SYPHILITIC AFFECTIONS OF THE NERVOUS SYSTEM: A RETROSPECT.

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SINCE Dr. Todd of King's College, London, and I, published cases of syphilitic disorders of the brain and its membranes respectively, in 1851 and 1852, the subject has attained a high degree of practical value and nosological importance. The cases we at that time submitted were in direct contravention of the universally accepted opinion and authority which ruled surgeons. It is within the roll of the maladies usually assigned to the care of the physician, that we now trace and follow out the most serious and even fatal results of constitutional syphilis.

In my own paper, first series (*Dublin Quarterly Journal*, 1852), I have unequivocally proved that epilepsy, mania, hemiplegia, paraplegia, amaurosis, hebetude of intellect, loss of memory, cranial neuralgia, suicidal propensity, paralysis of sphincters—all may be the offspring of the one disturbing cause—syphilis affecting the nervous centres. How this protracted darkness overshadowed the observations and judgment of generations of eminent medical men, I can in no way account for, unless in this way: the surgeon had dismissed his patient on the disappearance of all local and visible disorder. Authority had guaranteed the brain exempt from all syphilitic forces. The subsequent injuries of the nervous system were intrusted to the recognised speciality of the physician, whose nosological nomenclature of the nervous system gave no place in its roll, no clue to a true diagnosis, until recent times supplied the defect.

With this prelude, I propose to submit a statement referring to this subject, and to my own special connection with it, made by the editor of the *Dublin Quarterly Journal of Medical Science* for August 1869, p. 155.

"It is very generally known that Dr. Thomas Reade of Belfast published his first paper on syphilitic diseases of the nervous system in the pages of this journal in the year 1852; Dr. Todd of London having drawn attention to the same subject in 1851. All, however, are not aware of the fact that Dr. Reade's paper was offered for publication in the year 1847. Thus Dr. Reade was really and literally the first who recognised the existence of syphilitic disease of the nervous system; and his labours since this time in further elucidation of the same are well known, and should be freely acknowledged."

I deem it due to the profession and to myself that I should briefly supplement the affirmation of the editor of the *Dublin Medical Journal* by a simple relation of the facts as they happened. They are as follows. In 1837, I was required to visit a military officer from the Ionian Isles, who had been under treatment for persistent quotidian ague for eleven months. He was apparently in the most abject state of prostration consistent with human existence. A strict examination of his person guided me to ignore ague (malarial), and to affix a positive diagnosis; namely, constitutional syphilis. His state precluded hesitating measures. I directed fifteen grains of strong mercurial ointment to be assiduously rubbed in every night. The success was wonderful: on the third night he slept unbroken sleep throughout the night; he had no rigor or fever, *which never again returned*. The fifth day, he had ravenous appetite, with restoration of all the nutritive and secretory functions.

I may not dwell on the corroborative proofs of the diagnosis by the relation of the various accidents of constitutional syphilis which attended the progressive convalescence of about one year. He married, has a family, is an officer of high military rank, and, for his years, of rather plethoric health. (See Case 9, second series.)

The fortuitous occurrences of private practice supplied me with other cases in succession up to the close of the year 1847, so prominently characteristic and pronounced, that it was impossible I could resist the conviction that the brain and its membranes were susceptible and capable of being imperilled by constitutional syphilis. The moral obligations of my profession as an instrument of public benefit, imposed on me the duty of publication of facts of such deep interest and value in connection with the advancement of correct pathological knowledge, in furtherance of this duty to put my opinions to the test of full inquiry, I offered my first series of cases in 1847 to the editor of the *Dublin Quarterly Journal of Medical Science*. He, however, refused the paper, and it lay with me until accident introduced me to Dr. Neligan, the next editor of the same journal, who asked me if I could give any contribution. I named the rejected paper, which he gladly accepted, and published in his forthcoming number (February 1852). By Dr. Neligan's desire I continued the subject, and gave him my second series of six additional cases in 1860.

The knowledge of the subject in 1867 had acquired such a full re-

cognition in England and on the Continent, that I considered it right to collect my series of papers and additional cases—in all twelve—and publish them in a volume (Messrs. Churchill, London, 1867).

