course he was elected an associate member of the Institute of Psychoanalysis, London.

In the course of his psychiatric career Catterall served as a registrar at Lancaster Moor Hospital and as a consultant at Hill End Hospital, St Albans. He subsequently returned to Scotland where he was appointed consultant psychiatrist at the Royal Dundee Liff Hospital and Honorary Senior Lecturer in Psychiatry (Psychotherapy) at Dundee University. He also served on the staff of the Scottish Institute of Human Relations. Edinburgh.

Catterall was married and had four children, one son and three daughters.

ALFRED MEYER, Professor Emeritus of Neuropathology in the University of London



Alfred Meyer was born into a leading Jewish family in Krefeld, Germany on 3 February 1895, and died in London on 27 September 1990, aged 95.

Alfred was educated mainly at the Gymnasium in Krefeld. He had always shown an exceptional talent for music, so much so that he began to feel that his future lay in

music until the elite of the Conservatoire in Cologne advised against it. For a short time he read law at Munich before turning to medicine, beginning his studies at Bonn in 1913. In the following summer, however, war had broken out and he immediately volunteered and was allocated to the Medical War Service. His regiment, stationed in France, was bound for the Eastern Front where they arrived in time for an early winter.

He suffered severe privations, and so ill did he become that he was invalided back to Germany. On recovery, he was transferred to Kronstadt in the Balkans where he chanced to meet a Professor of Internal Diseases, also named Meyer, and together they wrote an article on typhus, Alfred's very first paper, which was published in 1918. It was in 1918 also that, while waiting for his demobilisation, he was able to attend a course of lectures on pathology given by the eminent Professor Aschoff from whom he obtained a thorough introduction to academic pathology.

He obtained his MD in 1920 and started work as a voluntary assistant in the University Clinic for Nervous and Mental Diseases whose Director was Professor Alex Westphal. His early publications revealed a particular interest in the organic side of psychiatry, as, for example, his paper on epidemic encephalitis, and his study of Kretschmer's Book, *Body Build and Character*.

He was promoted to *Privatdozent* in 1925 and soon after he was offered the post of second assistant which would involve starting experimental neuropathology. The crucial problem was that Bonn had no available space and the nearest and best laboratories were those at the Kaiser Wilhelm Institute in Munich where Professor Spielmeyer and Dr Spatz were based. Spielmeyer, by far the most outstanding figure in German neuropathology, had been most impressed by Meyer's work and this made it possible for him to spend his annual leave, with a small grant, to work in Munich every year from 1926 to the early thirties.

Meyer's special interest derived from his study of the nature and the localisation of cerebral damage in a man who had died from CO poisoning which, after cranial experimentation, led to the validation of his hypothesis of "selective vulnerability". The work was widely praised, with Spielmeyer writing to Meyer that his findings were original and important.

Meyer was by now a leading neuropathologist but he was aware only too well of the increasing political threat. Hitler was in the ascendant and the Jewish community was subdued and apprehensive.

Put on indefinite leave because of the menace of growing anti-semitism, Dr Meyer left Bonn in September 1933 for London. He went straight to the Maudsley where he was welcomed by Professor Mapother who introduced him to Dr Golla, the head of the laboratories, to whom Professors Spielmeyer and Westphal had written commending him highly. A place was made available for him at once, the one problem being the administrative ban on animal experiment. At first dismayed, Meyer appreciated that his future work lay with the clinico-pathological studies of human disorders of which he had already wide experience and had published a good deal. About this time he became friendly with Professor Sir Wilfrid Le Gros Clark who lectured on anatomy at the hospital; they were destined to meet again on the anatomy of leucotomy.

At the outbreak of war the laboratories were moved to a converted ward in West Park Hospital, Epsom, and Meyer was joined there by Elizabeth Beck, another exile from Germany and a highly trained laboratory scientist. Meyer began to produce papers of first-class importance, showing a particular interest in why certain areas tended to be affected in one disorder and not in others—the problem of "selective vulnerability" again.

In 1945 the laboratories were back at the Maudsley, and in the same year, Meyer, together with Beck, showed in large "celloidin" sections how much could be learned from the planned microscopy

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of the injured frontal lobes together with their sub-cortical connections.

