

Remembering Kinnier Wilson

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I am grateful for the opportunity to pay a tribute to my old and distinguished chief, Samuel Alexander Kinnier Wilson, but deeply regret not being able to attend in person.

For 14 unbroken years I was, in turn, his House Physician, his Registrar, and then his junior colleague on the staff at Kings' and at the National Hospital, Queen Square. During that period I was in very close touch with him.

Do we, I wonder, sufficiently realise today his sheer magnitude in the pantheon of neurology? Memories are short, and circumstances were unpropitious, in that 2 years after Wilson's unexpected and premature death we were at war in 1939. For nearly 6 years the progression of world neurology was severely dislocated, and continuity was snapped. When peace came, many newcomers had never known him. As a survivor of the prewar era, I say with the utmost confidence that in the 1920s and 1930s there were two supreme figures among the world's neurologists, and Kinnier Wilson was one of them. The other was Gordon Holmes.

They were contemporaries at the National Hospital, and to the students and would-be neurologists from all over the world, they were as Gog and Magog. They differed considerably as individuals, as teachers, and as neuroscientists.

Kinnier Wilson was a most unusual person. In his early 30s and while still only a Registrar, he had achieved international fame following the discovery that bears his name. Like all neurologists at that time, he had a deep knowledge of neuroanatomy. He had also a considerable acquaintance with morbid anatomy and with histology, as well as neurophysiology—it was the heyday of Sherrington, remember, in the pre-electric period.

His neurological lore was profound and all-embracing. He was the Marco Polo of the extrapyramidal system—but much more than that. There was no aspect of neurology that was alien to him. A topic that especially intrigued him was epilepsy, and it was fitting that he should have been invited to write the chapter on that subject in Bumke and Foerster's massive textbook of neurology—the only non-German contribution.

Wilson had a remarkable and almost photographic memory. As founding editor of the *Journal of Neurology and Psychopathology*, he was acquainted with the current literature, and he amassed a considerable private library, with bookshelves up to the ceiling and covering each wall of his study.

Surrounded by a galaxy of showmen at the National Hospital, Wilson was a

most stimulating teacher. His ideal forum was not the lecture theatre nor the bedside. He was at his best when seated in an armchair in a small clinic, with a gathering of admiring and devoted pupils around him discussing one particular patient.

Wilson took a detailed clinical history. He did not then proceed to a meticulous clinical examination, but would pick on one physical sign—an asymmetry of the face, perhaps, or an irregular pupil, a quivering muscle, or an unusual deformity of the hand. This would spark off a multitude of questions. Why? Why? Always he was probing, questioning, speculating. He was essentially a seeker; an investigator of startling originality. Wilson would transform the most banal or commonplace neurological symptom or physical sign like an alchemist. To him, everything in neurology was a cornucopia of wonder and fascination. The word most often on his lips during a clinical interview was “fascinating,” “fascinating” accompanied by a characteristic gesture of putting his thumb into the armhole of his waistcoat.

You can, perhaps, understand why it was that whenever I was immersed in some neurological enquiry, I would naturally turn to Kinnier Wilson for advice, or encouragement, or criticism. I never went away unrewarded. Unfailingly, he would shed a penetrating ray of light upon my problem, typically from some unexpected angle. Such help would be given gladly and generously. Wilson was never too busy, for neurology was his whole life—his hobby, his work, and his recreation.

I was not alone in turning to Wilson for enlightenment. C. P. Symonds of Guy’s, I discovered, always did the same, dropping in after dinner at 14 Harley Street.

Wilson was a very critical exponent of neurology. He had a habit of asking what one was doing. Once I smugly told him that I had a paper coming out in *Brain*, dealing with a series of personally observed cases of a rare type of cerebral tumour. “But,” he expostulated, “that’s merely descriptive neurology. Mere Harley Street reporting. Anyone can do that. What one wants to know is not how many, the size, or the shape, but why? Why? What provoked that peculiar type of reaction in that particular person at that moment? That is what you should be telling us.”

To illustrate the sort of man he was, let me tell you of the occasion when Wilson did not show up at one outpatient session. He explained that he had been away giving a BMA lecture. I politely enquired how it went off. “Terrible,” he said. When I asked what went wrong, he said “I hate the North of England, and if there is one city I particularly loathe it is Leeds.” Pressed for more details, he said, “I got there in the afternoon. It wasn’t until nearly seven o’clock that I was offered a glass of sweet sherry. Then at dinner I was seated next to a woman who never stopped talking. Her sole topic was Bernard Shaw, and if there is one person I detest it’s George Bernard Shaw.”

“What about the lecture?” I asked.

“My subject was epilepsy, and you know the sort of material that intrigues me. What is the biological meaning, if any, of the convulsive seizure? What does it

represent? An abrupt release of inhibition? an excitatory phenomenon? neurogenic? or chemically initiated? I hadn't been talking for more than 10 minutes when a voice shouted out from the back, "**Speak up.**"

"What did you do?" I asked.

