The Infantile Type of Family Amaurotic Idiocy. (Arch. of Neur. and Psychiat., May, 1927.) Leiner, J. H., and Goodhart, S. P.

The authors report two cases which differ from most of the infantile cases in the absence of myelin sheath degeneration, in this respect resembling the juvenile type. The authors do not confirm Hassin's conclusion that the pathological process is most pronounced in the optic thalamus. The sieve-like appearance which Hassin describes and figures they consider to be due to the accumulation of lipoid droplets and not to the excessive formation of Gitter cells. In both cases there was a marked ectodermal selectivity. In one case the cerebral hemispheres were more involved, in the other the cerebellum. In the entire group of infantile types of amaurotic family idiocy we find a variety of sub-groups with mutations in the pathological pictures. The connecting links in this group are the ectodermal selectivity and the different degrees of Schaffer's type of cell degeneration, which was pointed out and emphasized for the juvenile type of Spielmeyer in 1906.

G. W. T. H. FLEMING.

Blood-groups in Mental and Nervous Cases [Les Groupes Sanguins dans les Maladies Mentales et Nerveuses]. (L'Encéph., December, 1926.) Toulouse, E., Schiff, P., and Weismann-Netter, R.

Many tests were made in a variety of cases, and the authors state their results shed no light on psychopathic problems.

W. D. CHAMBERS.

"Rachimetry"—A Study of the "Differential Tension" of the Cerebro-spinal Fluid [La Rachimétrie—Étude sur la Tension Rachidienne Différentielle]. (L'Encéph., July-August, 1926.) Nuñez, P. E.

The author has studied the tension of the cerebro-spinal fluid in a large number of cases. His method is to measure first the initial tension on entry of the needle to the spinal canal, and then to record again after allowing 5 c.c. of fluid to escape. The difference between the two figures he calls the differential tension or "T.D." He follows Claude in regarding as normal a pressure of 20 cm. of water in the lying and 30 cm. in the sitting posture. His conclusions are (i) that estimation of the tension is impossible without a manometer; (2) the tension and the quantity of cerebrospinal fluid are not in any constant relation; (3) primary increased tension without obvious cause and with a normal fluid is not uncommon; (4) spinal and arterial hypertension are not related; (5) in suspected cases of brain-tumour a T.D. of more than 10 points supports the diagnosis.

W. D. Chambers.

The Study of the Cerebral Pulse [Études sur le Pouls Cérébral]. (L'Encéph., April, 1927.) Tinel, J.

The tests on which this paper is based were made on old-standing trephine cases, and the author's experiments do not confirm results