

MEDICINE AND THE HUMANITIES*

By CHARLES L. DANA, M.D.

NEW YORK, N. Y.

THE incidents of the career of Dr. S. Weir Mitchell, his character and life-work, have been fully and admirably dealt with both by my predecessor and in the "Memorial Volume" published shortly after Dr. Mitchell's death. So that it seems to me I could better devote my time to a study of some of the lessons which the life, influence and character of Dr. Mitchell teach us.

I had known Dr. Mitchell from the early part of my professional career, but not intimately; and in my feelings for him there was at first a touch of awe (which gradually became one of pride) for the things which he as a doctor had accomplished. Still later this feeling was increased to one of real warmth and friendship through an incident, which he probably thought befel as a matter of course, but which gave me a new insight into the depth and range of his sympathies. I had suffered a bereavement which left me rather stunned. A few days later I received a letter of most kindly sympathy, and a little book of poems called "The Comfort of the Hills." I had grown up in the comfort of the hills and his letter and gift made me look upon Dr. Mitchell in a new light and with feelings not only of gratitude but of affection. He did not know me then well enough to realize how much good his message did me.

This attitude of warm and friendly admiration was widespread and even international. The fact was once brought to me with dramatic emphasis. Nine years ago at a meeting of the International Medical Congress in London, we had a large dinner, attended by the neurologists from all over Europe, and I was allowed the honor of speaking for America. I dwelt on the fact

that in the early days of American neurology we, of the younger group, had some supermen to help us and I mentioned the prominent men of the '70s, '80s and '90s. When I came to the name of Weir Mitchell, there was a loud and spontaneous burst of applause. It rather startled me, as well as pleased me, and it showed, as I thought at the time, that Dr. Mitchell, throughout the world, was in a class by himself.

I presume and hope that Dr. Mitchell had some of that particular quality, I will not call it vanity but involving enjoyment of formal recognition, such as most of us possess. If he did, he must have derived much pleasure from his achievements. His contributions to scientific and practical medicine were many and were acknowledged to be far-reaching and enormously helpful. He contributed to laboratory work, as well as to clinical medicine and therapeutics. He changed and added to methods of medical practice. But in particular he showed the value of the personal equation, in applying our art in practice. Without hunting for buried and sodden complexes, he found and routed them out by his compelling skill. He accomplished psychoanalysis withouts tiring up the muddy depths of a Cimmerian past; he was the father of the best modern phases of psychotherapy and in particular he showed how much the non-technical side of the physician and his cultural values have power to accomplish.

You recall Matthew Arnold's often quoted statement to the effect that two-thirds of human life have to do with problems of conduct. I would say that it is even more true in medical practice that two-thirds of efficiency and success depend on conduct and character, and hardly one-third on technique.

Weir Mitchell's career illustrates this; and it has a value to students of medical education as well as to those of

* The Weir Mitchell Oration delivered at the College of Physicians, Philadelphia, November 23, 1922.

the profession who have high ambition for their art.

THE HUMANITIES AND TECHNIQUE

The whole trend of modern medical education now is to enlarge and emphasize the technique and to ignore the human. I have almost yearly had to assure my medical classes, that they were as yet persons without souls, because they would insist on laughing at the awkward movements or unintelligent expressions of my neurological cripples displayed before them. I have assured them that if they would be quiet or even shed tears at the time of these incidents, they would add some cubits to their moral statue and beget qualities that would make them better physicians. They would then behave better. In fact, the medical student is open-minded to cultural things and would be glad, I am sure, if he were taught a little less technique and more of the humanities.

The word "culture" has become a thing of which the younger generation is a little shy perhaps because it has been spelt with a "K." But as I understand and use it, the term means that a person with culture has enough knowledge of the present-day world and of what has been done in the arts and learning of the past to have a background. One cannot always or easily tell when there is a background of character but we all know those people without it. They are of a narrow intelligence, commonplace in thought, without humor, poor in their judgments, and prone to hold foolish and fanatical beliefs. These are the supporters of our medical cults, and back of their activities there are usually misapplied emotions.

