CHAPTER XLIII

EPONYMIC SIGNS

It sometimes happens that counsel, in order to contuse the medical witness, suddenly asks, in cross-examination, whether So-and-so's sign is present. If the witness is not familiar with the particular word, as, of course, so often happens with these eponymic signs, the only safe course is to say that one is probably familiar with the sign, but cannot for the moment connect it with the inventor's name, and, if counsel will indicate the nature of the test, the witness will give the Court the necessary assistance.

I have seen a medical man nonplussed and almost laughed out of Court because he could not, for the moment, connect the well-known name of Romberg with the test first described by him. Counsel asked, "What is Romberg's test?" The witness could not for the moment associate the German's name with any particular test, and simply said he did not know. Much was made of the admission, the doctor was worried as to whether it was applied by a stethoscope or an ophthalmoscope, and the impression left was that he was crassly ignorant.

The following list of signs, etc., may be useful; many of the signs are, of course, very familiar, while some are almost obsolete, but should not be quite forgotten in medico-legal practice. The descriptions are not exhaustive, but are probably sufficient for the purpose indicated above.

Abadie's Sign of Tabes.—Absence of pain when the tendo Achillis is pinched. Present in the majority of tabetic patients.

Amnesia.—Forgetfulness, loss of memory, especially of the ideas represented by words.

Argyll-Robertson Pupil.—A pupil which contracts on accommodation for near vision, but does not contract for increase of

light. Found in locomotor ataxy (tabes), and general paralysis of the insane.

Astasia-Abasia.—Inability to stand or walk. In hysteria there is no true inco-ordination or paralysis. The patient can sometimes crawl.

Babinski's Sign (see p. 124).—Extension instead of flexion of the great toe on tickling of the sole of the foot; indicative of organic disease, never found in functional disorders. It is found wherever there is involvement of the crossed pyramidal tract; its absence does not negative organic disease, as it is absent in lower neuron affections, such as tabes, peripheral neuritis, and infantile paralysis.

Banti's Disease.—A disease characterized by great enlargement of the spleen and anæmia. It is often associated with cirrhosis of the liver.

Basedow's (Graves' or Parry's Disease).—Exophthalmic goitre.

Bazin's Disease.—A tuberculous lesion of the skin of the legs, causing a series of very indolent ulcers, situate usually on the back of the calves.

Bell's Palsy.—Facial paralysis caused by a lesion of the facial nerve after it has left the stylo-mastoid foramen, but a term frequently used to include all facial paralysis of lower neuron type.

Bechterew's (or Mendel's) Sign.—Tapping the dorsum of the foot near cuboid bone causes extension of the toes in health, but flexion in cases of spastic paralysis.

Bichat's Pad.—Lobule of fat lying on each cheek in front of parotid gland.

Biernacki's Sign in Tabetic Anæsthesia.—A condition in which the ulnar nerve behind the elbow-joint loses its normal sensitiveness on pressure.

Broca's Speech Centre.—Situated in the posterior part of the third left frontal convolution of the cerebrum.

Brown-Séquard Paralysis.—Paralysis of one side of the body with loss of the sense of position and muscular sense, and often

exalted sense of touch and pain on the same side, with loss of sensation to heat and touch and pain on the opposite side; found in lesions of one lateral half of the spinal cord, such as may be caused by the stab of a knife.

Bryant's Triangle.—A method of measuring the difference of level of the great trochanter of the femur and of the anterior superior iliac spine in cases of dislocation of the femur or fracture of its neck.

Burton's Sign.—The blue line along the edge of the gums, found in chronic lead-poisoning.

Caisson Disease (Diver's Paralysis).—Paralysis said to be caused in divers from injury to the spinal cord from the escape of bubbles of nitrogen into the spinal cord when brought too rapidly from increased to ordinary atmospheric pressure.

Calmette's Reaction.—A test for the presence of tuberculous disease. It is obtained by dropping tuberculin in the eye. If positive, a conjunctivitis occurs within forty-eight hours.

