

Medical historians and historians of Medicine: Time for a truce

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δοκεῖ δέ μοι καὶ ἐς τοὺς Ἕλληνας ἐκεῖθεν ἦκειν τῆς γαστροκνημίας τοῦ ὄνομα, ὅτι παρ' ἐκείνοις ἀντὶ γαστρὸς κυοφορεῖ.
Lucian (AD 115-180) *The True History**

It could be argued that the first medical historian in the western medical tradition, is the author of the treatise *On Ancient Medicine* (ΠΕΡΙ ΑΡΧΑΙΑΣ ΙΗΤΡΙΚΗΣ), included in the Hippocratic Corpus, in all probability, Hippocrates himself [1].

In our time, the domain of the history of medicine is inhabited by two factions, often indifferent towards each other's contributions, if not occasionally confrontational. One faction is represented by medical practitioners who usually upon retirement from clinical care, research and seek to understand the practice and evolution of their craft in the recent and distant past. They are the *medical historians*.

The other, by academic historians with a background in humanities who view and research the history of medicine from a different perspective. Historiography, the philosophy of science, philological concerns, the provenance of manuscripts, textual scrutiny, the cultural and social parameters relevant to their historical subject, are the focus of the work of these *historians of medicine*.

Rarely researchers of the history of medicine combine optimally humanities with a medical background.

Many will recognize Sir William Osler (1849-1919) as the best representative of this happy cohabitation [2]. A distinguished practicing physician and advocate of the Hippocratic tradition, Sir William combined medicine and classics in a unique way. Proficient in neuropathology and neurology with some 200 scientific papers on the subject [3], he was as comfortable discussing the character of Erixymachus, the physician featuring in Plato's Symposium [4]. He served as president of the British Classical association [4]. In his last public address, Osler invoked the Hippocratic axiom of 'philanthropia and philotechnia' (ἦν γὰρ παρῆ φιλανθρωπία, πάρεστι καὶ φιλοτεχνία) [5], liberally translated into English according to Charles S. Bryan as *the love of science and technology follows the love of humanity* [4]. Among his other illustrious achievements, Osler founded in 1912 the History of Medicine Section (now Society) of the Royal Society of Medicine in London. Interestingly the prerequisite knowledge of Greek for entry into Cambridge and Oxford was abolished in 1920, a year after Osler's death.

Researchers have posed the question of who is entitled to write the history of medicine, a debate that preoccupied France in particular, in the second half of the 20th and early 21st century [6, 7].

The sensitivity of the French on this issue is understandable as they have a long and noble scholarly tradition in the history of medicine especially ancient Greek medicine. To mention a few representative names; René Chartier (Renus Charterius Vindocinensis, 1572-1654) professor of the faculty of medicine in Paris edited the works of Hippocrates and Galen (Figure 1). The Greek Ἀδαμάντιος Κοραΐς (Adamance Coray in French, 1748-1833), a graduate in Medicine of the University of Montpellier (his Thesis was entitled *Medicus Hippocraticus*) and an enthusiastic apostle of the Hippocratic principle "First do no harm" (ὠφελέειν ἢ μὴ βλάπτειν), edited among others the Hippocratic treatise *On Airs, Waters and Places* (ΠΕΡΙ ΑΕΡΩΝ ΥΔΑΤΩΝ ΚΑΙ ΤΟΠΩΝ) [8]. The so-called French Hippocrates, René Laennec (1781-1826), the inventor of the stethoscope, was the first to describe melanoma and introduced the Greek term melanosis in describing his pathological observations of the disease. Emile Littré (1801-1881) edited and published the works of Hippocrates in the 19th century, a standard reference to Hippocratic Medicine. Littré, studied medicine but did not formally qualify or engage in clinical practice. More recently in this long and distinguished line of historians of medicine from France, Jacques Jouanna, with no medical background, but an eminent and highly cited *historian of medicine* continues to make important contributions with his studies of the works of Hippocrates and Galen [9]. Against this background Alexander Klein has argued that the institutional birth of the discipline of the history of medicine - at least in the francophone world - took place on Monday 2nd May 1870, the day when Charles Victor Daremberg (1817-1872) was appointed to the chair of the history of medicine and surgery at the medical faculty of the University of Paris [10]. Daremberg begun his medical studies in Dijon and qualified as a doctor in 1841 with a thesis on "Galen's anatomy physiology and pathology of the nervous system". Among others he authored a treatise on *Medicine in Homer* [11].

In its ancient connotation "history", in Greek ἱστορία or ἱστορίη,, means inquiry or research [12].

Clearly the vast field of the history of medicine should be open to anyone who wishes to inquire of the healing practices of the past.

How essential, therefore, is a background of humanities for researching the history of medicine? Fields that preoccupy the work of a historian of medicine, as already mentioned, are often distant to the practicing physician researching, especially, medicine in antiquity. The physician will often have to rely on the preceding work of the historian with a classics background. When, for example, a medical historian refers to the year of the birth of Hippocrates (the year of his death is even more uncertain!), relies on painstaking, often revised research by *historians of medicine*. The *medical historian*, most likely, does not have the training, method or time to ascertain this type of chronology.

On the other hand, because of privileged knowledge of anatomy, physiology and indeed nosology of contemporary medical practice, the physician as *medical historian*, is in a better position to understand the relevance at a given time of a diagnostic or therapeutic procedure, and its impact on future developments. This self-evident advantage has been challenged by historians of psychiatry where socio-cultural determinants clearly interact more with psychological illness, than with any other branch of medicine [6,7].

