

3. Pathology of Insanity.

A Reticular Condition of the Skull [État Réticulaire de la Voute Crânienne]. (Gaz. des Hôp., April, 1912.) Payan, L., and Mattei, Ch.

The subject was a female child, born at full time in normal labour, and who lived twenty-six days. There was no syphilitic heredity. An encephalocele existed in the mid-frontal region the size of an orange. Palpation showed irregularities over the whole skull, with depressions which more or less corresponded to the fontanelles. At the neck of the encephalocele there was no attempt made at ossification and the projecting tumour was soft but solid. There was in addition in the dorso-lumbar region a spina bifida, and the sacrum and coccyx was atrophied, while scoliosis existed in the cervico-dorsal region.

The *post-mortem* showed the complete absence of coccyx; the sacrum had only three foramina. The cranial wall, covered by normal skin, presented a very remarkable reticular formation. It was composed of osseous trabeculæ which formed a meshwork, of which the spaces corresponded to the pseudo-fontanelles palpated during life. Irregular in outline and formation, these outgrowths were distributed over the whole vault of the skull. It was impossible to make out fontanelles or sutures. Internally this bony formation was seen to correspond to that of the outside, at the same time accentuating the normal fissures and creating others in addition.

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A Combination of Chronic Idiopathic Hydrocephalus in an Adult with Syringomyelia, etc. [Ueber die Kombination eines chronischen idiopathischen Hydrocephalus eines Erwachsenen mit Syringomyelie, etc.]. (Arch. f. Psych. u. Nervenkr., vol. xlvi, No. 3.) Kreif's.

The diseases of the central nervous system which are found in combination with syringomyelia are very widely varied, and are either accidental or are ætiologically connected with this disease. Hydrocephalus may be pathologically placed next to hydromyelia and syringomyelia, and often builds the anatomical substratum for the psychical and cerebral disturbances noted in syringomyelia.

The special case described in this article is one of hydrocephalus, and the mental condition is that of mania with traces of weakness of mind, a condition very like that found in the expansive form of progressive paralysis. On *post-mortem* examination the principal findings were: idiopathic hydrocephalus, syringomyelia, and horse-shoe kidney. A thorough microscopical examination was made, but no traces of paralytic changes in the brain substance could be found. The cause of the mental condition is assigned to defective nutrition, the result of hydrocephalus. The co-existence of hydrocephalus and syringomyelia is without doubt not accidental, and can easily be explained by the fact that both affections have the same pathological cause, *viz.*, disturbances of development of the central nervous system.

The combination of a malformation of the brain (hydrocephalus) and of the spinal cord (syringomyelia) with a typical horse-shoe kidney having one pelvis and one ureter is interesting, being an association of defects probably due to an embryonal limitation of development.

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