

REVIEWS OF  
BRITISH AND FOREIGN LITERATURE.

---

*A Treatise on Aphasia and other Speech Defects.* By H. CHARLTON BASTIAN, M.A., M.D.Lond., F.R.S. London: H. K. Lewis. 1898.

For upwards of a quarter of a century, Dr. Bastian has been a fertile contributor to neurological literature, and his works bear the stamp of the eminent psychologist, as well as that of the accomplished physician. Everything that he has written has been well worthy of a careful and attentive perusal, and his recent work on "Aphasia and other Speech Defects" forms no exception to the truth of the above statement; it is, however, a work to which it is impossible to do justice in a short notice, such as the exigencies of a journal permit of; in fact, it is a work quite *sui generis*, which does not easily lend itself to a review, but which must be read in its entirety to be appreciated as it deserves.

Perhaps no subject in the whole range of neuropathology has engrossed so large a share of the attention, not only of the medical profession, but of scientific men generally in all parts of the world, as the localisation of the faculty of speech, and the causes which interfere with the outward manifestation of this faculty; moreover, the greatest possible diversity of opinion has prevailed upon certain points at issue, and we quite agree with Dr. Bastian when he says: "The literature of the subject is enormous, and could not be dealt with in anything like a complete manner; still, I have striven to look at this complicated subject as a whole, and, while submitting many prevailing doctrines to a critical examination, I have interwoven therewith an exposition of the views which, after long study, I have myself been led to entertain."

With a view of weighing the value of the theoretical and speculative opinions prevalent, in reference to the subject he is treating, Dr. Bastian cites a number of typical cases, some of which have come under his own personal observation, whilst others have been culled from various sources, the authorship of which is in each case duly acknowledged.

After a few introductory remarks, in reference to the gradual development of speech during infantile life, the first chapter is devoted to the consideration of the processes on which the power of speaking, reading, and writing depends. In this section of the work, the author treats of localisation, and recognises four centres in the cerebral cortex which are concerned in the production of articulate language. Two of these centres he regards as excito-motor—the glosso-kinæsthetic which presides over

articulate speech, and the cheiro-kinæsthetic which presides over written language; the third and fourth centres are the auditory and visual centres respectively. The second chapter, which treats of the "Relations existing between Thought and Language," is one of extreme interest, and contains an analysis of the views of Bain, James Mill, Max Müller, and others.

In the third and eight following chapters, the different varieties of defects of speech are considered, and these form the most practical part of the treatise, a mere analysis of which the exigencies of space will not admit of; we will merely add that this section is illustrated by a number of typical clinical cases, many of which were observed by the author.

In an interesting chapter devoted to "Functional Disabilities in the "Glosso-kinæsthetic Centre," the author deals with a class of cases where the disability is only temporary, and where the brief duration and the complete recovery make it impossible that the defect can be due to any structural lesion. The principal causative conditions associated with this functional disability are considered under the heads of minute embolisms, spasm of vessels, narcotic and other poisons introduced from without, poisons engendered within the system, epileptiform convulsions, fright, and other powerful emotions; reflex irritation, hysteria, and thrombosis; under the latter head the well-known and classical case of Professor Rostan is given, as cited by Trousseau.

In considering disease in the auditory and visual word centres, the author objects to the term sensory aphasia as applied to such cases, in contradistinction to those produced by damage to Broca's region, which is commonly spoken of as motor aphasia; and he adds that this mode of distinguishing these defects is not in accordance with his views, as he holds the latter (that is, Broca's region) to be as much a sensory region of the brain as the former. We gladly take this opportunity of correcting the prevailing idea that Wernicke was the first to call attention to the form of sensory aphasia known as word-deafness and word-blindness. Dr. Bastian probably cares nothing about priority in this matter, but it is clear that he recognised these sensory defects some years before the publication of Wernicke's work, a statement that can be verified by referring to his article on the "Various Forms of Loss of Speech in Cerebral Disease," published in the *Brit. and For. Med.-Chir. Rev.* for April 1869.

Mirror-writing, amusia, or defects of the musical faculty, in the form of tone-blindness and tone-deafness, are briefly noticed, as also amimia, or the loss of the power of producing and understanding pantomime, as conveyed by gestures, alteration in facial expression, etc. We think it a pity that Dr. Bastian dismissed this feature of the subject in such a summary manner. It is important not to confound the faculty of *articulate* language with the *general* faculty of language, for articulate speech is by no means the only medium of thought and expression; for, in addition to it, nature has endowed the human race with other interpreters of what is passing in the mind, namely, the voice, the countenance and gesture, of which the most important is gesture, which is the natural language of the deaf and dumb, and which is adopted amongst all nations, when, from ignorance of the language of a foreign race, they are obliged to communicate without an interpreter. Numerous instances

are recorded by various authors of the advantages of gesture, an art in which the professional mimes of Greece and Rome especially excelled. Our great national dramatist was fully sensible of the power of natural language, as shown by the following passage:—

“There’s language in her eye, her cheek, her lip,  
Nay, her foot speaks, her wanton spirits look out  
At every joint and motive of her body.”

