

CENTRAL NEURITIS.

BY

ELBERT M. SOMERS, M.D.,

St. Lawrence State Hospital, Ogdensburg, N.Y.

Adolf Meyer in an article, "On the Parenchymatous Systemic Degenerations mainly in the Central Nervous System," published in *Brain*, 1901, proposed for this type of disorder the shorter term, "Central Neuritis," in which there was a parenchymatous degeneration of the nerve elements, but here pre-eminently of central distribution.

Clinically, the disorder seems to be an acute or sub-acute process lasting from a few days to several weeks, which occurs as a terminal disorder in a number of psychoses, particularly in certain asthenic conditions, frequently accompanied by diarrhoea and febrile reactions and characterized for the most part by loss of weight, progressive weakness, muscular tension and rigidity, incoordinate movements, and motor restlessness; the latter, at times, amounting to jactations of the limbs, with reflexes usually increased. The mental condition is usually that of an anxious, perplexed agitation or a stuporous and, at times, delirious state.

Anatomically, the gross changes are absent or those incident to the period of life; microscopically, a diffuse parenchymatous affection, especially of the largest nerve elements in the neural tube (most evident as a bilateral axonal reaction in the Betz cells) and decay of the myelin sheaths—the process involving the supra-segmental elements much more than the segmental ones.

This broadly defines the disorder which has doubtless come within the experience of many of us, but has not been given a place sufficiently apart from the terminal phases of delirious-stuporous conditions and unaccountable physical failures.

Aside from the cases of Dr. J. Turner and those reported and collected from the literature by Dr. Meyer, few cases have been recorded, and there still remains much in the etiology, onset, course and outcome of the disorder and the underlying anatomical condition which demands attention and study.

The object of this paper is to present nine additional cases observed in the wards of the St. Lawrence State Hospital. The diagnoses of these cases have all been confirmed by autopsy and by microscopic examination, the main results of which follow each case in summary form.

The disorder has so far occurred mainly in the 4th, 5th and 6th