

# PHILOSOPHER OF MEDICINE

"In medicine, and perhaps also in some of the sciences, there is an unfortunate tendency to belittle or even to neglect the past. The medicine of our forefathers is regarded as something quaint and curious, often absurd, and at times amusing, but useless and obsolete when viewed in the light of modern knowledge. This narrow view is as unfortunate as it is fallacious."


With these words, addressed a quarter of a century ago to the class in medical history at the University of Edinburgh under the heading "The Search for a Philosophy of Medicine," Dr. Douglas Guthrie, then just retired from 30 years of practice in otolaryngology, began a second career that has brought him an international reputation as a medical historian.

**BACKGROUND.** Douglas Guthrie was born on September 8, 1885 in Dysart, a seaside town of Fife, one of Scotland's most prosperous counties, where his father, the Reverend William Guthrie, served as minister for 40 years. He and his sister, who was four years older, first attended a private school, then transferred to a Kirkcaldy school. Since the school had no primary department, the rector Dr. Christopher Scott reluctantly accepted the eight-year-old boy.

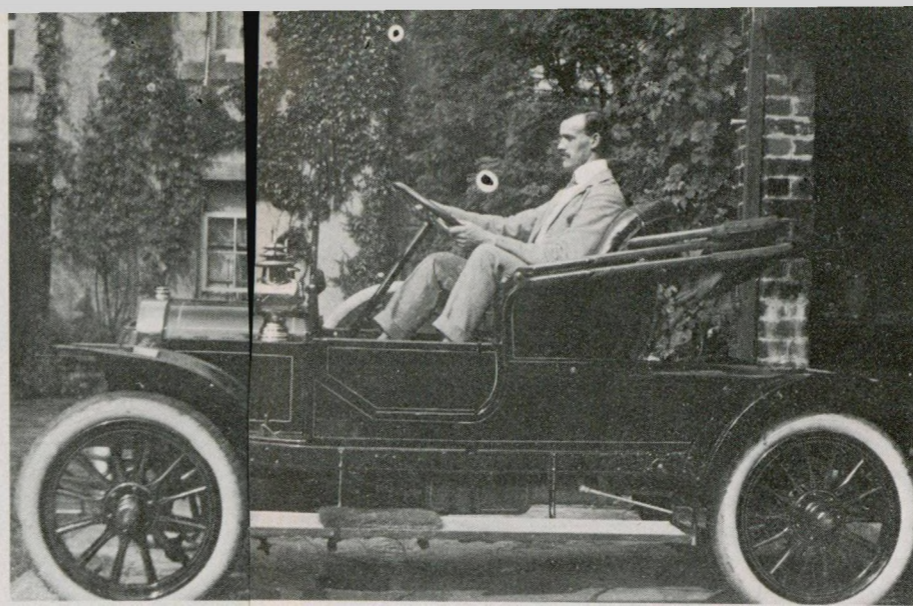
As the youngest pupil in the school, Douglas Guthrie was lonely and unhappy, made a poor scholastic record and usually found himself seated at the foot of the class, but he took a keen interest in "natural history," which he regarded in retrospect as the bridge to his medical career.

He found relief from the dreary school atmosphere when his father took him and his sister along on visits to fellow ministers and other friends; they often rode a tricycle with large wheels and solid tires, the boy perched on the handlebars, the girl seated on a hassock fastened behind the saddle.

After completing his secondary education at the Royal High School of Edinburgh, Douglas Guthrie was accepted in the University of Edin-



Douglas Guthrie



burgh medical school where he received a medal in zoology during his first term. At his father's suggestion he revisited the Kirkcaldy school and showed his medal to the astonished rector Dr. Scott, who wryly suggested that there must have been some mistake.

Following his graduation in Medicine at Edinburgh Guthrie studied for a year in Vienna and Jena, then returned to Scotland and became a general practitioner in Lanark, where he remained three years. While engaged in country practice in Lanark he was appointed an "elder" of the Church of Scotland, and has since continued to hold this appointment in Edinburgh.

From Lanark he returned to Edinburgh, where he practised as an otolaryngologist for the next 30 years. As a member of the staff of the Royal Hospital for Sick Children he pioneered in the use of speech therapy. He lectured on diseases of the ear, nose and throat at the Edinburgh school of medicine, wrote more than 40 articles on otolaryngology and collaborated with George Seth on a book titled *Speech in Childhood*.

