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MAURICE RAYNAUD

Eulogies Delivered at His Tomb on July 2, 1881

Translated and Edited by
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Eulogy Delivered by M. le Dr. Peter
Professor of the Faculty
in behalf of
The Academy of Medicine

Gentlemen:

It has hardly been two years since we appointed Maurice Raynaud to the position of academician and now, full of sadness, we lead the funeral cortege. It has scarcely been six days since he was present at our academic session — the session which was to be his last. After reviewing the presentation of the Civrieux prizes, the winners all being country doctors, he patriotically exclaimed, "Bravo! The work of the provinces! France is evidently not near ruin!" Then, not a fortnight ago, he explained to me the outline of an address, "Skepticism in Medicine," which he was to present at the forthcoming medical congress in London.¹ Today, the tomb will close on that address and on its author.

The premature death of Maurice Raynaud was not so unforeseen for the perceptive observer. A bitter regret gnawed at his heart and poisoned his very existence. This was his failure to gain an appointment to the Faculty Chair.² His great knowledge, his many aptitudes

and his indisputable talent all made him more than deserving of this appointment. Sons of the university, you must realize that he embodied the teaching profession to his very marrow; yet by the cruel irony of fate he felt barred from the university. Well, I am convinced that his time was approaching and I say that he would ultimately have gained the endorsement of the academic tribunal and the professorial chair. Indeed, everyone recalls his brilliant discourse on cold baths in cerebral fever which, for two sessions, held the Academy attentive and fascinated.³ Maurice Raynaud thereby proved himself to be clinician, physiologist and orator. In another discourse, on the inoculation of the rabies virus, he revealed himself to be an experimental pathologist.⁴

In this manner, Maurice Raynaud was simultaneously physician, scientist, philosopher and scholar. As a result of this four dimensional intellect, the work of the physician, inspired by the scientist and coordinated by the philosopher, drew from the man of letters the enticements of style. Yes, one can easily picture Maurice Raynaud living in the 16th century when the likes of Erasmus and Pico della Mirandola were flourishing.^{5,6} At that time knowledge was not specialized but was universalized. Indeed, when one expounded one's views at the Sorbonne, "*de omni re scibili*."⁷ During that era scholars in France spoke Ciceronian Latin more fluently than did even Rabelais.⁸ The beautiful thesis of Maurice Raynaud, *Esclepiades the Bithinian, Physician and Philosopher*, would not have been any more successful than it is now, but it would have been more widely read.⁹ Elsewhere, in his *The Physician in the Time of Molière*, Raynaud draws a parallel between the state of medical science and that of literature.¹⁰ He shows that medicine was torn between a modified Galenism, still triumphant and tyrannical, and contemporary discoveries, the most striking being the circulation of the blood. This opened, for all time, the era of the experimental method, the analytical mind, and free discussion.

After referring to the works of Maurice Raynaud, it is impossible for me to neglect mentioning how much literary and philosophical studies are worth to physicians. It is also impossible to overlook how they widen the horizon of ideas as they elevate the spirit. Furthermore, it is impossible to overlook the way in which Maurice Raynaud perpetuated the noble centuries-old tradition of humanistic French doctors so gloriously represented in the 17th century by Guy Patin and in the 18th century by Théophile de Bordeu.^{11,12}

Alas! Of all the effort and greatness of spirit he brought to us in "Local Asphyxia and Symmetrical Gangrene of the Extremities," in his studies about the "Ailments of the Heart, the Arteries and the Veins," and in many other works of the first order — what now remains of Maurice Raynaud?^{13,14} A reputation without blemish, a medical name which will not perish . . . and this little bit of dust . . . !

Eulogy Delivered by M. le Dr. Dieulafoy
in behalf of
The *Agrégation* of the Faculty of Medicine¹⁵

Gentlemen:

In behalf of the Faculty of Medicine, in the name of the *Agrégation* which he so brilliantly personified, I come with profound sorrow. I come to say a last farewell to our colleague and friend. From the beginning of his medical career Maurice Raynaud was prepared for the great battle. His life's purpose and his deepest concerns related to the school and to the teaching profession.

