Art, Literature, and Medicine

Quite a few medical schools have literary magazines. This should not be surprising, in view of the increased general and academic emphasis on the medical humanities, especially patient narratives, over the last few decades. What may be surprising, however, is just how good some of these magazines are. Here are descriptions of just a few:

**Blood and Thunder**

The University of Oklahoma Health Sciences Center (OUHSC) College of Medicine publishes an annual literary and artistic journal, *Blood and Thunder: Musings on the Art of Medicine*. The image below, *My Sister’s Death, as Furniture*, by Oklahoma City artist Brooks Tower, appeared on the cover of the Fall 2005 issue of the journal.
A group of medical students launched *Blood and Thunder* in 2001, inspired by Prof. Jerry Vannatta’s “Literature and Medicine” elective first-year course. Much of the prose, poetry, and art in it comes from the OUHSC community, but contributors hail from across the United States. Contributions reflect the experiences of practitioners, patients, students, and family members. The journal’s creators aim to increase readers’ empathy and appreciation for the emotional dimensions of illness and health care.

This poem by OUHSC medical student Breck Thrash appeared in the Fall 2005 issue:

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Dying Proof

You're dying proof of the ways things have changed
We do not pass in the arms of our mothers any longer
Their tears mixing with the streaked blood on our faces
The desperate prayers of grieving fathers now go unheard
They've been replaced with the buzz of machines
And their strong hands, helpless to hold on,
Provide the comfort of touch no more
Lying naked on the table, your message is clear
Dying is no longer the human condition
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To view more samples from the journal, to submit a piece for the Fall 2007 issue, or to order a copy ($8.00, including shipping), please visit: <www.bloodandthunder.org>. The Web site also features selected pieces from the archived issues.


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**The Healing Muse**

Gina Kokes wrote online in “The NewPages Literary Magazine Reviews” <newpages.com/magazines/stand/litmags/2005_2/feb2005mags.htm>: “When I finished this annual journal of Upstate Medical University, *The Healing Muse*, I felt I had been on a journey of discovery. Through fiction, non-fiction, poetry, and photography, health care givers and patients explore and ex-

press their feelings and thoughts about the roles and relationships they have with each other as well as with illness and disease. The complexity of the works presented reflects the complexity of the personal dramas from each side of bed. ... Although the subject matter is serious, the journal is never melancholy. Many of the black and white photos accompanying the selections are of spring and hyacinths and small star-like flowers as if to remind us that harsh realities usher in delicate new life and understanding.”

_The Healing Muse_ was the brainchild of Bonnie St. Andrews, Ph.D., a popular professor in Upstate’s Center for Bioethics and Humanities (CBH). Bonnie was committed to using the arts as healing tools. In the first issue she wrote: “It is axiomatic to note that our lives inform our work. Working in a medical center often engenders compassion as well as competence, sorrow as well as celebration. These writings may well suggest a correlation between examined experiences and an expanded ability to serve and to heal. At Upstate, the arts and the sciences balance and sustain one another for the good of both patient and practitioner.”

Since Bonnie’s untimely death, _The Healing Muse_ has been edited by Deirdre Neilen, Ph.D., also a member of the CBH faculty. Its first volume (Fall 2001) was only 68 pages with almost all its contents created by Upstate faculty, staff, and students. It has grown from those humble beginnings to enjoy a solid national reputation. Its sixth volume (Fall 2006) is 164 pages of high-quality submissions by not only Upstate people, but also accomplished poets, fiction and non-fiction writers, and artists from across North America.

_The Healing Muse_’s Web site is: <www.upstate.edu/bioethics/thehealingmuse/>.

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**History of Medicine on DVD**

Faculty from the University of Oklahoma Health Sciences Center and the University of Oklahoma’s main campus recently produced an interactive DVD-ROM, _Medicine and Human Understanding: The Significance of Narrative in Medical Practices_. Ordering information is available online here: <www.upenn.edu/pennpress/book/14072.html>. The DVD-ROM includes more than fifteen hours of text and video content, with appearances by notable physicians such as Oliver Sacks and Rita Charon. Physicians can claim up to twelve hours of AMA category 1 continuing medical education credit for using this DVD-ROM.

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**“Literature, Arts, and Medicine Database”**

Jonathon Erlen of the University of Pittsburgh draws our attention to the “Literature, Arts, and Medicine Database” <endeavor.med.nyu.edu/lit-med/lit-med-db/index.html>, a wonderful online resource maintained at New York University by Felice Aull, Ph.D.

More generally, Aull’s Web site, “Medical Humanities” <endeavor.med.nyu.edu/lit-med/>, “is dedicated to providing a resource for scholars, educators, students, patients, and others who are interested in the work of medical humanities,” defined broadly to include the “interdisciplinary field of humanities (literature, philosophy, ethics, history and religion), social science (anthropology, cultural studies, psychology, sociology), and the arts (literature, theater, film, and visual arts) and their application to medical education and practice.”

Besides the database, she also offers a listserv, Lit-Med, medical humanities course syllabi, and a directory of people who work in the medical humanities.

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**The First Ovariotomy**

George Kasson Knapp’s painting of American frontier physician Ephraim McDowell (1771-1830) performing the world’s first successful ovariotomy1 was exhibited at the 29th annual meeting of the American Medical Association, Buffalo, June 4-7, 1878. According to Syracuse gynecologist Ely Van De Warker (1841-1910), the artist executed the work in the 1870s.2 But

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2 Ely Van De Warker, “Mr. Knapp’s Painting of the First Ovariotomy,” _Obstetric Gazette_, 1, 8 (1879): 342-344.
he must have modified it after that, because it is now signed — or rather scratched — “G. K. Knapp 1884.”

There are six figures in the painting: McDowell standing to the right with his right hand inside the abdomen of the patient, Jane Todd Crawford; an elderly gentleman, perhaps Thomas Crawford, her husband, comforting her; a student, partially obscured in the center background, perhaps either Charles McKinny or Alban (or Albin) Gilpin Smith; James McDowell, the surgeon’s nephew, in profile; and a black woman servant or slave in the left background.

McDowell operated at his home in Danville, Kentucky, the morning of December 25, 1809, a generation before reliable surgical anesthesia was developed. The 47-year-old patient only recited Psalms to ease the pain. The excised ovarian cyst weighed 22.5 pounds. The procedure took twenty-five minutes. Crawford recovered in about a month and survived for thirty-one years.

Alban Gilpin Smith (1795-1876) changed his name first to Alban Gold Smith then, in 1839, to Alban Goldsmith. In 1809 he was McDowell’s apprentice, later studied with Joseph Parrish in Philadelphia and Jean Civiale in Paris, was McDowell’s partner from 1822 to 1826, and became an accomplished abdominal surgeon, general surgeon, and teacher of surgery. Lyons and Petrucelli attribute the original artwork to Goldsmith, but none of the standard biographical sources on Goldsmith supports that assertion.

McDowell did several more ovariotomies, with only one fatality. Nathan Smith (1762-1829) performed a successful ovariotomy in 1821 and Smith did one in 1823. The fourth successful American ovariotomist was Upstate New York surgeon David L. Rogers, who first performed the operation in 1829 and taught surgery at Geneva Medical College from 1838 to 1840.

Knapp was born on October 29, 1833 near Syracuse, New York. After 1858, he enjoyed a distinguished career as a portraitist and painter, including a position at Syracuse University as Professor of Drawing and Painting from 1873 to 1879. He married Jennette D. Barber in 1860. They had two children, George Albert Knapp, born in 1864, and Fanny Wolcott Knapp, born in 1873. Widowed in 1874, he married Eudocia Hills Tuttle in 1875 and died in Syracuse on May 9, 1910.

Crediting the artist’s daughter Fanny, Schachner published a copy (backwards) of either the painting

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3 Ephraim McDowell, “Three Cases of Extirpation of Diseased Ovaria,” Eclectic Repertory and Analytical Review, Medical and Philosophical, 7 (1817): 242-244.
9 Alban G. Smith, “Account of a Case in Which an Ovaryum was Successfully Extirpated,” North American Medical and Surgical Journal, 1 (1826): 30-33, [with commentary by Benjamin H. Coates], 33-38.
10 Alumni Record and General Catalogue of Syracuse University, 1872-1910, Including Genesee College, 1852-1871, and Geneva Medical College, 1835-1872, ed. by Frank Smalley (Syracuse: Alumni Association of Syracuse University, 1911), p. 356.
itself or (more probably) the lithograph mentioned by Van De Warker. Sometime after that, she must have given or sold the painting to either the Syracuse University College of Medicine or its successor, SUNY Upstate Medical University, since it hung in the Dean’s Conference Room of that institution for many years and since 2002 has hung in the Department of Historical Collections of its Health Sciences Library. Before he restored it, Syracuse art conservator Peter Schulz appraised it in 1996 as worth at least $14,000.