His final decade of active practice was also a period of intensive preparation for his second career. Consequently he was able to publish his most important book, *A History of Medicine*, on which he had labored for 10 years, at the time of his retirement from practice in 1945.

Dr. Guthrie credits the immediate success of the book to a lively review in *The Observer* by George Bernard Shaw; it has since become an outstanding success on an international scale and has been translated into German, Spanish and Italian.

**HISTORY.** As a guidepost to his approach to his subject, Dr. Guthrie quotes in the preface to the first edition of *A History of Medicine* a statement by Winston Churchill in an address to the Royal College of Physicians in March 1944: "The longer you can look back, the further you can look forward."

Dr. Guthrie presents what can be best described

\*Later he acknowledged that his most unpromising pupil had "made good."

as a guided tour of medical history from prehistoric times to the present where the reader feels the living presence of historic personalities, of surrounding social conditions which inevitably affected medical beliefs and practices, of conflicting currents of thought in the unending efforts of medical pioneers to resolve the problems of human health and well-being. The author is not merely the guide, but also the interpreter of the relevance of past views for present-day practitioners.

He expresses some regret that the Hippocratic *Aphorisms*, used as textbooks until the beginning of the 19th century, have not continued in use, for though "they contain much that is obsolete, they also embody a code of teaching and principles that are surprisingly modern."

Unlike Hippocrates, who remains almost unknown except for his writings, Galen the "medical dictator" emerges in the history with more clearly defined but less admirable traits: "His teaching was imparted in so dogmatic a fashion as to carry conviction and disarm criticism, for Galen had an answer to every question and a solution to every problem, and although he was not nearly so great a man as Hippocrates, he acknowledged the authority of the Father of Medicine and incorporated much of his teaching in his own."

In a characteristically rounded estimate Dr. Guthrie observed that Galen, whose fame rested on his work in experimental physiology rather than clinical work, was the victim of Roman restrictions that made the dissection of the human corpse illegal in his time, compelling him to study anatomy in the Barbary ape and in pigs, from which "he unhesitatingly transferred his discoveries to human anatomy, thus perpetuating many errors." Dr. Guthrie concludes his appraisal of Galen's historic significance by commenting that it was not his fault if he was made the dogmatic guide of the medieval physician, "the undisputed authority from whom none dared to differ."

Because medical practice in ancient Rome was in the hands of Greeks, the Roman contribution to

medical diagnosis and therapy was negligible. But Dr. Guthrie points out that in the field of public health the Roman empire gave the world a great example with its system of sanitation and water supply, which amounted by the beginning of the Christian era to 100 gallons per head in the city of Rome, "an allowance which has never been approached to this day by any other city."

As Dr. Guthrie's account of medical progress approaches modern times, he puts within the reader's grasp the underlying questions that enable him to judge the relevance for his own day of schools of thought that have passed into history. Under the chapter heading "Science and Superstition: the search for a New Basis," he observes: "The seventeenth century produced a series of brilliant investigators, some of whom sought to explain all the phenomena of health and disease on a materialistic basis.

"About the middle of the century, a salutary corrective to such theorizings appeared in the teaching of Thomas Sydenham, who counselled a return to Hippocratic methods, and reminded physicians that medicine was not only a science but also an art."

In his characteristically pithy but temperate introduction to the curious extreme of 17th century materialism represented by the iatrophysical and iatrochemical schools, Dr. Guthrie adds: "Some of the ideas were farfetched, and when pushed to extreme limits were even absurd, but they served as stepping-stones to greater wisdom, and therefore deserve to appear in any account of the medicine of the period."

**VIEWPOINT.** Since the publication of his history Dr. Guthrie has devoted lectures and writing to the presentation in its most explicit form of the viewpoint that is essential in any work on history.

Centered on his most fundamental preoccupation is the Wood Jones lecture he gave at the University of Manchester medical school in 1947: "Medicine: Art or Science?" He declared:

"The greatest need of medicine today is that it should be recognized as an art as well as a science

Opposite: Dr. Guthrie on a medical history tour of Edinburgh explains to students that "mort-safes" on 18th century graves were to prevent body snatching. A young general practitioner in 1909, he starts on rounds in a new automobile, left, and, below, in a moment of relaxation he pipes to an audience of cows.



and that the theory of medicine should keep pace with its practice. . . . The power and precision of science have captured the popular imagination. Nevertheless, it is plain to the most casual thinker of 1947 that knowledge has outdistanced wisdom and that the scientific machine is something almost too great for mankind to control. So far as medicine is concerned, there is every reason why we should reopen the debate before the art of medicine becomes swallowed up by the science of medicine."

