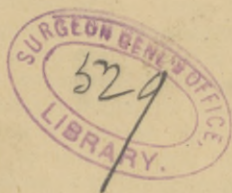


LINN (S. H.)

Specialties in medicine
and surgery.





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SPECIALTIES IN MEDICINE AND SURGERY.

TO THE EDITOR OF THE MEDICAL RECORD,

SIR: Is a specialty in medicine or surgery possible? This is no new question, but one that is being constantly and anxiously asked by the young and old of the medical profession. The longer I live, the more I read and observe, the more convincing become proofs that a specialty in the true sense is not possible, unless we broaden the sphere instead of curtailing it. Take, for instance, the very latest in laryngology and rhinology. "Epilepsy is a frequent result of peripheral irritation." So says one of our best known throat and nose specialists. Again, he tells us that the nose is frequently the seat of sufficient irritation to excite a variety of reflex manifestations. Granting the truth of this doctor's observations, who will gainsay or question that the amount of peripheral irritation at the other openings of the body may not have a most important bearing?

Do we not in chronic diseases need a specialty that requires us to examine all the other openings that may present peripheral irritation? One that will not alone allow us to treat a chronically elongated palate, causing an irritating throat cough, or hypertrophied tonsils, yielding a product of mucous or calcareous matter, thickening the voice, and congesting the fauces, pharynx, etc.? One that will not alone allow us to cauterize the turbinates of the nose, thereby curing almost immediately sciatica, headache, and vertigo?

Do we not need a specialty that demands the closest scrutiny of all the organs, no matter from which comes

presented by the author -



the wail indicative of functional derangement? The tortured, irritated brain, the stuffed nose, the congested kidney, the irritable stomach, the debilitated sexual organs, the failing heart, the clogged liver, the impeded lungs, may all be so many index-fingers pointing to peripheral irritation as the cause.

Is it safe, then, in any form of chronic disease, to say that it originates in and affects only the one organ. Someone has wisely and truly said: "Every local chronic disease has its genealogy, and he who can trace this life-history is a good diagnostician."

Another has equally well said: "An organ is but a part of the general system, and is so intimately connected with every other tissue that it is seldom that a single organ is diseased alone. Every disease is due to an impression made upon the nerve-centres supplying the part, changing its capillary circulation."

Is it in the organ from which the pain begins, in the nerve-centre, or in the organ affected? This is the nut for the specialist to crack. Here comes in the ability of the diagnostician.

That peripheral irritations cause pneumonia, pleuritis, coryza, etc., is true, and a specialist might perhaps treat more successfully; but he must not forget in these cases the central impressions, septic or simple, affecting one nerve-centre primarily, but secondarily affecting another centre, causing a far-away inflammation. A cough and spasm of the larynx may come from papillus on the tongue, or laryngeal spasm from phimosis, or papillæ and pockets in the rectum; hæmorrhoids may also produce it. The general depressing reflex effects of pockets and papillæ of the rectum are, comparatively speaking, unknown to the medical world.

To appreciate reflexes is to be a diagnostician. The great vaso-motor system is always thought of, but we must not forget the sympathetic system. When we realize that the sexual organs carry on their functions by means of nerve-filaments sent to them by the pre-

siding genius of life in the human economy—the great sympathetic—as extensive in their area of influence as the mucous membrane, muscles, and glands that constitute the sexual apparatus, it is not difficult for us to see how a diseased condition affecting any part of this apparatus can, through these nerve-channels, send continuous streams of disturbing influence to any and all parts of the system. A sensitive spot in the throat may produce general neurasthenia; hypertrophy in the nose causes neuralgia, asthma, etc.; and so will rectal troubles.

It has also been said that it is a pathological fact not to be denied, that the irritation of an organ invariably starts at its mouth: and it is communicated from thence to the body of the organ. Thus, a diseased external os uteri will cause inflammation of the neck of the organ, and an irritation of the internal os may set up endometritis and other difficulties that assail the body of that organ; while many troublesome ovarian weaknesses are unquestionably due to the irritation of the uterine orifices of the Fallopian tubes, which travels up and affects the body of the gland.

Again, it has been said that reflex phenomena may completely overshadow exciting causes. I am sure, too many reflex diseases are treated as idiopathic ones. In these cases, when it comes to treatment, the unsound trees are shorn of their foliage and the diseased roots left untouched. The rectum is particularly entitled to careful study and consideration; its anatomical characteristics demand it, for the reason of dissimilarity to other sections of the alimentary canal. The outlet is prone to take on various forms of difficulty that create an infinite variety of symptomatic phenomena. It is in the countless array of symptoms, subjective and objective, of orificial pathology and treatment that are so deeply interesting. Any physician can account for a majority of the chronic diseases and derangements of the pelvic viscera by looking to contiguous organs for the primal point of disturbance. A contracted meatus not of special signif-

icance as an entity, reaps its dire consequences upon the prostate, bladder, kidneys, or other structures. If this be so, why not look for reflex trouble from a rectal sphincter that is in an unmitigated state of contraction? The operations of the sympathetic nerves are beyond the control of man. We can nurse and propitiate the cerebro spinal, but the great ganglionic, by day and by night, works independent of us. I have seen many cases of prostatic trouble, irritability of the urinary bladder, of the uterus and ovaries, created solely by a fissure of the anus, or rectal papillæ or pockets with inflamed and infiltrated edges. In conclusion, let me urge the consideration of a specialty that includes at least all the openings of the human body, as peripheral irritations there begin. An irritation of an organ truly starts at its mouth. So let us examine the mouth and throat, then the lungs, not forgetting the heart, and so on through the body to the lower openings; the revelations there to be found are sometimes astounding.

S. H. LINN, M.D.

19 SOUTH CLINTON STREET, ROCHESTER, N. Y.

Presented by
the author
Dr. S. H. Levin.

Rochester N. Y.

243 Alexander St.

Acknowledge this
Dr. J. B.