Cammidge's Reaction.—A complicated urine test, which, if positive, points to inflammation and active degenerative changes of the pancreas. Found in acute and chronic pancreatitis.

Charcot-Leyden Crystals.—Slender colourless crystals formed of two hexagonal pyramids joined by their opposing bases, found in asthma.

Charcot-Marie's Disease.—See Tooth's Disease.

Charcot's Joints.—The degenerative arthritis found in cases of tabes and syringomyelia; characterized by painlessness, by great and sudden effusion, and rapid disorganization. Found usually in one joint only, and that the knee, shoulder, or hip.

Cheyne-Stokes Breathing.—A type of respiration seen in the late stages of uræmia, arteriosclerosis, etc.

Chvostek's Sign, or Weiss's Sign.—Contraction of the facial muscles, obtained by tapping them, significant of tetany, neurasthenia, and hysteria.

Corrigan's Line.—The red-brown line of the gums found in chronic copper-poisoning.

Corrigan's Pulse.—The water-hammer pulse of aortic regurgitation.

Curschmann's Spirals.—In asthma, delicate spiral mucous filaments wound round a central core of epithelial cells, leucocytes, and Charcot-Leyden crystals.

Dalrymple's Sign.—Increased widening of palpebral fissure due to retraction of upper eyelid.

Dietl's Crisis.—Attacks of acute pain in the abdomen, met with in some cases of movable kidney.

Duchenne's Palsy.—An upper-arm palsy, caused by injury at birth, and very similar to Erb's palsy.

Dupuytren's Contraction.—Thickening and contraction of the palmar fascia, gradually pulling and fixing down the fingers.

Erb's Palsy.—A palsy involving the deltoid, biceps, supinator longus, and brachialis anticus, often the supinator brevis, sometimes the supraspinatus and infraspinatus, rarely the subscapularis. It follows injury to the brachial cord derived from the fifth and sixth cervical nerves. In adults it is caused sometimes by heavy blows on the shoulder; it is often associated with loss of sensation, and is persistent. In infants it may be caused by pulling on the neck during labour, and is often temporary.

Fauchard's Disease.—See Rigg's Disease.

Fitz's Syndrome.—Epigastric pain, vomiting, and collapse, in acute pancreatitis, appearing suddenly, and followed within twenty-four hours by tympanites with circumscribed epigastric swelling.

Flint's Murmur.—A presystolic apical murmur indicative, not of mitral stenosis, but of aortic regurgitation and dilatation of the left ventricle.

Foi's Sign.—The patient's toes are grasped by the observer's hand and firmly flexed while the foot is maintained at a right angle with the leg. The patient's knee flexes, and the leg is

thereby drawn up. Indicates organic interference with the function of the crossed pyramidal tracts.

Friedreich's Ataxia.—An hereditary and family ataxia, associated with talipes equino-varus and nystagmus.

Friedreich's Disease (Paramyoclonus Multiplex).—An hereditary disease, characterized by rapid clonic contractions of the extremities, either continuous or coming on in paroxysms.

Friedreich's Sign.—The diastolic collapse of the jugular vein found in adherent pericardium.

Gellé's Test for Hearing.—When the normal pressure on the tympanum is increased by means of a Siegle's apparatus or Politzer's bag, the power of hearing is diminished. If it remains unaltered, it signifies fixation of the stapes, as found in otosclerosis.

Gordon's Sign.—Extensor response of the big toe sometimes obtained on encircling the leg with both hands and firmly squeezing the calf muscles. Of the same significance as Babinski's sign.

Grasset and Gaussel's Phenomenon.—The patient who has complete hemiplegia will, when asked to raise the lower limbs simultaneously from the surface when lying on his back, be unable to do so; he is only able to lift either limb separately, for in organic hemiplegia he is unable to fix the pelvis.

Graves' Disease.—See Basedow's Disease.

Head's Areas.—The areas of skin in which referred pain, due to inflammation of underlying organs, is felt.

