LUSITANO'S RULES FOR PHYSICIANS*

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The rules for physicians, authorship of which is credited to Lusitano, are contained in two Hebrew medical treatises. One of the treatises, Ozar Hachaim ("The Treasure of Life"), published in Venice in 1683, was written by Jacob Zaholon. The other, called Harmonia Wallichia Medica, published in Frankfort am Main, in 1700, was written by Abraham Wallich. Zaholon's book is purely medical, while Wallich's treatise is a combination of medicine and religious philosopy, a type of literary fusion quite common in medical writings of the middle ages.

The rules given in the two treatises differ somewhat, Wallich giving only fifty whereas Zaholon gives seventy-six. In the main, however, they are the same. Zaholon gives Lusitano's full name as Abram Zakuto Lusitanus, while Wallich speaks of him only as Zakuto Lusitanus. In the work of these two authors as well as in other Hebrew works his name is spelled Lusitanus with the "us" ending, while in the English translation of Graetz his name is spelled Lusitano.

Neither of the authors tells when Lusitano lived. According to Graetz he was born in 1576 and died in 1642. He was the great-grandson of Zacuto, the historian and astronomer. He was one of the most celebrated physicians of his time and was honored by his professional brethren.

It should be noted that the Lusitano under discussion is not Amatus Lusitano or Lusitanus, the Portuguese physician of the sixteenth century who was born in 1511 and died in 1568 and who was known for his seven books of case histories which appeared under the general title of "Centuries." Since Zaholon deals more exhaustively with the subject I shall quote his version of Lusitanus' rules for physicians.

I shall present the rules in the exact numerical order in which they appear, although in many instances a rearrangement would make for more logical sequence.

- 1. The physician should be pious.
- 2. He should be dressed well.
- 3. He should not talk (too) much.
- 4. He should not be too economical (parsimonious).
- 5. He should not insist on his fee.

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- 6. He should not be envious.
- 7. He should not be vain.
- 8. He should not be willful toward his superiors.
- 9. He should admit his mistakes.
- 10. He should accept cheerfully the censure of his elders.
- 11. He should be well disposed.
- 12. He should have common sense.
- 13. He should study every subject thoroughly.
- 14. He should buy few books, but good ones for the study of medicine.
- 15. He should peruse the books of learned and practical men.
- 16. He should not undertake to cure the incurable.
- 17. He should refrain from making false promises.
- 18. He should not exaggerate a (slight) illness.
- 19. He should not make light of a serious illness.
- 20. He should be willing to consult with other physicians.
- 21. He should limit himself to but a few patients, for the care of too many breeds mistakes.
- 22. He should not pay much attention to the name of the disease, but to its character and treatment.
- 23. He should not make light of anything for even from small things one may be able to obtain a clue.
- 24. He should not be slow in giving the proper medication.
- 25. He should not do anything without reason.
- 26. He should be careful about giving a prognosis so that he may not be caught in a falsehood.
- 27. He should not make any promises.
- 28. He should do everything according to medical teachings (ethics).
- 29. He should combine experience and reasoning in his practice.
- 30. He should be quick in action and not sloth in time of need.
- 31. He should consider the value of the person he treats.
- (It is not clear whether he refers to the financial status of his patient or to the value of a human life in general.)
 - 32. His principal aim should be the cure of his patient.
 - 33. He should consider the difficulties and the dangers of the cure.
 - 34. He should not fear the wrath (censure?) of people.
 - 35. At times he should entertain the patient with pleasant conversation.
 - 36. He should institute the cure quickly and unhesitatingly.
 - 37. He should not deviate from the logical treatment even if the anticipated cure is not obtained.
 - 38. He should use common sense in purgation.
 - 39. In giving counsel he should follow the rules of medicine and observe the working of Nature.
 - 40. When Nature does not effect the physician should try to do so by means of medicine.
 - 41. If Nature is bringing about a cure he should not do anything.
 - 42. On the day that Nature is expected to work a change in the condition the physician should not do anything.
 - 43. He should be careful to administer medicine on the right day and at the right hour.
 - 44. He should not give strong purgatives unless other remedies have not done any good.
 - 45. Before giving a purgative he should prepare the body humors in order to make it easier to purge them.
 - 46. He should always start with the lighter remedies.
 - 47. He should select the proper time for purging.
 - 48. He should keep in mind the signs of the astrologists as to which day is good and which is bad for purging or blood letting.

