for they are apt to reveal with unconscious faithfulness the regard held for him by those who knew him best.

¶ From Southey's dictum that "a man's character can more surely be judged by those letters which his friends addressed to him than by those he himself penned". And there might be added to this statement — particularly if they were letters which the recipient saw fit to preserve". There must be no other excuse for the inclusion in this story of these several letters from Dalhousie Johnson which were among the few ~~had been~~ which Sir Michael had kept for it was not his habit to preserve correspondence.

~~Dalhousie Johnson Though his wife had left him and he was longer had a home he~~ After his wife ~~had~~ had left him it is said that Johnson never again crossed the doors of the rectory and though a lonesome old man he did not live in the past alone as this note by Miss Kathleen Fegan of Toronto indicates.

cases the first perimetric indication of the process when the usual 5 mm. test objects are used is shown by a slant in the boundary of an upper temporal field and a corresponding quadrantal defect in the color peripheries. The advance of this temporal field defect downward with ultimate involvement of the macular area and encroachment on the nasal field was divided, for convenience of clinical designation, into eight stages.* It was shown, moreover, that the recession of the defect after operative measures with relief of pressure took place more or less rapidly and completely in a reverse sequence.

*We were not the first to call attention to this ~~particular method~~ characteristic progression of ~~progress of~~ visual defects in cases of pituitary lesion. ~~Others also have pointed out this manner of progressive field deformation, among them Dr.~~ Dr. Arnold Josephson. ~~Dr. Josephson~~ was possibly ~~also~~ not only the first to demonstrate the enlargement of the sella turcica by Roentgenographic methods in a case of acromegaly. Unfortunately for us there ~~had~~ has been no translation into English of ~~this~~ Josephson's admirable monograph ~~and we~~ (Om Endocrina Skelett-utvecklingen, Stockholm 1915) and we are glad to credit him, at his request with the priority which he deserves. J. Herbert Fisher as we pointed out had also ~~called~~ noted the condition but he also ~~described~~ observed in some cases ~~the~~ form of advancing ~~field~~ perimetric defect which begins in the upper temporal quadrant.

In another place, one of us (Walker (30)) described some of the more irregular cases in which the defect proceeds from below instead of from above, or from above and below at about the same rate, and recently we

cf. Canada Medical & Surgical Journal 1875, III, 433–442

(#) On March 31st Osler gave the Valedictory address to the graduating class at the annual convocation. It was his first effort in this direction and though it shows little improvement on his first effort in this direction and shows some of the charming qualities which gave the charm to his later addresses. He gives the better in the oratorical better in the manner of delivering for he never possessed those oratorical gifts not uncommon among medical teachers which make possible the impressive presentation of material which proves to be shadowy in substance or lack in personal. After pointing out that their training was incomplete, that they must be students always since medicine unlike law and theology is a progressive science, the urges to

(#) The gist of the first address may limit yourselves in already his mind and it is an epitome of things he continued to dwell upon more and more emphatically as the years progressed.

Being the probably organized course of medicine more varied under the circumstances

The urges them to keep up with their reading, to cultivate books, to get in the habit of attending societies and reporting experiences thus cooperating with the journals. He points out that behavior is more certain to bring success than "a string of diplomas"; touches on their ability always to be poor, on the question of childhood, on the relationship between doctors and undertakers with an appeal for sobriety more needed by students of these days than of the present. Still a total abstainer himself, some of his more intimate young friends, men of the greatest promise in the profession were already going to the ground despite his personal efforts to help them. Instances then are many & close.

Quote from address

STUDIES OF OPTIC NERVE ATROPHY IN ASSOCIATION WITH CHIASMAL LESIONS.

by

Clifford B. Walker, M. D. and Harvey Cushing, M. D.

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I INTRODUCTORY

In a recent communication (8) a series of cases were recorded to illustrate what we have come to designate as stages in the development of hemianopsia when produced by the pressure of hypophysial or parahypophysial tumefactions against the chiasm. It was pointed out (1) that in 81 examples of field deformation from th~~ese~~ ~~source~~ lesion they proved to be bitemporal in 26, homonymous in 12, and unclassified in 8, while in 35 there was blindness in one or both eyes, so that it was uncertain in which group, bitemporal or homonymous, they belonged; (2) that in cases of bitemporal hemianopsia it is unusual for the field defect to be bilaterally symmetrical; (3) that in the majority of the

At the end of the Semester Osler was officially appointed to succeed to Dr. Drake's chair as Professor. He had distinctly made good during this year as lecturer.

~~cf. the Maude Abbott story. Drake's heart~~

Dr. Maude Abbott relates these in ~~1910 1913 1908(?) when she was going over the specimens in the museum Sir William was showing the museum at Peter's Pie mixture~~ after the fire in the year 1908 Sir William found in one of his visits to the Pathological Museum, at McGill he showed him a heart, in ~~an unlabeled jar~~ a jar which had lost its label and asked if he could identify it. He made the enigmatical remark "If that heart had not stopped pumping when it did in all probability I would not be here." It was Drake's

have seen a patient in whom a temporal defect was about equally advanced from above in one eye and from below in the other. Furthermore, in determining the presence of caeco-central scotomata and temporal islands, as well as in plotting the early changes in the peripheral fields, attention was called to the use of a series of test objects increasing in size from that representing the smallest available visual angle (1.5 min.) to the largest satisfactory size (8 degrees). Whether the variation of the field defect represented a variation of visual fiber bundles in the chiasmal region or variations in the asymmetry of the tumefaction could not be definitely determined, though the latter cause was favored.

