REMINISCENCES OF A FOUR MONTHS' STAY WITH PROFESSOR A. VON GRAEFE IN BERLIN.

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The Russian Government, about to establish universities in several of the largest cities of the empire, Odessa among the number, where there is first to be a medical faculty only, intends at this latter place to erect a general hospital on a truly Russian scale, as there are no fewer than three hundred of its beds to be assigned to patients affected with eye-disease only. The Italian Government, again, proposes, it is said, to place Dr. Sperino at the head of an ophthalmic hospital to be established at Milan, which is to afford accommodation to three hundred patients. As yet, however, there does not, to our knowledge, exist any ophthalmic institution equal in extent to that of Professor von Graefe in Berlin. If mere dimensions were of any essential importance, we might add that the latter has recently possessed himself of very extensive property directly adjoining his present establishment, which is thus expected, at no distant day, to assume greatly enlarged proportions. Besides, whatever quantitative attempts in this direction the next future may realise, will all have to be traced to the example set and the impulse given by Von Graefe, whose advent in conjunction with Helmholtz, Donders, and Bowman, will ever mark an epoch in the ophthalmic province of medicine.

The uniqueness of Von Graefe's establishment does not, however, consist in the extent of it, but in these facts; that it is an entirely private undertaking, even at present all but unaided from without; that he, the master, reigns absolute in its precincts, to which, moreover, whilst at Berlin, he almost entirely restricts his out-door practice; that he never delegates any of his duties, excepting the merest routine—not disdaining to do himself thousands of times over that which lesser minds would scorn as derogatory; and, especially, that the distinction between private and public practice is here in a great measure sunk, so that patients of both sexes are seen from every quarter of the globe and of all classes of society. To other features, in our opinion no less distinctive, we shall further on find opportunities of calling attention.

As regards numbers, when we state that, from an average of the last five or six years, about six thousand patients annually are entered as seen, during the nine months of his stay at Berlin, by Professor von Graefe, both in private and public practice (for all are entered day by day promiscuously in his journal), the figure will, perhaps, at first surprise by its smallness; but, in explanation, we will restrict ourselves to mentioning the fact that there are at present almost all over Germany medical men to be found fairly conversant with eye-disease, not merely in the large centres and in the university towns, but in many smaller places, who have attended the schools of Von Graefe, and, with a knowledge as well known, are now dispersed all over the world.

Professor von Graefe's "Eye-Clinique" is situated in the Karlstrasse, at the north-western extremity of the city of Berlin, close to the river Spree, just where this leaves, after having traversed the town, in close proximity to the vast park, called the "Tiergarten", as it was the larges of Berlin, and at a very small distance from the "Charité", the largest hospital and clinical school of the kingdom, amongst the teachers of which Vichow, Frerichs, and Traube are at present the foremost. Although the clinical teaching of ophthalmology at the Charité is entrusted to Professor Jüngelin, who, well esteemed in years, combines this post with that of clinical professor of surgery, a small division, comprising some forty beds, has for some years been placed under the direction of Professor von Graefe. His patients here, all of the poorer class, and left to the immediate care of a military medical officer with his subordinate assistants, are mostly such as are affected with chronic inflammatory eye-disease, and whose cases but seldom call for the performance of a capital operation.

The edifice of Von Graefe's Eye-Clinique is a corner house, in the main three-storied; but a small portion of the back façade, going by the name of the "Small House", consists of two stories only. The block, as it appears at present, is a combination of three houses, none of which was originally planned for the purposes of a hospital; and, as there has never been a thorough reconstruction, the interior is of almost bewildering intricacy. In most parts of the building, the sick-rooms are opposite each other, divided by a narrow passage, and looking into the street or into the yard respectively. The rooms are heated, each separately, by means of the customary German stove, constructed of glazed tiles, and standing in a corner of the room. The stairs, passages, and some of the dwelling-rooms, are lighted with gas; in the sick-rooms, candles are used. There is no artificial system of ventilation; but the building is provided with pipe-water and with water-closets in all its stories. These latter are far from being cabinets inodosores, owing chiefly to an overwhelming stench of tobacco—a nuisance the toleration of which is the more surprising, as persons of both sexes are compelled to resort to these abominable places. There are no private rooms for sick persons. The whole of the house is divided into four stories, the upper two of which are without windows, and the lower two have only two windows each, and even these are without double panes and weather-boards—the latter made of strong linen twill, and moving between the two windows. Every door is edged throughout with list of woolen cloth. The curtains, the inner blinds, and the bed-screens are all of the same, and made of fine and self-dyeing candle-cotton, of green silk. On the ground-floor there are no more than four or five sick-rooms for private patients; there is, besides, the diphtheritic ward, consisting of a few small rooms. The remainder is occupied by the clinical department on the one side; the porter's room, the inspector's dwelling-rooms, and the patients' assembly-rooms, on the other. The kitchen, presided over by a male cook, is under-ground, where also some of the male servants are accommodated.