Eric v.d. Luft, Ph.D., M.L.S.
Curator of Historical Collections Emeritus
SUNY Upstate Medical University

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**Book Reviews**


The history of the evolution of medical specialization in the United States, Great Britain, France, and Germany is a long, extremely complex story. Each nation fashioned its own unique system of medical specialization during the nineteenth and twentieth centuries. Weisz’s book, detailing this process, provides invaluable information on this important subject, even though his writing style makes reading this volume exceedingly challenging.

Weisz divides his coverage into three time frames: the 1830s into the 1890s, the 1890s into the 1950s, and the 1950s to the present. Medical specialization on a large scale began in the great hospitals of Paris in the 1830s, then expanded rapidly in Vienna beginning in the 1850s, sweeping through all major German cities by the close of the nineteenth century. The French and German patterns of medical specialization were not duplicated in Great Britain because of its longstanding tradition of medical elites housed in various royal colleges, hospitals, and medical schools. This factor, along with the British Medical Association’s indifference toward specialization, led to the belated acceptance of medical specialization in Great Britain by the medical profession. Medical specialization in the United States occurred piecemeal during the post-Civil War era, driven by the rise of cities, the medical experiences that occurred during the Civil War, and the American physicians returning from European training who wanted to participate in the international world of medical research.

Throughout this text, Weisz makes extensive use of primary materials, particularly the early medical directories from each nation. He also relies heavily on a few accepted standard secondary texts such as Rosemary Stevens’s *American Medicine and the Public Interest*. Several chapters are based almost solely on these secondary sources, while the chapters concerning medical specialization in France and Germany are mostly grounded in primary documentation.

The main forces behind medical specialization’s emergence and growth were advances in medical research and education. Only later would medical specialization spill over into daily medical practice. Government played a limited but important role in medical specialization’s regulation and the advent of specialty certification, though far less in the United States than in the other three nations covered in this volume. National medical organizations were a significant variable in each country, with the AMA and the BMA leading the way to specialty certification in the United States and Great Britain. The public came to rely on the perceived expertise of the ever-growing number of medical specialists. Finally, the international relations between specialists who studied abroad and attended international congresses encouraged specialization’s expansion in all four countries.

The past half-century has seen a tremendous increase in the number of medical specialties, along with the near disappearance of the general practitioner. Each nation faces its own set of issues surrounding medical
specialization, yet there are several underlying common themes. With the growth of medical specialties, who will provide primary care? The emergence of new specialty fields is straining old regulatory frameworks for certification. How can medical specialists work outside an urban environment? Who will oversee the quality of specialty medical education in the hospital setting? In all four nations there is a desperate need to curtail the growth of medical spending fueled by expensive specialty procedures. Weisz discusses how each nation is currently attempting to handle these challenging issues, and the price of failure if they do not succeed.

Jonathon Erlen
History of Medicine Library
Health Sciences Library System
University of Pittsburgh

Chinese religious beliefs. Europeans found much that was useful in Chinese medicine, including materia medica, acupuncture, and moxibustion, but they also judged the Chinese lacking in anatomical knowledge, and were perplexed by some aspects of Chinese medicine. As with religion, Chinese medicine was sometimes misinterpreted, such as when the concept of qi was likened to Harvey’s description of circulation.

Barnes takes a chronological approach, addressing her three themes and their interplay in each chapter. Chapter 1, “First Impressions,” covers early contacts from soon after the conquests of Genghis Khan through 1491. The expansion of the Mongol Empire prompted Europeans to send emissaries and missionaries east. Traders such as Marco Polo ventured to China and wrote about their travels. William of Rubruck, a Franciscan friar who spent 1253-1255 in Karakorum, Mongolia, observed physicians and extensively described their practices. However, William’s work was not widely read.

Chapter 2, “A New Wave of Europeans,” begins in 1492. Portuguese, British, and Dutch traders established ties in Asia. In 1534, the Society of Jesus was founded, and it soon dispatched missionaries to China. Jesuit Matteo Ricci kept a detailed diary of his 28 years in China (1582-1610). Medicinal herbs, including rhubarb, ginger, and ginseng were exported and cultivated in Europe. Western scholars wrote about Chinese theories of the body centered on qi, the life force in all things, and the opposing forces of yin and yang.

Chapter 3, “Model State, Medical Men, and ‘Mechanick Principles’,” starts in 1660 and closes in 1736. In this period, Westerners wrote more about acupuncture, moxibustion (a practice similar to acupuncture, but which involves the burning of herbal material rather than insertion of needles) and the sophisticated system of pulse diagnosis. British physician John Floyer was inspired to write The Physician’s Pulse Watch (1707) based on accounts of Chinese medicine. Several European writers produced secondhand descriptions of China. A core primary source appeared in 1735, Jean-Baptiste du Halde’s four-volume Description géographique, historique, chronologique, politique et physique de l’empire de la Chine et de la Tartarie chinoise.

Chapter 4, “Sinophiles, Sinophobes, and the Cult of Chinoiserie,” opens in 1737. In 1760, the Emperor limited foreigners to the port city of Canton. As a re-
result, Westerners had less contact with the Chinese literati, and more contact with lower-class medical practitioners. Although medical schools existed in China, there was no incentive to pursue formal training, leading to inconsistency in the quality of medical treatment. As in Europe at the time, women’s role in medicine was limited. In Europe, a rage for all things Chinese developed in the eighteenth century. However, the writings of Johann Friedrich Blumenbach, who coined the term ‘Caucasian’ in 1795, sparked a sentiment that non-Caucasians were inferior. In 1804, British businessman John Barrow published his popular Travels in China, which was often quite critical of Chinese medicine and society.

Chapter 5, “Memory, History and Imagination,” picks up in 1805. Medical missionaries from the West continued to visit China. One of them was American Peter Parker, who performed thousands of surgeries in China. Parker was accompanied by Chinese painter Lam Qua, some of whose paintings can be viewed online at the Yale Medical Historical Library: <www.med.yale.edu/library/historical/parker.html>. Much of Chapter 5 is a literature review of Western references to acupuncture from 1805 to 1848. Barnes shows that interest in acupuncture in that time peaked in the 1820s. Electroacupuncture began to emerge in the early nineteenth century. After the first Opium War in 1842, China was forced to open more ports to foreigners, and to be more tolerant of their activities. Chapter 5 ends in 1848, one year before large-scale Chinese emigration to other countries began.

Throughout the book, Barnes sets the context for the Europeans’ encounters with Chinese medicine by detailing contemporary developments in Western medicine and by describing the impact of other aspects of Chinese culture on the Europeans. Barnes provides an extensive bibliography and, in the Introduction, she recommends a few recent overviews of Chinese medicine for background reading. Several black-and-white illustrations enhance the text. Needles, Herbs, Gods, and Ghosts offers a fresh, insightful look at the history of Western reactions to Chinese medicine and society.

Ursula Ellis
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Collections, Exhibits, and Access

Bringing it to the Masses: Introducing Med I Students to Medical History Through the Ohio State University Medical Heritage Center

Introduction

Staying relevant to the needs of a parent institution is a challenge that faces most university-based health
sciences heritage institutions. This challenge is even more acute when there is no formal educational curriculum for the heritage institution to support. Jacalyn Duffin has pointed out the all too daunting fact that "... the majority of medical schools do not view history as an essential component of physician education."\(^1\) Accordingly, medical schools have found it necessary to change their curriculum to make way for educational components that are seen as more essential to physician education. In the wake of curriculum changes, heritage institutions have needed to adapt to change and find creative ways to compete for an audience and for budget dollars.

Until recently, all Med I students at the Ohio State University (OSU) College of Medicine were required to attend an all-day lecture in medical history as part of the medical humanities curriculum. These courses were taught by members of the Medical Heritage Center (MHC) scholar-in-residence program and MHC collections, and research support by the curatorial staff were used by the lecturers. Beyond the history lecture support, the MHC staff also worked with lecturers who taught other subjects within the medical humanities curriculum to support their research and project needs.

