MÉNIÈRE'S ORIGINAL CASE.

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So stealthily has the story (I had nearly written the "myth") of Ménière's original case insinuated itself into our otological literature, that we are all in the habit of looking upon its data, its traditional data, as proved, and have little or no hesitation in basing theories and explanations of various kinds upon them. But it is well to refer occasionally to original sources, and a few months ago I made an attempt to get at Ménière's own account. The result of my efforts was a surprise.

Politzer, whose sources of information are always carefully furnished, refers us to the *Gazette Médicale de Paris* of 1861, and thither I turned, expecting my quest to be soon completed. But the search turned out to be by no means so easy as I had anticipated. To begin with, there were in the sixties two Dr Ménières living, and writing in the *Gazette*. However, that source of confusion was soon settled. P. Ménière, "Doctor at the Imperial Institute for Deaf Mutes at Paris," is our man. But P. Ménière was a most prolific writer, voluminous and discursive, not to say garrulous, with a leaning towards *feuilletons* on such light and trivial topics as the medical knowledge of the Latin poets.

Then, before the reader has gone very far in his perusal of Ménière's writings, he begins to realise that Ménière manifests a tendency to sandwich remarks into his paragraphs just as they occur to him, whether they are strictly germane to the subject in hand, or not. There is little of the French love for order and arrangement in Ménière's style; it is not even always grammatical. So the uneasy suspicion arises that the famous case may, perhaps, lie hidden away in some article on Virgil, Juvenal, or Plautus. It does not, as a matter of fact, but we have to wade through a large number of very long articles before we can assure ourselves that it has not been overlooked.

Politzer is, of course, reliable; and on p. 598 of this volume, under the title, "Observations des Maladies de l'Oreille caracterisées par des Symptômes de Congestion Cérébrale Apoplectiforme," you can learn how Ménière came to apply to clinical medicine the then recent discoveries of the physiologists on the functions of the semicircular canals. He it was, undoubtedly, who first pointed out that vertigo, which had formerly been

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regarded as a forerunner or as an actual symptom of apoplexy, was, in reality, produced by disturbances in the semicircular canals induced by disease.

Furthermore, you will here and elsewhere in the same volume find many descriptions of the common but still mysterious type of case which we all know, quite erroneously, as Ménière's "disease."

But the "case," the famous case of hæmorrhage into, or apoplexy of, the semicircular canals, proved by post-mortem examination—where is it?

A case is mentioned, to be sure, and in order that we may attain to some kind of clear knowledge on the subject, I give a literal translation of Ménière's account, preserving the original punctuation :—

"I have already spoken, a long time ago, of a young girl, who, having travelled by night in winter on the outside of a *diligence*, when she was at a catamenial period, had, in consequence of a considerable cold, complete and sudden deafness. Having been received into the service of M. Chomel she manifested as her chief symptom continual vertigo, the slightest effort to move produced vomiting, and death followed on the fifth day. The necropsy showed that the cerebrum, cerebellum and spinal cord were absolutely exempt from any alteration, but as the patient had become suddenly deaf after having always had perfect hearing, I removed the temporals in order to examine with care what could be the cause of this complete deafness, so rapidly supervening. The sole lesion I found was the semicircular canals filled with a red plastic material, a sort of bloody exudate, of which scarcely any traces were perceived in the vestibule, and which did not exist in the cochlea. The most attentive search has enabled me to establish with all the precision desirable that *the semicircular canals were the only parts of the labyrinth* which showed abnormality, and this consisted, as I have said, in the presence of a plastic lymph replacing the liquid of Cotugno." (Italics not in the original.)

The reader will at once perceive that this is not the original description of Ménière's famous case. He says so himself, indeed. That being so, I had to extend my investigations, passing under review the *Gazette* from 1848 until 1865. But I failed to discover any further traces, and was about to abandon my search in despair, when Mr Powell, Assistant Librarian at

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the Royal Society of Medicine, drew my attention to a German treatise on diseases of the ear by one Kramer, which Ménière, in 1848, had translated into French and had annotated. Now, on p. 397 of this work, the following note by Ménière appears (literal translation, italics not in the original):—

"I have seen a young girl stricken with complete deafness, absolute, in the short space of a few hours. Travelling in an uncovered vehicle she was exposed during the night to a very severe cold, at the time of her periods, and the hearing was lost without the ears having been the seat of pain. Death, which promptly followed, permitted me to dissect carefully the two temporals and I found *in the whole of the labyrinth* a sort of reddish plastic lymph, which seemed the product of an exudation of all the membranous surfaces lining the internal ear. In a similar case, but one which did not end in death until much later (two months after the sudden loss of hearing), I found the same plastic lymph of a clear yellow interspersed with a multitude of little, gray, opaque points, resembling somewhat commencing tuberculous granulations."

It is obvious that these two statements concern one and the same case. Yet there is a serious discrepancy in the descriptions. They were written, it is to be remembered, with an interval of thirteen years between them. In the report in the *Gazette Médicale*, it is stated that the exudate was found only in the canals, whereas in the translation of Kramer's book, the statement made is that it affected the whole labyrinth. Moreover, in this, the earlier publication, there is no mention of the symptom of vertigo.

But what particularly interests us is that Ménière nowhere calls the lesion in the labyrinth a "hæmorrhage," or an "apoplexy." Yet this is the tradition cherished in our text-books. Where did it originate?

It may be, of course, that there is yet another record somewhere of Ménière's case, more fully, more satisfactorily detailed, and that my search has not been wide enough. If so, it ought to be published. Otherwise, our conclusions must, I fear, be much the same as those reached by Ménière himself in another connection, conclusions which, as they seem to hit off the situation with a somewhat ironical precision, I here transcribe in the original:—

"Ces faits, incomplets, tronqués, mal observés, mal décrits

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manquent de tous les caractères propres à entrainer une conviction . . . le malade n'a pas été examiné, on n'a pas des renseignments sur les faits antécédents, on ne décrit pas les symptômes, et quand vient la necropsie, on trouve à peine une déscription satisfaisante des principes lésions organiques."

In a word the facts at our disposal are insufficient to enable us to decide what the lesion was in Ménière's famous case, and thus my opening allusion to it as a myth is not entirely unjustifiable.

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