

Editorial

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The invitation to write an editorial for the first number of the Canadian Journal of Neurological Sciences is an honor deeply appreciated. In part, this is based upon my pride of ancestry and my early training in Canadian schools and universities (Queen's and University of Manitoba from which I graduated); also, my few years' experience in general practice in Saskatchewan was rewarding. I commend such training, knowing full well it may rarely be undertaken as preparatory to selecting a speciality. At this point I venture to express my personal feelings with regard to practice and practitioners, as based upon a half-century of experience. Specialities and specialists have had their origin from general practitioners, and general practice has been and must continue to be recognized as a vitally important base to the entire medical-surgical organization within the profession. This statement suggests a question: is there too much emphasis being given to speciality practice? For this I do not have the answer, but am aware of the tremendous advances that have been made in patient care under the circumstances that have evolved over the years.

To return to the relation of this to the neurosciences: in university hospitals and some other large hospitals, and also in group practices, the formation of clinical neuroscience units is being given attention. Such a unit could include one or more neurologists, neurosurgeons, neuro-radiologists, ophthalmologists and otolaryngologists with a particular interest

relating to involvement of the central nervous system and, similarly qualified psychiatrists and geneticists. In many existing hospitals it is impractical that a single area be given such a group of clinicians and their associated basic-research workers. The essential benefits of such unit practice fortunately are being obtained in many institutions within the unit and in cooperation with other departments.

What I now write as a neuro-ophthalmologist expresses my philosophy; it has previously been well stated, in my opinion, in the preface to *Clinical Neuro-Ophthalmology* by Walsh and Hoyt (1969). "We qualify only as clinicians aware of some of what has been and is being done in fields other than our own. We regard neuro-ophthalmology as a special field of endeavor or discipline but not as a sub-speciality. In our respective institutions, neuro-ophthalmology has become a bridge which serves to integrate many areas of clinical medicine and research, particularly the neurosciences. Neuro-ophthalmology has developed similarly in many institutions within this country (and in other countries) and has paralleled the development of other such disciplines within modern medicine: pediatric neurology, neuro-otology and medical genetics, to name only a few. Ultimately these special fields play a vital role in the modern medical school — a comprehensive cooperation between the clinician and the researcher without regard to the traditional departmental subdivisions of the faculty." Collaboration within hospital units and between them is essential as regards patient care.

The more than four decades I have been in the Wilmer Ophthalmological Institute of the Johns Hopkins Hospital must influence what I shall remark

here. During that time I have enjoyed collaborating with Canadian colleagues. I am proud of those who have worked with me and now are contributing to neuro-ophthalmology in Canada.

I admire the courage and zeal of those colleagues who are undertaking the labors inherent to the publication of a new journal when many such relating to the neurosciences are presently available from over much of the world. There is good reason to predict that this venture will be an outstanding addition to what is presently available, for a reason now to be stated.

The commanding reason for welcoming the new journal is that it has a notable objective: combining in each issue clinical and relevant basic-science contributions. This dual purpose must be rewarding for clinicians and basic researchers alike. It serves to stimulate mutual effort, revive appreciation of what has been achieved in the past, and provide integration of information presently available. Undoubtedly attention will be given to the significance of central nervous system symptomatology important in other bodily involvements. This objective places a great responsibility on the editorial board, the associate editors, and finally on the editor himself, Dr. Robert T. Ross, whose shoulders are broad. After having observed the names of the colleagues who have accepted these appointments, undoubtedly the objective as stated will be achieved. Regarding the advisory board, all who have been appointed, with the exception of the last-named, are long-known internationally as authorities.

I eagerly await the first number of the Canadian Journal of Neurological Sciences with papers written in English and in French.

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