- 6 Weiller C, Ferbert A. Hereditary motor and sensory neuropathy (HMSN) and optic atrophy (HMSN Type VI, Vizioli). *Eur Arch Psychiatry Clin Neurosci* 1991;240: 246–9.
- 7 Vizioli F. Dell'atrofia progressiva nervosa. *Bollettino della R Accademia Medico-Chirurgica di Napoli* 1889;1:173–83.
- 8 Sainton P. *L'amyotrophie type Charcot-Marie* [MD thesis]. University of Paris: Paris, 1899.
- 9 Ballet G, Rose F. Un cas d'amyotrophie du type Charcot-Marie avec atrophie des deux nerfs optiques. *Rev Neurol* 1904;12:522–4.
- 10 Schneider DE, Abeles MM. Charcot-Marie-Tooth disease with primary optic atrophy. Report of two cases occurring in brothers. *J Nerv Ment Dis* 1937;85:541–7.
- 11 Chalmers RM, Bird AC, Harding AE. Autosomal dominant optic atrophy with asymptomatic peripheral neuropathy. *J Neurol Neurosurg Psychiatry* 1996;60: 195–6.
- 12 Milhorat AT. Studies in diseases of muscle. XIV. Progressive muscular atrophy of peroneal type associated with atrophy of the optic nerves: report on a family. *Arch Neurol Psychiatry* 1943;50:279–87.
- 13 Hagemoser K, Weinstein J, Bresnick G, Nellis R, Kirkpatrick S, Pauli RM. Optic atrophy, hearing loss, and peripheral neuropathy. *Am J Med Genet* 1989;33: 61–5.
- 14 Taylor J. ?Peroneal atrophy. *Proc R Soc Med* 1913;6:50.
- 15 Rosenberg RN, Chutorian A. Familial optoacoustic nerve degeneration and polyneuropathy. *Neurology* 1967;17: 827–32.
- 16 Harding AE. From the syndrome of Charcot, Marie and Tooth to disorders of peripheral myelin proteins. *Brain* 1995;118:809–18.
- 17 Eiberg H, Kjer B, Kjer P, Rosenberg T. Dominant optic atrophy (OPA1) mapped to chromosome 3q region. I. Linkage analysis. *Hum Mol Genet* 1994;3:977–80.

HISTORICAL NOTES

Johann Jakob Wepfer (1620–95) and cerebral haemorrhage

The Swiss physician Wepfer showed that apoplexy is due to cerebral haemorrhage. In *Historiae apoplecticorum*, published in 1658,¹ is a detailed description of four cases, his first case having been studied in 1655:

“Johann Jacobus Reiter Kenzinga-Brisgojus, age about 45 years, with a slender build, endowed with yellow and curly hair, naturally strong; of honest parents, descended from the Consul. He acted as schoolmaster and at length was admitted to a most celebrated Monastery. He suffered from extensive gouty arthritis.

In the year 1655, the seventh day of November . . . he did much of everything—assisted the Most Reverend Lord Abbott in the carrying out of sacraments; (later that day) the Abbott by chance found him prostrate upon the ground, insensible to shouts, to shaking and pinching . . . I was summoned:

I arrived in half an hour, I saw him livid from pallor, deprived of all sensation and animate motion, with nostrils cold to the touch. His pulse at first strong, full, quick, soon afterwards weaker, smaller and more frequent, his breathing also more laborious, soon it became irregular, and many times appeared about to cease from within . . . At the tenth hour before midday his body was shaken albeit by a movement and much sputum white, viscid, tenacious passed from his mouth, but indeed no blood: after this more and more his strength began to weaken and his extremities to become more cold; The first hour after midday he ceased to live . . .

I opened the head: the skull removed and the dura mater being cut into pieces much blood flowed from the space between this and the thin meninges, copiously . . . Nor truly had the blood collected solely at the base of the brain, but covered it all over the top both anteriorly and posteriorly, indeed it had forced itself into nearly all the windings of the brain, as many as there are: extravasated blood totalled two pounds. The whole brain, ventricles and surface were contaminated by blood in large amounts and crumbly; . . . I was able to find no ruptured vein or artery. This however is certain, no external violent cause, be it a blow, be it a fall, was the cause of such ruptures of the blood vessels; to settle this point with his hair cut and skin washed off he showed not the slightest trace of any contusion whatever.”

Historiae apoplecticorum also contains “The history of the sickness of Marcello Malpighi, the Pope’s physician; with an account of the dissection of his corps”.

Wepfer was one of the earliest investigators of the cerebral vasculature. His book on diseases of the head² provided an ample account of basilar artery migraine and its location in the brainstem, a description of a stroke in migraine in a child; and, he wrote of the visual auras and diagnosis of migraine. He also described trigeminal neuralgia localised to the maxillary nerve.

Born in Schaffhausen, Switzerland in 1620, son of the Councillor of the local Canton, Wepfer read medicine publishing for his degree in 1647 *De palpitazione cordis*, which stoutly supported Harvey’s controversial ideas on the circulation of the blood. He studied in Basle, Strasbourg, and Italy, but returned to his native town where he built a successful practice. His renown spread widely, and his name was hallowed as “The Hippocrates of Helvetia.”

A man of temperate habits, he was a most industrious scholar, devoted to reading and the scriptures. His son Johann Conrad and his grandson Georg Michael became physicians. His considerable library and writings were bought by the University of Leyden in 1774 for 400 gold florins.

JMS PEARCE
304 Beverley Road,
Anlaby,
East Yorks HU10 7BG, UK

- 1 Wepfer JJ. *Historiae apoplecticorum*. 1658. English translation from Bagvili’s *Practice of Physik*, London 1704; cited in Major RH. *Classic descriptions of disease*, 3rd ed, Illinois: Charles C Thomas, 1945:474–7.
- 2 Wepfer J. *Observationes Medico-practicae de Affectibus capitis . . . scaphasii*. JA Ziegler Schaffhausen. Obs CVIII, 480: cited by Isler H. In: Blau JN, ed. *Migraine* London: Chapman and Hall, 1987:665.