

disturbances, associated with a change in the blood cells. In auto-intoxications there may be also contact of the nerve cell with toxic substances. Whatever be the cause and the mechanism which produce the convulsive phenomena, the latter are not produced equally and in a uniform manner in all subjects, since the production and the intensity of the convulsions depend on the convulsive attitude of the subject. This is a fact we ought always to bear in mind, in order to understand the varying reactions of the motor cells with respect to the convulsive agents, which at first seem identical (Dide. of Paris).—Translated from *Giornale Internazionale delle Scienze Mediche*, by HARLEY SMITH.

Spontaneous Ecchymoses in Diseases of the Nervous System (ROUMENTEAU).

Spontaneous ecchymoses are observed in many diseases of the nervous system. Hemophiliacs, arthritics, herpetics are particularly prone to have these subcutaneous manifestations. In diseases of the medulla, the medullary lesions, and especially those of the column of Glarke, make it clear that it is a question of vaso-motor changes. In some diseases of the encephalon, the production of the ecchymoses is due to a vaso-motor paralysis. In the peripheral neuroses and in the neuralgias, the nerve lesions show that the ecchymoses arise from vaso-motor changes. According to the happy expression of Gilles de la Tourette, hysterics and neurasthenics have a real vaso-motor diathesis, which explains the localization of the vascular disturbances. Another case is to be found in the condition of the arteries at the points where the ecchymoses occur. When the arteries have lesions of any sort, the vaso-motor changes produce an arterial hyper-tension, which sometimes leads to the extravasation of corpuscles. This extravasation which, at other times, depends on the rupture of the capillaries, is favored by the lesions of the arteries. These two causes, which act in the same way and simultaneously, explain the genesis of the formation of spontaneous ecchymoses.—Translated from *Giornale Internazionale delle Scienze Mediche*, by HARLEY SMITH.

Hemiplegia.

Dr. David Ferrier, of London, in the *Clinical Journal* for February 20th, directs attention to a few features in the study of hemiplegia of considerable importance from a diagnostic point of view.

When a person stricken down with hemiplegia, whether unconscious or semi-conscious, is examined, there will be conjugate deviation of the eyes. That is, they look to the side of the brain injured, or away from the paralyzed side. This sign soon passes off.