Weir Mitchell without ever losing his laboratory habits or scientific methods of thought, could not only acquire, but also contribute cultural interests to all those with whom he came in contact.

Stimulated and instructed by his career, I have felt that I would like to urge the medical schools to organize non-technical

courses at the expense of learning less of the specialties, at least in the undergraduate school. I am aware that to an extent colleges are driven to this diffuse technical teaching by the requirements of State boards. This however is not a phase of my subject on which I shall dwell at present, for I am interested now in trying to demonstrate that something may be put into medical education (besides the technical studies) which will promote efficiency, usefulness and happiness throughout the whole course of the doctor's career. One of the things which a doctor should start with and pursue all his life, is some brand of this thing I call "culture."

A person can possess this without knowing the humanities, but a knowledge of these, as I use and understand the word, will also surely give something of this pragmatic culture for which I am pleading.

The terms "Humanism" and "The Humanities" began technically with Petrarch and blossomed out very dominantly in the sixteenth century. A study of the humanities at that time meant a study of all the established writings of the great men of the past, and excluded only theology. Later the term grew to have a wider meaning. Petrarch himself had the cultural quality of love of the classics, not of the books alone, but of the men. Writers like Virgil and Horace were to him real living characters and he himself loved not only letters and art, but human beings. I would emphasize under the term "culture" the study, knowledge and sympathetic appreciation of the best things thought and said and done in the history of mankind, the well-written stories of the achievements and mistakes of the great periods in human progress. In fact the word, as Hazlitt used it, meant all interests which are non-vocational and at the same time involve acquaintance with things of established beauty or worth.

If a person has something of this sort of culture, he will be very likely to possess mental balance and to show sanity in his

ideas and beliefs. It is because of a lack of this background of non-vocational education in America that we are preyed upon by a continual succession of wasteful emotions, shown by the fads, follies and fears of the day. With all due respect to the dynamic psychologists, I would claim that a real, serious, simple, cultural training of our adolescents, would clear the subconsciousness of irritating complexes and the activities of desire much more than introspective studies of a morbid personal past. I am in favor of the study of the ripened works of the world's past, as a cure for and preventive of the misadventures of the developing personality. I would go back to nature or to the classic past, rather than to infantile memories.

In this I am in sympathy with Walt Whitman in his forceful utterance about introspection:

I think I could turn and live with animals, they are
so placid and self-contained,
I stand and look at them long and long.
They do not sweat and whine about their condition,
They do not lie awake in the dark and weep for their
sins,
They do not make me sick discussing their duty to
God.

Of course with this quality of character, there must come some self-restraint, some serious and dull hours of work, repressions, inhibitions and even some uncongenial concentration. But I am sure the biologists agree if psychologists do not, that life is made up of inhibitions, since every activity of our vital forces must be guided by some definite directing inhibition, in order to become practically effective. And education would not exist if there had been no enforced guidance of the developing mind. Surely no one has to have more inhibitions cheerfully sustained than a successful medical personality.

THE PEAKS IN MEDICAL PROGRESS

I pass now from the subject of the nature of the "humanities" and their relations to the individual physicians. And I wish to call attention to some facts in the history

of medical and human progress which bear on these humanities. These facts have been very interesting to me and I hope I am interpreting them with some justification.

Up to the sixteenth century there were just four peaks in the history of medicine; four periods when medicine received a distinct impetus. These were the great classic period of Hellenic culture at the time of Pericles; the period of activity of the Alexandrian school; that of the second century of the Roman Empire, and that of the late Renaissance.

Real medicine began with that race which gave use the Iliad, Socrates, Plato, Aristotle and the great Greek tragic poets.

And medicine received a new and important impetus only at the later periods mentioned when at the same time the humanities were also especially contributed to the world.