In 2003, however, the medical history lecture was cut during a curriculum change from a more traditional medical humanities course to a two-year Patient-Centered Medicine (PCM) program. This change meant that no regular and consistent way existed to introduce medical students early in their education to the history of the profession, the area’s medical heritage, or to the MHC collections. After the removal of this class from the curriculum, the only opportunity that existed for students to be introduced to medical history was a four-session mini-module in the history of medicine that is offered as an elective choice to Med II students. However, the mini-module course is limited to only twenty Med II students per year.

Despite the challenge of an ever-decreasing presence of medical history within the curriculum, the MHC worked to create partnerships and opportunities within the changing environment. Founded in 1997 as a partnership between the Columbus Medical Association (CMA) and OSU, the MHC is charged with collecting, preserving, and promoting the history of the health sciences in central Ohio. It is through the promotion portion of the center’s mission that the MHC has embarked on new initiatives to introduce Med I students to the general concepts of medical history as well as introducing them to the heritage of the area. These initiatives are discussed here.

**Visual Learning Exhibits**

Despite the fact that the history of medicine lecture had been cut, the faculty who served as its instructors continued to be strong advocates for medical history after the curriculum change and began seeking alternative means of introducing students to medical history. Discussions and brainstorming meetings were held to discuss possibilities for the promotion of medical history in the medical school between the MHC, concerned faculty members, and the office of academic affairs. These sessions resulted in a trial project for installing visual learning exhibits in two heavily-used pre-clinical classrooms within the medical school.

The goals of these exhibits were to provide students with an introduction to the history of their profession and to the region’s heritage and to explore the use of visual images as a mode of adult learning. Partnerships for pulling together the project were soon identified and formed. The OSU Office of Academic Affairs managed the exhibit project from conception to installation while the MHC and its scholar-in-residence program provided research support, exhibit text, and exhibit images. The OSU Office of Alumni Affairs provided the financial support for the project, and the Wexner Center for the Arts at OSU provided exhibit design support.

In 2004, two exhibits were installed in the classrooms. One exhibit focused on the history of medical education in central Ohio, and the other focused on the history of the profession. Both exhibits credit the MHC and direct students to the center for more information and resources. Although no hard data exists, student visitors have often anecdotally remarked since the exhibit installation that they became aware of the Center and medical history by viewing the exhibits. Future plans for the project include installing more exhibits in the classrooms, seeking more exhibit partners for

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financial partnership and support, researching the success of the project as a mode of adult learning, and increasing student involvement in the program.

History of Medicine Committee

The partnerships formed and interest generated within the student body by the installation of the exhibits in the preclinical classrooms led to the formation of the History of Medicine Committee. This second initiative of the MHC to promote medical history to medical students was created as part of the Project Professionalism section of the PCM curriculum. The OSU PCM curriculum is a two-year, pre-clinical course designed to teach the “art and science of medicine.” The curriculum is centered on themed modules that are considered to be important to the education of future physicians. These modules currently are: ethics, palliative medicine, and cultural awareness. The committee meets on a regular basis to create and implement heritage-related programming that concerns medical careers, violence, sexuality, addiction, and project professionalism.2

According to the professionalism module Web site, its mission is “to create and maintain the culture of respect in the medical environment by promoting compassionate care, professional behaviors, excellence in medical knowledge, and altruism (placing the needs of others ahead of our own). We want our students to take great pride in the tenets of professionalism — from White Coat to practice.”3 The History of Medicine Committee was first formed in fall 2004 after the installation of the classroom exhibit and is currently one of nine among which students can select.

The 2005-2006 History of Medicine Committee was comprised of fourteen Med I students, two MED II student advisors, the Head Curator of the MHC, and a representative from the OSU College of Medicine Office of Academic Services who serves as advisor to the committee. The charge of the History of Medicine Committee is to create heritage-centered programs and projects designed by student participants.

The committee meets on a regular basis to create and implement heritage-related programming and projects. The programs and projects are designed to bring the history of medicine and the medical heritage of the region to the attention of the greater student body. Current and future projects of the committee include lunch with local medical history scholars, the creation of virtual and physical student-curated exhibits, scheduling of behind-the-scenes tours of the MHC, and a student lecture and film series. Although developed specifically by a small committee of students, all projects and programs are open for participation by all medical students.

Conclusion

In an age of shrinking financial resources and changing curriculum priorities within medical education, university health sciences history institutions must seek ways to stay germane within their environment or risk losing needed support and relevancy. When faced with a change of curriculum at the OSU College of Medicine, the MHC altered its past methods of supporting the educational needs of the Med I students and developed partnerships to implement new projects to fit within the new PCM curriculum.

The creation of classroom visual learning exhibits and a History of Medicine Committee within Project Professionalism allowed for a continued connection to medical students. It is perhaps the ultimate goal that these efforts will lead the students to develop a flourishing lifelong interest in and support of medical history and see it as an essential part of their understanding of what it means to be a physician.

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2 Ohio State University College of Medicine, “Patient-Centered Medicine in the Ohio State University College of Medicine.” Online database at <medicine.osu.edu.proxy.lib.ohio-state.edu/currentstudents/handbooks/Med1/PCM/PCM1.pdf>, p. 6 (accessed August 2, 2006).
3 Ohio State University College of Medicine Office of Student Affairs. “Project Professionalism in the Ohio State University College of Medicine.” Online database at <medicine.osu.edu/studentaffairs/5623.cfm>, p. 1 (accessed July 26, 2006).

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Integrating History Into Medicine: One Request and Four Responses

The following exchange occurred on ALHHS-L in June 2006. Because of its fundamental importance and interest to our everyone in our profession, we offer it again here:

Dear Colleagues,

As I prepare for the Fall term I have been contemplating ways in which I can get the Osler Library and its resources more integrated into the medical curriculum. The history of medicine people, plus other historians, seem willing to call upon the Osler Library to work with them and their students, but we haven’t seemed to really connect with the Faculty of Medicine beyond those individuals who have a love of history. I am wondering how others have created successful collaborations with medical and related faculties. Is there anything that you’ve done that seems to attract business from the medicos? There is a short fourth year course that includes history, but I would like to reach beyond this, so any insights/advice/help would be much appreciated. I would be happy to share whatever I discover or try with others if they are interested. If you prefer, you could contact me offline at <christopher.lyons@mcgill.ca>.

Thanks,

Chris Lyons
Assistant History of Medicine/Biomedical Ethics Liaison Librarian Osler Library of the History of Medicine McGill University 514-398-4475, ext. 09847

Chris,

As a rare book dealer, bibliographer, and publisher rather than an academic, I would suggest that you should do whatever you can to introduce medical students to the Osler Library first and foremost, and use that as a springboard for introducing them to the wider concept of medical history.

Obviously, you have the incomparable advantage of the Oslerian tradition and library at McGill. Just getting students into the library, and offering them the opportunity to handle some less fragile and less “valu-

able” items should be enough to “turn on” the few students in each class who will ever care about the history of medicine.

I base these remarks on my long experience with physicians interested in medical history over forty years, most of whom got turned on to medical history by one teacher in medical school, or by reading about Osler or Cushing, or by reading about some other personality in medical history. Most students would never dream that they could actually handle some of the books and manuscripts that are behind the legends. Having such a rich repository of history at McGill would have to be inspiring for students who care. But they have to have some historical interest beforehand. Perhaps one or two percent of physicians truly care about medical history.

Integrating medical history into the wider medical curriculum may begin with the willingness of faculty members to direct students to the Oslerian library, to hold an occasional seminar there, to mention historical figures in lectures. One faculty member can do it, but it has to be the right inspiring teacher.

Best wishes,

Jeremy Norman

We have the great good fortune to have a champion of history of medicine in our vice dean who uses every opportunity to insert medical history experiences into the curriculum. However, even with his powerful assistance, it has been difficult since there is so much competition for every minute of the medical students’
time. Several years ago we began bringing the entire first year anatomy class into our reading room for an afternoon with our collection of anatomical atlases. Current and emeritus faculty are on hand to help the students make connections between what they are seeing in the lab and what their predecessors saw. It has been very successful. A capstone experience was offered to a small group (15) of fourth year students this Spring on history of medicine. In one intensive morning a summary of medical advances during the twentieth century was presented and was followed by a discussion on how the physician’s role has changed. Starting with the next school year, several lunch lectures and short courses (one week) between blocks will be inserted in the curriculum. Every student will be expected to read one book on medical history selected from a list by the end of their third year and to write a paper on it. Our students also now have the option to use their third year to study some aspect of medicine and humanities (which might eventually lead to an additional degree) as opposed to doing research.

