ABSTRACTS FROM CURRENT MEDICAL LITERATURE.

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MEDICINE.

Value of Intensive Methods in Antisyphilitic Therapy.—In the Journal of the American Medical Association (23rd April, 1921), Louis Chargin discusses the value of intensive methods in antisyphilitic therapy. Thirty-seven cases were treated by the administration of a course of three full doses of arsphenamin given on three successive days, followed by a course of six mercury injections given a week apart. Fifty cases were treated by the chronic intermittent method, arsphenamin and mercury being given alternately—six to eight injections of arsphenamin and ten to twelve injections of mercury constituting a course. In addition, 19 cases were treated on a plan of modified intensiveness. The author states that in the above series of cases the clinical and serological results obtained by the three methods were practically the same, and since the margin of safety is in favour of the less intensive plan he recommends this as the method of choice in the treatment of syphilis.

—Douglas K. Adams.

Pathological Findings in Encephalitis Lethargica.—In the Quarterly Journal of Medicine (April, 1921), C. P. Symonds gives a critical review of the present state of our knowledge of encephalitis lethargica. As regards pathological anatomy, the features of special importance are vascular congestion, evidence of toxic degeneration of nerve cells and neuronophagia, proliferation of the mesoblastic cells of the vessel walls, infiltration of the perivascular spaces with small round cells, and glial proliferation. As regards the cerebro-spinal fluid, he states that in many of the earlier cases in the English and French literature the cerebro-spinal fluid was said to show no abnormality. McCaw, Perdrau, and Stebbing record an excess of lymphocytes in three out of the six cases examined, and the author regards this as a fairly good index of the results obtained in large numbers of cases.

It appears that the cell count ranges on the average between 0 and 50 per cmm. (very rarely reaching 100), that the increase consists entirely of lymphocytes, and that in quite a third of the cases the number of cells is normal (i.e., less than 5 per cmm.). No careful observations are available from which one might correlate the number of cells with the stage of the disease, but Boveri states that one is more likely to discover an increase in the earlier stages, as in
acute poliomyelitis, and Netter has made a statement to the same effect. On the other hand, it seems probable that the presence or absence of a lymphocytosis depends on the degree and extent of meningeal involvement. It is generally agreed that the globulin content of the cerebro-spinal fluid is very little, if at all, increased, and the reducing bodies are not destroyed. It is noteworthy, however, that the colloidal gold curves obtained by means of Lange’s reaction occasionally show definite abnormalities.

As regards diagnosis, emphasis is laid by the reviewer on the importance of the history of onset. In the absence of any laboratory test of specific value the diagnosis of lethargic encephalitis must for the present be made on clinical grounds.—Douglas K. Adams.

**OBSTETRICS AND GYNAECOLOGY.**

**Herpes as a Type of Vicarious Menstruation.**—In the *Dublin Journal of Medical Science* (May, 1921), Dr. Solomons reports a case where, since the age of 18 years, the patient had had the sensations every month which some women feel previous to menstruation, accompanied by a catarrhal herpes on her left cheek. Medicines by various doctors had failed to produce any sign of vaginal discharge. The patient is now 27 years of age. Under an anaesthetic a bimanual examination was made, and absence of the uterus, ovaries, and tubes diagnosed. The abdomen was opened to confirm this; it was found, however, that on the right side of the pelvis, attached by a thin fold of peritoneum, there was an ovary of normal size, but the uterus and left ovary were absent. The ovary was left, but her appendix was found to be inflamed and was removed.

—James H. Martin.

**The Heart in Pregnancy and Labour** (*Dublin Journal of Medical Science*, June, 1921).—Dr. Rowlette states that in many cases of pregnancy the heart is swung upward and outward as a result of the increase in the size of the uterus. Even the healthiest of females—women or animals—becomes more quiescent during pregnancy, and feels fatigue more quickly than at other times. How much of this disturbance is due to extra work thrown on the heart, and how much to interference with the position of the viscera by the enlarging uterus, one cannot tell. Dr. Rowlette doubts if the heart really undergoes hypertrophy during pregnancy. He quotes Herring’s observations on pregnant rats, which found that on the average the heart of the pregnant rat weighed less than that of the control. In his post-mortem investigations at the Rotunda Hospital, Dr. Rowlette has not been able to convince himself that the human heart hypertrophies during pregnancy. More important than the localisation of heart lesion is the ability of the heart to perform, or otherwise, its work. The earlier in pregnancy the compensation fails the more serious is the outlook. If the patient has had frequent attacks of failure of compensation then pregnancy should be forbidden, as taught by Mackenzie.—James H. Martin.