Let me first say a word about some of the earlier periods and the other contributions to the art and literature of civilization.

I have long been interested in the culture of the Chinese. They are a race which has been educated almost exclusively on its peculiar brand of "humanities" for three thousand years. I do not say it is cause and effect, but for some reason the cultivated Chinaman probably on what may be called the "sensory side" represents the most complete and perfect product of God's creative skill in the realm of terrestrial life. He is at any rate a very high type of the *genus homo*. This is shown in his capacity to create and appreciate beauty and the higher forms of sensuous appeal; in his attitude towards life and death and pain; in his power to adapt his social life to his capacities, his enjoyments and his needs. No nation except the Greek has ever produced art equal to theirs; nor has any nation so peculiarly perfected the art of living and of dying without complaint.

But the Chinese with all their classics added nothing to medicine. Was it not because their classics made no broad human

appeal? They were the moral and behavioural sayings of Confucius and Mencius with their followers, and the often beautiful and spiritual appeals of Buddha. All their utterances were concerned with conduct and especially with family life in its ethical bearings, or with a personal sublimation into Nirvana. They had their poets and artists and inventors, but all their classic literature was dominated by ethico-religious doctrines. China never got outside itself; never had any but its own background; its poetry was descriptive; it never produced a great epic nor developed a world literature of classic value. And it added nothing to medicine, because, I am venturing to say, its culture was not broad and not humane. The Chinaman was born chiefly to become an ancestor.

The same things may be said of the Babylonian, Jewish and Indian cultures. They were interested in the stars, in their gods and in the soul; not in the objective observation of nature or man. All that these nations ever gave to medicine were some public health measures from the Jews; some operative skill from India and, from various other sources some of our *materia medica*. Egypt had a noble art, and an extraordinary and interesting civilization, but man was an incident in royal life or priestly ritual. The Egyptians embalmed but never dissected.

In all these nations the civilization was racial and specialized. It was with the Greeks then at the period of their greatest literary, artistic and philosophic activity that medicine really began.

THE HELLENIC PEAK

It seems that a race had to be able to create great and enduring works in literature and art, in order to have the ability to see the importance of objective study and to attack with success the science and art of medicine.

Hippocrates perhaps was not one of the group that gathered in the groves of Academe. At least he took no part in the

Socratic dialogues, but he possessed the spirit of the humanists; for as Mahaffy says: "We find even a literary grandeur in his prose, that is not the writing of any but a great master." He had the vision to start with hygiene as the proper basis of medicine—thus beginning at a period at which we are just arriving. He sought to systematize experience by careful observation, to establish laws of hygiene and to utilize the natural prophylactics or remedies afforded by air, water and climate. He originated the famous oath which expressed the highest aims for the practitioner of physic and gives an ideal of conduct that cannot be improved upon today. This *Votum medici* could not have come merely from a medical technician, however well trained.

When Greece lost its independence, a general decadence set in. The school of Cos also began to decline and nothing was added to medicine from this source.

Then three centuries later the school of Alexandria became the world's center of learning and of literary activity, and also of the mechanical sciences and medicine. Here there developed a classic literature of a somewhat lower grade, but with peaks that rivaled earlier periods. The idyls of Theocritus, the poems of Callimachus and Apollonius, the contributions to the Greek anthology survive in literature today.

THE ALEXANDRIAN PEAK

Along with this literary renaissance, anatomy and medicine flourished in a way that they had never done before. Hippocrates was a clinician, not an anatomist or physiologist, but at Alexandria anatomy was studied and dissections were made. Not much has survived of Alexandrian work today, but we know that this school educated almost all of the physicians of Europe for the following five hundred years. We have much of its teachings probably in the textbook of Celsus, which was written in the first century and is one of the best works on medical practice that

ever appeared. This was the fruit of the Hippocratic and Alexandrian peaks of medical progress, both developed in a period associated with a great devotion to what we call now the "humanities."