He pointed out that specialization, the inevitable outgrowth of rapid scientific development in medicine, had reached its highest point in the United States, where combined operations of many specialists put the patient through a routine that left unanswered the question who was to examine the patient himself. Psychology might have provided the meeting ground for many specialties but unfortunately it simply became another specialty.

The attempt of medicine to discard humanistic wisdom and to rest on a basis of sheer materialistic knowledge can be understood and if need be corrected only in the light of history, of reviving once more the lesson so often relearned and then again forgotten, of the need for the simple Hippocratic method of observing the whole man in his environment.

In the Logan Clendening lectures on the history and philosophy of medicine, which he gave at the University of Kansas in 1954 and subsequently published in 1955 under the title *From Witchcraft to Antisepsis: a study in Antithesis*, Dr. Guthrie emphasized the supreme importance for mankind of the ascendance of logical, scientific ideas over magic medical trends, which have been detrimental to mankind.

His vivid account of the genesis of medieval witchcraft pointed out that epidemics, famine, wars and financial crises spurred the spread of occult practices, and that the 14th century epidemic of plague known as the Black Death, followed by a wave of mass hysteria, gave a powerful impetus to witchhunting. He expressed his belief that the medical profession had failed in its responsibilities because no medical man pointed out that most of the alleged witches were of unsound mind, until the leading Swiss physician Johann Weyer took his life in his hands by daring to express the view that witches were the victims of hallucinations, thereby opening the way toward the modern treatment of mental diseases.

From witchcraft Dr. Guthrie turned to its antithesis, the discovery by Joseph Lister of the theory on which modern surgery is based. He noted that a misconception current during Lister's life is still in need of being fully cleared up in the 20th century, emphasizing that Lister introduced not a new antiseptic but a new principle. The author had already devoted a separate monograph to the life and work of Lord Lister (1949), in which he traced the historical background of his contribution to surgery.

For a better understanding of the roots of primitive magic and witchcraft Dr. Guthrie made a trip to Africa in 1951 during which he failed to see a witch doctor (he had that experience a year later in Kenya) but acquired fresh insights into native African medicine, especially through the illuminating accounts of several African medical assistants he met on the trip.

As he noted in an address to the Royal Society

of Edinburgh in reporting his findings, in Africa two systems of medicine coexist side by side. Folk medicine deals with ailments so common (colds, constipation, malaria) that they are accepted as a normal part of life and treated by domestic remedies discovered by trial-and-error methods. There is also the medicine of the witch doctor, who combats supernatural disease by supernatural methods. "Medical treatment is only one of his many activities. His methods are akin to those of the psychoanalyst. He draws no distinction between the material and the spiritual; he treats body and soul alike. The pebbles or sticks are cast upon the ground, and the pattern which they assume is interpreted. The guilt or disaster may be attributed to some innocent person who may be punished by death."

The author concluded his report by criticizing the approach typified by the Witchcraft Suppression Ordinance of 1896 as a mistaken response to the evil of witch-doctoring; instead of treating it as a crime, which has served only to drive it underground, he urged that the only effective cure lay in education.

On another of his many far-ranging trips, which took him to Ceylon and India in 1963, Dr. Guthrie studied Ayurvedic medicine, and concluded that it "cannot be brushed aside as wholly obsolete in the light of modern knowledge. Its longevity alone entitles it to consideration even in this scientific age."

