

5. Treatment.

Production of Sleep and Rest in Psychotic Cases: Preliminary Report.
(*Arch. of Neur. and Psychiat.*, August, 1930.) Bleckivenn, W. J.

The author administered amytal (sodium isoamylethylbarbiturate) intravenously in more than fifty cases of all types of psychosis. Patients with mental excitement and agitation fell into profound sleep followed by a phase of physical and mental relaxation lasting from 12 to 18 hours. The natural sleep following the period of relaxation was the most desirable result obtained. Narcosis was induced on an empty stomach. The dose varied from 7–15 gr. The blood-pressure fell in the first hour. The method facilitates tube-feeding and the handling of patients with acute delirium. *Status epilepticus* can be controlled. The intravenous injection of amytal is contra-indicated where there is advanced myocarditis or generalized arterio-sclerosis.

G. W. T. H. FLEMING.

The Therapeutic Value of High Temperature Baths in Multiple Sclerosis. (*Journ. of Nerv. and Ment. Dis.*, August, 1930.)
Lindemulder, F. G.

The author treated twelve cases of multiple sclerosis by means of high temperature baths. These were given every second day, or in some cases daily for a course of eleven baths. The patient was immersed up to the neck in a continuous bath at 104° F. for 10 minutes, and then the temperature was raised to 110° for 30 minutes and brought down to 104° for 20 minutes, making a total of one hour in the bath. When the mouth temperature was at its highest the patient would be restless and confused. After the maximum fever there was a period of mental depression. Occasionally the patients would become irrational and it would be difficult to restrain them in the bath. The highest mouth temperature obtained was 108.2° F. Maxima varied between 106° and 108.2°. Usually the temperature could be maintained above 104° F. for at least one hour and a half, often for two hours. Nine patients gained weight, the average being 3 lb. Fowler's solution with iron, quinine and strychnine was given during the series of baths. There appeared to be no marked ill-effects. Four of the patients showed a decided improvement, two seemed much worse. The interval since treatment was too brief to allow of a definite conclusion as to its efficacy.

G. W. T. H. FLEMING.

Spinal Drainage in Alcoholic Deliria. (*Amer. Journ. Psychiat.*,
September, 1930.) Goldsmith, H.

Since the advent of prohibition acute alcoholic psychoses have greatly increased, and grave toxic reactions tend to occur. Spinal drainage is an effective mode of treatment in these cases. It is attended by very slight sequelæ, and the period of detention in hospital has been materially reduced. The treatment is most

effective when started within twenty-four hours of admission to hospital. In the great majority of cases no after-treatment is necessary.

M. HAMBLIN SMITH.

Auto-serotherapy in Mental Disorders [*La autoflicteneterapia en las enfermedades mentales*]. (*Boletín del Instituto Psiquiátrico, Rosario, July, August, September, 1929.*) Rotman, Isaac.

With injections of serum from blisters the author treated twelve cases of insanity, amongst whom were cases of general paralysis, dementia præcox and puerperal confusion.

Observing the usual precautions for asepsis, cantharides paste on gauze, 3 × 3 cm. to 7 × 7 cm. in size, was applied to the skin. After having been fixed firmly with a bandage for 15 to 18 hours the serum from the resulting blister was withdrawn. Doses of 8 to 18 c.c. of this serum were administered hypodermically.

Results of treatment :

- (1) The treatment is only "calming."
- (2) It is efficient only in states of excitement and moderate agitation.
- (3) The tranquillity obtained was temporary and of variable duration.
- (4) The modification observed in the leucocytic cell-count persisted for 20 days.

The procedure does not offer technical difficulties, but repeated blistering leaves unsightly scars.

J. R. BEITH ROBB.

Indications, Contra-Indications and Complications of the Malarial Treatment of General Paralysis. (*Journ. Med. Lyon, June, 1929.*) Lépine, J., Bourrat, L., Christy, H., and Larrive, E.

The authors consider that for "practical cures" and remissions in general paralysis the pentavalent arsenical preparations give the most satisfactory results. These results depend upon the periodicity of the treatment, which must commence at the very earliest signs of the disease.

If specific treatment has no influence on the syphilis, then malaria is recommended, especially in the confused or tabetic forms.

Malaria is contra-indicated when there is marked depression, wasting, repeated jaundice, pulmonary tuberculosis or nephritis, and in elderly paralytics. The aortitis so frequently present in this disease is not considered an obstacle to malarial therapy.

In this form of treatment good technique and careful observation of the patient will reduce the mortality, which the authors give in their cases as 11%.

J. R. BEITH ROBB.

Museum Meanderings. (*Occup. Therap. and Rehabil., June, 1930.*) Bracket, T.

In this article Miss Bracket describes a visit to the Newark Museum, pointing out how much of interest it holds for the occupational therapist. She indicates many designs, culled from