Seller II. (W. O. to one of his house physicians)

Mortine Mrs. Jones. Sept 1890 XIX \$303
Bern, May 21, 1890.

discussed Monday. Amoutation of the leg was then performed, as the disease

Dear T.: Traylog far for resection. We could not but feel, however, that it

Within an hour after reaching Basel we were in the Vesalianum, as the anatomical institute is called, looking for the skeleton which Vesalius presented to the university when he was here in 1542-'43 supervising the printing of his great work. Historically this is probably the most interesting museum specimen in existence, and to Professor Roth is due the credit of determining accurately the fact of its association with Vesalius. Several years ago he sent me his paper on the subject, an abstract of which you will find in the Medical News for 1887 (or 1888), in an editorial note. The plates of his work were drawn from this skeleton, which is treasured by the Basel faculty as a most precious relic. Above the glass case in which it is contained is the inscription: "Mannliches Skelet das der Meister der Anatomie Andreas Vesal, aus Brüssel, der hiesigen Universität schenkte als er 1543 sich in Basel aufhielt um der Druck seines grossen anatomischen Werkes zu besorgen." Well may he be called the Master of Anatomy, the great Reformer in Medicine, for his work loosened the chains of tradition in which the profession had been fast bound for centuries. His was a bold and venturesome spirit which could dare dispute the statements of Galen and Hippocrates, dogmas revered by the physicians of the sixteenth century as are today those of Calvin and of Luther by certain theologians. Professor Roth has recently published an interesting paper (Quellen einer Vesalbiographie, Basel, 1889), in which he has given the results of his researches among the archives of the University of Padua, and he has determined definitely for the first time the date and place of the graduation of Vesalius - Padua, December 5, 1537. Please note, too, that he was a young man when he published his great work, another illustration of the theory which I am always harping, that a man's productive years are in the third and fourth decades. Point I mentioned in my letter to L. I have not the

It is not a little remarkable that the skeleton should be in such a state of preservation; but above it lies another, prepared by Felix Plater, a renowned Basel Professor of the sixteenth century, also in excellent condition.

The Basel Hospital is an old building but very conveniently arranged and with beautiful gardens, in the middle of which is a large summer ward for women and children. I am much indebted to Director Hoch for his kindness in showing me the different departments. In the operating room the table is constructed of zine with a hot-water chamber, above which is a perforated plate so that irrigation can be carried out. The warming-pan - of which it is practically only a special example - is also perforated in the middle for the escape of the solutions. I am sure that for prolonged operations this is a great advantage in counteracting the depression so liable to occur both from the shock and from the anaesthetic. Not ten days ago I saw the same arrangement in use at the Physiological Laboratory of University College, London, in a prolonged experiment upon the brain of a monkey. Professor Schäfertold me that they had found the animals stood the operations very much better and revived more promptly if the body temperature was kept up in the artificial way. So important did he seem to think it that additional hot water was put in at the end of about an hour and a half.

We found Professor Socin in the operating-room with a class of about thirty men, a patient on the table, and a senior student in the arena, who, during the course of an hour, underwent a most searching examination on tuberculosis of joints and on the particular case before them. It was certainly a most instructive method of procedure, and it was fortunate the poor patient was deaf, as the questions of prognosis and of treatment were

discussed thoroughly. Amputation of the leg was then performed, as the disease had progressed too far for resection. We could not but feel, however, that it was hard to keep the poor man waiting on the table. Certainly the ward would have been the more appropriate place for the instruction. The Basel students have an exceptionally clear and decisive teacher of surgery; here again the colored chalks on the blackboard were used at least half a dozen times to illustrate special features of the disease and steps of the operation.

