

nervous system, from the smallest termination of a nerve to a section comprising a cut of half of the brain. All these sections are beautifully stained, and many of them showing the course of the fibres in different parts of the brain connecting the convolutions, are displayed in the large work which he has just published on the "Anatomy of the Nervous Centres." Before passing to the wards it may be mentioned that Dr. Déjérine has about two thousand beds under his care, of which five hundred are devoted exclusively to nervous diseases, the remainder being occupied by other diseases or by the infirm. His nervous cases are furnished not only from the inmates of the Salpêtrière, but also from his external clinic, of which I will speak later. Naturally among such a number of nervous cases all varieties of disease are met with. Some study of these patients show one about sixty cases of aphasia alone. These comprise all forms of the disease, some who are unable to read, write, understand or utter a word, others who can speak a few words either by their own effort or by hearing some one who is present pronounce them, others again who though able to speak, use the words incorrectly, whilst there are others to whom the power of speech has entirely returned, and in whom aphasia would never be suspected were it not for the history. Among the various cases of *tabes dorsalis* one is struck by the number in which the progress of the disease has been arrested by blindness, the disease apparently concentrating its action on the optic nerves, rather than on the posterior columns of the cord, and leaving these latter more or less uninjured. The persistency of the lightning pains is an interesting feature of many of these cases.

There are also a number of cases of peripheral neuritis, some exhibiting the wasting, hyperæsthesia, loss of reflexes, etc., common to this disease, while others have more or less completely regained their former health. Several cases also of syringo-myelia, in which the change in sensation characteristic of this disease (retained tactile sensibility with loss of that to heat and cold) are clearly shown. An interesting case of tumor of the cerebellum in a girl aged twenty-four, which dates from two years, with characteristic gait, a tendency to fall backwards, always towards the right side, optic neuritis, lightning pain in legs, loss of tendon reflexes, with marked disturbance of

sensibility. There was a case of *astasia-abasia* in which the vertigo and peculiarity of walk is associated with loss of tendon reflexes. A case of amyotrophy, implicating the face, scapular region, and upper arm only, in a woman of twenty-five, and in which a fatty degeneration of some of the muscles had taken place, being an excellent example of this disease as first described by Landouzy and Déjérine a few years since. Several cases of multiple sclerosis, in one of which the disorder of movement was so great as to absolutely prevent the patient using her hands. Lack of space forbids my mentioning many other interesting cases which an acquaintance with these wards presents, such as myelitis in its various forms, chorea, hemiplegia, Basedow's disease, etc., all of which contribute largely to the literature of nervous diseases which Dr. Déjérine has recently brought before the profession. It is necessary, however, to speak of the out-patient department, which has so rapidly increased in size of late. It has now become a very important part of the work done in this hospital, Dr. Déjérine seeing from seventy to eighty patients on his consultation days. He also gives a course of instruction on nervous diseases during the session in this department, and this course is already attended both by foreigners and students almost as largely as that of the late Prof. Charcôt.

In conclusion, I may say that Dr. Déjérine is about forty-five years of age, and is by birth a Savoyard. He is Vice-President of the Biological Society of Paris, and by his genial manner and indomitable energy in his work he is rapidly attaining the position of the first neurologist in France to-day.

### Selected Articles.

#### AORTIC ANEURISMS. THEIR PRESENT STATUS WITH REGARD TO TREATMENT, MEDICAL AND SURGICAL.

I have been led to the consideration of this subject because toward the close of my recent service in the Long Island Hospital, there came into my wards a case of abdominal aneurism, either of the celiac axis or of the aorta itself, which had been subjected to medical treatment in the New York Hospital some months before, but without much benefit. The tumor seems to be just beneath the