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***Anti-inflammatory drugs in the texts of  
Traditional Iranian Medicine (Tim).***

*Nonsteroidal anti-inflammatory drugs (NSAIDs) and glucocorticoids, nowadays are the main groups of anti-inflammatory drugs in modern pharmacology. The side effects of these anti-inflammatory drugs, specially using in chronic diseases cause many problem for the patients and the physicians, so finding the new anti-inflammatory drugs with less side effect is the aim of many researchers.*

*WHO emphasizes to Traditional medicine as an important field of health study and Iranian Traditional Medicine is a treasure of medications. In this study drugs with anti-inflammatory property from the point of view of Iranian scientists are investigated and the list of anti-inflammatory drugs on the basis of TIM texts has been ranked.*

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***It may have been different.***

*The name Galen and Hippocrates are well known as the forefathers of western Medicine. Their treatises were translated into several languages before "returning" to a European language. One of the places the Galenic corpus reached was the 'Abbasid court in Baghdad. During the 8th-10th centuries, we witness a massive translation movement. It was a time in which scholars and patrons invested many resources in obtaining and translating treatises in different branches of science, of which medicine was one. Treatises were translated from Greek, Pahlavi, Syriac and Sanskrit. The adoption of scientific knowledge was a part of a larger process of cultural import, and perhaps indicates a cultural preference. By the end of the translation phase, the dominance of Galenism was crystal clear.*

*Modern science gives little attention to the social process of adopting the Galenic medical system among the Arabs. As mentioned above, there were a number of medical theories and approaches, and each had a supporting group: patrons of scientific activities, medical practitioners, courtiers, men of religion (particularly Muslims and Christians) as well as rulers. It seems that there was a rather fierce competition between those groups, each cultivated its preferred theory, took care of translation and provided their unique medical treatment. Galenism was one of the medical theories around, it had competitors and "enemies", and it was the medical system who won. In this lecture I will present some explanations to this process.*

*Prehistoric medicine*

The Earth went through very long development and several Ages since the –Eolithic Age: after the consolidation of the Earth to the Paleolithic Age between 50,000-12,000 B.C. in which the Homo Sapiens developed , to the Mesolithic Age between 12,000-8000B.C when the Netufian Civilization in Palestine started and the zarzarian in Mesopotamian, and the homo sapiens began to settle down in small settlements, to the Neolithic Age, with its new inventions in Agriculture and Pottery as in the expanding Trade. Humans accumulated knowledge and Experience throughout long Periods of Development since the Homo Sapiens, Humans were weak and vulnerable and did not comprehend the Nature Forces around them, so they began to respect and then worship them, or to worship certain animals or rivers or anything that have significant Effect on their lives (Taboo). Exorcism was the knowledge or science they believe to help in controlling Nature or healing diseases.

A change in the civilization occurred during the Neolithic Age 8000-4500 B.C. Building of new settlements, discovery of Agriculture and cattle. Women play an important role in both, which encourages the domination of female Goddess. Women also may be the first physicians to treat the pain and suffering of their children and husbands. Medicine was mainly of exorcist nature believing that diseases were generated by Gods or Demons, and healing was achieved by pleasing them. Accumulation of experience about the effect of certain plants was also helpful and used by the material physiци.

*Cautery treatment for Childhood diseases.*

Cauterization by hot rods is one of the principal treatment in traditional Arabian medicine , this method is still practiced in Libya for the treatment of many chronic diseases , for adults and children , in many cities , villages and Bedouin tribes in Libya, the special questionnaire revealed that most of the cases belong to low socio - economic class families and majority has low standards of health education. Grandmother is the person who cauterize , few cases are left to the traditional physician , the skin is touched in certain areas by a rod heated in live fire , marks of conterization make special design depend on the type , diagnosis and severity of the disease Rickets , marasmus , acute gastro-enteritis and pneumonia are the main indications for cauterization in children. Sites are: the chest, abdomen, back and joints in cases of painful joints, cauterization is common in hopeless cases of tumors , cancers and hepatomegaly / splenomegaly. In spite of disappointing results, there is a strong traditional belief that cauterization can cure. Complications include: infections, abscesses , scars , keloids, ankylosis and delay in surgical interventions. The author presents photographs of real cauterization in children showing special design and markings on the skin.

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***Physician-Patient relationship in Italy and  
in Ottoman empire in middle ages.***

*Physician-Patient Relationship (PPR) has always been important throughout the history. There have been many documents from Ancient Egypt until present times that pictures physicians (or healers) and patients in an examination or a medical intervention. These pictures give us an opinion about the status of physicians and patients with respect to each other.*

*Italy is a special country when we consider the history of medicine in middle ages. There were very special institutions and very significant figures in Italy in these ages. It was also the case in Ottoman Empire. There were also monumental health care institutions as well as important scholars in Ottoman Empire.*

*Roger Frugard (A.D. 13th Century) and Serefeddin Sabuncuoglu (A.D. 15th Century) were two famous physicians of their times who had many similarities including having manuscripts on Surgery. In this presentation we compare the PPR in Italy and in Ottoman Empire in middle ages by searching the medical literature of two countries in general and Roger Frugard's Chirugia (Surgery) and Serefeddin Sabuncuoglu's Cerrahiyyet'ul Haniyye (Imperial Surgery), in particular. Our study has indicated that there were similarities as well as differences in two different traditions that set examples to the doctors of our time.*

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***The village institutes experience of Turkey  
and health education.***

*When the first Turkish Government was founded during independent war(1919- 1923), education was one of the primary difficulties to receive attention. The renovation and modernization of Turkey's educational system was planned to be carried out by considering our own social and cultural features. Education problems did not neglect even in most critical periods of the war. After the victory the architectures of the new country were naturally able to make more energetic effects to improve Turkey's much neglected educational system. One of this enormous effect is exactly the experience of "Köy Enstitüsü" (Village Institutes). This project has been reflected the revolutionary character of the Republican Reforms. The education approach of these institutes has been described on the basis of "learning by doing". In this presentation the aspect of health education of these institutes is introduced in the light of history of medicine.*

***Paternalism and respect for autonomy in Ottoman Medicine.***

*The principle of respect for autonomy is one of the characteristics of modern medicine. However, in the past of the medicine paternalistic model has had been valid in patient-physician relationship.*

*In this paper, some Ottoman Medical Books from XIVth to XVIIIth centuries are studied in the context of their proposals about the model of patient-physician relationship.*

***Le laboratoire d'Alzheimer à Munich, ou la naissance de l'histopathologie moderne du cortex cérébral.***

*Au-delà de la description du cas d'Auguste D., qu'il présenta le 3 novembre 1906 à Tübingen, et qui fut à l'origine de la « maladie d'Alzheimer », Alois Alzheimer (1864-1915) fut, avec Franz Nissl et quelques autres, au centre d'une évolution décisive dans l'approche histopathologique des états démentiels, à la charnière entre le XIXe et le XXe siècle.*

*A partir de ses recherches et de son enseignement dans le laboratoire d'anatomo-pathologie de la clinique psychiatrique de Munich (laboratoire créé en 1903), Alzheimer aura marqué de son empreinte toute une génération de neuropathologistes prestigieux. Sa carrière et son rôle fondamental dans le domaine de l'histopathologie cérébrale auraient largement suffi à faire passer son nom à la postérité... même sans la fameuse description de la démence présénile d'Auguste D. dont tout un chacun connaît l'histoire.*

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***I fattori che hanno provocato la diffusione e la propagazione della Peste nella Grecia medievale.***

*Le grandi epidemie della peste hanno pesantemente influito sulla storia dell' uomo. La peste si 'e introdotta nell' Europa dopo la puntura della pulce di roditori trasportati con la merce da Cina nel 14o secolo. In Grecia 'e arrivato da Constantinopoli dopo la sua conquista dall' impero ottomano. L' impopolamento di Constantinopoli da persone di diverse razze humane era la prima causa predisponente alla comparsa della peste. Il traslocamento di un grosso numero di profughi da Constantinopoli in tutta la Grecia e la loro nuova situazione socio-economica caratterizzata dalla fame e dell' immiserimento hanno favorito la propagazione della malattia in tutta la Grecia. Altro fattore di propagazione di questa malattia infettiva, era il progresso del commercio che portava in relazione i greci con popoli stranieri. Altro fattore sarebbe il basso livello economico finche l' economia appoggiava prevelentemente all' agricoltura. In piu, la comparsa dell' epidemia se stessa, provocava l' indebolimento del popolo peggiorando la situazione socio-economica, formando un circolo vizioso. Infatti, l' epidemia provocava un gran numero di decessi con riduzione demografica e conseguente riduzione della persone che potrebbero aumentare la produzione rurale e commerciale e allora portare alla progressione sociale ed economica. Altri fattori facilitanti la propagazione della peste erano i costumi religiosi o gli scarsi mezzi di Igiene. L' epidemia della peste nella Grecia medievale 'e uno fatto storico che ha dimostrato la stretta interazione fra il livello socio-economico e sanitario di una popolazione.*

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***Un contributo di Enrico Morselli (1852-1929) sulla fisiopsicologia della suggestione.***

*Enrico Morselli, nato a Modena nel 1852 e morto a Genova nel 1929, fu una figura importante della psichiatria italiana ed europea a cavallo del 1900. Professore di Clinica psichiatrica dapprima a Torino e poi a Genova, si occupò anche di Criminologia, di Antropologia, di Termalismo e di Psicoterapia. Come altri scienziati positivisti della sua epoca il Morselli fu attratto dai fenomeni ipnotici e medianici che cercò di studiare secondo i dettami della moderna psicologia sperimentale. Frutto di tali interessi appare il lavoro <<Contributo critico-sperimentale alla fisiopatologia della suggestione. Sui fenomeni di credulità per suggestione non ipnotica nelle persone sane>> apparso sulla "Rivista di filosofia scientifica" nel settembre del 1890 e pubblicato nello stesso anno come "estratto" dalla casa editrice Fratelli Dumolard di Milano. Tale contributo, dedicato al prof. Hippolyte Bernheim (1840-1919) della famosa scuola di ipnosi medica operante a Nancy, analizza le varie forme di suggestione capaci di condizionare il comportamento di chiunque nelle più comuni attività della vita quotidiana, anche nella completa assenza di turbe psichiche. Nel testo, di una quarantina di pagine, il Morselli suggerisce inoltre alcuni esperimenti pratici per dimostrare l'effettiva possibilità che un suggestionatore riesca ad influenzare a suo piacimento chi ha di fronte. Nel suo complesso la suddetta pubblicazione fornisce degli utili spunti per una discussione generale sul fenomeno del cosiddetto "placebo", analizzato in tempi più recenti anche al di fuori della psichiatria.*

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***Medicina e chirurgia nel patrimonio  
archeologico toscano.***

*Gli Autori esaminano i reperti di ambito medico-chirurgico presenti nelle diverse raccolte toscane. ne emerge un panorama estremamente vario e diversificato, sia per la provenienza dei reperti, sia per la loro stessa tipologia.*

*Attraverso queste testimonianze è possibile ipotizzare anche un percorso espositivo, che documenti l'evoluzione della medicina in territorio centro-italico, dalla cultura etrusca all'età imoeriale romana. Particolare risalto viene dato agli strumenti chirurgici della Collezione Chigi Zandadori del Museo Archeologico Nazionale di Siena e del Museo Archeologico di Firenze.*

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***Medicine in Jerusalem during the Ottoman  
Period and the Franciscans' medical  
activity.***

*For nearly half a century after the Ottoman conquest (1517) the Holy Land began to show signs of recovery and demonstrated appreciable demographic and economic growth, the product of the vigorous rule of a new, efficient administration. Jerusalem achieved a momentum of building and expansion for the welfare of its residents including an improvement in the water supply to the city and new watering troughs. This also had a concomitant impact, at least for a certain time, in improving the level of sanitation and health in Jerusalem. The new conditions also brought growth to the Jewish community in the land, primarily the result of waves of immigration from all over the Jewish world. Among the newcomers were physicians who had received their medical education at western universities, principally at Padua. Besides these physicians, the inhabitants of the holy city were treated by local doctors and practitioners trained in the Ottoman Empire in traditional Galeno-Arab medicine. A few of the doctors functioned as civil servants, others as private physicians. A variety of untaught traditional healers practiced medicine as well (eye healers, blood letters, drug-sellers, etc.). Several welfare institutions operated in Jerusalem, the most important being the general hospital named al-Bimaristan al-Salahi. This was intended to serve the entire population of Jerusalem, without distinction of religion. This hospital was supported by the central imperial government or by waqf funds. Out of religious considerations the Jewish and Christian communities preferred to use smaller medical institutions of their own, which were recognized by the Ottoman rulers.*

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### *Waterworks of medieval Azerbaijan.*

*Life-giving strength of water always attracted the attention of mankind and its all the possible usage methods were developed with a great inventiveness during the different periods of the history.*

*In the East, water was considered to be the most valuable and gracious. The masters and craftsmen of the medieval Azerbaijan had striking success in architecture of water, the cooling and melodious stream of which determined the highest emotional mood of men and decorated the cities.*

*In antropomorphic raw the phenomenon "water" was determined by waterworks such as kyakhriz, water reservoirs, fountains, ponds, cascades, waterfalls, lashers, mills, bridges, etc. that entered to the gold fund of the architecture of Azerbaijan.*

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### *From laboratory results to meta-analysis: paradigm shift or puzzle solving in current experimental medicine.*

*The introduction of new drugs in medicine is mainly based on molecular studies, isolation of receptors and evaluation of experimental results in vitro. However, the medical community seems to appreciate their efficiency, usefulness and indications only after well-organized clinical studies and meta-analysis of their results. We studied the introduction of the IIb/IIIa platelet glycoprotein receptor antagonists as an example of the meta-analysis model for evaluation of synthetic drug introduction in clinical medicine in order to assess whether the statistical model constitutes a paradigm shift in Kuhnian terms for experimental medicine or it can be considered as a puzzle solving process that strengthens the basic principles of modern medicine. The application of the so called "evidence-based medicine" methods - analysis of statistical data of well defined clinical settings (including large number of patients and specific evaluation techniques), in our example the use of IIb/IIIa antagonists in distinct conditions (acute coronary syndromes, revascularization) with assessment of predefined end points (survival, new events), is used to overcome the uncertainty of application of laboratory results to clinical grounds. However such a method does not in any way question the validity of the core concept that molecular mechanisms are applicable to living functions and can modify the natural history of disease. The statistical procedures of evidence-based medicine cannot be considered as discontinuity of modern medical science, but rather as a puzzle-solving process, leading to a broader appreciation of current theory.*

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***Breakthroughs in the history of human embryology.***

*Since the establishment of the first early human settlements, the occurrence of birth has always fascinated people. As a result, obstetrics was one of the first medical fields of expertise to be developed. In the course of years, the study of prenatal life and the mechanism of labor were intensified, following the continuous progress in anatomy and surgery. Hippocrates' reference to abortions in the medical oath is indicative of the interest of his contemporaries for the events that relate to birth. However, it appears that this long-standing interest was soon limited, owing to the prevalence of the female inferiority doctrine (references found even in Aristotle's work). Throughout the middle ages, the puritan beliefs that characterized the western world lead to a standstill in embryology research, surpassed only by the revolutionary work of William Harvey. At the same time, the introduction of the microscope offered a unique tool for the study of the organism's microstructure. Scientists working on understanding the way of a complete organism's creation from a single cell, faced – from the 17th century up to present - technical, theoretical and cultural difficulties. By supporting new concepts, such as the theory of epigenesis and the dogma of preformation, they attempted to answer a series of questions, some of which remain unsolved mysteries even for our current era of molecular approach.*

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***The naval Doctor Nikola Ispirski and his collection 'Soil from all over the world'.***

*The team of authors presents the naval doctor from Varna Dr. Nikola Ispirski – one of the first naval doctors in Bulgaria. During his 20 year service he takes care of the health and the efficiency of the sailors in his capacity as a doctor of a submarine division. The authors analyze also his activity as a doctor specialized in transportation traumas and a microbiologist. They study also his hobby: collecting of soil from all continents.*

*Led by the Latin thought Terra communis mater omnium mortalium est /'The Earth is the common mother of all mortals!'/ Dr. Ispirski puts the beginnings of his remarkable collection 'Soil from all over the world'. In the course of time it is increased and at the end it consists of over 200 exhibits and the owner is called 'the richest land owner'.*

*His participation is marked also in the VIII International Symposium on Naval Medicine in Varna in October 1978.*

*Key words: naval doctor, doctor of transportation traumas, collection 'Soil from all over the world'.*

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***Dr. Georgi Ikonomov - The founder of the  
bulgarian neptune mail.***

*The author describes the life and the creative activity of Dr. Georgi Ikonomov – the first Bulgarian that has put the beginning of the Neptune mail in Bulgaria 70 years ago. The brothers-twins Ikonomovi let the first bottle go in the river of Strouma when they are hardly at the age of nine.*

*➤Emerging still in the ancient times the Neptune mail represents an inseparable part of the history of navigation.*

*➤In 1981 Dr. Georgi Ikonomov decided to surpass the record of Dr. Taiti from Aberdeen /Scotland/ who had succeeded in letting 3000 bottles go in the world ocean.*

*➤As a naval doctor and with the assistance of the sailors of the ship 'Kamchia', crossing the seas between Europe and Africa, Dr. Ikonomov has let 4000 bottles go with the description inside of the ancient and beautiful Bulgaria, at the same time sending his best wishes to the people who will be finding the bottles.*

*➤The author has studied and presented a person of encyclopedic knowledge and research interests mainly in the sphere of sports medicine, tourism, speleology and the twins. Dr. Georgi Ikonomov has crossed almost all seas and oceans and realizes his dreams of childhood that have turned with time into a realized necessity – to drop into the world ocean thousands of addresses appealing for an ecological planet and humane relations among the people.*

*➤After sending more than 30 000 bottles the naval doctor Dr. Georgi Ikonomov receives letters in 16 languages from 40 countries and he finds himself included in the Guinness Book of Records.*

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***Galenic-Hipocratic Medicine in the XVI  
century mexican colonial Books.***

*In this work I'm going to review the hipocratic influences in the first american medical books and manuscripts. My interest is understand how the hipocratic theory about the wheater and diet comes to be central in the explication about the New World. To understand that i reviewed the XVI century mexican medical books looking for explications about the sickness, the diferences between the american nature and european nature and difereces about the human constitutios between american men and european men. I Found that this books contens many references about "epidemics" hipocratic books and also and principal to the hipocratic book "Winds, Waters and places." Just like exemple I'm going to take the book of Juan de Cárdenas, who was a spanish that traveled to México in XVI century and here practiced the medicine and published his book title "Secretos Maravillosos de la Indias", in which he explained the characteristics of the New World climatology, then talk about the humoral constitutions of the american natives and the diferences between they and the spanish man, and also the diferences between the spanish peninsular humoral constitucion and the spanish who comes to New World, to explain that Juan de Cárdenas use the Hipocratic theory of the "epidemics book" in wich Hipocrates talk about the "Katastasis" or constitution of a place, and also Cárdenas taked some galenic explications about the human humoral constitutions. This and other exemples open the posibilidad to built a diferent interpretation about the paper and importance of medicine in the european kvoledge about the New World and his own interpratati.*

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***The collection of the surgical instruments of the deontology Department of Ankara University School of Medicine.***

*The main aim of this presentation is introduce the unique surgical instruments collection of the Deontology Department of Ankara University School of Medicine. The Department has been founded in 1946 one year after the opening of the School of Medicine and the collection is in the same age with the department. The collection has 200 objects which belongs to different historical periods (from Calcolithic Era to Hellenistic Period, from Roman and Byzantine Periods to Seljucian and Ottoman Periods) and has different forms ( pensets, curets, spatulas, excavators...). In this presentation, that collection will introduce systematically according the fonction and period with slides of objects.*

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***La médecine dans une province de Roumanie.***

*Le territoire nommé aujourd'hui << la Bucovine >>, partagé entre la Roumanie du Nord et l'Ukraine de l'Ouest, faisait partie jadis de la Moldavie. Celle-ci est entrée dans l'histoire comme un rempart qui défendait les couronnes hongroise et polonaise contre les envahisseurs de l'Est et du Sud. Les premiers princes régnants sont venus de Maramourech, une province avoisinante, pour s'échapper aux engagements de vassalité envers les rois de la Hongrie. Cela se passait pendant la première moitié du XIV-è siècle. On cite en 1308 << le grand vo&#271;vode des Moldaves >> qui fut soigné par de vieilles femmes et puis dans les monastères de Putna et de Dragomirna. Dans la même période, on peut citer la puissance guérissante des eaux tout près du monastère franciscan de Siret ( l'une des premières capitales de la Moldavie ) et des reliques vénérées du Saint Jean << Le Neuf >> de Suceava. La guérison des malades étant l'une des obligations de la discipline monastique, les monastères abritaient, sans nul doute, les plus graves malades et encore les plus pauvres d'entre eux. Le premier h&#244;pital en dehors d'un monastère a été construit &#341; Suceava par le métropolitaine Anastase Crimca, en 1619. Le lieu était près du palais du prince régnant. Pendant ce temps-l&#341;, la capitale de la Moldavie était déj&#341; a Iassy, mais la ville de Suceava avait son r&#244;le de relais sur routes commerciales, entre la Pologne ( Lemberg, Lyov ) et Constantinople. En 1891, on a commencé la construction d'un b&#226;timent nouveau, ce qui constitue aujourd'hui la partie vieille de l'h&#244;pital départemental de Suceava.*

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### *La toxicologie dans la médecine arabe: diagnostic et prise en charge.*

*Pour avoir un aperçu de la démarche diagnostique et thérapeutique en toxicologie dans la médecine arabe, nous nous sommes basés essentiellement sur quelques ouvrages célèbres tels que Eddakhira de Thabet Ben Kora, El Haoui et El Mansouri d'Errazi, Al Quanun fi Tibb d'Ibn Sina, le Teyssir d'Ibn Zohr, Akrahadhine Al Valenci, etc... Notre étude est limitée aux intoxications aiguës par voie orale.*

*Rappelons que le traitement moderne d'une intoxication aiguë comporte trois volets: La prévention de l'absorption et l'évacuation du toxique, le traitement symptomatique et l'administration d'antidote. Le souci d'un traitement basé sur ces trois volets existait déjà dans la Médecine Arabe. Ainsi, la conduite à tenir commence par l'énumération des premiers gestes à pratiquer devant une intoxication (vomissements, lavements, purgatifs), puis la classification des toxiques, ensuite le traitement symptomatique, et enfin, un traitement spécifique en fonction de chaque catégorie de toxique, par le thériaque ou antidote.*

*Quatre intérêts se détachent de cette étude : le premier est d'ordre historique, car il nous renseigne sur la toxicologie de l'époque dans la médecine arabe, le second est lié au soucis d'associer un traitement symptomatique au traitement étiologique, le troisième nous fait observer l'ébauche des premiers gestes de réanimation et enfin, le dernier intérêt nous révèle une démarche diagnostique de la médecine arabe devant une intoxication qui reste très contemporaine de par le raisonnement et l'attitude thérapeutique.*

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### *Hygiène et confort dans les bains publics d'Alger à l'époque Othomane.*

*La bibliographie historique signale très peu d'équipements hospitaliers à Alger à l'époque othomane. Cependant, les observateurs de l'époque n'ont pas manqué de noter l'intérêt social des nombreux bains publics que comptait la ville. L'architecture et l'ornementation remarquables des hammams algérois répondaient en effet non seulement à un besoin d'hygiène mais également de confort et de détente (musique, massages, boissons). De fait, le hammam jouxtant mosquée, souq et café était devenu un élément urbain majeur soulignant l'importance de la vie sociale communautaire et celle de l'hygiène individuelle et collective en milieu urbain.*

*Le présent article porte sur la description architecturale de ces bâtiments, de leur aménagement intérieur, de leurs qualités techniques du point de vue du confort thermique et de leur approvisionnement en eau courante froide et chaude.*

*Par ailleurs, l'ensemble de ces paramètres était soumis au contrôle d'un préposé urbain qui veillait au respect des normes lors du choix des matériaux de construction, du dimensionnement des salles, de la propreté des lieux, de la qualité du service et du prix d'entrée.*

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**Objects used as talisman and used to provide protection against evil eye in the world and and some examples of their**

There are various cultures and different religions in the world and they had different practices accustomed into them. Although none of these practices were not actually a part of the religion, they were used in close relationship with religious practices by human being and become a part of their religion and culture. Some of these practices remain only a local tradition whereas some widely spread among the cultures and nations because of the interactions between them.

These practices, some of which are still in application, still exist with either slight modifications or becoming a myth over time. Their profound effect can be seen sometimes in a decoration material in someones home or in a figure engraved on a jewelry. "Ankh", a cross with a noose in Ancient Egypt, "Dream Catchers" of North American Native Indians, and "Fatima's hand", which is thought to provide protection in Middle East, can be given as an example of these. Even though these examples can be often seen in underdeveloped or developing countries which have not completed their scientific, educational, and economic development, it is possible to see these examples in well developed populations. This fact shows us that in addition to the globalisation of the world and improvements in literacy and science, many people from different nations still will not give up their traditions and beliefs and the interaction between them also makes some of these beliefs become global. There is a fact that this is related to educational level for sure.

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**Chemical drugs in Omar Shifai and Ali Munshi in the eighteenth century's Otoman Empire.**

In the Ottomans the Westernisation appear in the seventeenth century and began to powerful in the following century. One of the medical system which was very effective on Otoman medical men iatrochemistry that was founded by Paracelsus.

Salih b. Nasr al-Allah who lived in the second half of seventeenth century, was the physician who carried the influence of iatrochemistry in to medicine world in the Ottomans. Following him we find two physicians Omer shifai, and him student, Ali Münpi as the representative of this system.

For instance, both of the pycicians wrote on iatrochemistry. Omer Shifai's work named "Selected Guide of the Science of Secrets" ("Mürbid el-Muhtar fi Ýlm al-Esrâr) and Ali Munshi's work named "Beginnig of the New Starters" ("Bidat el-Mübtedi"). As is seen those medical Works, Omer Shifai and Ali Munshi preferred to prescribe chemical drugs more than the others in their colleague did. The most populer drugs among they adviced quicksilver and its compounds in addition to antimony and its compounds as well.

Except the chemical drugs which werer mentioned above, they also preccribed some other chemical elements as drugs like natron, copper, gold, silver, tin, lead, zinc etc.

However in the otoman some other physicians in the eighteenth century also supported iatrochemical ideas and they adviced chemical drugs although they did not prefer them as much as Omer Shifai and Ali Munshi. Chemical drugs were especially prescribed for some contagions disease like sphilis and lepra.

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*The history of medicine in ancient Iran and after Islam appearance.*

*It is evident that Iranian civilization is one of the greatest and oldest civilization in the world in the time when most of the people in the world ignorant and illiterate ,great civilizations like Iranian's, Egiptian's , rooman's and etc. appeared and these places became the site of scientific investigations. But, what is important is that these civilizations and cultures have got into unsmooth pathways along the time and history and in this bumpy way sometimes they got damaged and even destroyed .in those times because of the wars between the great empires ,nothing -even the libraries and cultural centers- was safe.*

*In this regard , Iranian civilization and its scientific resorces have got damaged and destroyed several times .But, according to what is available now, I've written a bit about the history of medicine in Iran in three periods of time :*

- 1) From ancient time to Alexander death*
- 2) From Alexander death to Islam appearance*
- 3) After Islam appearance -with pointing to the role of great scientists like Ave sina and razi.*

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*Mail disinfection in Italy during cholera epidemic.*

*During the cholera, the various Italian States disinfected the letters with physical and chemicals agents and adopted techniques that normally left signs that allowed the identification of letters which has been treated such ad handstamps, writing or labels that certified that disinfection had taken place in a particular countries.*

*The disinfection could be limited to the outside. In this case some Health Authorities put the inscription "clean outside and dirty inside".*

*This is the case of letters on transit throughout a State or addressed to a well specified Official of the State, or to a foreign diplomat. When the letters were disinfected also inside, a special knife was used to cut or to hole thorough the whole thickness of a letter. In many cases a rastel with a series of cuts or holes of constant dimension and position was used.If a letter was opened for disinfection, the back was closed with paper or wax seals. Sometimes multiple disinfection ocured. Normally the first disinfection was limited outside and the second disinfection outside and inside. Three disinfection were quite rare.*

*During the first cholera epidemics (1830-1831) all the various Italian States used the disinfection of mail. After 1832 and until the 1855 the Kingdom of Lombardy-Venezia and of Sardinia stopped to use the disinfection of letters because it was proved to be ineffective against the spreading of the disease. Also after 1861 till 1884-1886 the Kingdom of Italy letters were disinfected inside and outside with cuts; but handstamps and other signs that certified the disinfection disappeared.*

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***On the question of a world priority in the field of researches on aetiology and pathogenesis of stomach and duodenal gut***

*The first researcher in a history of medicine who has formulated the complex theory of aetiology and pathogenesis of a stomach ulcer, appropriate to modern conceptions on this account, was the Russian scientist A.I.Shcherbakov (works of 1888-1891).*

*In 1988, the results of his researches were summarized in his work "On the round stomach ulcer". As a whole, A.I.Shcherbakov represents ulcer pathogenesis as follows: hyperacid gastric contents aggressively influences the stomach mucous coat, the protective mechanisms of which are weakened as a result of a complex local (infringement of blood supply) and general (stimulating influence of central nervous system) factors. The ulcer defect formed owing to infringement trophism of a gastric wall, chronically progresses under the influence of the increased acidity of gastric juice owing to what chronic ulceration arises, shown by a number of clinical symptoms - actually a stomach ulcer.*

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***Hospitals in old Iranian culture.***

*The hospitals (the so-called Marizkhaneh and Shafakhaneh in old Iranian cities) were one of the great achievements of Iranian culture. The Iranian hospitals were later called a bimaristan, from the Persian word bimar (ill person). The old Iranian hospitals were a more elaborate institution with a wider range of functions with special facilities for poor and sick people. The reason for this fact has been mixed with Islam theology which generally accepts a moral imperative to treat all the ill regardless of their financial status. The hospitals were largely secular institutions, many of them open to all, male and female, civilian and military, adult and child, rich and poor, Muslims and non-Muslims. They also tended to be large in campus and were urban structures. Generally speaking, old hospitals in Iran served several purposes: a center of medical treatment, a convalescent home for those recovering from illness or accidents, an insane asylum, and a retirement home giving basic maintenance needs for the aged who lacked a family to care for them. Most of these hospitals were financed from the revenues of pious bequests called waqfs. Little detailed information is available regarding the hospitals as teaching institutions.*

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### «Gil Eannes» - The Hospital Ship.

*Gil Eannes was a remarkable Portuguese navigator. Two hospital ships used his name. The first, the Lahneck was requisitioned by Portuguese government in 23th February of 1916 as consequence of German declaration of war. She was an army transporter and a hospital ship for fishing in New Land banks. Integrated in national navy, she was a regular tender to the codfishing fleet until 1941. In 1954 the first Gil Eannes was abased. She was substituted by another in 1955. In 1973, the second Gil Eannes ended her activity.*

*The Hospital Ship «GIL EANNES» was the outcome of many years experience with the old vessel from which she inherited her name.*

*The hospital services were concentrated in the section from amidships to forward, and were distributed along three decks, and served by a large lift for transporting the sick. On the main deck, there was the Waiting Room with access, on the starboard side, to the Dispensary and Consulting-Room, the latter being connected to the X-Ray Room. This is fitted with the most up-to-date equipment including Dark Room. Completely insolated from the remaining installations, are a Sick Bay with 8 beds, and two more, of two beds each, all for contagious diseases. This section has private pantry, and washing facilities. The Waiying Room, to Port, gives access, through a hall, to the cabins of the two doctors and the Chaplain, as well as to a small library. Adjoining is a large bay for 12 convalescents, patients who have been discharged as cured and are ready to go to their ships. This has also a big sitting room and mess.*

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### The Cholera epidemic in Palestine during first World War.

*War provides an environmental ripe for the rapid spread of infectious diseases and cholera ranks as one of the great war pestilence. The cholera epidemic of 1916 was the third and the last visitation of the Epidemic in Palestine The route of transmission was the ottoman troops that carried cholera with them, along the newly built railroad from Damascus to Sinai, crossing Palestine. The battles raged along the front of Suez Canal between Ottoman and British forces. Armenian refugees in Mesopotamia and Syria served also as vector of cholera transmission. Measures to halt the flow of the outbreak southward were taken by the ottoman authorities. Large scale initiative of cholera vaccine inoculation, establishment of sanitary board of health, municipal cleaning directions which should be implemented by the citizens and rigorous sanitary cordons imposed by the ottoman troops to contain the deadly disease. On 1916 the environmental sanitary condition of the cities and villages of Palestine deteriorated after two years of war, famine, closure of hospitals and shortage in medical assistance and drugs. During the spring of 1916 the cholera appeared in Afula in the north of Palestine and a main train station. Few weeks later the cholera epidemic arrived to Jerusalem and Jaffa resulted in hundreds of cholera cases and high mortality rate. In 1917 the Ottoman-German troops traveling southward by train from the main base in Damascus to the Gaza front were subjected to detention and medical surveillance in a lazaretto camp near the train station.*

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***Post-Mortem examination of conjoined twins in early modern Europe.***

*Various printed sources, including broadsides, books, and journals, provide accounts of monstrous births in sixteenth and seventeenth-century Europe. The commonest type of abnormality described is conjoined twinning. The major morphological types of conjoined twins had all been reported by 1600, often in publications that included details of their time and place of birth, morphology, behaviour and outcome. This paper uses those accounts in which the twins' internal anatomy was described to explore the developing role of the perinatal autopsy in the early modern period.*

*One purpose of these autopsies was to determine on a case-by-case basis whether conjoined twins were considered as one or two individuals – a decision in which behavioural observations could override the classical morphological criteria for establishing individuality. This study aims to show that the autopsy had a wider role as a means of displaying the technical skill and learning of the dissector and as a tool for exploring the order and regularity present even in monstrous formations. Precise anatomical description and stylised pictorial representation could present a greater level of order than the human body naturally showed.*

*Description and classification of monstrous births encouraged the reader to see them not as errors of nature or warnings from God but as part of a complex created order.*

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***I vasi di ceramica attici, di Cnido, di Tanagra, di Vulci parlano anche di medicina.***

*Achille che medica Patroclo, Stenelo che sutura l'indice di Diomede, il Centauro Chirone attorniato dai suoi discepoli, Esculapio col caduceo sono i simboli più eroici e leggendari dell'antica medicina dipinti sulle anfore, sulle coppe, sui crateri di Tanagra, di Lemno, di Cos oltre che su quelli più antichi provenienti da Eleusi e dall'Acropoli. Le eleganti Kylix del VI° secolo disegnate a forma di coppa e dipinte da celebri pittori come Clizia, Nicostene, Duride sono testimonianze archeologiche e fonti di studio che ci illustrano la storia dell'arte medica nei suoi vari aspetti semeiotici diagnostici e chirurgici, quanto mai affascinanti ed eroici, dall'età omerica (IX°Sec. a.C) fino all'inizio dell'Ellenismo (300 a. C).*

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***Sonocack is a method for Extra Uterine Fertilization from 13th (Lunar Hidjri) century.***

*In the name of God.*

*Nowadays, extra uterine fetus (Foetus) fertilization is one of the widely practiced methods that's used in some types of infertility, which in medical terminology is called IVF (in vitro fertilization).*

*Historical records of this method, as is mentioned in the references goes to 1970's years by Dr. Stiptoe and Dr. Edwards.*

*But recently received facts tell the story someway else. The SONOCACK method, is a procedure that is mentioned in one of the Persian medical manuscripts in the 13th (Lunar Hidjri) century, for extra uterine fertilization.*

*What deserves more attention in this article is not the proposed procedure but the sheer existence of such a mentality in those days, which makes it historically so much important.*

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***European Concepts Of Medical Ethics In The Thirteenth And Fourteenth Century.***

*Ethics and etiquette played an excellent role in medieval medical texts. Traditional topics of ancient authors - rediscovered in Latin translations of Arabian authors or commentators as well as in Greek or Latin manuscripts, preserved in European monasteries - were confronted with doctrines or critical remarks proposed by scholars like Roger Bacon or theologians like Albertus Magnus and St. Thomas Aquinas (who stressed a kind of practical ethics based on the four cardinal virtues). As philosophers like these - following the example of Aristototele - integrated natural sciences to their work, very different and contrasting influences formed the doctor's (and researcher's) ethos from the 13th century onwards. Not only religious aspects but also scientific experiences were taken in consideration. Finally, scholastic impacts and traditional admonitions resulted in a modified deontological self-image of the practitioners. Also other influences, as from the Christian Knight Orders in the Holy Land, or from very conservative authors and faculties in the West, were important for the doctor's behavioural patterns.*

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### *Eroi e Semidei ai primordi della Medicina Navale.*

*Gli Autori, dopo una meticolosa indagine mitologica, rivisitando dei, semidei ed eroi, individuano, tra i numerosi personaggi che incontrano, alcuni che in qualche modo, potrebbero collegarsi ai primordi della medicina navale.*

*Di certo, la presenza di un medico su di una nave è attestata da prove documentali, che si riferiscono alla guerra del Peloponneso del 415 a.C., promossa da Alcibiade, la cui flotta prevedeva la presenza di un medico su una nave.*

*Tuttavia, alcuni poeti epici (Omero e Pindaro), il poeta tragico Euripide e vari storici (Erodoto, Apollonio Rodio, Plutarco, Plinio il vecchio e Pausania) ipotizzano e forse credono che leggende in materia siano verità e suggestive tradizioni orali affondino nella storia la loro lontana genesi, talché farebbero risalire ben prima del V sec. a.C. e cioè al XII a.C., le origini della medicina navale.*

