

is unsuccessful. The same result is likely to follow in generalized cancer, and in conditions in which treatment can have no influence. One case is cited where failure was observed; the liver was involved before treatment was begun. Of the latter, one death from phlebitis of the vena cava is an example. Since no notable elimination of this remedy has been observed after its administration, it is probably decomposed in the organism. —*La Mercredi Médical*, 1893, No. 35, p. 417.—*Am. Jour. Med. Sciences*.

Nitro-Glycerin for Vomiting.—A contributor to the *British Medical Journal* recommends nitro-glycerin as the most positive remedy for controlling vomiting he has ever employed. He has found it will control all forms of vomiting of gastric catarrh, and in alcoholism it acted almost as a specific. It also proved useful in controlling the vomiting of pregnancy.—*Southern Clinic*.

The Localization of Pure Word-blindness.—Dejérine and Vialet (*Compt-rend. hebdom. des Séances de la Soc. de Biologie*, n. s. 9. t. v. No. 28, p. 799) have reported the case of an intelligent and cultured man, sixty-eight years old, who presented absolute verbal blindness both for letters and for words. There was loss of the comprehension of musical signs—musical blindness—while the ability to read figures and to calculate was preserved. There was no sign of verbal deafness, and no indication of difficulty in articulate speech. There was no mind-blindness, and no visual aphasia. The power of mimicry was retained, as was also the ability to write spontaneously and upon dictation. Transcription was, however, imperfect and difficult. Motility was preserved, as was also general and special sensibility and the muscular sense. These symptoms had been present for four years. Death occurred suddenly, paraphasia and total agraphia having existed for two days without a sign of verbal deafness, and general intelligence and the power of mimicry remaining intact. Upon *post mortem* examination an area of recent red softening was found in the inferior parietal convolution and angular gyrus of the left cerebral hemisphere; while areas of old, yellowish atrophic lesions were found in the lingual lobule, the fusiform lobule, the cuneus, and the apex of

the occipital lobe, with secondary degeneration in the splenium of the corpus callosum, and pronounced atrophy in the optic radiations. The right hemisphere was perfectly intact. Upon histologic examination profound alterations were found in the posterior portion of the lingual and fusiform lobules, particularly in the collateral fissure. All of the white matter of these convolutions was destroyed and replaced by cicatricial tissue. The lingual lobe was apparently the less profoundly affected, though on microscopic examination its white fibres were found to be almost entirely disorganized; at the level of the lower lip of the calcarine fissure, however, a portion of the calcarine stratum had withstood the process of destruction. Advancing towards the cuneus the cortex progressively resumed its normal appearance. These characters indicated that the lesion was least pronounced at the level of the lower lip of the calcarine fissure, and was especially localized to the fusiform and lingual lobules. The lower portion of the ventricular cavity was likewise involved in the process of softening. The tapetum, the optic radiations of Gratiolet, and the inferior longitudinal fasciculus of Burdach were entirely destroyed. The lesion became gradually less marked towards the outer wall of the ventricle. All of the structures, in the descending branch of the calcarine fissure participated in the softening. From the anatomic findings in this case, and from physiologic considerations, the deduction is drawn that the lower portion of the inferior longitudinal fasciculus of Burdach contains physiologically differentiated fibres that connect the visual zone with the zone of language.—*Am. Jour. Med. Sciences*.

A Remarkable Case of Recovery from Poisoning by Opium.—On the 13th of October, 1892, two of the male employees of the asylum, while on their way home from work, found a woman lying beside the road a short distance from the hospital, whom they recognized as one of our nurses. She seemed dazed and stupid, and as she could apparently neither walk nor talk, they carried her to the building, arriving at 6.30 p.m.

I saw the patient immediately, and found her in a semi-conscious condition, unable to stand or to talk coherently, although she moaned and cried