There are numerous cases on record of a similar character. There is another class of cases where periodical recurring attacks of mental disturbance forms the sole symptom of what is a true epilepsy. The paroxysm in these cases takes the form of an acute mania, lasting a few hours or days. There is neither convulsions or apparent loss of consciousness during the period, but after it passes away the patient has no remembrance of what happened. It will be at once apparent how all-important it is to separate these cases from ordinary acute mania,—important not only in prognosis, but especially in directing the treatment of the case. It is to these paroxysms that Liedesdorf proposes to give the name of psychical epilepsy. In coming to a conclusion as to the nature of an acute maniacal disturbance, he considers the following as the most important points:

- 1. A history of epilepsy or alcoholism in the parents, or of "concussion" of the brain from traumatism or fright, etc.
- 2. When the psychical disturbance is always preceded by a definite aura.
  - 3. When this aura is always of the same nature.
- 4. When the attack is sudden, and does not at most exceed a few weeks in duration.
- 5. When it is followed by loss of memory of events during the period.
  - 6. When the attacks recur with a certain regularity.

When all the above conditions are present, then, and then only, does Leidesdorf consider that we are fully warranted in saying that we have a case of psychical epilepsy to deal with.

## CHRONIC GLANDERS.

A unique case of glanders is recently reported (Zeitschrift f. Klin. Med.) which lasted twenty months. It occurred in a Russian physician, being contracted during an autopsy. The only constant symptom was moderate fever, lasting a few days at a time, with intervening periods of normal temperature. The nares were unaffected throughout. Some temporary bronchopneumonia, thought at the time to be due to glanders, proved at the autopsy to have been, in reality, syphilitic in character,