The Romans had their classic writers and no one can deny that Cicero, Virgil and Horace contributed to cultural literature. But they were almost exotics; the Romans loved money and power and had great skill in administration, and the enactment of laws; but they had no interest in any form of natural science or objective study, and they despised medicine. At the time of Julius Caesar they simply began to tolerate it, but without contributing to it.

THE IMPERIAL ROMAN PEAK

For one hundred years they gradually grew more civilized and more cultivated: Then:

In the second century of the Christian era, the Empire of Rome comprehended the fairest part of the earth, and the most civilized portion of mankind. The frontiers of that extensive monarchy were guarded by ancient renown and disciplined valour. The gentle, but powerful, influence of laws and manners, had gradually cemented the union of the provinces. Their peaceful inhabitants enjoyed and abused the advantage of wealth and luxury.

I am sure you recognize in the foregoing, the sonorous periods of Gibbon.

This was a time when the eleven bad Emperors who succeeded Augustus were all dead (most of them having been murdered), and the five good Emperors were beginning their sway. It was a period when interest in the humanities rose as high as it ever could rise in a Roman civilization. Every educated citizen felt it proper to write poems, essays and orations. Even the Emperors did this and both Seneca and Lucan were the objects of imperial envy because they were cleverer than their masters. The popular thing from the time of Horace to that of Pliny Secundus was to gather a group of friends and read to them their effusions. These groups as Pliny admits, sometimes got bored. Many of

the wealthy had a professional literary slave to help them in their cultural toil. Every city of any importance had its writers and authors.

Even though the highest type of work was not done in this century, it is probable that no series of writings have affected educators, education and opinion in general more than those of this period. In law there was Quintilian; in medicine, Galen; in history, Tacitus and Plutarch; in philosophy and ethics, Epictetus and Marcus Aurelius; in literature, Martial, Juvenal, Persius, Pliny and Lucian.

The Elder Pliny was stirred to an interest in natural history and he incidentally made real contributions to *materia medica*, though he severely criticized the doctors as they perhaps deserved.

It was at this period that Galen appeared and his work made the first real contribution to medicine since the active studies of the Alexandrian school. In Galen again we find the Hippocratic spirit of wishing to learn by observation and experiment. He used again the methods of the laboratory and added definitely to anatomy and physiology. Galen was a man of surpassing industry and extraordinary learning; indeed he seemed to know everything that was then to be known. He so much surpassed his contemporaries and successors and lifted medicine to such a high plain, that he practically isolated himself, his science and his art. Due to Galen's influence medicine remained upon a sort of intellectual plateau for about one thousand years and while the air of this plateau was stimulating and beneficial for a short time, it eventually became distinctly toxic. Galen's methods were forgotten but his doctrines acquired a strangle hold on medicine up to the time of the sixteenth century.

THE SIXTEENTH CENTURY PEAK

I wish I could introduce this period of time with a paragraph as eloquent as that of Gibbon when he wrote of the second century. The Dark and Middle Ages were

not apparently contributing to human knowledge or progress but they were fecundating; and they went into a strenuous but fortunate parturition in the fifteenth and sixteenth centuries. Civilization felt and found new forces and larger opportunities.

The new world had just been discovered, and there was an awakening to the knowledge of the Greek and Roman past, its historic deeds and its classic literature. Learning was becoming more human, theology was no longer queen of the sciences. Universities grew in number and teemed with students. The Medici flourished in Florence. Erasmus, Melancthon and Richerpin spread the love of scholarship in England, Germany and France. Marguerite of Navarre had an intellectual, religious and amatory circle in France. Rabelais wrote his tales; Montaigne, his essays; Cervantes, his "Don Quixote." There was a group of learned men and wits in London and there were also Johnson, Spenser and Shakespeare.

But there were also some dreadful things done: The Wars of the Netherlands, the sack of Rome, the Massacre of St. Bartholomew, the looting of Mexico and Peru, the religious wars and the persecutions.