At the conclusion of our last conjoint paper (8) the question of primary and secondary optic atrophy was briefly discussed and surmises were made as to the position of the fascicular fibers in the optic path and the order in which atrophy occurs in them. It was stated that it was often impossible to tell from the appearance of the optic disc whether or not there had been an irrecoverable destruction of the nerve, indeed, vision had been seen to return in blind eyes even when pupillary

His industry was prodigious, because he often referred to his single talent. He was not content merely with ~~giving his lectures and~~ the supplying of his new course and preparing the necessary lectures, a task arduous enough in itself. ~~He must have~~ Having one hospital position and being eager for opportunities in the pathological laboratory he volunteered for this work and though it was the custom at the time for the visiting physicians and surgeons to the Montreal General to perform their own autopsies they came more and more to lean upon Osler for this purpose and it was inevitable that in time the position of pathologist should be created for him. He alone was familiar with the modern technical methods of pathological histology and a succession of papers during the succeeding years were published under the names of others in which the autopsy work was made by him on the surgical specimens described.

Nor did he fail even in these early days to prod others. Someone once said in after years that it was always a joy to have even a post card from Osler but the drawback was that it usually meant a lot of work. The hint to Stephens in this next letter to send an offer letter to Sherwood who was editor of the local journal therefore for a familiar ring.

lesions central to the chiasm. In these longstanding cases, the secondary degeneration in the optic nerves had become well defined and, although the degenerated areas still showed a scattering of ~~scattered~~ undegenerated fibers, they nevertheless formed a striking contrast with the rest of the nerve. In posterior lesions of this type, one tract is interrupted entirely, while the other is functionating normally. Hence they tend to give clean-cut defects which are practically the same for small and large discs. ¶ The field defects from chiasmal lesions, on the other hand, when plotted with graded discs indicate that the interruption of the nerve fibers is much more diffuse in distribution, for larger ~~layer~~ discs give a proportionately wider field. Thus, from the character of the fields, from the anatomical position of the lesion, and the character of the onset of the hemianopsia, one might expect to find a more diffuse process in anterior than posterior lesions. Indeed, it seems remarkable that a pituitary struma can eventually produce a stage of vertical hemianopsia in each eye with both crossed and uncrossed fasciculi remaining under the same degree of pressure from the start. It was our original view that pressure

Prof. Joseph Hyrtl was and will always remain one of the brilliant figures of medical history and though his manual of dissecting was a classic which famous in fact in a class with Victorian feat medical manual it is nevertheless interesting ~~that~~ at this early day to find cases referring others to unfamiliar books even those which did not happen to be in his specialty field.

He ~~had~~ started at this time a journal club to purchase & distribute matter of interest widely & voracious by himself but had already journals which he could ill afford himself. The Club consisted of Butler, Shepherd, Fenwick, Drake, Howard, ~~Fox~~ Ross, Cline, MacDonnell and Godfrey each of whom chipped in ~~10~~ ten dollars apiece for the purchase & particularly Nerve and Sense periodicals. The first installment was ordered April 13 1875 and he kept also other's receipts & distribution and among the excellent abstracts which fill the ~~Canadian~~ local medical journal of which Fenwick and Ross were Editors doubtless came from his own pen often other members of the club.

He often referred to these days facetiously, for instance Physiology, ~~as it has~~ He often ~~said I should be taught he had to provide for his own necessities but the microscopes the students used and he sometimes wished have to go~~ had to go To Palmer Howard to borrow ~~one~~ each to unveil his days experiences. ~~He~~ and once years later wrote, to his young friend Wallace "Suffered at that time from an acute attack of chronic impecuniosity"

and histology, which ~~Constituted~~ ~~Composed~~ subjects comprised ~~felt~~ the 'Institutes of Medicine', as he phrased they 'should be taught' meant ~~an outlay from his own pocket~~, drawing heavily on his small income. "Students paid fees directly to the instructors who provided equipment and material and lived on the balance. Dead some of the former and less of the latter. The supply of microscopes was meagre and often remedying this defect there was little left in my pocket."

We had hoped that by subjecting this material to accurate histological studies of the degenerated fiber bundles we might be able to supplement Henschen's maps of the course which the fasciculi from the retinal quadrants pursue through nerve, chiasm and tract. We soon found, however, that in many of our cases the atrophy in the optic nerve was either too slight to be well traced or, in more advanced cases, was too diffuse. As a matter of fact, the chiasm and tracts were often so flattened and distorted by the tumor that a sectional survey of the normal anatomical situation of particular bundles which might have undergone excessive degeneration would have been impossible.