- In blood letting he should consider the nature of his patient—whether he is warm or cold-blooded.
- 50. He should find out whether the patient can stand a strong purgative.
- 51. He should keep in mind the movements of the body fluid, the point from which it moves.
- 52. He should consider the character of the humors that need purging.
- He should take into consideration the habits of the patient in purging him.
- 54. He should also note the disposition of the fluids by the body whether they come from above or from below or through sweating.
- 55. He should not employ drugs in every illness, for at times if the illness is slight and the patient is not strong, a change in diet may suffice.
- 56. A disposed body is preserved by a like remedy, a non-disposed body by its opposite.
- 57. Bad humors should not be removed from the diseased part of the body.
- 58. A chronic illness is sometimes cured by a change in the patient's surroundings.
- 59. The physician should assist Nature, for it is the most important factor in health.
- 60. He should observe closely the strength of the patient, particularly the condition of his brain.
- 61. He should endeavor to discover what part of the body is diseased.
- He should find out which is the primary disease and which the secondary one.
- 63. If he does not diagnose the trouble he should treat the patient dietetically.
- 64. He should learn what is helpful to the patient and what injurious.
- 65. He should study the changes of locations (changes in climate or changes in location of disease?) for remedies must change accordingly.
- 66. He should direct the remedy to meet the most dangerous (symptom?)
- 67. He should not give a strong purgative at the beginning of the disease before the humors are ripe for it.
- 68. He should not become alarmed if severe symptoms appear, for that marks the critical period.
- Among the symptoms to be treated early is pain, for pain undermines the patient's strength.
- 70. He should treat deep somnolence or persistent insomnia.
- He should not administer a purgative from distant places in the body until the bowels have moved.
- 72. In administering drugs he should keep in mind the difference between a male whose nature is warm and strong and a female whose nature is cold and strong, for to her only few and light remedies should be given.
- 73. He should be careful in giving medicine to young and to very old both of whom are weak.
- 74. He should be very careful in treating infants.
- 75. He should know the anatomy of different parts of the body.
- 76. He should learn surgery.
- He should learn the properties and the compounding of various drugs.

Zaholon supplements the golden rules of Lusitano with some additional advice. Whether the advice is his own or whether it is still a continuation of the counsel of Lusitano is not plain, but the suggestions are worth while irrespective of the source. In the translation that

follows I have tried to preserve the original uniqueness of the style as closely as possible:

It is very good that at the beginning of his practice the physician should go around with an older (wise) physician to visit patients, and as soon as he comes home, he should mark down the remedies that he has heard from the older physician and he should also read up the case in different books to clear up any doubts he might have about it.

When a doctor comes to a patient, he should not take the pulse immediately but should rest up a bit, and should ask the patient or his relatives how the disease started, and should inquire first about his head, whether or not he has a headache, whether he sleeps well, whether he is thirsty, whether he has pain anywhere, whether he eats or drinks; he should then look at his tongue and examine his urine and take the pulse. Then he should give orders what should be done, in the same manner that a king commands his subjects; To poor people he should give effective but inexpensive remedies; to rich people he should give pleasant and expensive remedies. It is also best that he write down the remedies in order that the people should not forget, as might happen if he gave verbal orders. It is also more impressive if the physician writes down his orders. At times it is well to explain the reasons for the remedies but not the nature of the remedy that people may not become disgusted with them. He should not make the disease hard in order not to worry the people, but he should put the matter in a doubtful manner giving good hopes; even if the disease should be severe he should tell the patient himself that the illness is slight, and that others who have had the same sickness recovered.

If he hears of a good remedy from another physician, he should not make light of it, and if there is another physician with him, he should not belittle his words, whether they are good or bad, at least he should not give his opinion of them in the presence of others.

If the patient has a bad disease, the physician should not come too close to him; likewise if the patient has a bad odor.

When the patient gets well the doctor should excuse himself and should not call on him (the patient) too long if it is unnecessary.

He should leave instructions as to how the patient should conduct himself after he gets well in order that the disease should not repeat itself, and he should thank God for curing the patient. If necessary he should visit the patient more than twice a day.

The physician should not give out the medicine himself, but should send the patient to an apothecary. At times he should be present during the blood letting. He should not think of expense but of what is useful for the health of the patient, and before he orders the medicine he should pray to God to instruct him in giving the proper medicine. If he sees that the patient is dangerously ill, he should tell the relatives, so that if the patient should die they will not think ill of him; he should do this also so that they may be able to do everything they can for the patient without caring for expense. When a physician treats women, he should be modest. He should also inquire whether the patient menstruated or whether she is pregnant.

He should not accept remuneration from poor people, from relatives, or from good friends, nor should he accept any money on the Sabbath or holidays. If, however, he treats a friend who wants to pay him every day so that he should not have to give him an expensive present at the end, or that he may feel free to call on him, he should accept a fee, for though it is true that a physician does the work of God, and should not accept any money, still he can do the same as a teacher and accept remuneration for his time, also that he may be able to make a living in the profession, and also because as, the saying goes, "a physician who works for nothing is worth nothing." Once a week also he should say a prayer for physicians that I have written in my book, "Good Pearls," published in Venice.