In spite of all these horrors the times were alive, and alive with eagerness for scholarly accomplishment, and finally also with zest for scientific research.

In this century medicine was born again. For it was then that Vesalius published his work aided by the art of his day; and a real anatomy of the human body was given out for the first time in the history of civilization.

Paré reformed surgery; Paracelsus broke into the old academic methods of Galenic medicine; Servetus discovered the pulmonary circulation, Eustachius made an anatomy almost as good as that of Vesalius; Fabricius at Padua was teaching Harvey the method and spirit which led to his discovery of the circulation of blood; Linacre established a course of lectures at Oxford.

But I am not going to keep you in the sixteenth century; the story is a familiar one. The classical spirit had descended upon learning and mellowed the methods and opened the hearts of teachers and students in all departments of knowledge.

My historical points have been made. I may not have convinced you of my view that when a race or a civilization has humanism, it begins to study medicine seriously and accelerate its progress; but I hope the thesis will arrest your attention and make you forget for a time the hero of today, Mr. Henry Ford, who we are told thinks that history is all "bunk."

I do not further pursue my argument but I wish to finish my history. After the sixteenth century medicine stood rather still for 200 years. For from the sixteenth to the nineteenth nothing very much was done, except some additions to chemistry and to the physiology of respiration. The period is full of interesting men and curious and ingenious theories; it forms a stirring record of individual activities, but not of medical progress.

THE NINETEENTH CENTURY

During the nineteenth century, medicine really arrived, and since then we have been able to say that there is a medical science as well as art.

During the first half of this time Germany wandered about in a maze of enticing philosophies associated with a convinced nihilism as to the therapeutics of the medical art. Later she found herself. In England and France there arose groups of great clinicians, with powers of observation and interpretation not developed before or since. Jenner started the century with his vaccinations. Then and later came the Hunters, Stokes, Adams, Bright, Brodie, Laënnec and others whose names are identified forever with the recognition of special types of disease or significant and diagnostic syndromes.

The nineteenth century has been variously classified from the cultural point of view as mediocre and Victorian. Of late however both Victoria and her century have

received greater respect. It seems to me that at least humanism and the humanities were definitely pervasive then. Indeed it was in the early part of the century that Hazlitt revived the word and exploited its value with eloquence and emphasis. At any rate I leave the historical phase of the subject and beg to be allowed to say something concerning its relation to the doctor's education and habit of life.

EDUCATION AND THE HUMANITIES

The thesis that I am expounding bears greatly on this subject. We all, I think, who have reached mature years like to have an opinion on education. And we have a perfect right, for there is really no established authority, no last word. Education is still an empirical subject, and a fruitful field for opportunism. I am told that a certain much and justly celebrated educationalist visited Chicago not so long ago, and met an almost equally famous health officer. The health officer greeted the educationalist most warmly: "You have done a great thing, Doctor," he said, "you have wiped out fifty medical colleges, and put a lot of cheap doctors out of business. Splendid! Doctor, you are the father of chiropractics."

And so he is, although that was only an incident showing the difficulties and peculiarities of medical educational problems. I am not offering any solution, but I offer one small contribution. Medical education is a social problem as much as it is a technical one. I would urge the value of such kinds of avocational study as help to make the doctor more human; studies which make him love his patient more than the disease, and to realize that patients like being caressed rather than being diagnosed. This is forgotten—therefore we have the chiropractors.

A study of the lives of successful physicians and of the accomplishments and methods of the past, shows often the value of this kind of interest. There is something

instructive to medical educators even in the methods of the ancient medical schools and their products. Guy Patin was possessed of and by the scholasticism of his day, he wrote clever letters, but he was a good teacher, and a good doctor, even though he only used bleeding, ptisans and senna. There was something fine too in the academic ethics of the past. After Jerome Cardan had signed his agreement to treat the Archbishop of St. Andrews for five dollars a day and a bonus, he tore the contract up, as it was unethical for a physician in his day to give his bond, when his word should be enough. I like the way in which by elaborate functions they of old emphasized the importance and dignity of the profession. They would not in those Galenical days tolerate fads or cranks, even to the point of injustice. We need now to apply some culture to our tendency to develop medical fashions. It happens at present that every obscure functional case has to be considered from the standpoint of the internal secretions, oral and colonic sepsis, or the subconscious and apparently we are getting more sympathetic to new fancies.

