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## SURGERY OLD AND NEW

By JAMES J. WALSH, M.D., PH.D.

I THINK that the most surprising chapter in the history of medicine is that which tells the story of surgery as it developed during the Middle Ages. Down in Salerno, in the southern part of Italy, some thirty miles back of Naples, where the first modern university came into existence around a medical school, Roger and Roland, two great surgeons with names that one might think had come from the age of chivalry, wrote textbooks of surgery or at least one of them wrote and the other amended a textbook of surgery. And then came the Four Masters who wrote a commentary on the textbook of Roger and Roland. Of this Gurlt, the great German historian of surgery, says: "In spite of the fact that there is some doubt about the names of the authors this volume constitutes one of the most important sources of the history of surgery of the later Middle Ages and makes it very clear that these writers drew their opinions from a rich experience."

After these surgeons of the south of Italy, came the great surgeons in the north of Italy, Ugo of Lucca, Theodoric of Borgognone, William of Salicet, Bruno of Longoburgo. They carried on and perfected work in surgery that had been so well begun by their colleagues of the south. After them came a group of French surgeons, Lanfranc, to use the French form of his name, though he was an Italian and was born Lanfranchi, Mondeville and finally Guy de Chauliac.

Strange as it may seem, astounding indeed to those who have not been brought in touch with these old surgeons, these men anticipated a great deal of our modern surgery. They operated on the skull for tumor and for abscess, they operated on the thorax for abscess and for fluids, and they operated on the abdomen for a number of conditions. They said that if there was a wound in the intestines and you did not sew it up the patient would die, and they invented needle holders of various kinds for this purpose.

Only that we have the textbooks of these surgeons—seven or eight of them have been printed in our day—no one would believe for a moment that surgery reached such a high plane of development in the later Middle Ages. The thirteenth century was the particularly flourishing period and the group of Italian and French surgeons must be looked upon as among the greatest contributors to surgery in the whole history of this department of medicine.

The surprising feature in connection with this great development of surgery in the thirteenth century is the fact that much of what they taught at that time was lost afterwards and had to be rediscovered. It seems almost impossible that so great a benefit for mankind should have been secured and afterwards forgotten. Very probably the lowest period in the history of surgery is represented by the hundred years down to 1850 when the introduction of anesthesia furnished opportunities for the development of surgery to a much greater extent than before. During the first half of the nineteenth century, apart from amputations, the principal feature of which was the rapidity with which they were done on account of the pain involved, patients were operated on only as a last resort and when the case was hopeless otherwise. Usually intervention was delayed so long that there was very little chance for the patient's recovery.

Those who survived operations very often died of sepsis in some form or other and the extent to which this was true is very well illustrated by what Nussbaum, the great German surgeon, said even as late as 1869: "I will operate in that hospital no longer." This was the great Allgemeines Krankenhaus in Munich of which he was the chief surgeon, and it is no wonder he did not want to operate there since his operating mortality the preceding year had been seventy-nine per cent plus, that is to say about four out of five of his patients died. That was not his fault but was due to the reeking hospital. Erysipelas was practically always present, hospital gangrene was rather frequent, pyemia and septicemia were constantly developing.

Two great German authorities in the history of medicine, Meyer-Steinig and Sudhoff, in their *History of Medicine*, which is looked upon as probably the best brief history of medicine in our day, declare that the reason why the surgery of the first half of the nineteenth century was so bad was that they had forgotten the anesthesia and the antiseptics of the Middle Ages. Because, strange as it may seem, the medieval surgeons not only anticipated Morton and Long as regards anesthetics, but they also anticipated Lister though they had no Pasteur to point out the meaning of their observations. The medieval surgeons

dressed their wounds with linen wrung out in strong wine, and these dressings prevented the growth of microbes and as the wine evaporated they called this procedure the dry dressing. They had wonderful results and boasted of getting union by first intention. That very expression, union by first intention, is from medieval Latin and means nothing in its English form unless you know something about the old medieval surgery. Some of them declared that they got linear cicatrices that you could scarcely see or at least notice and they evidently knew just what it meant to have union by first intention.

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## THE MORALITY OF THE USE OF THE SAFE PERIOD

By ETHICUS

TWO books by Catholics with ecclesiastical approval have appeared recently which have excited much discussion among Catholics and non-Catholics alike. They are *The Rhythm* by Leo J. Latz, M.D. and *The Sterile Period in Family Life* by the Very Reverend Canon Valère J. Coucke and James J. Walsh, M.D. It is not the intention of Ethicus to discuss the scientific aspects of the question raised by these two books. The *Imprimatur* of the Ordinary does not guarantee the scientific truth of the facts stated. The scientific aspect has been the subject of considerable interest in European circles, especially Catholic, clerical and lay, for some years past. Ethicus merely calls attention to the opinion of Dr. J. Holt of Doorn, Holland, who is now engaged in revising for a second edition Dr. J. N. Smulder's book on the period of agensis, entitled *Periodische Enthaltung in der Ehe*. It is Dr. Holt's opinion, quoted in the *Catholic Medical Guardian* for January, 1933, that, "Dr. Latz's book has certain defects which must be revised to prevent misunderstanding and thus bring about disrepute of the method."

Ethicus is solely interested in the moral questions raised on the assumption that the scientific aspect is sound. Is it in accordance with right Christian morality for husband and wife to use the safe period with a view to family limitation? In treating a question such as this, it is always wise to gain first the opinions of those whose voice is authoritative on such matters. Certainly no Catholic moralist of note ever denied that married couples might exercise their marital rights in order to obtain the secondary ends of matrimony, defined by the code of Canon Law as "mutual aid and a remedy of concupiscence," even when from such an exercise no new life could arise. Such a condition exists