

muscles. The author describes a case operated on in this way, with beneficial results.

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A study of 171 cases of mental derangement from morphin and cocaine includes 80 cases of acute and 91 of chronic intoxication; 60 of the acute cases were from morphin, and 52 of these patients recovered. In 7 cases there was apparent recovery, but a second attack of coma ensued, terminating fatally. It is probable that a new absorption occurred of poison which had lain for hours inactive somewhere in the digestive tract. Some of the patients had had only one dose, others several. There was no relation between the amount taken and the symptoms. Thirty-five presented notable mental disturbances for weeks, slowness of thought, inability to grasp complicated subjects and striking mental fatigue. All were annoyed by dreams. There were 15 patients with acute cocain intoxication, 9 of whom recovered completely in a short time. Four others had convulsions without a previous history of epilepsy, followed by a comatose condition for from one to three days and insomnia, vertigo, anorexia and delirious attacks for six weeks or more; two died, one in syncope in twenty-four hours, the other in four days from exhaustion following extreme agitation and delirium. In all the cases there was vertigo and ataxia and peculiar visual and tactile hallucinations. Five acute cases were from mixed cocain and morphin poisoning; the prominent symptoms in all five were marked with stupor with paroxysms of delirium and visual hallucinations. The tactile hallucinations were wanting. Mental dulness and apathy continued for two weeks after the acute symptoms in one case, and for seven weeks in four cases. All these patients recovered. Of the chronic cases, 70 patients were morphin or opium habitues. In 10 of these there were only the general symptoms of mental weakness, failing memory, apathy and profound impairment of the moral sense; in the other 60 there were special mental manifestations characteristic of the different psychoses. Eight were melancholic and suicidal; in nine the condition simulated manic-depressive insanity; 5 had systematized delusions; while in the others dementia was the prominent feature, mild in the cases with unsystematized delusions and marked in the others. There were 10 patients with chronic cocain intoxication; in which, besides the physical signs of tachycardia, pallor and impotence, there were also interesting psychic disturbances. Insomnia was a constant symptom; and there was a restlessness and craving for muscular and intellectual activity. The characteristic visual and tactile hallucinations of the acute poisoning were still more marked and auditory hallucinations were also present. These induced delusive ideas, rarely systematized, mostly of a persecutory nature. To-