

Special Correspondence.

DUBLIN.

[FROM OUR OWN CORRESPONDENT.]

To those who appreciate and respect the British Medical Association, it is no small gratification in these times, so prolific of medical publications, to behold the JOURNAL, reputed and acknowledged as the exponent of the views of that honourable society, assume, as it deserves, the front rank in the professional literature of the day. With the experience of its improvement since the commencement of the present year, we consider it needless to vaunt our hopes in its future or to enter into any detailed recognition of its novel merits. Among many recent enhancements of its value probably there is none more important than the introduction of a "Special Correspondence." Thus the JOURNAL becomes a cosmopolite, and wisely avails itself of means whereby the representatives of the profession in places near and distant may become intimately acquainted; the philosophy of its advancement as well as the obstacles thereto fully understood; its interests common; its members united; its science and benefits diffused; and its prospects matured and forwarded. However brilliant or comparatively obscure each individual School may know itself to be; whether in Paris, London, Vienna, Dublin, Berlin, or elsewhere, it becomes united in spirit, through this system of "Special Correspondence," with its fellow-labourers in the field of knowledge, and thus gains strength and emulation from the works of others. The encouragement which this feeling brings, induces us, on the present occasion, to offer a sketch of the medical world in Dublin.

Taking into consideration the size and population of Dublin we find its medical institutions beyond expectation ample and numerous; bearing proportion to the notoriously large class of students of medicine by which the city is frequented. The average number constituting this class varies from five to seven hundred, and this year even exceeds the latter number.

Four Licensing Bodies are to be found in Dublin; namely:—

The University;
The King and Queen's College of Physicians;
The Royal College of Surgeons of Ireland; and
The Apothecaries' Hall.

Detailed accounts of each of these institutions from their origin to the present time, however interesting as a matter of local history, shall form no portion of the present communication; but we shall endeavour to point out briefly the position occupied by each at present.

Naturally the University holds the first place amongst the bodies empowered to qualify in medicine and surgery. The highest ambition of the Irish physician is to hold the degree of M.D. T.C.D. A qualification not commonly essayed, because necessitating tedious, laborious, and expensive curricula both in arts and professional studies. Latterly, the degree "Magister Chirurgiæ", conferred by the same university, has come into request,

and has been demonstrated beyond cavil to be legal and sufficient for the majority of ends.

The King and Queen's College of Physicians enjoys a just and time-honoured reputation. At all periods its licence has been much sought after, but latterly especially so; because the moderate course of study demanded renders it accessible to the vast majority of those who, unable from deficient preliminary education or leisure to attain the university degree, nevertheless require the great desideratum of modern days—a purely medical qualification in addition to the ordinary surgical diploma. Unfortunately, however, the Fellow or Licentiate of the College of Physicians cannot, as such, style himself "M.D.;" although not long since a contrary opinion was formally received from a high legal authority and promulgated. It is needless to re-open here the discussion of this point. In one word, the right to confer the title of "M.D." is restricted to the University; and we must add, in our opinion, both justly and naturally. It is but fair that those who have laboured for the higher qualification should be distinguished from those who have not done so; and to the *Alma Mater* alone should belong the gift of the Doctorship in medicine.

The Royal College of Surgeons in Ireland enjoys a popularity quite unrivalled in this country, and one which is likely to increase, now that party feuds (of which we shall later say a few words, but in as few as possible) have satisfactorily come to an end.

The Society of Apothecaries occupies a most respectable position; yet its qualifications must be looked upon as merely *subsidiary* for those persons who are destined to engage in the full practice of the profession. Its licence is not recognised as sufficient *alone* for the army, navy, or other public services.

Speaking of these several institutions it is scarcely necessary to remind anyone who has visited Dublin of the situation and beauty of the buildings which are devoted to the medical department in the University. The recently finished side of the new quadrangle in Trinity College—one of the most exquisite specimens of Byzantine architecture in existence—is largely devoted to the medical lectures, examinations, etc. The Royal College of Surgeons of Ireland can also, it is well known, boast a handsome and suitable Hall; but, the question may be asked, where is the College of Physicians?

Hitherto, and for years past, its meetings have been held and its business transacted in a few rooms in Sir Patrick Dun's Hospital. Such indifferent accommodation and the unsuitability of the building, which moreover is quite on the outskirts of the city, had long and often stimulated the members of the college to exert themselves for the remedy of so great an evil; yet the insufficiency of funds cramped their movements; and it is only within the last year that a device was suggested whereby to raise money for this desirable purpose. The device consisted simply in the issue of debentures to the Fellows and Licentiates, bearing a fair interest guaranteed from the income of the college. Five thousand pounds were thus raised in a few weeks; and the house recently occupied by the Kildare Street Club was purchased. Not many days after the transaction, the club house was burned to the ground. However, were it not for the

calamitous loss of life on that occasion, the College of Physicians might rejoice at the accident, inasmuch as the insurance has considerably exceeded the sum paid for the building, and enabled the executive authorities to erect one in exact conformity with the tastes and wants of those interested.

I shall not make the present communication a very lengthy one, because being *preliminary* it necessarily contains rather heavy details of the existence, locality, etc., of the various medical colleges of Dublin. Nevertheless it will be found useful, paving the way to a comprehension of their relative positions, and the working of the profession in this city. Ere long we shall resume our "special correspondence" with your JOURNAL.

