

the depressant action of paraldehyde; picrotoxin is not suitable because effective doses are convulsant. Stimulants do not effectively counteract sodium barbital or similar hypnotics, which act over a long period and cause motor excitation.

H. EAGLE (Chem. Abstr.).

*Recent Experiences Concerning Morphine Withdrawal in Public Hospitals* [*Neue Erfahrungen über Morphinentziehungen im offenen Krankenhaus*]. (*Deutsch. med. Wochenschr.*, No. 7, p. 249, 1933.) Wittke, J.

The paper describes the results of treatment of 220 morphine addicts. Prolonged narcosis is not advised, and the withdrawal of morphine is done abruptly. Instead of narcosis, the author recommends using the preparation "helvetin" (made by "Ropha" A. G., of Basle), which is an addition product of a 10% 1-3-dimethyl-oxypurine, Na-Ca-ortho-benzoic acid with novocain added; small doses of the barbiturates may be given concurrently for the first two or three days. It is claimed that helvetin prevents unpleasant and serious symptoms of abstinence, if given over the course of two or three weeks.

R. STRÖM-OLSEN.

*The Psycho-medical Correction of the Drug Habit.* (*Journ. Abnorm. and Soc. Psychol.*, vol. xxviii, p. 119, July-Sept., 1933.) Miner, J. B.

The author refers to Modenos' blister-serum method of curing drug addicts. He also estimated the degree of intraversion-extroversion on the Bernreuter scale. Three people who had been addicts were cured, and expressed no desire to return to the drug rated high on the *extraversion* scale, and two addicts who persisted in returning to drugs rated high on the *introversion* scale. Introversion is highly correlated with the neurotic constitution on the Bernreuter scale. These results, as far as they go, confirm McDougall's hypothesis of the close association of the alkaloid drugs with the temperament of the introvert. They suggest the connection of the morphine habit with neurotic tendency, and to a lesser degree with submissiveness, and with a lack of self-sufficiency.

G. W. T. H. FLEMING.

*The Treatment of Dementia Præcox by Continuous Oxygen Administration in Chambers and Oxygen and Carbon Dioxide Inhalations.* (*Psychiat. Quart.*, vol. viii, p. 34, Jan., 1934.) Hinsie, L. E., et al.

The authors conclude that oxygen and carbon dioxide treatment of catatonic dementia præcox is not to be advocated as a treatment.

G. W. T. H. FLEMING.

*The Manganese Treatment of Schizophrenic Disorders.* (*Journ. Nerv. and Ment. Dis.*, vol. lxxix, p. 59, Jan., 1934.) Hoskins, R. G.

Nine schizophrenic patients were given manganese chloride by mouth over a period of several weeks without detectable influence upon the psychosis. Thirty patients were subjected to intramuscular injections of a colloidal preparation of manganese without any effect on the clinical or metabolic condition. These negative results suggest that beneficial effects claimed by earlier investigations may be due to unintentional psychotherapy.

G. W. T. H. FLEMING.

*Treatment by Ephedrine of Accidents Occurring after Spinal Anæsthesia* [*Tratamiento de los accidentes postraquiánestésicos por la efetonina*]. (*Arch. de Neurobiol.*, vol. xiii, p. 445, May-June, 1934.) Albo, W. L.

The unpleasant effects which may be produced by lumbar puncture, whether for anæsthetic or diagnostic purposes, can be largely obviated by the employment of ephedrine. The author recommends the subcutaneous injection, 30 minutes prior to the lumbar puncture, of 0.05 grm. of ephedrine combined with 0.2 grm. of caffeine.

M. HAMBLIN SMITH.