Let us examine his work from his first years of internship. Open-minded and fortified by a study of the literature he loved so passionately, ardent laborer, researcher, innovator by instinct, naturally persevering, gifted with the prime intelligence rendering him completely suitable for the works of analysis and composition, Raynaud rapidly became a Personality. The gold medal of the hospitals and the gold medal of the Faculty were both awarded to him and he ended the first stage of his medical life with an inaugural thesis that is now a classic — "Symmetrical Gangrene of the Extremities."

From that time — that is, from 1862 — Maurice Raynaud was dominated by a preoccupation with the *Agrégation*. Gentlemen, those among you who closely followed those touching struggles, where the conqueror and the conquered employed such large reserves of effort and knowledge, and those who recall with what sort of adversaries Raynaud contended, will understand the height of his attainment in coming through the *Agrégation* with the first place.¹⁶ Unfortunately the *Agrégation* committee did not, at that time, provide the auxiliary courses that the generous liberality of the school was later to give. Moreover, the *Agrégation* remained active for only six years.¹⁷ Nevertheless, Raynaud was seated for one session in a School Chair where the substituted Internal Pathology courses were entrusted to him. But the success of these courses, wherein the young professor so strongly affirmed his professorial aptitudes, were not to allow him tranquility for long.

Then, later on, he became an independent professor. You have all seen the numerous listeners grouped around him during his teaching sessions on the wards. At the *Hospital Lariboisière* his lessons were assiduously followed while at the *Hospital Charité* they became a center of instruction. Raynaud considered neither the volume of the work nor the fatigue. He gave of himself, he wasted himself. And, in the middle of his brilliant career, in the prime of his life, he is abruptly and brutally taken away from us. It is my hope that our late colleague and friend will here accept, with this last and sad homage rendered to his memory, this expression of our very keen sorrow.

**Eulogy Delivered by M. Féréol
in behalf of
The Doctors of the Hospitals**

Gentlemen:

If I take my turn to speak at the foot of this grave, in behalf of my colleagues of the hospitals, I assure you that I do so not for the purpose of retracing the scientific life of the eminent thinker, the learned doctor and the distinguished author who has just been so suddenly taken from us. All that has just been said will be repeated at even more opportune times and in much better ways than I could ever hope to do. But in this moment, especially while we are still reeling under the impact of this overwhelming shock which causes us a grief so little foreseen, I must make a great effort and speak to you. For, indeed, his friendship of more than 20 years permitted me to appreciate and love him as he truly deserved.

It is about the physician, the clinician, the chief of the service, the colleague and, finally, about the man that I wish to speak. The brutality of this unexpected blow, which has successfully struck one of such vigorous character — one who appeared to justify such high hopes for the future — hardly allows me enough peace of mind for words worthy of him who was my friend.

Was it but yesterday that, in fact, we clasped hands? He appeared more cheerful and stronger than ever. He had a fresh hope, a new work, which delighted him. He was to represent the French medical profession in a great neighboring nation. With good reason he was proud of his having been chosen for this role. So he returned home to France more fit, more well and more joyous than ever. His little children, after playing with him more gaily than ever, kissed him good-night and went blissfully to sleep. Three hours later, they were orphans. In less than three hours, it was all over.

And so it was with Lorain, with Chauffard, with Broca and with Delpech.¹⁸⁻²¹ What is this fatality that weighs upon our poor medical family? As accustomed as we are to the great shocks of death, could one not say that they are more frequent here, among us, than anywhere else? Gentlemen, you are well aware that a physician's life is ever harsh and very onerous, even for the fortunate of the profession. Who knew it better than Maurice Raynaud? His indefatigable self-sacrifice would not permit him to refuse anyone. He exerted himself incessantly — at the hospital, for the patients, for his pupils, for the academy and for our society of hospitals of which he was one of the most active members. And always and everywhere with equal fervor. Whoever had need of him had license to him and to his care. Thus the gratitude which surrounded him! What spirit, what unanimity of affection in his patients! And today, what sorrow, what grief of heart!