*Medici navali ante litteram o, meglio, guerrieri esperti nell'arte sanitaria, che potremmo definire medici, sarebbero stati Orfeo ed Esculapio, che parteciparono alla spedizione degli Argonauti, guidati da Giasone alla ricerca del Vello d'oro.*

*Medici, per così dire, navali, furono anche Podalirio e Macaone, figli di Esculapio, che viaggiarono sulla flotta achea per la guerra a Troia del pari guerrieri ed esperti dell'arte sanitaria furono, sotto le mura di Troia, pure Patroclo, Diomede e Nestore, che curarono, durante il tragitto navale, quanti abbisognavano di cure.*

*Di questi personaggi gli autori tracciano un profilo etico-storico.*

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### *Constructing an archive.*

*Archives of importance are normally collected by large public bodies, for considerable resources in space and money are needed to prepare and store them. By contrast, this account tells of an archive personally constructed, and so may be helpful to another wishing to do the same.*

*The period from 1947 to 1960 was the only period in British history when there was military conscription in peace time, and I undertook with support from the British Medical Association and the Wellcome Trust to collect and construct an Archive of the conscripts reminiscences and memoirs. They were called National Service medical officers and the last left their Service in 1962. Their range was world-wide and involved active wars and peace-keeping from the West Indies to Korea, Trieste to the Antarctic ocean.*

*This paper describes the background to my Archive, the necessary legal contract with those who took part, the various ways of finding and encouraging individuals to record their histories, and the system of collection and subsequent storage.*

*Contributors were determined that a record selection be written in book form, and the book 'The Conscript Doctors' was therefore written for them to read and enjoy.*

*The Archive has been described by Wellcome as one of the most important medical, military, and social collections of the twentieth century.*

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***Public health officers (The Cazzamorti)  
control the arrival of ships and caravans  
during the plague epidemics in Dubrovnik***

*The maritime city-state Dubrovnik (Ragusa), Croatia, developed an exemplary system of public health regulations in the 14th -16th c. The recurring outbreaks of plague forced Ragusans to institute the first systematic quarantine in 1377, legislation later adopted by Venice, Genoa and Marseilles. Since the medical profession, was unable to prevent plague epidemics, the Government nominated Public Health Officers (Officiales Cazzamortuorum) from the ranks of the nobles. They founded the Health Office as early as 1397 that firmly believed in the infectious nature of plague, a revolutionary idea at the time. This research is based on the critical analysis of the manuscript Libro deli Signori Cazzamorbi, 1500 –1530, from the Series 55, Sanitas in the Dubrovnik Archives. While the Libro a tergo, records the trial proceedings conducted by Health Officers, The Libro a recto, records the arrival of ships, caravans and travelers to Dubrovnik, providing a wealth of statistical information. It has allowed us to compile a list of places, regions and countries that had contact with Dubrovnik. The greater the danger of plague in Dubrovnik, the more frequent were the entries in the register: under the threat of imprisonment and monetary fines, the travelers had to swear that they had not visited a pestiferous area two months prior to their arrival. The activities of the Health Officers were fairly successful, so that plague stopped being endemic in the region after 1530. The Dubrovnik example found followers in western Mediterranean ports, thus becoming the precursor of anti-epidemic measures in Europe.*

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***Shakespeare and Medicine.***

*Medicine and literature are interconnected by what might be called their common ground: humanity. Doctors and writers are especially observant of the tragedies in human life. Both groups encounter illness, distress, dying, death and other important events in life.*

*Shakespeare became quite knowledgeable in the Renaissance medicine of his time, as he seemed to have had certain medical connections.*

*William Shakespeare's plays are replete with references to maladies, medicines, and medical men and their profession. His remarkable power of observation is revealed by his vivid portrayal of diseases.*

*The paper aims at both reflecting some medical aspects from the Elizabethan era and at pointing out some of the references to maladies, medicine and medicine men as they are to be found in some of Shakespeare's major plays.*

***R. Hayyim Vital, the Kabbalist as Healer.***

*At the end of the sixteenth century the Jewish community in the land of Israel and environs enjoyed the services of two types of physicians. The first kind were physicians who had studied medicine in recognized establishments and received certification and a work permit from the authorities. The second kind were "healers" who did not undergo any kind of accredited training but rather acquired their knowledge informally.*

*As an example of a Jewish healer of this period, I will present the rabbi and Kabbalist R. Hayyim Vital, who was born in Safad in 1543 to an Italian family of Spanish origin. He is known as the renowned pupil of R. Yitzhak Ashkenazi (the "Ari") and the editor of his teachings. After the death of the Ari in an epidemic, R. Hayyim Vital lived alternately in Safad and Jerusalem. From Jerusalem he moved to Damascus where he served as the rabbi of the Sicilian community; he died there in 1620. Like many other rabbis, R. Hayyim acquired a broad education in many diverse fields of knowledge. He seems to have acquired his medical education through his own efforts, by studying the medical literature of his age and through his connections with physicians and pharmacists. R. Hayyim referred to some of his sources, which include the professional literature of his time. R. Hayyim Vital began to practice medicine only late in life. It is possible that the reason for this was a demand by the members of his community, who preferred to receive medical treatment from a familiar religious and spiritual authority. The only historical source that discusses his interest and preoccupation with medicine is an autograph, heretofore unpublished.*

***Placebo and placebo effect in clinical trial.***

*A placebo (Latin for "I shall please") is a medication or treatment believed by the administrator of the treatment to be inert or innocuous. Placebos may be sugar pills or starch pills. Even "fake" surgery and "fake" psychotherapy are considered placebos. Researchers and medical doctors sometimes give placebos to patients. Anecdotal evidence for the placebo effect is garnered in this way. Those who believe there is scientific evidence for the placebo effect point to clinical studies, many of which use a control group treated with a placebo.*

*The discussions about what placebo means and how its effect occurs go far back in the history of medicine. In general medicinal understanding, placebo means the subjective feeling of a positive effect in response to something that is used for curative intentions. In spite of difficulties in its definition and unknown content, its existence is generally accepted. What is discussed is its level of effectiveness in any disorder and medication. The placebo effect varies not only among diseases but also among regions and countries. Even the physicians' belief in a placebo increases its effect. In this speech, placebo (the placebo effect) is defined, the implications of placebo in general medicine and clinical trial are discussed.*

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***Evaluation of Medical history in Medical Faculties in Turkey from the aspect of the evolution of education.***

*A critical evaluation process of medical education in our country, in particular in the last 10 years, is being done in a serious manner. "Medical Education in Turkey," a report prepared by the Turkish Parliament in 1991, revealed that the education given at our medical faculties is in general inappropriate for the needs of the country and that it is inadequate qualitatively. However since this report was prepared in 1991 until the year 2000, 22 new medical faculties have been opened. One of the results arrived at in the evaluation of the Turkish Medical Society's 1997 and 2000 Pregraduation Medical Education Reports was also that medical faculties open in Turkey not because of a scientific basis but for political motives. The content and method of medical education cannot escape the effect of the country's health policies. However the quality of education that is given at these universities before ensuring the necessary sound physical and scientific foundation will also be low. Medical faculties are places where information, skills and individual values related to the medical profession are transferred to students with a social and psychological process. The Deontology-Medical Ethics-Medical History classes play an important role in the process of developing the identity of a physician in these places where the art of medicine's expert-learner relationships are formed. Subjects under discussion are how to give these lessons at the baccalaureate degree level and above and how it should be given. In our country academic studies in the Deontology-Medical Ethics-Medical History branch are continuing at 17 Medical Faculties.*

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***A Surgical Challenge and a problem for medical ethics: the development of transsexual Surgery.***

*Transsexualism became a media sensation in 1952 with the appearance of Christine Jorgensen and hundreds of people sought to replicate her experience. Transsexualism, however, was not unknown and there were several cases of people seeking and receiving surgery before her but the cases were not sensationalized.. Jorgensen herself was castrated and had a penectomy but there was no attempt to make a vagina or labia. What made her different from traditional eunuchs was the ability to bring about bodily changes through hormones. The demand of others to follow her example posed two dilemmas to the surgical profession. One was a technical challenge of a realistic surgical construction of female genitalia and the other was a medical ethical one of doing no harm. How far should surgeons go in radical interventionist surgery? Should they cut off a healthy limb because a person wanted it removed? Similar problems were raised by female to male transsexuals where the problems of surgical reconstruction were more difficult This paper examines the development of the medical technology and the debate within the medical profession over the performance of such surgery.*

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***Resistance to new ideas in medicine.***

*The history of science is dotted with stories documenting how many important discoveries were initially resisted or ignored by fellow scientists. Some important discoveries were 'premature', in the sense that they did not fit in the common paradigms, and/or their implications could not be connected by a series of simple logical steps to the existing scientific knowledge [Stent, 2002]. In other instances, some theories or discoveries collided with the dominant paradigms in science and they were resisted or scorned at with a generous dose of scepticism. In this communication, we review instances of resistance to scientific discovery in which Nobel Prize winners in Physiology or Medicine and authors of important or highly cited papers were involved. We have studied scepticism by part of the scientific community toward a discovery that eventually would be awarded with the Nobel Prize. In some instances, we can recognize the phenomenon of delayed recognition [Garfield, 1989]. When this happens, the discovery may be unnoticed at all for years, until the scientific community begins to recognise its value or the scope of its implications which are reflected in the attention that it receives: a clear sign that it has been 'discovered' by the scientific community. Among the Nobel laureates in Physiology or Medicine which encountered scepticism toward their award winning discovery, we can cite: George W. Beadle, Baruj Benacerraf, Günter Blobel, Howard M. Temin and Peter C. Doherty. In addition, we have identified other instances of important discoveries that were initially resisted by scientists.*

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***Benoît Mure: Legame tra Brasile e Italia.***

*Benoît Mure, figlio di italiani, nato nella città di Lyon (Francia); nella Sicilia fu guarito da una pneumopatia col metodo dei simili. Allora si accese in lui l'entusiasmo per la dottrina. Approfondì questo studio con il Conde dei Guidi e ne diventò un diffusore in Sicilia, sofferse persecuzioni. Nel 1840, tre anni prima della morte di Hahnemann (il fondatore dell'omeopatia), Benoît Mure discepolo del fondatore arrivò al Brasile, dove sviluppò l'insegnamento della dottrina dove fu perseguitato ancora. Ogni paese ha preso un corso differente nella storia, però Benoît Mure fece grande diffusione del nuovo metodo terapeutico, di origine tedesca, formando un legame tra Brasile-Italia*

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*Dans une région de la Turquie, la tradition d'habiller les malades mentaux et psychotiques par une robe spécifique.*

*A Kırykhan, dans l'est de la Méditerranée, il existe une très vieille tradition. Dans cette tradition, les malades mentaux et psychotiques ont été habillés par une robe spécifique dite 'robe de fou'. Ces malades portant cette robe, pouvaient vivre dans leurs environnements habituels en menant une vie 'normal'.*

*Cette tradition avait un but de faire reconnaître ces malades aux habitants pour qu'ils puissent se comporter en fonction de leur maladie. Selon cette tradition, les habitants devaient traiter attentivement les malades et les aider. Cette tradition permettait aux malades mentaux et psychotiques de continuer à vivre dans leurs environnements habituels au lieu de subir un isolement social ou un enfermement dans un service psychiatrique.*

*Une telle solidarité sociale, face un problème spécifique de santé, en acceptant de vivre avec ces gens malades et en participant à leur traitement, ne se voit pas souvent. C'est pour cela, dans notre travail nous allons faire une recherche détaillée de cette tradition, expliquer les raisons et discuter ses résultats psychiatriques et sociologiques.*

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*A private hospital in a remote southeastern city in Turkey: "Urfa Switzerland Hospital".*

*Urfa, or Edessa or Ruha as is known in the history, had been an important centre for science, trade and religions for centuries in the past. However after the beginning of 19th century due to the economical and political weakness of Ottoman Empire, Urfa had been neglected in providing some basic needs like education and health care services. Especially the health care problems were paramount in the second half of 19th century. There were some traditional medicine practitioner and only one governmental hospital, 'Millet Hastanesi' in Urfa. In those times missionary activities were also very popular in Middle Eastern region. There were many American and European missionaries in Ottoman State who were providing educational and health care services as well as some religious activities. Although these services cost Ottoman Empire to bring her end earlier, they also compensate her inability to provide some vital public services. In this study we will present the first private hospital in Urfa, 'Switzerland Hospital', which were initiated as a small clinic in 1897 and had turned to be an important centre. Our presentation will demonstrate the development of this private initiative and exhibit the tolerance and hospitality of Urfa citizens to the people who bring some good to them.*

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***Une oeuvre de minéralogie arabe dans sa version italienne "Fior di Pensiori sulle Pietro Preziose di Ahmed Teifascite" Par***

Notre communication se propose de présenter une version italienne de l'oeuvre scientifique en minéralogie "Azhar al-Afkar fi Jawahir al-Ahjar" (Fleurs des Pensées dans les secrets des pierres) du célèbre médecin arabe originaire de Tifash (Tipaza) ville Algérienne : Abu al-' Abbas Ahmad Ibn Yusuf b. Muhammad Al-Tifashi, médecin, juge et homme de lettres (XIII<sup>e</sup> siècle), véritable encyclopédie de son temps.

L'auteur de la version italienne intitulée "Fior Di Pensiori Sulle Pietro Preziose di Ahmed Teifascite" est l'orientaliste italien Antonio Raineri Biscia (manuscrit de la BIBLIOTECA E CASA CARDUCCI, Commune de Bologna (Italie), 1<sup>re</sup> Edition Bologna, 1906). Il est à noter qu'une édition complète a été donnée en 1818 (Firenze).

Dans cette oeuvre de minéralogie arabe qui fut commentée et traduite par des auteurs anciens et contemporains rapporte les propriétés des métaux et pierres précieuses, leurs valeurs, les gisements et origines, leurs emplois dans la médecine à usage curatif.

Nous remercions vivement le conservateur et son personnel de la Bibliothèque de Carducci pour leur assistance ainsi qu'à mon accompagnateur Mr. GHEZZAZ Mohamed durant notre séjour à BOLOGNA en 2003.

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***Pietro Tullio of the Tullio phenomenon.***

*This Italian author has his name attached to the well known neuro-otological sign of Tullio phenomenon.*

*Tullio described the phenomenon of nystagmus in response to a loud sound (1) He performed animal experiments by creating a third window in the vestibular apparatus of pigeons and then subjecting them to loud noise.*

*There is a resurgence in the interest of this phenomenon owing to the description of superior semicircular dehiscence syndrome (2) although there are other clinical conditions that do produce this phenomenon .*

*This presentation will discuss Tullio's work.*

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*Ear tablets in ancient Egypt.*

*In the Ancient Egyptian medical literature there are many references to Ear diseases and their treatments. Depictions of ears are common on slabs and engravings from that epoch. The significance of these illustrations will be presented and discussed.*

*An interesting observation is the depiction and knowledge of the Ancient Egyptians of the incisura of the pinna, an important anatomical fact which is considered whilst carrying out operations on ears nowadays.*

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*A surprise in an ancient jar.*

*A canopic jar dating from 1400BC (Middle Kingdom, Ancient Egypt ) was discovered accidentally in the Department of Archaeology of University of Birmingham in 2002. This jar had laid un-noticed on the shelf for a good many years. The jar belonged to an ancient Egyptian called Puia. The jar was scanned using IGE Lightspeed Pro multi-slice CT Scanner. 3-D and multiplanar views were obtained. The scan confirmed the presence of a radio-opaque matter within the jar. Multiple small biopsies of this material were obtained using specialised biopsy needles. Histology confirmed tissue consistent with intestine. This relatively non-invasive technique allowed the correct identification without resorting to destruction of the jar or its contents. In this day and age it is very rare to find a canopic jar with its original contents.*

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### *Perche Storia Della Medicina?*

*Il motivo della mia esposizione è di invitare le diverse Istituzioni docenti a inserire nei loro programmi di studio l'opera delle grandi personalità che hanno realizzato ricerche nel campo della medicina.*

*Dette personalità hanno determinato l'evoluzione del pensiero medico dalle prime manifestazioni dell'uomo primitivo fino all'attuale situazione della medicina.*

*Bisogna assolutamente far notare l'evoluzione di una comunità che applica le norme mediche, di fonte a un'altra società che per diversi motivi non le ha messe in pratica.*

*Come si rende omaggio con il ricordo a coloro che hanno dato la libertà e a chi ha legislato, così dobbiamo ricordare e conoscere coloro che in base alle ricerche hanno portato alla conoscenza dell'uomo e creato delle norme per proteggere la sua vita e la sua salute. Tutto ciò costituisce il più ricco patrimonio ricevuto per il bene dell'umanità.*

### *Anziano fragile, elder abuse, morte cognitiva, eutanasia larvata: Elementi per una storia della medicina contemporanea.*

*La medicina paternalista fondata sull'autorità del medico si riconnetteva ad un rapporto di solidarietà e aiuto reciproco, base di una società ancora con caratteristiche rurali ma avviata, dagli anni '50 ad una intensa espansione industriale con effetto centrifugo e disgregante del nucleo familiare tradizionale.*

*La fusione del concetto tra vita attiva, cioè utile, e lavoro è fonte di disturbi legati all'età anziana, la cessazione dal lavoro è vista come parassitismo sociale. L'aumento della vita media ha provocato, negli ultimi trent'anni, un dibattito tra vita utile ed economicità delle cure da parte degli Stati Nazionali, che induce la medicina contemporanea ad attuare una sorta di eutanasia larvata sociale. Pertanto la storia della medicina contemporanea deve occuparsi analiticamente del dilemma del rapporto/conflicto tra salute individuale e spesa pubblica.*

*Il Puccini definisce l'eutanasia utilitaria: eliminazione indolore degli individui anziani, invalidi, inutili, di peso per quelle società in precarie condizioni di sopravvivenza e di eccedenza numerica rispetto ai bisogni. La sottrazione su base economica di cure, produce una patologia da omissione, da abbandono, da maltrattamento omissivo, sull'anziano fragile: il cosiddetto elder abuse, abuso dei diritti della persona, dei diritti umani con indifferenza sociale e medica. La demenza legata all'età o alle terapie è definita dagli autori, per dirla con Heidegger, morte cognitiva: una morte nell'essere cioè nella individualità e nell'esserci cioè nel sistema delle relazioni umane e sociali.*

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*Sulkhan Saba Orbeliani's voyage in Italy in the mirror of the history of medicine.*

Famous Georgian writer, diplomat, enlightener, political figure, Sulkhan Saba Orbeliani's activities are the subject of research and interest from the side of the medical historians. During his voyage in Europe and especially in Italy, Sulkhan saba paid much attention to the development of medicine. In his writings Sulkhan Saba presents many of the subjects, which cannot be found in medical sources of the mentioned period. His works give us the impression of the medical level, its separate branches and medic-biological concepts of the 18th century. During Saba's voyage in Italy, he visited Niza, Monaco, Genua, Livorno, Rome, Florence, Piza, Sicily, Malta and other cities of Italy. He expressed his impressions in famous works "Voyage in Europe". It is an interesting piece of literary writing, given in a memoir-diary form, reflecting Italian reality. There are many documentary facts and events, which surprise us with authenticity, precision, and laconic brevity. During his stay in Italy, Sulkhan Saba gave much significance to the study of organization of medical practice. In his memoirs he did not often depict the places, he had already visited, but this does not concern medical institutions and medical practice, which he described in a detailed manner. Sulkhan Saba pointed out that he did all it for the state interest of Georgia, in order to share the obtained results of his observation with the Georgian people. Saba paid visits to hospitals, shelters, zoological and anatomic museums. He observed the nature of Italy especially plants and compared them with the medicinal plants of Georgia.

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*New aspects of the Balkan co-operation in the field of history of medicine.*

The new perspectives for extension of scientific co-operation between Balkan countries are arisen. One of the first events in this direction is the First Balkan Congress in History of Medicine (Ohrid, Macedonia, October 2003). The second Balkan Congress will be organized in Varna, Bulgaria in 2005. The Bulgarian Society of History in Medicine proposes variety of initiatives for improvement of the international co-operation: creation a new book (the priorities and principals were agreed during the Ohrid's Congress); organization of scientific-educational expeditions, publishing a bulletin, organizing a Balkan's confederation in History of Medicine. The Bulgarian scientist in History of Medicine hope that the confederation will facilitates the scientific co-operation and relationships between the scientists from Balkan countries and ISHM.

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***Treatment of trachoma in Palestine during  
the british mandate.***

*Trachoma, an infective eye disease characterised by keratitis, corneal ulceration and scarring, has been a major scourge in the countries of the Middle East for centuries posing a formidable challenge for health care providers. As a principal cause of severe sight loss or even blindness, it was identified as a significant health problem in Palestine even before the commencement of British Mandate. Indeed, trachoma was seen in many countries as an illness fully justifying the bold language describing its management as a 'war'. This paper draws on contemporary sources and documents, in particular those of the Mandate Government and the Hadassah Medical Organisation, over the thirty years from 1918 building up an account of the identification of the disease and the health strategies designed to reduce its prevalence in the population. Considerable effort was put into the prevention of the disease in school children and the provision of diagnostic and treatment in the school system is considered. By 1930 more money was being devoted to the campaign against trachoma than to school hygiene or to tuberculosis. Detailed analysis of trachoma's management and careful provision of medical services enable an assessment of the success of the strategy. Comparisons are drawn with other countries where the condition was endemic and the health policy of the Yishuv, Jewish community, is examined as it made real progress in containing and eventually reducing very considerably the scale of the problem. By the end of the British Mandate there was considerable progress, especially through the activities of the medical and educational bodies.*

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***Un Uovo Orfico-Pitagorico In Magna  
Graecia (Omaggio A J.C. Carter)***

*Storia di un reperto*

*Nell'estate del 1986, nel corso degli scavi archeologici realizzati dal prof. Carter in collaborazione con la Soprintendenza Archeologica della Basilicata, fu rinvenuto in località agro di Pisticci, presso Metaponto, un corredo funerario di eccezionale importanza, contenente tra l'altro una microscultura a forma di guscio d'uovo sbrecciato da cui affiora un busto di donna, interpretata dagli studiosi, a cominciare dall'editore del reperto, in riferimento alla nascita di Elena. Dalla dettagliata descrizione fornita dal prof. Bottini di tale corredo tombale apprendiamo che il monumento era composto dai seguenti quattro oggetti:*

*a) un vaso in alabastro (alabastron) dell'altezza di circa 30 cm., analogo ad altri esemplari rinvenuti in area metapontina e risalenti alla seconda metà del V sec. a. C.;*

*b) una pisside (pyxis) cilindrica in marmo, di gran pregio, appartenente a un ristretto gruppo di oggetti analoghi, diffusi in Grecia e in Italia a partire dal 2° quarto del V sec. a. C.;*

*c) un pendaglio antropomorfo a doppia immagine, in osso, raffigurante una figura maschile nuda, in piedi, con le braccia distese lungo i fianchi, e una figura femminile anch'essa eretta, ricoperta da un panneggio. L'oggetto, per il quale non esistono precisi termini di paragone, era certamente un amuleto, ma non è da escludere che la duplicità sessuale dell'immagine richiami l'analoga caratteristica di Phanes, la divinità orfica primordiale androgina;*

*d) una microscultura in calcare biancastro, alta circa 6 cm., costituita da un uovo a base piana (il che gli consente di restare in piedi).*

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***Normality: From philosophy to statistics  
and laboratory values.***

*'Normality' characterises in medicine any possible qualitative or quantitative situation whose absence implies an illness or a state of abnormality. The illness concept was first a philosophical one. But the use of mathematics in the study of biological events, which began with Galton (1822-1911) and with Pearson (1857-1936), changed the frame of reference. In the second part of the 19th century mathematics was used to study the distribution of some biological characteristics in the evolution of the species. Around 1900, statistics became the basis for the study of the diffusion of the illnesses. Half a century later statistics made the possible transition from the description of single cases to groups of cases.*

*→ Even more important is the concept of 'normality' in laboratory medicine. In this field the search for the 'perfect norm' was, and possibly still is, under way. The widespread use of statistics in the laboratory has allowed the definition in a certain sense of a 'new' normality. This is the reason why the term 'reference value' has been introduced. However, even the introduction of this new term has merely shifted the problem, and not resolved it. It is interesting that the most popular medical database, namely MEDLINE, only introduced the key word 'Reference Value' in its Thesaurus or MeSH (Medical Subject Heading) in 1980. During the last twenty years the 95% reference interval has remained a reference paradox, and the introduction of the many calculations of the so called cut-off values has not put the final word to the 'normality problem'.*

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***An updated history of the concept of  
placebo.***

*In ancient ecclesiastic tradition the term "Placebo" indicated the promise to please the Lord in medieval prayer. The expression "Placebo Domini" ("I will please the Lord") constituted the beginning of a famous passage of a V century A.D. translation of the Bible, the so-called "Vulgata". In the second half of the XVIII century the word Placebo (P) became an integral part of medical-pharmacological vocabulary, and in fact Quincy's Lexicon (1787) defined it as a remedy used more to please than to heal persons. In 1955 HK Beecher published in the JAMA a paper, "The Powerful Placebo", in which he concluded that it was evident that Ps had a high degree of therapeutic effectiveness. In the second half of the XX century the diffusion of randomised controlled clinical trials supported the use of P as the reference against which tested therapies were to be compared, and P became an integral part of clinical experimentation. Contrary to previously reported data, recent evidence and a rapid review by us (analysing clinical trials in which subjects have been randomly allocated to either P or no treatment) point to the fact that, overall, placebos do not have major clinical effects. In particular, our evidence report shows that, when compared to no treatment, P has no significant effect on either subjective or objective binary outcomes. Our historical overview therefore sheds light on the current concept of P, putting into perspective its alleged "power", and our methodological review of recent literature, conducted with an evidence-based approach, confirms the limits of what it means "to please patients".*

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***Medical doctors and social revolutions in  
the XX century.***

*During the XX century more than a hundred of medical doctors were engaged in political activities reaching the highest executive posts in their countries. A handful of them adopted revolutionary programmes and were committed in the destruction of bourgeois society, establishing populist, nationalist or socialist states. This paper is an account of the role of some outstanding medical revolutionary figures around the world in shaping the destiny of their countries.*

*➤ At the beginning of the century, the leading revolutionary role was played by Dr. Sun Yat Sen in China and marxists. Drs. Paul Lafargue in France and Alexander Bogdanov in Russia. In the middle of the century, Dr. Juan Negrin in Spain and Juscelino Kubitschek in Brasil reached republican socialists executive powers and were ousted by military coups. During the Cold War, Ernesto Guevara in Latinamerica and Agostino Neto in Angola expanded Marxism-Leninism revolution across the atlantic ocean. In Czechoslovaquia, Dr. Frantizek Kriegel failed to show a human face in the socialist Prague Spring, being dismantled by Soviets. A strong and enduring national dictatorships were established by Dr. Francois Duvalier in Haiti and Dr. Hasting Banda in Malawi. Finally in Chile, Dr Salvador Allende, promising a peaceful transition road to socialism, was overthrown by a military coup, symbolizing the beginning of the Fall of real socialisms before 1989... These medical revolutionary leaders, coming from different cultures and ideologies, showed common political characteristics.*

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***Patient approaches in scientific based  
medicine and humoral pathology.***

*The development of scientific medicine in the early 19th century is well analysed in different works from Michel Foucault to Roy Porter. The picture of medicine in this epoch is of a medicine based on autopsy and a location of illness to specific organs or places in the body. The development takes place in the clinic, with patients as cases for the generation of new medical knowledge.*

*This paper will show that the clinic is also a place for experimental approach, for analyses of patients with methods borrowed from natural sciences. We can see the early existence of laboratories, not as units, but through the use of experimental methods. However, the clinic is not a singular unity.*

*Parallel with modern scientific medicine, we find influential traces of humoral pathology in the same period, even at the most developed clinics. The scientific medicine and the early experiments play a role primarily in the diagnostic. In the aetiology and especially in the therapy, when no surgical method is found, humoral pathology is still the most dominant medical approach.*

*The parallel existence of a scientific medicine and a humoral pathology inside a medical clinic gives the possibility to analyse different patient approaches in these two types of medicine. On the base of medical reports from a medical clinic at the national hospital in Norway around 1840, this paper will show the different interpretation schemes for illness at work in the modern scientific medicine and the fading but still working humoral pathology.*

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### ***Headache and osmophobia in the De Morbis Artificum Diatriba (1713)***

*In his main publication, De morbis artificum diatriba (1st edition 1700; 2nd and final, 1713), considering the possible causes of work-related headache Bernardino Ramazzini (Carpi 1633 – Padova 1714), the founder of modern occupational medicine, pays particular attention to the presence of irritating and toxic smells. It is noted by an example in chapter 12, dedicated to head pains that involve pharmacists who when, during the preparation of the rose infusions for the gold syrups, are forced to remain in an environment inundated by intense scents, under conditions that facilitate the appearance of headache episodes. Ramazzini suggests avoiding similar environments and to expose oneself to fresh air as much as possible. Also in chapter 15, dedicated to diseases that strike “producers of oil, leather, and craftsmen of other dirty trades,” the cause of headaches should have been researched in disturbing odors and inhaled fumes during work activities. As a confirmation, Ramazzini mentions that “those who read or write for a few hours with oil lamps using walnut oil, in an enclosed room, without air circulation, know how the smoke derived from walnut oil is quite deleterious to the head” and that these practices “do not often occur without bothersome headaches.” In these cases, headaches can be prevented by substituting tallow candles with either wax candles or with oil lamps that use olive oil; likewise headaches that occur with those who read often, can be prevented by avoiding lamps with oil from animal fat.*

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### ***Pasteur in Palestine: the politics of the laboratory.***

*In 1913, Dr. Leo Boehm, a young Zionist doctor who immigrated from Russia to Palestine, established the ‘Pasteur Institute for Health, Medicine and Biology in Palestine’. At the time Palestine was a backwash of the Ottoman Empire, and at the advent of the 20th century there was not one bacteriological laboratory in the country. Boehm, who ‘borrowed’ Pasteur’s name without the knowledge of the French laboratory, turned to other Zionist-imbued physicians, the most notable – Max Nordau, to find supporters for the idea of establishing a research laboratory in Palestine. Boehm’s rhetoric was in keeping with Zionist ideology that viewed scientific knowledge and technological advancement as an important avenue for realizing a Jewish utopian society in Palestine. Throughout the years that the laboratory operated on an independent basis, it operated under threat of closure. Internal tension between the laboratory and British Mandate institutions and between the laboratory and other Jewish medical institutions in Palestine – particularly Hadassah, affected its operation. The paper, based on primary sources found in the Zionist and the Israel State Archives, examines the social history of the Pasteur Institute in Palestine from the standpoint of its political and national identity context. Boehm’s laboratory was unique due to the role it was assigned in Zionist ideology and the laboratory evolution within the context of a national identity ‘in the process of becoming’ that develop its institutions against the backdrop of conflict both with the local both with the local Arab population and British authorities.*

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***Terapia e chirurgia nell'antica Roma:  
contenitori per farmaci da una domus d'età  
imperiale.***

*Nell'estate del 1989, durante alcuni lavori di riqualificazione urbana in una piazza del centro storico di Rimini, vennero alla luce in maniera del tutto fortunosa i resti di una domus romana del II secolo d.C., distrutta da un incendio verso la metà del III secolo. Il caso ha voluto che nell'ala dell'edificio successivamente sottoposta ad una lunga campagna di scavo – protrattasi per quasi un decennio – siano stati ritrovati un ricco corredo di strumenti chirurgici (oltre centocinquanta pezzi) e numerosi altri oggetti, tutti variamente connessi all'esercizio della medicina, alcuni in particolare (mortai, pestelli, contenitori in vetro ed in terracotta, resti di bilance) utilizzati nella preparazione e conservazione di medicinali. Ciò ha permesso di riconoscere l'identità dell'ultimo proprietario della domus (battezzata forse impropriamente "del chirurgo") nonché la struttura architettonica di una taberna medica nelle stanze in cui – con sorprendente attinenza alle fonti letterarie – sono stati rinvenuti gli oggetti citati. In questa sede, oltre a ribadire l'importanza di un simile ritrovamento archeologico per lo studio della storia della medicina nell'antica Roma, si desiderano illustrare i recipienti (in terracotta ed in vetro) destinati a contenere sostanze medicinali. La loro presenza non deve stupire: sebbene il vero ruolo professionale del dominus sia ancora controverso, occorre ricordare che nell'antica Roma la maggior parte dei medici praticava contemporaneamente le tre branche della medicina (prescrizioni dietetiche, farmaci e chirurgia) e che anche i medici che esercitavano esclusivamente la chirurgia.*

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***Pierre-Joseph Desault (1738-1785) a  
forerunner of modern medical teaching and  
a founder of nephrology.***

*A very young member of the College of Surgeon and of the Royal Academy of Surgery he was nominated the first Professor of Surgery in a French University. Surgeon in chief at lat Hôtel-Dieu he revolutioned the teaching of anatomy by referring to 7 planes: anterior, posterior, superior, inferior, left lateral, right lateral, median. In this way he was able to localize the various organs and to relate them to their functional mechanics, pathology and surgical anatomy thus developing topographic anatomy as a discipline. Following his busy working schedule students participated directly in the activity of the hospital and received training "based on facts and taught from nature". He had some 600 students yearly, many from abroad. Students were captured, "they felt like participants in his teaching". Like Cotugno in Italy he was able to move the university into the hospital. Students learned by doing. In fact he did not write papers buit his associates (Bichat, Cassius, Chopart) wrote on his name. There are few scientists who have achieved such a reputation and written so few papers. The reasons are to be found in his prestigious position at Hôtel-Dieu, the huge number of fellow and the total devotion to the hospital and to the fellows. He opened the field of Nephrology separating diseases regarding urine formation from those regarding urine excretion. Described anuria from dehydration, and polyuria in diabetic patients as well as in patients with athrofic kidneys as it emerges from the "Traité des Maladies des voies urinaires" written by Bichat.*

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**Marcello Malpighi e Giovanni Girolamo Sbaraglia: l'affermarsi del metodo sperimentale alle origini del moderno.**

*La comunicazione si articola in due momenti. In una prima fase, si ripercorre la controversia avvenuta fra Sbaraglia e Malpighi: entrambi medici e professori all'Università di Bologna, si scontrarono a proposito del methodus medendi da adottare. Sbaraglia – con la sua dissertazione De recentiorum medicorum studio (1689) – si proclamò sostenitore dell'antica scuola empirica, che rifiutava le speculazioni sulla malattia, in favore di un approccio esclusivamente basato sull'osservazione. Malpighi, d'altro canto, propose, nella Risposta allo Sbaraglia (1697, postuma), una metodologia di stampo galileiano, ovvero la compresenza di reiterate osservazioni e formulazione di ipotesi da verificare tramite l'esperimento: il suo scopo era l'instaurazione di un rapporto di stretta interdipendenza fra prassi medica e studio anatomico. Nella seconda parte della comunicazione, ci si sofferma sullo svolgersi dell'argomentazione malpighiana ed il suo sapiente uso della retorica in ambito scientifico. Seguendo i consigli rivoltigli in numerose lettere da Giovanni Alfonso Borelli, Malpighi confutò le teorie di Sbaraglia senza dimenticare l'“arte dello scrittore”, ricorrendo in particolar modo alla tecnica della citazione, alla deminutio e all'ironia socratica.*

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**The conception of death in prehispanic Mexico.**

*In mexican XVI th century literature there are multiple indications and entries expressing the views maintained by prehispanic mexicans about death. They separated different forms to die, for example the sacrifice after being made prisoner in war, which garantize the participation in the cosmic life accompaniing the sun; the death in childbirth, with identical cosmic implications, excepting the women will go with the descending sun; the intervention of some gods, like Tlaloc, the rain god, by means of some illnesses, i.e. hydropsy, thiunderbult fulmination or being drowned; Ehécatl, the Wind god, intervention, with rheumatoic illnesses and cyclonic wind trauma. In the text we describe these different types of death and its significance to prehispanic mind.*

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### *History of occupational health and sports medicine in the Philippines.*

Occupational health is defined as the promotion of the highest level of health among workers, protection of workers against any hazard which may arise out of their work or the conditions in which it is carried on, and contribution towards the worker's physical and mental adjustment, particularly by the adaptation of the work to workers and their assignment to jobs for which they are suited. The history of occupational health dates back one hundred years ago. This concept developed from the practical needs arising from industrialization. In the country it started only in 1903 where labour requirements stipulated the employment of physicians in industries to provide medical treatment to sick and injured workers. In 1923-1932, the Section of Industrial Hygiene was established under the then Bureau of Health. This was followed by the implementation of the Workers' Compensation Act No. 3428 and the Emergency Dental and Medical Service Act NO. 1054. After World War II, the Philippine Association of Occupational Medicine (now PCOM) was formed. In 1950, the Joint ILO-WHO Committee on Industrial Hygiene issued its first international definition of occupational health. In the same decade, the New Philippine Labor Code embodying the basic law on occupational health and safety was enacted. This was followed in 1978 by the promulgation of the Occupational Safety and Health Standard. In 1980, the World Health Assembly Resolution WHA 33.33 stressed the need for "new perspective integrating occupational health in the primary health care of underserved working population, particularly the developing countries This was in the WHO Eight General Program of Work covering 1990 to 1995.

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### *The limits on the utilization of the scientific method in experimental medicine.*

A view over the history should not be limited to the search of the simple happenings, somewhat motivated by the curiosity. Our knowledge of the past must also permit our understanding on the present, and mainly help us to build bridges over the future. Concerning to this are the word of the French philosopher Blaise Pascal: "we are only dwarfs, but dwarfs standing on the shoulders of giants", therefore we can see further than they did. We are living in stimulating times for medicine, from a technical point of view never before so many great discoveries were done in such a small period of time. However, medicine is not a science but an art, the object is also the subject, it is the person who asks for the meaning and the sense of her disease. From this point of view, it matters to understand the paths carried over by the medicine across the years, the way of dealing with the duplicity of the patient, as a physical and a chemical organism, but also mostly as a person. This, in order to anticipate future solutions for the contemporary medicine new ethical defies, allowing us to build a XXI century medicine that can be effectively at the service of the mankind.

