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adviser to the National Portrait Gallery. The investigation gave no confirmation of Drewry Otley’s assertion that, when the picture was far advanced, the fidgety Hunter had fallen into the reverie in which we see him depicted and that Reynolds ‘turned the canvas upside down, made a fresh sketch with the head between the legs of the former figure, and so proceeded to lay over the former painting the colours of that which now graces the walls of the College’. The radiographic studies did, however, show overpainting of the face, which Sir Reginald ascribes to Reynolds himself, carried out four years after the original painting and after its exhibition at the Royal Academy and engraving by Sharp.

The rest of the oration was devoted to the elaboration of Hunter’s dictum that ‘this last part of surgery, namely operations, is a tacit acknowledgement of the insufficiency of surgery’. The preventive side of surgery was strikingly illustrated by ‘horror pictures’ of deformities of thirty years ago in a backward area from case books of Agnes Hurst, recently brought to light. A principal cause of a diminished need for surgery, concomitant with advances of its frontiers, has been knowledge gained from basic study. Of this John Hunter was the examplar, and it is fitting that from the ashes of war scientific departments have arisen about his museum.

H. Jackson Burrows


Arabian Medicine has received scant attention from modern medical historians, and although there have been papers on the subject in recent years, few full-length studies have appeared. The Fitzpatrick Lectures on ‘Arabian Medicine’ were published in book form in 1921 by Professor E. R. G. Browne. A two-volume work on the same subject, by D. Campbell, followed in 1926, while a more recent book, dated 1951, was Dr. Cyril Elgood’s *Medical History of Persia and the Eastern Caliphate*.

Perhaps a lack of Arabic scholars accounts for the neglect of this important aspect of medical history. The work of Professor Siddiqi of Calcutta is therefore a very welcome addition to the existing literature. Professor Siddiqi, though not himself a medical man, is the son of a well-known doctor of Patna, and is well versed in his subject.

Arabian medicine is not usually credited with much originality, save perhaps in the fields of ophthalmology and pharmacology. Nevertheless, as the author points out, they did not slavishly adopt the Greek or Indian modes of thought, but rather adapted each to meet their own needs. As teachers they were pre-eminent, and the teaching was definitely clinical, as may be clearly seen from the accounts of clinical cases in Appendix I, pp. 117–25. They were also noteworthy as founders of hospitals. As early as A.D. 707, the first Arabian hospital was established at Damascus, and many other hospitals were founded, besides mobile dispensaries. In Baghdad, there were sixty medical institutions by the year A.D. 1160, and an even greater number at Delhi when it became the capital of Muslim India. Arabic medicine still has its influence in India today, and it seems desirable that western medicine should take some cognizance of the ancient and apparently outdated beliefs.

In the present work, the author gives a valuable account of the early medical literature of Arabian and Persian origin. He lays special stress on the *Firdausi’s Hikmat*, or Paradise of Wisdom, by Ali b. Rabban of Baghdad (born A.D. 810), whose name is variously rendered as Ali b. Rayyan, or as Ali b. Zayn. This was the first
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independent Arabic medical compendium, and it remained the chief text until supplanted by the later works of al-Razi (Rhazes) and others. The writer deals with the book in some detail, and gives a synopsis of its contents. Its scope extended beyond medicine, as shooting stars, dreams, evil spirits and many other topics are included.

This new approach to Arabic medicine is of much importance today, and it is hoped that Professor Siddiqi’s book may have the wide circulation it so well deserves, although, being published in Calcutta, it may not receive the notice and publicity in the West which is its rightful due. At a cost of only 12 rupees, the book is a bargain and well worth the modest price. It is well printed and there is a good index. The seven plates are most informative and well-chosen. Plate III, in colour, is of special interest, since it is the earliest illustration of the operation caesarian section, from a manuscript copied at Tabriz in A.D. 1307, and now preserved in Edinburgh University Library.

DOUGLAS GUTHRIE

*Essays on the First Hundred Years of Anaesthesia* (Vol. 2). W. STANLEY SYKES.


It is sad that Dr. Stanley Sykes did not live to see the publication of this, his second volume of essays. His monument is here, in the enthusiastic telling of true stories taken from his card-index, the result of industrious searching of the early journals for anaesthetic memorabilia. Historians of anaesthesia will hope that the index, and the six thousand photographs which Dr. Sykes copied, will finally find their way to some appropriate library or museum, where they will be available for study.

Dr. Sykes has selected a series of topics, and has discoursed on them in the same unaffected and colloquial way which he used in his earlier volume. Each subject brings out facts both of historical interest and practical importance which the modern anaesthetist should not miss reading; in particular, the chapter entitled “Thirty seven little things which have all caused death” should be compulsory reading for all resident (and non-resident) anaesthetists. Is it generally known that chloroform is lethal in the presence of a naked flame? Or that fainting under nitrous oxide anaesthesia—a present source of controversy—was suggested as a possible cause of death in the first nitrous oxide fatality in 1873?

The chapter on laryngoscopy brings to light much that has been forgotten in the design of endotracheal apparatus and may serve to remind potential inventors that there is little that has not been tried before.

Historically, Dr. Sykes has missed some points which might have assisted his arguments. For instance, in concluding that the case of Charles Thomas Jackson, as inventor of ether anaesthesia, is unconvincing, he might have mentioned Jackson’s attempts to steal the credit from Beaumont in the case of Alexis St. Martin, and his efforts to plagiarise Morse’s electric telegraph and Schönbein’s invention of gun-cotton. Again, Benjamin Brodie’s physiological experiments on curare, which antedated Waterton’s by three years, and were far more precise, deserve mention, but such omissions are small fare among so much meat.

The total death charts are of great interest, and show enormous diligence and perseverance. Dr. Sykes investigated the Registrar-General’s Annual Reports for 100 years, and found that the total deaths due to, or associated with, anaesthesia, in England and Wales, in this period, was 24,378. This, as he remarks, is almost certainly an under-estimate. Work such as this will provide future historians with much

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