Bertapaglia is a small town close to Padua and since Leonard enrolled as a medical student in Padua in 1400 or 1402 his birthdate was just around six hundred years ago. Leonard of Bertapaglia is not a name which readily trips off the lips of those of us who have a passing, rather than a great interest in the early surgery of the nervous system, but it is remarkable to observe that this work was published, firstly in manuscript and then put into print and actively used seventy years later.

The book is laid out with an interesting introduction and concluding commentary. There is a glossary/pharmacopoeia at the end which is of interest. The greater part of the book consists of chapters with the mediaeval Latin on the left and the translation on the right. The book might be of interest to someone with a close involvement in mediaeval history and indeed the work of the compiler shows attention to detail and obvious affection for the task in hand. For those of us who are not concerned so much with linguistic details or quaint recipes, but more with the ideas and the concepts that a surgeon practising six hundred years ago might hold, the text is perhaps excessively detailed. I much prefer Spillane’s ‘Doctrin of the Nerves’ as a bedtime read.

The original author appears to have been a fairly typical neurosurgeon with a combative style which led to his occasionally needing his academic colleagues and thus not being granted his doctorate until he was seventy. He was a technically minded man and has been credited with the reintroduction of the circular trephine and also the first description of the suture/ligation.

Some of his advice reads well today and could well be taken by those who still purport to treat subdural empyema by the making of burr holes. Leonard says “should such pus occur, however, the physician should direct his attention not to a single location but to diverse areas”.

Leonard also described a neat test: “there are some who have horns and they bid the patient blow, as a trumpeter blows his horn, so that the spirit or wind rises up to the patient’s head. If the air from this blowing respires to the exterior of the wound, this is a manifest sign of a fractured skull”. He did not have access to a sphygmomanometer and neither does he report headache occurring after horn blowing; indicating that he just missed describing the reviewer’s pniktalgiogram test for hindbrain hernia headache.

Some other of his words have a modern ring about them and his advice appears somewhat more advanced than I can sometimes bring myself to take. For example, when advising a patient of a lethal illness he says that the physician “must, lest the stupid criticise and caluminate him, inform the patient of the peril of death. He must say to the patient, ‘Oh, my friend, compose your testaments and confess your sins to God, which will be very helpful to me and beneficial for the cure, healing your wounds the more quickly, for your mind will be at peace and your humours cleansed of strange fancies’”.

Further cogent advice for the neurosurgeon is his observation that wine causes debilitation to the brain and passage of the humours to the head, which unfortunate consequence of itself, as well as the tendency of such cerebral humours to be used for needing our academic colleagues, may prevent many of us from obtaining doctorates before or even after age of seventy.

A common thought on reading accounts such as this is to wonder which of today’s practices will appear, to someone reading about them in five hundred years time, quite as completely ridiculous as some of these remedies. For example the concoction of a paste or plaster: “For wondrously inverting bone fragments. Rx: Armoniac, Bdellium, Serapinum, Galbanum, Oponopanax, Resin of Myrrh of each half an ounce; Turpentine, Naval pitch, Resin of pine, Oak sap, left overs of a dish of anchovies of each three ounces; Aristolochia round and long, Ditany, Colophony, Myrrh, an ox stone, bark of Aruninaeac root of each three drams; Leven, pigs fat, laurel oil of each two ounces and vinegar one ounce”. It may be suspected that in another half millennium such a remedy may read rather better than advice to take the mid-brain of a mid term abortus, pronounced by the immunologists to be free of HIV and hepatitis, homogenise and inject into whichever part of the brain happens to be the target of the month, on the opposite side of the shaking palsy.

The mediaeval neurosurgeon must have suffered, albeit unknowingly from shortage of antibiotics and modern imaging but what a pleasure to get the left overs of a dish of anchovies past the Padua ethical committee or their FDA. Leonard was not much into medical audit and neither the Karnovsky nor the Glasgow outcome scale were featured. He tended to finish his sometimes outlandish recommendations with some such phrase as; “This will produce wondrous and incredible improvement”. At least this sounds perfectly modern and would go as well in the Journal of Neurosurgery as in “Capitulum de Fractura Cranei”.

In short this is a book more for the medical library or the serious student of history but is nevertheless an interesting and thought provoking publication.

BERNARD WILLIAMS


The first edition of this book was published in 1978 and the present volume is referenced up to 1987. It is a useful guide to the many and sometimes alarming neurological problems of pregnancy. The author seems little uncertain of his readership as it is unlikely that anyone needing to consult this book would require, for example, a potted single page account of the clinical features of multiple sclerosis, but it is always difficult to decide what to leave out. Chapters are devoted to anatomy, peripheral neuropathy, muscle disease, movement disorders, infections, cerebrovascular disease, tumours, headache and epilepsy. Sensible measures are recommended for the control of convulsions in eclampsia but the author has felt obliged to present, with strong disapproving, a full account of the use of magnesium sulphate, apparently still favoured by some obstetricians in the USA. High blood levels of magnesium induce neuro muscular block and cessation of convulsive movements. As the result of a paralytic, a method of treating status epilepticus now effectively outdated as lethal.

Sound and well documented advice is given on the management of such targeted problems of pregnancy as subarachnoid haemorrhage, ischaemic stroke, cerebral tumour and suspected spinal cord compression. Professor Donaldson has evidently devoted much thought to the use of anticonvulsants in pregnancy and although his conclusions might not receive universal agreement the dilemma of foetal and maternal risks from medication or uncontrolled epilepsy is fully discussed.

This book would be a valuable addition to any neurologist’s library.

W B MATTHEWS


There are many books on multiple sclerosis covering the clinical and pathological aspects of the disease and related disorders.