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***La medicina legale in Puglia.***

*Gli Autori ripercorrono la storia che ha contrassegnato la nascita e lo sviluppo della medicina legale in Puglia, ripercorrendone le tappe parallelamente alle alterne vicissitudini che hanno caratterizzato l'istituzione e la crescita dell'Università degli Studi di Bari: dalle prime scuole accademiche dei primi del '700, all'abolizione delle scuole Universitarie del meridione nel 1861, alla fondazione in Bari, nel 1924, della Regia Università Adriatica "Benito Mussolini". Gli Autori si soffermano, quindi, sulla storia dell'Istituto di Medicina legale di Bari e sulla capacità di aggiornamento della disciplina alle esigenze del territorio, rammentando gli illustri personaggi che ne hanno qualificato la crescita.*

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***Study of young persons attitudes towards charity in Bulgaria - Historical roots and current situation.***

*Study of young persons attitudes towards charity in Bulgaria – historical roots and current situation*

*The current social relations are going in one dynamic time. The main tendencies for globalisation of the society dispose active exchange of moral values and social practices. In this connection the charity are regarded as a complex of conscious values and social activity raised in the modern society but is based on Bulgarian folk tradition. According to the specific situation in the transition period, the issue for the study attitudes for charity in Bulgaria in young people becomes actual.*

*There is a study in 122 people in two age group (82 girls and boys, age 16-17 and 40 students ages 20-21).*

*The results supported hypothesis for the existence for charity in young people, as well as positive tendencies for the development.*

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*The first clues on statistical analysis in  
medicine from Galen's writings.*

*Until the genesis and the application of statistical methods, the treatment of diseases was based on the therapist's empirical observations or metaphysical beliefs. Early signs of a primitive "statistical" analysis of medical observations emerge during the 1st c. A.D. in Galen's writings. Three basic statistical principles are introduced in Galen's books:*

- 1)the value of the sample size,*
- 2)the importance of the sample representativity and*
- 3)the need for reproducibility of an experiment's result. Regarding the first notion, Galen reports: "What has been seen but once, that is not scientific, just as the single grain of wheat is not a perfect heap; but if it is a thing that is seen many times in the same way, then I call it scientific". This observation indicates that the greater the sample the more reliable the outcome of a trial. Regarding the second notion, Galen supports: "So this is what we assume for the men of arts, not expecting to see every statue that Pheidius and Polykleitus have made, but, from the ones we have seen, from them we have expectations about the other [statues]". As for the third notion, Galen points out the significance of the reproducibility of the experiment's result in order to arrive at a reliable scientific conclusion. Characteristically, after the description of an experiment, Galen states: "And this must be shown by anyone [that follows the same experimental method] after I and my pupils have died". From the aforementioned, it is obvious that Galen was a pioneer in capturing the basic principles of statistics which contribute enormously to modern medicine.*

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*Ricerca scientifica e consuetudine sociale:  
Le verminosi attraverso i consulti medici  
dei secoli XV-XVIII.*

*Fino alle scoperte microbiologiche di Francesco Redi e di Lazzaro Spallanzani, il termine 'parassita' è stato a lungo confuso con quello di 'verme' (quest'ultimo a sua volta, spesso comprensivo anche degli ectoparassiti) ritenuto frutto di una generazione spontanea prodotta dai corrotti umori conseguenti alla malattia. Una concezione che graverà per molti secoli sia sull'interpretazione eziologica di molte infezioni intestinali, sia sul rapporto che la società – e soprattutto certi ceti sociali - intesserà con i 'vermi', ovvero, in particolare, con gli ossiuri, gli ascaridi, le tenie. Nella Firenze delle sperimentazioni scientifiche di Corte e dei progressi delle discipline mediche le verminosi saranno vissute sotto un duplice aspetto: da una parte, le descrizioni desumibili dagli studi, dai consulti medici e dalle anatomie; dall'altra, il fenomeno endemico percepito dalla società attraverso i termini generici di 'bachi', 'mal di pondi', 'uscito'. L'apporto della presente comunicazione vuole evidenziare una patologia che senza mai assurgere ad evento collettivo, ha minato comunque la salute dell'individuo, specialmente di quelle frange sociali più indigenti (e, all'interno di queste, alcune categorie professionali più di altre) e segnatamente i minori.*

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**Applications de la méthode graphique de E. J. Marey à la neurophysiologie et à la clinique: C. E. François-Franck e J.-M.**

*E.J. Marey, (1830-1904), autorité incontestée, dans la physiologie du XIX siècle en France, a perfectionné et conduit à l'usage la méthode graphique. Avec ses tambours à levier il a permis d'écrire le temps et l'espace, de figer le mouvement des organes, des liquides organiques, des secousses musculaires. L'analyse des mouvements permettait de voir – et mesurer avec la règle et le compas – les caractères insaisissables aux sens humaines. Dans ce travail on va illustrer deux applications de la méthode réalisées par deux autres grands médecins: C.E. François-Franck, qui fut le successeur de Marey au Collège de France à la chaire d'histoire naturelle des corps organisés et J.-M. Charcot, le père de la neuropathologie. Le premier, dans son ouvrage sur les fonctions motrices du cerveau, (1887), va montrer le retard de la réponse musculaire suivant qu'on excite la zone motrice ou la substance blanche sous-jacente, reconnaissant dans ce résultat l'un des thèses principales en faveur de l'excitabilité propre de l'écorce cérébrale. Charcot, par contre, va utiliser un double appareil de Marey pour démasquer la fausse catalepsie d'un simulateur de la vraie catalepsie produite par hypnotisation chez certaines hystériques. Comme un moderne lie detector, les tracés du tambour fixé au bras du sujet et d'un pneumographe vont montrer la différence entre la cataleptique et le simulateur. Il s'agit là d'une démonstration de la manière d'accepter les méthodes d'exploration physiologique proposées par Marey, qui va améliorer le diagnostic différentiel et la recherche en médecine.*

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**De Victus Ratione di G. Capivaccio.**

*Con tale termine il Capivaccio intende la dieta, o la materia dietetica, riferendosi alle "res non naturales", come l'aria, ma in special modo agli alimenti e alle bevande e all'uso di questi, in rapporto alle proprie qualità, nelle "dyscrasie umorali con o senza materia". Riguardo alla quantità afferma che l'esagerata abbondanza dei cibi è nemica dello stomaco; e che il corpo del ghiottone non si accresce in questo caso, poiché il cibo, più abbondante del richiesto, non può essere digerito. Riguardo alla qualità, e per prima quella recondita, Avicenna dice che bisogna evitare gli alimenti che sono sgraditi, dal momento che arrecano danno allo stomaco e si oppongono all'analogia dello stesso (con la qualità). Riguardo alla qualità manifesta egli afferma che gli alimenti non astringenti (styptica) nuocciono allo stomaco. Gli A.a. interpretano le sezioni dell'opera: *Diaeta in dyscrasia sine materia; Dyscrasia composita; Dyscrasia cum materia.**

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***Portuguese medicine on board and in ports,  
in the discoveries time.***

*By the end of the Middle Age and the beginning of Renaissance, all Europe suffered intensive changes on cultural, social and political order. Some territorial borders were established, social classes were defined, the marks were set for a remarkable development of culture and knowledge.*

*Portugal, rising from a dynastic crisis, reasserts as an independent country, already with two and a half centuries of history. Once removed the pretensions of Castile, the Portuguese could definitively turn to the ocean, and by the Discoveries open new horizons to Europe, giving "new worlds to the world".*

*Very important for the success and contributions of the Portuguese Maritime Epopee were the health care and the medicine practised on board of the caravels, and also the knowledge of the European Medicine carried to the visited people. Several small hospitals were founded all over the African and Asian coasts, especially on the commercial ports, to support the navy crew and the commercial and colonial people, but also to attract the locals. Those hospitals could be considered a starting point for the Medicine of Ports.*

*Those aspects concerning the History of Medicine, will be analysed, in a period from the early fourteens to the end of XVI century. It was a period full of new contributions and cultural exchanges, in the botanical and therapeutic areas and in the discovery and reports of new diseases.*

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***Biostatistics, an help to evolutionism and  
heredity theories.***

*Jean-Baptiste Lamarck (1744-1829) and later Charles Darwin (1809-1882) provided the foundations to evolutionism and natural selection. Gregor Mendel (1822-1884) initiate the research on heredity, followed by Karl Correns (1894-1933), Hugo de Vries (1848-1935) and Erich von Tschermak-Seysenegg (1871-1962), on they way to genetics.*

*Francis Galton (1822-1911) and Karl Pearson (1857-1936), "biometricals", applied correlation and the regression methods to support the natural selection theory and contributed to the debate of heredity and evolutionism. Finally, Ronald Fisher (1890-1962) used biostatistics to bridge both theories.*

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***Rules, staff and institutions for the ports  
and maritime sanity, in Portugal.***

*The fight against epidemics in Portugal begun with the beginning of the nationality (12th century) and was increased during the time of the Discoveries (15th and 16th centuries), by some sanitary rules for boats and seaports.*

*The development of the commercial sea routs were one of the most important ways to spread pestilences across different countries, and imposed the creation of staffs, institutions and rules related to Ports and Maritime Sanity. The first specific Portuguese legislation on the subject was stated in 1695. Meanwhile houses for pestilence and quarantine were built, directly connected with the health system and the seacoast.*

*The International Sanitarian Conferences, which started in 1851, provided the last relevant influence to the Portuguese laws on the subject, before the foundation of the WHO (1948). The Directives for Maritime Sanitary (1897) and the Health Service and Public Beneficence Regulations (1901) temporally delimit this communication.*

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***Birthrate and death rate in the Danube  
province (according to Ottoman Census  
registers of the 1860 - 1870).***

*In 1839 reforms known as Tanzimat were initiated in all administrative structures of the Ottoman Empire. One of their outcomes was the establishment of the so-called Danube Province whose governor was Midhat Pasha. In the 1860s – 1870s he undertook a new census of the local population as well as registering of its immovable properties and taxes levied. The close study and analysis of the statistics they contain provides us with a new insight about the demographic, social, and economic situation in that province comprising what today is Northern Bulgaria as well as Northern Dobrudja (in today's Romania) and the region of Nish (in today's Serbia).*

*In those times only the male population in the Ottoman Empire was registered because of the fact that the men namely were tax-payers. However, the statistics provide opportunity to reveal the quite interesting situation concerning the then birthrate and death rate. The figures are noteworthy:  
Muslim birthrate: 34 - 44 births per thousand  
Christian birthrate: 41 - 48 births per thousand  
Muslim mortality: 30 - 37 deaths per thousand  
Christian mortality: 16-17 deaths per thousand  
To answer the question why the Christian birthrate was higher than the Muslim one, and Christian mortality lower than Muslim one respectively, one would take a close look at the registers of the real estates and their incomes, as well as the registers of the livestock in the province. Namely here the situation is rather interesting. According to the data explored the Muslim population was poorer than the Christian counterpart, except for very thin Muslim elite. In fact, prior to formation.*

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***Les signatures des médecins et des pharmaciens qui se trouvent sur les ordonnances de l'Hôpital et de la pharmacie***

*Aujourd'hui le logement du directeur du Palais de Topkapi est la place ancienne de l'Hôpital et de la pharmacie d'Enderun, En 1978 pendant la restauration du palais de Topkapi on a trouvé un paquet contenant les anciennes ordonnances de cet hôpital et de cette pharmacie. Nous sommes convaincues que ces ordonnances sont les prescriptions écrites par les médecins de l'Hôpital d'Enderun au palais de Topkapi. Ces ordonnances trouvées étaient préparées et faites par les pharmaciens de cet hôpital à la pharmacie d'Enderun du Palais de Topkapi. La classification de ces ordonnances sont faites aux archives du Palais de Topkapi et elles sont conservées dans 104 enveloppes. Chaque enveloppe est numérotée et sur chaque enveloppe le nombre de prescriptions contenues est inscrit. Il existe 3087 ordonnances au total. La date de ces ordonnances est de 1867 'jusqu'à 1890. Les signatures des médecins sont clairement lisibles mais certaines ne sont pas lisibles à cause de l'usure. Dans le cadre de cette recherche, nous allons vous présenter les noms des médecins dont certains sont de célèbres médecins de cette époque. Et sur les ordonnances que nous avons examinées aux archives ottomanes, se trouvent les noms des pharmaciens ainsi que leurs signatures. Sur certaines ordonnances il existe les cachets des pharmacies qui sont les pharmacies illustres de cette période. Ces prescriptions que nous avons examinées sont écrites en français, en italien et en latin et sur certaines, nous avons constaté les indications écrites en turc et orthographiées à l'alphabet arabe et ces indications sont écrites à la façon de lire en phonétique française et en italienne.*

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***Riferimenti medici nei scritti di due Santi.***

*Lo scopo di questa indagine è di presentare alcuni riferimenti medici che ci sono nei scritti di due santi in epoche diverse. La materia per questa indagine era 1) Il calendario della Santa Perpetua della Cartagine nel 2° secolo A.D. circa e 2) Il Canticum di San Francesco d'Assisi del 12°-13° secolo A.D. Metodo era l'analisi critica del testo. I risultati di questa ricerca sono che 1) la Santa Perpetua si riferisce a) alla infiammazione della mammella (mastite), b) ad un trauma della faccia, c) alla gangrena della faccia e d) al termine «cicatrice» 2) S.Francesco si riferisce considerando l'aria atmosferica necessaria e sostegno della vita delle entità, cosa che è venuta dimostrata da Lavoisier nel 18° secolo con l'investigazione dell'ossigeno.*

*La conclusione è che ci sono riferimenti medici da S.Perpetua e S.Francesco nei quali si rifletta la conoscenza medica dell'epoca rispettiva.*

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*Historical references in greek medical literature about undersea diving medicine.*

*This work is addressed to present recent Medical Literature from Greek Physicians about the undersea Diving Medicine,*

*The material for this, was various proceedings from a work-shop in 1997 in Greece. The method was the critic analysis of them.*

*The results are that in these (works) there are reports about 1) the Medicine of Diving, 2) about the accidents from diving where in some studies the majority of the cases of clinical effects, was the decompression illness type, 3) about the long term health effects of diving in respiratory and central nervous system, 4) Also there is a work about the contraindications of the diving and 5) another work about the woman's participation in diving where is accentuated that there is not medical problem about it, 6) Finally there are works about the Units of Hyperbatic Oxygenation Therapy (HBOT) in Greece.*

*In conclusion the Greek Medical Literature has been enriched recently about the Medicine of Diving.*

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*The experiment as scientific method in Galen.*

*This work is addressed to present the application of the experiment from Galen as a demonstrating scientific method for the demonstrating of medical theories, suppositions and clinical observations in proportion to his abilities and besides his mistakes. The material of this study is various textbooks of History of Medicine and various essays of the Epistemology.*

*The method was the critic analysis of the text.*

*The results are that Galen 1) has provoked experimentally alterations of the brain in zoos in order to provide proof the difference between the alterations of the lobes of the brain, those alterations of the cerebellum and those of the brainstem. 2) He had demonstrated the muscular theory of the cardiac beat, removing the heart and separated it from all its neural connections. 3) Galen because of was knowing that arteries contain blood, he demonstrated by experiments the pulses of the arteries. 4) He had demonstrated experimentally that when the fifth cervical nerve was removed then was following paralysis of the muscles of the region of the shoulder. 5) Also he had demonstrated experimentally that when the laryngeal recurrent nerve was cutting off, the voice was disappearing. 6) Finally, Galen was the first who has legated the ureteres both simultaneously or everyone separately, in order to demonstrate their function. In conclusion, Cafen has applied the experiment, as a part of the scientific method and he has been called the first experimentalist and the founder of the Experimental Physiology.*

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***The roots of the athletic physiology  
according to medico-philosophers.***

*Physiology constitutes basic branch for every medical specialty as well as athletic medicine. The most significant medico-philosophers determine its roots and its principles. Hippocrates researches the physiology of the movements of the human body. On the other and the knowledge of geometry and the arithmology is very useful to sports medicine. Platon support that the movements of the human bodies follow mathematical rule. Aristoteles presents the automatic physiological operation of the organism, and the principles of mobilization and tranquility, in physics and physiology. Theophrastus attempts to connect the human movements to the chronometric and geometric dimension. Galen considers necessary the collaboration of sciences as medicine. The Byzantine physician Oribasius connects the movements of the human body with physiology and habits. Gregory of Nyssa, Aetius Amidius, Michael Psellus, Roger Bacon, René Descartes and Blaise Pascal notice similar observations and Giovanni Alfonso Borelli studied the movements of the animals. Conclusion: The roots of the athletic physiology are found in the ancient Greek and Byzantine period.*

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***Bioethical perennial principles of medico-  
philosophers.***

*The activation of the medical bioethics in our days, is without any doubt, a very important event which gives back a tremendous dissensions where biomedical research took place. Euthanasia, the cloning human beings, the transplantation of human organs, and the last cultivation of stem cells in order to achieve the correct growth of tissues and organs ready for transplantation, are some of the evolution fields of clinical and laboratory medicine. Principals in order the research to be supervised by rules which does not offend, the human personality, has been marked from the age of Protagoras philosophers until now. The bibliographical research reveals that all the people involved with this matter, though centuries, conclude to the protection of the human race from arbitrary actions, and to the harmonization of medical research and the human disciplines of freedom and humanism, wisdom, and honesty to divine and to respect of physical law. From the early start of the 5th century (Before Christ), human is in the center of interest, as personality, as citizen, as a patient. From the 3rd century B.C. until 2nd A.C century there is looseness in all these stuffs. After this period a very blooming period arises, due to the presence of the great fathers of the church and the great medico-philosophers until the middle age. After middle age we have a change of thoughts which ends with industrial revolution. All these years, are a proof, that the center of each research, is and remains, the human being, even with the wrong way. The human's respect presupposes the keeping of the unwritten laws of nature.*

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*Art, anatomy and medicine.*

*A mutual interest in anatomy by artists and physicians in the 16th century, albeit for differing motivation, led to collaborative efforts amongst them. Most notable of those is that of Vesalius (1514-1564) and Jan Stefan van Kalkar (1499-1550), a student of Titian (1488-1576), who illustrated the Fabrica. Less well known is that of Matteo Colombo (1516-1559), the immediate successor of Vesalius to the Chair of Anatomy and Surgery in Padua, and Michelangelo (1475-1664). Colombo's sole contribution to the literature, De Re Anatomica, was published in 1559 and became widely used as a textbook of anatomy for over a century, being translated into English in 1578 and German in 1609. Michelangelo, whom Colombo diagnosed and treated for kidney stones, had a lifelong interest in anatomy and aspired to publish a book on it for artists. Concerted efforts by Colombo to have his patient, Michelangelo, illustrate his book were unsuccessful. Had he succeeded the fame of Colombo and Vesalius and their place in the history of medicine may well have been reversed. Had Michelangelo collaborated or published his book on anatomy his contributions to anatomy may well have dimmed those of Leonardo (1452-1519). Michelangelo seems to have died from kidney failure due to obstructive nephropathy and appears to have incorporated the kidney in some of his frescoes.*

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*Evaluation of health ordinances related with extraordinary circumstances in Turkey.*

*Extraordinary circumstances may be of a natural origin . Because of extraordinary circumstances which have occurred in the last 20 years, more than 3 million people in the world have died, 1 billion people have suffered damage or physical damage is totalled at an immense amount. Turkey is a country which is exposed to great number of extraordinary catastrophic events. Since the beginning of this century just 2 out of the 25 earthquakes which have occurred in this country caused over 10.000 deaths. National and international rules providing guiding information to all physicians, nurses and other health personnel on how to act in cases of emergency conditions are a matter of questions. We evaluate our health ordinances ( covering entire volumes of laws, rules, regulations, etc. ) in respect to arrangements before and after extraordinary circumstances. As a result, there is not any section in our health ordinances related with extraordinary circumstances, expressing responsibilities and obligations of health care institutions and health workers clearly and wholly, but it has been observed that the issue has been mentioned in various sections of the ordinance partially. It would be beneficial on the part of health care institutions to prepare plans for unusual circumstances by taking into consideration current ordinances, daily developments and conditions of institutions and that in addition to the plans being kept updated the certainty of functionality in terms of training, material support, personnel support etc. should be also be determined on a regular base.*

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### *The role of medical museums in the education of medicine.*

*Medical museums are the institutionalized indicators of scientific interest and academic research spirit. Its foundations were laid upon the formation of scientific museums at the end of 19th century, and the medical sections were also incorporated in the science and war museums. Today, many medical museums such as hygiene, health, medicine technology, and medical history have been founded. The medical museums have always been built in hospitals and at university campuses. Medical museums have great national significance with an aim to teach the technological development of medical art in terms of presenting opportunities of funding and research to medical education. While the medical museums help the students witness the affluent historical background, it also provide cultural, artistic, and scientific resources in the vicinity besides education and research. Medical museums are important in the education of medicine in terms of providing access to physical, intellectual and museum opportunities. Physical access is important as the museum evaluation process incorporates visual perception. These museums are also important in terms of the interpretation of the medical collection with historical value. The collection includes numerous examples such as the tools, surgical instruments, anesthesia, dentistry, pharmaceutical tools, medicines, drug bottles, hearing aids, first aid tools used in hospitals. These museums provide us with information in plenty of areas such as fighting with epidemic diseases, nutrition, digestion, our sense organs, tooth and oral health, pregnancy process, etc....*

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### *Van Gogh's unkown illness and the Natural Medicines used to treat it.*

*The Dutch (painter) artist van Gogh lived between 1853 -1890 especially during his late life . He suffered from epilepsy. The reality behind his paintings was for most of the time very different. A large number of the letters. Van Gogh wrote to his brother Theo have been examined by medical experts of today.*

*As a result of these examinations his illness reminds one more of porphyry. Van Gogh was suffering from indigestion, loss of appetite, stomach pains and bilioussness. Could these symptoms point to manic depression or epilepsy?*

*Van Gogh talked in many of his letters to his brother about these changes in his body. These symptoms remind one more of porphyry, which is a physiological, genetically inherited disorder. His healthy problems consisted of day dreamings and hallucinations. In porhyry patients recurring stomach pains, vomitting, heavyness or paralysses in the limbs and psychological changes that remind one of hysiziria . The use of scrophulariaceae family (yüksükotu) and artemisia absinthium (pelinotu) which were used for the treatment of his paintings. It is quite significant when Van Gogh expresses in his own letters . If it was not for this mystery illness what could I have achieved. Van Gogh 's genius is not connected with the illness whether he was ill or not his vision of nature, his influence and the way . He found solutions reveal an innovative personality.*

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***A perspective to two articles of Prof. Dr. Besim Omer Akalin on health and sport.***

*Prof. Dr. Besim Ömer Dr. Akalın (1863-1940) is a famous Turkish physician. He was born in Istanbul in 1863. He graduated from the school of military medicine in Istanbul in 1885. He went to France for obstetrics speciality. Dr. Akalın became the director of obstetrics clinic and midwife school. After 1909, he continued to the same duty in Haydarpaşa medical school. He retired after 1933 University reform and opened the examining room. Dr. Besim Omer Pasha, who was the founder of modern obstetrics and pediatric in Turkey, wrote 61 books (14). Moreover, he helped the development of some societies on health. He was known as a popular author of health topics. Dr. Akalın also became the founder president of Turkish Society on History of Medicine (15). Moreover, he wrote encyclopedic books of 4 volumes called *Nevasali Afiyet* (It means Small or Fresh Articles about Health) with the date of 1922. His two articles on health and sport are present in the fourth volume of this book. One of them is called as *To Provide Health With Exercise*. In this article, Dr. Akalın explains some characteristics of muscles and their duties in the body. Moreover, this famous physician points out the importance of exercise. According to Akalın, exercises are divided into two groups: a- Natural exercises: Walking, Running, Swimming etc are natural exercises. b- Artificial exercises: These exercises are gymnastic methods. According to Dr. Akalın, all these exercises are useful for human health. The second article of Akalın on health and sport is called *Exercise and Health*. This article mentions the uses of exercise. Exercise and physical activity is beneficial for health.*

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***Condizioni sociosanitarie dell'infanzia a Cremona nell'Ottocento.***

*L'inizio secolo è caratterizzato, a Cremona come nel resto della Lombardia, da un pressoché totale disinteresse per le condizioni sociosanitarie dell'infanzia indigente. Le madri lavoratrici coatte, troppo precocemente interrompevano l'allattamento al seno ed abbandonavano i loro piccoli alla "ruota" dei Brefotrofi (nei quali il 60% di essi veniva a morte in pochi mesi) oppure li affidavano, nella migliore delle ipotesi solo nelle ore lavorative, a Baliatico od alle Sale di custodia lattanti. I bambini dai 3 ai 6 anni venivano regolarmente abbandonati a se stessi nelle strade per tutta la giornata, malamente vestiti e nutriti, con scarsissima igiene e privati di una qualsiasi istruzione. A ciò va aggiunto che era consuetudine pensare che curare i bambini nelle prime età della vita fosse inutile, per cui il ricorso al medico per le malattie infantili era cosa inusitata. Compiuto il 7° anno d'età i fanciulli entravano a far parte così precocemente del mondo del lavoro come garzoni di botteghe artigiane, ma addirittura come braccianti agricoli; le fanciulle, in particolare, lavoravano nelle numerose filande della città e provincia dall'alba al tramonto, per oltre 12 ore ... "macerando le mani nell'acqua e respirando aria viziata e fumosa, costrette in una sola posizione, scalze su pavimenti unidi per le amaffiature.." (Betri, 1981, 79-80). La TBC polmonare e le varie affezioni respiratorie, le malattie reumatiche e la rachitide predominavano e frequentemente portavano a morte tanti minori-lavoratori. Finalmente nel 1843, al Congresso medico di Milano, cui parteciparono anche i medici cremonesi Robolotti e Cerioli, venne presentato uno studio minuzioso sul lavoro minorile in campo manifatturiero.*

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*Description of Icterohemorrhagic fevers by Greek, French and Italian Doctors in the last quarter of the 19th century.*

We present 50 case-reports about patients suffering from fever, hematuria and jaundice. These were published in various journals housed currently in the "Old Medical Books' Library" of St. Andrew's Hospital in Patras and were written by several Greek, French and Italian doctors. The fever was high, sometimes remitting, always accompanied with chills, weakness and muscular pains and hematuria. Most Greek authors debated strongly on the role of quinine administration as the causing factor of hematuria. Renal involvement was described as parenchymatous nephritis with hematuria, oliguria or anuria. The autopsies performed to some of the patients revealed three different findings mainly localized in the cortical areas of the kidneys.

1. The collecting tubules were completely filled with pigmented materials.
2. The kidneys were destroyed by hemorrhagic infiltrations.
3. There were abscesses or ulcer lesions.

Jaundice was invariably described as "hematological" often accompanied by swelling and tenderness of the liver. A strong correlation had been found between the incidence of the disease and climatic conditions of the place of living of patients. It became obvious that swamp areas were a favorite environment for the outbreak of small epidemics. The same finding also stands nowadays in cases of infections causing jaundice and hemorrhagic symptoms, such as leptospirosis, yellow fever, Lassa, Dengue and Marburg viruses. An even more interesting observation is that a similar syndrome was referred 24 centuries ago by Hippocrates in his book "On Epidemics" when he described black urination.

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*Development in late Graeco-Roman medical ethics.*

Ludwig Edelstein believed that one could trace a gradual development in Graeco-Roman medical ethics during the Roman Imperial period. The spirit of pagan medical humanism reflected Stoic and Cynic popular philosophy and marked an advance over earlier formulations found in the deontological literature of Greek medicine. 'The morality of outward performance characteristic of the classical era,' writes Edelstein, 'was now supplemented by a morality of inner intention.' This paper will examine several statements of Greek medical ethics from the Roman Imperial period, including the *Professio medici* of Scribonius Largus, the second-century poem of Serapion on the duties of the physician, the late fourth-century *Progymnasma* 8 of Libanius, and two documents penned by the sixth-century writer Cassiodorus on the duties of the physician. The question that will be posed is the extent to which one can observe change or development in these various statements, particularly in terms of ideas of brotherhood and philanthropy.

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### *Les fondements de la société biologique de Paris (1849).*

*Pénétrés de l'idéologie positiviste du XIXe siècle et lassés du conservatisme du monde médical, considérant que les réformes universitaires du Premier Empire avaient eu des effets stérilisants en imposant aux études scientifiques « le modèle des humanités » en privilégiant la formation des enseignants au dépens de celle des chercheurs, ce qui donnait un caractère rhétorique à la science française, Robin, Rayet, Claude Bernard, Follin, Lebert, Brown-Sequard et Segond fondèrent la Société Biologique de Paris en juin 1849, estimant que le temps était venu de changer radicalement les méthodes et l'orientation des recherches en médecine. La physiologie et l'anatomie considérées indépendamment de toute idée d'application seront le socle de la compréhension des maladies. La recherche s'effectuera dans tous les domaines, avec tous les moyens disponibles ; recherche sur l'animal ; emploi de nouvelles méthodes d'investigation comme le courant électrique ; utilisation des procédés chimiques pour les dosages du sang et du liquide céphalo-rachidien. Les fondateurs proposent de rassembler les scientifiques venant de toutes les disciplines et d'agrèger autour d'un projet ambitieux, des hommes d'ambition pour le progrès des sciences et de la nation. Les moyens dont disposent les membres de la Société pour mener à bien ce projet grandiose, sont à trouver dans les trois procédés classiques de toute science d'observation : l'observation proprement dite, l'expérimentation et la comparaison.*

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### *Vladimir Pavlov's educational school of Otorhinolaryngology (Scientific-Metric analysis).*

*The purpose of the research is to determine and investigate the scientific-metric characteristics of Vladimir Pavlov's educational school. Methods employed – bibliographic, library and archival – at the stage of historical reconstruction; systematization and classification – on the empirical level; at the stage of theoretical analysis and generalization – analogy, comparison and basically, the scientific-metric method. The source materials surveyed comprise documentary materials, newspapers and magazines, bibliographic and bio-bibliographic editions. The object of the research is the personality and the work of Vladimir Pavlov, as well as, the work of the research and teaching team led by him. Time period under survey – from 1948, when Pavlov is appointed as an otorhinolaryngological illnesses assistant, until 1986, when he retires from active professional and creative career. Results and conclusions: 1. Vladimir Pavlov is an eminent Bulgarian otorhinolaryngologist, a founder and a leader of a school of otorhinolaryngology. 2. A basic characteristic feature of the school is its fundamentally educational function. 3. The scientific ideas elaborated by him and the original educational programmes he introduced in his clinical and teaching practices motivate a numerous team of teachers and specialists 4. The educational practices, methods and techniques of this leader and his numerous students and collaborators are remarkable for the innovative coupling of the subjective skill of the teacher and the technical challenges of modern presentation.*

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***Catalogo delle Opere Mediche a stampa  
della Biblioteca Comunale "A. Vergari" di  
Nardò (Lecce).***

*La biblioteca comunale di Nardò trae le sue lontane origini dalle raccolte librerie dei monasteri soppressi dopo la costituzione del Regno unitario e dai lasciti del medico Achille Vergari (Nardò, 8/4/1791 - Napoli, 11/2/1875), successivamente arricchita con altre donazioni ed acquisti, rappresentando un notevole contenitore culturale, oltre che un prezioso ed inesplorato giacimento per la storia della medicina.*

*Dei circa 23 mila volumi conservati almeno un quarto riguardano la medicina, con edizioni italiane e straniere comprese tra XVI e XIX secolo, che il filantropo e bibliofilo Vergari aveva raccolto ed acquistato con denaro proprio in tutto il corso della sua vita.*

*Fra tutte spiccano il De humani corporis fabrica di André Vésale (Venezia 1568), l' Opera Omnia di Adriaan van den Spiegel (Amsterdam 1645), il corpus delle edizioni cinquecentesche di Ippocrate, Galeno e Avicenna, di Aezio, Paolo d' Egina, Celso, Benivieni, Fracastoro, Adrien a Mynsicht, Sennert, le edizioni di Girolamo Mercuriale ed il suo De Arte gymnastica, il De Medicina Aegyptiorum di Prospero Alpino e numerosissime altre opere non facilmente reperibili.*

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***Educazione fisica e sport durante il  
ventennio fascista.***

*Il 2004 è stato dichiarato Anno della educazione attraverso lo sport e non a caso, le Olimpiadi avranno luogo ad Atene. In questa prospettiva, gli Autori, partendo dalla analisi del percorso formativo legato alla educazione fisica dagli anni della Legge Casati, propongono una rilettura delle problematiche legate allo sviluppo delle diverse discipline nel loro rapporto con la pratica sportiva. Il Ventennio fascista rappresenta un periodo estremamente importante da questo punto di vista, sia da un punto di vista tecnico, sia da un punto di vista delle strutture.*

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### *Medical studies of the Poles in exile during World War II.*

*The aggression of Nazi and Soviet soldiers in Poland in 1939 led to abolition of all the Faculties of Medicine in Polish Universities. The effect of their barbarian activity was exodus of numerous Poles to France, to newly constituted Polish Army (evacuated later to England) and to other places where Polish troops were organized. Taking into account the needs of the army as well as casualties in occupied Poland, Polish authorities in exile attempted to enable reactivating studies to the largest possible group of medicals, in order to qualify as doctors. Yet in 1940 the first Polish students, including medicals, appeared in Lebanon. In general during 1942-1952 fifty Poles studied in the Faculty of Medicine at both French Saint Joseph's University and American University in Beirut. Forty two of them qualified as doctors. In Switzerland students were recruited from Polish soldiers interned there. By the end of 1945 fifty seven Polish medicals started studies in Winterthur camp by Zurich and sixteen of them qualified as doctors, but some continued their studies after 1945. Finally about 20-50 Poles graduated as doctors in Zurich University. The great educational achievement was the formation of the Polish Faculty of Medicine at the University of Edinburgh in 1941. During its activity 336 students studied there and 227 qualified as doctors. Immediately after the end of the war many rescued and demobilized Poles strived to be admitted to medical faculties at various European universities. The most abundant groups flowed to Edinburgh (217 candidates registered in Sep 1945) and to Bologna (227 Poles listed in the University in 1946).*

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### *A brief history of "Health Technology Assessment".*

*It is only during the XX century that, in the history of health care, quality standards are defined precisely, the health service is structured systematically and the need for a new relationship between physician and patient, and between patient and institution is developed. Health Technology Assessment originates and develops in such a scenario. Health Technology Assessment (HTA) is defined as the set of multidisciplinary scientific activities targeted to evaluate the efficacy, effectiveness, safety, costs and impact on the quality of life of the technologies used for health care. A brief history of HTA identifies several evolutive steps referable to different decades of the XX century. In the 1930s early safety regulations in health organizations are published in the United States and in Europe. In the 1950s the first structured efficacy concerns arise, prompting, the 1980s, the planning of the first large efficacy studies, i.e. controlled clinical trials. In the 1980s the creation of formal, and usually governmental HTA programs takes place, while in the 1990s non-governmental HTA develops.*

*In this same period, Evidence Based Medicine gives a further stimulus to every currently interpreted quality systems and to HTA projects as well, also stressing the need to evaluate systematically every health care procedure implemented, with particular reference to technological ones. Still today, at the beginning of the third millennium, more than 80% of all procedures have not yet been formally analysed, and this awareness should represent a major stimulus to current and future HTA activities.*

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***Pulsilogium to pulse watch - 17th century link between Padua and Lichfield (Staffordshire, England).***

*Sir John Floyer (1649-1734) was the first person to time the pulse by means of a watch with a seconds hand. By the last quarter of the 17th century watchmakers in England had gained a position of pre-eminence, allowing Floyer to take advantage of the improved technology to extend the first observations of Galileo (1564-1642) on the pendulum and pulse-timing which were developed and applied by Sanctorius (1561-1636). The means by which Floyer became acquainted with the pioneering observations on measurement in clinical medicine in Padua, has recently been discovered. Dr Anthony Hewett (c1603-1684), who received his medical education at the universities of Cambridge and Padua, was recently identified as the physician who preceded Floyer in practice in Lichfield. Among the books which Hewett brought back to England from Padua were two by Sanctorius, one of which was Commentaria in Primam Fen primi libri Canonis Avicennae with illustrations of his measuring devices and descriptions of their application. Floyer acquired this book from his predecessor and it was among some twenty others once owned by Hewett which Floyer acquired and, in due course, left together with his own working collection, to the library of The Queen's College in Oxford.*

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***Russian Surgeon Vladimir Petrovich Demikhov – The pioneer of experimental Bypass Coronary Surgery.***

*Well known that pioneers of bypass coronary surgery were R. Goetz, D. Sabiston, M. DeBakey and R. Favaloro from USA and V. I. Kolesov from USSR. They were the first surgeons all over the world who in 1960, 1962, 1964 and 1967 have made direct operations on coronary arteries in clinic. We also know A. Carrel from New York, G. Murrey and A. Vineberg from Toronto, who research the possibility to carry out some of these operations in experiments.*

*But ones haven't knew much that the first operation of left mammary–left coronary artery anastomosis in dog was made by Russian surgeon Vladimir Petrovich Demikhov in 1952. What's more, Demikhov also developed in experiments such operations as right mammary–coronary anastomosis, bimanmary–biconary anastomosis, sequece and snake bypass coronary shunts that practically unknown neither surgeons not historians of medicine.*

*As Demikhov's book named «Experimental Transplantation of Vital Organs», where he described these operations, was translated in English and published in New York in 1962, it is impossible to exclude the possibility of influence of Russian surgeon's ideas and experience on American surgeons, who made these operations for the first time in clinic and were considered to be pioneers of bypass coronary surgery.*