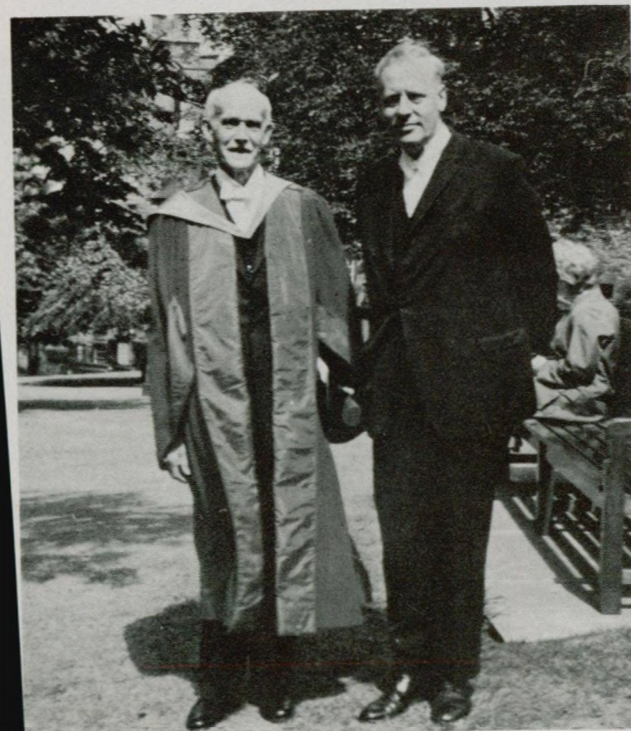
The numerous byways of medico-literary history explored by Dr. Guthrie range from Sir Thomas Browne's *Religio medici* to the detective fiction of Sir Arthur Conan Doyle. He expressed his admiration for the 17th century writer thus: "Browne had a truly international outlook which must have been as rare in the 17th century as it is today." He noted that Sherlock Holmes has a special appeal to medical practitioners because Conan Doyle, the creator of Holmes ("the most real character in fiction") was himself a medical man and modeled his detective after another medical practitioner, Dr. Joseph Bell. Dr. Guthrie advises medical students to study Sherlock Holmes' methods closely because the doctor is a kind of detective and can only improve himself by following the principles laid down by Holmes.

The broad range of Dr. Guthrie's interests is best indicated by a collection of papers, most of which had previously appeared in medical journals, that he published in 1963 in a volume titled *Janus in the Doorway*, after the Roman god of doorways, who looked backward into the past and forward into the future.

Included in the section "By-ways in Biography" are the tercentenary tribute to Sir Thomas Browne, the essay on Sherlock Holmes and medicine, a tribute to the 18th century surgeon and naturalist John Hunter, and "Laënnec and his Stethoscope." Originally read at a meeting of the Tuberculosis Society of Scotland in response to an invitation to deliver a paper dealing with the history of tuberculosis, the



Dr. Guthrie at a village on the Upper Nile during a 1950 African journey. Opposite, he and Mrs. Guthrie visit MD editor-in-chief Félix Martí-Ibáñez, M.D. at MD's offices and admire the Oath of Hippocrates on a plaque by Doris Appel. Below, he stands with the principal of Edinburgh University on graduation day.



article on Laënnec derives its title from the author's succinctly presented view that publication by Laënnec of his classic work on auscultation, *Traité de l'auscultation médiate*, was the most significant event in the history of tuberculosis.

Grouped in another section of the volume under the heading "A Scottish Symposium" are papers on the rise of medical education in Scotland and on the medical and scientific exploits of James IV of Scotland, who paid compensation to patients for blood-letting and extraction of teeth performed by the king himself.

Besides the paper on "The Search for a Philosophy of Medicine" the volume contains another on writing medical history. Dr. Guthrie takes the position that while history should be an essential component of medical education, it should not be treated as a specialty but rather as an integral part of each department of medical education.

He counsels that history should be both literary and human: "The writer should use his art of bringing medicine into line with daily life; the patient then enters the picture; his attitude toward the doctor, his food and clothing and housing, as well as his diseases, all are to be studied, as the scroll of past records is unrolled. It is indeed fortunate that history has escaped from the bondage of science and still talks the language of the ordinary man. But can history assist medicine to achieve a similar position of freedom? This may be possible, although the medical historiographer who works with this end in view is faced with a formidable task."

**TRAVELER.** Dr. Guthrie's travels have taken him to Australia, New Zealand, Japan, Ceylon and India, to Egypt as well as South and East Africa, to several countries in Latin America (he has lectured in Spanish in Mexico, Guatemala and Peru), to Canada, and more frequently than to any other country to the United States.

He has also assiduously explored the historic and cultural background of his homeland, and is a vice-president of the Royal Scottish Geographical Society as well as a Fellow of the Society of Antiquaries of Scotland. He founded and became the first president in 1948 of the Scottish Society of the History of Medicine. He has also served as president of two sections of the Royal Society of Medicine of London (Otolaryngology and History of Medicine) and in 1967 he was elected one of the 100 Honorary Fellows of the society.

Dr. Guthrie holds an imposing list of degrees: M.D., D. Litt., Fellow of the Royal Society, Fellow of the Royal College of Physicians, Fellow of the Royal College of Surgeons.

His first wife Helen Purdie Stark died in 1950 and in 1953 he married his second cousin Margaret Jean Guthrie of Dunblane, who has accompanied him on most of his travels.

**SUMMING UP.** Dr. Douglas Guthrie, Hippocratic medical historian.

