Society Reports

CAMBRIDGE UNIVERSITY HISTORY OF MEDICINE SOCIETY

AT a meeting of the society held on 29 October 1957 Dr. Raymond Williamson read a paper on 'Sir Busick Harwood, Professor of Anatomy and Physician to Addenbrooke's Hospital'.

Busick Harwood was appointed Professor of Anatomy and Physician to Addenbrooke's Hospital, Cambridge, in 1785 and Professor of Physick in Downing College in 1788. He was knighted in 1806. Most writers on Harwood have based their opinion of him on the stories told by his contemporary Henry Gunning, who considered that Harwood was 'profligate and licentious in the extreme'. For his professional work Harwood deserves more credit than he has so far received. For almost thirty years he gave regular courses of lectures on anatomy. At first on human anatomy, then on comparative anatomy and finally on the philosophy of natural history and the comparative structure of plants and animals. His lectures were up to date and under constant revision. He was greatly influenced by John Hunter, and he made use of a large collection of osteological and spirit specimens in his teaching. The *Descriptive Catalogue* of his collection of 297 spirit specimens published in 1803 is one of the first of such catalogues to be published in this country. His lectures were occasionally illustrated by experiments, the most popular was the transfusion of blood from a sheep to a dog. He expressed the opinion that blood transfusion should be tried 'whenever a patient is in so weak and languid a state from want of blood that no other process with which we are acquainted can possibly save his life'.

He started to write *A System of Comparative Anatomy and Physiology*, but only one volume appeared. It is beautifully illustrated and testifies to Harwood's skill, learning and originality. It was translated into German.

In 1806 Harwood began a course of lectures on 'Domestic Medicine' intended to convey useful instruction to those members of the university whose residence in the country rendered it difficult to obtain immediate advice in cases of emergency. A synopsis which was published shows that he described the symptoms, treatment and management, and prognosis of many common diseases with as much anatomy and physiology as seemed necessary to convey a clear understanding of them.

Although Sir Busick Harwood cannot be considered as one of the great medical scientists of his day he is worthy of a higher opinion than that expressed by Winstanley in *Unreformed Cambridge* when he says 'all that we know of Harwood suggests that he was a very third-rate scientist'.

On 19 November 1957 Dr. Frangcon Roberts addressed the society on the subject of 'Medical factors affecting population changes in the eighteenth and nineteenth centuries'.

AT a meeting of the Society held on 11 February 1958, Mr. R. G. Walker read a paper entitled 'The History of Caesarean Section'.

A short review was given of the very early history of Caesarean section up to the year A.D. 1500, when Jacob Nufer is recorded as being the first man to perform the operation on a live woman. During the period following this, the Caesarean operation

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was performed infrequently, and then only as a last desperate attempt to extract a living child from an exhausted and often moribund mother. Whereas on the Continent, the operation was received with comparative favour, obstetricians in the United Kingdom preferred craniotomy, but it was not until the early nineteenth century that medical conscience began to be stirred as to the ethics of performing craniotomy on a live foetus.

In 1876, Eduardo Porro put into practice his technique of Caesarean hysterectomy, and in spite of its popularity, and the dramatic fall in maternal mortality associated with it, its success was to be short-lived.

In 1882, Max Sanger advocated the use of Lembert's intestinal suture to close the uterine wound, and established a technique of uterine closure that forms the basis of present-day practice. Sanger argued that any operation intended to take the place of craniotomy on the living foetus, must aim at the preservation of the mother, the child, and the genital tract.

In spite of figures published in Germany, of thirty-three Sanger operations from which twenty-nine mothers and thirty-two children were saved, the technique was slow to achieve recognition in the United Kingdom, the first being performed in 1888. The following year Sir Francis Champneys drew attention to the value of Sanger's technique, emphasizing the seroserous and musculo-muscular uterine sutures, and when in 1891, Murdoch Cameron published the results of ten consecutive operations with only one maternal death, the tide of medical opinion was turned in favour of it.

The final stages of development concerned the site of uterine incision. As long ago as 1769, Robert Wallace Johnson suggested a transverse lower segment incision, but in point of fact, this incision was not adopted until a century later by Kehrer of Heidelberg. Numerous extraperitoneal approaches were developed, until Kronig in 1912 suggested that the success attending these techniques lay not in the extraperitoneal approach, but was due to the fact that in all cases, the vesico-uterine fold of peritoneum was incised transversely, and the bladder reflected away from the lower segment. After the foetus and its membranes were removed, the reflected vesico-uterine fold was sutured, anchoring the bladder over the closed lower segmental wound.

The success of the Porro and Sanger techniques would not have been possible without the pioneering work of Morton and Simpson in anaesthesia, and Lister's revolutionary concept of the principles of surgical antisepsis, which reduced postoperative mortality not only by reducing the amount of sepsis, but also by reducing the fear of pain, allowing surgery to be carried out early in labour. The fall in maternal mortality from almost 100 per cent to less than one per cent must be a lasting tribute to all those who have combined to make this possible.