What kind of education is going to handle these things? A popular view is that we should let the instincts have their play, open up the subconscious and do pluriglandular feeding. In my opinion we can only handle these factors by educating people to have a background and this means a wise development and training of our higher faculties. By obtaining through these such control that we can adjust ourselves to the conditions of life about us, or else change these conditions by our own activities, and thus make the environment adjust itself to us. The processes here are the acquisition of cultural knowledge, as well as technical, and the encouragement of power to inhibit the bad instincts and exploit the good ones. The little red school house has been a very efficient instrument in cultivating inhibitions.

I would insist again that cultural knowledge

is useful as well as it is technical. As far as medicine is concerned a friend of mine, an up-country doctor one day said: "Why don't the colleges give a course in medical history, so the doctors will know what has been done in the world? Then we will not be running quite so much after what seems a new thing."

My own suggestion has long been that medical colleges should have an advisory historian who will help the different departments to prepare historical lectures covering various fields, or step in and lecture himself. Something of this kind would, I know if well done, interest and stimulate medical students immensely.

I do not believe that all doctors need to be educated, certainly not too highly. Learning sometimes spoils the personality. A laboriously acquired education may definitely weaken the driving force and even the capacity for originality. A doctor who gets a good start on a limited original training may rise higher than his educated brother, but he will always become better and happier if as he progresses he acquires a knowledge of the humanities. Physicians who add something on the aesthetic side to their professional training are helped thereby. Doctors, who have some sincere religious feeling and interest, who have some music or art as an avocation, penetrate more easily into the souls, bodies and even pockets of their patients.

It is my conviction that the study of the classics to the point where one knows them historically and somewhat linguistically, forms an avocation that combines intellectual training, enjoyable knowledge and distinct aesthetic values.

WEIR MITCHELL AND THE HUMANITIES

Weir Mitchell in his avocations was very nearly a genius. He did things which were classic of themselves and he must have gotten much technical and help through the arts which he pursued and adorned.

Few can follow his methods or imitate his pursuits, but his life is testimony to the enrichment that comes from having a sound technical training and skill, together with the artistic accomplishments of a poet, an historian and a vivid narrator of appealing tales.

Dr. Mitchell wrote articles on the venom of snakes, on injuries of the nerves, on fat and blood, disorders of sleep, neuralgia, knee-jerks, and neuritis, and he was also interested in the Tombs of Lycia, one of the most obscure provinces of Asia Minor, but rich in antiquities. He wrote perhaps his best poem on a "Lycian Tomb" on which one and the same woman is carved in many attitudes of grief, each figure separated by Doric columns.

What gracious nunnery of grief is here,
One woman garbed in sorrow's every mood,
Each sad presentment set apart, in fear
Lest that herself upon herself intrude.

This was in the most classical trend of his imagination. He also wrote in a modern and personal mood.

Very charming and human was his "Address of a Bottle of Madeira Aged 86, to George Bancroft Aged 86." There is in it a greeting and a goodbye and though the lines are a trifle "wet," I will finish my address and say my goodbye by quoting the last three stanzas:

I

Years eighty-six have come and gone;
At last we meet. Your health to-night.
Take from this board of friendly hearts
The memory of a proud delight.

II

The days that went have made you wise.
There's wisdom in my rare bouquet.
I'm rather paler than I was;
And on my soul, you're growing gray.

III

I like to think, when Toper Time
Has drained the last of me and you,
Some here shall say, "They both were good,—
The wine we drank, the man we knew."