We found, too, that it is very difficult, without loss of orientation, to carry sections of the nerves having poorly demarked tracts through the preliminary steps necessary for microscopic study. This is particularly true of the orbital portion of the two optic nerves, which in the process of removal are necessarily detached from the intracranial portion of the pathway including chiasm and tracts. Knowing which was right and which was left nerve, however, it was possible by the aid of the macula to identify the upper and lower, inner and outer

The twelve microscopes which he had ordered for his class were made possible, as will be seen, from a fee of £60 which he was given for undertaking a disagreeable and, it may be added, a dangerous task. It was however an enticing wedge to get clinical opportunities which he promptly drove home.

For it is evident from this letter

Montreal

Immediately began to make profit and to write for publication a work he was working out.

Microscope & Protozoa

" & technique & pathological specimens. Journals certainly may anticipate what appears to exist by others.

Small pox and vaccination.

Pathologist and the McGill Path. Report issued.

Attendant to McGill. Student. Began to report as by then in Baltimore.

Started a Foreign Periodical Club & acted as Secy.

Butler Stephen Fenwick Drake Howard Ross Cline McDonnell

& Godfrey since chipping in $70.00 government since Journals ordered April 13 '75

Stellwagon Gracie Gallaher Journals & probably wrote many the abstracts from

Ven. which fill the Can. M.&S. Journal & other journals

~~It is evident from the above~~ that he was already at least in the female sex towards and as was his wont he immediately began to make profit out of ~~what he was~~ his opportunities whatever they might be for profession of publicities.

against the chiasm with resulting distension was the chief element in producing the field defects, but an instrument which has been devised by one of us (Walker), in which wires could be ~~were~~ woven in a way similar to the chiasmal arrangement, has led us to believe that tension as well as pressure is an important factor and we may add that Fisher[15] also reached a similar conclusion.

Material and methods. In a series of some 200 ~~150~~ operations upon patients with hypophysial tumors, there have been 26 ~~7~~ fatalities, most of them occurring in the earlier series at a time when unfortunately we employed less exact methods of perimetry than at present. However, fields were plotted in all of these cases, except those already ~~one or two~~ blind, ~~patients~~, on one or more occasions shortly before the operation, so that an opportunity was afforded ~~us~~ to compare the field defects which indicated the degree of functional disturbance with the degree of actual fiber degeneration in the nerves existing at the time. In none of these cases was there any ophthalmoscopic evidence of the secondary changes due to a choked disc, though in some of them a low grade of recent oedema was superimposed on the picture of so-called primary atrophy.

The Montreal General at this time was a modest institution of only about 150 beds ~~and~~ its hospital and its reputation, ~~[illegible]~~ ~~and attached to it in these years Franks was a small pox hospital~~. The wards called "Nurses" were filled Sarah Gaugh type and as Dr. Shepard recalls # were most strenuous to the cry that cheers, and it was long before modern wards and the modern type of nurse came to supplant the old ~~[illegible]~~ orders. Attached to the hospital with

"Reminiscences"

Franks' worst fall was an isolated small pox ward. It was the custom apparently for ~~the~~ members of the attending staff to ~~have~~ serve successively in charge of this ward for periods of three months. In this year of 1875 small pox was rife and of particularly malignant form and evidently on the rise of the ~~[illegible]~~ ~~[illegible]~~ second year. Osler's ~~offer~~ offer to take the service was accepted, ~~even though he was~~ though at the time he was a member of the hospital staff. ~~and~~ was moreover a volunteer worker in the dead house, and was

At this period, small pox, as ~~it~~ may be recalled, was more or less epidemic everywhere and was particularly severe in most seaport towns. Vaccination was not compulsory, revaccination was rare and quarantine most imperfect. The ~~[illegible]~~ local ~~[illegible]~~ medical journals ~~for~~ had had a succession of editorials & articles over the existing conditions and the 'M.G.H.' had long made efforts ~~to [illegible]~~ to ~~evidence the city to establish a separate [illegible] hospital for these cases. and to revise~~ have the existing law revised which established the hospital receiving grants from the legislature to receive small pox patients.

~~The agitation has been active for~~ particularly from 1873

reaction had also been lost. Thus, as has been previously ~~pointed out~~ emphasized by one of us (Cushing[7]), the demonstrable perimetric defects are to be regarded rather as an evidence of physiological block than of an anatomical destruction of the nerves, in view of the great degree of recoverability in the transmission of light impulses on the release of the nerves from pressure. This was further supported by the fact that in several cases the histological examination of nerves showed but a scattered degeneration, even though the ophthalmoscope had previously demonstrated the characteristic pallor of advanced atrophy and the perimeter an advanced field defect.

Since the classical study of Henschen[18] on the optic pathways, published, did not include examples of chiasmal lesions such as we were given the opportunity to study, we wished to see whether or not the tract degenerations in our cases conformed with those which he had observed. For the interruption in the pathway in Henschen's cases was produced chiefly by cerebral tumors, capsular hemorrhages or other vascular lesions of long duration, varying from one to fifteen years - in other words, by