We are well aware that even with this increased exposure if just one or two students in each class become genuinely interested and are inspired to continue studying history of medicine, the effort will have been more than worthwhile.

Suzanne Porter
Curator
History of Medicine Collections
Duke University Medical Center Library
Durham, NC 27710
919-660-1143

Dear Chris,

During the my 15 years at Washington University’s Medical School it was a constant challenge how to involve the medical faculty in Special Collections’ activities.

It started out with emphasis on providing very good and FAST service to them, when they needed rare materials, copies, citations, resources, etc. Due to this, many of them came back repeatedly and the recognition became mutual. I strongly believe that being a step ahead and offering more than what was asked were essential in winning the doctors. They, thus, became friends of our collections and also informal members of a future “Friends Circle.” We established a mailing list with 35 names (including “outside” people as well; such as science and humanities faculty, students, and a few non-university guests).

Our Friends received personal and appealing invitations to exhibit openings, lectures, and other special events that we organized. For all of these occasions we had a small reception. The food was simple but the wine was always exceptional. (The latter is a key issue, I think.) We had one or two of these events a year. I don’t think more would have been possible and useful. Each event brought in new people, so the mailing list soon contained more than a hundred names, and ca. the quarter of them were names of medical faculty.

Then, we established a permanent Lecture Series. Our Library financed the speakers, the honorarium, the still not too fancy food and — of course — excellent wine. We are in our fifth year with these lectures: two talks/ year with an audience of 40-70 per talk. To get this many people, we send out more than 300 invitations. Naturally, there is no recipe for choosing the “right” speaker for these events. In general I would say that the lecture has to be less scholarly and more intellectually intriguing, more logical and rational than overly erudite, and most of all: scientific on the right level. This type of lecture appeals to the doctors as well as to the mixed audience we usually have. To have one additional special event per year helps keeping the alliance with our patrons continuous.

The doctors’ side of the collaboration with us manifests in gifts and donations for the collections as well as in more frequent use of them. In addition to doing research, some bring visitors for tours, others request special displays for their classes or events, again others refer their colleagues with questions to us. Additionally, as friends and supporters of our collections, our medical faculty members provide good publicity among their peers for the activities and resources of our Special Collections.

Well, Chris, about our medical faculty, this is it in a nutshell. (BIG nutshell.) I hope it helps some, and please “fire back” with questions, if you’d like.

Best wishes,

Lilla Vekerdy
Rare Book Librarian
Washington University, Becker Medical Library
Dear Colleagues,

I have received several answers to my query about integrating history into medicine, for which I’m extremely grateful. One came to me off-list from Professor Jacalyn Duffin of Queen’s University about her work which I am permitted to share with you. I should mention that I recently gave a tour to a group of neurosurgical residents and some of them were quite knowledgable and particularly interested in the books on display. It turned out that they had gone to Queen’s and been inspired by Jackie.

Take care,

Chris

Hi Chris (and Anne)

Anne let me know about your request about integrating history into medical education. Our approach at Queen’s is basically just that: history is integrated in all four years of medical training and we teach the history of whatever else they are being taught at any given time. (In addition I do some resident instruction too).

My book, *History of Medicine: A Scandalously Short Introduction*, has a chapter for each of the sessions (there are actually more sessions than what is in the book). But it gives you an idea of what we do, and we bring the big famous books that are relevant to class (Vesalius, Smellie and Hunter atlases, first edition DSM, etc). Some are taught with clinical or basic science faculty.

I collaborate with the library on a Heroes and Villains “event” which is an introduction to the library, history and to monographs, in the first week of medicine school — (see first chapter in above book).

Or, you can also browse the Web-based instructions by following links for Heroes and Villains at our Web site: <meds.queensu.ca/medicine/histm/core.html>.

I published these experiences in a kind of “how I did it” paper a few years ago which you should be able to find quite easily: 1995 “Infiltrating the Curriculum: an Integrative Approach to History for Medical Students,” *Journal of the Medical Humanities*, vol. 16, no. 3, pp. 155-174.

Finally, we also published on a literature and medicine course that we’ve been teaching here electively for about 15 years to meds students, nursing students, and law students combined — using fiction, short stories, plays, poetry: 1995 with Mark Weisberg; “Evoking the Moral Imagination: Using Stories to Teach Ethics and Professionalism to Nursing, Medical, and Law Students”; *Change, The Magazine of Higher Learning*, vol. 27, no. 1, pp. 20-27. Also published in *Journal of the Medical Humanities*, vol. 16, no. 4, pp. 247-263.

Congrats on the initiative — students seem to like our program.

Hope this is of help — feel free to post to your list serve or not.

Best

Jackie
Netter Exhibit in New Jersey

A free, open to the public exhibit entitled, “Frank H. Netter, M.D.: Medical Illustrator Extraordinaire,” was held from September 1 to November 30, 2006, at the University of Medicine and Dentistry of New Jersey (UMDNJ) George F. Smith Library of the Health Sciences, Newark.

Netter was a prominent physician and an internationally recognized illustrator of medical literature for the New Jersey based pharmaceutical company, Ciba-Geigy. He developed illustrations for the well known anatomical atlases, *The Ciba Collection of Medical Illustrations*, and contributed hundreds of illustrations to the company’s journal, *Clinical Symposia*. His artwork highlighted various aspects of the medical and dental professions.

“We are excited about presenting this exhibit of 35 gouache paintings by Dr. Frank Netter, who is known as the ‘Dean of Medical Illustration.’ Dr. Netter is hailed as the foremost medical illustrator whose volume of work expresses humanity in art. Most twentieth-century medical students and resident physicians used Dr. Netter’s atlases in pursuit of their medical education,” said Lois Densky-Wolff, Head of the Department of Special Collections at the UMDNJ Library. “Dr. Netter’s medical illustrations of the human body help explain how the body works.”

Netter was a trained commercial artist before entering medical school. He graduated M.D. during the Great Depression. To supplement his income in a new surgical practice, he accepted commissions from publishers and physicians to produce a wide range of medical illustrations. As his freelancing activities increased, he developed second thoughts about his medical career and eventually made the transition from practicing medicine to pursuing his medical career as an artist. Netter’s genius was in melding artistic expression with medical knowledge to produce a body of work that was clear, highly accurate, and beautiful to behold. In a fifty-year career associated with Ciba-Geigy, Netter produced more than 3,600 paintings.

In addition to the exhibition, on October 5, 2006, the UMDNJ Library sponsored a lecture entitled “Teaching with a Sable Brush: The Life and Art of Frank H. Netter, M.D.,” which was held at the UMDNJ-New Jersey Medical School, 185 South Orange Avenue, Newark. The presenter was Ann Wood Humphries, an independent curator who is an authority on Netter’s work. Drawing on research conducted using his personal files, her presentation put his career in the context of the artistic and cultural climate of his life and times, beginning with his art academy years and influences, his medical training, various special projects and commissions, and culminating in the research methods used to produce his life’s work, the famous *Netter Collection of Medical Illustrations*. Personal anecdotes and illustrations conveyed the vivid personality of the man behind the legendary *Ciba Collection of Medical Illustrations*, known as the “green books.”

In 1996, Sandoz and Ciba joined in one of the largest corporate mergers in history to form the Novartis Pharmaceuticals Corporation in East Hanover, New Jersey. Novartis loaned a portion of its Netter Art Archives to the UMDNJ-George F. Smith Library of the Health Sciences for this display.

UMDNJ is the nation’s largest free-standing public health sciences university with more than 5,500 students attending the state’s three medical schools, its only dental school, a graduate school of biomedical sciences, a school of health related professions, a school of nursing, and a school of public health on five campuses. Annually, there are more than two mil-

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The James H. Semans, M.D., Urology Collection at Duke

Dr. James H. Semans, a prominent Duke University surgeon, urologist, and philanthropist, was one of the first clinicians to link urology to the emerging field of social medicine. Upon his death last year, his widow, Mrs. Mary Duke Biddle Trent Semans, gave his rare books and the instruments from his medical practice to the History of Medicine Collections at the Duke University Medical Center Library.

This gift was recently celebrated with a speaker, Margaret Humphreys, M.D., Ph.D., and a reception. The Semans Urology Collection comprises European and American works from the sixteenth through twentieth centuries. Highlights, including *Quod sedimentum sanorum*, Joannes Andreas Nola’s 1562 treatise on urine sedimentation, and Gustav Simon’s two-volume text, *Chirurgie der Nieren* (1871-1876), are currently on exhibit until early January 2007.

