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Comment on 'Kernohan's Notch' by J.M.S. Pearce

Christopher J. Boes Neeraj Kumar Jerry W. Swanson

Department of Neurology, Mayo Clinic College of Medicine,
Rochester, Minn., USA

The authors enjoyed the review of the history of Kernohan's notch written by Dr. Pearce [1]. We would like to point out some inaccuracies and provide additional details that highlight further the contributions of Kernohan and Woltman. Henry Woltman and James Kernohan first published an article on incisura of the crus due to contralateral brain tumor in 1928 [2]. A longer article on the topic with more patients was subsequently published in 1929 by Kernohan and Woltman [3], as cited by Dr. Pearce.

James Kernohan came to the Mayo Clinic in 1922 as a fellow in pathology [4], not 1931 as reported by Dr. Pearce. Kernohan spent his first several months at Mayo studying neuropathology under the tutelage of Woltman, as Woltman was serving as neurologist and neuropathologist at that time. Kernohan joined the staff of the Mayo Clinic in 1925 [4].

Henry Woltman was a professor of neurology at the Mayo Clinic [4], not an associate professor as indicated by Dr. Pearce. Dr. Pearce also commented that 'only little is recorded about Henry Woltman [1]'. This statement requires qualification. Obituaries were published in several journals [5–8], a number of medical texts discuss Woltman's neurological legacy [9–12], a nonmedical text about the life and death of Lou Gehrig discusses Woltman in detail [13], and an article on the history of neurology at the Mayo Clinic highlights his research activities [14].

Henry Woltman came to the Mayo Clinic as a fellow in 1917, after receiving his MD and PhD degrees from the University of Minnesota. He joined the staff of the Mayo Clinic as its second neurologist in 1919. He was chair of the section of neurology at the Mayo Clinic from 1930 to 1954. He was president of the American Neurological Association in 1950, and his contributions to the scientific literature number 149 [10]. In 1918, his doctoral thesis concerning the brain changes associated with pernicious anemia was published in the *Archives of Internal Medicine* [15]. Raymond D. Adams commented subsequently that '[Woltman's] paper contains the largest series and the most complete description of the brain lesions [16]'. The paper was felt to be a landmark in the literature of this disease [10]. In addition to the Kernohan-Woltman notch, Woltman is eponymized in the Moersch-Woltman (stiff-man) syndrome [17, 18] and in Woltman's sign of myxedema [19]. Moersch and Woltman were the first to describe stiff-man syndrome in 1956 [17]. In 1937 and 1938, Kernohan and Woltman were the first to report a case of vasculitis restricted to the peripheral nervous system (nonsystemic vasculitic neuropathy) [20–22].

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Christopher J. Boes, MD
Department of Neurology, Mayo Clinic College of Medicine
200 First Street Southwest
Rochester, MN 55905 (USA)
Tel. +1 507 538 1036, Fax +1 507 266 4419
E-Mail boes.christopher@mayo.edu

Reply

J.M.S. Pearce

Emeritus Consultant Neurologist, Department of Neurology,
Hull Royal Infirmary, and Hull York Medical School, Hull, UK

I am grateful to Drs. Christopher J. Boes, Neeraj Kumar and Jerry W. Swanson for their useful additional data on Woltman, which was most informative.

I apologise for the fact that the short article I wrote was mainly devoted to the discovery of Kernohan's notch and the additional biographical note was subsidiary. The additional publications of Woltman on other topics was not felt to be of interest in this context. A single reference to Woltman was, however, included for those seeking more detail. Unfortunately, the Mayo Clinic website that I examined does not provide ready access to this information.

J.M.S. Pearce
304 Beverley Road
Anlaby, East Yorks HU10 7BG (UK)