The Clinique affords accommodation for upwards of one hundred patients. Pretty nearly half of the beds are assigned to what are called hospital patients; the other half to private patients. The rate of payment, together with the character of the accommodation, forms the distinction between these two classes of patients. The patients of the hospital proper are charged at the rate of £1.17:6 per month, for all in all. There are, however, about fifteen beds for such patients as are unable to pay, granted gratis at the expense of the benefactors. The expense; and a considerable number of hospital patients, again, are admitted at half the usual
having whom is the patient's Clique before, stay or return to become nurses. There are now two young and very efficient ones, wearing each an artificial eye, in place of the one enucleated at the Clinique.

The nurses, their training over, are expected to be, and generally are, most prompt, clean, and handy, in the management of dressings, applications, thermometrical measurements (to which great attention is here paid), and the like. They have to provide, and seem to know well how to procure from the patients or the friends of the latter, the whole of the old linen and the charge required in their respective departments. They do not work as to be the constant attendance of several patients; it is a matter of substantial bounty on the part of their patients. The discipline throughout the establishment, with its staff of from thirty to forty officials and servants, leaves, on the whole, nothing to be wished for. With little or no noise, the word of command finds its way in every direction, and everywhere meets with ready obedience. Although the utmost stretch of severity of which the gentle disposition of the master admits, is a momentary semblance of harshness, yet the faintest intimation of his approach, a mere whisper of his voice, never fails to secure the slightest attendance.

There also resides in the establishment a young lady, versed in languages, who had before been a patient herself, and whose office consists, apart from presiding at table, in attending to the casual wants in the way of correspondence, conversation, reading, etc., of the more or less helpless among the private patients.

The meals of the establishment are as follows: breakfast at eight, dinner at two, coffee at four, and supper at seven o'clock. The house door is locked at 10.20 p.m. The meals generally—are we now speaking of the private portion of the establishment?—are very varied. Every day brings different matter, except the coffee, which is distinguished by its weakness. The dinner is as substantial as persons enjoying perfect health are accustomed to partake of abroad. The ordinary beverage is water, and this of tolerable quality. A glass of beer or a bottle of light wine may be ordered and had, but they are, on the whole, but little in request. An exception in fact from the rule is apparently but seldom thought necessary, and perhaps almost exclusively for persons who have had some trying operation recently performed upon them.

The dinner for those who are permitted or choose to have it out of their rooms, is served in the dining-saloon, which accommodates about forty persons. The attendance here is most efficient. The company of ladies and gentlemen, of course greatly varying in age, comprising natives of every clime, often the illness of these and the general health of the others, persons very gravely affected, is frequently most interesting; and parties of a moderately genial disposition are sure to carry away with them many a cherished contribution to the pleasures of memory. The dining-room possessing the luxury of a piano, music and singing often afford a grateful entertainment to the company after dinner. Those who are
compelled or prefer to take their dinner in their own room receive it there punctually; but, to their disadvantage, the whole of it at one time, and, what is more, to convey it to all, a small boat being stationed in a convenient position. The patient is then equipped with a slip of paper containing his name, address, and the time of his visit, and is directed to proceed to the reception-room after his dinner.

