

Interesting Facts And Personalities In Medical History

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THE practical and cultural value of the study of the history of medicine has been definitely established by medical educators. However, several factors have militated against such a development, particularly the fact that the medical student shies at the various authoritative books devoted to the subject, frightened by their bulk in contrast with the small amount of free time at his disposal. With this in mind, I wish to present several interesting items gleaned from the pages of a few of these volumes.

Those of us who in recent months have been arguing over the merits of the various types of stethoscopes might give a thought to Laënnec, the French surgeon, who in 1819 made his name immortal by inventing the stethoscope. By describing what could be heard through a simple role of paper, with one end applied to the chest, Laënnec not only set forth the principles of the stethoscope but also analyzed the various signs elicited with the corresponding anatomical chest lesion. He was the originator of such familiar terms in physical diagnosis as "aegophony", "pectoriloquoy", the sonorous and sibillant "rales" and other well recognized signs of moment in the exploration of the chest.

While we're on the subject of physical diagnosis we must not forget Auenbrugger, who was considered the leading member of the old Vienna School. He interested himself in the problem of percussion, noting over a period of years, the relations existing between diseases of the chest and the resultant alterations in sound on tapping it. He carefully checked his conclusions in the autopsy chamber, and then introduced his discovery of percussion in 1761. His method consisted in lightly striking the chest with the tips of the four fingers and noting the variations of pitch and tone as evidences of underlying disease. However, Auenbrugger was not a propagandist but just a sweet-tempered, home-loving man of science, who cared more for the society of his beautiful wife and good music than for notoriety or posthumous reputation. Consequently, due to the snubbing and ridicule of this great discovery by his colleagues, among them de Haen, Sprengel and Vogel, percussion was never adopted as a practical bedside procedure until fifty years later, when it was revived by Corvisart.

Among the humanitarians, the Frenchman Pinel stands high in medical history as the first to treat the insane in a humane manner. At the

risk of his own life and liberty, he initiated the reforms of striking off their chains, placing them in hospitals under lenient physicians and doing away with the abuses of drugging and blood-letting to which they were subjected.

Ranking with the greats in medicine is Richard Bright, leading London consultant in his day. His "Reports of Medical Cases" (1827), containing his original description of essential nephritis with its epoch-making distinction between cardiac and renal dropsy, at once established his reputation all over Europe, due to its immense importance in medical practice. His conclusions were arrived at by a keen sense of observation and correlation of the symptoms with "the peculiar inflammation of the kidneys which he found in so many post-mortems".

"Bright could not theorize," says his biographer Wilks, "but he could see, and we are struck with astonishment at his powers of observation, as he photographed pictures of diseases for the study of posterity."

A Rabelasian spirit in medicine was Philippe Ricord, outstanding venereal authority, who gave us the classical division of lues into its primary, secondary and tertiary stages, and also demonstrated the Hunterian error of regarding syphilis and gonorrhoea as one. He was described by Dr. Oliver Wendell Holmes as "the Voltaire of pelvic literature—a skeptic as to the morality of the race in general, who would have submitted Diana to treatment with his mineral specifics and ordered a course of blue pills for the vestal virgins."

In an obstetric ward of the Allgemeine Krankenhaus of Vienna, child-birth was attended by a maternal mortality rate of ten per cent. An assistant in this particular ward, in which women begged in tears not to be taken into, named Semmelweis, conceived the idea that the high death rate was due to uncleanness, and set about studying the question. The simple precautions of cleanliness reduced the death rate to a little over one per cent. His paper on "The Etiology, Nature and Prophylaxis of Puerperal Fever" (1861) is one of medicine's most precious classics, and yet Semmelweis was so ridiculed, hounded and persecuted by the older established obstetricians of Vienna—among them Scanzoni and Carl Braun—that his mental balance snapped and death was his reward.

Medical students generally consider theirs a plight most time consuming. However, the title of "Hardest Working Man in Medicine", I believe, should go to Sir Astley Cooper, the most popular surgical consultant of his day in London. Besides his outstanding work on hernia

and pioneering the surgery of the vascular system, his life was a demonstration of the truth of Sir William Osler's preachment that work is the master word in medicine. The physical strain under which Cooper worked seems to have been beyond the human breaking point. His daily routine was as follows:

"To rise at six, dissect until eight, breakfast on two hot rolls and tea, see poor patients until one, when he would drive to Guy's Hospital to visit the wards; at two he lectured on anatomy at St. Thomas' Hospital, after which he went through the dissecting rooms with the students and visited or operated on private patients until seven: he would then bolt his dinner, snatch forty winks of sleep and start out again for a possible clinical lecture, with another round of visits until midnight!" (Pity his poor wife! !)

Nothnagel of Vienna, brilliant internist, made many excellent contributions to neurology, therapeutics and cerebral disease. But what he will be chiefly remembered for is a most unusual accomplishment. Being a victim of angina pectoris, he remained a scientist to the end, when he stoically set down his own symptoms in writing just before his death.

Prominent clinician and pathologist at Guy's Hospital was Sir William Gull. This gentleman whom Garrison calls "the greatest practitioner of his time, Napoleonic in appearance, witty, genial and a beautiful lecturer" left his mark with his numerous clever epigrams. Some of these often quoted are:

"Savages explain, science investigates."

"You are a healthy man out of health," intended to soothe a troublesome hypochondriac.

"The road to medical education," he said, "is through the Hunterian Museum and not through an apothecaries shop."

Perhaps his most enjoyable achievement was his accumulation of 344,000 pounds sterling, which Garrison claims is almost unprecedented in the history of medicine.

A claim to fame of a different character is presented by a Scotsman, Robert Liston, a most skilful and brilliant operator of his time. It is written as fact that he was possessed of such Herculean strength that he could amputate a thigh with the aid of one assistant, while compressing the artery with his left hand and doing all the sawing and cutting with his right. (Attention Mr. "Believe it or not" Ripley!)

Peculiar circumstances surround the name of Robert Knox, who will go down in medical history not as the fine and scientific anatomist that he

was, but rather as the one involved in a body snatching scandal that rocked Scotland and England in 1827. At this time there were no public regulations to supply dissecting material for teaching purposes and the needs of the large anatomy classes were met by surreptitious methods. Body-snatching and even murder were rife as bodies were bought and sold. One of these bodies discovered in Knox's room resulted in all Edinburgh going wild on the instant, and Knox was mobbed by the horrified populace, vituperated by press and pulpit and threatened with hanging. He finally ended up in undeserved disrepute. At least one good reform resulted from this episode when "Warburton's Anatomy Act of 1832" was passed, which provided that all unclaimed bodies should, under proper conditions, go to the medical schools.

In conclusion, is presented an inspiring success story marked by perseverance and the courage to pursue an ideal in the face of ridicule. Duchenne, whose father desired that he should become a sailor, devoted his entire life to neurology instead. He had a very peculiar method of prosecuting his studies. A strange, sauntering, mariner-like figure, he haunted all the larger Parisian hospitals from day to day delving into case-histories, holding offhand arguments with the internes and physicians-in-chief, who frequently laughed at him for his pains, and following interesting cases from hospital to hospital, even at his own expense. All this was done in an unconventional and eccentric way, which at first laid him open to suspicion and exposed him to snubs. However, "the sincerity of the man, his transparent honesty, and his unselfish devotion to science for itself", soon broke down opposition, and, in the end, when his reputation was made, he was greeted everywhere with the warmest welcome.

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