

ferers. If infection, etc., were avoided, any so-called hereditary tendency might be disregarded.

Drs. WILLOUGHBY, SYKES, and ARMSTRONG having taken part in the discussion, Dr. NIVEN replied.

Dr. ARMSTRONG then moved a resolution on the sale of tuberculous meat, which elicited considerable discussion, and which, at the suggestion of the PRESIDENT, was passed as a provisional expression of opinion only pending the report of the Royal Commission.

MIDLAND MEDICAL SOCIETY.

HENRY EALES, M.R.C.S., President, in the Chair.

Wednesday, February 8th, 1893.

CASE.

MR. WOOD WHITE showed a woman, aged 30, who had a tumour growing from the periosteum of the inner wall of the orbit and the side of the nose.

SPECIMENS.

Dr. PURSLOW showed a Multilocular Ovarian Cyst which he had removed by abdominal section from a woman, aged 46. No flushing or drainage tube was used, and the patient made an excellent recovery.—Dr. MALINS showed (1) a Large Hæmatosalpinx, and (2) Dermoid Cyst of Ovary.

PAPER.

Mr. HASLAM read a paper on the Value of the Ligature of the Lingual Arteries in Malignant Disease of the Tongue.

Wednesday, February 22nd, 1893.

HENRY EALES, M.R.C.S., President, in the Chair.

UNUNITED FRACTURE OF THE CLAVICLE.

MR. THOMAS exhibited a boy, aged 12, who had an ununited fracture of the right clavicle. When about a year and a-half old he had an accident, in consequence of which his clavicle was fractured. The following was the present condition: The right clavicle had been fractured a little external to the centre. The fractured ends could be readily separated and moved. The shaft of the clavicle was atrophied, but the muscles of the shoulder, and especially the deltoid, were much hypertrophied. Any kind of movement of the upper extremity could be performed with ease and quickness.

THYROIDECTOMY.

Mr. MARSH showed a youth, aged 20, the right lobe of whose thyroid, with the central part, he had excised three weeks before for acute bronchocele, causing dyspnoea. The right lobe was larger than the left, and the central part dipped down beneath the manubrium sterni. There were no cardiac symptoms or exophthalmos, but the veins on the right side of the neck were distended. A median incision was employed, as Mr. Marsh only intended to excise the central portion, with a small piece of the two lateral lobes, as in two successful cases previously recorded by him. In this instance, it was found easier to remove the right lobe entirely, dividing the gland tissue well to the left of the trachea, which showed marked lateral flattening. The patient made a rapid recovery, and the remaining piece of thyroid had already considerably diminished in size.

PARAPLEGIA SUPERVENING UPON EXOPHTHALMIC GOITRE.

Mr. WHITE showed for Dr. SUCKLING a woman, aged 42, suffering from paraplegia supervening upon exophthalmic goitre. Dr. Suckling considered that descending sclerosis of the motor tracts had followed upon a lesion in the region of the floor of the aqueduct of Sylvius.

TUMOUR OF ORBIT.

Mr. WOOD WHITE showed a boy, aged 6. A firm, elastic, and fairly movable tumour was growing from the upper part of his right orbit, and was bulging the upper eyelid. The growth was first noticed six months previously, and, three months before admission to the Eye Hospital, was removed at another institution. It recurred very rapidly, and at the present time the increase in the size of the tumour could be noticed daily. Mr. Wood White had no doubt that the tumour was a sarcoma, and he contemplated its removal at once, sparing if possible the eyeball.

GALL STONES.

Dr. SHORT showed a man, aged 62, who during the last eighteen months had passed two large gall stones weighing respectively 309 and 214 grs., at an interval of eight months. A review of the symptoms made it most probable that the stones had ulcerated from the gall bladder into the hepatic flexure of the colon. The first calculus was perfectly smooth and the second was faceted at each end.

REVIEWS.

VARIOUS FORMS OF HYSTERICAL OR FUNCTIONAL PARALYSIS.

By H. CHARLTON BASTIAN, M.A., M.D., F.R.S., Professor of the Principles and Practice of Medicine in University College, London; Physician to University College Hospital, and to the National Hospital for the Paralysed and Epileptic. London: H. K. Lewis. 1893. (Post 8vo., pp. 212, 7s. 6d.)