The inspection of the patient begins at about twelve o'clock, and the patients are distributed among themselves in the three ante-rooms, which are in an irregular curve skirted by the reception-room. The latter, which occupies the corner of the ground floor, is about twenty-six feet by fourteen, with three windows on its long and two on its short side, and has three doors, one of which is used by visitors and students, and the other for the patients to enter from the ante-rooms, and a third (a sliding door) giving access to the ophthalmoscopic room, which is fitted with all the requisites for two persons to be examined at the same time. There are besides a spacious chamber for the accommodation of the assistants, a pathological lab, and a cabinet for the preparation and keeping of the instruments, as well as for the storage of the medical and surgical remedies, and the glasswork used in the examinations.

The reception-room is in general kept constantly open for the convenience of the patients, and is fitted with a slip of paper on which is the result of the examination—i.e., in many instances, the diagnosis thus made out—which is of great assistance in ophthalmoscopic cases mostly verified by Von Graefe either immediately or at a later moment. From this it appears that in many cases the diagnosis is confirmed and again presented on their return, a paper with the diagnosis, the state of vision, the remedy applied, etc., marked upon it. Regular prescription-sheets left in the hands of the patients are produced in the shape of a printed case-book, which contains an index of the case-book that secures expedition in reference. While they attend, hardly any application is made but by his own hands; cauterizations, incisions and probing of the lacrimal passages, the application of a drop of oil, etc., are all sufficiently weighty tricks not to be lightly entrusted to others. Homogeneous cases are by the attendant caused to appear seriatim in close succession, such as patients requiring their lacrimal passages to be probed; a dozen of them will come forward presenting their probes, one or two, as the case may be, previously handed to them by the attendant. It is a curious spectacle to see a number of persons seated in a row, each with two long, shining, tapering objects, stiffly projecting at his forehead like a couple of horns or antlers. We were struck by Von Graefe's dexterous dispatch in the performance of Weber's operation and the introduction of his probes. Readiness is with him the chief peculiarity, and he is not inferior to his patients, with rare exceptions, have their senses about them when questioned. Verbosity on their
part is sure to be shortlived; nervousness becomes
plucked where the minutes are so precious; the
infant to be operated upon appears at the desired
moment with its body firmly secured to the pillow
by many wads of a roller; every dressing is
unfallingly presented when the hand but
moves to seize it; the patient under chloroform,
independent of rank, somehow contrives speedily
to shake off the trammels of the soporic so have
his muscular capacities tested after tetanomy. The
bleeding from the diphtheritic larynx appertains
to the close of the attendance. A number of them
always in-patients, brought down by their respective
nurses. The junior assistant, so long engaged in
writing, now steps forward to assist in the tedious
manipulations which the cases of these little suf-
ferers necessitate, who, with their heads fixed between
Von Graefe’s knees, are the objects of his most scrup-
ulous and laborious care. His vigilance in the
warding off all danger of infection either to his own
or others’ eyes by the utmost punctiliousness in ab-
lation cannot be surpassed. No case of purulent or
trachomatous disease is ever touched by him without
resorts—ever wash throughly and then wash his
hands with soap and water, whilst in particularly suspicious
cases chlorine solution is superadded for the purpose.
It is no exaggeration to say, that we have seen him
clean his hands in this manner upwards of twenty
times in less than two hours of attendance. Appar-
tently, most sorrowful experience has made him thus
keenly alive to the necessity of caution. One of his
assistants has had one of his eyes all but mutilated
by diphtheritic infection. In certain cases where
the risk may be apprehended of the discharge squirting
into the surgeon’s face, Von Graefe even
protects his eyes with a pair of plane glasses.
Patients whose cases are likely to be of interest to
one or another of the celebrities of the profession, or
to be benefited by their attention and treatment, are
frequently directed to their respective addresses—
thus, e.g., grave cases of malignant disease to Von
Langenbeek; neuro-pathological cases to Romberg
or Griesinger; cases by their inherent difficulties of
physical exploration curtailing the touch of a master
to Traube; again, cases of nervous disease, e.g., exoph-
thalmic goitre, for electric treatment to Remak, etc.