Gentlemen, he conveyed this fervor everywhere, in literary questions as well as in science and — why not say it — in religion as well as in politics. Today it seems impossible to separate these two last things. Yet he excelled in never confusing them. For him, one was a question of faith while the other was a question of duty. And last year, when they came to offer him a political candidacy, he believed that he did not have the right to refuse, even though failure was demonstrated in advance.²² How could one solitary being have borne so many fatigues and emotions! How open to the scruples of conscience was his soul; how much more open than anyone else! He asked himself incessantly whether he had done all that was necessary, whether another in his place might not have done otherwise and better! He was truly ingenious at finding torments where others think only of avoiding them!

For a long time he had also felt lassitude, extreme discouragement and other symptoms which he skillfully analyzed. He then became alarmed and asked advice. How many times we urged him to take a rest, to limit his work, to change his way of living and to take care of himself! He promised that he would do so — but always in vain. His project of changing his way of living always became altered.

Then came the struggles, the competitions, the disappointing expectations and the disillusion. Where is a man safe from all of this bitterness? Raynaud certainly knew them and suffered all the more because in the depth of his nature he was benevolence itself. Until then, the word "work" had been, for him, synonymous with success. But if he had lived in less troubled times he would have been spared this difficult ordeal and, without a doubt, would have occupied the position that called to his rightful ambition, his multiple talents, his vast knowledge and his character.

In the midst of these many and varied troubles were added additional sorrows, the necessary fate of human life. His confidence was destroyed and his fatal misgivings came through. And so he was less surprised than we were when first he felt the touch of impending doom. He was not mistaken. And firm in his faith, wishing to die as he had lived, he asked first for the priest and then for the doctor. He was, in fact, one of those men who leads his life with complete logic and who has the good fortune of having, as his helpmate, a woman worthy of him — proud to belong to him, to share his beliefs, and to live her life in accordance with them. Feeling the end approaching, and in spite of the horrible pain of separation, he was able to maintain serenity and a strength of spirit truly admirable, ever lucid and completely calm.

And now, in the face of such great sorrow, what can we say? All lamentation is sterile, all consolation is in vain. Our sole obligation is to keep faithfully in our hearts the memory of the excellent man we have known and loved — the memory of the hospital chief adored by

his patients who found in him more than a doctor, who frequently found, in addition, a benefactor who was as generous as he was discreet. He was loved by his students in whom he was most cordially and loyally interested, and he was esteemed by his colleagues for whom he was always ready to render service. Let us therefore render to him this justice to which I can testify: if he was absolute in his convictions, he knew how to respect those of others when he believed them to be sincere. He did not limit friendship to men who shared his views nor did he carry bias within his sympathies. And now, if we have admired the resources of his mind, the diversity of his knowledge and the totality of those talents which made the scholar and the professor, let us also honor those virtues which truly made the man: sincerity, love of work, kindness and devotion.

**Eulogy Delivered by M. G. Variot
in behalf of
The Interns at the Hospital**

Beloved Chief:

The sad obligation to recall here your kindness toward your patients, your affection for your students, and the profound sympathy you were able to inspire in them falls to me, your last intern. At the time the terrifying news arrived on your service, consternation was expressed on all faces while many eyes were full of tears. Your patients, accustomed as they were to your generous kindness, consider themselves almost as your family. They, too, now mourn your loss almost as if each has lost a relative.

Beloved chief, your former students — both past and present — are here to attest to the great qualities of heart that you combined with your most brilliant and lofty medical mind. We who have attended your daily rounds and scholarly conferences at the hospital have been able to appreciate you as a professor. Conscientious in your teaching and devoted to your patients, you have allowed us to profit liberally from your immense scholarship and clinical judgment, so quick and so sure. Courteous to all, you took interest in the work and in the progress of students as well as in that of your externs and interns. Alas! Henceforth we will miss your affections and your encouragement. I address to you, beloved chief, in the name of all your students, a last good-by. We will preserve a venerable memory of you, one that will not perish any more than will the scientific and literary works you leave to posterity.

