

CLINICS AT THE INFIRMARY FOR NERVOUS DISEASES, PHILADELPHIA.—This hospital, which has been well known for many years, has been handsomely rebuilt on the old site, at the corner of Seventeenth and Summer Streets, Philadelphia, and is devoted exclusively to nervous diseases and orthopædics.

The service for outpatients at the hospital has a quite peculiar interest from the mode in which it is managed. In the first place, these clinics are held by the physicians with the assistance of a large staff of assistants. Three rooms on the ground floor, well aired and lighted; a large adjoining room for electrical treatment; a dark closet for ophthalmoscopic purposes; and a photographic chamber, give ample facilities.

The three physicians each hold a weekly clinic, and lectures are now being given twice a week in the lecture room of the hospital.

The method followed at these clinics may be illustrated by a brief mention of the plan adopted by the senior physician, Dr. S. Weir Mitchell. One of his assistants, Dr. Hinsdale, obtains in one of the case-books the introductory knowledge needed in every instance, and endeavors to form a rough diagnosis; this sketch comes before Dr. Mitchell, who questions the patient and endeavors, as do all the physicians, to follow a printed card which gives the order in which the symptoms shall be noted. This regularity of sequence makes the notes taken more easily comparable. If the notes need to be elaborate, Dr. Morris Lewis examines thoroughly the heart, the lungs, and abdomen; Dr. de

Schweinitz the eye and ear; Dr. J. M. Taylor the secretions; while Dr. Massey makes the electrical tests. Each aid has thin slips of paper on which are printed clearly the main points of inquiry, and these, when filled out, come back to the clinical clerk for insertion with the notes of the case. It is rare that all the slips are needed; often a mere negation records absence of heart and lung troubles; but, by this plan, when very accurate notes are needed, they can be had.

Often no opinion is given until a case has been examined at a second visit and a more extended history obtained. It would be difficult to secure more care in diagnosis than is thus attained.

The seven sets of books used in these clinics for records are peculiar to the hospital; they are for epilepsy, chorea, neuralgias, local paralysis and local disease of nerve trunks, paralysis of adults, infantile paralysis, and miscellaneous cases. The plan provides volumes available for examination or inquiry regarding these disorders, and saves the inconvenience of sifting out from a miscellaneous collection the special cases that may be required.

The pages of the chorea book are printed with about fifty questions regarding family history, the previous health of the patient and particularly previous attacks of the disease, the exact date of onset of the present attack, the order in which the members were affected, and very many questions regarding the present condition of the patient. The answers to these questions have secured full statements and have aided the researches on *Chorea and Weather*, by Dr. Mitchell, and on *Chorea and Rheumatism*, by Dr. Morris Lewis, as well as Dr. Mitchell's papers on *Chorea in the Black* and on *Habit Chorea*. At present Prof. Osler is using them to call back to the hospital for reëxamination of the heart all the old cases of chorea, which now

number five hundred at least. Dr. de Schweinitz is carefully restudying the eyes of the choreic.

For palsy of infancy case books have been printed with spaces for answers to fifty-eight different items. From a vast collection of cases thus studied Dr. Sinkler was enabled to draw his conclusions as to the relation of the paralyzes of childhood to temperature.

The less interesting cases which return frequently, are seen by an assistant, and thus these large clinics are handled with a speed, and yet with an amount of care, which is remarkable.

Medicines are given at a little above cost—at such a rate, in fact, as merely to pay for the drugs and sustain the apothecary.

These clinics are, as a rule, open to all visiting physicians; but we believe Dr. Mitchell, at least, declines to lecture clinically to a mixed class of men and women, and thinks that opportunity for study is lost by teaching at clinics of this kind.

The electrical service under Dr. Massey is very complete, abundant facilities being provided for the use of galvanic, faradic, and franklinic currents in the electrical room and throughout the house. By a novel arrangement the galvanic current is made available for use at the bedside of each patient in the hospital, and all may be treated simultaneously without danger of exhausting the battery. This is accomplished by using the current of the incandescent lighting plant, special wires being laid beneath the floors and connected with plug receptacles, which are placed in the base-boards near each bed in the wards, and beneath the lamps in the private rooms. To these receptacles movable tables provided with a meter and rheostat may be attached at will.

The use of this strong current in medical work is

made possible by the special form of rheostat, or current controller, devised by Dr. Massey, which consists of a circular pencil-mark arrangement, permitting any gradation of current from a fraction of a milliampère to fifty milliampères, by the simple movement of a lever. The current used, both for this work and for the electric lighting, is derived from an Edco storage battery of sixty volts and slight internal resistance, fed by a dynamo, both being situated in the basement. The franklinic currents are derived from a four-plate twenty-two-inch Toepler-Holtz machine, with a spark capacity of seven inches.

A very interesting and unusual feature of this hospital is a room on the ground floor devoted to such research as requires instruments of precision. There are, of course, apparatus such as thermometers of all kinds, sphygmographic instruments, and others for counting blood-corpuscles and estimating hæmoglobin; mechanical arrangements for studying and recording tremors and knee-jerks; and devices for the study of clonus, on which Dr. Mitchell is now engaged. In the middle of the room is a large kymographion, with the usual arrangements of tuning forks, etc., for the records of small fractions of seconds.

It is the desire of the managers and of the physicians that the numerous researches which have found their means in these clinics in the past, should in the future receive every encouragement. No hospital in America has, we believe, in the last ten years so notable a record of original work done.

We propose shortly to speak of some of the methods in use here in the treatment of disease.