For more information, please contact:

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Good Listening

The 2006-2007 History of the Health Sciences Lecture Series at the University of Virginia

On October 18, 2006, the University of Virginia celebrated the grand opening of the Kerr White Health Care Collection Web site <historical.hsl.virginia.edu/kerr/> with a reception in honor of Dr. Kerr L. White. Besides Dr. White, speakers included Dr. Robert E. Reynolds, Acting Chair of the Department of Public Health Sciences in the University of Virginia School of Medicine; and members of the Library’s Web site team.

On November 8, 2006, Art Beltrone of Keswick, Virginia, a military artifacts historian and the author, with Lee Beltrone, of *Vietnam Graffiti: Messages from a Forgotten Troopship* (Charlottesville: Howell Press, 2004), spoke on the content of this book. Beltrone had found an abandoned troopship that had taken soldiers to three wars, including Vietnam, loaded with historic relics in Virginia’s James River Reserve Fleet. These relics, including graffiti-inscribed bunk canvases, provided a personal look at the mindset and emotions of young men going to war. Logs kept by the ship’s master, or captain, described the myriad of accidents that plagued sailors and soldiers alike during the voyage aboard the ship, which was more than two football fields long. Some of these wounds were treated in the ship’s operating room. Before, during, and after the presentation, a selection of canvases from the ship was available for viewing and discussion.

On November 29, 2006, Mark E. Williams, M.D., the Ward K. Ensminger Distinguished Professor of Geriatrics in the Division of General Medicine, Geriatrics, and Palliative Care at the University of Virginia School of Medicine, spoke on “The History of Geriatric Medicine.” His presentation reviewed the care of elderly people throughout history, from ancient times to the present, and emphasized cross-cultural comparisons.

On March 2, 2007, Vivian Pinn, M.D., Ph.D., Director of the Office of Research on Women’s Health (ORWH) at NIH, speaks on “Women in Medicine: The Successes and Challenges of the 21st Century.” Dr. Pinn was the only African-American and the only woman in her class to graduate from the University of Virginia School of Medicine.
of Medicine in 1967. She was the first African-American woman to chair an academic pathology department in the United States, and the first full-time Director of ORWH. Her presentation, in the Jordan Hall Conference Center Auditorium, is the keynote address for the opening of NLM’s travelling “Changing the Face of Medicine: Celebrating America’s Women Physicians” exhibit on display in the Health Sciences Library from March 2 to April 13, 2007.

On March 13, 2007, the author of *Bittersweet: Diabetes, Insulin, and the Transformation of Illness* (Chapel Hill: University of North Carolina Press, 2003), Chris Feudtner, M.D., Ph.D., M.P.H., Director of Research and Attending Physician, Palliative Care Team (PaCT) and Integrated Care Service (ICS) in General Pediatrics at the Children’s Hospital of Philadelphia (CHoP), discusses “What Can a Patient-Oriented History of Diabetes Teach Us about Medical Decision-Making?” He asks what if many — or even most — medical decisions are made by decision-making processes that differ substantially from standard notions of weighing risks and benefits of treatment options? Drawing on a remarkable archive of letters that people with diabetes wrote over the course of decades to their physicians, the talk examines how patients and doctors made decisions as this disease was transformed from an acutely lethal condition before the discovery of insulin to a chronic and still too often debilitating malady.

On April 12, 2007, James H. Jones, Ph.D., Alumni Distinguished Professor Emeritus at the University of Arkansas, presents the 11th Annual Kenneth R. Crispell Memorial History Lecture, “The Agony of Hope: The Decision to Put David Vetter into the Bubble.” David Vetter, known to the world as “David the Bubble Boy,” was born with a rare genetic disease, severe combined immune deficiency (SCID). He lived all but a few days of his short life (1971-1984) in an isolator, trapped behind sheets of plastic, confined within a tiny space, untouched by human hands and unable to touch others in return. The presentation examines the decision to place David in the isolator literally seconds after he was born, and pays careful attention to the ethical issues that David’s case raised, which from beginning to end blurred the lines between treatment and research.

All lectures are free and open to the public and, unless otherwise noted, are held in the Wilhelm Moll Rare Book and Medical History Room on the ground floor of the Claude Moore Health Sciences Library.

A recording of each lecture becomes available the following day. These recordings are available via Webcast and Podcast at <www.healthsystem.virginia.edu/internet/library/historical/lectures.cfm>.

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Osler Lecture at McGill

The 30th Annual Osler Lecture was given in the Charles F. Martin Amphitheatre at McGill University, Montréal, on November 1, 2006. Sir Donald Irvine, former President of the General Medical Council of the United Kingdom, delivered a talk entitled “Everyone is Entitled to a Good Doctor.” Sir Donald’s talk was provocative and original, as he has a reputation for using lectures by invitation as opportunities for testing and developing policy ideas.

For more information, please visit <www.mcgill.ca/osler-library/about/introduction/osler_lecture/>.

Chris Lyons
Assistant History of Medicine Librarian
Osler Library of the History of Medicine

The 2006-2007 Medical Heritage Center Lecture Series at the Ohio State University

Nancy Tomes, Ph.D., Professor of History at Stony Brook University, presented the John C. Burnham Endowed Lecture, “Medicine and Madison Avenue,” on October 26, 2006. She explored the longstanding bans against advertising physicians’ services and prescription drugs directly to consumers/patients, and asked why those bans have been lifted since the early 1980s. This history illuminates the complicated relationship between advertising and information, and the long-term consequences, negative as well as positive, of the tendency in the United States to confuse the two.

John C. Burnham, Ph.D., Medical Heritage Center Scholar-in-Residence, presented the Nathanial R. Coleman Memorial Endowed Lecture, “Eras: Trying to Figure Out What Happened in American Medicine in the Twentieth Century,” on November 16, 2006. Burnham discussed that, in the century after 1900, so much happened in the scientific and social history of medicine in the United States that it is difficult to see patterns that make sense. Historians have constructed narrative sequences that summarize events in special areas, but these independent stories, such as the histories of medical technology, medical economics and consumerism, and various biomedical sciences are remarkably dissimilar and unparallel. He analyzed some possible ways of fitting all these divergent accounts together.

The date is yet to be announced for the Annual James V. Warren Memorial Endowed Lecture, when Charles F. Wooley, M.D., will discuss and sign copies of The Second Blessing: Columbus Medicine and Health, the Early Years, which he co-wrote with the late Barbara Van Brimmer, a well remembered ALHHS member. Its publication in 2006 was supported in part by grant funding through the Columbus Medical Association.

Linda Baas, R.N., will will trace the history of the Ohio Nurses Association (ONA) at the Annual Friends of Nursing History Lecture during National Nursing Week on May 10, 2007. Concurrently the Medical Heritage Center will display nursing artifacts from its collections.

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Talks at the University of Medicine and Dentistry of New Jersey

Three history of medicine lectures were presented in the fall of 2006 in the George F. Smith Library of the Health Sciences at the University of Medicine and Dentistry of New Jersey (UMDNJ).

On September 21, Sandra Moss, M.D., M.A., spoke on “Yellow Fever: New Jersey Response to a Deadly Epidemic.” Yellow fever epidemics killed thousands of people in New York and Philadelphia in the 1790s and caused many to flee to New Jersey. Dr. Moss looked at original sources, including diaries and letters, to examine the medical, social, political, and ethical responses to this “destroying scourge.” For ordinary citizens as well as trained medical personnel faced with crisis and personal danger, courage often consisted of “showing up,” acting humanely, and doing one’s job.

On November 16, Benjamin Rush, Jr., M.D., discussed “Korean War Experiences in a MASH, 1951-1952.” Dr. Rush was inducted into the Army Medical Corps in July 1951 and sent to Fort Sam Houston for basic medical training. After a month of learning such essentials as how to march and salute, he was given two weeks of leave, transported by air to Japan, then to Pusan, Korea, and then Taegu. He was assigned to the 8225 MASH near Inje, about 15 miles above the 38th parallel in Eastern Korea. He detailed his experiences in the MASH from September 1951 to March 1952, when his unit supported battles at the Punch Bowl, Bloody Ridge, and in the Spring Offensive.