REFERENCES

1. The address, "Skepticism in Medicine, Past and Present," was presented posthumously by Dr. Felix Féréol on Aug. 4, 1881 at the Seventh International Congress of Medicine.
2. As professor of the history of medicine.
3. Earlier, Raynaud had published a paper dealing with this topic. See "*Application de la methode des bains froids au traitement du rhumatisme cérébral*," *Journal de thérapeutique*, I, 1874, p. 841.
4. See "*Recherches expérimentales sur la transmission du virus rabique de l'homme au lapin*," *Bulletin de l'Académie de médecine*, 2^e serie, X, 1881, pp. 61-71.
5. Desiderius Erasmus (1466-1536) was an accomplished literary figure and Christian humanist.
6. Giovanni Pico (1463-1494) was born in Mirandola and died in Florence. A syncretist, he was one of the most precocious philosophers of all time. His "Oration on the Dignity of Man" endures as a classic humanistic treatise.
7. "(It was) concerning all things knowable."
8. Francois Rabelais (1483-1553) was cleric, lecturer (at Montpellier) on Hippocrates and Galen, and author of the immortal satires, *Gargantua* and *Pantagruel*.
9. Written in Latin, this thesis was instrumental in Raynaud's gaining a doctorate in letters.
10. Raynaud, Maurice, *Les Médecins au Temps de Molière* (Paris: Didier et Cie, 1862).
11. Guy Patin (1601-1672) was a leader of the Paris Medical Faculty and a commentator on the local and national medical scene.
12. Théophile de Bordeu (1722-1776) was professor of medicine at Montpellier and the most celebrated exponent of vitalism, a doctrine which held that every bodily part possesses a vital force that is neither purely chemical nor purely physical.
13. Raynaud's own contributions to the literature of the disease which bears his name are three: his thesis published in 1862; his chapter on "Gangrene" in *Nouveau Dictionnaire de Médecine et de Chirurgie Pratiques*, Sigismond Jaccoud, editor (Paris: J. B. Bailliere Et Fils, 1872), pp. 592-716; and the essay, "*Nouvelle recherches sur la nature et le traitement de l'asphyxie locale des extrémités*," *Archives Générales de Médecine* I, 1874, pp. 5-189.
14. The articles on the diseases of the heart, arteries and veins were published in a series which also dealt with erysipelas, albinism, disease diathesis, cachexia and other topics. The series occupied some 800 pages in the *Nouveau Dictionnaire de Médecine et de Chirurgie Pratiques*.
15. The position of *professeur agrégé* corresponded to the position of assistant or associate professor. It was created in 1822. Appointees were selected on the basis of competitive public examinations termed "*concours*" or "*agrégation*."
16. In 1863 Raynaud failed to become an *agrégé* even though his candidacy coincided with the publication of the monograph, "*Hypérémies non Phlegmasiques*" (Paris: LeClerc, 1863). However, when his candidacy in 1866 coincided with the publication of another monograph, *De la Révulsion* (Paris: J. B. Bailliere Et Fils, 1866), he was the first to be named an *agrégé*.
17. This remark is puzzling. As an institution, the *Agrégation* endured well into the 20th century.
18. The teaching of Raynaud supplemented that of Piorry in clinical medicine and that of Monneret in clinical pathology.

19. Paul-Joseph Lorain (1827-1875) was professor of medical history and physician to the *Hospital de la Pitié* in Paris. His publications included those devoted to puerperal fever, proteinuria, cholera, vaccination and the pulse. He died suddenly, from a stroke, in the home of one of his patients.

20. Paul-Emile C. Chauffard (1823-1879) was a practitioner in Avignon. He was also a translator and the biographer of Borsieri. He published many books and papers on various aspects of pathology. He died suddenly from a ruptured aortic aneurysm.

21. Pierre Paul Broca (1824-1880) became immortal by associating (along with his mentor, Jean-Baptiste Bouillaud) the faculty of speech with the posterior portion of the third frontal convolution of the left side of the brain. In addition to possessing encyclopedic medical knowledge, he was also an accomplished anthropologist. Since the heart and great vessels were found to be normal at his autopsy, a malignant arrhythmia seems to be a likely cause of his death. He died suddenly after experiencing excruciating chest pain.

22. Auguste-Louis D. D. Delpech (1818-1880) functioned mainly in the *Hospital Necker* as an obstetrician. However, he also published papers on fever, industrial diseases, trichinosis and disease nomenclature. While hunting, he died abruptly during an attack of angina pectoris.

23. This refers to the Paris municipal elections of 1880.

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