The results of ten years work were published in their classic monograph *Prefrontal Leucotomy and Related Operations: Anatomical Aspects of Success and Failure* (1954). The outstanding success of the anatomical studies is beyond dispute: on the clinical side, only the briefest comment is possible, but one fact does stand out: in the late '40s and the '50s leucotomised brains came to the laboratories all too often; a few years later to see one was a rarity.

Halfway through the monograph Meyer wrote in his reminiscences "that the year 1949 was a milestone in my life". In January he had been appointed Professor of Neuropathology to the Institute of Psychiatry and the Bethlem Royal and the Maudsley Hospitals. An unassuming man, he was clearly delighted by this belated recognition. The second unalloyed joy was his marriage on 18 October to Nina Cohen, who was about to qualify in medicine with already a bent towards psychiatry. The event itself must have seemed to herald a flawless future, but unknown to either of them, lying latent in Alfred Meyer was the imminent onset of Meniere's Disease – an illness that was to last for 40 years – and Nina was to see him through it to the end.

In the meantime the neuropathological laboratories were changing course in order to process the work from the new Neurosurgical Unit, which had recently been built in the grounds of the Maudsley. The Director was to be Murray Falconer and, apart from the routine needs of an active unit, the main theme of research was to be Temporal Lobe Epilepsy (TLE).

A formidable team of experts was assembled led by Sir Charles Symonds, the most senior of neurologists, together with Sir Denis Hill, Professor of Psychiatry who would bring with him his expertise in electroencephalography. Falconer would carry out the neurosurgery while Meyer, who was already familiar with the vast German and English literature on the pathological anatomy of epilepsy, would take overall charge of neuropathology in which he was assisted by Dr (later Professor) John Cavanagh.

The first move of the team was to work out the precise way in which the lobectomy should be done and Meyer and Falconer discussed the details whereby it would be possible for the diagnostic neuropathologist to examine the coronally cut sections – the ideal approach leading to the finding of the lesion – Ammon's horn sclerosis.

Meyer and his colleagues found this abnormality in nearly 50% of specimens (which now amounted to several hundred). Its particular importance is that in many patients the fits stop or occur appreciably less. In other patients mini-malformations, or bizarre small tumours, may be found but the most encouraging results come from the removal of the sclerotic

Ammon's horn. This patterned loss of nerve cells and glial fibrosis had been explained as the result, in a sensitive area, of severe hypoxic episodes or even status epilepticus occurring at birth or in early life. Today, however, this seems too simple an explanation but the phenomenon has served to shift the origin of epileptic activity into the more sophisticated field of experimental workers like Professor John Cavanagh, or Professor Brian Meldrum, or Dr James Brierley with their neurophysiological and neuro-chemical expertise.

The conjoined work on temporal lobe epilepsy had been a remarkable achievement. By now Professor Meyer had consolidated an international, as well as national, reputation and he began to be lionised at the very time that his deafness was an increasing embarrassment. He had managed to keep going as his hearing died away but it was while at dinner following his Henderson Lecture, that, with a guest on each side, he had found himself completely out of touch which ever way he turned. With his usual determination he drove himself on until, in 1956, he felt it was his duty to resign his chair.

In spite of his total deafness, but with the unswerving help of his wife, he wrote some 40 papers on a remarkable range of subjects. Together with Raymond Hierons he wrote several papers on the work and views of Thomas Willis. Equally notable were his journal studies with Eliot Slater on the pathography of musicians, the first of which was devoted to Robert Schumann. But his most remarkable work of individual scholarship, *Historical Aspects of Cerebral Anathomy*, was published in 1971 and received universal critical acclaim.

Alfred Meyer will forever be remembered as an outstanding scholar, a fine musician and the kindest and most thoughtful of friends.

He was elected a Fellow of the College in 1974 and appointed an Honorary Fellow in 1987.

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JOHN DECLAN MORRISSEY, formerly Consultant Psychiatrist, Graylingwell Hospital, Sussex

Dr John Morrissey, who had retired as consultant psychiatrist at Graylingwell Hospital, died suddenly at the age of 73. He studied medicine at the NUI, Dublin; then took his DPM, in 1949 and MD In 1952. He was a Foundation Fellow of the College. After serving as a Flight Lieutenant in the RAF during the war, he was appointed to the psychiatric staff at Graylingwell and as consultant psychiatrist in 1952.

John Morrissey was a talented physician and an outstanding psychiatrist who contributed enormously to Graylingwell's post-war reputation as an innovative mental hospital. He, with Drs Carse