it to suddenly declare itself. Welander tried a similar test during the primary stage and succeeded in 1 or 2 cases in causing the rash to appear.

The authors have tried the reaction in a large number of hospital cases and have succeeded in so many that they consider the test to be of value, as they are thus enabled to shorten the secondary incubation period and therefore to complete their diagnosis and begin treatment. They make use of sublimate injections in large doses (.04). Generally within 24 hours the exanthem appears. By excising a piece of skin and rash they convinced themselves that the rash was syphilitic, rather than mercurial, in so much as there were characteristic vascular changes.

No definite relationship between the reaction and the Wassermann reaction could be proven.

R. P. C.

## OPHTHALMOLOGY.

UNDER THE CHARGE OF DRs. STIRLING, BYERS, MATHEWSON, MCKEE, TOOKE.

B. E. FRYER, M.D., and Jos. S. LICHTENBERG, M.D. "A Case of Amaurotic Family Idiocy." *Ophthalmology*, Vol. 5, No. 3.

Samuel B., aged 21 months, of Jewish parents. The birth was normal and there was apparently nothing unusual with the child until the third or fourth month. At this time the mother noticed a change in the infant's actions. From the twelfth to the fifteenth month, convulsive attacks were frequent. These were severe, at times with opisthotonos. There is no history of syphilis nor is there any blood relationship between the parents. The child is now quite blind, the eyes are divergent, pupils small and do not react to light or very sluggishly. The head rolls about and cannot be held erect. The child cannot walk, talk, or sit up. The body is well nourished, the muscles are flaccid. The neck muscles are especially weak, and have been so from the first. The cranial measurements are below the average.

Ophthalmic examination shows an atrophic nerve head with excavation atrophy in both eyes. The retinal vessels are small and few in number. At the macula the characteristic changes are absent, there being no cen-