THE reader, whether he be a reviewer or the happier person who reads books only for the pleasure or advantage to be derived from their perusal, will lay down this small volume with the feeling that he has not been wasting his time, but that he has been presented with new ideas on a well-worn subject and new lights for the investigation of a form of disease which is among the most perplexing and least satisfactory which a physician can be called upon to treat. There are few diagnoses which are, as a rule, made with greater rapidity and with less certainty than that of hysteria. Dr. BASTIAN observes in his preface that "if we are to arrive at a fuller and more accurate knowledge of the various forms of functional paralysis, this can only be brought about by a continuous methodical investigation and record of all the minute details pertaining to such cases"—the very thing which the diagnosis of hysteria is commonly assumed to render unnecessary.

The main part of the volume is occupied by a study of the localisation of the lesion, that is to say, the site of the disordered function, in a series of cases which are rendered interesting by the care with which they have been examined. Dr. Bastian insists upon the difficulty of diagnosis as between functional paralysis and organic disease. The emotional weakness of certain nervous patients suffering from structural disease is especially liable to betray the incautious observer into "the facile but erroneous diagnosis of 'hysterical paralysis.'" Even after this distinction has been made we are still far from a complete diagnosis; we have still to form "a notion as to the region of the nervous system that is at fault, and also as to the nature of the pathological condition which causes a failure of functional activity in the part in question." In the first place the question whether the functional failure is in the brain or the spinal cord is difficult to answer, and commonly is not answered. Secondly, as to the brain itself, any attempt at localisation must be limited, but Dr. Bastian thinks that a diagnosis may be made in three regions: (a) a region involving some part of the Rolandic convolutions; (b) a region involving the posterior third of the hinder segment of the internal capsule; (c) a region involving some of the outgoing fibres from these convolutions. Very careful clinical studies of cases illustrating each of these types are given and discussed. Function paralysees, of spinal type, are next treated in the same way; they are divided into two main types: (a) the spastic, due to functional perversion of, or defect in, the pyramidal system of fibres in the cord; and (b) the flaccid, due to functional defect in the anterior cornua in certain segments of the cord. The site of disordered function is determined by the same order of facts as would lead to a diagnosis of the site of a lesion in organic disease.

The conclusions arrived at are summarised in a convenient table on page 121. This table is, in fact, the clue to the main part of the book; it is accompanied by some observations on the nature of hysteria which are well worthy of study, though they do not altogether succeed in dissipating the obscurity which surrounds the subject. Dr. Bastian strongly condemns the practice of using the term "hysterical" as though it were synonymous with "functional." For him hysterical

cases are a special type of functional cases; he urges that if, with Briquet and Charcot, we define hysteria as a neurosis due to perversion of brain functions, then all the cases of functional spinal paralysis must be placed in some other category. Further, as to the cerebral cases he maintains that only some of the cases should be designated hysterical, though he admits that "the grounds on which such a division.....is to be based cannot as yet be definitely formulated." It is to be regretted that Dr. Bastian has not had the courage to carry his opinions to their logical conclusion and give us a new term for the functional cases which are not hysterical. As it is, his proposal to limit the term functional to these cases appears to be unfortunate, since we want the term to express the two groups of non-structural palsy, etc.; the attempted restriction of the term will not tend to remove the confusion of thought which it is the object of the book to combat. We can only hope that the book itself may be so widely read that the confusion may disappear in spite of the want of a new term, or rather in spite of the use of an old term in a new sense.

The great merit of the book is that its author has grasped, as we never remember to have seen before, the fact which seems pretty obvious when stated and when supported by the mass of evidence which is brought forward, but is yet not generally recognised—that in the study of functional disease the symptomatology is governed in the main by the part of the nervous system which is at fault. From this we are led on to the opinion "that the phenomena of mere functional disease should not be expected to differ in kind, but merely in degree, from the forms of structural disease to which they are akin." Moreover, there are no absolute criteria by means of which the two classes of cases may certainly and always be discriminated. The matter is further complicated by the occurrence in practice of cases of structural disease in which the symptoms are aggravated or otherwise modified by coincident functional disease, and of others in which long-continued functional disorder leads to, or at any rate is followed by, structural changes. A diagnosis can only be made by considering the history of the patient and of the mode of onset of the attack, and by studying the distribution of the symptoms, functional disease showing a preference for certain regions.

