

interested in the progressive history of medicine, I turn to my final semesters which I passed at Bonn.

Friedrich Nasse was more than a kind, humane, and pious physician and teacher; he was one of the few—indeed, the first—German clinician who introduced the findings of Laennec and Skoda into German medical instruction. You see how fortunate I was. Born in 1778, he could never, it is true, divest himself entirely of the influence of Schelling's so-called "nature-philosophy" and of Messmer's animal magnetism. Indeed, in 1850, while I worked in his clinic, he wanted me to go to Holland to magnetize a hysterical young lady. She had to get along, however, without my ministrations. For many years he had been intimately connected with Ennemoser, who explained the relations of Adam and Eve to be founded on animal magnetism, and taught the method of magnetizing the trees in the field and the child within the maternal womb. As I have mentioned, the first forty years of the eighteenth century were the period of the greatest humiliation of German medicine. Most of its literature was steeped in gross obscurantism and its teaching and language were mostly unintelligible. In spite of all this, Nasse, who was first a practitioner in a small city before in 1818 he became professor in Bonn, recommended the use of the thermometer in scarlet fever as early as 1811,—it was introduced and popularized by Wunderlich half a century later—published experiments on the processes of elimination in connection with the changes of the blood caused by respiration, in 1816, and on combustion and respiration in 1846, on regeneration of nerves and occasional restitution of their functions in 1839, and many essays on the physical causes of mental diseases.

To us he was a paramount blessing in this way: Until the middle of the nineteenth century the diagnoses were mostly symptomatic. For instance, it was generally claimed that "gastricismus"—perhaps you would call it dyspepsia now—would change into gastric fever, endo-, peri-, and myo-carditis were simply carditis; and, cyanosis, fever, dropsy, jaundice, diarrhœa, apoplexy, and paralysis were recognized as full-fledged and scientific diagnoses. Indeed, we have not altogether worked away from this self-satisfied indefiniteness; for our successors will have to correct us for still making the diagnoses of rheumatism, of myasthenia, of neurasthenia, and of epilepsy, and for coupling with the names of writers a disease or a complex of symptoms,—from Friedreich or Addison, Basedow or Graves, even to Banti — and for believing that we have thus furnished the quintessence of sound and scientific diagnoses.