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**About Luis De Camões blindness.**

*Luis Vaz de Camões (1524-1580), prominent poet of the cultural life of the XVIth century in all of Europe, weather by its tumultuous life or by the greatness of his poetic writings all immortalized in "The Lusíadas", master-piece of the renaissance, in which he immortalized the doings of the Portuguese throughout the world during the discoveries period. Luis de Camões stands up, by its own merit, side by side with Shakespeare, Cervantes, Ariosto e Sanazzarro.*

*The only reliable portrait of Camões, carved in copper by Gaspar de Faria Severim, shows the poet with a right eyelid ptosis. Several correspondence of the period and letters talk about the poet blindness and its cause. Very ambiguous, several speculations have rose about the possible aetiology of the lesion. By consulting, letters and books of the period we will try to make a theory to explain Luis de Camões blindness.*

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**Goas cholera epidemics by Garcia De Orta and Gaspar Correia in the XVI Century.**

*Being the Portuguese the first ones to arrive to India its not surprising that they would be the first Europeans to describe the cholera as a epidemic disease.*

*The 1543 Goa epidemics, in India, were witnessed by two of the most erudite Portuguese of the XVIth century: Gaspar Correia and Garcia de Orta. Gaspar Correia in the book Indian legends says that the disease called by the indigenae as moryxy, didn't show particular predilection in gender, or age, and infected indistinctly every keen. This outbreak was so intense that as the author says "everyday the bells ring and berried dead 12 to 15 at the time..."*

*Garcia de Orta, medical doctor and a scholar have watched the death nearby and has inclusively done several authopsy to dead ones (according to his biographist the count of Ficalho). He starts by enumerating all the names the disease has been called and makes a detailed description of the symptoms. The author, goes even as far as, proposing a therapeutic for the disease.*

*By making an exhaustive investigation we will make an interpretation that both men made to Goas Cholera epidemics.*

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*The wheel of the exposed in Portugal in the XVIIIth Century.*

*Christianity gave a new spirit and direction to the society, spreading throughout every institution a higher standard of superior moral. Charity ended up by giving birth to all new kind of support to indigents and, of course, rejected new-borns by their own mothers were not forgotten. More oftenly these situation occurred for they were the fruit of a forbidden relationship, or due to the extreme poverty of the parents or to the deformity of the children.*

*Early in Portugal the Humanitary feelings have spread, and due to the influence of F. Miguel de Contreiras, Queen Leonor of Portugal gives rise, in 1498, to the fellowship of the Misericordiae in Lisbon.*

*The true germen of the exposed wheel, is however attributed to S. Vicente of Paula (1575-1660) that by travelling all around the world spread his faith and his actions, true engine of modern technology that save thousands of children from a certain death. In Portugal the legislation and privileges that the exposed benefitted are well exposed in the work of António Joaquim Gouveia Pinto, that made a sumulae of all the scattered documents spreaded throughout the reign.*

*By analysing the work of António Pinto we will give a new prespective of the situation lived in Portugal in the XVIIIth Century.*

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*Historical perspective of the infection by Streptococcus Agalactiae.*

*Beta-hemolytic streptococci with lancefield's group B antigen (*S. agalactiae*) are an important cause of serious neonatal infection since immemorial times. Clinically characterized by sepsis and meningitis it is, even nowadays lethal, particularly, to children. This agent is also frequently a cause of post-partum infection.*

*The diagnosis and treatment of this emergent disease has developed seriously since it was first described . Treatment has emerged from magical and empiric therapy, where bleeding and very naïve therapy (such as crab eyes), was the most effective proposed therapeutic, to a cientifical and methodic prevention and treatment with antibiotics.*

*Throughout consulting several books and ancient medical scripts we will make a historical prespective of the infection by Streptococcus agalactiae.*

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***The department of Medical Humanism: an educational necessity.***

*There is a common preoccupation because of the increasing dehumanized medical practice, as if it were an inevitable consequence of the time dedicated for being on time with the technological progress. Facing this, it is exposed that we have to be very conscious that, besides the necessary technical formation to try the individual and collective health problems, it is very, very important that the humanitarian condition of the medical practice requires a well and strong scale of values. Because of that, it is proposed the creation of a Department of Medical Humanism in every School of Medicine to develop its bioethics, philosophical, historic and legal principles. Finally, an approximation about the respective topics of each is highlighted.*

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***Early scientific thoughts about genetics and cloning: Observations from classical and Byzantine writings.***

*The 20th century ended with humanity in its technological and scientific climax. Amongst the most impressive achievements is the successful cloning of mature animal cells to new animals identical to their cellular parents. The idea however of genetic information and cloning is quite old. The understanding of the principles of genetics was fairly advanced in Classical Antiquity, an era with no technological means to support research. We have traced several passages from the Classical, Roman and Byzantine eras that support our thesis i.e. that the basic genetic principles of living organisms were conceptualized during these early ages. In particular, we present the following passages: 1. From Aristotle, several passages that analyze the existence of an unknown carrier of genetic information from parent to offspring and some properties of the transfer of this information. Also a passage with a hint to natural selection, as understood by the great philosopher. 2. From Galen, several passages concerning the possible relationship between humans and monkeys and his debate with some contemporary natural philosophers. 3. From Johannes Philoponus, a passage concerning the further analysis of Aristotle's writings about the transfer of genetic information and an impressive passage regarding the use of the term "clone" with respect to its possible application in animals. In the same passage Philoponus highlights the importance of the composition of the (unknown) genetic material for the final macroscopic result, by using a grammatical paradigm. Once more, we witness the phenomenon of loss of pioneering ideas in human history.*

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***Marine Epidemiology: History and the present time.***

*Marine epidemiology as a part of the sea medicine and on independent whit of epidemiological researches was found in the ex USSR in 60-fies of XX century [K. Vasilyev].*

*Marine epidemiology includes: a) studying of seamen's sickness rate; diseases and toxic infections, a source of which may be sea water; b) studying a marine transport's role in the wide spread of human's and animals' infections diseases and improvement of the sanitary-quarantine quarding's system of sea borders and coastal waters. The ideas about marine epidemiology was completely realized in Russia by the sanitary quarantine measures' system on the Black Sea. This model may be used for other seas of the World Ocean.*

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***The history in Plastic Surgery in Mediterranean Basin.***

*The article deals with the most pivotal moments in the history of the surgical field later named Plastic Surgery, which took place in the Mediterranean area.*

*In Egypt (2850-715 B. C.), all the branches of human knowledge attained a high degree of development. The Egyptians attained a certain proficiency in dealing with traumatological patients and were the first to describe facial palsy.*

*Gradually, the traditional Egyptian medicine was replaced by the Greek medicinal arts, which reached their maximum period of splendor in the School of Alexandria, where Herophilus and Erasistratus, pioneers in the study of human anatomy were especially renowned. Galen (130-200 A. D.) has contributed to the development of plastic surgery during the Roman Empire. Among his 170 books, there is reference to the reconstruction of the penis and the reconstruction of lid and lip defects. Paulus Aegineta (625-690 A. D.) described procedures varying from the treatment of nasal and jaw fractures to operations for gynecomastia, ganglion, and hypospadias. Finally, Plastic Surgery was a fledgling specialty emerging from the front lines of World War I. For the first time ever, surgeons had faced unprecedented challenges in treating soldiers who, like never before, had survived such grave initial injuries. The first Plastic Surgeons became heroes and the authorities in handling such incredibly difficult reconstructions. As they began to share their skills and success, they chose the Greek word, plastikos, meaning, "to form", as the root name of the fledgling specialty.*

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***Smallpox and variolation in Palestine, 1921: Public health, culture and colonial medicine.***

*In December 1921, in the Arab village of Dawaimeh near Hebron an epidemic of smallpox broke out following variolation of the population. This practice of taking material from the blister of one sick person and purposefully inoculating another, carried out by a local healer, was a common practice among the local population at the time. This paper reviews the history of the outbreak and the interrelationship between the local population and British Mandate authorities in the course of dealing with the epidemic. A host of vintage photos from the period archived in the Wellcome Institute in London reveal that attempts by Mandatory physicians, to carry out a mass vaccination of villagers was met initially by fierce opposition. In the course of the vaccination campaign village children were hidden in caves and other hideaways in the vicinity out of fear of vaccination. Much as been written in recent years about the link between health and colonialism, recognizing the tension that existed between western and local medicine as an important dimension of the history of colonialism. This paper examines how various parties reacted to the outbreak. In contrast to the simplistic view that western medicine 'conquered the hearts of the natives', in fact reciprocal relationships between colonizers and local population were far more complex in regard to perceptions of sickness and health. In addition the Dawaimeh outbreak, following the variolation of over 300 children, gives us the opportunity to analyze the last large smallpox epidemic resulting from variolation and documented in details during the 20th century.*

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***Magical components in ancient egyptian ophthalmology.***

*Ancient Egyptian prescriptions refer to the treatment of various diseases. The highest quantity among them, however focuses on the eyes, which is not surprising, if you consider how widespread eye diseases were also in the pharaonic times. They distinguished more than 30 different pathological alterations, called mostly by specific names. The cases were treated by several mechanical ways and by various chemical materials taken from minerals, plants, animals or human beings. Some of the materials are very popular even today, although in much developed forms, others are forgotten or classified as magical ones. The administration of these drops, concoctions, ointments, and other forms of medicaments was not a simple professional act, it could not be imagined without magical instruments, rites or spells, either. If we look, however, closer at things said to be magical, we will be surprised, to find many realistic reasons for their use. In the lecture some prescriptions containing as magical materia medica the faeces, are analyzed. Although in ancient Egyptian world faeces had also very negative connotation, relatively many Egyptian prescriptions use it for the eye-treatment, similar to the European "Dreckapotheke". The cases analyzed here refer to txn = a sort of mechanical injury of the eye (Eb 349), Adt = pterygium (Eb 365, 370), HAtj = veiled sight (Eb 339), "avoiding, that the hair grow into the eye, after it has been pulled out" (Eb 425, 429) and for wBA mAA - "opening the sight" (Eb 344). Faeces was always used together with other materiae. Its type and condition were also stipulated.*

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***Medicine and mathematics.***

*In this paper, we are mainly concerned with three specific subjects where mathematics have been used in medicine: the new concept of bladder efficiency (BE), the fertility index (FI), and the annual doubling rate of tumors (ADR)*

*The fertility index (FI) is a theoretical formula that calculates the degree of fertility in males. It is based on the sperm count S (millions per cc), the sperm motility M (percentage of motile sperm), the spermatid volume V (in ml), and the percentage of normal forms N. To calculate the fertility index, one can use the following formula*

$$FI = S \times M \times V \times N \times 2$$

*Bladder efficiency (BE) is a new concept; when no obstruction is present, it is equal to the amount of urine pushed out (M) over the total amount of urine originally present in the bladder (C); the BE in percentage is:*

$$BE = M \times 100 / C$$

*The annual doubling rate of tumors is the number of times that a given tumor doubles its volume every year. It is expressed as follows:*

$$ADR = 365.25 [3(\log R - \log r) - \log N + \log S] / I \times \log 2$$

*where R is the radius of the tumor, r is the radius of the cancer cell, N is the number of tumor cells implanted, S is the Gauss sphere packing factor, ie around 0.74, and I is the time interval.*

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***Development of the "aqueous-base" yellow fever vaccine in World War II.***

*In 1942, an outbreak of "infectious jaundice" struck U.S. military troops vaccinated against yellow fever with a vaccine developed and produced by the Rockefeller Foundation. A subsequent investigation traced the source of the infection to the human serum used to stabilize the Rockefeller vaccine. U.S. Public Health Service officer Mason Hargett proposed a new way to produce yellow fever vaccine, using water instead of serum as a stabilizer. He had developed this method while studying the Rockefeller's manufacturing process in Brazil. Hargett was sent to a Public Health Service laboratory in Hamilton, Montana, whose climate did not support Aedes aegypti mosquitoes that might threaten the local population with an accidental yellow fever epidemic. For the duration of World War II, Hargett produced all the yellow fever vaccine used by the U.S. military and introduced several innovative production methods, which he documented in a detailed photo instruction manual. When the war ended, vaccine production was turned over to commercial laboratories.*

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***Archaeology and medicine: The studies of human remains of the Greek colony Metaponto (7th - 2nd c BCE), southern Italy.***

*The remains of the Greek colony of Metaponto (7th - 2nd c BC) have been excavated systematically and intensely for over the last 25 years. Excavations of the area, inspired by the late Professor Dinu Adamesteanu led to a close collaboration of the two teams of classical archaeologists, the Italian team from the National Museum of Metaponto and the American team from the Institute of Classical Archaeology of The University of Texas at Austin. The American project in classical archaeology included interdisciplinary collaboration of scientists working together toward unveiling the life in the colony from various perspectives. For the first time in this region, geologists, alynologists, palaeozoologists and biological anthropologists worked on excavations alongside specialists in various fields of classical archaeology. Well-established methods and modern techniques were employed in the field and in the laboratory work. The project intended to preserve every bit of information from the excavated area including the wealth of biological information from the human bones and teeth.*

*The systematic and comprehensive studies of human skeletal remains began with the unearthing of the large rural necropolis of Pantanello. The studies of the skeletal material of more than 250 individuals from this site continue as new methods become developed and new approaches are formulated. With the support of the National Museum of Metaponto the human skeletal remains excavated from a number of necropoleis within the territory of Metaponto are continuously studied in similar, broad and comprehensive way as the material from Pantanello. Some of the methods used and results of the biological studies are presented here.*

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***Bones, teeth and the diseases of ancient people. The biological anthropologist and palaeopathologist account.***

*Selected results of the anthropological and palaeopathological studies in Metaponto in comparison with the results from other skeletal series studied by us, are presented here. Up to this year, skeletal remains of over 1400 individuals have been excavated from rural and urban areas and from indigenous and Greek cemeteries around Metaponto. This vast skeletal and dental material, although in varying state of preservation, presents a good source of information about the physical condition of individuals and the population. Attempt is made at statistical rather than individual description of pathological findings. Analyses of the entire skeletal material using life tables indicate very high infant and child mortality from simple infectious diseases, resulting in newborn life expectancy of about 25 years, while paleoepidemiological, statistical analysis of pathological signs on bones and teeth indicates endemic presence of treponemal infection. Influence of environmental conditions and type of food consumed on health of the inhabitants of Metaponto, is also discussed in the light of stable carbon and nitrogen isotope studies and the incidence of dental caries and periodontal disease.*

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*L'Organýsatýon de Sante dans le sud anatolien pendant l'occupatýon Française.*

*A la fin de la Première Guerre Mondial, les Alliés victorieux avaient décidé de dissoudre l'Empire ottoman et de dépecer la Turquie et de l'occuper. Le sud de l'Anatolie avait été donné à la France.*

*Les Français, par leur expérience de la colonisation, étaient organisé non seulement militairement dans cette région, mais aussi culturellement et socialement, et bien évidemment au niveau de la santé. Dans le but de guérir leurs blessés et leurs malades, ils ont utilisé certaine école, église et divers bâtiment.*

*Dans ce travail, nous allons faire une recherche sur l'effet du colonialisme français dans l'organisation de la santé.*

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*The Double Helix.*

*In the spring of 1953, two scientifics of precocious faculties, who works in Cambridge, England, send to Journal "Nature" a short resume about one of the more important scientific discoveries of the twenty century. The letter of two pages approximately, had only one drawing, a simple black and white figure like a flow chart: It was the first picture of the double helix, the scientific icon that determined our Era. Since this moment, we begin a new period in the man's knowledge; it is a wonderful adventure that can close us to the possibility of duplication of the man.*

*It's fair to remember this great discovery at fifty years that happened.*

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***Michelangelo's Apollo and pathos: The human form.***

*The prevalent theme in this videotape program is the idea of Apollo (grandeur) and pathos expressed through the vehicle of the human form. Michelangelo's knowledge of the exterior human body was extensive and he manipulated, at will, its normal proportions while still keeping the whole figure in harmony. In David, the artist comes closest to the idea of Apollo, Sol Justitia, an inspiration for the citizens of the newly founded Florentine Republic. It is the climax of the classical style that started with the Greek Apollos. The Adam of the Sistine Ceiling is another manifestation of Apollo. He is almost a second god - though earthbound. Much later in his artistic career, Michelangelo revives the idea of Apollo in its most primitive aspect, the creator and the destroyer, the avenging God in the Christ of the Last Judgment. The proportion of the body to the head is altered to give the figure of Christ a crushing authoritative appearance. Pathos is symbolized by the captives of the tomb of Julius II and by the two female allegories of the Medici Chapel. The captive's energy is keyed to one purpose - to break free of its earthly existence. The human body is beautifully utilized in the various expressions of this struggle. The female allegories express pathos by their passive acceptance of the tyranny of the passage of time. Dawn with her youth symbolizes the fresh start of the day and year - Night with her physically worn body, is passively accepting her destiny.*

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***Michelangelo's Madonna and Son: The human form.***

*This videotape program is set against a background of Renaissance Florence. Artistic, anatomical, social, psychological and religious threads are interwoven throughout creating a truly multidisciplinary perspective of Michelangelo, the man, the artist and the product of the milieu of his time. Michelangelo is looked at more singularly from an anatomist's perspective. His use of the human body as the medium to express certain ideas and emotions arising primarily from the mother/son relationship. Michelangelo barely knew his mother. In his religious figures is revealed not only the medieval Christian concept of womanhood, but also his quest for the absent mother figure. St. Peter's Pieta embodies a deep and unabated longing for return to the maternal embrace. It is the legacy of the Renaissance that Michelangelo's ideas are always conceived in human form - that his art is so anatomical. The period witnessed reaffirmation of the belief in the dignity of man, of humanism. In his old age Michelangelo turned away from the sensualism of the idealized human nude. In the Rondanini Pieta, the anatomical details have been pared away to heighten spiritual as opposed to material reality.*

HISTORICAL LIBRARY OF THE FACULTY OF  
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***The protection of the Rights of the Author of The " Anatomia Viri In Hoc Genere Princi..." . A great Book of Vesalio, in***

*It's possible to transmit the medicine knowledge of the past, trough of the creation of a facisimilar edition in electronical formats, that can include ideas of great thinkers of the History of Medicine.*

*The knowledge of the ANATOMIA VIRI IN HOC GENERE PRINCIP... of Vesalio, in this era of technology, permit the access to many people, in everywhere in everytime trough the digital systems its a marvelous advance in the communications and in the Science; against the traditional era of paper like in the past;; however this new edition must be protect trough author rights only the new ideas of the various professors that give to the document a new interpretation.*

*This work give us a historical resume of laws of author rights in Mexico, taking for example the interesting book of the History of Medicine.*

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***L'importance de la station zoologique de Naples pour l'évolution du Dr N. Léon, Professeur à l'Université de Médecine de***

*L'Université de médecine d'Iasi fut inaugurée lors de la rentrée universitaire de 1879. L'un des premiers étudiants, N. Léon, mécontent des conditions d'étude, se fait inscrire en 1883 à l'Institut Académique d'Yena dont le patron était le savant progressiste E. Haeckel. Il eut son doctorat en 1887 et revint à Iasi. L'absence d'un laboratoire poussa Léon à solliciter une période d'étude à Naples, dans la Station zoologique créée par un autre savant haeckélien, Dr Anton Dohrn. La station facilitait des études biologiques en général et la connaissance de la flore et de la faune de la Baie de Naples en spécial. La plupart des chercheurs étaient allemands; chaque semaine, ils analysaient leur activité et en publiaient les résultats dans trois revues prestigieuses. N. Léon avait déjà ramassé bien des matériaux d'étude à Naples et en Norvège, précédemment. De retour à Iasi, il occupa la chaire d'histoire naturelle médicale entre 1899 et 1931, an de sa mort. Ses recherches eurent pour but de répandre en Roumanie les conceptions évolutionnistes d'Yena, en donnant en même temps une orientation à l'étude de la parasitologie et aux recherches sur le paludisme à l'Université d'Iasi et, pour peu de temps, à celle de Bucarest. L'oeuvre la plus importante du savant Léon reste L'Histoire naturelle médicale du peuple roumain - synthèse des observations, qu'il avait faites dans les villages roumains, des remèdes naturels (végétaux, animaux et minéraux), sans ignorer leur corollaire mystique (sorcellerie, incantations). Son séjour à Yena, ses expériences en Norvège et à Naples.*

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***The first printed work on dentistry in Italy.***

*The first works devoted to medicine were printed in Venice (1471), the most prominent center of the printing in Europe. The first books on anatomy were printed in Venice from 1538 - 1559. One of the first works devoted entirely to anatomy of teeth was also printed in Venice in 1563 under the title the " Libellus de dentibus "( 20 years after the printing of Vesalius' anatomy). The writer of this work was Italian Bartolommeo Eustachio (1510-1574), an eminent physician of the seventeenth century, who ranked with Vesalius (1514-1564) as the founder of modern anatomy. Eustachio was practised on cadavers in Rome hospitals Santo Spirito and Consolazione. His treatise on the teeth was the first Italian work specifically dedicated to that organ, a study of the teeth in any considerable detail - the first dental histology. He first described the hard outer tissue and soft inner structure of the teeth. It was 45 years before the invention of microscope (1608). He provided an important description of the first and second dentitions and attempted an explanation of the sensitivity problem of the tooth' s hard structure. Eustachio was the forerunner of Marcello Malpighi (1628-1694), who is known as the founder of microscopic anatomy and propagator of its application in the study of the teeth.*

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***Opium addiction and creative dreams - S.T. Coleridge.***

*Writers of distinction in the Romantic age consumed opium in high quantities. They started to take it for various medical problems – pain, depression, disease - or simply because it was in fashion. However, they all came to consider it an important stimulant for their creativity. The English author Thomas de Quincey (1785-1859) wrote about "the marvellous agency of opium, whether for pleasure or for pain". Charles Baudelaire (1821-1867) compared opium to a woman friend, "...an old and terrible friend, and, alas! like them all, full of caresses and deceptions." And S. T. Coleridge considered that his perception, emotion and intellect were "intensified" by the use of laudanum. He even claimed that some of his most celebrated poems were in fact created in dreams induced by the use of the drug. The author of "Christabel", "The Rime of the Ancient Mariner" and "Kubla Khan" is a controller of a dream territory called out of the subconscious. In Coleridge's opinion reality is but a bad dream to be counterbalanced by imagination. Like his character in "Christabel", the poet could not prevent his dreams from driving him to new errors. His poetic work is a symbolic representation of his own helplessness and hopelessness when faced with the temptations that ruled above him: opium, gambling, alcohol, sexual desires, etc.*

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***L'identificazione personale nella storia.***

*Le attuali tecniche di identificazione personale utilizzate in ambito criminalistico, si avvalgono dei sistemi informatizzati più aggiornati nella ricerca di dettagli anatomici in grado di rendere una persona unica e, pertanto, differenziabile nel contesto di una intera popolazione. Tuttavia, l'utilizzo di questi metodiche risale a tempi assai remoti, in cui, pur attraverso il ricorso a sistemi rudimentali di "segnalamento antropometrico", era possibile fornire un valido contributo alle indagini investigative.*

*Gli Autori ripercorrono le tappe di un settore scientifico, quello dell'identificazione personale per l'appunto, accresciutosi tra gli studi di antropologia criminale e gli studi di biometria analitica, illustrandone le tecniche che hanno ispirato gli attuali traguardi scientifici ed i romanzi polizieschi e di fantasia di celebri scrittori del passato.*

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***"The Development Of Nephrology In The Monastic Era (From 8Th To 12Th Century)***

*The monastic medicine era started in the VI century a.c. and developed in the following centuries. The Monastery was the only reference point for medical art, particularly in the IX and X centuries. At the beginning medicine was only studied by the monks, according to the conviction of some great thinkers that through the study of liberal arts it was possible to know God's word better. This surely helped preserve the great cultural patrimony of antiquity. Afterwards, all medical knowledge was put into practice, taking the place of magic rites that were practised by common people, forming the basis of a Medicine which, coming out of Cenobi, contributed to the institution of different laic Medical schools. The development of Nephrology was fundamental in this period. For about two thousand years, the study of urine was the only test carried out directly by the doctor. This type of test was then put in relation with other signs obtained through attentive observation of the patient, such as the control of pulse, temperature and of pain. Rereading old codes that are still found in Montecassino's archives, the oldest in Beneventano-Cassinese's type, the following in Carolino's type, it is possible to observe the great efforts made by the monks to copy and order ancient texts that weren't in order, sometimes consisting of only notes, and sometimes written in Greek. These texts were surely used for teaching. At the beginning of each topic many recommendations are made which seem to be addressed to students. These texts were not only for teaching purposes, but were consulted in the "Ospitia".*

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**Position of the book of Pharmacopoeia  
Persica in Medical interrelation.**

*Although translations of the Rhazes, Avicenna and Ali-ibn-Abbas Majusi's works by Latinates and Europeans caused direct communications between Persian and European medicine, valuable pharmacopoeia persica written by FR. Angolus Carm Tholotanus which distributed in 1680 in Paris could be the first study of Iranian medicine has been done by Europeans.*

*The pharmacopoeia persica was written basically on Hakim Mozafar-ibn- Mohammad-e-Hosieni-e-Shafai's work. This work is precise and complete and in respect of Hakim's dignity had been popular in Iran and India.*

*In this study we tried to offer a personal history of Tholotanus and his 16 years living in Iran and social and scientific feature of Hakim and his academic work and showing a picture of Hakim which painted by Reza Abbasi, a famous Iranian painter. Additionally, we show you some pictures of the book and the first edition of the translation. At the first page there is a Latin written as follow:*

*Opus MISSIONARIIS, MERCATORIBUS ceterisque regionum orientalium lustratoribus necessarium, nec non Europacis nationibus perutile.*

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**Nursing in Iran at past, present and future.**

*In spite of Long history of nursing as one of the oldest and most honourous professions in caring of the patients in the world , the scientific development in nursing in Iran started 60 years after the establish ment of new methods in nursing led by Florance Nitingel in 1854. Basic needs of the patients and development in surgical procochure and internal medicine led to the need of scientific and advanced nursing of the patients in Iran.*

*The first nursing education center in Iran was held in 1915 by a mission headed by Dr . Lemee in city of oromiyeh.*

*- Interest of Iranian youngsters to the nursing science was dicussed in two aspects.*

*1 . A new branch of nursing science due to progress and identification of differents diseases and specialized surgery was developed .*

*2 . Religeous believes about on the caring affairs and treatment of patient ,may be one of the main signs of progress in nursing science in the world , to such an extent that, church and christains were the founders and frontiers of nursing sciencs , In Islam ,nursing is considered as a holy profession and Known to be a Kind of prayer.*

*→After revolusion of Iran in 1978 , and 8 years war with Iraq and the presence of many war in casulties and many surgery cases , special progress of nursing Iran took place . Encouragement and support through the rulling administrators led to the progress and developement of nursing science . There is saying of Imam Khomeini the supreme leader of Iran " nursing is a valuable prayer,s" . or Alameh Tabatabaee a phylossofer in Iran Says " one night nursing care of patient is equal to seventy years .*

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***Instruments for liturgical, medical and hygienic procedures in the collections of museums in Lodz.***

*Collected flint and iron knives and combs date back from the 9th and 10th century BC and the beginning of our era. They were found on the Polish territory.*

*The instruments are the evidence of procedures, mainly liturgical ones, performed at those times by Slavs.*

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***Medical military museum of the Medical University of Lodz.***

*The Museum is the largest and unique institution of this type in Poland. It was founded in 1972 and covers 700 m2. The Museum contains the following collections:*

*Paintings presenting wounded soldiers and patients painted by outstanding Polish painters - Wojciech and Jerzy Kossak, Witold Tracewski, Antoni Piotrowski,*

*Prehistoric surgical tools for liturgical operations,*

*Surgical instruments from the 19th and 20th century,*

*Medical uniforms from the 19th and 20th century – made till the year 1800,*

*Special documents and medical old prints,*

*Military medals and medical diplomas.*

*The collection also comprises unique exhibits i.e., "Herbarium" by S. Syreniusz – one of the oldest medical books from the 16th century written in Polish, and the original medical certificate written by Dr Robert Koch in 1870.*

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*Sick and wounded soldiers in the polish painting.*

*Since the time of the Renaissance a human body and its suffering were the source of inspiration for artists, mainly painters.*

*In the 19th and 20th century several Polish painters presented sick and wounded soldiers in their paintings. The subject concerned great Polish National Uprisings and the struggle of the Polish nation for independence, namely: the Kościuszko Insurrection in 1794, the Napoleonic War in 1812, the November Uprising in 1831, and the January Uprising in 1863.*

*Thus, the human suffering became the source of inspiration for the outstanding Polish painters i.e. Wojciech and Jerzy Kossak, Witold Tracewski, Antoni Piotrowski and the others.*

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*The affections of mind in Santorio Santorio's "De Statica Medicina".*

*"Grief and fear obstruct the perspiration of the gross perspirable excrements; and the obstruction of perspiration, from what cause so ever it proceeds, causes grief and fear," wrote Santorio Santorio (1561-1636), the professor of medicine at the university of Padua, in his De statica medicina in 1612. Santorio is famous for his calculating the true quantity of insensible perspiration, and his method basing on measurement and calculations. As above quotation suggests the idea of perspiration was important for Santorio, and De statica medicina was particularly written to analyse it.*

*In this paper it is investigated, how Santorio analysed the affections of mind, and in what sense he used his ideas of perspiration and new methods of investigation in this analysis. The affections of mind, often called passions, were a part of the medical heritage derived from the antique. In medicine, there were common lists of passions, including anger, sadness, joy, fear, and grief, for instance, all of which were understood psychosomatically. The passions were also included among the so called non-natural things that inevitably affected a human body either in a normal and health-supporting or a pathological way. Beside affections of mind, the non-natural things consisted of food and drink, motion and rest, for example.*

*In this paper it is especially asked: What was Santorio's concept of the affections of mind like? Did Santorio's view reflect the traditional ideas, or had he a new insight into the subject? Does Santorio's opinion in De statica medicina differ from those presented in his other books.*

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***The earliest experiments in modern  
medicine.***

*Nicholas of Cusa (1401-1464), German philosopher and original thinker was one of the first who introduced experiment in medicine. He was an inventor of concave lens spectacles to treat myopia and recommended timing the pulse rate ( about 1450). It is less know that Cusa the first measured the specific weight of urine and blood as an aid in medical diagnosis. It was one of the earliest experiments in medicine of Renaissance The road which is indicated by the way of thinking of Nicholas of Cusa was walked by Theophrastus Paracelsus (1493-1541), who was Swiss physician and mystical philosopher. His theoretical ideas were too clouded in mysticism, but in practical medicine he was more effective. Paracelsus the first introduced physical and chemical analyses of human body fluids. He distilled the urine and studied its solid residue. He made the first chemical examination of urine by using vinegar. Works of these two philosopher reflects a strong neoplatonist influence. They made a great advance not only in diagnostic , but in experimental medicine. They prepared the way to a new knowledge based upon experience , measurement and experiment . The concept of scientific method was introduced by Galileo Galilei (1564-1642) at the end of the 16th century. This was a period of Scientific revolution in which the instruments and techniques of modern science were first established.*

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***The first witness of separation of medicine  
and pharmacy.***

*The Antidotarium Salernitanum is one of the more famous work of the first Medical School in Europe - Schola Medica Salernitana. It is a rich collection of recipes for the preparation of medicines, their application and action. It was not only the basis for all later pharmacopoeias, but the first witness on the separation of medicine and pharmacy. The Antidotarium Nicolai was written in two versions (for physicians and for pharmacists) by unknown Salernitan physician Nicolaus Salernitanus about 1140. One century later (1240) the first official separation in the West between ars medica and ars pharmaceutica happened in Southern Italy by Frederick of Hohenstaufen(1194-1250), German emperor and king of two Sicilies, who issued law for the separation of medicine and pharmacy. The first known European legal regulation separating the professions of medicine and pharmacy was issued in French soil for the town of Arles in Southern France. In 1322 College of Medicine of Paris determined the Antidotarium Nicolai as obligatory book in the pharmacies. This formulary was one of the first printed books (Venice, 1471), which prepared the way for independently development of pharmacy. The first official normative book on medicines was printed in Italy (Florence, 1498 ) under the title Ricetario Nuovo. It was the result of constructive collaboration of physicians and pharmacists.*

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### *The relation between text and colours in Medieval Urine Wheels.*

*In the Center for Manuscripts & Rare Books at The Royal Library of Copenhagen there are three so-called urine wheels: one in the de Ketham edition from 1491, and two others in manuscript form, one being earlier and the other later than de Ketham, but still based on an older manuscript as stated by Karl Sudhoff in 1912.*

*They all show a circular row of coloured jordans with openings facing the centre where inner circles demonstrate the different stages of percolation.*

*In two wheels fine lines connect each stage with the corresponding jordans. A central circle states that "Iste est modus judican-di urinas per colores earundem" (This is the way to judge urines by their colour).*

*Each jordan has a caption with the name and description of the colour of the urine, but the actual colouring of the jordans does not fit the descriptions.*

*The described urine colours also correspond to the four temperaments as indicated by circles placed in the corners.*

*The three wheels differ primarily as regards the colouring, number and position of circles and jordans. These observations lead to the following conclusion:*

*The widespread existence of copies of urine wheels from this period suggests a growing use of imagery in education and practice, but a full understanding of the true powers of accurate illustration has not yet been attained.*

*Thus, the authority of the urine wheels is limited to the textual definitions of the colour names.*

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### *Albucasis and Thyroid Surgery.*

*Albucasis has lived in Andalus (Spain), and died there in 1013. He is considered one of the most celebrated surgeons during the Middle Ages. The influence of his book (Kitab al-Tasrif) in the field of surgery development in general and thyroid surgery in particular was tremendous. Guy de Chauliac, the "restorer of Surgery" quotes Albucasis more than 200 times. The arrangement of the work, the clear diction, and lucid explanations, all contributed to its great success. It soon became an authority quoted by medieval European physicians and surgeons more frequently than Galen himself. Albucasis describes the technique of fine needle aspiration biopsy of the thyroid gland. In this regard, Albucasis says: "This tumour which is called 'Elephant of the throat' is a large tumour of the color of the body; it commonly occurs in women. It is of two kinds, congenital and acquired. As to the congenital, there is no treatment for it. The acquired is of two kinds: one resembles a sebaceous cyst, the other resembles the tumour arising from an arterial aneurysm, and it is dangerous to incise it, so on no account must you apply a knife to the latter kind, except any that are small; if you try and explore them with a probe and you find they are like sebaceous cysts and not adherent to any blood-vessel, then immediately cut down upon them as you would a cyst and remove them with whatever capsule may surround them, if they are contained within a capsule; and if not, dissect away the whole accurately; then treat the place with suitable remedies". The aim of this work is to shed light on Albucasis and thyroid surgery.*

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### *History of Plastic Surgery in Russia.*

*In the year 1835 N.I.Pirogov had delivered a lecture "On Plastic Operations in common and Rhinoplasty in particular", where he stated the fundamental fact for future development of plastic surgery. When performing rhinoplasty, N.I.Pirogov introduced in this technique elements of aesthetic surgery, each time trying to individualize the form of creation a nose, depending on the peculiarities of the patient's face. His followers - Yu.K.Shimanoovsky, K.P.Susslov, V.I.Zykov, G.S.Zelenko, V.L.Bogolyubov and oth., have used free transfer of various tissues: bones,fat,skin ,chondral tissues, mucous membranes, fascia, muscles and tendons in plastic and cosmetic operations.*

*In 20 th years of XX century the transplantation of vessels and nerves was initiated. At the end of 70 th years the experience of various tissues' transplantation resulted in the suggestion of possibilities for creation of complex flap transfer, composed of several tissues,depending on the aims of intervention. Revascularization of autografts was performed with the use of microsurgical technique, which considerably improved short-term and long-term results. Historical experience of the development of plastic surgery shows successive trend in the usage of previously obtained results in a new scientific idea or a new technology.*

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### *Women pioneers in the history of turkish dentistry.*

*There are different views in the role of individuals in directing the course of history. Every individual historian, depending on the philosophy of history he or she favours, takes its position in the spectrum from accepting history as the monographs of 'great men' to recognizing individuals as the secondary elements in the events that are dependent on mass or divine determinants.*

*In this presentation, that is based on the belief of referring to the significant figures of the relevant period to report and analyze the events, and the practicality of the approach to understand and construe the eras and periods, two women pioneers of the history of Turkish dentistry Sadiye Hanim and Hatice Hanim are introduced with other forerunner female dentists who had walked on the path Sadiye Hanim and Hatice Hanim had opened and not only practiced their profession but also showed the way to others by taking academic and administrative responsibilities.*

*Right to enter medical professions and develop oneself in one of those, in a male dominant world, had been obtained by strong struggle of women for their personal rights. Considering pioneer women dentists in the 'background-figure' context is also important in the name of reaching the information about the 'background' rather than the values of 'figures' that they belong to. To this aim, in our study, the changing attitudes of Turkish society against the place of women in the profession of Dentistry within last 96 years, from the establishment of the first dentistry faculty of the country (Istanbul University Faculty of Dentistry, 1908) will be examined.*

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### *Three Ottoman medical books wrıttın for the public.*

*As a professional field, medicine has the character of a monopoly regarding information on and practices in human health. Professional knowledge is shared among colleges but withheld from others, a tradition of the profession mentioned in Hippocratic Oath. Nevertheless, throughout the history some medical authors wrote books for the public. Some of these books has the purpose of donating ordinary people the means to protect and restore their personal healths whereas some others contain the evaluation of medical practices commonly applied by the people, from the view point of a medical doctor.*

