

An example of his advocacy of surgery in days when there was a good deal of mistrust of the surgeon's reliability, is seen in the last of a series of conclusions appended to his leading fasciculus in vol. II of the Johns Hopkins Hospital Reports, on "Fever of Hepatic Origin, Particularly the Intermittent Pyrexia Associated with Gall-stones;" for he says:

A recognition of the importance of this intermittent pyrexia and its associated symptom-group, as diagnostic of obstruction of the common duct by gall-stones, should, in the present condition of hepatic surgery, lead to more frequent operative interference in these cases.

Similarly, in cases of tuberculous peritonitis at this same time, he advocated surgical exploration, and reported one or two cases which had been operated upon by Kelly with marked amelioration of symptoms. It is true that a number of cases had been previously reported, all of which he discusses, but in the majority of them the lesion was stumbled upon; and he ends his conclusions with the statement that 'statistical evidence shows laparotomy to be in many cases a palliative, and in certain cases a curative, measure.'

Osler's interest in cerebral localization, aroused by the discussions at the Congress in 1881 and by the subsequent studies of Ferrier and others, was shown by an editorial entitled "Epileptiform Convulsions of Cortical Origin" in the Medical News for Oct. 6, 1883, xliii, 379; and shortly after, at a meeting of the Medico-Chirurgical Society on Dec. 14th he presented a case of Jacksonian epilepsy of fourteen years' standing, due to a tumor in the leg centre.

*Osler's*

*From the paper given at Congress of 1888.*

*All the way up to his lectures - at Xmas 1888*

*Osler's*

*Helmuth*

*Osler*

*Pain*

*Chronic med.*

*Osler*

*Memory - cerebral cortex & motor function*

*Monetary ready, under study finally*