The remedial agencies in which trust is here placed
are few in number. Internal remedies, as we have
sawable in request; for specific purposes mercurial
and the iodide of potassium—the latter
is more frequently used in combination with iodide of mercury*—are appreciated. The preferred method for mercurialis-
tion is injection. Of late, the Turkish bath has
become a favourite resource, apparently for altera-
tive purposes generally. Aperients do not seem often
to be thought necessary. For the ordination of quinine there is much less occasion than we find in
this country. (Altogether, the out-patients, as re-
gards appearance and intelligence, are of a different
cast; as the national wealth of Prussia is yet far
from the standard of England, so her national
misery, if it ever should come to rival, has not yet
attained to British dimensions.) A combination of
camphor and carbonate of ammonia is occasionally,
at the Clinique, ordered for the same purposes for
which here the more expensive quinine is prescribed.
Bluestones are but sparingly made use of, and issues all
but ignored.

General deprr. General depression of recent introduction, are the
inversion of calomel, the application of liquor chlorid
and especially that of Pagenstecher’s ammoniacal oxide
in mercury ointment—all these in fascicular or phyle-
terian kerato-conjunctival affections; the latter ex-
cess by the eye, particularly in their after a few minutes), also in subconjunc-
tival (circumcorneal) inflammation. The tincture of

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* Iodide of potassium 3; iodide of mercury gr. vj; water 3ij. A

* teaspoonful to be taken in the morning.
opium is considered by Von Graefe as a specific in the dry form of conjunctivitis. Amongst the derivatives might still have been mentioned the frequent application, but lightly made, of the mitigated lapis or the concentrated lead vinegar (solution of basic acetate of lead) to the cutaneous surface of the upper lid; but, above all, the almost stereotyped use, in acute inflammation attended with more or less intolerance of light, for inunction to the forehead, of Arlt's salve, containing the extract of belladonna and the white precipitate of mercury in varying doses (in most cases respectively one and two parts to twelve). In the administration of this ointment, it is not the specific action of the ingredients which is sought; the remedy appears, in the main, to be intended as a sedative and counterirritant, and is usually directed to be applied in tolerably large quantity from six to eight times a day. The practice of ordering bulky lotions does not prevail at the Clinic; the most frequent prescription is that of two drachms of the acetum plumbi, of which a few drops mixed with a few ounces of water furnish a lead lotion to the patient which he may thus frequently renew for himself. Of very general extemporaneous employment are the elegantly prepared glycerine and starch ointments (Simon's), with their admixtures of sulphate of strychnia or acetate of lead or nitrate of silver. Tar is another local application ever at hand for cases of xanthenomatous lid-affection.

We conclude this survey of the pharmacological armoury with a reference to some of the principal instruments of treatment relied upon by Von Graefe. Sustained pain after operation is invariably met by the injection of carbonic acid; ice compresses are the chief remedy opposed to the diathermic process during its yet unbroken severity, and are likewise resorted to when cutaneous inflammation rises to an excessive height. But the great adjuvant in the subjugation of danger, or in the conquest of a partial effect at least, is the systematic use of compression, in many instances alternating, with warm camomile fomentations, of a temperature regulated in accordance with the requirements of the cases. It is this latter method of proceeding matured to its present perfection by the thoughtful and assiduous study of many years, and ever and anon, in the individual cases, practised with unsparing vigour. This is the method which our opinion constitutes one of those patent secrets of success attending the practice of a master of the healing art.

If, by way of transition to the chapter of operations proper, I shortly refer to those multiform manipulations which in a sense belong to the province of what is called minor surgery, as they are mostly performed in a more off-hand way—such as the opening of abscesses under the conjunctiva after the ponder's method, or the abscission of prolapsed iris—it is because Von Graefe's systematic dealing with the last-named morbid occurrence has appeared to me so pre-eminently instructive. In those frequent instances of ulcerative perforation of the cornea, whether of diathermic or blemorrhagic origin, the luxuriating primary ulcers, with their admixtures of sulphuric acid, being again removed with scissors, until, in progress of time and by dint of cauterisation of the mucous membrane, the exuberant tendency of the morbid process, if not an invariably destructive one, is effectually subdued. It is once more our impression that diligence and devotion thus succeed in rescuing many cases of unexampled peril; but again the least gain is a more speedy termination of the process.

[To be continued.]