*In this article, three books, all written for the public and belonging to the three different periods of Ottoman medicine is considered. The first one of these widely popular works of their times, is Nidai's "Menafiu' n-Nas" (1566). The second one is Mustafa Behcet Efendi's "Hezar Esrar" (1862) which is completed by his brother Abdulkhak Molla and his nephew Hayrullah Efendi. The third one is Besim Omer (Akalin) Pasa's "Nevsal-i Afiyet" consisting of four volumes (1889, 1900, 1904, 1906). These three written works are reviewed and introduced by comparing with each other and also with William Bouchan's "Domestic Medicine" (1769), a very popular book in Europe during the second half of 18th and the beginning of the 19th centuries.*

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### *Herba thyme as a drug.*

*In Turkey Herba thymi or thyme has nearly 40 different varieties and it is possible to find different kinds of thyme in different parts of Turkey. Some of them known Zahter, Sahter, Anzer chayı, Karabash and Mercanköshk.*

*However thyme is a plant that was used as drugs nearly whole historical periods. For instance Mesopotamian used it as a drug for certain diseases of stomach as it happens nowadays.*

*Greeks also used thyme. In his famous work, Materia Medica Dioscorides mentioned it as a drug for stomach too. He also advised to be used its leaves and seeds.*

*Muslim physicians from beginning also used it eighth century until twelfth century. They used its different parts; its leaves and seeds were used to prepare drugs in Muslim World. We can see that Avicenna, Ibn Baytar and some other Muslim physicians also prescribed thyme as drugs including in the Ottoman physicians as Sabuncuoğlu who was named as surgeon and Salih b. Nasrullah who was famous as iatrochemist.*

*Nowadays, physicians used different varieties of thyme to prepare drugs, especially their flowers and its small leaves. Thyme has nice odour and done can feel it from very distance by the means of this odour. It possess volatile oil which has timol (approximately % 20 or 30) and carvakrol.*

*Nowadays we say that thyme is sedative, antiseptic, carminative. It is also good for the circulation. In addition to them it is used as spice in order to meals to be tasteful.*

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*Rose, its usage in the course of history and  
nowadays.*

*Rose, is a plant belonged to Rosacea family. It contains volatile oil and tannin. Its leaves are astringent because of tannin, and its water is antiseptic, for it has phenyl etil alcohol. Rosebuds are picked and dried in shadow, and then they are distillate, using steam. At the end of this operation we have rose oil (attar) and rose water. Both of them are used as drugs and cosmetics.*

*However, the varieties of rose had been known by ancient civilisations and used as drugs for cosmetic and drug too. For instance Egyptians used its certain varieties during the preparation of some liquids that were used for the preparation of ointment and salve. In Ancient Greek and some other people who lived in Anatolia also used rose in order to prepare drugs as much as to prepare cosmetics. For there are several varieties of roses were planted in Anatolia and Middle East countries beginning from the earliest period of time. For we define some figure of rose in their drawings on the cups and some other places.*

*Dioscorides advised it and he gave some prescriptions, which were prepared by using some parts of rose or its water or oil (attar). We can find his explanation in his famous book, *Materia Medica*. His book was very influential on Islam and then, on the Ottomans. They used it as a kind of pharmacopoeia, but also added some new prescriptions, which were prepared using rose water and attar of rose. One of them was Ibn Baytar who was a famous pharmacist lived in 13th century. In the Ottoman Empire we also find nearly whole physicians used it as drug. After the fifteenth century it was used as ornament in gardens in Europe and the Ottoman Empire.*

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*Cyclopia: Myth or reality?*

*One of the well-known monsters in Greek Mythology, which is mentioned also in literature and art, is Cyclops.*

*According to the most recent scientific knowledge, the malformations caused by maldevelopment of the anterior brain and midline mesodermal structures include cyclopia (synophthalmos), ethmocephaly, cebocephaly and arrhinencephaly. These severe forebrain lesions often are accompanied by severe systemic malformations, and affected infants rarely survive. Neither true cyclopia nor synophthalmos is compatible with life because an anomalous development of the brain is involved. Thus, it is difficult to assume that ancient Greeks drew their inspiration from an adult patient suffering from cyclopia. Cyclops appears for the first time in literature in Homer's *Odyssey* (7th century BC) and he is blinded by the hero of the epic poem. The description of the creature is identical with patients suffering from cyclopia; eyes are fused and above the medial eye there is a proboscis, which is the result of an abnormal development of the mesodermal structures in the brain. The next literature appearance of Cyclops is at the end of 7th century BC in "*Theogonia*" written by Hesiodus, a successor of Homer. Another interesting description of Cyclops is made by Euripides in his name-part satirical drama (5th century BC). In conclusion, though it is not certain whether Homer's description of Cyclops was based on his personal experience or the narration of his ancestors, there is no doubt that the myth of this creature gave his name to the ophthalmological disease of cyclopia.*

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**Alcohol in Ibn abu Usaybia's (D. a.D. 1270) records.**

*Probably being as old as human history, the alcohol has been used for being tipsy and cure during the centuries.*

*In the records given by Ibn Abu Usaybia, a foremost historian of medicine, there has been some important information about these matters.*

*The records above all, related to the medical history in a period before Islam seem to have the advice and writings of particularly Romanian and Greek physicians concerning the usage of alcohol.*

*Additionally in Ibn Abu Usaybia's records there is some information about the usage of alcohol in the Islamic world, advice of physicians in the palace on the subject of its usage, the place of alcohol in the production of medicine and medical treatment, instances about the treatment with alcohol, usage of alcohol with medicine, the proper time to use it etc.*

*It indicates at the same time to the writings discussing the benefit and harm of alcohol.*

*This paper intends to study the usage of alcohol in both medical and social area in the process before Islam and after alike, in the light of information about alcohol in the records of Ibn Abu Usaybia.*

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**Greek medical manuscripts of the period of 16th - middle 19th centuries.**

*The purpose of the announcement is to examine the Greek medical manuscripts of the periods of the 16th-to the middle of the 19th century, which circulated in the Greek communities, instead of printed books. From our research we have concluded that the Greek medical manuscripts are to be divided into three categories:*

*A). The first category includes 123 manuscripts of medical texts of ancient Greek and 95 of Byzantine doctors. Analytically 57 are with the name of Hippocrates, 67 of Galen, 16 of Dioscorides and few of Xenocrates, Aretaeus, Rufus of Ephesus and Asclpiades.*

*Medical manuscripts have been found of the Byzantine epoch of the doctors: Paulus of Aegina, Aetius, Johannes Actuarius, Nemesius, Meletius, Alexander of Tralles, John bishop of Prisdrianon, Theophilus Protospatharios, Symeon Sethes, Maximos Planudes, Nicolaos Myrepso, Psellos.*

*B). The second category includes 334 unnamed medical manuscripts, which are mainly prescriptions and were used by people in order to face their therapeutic needs, due to the lack of doctors and the high cost of medication.*

*C). The third category contains 108 medical manuscripts, which are translations of European medical books, as of John Allen's, Jean Fermel, Michael Ettmyler, Nicolas Lemery, Juan Valverde de Hamusso, and the book Elements de Pharmacie Paris 1762.*

*Conclusion: It is therefore ascertained that during the 16th and up to the middle of 19th century in the Greek communities circulated medical manuscripts, which contained the traditional medical knowledge but there are others which contained the modern European medical knowledge.*

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### *Ybn Sýna and modern thanatologýcal researches.*

Philosopher Ybn Sina, known as Avicenna in the West, is a genuine psychologist as well as a philosopher. The light of science of Ybn Sina, who is a productive scientist, still brilliant and guides the humankind in our times in which technological developments have reached the summit. In the Western world, from the beginning of the second half of the 20th century, a new discipline called "thanatology" appeared which handles the phenomenon of death from a psychological perspective. This paper takes into consideration the position of Ybn Sina in the modern thanatological research. Ybn Sina considered the fear of death with multidimensional perspective in his autonomous work named "The Liberation of Death Fear and the Medicine of Sickness of Its Thought". Ybn Sina points out that the fear of death essentially originates from the "incorrect conscience", and this incorrect conscience increases the fear of death in different situations. According to Ybn Sina, to make the fear of death lighter is related with the elimination of the wrong conscious. The big majority of these ideas of Ybn Sina were supported by modern thanatological researches. For example, the fear of death was studied with one-dimensional perspective in the beginning of the thanatological research, but later on the fear of death was studied with multi-dimensional perspective as in the works of Ybn Sina. Again the finding of Ybn Sina that death is absolutely necessary for the ecological balance of the world was confirmed by the modern biology. Ybn Sina also evaluated the fear of death as the most intense and the most influential sensation.

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### *Paulus's aegineta contribution in plastic surgery.*

It is widely accepted that plastic surgery was born at the beginning of the 20th century, when surgeons had to repair the terrible disformities of war injuries during the 1st World War. Scanty evidence exist about the practice of this kind of surgery in earlier ages. In this article we deal with the most important contributions of Paulus Aegineta, an Early Byzantine doctor, in the surgical field. Paulus Aegineta (625-690 A.D.), author of many books in the field of surgery, described many surgical procedures varying from the treatment of nasal and jaw fractures to operations for gynecomastia, ganglion, and hypospadias. Although these operations cannot be termed "plastic", they certainly did have a strong cosmetic influence. The Byzantine master influenced his contemporaries and also subsequent authors of the Middle Ages and Early Renaissance, such as: Rhazes, Haly Abbas, Albucasis, Avicenna, and Fabricius. In this paper we present several passages about his surgical procedures, translated by us from the original Medieval Greek into modern English. From his writings it is obvious that Paulus was well aware of the importance of his procedures not only for therapeutical but also for social and cosmetic reasons. The texts are extracts from the following chapters of his 6th book of the epitome:

1. On wrinkling of the scrotum.
2. On hermaphrodites.
3. On ablation of the clitoris.
4. On ganglions.
5. On gynecomastia.
6. On fractures and ruptures of the nose.
7. On ruptures of the mandible and the ear.

### *Means of bandaging used by Jews in Roman times.*

*The means of healing mentioned in the sources, in Ancient Roman Time are divided into several types: the concocting of medicines out of vegetative, animate or mineral sources, chirurgic operation, bandaging of wounds, diet, immersion in ritual baths or using amulets as preventative medicines against illnesses. In medicine books of that period e.g. "De Medicina" by the Roman author Celsus and also in the writings of the famous doctor Galen, the most popular means of healing is by taking medicines. In Dioscorides' well-known book "De Materia Medica" which is a pharmacological book par excellence, there appear a very large number of medicines as means of treating illnesses. However, bandaging wounds was also a medical way of daily treatment of illnesses. Bruises which occurred as a result of injuries in the arena or even as a result of falling off a roof were typical illnesses of that period and were treated by bandages. This abstract deals with the variety of bandages mentioned in the sources of the Roman Era.*

*Four main types of means of bandaging are mentioned in the classical sources: Emollient, Plaster, Pastilles and Pessary. The emollient is a soft substance, which is placed on the wound. For this purpose the emollient undergoes a special process that transforms it into a soft, sticky substance which sticks easily to the wound. The emollient is called Melogma in Greek from the Greek verb μαλασσειν – to soften. The second means is the Plaster, which is used as a cover to the wound. The plaster is made out of a piece of cloth, or leather on top of which one used to put medicated compounds.*

### *Impairment of sexual potency for view point of Seyed Ismail Jorjani.*

*Disorders that relate to sexual drives, sexual arousing and disorder in semen are called the impairment of sexual potency there are numerous copie for curing this disorder by using simple or compound drug in traditional medicine texts. By the way there has been a strong emphasis on the rule of nutrition in curing it. In this article food and medicines drug (Herbal ,Animal ,industrial and Mineral) have been presented and classified that have been used for curing the impairment of sexual potency .*

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***Anti-Carcinogenic herbal Medicine in ancient Iranian traditional Medicine.***

*There are many plants which were used for treatment of kind of cancers in Iranian folk medicine. The most important and confidential agents which were used in previous are including the hers which used by Abe- Sinna. The methods for using the herbs was different and generally consist of orally and local administration. Cuscuta Epithymum, Murr and Helleborus ordinary prescribed through the mouth and were used for prevention of the cancer growth. Boswellia was used locally for reduction of the tumors in the skin. Brassica was used both orally and locally for degeneration of the intrinsic and extrinsic tumors. However, excluded of the mentioned herbs, Grape old vinegar, suger and water were intruduced as privity substances for carcinogenic agents.*

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***Correspondences of Professor Jalal Mostafavi and Licshen Taler concernig historic basis of allopathy and natural***

*Professor Jalal Mostafavi was a Professor of medical history and traditional medicine in Tehran University, he has dedicated sixteen years of his life to a comprehensive and unrelenting research about trend of history of medical developments specially from sixteenth century onwards.*

*He and Professor Licshen Taler (the prominent expert in field of world medicine history, the author of famous book "medical history" and the nominee of the Nobel prize for medicine in 1981) Since 1991 to 1992 the two experts have written seventeen letters to each other about issues and concerning the medical history and it's developments .*

*These letters make comments on number of issues which world have substantial impact on the destiny of mankind and prevention and curing of disease in coming years. Based on beliefs of these two experts, the contemporary medicine is suffering from structural failure and huge amount o risk for patients and to comprehend the roots of these failures, you should consider the ongoing departure and detraction between modern medicine and natural medicine.*

*The both scientists believed that only way to solve this problem is more application of natural medicine methods, as alternative medicine and in future the world will go toward the natural medicine based on doctrines of Hippocrate , Aveccina and Rhazes.*

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*Giuseppe Garibaldi and folk healers.*

History concerned with Italian national hero Jusepe Garibaldi (1807-1882) reveals the traditions of Georgian medicine. Famous Georgian philologist, historian, bibliographer, catholic preacher, Michael Tarkhnishvili who wrote in all European languages ( German, French, Italian, Latin) and also in Georgian, published his articles and monographs. He bought monastery building in Rome. Very important Georgian Catholic cultural values were saved in custody in this cloister. Michael Tarkhnishvili was the rector of this monastery. During II world war he amazingly escaped of execution, he was deplored from the monastery. According his research when hero of Italian people Garibaldi was injured, Italian doctors were not able to cure him. They considered amputation of the leg, at this instance one Italian doctor remembered Georgian doctor Turmanidze who was known by his ointment. The patient was in a very advanced condition when doctor started treatment process by Georgian medications. After a short time, condition of the patient improved and he was healed totally. Doctor was with his patient till the absolute recovery.

Garibaldi presented his doctor to society. He demonstrated his miracle recovery and he went on a horseback to prove his healthiness. People were happy. Georgian doctor was gifted. After this affair Italian people have belief that Georgian medications are miracle-working. Poor Italian pharmaceutical chemist knew the miraculous of Georgian medications, he hired monastery and spread rumors that he made the medications by Georgian recipes. This made pharmaceutical chemist very rich and popular.

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*The andiz syrup, a traditional nutrition and medicine from the taurus mountains in Southern Anatolia.*

The mountain range that stretches from west to east parallel to the Mediterranean in southern Anatolia has been known as Taurus for thousands of years. The Taurus mountains have been inhabited vastly since the earliest times of history and some of the present settlers that partly continue a nomadic life have some interesting items that are still used as nutrition and medicine. The Andýz syrup, made from the Juniper berries is one of the unique products that have been traditionally produced for hundred of years.

I will try to explore the place and importance of the Andýz syrup as a medicine as well as other syrups made in southern Anatolia.

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***Descriptions of Chronic Mercurialism in  
Idrija Mercury Mine, Slovenia.***

*Mediterranean region has been known since ancient times as area rich with natural mercury and cinnabar ore (HgS). The Mercury mine in Idrija, Slovenija belongs to this well established and rich region. The beginning of mercury mining in Idrija goes back to the Venetian period, in the year 1490. Mercury has been known , as a toxic substance, since ancient times Theophrastus, Plinius and Dioscorides described an acute poisoning caused by mercury. The medieval Arab doctors were familiar with similar cases. While a mercury was used, to treat Syphilis, acute poisoning came ever more frequent.*

*The first description of a chronic mercurial ism in Idrija was from Paracelsus (Nurnberg 1530, Dilingen 1567). Follow him Pietro Andrea Gregorio Mattioli (Venice 1544 and 1554), Giovanni Antonio Scopoli (Venice 1761), Balthasar Hacquet (Leipzig 1781), Ludvik Bernard Grbec (Idrija 1853, 1858), Johann Baaz (Wien 1886) and numerous authors in 20'' century. In the Donald Hunter's, English and World classical text-book The Diseases of Occupations (London 1955) mercurialism in Idrija was mentioned six times.*

***Ibrahim Hakký of Erzurum in the history of  
Medicine in Turkey.***

*Turkish Scholar Ibrahim Hakki of Erzurum who lived between the years 1703 and 1780 conducted studies in such fields as astronomy, theology, mathematics, psychology, ethics, sociology, and geometry in the circumstances of his day, and he established significant facts. One of the main fields he researched was health science. Although what he established in the field of health sciences at that time has become outdated by present day scientists, we believe that such studies as he made are worth considering in terms of getting to be familiarized with the way covered in the history of health sciences.*

*In this paper, we aim to present the research Ibrahim Hakki conducted especially in the fields of anatomy and health sciences to the attention of the experts of these sciences from the viewpoint of the History of Medicine in Turkey and in the World.*

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*The place of Ibrahim Hakki of Erzurum in  
the history of Medicine.*

*Traditional health science was an area of interest in Ottoman Empire, which initiated the establishment of health institutions majoring in different fields of medicine ranging from simple health problems to severe psychological disorders. Among many scholars who carried out researches in this field is Ibrahim Hakki, who lived between the years 1703 and 1780 in Erzurum, and who conducted studies in such fields as astronomy, theology, mathematics, psychology, ethics, sociology, and geometry in the circumstances of his day establishing significant facts. One of the main fields he researched was health sciences. Although what he established in the field of health sciences at that time has become outdated by present day scientists, we believe that such studies as he made are worth considering in terms of getting to be familiarized with the way covered in the history of health sciences. In this paper, we aim to present the research Ibrahim Hakki conducted especially in the fields of anatomy and health sciences from the viewpoint of the History of Medicine in Turkey and in the World.*

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*Physical training: The cornerstone of good  
health in Hippocratic medicine.*

*In modern times millions of people suffer from chronic diseases, such as pulmonary and heart diseases, hypertension, diabetes, osteoporosis and skeletal pain. Scientists nowadays claim that all these and many other diseases can be prevented as well as healed to some degree with physical training. The Hippocratic physician believes that the care of the man is not complete, unless he takes exercise. Gymnastics and medicine are by nature opposites, because gymnastics is not intended to bring about any changes, whereas medicine must. In order to treat diseases successfully he should be aware of the lifestyle of his patients, if they are athletic or inactive. He should discern the power of the various exercises and to proportion exercise to the quantity of the food, to the constitution and age of the patient and to the environmental conditions of the region in which the patient resides. Hippocrates goes so far as to declare that if it were possible to discover for the constitution of each individual a due proportion of food to exercise, with no inaccuracy either of excess or of defect, an exact discovery of health for men would have been made. If it occurs even a small deficiency of one or the other, in course of time the body must be overpowered by the excess and fall sick. Hippocratic messages about physical training are undoubtedly prophetic in our technological medical era.*

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***The freudian tripartite structure of the mind  
"Fortold".***

*The present study will suggest that key elements of an important psychoanalytic concept may be found in early Christian thought.*

*The tripartite structure of the mind proposed by Freud, whereby the id, superego and ego represent, respectively, the instinctual drives, the social- moral demands and the mediating processes of the mind, has been a cornerstone of psychoanalytic theory.*

*Yet, a similar model of psychic life is clearly evident in early Christian thought and teaching. The Christian model, however, was not a theory but a prototype of life shown in the hagiographies of early saints and in the thought of the Fathers of the Church. The prototype was modulated by the principles of the faith.*

*Important differences are noted between the Freudian and the Christian models. The former exists in the inner space of man while the latter exists partly in the inner and partly in the outer space. In the Christian model, man is driven by forces which are part of his inner structure and are often distorted and inflamed by the Devil. This is the equivalent of psychoanalytic 'id'. Man is urged to follow the moral principles mandated by God and use his free will to rid himself of evil impulses. This is the 'superego'. Man, may strive to live up to the expectations of God, and may succeed. The struggle is not easy and he may experience suffering. This is clearly the 'ego'. Art, old and modern, exemplifies the similarities between the two models. The question thus is raised whether the Freudian tripartite structure of the mind isn't but a modern expression of the older Christian model.*

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***Macrocosmos Vs. Microcosmos.***

*Shabtai Donnolo lived in the south of Italy in the 10th century. He was born in Oria in 913. He tells us in his brief autobiography, included in his commentary on the Sefer Yetsirah (Book on Creation), that he studied medicine, astronomy and astrology, citing a teacher whom he praised in particular, a Persian called Bagdas. He copied a number of manuscripts written in Latin, in Greek, and in Italian. He also mastered Hebrew, and possibly Arabic. He became a well-known practitioner, and is cited twice in the biography of Saint Nilus junior. Donnolo left a pharmacological treatise, the "Book of Drugs", also called Sefer HaYakar. Another work, entitled Practica Medica, which was ascribed to him by Muntner, was in fact a product of the Salernitan School. We refer in this essay to Donnolo's commentary to the Book on Creation, entitled Sefer Hakemoni. The Book on Creation is a brief mystical, esoteric cosmogony, probably composed between the 3rd. and 6th centuries. Its author is unknown. Donnolo's commentary was first published and annotated by David Castelli (in Italian) in 1880. While commenting at length on Genesis 1: 26, Donnolo suggests that the Lord addressed the World, saying: "Let us make man in our image, after our likeness." Man can only be compared to the Lord in his spiritual dimensions, therefore the physical likeness is to the World. Donnolo then describes in minute detail the likeness between microcosmos and macrocosmos (i.e., between man and the world). He thus evinces his wide knowledge in anatomy and (ancient) physiology. We shall describe partially this development of pre-Salernitan theoretic medical knowledge.*

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***Greece and Magna Graecia. The parallel course of philosophy and medical thinking as a base for the scientific medicine.***

*The beginning of scientific medicine coincides with the birth of Greek philosophy, where for the first time in history there is an attempt of forming on the base of theoretical thinking a system that tries to explain the phenomena of the nature and research its laws.*

*Thalis is considered to be the founder of philosophy and is the founder of the great pre – Socrates school, the Ionian school of Militos. Its major representatives were Thalís, Heraklitos and Anixamenis who considered the water, the fire and the air as primordial substance of everything.*

*The Ionian spirit was brought to Magna Grecia by Pythagoras who founded there the school of Kritona and formed the basis of scientific medicine.*

*Alkeon the Krotoniatis belongs to Pythagoras's school who combined the philosophical thinking with medical research.*

*From the philosophical system of Pythagoreans, where the number 4 played a major role, Hippocratic thinking was later influenced and lead to the theory of the four juice that for many centuries was the basis of pathological physiology. They mainly though influenced the progress of medical thinking through the study of nature and the research of cause and causal in the phenomena of nature.*

*At the time of the development of the medicals schools of Magna Grecia other significant schools related to the progress of medical thought, influenced by the Greek – Italian philosophy, were flourishing in Kirini, Rodes, Knido and Kos and set the foundations of Hippocratic medicine.*

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***Western Universities and the teaching of medical science during the 2nd half of middle ages - Forerunners of medical***

*At the beginning of the 13th century the progress of Medical thinking, initially in Italy and later in the West, was influenced by several movements.*

*Originally the school of Salerno played a major role by developing a secular medicine. Meanwhile, a second movement which was dominated by the scholastic Aristotelian philosophy and Christianity played an important role in all areas of the mind. It is this period that the renaissance of medical science, through its teaching in Western universities, is commencing.*

*These universities were founded in the 12th century and flourished in the 13th century. Their founding is one of the greatest accomplishments of Middle ages. The penetration of Greek – Arab medicine in the West lead to a more rationalistic way of thinking in medical teaching, since the contact with nature and the first spirit of Humanism has come from Hippocrate's translations and other Greek doctors as well as Averois's comments.*

*Padova University was one of the universities prevailed by this spirit. Some of the greatest universities were also the University of Bologna, the University of Montpelier and Oxford University. At the University of Bologna, which was pioneer in the application of new surgery and teaching of anatomy with corpses, remarkable doctors were distinguished, such as Daddo Alderotti, Ugo Borgognoni and Mundinus. In the University of Montpelier the teaching of medicine had many similarities with the teaching of Salerno University, where in Oxford University medicine was taught since the 9th century. Its model was the University of Paris, also of great importance.*

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***The archeological finds with medical contents in South-West Bulgaria.***

*The area of today Bulgaria is an inheritor of ancient medical traditions. Thanks to the numerous mineral springs during the antiquity, this region became famous with the curative qualities of his baths. The strong developed cult to Asclepius is the reliable evidence for this. There are numerous tablets, coins, statutes and churches with Asclepius's portrayal. In some archeological target there are discovered findñ, which could be connected with the medical treatment of the population. Unfortunately they are not well studied and there is not published research date for them. The aim of this paper is to popularize the more significant objects in connection with the medicine in ancient age. This will help to unify our efforts for more holistic and deep study of the rich material, which is discovered and still not discovered from archeologists.*

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***Development of pharmaceutical education in India: an historical perspective.***

*The Profession of Pharmacy was unorganised and was considered much below standard in India upto 1930. The Drugs enquiry report of 1931, reviewed the situation and recommended the formation of General Council of Pharmacy and Provincial Pharmaceutical Councils. The report also recommended two grades of qualification i.e a diploma in pharmacy and a degree of Pharmaceutical Chemistry. The action taken on the Drugs Enquiry report helped in improving teaching in pharmacy and the Banaras Hindu University was the first to start a course in 1934. In this paper an attempt has been made to study the development of Pharmaceutical Education in India and to highlight the efforts made by the pioneers of the profession.*

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***Growth of medical periodicals in India during twentieth century.***

*Periodicals are considered to be a major source of communication of latest thought. They are considered the back bone of any library's collection. They are indispensable for information and research. In every field of human activity, it is necessary to be aware of the current thought, which is possible only with the reading of periodicals. They provide a platform for communications of ideas, the exchange of experience and the transmission of current information. The early learned periodicals developed as an adjunct to books and a consequence of the increase in number of books, but greater impetus was provided by the need of professional people. In this study, the investigator has made an attempt to study the growth of Medical periodicals in India during twentieth century. The investigator visited different libraries in India for collecting the data. In response to changes in the international climate and patterns of scholarship, the periodicals underwent many changes.*

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***The Professor V. A. Krasintsev - An outstanding representative of the Moscow Surgical School.***

*The Moscow Surgical School of the second half of the 19th century was rich in the gifted professors and the researchers who had made the Russian medicine famous. The first supervisor of the surgical clinic of the Sklifosovskiy Scientific-Research Institute of the first medicine aid Dr. Prof. Vasilii Alekseevich Krasintsev, a brilliant surgeon-practitioner and an organizer of the Russian public health system. He had written numerous works on the surgery. He had been a member of the International Society of the surgeons.*

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**La Chirurgia Romana nei Bruttii.****L'Instrumentarium di un Medico****"Condotto" di età Imperiale Romana nella**

*Nel 1973 in località San Vito di Luzzi (Cosenza) venne scoperta una necropoli di età imperiale romana (I-II sec. d.C.), e in una delle tombe si rinvenne un corredo completo di strumenti chirurgici in ferro e in bronzo, questi ultimi con decorazione in agemina d'argento e niello. Il corredo caratterizza il defunto anonimo, come un medico non specialistico, un antesignano del nostro medico condotto, in grado di eseguire piccoli interventi chirurgici.*

*L'importanza di questo instrumentarium, appartenuto ad un medico, che certamente svolgeva anche le funzioni di ortopedico e di dentista, cresce notevolmente se si considera quanto poco numerosi siano i corredi medici rinvenuti in Italia.*

*Gli strumenti chirurgici, simili a quelli trovati nella "casa del chirurgo" a Pompei, sono interessanti perché unici documenti per la conoscenza della chirurgia nella Calabria di età romana.*

*La ricerca circoscrive l'attività professionale di questo medico che operava in valle Crati alla fine del I - inizi del II sec. d.C. L'attività di un medico, si spiegherebbe bene all'interno di un grosso latifondo, che nel nostro caso potrebbe essere rappresentato dalla villa rustica in località Muricelle di Luzzi, poco distante dalla necropoli di San Vito.*

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**Il colera in Calabria.**

*Una indagine documentaristica su ciò che il colera ha rappresentato sia sotto il profilo epidemiologico che medico-sociale si sta attuando in Calabria presso i suoi tre Archivi di Stato. In questo lavoro si presentano alcuni preliminari dati epidemiologici relativi alla epidemia del 1866-67 che ha colpito la Calabria Citeriore, quella Ulteriore I e la Ulteriore II. Nel 1866 il colera colpì solo la città di Cosenza ed un comune limitrofo (Trenta) con un totale di 86 morti (4,5/1.000 abitanti). L'anno successivo, la Calabria Citeriore fu colpita dal colera in 16 comuni (42.752 abitanti) con un totale di morti pari a 539 (12,61/1.000 abitanti); la Calabria Ulteriore I, in 6 comuni (63.914 abitanti) con un totale di morti pari a 1.359 (21,26 /1.000 abitanti); la Calabria Ulteriore II solo in 3 comuni (6.750 abitanti) con la morte di 38 persone (5,63/1.000 abitanti). Infine, dei 1.936 decessi avvenuti in Calabria nel 1867, il 98% morì nella propria abitazione mentre il resto in ospedale; il 46% dei decessi avvenne in età compresa tra il 20 e i 50 anni; i coniugati e i celibi contribuirono con il 43% ed il 41%, rispettivamente, mentre il restante 16% erano vedovi. Interessanti spunti storici e medico-sociali saranno trattati insieme al risultato epidemiologico delle altre epidemie.*

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***Greek Physicians in Russia's navy during the 17th and 18th centuries.***

*In the absence of a formal Greek state during the Turkish occupation, all students had to travel abroad, mainly in Italy to study medicine. After completion of studies, most of them preferred to settle in the semi-autonomous Danubian Principalities or Russia, not in Greece. Numerous Greek physicians, laureates of western Universities, entered the Russian military service or served as physicians to the court. Most prominent among them is Panayotis (Pavel) Kondoidis, (Leyden) who eventually became chief of medical staff in 1753, replacing Herman Kaan-Boerhave. He reorganised the Russian medical service and established a flow of medical students towards Leyden. George Dimakis from Constantinople (Padova & Sicily) served as medical officer in the Russian admiralty in Petersberg. Damianos Paraskevas from Sinope (Frankfurt & Jena) served in the naval hospital of Cronstandt in the Baltic Sea. Michael Schendos, served in the military hospital of Petersberg, examining over 500 patients daily. Antonios Sevastos, (Padova), entered the Russian medical service in 1704, in which he served for 35 whole years (until 1739). Jakob Pylarino, famous for smallpox inoculation, started his career as naval physician to the Venetian and Turkish Fleets and did served in the Russian court as well. Anastasius Galaktiono, a Greek surgeon (non-University qualified physician), served in the Russian armed forces. The presence of Greek Physicians in Russia is extremely interesting for conceiving the whole scientific status of modern Greece, even before the creation of a Greek state. Their work has not been properly studied and evaluated.*

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***De L'Anatomie Pathologique " Première " A L' " Anatomie Médicale De Structure " : Continuïté Ou Rupture Epistemologique ?***

*Le but de ce travail est d'analyser les facteurs (techniques, théoriques et institutionnels) qui permirent, après 1850, le passage d'une anatomie pathologique " première ", macroscopique (prônée par Bayle, Laennec et leurs émules de l'Ecole anatomo-clinique de Paris) à une histopathologie (microscopique). Très vite, la science nouvelle pénétrera les multiples champs de la médecine et, notamment, celui de l'Oncologie. Elle émergera dans les instituts et laboratoires universitaires d'Outre-Rhin, bâtiments séparés topographiquement des salles d'hôpital et de dissection. Le développement de l'histopathologie alla de pair avec le perfectionnement des microscopes, leur fabrication en série et l'amélioration des techniques de coloration des coupes histologiques. Sans l'avènement de la théorie cellulaire (1848) de Virchow, l'histopathologie n'aurait pas vu, non plus, le jour vers le milieu du XIX<sup>e</sup> siècle. Diffusée en France par J.-M. Charcot (1825-1893) qui l'appela " Anatomie médicale de structure ", l'histopathologie marquait une rupture épistémologique avec l'anatomie pathologique " première ", macroscopique qui coupait avec le scalpel. Elle signalait aussi l'avènement, dans les pays de langue germanique puis, dans toute l'Europe, d'une nouvelle forme de médecine, la " médecine de laboratoire ", plus moderne que l'ancienne " médecine d'hôpital " de l'Ecole de Paris.*

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**Il suicidio nella seconda metà del XIX secolo: Dalla cura all'educazione.**

*In una precedente pubblicazione (1) l'autore ha cercato di delineare una 'storia della nascita della clinica' del suicidio parallelamente al consolidarsi tra '700 e '800 di una scienza psichiatrica a tutti gli effetti autonoma. Il dibattito scientifico che seguì alla prima metà dello '800 non può essere schematizzato in una 'evoluzione' storica che va da una concezione del suicidio come malattia dell'anima (dalla CURA) ad un'altra che ne fa un disordine morale suscettibile di EDUCAZIONE. E' semmai vero che nella seconda metà dello '800 si intersecano paradigmi epistemologici (Kuhn) sul suicidio estremamente eterogenei tra di loro, un 'coro' di saperi che vede medici alienisti (come B. de Boismont), medici 'philosophes' (come Descuret), filosofi cattolici (come Curci), pedagogisti laici (come Gambuzzi), medici legali, studiosi positivisti di 'statistica morale' (come Morselli) e sociologi (come Durkheim) contendersi tra di loro il consenso sia del mondo scientifico contemporaneo sia quello dell'opinione pubblica. E' questo panorama variegato di concezioni sul suicidio, che, pur essendo antitetiche, trovano dei fruttuosi tentativi di sintesi, l'oggetto di questa comunicazione.*

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**Les idées médicales de Giulio Cesare Vanini: Innovation et tradition.**

*Philosophe libertin né en 1585 à Taurisano, dans les Pouilles, Giulio Cesare Vanini exprime dans ses ouvrages des opinions novatrices et insolites pour son époque. S'adressant en latin à un public cultivé, il aborde de nombreux sujets dans le seul but de proclamer l'éternité et l'autonomie de la nature et de nier l'existence de Dieu et de toute réalité surnaturelle. C'est dans cette tentative qu'il traite des questions relatives à la médecine. Il consacre de nombreuses pages de ses livres à exposer ses connaissances à l'égard des moyens mis en oeuvre pour la prévention, la guérison et le soulagement des maladies. Il se montre intéressé aux questions relatives à l'embryologie, à la reproduction et à l'évolutionnisme. A partir de la notion d'"esprit", il explique tous les mécanismes de notre corps et entrevoit des relations entre l'état physique des êtres vivants, leur régime nutritif et leurs songes. Quoique imparfaites dans leur fond, les idées scientifiques de Vanini ne sont pas dépourvues d'intuitions justes. Il a toujours polémique contre les préjugés et a été non seulement à la hauteur de son époque, mais dans certains cas il a anticipé les temps modernes. Même si à ses intuitions, Vanini ne répondait pas par de véritables interprétations scientifiques - sa méthode étant dépourvue de l'apport des mathématiques et ses opinions demeurant floues - ses solutions naturalistes, toutefois, constituent des réflexions très audacieuses sur la ligne de la meilleure tradition rhétorique. Son désir d'aboutir à des connaissances éclairées anticipe la philosophie des Lumières de Diderot et de D'Alembert.*

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### ***Healing with animals (Zootherapy) at the medieval and early Ottoman Levant.***

*Animals and products derived from different organs of their bodies have constituted part of the inventory of medicinal substances used in various cultures since ancient times. The article reviews the history of healing with animals in the Levant (The Land of Israel and parts of present-day Syria, Lebanon, and Jordan, defined by the Muslims in the Middle Ages as Bilad al-Sham) in the medieval and early Ottoman periods.*

*Intensive research into the phenomenon of zootherapy in the medieval and early Ottoman Levant has yielded thirty substances of animal origin that were used medicinally. The vast majority of these substances were local and relatively easy to obtain. Most of the substances were domestic (honey, wax, silkworm, etc.), others were part of the local wildlife (adder, cuttle fish, flycatcher, firefly, frog, triton, scorpion, etc.), part of the usual medieval household (milk, egg, cheese, lamb, etc.), or parasites (louse, mouse, stinkbug, etc.). Fewer substances were not local but exotic, and therefore rare and expensive (beaver testicles, musk oil, coral, ambergris, etc.). The range symptoms that the substances of animal origin were used to treat was extensive and included most of the known diseases and maladies of that era: mainly hemorrhoids, burns, impotence, wounds, and skin, eye, and stomach diseases. Sometimes the use of some specific substances was contrary to religious precepts, such as the use of snakes, scorpion, or the mummy by Jewish physicians, or the use of wine by Moslem patients and doctors.*

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### ***The Birth of a Neurosurgery Clinic (1920s - 1930s).***

*The rise of neurosurgery as a separate discipline was grounded in the discovery of narcosis, aseptics and antiseptics, as well as in the doctrine of cerebral localization. In 1905 Harvey Cushing (1869-1939) coined the term "neurological surgery". First "surgical neurologists" appeared in 1910s.*