Subsequently to 1847, Dr. Todd, when on a tour of relaxation in Ireland, paid a visit to me in Belfast. Incidentally I mentioned to him my recent researches on affections of the brain excited by syphilis. He engaged with great interest in the discussion. I discovered that he held opinions on the subject in perfect accordance with my own; he being the only medical man up to that period with whom I had ever conversed holding the same views.

In 1851, he delivered his remarkable lecture expounding his recognition of syphilitic disease affecting the nervous system. No doubt the connection of a name so justly distinguished in the advance of medical science, must have materially encouraged a spirit of inquiry in that direction.

In conclusion, the claim of priority or precedence bears no weight on my mind. The acceptance and reference by *modern writers** on syphilis of my cases, as faithful and instructive types of syphilitic disease dominating the nervous system, could alone be to me a justification for publishing this retrospect.

NOTES ON

THE QUARTERLY RETURN OF BIRTHS, DEATHS, AND MARRIAGES.

By EDWARD T. WILSON, M.B. OXON.,
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ON the 5th of May last, the Registrar-General yielding, as he admits, to pressure from without, issued a Quarterly Report, differing in many important particulars from those which preceded it; a Report calculated "to merit the attention and satisfy the liberal curiosity of the inhabitants of each place, who will see at once what is going on as regards those important events, births, deaths, and marriages; what diseases are rife, what diseases are fatal, how many children have been born in the past, and even" (the Registrar-General is not unmindful of the gossiping propensities of people) "how many of their neighbours have married in the previous three months." (Preface to Quarterly Report.)

In the Quarterly Returns with which we have hitherto been familiar, the numbers of births, deaths, and marriages, occurring in the registration districts of England, in 14 large towns, and in 46 large town districts, were given; whilst the only intimation of disease was the note appended by the local registrar to account for an exceptional death-rate, whether above or below the average.

The Report under consideration professes to give the same facts for no fewer than 2,196 sub-districts in England, for 17 large English towns, and 50 large town-districts, with the very important addition of the deaths in infancy (under one year) and old age (sixty years and upwards), from violence, and from eight of the most marked and most prevalent zymotic diseases; viz., small-pox, measles, scarlet fever, diphtheria (to include sloughing sore-throat—*vide Instructions to Registrars*), whooping-cough, fever, diarrhoea, and cholera. "It will be evident", the Registrar-General tells us, "on surveying the tables, that they give as comprehensive a view of the diseases plaguing the population dispersed over the soil of the kingdom, as a series of photographs could give of the clouds that sweep over its skies. It is true the returns of deaths can never furnish such immediate notice of the origins of epidemic diseases as returns of cases of disease; but it is not true that the information of the death-register is necessarily too late; it is too late as regards the individual, but it is not too late as regards the community, which can immediately adopt measures to quench the sparks before they involve it all in flames." Prompt information of the *locale*, type, and course of an invading epidemic is amongst the most urgent needs of preventive, as of curative medicine; and if the performance of the Registrar-General be equal to the promise, he will merit the warmest approbation, not only of the medical profession, but of sanitary authorities, and even individuals, through the length and breadth of England. I venture to think, however, that a close examination of this Report will go far to qualify any excessive satisfaction with the result, and that the simile of cloud-photographs is unfortunate as suggesting to anyone

* Dr. McDowell, *Dublin Hospital Gazette*, 1854; Dr. R. B. Todd, *Clinical Lectures*, second edition, 1856, page 405; Dr. Hughlings Jackson and Mr. Jonathan Hutchinson, *Medical Times and Gazette*, 1861 and 1862; M. Zanibucchi, Civrieux Prize, Imperial Academy of Medicine, Paris, 1862; Dr. Duncan *Dublin Quarterly Journal of Medical Science*, 1863; Dr. William Moore, *Ibid.*; Lancereaux, *Traité de la Syphilis*, New Sydenham Society, 2 vols., 1869; J. K. Barton, *Pathology and Treatment of Syphilis*, 1868.