Wilson said, "I stopped and turned to the Chairman. 'Mr. Chairman', I said, '**I have been lecturing for 25 years, and never before have I been told that my voice does not carry.**' At the end of the talk the Chairman invited questions. There was a long silence, and then someone said 'I would like to ask the specialist from London what dose of the bromides he recommends.' **My dear Critchley, I ask you!**"

Wilson's medical career had been unusual. He qualified at Edinburgh, where he must have been a very able student, for his first resident appointment was the plum job—House Physician to Sir Byrom Bramwell. At that time, university policy did not encourage specialisation, and Bramwell, though deeply interested in neurology, remained a general physician. **Wilson's next step was both bold and rewarding. At that time it was most unusual for young British doctors to seek postgraduate experience outside their medical schools.** For one thing, it was far too risky for an ambitious Registrar to remove his foot even temporarily from the ladder of advancement. **But Wilson, a strongly nationalistic Scot, was venture-some.** He was sufficiently farseeing to cross the Channel and probe the riches of an unfamiliar culture and professional environment. He secured a job as assistant to Pierre Marie, then in charge of the neurological service at the Bicêtre Hospital, Paris. **The effect was dramatic.** Wilson became steeped in the riches of French civilisation. He achieved an easy familiarity with the language and the advantages of a new way of neurological thinking. The clinical brilliance of another world was before him. Pierre Marie was himself surrounded by a group of distinguished figures who became Wilson's lifelong friends—Babinski, Crouzon, Souques, Jean Lhermitte, Charles Foix, Guillain. Little wonder that Wilson became a fervent francophile.

Wilson's next appointment was in London, at the National Hospital, Queen Square, as House Physician. At that time, there were two resident medical officers, and Wilson's colleague was Foster Kennedy.

I found that there was only one physician he consistently admired and looked up to. This was Hughlings Jackson. When Wilson was House Physician at the National Hospital, Jackson had retired, but from time to time he would revisit the hospital and ask the Resident to show him some cases of special interest. These visits were a source of delight to Wilson. He secretly kept a notebook, Boswell-like, in which he recorded everything that took place on these occasions. Jackson's remarks were written down verbatim. Two or three times he showed me the notebook. I would dearly love to know where it is now.

Wilson enjoyed writing, and he wrote well. His style was readily identifiable, for his prose was florid, even flamboyant at times. His text was peppered with polyglot expressions and spiced with turns of phrases. He rated his own literary work high, and he kept a copy of Fowler's *Modern English Usage*, which he

richly annotated with his own comments, criticisms, alterations, emendations, and improvements.

As far as I know, he had few hobbies, if any at all. Neurology was everything to him. He had hardly any outside interests, resembling Hughlings Jackson in this respect. He scorned the theatre, and if he wished to entertain his Resident or another guest, he would take him to a music hall; the earthly pleasures were something he enjoyed. Indeed, he took pleasure in wickedly boasting that with his intellectual attainments his tastes were demotic and anything but precious or cultured.

He did not indulge in the pleasures of the table, even during his time in Paris. However, he had an odd liking for out-of-the-way French liqueurs, not so much for their flavour as for the peculiarity of their names and the curious shape of the bottles. On my frequent visits to Europe between the two wars I would always bring back some exotic addition for Wilson's collection.

I was House Physician to Kinnier Wilson at a time when he was preparing his three Croonian Lectures on what he like to call "the old motor system." In this way, I was privileged to observe his methods of research. Wilson was, of course, not only unsalaried, but he received no financial assistance whatsoever, as did none of us until 1948. Expenses were met by dipping into his own pocket, and Wilson was certainly not a rich man. There was no office at his disposal and he had no technical help of any kind. Of necessity, he was a "do-it-yourself" worker, who carried out his own clinical and pathological microphotography, developing and printing his illustrations single-handedly. He set up his own smoked drum and tambour apparatus and worked behind screens in the hospital wards until late into the night. He had nothing except the inextinguishable fire in his belly to inspire him. What was unique in Wilson was that element of wonder that he detected in every facet of neurology and which he transmitted to others. This gift separated him from all the other giants in neurology.

I wonder how many people today realise that Wilson was the first "pure neurologist" in the United Kingdom? Prior to 1918, neurologists were general physicians who took a particular interest in diseases of the nervous system. When the Great War broke out in 1914, Kings' College Hospital had just moved from its original building off Kingsway to these present premises in Denmark Hill. During that war, Kings' was an Army hospital. When peace was declared, it was wisely decided to make a drastic innovation and institute a number of special departments. Invitations were issued to leading figures in British medicine to leave their prewar jobs to head these departments. Among the invitees was Kinnier Wilson, who at that time was an Assistant Physician on the staff of the Westminster Hospital. In this way, Wilson became the first neurologist in the country. Slowly, the other medical schools followed suit, one of the last to fall into step being the Edinburgh Medical School.

What if Wilson were suddenly to awake from his 50-year sleep and appear among us? I am sure he would be astonished by the impact of scientific advancement and, while approving, I doubt whether he would feel any urge to participate.

He would, I believe, feel warmly about the work being carried out by Professor Marsden and his coworkers. At the same time, I am sure he would be dismayed by the neglect shown by his neurological colleagues in the problems of higher nervous activity, and he would be shocked to find his favourite subjects of aphasia and apraxia being handed over to non-neurological invaders.

And, in turn, what gifts to us would Wilson bear if he were to come back like Rip van Winkle? In the first place, the gift of sheer intellectualism, laced with flashes of brilliant lateral thinking. In the second place, enthusiasm. As was said of Oscar Wilde, he would always “trace under the common thing the hidden grace,” a power he transmitted to those around him.

If medical historians were to meet Kinnier Wilson today, they would, I believe, recognise the inspired thinking of another Francis Galton; the erudition of a 20th century Dr. Casaubon; yes—even another Thomas Willis.