*However, neurosurgery as a specialty with its own philosophy, methods, instruments and scientific interests has been formed in the interwar period (1920s-1930s). The aim of this presentation is to demonstrate the specifics of formation of neurosurgery as a separate specialty in USA and several European countries (UK, USSR, France). I would suggest to distinguish internal and external (social) factors of the emergence of a neurosurgery clinic. The former are represented by new methods of interventional neurological diagnosis (pneumoventriculography, cerebral arteriography etc.), improvements in anesthesia and surgical instruments (electrocoagulation). At that period first neurosurgical societies has been established ( in 1920 in USA, in 1926 in UK, in 1935 in USSR), first neurosurgical periodicals were launched ("Zentralblatt fur Neurochirurgie" in Germany in 1936, "Voprosy neurokhirurgii" in USSR in 1937), specialized clinics and research institutions were established (for example, Institute for Surgical Neurology in Leningrad in 1926 and Institute for Neurosurgery in Moscow in 1932). The impact of external (social) factors might be illustrated by WW1 which required to create a system of management for head injured military due to the massive influx of these injuries.*

*Organization of a neurosurgery service was shaped both by existing traditions and by the character of a political system.*

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*Les anciennes fonctions médicales des sites  
archéologiques a Porto-Farina.*

*Porto-Farina est une ville portuaire située au Nord-Est de la Tunisie dans le golf d'Utique sur la rive sud de la Méditerranée. Véritable charnière entre la Méditerranée occidentale et orientale, le complexe portuaire, qui fut construit en 1638, avait joué un rôle dans la protection de l'occident des épidémies qui provenaient de l'orient et ce grâce à la mise en quarantaine des navires provenant de l'extrême orient. Assis à l'ouest de la ville, la construction du fort Lazaret en 1659 fut dirigée par un ingénieur morisque. Sa situation à un endroit isolé avait permis de l'utiliser, comme son nom l'indique, comme une sorte d'hospice où l'on isolait les malades atteints de peste et de choléra et où l'on gardait les voyageurs suspects en observation. Par ailleurs, La madrasa de Porto-Farina, qui remonte au XVII<sup>e</sup> siècle, connue actuellement sous le nom de Mosquée de la madrasa, et qui était destinée à l'époque de sa fondation à l'enseignement et à l'hébergement des jeunes étudiants, servait aussi d'hospice. Cette multifonctionnalité caractérisait les Madrasas ottomanes. Enfin, La Zaouia de Sidi Ali El-Mekki est un monument pittoresque célèbre qui s'élève sur le promontoir de jebel al-Dimna. Cette Zaouia aménagée dans une grotte naturelle est l'œuvre d'un marabout qui a vécu à l'époque hafside bien avant l'édification de la ville portuaire du XVII<sup>e</sup> siècle. En outre, le toponyme Dimna suggère que le site médiéval a été occupé par une léproserie qui peut être à l'origine du sanctuaire.*

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*La storia della medicina come esperienza  
formativa nel curriculum del medico.*

*L'Autore, partendo dall'esperienza ottocentesca fiorentina di Giuseppe Bertini, prende lo spunto per una riflessione sul ruolo delle Medical Humanities nel percorso formativo del medico di oggi. Il potenziamento di quelle che vengono chiamate "Scienze Umane" rappresenta, infatti, una grande occasione per la medicina di oggi, costretta tra l'ipertecnologismo e le necessità del prendersi cura. Molto probabilmente, una nuova visione del rapporto medico-malato potrà prendere avvio proprio da queste esperienze di riflessione sul ruolo del medico, sul suo linguaggio e sull'importanza del contesto in cui si trova ad intervenire.*

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***Medicine development prospects in the XXI century.***

*The medicine in the XXI century will develop on the way of the more intense accumulation of medical-biological technologies and their usage. In the medical-biological disciplines it concerns the development of the organism integrity doctrine (psychosomatic integrity). New data about organism control on basis of Pavlov's, Salie's, Freud's concepts will be shown. The research of the human's genome is going to be finished taking into account ethic and moral norms. Genetic researches will move to an advanced stage of development, including genetic engineering, the creation of the defense substances and medicines. Medical psychology is going to become a leading discipline. Clinical medicine will keep on common pathology and nazology, defining several tens of unknown diseases. Socio-prophylactic medical branches and hygienic divisions about life's modes and conditions significance will develop increasingly.*

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***Sir Ludwig Guttmann, "The De Coubertin of the paralysed".***

*This presentation is a tribute to Ludwig Guttmann, the man who inspired the Paralympic Games which will be held in Athens on 2004. During World War I ca 95% of patients who had sustained spinal cord injury died, most of them within the first two weeks. Guttmann was a German neurosurgeon who in 1944 was asked to lead a spinal unit for injured servicemen at Stoke Mandeville Hospital. Dealing with limited resources, inexperienced staff, and a prevailing attitude that rehabilitation of patients with spinal cord injuries was impossible, he developed an innovative rehabilitation program for the victims of World War II. The integration of sport, aiming at the social integration for these patients, led to a world sports movement for the disabled people, known today as the International Stroke Mandeville Games and the Paralympic Games. The legacy that Guttmann left, is the first in the world sports stadium for the disabled, the Stoke Mandeville Sports Stadium, the International Medical Society of Paraplegia in 1961 and its official journal: 'Paraplegia'. He worked tirelessly until his 80's. One of his last visions was the establishment of the first 'Olympic Village for the Disabled' at Stoke Mandeville but unfortunately he passed away on the 18th March 1980. Today he is recognized as a pioneer in the rehabilitation of patients with spinal cord injuries. On the occasion of the first Paralympics in Rome in 1960, Guttmann was named by the Pope John XXIII 'the de Coubertin of the Paralysed'. Perhaps a strange tribute for a neurosurgeon, but probably the best way to summarize the great impact his work had on disabled people*

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***Drugs used for diarrhea in Traditional Iranian Medicine (Tim).***

*Diarrhea and related problems are among the most prevalent gastrointestinal conditions, which have been considered noteworthy during the history of medicine. According to the statistics of WHO diarrhea is still common and huge annual amounts of money is spent for treatment, though the results, particularly in chronic cases is not satisfying. In other words, chronic diarrhea is still a problem in modern medicine. Besides, due to controversies with culture, some drugs used for treatment are not well accepted by majority of people.*

*Nowadays traditional medicine is an issue considered of great significance. Traditional treatment is well accepted in many countries worldwide, due to cultural acceptance.*

*Iran has a very old medical history and great scientists such as Avicenna, Razi, Jorjani and Aghilikhorasani in traditional medicine. In this article we did our best to use TIM to find and rank traditional drugs affecting diarrhea.*

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***Cosa s'intende per metodo sperimentale.***

*FILIPPO BOTTAZZI: un pugliese Fisiologo di Medicina Sperimentale. Sua la Fondazione della Società Italiana di BIOLOGIA SPERIMENTALE e della CLINICA FIOLOGICA, dal 1925 al 1937, nell'Università di Napoli.*

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**Cesarean section scope in ancient Laws:  
Hammurabi of Babylon (1795-1750 Bc),  
Roman "Lex Regia" of Numa Pompilius**

*"Ibiq-iltum, the son of Sin-magir, adopted the male child, born through cesarean section [lit. pulled out of the womb], the son of the deceased woman Atkasim". This legal text, dating to the 23rd year of Hammurabi of Babylon (1795-1750 bc), is probably the very first documented evidence of cesarean section. The Akkadian expression silip remim [pulled out of the womb] could mean either cesarean section or forceps delivery. The use of obstetrical forceps is not attested until at least the medieval period. Therefore it is referred to a cesarean section done on a dead or dying mother.*

*"A royal law forbids the burial of a pregnant woman before the child is extracted from the womb [antequam partus ei excidatur]. Whoever violates this law is deemed to have destroyed the child's expectancy of life along with the mother." It was Numa Pompilius, an ancient Roman king (716-673 bc), who issued this ruling in his "Lex Regia", the Law of the Kings. Once ancient Rome became the Roman Empire, the "Lex Regia" turned into the "Lex Cesarea". From this latter designation, the operation of laparotomy and hysterotomy to deliver a fetus may have taken its name, the cesarean section. "If a woman was in labor and died on the Sabbath, a knife is brought, her abdomen is opened, and the child extracted". This passage in Mishna, the collection of ancient Jewish laws (2nd century BC-6th century AD), describes an allowance of postmortem cesarean on the day of rest and sanctification. In addition to postmortem cesarean, there is description of a cesarean section that was performed on living women who survived the operation. Initially, cesarean delivery was performed on animals and afterwards on living women with a fair degree of success.*

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**The history of the Endoscopy (Osteomeatal  
Complex) and our experiences in teaching  
Hospitals of Mazandaran Medical Sciences**

*Endoscopy is the examination of the interior of body organs, joints or cavities through an endoscope. Projection of the light that has already been the problem. The first device was the "Lichtleiter" described by Philip Bozzini in 1806. The source of light was improved in 1853. Antonin J. Desormeaux improved this invention (endoscope) by replacing the candle with a gas-burning flame, allowing for a brighter light. Desormeaux was recognized as "the father of endoscopy" for his success in the medical world. Endoscopy became practicable with the advent of electricity. New endoscopes have digital capabilities for manipulating and enhancing the video images. In the early 1900s, the first attempts to view inside the body with lighted telescopes made. These initial devices were often fully rigid. In the 1930s, semi-flexible endoscopes called gastrosopes developed to view inside of the stomach. Widespread use of fiber optic endoscopes began in the 1960s. Interest in modern endoscope began to develop between 1970 and 1973 stimulated by the work of M. Messerklinger P. Illum. A fiber optic cable that literally allows light and images to transmit through curved structures. Materials and methods: the study was retrospective, which did on patients in Boo Ali Hospital in 1997 to 1999 under FESS operations. Results: the results are as follows: total of patients were 284 that 59.9 % male and 40.1% female. The majority of them were 10 to 20 years old, major signs of patient was %24.3 obstruction in the nose and the most common variation was deviated septum in anatomic was %79.2.*

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***L'effetto placebo come analogo dell'induzione comportamentale in Natura.***

*La presente relazione propone un'ipotesi originale sui meccanismi biologici che sostengono il fenomeno placebo collocandolo in un contesto bio-adattativo di natura inizialmente genetica e finalmente relazionale, specificando e sostenendo con esempi tratti dal regno animale il fatto che gli eventi comunicativi sono tipici e contestuali con i fenomeni vitali e che la comunicazione fra esseri viventi sia intra che interspecifici e addirittura di differenti phyla, è in grado di muovere eventi genici, come per esempio aprire catene geniche attivando geni selettori. Il fenomeno placebo si inserirebbe in questo contesto funzionale biologico ciò renderebbe ragione del fatto che esso si osserva attivamente anche nei riguardi di soggetti non collaboranti e in cui la comunicazione non può essere logica e verbale, come i neonati, gli animali o i minorati mentali. In questa direzione esso è senz'altro meritevole di rivalutazione critica.*

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***Change in humeur was itroduced in Iranian traditional Medicin as cause of many illnesses.***

*In ancient iranian traditional medicine Humeur has mean to the solvent which flow in vessels or hollowed organs like gastrointestinal system (specially stomach), galblader and lymphatic vessels. However, there was introduced four kind of Humeurs including 1) blood 2) Bile (called in iran as Balgham) 3) lymph and 4) Soda (in iranian pronunciation) means the constituent of the blood. However, each food stoff following intrance to the body changes to temperature, energy and some kind of residues. These residues could added to blood, bile and lymph and change the constitution of Humeurs. Anyway, disturbance of each Humeur could affected physiological activity of the ralated organs and finally lead to illness. An apparent example in new medication is the increases of urea and acid oric in the blood in arthritis. In addition, In iranian traditional medicine change in each kind of Humeur introduced as a real factor for progresstion of related illness.*

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***Headache diagnosis and therapy in the past (1930-1950) from inpatient clinical records.***

To assess which were the clinical methods used previous to the introduction of shared diagnostic criterion (International Headache Society classification 1988 and 2004), and when the availability of laboratory support and instruments were limited, we examined the hospitalization records from the Clinica delle Malattie Nervose e Mentali of the Università di Padova from 1932-1950 (n=6708), distinguishing those diagnosed with headache (n=242, f=156, m=87, average age: 31.2 years). Headache features and diagnoses reported in case histories were assessed and compared with the modern diagnostic criteria. Among primary headaches (n=185) the diagnosis was "headache" without further specifications (n=137, 76% of the cases), "migraine" (n=28), and "psychonevrotic headache" (n=20). Only one case of headache was due to possible abuse of analgesics: it would suggest a lower presence of this problem. Besides difficulties due to inadequate diagnostic tools of the time, we noticed a heterogeneity in collection of case-history informations, which reflects lack of accurate and uniform classification of various forms of headache. As for the diagnostic tests, EEG and arteriography were introduced in the years 1941-1950, but yet scarcely used. In the same period, rachicentesis became much less permormed (28% vs 58%) with respect to the preceding years (1932-1940). This study of clinical records, from a period chronologically not remote and already belonging to the epoch of exponential growth of medical knowledge, enables interesting methodological, clinical and therapeutic consideration.

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***The treatment of breast cancer in ancient Greece Hellenistic world and Bizantium.***

Breast cancer (bc) has been documented since the early Egyptians when treatment was cauterly. Hippocrates was the first who used the term "karkinos" or "karkinoma" of the nose, uterus, breasts and neck. He believed that only ulcerated cancer should be operated, as attempted palliation. Leonides, a Greek physician of the 1st century AD, was the first who carried out an operation removing a (bc). He applied cauterization as a method of treatment. Leonides adapted the extension of the operation to the clinical stage. In "De Medicina" of the Roman Aulus Cornelius Celsus (30-50AD) we find a clinical description of (bc). He claimed that when the whole breast is hardened and indurated tumor is fixed to the thorax, operation must be avoided. Archigenes Apameus (54-117 AD), a famous Greek physician in Rome, agreed with Hippocrates: "It is better to give no treatment in cases of hidden cancer; (treatment causes speedy death), but to omit treatment is to prolong life". Soranos from Ephessos (2nd century AD) suggested that when the indurated (bc) is fixed to the thorax, it is better not to operate. The Greek, Galen (131-201 AD) in the early cases of (bc) suggested conservative treatment. If, however, the tumor had grown into a substantial mass, only surgery could offer any hope of a cure. These theories passed into Western Medicine by way of the Arabs, Abulcasis and Rhazes.

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*Emek Yizrael Kibbutz nursing in Israel  
during the years 1938 - 1948.*

*Kibbutz nursing in the Emek Yizrael during the years 1938 - 1948 was part of the health system services devised to provide for the health needs in the kibbutzes.*

↪ *This study describes and examines the influences on nursing and its impacts, s.a: disease, environment, population and health services. These are examined by their political, social, economic, demographic and medical relationships during the 40's in the Jewish and Kibbutz settlements in Emek Yizrael.*

↪ *The goals of this research were to describe the central health issues and the professional functions of the nurses. Additional goal was to study the influence of kibbutz ideology on health policy.* ↪ *The findings show that at the beginning of the 40's, incidence of disease was higher than in the mid 40's. This is the period when health services in the kibbutz started developing. New clinics and sick rooms were established. Nursing widened its scope, bringing nurses in contact with advanced equipment and treatments*

↪ *In those years nursing in the kibbutz was regarded as an occupation rather than a profession. Nurses functioned with a high degree of autonomy. They had to make decision on health issues dealing with most aspects of human life. This gave the nurses high social standing on the one hand, but, on the other, a sense of great personal frustration. This research has historical implications on the educational levels on the implementation of nursing in community*

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*Italy and the international congresses for  
the history of medicine.*

*The Italian Society for the History of Medicine has organized four ICHMs.*

*The number of communications from the four sessions is seven hundred and one (701), with seven hundred and thirty-seven (737) authors. Total pages added to the historical volumes is forty-six hundred and ninety-seven.*

*The 2004 Congress in Bari will be the fifth in Italy, making it the country which has hosted the most ICHMs.*

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*The italian historians of medicine as participants at the I-XXXVI International Congress.*

*Professionals from Italy, recording the history of medicine, participated at all thirty-six International Congresses of the History of Medicine (ICHM) except for the seventh session.*

*The number of Italian authors is five hundred and seventy-five (575); coauthors total eighty-nine (89), with six hundred and ninety-six (696) intercommunications recorded.*

*Generally, the ICHM presentations of these contributors introduced themes from the rich history of Italian medicine.*

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*Galilee Moshava in the arab rebellion (1936-1939): the local doctor as an example between cooperation and detachment.*

*This paper is dealing with the dilemma of the social historian when he is studying the Israeli society in the first half of the 20` century. The social historian faces special challenges when he studies every society. The society he investigates does not exist anymore, he has to reconstruct the social processes, and institutions and the way people lived in the past. Another assignment, is to understand the social behavior according to historical context. A social concept can be changed through time. The social historian uses the method of the history, analysis of documents of the writing society, if it has left written documents. For the research the historian ads methods from social studies as well. As a case study to those problems, this paper is presenting the relationship among three social groups who lived in a Galilee Moshava: Jews farmer, Jews workers and Arab workers. The research has found, there was a relationship of cooperation between Jews and Arab in the Jewish villas - Moshava, despite the demand of the Zionist institutions for separation under the ideology of "Hebrew Labor". From the clinical data of the doctor diary, and the committee's protocols, it can be learned who where the patients, the treatment the doctor gave them and the frequency of their visit during the 30` of the twenty century. It is important to note that those where the years of the Arab rebellion in Israel, it was a time of great tension between Jews and Arabs. One can learn that medical services where provided to all population who lived in the Moshava: Jew farmers, Jew workers and Arab workers. It can be learned about sickness of all age: infants and adults.*

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***L'enseignement Universitaire de l'histoire de la Médecine en Roumanie.***

*L'étude met au jour l'importance et aussi le rôle de l'histoire de la médecine en tant que discipline en l'histoire de l'enseignement médical moderne en Roumanie. Quoique l'étude de l'histoire de la médecine remonte à 1856 dans les écoles roumaines de médecine, il a été introduit dans l'enseignement systématique en 1921, quant on a créé un département distinct à la Faculté de Médecine de Cluj et aussi L'Institute del Histoire de la Medecine et du Folklore Médical sous l'égide de Jules Guiart, parasitologue et médecin historique français. Depuis 1930, Valeriu 1970. V Bologa este consideré le createur de l'école roumaine moderne de l'histoire de la medecine et humanisme médical. A Bucarest, le premier cours universitaire de l'histoire de la médecine a été enseigné par Gh. Z. Petrescu, entre 1925-1938. Au début de l'année 1948 on a créé des départements de l'histoire de la médecine à toutes les facultés de médecine du pays: à Bucarest (I. Ghelerter), à Iassy (C. Romanescu), à Cluj (V.Bologa suivi par S.Iszak), à Tg. Mures (I. Spielmann), à Craiova (M.Schiau). Après la révolution de 1989, l'enseignement de l'histoire de la médecine a été bien libéré de toute doctrine dogmatique du marxisme-léninisme et orienté vers les nouvelles valeurs et méthodes; une nouvelle histoire de la médecine est née, une histoire bien dégagée de tout mythe, bien libérée de tout cliché nationaliste venu de l'Europe Central. La nouvelle histoire de la medecine se developpe dans le climat de l'humanisme médical, bien lié à la bioéthique, à la méthodologie des recherches scientifiques, à l'anthropologie et aux autres.*

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***Claude Bernard, John Call Dalton Jr. and the experimental method in american medicine.***

*The purpose of this study is to examine Claude Bernard's impact, through his student John Call Dalton, Jr. (1825-1889), on the transformation of American medical science in terms of the experimental method. In 1850, Dalton began his postgraduate studies with Bernard in Paris. Bernard's influence upon the young Dalton was immediate, and through Dalton Bernard had a major impact on the transformation of American medical science in terms of the experimental method. Dalton was to appropriate his mentor's experimental method, making it the foundation of both his teaching and research in medical physiology. Dalton was not to flag in his zeal for the experimental method for transforming American medical science. In his 1882 Cartwright Lectures delivered at the College of Physicians and Surgeons in New York, for instance, Dalton reviewed the achievements of experimental medicine over the last several centuries. In his lectures, Dalton stressed the significance of the experimental method for generating medical knowledge and for guiding medical practice, as well as for situating that knowledge and practice on a firm empirical and epistemic foundation. In this paper Dalton's adoption of Bernard's experimental medicine is explored and evaluated, especially in terms of Dalton's original research and his historical and introductory lectures on the transformation of medical science through the experimental method. To that end, I begin with a brief analysis of Bernard's treatise on experimental medicine. Dalton's review of Bernard's treatise is then examined and Bernard's influence on Dalton's thinking is explored.*

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***De-Ospedalizzazione: La pazzia, famiglia e società - Sfide di un nuovo Paradigma.***

*Michel Foucault, nel suo libro Storia della Pazzia, ritrae i primordi dell' internazione e della malattia mentale, marcando la genesi dell' appartamento che era basato nella capacità produttiva del soggetto. Non c'era all'epoca un discorso medico riguardo alla malattia mentale ma si un discorso giuridico-politico. In Brasile, nel 1998 la Legge Paulo Delgado stabilisce l'apertura dei manicomi. Questo implica in un riscatto dell' autonomia dell' "ammalato mentale", dove quest'ultimo comincia inoltre a avere la possibilità di decidere sul suo proprio internamento. Tuttavia, delle domande appaiono: come la famiglia di un "pazzo", dopo anni di un discorso medico inculsurante, riceve l'ammalato di nuovo in casa? In che modo questa ideologia domina l'immaginario dei parenti? Sarà che queste rappresentazioni portano i sintomi dell' "incapacità", dell' esclusione generata dalla pratica del confino in asili, ancora presente nella nostra società? Queste rappresentazioni della malattia mentale possono interferire in modo dannoso nella reinserzione dell' ammalato?*

*Così fu nostra intenzione, cominciando dal discorso della famiglia, apprendere con che significato di malattia mentale la famiglia riceve indietro il malato e quali gli ostacoli in questa nuova relazione familiare. Il nostro obiettivo principe è stato il recupero del discorso della famiglia attraverso l'uso della storia orale come fonte metodologica. Il risultato di questa ricerca ci ha permesso di visualizzare alcune azioni preventive per un lavoro di accompagnamento della famiglia che possibilmente una reintegrazione efficiente.*

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***"Tra Urbanistica, Archeologia e Dna: Pompei, Patrimonio unico per la Storia della Medicina".***

*La comunicazione intende evidenziare come Pompei rappresenti un caso ideale e unico per studiare nei suoi diversi aspetti:*

- 1. l'attenzione romana per la sanità e l'igiene pubblica (vedi gli impianti fognari e di distribuzione dell'acqua, le terme);*
- 2. le antiche pratiche mediche (vedi la casa del chirurgo e il ricco strumentario medico rinvenuti, oggi conservato -ma non sufficientemente valorizzato- nel Museo Archeologico Nazionale di Napoli);*
- 3. la popolazione stessa (sia da un punto di vista paleopatologico e antropologico sia oggi anche da un punto di vista genetico, come dimostrano le ricerche sul DNA antico).*

*Questi tre diversi aspetti sono infatti noti singolarmente da altri siti archeologici mentre la eccezionalità delle caratteristiche del sito di Pompei consente di esaminarli in una logica di sistema e in una sinergia disciplinare da cui scaturisce un' articolata e documentata riflessione su un ecosistema cittadino antico.*

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***Art and religion fused to sustain a hospital for 600 years.***

*Siena's Spedale di Santa Maria della Scala's begun in 1090 grew to greatness embodying Augustinian attributes: care of the sick; distribution of food to the poor; care of orphans; distribution of alms. Milano asked for a copy of its regulations in 1399 to create a new hospital. In 1440, the Hospital's rector commissioned a fresco cycle, The Pellegrinaio. His choice of Domenico di Bartolo as artist was fortunate for he displaced religious symbolism by painting care of the sick as Santa Maria della Scala provided it: a sick man is removed from a stretcher, a physician examines urine, a surgeon has his pinchers, a priest hears a confession, and two men carry out a coffin. To convey "reception of pilgrims and distribution of alms," the space is filled with mothers, babies, children, cripples, the lame on crutches, and the naked entering the hospital. For "care of orphans," di Bartolo drew from a 1305 hospital statue that directed the hospital to care for orphans' needs from infancy to maturity. Hence, in one part of this fresco, a woman receives a baby in swaddling clothes and in another part, the hospital rector performs a marriage ceremony for an orphan girl who is now grown. "Distribution of food to the poor" the last in di Bartolo's cycle shows a banquet scene where rich and poor are seated together while a hospital official receives a half-naked man. [Strehlke, C.B. (1986). Domenico Di Bartolo.] For 600 years, patients, families, hospital workers, and visitors have had their souls stirred by these frescos. Santa Maria della Scala's long and succes.*

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***The applications of Black Seed (Nigella Sativum) in Iranian traditional Medicine.***

*Many herbs have been used as "cure-alls" or potent "tonic herbs" in Iranian traditional medicine (ITM). Among these is black seed has been used regularly to prevent and cure some illnesses. Historically, it was used as a lung tonic to clear up blockages and phlegm in the lungs due to asthma and asthma attacks, and for treating stuffy or runny noses following colds. Another historical use of black seed in ITM was for digestive problems - to "dry up" a soggy stomach, ease colic pain, expel intestinal worms, and remove wind and bloating in the intestines caused by eating wheat bread. The warmth of black seed also increases the flow of all fluids in the body including blood, urine, a nursing mother's milk and weak or halted menses. It had also topical application for warts, skin allergies, insect bites, baldness and gray hair. Since black seed is very rich in protein, carbohydrates, essential fatty acids, vitamins A, B1, B2, C and niacin as well as minerals, and we most lack these nutrients, it may be of benefit. This plant can provide many of the same nutrients that the FDA recommends to help prevent disease and slow down the aging process.*

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*The Russian surgeon Yuly Shimanovskiy's contribution to plastic surgery.*

*Yuly Shimanovskiy, a disciple and associate of the great Russian surgeon Nikolai Pirogov, was a versatile surgeon. He lived a short life, only 38 years, his major successes were achieved in the field of plastic and restorative surgery. By using the Pirogov's idea of osteoplasty, Shimanovskiy devised various osteoplastic operations. Thus, he perfected (1859) the operation of the Italian surgeon R. Gritti who "had transferred" the Pirogov's idea to femur amputation.*

*The fundamental work by Shimanovskiy "Operations on the surface of human body" (1865) had become world famous. By applying general principles developed by him, he defined more than 60 operations of plastic surgery and transplantology.*

*It should be emphasized that Shimanovskiy was the first to divide the methods of epidermatoplasty into two forms: the shifting and stretching of skin. He drew up a well drafted and mathematically founded classification of skin defects. Shimanovskiy proposed universal methods for closing different defects irrespective of their situs.*

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*Medico - Social Care's home - Development and priorities.*

*The essential aim of this presentation is to following the historical development of the Medico – Social Care's Home in Blagoevgrad, Bulgaria. We put accent on the institutions's influence to physical and neuro – psychical development of the children and the new models for their successful social adaptation and social development. The percentage and frequency of the children's diseases are discussed. The causes of the chronic diseases are treated also and especially we put attention on the transition from very strongly medical... institutions to psychic health children's institutions and their harmonical development.*

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***Element: In New Science vs. Traditional Iranian Medicine (Tim).***

*Although, the definition of element in new science and traditional science is similar but, the meaning and purpose of it is different in each one.*

*What is element?*

*In new science element is a simple chemical substance that consists of atoms of only one type and can not be split by chemical means into simpler substance and elements are categorized according to mandaliiove chart.*

*In traditional science like traditional Iranian medicine (TIM) element is a simple substance which can not be split to smaller parts.*

*Elements are categorized in TIM like Ave sina's kanoon as follows:*

- 1)elemental soil
- 2)elemental water
- 3)elemental air
- 4)elemental fire

*Ave sina, the grand scientist of Iran has written the above category but,has pointed to some substances like Iron,copper,oxygen and etc.in his valuable literatures.How is it possible?*

*The reason is behind the purpose of this categorization .The base of the category above is a sensible categorization not a chemical one.*

Molfese A.

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***La sanità dei porti e i medici di bordo nell'antichità'.***

*La sanità dei porti e i medici di bordo è materia antica; i primi popoli civili (Egizi, Sumeri, Fenici e Greci) e poi Etruschi e Romani, per far fronte ai commerci sempre in aumento, utilizzarono sempre più navi e porti; ebbero anche la necessità di emanare leggi affinché il lavoro sulle navi e nei porti, fosse svolto secondo norme ben precise, tutto ciò anche per evitare danni alle persone e alle cose. L'autore passa in rassegna come le conoscenze scientifiche del tempo nella loro evoluzione hanno accompagnato questa importante attività dei trasporti sul mare, dell'assistenza sanitaria a bordo delle navi dai primordi ai giorni nostri.*

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***Storia dell'assistenza sanitaria sul territorio. La condotta medica. Nascita, evoluzione e tramonto.***

*Già nella medicina delle antiche civiltà (egiziana, fenicia, etrusca) erano presenti i tentativi da parte dello Stato di assistenza alle persone bisognose in caso di malattia sul territorio. Roma codificò ed estese anche con l'aiuto della Chiesa l'assistenza capillare nelle città e nei paesi; nel XII secolo a Firenze, Bologna ed altre città erano presenti medici stipendiati dal comune così come nei vari stati (sardo, sabauda) e poi nell'Italia unita.*

*La condotta medica con l'unità di Italia ebbe un riordino ed una connotazione propria anche perché tanto era il lavoro da svolgere. L'autore passa in rassegna la evoluzione dell'assistenza sanitaria sul territorio con il particolare riguardo alla nascita evoluzione e tramonto della condotta medica.*

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***F.N.Marquet, Nouvelle méthode facile et curieuse pour connoitre le pouls par les notes de la musique, Paris, 1769.***

*Curioso trattato che affronta un problema di semeiotica medica secondo un doppio registro: all'interno, cioè, di un'ottica medica e di un'ottica musicale.*

*Metodi affini erano già conosciuti in passato, ma l'autore s'impone sia per la competenza medica e l'accurata casistica addotta, sia per la preoccupazione di elaborare un metodo accessibile ai più, sia per la totale fiducia (ed è questo l'aspetto più originale) nel potere taumaturgico della musica, capace di curare il corpo e l'anima.*

*Non soltanto, quindi, un "curioso" trattato, ma un documento e una testimonianza di come lo statuto della musica, nella coscienza comune e in quella scientifica, si avviasse, a metà Settecento, verso una complessa realtà di decodificazione del mondo e non solo di autonomia estetica, sfondo o intrattenimento.*

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***The history of prevention of traumatization in fighters in Republic of Macedonia.***

*The author presents the fight as one of the famous sports in the world. The traumatization of the strongest and healthiest men in the world accompanies the fight since it growing up till today. The causes for traumatization in fighters are studied and classified in accordance with their importance. The paper presents scientific suggested program for reducing of tramatization, as well as recovering the sportsman after competitions. The normative documents and the project for new law for sport or supplement to current law for sport, especially in the part for prophylaxis of traumatization and posttraumatic rehabilitation.*

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***Parum Affinitas In Chirurgia Plastica***

*Il tentativo di modellare i tessuti e le forme biologiche attraverso l'infiltrazione delle stesse con sostanze plastiche è antico quanto le conoscenze mediche dell'umanità. Ippocrate descriveva l'utilizzo della "acqua di catrame" e Plinio il Vecchio e Celso riportavano l'uso del bitume e della nafta per le stesse finalità. Tra il 1830e il 1833 un barone tedesco, nativo di Stoccarda, Carl Ludwig von Reichenbach pubblicò una serie numerosa di lavori scientifici avendo come tema la "distillazione a secco di sostanze organiche". Reichenbach scelse come nome per la sua nuova scoperta il termine di "paraffina", derivandola etimologicamente dalle espressioni latine "parum" ( poco ) e "affinitas" ( affinità ) per designare la qualità estremamente non reattiva della sostanza individuata; era proprio la sua indifferenza agli agenti chimici come i forti acidi e gli alcali a determinare la plasticità del materiale. La medicina, pur nelle sue consapevolezza, è eseguita e soilupata dall'attività dei medici; in taluni di essi spesso il confine irrisolto fra ciarlataneria e prassi medica condiziona la sofferenza di pazienti che portano nel corpo i segni di una sostanza con parum affinitas con i tessuti biologici giustificando la validità dell'asserzione di Voltaire: "Les médecins sont des gens qui introduisent dans un corps qu'ils connaissent mal des substances qu'ils connaissent encore moins bien".*

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*The Crippled Faces Pavilion In Milan: The First Plastic Surgery Unit In Italy*

*In memory of Gustavo Sanvenero Rosselli (1897-1974), the father of modern Italian plastic surgery who died thirty years ago, the Authors report the origins, the activities and the finalities of the first plastic surgery unit built in Italy, in Milan, immediately after World War I. Starting from caring of crippled faces, the pavilion day-by-day increased its activities till to the world known abilities gained by Sanvenero Rosselli's team towards reconstruction of all the body areas. Congresses organization and scientific journals printings were also main goals achieved by Gustavo Sanvenero Rosselli, the true heir of Gaspare Tagliacozzi traditions.*

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*I Pionieri Della Chirurgia Plastica Nel Territorio Della Magna Graecia*

*Le tecniche chirurgiche che contribuiscono a modellare i tessuti biologici per restaurare una forma alterata sono naturalmente di tipo ricostruttivo e datano fin dall'antichità ippocratica (460 a.C.) ed ancor prima, come descritto nei libri sacri Hindù di oltre 1000 anni a.C. Durante la prima metà del XV secolo tecniche di modellamento della piramide nasale con finalità ricostruttive vengono praticate in due centri dell'antica Magna Graecia. Sulla costa orientale della Sicilia, a Catania, la famiglia dei Branca sviluppa una particolare abilità tecnica esecutiva nel ricostruire il naso traumatizzato. In Calabria, presso la cittadina di Maida, un'altra famiglia identificata nei Viano (definiti anche Boiano o Voiano) guadagnò fama distribuita in tutta Europa per l'esperienza e la competenza nella capacità ricostruttiva della piramide nasale. La specialità che aveva visto gli albori in Magna Graecia si è oggi distribuita in tutta l'Italia meridionale con la istituzione di insegnamenti universitari e con l'utilizzo delle esperienze di chirurghi, spesso di altra estrazione specialistica, che hanno subito il fascino della innovativa specialità.*

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*The epidemics of plague in art and literature.*

*Whenever plague epidemics stroke ,horor and panic were provoked.This has often been the subject for numerous novels.Moreover painters have managed to point out the tromos of the epidemic in their creations.The first mention of the plague is occurred in the Bible.During 1000 B.C.the filistine camp was infected as a divine punishment for the stealing of the jewish Holy Arc. At the end of the Middle Ages (1347-1351) the 1/4 of the European population was vanished due to the horrible epidemic.During the plague the European ideology was changed and a new spirit, that of the Renaissance was ready to appear. Boccaccio ,who lived in Florence during the plague ,writes in his “Decameron” (1350-1353) about the symptoms and the orgians that took place as a result to the general fear.At this time the European painters try to present the disease using the darkest colours.The plague is appeared as the :“Black Death” who leads a horrible dance of youths and elders.In 1665, Daniel Defoe describes the London plague in his novel “The journal of the plague year”.In the 20th.c.Albert Camu inoents a new epidemic incident in his novel “Plague”.The epidemic strikes Oran,an algerian city and is used in a metaphorical way;plague is the equal of the World War II or even of the absolute evil.*

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*La storia sociale delle pratiche di cura: Uno studio sul fare di Rezadeiras in Nova Friburgo.*

*L’obiettivo del presente studio è l’investigazione di come le pratiche della medicina popolare si costituirono in un tipo specifico di sapere, come si mantennero attraverso il tempo e quale fu la loro influenza su quello che le persone considerano come parametri per determinare quello che sono salute e malattia nel loro quotidiano. Investighei come i rezadores e le sue procedure rituali si mantennero come pratica fra gli abitanti del distretto municipale di Nova Friburgo. La nostra ricerca consiste del contatto personale con quelli che mantengono vive certe pratiche di cura. Furono realizzate e registrate in nastro magnetico interviste aperte e trascritte integralmente, seguendo un disegno metodologico di accordo con il modello che viene sviluppato per la chiamata storia orale. La nostra proposta è penetrare in quella rete di relazioni, ricostruendo un corso storico attraverso la visione dei rezadores. Le interviste furono elaborate in modo da permettere una migliore comprensione di come queste persone interpretano per se i concetti propri dell’universo della salute e della malattia. Al contrario di quello che noi immaginavamo, non esiste una trasmissione di questa conoscenza attraverso i rapporti familiari, di accordo con il succedersi delle generazioni. Il detonatore per la pratica della preghiera è legato intimamente 1) al fatto di ognuno loro appartenere a tradizioni religiose e molto marcanti e 2) di haver provato una situazione in cui c’era bisogno di una soluzione imminente e in quel momento si sarebbe rivelato in lorloro un tipo di “forza spirituale fino ad allora ignorata.”*

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### *Alopecia areata from the viewpoint of traditional Iranian Physicians.*

*Alopecia areata is a common disease affects approximately 2 percent of the population. Cortisone, minoxidil, anthralin and topical immunotherapy are methods for treatment of alopecia areata, but scientist are searching the new drugs for resistant type of the disease. Random screening to find a new drug is a difficult and expensive way. Using the old human medical and pharmacological experiences is another attractive way. Traditional Iranian Medicine (TIM) involves valuable experiences that the majority of them are available as written materials. Based on the frequency and degree of emphasis in quotations of traditional Iranian manuscripts and texts, the possible value and scoring of the pharmacological effects of herbal medicines has been determined. In this study drugs of alopecia areata (Daossilab) from the point of view of Iranian scientists such as, Rhazes, Aghili Khorasani, Ahoazi Majusi and ... are investigated and the list of related drugs on the basis of TIM texts and manuscripts has been ranked.*

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### *History of cardiopulmonary resuscitation (Cpr) and the developmental status in Iran.*

*One of the most important advances of contemporaneous medicine is related to the recognition of reversibility of sudden death. Just about 47 years ago, Peter Safar and Elam invented mouth-to-mouth resuscitation and the techniques for CPR had an independent development.*