Professor Immermann has charge of the medical clinic, and has a conveniently arranged, though not large, clinical laboratory. The lecture-room is attached to the medical wards, and we heard for half an hour a very practical talk on the treatment of acute Bright's disease. A point specially insisted upon in the later stages was the flushing of the tubes by a plentiful supply of liquids. Then the class was taken into one of the men's medical wards, and a student examined a case of typhlitis, upon which the comments of Professor Immermann were very interesting. The young man had been seized five days before with pain in the right iliac region, not of an agoninizing character. and moderate fever, so that he had to give up work. He had not been particularly constipated prior to the onset of the pain, but he had had, several years ago, a somewhat similar attack. The examination showed simply pain on deep pressure in the right iliac fossa, no tumor, no signs of peritonitis. The case was regarded as one of appendicitis, and, as the symptoms had progressively improved, the treatment was confined to the administration of opium and the use of local applications. Great stress was laid on the absence of tumor as a differential point in the diagnosis of appendicitis and typhlitis from faecal impaction. I gathered that Professor Immerman believed in the existence of a typhlitis apart from appendix disease; and the tumor, which is more apt to be present in these cases, may be due either to primary impaction or to faecal stasis in the caecum in consequence of the inflammation. Now, this was a case which illustrated the point I mentioned in my letter to L. I have not the slightest doubt that, if a laparotomy had been performed, an inflamed and adherent, possibly a perforated, appendix would have been found, yet the lad was recovering under ordinary measures. Still, the risks are very great, balancing those of an operation even at this early stage, as perforation into the general peritonaeum is always imminent, and then there is the liability to recurrence, as shown, indeed, in this case.

In the Vesalianum one of the Privat Docenten, von Lenhossék, showed us the method of preserving subjects, which is that of Laskowski, of Geneva. An injection of glycerin with carbolic acid, with a little alcohol, is first made, and then the ordinary Teichmann's mass, consisting of putty and bisulphide of carbon, with a suitable coloring ingredient. A preliminary washing out of the blood-vessels is advisable. In Geneva the subjects are wrapped in sheets, which are sprinkled with water, and Ramsay Wright tells me that the bodies were in an excellent state of preservation. Von Lenhossék said that they found it necessary to use alcohol in the tanks. The muscles are certainly very well kept by this method, and the dissection is said to be easier than in bodies preserved with the bichloride or mercury.

In the pathological laboratory Professor Roth showed us a recent specimen of enormous epithelioma which had developed in an old leg ulcer, the result of a fracture many years before. The tumor had involved the bone and the leg had to be amputated. Under his direction, Dr. Dubler, the assistant, has been making an interesting research on suppuration, which has just been published. He comes to the conclusion, from a very large series of experiments, that the pus formation which follows the injection of chemical substances is the result of a delimiting inflammation about a primary necrotic area, and in the

same way bacteria act by causing a necrosis, which the suppuration removes, so that there is no essential difference between the process in the two cases.

Here in Bern we found a model hospital on the pavilion plan, situated on a sloping hill on the outskirts of the town, and from the wards there is a magnificent view of the Bernese Oberland. The appearance of the pavilions, rising one above the other in the grounds, is very effective, and the new Royal Victoria Hospital in Montreal, which is also to be on the side of a hill, will, I think, resemble this very much. The Pathological Institute is a large, separate building, with every possible convenience for teaching and research. Professor Langhans was kind enough to show us all his treasures, not the least interesting of which was the skeleton of a bicapitate monster, presented to the university over a hundred years ago by the great Haller, who was a Swiss, and who lived near Bern, I believe, after his retirement from Göttingen. In the post-mortem theatre I was glad to see that to the students' desks towels were attached, a convenience rarely met with.

The medical clinic is in charge of Professor Sahli, a comparatively young man, appointed last year. There are two stories in the chief medical pavilion, with four wards, and there is accommodation for about eighty patients. Connected with it by a covered passage is the lecture-room, with seats for about one hundred students. A very complete electrical equipment and tables for urinary and microscopical examination are on either side of the arena. There were eighty-four students at the clinic, eighteen of whom were women. a careful analysis with a student of the chief points in the history and treatment of whooping-cough, a case of diabetes was brought in from the wards, and the next Prakticant on the list happened to be a woman, who went through the ordeal of questions in the various modes of testing for sugar in the urine. The saccharometer of Hermann and Pfister was shown, and then, after the clinic, those students who so desired had an opportunity of seeing the practical working of the apparatus. On either side of the amphitheatre is the clinical laboratory, with bacteriological, chemical, and microscopical rooms, large, admirably equipped, and very convenient to the wards. Bern is one of the Swiss schools most frequented by women, of whom about fifty are at present in attendance. I was told by one of the professors that they were good students; as a rule, very attentive and industrious, but not always sufficiently prepared in the preliminary subjects. Those at the lecture were all young, but I did not see one who looked likely to become the Trotula of the twentieth century.

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