The remarks on treatment are short, but to the point. Of the Weir Mitchell treatment the author speaks, as was to be expected, in high terms. But it has its limitations; it is costly, and even when this difficulty is overcome it calls for personal attention, and perhaps we may add personal qualities in the physician which are not always available. Any complicating disease such as menstrual disorders or constipation having been treated, Dr. Bastian recommends the local application of faradisation to the muscles and to the surface by the wire brush. Static electricity is also highly spoken of, especially in cerebral cases, while in the spinal cases the application of a constant current through the cord daily for about a quarter of an hour, is found to be of use. It is recommended that shampooing and passive movement of the affected limbs should be combined with the electricity, and it is thought that good may be obtained from the use of sulphur, brine, or tepid needle baths on alternate days. Hypnotism as a means of treatment is dismissed with a verdict of "not proven." Of the means found to be effectual Dr. Bastian observes that they all—faradism, the drawing of sparks (static electricity), frequent massage, and passive movements—are thoroughly harmonious with his view that the centres at fault in cases of cerebral functional palsy are sensory centres of kinæsthetic type rather than "motor centres." "All the efficacious modes of treatment above indicated," he writes, "would, in fact, tend to send awakening stimuli directly to centres of this type, and so might, as we can easily conceive, be capable of slowly modifying their lowered nutritive condition." Dr. Bastian reprints, as an appendix, in a slightly abridged form, the paper on muscular sense, which he read before the Neurological Society in 1886; but it would lead us too far to attempt to discuss here a subject of much complexity which has already been placed pretty fully before the profession; the author's views are well known to all neurologists, and their practical application in the present volume is full of interest. Quite apart from the views which are expressed on this subject, the book is one of great value, and well worthy to be

read by all who desire to give greater precision to their ideas on a difficult and obscure department of clinical medicine.

NOTES ON BOOKS.

Diagnostik der Nervenkrankheiten [The Diagnosis of Nervous Diseases]. By DR. A. GOLDSCHIEDER, Privatdocent at Berlin University, etc. (Berlin: Fischer and Kornfeld, 1893. Small cr. 8vo., pp. 286, 63 illustrations, 7 marks.)—This book, intended to serve as a practical guide to the systematic examination of patients, and to the diagnostic value of the symptoms observed, may be very profitably used for that purpose by readers of German who are taking in hand the study of nervous diseases. The author insists on the importance of thorough investigation in every case, pursued according to a definite and orderly method. In conformity with this leading principle, he lays down a comprehensive scheme of examination to be generally followed; he then proceeds to a development of the subject, which conveys exactly such teaching as is essential for the end in view. The description of the symptomatology of nervous affections (other than mental disorders), and of the various modes of testing the motor and sensory functions is exceedingly good. Numerous useful diagrams and tables of normal data, including charts showing the normal topographical acuity of the temperature sense as determined by the author's well-known method, are given. Altogether the work may be regarded as the most complete and scientific compendium of the subject that has appeared in recent years.

Bradshaw's Dictionary of Bathing Places and Climatic Health Resorts. (London: Kegan Paul, Trench, and Co. Foolscape 8vo., pp 412, 2s. 6d., maps and plans).—This compendious dictionary of health resorts maintains its well deserved popularity as a handy book of reference for the busy practitioner. It keeps well abreast of recent additions to health resorts, and continues to condense a vast amount of useful information into a marvellously small compass.

The Teeth of Pauper Children. By RICHARD DENISON PEDLEY, F.R.C.S., L.D.S. Reprinted from the *British Journal of Dental Science.* (London: J. P. Segg and Co.)—This pamphlet has been compiled by Mr. Denison Pedley from the pages of the *British Journal of Dental Science*, dealing with the teeth of pauper children. We have from time to time referred to this question when calling attention to the various reports by dentists with regard to the teeth of children in pauper schools. This pamphlet urges the necessity of dental surgeons being appointed to district and other pauper schools.

REPORTS AND ANALYSES AND DESCRIPTIONS OF NEW INVENTIONS IN MEDICINE, SURGERY, DIETETICS, AND THE ALLIED SCIENCES.

THYROID TABLOIDS.

MESSRS. BURROUGHS, WELLCOME AND Co., Snow Hill Buildings, London, E.C., prepare the fresh thyroid glands of the sheep in the form of a dry powder compressed into a tabloid. The glands, it is stated, are received by the manufacturers within three hours after the animal has been slaughtered; they are carefully dissected from the piece of trachea to which they are attached, and then thinly sliced, so that freedom is ensured from diseased parts. The slices are dried at a low temperature *in vacuo*, pulverised, mixed with a little salt, and then compressed. Each tabloid is equivalent to 5 grains of the fresh thyroid. We find that when placed in water the tabloids quickly disintegrate, and that the solution, as well as the undissolved portion, are quite free from putrefactive odour. The clear filtered solution becomes opaque on boiling. These tabloids would appear to be a pleasant and convenient method of administering this remedy.