

Diffuse sclerosis of brain / by Henry Ashby.

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Diffuse sclerosis of brain.

By HENRY ASHBY, M.D.

[With Plate I.]

THIS specimen was taken from a boy, John R. R—, who was 20 months of age at the time of his death. From the history given by the mother, it appeared that she had never suffered from syphilis, and had had no miscarriages. Three days after birth the boy had fits, the right arm and leg being mostly involved, the fits continuing off and on till his admission into the hospital. He has never taken any notice of anybody, has apparently never seen or heard, and only makes inarticulate mumbling sounds. He had "snuffles" when a few weeks old, but has never had any other manifestation of syphilis. He was seen at 8 months old; at this time he was apparently an idiot, he could not sit up, was evidently blind and deaf; the right pupil was larger than the left and there was marked nystagmus; the head was retracted, the right arm and leg flexed, and more or less stiff, the left leg was also in part drawn up. He continued under observation as an out-patient till April 4th, 1885, when he was admitted into hospital. At this time it was noted that "he is poorly nourished, head not enlarged, the shape is normal, the fontanelles are closed; the pupils are of medium size, they act normally to light, there is nystagmus, the expression vacant; the respiration is noisy, as if from paresis of the soft palate. He lies in bed with head retracted, face turned to the left side, the right arm rigid, flexed, and cannot be straightened; there is no rigidity of the fingers or wrists, but the fingers are kept closed. The left elbow is rigid, but it is straightened at times. A prick on the fingers makes him start as if in pain. The thighs are flexed, knees bent, the feet are inverted and crossed. There is slight voluntary movement at times; he apparently feels a prick on his toes. There is a blankness and idiotic expression of face; there is no optic neuritis or atrophy." He remained in much the same condition till death on June 25th, 1885.

On examining the body, it was noted on removing the skull-cap, that much fluid escaped from the subdural space, as if the

brain had shrunk away from the skull; the arachnoid was thickened and opaque, the pia mater consisted of many tortuous vessels, but it could be readily separated from the brain without laceration, but leaving minute holes in the brain-substance which had been occupied by vessels. The brain-substance was remarkably hard and firm, apparently shrunken; on the convex surface there is no trace whatever of convolutions or fissures except the fissure of Sylvius, the surface being smooth except where there are furrows which have contained the vessels (see fig. 1); on the frontal lobes there were granulations like those on the surface of a hob-nail liver; at the base and also on the inner or medial surfaces the convolutions were more or less marked. On making vertical sections through the brain, as in fig. 2, there are no traces of the convolutions to be seen and the grey matter of the cortex is represented by a band about one eighth in. deep on the surface, of slightly lighter colour than the subjacent brain-substance. The brain-substance between the grey matter of the cortex and the basal ganglia is firm and dark in colour, being evidently sclerosed; there is a band of white coloured substance, immediately adjacent to the caudate and lenticular nuclei (see fig. 2). The lateral ventricles are much dilated. A microscopical examination of the brain shows that the neuroglia is everywhere exceedingly coarse and granular, the vessels large and distended with blood, the perivascular spaces dilated, and in places there is an increased amount of fibre tissue accompanying the vessels in their course. Traces of the caudate cells are present near the surface, but most of them are atrophic and many are wanting; there are numerous round cells. The descending changes in the medulla and cord are well marked; in the former there is almost complete wasting of the anterior pyramids, and in the latter degeneration of the antero-lateral pyramidal tracts.

The most plausible explanation of this condition of sclerosis is that it is due to a meningo-encephalitis of the convexity, which took place during foetal life, and which was followed by atrophy of the convolutions and descending sclerosis.

January 19th, 1886.

