

Neurotherapeutics Emergency

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ABSTRACT

Medicine has had a neurological theme throughout its five-thousand year history. The first known practitioner of this art was Imhotep who lived in the time of Pharaoh Djoser in Egypt in the third millennium BCE. Hippocrates, traditionally thought to be “The Father of Medicine”, advocated healthy diet and exercise.

Keywords: Neurological; Diet

INTRODUCTION

Medicine has had a neurological theme throughout its five-thousand year history. The first known practitioner of this art was Imhotep (“the one who comes in peace”) who lived in the time of Pharaoh Djoser in Egypt in the third millennium BCE. According to the Edwin Smith Papyrus, Imhotep could “provide remedies for all diseases”, but we do not have surviving examples of his techniques, including rituals and the summoning of magic. He was considered “a god of medicine”, but there is no evidence that he actually had medical training. None-the-less, he is considered history’s first “scientist”. Two millennia later, in Greece, Pythagoras theorized that the brain was the organ of thought. His religious teachings preceded Christianity by five-hundred years, but were important for the tenet that the soul is eternal (metempsychosis) and is “recycled” until it frees itself through purity of essence. Hippocrates, traditionally thought to be “The Father of Medicine”, advocated healthy diet and exercise, but knew that some patients needed intervention in the form of medicines and physical “handling”. Most of all, Hippocrates was an “observer of sick people, not diseases”. In The Islamic Golden Age of the start of the second millennium CE, Ibn Sina, was a polymath of renown, rendering opinions on the soul and the “Active Intellect”, which approached The Pure Intellect of God. The Active Intellect allowed for illumination which permits the essence of things to become clear, the way that the sun allows us to appreciate color. Shakespeare, whose son-in-law was a physician, was a keen observer of human afflictions and probably described Lewy body disease in “King Lear”. He also characterized the limbic disorder of romantic love in “Romeo and Juliet”. The 17th century was notable for Willis’s

contributions to neuroanatomy, leading to his being known as “The Father of Neuroscience”. He coined the term, “neurologie”. He also described myasthenia gravis, although his paper on this disease was not “discovered” until after the turn of the 20th century. In 1817, Parkinson published “An Essay on The Shaking Palsy”, which later bore his name. Around the same time, Justinus Kerner described “sausage poisoning” (botulism) and studied the toxin, concluding that its mechanism of action involved interruption of signals in the somatic and autonomic motor systems, with lethal effects, even in minute quantities. He even suggested that this “botulinum toxin” might have some therapeutic application, using even more minuscule doses. Nineteenth-century medicine was most notable, however, for the French influence of Jean-Martin Charcot, whose triad of multiple sclerosis (nystagmus, scanning speech and tremor) is still relevant today. Charcot also observed that this disorder was notable for “symptoms on one side and signs on both sides”. He also described “hysterical” illnesses, including early consideration of what has become known as “post-traumatic stress disorder” even though some of those patients, most assuredly, had organic diseases. Joseph Babinski, Charcot’s favorite student, observed that an extensorplantar reflex was indicative of an upper motor neuron lesion and is considered to be the most robust of neurological signs. Babinski also defined the neurobehavioral concepts of anosognosia (denial of illness) and anosodiaphoria (apathy toward illness). Many neurological patients don’t/can’t know and care about their diagnoses, because the organ of insight is the organ affected by the disease process.

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