Hailing a New Festive Salve

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I have the privilege of following my late friend, Professor Sean Hughes, as Guest Editor of *Topics in the History of Medicine (THoM)* for this special edition, the fifth volume of the series.

Unlike previous volumes that drew on themes featured at a BSHM congress or meeting, the theme for this volume was inspired by two personal experiences. Firstly, the challenges I encountered trying to carry out historical research into the Liverpool bonesetter, Evan Thomas, and other British bonesetters. Secondly, and as a result of that research, encountering the extraordinarily rich area of medical history covered in the book *Medical Fringe and Medical Orthodoxy 1750-1850*, which was published in 1987, the same year that I qualified and entered the medical profession.¹

The aim of *Medical Fringe and Medical Orthodoxy 1750-1850* was to explore the interface and connecting links between the regular and the irregular in medical history and it did so in twelve thought-provoking chapters. This volume of *THoM* aims to feature some different aspects of this same interface but also to highlight some historical inventions or treatments that, to modern eyes, may be considered bizarre or 'quirky' but were considered innovative or state-of-the-art by leaders in their field at the time they were first introduced.

Craig Miller, an American vascular surgeon who served as Scholar-in-Residence at the Medical Heritage Center of the Ohio State University and as a Michael E DeBakey Fellow in the History of Medicine at the National Institutes of Health, contributes the article 'Film and Filament: Early Techniques in the Surgical Treatment of Aortic Aneurysms', which, as well as summarising the key stages in the evolution of aneurysm treatment, features some good examples of quirky treatment, including how cellophane was used during an operation to treat Albert Einstein's aneurysm.

Tarquin Holmes, an independent scholar who researches the interface of history, philosophy and sociology, writes about hyraceum in his article 'A Disgusting and Useless Substance? Hyraceum between Folk Medicine and Pharmacopoeia'. Hyraceum is a great example of the unusual or quirky nature of treatments found within colonial medical history. Who could have predicted that the excrement of the rock hyrax, found

¹ Bynum WF Porter R. *Medical Fringe and Medical Orthodoxy 1750-1850*. London, Sydney, Wolfeboro NH: Croom Helm Ltd; 1987.

only in the isolated rocky middens of Africa and Arabia, would provide such a fascinating episode in British medical history?

According to the Oxford English Dictionary, the first British author to include the French term 'cul-de-sac' was Alexander Monro *primus* (1697-1767) who had studied in Paris and Leiden before becoming the founding Professor of Anatomy at Edinburgh University. In 1737, he used the term to describe an anatomical feature, a thimble-shaped cavity, in the terminal section of the mesocolon.²

This volume features a number of articles that describe innovative treatments or techniques developed by leading scientists or medical practitioners which were well-intentioned but turned out to be a 'false dawn' or therapeutic cul-de-sac. Dominic Hodgson, Consultant Urologist in Portsmouth and PhD candidate at Winchester University, in his article '"No Sex (Glands) Please, We're British": The Response to the Rejuvenation Craze', describes the varied responses of three enthusiastic British surgeons to the introduction of rejuvenation techniques by Serge Voronoff, a Russian surgeon based in Paris, and Eugen Steinach, an Austrian physiologist.

Erasmus Darwin, grandfather of the great Charles Darwin, was a leading physician in the late eighteenth century and was consulted by his friend and fellow Lunar Society member James Watt in relation to his daughter's advanced case of consumption. Retired Consultant Psychiatrist and medical historian Lisetta Lovett explains in her article, 'Dr Erasmus Darwin's Management of Consumption: Cul-de-sacs and Prescient Insights', how this tragic situation influenced Darwin's treatment choices and how Darwin's theoretical framework and Watt's engineering expertise resulted in the construction of the innovative 'rotative couch' in Bristol.

The rotative couch, although unsuccessful for treating advanced consumption, ultimately had a spin-off (pardon the pun) in asylums. Graham Ash, retired Consultant Psychiatrist and Co-Chair of the History of Psychiatry Special Interest Group at the Royal College of Psychiatrists, and Gordon Bates, Consultant Psychiatrist and current Historian in Residence at the Royal College of Psychiatrists, in their article 'Mosquitoes, Medical Officers and Mental Asylums: Malariotherapy in the UK and the Rise of the Horton Laboratory', describe the history of another unorthodox treatment and therapeutic cul-de-sac used within British asylums.

The concept of malariotherapy reminds me of Edward Jenner's (1749-1823) decision to inoculate the fluid from cowpox pustules into James Phipps and the subsequent widespread use of vaccination to prevent smallpox, although clearly the risk to health from malaria would be much higher than that from contracting cowpox.

