fees, those with workman's compensation injury (51%) easily develops to a post-traumatic case. Fees partly paid e.g. nation insurance (9%) is rather rare, while those with no fees e.g. health insurance (17%) and automobile accident indemnity (12%) comprises the remaining cases.

Troublesome is the patient who visit a doctor with many complaints for a long period without any corresponding findings. In respect to numbers of complaint and consultation time (usually visit fortnightly) of post-traumatic cases, there is no significant difference among ARAKI's classification on head injury in acute stage, however, there is an obvious difference between the injured and the wounded in the same type of injury. In thos under twenty years of age, there is little difference between the injured and the wounded, though, in adults, the wounded complained two times more than the injured and five times as much in the consulted time.

On the electroencephalographic finding in 253 cases (75% of the post-traumatics), 37% was abnormal in the injured. On the other hand, 21% was abnormal in the wounded.

Above evidence indicate that psychologic factors have a great significance on the course and complaints. Such factors are dependency as a victim who is suspending compensation, hostility toward the person responsible for the injury, and anxiety on his condition of head injury.

1-12. Untersuchungen Über den Verlauf von Während des 2. Weltkrieges Erworbenen Kopf-Verletzungen Über 20-30 Jahre—Besonders Über die Fälle, bei Deren Granatsplitter im Gehrin Verbleiben

Yoshiharu IMASEKI
Shimofusa National Sanatorium

Wir haben 102 Patienten mit Kopfverletzungen, aus dem 2. Weltkrieg, davon 13 Fälle, bei deren Granatsplitter im Gehirn bleiben, untersucht. Der Verlauf nach den Verletzungen beträgt 23–31 Jahre, die Größe der Granatsplitter reicht von reiskorngroß bis daumenspitzen groß und die Anzahl davon ist unterschiedlich. Bei allen Fällen zeigen sich deutliche neurologische Symptome, die gerade der verletzten Lokalisation entsprechen. Am häufigsten sind Krampfanfälle — 11 Fälle (84.6%) bei einem Patienten wurde traumatische Demenz festgestellt. Bei allen Fällen finden sich Charakterveränderungen und Absetzung der geistlichen Arbeitsfähigkeit. Sie klagen über stetige Kopfschmerzen, Schweregefühl im Kopf, Benommenheitsgefühl und schnelle Ermüdbarkeit. Die stark

geminderte Arbeitsfähigkeit der Patienten erlaubt ihnen nicht den Erwerb eines genügenden Lebensunterhaltes und eine beaufsichtigte Pflege ist unerlässlich.

I-13. Traumatic Aneurysm of the Peripheral Cerebral Artery: (Case Report)

Hajime HANDA, Kazuo MORI and Yoshinari KAMIJO
Departments of Neurosurgery, Kyoto University Medical School
Yoshihiko UMEBAYASHI and Mitsufumi KUWAYAMA
Department of Neurosurgery, Kaisei Hospital, Sakaide

Only 12 cases of traumatic aneurysm of a peripheral cerebral artery have so far been reported by Burton et al. (11 cases) and Kamiyo et al. (1 case).

Recently, we have also experienced one case of this kind. On February 16, 1968, a 15 year-old boy was shot in the forehead by accident. After 10 minutes lucid interval he fell into the drowsy state and was brought to our hospital. Carotid arteriography revealed a subdural hematoma in the left temporal region which was soon removed by craniotomy. The postoperative course was uneventful until February 23 (7th day after operation) when he suddenly fell into coma. A second carotid arteriography disclosed, besides a hematoma, a spherical aneurysm near the periphery of the fronto-polar artery. By repeated craniotomy at the same site as the first one, the epidural and subdural hematoma was evacuated. After this operation he was semi-comatose for about 3 weeks. Carotid arteriography revealed that the aneurysm had already disappeared. A frontal lobectomy, centered on its site, was performed under general anesthesia. But 3 days later, the patient died. At the time of operation, a small bone defect in the frontal bone and a dural defect just thereunder were observed. The serial sections were dyed with H-E and Elastica Van Gieson. Histologically, the aneurysmal wall was composed of amorphous and homogenous fibrin layer, so that it was proved to be a false aneurysm.

Taking into consideration anamnesis, carotid arterio-graphic, operative and histological findings, our case was apparently a traumatic aneurysm.

I-14. Complication in Posterior Fossa due to Trauma

Hideyuki HIRAI
Division of Neurosurgery, Kanagawaken Saiseikai Hospital
Yoshiyuki ISHIDA
Division of Neurological Surgery, School of Medicine, Keio University

Among 197 patients admitted to Kanagawaken Saiseikai Hospital during