Heberden's Nodes.—The nodules which form at the bases of the distal phalanges of the fingers in chronic arthritis deformans.

Hegar's Sign (of Pregnancy).—A sign of early pregnancy, in which the softening of the upper part of the cervix makes the uterus feel as if the body and cervix were separated from one another. It is one of the earliest signs, and can be obtained about the seventh week.

Herm Kreysig's Sign.—Sinking of the intercostal spaces synchronously with the cardiac systole; a sign of adhesion from pericarditis.

Hippus.—A rhythmical contraction and dilatation of the pupil, which is sometimes said to be produced by painful stimuli. Experiments which were made for me in the outpatient department of a hospital, however, prove that the condition has no bearing upon the presence or absence of pain.

Holmgren's Test for Colour - Blindness.—This consists in giving the patient a number of various shades of coloured skeins of wool, which he is asked to match. A test which is obsolete.

Huntington's Chorea.—An hereditary form of chorea, beginning after middle life, characterized by choreic movements, ataxy, and mental changes.

Hutchinson's Teeth.—Peg-shaped, permanent upper central incisor teeth, notched at the cutting-edge, and found in congenital syphilis.

Jacksonian Epilepsy.—A form of epilepsy in which the fit commences with localizing signs, and in which there is also present evidence of a gross lesion of the brain.

Jaw-Jerk Test.—A reflex contraction of the biting muscles, produced by suddenly depressing the lower jaw when the mouth is open. Rarely found in health, but increased in lateral sclerosis.

Jendrassik's Method of Reinforcement.—This method of reinforcing the knee-jerk is performed by asking the patient to look up at the ceiling, with the fingers of one hand folded into the flexed fingers of the other; he is then told suddenly to pull one hand against the other, whilst the percussion hammer falls.

Kernig's Sign.—Inability to extend fully the leg on the thigh when the hip is flexed on the abdomen; indicative of meningitis.

Klumpke's Palsy.—This involves the flexors of the wrist and fingers, and the intrinsic muscles of the hand, with sensory and oculo-pupillary disturbances. It follows injury to the trunk of the brachial plexus, formed by the seventh and eighth cervical and first dorsal nerves.

Koplik's Spots.—The small white buccal spots found at the bases of the molar teeth, and sometimes on the mucous membrane of the lips, about the second day of measles.

Korsakoff's Syndrome of Psychosis.—The accumulation of a number of mental symptoms associated with peripheral neuritis. The condition is most frequently produced by alcohol, but other causes, such as phthisis, diabetes, chronic lead, arsenic, or mercury poisoning, account for probably two-fifths of the cases. The characteristic mental symptoms are—Mistaken identities, imperception, emotionalism, disturbances of memory, especially for recent events. There are no fixed delusions. There is lack of judgment and the critical faculty. I had a troublesome case of which the details are as follows:

G. C. had an accident; he had obviously recovered, but obtained an award in his favour. The disease, however, was subsequently recognized by the superintendent of a lunatic asylum into which the man drifted whilst steps were being taken for a review of the arbitration proceedings. During the first arbitration proceedings I stated in the witness-box that I believed alcohol was the probable origin of the workman's complaint.

Kuessmaul's Coma.—Coma in diabetes due to acidosis; often a terminal symptom.

Landouzy-Déjérine Disease.—A primary muscular atrophy involving the muscles of the face, shoulder, and upper arm.

Landry's Paralysis.—An acute spreading paralysis, beginning in the legs, and eventually involving all the muscles of the body, including at last those of respiration, but without sensory manifestations.

Lasègue's Symptom (or Nothnagel's "Seelenlähmung").— The patient with an anæsthetic limb cannot move it when his eyes are closed, but is able to do so when the eyes are open and he looks at it.

Laufenauer's Method of Reinforcement.—This is performed by instructing the patient to sit with the soles of his feet flat on the ground. He is then told to grasp the upper arm of the examiner, and suddenly told to squeeze it, when the percussion hammer is suddenly applied to the ligamentum patellæ.

