previously recorded by others. He concludes that the cerebral circulation is controlled by a vaso-motor system exactly like the systemic circulation, and that there is no relation between any form of mental activity and the state for the time being of the bloodvessels of the brain. On the other hand, certain of the paroxysmal sequelæ of encephalitis do appear to be of vaso-motor origin, and these can sometimes be stopped by modifying the blood-pressure, either by increasing it by hyperpnæa or diminishing it by amyl nitrite.

W. D. Chambers.

The Permeability of the "Central Nervous Barrier" [Sur la Perméabilité de la Barrière Nerveuse Centrale]. (L'Encéph., March, 1927.) Bau-Prussak, S., and Prussak, L.

This paper refers to the functions of the membranes of the central nervous system which allow, or prevent, the interchange of various substances, toxic or nutritive, between the blood-stream and the cerebro-spinal fluid. Permeability was tested by the method of Walter—the administration of potassium bromide for three to five days and the simultaneous quantitative estimation of bromine in the blood and cerebro-spinal fluid. The technique of the test is described. Normally the co-efficient varies from 2'90 to 3'30. The authors examined 108 cases of organic nervous diseases, psychoses, etc., and conclude that the method is of little value for differential diagnosis, though it can be used to test the effects of treatment.

W. D. CHAMBERS.

The Pressure in the Retinal Arteries and in the Cerebro-spinal Fluid [Tension Rétinienne et Tension du Liquide Céphalo-Rachidien]. (L'Encéph., January, 1927.) Claude, H., Lamache, A., and Dubar, J.

The blood-pressure in the retinal arteries is measured by the instrument and method of Bailliart. A large number of observations have been made on sixty cases. The retinal blood-pressure is found to be in constant relationship with intra-cranial pressure, as recorded by lumbar puncture and the use of the manometer, and the authors claim that by Bailliart's method changes in the cerebro-spinal tension can be observed without the need for repeated punctures.

W. D. Chambers.

The Alkaline Tide of the Urine in Epilepsy [Le Flux Alcalin Urinaire dans l'Epilépsie]. (L'Encéph., March, 1926.) Rafflin, M.

This short paper summarizes the present knowledge of the pH of the urine. The author was unable to detect any variation in the urinary pH in epileptics.

W. D. Chambers.

Study of the Urinary pH in Epilepsy, Migraine and the Crises of Anxiety or Excitement [Étude sur le P.H. Urinaire dans l'Epilépsie, la Migraine et les Crises d'Anxiété ou d'Excitation]. (L'Encéph., March, 1926.) Tinel, Westphal and Valance.

These authors have found an increased alkalinity in the urine accompanying certain paroxysmal diseases. In their view the

hyper-alkalinity predisposes to the crises, and does not result from them.

W. D. Chambers.

A Contribution to the Study of the Body Fluids in Epilepsy [Contribution à l'Étude Humorale de l'Epilepsie]. (L'Encéph., September-October, 1926.) Rafflin, R.

This paper reviews the literature to date on the reactions of the blood and urine in epilepsy, and contains the results of hourly estimations of the pH in epileptics and in normal persons. The variations are found to be more marked in epilepsy, and the conclusion is reached that the normal digestive alkaline tide exaggerates an endogenous intoxication and is probably mainly responsible for the epileptic fit.

W. D. Chambers.

Pulmonary Hyper-aëration—Acido-basic Disparity of the Blood and Tissues [Hyperventilation Pulmonaire—Desequilibre Acido-Basique du Sang et des Tissus]. (L'Encéph., September-October, 1926.) Radovici, A.

The author has tested the results of voluntary hyperpnæa on 20 cases, some normal, some suffering from neuroses, organic nervous disease and epilepsy. The hyperpnæa was maintained for 10 to 30 minutes in each case and its results tested by Chvostek's sign, by the electrical excitability of muscle, by the oculo-cardiac reflex and the atropin test. The results in each group are set out in detail. The alkalinity of the blood was immediately increased by the hyperpnæa, and a state of tetany and of para-sympathetic tonus was induced in all cases within a few minutes. In all cases of epilepsy a fit was produced within 30 minutes, and the author considers this can be relied on as a test for true epilepsy.

W. D. CHAMBERS.

Affectivity [Sur l'Affectivité]. (Journ. Neur. et Psychiat. Belg., May, 1927.) Cuylits, Dr.

The author discusses the *rôle* of the sympathetic system not only in normal mental activity but in the psychoses, and concludes that it has been undervalued. He considers that though often regarded as of secondary importance the sympathetic is the source of affectivity and of spontaneous mental activity, and that psychoses are due to its disordered action.

W. D. Chambers.

Cerebral Starvation due to Premature Arterio-Sclerosis, without Focal Ischæmia [La Meïopragie Cérébrale par Angio-sclérose Précoce sans Ischémie en Foyer]. (L'Encéph., March, 1927.) Claude, H., and Cuel, J.

In this paper is described a case of advanced cerebral arteriosclerosis, notably diffuse in distribution and without focal lesions, associated with increased intra-cranial tension, in which the symptoms began at the age of 39 years. The authors discuss the symptoms and morbid anatomy, and show how their case is