On December 5, Allen B. Weisse, M.D., spoke on “Publishing Without Perishing: Long-Term Survival in the Paper Jungle.” It has been said that within every one of us there lurks the makings of a good book. Such a belief should make it tempting for those contributing occasionally to the field of medical history to expand beyond the specialized journals we inhabit and enter the domain of general journalism and book publishing. This is a very different world from the strictly academic arena and one that Dr. Weisse has dealt with over the last 25 years, accumulating a wealth of experiences, good and bad, that he believed might be helpful to share. Making appearances along the way were Samuel Johnson of London and John Johnson of Ebony; Jerzy Kosinski and Doris Lessing; William Saroyan and David McCullough; James Joyce and James M. Cain; Charles M. Schulz and Snoopy; among others less well known. He wanted this to emerge as a cautionary tale, yet instructive and tinged with hope and bemusement.

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Frankenstein at Pitt

The C.F. Reynolds Medical History Society and the Honors College, University of Pittsburgh, presented the Thirteenth Annual Sylvan E. Stool History of Medicine Lecture on November 2, 2006. Stephanie Brown Clark, M.D., Ph.D., of the Division of Medical Humanities, University of Rochester School of Medicine, spoke on “Frankenstein and Other ‘Monstrosities’: A History of Congenital Malformations.”

Michaelmas Term History of Medicine Seminars at the University of Cambridge

The Cambridge History of Medicine seminars for Michaelmas 2006 were held on Tuesdays from 5:00 to 6:30 p.m. in Seminar Room 1 of the Department of History and Philosophy of Science, Free School Lane, Cambridge.


“From Generation to Reproduction,” organized by Laurence Totelin and Nick Hopwood, was funded by the Wellcome Trust Enhancement Award in the History of Medicine. Its two presentations served as a forum for discussion of how, since 1500, our world of reproductive practices and controversy was created. Rebecca Cassidy of Goldsmiths College, London, spoke on “It’s All in the Blood: Thoroughbred Racehorse Reproduction” on October 24, 2006. Rebecca Flemming of the Cambridge Faculty of Classics discussed “Nurture, Nurture, or Neither? Some Hippocratic Generations of Difference” on November 14.

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Lectures and a Conference at the Wellcome Trust Centre

The Wellcome Trust Centre for the History of Medicine at University College London (UCL), in collaboration with Professor Bernardino Fantini and Professor Sir Michael Marmot, organized a three-day conference, “History of the Social Determinants of Health,” which was held in the Sir David Davies Lecture Theatre, Roberts Building, Torrington Place, London, from September 19 to 21, 2006. The sessions were:

September 19: “History of the Social Determinants of Health: Regions, I,” chaired by Professor Harold J. Cook of UCL.
“Introduction to the Commission on Social Determinants of Health and the UCL International Institute for Society and Health” by Professor Sir Michael Marmot of the Department of Professor of Epidemiology and Public Health, UCL, and member of the World Health Organization (WHO) Commission on Social Determinants of Health.
“Australia and Oceania” by Professor Alison Bashford of the University of Sydney.
“Asia” by Professor Paul Greenough of the University of Iowa.
Professor Marmot led the discussion.

September 19: “History of the Social Determinants of Health: Regions, II,” chaired by Professor Virginia Berridge of the London School of Hygiene and Tropical Medicine.
“Latin America” by Professor Marcos Cueto of the Peruvian University Cayetano Heredia.
“Africa” by Professor Randall Packard, Director of the Institute of the History of Medicine, Johns Hopkins University.
Dr. Hernan Sandoval, Chilean Ambassador to France, led the discussion.
“North America” by Dr. Elizabeth Fee of the National Library of Medicine.
“Europe” by Professor Bernardino Fantini of the University of Geneva and the University of Lausanne and Professor Jan Sundin of Linköping University. Professor Denny Vägerö of the Karolinska Institute led the discussion.

September 20: “History of the Social Determinants of Health: Topics, I,” chaired by Dr Sanjoy Bhattacharya of UCL.
“Introduction to the Global Health Histories Initiative” by Thomson Prentice of the WHO.
“Race and Ethnicity, Gender, and Class” by Professor Stephen Kunitz of the University of Rochester and Dr. Kasturi Sen, Director of Research, International Non-Governmental Organisations Training and Research Centre (INTRAC), Oxford.
Giovanni Berlinguer, Member of the European Parliament and the WHO Commission on the Social Determinants of Health, led the discussion.

September 20: “History of the Social Determinants of Health: Topics, II,” chaired by Professor Bernardino Fantini of the University of Geneva.
“Social Policy and Social Context” by Professor Roderick Lawrence of the University of Geneva and Dr. Anne-Emanuelle Birn of the University of Toronto.
Dr. Socrates Litsios of the WHO led the discussion.
“Economic and Political Development” by Professor Patrice Bourdelais of L’École de Hautes Études en Sciences Sociales and Professor Imrana Qadeer of Jawaharlal Nehru University.
Alex Irwin of the Secretariat of the WHO Commission on the Social Determinants of Health led the discussion.

September 21: “History of the Social Determinants of Health: Linking Local Histories,” chaired by Professor Anne Hardy of UCL.
“Introduction to the Phoenix Thematic Network” by Professor Laurinda Abreu of the University of Évora.
“History and the Contemporary Arena” by Dr. Simon Szreter of the University of Cambridge Dr. Fiona Godlee, Editor, British Medical Journal.
Dr. William Muraskin of Queens College, City University of New York, led the discussion.

September 21: “Taking a History: Eliciting the Past from the Living,” chaired by Thomson Prentice of the WHO.

“‘The Witness Seminar’ Method” by Dr. Tilli Tansey of the Wellcome Trust Centre.
“‘Free Association, Narrative, and the Interview’ Method” by Professor Tony Jefferson of Keele University.

Besides this very successful conference, the Wellcome also hosted at the Euston Road campus a series of lectures on “Mind in Medicine: New Histories of Psychiatry,” organized by Dr. Rhodri Hayward and Dr. Sonu Shamdasani:

“A Black Box named Sybil” by Professor Mikkel Borch-Jacobsen of the Department of Comparative Literature, University of Washington, Seattle, on October 23, 2006.
“From Benzedrine to Ritalin (1930s-1990s): How Amphetamines became a Medication for Children” by Dr. Maria Teresa Brancaccio of L’Institut Universitaire d’Histoire de la Médecine et de la Santé Publique, University of Lausanne, on November 9, 2006.
“Brainhood and the History of the Self” by Dr. Fernando Vidal of the Max Planck Institute, Berlin, on November 16, 2006.
“Madness at Home: Domestic Psychiatry and its Limits in Early Victorian England” by Dr. Akihito Suzuki of the Keio University, on December 7, 2006.

For further information, please see our Web site at <www.ucl.ac.uk/histmed> or contact Professor Harold J. Cook at <h.cook@ucl.ac.uk>.

“I’ve Got This Old Book” and Other Events at New York Academy of Medicine

On Wednesday, May 17, 2007, from 4:00 to 6:00 p.m., in the Hartwell Room on the third floor of the New York Academy of Medicine Library, the NYAM will offer “I’ve Got This Old Book: Researching Your Historic Book.” This class is for those who wish to find information about the authors of their old books, or who wish to find out if their old books are important or valuable. Interest in finding out about old books is sufficient; ownership of old books is not required. The basic fee is $10.00, but only $5.00 for students with a
valid ID and seniors 65 and older. Advance registration is required. To register or for more information, please contact Linda Gardin at <libtrain@nyam.org> or 212-822-7367.

On December 6, 2006, the NYAM Section on the History of Medicine and Public Health presented Barron H. Lerner, M.D., a frequent contributor to The New York Times’ “Science Times” feature, offering some case histories from his latest book, *When Illness Goes Public: Celebrity Patients and How We Look at Medicine* (Baltimore: Johns Hopkins University Press, 2006). From Lou Gehrig and Steve McQueen to Eva Peron and Betty Ford, celebrity patients have shaped public perceptions about diseases, influenced medical research, reduced stigma, charged political campaigns for resources, and redefined patients’ expectations about the doctor-patient relationship. Famous people who have become symbols of illness include Gehrig, the first “celebrity patient”; Rita Hayworth, whose Alzheimer disease went undiagnosed for years; and Arthur Ashe, who courageously went public with his AIDS diagnosis before the media could reveal his secret. Then there are private citizens like Barney Clark, the first recipient of a permanent artificial heart, and Lorenzo Odone, whose neurological disorder became the subject of a Hollywood film.


Other talks in this year’s public lecture series of the Section on the History of Medicine and Public Health include:


For more information about NYAM programs in the history of medicine, visit our Web site at <www.nyam.org/initiatives/im-histe.shtml>, e-mail <history@nyam.org>, or call Christian Warren at 212-822-7314.