Leber's Disease.—A rare condition of optic atrophy, usually transmitted by females and inherited by males.

Little's Disease.—A term applied to slightly marked cases of cerebral diplegia in young children, in which there are moderate weakness and rigidity of the legs.

Ludwig's Angina.—An acute, dangerous, spreading cellulitis of the neck, often associated with some cedema of the larynx, and due to a deep-seated form of suppuration.

Luetin Test.—This is a vaccination test for syphilis, similar to Von Pirquet's test for tubercle.

McBurney's Point.—A point $1\frac{1}{2}$ to 2 inches from the anterior superior iliac spine in the direction of the umbilicus indicates the position of the appendix.

MacEwen's Sign.—Increased resonance on percussion 2 inches behind junction of frontal, parietal and temporal bones, indicative of abscess of the brain or internal hydrocephalus.

Marcus Gunn's Phenomenon.—When the patient is asked to close the affected eye, and then to open it, the mouth involuntarily opens with it. This is due to a congenital connection between the intracranial part of the third nerve (levator palpebræ superioris) and the motor part of the fifth nerve (internal pterygoid).

Ménière's Disease.—Vertigo due to disease of the labyrinth, but often used to include all forms of aural vertigo.

Morvan's Disease.—A painless whitlow the result of trophic nerve change; most frequently seen in syringomyelia.

Myotatic Irritability.—In enfeebled conditions a short, sharp tap over the skin causes a reflex contraction of the underlying muscle, with a consequent transient swelling of the skin.

Nélaton's Line.—A line drawn from the anterior superior spine of the ilium to the most prominent part of the tuberosity of the ischium. The trochanter is always found above this line in dislocation of the femur backwards.

Nothnagel's "Seelenlähmung."—See Lasegue's Symptom.

Oppenheim's Reflex.—This is found when firm pressure with a hard substance, such as a pencil, is applied immediately behind the postero-internal border of the tibia, from above downwards, producing the extensor movement of the great toe known as Babinski's sign.

Opsonic Index.—A fraction expressing the relative (measured) resistance of a patient to a particular organism as compared with that of a normal person. For example, if a mixture of (1) white blood-cells, (2) patient's blood-serum; (3) tubercle bacilli, are incubated fifteen minutes at 37° C., it will be found after staining and examining that, say, 100 cells have taken up, say, 1,000 bacilli. If, now, the same thing is done, except that for the patient's blood-serum is substituted the serum of a known normal person, or a mixture of serum from healthy people, it will be found that perhaps 1,200 bacilli have been taken up. The patient's opsonic index of the tubercle bacillus is therefore $\frac{10.00}{10.00}$ —i.e., 0.83.

Osler's Spots or Sign.—Minute painful erythematous spots occurring on hands and feet, indicative of chronic or subacute malignant endocarditis.

Parkinson's Disease.—Paralysis agitans.

Parrot's Nodes.—The thickening of the bones of the skull round the anterior fontanelle found in inherited syphilis.

Parry's Disease.—See Basedow's Disease.

Pawlik's Grip.—In diagnosing the presentation of the fœtus, the hands are pressed deeply down into the pelvis to feel for the head. This is known as "Pawlik's grip."

Pottenger's Sign.—Rigidity of the muscles of the chest wall when the finger-tips are gently passed over the intercostal spaces in pleurisy and pneumonia.

Pott's Disease.—Caries of the spine.

Raynaud's Disease.—An affection of the fingers, toes, and sometimes nose and ears, due to spasm of the vessels, in some cases proceeding to gangrene of the parts affected.

Recklinghausen's Disease.—A condition in which neurofibromatous growths are found on the cutaneous nerves, associated with pigmentary deposits in the skin.

Rigg's Disease, or Fauchard's Disease.—Another name for pyorrhœa alveolaris. A pyogenic affection due to spread of septic infection to the tooth-roots. The teeth are thereby loosened in their sockets, the gums are diseased, bleed easily, and become detached from the teeth, and the breath is foul.

