form is proved from the morbid appearances, as well as from the symptoms observed during life. At what period the tumour commenced its growth, and whether the hydrocephalus was the consequence of its irritation, or whether they were two separate diseases, the one independent of the other, I feel quite unable exactly to determine.

The facts now recorded of this very interesting case might furnish abundant material for physiological disquisition, particularly with reference to the doctrine of the semi-decussation of the optic nerves, which we owe to the celebrated Wollaston. Here the left optic nerve was destroyed posterior to the commissure, which latter remained free from disease, and the symptoms were, loss of sight of the left eye, with preservation of the clearness of its humours, and partial loss of sight of the right eye. I may, at a future period, return to the consideration of this point.

The case, too, is of great value as bearing on the connexion between the cerebellum and the generative organs. What a triumph to phrenology would this case have been, had the tumour, in place of engaging the optic thalamus and corpus striatum, existed in the cerebellum itself; as it is, it must constitute one of the many arguments against the phrenologists, which pathology has furnished.

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Considerable difference of opinion exists amongst surgeons on the meaning of the word “rachitis,” on the general phenomena of this affection, on the nature and frequency of the deformities
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which characterize it, and on the different kinds of alterations which it causes in the osseous system. From the etymology of the term, the name of rachitis is commonly given to deformities of the vertebral column; but these deformities are rarely the consequences of the disease to which they are attributed. A great number of authors have applied this term to all kinds of softening of the osseous tissue, which occurs during the adult age: such were the cases of the woman Sonpiot, reported by Morand; and of the woman with claws observed by Morandfils, as well as many other examples of ramollissement of the osseous system, recorded in various scientific papers. Lastly, it is not uncommon to find surgeons who confound rachitis with scrofula, or combine them as producing the same effects; nevertheless, neither the greater part of deformities of the spine, nor the disease of the woman Sonpiot, nor a large number of other accounts of cases of presumed rachitis recorded in science, nor scrofulous affections of any kind, belong to rachitis, nor are they allied to it in any degree.

This wandering and obscurity in writers prove to me that there exists very little precision in their notions with regard to the malady for which the term rachitis, such as it has been established by Glisson, Mayo, and Jean Louis Petit, ought to be reserved.

To combat these difficulties, I have made numerous researches on the external characters of this affection, its mode of invasion, and the effects which age and sex have on its development, the parts of the bony structure which it successively attacks, the general phenomena which precede and accompany its progress, the alteration in form and texture which it produces in the osseous tissue, the circumstances which favour its occurrence, its presumed cause; finally, I have endeavoured to give an accurate diagnosis of rachitis, by which it can be distinguished from those affections with which it has been confounded. Each of those points I have examined separately as indispensable to the distinguishing the disease, and I feel con...