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Consciousness still a mystery

Baroness Greenfield's (2002) editorial is shaped by the metaphors of empiricism. The brain is a network. The mind is distinct patterns of neural connectivity. Currently, the evidence for such a scenario is limited. Brain connections may, as she says, 'actually reflect experience', but no pattern of connectivity has ever been related to any particular mental state. The alternative hypothesis of functional specialisation merits more than the scant consideration granted in the editorial, given the recent interest in the notion of modularity (Fodor, 1983; Pinker, 1999). Perversely, Greenfield chooses to support her 'network' hypothesis by reference to a study showing regionally localised brain changes in taxi drivers (Maguire *et al*, 2000).

Consciousness is introduced as a dimensional variable quantifying the current extent of this connectivity. Seemingly, the more connected our brains are the more conscious we are. But is this anything more than metaphorical fooling around? She presents no evidence for what a conscious brain state might look like. Where consciousness occurs is surely rather an unimportant issue. The hard question, which Greenfield ignores, is 'How can pain (which hurts so) possibly be the same thing as insensate molecules rushing around in nerve fibres?' (Papineau, 2002). On this our ignorance remains as complete as it ever was.

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One hundred years ago

Ladislav Haskovec and akathisia: 100th anniversary

Akathisia is a syndrome of objective and subjective motor restlessness manifested by an inability to sit or stand still. The patients are distressed and they pace constantly. Today, it is mostly known as a side-effect of antipsychotic medications. However, the phenomenon was observed before the introduction of antipsychotics, and the term 'akathisia' (derived from the Greek 'inability to sit') was coined in 1901 by Ladislav Haskovec, MD. A Czech neuropsychiatrist, Haskovec was born in 1866 and died in 1944.

After graduation from the Charles University School of Medicine in Prague, he spent a year in Paris working with Professor Charcot, the leading neurologist at that time. His original primary interest was neuropathology, but he soon branched out into many other areas. He published on thyroid function, tuberculosis, alcoholism, neuroses, obsessions, mechanisms of consciousness, seizure disorders and heredity. His publications and presentations earned him international recognition and numerous honours in Austria, Czechoslovakia and France. He was appointed full professor at the Charles University in 1919, and served as Dean of the Charles University School of Medicine in 1925–1926.

Throughout his long career, Haskovec was an astute clinician. He coined the term 'akathisia' to describe symptoms he observed in two of his patients. These two case reports were presented at the meeting of the Société de Neurologie in Paris on 7 November 1901 (Haskovec, 1901). (English translations of Haskovec's papers with a commentary were published elsewhere (Berrios, 1995).) The patients were adult males who had a multitude of symptoms including insomnia, vertigo, various aches and pains, and paraesthesias. Both men complained of generalised tremor; apparently this was not observed during examination. The prominent symptom in both patients was that they were unable to remain sitting down for any length of time. When sitting, at least one of the patients had a sensation in his legs as if he were jumping (today, a clinician would perhaps describe this sensation as a feeling of restlessness). The movements were described as involuntary by the patients who actually wanted to stop them; one of them tried to hang on to a table to prevent himself from getting up. After jumping up from the sitting position, the patient kept walking around, and conversation with him was only possible when he was moving. Gait was normal in both patients; neurological examination revealed no clear abnormalities, and there were no signs of psychosis.

Haskovec tentatively diagnosed one man with 'hysteria' and the other one with 'neurasthenia'. He speculated about underlying mechanisms along the lines of 'hyperexcitability' or 'fatigue' of various brain structures, using theoretical concepts of his era.

The report elicited discussions with French neurologists who accepted the new term but wanted to apply it differently from its originator (Haskovec, 1903). Nevertheless, today's phenomenology of akathisia remains essentially the same as described by Haskovec 100 years ago. Neurology textbooks of the pre-antipsychotic era described akathisia in Parkinsonian patients, and the importance of the term has further increased after the introduction of antipsychotics in the 1950s. Neurologists and psychiatrists are indebted to Haskovec for his astute observations.

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