

Clinical Studies *in* **NEUROLOGY**

By

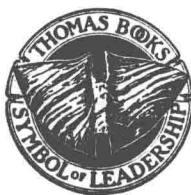
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CLINICAL STUDIES IN NEUROLOGY

*Oh that one would hear me! behold, my desire is, that
the Almighty would answer me, and that mine adversary
had written a book.*

—JOB, CHAPTER 31.

DEDICATION

To the eternal medical student, who, during his first close acquaintance with patients in hospital wards, acquires to himself, besides clinical instruction, every disease in the calendar.

He first has in his mind that he has tuberculosis of the lungs, in a hopeless stage. Endless cigarettes and a smoker's cough help out this conviction. Carcinoma of the stomach follows, as a result of late hours and copious draughts of cheap beer. But why does he have sarcoma of the jaw? "Elementary, my dear Watson. He is erupting his wisdom teeth!"

—PARAPHRASED FROM THE WORKS
OF SIR ARTHUR CONAN DOYLE.

FOREWORD

IT IS RIGHT and proper that a strong interest be cultivated in a student of medicine in his senior years. Less just and good is it that he be forced to swallow indigestible theory and dogma. The former principle he will remember forever after; the latter, at a later date, he will gleefully discard as the snake, wriggling with pleasure, gets rid of his own skin.

For fifteen years, I had taught postgraduate students at the Mayo Clinic. It was a labor of love since these young men are carefully selected as being of high intelligence and of a previous faultless career. They absorbed information with an unparalleled gusto, and could ask and answer questions in neurology that were controversial topics. They could go further and discuss modernities of which I was ignorant, much to my own embarrassment. Apart from that, it was in a pleasant and an easy milieu of teacher and student with advantages, I hope, to both.

In 1934, I was invited to take the chair of neurology at my parent university, Trinity College, Dublin. Also, I was elected to take the position of senior staff physician at the Richmond Hospital, one of the oldest and largest institutions in the Irish capital. My task there was to care for the indigent sick. More important was it that there was an active system in that hospital of the bedside teaching of undergraduate students.

The system in the Dublin hospitals, as far as teaching was concerned, was an eclectic one. The medical student paid his fees to the hospital he joined, but thereafter he could roam as he wished to other hospitals for bedside lectures, and, of course, to wherever he thought he got the best value. Ultimately, he served his internship in his own hospital, but even then he could go where he pleased for those morning classes which seemed the most attractive. There was no discrimination shown in the Richmond Hospital against these roving students; regardless of their school, hospital or anything else, we felt that these men honored

us by attending our classes. The bulk of the crowd present was an index of our educational appeal.

The hospital itself was a conglomerate pile of hardcut stone of over two hundred years agrowing. By the twentieth century, the surgeons grabbed the newer red brick buildings, more cheerful and more in keeping with the motto: "Cut well, sew well, and get well," and so it was that the humble physician-healers were allocated to the older part of the building. The wards therein were rat-ridden, cold, bleak and sinister. There were no carpets, window curtains or decorations of any kind. There was nothing to make dying a final act of happiness except in so far as members of the skull-capped, monk-robed Capuchin order, with sandals on their feet, who lived near by, could do the necessary facilitated exitus from this drear world to a hopefully better one in the next.

Clinical instruction for me was on a Tuesday morning, and, for some reason or another, the weather was usually damp, cold and forbidding. In phantasy, I likened myself to Charcot at the Salpêtrière with his "Leçons sur mardi." Alas, there was not forthcoming his histrionic ability, his genius for research, or his aptitude for correlating new facts. There was no audience such as he had, in the form of journalists, celebrities, demimondaines or even prostitutes. All I had in the beginning was a group of callow neophytes, trying to hide their dread of neurology and floundering in a spirit of complete frustration. In their white coats, with dumb, bleak, tallow-colored faces, I likened them in earlier years to a flock of sheep who had lost their bellwether.

It was a challenge, however, and from a corporal's guard of a few lost souls, who knew nowhere else to go, a change occurred within a scant few years. The dreary hospital wards on these Tuesday mornings soon became packed with a jostling, pushing, vibrant throng of youngsters, forcing their way to the bedside. The back rows stood on chairs and the rest figuratively hung from the light fixtures. Some, weary from misspent nights, sank on the torso of a patient nearby; some carried on a discussion at the back of the ward with loud voices. It was not good for teaching, but even with a lecture room, as was available, I could not

see submissive row-on-row listening to the anathemas of anathemas, as embodied in a formal lecture. We carried on the effort to teach.

The patients were carefully selected. Some we had as real property, inmates of the hospital. Some were abducted slyly from elsewhere, and some were simply and sordidly bribed with shining silver pieces of money. At any cost, a fresh case was shown to the class each week and they received it eagerly. A new and pure victim was sacrificed to the God of Knowledge! Each problem was a clear-cut example of classic disease involving the nervous system. Occasionally and when possible, follow-up studies of the same patient were made.

From early October to June, the students saw, felt, smelled and listened to patients representing many of the more common diseases of the nervous system and a few of the rare. It was thought better to gain a sound knowledge of a few basic problems rather than a scattering knowledge of everything leading to nothing. There was no possible attempt at systemization.

And so, coming to this book. There is herein recorded the notes of these morning talks as they were given. Needless to say, the clinical material had been well studied during earlier weeks, and the presentation had to be scientifically word-perfect, lest confusion fall on teacher and students alike. The talks as recorded here were simple, personal and practical. They are now presented in written form, with a hope that they may help future generations of medical students and newly fledged postgraduates. Recent advances in neurologic fields have been added. The book is nevertheless not one that contains all things for all men. Better writers than I have done that and successfully. An accusation may be made here of oversimplification. A truth, simple as it may be, is none the less complex. As Hughlings Jackson said: "Never forget that we may run the risk of being over-educated and yet under-cultivated."

Medical books, on the whole, are dull reading. To be precise is to lose a latitude of romantic expression. Illustrations, plain and colored, help a great deal but yet are prohibitively expensive. They can not show all the nuances of ever-changing disease of

the nervous system unless reproduced more times than the text can carry.

From time immemorial, the written sentence has been used to teach, to record observations and to illuminate in centuries-old manuscripts a passing impression, a long-forgotten feeling of someone who was faced with mortality and tried to reach beyond it. What matters the nature of his scribbles if he got all his facts in solemn array, as were pleasing to himself?

Here in this book is an echo of what went on in my wards during those twelve years. Students were taught to see, to hear, to feel and even, as young puppies, to rub their noses in the foul odor of disease. One can not altogether reproduce this with an inhibited pen and a frustratingly bleak, mocking, white, empty page of paper. It is a verity, however, that if a certain imagination is used by the writer, coupled with an appeal to the reader to stand by at all costs, the two—reader and writer—may get together for their personal and mutual satisfaction.

H. L. P.

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OCTOBER