There cannot be a doubt that the study of the natural language of voice, physiognomy, and gesture has not received that attention which its importance deserves, and we regret that Dr. Bastian has not treated this part of his subject at greater length, as disturbances of the various forms of natural language add a gravity to a case of motor aphasia, and a study of these defects is an important aid to diagnosis and prognosis.

The capacity for the exercise of civil rights by aphasic patients is considered at some length, and is a question of great interest which is attracting considerable attention just now, as it formed the subject of a discussion at the late annual meeting of the British Medical Association at Edinburgh, arising out of a communication by Sir William Gairdner on the “Testamentary Capacity of Aphasics.” Dr. Bastian has discussed this point very minutely, and, whilst admitting that there are many forms of speech defect in which it would be quite possible for a patient afflicted with aphasia to make a valid will, he summarises his views by saying: “There are three special classes of cases in which will-making would be attended with the greatest difficulty, or would be actually impossible—(1) Cases in which complete aphasia and agraphia exist; (2) cases in which complete word-deafness and word-blindness exist; (3) cases of total aphasia in which these two classes of defect are met with in the same individual.”

It must be recognised that aphasia does not necessarily entail testamentary incompetency or inability to discharge civil or social functions; in fact, wills or other legal documents should, as a rule, be recognised as valid when the parties concerned understand fully what is put before them, and can express assent or dissent with certainty, whether by articulate, written, or gesture language; for, as Maudsley has observed, “language consists essentially in the establishment of a definite relation between the idea and the sign by which it is outwardly expressed; it may be verbal, vocal, graphic, or mimic.” Our English courts of law evidently take this view, as shown by the fact that a will disposing of a sum of thirty thousand pounds, made by a Norfolk clergyman affected with right hemiplegia and aphasia, and who could neither speak nor write, was held by the President of the Court of Probate to be a valid testamentary document; and he said the will would have been allowed to stand, had it not been for a technical error, namely, that the testator’s mark was not inserted in the right place. The judge evidently took the view that the testator’s signs evidently expressed his testamentary wishes, his gestures answered to rational conceptions, and were external though not oral manifestations of the *verbum mentale*.

In a chapter devoted to diagnosis, the author gives an elaborate scheme for the systematic examination of patients affected with aphasia, based upon the physiological views expressed in this work, adding that, “if we are to form a correct clinical and regional diagnosis, it is highly

desirable to submit all such cases to a complete examination, in accordance with some uniform and definite scheme."

Attention is also called to the benefit that may accrue by judicious surgical interference in cases of traumatic aphasia, and a case is quoted in which a traumatic aphasia was cured by operative measures that were had recourse to several weeks after the original injury.

Dr. Bastian concludes his elaborate and interesting treatise with a chapter on the "Treatment of Speech Defects," in which he says: "We have to look to two distinct sets of indications—first, as to the best means for bringing about functional restitution; and, secondly, when all that is possible has been done in that direction, to do all in our power that may be calculated to further functional compensation."

The work is profusely illustrated with several well-executed lithographic plates, and contains an immense amount of original matter. It is a valuable contribution to the literature of aphasia, and cannot fail to enhance the already high reputation of its author.

FREDERIC BATEMAN.

---

*The Diseases of the Lungs.* By JAMES KINGSTON FOWLER, M.A., M.D., F.R.C.P., and RICKMAN JOHN GODLEE, M.S., F.R.C.S. London: Longmans, Green, & Co. 1898.

This is an excellent work, and contains in manageable compass a large amount of information on lung diseases, and the most recent ideas as to their treatment.

In the old Edinburgh Infirmary a medical practitioner appeared on one occasion with a patient he had had under his care for some time, and about whose condition he was not quite sure. He thought he had some kind of fever, but he had broken or lost his thermometer. The patient was forthwith tapped, and several pints of serum taken from his right pleural cavity. "I might have found that out myself," said his medical adviser afterwards, "if I had made the man take off his shirt."

On another occasion a patient was sent with a letter in which his doctor described his ailment as "a pulsating tumour in the back, which," he added, "the professor will be better able to give a name to than I am."

Trouble in collecting facts, and some trouble in reasoning upon them, are unavoidable in lung diseases, if accurate diagnosis is desired; but, taking this for granted, this book ought to be a great help at arriving at such a result.

A preliminary and well-illustrated chapter on anatomy is given, in which the author adopts Aeby's view of the branching of the bronchii, as against the old view of dichotomous subdivision. In that upon "Physical Diagnosis" the attention given to cardio-pulmonary sounds is worthy of notice. Various conditions are described which may lead to the development of false or exocardial murmurs; and the means by which these may be distinguished from valvular murmurs are pointed out. Elsewhere the qualification of Louis's law as to mitral murmurs in pulmonary tuberculosis is mentioned; chronic valvular lesions occurring in 3.7 per cent. of the Brompton Hospital cases, the mitral valve being most frequently affected (p. 363).