

# 1914

## 1913-1915

The first description of [hypopituitarism](#) was made in [1914](#) by the German physician [Morris Simmonds](#).

The first description of a [chronic subdural hematoma](#) was made in [1658](#) by J.J. Wepfer, followed in 1761 by Morgagni. A possible case was described by Honoré de Balzac in 1840 including its traumatic origin and surgical treatment.

Virchow, in [1857](#), denied a traumatic origin, and gave the name of “pachymeningitis hemorrhagica interna” to this pathology which he explained by inflammatory processes.

The traumatic etiology of chronic subdural hematoma was recognized in the XXth century, especially by Trotter in 1914. Pathophysiology was considered later on in the XXth century.

It was first described by [Rudolf Ludwig Karl Virchow](#), in 1857, as “an internal hemorrhagic pachymeningitis” <sup>1)</sup>.

In [1914](#), Trotter launched the theory of traumatic brain injury and the consecutive lesion of the “bridging veins”, as being the cause of what he called “hemorrhagic subdural cyst” <sup>2)</sup>.

<sup>1)</sup>

Weigel R, Krauss JK, Schmiedek P. Concepts of neurosurgical management of chronic subdural haematoma: historical perspectives. Br J Neurosurg. 2004 Feb;18(1):8-18. PubMed PMID: 15040710.

<sup>2)</sup>

Guénot M. [Chronic subdural hematoma: historical studies]. Neurochirurgie. 2001 Nov;47(5):461-3. French. PubMed PMID: 11915757.

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