*In 1960, CPR was developed. The A H A started a program for physicians with closed- chest cardiac resuscitation and became the forerunner of CPR training for all of the people.*

*The integration of the process, basic Life Support (A, B, C) and advanced life support (D, E, F), has resulted in the birth of resuscitation.*

*Predisposing factors, such as high rate of road accidents in Iran, sea drawing, and 8 years imposed war against Iran, and also the critical situation in Middle East caused the more sudden victim cases, result to this procedure was advocated in Iran. So, the need to evaluate and improve the CPR training and CPR itself in Iran.*

*At present, high percentage of the patients with the critical conditions are died. But , considering the short period of CPR history and progress and development of this science in such a short period , it is expected in future more number of critical cases be revived , In this article the way of reaching this goal and advancement of CPR is discussed in Iran.*

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***Ophthalmology teaching Mexico.******THE TEACHING OF OPHTHALMOLOGY IN MEXICO, XIX CENTURY.***

*Along XIX century, ophthalmology was training at Real Escuela de Cirugia, and then, at Escuela Nacional de Medicina.*

*In the first years ophthalmology was exercised for barbers and surgeons, and in 1824 some intentions was made to teach this branch of medicine in a modern form, but is in 1833 when ophthalmology obtain the recognition as a modern science.*

*At the middle of the XIX century came to Mexico new ideas and new procedures to practice ophthalmology, and then, it became a real scientific job.*

*In this work, I will demonstrate the evolution on the teaching of ophthalmology.*

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***Un sanctuaire thérapeutique du Dieu lunaire Mên à Antioche de Pisidie.***

*Le dieu Mên était notamment vénéré en tant que dieu guérisseur. Or, cet aspect de sa personnalité a souvent été négligé. Ses compétences médicales sont pourtant attestées par des sources micrasiatiques aussi bien épigraphiques qu'archéologiques. Dans des inscriptions expiatoires, le malade reconnaît l'erreur commise à l'égard du dieu et lui demande la guérison. D'autres fidèles implorent de Mên la sôtèria, c'est-à-dire le salut. Des ex-voto anatomiques ont aussi été dédiés à Mên, afin d'implorer son assistance médicale.*

*De plus, l'archéologie nous a révélé l'existence d'un sanctuaire de Mên fréquenté par des malades. À Antioche de Pisidie (auj. Yalvaç), les fouilles, menées dès 1911, puis en 1982-83, ont permis de découvrir un temenos de Mên Askaënos, délimité par un vaste péribole quadrangulaire.*

*Or, le mur d'enceinte était couvert de brèves prières adressées au dieu entre le Ier et le IVe s. Bien que les circonstances de la visite des fidèles ne soient pas précisées, il est probable, vu sa personnalité bienfaisante et populaire, que Mên ait été souvent imploré pour des problèmes de la vie quotidienne, en particulier des problèmes de santé.*

*L'un des textes confirme d'ailleurs le caractère médical du culte de Mên à Antioche. Consacré par un médecin nommé Hygeïnos, il se démarque par des caractères plus grands et par sa position stratégique sur le mur. Conçue pour attirer le regard des pèlerins quittant le temple, la dédicace assurait la publicité du médecin: sachant que de nombreux malades fréquentaient le temenos, Hygeïnos avait fait graver son texte en évidence, pour se faire connaître de ces patients potentiels.*

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*An illustrated history of the  
Gastrointestinal and abdominal medical  
imaging.*

*Part I. The early beginnings of the gastrointestinal radiology* Dragutin NOVAK, Croatia  
*Purpose: The aim is to show the early development of the gastrointestinal radiology, as the first step in the history of the gastrointestinal and abdominal medical imaging. Material and Method: In order to achieve an overview of the historical development of the gastrointestinal radiology, the original publications were studied and systemized in chronological order. The biographies of pioneers of the gastrointestinal radiology are illustrated with portrait photographs. Results: The following historical landmarks are described and documented with corresponding illustrations:*

*1. Upper gastrointestinal studies : W.BECHER (1896), W.B.CANNON (1896), J.-CH.ROUX and V.BALTHAZARD (1897), F.WILLIAMS (1901), G.HOLZKNECHT (1903), H.RIEDER (1904), H.HULST (1905), L.G.COLE (1905), M.KASSABIAN (1906), C.BACHEM and H.GUNTHER (1910), M.HAUDEK (1910), R.D.CARMAN (1917), G.FORSELL (1923); 2. Examination of the colon: A.SCHUELE (1904), G.F.HAENISCH (1910), L.G.COLE (1910), M.EINHORN and H.LAUREL (1921), A.W.FISCHER (1923); 3. Examination of the small bowel : H.RIEDER(1904), H.HULST (1905), L.G.COLE(1911), G.SCHWARZ (1924), G.S.PESQUERA (1929), E.P.PENDERGRASS (1935), J.GERSHON-COHEN (1939).*

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*H. Dunant et les secours aux marins: La  
Convention de l'aia 18 Ottobre 1907.*

*Ricerca storica delle radici delle idee umanitarie sul  
soccorso ai feriti ed ai naufraghi delle battaglie sul  
mare.*

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*The social life of the Christian physicians according to Ibn abu Usaybia (D. a.D. 1270).*

*Ibn Abu Usaybia is a historian of medicine dying in the late 13th century or so. His writing the so called 'Uyun al-Anba fi Tabaqat al-Atibba is a unique work for having records from missing books and valuable information. Thus it enlightened widely the medical development and the previous history of cultures before Islam in the Islamic world. He presents some valuable information about the social life of Christian physicians in the Islamic world.*

*It's possible to get knowledge of relationships between the Christian physicians and the caliphs, the Christian physician's attempts and lifestyle in the palace, their relations with the scientific circle, the troubles they faced in the palace, the places they stayed, their level of income, the goods they got, their dress, their special interests, collections, social preferences, family life, bickering between physicians, their occupations except being a physician, their examinations, their approach to the code of ethics etc.*

*This paper intends to get a general view of the Christian physician's social life and discuss them through the information that Ibn Abu Usaybia presented.*

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*The Dead Sea as a source of medications - Ethnopharmacological Study.*

*The Dead Sea, and the area surrounding it, has from antiquity been used for the production of medicinal substances, one of the most important of which was bitumen, extracted and sold by the Nabateans to Egypt, where it was used in embalming mummies. The peculiar physical properties of the water, caused by its high salt content, were well known to the Hellenistic scientists, many of whom ascribed healing powers to both the mud and the minerals. In addition, the surrounding desert was rich in medicinal plants. In addition to the medical and pharmacological writings from Hellenistic times and throughout the Arabic and Latin Middle Ages, the Dead Sea, its minerals and vegetation have also been widely described in travellers' descriptions, the earliest of which date from antiquity. Such references also appear frequently in the biblical and Talmudic commentary literature.*

*This paper collects the pharmacological and medical information connected with the medicinal products of the Dead Sea and its surroundings from the three above-mentioned ancient and medieval sources: 1) medical and pharmacological literature; 2) travellers' descriptions and geographic literature; and 3) biblical and Talmudic commentaries. The purpose of the investigation is to produce an updated picture of the perceived importance and usage of the Dead Sea minerals and vegetation, especially from the medical point of view, throughout history. This information could then be utilized in the search for new medicinal and cosmetic uses for the Dead Sea minerals and for desert plants in general.*

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*Some ancient Egyptian and modern proverbs related to ear, nose and throat.*

*This presentation will be a discussion of Ancient Egyptian Proverbs related to ENT going back to circa 1500BC. The modern proverbs prevalent in Egypt today related to otorhinolarygology will also be presented.*

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*Parenteral nutrition: Developments in the course of the 20th century.*

*In the 20th century important developments in parenteral nutrition took place. In 1928, Matas was the first to demonstrate the advantages of parenteral nutrition, also introducing the term itself. Proteins were already administered intravenously in 1889 by Neumeister, while in 1936, R.Elman confirmed the necessity of the administration of aminoacids for keeping a patient alive. Post Second World War, a revolution was brought about by a synthesis of Japanese concentrated aminoacids (Rhode 1949). In 1911, Mills administered olive oil subcutaneously to a person for sustenance. In 1930, Holt made clear that the supply of more calories is brought about with the administration of lipids. After failed attempts, an advance in parental nutrition was brought about by the discovery of a safe solution of lipids*

*(Intralipid), in Sweden, by A.Wretlind and Schuberth. Its safety is due to the diminished size of the chylomicrons. In 1945, Zimmerman announced the administration of fluids directly to a central vein (superior vena cava), which allows the use of concentrated medicines and solutions. A little later, Dennis administers from the central line intravenously 20% glucose with the addition of vitamins and of 300-400ml plasma instead of proteins. In 1967, Dudrick administers a mixture of proteins and a solution of glucose 40% to a child with bowel atresia. In the years that followed, important progress was made, resulting in its wide application. Today parenteral nutrition is safe and persons have survived due to its use, even at home.*

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### **200 Years of Scientific Medical Societies in Russia.**

*The first in Russia Scientific Medical Society was created in 1804 at Medical Faculty of Moscow University. It was called Society for Competition of Medical and Physical Sciences; later it received a new name: Physico-Medical Society and existed till 1918.*

*Professors of Medical Faculty were initiators of Society of Russian Physicians in Moscow (F. I. Inozemtsev, 1861) and many other scientific medical societies: Surgical (I. N. Novatsky, 1873), Moscow Therapeutic (A. A. Ostroumov, 1879), Moscow Obstetrical and Gynecological (A. M. Makeev, 1887), Society of Neuropathologists and Psychiatrists (A. Ya. Kozhevnikov, 1890), Society of Pediatricians in Moscow (N. F. Filatov, 1892), etc.*

*By the end of the first half of the 19th century the number of scientific societies did not reach 10, while by 1896 there were 120 scientific medical societies in Russia.*

*The Society of Russian Physicians in Memory to N. I. Pirogov (Pirogov Society), created in 1883, played a special role in the development of scientific and public medicine. Professors N. V. Sklifosovsky, F. F. Erisman, and S. S. Korsakov played an active role as leaders of the Pirogov Society. The Pirogov Society was liquidated in 1922 and resumed its work in 1995, with the aim of creation of social self-government of physicians in Russia.*

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### **Cultural and political reasons behind the foundation of asclepia in the Peloponnese area in Greece, and further beyond.**

*The Asclepia were temples consecrated to Asclepios. Places of worship and health centers, they were plain buildings in the beginning, acquiring additional structures through time. In the Hellenistic era they developed into luxurious monumental complexes or even groups of buildings reminiscent of citadels. It is interesting that as the size and the luxury of the temples increases the faith of the followers usually decreases. The great Asclepia of the Peloponnese were founded in the area where Asclepios operated during most of his active life. These events took place in the formative years of Greek mythology (1300 to 700 B.C.). Three provinces, Arcadia, Korinthia and Argolida, were the main centers of Asclepios worship. Local disputes were fertile soil for antagonism. In the Peloponnese there was always a division between the descendants of Achaeans and Dorians, where that between friends of Sparta and friends of Athens was added, while the big commercial centers of Corinth and Sikion were involved in the struggle. Thus the multiplication of the Asclepia was expected. In the competition Arcadia was the loser and its Asclepion of Gortyn, albeit older, was overruled by Epidaurus. From Epidaurus the worship of Asklepios spread to Athens after the great plague of the 5th century B.C, to Kos (influenced by Trikki), Sikion, Epidaurus Limira, Taras, Syracuse, Pergamon and finally Rome in 291 B.C. Thus, Epidaurus became the Mother-Church under whose aegis new spiritual and therapeutic centers were founded. Detailed photographic and textual material supports this thesis.*

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***Some thoughts on studying and teaching  
the history of pharmacology and  
pharmacotherapy.***

*The history of pharmacology and pharmacotherapy is often simply viewed as a collection of interesting or curious or even amusing stories. At a more serious level, it is usually argued that it is important to follow the enormous progress made through the centuries both in establishing knowledge and in developing new methods - or, alternatively, to realize the tragic mistakes made sometimes with the development and use of drugs. But mistakes can be dependably investigated only for the period of the last century. On the other hand, instead of studying a presumably triumphant course, it is rather more interesting to concentrate on the merits and the problems of the end of the course, i.e. of today's situation. But a more careful study can discern some important features. Instead of confirming an upward course with continuous accumulation of knowledge and improvement of therapeutic applications, one could see to emerge, again and again, a quite different picture: Presumable knowledge about drugs and their therapeutic use change during history on grounds and under conditions that are difficult to consider as based on what could be called sound scientific criteria, but are rather related to divergent theoretical systems or even world views. In the framework of such an approach, which is clearly akin to that of Thomas Kuhn's 'paradigms', some discussion follows on a) possibilities to understand better some motives or factors underlying such changes in views and in practices, b) consequences regarding desirable aims and content of the teaching of the history of pharmacology and therapeutics.*

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***Parenteral nutrition: An historical view  
from antiquity to the end of the 19th  
century.***

*Hippocratic Medicine (4th - B.C.) recognized the relationship between nutrition and disease and rules for prevention of illnesses by means of a particular diet were formulated. For parenteral nutrition, clear mention is found of indirect methods of parenteral administration, e.g. the mixture of medicines with honey administered sublingually or rectally. In Byzantine Medicine, dehydration was fought with an enema of chamomile, honey, wine and vinegar, a practice adopted by the Arabs.*

*The History of modern nutrition begins 300 years ago with Thomas Sydenham who revived Hippocratic ideas in the West. The first attempts of the intravenous (i.v) administration, firstly of medicines and fluids, and then of nutritional components from peripheral veins, date from the middle of the 17th century with the discovery of the flow of blood by W. Harvey. Christopher Wren is rightly considered the father of i.v. administration as he was the first to attempt i.v. injection in 1656. In 1831, Latta administered intravenously salt water to a cholera patient. In the mid 19th century, Claude Bernard administered hydrocarbonates intravenously to animals. In 1887, Landerer administered intravenously glucose to prevent shock, also discovering its administration as nutrition, while in 1896, Kraus was the first to administer a solution of 10% glucose to a human. Consequently, the idea of parenteral nutrition is a very old one, but only in the end of the 19th century was it introduced as a clinical practice similar to the contemporary one.*

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***Physicians grace lightened the medical society.***

*The circle of physicians that became Saints is separated into four units. They are the 20 Saints who offered their medical knowledge without money. They offered their charity as the only protractor. They are widely known as Saints Anargyroi (the three pairs of Saints Kosmas and Damianos from Rome, from Asia Minor and from Arabia), Saint Lukas who wrote and kept the Gospel, Saint Asclepiad, and the 12 women physician/Saints. These women were Saint Hermione, Zinais and Filonilla and are all exposed in the History of Medicine Museum, at the University of Ioannina.*

*Various physicians are famous as patients' Saint-protectors specialized in certain diseases, as leprous, blindness, deafness, mute and paralysis as Saint Gerasimos, Saint Paraskevi, Saint Antipas of the dentists, and Saint Stefano.*

*Apart from the physician-Saints, Christ is also known as the Great Physician. Smaller paints of His 24 medical miracles surround His portrait, which is unique in quality. These physicians lightened both the Ancient and the Byzantine era. They adopted the ancient medicine of Hippocrates and they combined it with the Christian for faith curing the human body and the soul. They were the natural advocates of the poor, and social problems were largely within their jurisdiction. They offered their experience, knowledge, and faith to their patients. They gave everything to their patients, and their life to the God. These physicians, men and women, became Saints and lightened the people with their knowledge and miracles. They are considered the pioneers of the social medicine.*

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***Quarantining prostitutes: Vd rapid treatment centers in World War Two America.***

*Concerns about venereal disease have typically increased during time of war, and the United States in the Second World War was no exception. In an effort to reduce the spread of VD, the U.S. Public Health Service (PHS) set up a national program of VD quarantine hospitals, with the cooperation of state health officials. By the end of 1943, over 20 of these facilities were in operation, and by the following year the number had grown to 47. Most of the hospitals were established near military training facilities or important war industry cities. Although some of these treatment centers eventually accepted a variety of venereally infected patients, including men and even children, the initial impetus for the development of this national network of hospitals was the concern about the infection of servicemen and men involved in essential war industries by prostitutes and other women who were deemed to be a threat to the health of these men. PHS Surgeon General Thomas Parran described these centers in 1943 as a program "to provide medical care for prostitutes and other promiscuous females who have a venereal disease." Using quarantine powers of the PHS and of the various states, government officials forcibly detained VD-infected women in these centers and treated them for their disease. Although some objections were raised against this policy, especially on the grounds that it discriminated against women, on the whole it seems to have been accepted by the public as a necessary measure in the defense of national security.*

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***The Saints - Healers in Serbia medicine and pharmacy.***

*The Cult of Saint Healers (Sveti Vraci in Serbia language) is closely related to foundation of first Serbia monasteries, hospitals and pharmacies. As it was in the Byzantine time, religion and healing were interwoven in medieval Serbia. Healing techniques used at those times resembled those that Christ used — not just healing with prayers but also with remedies as God's gifts. In some cases, when the contemporary medical practice could not give the answer, one would seek for Christian Saints' religious and medical protection. Because of all this, the Christian Saints-healers were highly respected. Serbia ethno-medicine and ethno-pharmacy recognized a large number of healers, such as: St. Cosmas, St. Damian, St. Pantelemon, St. Cir and John, St. Sampson, St. Diomid, St. Talalej, St. Lucas, St. Anastasija and St. Paul.*

*As a tribute to them, many monasteries and churches decorated with valuable icons, were built in Serbia. Some of the iconographical aspects will be presented in this paper as illustrations.*

*The influence of "miracle" icons to the health protection in 19th and 20th century, although based on autosuggestion, was so powerful, that the Cult of Saints Healers was spread through various institutions, not just religious but scientific, medical and pharmaceutical ones.*

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***The iconography of medicine and the healing arts.***

*The collective iconography of medicine and the healing arts is extensive. There are at least fifteen symbols commonly used to portray the disciplines of medicine and the professions of health. These include the direct deiform representation of Aesculapius and Imhotep; metaphoric symbols such as Hippocrates, Rhazes and Ibn al Jazzar; and metonymic symbols such as the Aesculapian staff with its entwined serpent, the caduceus, the patera and aspersorium, the eye of Horus, the cock, mortars and pestles and the Red Cross and Red Crescent. The late twentieth century saw an explosion of the iconographic symbolism of medicine and this trend continues vigorously today. An analysis of the contemporary symbols of medicine and a review of their evolution in the nineteenth and twentieth centuries shows that the process of such representation and symbolism begins with that of symbolic illustrative metaphor, passes through illustrative metonymy to that of catachresis and reverse synecdoche. The imagination and ingenuity of those who design new symbols of medicine knows no bounds - sometimes to the point where contemporary symbols of medicine and the health sciences have become obscure and their original datum lost. In extreme cases, if one does not have a knowledge of the history of medicine, the significance of modern medical symbolism has to be interpreted for those to whom the message is directed. This paper reviews the evolution of medical iconography which is portrayed in books, on signs, on medals and extensively in the institutional and commercial world of today.*

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### **Arthropods And Disease: The Evolution Of Knowledge About Insect-Borne Disease**

Five datum points define the evolution of knowledge concerning the pathogenesis of human disease. These include the Hippocratic four-humour theory (400 B.C.E.), organ-based pathology (Morgagni, 1761), tissue-based pathogenesis (Bichat, 1800), cell-based pathology (Virchow, 1858) and gene-based or gene-modified disease (2001). Superimposed upon this paradigm has been the parallel evolution of the understanding of external agents which cause disease. One important group of such agents are arthropods. The specific role of insects as vectors of human disease was discovered relatively late in the history of medicine. The datum discovery was that of Sir Ronald Ross of the Indian Medical Service, who demonstrated Plasmodia parasites in the stomach wall of Anopheles mosquitoes which had been fed upon the blood of malarial patients (1897). However, prior to this time, in Australia, the first linkage of insects as potential vectors of human disease was made by Dr Joseph Bancroft (1836–1894) who identified an adult nematode worm (later named Wuchereria bancrofti) in a lymphatic abscess of a patient in Brisbane in 1876. Wuchereria parasites were demonstrated in mosquitoes of the genus Culex; and it was suggested that the worm passed from the mosquitoes to the human host by contamination with water-borne parasites. Joseph Bancroft's son, Thomas Lane Bancroft (1860–1933) undertook meticulous experiments (1893–1901) to show that the mosquito was the intermediate host and vector of Wuchereria bancrofti and the cause of human clinical filariasis. Joseph Bancroft, in Brisbane Australia, was also the first to describe tick paralysis.

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### **Plastic surgery in the Bulgarian Monastery in the 19th century.**

In spite of the canonical taboos of the Orthodox Christian Church in one of the medieval Bulgarian monasteries – the Glozhen one, situated in the Central Balkan Range, small surgical operations are being practiced. The authors describe the surgical practice of the abbot of the monastery Hadji Eotimii (19th century), who realizes plastic corrections of the face – skin transplantations and rhynoplastics, he treats glaucoma by operation, otitis and polypuses, he operates traumas of the locomotory system. The beginnings of his surgical activity, realized with modern surgical instruments, can be traced back to 1875. The authors present him as the first Bulgarian monk performing surgical operations which is a breach of the laws of the church. The activity of Hadji Eotimii shows the high standard of the Bulgarian medicine in the monasteries during the late Middle Ages.

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### *Ricordi della sanità pubblica e della storia della medicina di Aquincum.*

Alla metà del 1 secolo della nostra era la parte del Transdanubio dell'Ungheria odierna cadde sotto il dominio romano. Sotto il regno dell'imperatore Claudio (dal 41 fino al 57) vi crearono una nuova provincia, con il nome di Pannonia, che difese i confini dell'impero dagli attacchi delle tribù minaccianti dall'altra parte del Danubio. All'inizio furono truppe più piccole di cavalleria che ebbero questo compito e dopo mandarono nell'89 sul territorio di Aquincum, antenato dell'antichità di Budapest, il Legio II Adiutrix. Nel 106 l'imperatore Traiano divise in due la Pannonia e da questo tempo Aquincum diventò la capitale della Pannonia Inferiore e la sede del proconsole. La presenza dei militari e l'organizzazione della pubblica amministrazione romana non portò solo cambiamenti politici nella vita degli abitanti del territorio, ma risultò anche la prosperità economica ed il cambiamento di qualità della loro vita. La vita economica e commerciale cominciarono a fiorire, la nuova capitale Aquincum fu costruita secondo il modello romano, le vie furono lastricate, costruirono acquedotti e canalizzazione, nelle case più ricche ci fu un riscaldamento del pavimento, costruirono bagni pubblici e privati, gabinetti con sciacquone, mercati coperti. Un valetudinarium, un ospedale militare si attaccò dal lato settentrionale al bagno che si trovava sul territorio del campo della legione. Durante gli scavi emersero parecchi strumenti medicinali, pinze, spatole, bisturi, piatti di fregamento adatti alla preparazione dei medicinali, anzi lapidee che conservarono i nomi dei medici dell'epoca.

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### *Le malattie dei marittimi tra il 1700 ed il 1800 in due porti dell'alto Adriatico: Trieste e Fiume.*

Trieste diviene porto franco durante il regno di Carlo VI (1716-1740) e, in particolare con lo sviluppo dato da Maria Teresa (1740-1780), presto il suo porto diviene un punto di riferimento importante per i traffici. Fiume, con minor numero di abitanti, comunque aumenta i traffici e la ricchezza. A Trieste, si insegna "scienza nautica" presso il Collegio dei Gesuiti (che chiude nel 1772) e successivamente in Scuole controllate dallo stato, vero e proprio embrione della Scuole Nautiche. Sia Trieste che Fiume, dotate di ospedali e "controllate" da lazzaretti, sono punti di riferimento sanitari per coloro che, imbarcati, scendevano a terra. Il fiamano Antonio Felice Giacich dirige per molti anni l'ospedale "dello Santo Spirito" della sua città (dal 1880 Ospedale Civico della Spirito Santo) ed è professore dell'accademia nautica; scrive "Lezioni mediche per i naviganti" opera fondamentale, in lingua italiana, del 1855, che, in cinque successive edizioni, diviene il manuale d'uso per tutte le navi della Monarchia.

Relazioni sanitarie, registri ospedalieri, verbali autoptici mostrano le patologie più comuni nei naviganti, in particolare i traumi ed un gran numero di forme infettive tra le quali dominano la sifilide e la tubercolosi. Non vanno infine dimenticate le epidemie: tifo addominale, tifo esantematico, peste, ed infine colera, la cui ultima epidemia colpì le coste dell'alto adriatico negli anni 1885 e 1886.

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***Insegnare la Medicina in tempo di guerra:  
L'esempio delle campagne militari del  
1848/49 e del 1859 in Lombardia.***

*Molto si è scritto a proposito delle campagne militari del 1848/49 e del 1859 in Lombardia, da un punto di vista storico-medico; meno intorno al rapporto fra l'attività delle strutture ospedaliere (civili e militari) indirizzata all'assistenza e la cura, e quella di formazione del personale.*

*Noto è il ruolo giocato dai grandi ospedali durante il periodo di chiusura delle Università lombarde; meno studiato è il ruolo degli ospedali militari (spesso di breve vita) in centri minori, nei quali si svolse anche un'attività di formazione del personale. Su questo aspetto si richiama l'attenzione dei Colleghi storici-medici. Si porterà l'esempio di Chiari, città della Lombardia orientale (in provincia di Brescia), sede di attività di livello universitario già nella campagna militare del 1848/49. Sarà ricordato Antonio Rota (1838-1897), esponente di una delle più importanti famiglie clarensi del tempo (il fratello Giovanni Battista (1834-1913) fu Vescovo di Lodi), che fra il 1857 ed il 1861 (anche durante la campagna del 1859) compì il suo corso di studi medici. Egli frequentò l'università di Pavia, quella di Padova nel primo semestre dell'anno accademico 1858-59, gli ospedali della sua città natale durante la campagna del 1859, e di nuovo l'Università di Pavia, ove si adottò nel 1861.*

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***Port Medicine in the Ionian Islands during  
the British protection (1815 - 1864).***

*The seven Ionian islands at the western part of Greece had a different cultural development, as they avoided the Ottoman dominion and since the end of the 15th c. were conquered by the Venetians, followed by French, Russian and British Rule, before the union with the independent Greek State (1864). Their differentiation in social organization, legislation and traditions influenced the attitude to public health, social welfare and protection against disease.*

✦ *After 1815 general standarts were quite satisfactory and comparable to the situation in other British colonies in the Mediterranean. Measures were taken for safe water supply, drainage of swamps, burial of the dead. Particular attention was paid to the measures governing the free communication among the islands, the operation of the Lazzaretti and the institution of quarantine.*

✦ *This paper analyzes the medical ideas applied in the Ionian islands when the principles of the preventive medicine were being established and the role of free communication from port to port in cases of epidemics was interpreted. The British and the local archives, the laws and the newspapers were the sources on which our study is based.*

✦ *Conclusion: the only part of Greece under the British Rule for 50 years was differentiated in precautionary measures taken mainly in the ports to protect the population from epidemic diseases.*

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***Spaventare o informare? - Esistono uscite?***

*L'obiettivo del presente lavoro è indagare che tipo di effetto le campagne usate dal governo brasiliano per prevenire e intervenire nell'abuso di droghe licite e illecite causa nella popolazione.*

*Per le campagne anti-droga, il Brasile usò due modelli: il modello dell' inpairimento e quello della informazione scientifica.*

*La nostra ricerca usò un totale di 34 adolescenti di 14 a 19 anni interni di una clinica conveniada con il Sistema di Salute.*

*Noi mostrammo sei posters – che fanno parte di campagne statali per il combattimento e o la prevenzione dell'uso di droghe nel paese - a pazienti tra i quali fumanti, non fumanti, viziati e ex-viziati, chiedendo che loro se manifestassero, dentro i suoi gruppi, sull'impatto che il manifesto gli causava.*

*I manifesti utilizzati non causarono nessun impatto negli utenti di droga e nei fumanti, causando, al contrario, profondo impatto nei non fumanti e negli ex-drogati.*

*La questione della salute deve essere pensata in rete, ossia nelle relazioni delle malattie coi i fattori biologici, sociali, culturali e principalmente nel gioco politico-economico.*

*Molto si è detto circa l'espansione dell'uso della droga, ma poco si è riflesso criticamente circa le ragioni della sua crescita.*

*Possiamo verificare che la droga è molto più una questione intrincada di un gioco di forze tra gli interessi economici e i politici, che propriamente volontà e atteggiamenti etico-umanitari attenti alla salute della comunità.*

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***Obstetric procedures that are obsolete and the relative instrumentation.***

*Embriotomy is the dismemberment of a fetus, when natural delivery is impossible, in order to effect its removal.*

*Embriotomies are classified into three groups:*

- 1. embriotomy to reduce the foetal head (craniotomy) a) perforation and b) cranioclasys;*
- 2. embriotomy to reduce the shoulders (clavicotomy);*
- 3. dissection of the foetus: decapitation and evisceration.*

*Embriotomic operations are among the most ancient obstetric procedures, and until the 16th century they constituted the central core of obstetrics (Naujoks).*

*Nowadays there are very few situations in which these operations are indicated and modern obstetrics has been able to eliminate embriotomy on living fetus. Craniotomy can be still used on dead foetus to avoid caesarean section, when the head is well engaged, but the delivery is not possible.*

*Clavicotomy may be indicated on dead foetus with severe shoulder dystocia. Foetal dissection can rarely be used in big foetal malformations.*

*The techniques of embriotomy and some instruments (cranioclaste, perforator, etc...), that have by now almost exclusively historical value, are reported.*

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***An historical review of the influence of medical knowledge on posturally healthy seating design.***

*Current research demonstrates that the health of the low back is best served by seating that maintains the natural curve of the low back, allows movement, and facilitates task.*

*Seating permissive of these three criteria first existed in 2800 BC. Interpretation of evidence indicates experience of comfort afforded by such seating and cultural concepts of posture contributed to these early healthy designs. In the millennia since such seating, cultural concepts of desirable posture have often been more influential in determining seating design than medical knowledge. The first correlation between medical knowledge and healthy seating design appeared in China. In the 17th and 18th centuries AD., Chinese knowledge simultaneously influenced both Western physiotherapy and seating design. However, the path to current concepts of posturally healthy sitting and seating has not been a straightforward marriage of medical knowledge and seating design.*

*This paper traces the correlation between medical knowledge and the rise and demise of seating functional to spinal postural health and facilitative of task over relevant periods in history.*

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***Corps humain et maladie chez Celine, Sartre et Malraux.***

*Trois écrivains, trois manières différentes d'envisager le corps humain et la maladie. Céline, le seul des trois ayant une formation médicale, se situe sur la position du réalisme biologique. Pour lui, le corps est quelque chose de « triste et de dégoûtant à regarder ». L'homme est déchiré entre sa volonté de vie et la réalité de la dissolution inéluctable de la matière organique dont il est composé. Fasciné par le visqueux, qui est essentiellement consentement à la perte du temps, il le repousse de tout son être. La prédominance du visqueux dans le monde et sa complicité avec une conscience malheureuse est le thème privilégié de Voyage au bout de la nuit.*

➤ *Même dégoût chez Sartre, où le temps a des effets semblables sur l'individu, avec son image : « ... je me regarde, je me dégoûte ». La maladie est vue comme une décomposition du corps. Dans La Nausée, la mollesse indifférenciée des individus, leur vieillissement sont irréversibles comme le temps.*

➤ *Malraux se situe à l'antipode de ces tendances. Il détourne son attention de l'anatomie du corps, comme de ses instincts, fonctions et maux. Il fait parler le « langage de chair » seulement lorsqu'il s'agit de personnages devenus inhumains, comme Grabot dans La Voie royale.*

➤ *Un aspect de la prise en compte du corps est la maladie qui l'envahit et empêche le héros d'agir (Perken dans La Voie royale, ou Garine dans Les Conquêteurs). Elle est expérience contiguë à la mort.*

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### *Herb medicine and healing rituals in the Nueva España.*

*Mexico is rich in information about the Nueva España Inquisition system. In these archives, there is a lot of information about the wide range of plants that medicine men and women used during the Viceroy Era for carrying out their healing rituals.*

*In general, these rituals were part of quite complex practices in which plants were just one element. Altogether, the several activities performed during this process had the objective of cure the person from his or her physical or psychological diseases. Such practices were very strange for several other population sectors and were declared too mysterious by the Inquisition. In fact, they satisfied a social need and kept alive the ancient Aztec tradition of healing, herb medicine.*

*This lecture will go over the general characteristics of this kind of plants, as well as the use of herb medicine as a ritual practice and the impact it had on the colonial society sectors.*

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### *Avicenna and Zeinaddin Esmail Jorjani'S theories on health.*

*The main task of a physician is to have perfect recognition of health dimensions before accurate diagnosis of a disease (Avicenna)*

*Avicenna (980-1037) and Jorjani (1042-1136) view that health is the result of interactive effect among four variables: heat, cold, moisture and dryness in a particular state of human body, which is called temperament moderation. This moderation also depends on such other variables as sex, time and place. Time can be considered the four seasons or the ages of human beings and the place can be assumed an extension of the climatic conditions or the different parts of the body. They have defined temperament as the most important index of health or illness. They have mentioned nine possible situations that is : moderate, hot, cold, moist, dry, hot & moist, hot & dry, cold & moist, cold & dry, and each of those may be considered a moderate temperament in terms of the body need. The temperament of ages is another issue which both scientists have dealt with. and they view that similar limbs of the body have their own temperament.. On the other hand, people of different climatic conditions have specific temperament and moderation.*

*Therefore, Jorjani has concluded that every body has its own particular temperament. Moreover, the temperament moderation of the body varies between extremes such that it will lose health if it exceeds these limits. and Avicenna believes that men's temperament has more warmth and dryness than women and on the whole ; Health and temperament need warmth rather than coldness.*

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***History of acetyl salicylic acid discovery  
remains unclear.***

**INTRODUCTION:** *The name of Felix Hoffmann is proclaimed as the name of the acetyl salicylic acid (ASA) inventor in Bayer AG official version till nowadays. But some works from 2000 supposed that another man, A. Eichengruen, Jew, took main part in this historical discovery in 1897 and that he was excluded from official version of Bayer in 1934 (when the Nazis came to power) due to his Jewish origin, because F. Hoffmann was a German.*

**PURPOSE:** *To try to estimate real pattern of situation in 1897-1898 years and yield whether anti-Semitic ideas played role in the absence of A. Eichengruen name in the history of ASA or this took no place.*

**METHODS:** *I examined materials of modern researching, accessible Bayer archives and official Bayer AG PR office information and made a comparative analysis. RESULTS: I've got a lot of contradictory information from both sides. The main idea of A. Eichengruen defenders is that he asked F. Hoffmann to synthesize ASA and distribute it among some doctors, without information about real sense of this substance.*

*Another point of view (Bayer's) insists that A. Eichengruen had no "reason to acknowledge the synthesis of ASA to him" – as wrote in their official information I've got.*

**DISCUSSION:** *It's a great field for further investigations because of lack of additional information and doubts in juridical opulence of claims from both sides. So, for nowadays it remains unclear who was the real ideological inspirer of ASA discovery and clinical use: A. Eichengruen, Jew, or a F. Hoffmann, German.*

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***Avicenna; and his influence on Medicine  
advancement.***

*Avicenna or Abu Ali cina was born in 980 A.D in Bokhara Iran (Iran in the past was very large country containing Uzbekistan ). Avicenna was very clever and when he was very young , progressed in all knowledge at that time . He was a genius and started to study medicine at 16 years of age. He became a famous medical doctor at 18 there fore he was chosen as king's palace doctor in samaniam era. Avicenna studied all books and papers about Greek medicine. Then he examined and searched independently in medicine himself and he became an expert in medicine .he decided to create a method in medicine and he succeeded to write a lot papers and books about diseases and treatment of diseases. One of the most famous books of Avicenna is Ghanoon (means low). This book was a textbook of medicine in the past. All scientists and medical doctors in the Middle East knew this book and when they wanted to cure patient's referred to this book in that time. Avicenna died in 1037 (A.D) in Hamadan When he was 57 years old. he was the founder of classic method of medical education .His books and papers about disease and methods of treatment were reference – books in middle East and Europe from 12 century until 17 century , Avicenna's method was the best method in medicine . His book (Ghanoon) was a textbook in medical colleges in Belgium and France until 1650. This book was republished many times in 15th and 16th century.*

*Avicenna not only was a great scientist and medical doctor in Iran but also he was an universal scientist and his name will remain in history of medicine .*

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***Insanity or prostitution. La Castañeda  
Mental Hospital (Mexico 1910).***

*“La Castañeda” General Mental Hospital was opened in 1910 with a double function as hospital and asylum for the psychiatric attention of mentally sick people of any age, nationality and religion. A secondary objective was to provide medical teaching through clinical practice for specialized physicians. Who were the people taken to this institution? This modern hospital was inhabited by children, criminals, old people, drug addicts and prostitutes. According to the hospital regulation, the inmates would be distributed in the following sections: Ward of the distinguished dangerous imbecile and infectious women. Here is where prostitutes were concentrated.*

*Frequently, anything that could be done in favor of the patients was hindered by a powerful system. This system created the very same problems it tried to solve. It was a system that created more mentally sick people, in the same way that prisons create more delinquency.*

*To begin, first women in this hospital were discriminated because they were labeled as prostitutes and mentally ill. Then, the effectiveness of the medial and administrative staff in the institution was highly questioned. And lastly, the patients were stripped of any rights they may be entitled to. Consequently, these factors worsened the health of the inmates rather than helping their condition.*

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***Secreta, experimenta, mirabilia. Dalla  
magia tropaensium alla rinoplastica di  
Leonardo Fioravanti.***