Nevertheless, it would be absurd to deny an eminent cardiac surgeon, such as Craig A. Miller, the qualification of a medical historian, who is researching the biography and pioneering work of Michael E. DeBakey (1908-2008) and the evolution of cardiac surgery [13]; a task that would be impossible for a *historian of medicine* with no specialist surgical background. In this context the *historian of medicine* as much as the *medical historian* may explore in addition the prevailing social, cultural and religious climate that paved the demolition of taboos and permitted ultimately cardiac transplantation to become an established surgical speciality.

On reading Galen's work on the "pulse" the philosopher may be preoccupied with the notion that Galen may have relied on elements of Stoic doctrine applied to his own methodology [14,15]. The physician, on the other hand, reading the same work is eager to understand whether a certain quality of the pulse, described in Galen's treatise relates to atrial fibrillation and whether this preceded him and was understood by the Alexandrian anatomists Herophilus and Erasistratus.

Searching for *gastrocnemius*, the muscle that forms the large belly of the leg the medical historian will find at least nine references in the Hippocratic corpus relating to epidesmology, with instructions on the correct bandaging of the tibia. The historian of medicine, on the other hand, may enrich this research with a citation from the satirist Lucian (115-180 AD) who, with tongue in cheek, implies that the name of the muscle relates to the myth of Zeus and Semele. From their union emerged Dionysus who was gestated in Zeus' leg, thus hiding the fruit of his infidelity from his jealous wife Hera. * *It seems to me - Lucian writes - that the Greeks call it the belly of the leg, because in there, they gestate their children rather than in the abdomen.* On his imaginary landing on the moon the 2nd century satirist, Lucian of Samosata, finds no women there and describes how men procreate by gestating their offspring in the back of their thighs. Lucian's work, *Vera Historia*, is considered by some to be the first ever piece of science fiction [16]. Although the angiographers of antiquity may have depicted Dionysus emerging from Zeus' thigh anteriorly (www.theoi.com), Lucian chooses the gastrocnemius for his pun [16].

Perhaps a good example of a fruitful collaboration between medicine and philology is the publication in the 20th century, in Athens, Greece, of the complete works of Hippocrates. George K. Pournaropoulos (Γεώργιος Κ. Πουρναρόπουλος), even though comfortable with ancient Greek, combined forces with the philologist Caesar Emmanuel (Καίσαρ Εμμανουήλ) to produce six excellent volumes of the *COMPLETE WORKS OF HIPPOCRATES* (ΙΠΠΟΚΡΑΤΗΣ ΑΠΑΝΤΑ ΤΑ ΕΡΓΑ), with scholia and the ancient Greek text transliterated in parallel into contemporary demotic Greek [17].

Today the story of the COVID-19 pandemic is told by media editorialists who shape public opinion, by philologists who understand better than most, the etymology of the word; by epidemiologists who predict with terrifying accuracy the spread of the virus; by politicians who ignore science; by virologists who study the receptor-binding domain of the spike protein of SARS-CoV-2 mutants and its affinity to the cellular angiotensin-converting enzyme-2 (ACE2) receptor. By none of these, by all of these together and by many, many more. This is how history is written.

And in a hundred years from now, researchers will again visit the COVID-19 story in the same way that we now research the influenza pandemic of the last century. History is not the exclusive prerogative of the historian of medicine or indeed of the medical historian. It belongs to all those who are prepared to inquire with a keen eye into the past. The opportunity now arises for a fruitful collaboration between medical historians and historians of medicine in recording the unprecedented times and the global challenges of the COVID-19 pandemic. Now is the time for a truce.

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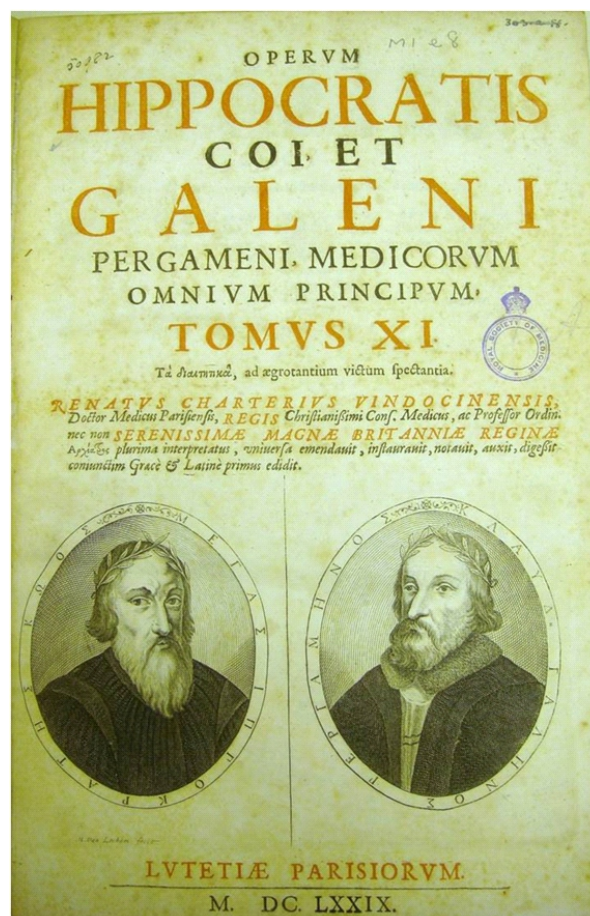


Figure 1. Operum Hippocratis Coi et Galeni Pergameni, medicorum omnium principum tomus XI /tome 11 by Galien; Hippocrate; Chartier, Rene (Ed). The 11th Volume of Rene Chartier's compilation of the works of Hippocrates and Galen. By Kind permission of the Royal Society of Medicine, London.