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Criticism and News.

Communications solicited on all Medical and Scientific subjects, and also Reports of Cases occurring in practice. Address, DR. J. L. DAVISON, 12 Charles St., Toronto.

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ERICHSEN'S DISEASE.

An attempt is being made in certain American professional circles to give the above patronymic title to the disease, or better the group of symptoms, first described by Mr. Erichsen, and otherwise known as "Railway Spine." The motives in this attempt are two-fold, one set of its promoters conceiving that they are doing the eminent surgeon an honor, the other, apparently most of them heads of the Medical Departments of some of the great American Railway Corporations, from desire to injure him, wishing, as one of them puts it, "not only to fix the name more accurately, but because a large amount of obloquy attends the subject which Erichsen ought to bear. His book is said to have cost English railways fifty million dollars, and American railways as much more."

Signs are not wanting in various quarters of a tendency towards the isolation of a separate branch of the medical profession, the Railway Surgical Staff, as distinct from their brethren as the Army Staff of any country is from the body of practitioners in civil life. Railway surgeons of course are only human, even those high up in the service of wealthy corporations; so one need not be surprised at finding *ex parte* views taken of Mr. Erichsen's work, and unfair imputation of motives to the sufferers from the carelessness or ill-fortune of railway employees. In the *Journal of the American Medical Association*, Nov. 1, '90, a paper is published, entitled, "Legal Aspects of

Spinal Concussion," read before the American Medical Association at its annual meeting in May last, by Dr. Clevenger, of Chicago. In the discussion that followed, a Dr. Judd, of Galesburg, Ill., is reported as saying, that "after twenty-two years' active practice, he had seen no spinal concussion cases recover until after the damages were recovered, and then speedily, except such cases as had no suspicion of a suit for damages attaching to them." To the credit of the Association, his ungenerous imputation of motives did not go by unchallenged, though others joined him in attributing to Mr. Erichsen's work the growth of a large amount of malingering and humbug. A few words on the subject may be not without interest, though it can by no means be exhausted in a paper such as this.

In pp. 743-763, vol. 1 of Erichsen's 8th edition, the subject is dealt with, and the most cursory reader will be struck with the vast preponderance of subjective over objective symptoms, so that it has been said that the suit for damages turns mainly upon the credibility of the plaintiff. Careful examination will show that objective symptoms of great value are also urged: loss of electrical irritability, paralysis, epilepsy, insanity even, and obscure neuroses which, though really diseases, may count as symptoms of the reality of the lesion, and can be shown to be distinctly pathological.

A short discussion of Shock in general will pave the way to a better understanding of the question. The symptoms of Collapse are too well known to need repetition at length: the pinched and changed expression, paleness and clammy sweat, sighing, irregular and shallow respiration, muscular relaxation; lustreless, half-open, unmoving eyes, with wide-open pupils and dark rings beneath them; blunted sensibility, both special and cutaneous, with no loss of rationality if only the sensorium be strongly enough appealed to; the small, slow, irregular, almost imperceptible pulse, and marked diminution of temperature; these are some of the chief. They indicate absolute loss of control, for a longer or shorter period, of the vascular system by the vaso-motor nerves, so that the patient is "bleeding into his own veins"; and by anæmia and nervous jar all the organs are rendered, for the time being, incapable of performing their functions. A workable theory