

Abstracts of British and Foreign Journals.

Hughlings-Jackson on Evolution and Dissolution of the Nervous System.—(*Croomian Lectures for 1884. Brit. Med. Journal, March 29th, ff.*)—The Croomian Lectures were delivered in March of this year at the Royal College of Physicians by Dr. Hughlings-Jackson, who chose for his subject the "Evolution and Dissolution of the Nervous System," and gave what may be regarded as a highly condensed summary of the results of the work which has occupied him for many years. At frequent intervals Dr. Jackson has published, in somewhat fragmentary form, the results that he has arrived at in localised districts of his field of work; but these publications have been distributed over so long a period, and disseminated in so many journals, that they are not readily available for reference. These lectures are therefore welcome as a recapitulation in an accessible form of much that has appeared before; as giving the latest outcome of Dr. Jackson's labours; and as presenting his views in a more unified, or as he himself might term it, a more integrated shape than they have yet assumed. Dr. Jackson regards the central nervous system as a hierarchy; in which each grade controls the grade below and is controlled by the grade above; each grade represents over again and co-ordinates in more elaborate combinations the parts represented and co-ordinated by the grade below; and every part or region or centre of a grade represents a larger share of the organism than any corresponding part of the grade below, a more limited share than any corresponding part of the grade above. Thus each centre in the lowest grade represents but a limited portion of the organism, and each centre in the highest grade represents the whole of the organism, but in no two of the latter centres is the whole organism represented in quite the same way. The whole of the grades are grouped in three main divisions—lowest, middle, and highest centres. Of these the lowest are the most completely organised, the highest the least completely organised. When disease attacks the nervous system, there are always two sets of manifestations: negative and positive—loss of function and excess of function. The functions lost are those of the centres diseased. The functions that are excessive are those of centres subordinate to the centres diseased, and permitted to act excessively

by the removal of the control normally exercised by the centres now diseased. The centre whose function is abolished may belong to the lowest, to the middle, or to the highest division, affording examples of local dissolution. On the other hand there may be a uniform dissolution, the whole of the highest grade of all being first lost, and successive grades being pared off, as it were, as if in layers. Dr. Jackson applies these doctrines, with many subsidiary hypotheses, to every kind of nervous disorder, from atrophy of muscles to insanity, and from giddiness to coma; and from his vast knowledge of diseases of the nervous system he is able to supply an apparently limitless profusion of instances to every section and subsection of his subject.

C. MERCIER.

Ballet on Exophthalmic Goitre. (*Revue de Médecine*, April 1883.)—The general results at which the author arrives after an inquiry into this subject are as follows:—

1. To the classical symptoms of exophthalmic goitre (palpitations, swelling of the neck, tremor,) there are occasionally added others which, like them, are attributable to disorders of the nervous system.

2. These symptoms are on the one hand *convulsive* (epileptic or epileptiform attacks), or on the other *paralytic* (hemiplegia or paraplegia); also pretty frequently albuminuria, glycosuria, or simple polyuria may be observed.

3. These convulsive or paralytic complications appear to arise, not as the direct result of the Basedow's disease, but of another coincident neurosis (epilepsy, hysteria).

4. Sometimes certain convulsive phenomena (epileptiform attacks) seem intimately associated with exophthalmic goitre itself, and the special clinical conditions under which they are manifested authorise us in connecting them with disturbance of the cerebro-bulbar circulation, itself occasioned by perturbation of the action of the heart.

5. Among the paralytic disturbances some are of minor importance such as the weakness of the hands, the temporary paresis of one or both upper extremities, and the feebleness of the lower limbs. They may be looked upon as directly dependent either upon the tremor, or on functional derangement of the cerebral circulation.

6. The polyuria, albuminuria, and glycosuria are probably more frequent than might be supposed from previous researches, and they indicate a derangement of the bulbar innervation.

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