Rinne's Test for Hearing.—This depends on the fact that in the normal ear a tuning-fork can be heard in front of the meatus after it has ceased to be audible when applied to the mastoid. If this is not the case, it points to obstructive deafness—i.e., to a condition in which bone-conduction is better than airconduction.

Romberg's Sign.—The swaying and unsteadiness of the body when the eyes are closed, and the feet placed close together. Seen in tabes and some other degenerative diseases of the spinal cord. Often simulated.

Rovsing's Sign.—In cases of appendicitis pain will be felt at McBurney's point when pressure is made over the descending colon.

St. Vitus's Dance.—Chorea.

Skodaïc Resonance.—The area of hyper-resonance near the apex in some cases of pleuritic effusion and basal pneumonia.

Stellwag's Sign.—Incompleteness and diminished frequency of winking of eyelids.

Stereo-Gnostic Sense.—This is a term given to the capacity or otherwise of appreciating the deep muscular sense in the hand. The test is applied by asking the patient to shut his eyes, and a coin, pencil, or other object, is put in his hand, and he is told to enclose it in his palm and say what it is. Faulty appreciation is due to abnormalities in the deep muscular sense.

Still's Disease.—A form of osteo-arthritis found in children.

Sydenham's Chorea.—Rheumatic chorea.

Tabetic Athetosis.—This is a condition in which a patient suffering from locomotor ataxia, when asked to hold out his hands, involuntarily moves them from his want of appreciation of position in space.

Tache Cérébrale.—The red line produced by drawing the finger-nail over the skin in some cases of meningitis.

Tooth's Disease, or Charcot-Marie's Disease.—The name given to the peroneal type of muscular atrophy.

Trousseau's Sign.—The production of paroxysmal muscular contractions by pinching the nerve or bloodvessels of a limb; found in tetany.

Typhoid Spine.—Lumbar pain and rigidity coming on in first fourteen days of typhoid fever always gets well, but may last a year. Pyrexia is common. Reflexes may be abolished. It is due to a mild infective spondylitis.

Vincent's Angina.—A severe form of sore throat due to a spirillum and a long fusiform bacillus (6 to 12 μ) which stain with methylene blue, but decolorize with Gram's stain.

Volkmann's Contracture.—This is the contracted, paralyzed state of wrist and fingers caused by the too long and too tight application of splints.

Von Graefe's Sign.—Failure of the upper lid to follow the downward movement of the eye when the patient looks to the floor, so that a line of sclerotic is seen between the cornea and the upper lid; found in exophthalmic goitre.

Von Pirquet's Reaction.—A cutaneous reaction obtained by vaccinating the skin with tuberculin. For purposes of comparison, an adjacent portion of skin is vaccinated with normal saline. A positive reaction is shown by the occurrence of vesicles and erythematous blush, and is indicative of the presence of tubercle in the body.

Wassermann's Test.—A complicated serum reaction which, if positive, indicates the presence of syphilis.

Weber's Test for Hearing.—This depends on the fact that if a tuning-fork is applied to the middle of the forehead it should be heard equally in both ears, but in cases of obstructive deafness it is heard more loudly in the deaf ear.

Weil's Disease.—A severe infective form of jaundice which occurs in epidemics.

Weiss's Sign.—Same as Chvostek's sign.

Werlhof's Symptom.—A severe form of hæmorrhagic purpura with petechiæ on the skin, and often internal hæmorrhages.

Wernicke's Zone.—A zone of the cerebrum comprised by the supramarginal convolution, angular gyrus, and bases of the

first and second temporal convolutions. Thought by some to be affected by a lesion in cases of aphasia in which there is inability to understand spoken words.

Westphal's Sign.—A name for the ordinary patellar tendon reflex or knee-jerk.

Widal's Test.—The agglutination-test given by the blood of patients suffering from enteric fever; obtainable from the twelfth day onwards.

Winckel's Disease.—An epidemic form of hæmoglobinuria occurring in infants during first ten days after birth. It is a septic disease and very fatal.

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