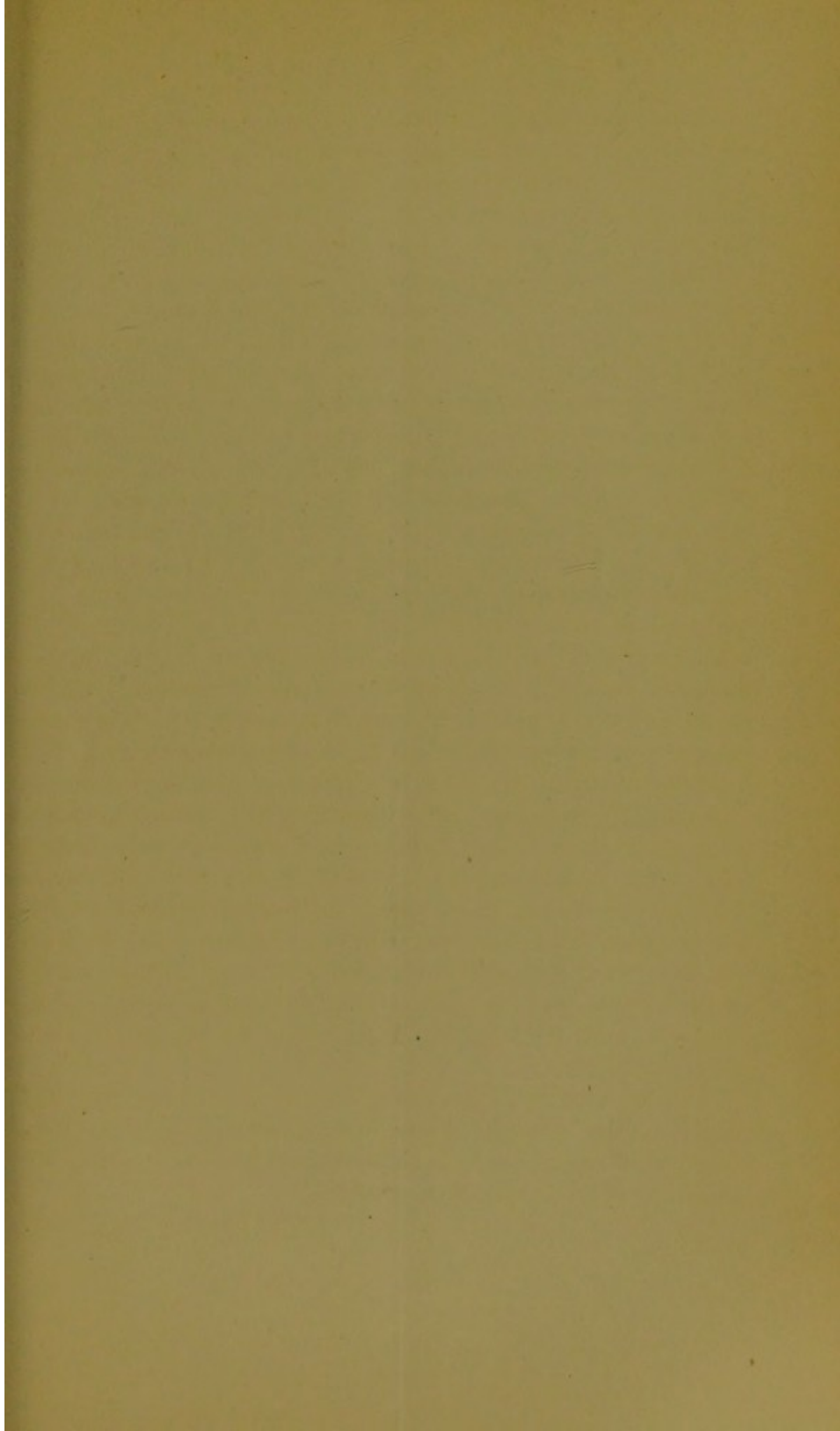


Fig. 1.

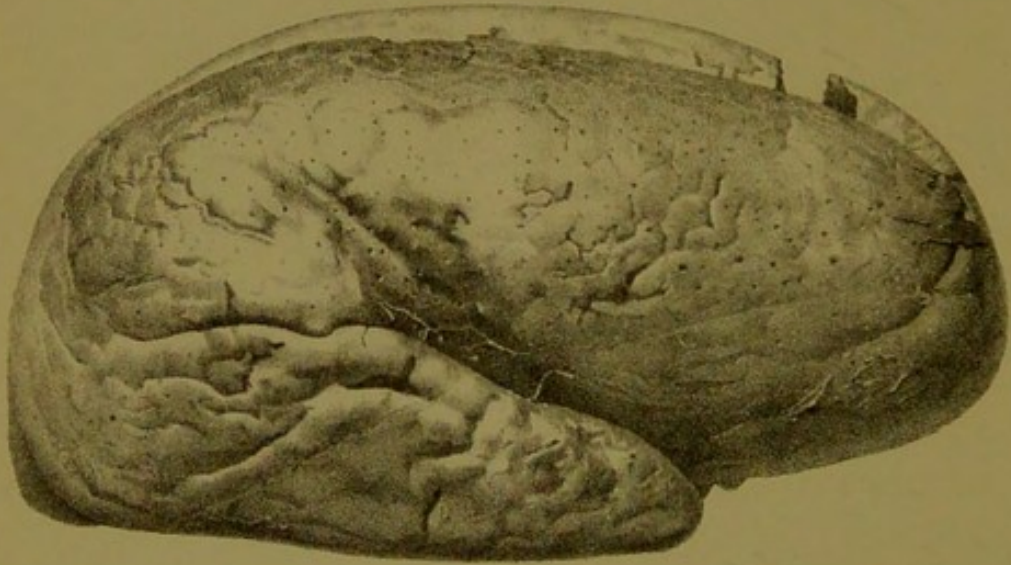
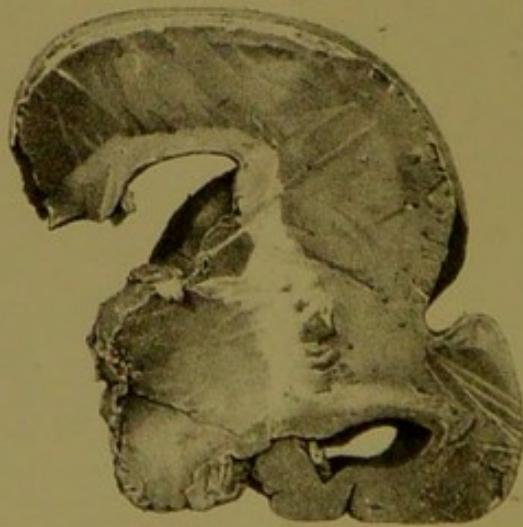


Fig. 2.



DESCRIPTION OF PLATE I.

To illustrate Dr. Ashby's case of Diffuse Sclerosis of the Brain.

From photographs.

FIG. 1.—Lateral view of brain. The pia mater has been removed, displaying the smooth surface beneath, and foramina entering the grey matter. The grooves joining the Sylvian fissure were occupied by vessels.

FIG. 2.—Parietal section of brain. Shows the dilated lateral ventricle, absence of convolutions, and the cortical grey matter hardly distinguishable from the indurated and shrunken medullary substance.

CONSTITUTIONAL HISTORY

The history of the British Empire is a story of expansion and contraction.

CHAPTER I

The British Empire began to take shape in the late 16th century, when England and France began to compete for dominance in the Atlantic world.

The first step was the establishment of colonies in North America, the Caribbean, and India. These colonies were initially dependent on their parent countries for supplies and protection.