have a session dedicated to clinical presentations and this time there was the added interest of having the chairman and commentators from the opposite side of the Atlantic. This produced a lively discussion of the cases presented, which brought to light the similarities rather than the differences in clinical practice between the UK and USA. Those presenting cases were Drs S Salloway and J Duffy (USA) and Drs M Kopelman, D Jadresic, S Lewis, K Barrett and M Lambert (UK).

The success of this first joint meeting led to tentative proposals for similar ventures in the future. In the meantime, the winter meeting will take place in London on 22 January 1993 and the subject will be cognitive abnormalities in neuropsychiatric disorders.

### Domenico Cotugno CSF, and the origins of sciatica

Near the heel of Italy lies the town of Ruvo di Puglia, the birthplace of Domenico Cotugno (1736–1822). Educated in the world’s oldest school of medicine at Salerno, Cotugno spent most of his life working in Naples where he became the Professor of anatomy. He is best known for his work on CSF “Liquor Cotugni” which despite the publications of “Swedenborg the Obscure”, and Vieuussens’ description of clear ventricular fluid was not generally understood. At a time when nerve juice—succus nereus had just replaced Galen’s πυευκα γυόκαν.

To prove the free circulation between the cranial and spinal dura, Cotugno stood cadavers on their feet and decapitated them to observe the flow of CSF. He described hydrocephalus ex vacuo. He also noted that CSF was incoagulable in health but, like urine, where there was disease became cloudy on boiling. “The cerebrospinal water is in perenni statu renovationis, through exudation by minimal arteries and reabsorption by minimal veins. It penetrates into dural sleeves of nerve roots; hence is apt to accumulate in the sheaths of the sciatic nerve and so give pain along its course. Such pain, weakness, and limping may be cured; if necessary by vesicants and caustics to draw out the hydrops”.

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