Progress of Medical Science.

APOPLECTIFORM CEREBRAL CONGESTION. The subject of "*la congestion cérébrale apoplectiforme*" is at present attracting great attention among our professional brethren in Paris. A memoir bearing this title, which was read before the French Academy by M. Trousseau, on the 15th of last January, has elicited a lengthened and most interesting discussion. A man, says M. Trousseau, without any premonitory symptoms, suddenly falls down in what appears to be an apoplectic fit; he is taken up in a state of stupor; and, for a quarter of an hour, an hour, or even longer, his intelligence is confused and his gait uncertain. The following day, he is quite well. Or again, another man, while walking, is seized all at once with giddiness; he loses his sight, and ceases speaking, or mutters a few unintelligible words; he staggers, and sometimes falls down, getting up again immediately. This state lasts for a few seconds; it may be followed by a feeling of slight oppression in the head, and sometimes by a very brief confusion of the intellect; but three or four minutes suffice for complete restoration to health. In both of the conditions just described, it has been and still is the custom in France to say, that the patient has had an attack of "*congestion cérébrale apoplectiforme*". M. Trousseau formerly adhered to the common belief; but his experience during the last fifteen years has been gradually leading him to the conclusion, which it is the object of his present memoir to develop, viz., that in the great majority of cases just indicated, there is no cerebral congestion at all, but that the phenomena are of an epileptic nature, or even allied to syncope. According to M. Trousseau, epileptic vertigo, and giddiness resulting from derangements of the stomach and diseases of the ears, have too frequently been thought to proceed from cerebral congestion; and hence the bleedings and other depleting measures, which in France are still resorted to in such cases, are not only useless, but positively injurious.

Strange to say, M. Trousseau's opinions were most strenuously opposed by almost every speaker at the French Academy, including Messrs. Bouillaud, Bailarger, Beau, Durand-Fardel, etc.; all of whom maintained that cerebral congestion is of much more common occurrence than is urged by M. Trousseau, and that this condition really does exist in the cases under discussion.

On the other hand, M. Herpin of Geneva writes to the editor of *L'Union Médicale* that the opinions enunciated by M. Trousseau as apparently novel are identical with those to which he himself had arrived in the year 1840, and which had been published by him in 1852, in a work entitled *Du Pronostic et du Traitement curatif de l'Épilepsie*.

This discussion is not a little amusing to us in England, where, thanks to the labours and writings of Dr. Hughes Bennett, Dr. Todd, and others, the opinions advocated by Messrs. Trousseau and Herpin have long been regarded as established facts by all the more enlightened members of our profession. (*L'Union Médicale*, Jan. 17, 22, 31; and Feb. 7.)

HYPERTROPHY OF THE LIVER. That the liver may be greatly increased in size, as a consequence of various diseases of its tissue, or of the development of morbid growths, etc., is a fact of every-day observation, and universally acknowledged. Professor Frerichs, however, has called attention to a form of true hypertrophy of the organ which is much less generally known, and which we do not recollect to have been alluded to in works on pathology. This hypertrophy consists in an enlargement of the liver, accompanied by an increased size of each individual lobule, and a simple increase in the size and number of the secreting cells.

In a normal liver, we can discover comparatively few indications of the cell-development which is constantly going on; but, in the form of hypertrophy alluded to, appearances are noticed, which unquestionably point to an increased growth and rapid new formation of the elementary glandular structures. Cells are observed, which attain to twice or three times their normal size, and almost all of which contain two or three large sharply defined nuclei, each of which is provided with one or several nucleoli. These cells are easily separable from one another, and have an irregularly angular form; their contents are more or less granular, and occasionally include isolated oil-globules or pigment-granules. In other cases, there are seen small rounded pale cells, firmly adherent to one another, with a large nucleus and slightly opaque cell-contents; they are mixed up with numerous free round and oval granular nuclei. These young cells and nuclei may constitute the greater portion of the hepatic tissue, or they may coexist with a greater or less number of the larger cells first described. When the large cells predominate, the lobules stand out prominently from a cut surface, and are much enlarged; but when the small cells are most numerous, the lobules are rather indistinct, and the cut surface of the organ usually presents a uniform reddish-brown colour. In both cases, the volume of the gland is increased, it may be, to twice or three times its normal size.

The circumstances under which this form of hypertrophy has been observed are the following:—

1. In cases where one portion of the gland is destroyed in consequence of previous disease. Here the hypertrophy would seem to be of a complementary nature.

2. In diabetes mellitus, it is of frequent, although by no means of universal occurrence. For the interesting remarks made under this head, we must refer our readers to the translation of the second volume of Professor Frerichs' work, which will shortly be published by the New Sydenham Society.

3. It has been observed in a considerable number of cases of leukæmia attended by enlargement of the spleen.

The same condition of the liver has been noticed under many other circumstances which have not yet been sufficiently investigated. *Post mortem* examinations are still wanting, before we can decide whether the enlargement of the liver, which has been observed to result from long residence in warm climates, is or is not an example of true hypertrophy. (Frerichs, *Klinik der Leberkrankheiten*, vol. ii.)

CALCIFICATION OF THE CEREBELLUM. Professor Poelman of Ghent has lately recorded an instance where the cerebellum of a dog was found almost completely converted into calcareous matter. The case was of no