The Action of a New Preparation of Bismuth in the Pre-clinical Stage of Neurosyphilis [Acción de un nuevo bismuto en el período preclínico de la neurosífilis]. (La Semana Méd., vol. xl, p. 1710, Nov. 30, 1933.) Carrillo, F., Schujman, S., and Campos, R. M.

The new preparation is entitled "iodobismitol". It consists of an iodide of bismuth dissolved in ethylene glycol which contains 12% of iodide of sodium, the latter appearing to facilitate penetration. It is prepared in vials of 2 c.c. capacity, each containing 0 12 gr. of the iodide of bismuth and sodium. It is used intramuscularly. Good results are reported.

M. Hamblin Smith.

Tryparsamide in the Treatment of Neurosyphilis. (Journ. Nerv. and Ment. Dis, vol. lxxviii, p. 354, Oct., 1933.) Reese, H. R.

The author gives the result of the Wisconsin group of general paretics treated with tryparsamide. He found in a group of 341 cases clinical arrests or remissions in 54%, and in a group of 306 cases of meningo-vascular syphilis he found clinical or serological cures in 78%. The poorer results in paretics were in cases with depression, stupor, dementia, and especially in the taboparetics. In the treatment of tabes, tryparsamide has done more good than the other arsenicals. In the paretic group the serological results were: blood Wassermann, 49.2% negative, 35.6% reduced, 15.2% unchanged positive; fluid Wassermann, 25.7% negative, 47% reduced, 27.3% unchanged positive.

In many cases the author believes combined therapy with tryparsamide and malaria to be the best.

G. W. T. H. Fleming.

The Treatment of Juvenile and General Paralysis. (Psychiat. Quart., vol. vii, p. 593, Oct., 1933.) Potter, H. W.

The author treated 60 cases of juvenile general paralysis. The treatment of choice is either malaria or tryparsamide; the latter is the simpler treatment. From a consideration of 38 cases treated with malaria or tryparsamide, the author concludes that the prognosis is better in (1) cases who, prior to the onset of the paresis, were of normal mental level; (2) those who were in or past adolescence when the symptoms developed; (3) those showing the confused and expansive reaction types; and (4) those in whom the elapsed time between the onset of the disease and the treatment did not exceed two years. Malaria or tryparsamide is advocated for any child with a positive spinal fluid serology, even though neurological signs and mental symptoms of general paralysis are absent.

G. W. T. H. FLEMING.

Results of Endospinal Bismuth Therapy in Neuro-syphilis [Resultados parciales de la bismutoterapia endorraquídea en la neurosífilis]. (La Semana Méd., vol. xl, p. 1992, Dec. 21, 1933.) Orlando, R., and Grobli, W.

In cases of typical general paralysis the endospinal injection of insoluble bismuth, in doses of 0.07 cgrm. every ten days up to a total of 0.5 cgrm., produces a slight modification of the globulins. In cases of general paralysis which have been previously subjected to malarial therapy, bismuth treatment modifies favourably all the reactions, including the gold curve.

M. Hamblin Smith.

The Action of the Pasteur Antirabic Vaccine on Epileptic Attacks, Hebephrenic-catatonic Psychoses and Parkinsonian States [Action du vaccine antirabique pastorien sur les accès épileptiformes, les psychoses hébéphréno-catatoniques et les états parkinsoniens]. (Ann. Méd. Psych., vol. xiv (ii), p. 342, Oct., 1933.) Cruveilhier, L., Barbé, A., and Nicolau, S.

Of a series of 17 epileptics given antirabic vaccine treatment, 7 showed diminished frequency and severity of the fits, associated in 3 cases with increased stability of character; the remainder were unaffected. The 9 cases of dementia præcox