Kinnier Wilson went on in 1912 to describe the hepatolenticular disorder that now bears his name.2

The main theme, appropriately for Jackson, was the epilepsy. Other themes were the physiology and pathology of the cerebrospinal fluid; the functions of the frontal lobe; and the hypothalamus and central representation of the autonomic nervous system. In addition, about 250 short papers on these and other subjects were presented.

A distinguished guest was Ivan Pavlov (1849–1936), now in his 87th year, who was honoured by an editorial in the Lancet.1 He gave a lecture in German on “The types of higher nervous activity, their relation with neuroses and psychoses, and the physiological mechanism of neurotic symptoms”.

In 1935, Kinnier Wilson was also President of the Section of Neurology of the Royal Society of Medicine. He arranged for the triennial Hughlings Jackson Lecture to be given by O Foerster of Breslau on “The motor cortex in man in the light of Hughlings Jackson’s doctrines” in the middle of the Congress.9 In his lecture, Foerster emphasised that, through his careful observation of experiments on the brain conducted by disease, especially epilepsy, Jackson had derived his revolutionary view that the cortical motor cells must be concerned with movement, a concept that has stood the test of time and been confirmed by the experiments of others. Foerster drew attention to the variable and sometimes bilateral effects of cortical stimulation, especially repeated stimulation. In Jackson's view, no cortical area was purely motor or purely sensory. Motor effects can result from stimulation of sensory cortex, although the threshold is higher. The motor cortex was not a mosaic like a cubist picture, but more closely resembled the soft merging colours of a Raphael Madonna.

Among the principal speakers in the Epilepsy session were William Lennox (Boston) and Wilder Penfield (Montreal). Lennox finally laid to rest the time honoured theory that epilepsy was the result of generalised cerebral arterial spasm, by demonstrating no change in cerebral blood flow before a convulsion in 10 patients. At the same time, he introduced a new chapter in epilepsy research by applying Berger’s recently discovered human electroencephalograph (EEG)10 to 31 patients, in whom he showed abnormal electrical changes prior to seizures, which increased during the attacks.9 Penfield also applied the EEG as well as cortical stimulation to demonstrate the new possibilities for epilepsy surgery in 44 patients with focal cortical atrophy and cicatrix.

Figure 1  The Hughlings Jackson centenary medal for delegates at the 1935 Neurological Congress in London (front and back views).
On Wednesday, 31 July, a free day at the Congress, 32 delegates, representing 14 countries, assembled at the Lingfield Colony in Surrey, now St. Piers, Lingfield, to resurrect the International League against Epilepsy (ILAE). The ILAE had been founded in 1909, but had ceased to exist after the outbreak of the First World War, the last issue of Epilepsia, the League’s journal, having been published in 1915. Twenty years later, the Congress delegates at Lingfield agreed to re-establish and re-constitute the ILAE, and elected William Lennox as President.11 The ILAE has since evolved into a global professional organisation with 92 national chapters, it has stimulated a global lay organisation, the International Bureau for Epilepsy (IBE), and it has joined forces with the World Health Organisation and IBE in a worldwide public health campaign against epilepsy.12

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References