The following further meetings have been arranged:

Tuesday, 4 March

PROFESSOR L. P. PUGH: Presidential Address on 'The early history of veterinary education in Great Britain'.

Tuesday 29 April

PROFESSOR H. A. HARRIS: 'Highlights in the history of clinical neurology.' (Preceded by Annual General Meeting.)

All meetings take place at 8.30 p.m. in the lecture theatre of the Department of Radiotherapeutics, Tennis Court Road (by permission of Professor J. S. Mitchell).

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THE NORWEGIAN SOCIETY FOR THE HISTORY OF MEDICINE

(*Norsk Medisinsk-Historisk Forening*)

AT a meeting held on 14 November 1957 the chairman, Professor Axel Strøm, M.D., gave a short address dedicated to the memory of the late Professor Axel Jermstad, PH.D., a member of the Society's Board. Professor Jermstad had always taken great interest in medical and pharmaceutical history, and he was responsible for the restoration and preservation of one of Oslo's oldest pharmacies. This interesting relic of old-time pharmacy is to be kept in the Folk Museum of Oslo.

The main subject of the evening was 'Magic and Medicine'. Professor Nils Lid, PH.D., gave an interesting account of the way in which terms related to magical medicine had been assimilated into the languages of the different Northern countries. It seemed that psychically labile individuals were the most able magicians and that they were also most susceptible to the influence of others. Mr. Lid mentioned several examples of such magic influence, and pointed out that the magician influenced not only human beings but even animals and dead things. He also talked about dreams and different kinds of forewarnings like itching of the skin as a premonition of untoward events. It was a general belief that the thoughts of the magician could have a bad influence even if the thoughts *per se* were friendly. Mr. Lid stressed that many of the old magic remedies have been greatly modified with the passage of time and under the influence of the realities of disease and sickness.

Professor N. Danbolt, M.D., and Professor E. Schjøtt-Rivers, M.D., referred to recent examples from their own experience, indicating that the belief in magic remedies against different diseases is still very strong in most parts of the country.

Einar Onsum, M.D., exhibited a number of old medical books, which he handed over to the Society's library, and also talked about some of his old medical instruments, dating from about the year 1900. He proposed that the Society should try to reach an arrangement with the Folk Museum for the restoration of a doctor's and a dentist's office in addition to the old drug store which will be established there.

THE OSLER CLUB OF LONDON

AT a meeting held on 11 December 1957 in the Library of the American Embassy, 41 Grosvenor Square, W.1, Sir Zachary Cope gave an address on 'The Influence of J. B. Murphy (born 21 December 1857) on the Development of Surgery'.

A meeting held on 22 January 1958 at the Royal College of Surgeons of England was devoted to the subject of 'Eponyms'. Dr. Hugh Barber spoke on 'Eponyms and a Sense of Proportion', Miss Jessie Dobson on 'Eponymous Anniversaries', and Dr. A. H. T. Robb-Smith on 'Oslerian Eponyms'.

The programme for the remainder of the session is as follows:

Monday, 17 February, 8.15 p.m., in No. 1 Lecture Theatre, University College Hospital Medical School, University Street, W.C.1.

BETHEL SOLOMONS, M.D., F.R.C.P.I., F.R.C.O.G., F.A.C.S., Master of the Rotunda, Dublin (1926–33): 'Howard Atwood Kelly (born February 20 1858).'

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Wednesday, 19 March, 6.30 for 7 p.m., at Lord's Tavern, St. John's Wood Road, N.W.8. Dinner-meeting in honour of Ismar Boas (born 28 March 1858). Cost 13*s.* 6*d.* per head, including coffee, plus 10 per cent service.

HAROLD AVERY, D.SC., M.B., M.R.C.P.: 'A Sketch of the History of Gastroenterology and a tribute to Ismar Boas.'

THOMAS C. HUNT, D.M., F.R.C.P.: 'Some Famous Dyspeptics.'

Tuesday, 22 April, 8.15 p.m., at Medical Society of London, 11 Chandos Street, Cavendish Square, W.1.

J. F. D. SHREWSBURY, M.D., D.P.H., Professor of Bacteriology, University of Birmingham: 'The Origin of Syphilis.'

Discussion: COLONEL L. W. HARRISON, C.B., D.S.O., F.R.C.P. Ed.

Wednesday, 21 May, 8.15 p.m., at Medical Society of London: 'Medical Aspects of the French Revolution.'

PROFESSOR J. HENRY DIBLE, LL.D., M.B., F.R.C.P. (Postgraduate Medical School, London): 'A Surgeon of the Revolution, Consulate, and Empire: J. B. Larrey', followed by short communications.

