

connection the author deals with dementia præcox and the manic-depressive psychosis, giving helpful guidance that is worthy of attention.

WM. McWILLIAM.

### 5. Neurology.

*Encephalitic Sequelæ and their Treatment.* (*Amer. Journ. Psychiat.* September, 1931.) Cottrell, S. S.

Encephalitis lethargica is a chronic infectious disease. The most constant seat of damage is situated in the midbrain; and the commonest structural damage is in the substantia nigra and adjacent areas. Most remedies have been unsuccessful. Stramonium was first tried in 1924; and reports of treatment by this drug have been almost uniformly favourable. The drug gives symptomatic relief. It must be given continuously, but the dosage varies.

M. HAMBLIN SMITH.

*The Hyperkinesias.* (*L'Encéphale*, December, 1931.) Russetzki, J.

This article deals with the problem, which is at present rapidly becoming more and more complicated, of involuntary and automatic associated movements.

These conditions can all be explained in terms of dys-function of the extra-pyramidal systems. Prof. Russetzki has grouped them under the following headings:

- (1) Simple tremor.
- (2) Myoclonic movements.
- (3) Systematic and rhythmic movements of the choreo-athetotic type.
- (4) More purely choreic types, and
- (5) The sensory component of inconstant involuntary movements.

The author discusses the most characteristic features of these motility disturbances, their type and their rhythm, the effects of cold, of emotion, of cutaneous excitation, of sleep and of the posture of the body. The general attitude of the body exercises a marked influence over the systematic, rhythmic type of movement; but has little or no effect on other varieties. Amongst the afferent excitations the most important are proprioceptive stimuli; cutaneous stimuli are of less importance. He points out that tonus is increased in simple tremor. Myoclonic conditions are accompanied by a normal or slightly increased tonus, and choreiform movements are associated with a hypotonus.

W. McC. HARROWES.

*The Neuro-anatomy in Respiratory Failure.* (*Arch. of Neur. and Psychiat.*, October, 1931.) Finley, K. H.

The author discusses the literature, and gives two cases of his own in which respiratory failure followed lesions in the upper cervical cord and in the formatio reticularis. He is quite convinced