

ALLERGY OF CENTRAL NERVOUS SYSTEM

DEMENTIA PRAECOX

Mrs. D.—Age 50. Treated January, 1923. Dementia praecox with delusions of persecution lasting some six years following six years of anxiety neurosis, ten years of gastric ulcer, symptoms followed in the last two years by steady development of a massive carcinoma of the stomach palpably about the size of a grapefruit at time of treatment. Delusions that "needles and pins were put in food and drink to kill her;" could see them. Feeding forced at times. Bed-fast. Recovery was complete in two years after two injections of glyoxylide solution. After recovery patient was asked about delusions, she stated, "She knew they were not true, but nevertheless could not help believing them, head was very woozy anyway." Therefore, in spite of her physiological judgment the delusion held sway allergically, dominating the mind. She remains well in all respects. Abdomen normal.

DEMENTIA PRAECOX

Miss W.—Age 44. Colitis for twenty years. During last twelve years dementia praecox and recently spells of pain in abdomen without palpable pathology, delusions, and compulsion neuroses. Prolonged periods of violent dementia. Ten doses of potassium glyoxylate and two doses of Glyoxylide in the course of the last three years established an apparent recovery.

ALLERGY OF THE SENSORY NERVOUS SYSTEM

My attempt to produce an allergy of the sensory nerve endings in 1914 with synthetic fluorescent substances yielded success with a substance closely allied in structure to adrenalin and to caffeic acid, a dihydroxy benzene compound with an unsaturated side chain as its bromine derivative. A dilute solution without showing any visible change, vasomotor or otherwise sets up a continuous burning sensation of several days duration that cannot be removed by washing. It never failed to produce this effect a short while after being applied to the skin. Its close similarity in structure to adrenalin is interesting.

The neuritides are frequent precancer symptoms. The greatest variety of such cases have recovered by use of the glyoxylide.

SHINGLES (*Infective Neuritis*)

Miss J. K.—Age 12. Showed lesions of Herpes Zoster which had been present three days. Pain had kept her awake for four nights. Treatment was given at noon July 23rd and was followed by relief. She slept well that night and the pain never returned. The red base upon which the blisters rested had given place to normal color when seen twenty hours after the treatment was administered. With the exception of two small superficial scabs and the loss of the sun-tan over the affected part, all physical signs had disappeared in another week.

ACUTE NEURITIS OF SHOULDER GIRDLE

Mrs. C. W..—Age 40. Pain in shoulder girdle very severe for two weeks, kept her awake most of each night and she suffered severely during the day as well. Twelve hours after one dose of glyoxylide, pain was permanently gone, recovery complete.

EPILEPSY

In spite of the multiplicity of factors making up the diabetes an epilepsy complexes, the essential allergic nature resident in certain nerve centers seems well supported by the facts so far assembled. A case of diabetes was already reported; a recovery from epilepsy will serve to illustrate.

Miss B..—Age 17. School girl. Epileptic fits for over three years, occurring at night after retiring. Most often when observed, Aura centered about stomach. Not more than three fits a day, sometimes but once a week. On dose of glyoxylide solution given August 12, 1929 was followed by a gradual recession of the disease, so that by the twelfth week only a few petit mal were observed and thereafter recovery became complete, with no more fits.

One institution for defective children recently treated a series of epileptics, and found that about 50% of the cases, treated with one dose appeared to recover in about six months, while the response in the others was not so definite.