Historical programs at NYAM are supported by the Friends of the Rare Book Room. Please join the Friends. Write to Christian Warren at <cwarren@nyam.org> for details, or download a membership form at <www.nyam.org/initiatives/docs/FRBR_Renewal.pdf>.
Reiser at George Washington University

Welling Visiting Professor Stanley J. Reiser, M.D., M.P.A., Ph.D., from the University of Texas Health Science Center at Houston, presented two lectures at the George Washington University Medical Center: “High Technology Medicine: Its Influence on Patients, Providers, and Policy” on September 7, 2006, and “The Founding of the AMA and the Origin of Professional Ethics in the United States” on September 8. For more information about Dr. Reiser, please see <www.uth.tmc.edu/hhhs/reiser.htm>.

Three Presentations at the National Institutes of Health

On September 12, 2006, the National Institute on Aging (NIA), the National Library of Medicine, and the NIH Office of Behavioral and Social Sciences Research sponsored a seminar called “Chronic Disease and Disability from the 19th to the 21st Centuries: An Interview with Drs. Robert W. Fogel and Dora L. Costa.” Facilitating this lively discussion were Dr. Angus Deaton and Dr. Burton Singer of Princeton University.

Fogel and Costa discussed findings from their NIA Program Project grant on the aging process of American Civil War Union Army veterans. This ambitious project linked vast amounts of information for a sample of Union Army veterans to allow researchers to study their aging process and compare it to that of later cohorts. Fogel and Costa presented their surprising findings from this study, which revealed a picture of humans today that is vastly different from 100 years ago. They examined what their research suggests for current and future aging populations — cohorts that today are longer lived, healthier, more affluent, and more urban than their predecessors — and what these trends imply for health, long-term care, and social security systems.

Fogel won the Nobel Prize for Economics in 1993 and is the Charles R. Walgreen Distinguished Service Professor of American Institutions at the Graduate School of Business and Director of the Center for Population Economics at the University of Chicago. Costa is Professor of Economics at the Massachusetts Institute of Technology, where she teaches economic history.

On September 26, 2006, Martyn Pickersgill, a Ph.D. candidate at the University of Nottingham, presented “Psychopathy, Delinquency, and Antisocial Personality Disorder: Changing Accounts of Bad Behavior in The American Journal of Psychiatry, 1950-2005.” He argued that a linear account of psychiatry, positing a seamless transition from psychopathy to antisocial personality disorder (ASPD), belies a complex history of the different meanings attached to, and clinical concerns within, psychiatry about the diagnosis of very bad behavior over the last fifty years. He concluded with some reflections on how the sociology of science offers useful conceptual devices to the social historian through which to theorize ASPD. His presentation was sponsored by the NIH Biomedical Research History Interest Group (BRHIG).

On November 14, 2006, Dr. Toine Pieters, Senior Lecturer in the History of Medicine at Amsterdam Medical Center of Virje University and Professor of the History of Pharmacy at Groningen University in the Netherlands, presented the History of Biomedicine Seminar entitled “Hailing a Miracle Drug: The Interferon.” The author of Interferon: The Science and Selling of a Miracle Drug (London: Routledge, 2005). Pieters is interested in the history of biologicals, psychotropic and cardiovascular drugs, cancer, genetics, and heredity. He is currently working on a biography of Aldred Scott Warthin’s “Family G.” BRHIG and the Immunology Interest Group co-sponsored his presentation.

Pieters wrote this prospectus for his talk: “In my profile of interferon, which acquired the status of a “miracle drug” in the late 1970s, the focus is on reconstructing and analysing the process through which the transient status of wonder drug was achieved. Special attention will be paid to the channels of communication and mediation, primarily in the American public arena. In vying for public attention the identity of interferon as a promising anti-cancer agent was also shaped by politics and by the competition for resources. Major actors who influenced the floating of knowledge regarding interferon both as individuals and as a collective ranged from doctors, laboratory researchers, patients, journalists and regulators, to drug company executives. I will show how the breakthrough imagery around interferon entered the circulation of mass culture and how this imagery successively intensified and weakened.
My claim is that the temporary hailing of interferon as a miracle drug left a public imprint of exceptional, compelling but elusive natural healing qualities. This helped to create a niche for further work on interferon as a biological response modifier, and provided this wondrous molecule with a head start on the highly competitive market of recombinant protein drugs in the 1990s.”

Pieters’s lecture was followed by the formal commentary of Dr. Howard Young, Deputy Chief of the Laboratory of Experimental Immunology at the National Cancer Institute. Young’s research focuses on the regulation of gene expression in natural killer cells with a special emphasis on interferon-gamma.

For more information about BRHIG and upcoming events, please visit the BRHIG Web site at <www.nih.gov/sigs/brhig>. For more information, please contact Dr. Buhm Soon Park <parkb@mail.nih.gov>.

**Miscellanea**

**Network: Health — Call for Papers**

The next European Social Science History Association (ESSHA) Conference will take place in Lisbon, Portugal, February 27 - March 1, 2008. For general information on the biannual conferences and the organizing institution, and for registration (including paper proposal procedures), see <www.iisg.nl/esshc>.

We invite proposals for panels or individual papers of any subject dealing with the social history of health. While individual papers are welcome, panels consisting of three or four contributors and one chair and discussant (who can be the same person) have a higher chance of being accepted. We particularly encourage panels organized around a central theme with papers covering different perspectives on this theme, especially those with a comparative approach, bringing together contributions on different regions and/or time periods. Panel participants should come from different institutes and preferably from different countries.

In addition to the classical papers and panels, we also invite offers for posters or well-organized panels for round-table discussions. Suggestions are particularly encouraged on the topics listed below. But proposals on other topics are very welcome as well:

1. Global Health — possible subthemes: travels of disease; Ecological Imperialism Revisited; globalization; plague, cholera, AIDS, SARS.
2. Colonial Health — themes: colonial medicine as a means of negotiating power between colonists and colonized and also within both groups; racism; orientalism.
3. Occupational Health — including injuries, insurance, long-term health hazards.
4. Health as Commodity — themes: developments of the market for medication, health foods, and other health products; interaction between physicians, scientists, and business people.
5. Health in Numbers — presenting ways of interpreting historical health data, either as case studies or from a theoretical point of view.
6. Nutrition as Health Factor — how has it interacted with cultural, economic and ideological aspects?
7. Health and Warfare — how has health interacted with the historically common situation of warfare (war injuries, blockades, bacteriological warfare)?
8. Health and Normality — how have common conceptions changed about healthy, normal, subnormal or pathological conditions?
9. Health in Non-Western societies — addressing themes of health and medicine in societies outside Europe and non-indigenous North America and Australia.
10. History of Health as Interdisciplinary Project — room for overlap and cooperation with medicine, biology, economics, political science.

Panel chairs can also act as discussants, and thus have an important role in stimulating discussions, which
should take up a substantial part of the panel time. Discussants can identify central issues of the papers, point out similarities and differences, raise individual or general questions or otherwise broaden the perspective on the overall themes of each panel.

For submitting papers, please use the registration at <www.iisg.nl/esshc>. For questions, suggestions etc., please write to either Enrique Perdiguero Gil <quique@umh.es> or Iris Borowy <iris.borowy@uni-rostock.de>. The deadline is April 1, 2007.

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**A Few Words from the Editor**

Early on February 28 I posted the following call on ALHHS-L: "I would like to include articles or items in the Watermark about the literary and artistic aspects of medicine. For example, if your institution publishes a literary magazine with medical themes, if you or your colleagues have published medical fiction or poetry, or if you have particular insights into the relationship between health care and the arts, then please e-mail me that info for the Watermark.”

Your response was instantaneous and entirely positive. Within just two hours I had enough material promised to create a separate section in this issue. Medical art and literature seem to be among the topics that we most want to know about.

I think we might want a second installment on this topic. So please, again, if you or your institution would like to report on how to combine art, literature, music, etc., with medicine, write it up and send it in.

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**Quiz Question**

Which of the following is not a medical condition?

1. Hourglass Head.
2. Mosquito Head.
3. Steeple Head.
4. White Head.
5. Tower Head.

(Answer below on page 111.)

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**Wellcome Library Special Collections Move**

The Library has started its return to the refurbished 183 building. We started the moves with the Special Collections. Between October 23 and the end of December we moved the Rare Books, Archives and Manuscripts, and Asian Collections. Iconographic collections will be moved early in 2007.