Friday, 13 June, 8.15 p.m., in Medical College Library, St. Bartholomew's Hospital, West Smithfield, E.C.1: Annual General Meeting, followed by 'Family Evening'.

Friday 11 July, 7 for 7.30 p.m., at Rembrandt Rooms, Thurloe Place, South Kensington, S.W.7: Annual Dinner.

21st Oslerian Oration by SIR ERNEST GOWERS, G.C.B., G.B.E., D.LITT.

ROYAL SOCIETY OF MEDICINE

(Section of the History of Medicine)

AT a meeting of the section held on 2 October 1957 Mr. Terence Cawthorne read a paper on 'Julius Caesar and the Falling Sickness'.

In the first act of Shakespeare's play *Julius Caesar*, Caesar, who has been talking to Antony about Cassius, ends by saying, 'Come on my right hand for this ear is deaf'.

In the same scene but a few lines later Cassius in discussing Caesar with Casca and Brutus says, ''Tis very like he hath the falling sickness'. The continuation of sudden and temporarily incapacitating bouts of falling sickness with unilateral deafness, coming on in middle age without causing any impairment of mental or physical powers, is very suggestive of Ménière's Disease. Plutarch in his life of Julius Caesar mentions three occasions on which attacks took place; once before Cordova in Spain, later during the African campaign, and lastly in Rome when Caesar refused a crown shortly before his death by assassination. Plutarch uses the Greek term Epileptikirs, which in Sir John North's English translation of Plutarch's lives becomes 'the falling sickness', though later translators use the term epilepsy. Suetonius, the only other contemporary biographer of Caesar, only once refers to the disorder, which he calls 'morbus comitialis', a Latin term used to describe any attack or seizure which, when it attacked a member, led to the adjournment of a committee.

No other reference to the disorder can be traced in other historians of the time, and nowhere, except in Shakespeare, can any reference to Caesar being deaf be found. It is possible that Shakespeare introduced the deafness because he knew someone who had Ménière's Disease, and as he always liked to make his great personages behave like ordinary people he might well have brought in the deafness to humanize Julius Caesar.

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On 6 November 1957 Professor H. McIlwain gave a paper on 'Thudichum and the Medical Chemistry of the 1860s to 1880s'.

A pupil of Liebig, who came to London just after 1850, Thudichum developed the chemical analysis of body fluids and organs at a time when this was a pioneering subject, publishing excellent monographs on the analysis of urine and of gall stones and on chemical physiology between 1858 and 1872. With this reputation he was approached by Sir John Simon to investigate cholera. This investigation in Thudichum's hands became a chemical study of body fluids and especially of the brain, giving the Medical Officer's reports an unsought but considerable reputation in biological chemistry and resulting also in a major monograph on the chemistry of the brain in 1884. Thudichum received honours as a chemist, but exchanged sometimes virulent polemics with the more physiologically inclined. He may be seen now as tending to make the rudimentary physiological chemistry or biochemistry of his day an excessively chemical subject. He has been hailed as the father of neurochemistry, but may be seen rather as representing the end of one phase of this subject: a phase which began in the early 1880s with Vauquelin, and in which Thudichum worked assiduously but did not supersede. In one sense biochemistry developed from the organic chemistry of the time of Liebig. In another sense it represented a sharp break, a refreshing and inspiring new way of approaching chemical problems in living organisms.

SECTION OF MEDICAL HISTORY IN THE BRITISH MEDICAL ASSOCIATION (VICTORIAN BRANCH)

A MEETING of the Section was held at the Medical Society Hall, 426 Albert Street, East Melbourne, on Monday, 9 December 1957, under the chairmanship of Dr. Colin MacDonald.

At this meeting, the fourth of the year and the twentieth since the post-war revival of the Section, a paper was read by Mr. B. K. Rank on 'William Moore and Early Plastic Surgery in Australia'.

William Moore was a surgeon at the Royal Melbourne Hospital from 1885 to 1910 and a pioneer of plastic surgery. He was distinguished by the qualities of insight, honesty, technical skill, and originality. In many of his ideas and in the major operative procedures which he undertook he was fifty years ahead of his time. In 1899 he produced a book entitled *Plastic Surgery* which consisted of reprints of papers and case reports, mainly from *The Intercolonial Medical Journal*. This is a lost classic.

Moore was a perfectionist and intolerant of anything which did not measure up to his own high standards. He agitated vigorously against abuses in the hospital system, and his outspokenness made enemies for him at the time, but brought lasting benefits to hospital administration and led to the abolition of the election system of hospital appointments.

In discussing why the memory of Moore's work had been eclipsed, Mr. Rank suggested that the reasons were perhaps that surgeons had developed a bias towards visceral surgery, that the introduction of radiotherapy had temporarily superseded the radical surgery for malignant disease as practised by Moore, and that there had been an interruption in the personal continuity of teaching by two world wars.

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