Despite having attended the first 'Body Worlds' exhibition in Britain, featuring plastinated cadavers, in 2002, I was unaware of a much older technique of anatomical preservation called petrification. Cat Irving, Human Remains Conservator at Surgeons' Hall Museums in the Royal College of Surgeons of Edinburgh, writes a fascinating article about this technique and its Italian origins entitled 'The Italian Medusas: Unusual Preservation in Nineteenth-century Italy'. Although clearly not merely aimed at 'cabinets of curiosity' the technique was occasionally used to make statement furniture pieces.

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² Monro A. Miscellaneous Remarks on the Intestines. In: *Medical Essays and Observations*, *Vol. IV.* Edinburgh: Printed by T. and W. Ruddimans; 1737. p.67-92. See p.92.

The definition of a 'quack' is more controversial than quirk or cul-de-sac but the word itself probably originates as a shortened version of the earlier sixteenth-century word 'quacksalver', which itself described an itinerant salve or ointment salesman. What is clear is that the competition between the orthodox and the unorthodox, particularly between surgeons, apothecaries/druggists and unqualified practitioners, reached its height during the first two thirds of the nineteenth century.

My own article, 'Revealing the Profile of Confrontation: The Bonesetter, the Coroner and the Lord Chief Justice', is set in Liverpool during this period. My interest in Evan Thomas, the Liverpool bonesetter, developed through reading various biographical publications about his oldest son, Hugh Owen Thomas. These publications describe an estrangement between father and son, who had worked in close partnership together for many years. My article began as an attempt to explore various episodes in the dramatic years of Evan Thomas's last decade in Liverpool and led me into unexpected territory. The legal aspects of this research took me well outside my 'comfort zone' and I wish to record my gratitude for the expert help I received researching coronial law.

Peter Carpenter, retired psychiatrist and BSHM Book Reviews Editor, steers our perspective towards another great port city, Bristol, and Charles Cunningham Langworthy in his article 'Mr Langworthy, Dr Haygarth and Perkins's Metallic Tractors'. Langworthy was the only provincial agent for the magical Perkinean electrical tractors, attracting the attention of Dr John Haygarth, who carried out one of the earliest placebo-controlled trials in British medical history to show that the metallic tractors were no better than placebo tractors.

In her article 'Maude Dickinson, The Dongor Hygienic Company and "Radio-Activity in the Service of Man" ', freelance historian and consultant Lucy Santos focusses on the career and products of the pioneering businesswoman Maude Dickinson and her efforts to achieve both commercial success and scientific credibility from novel medicinal products. Dickinson established her business in Brighton and, during her efforts to create the ideal antiseptic soap, discovered some unexpected crystals. Could these crystals really be radioactive or were the claims just quackery?

In relation to the challenge of distinguishing between orthodox and unorthodox practitioners, the staff of the Melbourne Homeopathic Hospital featured in Neville Yeomans' article, 'Homeopathic Hospitals and the Battle with Allopathy in Colonial Australia', provide some illuminating examples. Professor Yeomans, Emeritus Professor of Medicine at the Universities of Melbourne and Western Sydney and a medical historian, explains that although it was clearly determined to favour homeopathic methods, including occasionally disciplining staff who used alternatives, the homeopathic hospital also carried out standard surgical procedures and gradually transitioned into an orthodox teaching hospital in the twentieth century.

When I proposed the concept for this edition in 2024, I had no intention of contributing to a second article in these pages so I have to thank my co-author and fellow retired surgeon, Nicholas Jones, for agreeing to work with me on our joint article 'A Spoonful of Sugar Helps the Opium Go Down: Two Centuries of the Quaker's Black Drop'. This was my first experience of collaborating with another surgical historian on a historical project and it proved to be a very enjoyable and fruitful one. Tracing the

roots of Black Drop was an interesting challenge, with a link to the itinerant physician Franciscus Mercurius Van Helmont, a late convert to Quakerism himself.

I wish to express my personal thanks and congratulations to all the authors for their excellent contributions. I am also very grateful to the Editorial Board and all the expert reviewers for their diligent work on these articles. Last, but definitely not least, my thanks to Hilary Morris, Editor-in-Chief, and Edward Wawrzynczak, BSHM Journal Editor for their tireless efforts in the service of this publication.

I hope that you enjoy reading the articles in this special edition of *THoM* as much as I have. Perhaps these 'Quirks, Quacks and Cul-de-sacs', without claiming them as any kind of unorthodox panacea, can act as a soothing salve for the aching curiosity of the medical historian.

In this era of ever-increasing expenditure on Artificial Intelligence (AI) systems, I would like to point out that no AI input has been used either during the editing process or in the writing of this editorial. It is the much more interesting subject of intelligent human artifice that features regularly within the rich narratives explored in this edition.

Keywords

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Biographical details

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