The rest of the Library will move over the Easter period and the Library will be closed from March 26, reopening on April 16, 2007.

Further details of all these moves are posted on the Web site: <library.wellcome.ac.uk/>.

We will try to maintain access to the collections as far as possible, but readers are advised to check first if they plan a visit.

More news and updates will follow.

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**NHPRC Grant to the Medical University of South Carolina**

The National Historical Publications and Records Commission (NHPRC), the funding branch of the National Archives, has awarded the Waring Historical Library of the Medical University of South Carolina (MUSC) a grant of $75,632 for a Preserving and Accessing Medical History Collections (PAMHC) project. Grant money will fund a project archivist to review, rehouse, and recatalog 94 manuscript collections consisting of more than 320 cubic feet of records that document the history of the health professions at MUSC and in South Carolina.
This project is made possible in part by a grant from the NHPRC (2006-042). The NHPRC promotes the preservation and use of America’s documentary heritage essential to understanding our democracy, history, and culture. For more information, please see <www.archives.gov/nhprc/>.

The Waring Historical Library serves MUSC and the state as the repository for rare books, journals, artifacts, and manuscript materials. It is open Monday through Friday from 8:30 to 5:00 for research and tours. For more information about the Waring Historical Library, its programs and events, please visit <waring.library.musc.edu>.

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Alfred Feingold’s “Image of Surgery” Web Site

It is generally true that we should prefer — all other things being equal — information from dot edu, dot gov, or dot org Web sites over that from dot coms. But all other things are not equal. There are some real gems among the dot coms for medical historians, archivists, and librarians.

One such gem is <www.imageofsurgery.com>. Its creator, Alfred Feingold, M.D., is a practicing anesthesiologist whose hobby is photographing surgeons and other team members in the operating room. He has published many of these images and uses the Web site to advertise his craft. But he also has expanded his interest to include historical and artistic images of surgery. That is what makes his Web site so fascinating. The selection of paintings, sculptures, drawings, and photographs posted on his <www.imageofsurgery.com/Surgery_history_art.htm> page provides not only powerful works of art and visual familiarity with the history of surgery, but also authoritative links to information about the artists.

Opposite are three of these images. Top left depicts brain surgery in a 1345 illuminated manuscript by Guido da Vigevano (1280?-1349). Bottom left shows treatment for dislocation in a drawing attributed to Guido Guidi (1508?-1569). Top right is “The Operation,” painted in Geneva in 1929 by Christian Schad (1894-1982).

Dr. Feingold asks for our help with his project. He writes: “Does anyone know of any original images of surgery from Galen, Susruta, or earlier?”

For more details and application guidelines, please contact:

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Fellowships at the Bakken

The Bakken Library and Museum, Minneapolis, offers Research Travel Grants and Visiting Research Fellowships and for the purpose of facilitating research in its collection of books, journals, manuscripts, prints, and instruments. Travel Grants up to a maximum of $500 (domestic) and $750 (foreign) are to be used to help to defray the expenses of travel, subsistence, and other direct costs of conducting research at The Bakken. The minimum period of residence is one week. Application may be made any time during the calendar year.

Visiting Research Fellowships up to a maximum of $1,500 are to be used to help to defray the expenses of travel, subsistence, and other direct costs of conducting research at The Bakken. The minimum period of residence is two weeks. Preference is given to researchers who are interested in collaborating for a day or two during their research visit with The Bakken on exhibits or other programs. The next deadline is February 16, 2007.
The Lloyd Library and Museum in Cincinnati is embarking on a long-awaited renovation of the first floor. While we are looking forward to welcoming you to the warm, inviting surroundings we have planned, including expanded exhibition space, we regret that services must be curtailed for a short time. Beginning October 16, 2006, the library will be closed to all onsite visitors and researchers. In addition, we will be unable to provide daily interlibrary loan service. Service requests via telephone, fax, or e-mail may also be limited during renovation, but will be fully considered. We anticipate being able to open our doors and resume all services on January 15, 2007. We sincerely apologize for any inconvenience this may cause and appreciate your patience and understanding as the Lloyd prepares to put its best foot forward for you.

Dennis B. Worthen, Ph.D.
Lloyd Scholar, Lloyd Library
Fellowships in the New York Academy of Medicine Library

Each year, The New York Academy of Medicine offers the Paul Klemperer Fellowship in the History of Medicine and the Audrey and William H. Helfand Fellowship in the Medical Humanities to support work in history and the humanities as they relate to health, medicine, and the biomedical sciences.

The Klemperer Fellowship supports research using the Academy Library’s resources for scholarly study of the history of medicine. It is intended specifically for a scholar in residence at the Academy Library.

The Helfand Fellowship supports work in the humanities as they apply to medicine and health, including works of non-fiction, visual or performing arts, biography and memoir, as well as scholarly research in a humanistic discipline other than the history of medicine. Although residence is not obligatory for Helfand Fellows, preference will be given applicants whose projects require use of the resources of the Academy Library and who plan to spend time at the Academy.

Each Helfand or Klemperer fellow receives stipends of $5,000 to support travel, lodging, and incidental expenses for a flexible period between June 1, 2007 and May 31, 2008. Besides completing a research or creative project, each fellow will be expected to make a public presentation at the Academy and submit a final report. We invite applications from anyone, regardless of citizenship, academic discipline, or academic status. Preference will be given to (1) those whose research will take advantage of resources that are uniquely available at the Academy, and (2) scholars or creative artists in the early stages of their careers.

The application process is the same for both fellowships. Our selection committee, composed of prominent historians and medical humanities scholars, will choose both fellows from a common pool of applications. These fellowships are awarded directly to the individual applicant and not to the institution where he or she may normally be employed. None of the fellowship money is to be used for institutional overhead.

Applications must be received by the Academy by Tuesday March 6, 2007. Candidates will be informed of the results by May 8, 2007.
For more information, please visit our Web site <history.nih.gov/> and click on “Fellowships and Grants.” If you have any further questions, please contact Dr. Buhm Soon Park <parkb@mail.nih.gov> or send your e-mail to <history@nih.gov>.

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**Studentships / Scholarships at the Wellcome**

The Wellcome Trust Centre for the History of Medicine at University College London, the world’s largest research institute for the study of the history of medicine, invites applications from prospective Ph.D. students for three years commencing September 2007. Candidates should normally have a Master’s degree in a relevant subject. The Centre anticipates being able to offer two or three research studentships worth about £19,000 plus “home” fees. Informal inquiries may be made to the Centre’s Graduate Tutor, Dr. Helga Satzinger <h.satzinger@ucl.ac.uk>. For further information and application forms, please contact Adam Wilkinson <uclawa@ucl.ac.uk>. The deadline for the full application is 31 January 2007.

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**Reynolds Fellowships for 2007**

The Historical Collections unit of the University of Alabama at Birmingham offers grants of up to $1000 for research on topics covered in one or more of its three departments: Alabama Museum of the Health Sciences, Reynolds Historical Library, and University Archives. Particular strengths include (but are not limited to) Southern medicine and surgery, Civil War medicine, early nineteenth-century medicine and health care, and botanical medicine. All interested researchers are encouraged to apply by December 31, 2006. For application details please go to <www.uab.edu/reynolds/fellowship.htm>.

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Answer to Quiz Question: Hourglass Head is a depression of the coronal suture of the skull. Steeple Head and Tower Head are names for oxycephaly, a pointed skull. White Head is witkop, a crusty, syphilitic affliction of the scalp. Mosquito Head is a small peninsula near Port Clyde, Maine.
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The Watermark encourages submissions of news and stories about events, collections, catalogues, people, awards, grants, publications, and anything else of professional interest to the members of ALHHS. Please submit your contributions in a timely way to Eric Luft, preferably as e-mail attachments.

Information about membership in ALHHS is available from the Secretary/Treasurer: Patricia E. Gallagher, Special Projects Coordinator, New York Academy of Medicine Library, 1216 Fifth Avenue, New York, NY 10029-5293. <pgallagher@nyam.org>. Phone: 212-822-7324. Fax: 212-423-0266.

Submissions for the ALHHS Web site <www.library.ucla.edu/libraries/biomed/alhhs/> should be sent to the Chair of the Web Site Committee: Katharine E.S. Donahue, Head, History and Special Collections, Louise M. Darling Biomedical Library, UCLA, 12-077 CHS, Box 951798, Los Angeles, CA 90095-1798. <kdonahue@library.ucla.edu>. Phone: 310-825-6940. Fax: 310-825-0465.