

Syphilitic Diseases of the Nervous System. JOSEPH COLLINS.
M.D. *Journal A. M. Assn.*

Collins' article needs only its conclusion emphasized: Syphilitic diseases of the nervous system are largely, if not wholly, due to imperfect treatment by mercurials. Iodides are too largely depended on, and pill treatment, even to ptyalism, does not prove saturation. The only safe test is the Wasserman, and it should be repeated at five-yearly intervals after the negative reaction presupposes cure.

G. W. H.

Latent and Active Neurasthenia in Its Relation to Surgery.
STUART MCGUIRE, M.D., RICHMOND, VA., *J. A. M. A.*

McGuire discusses the relationships of functional nerve diseases to operative procedure, and concludes as follows: Hysterical cases are troublesome before, but successful after; neurasthenics are debatable; hypochondriacs are non-operable. In neurasthenia the occasion for operation must be definite organic disease, not a sore brain. The organic disease may cause the neurasthenia, and if so must be removed. Apprehension and nervous signs must be quieted off by long treatment before operation, as psychic shock is greater than traumatic shock, while, finally, prolonged post-operative care is necessary.

G. W. H.

Meningitis and Conditions Simulating Meningitis. By FRANK
SHERMAN MEARA. *Archives of Pediatrics.*

Meara publishes an excellent paper, summarized as follows. Tuberculous meningitis in infancy is usually insidious, but may be acute. Its onset is characterized by irritability and listlessness, headache, vomiting and stupor, but the first and last of these may be the sole signs. The cardinal symptoms are apathy, tremor, irregular respiration, ocular palsies, while less frequent are the slow, irregular pulse, stiff neck, opisthotonos, Kernig, tache, and convulsions. The temperature is low, with marked excursions. Older children present more typically the disease in adults, the rarer symptoms mentioned occurring much more frequently. But most characteristic is the spinal fluid, which is clear, under pressure, forms a web on standing, containing TB. bacilli, has a raised albumen count, and shows a lymphocyte count up to 1,000 per cu. mm. The blood count is frequently high in leucocytes, 38,000 being reported in one case.