*Bisogna aspettare gli inizi del 1800 affinché J.C. Carpue introduca la rinoplastica nella pratica chirurgica occidentale. Il suo procedimento ispirato alla tradizione medica indiana vendicò in parte l'insuccesso del connazionale Garangeot, che un secolo prima aveva pubblicato il resoconto di un'operazione di reimpianto nasale dopo sezione completa. Tuttavia, la sua tecnica acquista un rilievo scientifico ignorato dai più. L'intervento illustrato dal chirurgo francese nel 1724 replicava infatti, dopo due secoli di silenzio, la medesima procedura che Leonardo Fioravanti aveva utilizzato nella campagna di Barberia del 1550. Allo stesso modo, il processo che portò Gaspare Tagliacozzi ad essere universalmente considerato il fondatore della plastica facciale scientifica è molto più complesso di quanto comunemente si ritenga, ed ha in Fioravanti un ispiratore non indifferente. Sviluppando un'idea di innesto mutuata dalle tecniche agrarie di insizione promosse dall'empirico e secretista bolognese, il più noto chirurgo si era avvalso del tradizionale "metodo italiano", che prevedeva l'utilizzo di un lembo cutaneo asportato dall'avambraccio. La diffusione di questo modello chirurgico, praticato prima dai Branca in Sicilia e poi dai Viano in Calabria, va proprio attribuita a Fioravanti, che nel "Tesoro della vita humana" racconta di aver sottratto agli stessi Viano il secretum della tecnica chirurgica. La magia tropaensium cessava così di esistere come patrimonio privato entrando a piena forza in quello divulgativo. La fine del secretum, stano a dirsi, avrebbe coinciso con l'ascesa della secretistica rinascimentale.*

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***The experimental work of Claude Bernard:  
An example from digestive physiology.***

*In this essay, I attempt to trace the grand ideas in the thought of Claude Bernard by analyzing one of his most important discoveries. In 1848, Bernard observed that pancreatic juice is capable of emulsifying and saponifying neutral fats in the diet. This discovery was so important that he used it to illustrate his ideas concerning the experimental method in medicine. Bernard's intellectual lucidity was based on studying scientific reasoning logically and placing it in specific conditions around a methodological discourse. Breaking down this concept and resorting to simplism in order to achieve a clearer understanding, laboratory procedures (scientific reasoning) were to be guided by ordered thinking (logical structure) and to follow strict experimental conditions (methodological discourse). For Bernard, ordered thought was indispensable in laboratory work, as was the establishment of experimental strategies, all of which were to be guided by a method. Within the complex of bernardian terminology, the following concepts are fundamental: a priori ideas, experimental criteria, determinism, doubt and counterproof. Each of these elements will be illustrated by elucidating the various steps involved in Bernard's discoveries in the field of the digestion of fats.*

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***The Medicinal Plant Fenugreek (Trigonella  
Foenum-Graecum) in old Iranian Medicine.***

*When considering the value of medicinal herbs, it is not their cost or exotic quality that matters as much as their versatility. Among these herbs is fenugreek. Fenugreek is a medicinal herb that was favored and advocated by the Prophet Mohammad (SAW) to be used regularly and by medicinal plant scientists (the so-called herbalists) for thousands of years and has been used extensively in Iranian Traditional Medicine (ITM). Fenugreek (Trigonella foenum-graecum) was traditionally used for gastrointestinal, cardiovascular, and respiratory disorders. It has also been of benefit for anyone suffering from metabolic disorders including diabetes as well as fatigue. It has also been administered as a topical drug for skin conditioning. There are also some strong documents on its application in anemia, constipation, urine retention and candida albicans.*

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### *The activity of ajdc's relief organization (Malben) in Israel (1949-1976).*

*The Jewish population in Israel counted 650.000 people at 1948, awaiting the mass immigration of Jews from Europe after the Holocaust and refugees from the Muslim countries. The very young country was exhausted, mourning the victims of the Independence War and was barely able to absorb the immigrants that many among them were sick, weak and old. During 1948-1951 almost 700.000 new immigrants arrived, bringing with them their diverse historical, social, cultural traditions as well as a broad variety of diseases and disabilities. The burden was overwhelming!*

*In 1949 the American Jewish Distribution Committee (AJDC) was asked by the Israeli Government to help and work in Israel. Their mandate was to take care for the aged and handicapped new immigrants.*

*For this purpose MALBEN was established, taking its name from the first letters of four Hebrew words – Mosad L' tipul B' olim Nechshalim.*

*The top priority was given to provide suitable care for the immigrants with Tuberculosis, which threatened to endanger large sections of the Israeli population.*

*In addition MALBEN expanded existing small facilities to accommodate thousands of aged, established rehabilitation centers for children, as well as numerous out-patient clinics. A large percentage of the "hard core" cases became useful, self supporting citizens of Israel during the years of MALBEN's activity. This kind of health care implementation by a relief organization, can serve as a model for other countries in times of crisis, due to war or natural disasters.*

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### *Histoire de la compréhension de la cataracte.*

*La chirurgie de la cataracte débuta il y a environ 4000 ans lorsqu'un chirurgien décida d'enlever l'opacité blanche qui rendait les gens aveugles. Toutefois la compréhension du mécanisme de la cataracte est beaucoup plus récente.*

*L'existence du cristallin dans le globe oculaire est connue depuis l'école d'Alexandrie. Les médecins accordaient alors au cristallin un rôle important dans la vision, mais en pensant que ce dernier émettait des rayons vers l'objet regardé ! Il fallut ensuite plusieurs siècles avant de comprendre la fonction du cristallin, puis d'envisager l'idée que son opacification était responsable de la cataracte. Ce n'est en effet qu'au XVII<sup>e</sup> siècle que Johannes Kepler (1571-1630) précise que le cristallin est une lentille capable de focaliser les rayons lumineux sur la rétine (qui devient alors le siège de la réception des signaux visuels). Et ce n'est que plus tardivement encore, en 1705, que Pierre Brisseau (1631-1717) comprend que la cataracte était une opacification du cristallin, découverte confirmée en 1707 par Antoine Maître-Jan (1650-1730).*

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*Du sommeil aux songes: théories et croyances dans l'antiquité.*

*Le sommeil, un don divin, décontracte à l'homme accablé et lui fait oublier ses inquiétudes. Par contre, une insomnie persistente, produite par la douleur ou l'angoisse, peut déclencher la folie. Dans la conception égyptienne les hommes endormis, comme les morts, plongés temporairement dans les profondeurs du cosmos en compagnie du soleil, résident dans l'océan primordiale, Noun. À l'aube ils rajenissent, purifiés et vivifiés, avec la ré-émergence du soleil. Néanmoins, chaque nuit les ténèbres reviennent et les rêves montent de cette profondeur abyssale avec les forces malignes du chaos: génies hostiles, émissaires des dieux, revenants. L'âme, en liberté, interroge les divinités sur l'avenir ou se soumette aux risques des cauchemars. En outre les songes profétiques insondables et l'incubation, provoqué dans les temples, étaient déchiffrés seulement par l'oneirocritès, prêtre de la Maison de la Vie. Le monde grec, à son tour, supposait que le sommeil arrivait au corps à cause d'un refroidissement modéré du sang et qu'avec le repos physiologique les songes surgissaient. Selon les idées orphiques, l'âme, délivrée de ses chaînes corporelles, se réplit sur soi-même et déploie sa propre activité. D'après Platon sa partie rationnelle s'endormit et les désirs et pensées de la veille se réveillent. Il y avait deux espèces des songes: les divins, inspirés par les dieux, allégoriques et interprétés avec un art régulier et des règles précises et ceux qui proviennent d'un état corporel. Plus tard Hérophile propose une taxonomie innovatrice qui se maintiendra au cours du christianisme avec quelques variantes.*

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*State organization of Navy Medical Service in Russia (XVIIIth century).*

*State reforms in Russian navy service began at the age of Peter the 1st. In XVIIIth century the naval frontiers of Russia were longer then in any other European state. Russian fleet grew appreciably, its staff included 50.000 persons. Meanwile the living conditions of seamen were quite heavy. The foodstuffs for long term preservation had low nutritional value. Drinking water got bad in wooden barrels. The air in small cabins was close and humid. The tallow candles gave not enough of light but a lot of fumes. The lack of sleep, the laborious work, the corporal punishments favoured the development of diseases. Well-known navy doctor D.Lind affirmed that in time of peace the death-rate on ships from diseases was such as in wartime. Substantial rate of morbidity and high mortality among seamen induced tsar to give particular attention to their health. A number of his edicts (1696, 1714, 1716) ordered to impruve provision and sanitary condition of fleet. These instructions were realized with the help of Naval Statutes (1720) and Admiralty Regulations (1722). However Russian fleet constantly experienced acute shortage of doctors and must have invited them from abroad. At the beginning of XVIIIth century the hospital schools attached to navy hospitals, created by Peter the 1st in Moskow, Petersbourg and Kronstadt, began gráduate home doctors. At the beginning of XIXth century Russia possessed the mighty fleet disposed on Baltic, White, Black, Barents and Mediterranean seas. Meanwiles the fleet kept on the lack of doctors as it was indicated in appeal of D.Samoylovich, inspector of Black sea Board.*

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*Navy medicine in the desert.*

Twentieth Century warfare has seen the extension of naval power to land based sites. Military operations in Iraq and Kuwait are recent examples. These conflicts have necessitated an adaptation of traditional naval medical procedures to desert-based sites. The United States Navy has had to reorganize its medical services to adapt to these new realities of warfare.

Among the many adaptations that have occurred are the reliance on prepositioned medical supplies and equipment, a highly sophisticated transport system, coordinated multinational services, reliance on both active duty and reserve (civilian) health care professionals and a flexible array of medical facilities ranging from the Battalion Aid Station to the full service, tertiary care floating hospitals.

Integrating these complex medical operations, involving health care professionals from several allied nations in a single command, is a landmark development in naval medicine. This paper examines the training and performance of a 500 bed fleet hospital based in Saudi Arabia from February to April 1991 in support of "Operation Desert Storm", the term used by the United States and its coalition allies for the military operation to remove Iraqi forces from Kuwait.

The Fleet hospital was the major source of health care in the war theater in support of the Marines of the First Marine Division and attached coalition forces. It managed the majority of the combat casualties the Marines experienced. The paper details the training and performance of the fleet hospital during the conflict.

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*A concept of visual aesthetics in medicini.*

Aesthetics in medicine is a differentiated extension of the idea of esthetics into the medical domain and the evaluation of medical activity from an esthetics standpoint. It can be seen as the realm of aesthetics in medicine as a whole. Accordingly, the topic of aesthetics in medicine and its evolutionary dimension have been grouped and discussed under three headings in this context: 1) The aesthetics of those spaces where medical activity takes place in general; 2) The aesthetic dimension the physician-patient relationship; and 3) The aesthetic changes in the patient as a result of clinical applications. Although the basic concern of medicine is the preservation of health, the third set has been considered more comprehensively in this study.

In this study, medical activity and its evolution has been considered and reevaluated in the light of a new perspective. This re-evaluation, with the concept of Aesthetics as its departure point, has been realized thanks to what we have termed "Aesthetics in Medicine".

In this study the concept of visual aesthetics in medicine has been described and its meaning has been discussed for medical student.

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***"The Remedy Of The Lizard". A treatment  
against Syphilis of XVIII Century.***

*Around 1782, an illustrated Doctor called Joseph Felipe de Flores gave a remedy to the treatment against syphilis. It consists in a special kind of lizard that only was in a very distant place of America, In "The Kingdom of Guatemala". The treatment published, explained the makings of this animal and the kind to be administrated to the patients of "The horrible sick".*

*This document caused a great argument between many important people, like Antonio de León y Gama, who wrote directions about the remedy. Subsequently Manuel Antonio Moreno, the Director of "The Real College of Surgery of Mexico" wrote a letter where the remedy appears like good for*

*nothing. Another people said the good nature of the remedy, et cetera.*

*This work only try to expose the different postures of some personages of the Illustrate period in Mexico, that permit us to know the medical knowledge of this epoch.*

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***The comparison of Yoga philosophy and  
psychotherapeutical schools; where is the  
place of mystical psychology?***

*In Yoga, the theory of chakras has an essential role in the understanding of the emotion and behavior of the human beings. Chakras are the main points in the stream of energy throughout the body.*

*The lowest Chakra is located in the lower limbs (feet) and when all of the above Chakras are closed all the energy streams through this Chakra, this produces tension, hostility, agitation, fear or anxiety in the person. Therefore there is the need for opening the above Chakra for resolving of these problems. The above Chakra is Pelvic Chakra that is located in sexual organs. Therefore, satisfaction of sexual drive is a necessary step for resolving of tension, fear, anxiety, hostility and other problems. This step is similar to the Freudian theory of Psychoanalysis with the emphasis on the role of libido and the importance of satisfaction of sexual needs without fear and conflict.*

*But if the other Chakras are closed and all of energy streams through pelvic chakra, the main life style of the person will be enjoyment seeking, such as the persons with substance dependence, sex addiction and so on. What is the solution? Opening the above Chakra, the umbilical Chakra, and the Chakra of superiority, powerfulness and dominance. The main work of Alfred Adler, the founder of " Individual Psychology ", was try to overcome the " inferiority complex". When this Chakra is open the main lifestyle of the person will be try for accessing more advantages, dominance and fight for victory, it's a necessary stage but if the above Chakras are closed and all of energy streams through this Chakra (etheric body) the person will spend all*

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*On the philosophy of treatment by means of music in Ottomans.*

*In Ottomans, the philosophy of treatment by means of music was a continuation of antique and Islamic philosophy blended in Turkish Sufistic experience. The theory of humors and temperaments was the main basis for medical evaluation. However, astrology, angelology, numerology, physiognomy and the specific musical tunes all were effective means required for successful treatment.*

*In some manuscripts on medicine and music we find information on illnesses treated by specific tunes played at a time regarded as effective for treatment. When the texts are studied carefully, it seems obvious that the aim of the musical therapy extends beyond the practice of medical treatment of organic diseases. For instance, provision and maintenance of a stable and sound character, training one to be a perfect person and maintain good will and motivating various emotions etc. As a matter of fact, when diseases expected to be treated by means of music is studied, most of them are found to be psychiatric. However, it is interesting to notice that musical tunes were also expected to influence specific organs of the body, that is having a physical effect.*

*Therapy by means of music as a field comprises and reflects all the aspects of the philosophy of the period. Consequently, it is misleading to approach the subject merely as a method of treatment.*

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*Anthropological and paleopathological investigations at the laboratories of the Varese Faculty of Medicine.*

*In recent years, the Archaeological Superintendency of Lombardy has performed several emergency excavations in the Varese area and found a large number of human remains. This led to a collaboration between the Head of the Superintendency and the University of Insubria, in particular with the Institute of Forensic Medicine, where personal identification is routinely studied. After the completion of the basic anthropological examination, we decided to extend the collaboration to the Laboratory of Human Morphology at the University in order to carry the investigations further.*

*We used forensic methodology as our first approach for examining the human remains. This allows the definition of general identification parameters and the detection of any macroscopic anatomical variations or abnormalities. When examining multiple burials, it allows us to define the DNA profile so as to determine the relationship between individuals.*

*Further details can be obtained through SEM analysis of hair, teeth and other tissues, with a range of magnification from panoramic to ultrastructural view (20-300,000 x), as was done in the case of the mummy found in Rimini.*

*Paleonutritional information was obtained through X-ray microanalysis of bones and burial earth. Our close collaboration with archaeologists was invaluable: it enabled us to participate in site inspection and study the human remains in situ, thus reducing the amount of data lost.*

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**Medici, chirurghi e assistenza sanitaria negli atti di canonizzazione di due Santi calabresi: S. Francesco di Paola e S. Umile**

*La relazione, basata sui processi di canonizzazione e le memorie agiografiche di San Francesco di Paola (1416-1507) e S. Umile di Bisignano (1582-1637), pone l'attenzione sullo stato della medicina calabrese, il suo sviluppo tra la fine del medioevo e l'età moderna; un'epoca in cui gli uomini, senza distinzione di classe, mostravano grande diffidenza per i rimedi scientifici, preferendo quelli naturali e divini, come dimostra il comportamento del barone di Belmonte, Giacomo de Tarsia, guarito dal taumaturgo paolano da una cancrena alla gamba.*

*Lo studio ricostruisce anche l'attività dei più celebri medici cosentini del '500, la loro azione contro la malaria, la peste, il vaiolo e la loro incapacità a curare gli effetti letali del veleno, spesso propinato a nobili e potenti, come testimonia la morte di Enrico d'Aragona, avvenuta a Terranova da Sibari il 25 novembre 1478.*

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**The role of Domenico Cotugno in the History of Proteinuria.**

*Domenico Cotugno (1736-1822) was the first physician to describe the presence of albuminuria in a case of dropsy which was described in the "De Ischiade nervosa commentarius". He aimed to demonstrate that coagulable substances are responsible for edema in dropsy as well as in the sciatic nerve sheath. Thus if drugs are able to move edema fluid into the urine with the consequent resolution of the dropsy, the same procedure could be useful in improving sciatica. In fact, he concluded that the use of vesicants on the affected site by inducing a skin ulcer, might remove edema fluid from the sheath of the sciatic nerve. Cotugno did not give much emphasis to his discovery since his life was characterized by a myriad of other observations and discoveries throughout his 20 years of intensive scientific and clinical activity, but his work had repercussions on other European scientists. In fact, his description was quoted by John Blackall who was one of the first scientists to do systematic studies of albuminuria. After that William Charles and Richard Bright related albuminuria to renal disease. Finally, in recent decades newer techniques, such as micropuncture in the rat and the use of dextrans, have provided much insight into the mechanisms of proteinuria.*

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***Nouvelles réflexions sur les instruments  
proposés avec figures dans le traité de  
Fistula in ano de John Ardern.***

*Les auteurs pensent que l'usage des instruments proposés par John Ardern pour traiter les fistules à l'anus n'est en rien explicite. Les manuscrits avec les dessins des instruments posent des problèmes d'interprétation de leur emploi exact. Le texte exprimé en latin et en vieil anglais du XIVème siècle n'est en rien limpide et pourtant John Ardern insiste sur l'importance de ces dessins puisqu'il écrit même : « ...that is it painted ». La méthode de recherche historique et critique nous a poussé à scruter et comparer d'abord les plus vieux manuscrits de la fin du XIVème siècle puis ceux du XVème. Nous voyons la transformation du graphisme des instruments au fur et à mesure du passage du temps. La beauté de certains manuscrits et de leurs figurations ne doit pas être un critère de valeur scientifique et cela se voit bien dans l'étude surtout de l'appareil innovant qu'est le Tendiculum dont l'emploi multiple prête à discussion.*

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***The well-received and appreciated  
hallucinations in the ancient anatolian  
Hittite Culture B.C. 2000 -750.***

*The significance of the relationship between culture and psychopathology has well been appreciated in the 21. century.*

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***Indo-Italian nose job.***

2,500 years ago Plastic Surgery has its beginnings in India. Indian Rhinoplasty, as it is now called is the method of choice for reconstruction of the nose to this day. It arrived in Italy, according to Castiglioni " Rhinoplasty was known to the ancient Hindus, [and was] practiced by the Branca family in Sicilia , to which it had been introduced by Arabian surgeons" (Castiglioni) Gaspare Tagliacozzi (commonly Taliacotius) in Bologna is considered the father of Plastic Surgery. In 1597 published a detailed and illustrated account of his method of raising a skin flap from the arm and Josef Constantine Carpué, the forehead flap of the Indian method, in October 1814 and Jan 1816 published the work that stimulated surgeons in Germany and France and gave details consideration to Tagliacozzi and his method, to the Indian method, his publication was a land mark in the development of Plastic surgery and as a classic in the history of Plastic surgery.

In this slide illustrated presentation it will be seen Hindu surgery was made known in Europe in the middle ages by the great arab physicians It surely was related to the making of new noses in Sicily in the early 1400s and ultimately to the publication of Tagliacozzi's famous book *De Curtorum chirurgia* in 1597 ".

From Poona in 1792 Thomas Cruso and James Findlay Senior British surgeons witnessed famous 'Indian rhinoplasty', and further evidence eye witness Manucci in 1686 of Rhinoplasty operation which took place in Bijapur. this Indo-Italian nose job will be discussed.

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***The important role of Italy in transmitting Medicine to Europe through the Salerno Medical School.***

We all know that Salerno Medical School had an important role in transmitting medical sciences to Europe. It was the first faculty to teach medicine in Europe. The Salerno Medical School was the major connecting link between East and West before the birth of European civilization and for many centuries transmitted Arabic medicine and other sciences to Europe. The method of teaching in this medical school was similar to the Arabic method, i.e. in the form of "teaching circles" where professors sat and each medical student was attached to and remained with his professor. There were four teaching circles and four professors. The first teaching circle was Arabic, the second Hebraic (Hebrew), the third Greek and the fourth Latin ( Romanic ). The goal of this type of teaching was to attract as many foreign medical students as possible.

The Salerno Medical School taught medicine for four centuries ( from the tenth century until the end of the thirteenth century ). The Salerno Medical School was the first faculty in Europe that allowed women to study and teach, for example Trutolla ( Trutta ).

Finally we can say that the Salerno Medical School was considered the first organized school in Europe, in which both Byzantine and Arab civilizations were integrated and through which most of the sciences entered Europe.

This had a major role in spreading the scientific renaissance to most European countries.

The aim of this paper is to highlight the important role of Italy through the Salerno Medical School in transmitting medicine to the world.

*A note on Ottoman naval medicine.*

Carlo M. Cipolla opens his *Guns, Sails and Empires* explaining why a pacifist like himself who suffers from sea sickness the minute he sets foot on a (docking) ship is engaging in a research on guns and sails. He claims that his studies on early modern Europe brought him to the realization, almost against his will, that during this period navigation and maritime warfare were of outmost importance in European history. This claim is applicable to Ottoman history as well, although the gaps in our knowledge are still considerable. The great Ottoman naval encounters in the Mediterranean and the Indian Ocean have been studied, but we are still unclear about Ottoman naval administration or the Ottoman perception of themselves as a maritime power. The identity of those who manned Ottoman ships has to be unraveled as well. Ottoman sources from the sixteenth and seventeenth century have a lot to say about naval finances or dockyard operations, but are silent on the people involved, especially the rank-and-file. Here a unique document from the end of the seventeenth century, found in Ottoman Prime Ministry Archive (Başbakanlık Osmanlı Arşivi) in Istanbul, can shed some light on the 'behind the scenes' of Ottoman naval activities. The document, written in Ottoman Turkish, is an internal correspondence in the Ottoman bureaucracy. It deals with the appointment of a surgeon by the name of Hasan to the prison at the Istanbul imperial dockyard. Hasan was to put the sick prisoners back on their feet: they should be able to board the ships again in time for serving in the coming voyages.

*Medical activities of teatinelian monks in Georgia.*

"During many years Georgia was my favorite country" notices famous Italian missionary Christoforo de Castelei (1627-1654) about our country. Catholic popularization in Georgia takes place from XIII and completes in 1845. During the period of time several representatives of the order of Jesuits work in various regions of Georgia. Noticeable from them is the order of Theatinelians members of order: Archanjelo Lamberti, Giuseppe Judiche, Putro Avitabile, Geronimo Karapha, Justo Prato, Antonio Jardina, Seraphino Philinjeri, Claudio Gaetano Korlito, Mateo Phlorini and Christoforo de Castelei. From them returned to the motherland only Arqhanjelo Lamberti and Cristeforo de Castelei, others died in Georgia. Noticeable representative of this order is Christoforo de Castelei. The main aim of the missionaries was to spread Catholic religion among the Christian and Muslim Georgian as well as other nations on the Georgian territory. They never deg, they always support themselves by working as painters, carpenters jewelers, doctors and so on. The last one was most important in their activities and they gain the trust of local population. The part of the residents they baptized as Catholics. Christoforo de Castelei notices that "compared with Hypocrates medications the local medical plants have magnificent treatment facilities" and this means that by his own observation and practice he prefers herbals of western Georgia. The manuscript which describes activities and work of Christoforo de Castelei remains deposited in Palermo translated into Georgian and published. In the book except of his "relations" there are 570 drawings, which makes very impressionate introduction of that time Georgian medicine issues.

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*Medical properties of archeological excavations in Georgia.*

A lot of issues of Georgian Ancient medical history studied based on the information of archeological findings. On the medical scope the materials gathered on the Georgian territory we grouped by the usage in Medical practice. From medical tools which have been made by iron, copper, horn, stone, bronze, bone remarkable: Early Paleolithic era - 1. Axe, 2. Scrubbers, 3. Knives, which have been used in birth delivery, removing haematomas and abscess, removing alien agents from the body, refitting the surfaces of wounds; Late Paleolithic era - 1. Scrubber for trepanation 2. Needle (sawing wounds). Mesolithic era - Kephaltroibe for embryotomy and removing the infant body parts from uteri. Neolithic era 1. Knives, 2. Nadders, 3. Hammer, 4. Saxifrage, 5. Tweezers, 6. Needles which have been used for treating the severe wounds and lesions, 7. Bronze oval probe which have been used in medical manipulations for treatment and diagnostic activities. Eolithic era - 1. Double-sided knives, 2. Swords, knives for embryotomy, abscess and phlegmon treatment. 3. One two and three cogged hooks for dilatation of medical manipulation area 4. Segmental tools used like shears. Antique era - 1. Shears 2. Silver and horn spoons which have been used for medical manipulations also for dosing and pharmacy. Medical crockery: Neolithic era - 1. Stone cupful, 2. Loam crockery with snake image; Eolithic era - 1. Double-vessel cap, 2. Tuns with image of snakes and goat, 3. Double-Cone shape torch 4. Double-belly vessel with the image of snake mouth and eyes, 5. Chint, 6. "Sucker";

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*Problems of integration of physiological experiment and clinical practice in scientific works of V. A. Basov and I. P. Pavlov.*

V.A.Basov in 1862 has created a method gastrostomy - an experimental basis of physiological research of function of a stomach and gastric surgery - using a clinical case of a posttraumatic gastric fistula as methodological base. Also, I.P.Pavlov has created a method of imaginary feeding on methodological base of a clinical case gastrostomy, the imposed to the patient concerning thermal stricture a gullet. The combination of a method of imaginary feeding with the method of gastrostomy has allowed I.P.Pavlov to create the model of physiological surgery of a gastroenteric path and to discover principles of gastric secretion.

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***Hygiene of the women, hygiene of the nation: the socio-political and medical View of Dr. Miriam Aharonova 1889-1967.***

*Dr. Miriam Aharonova is one of the forgotten founders of the Israeli Health system, and one of the few female doctors that made their way to the top of it. Born in White Russia in 1889, she learned medicine in St. Petersburg, and was trained as a Gynecologist. Since 1921 she was the head of the Bryansk maternity hospital. In 1929 she left it all behind, and immigrated to Palestine, then ruled by British forces. After few months in Ein-Harod, She moved to Tel-Aviv and established (and then headed) the first consulting station for women in Palestine.*

*Through her life Aharonova dealt with spreading what she saw as the right ideas about hygiene and public health. She frequently wrote in medical newspapers, both professional and popular, and even published a revolutionary book, dedicated to women health in Hebrew. One of her main interests was mothers' guidance, especially in the pre-marriage state.*

*Her articles reveal a fascinating mixture of ideas: European medical ideas from St. Petersburg aside Zionist views, Eugenics aside with Socialism, women rights aside with believe in male superiority. Her concepts about birth (at least three for each Jewish woman) and abortions, emasculation and self restraint, and proper personal as well as national hygiene restrictions shed a light on the medical concepts that accompanied the Israeli nation building process.*

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***History of medical records from the cave to cyberspace.***

*The Medical record is the who, What, Why, Where, and How, of patient care in the hospital. The history of medical record parallels with the history of medicine. Primitive medical records carved in wood and chipped in stone date back to approximately 2500 BC. In subsequent centuries, hieroglyphs found on parchments recorded scientific records. Although very different from modern medical records, those chronicles preserved medical achievements of those eras for later generations. Throughout the millennia, medical records have evolved in conjunction with the advances in the art and science of medicine.*

*The earliest documentation of medical practice in India is found in Athervaveda. The sage Atreya wrote the first Indian textbook of medicine Atreya Samhita. Ancient Greek medicine was influenced by contributions from Egypt, Babylon, and Assyria. Greek Medicine started a scientific approach in to the heart of healing. Hippocrates, the father of medicine (around 460 BC) wrote the Oath bearing his name, still sworn by physicians today. Hippocrates maintained detailed case reports of his patients in ancient Greece. Ancient Persia: (200 AD) After the fall of Rome, ancient medical records were best preserved in Persia These ancient records showed a treatment for Sciatica by cauterizations on the ear. The earliest improvements in medical record services derived from hospital standardization movement in 1918, and ultimately led to improved organization of medical record services and medical record staff. Today we can see many formats of medical records, and their grate role in health Industry.*

### *History of anaesthesia.*

*Perhaps no advance in medical knowledge has alleviated more human suffering than the discovery of anaesthetics. An overdose of alcohol had been a convenient and often employed agent to produce a state in which the pain of surgery was relieved. During the late 1700s and early 1800s in England, a great deal of research on the properties of gases, including their effects on human beings, was carried out at "pneumatic institutions." The skeptics lost no time in lampooning these 'games', and many of their efforts were very funny. A great gift to mankind was made by an American dentist Horace Wells in 1844, with the use of nitrous oxide for a tooth extraction, still a durable legacy. Shortly thereafter the famous use of ether (Letheon) by Morton at MGH in Boston for the excision of a neck tumour spread throughout the world. The discovery of chloroform by Sir James Simpson and its use in childbirth by Queen Victoria was another landmark. When Carl Koller utilised the effects of cocaine, it led to the origins of regional anaesthesia. Then followed spinal anaesthesia by August Bier. Now an intimate knowledge of anatomy along with pharmacology had become all important. The use of intravenous access led to further use of local anaesthetics, but it was the discovery of the muscle relaxant d-tubocurare and the advances in the manufacture of 'pure' narcotics (following morphine) that truly led to the techniques of "balanced anaesthesia." Some authorities stated that in conscious individuals, all noxious stimuli reach the brain. But the last century truly saw an exponential growth in the knowledge of pain transmission.*

### *Il ruolo dei musei sull'insegnamento della storia della medicina.*

*Un museo di storia della medicina che lavora come istituzione di preservazione delle esperienze di diverse culture nel campo della salute, ha bisogno di svolgere un ruolo più significativo sulla formazione medica. Partendo da questa filosofia, il Museo Abrahamo Brickmann (Ribeirão Preto, Brasile) dal 1985 svolge un ruolo importante nel corso della formazione di specialisti. Lavagna luminosa: temi diversi sulla storia sono presentati per la discussione, con visite diverse al Museo, alle biblioteche e lo completa con una monografia. Dopo 18 anni di lavori con risultati positivi, raccomandiamo che il tema, l'importante funzione dei musei sull'insegnamento della storia della medicina debba essere più considerato nei congressi per migliorare la formazione medica.*

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*From healing plants to chiropractic.*

*In recent years, the population's awareness and use of complementary medicine therapies have increased in Israel and the rest of the world. Therefore these therapies have been incorporated into the health services.*

*Some people consider this medicine as an alternative field to the conventional medicine, while others regard it as a complementary field. This is the reason for the multiplicity of names, like: "alternative medicine", "integrative Medicine", "unconventional medicine", etc.*

*Complementary medicine includes a large range of therapies, some of them which are accepted by doctors and some are not known at all. From cupping glass, medical plants, reiki and meditation that are considered as an ancient traditional medicine to chiropractic, homeopathy, hypnosis, acupuncture etc, that are considered as complementary medicine and are popular in the western world.*

*Currently, people turn to complementary medicine mainly because of musculoskeletal problems (particularly low back pain) or tension and anxiety symptoms.*

*This research will describe the development of the complementary medicine in Israel in recent decades, it's position in the medical services in the Israeli health system, and the various complementary treatments in the medical history of Israel.*

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*The founder of the Russian experimental physiology.*

*Ivan Mihaylovich Setchenov (1829–1905) is the Great Russian physiologist, the founder of the doctrine on reflexes of a brain and scientific psychology. For the first time he has distributed a reflex principle to activity of a brain. In experiments on frogs he has shown that in myelencephalon there are mechanisms which actively detain reflex movements. Thus, he has discovered central (Setchenov's) inhibition (1863). He has put forward an idea about reflex as a basis of mental activity: "All acts of conscious and unconscious life are reflexes". He has suggested studying mental processes by means of physiological methods described in his classical work "Reflexes of a brain". I. M. Setchenov became a founder of a new trend in airspace medicine in Russia. The tragic death of two French aeronauts Croce-Spinelli and Sivel who rose in 1875 on a "Zenith" balloon to the height of more than 8600 m struck Setchenov and stimulated him to investigate the causes of the disaster. The alveolar air composition was unknown at that time, and Setchenov wanted to understand how the changes in partial oxygen pressure in the lung air were related to changes in atmospheric pressure. He designed an absorptiometer, a device permitting to analyze gas consumption by whole blood and plasma with high accuracy and to study gas tension in the blood. His estimations showed that aeronauts reached the height at which partial oxygen pressure was so low (20 mm Hg) that it could no longer support life. Setchenov was the first to investigate in detail partial oxygen pressure in the alveoli in health and in "fluctuations of air pressure downwards".*

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MOSCOW [t.sorokina@med.pfu.edu.ru](mailto:t.sorokina@med.pfu.edu.ru)***Physicians of the world against violence and terrorism.***

*Physicians as representatives of the most humane profession have always been against violence, terror, and terrorism. The principles of European and World medical ethics were laid by the ancient Greeks. They were formulated in the Hippocratic Corpus and the Oath. Later it was interpreted by the ancient Romans as "Primum non nocere", a universally worldwide medical principle. Mediaeval doctors protested against violence: Paulus Aegineta, Ibn Sina, and Paracelsus who had the courage to assert during the epoch of inquisition that "Physician has no right to be an executioner or his helper".*

*Wars have been a cruel manifestation of violence at all times. In the middle of the 19th century the mankind recognized the need in organized care of wounded and sick warriors during war. Florence Nightingale headed the first of Sisters of Mercy in Scutari (1854, Turkey). N. Pirogov for the first time organized the activities of Sisters of Mercy at the battlefield (1854, Crimea), and H. Dunant, after the Battle of Solferino (1862), became the founder of the International Red Cross movement (1863). His appeal to render care to all victims of war irrespective of the nation, race or religion got worldwide support. Due to their profession, physicians were the first to realize the horrors of nuclear war consequences and initiated the movement "Physicians for Prevention of Nuclear War" (1980, B. Laun, USA; E. Chazov, Russia). Today international terrorism troubles physicians all over the World. We admire Dr. L. Roshal who participated in negotiations in the captured theater Nord-Ost, rendered care to all who needed it.*

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[squirrel@hol.gr](mailto:squirrel@hol.gr)***Can contemporary medicine explain the placebo effect? From conditioning to meaning response.***

*Claude Bernard in 1867 recommended "comparative observation" to "reason about what we have observed, compare the facts and judge them by other facts used as control".*

*In the early 1950s the acceptance of the so called "double blind procedure" increased noticeably and after 1960 Randomized Controlled Trials were widely accepted as the only valid method to evaluate the efficacy and safety of new therapeutic methods or agents.*

*During this period we can identify increasing concern about the placebo effect itself and its explanatory mechanisms. A lot of studies appeared between 1960 and 1980 that tried to attribute placebo effect to personality factors and to identify, what kind of individuals were "placebo responders", without any significant success.*

*In the same period some researchers tried to demonstrate that some placebo effects can be attributed to classical (Pavlovian) conditioning. However, the focus in psychological theory is rather more cognitive than behavioral. Accordingly, the most recent explanatory mechanisms implicated expectancy, social learning and meaning response (the physiological or psychological effects of meaning in the treatment of illness) and have shown promising relationships with placebo effects.*

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### ***Child-Youth psychiatry in Bulgaria- Historical aspects and perspectives.***

*The child-youth psychiatry in Bulgaria is one of the youngest branches of psychiatry, but with rich traditions and achievements. The child and youth psychiatrists Prof. Christo Christozov, Prof. Meglena Achkova, Prof. Lubomir Timchev, Ass.Professor Svetla Stambolova, Ass.Professor Nadja Polnareva are well known internationally. The listed below autors have contributions not only to the development of child-youth psychiatry in Bulgaria, but in Europe as well.*

*The aim of present paper is to evaluate the development of the child-youth psychiatry in Bulgaria with stress on the achievements in the different periods and it's main representatives. There is discussion on current trends and problems.*

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### ***Mathematics and the history of neuroscience.***

*Sophisticated applied mathematical and physical techniques have expanded the utility of medical imaging devices. With the advent of functional magnetic resonance imaging and positron emission tomography, in vivo physiologic measurements can be made illuminating neurological and cognitive processes. The information gained by these imaging techniques has allowed an additional application of mathematical techniques to the modeling of brain and mind functions. Brain functions have been effectively modeled using techniques such as neural networks, while cognition has been modeled less successfully by advanced physical theories. I will raise the question of whether mathematical/physical modeling of cognitive processes is theoretically possible. In this regard, two important questions arise. First, what is the relation of brain activity to cognitive processes? John Hughlings Jackson provided an answer to this question in his formulation of neurology as a science in the mid-nineteenth century. Second, are cognitive processes amenable to treatment by mathematics and physics? The answer to this question involves the nature of cognition and the definition of mental functions. I will argue that the application of mathematics to imaging technology has yielded important scientific and clinical information about the brain, but is by its nature incapable of answering such questions about the mind.*

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***M.Ya. Mudrov - the Reformer of University  
medical education in Russia.***

*The famous Russian intern M.Ya. Mudrov played an outstanding role in the reformation of medical education at the Universities in Russia. The result was a radical reorganization of medical teaching that took part in the first quarter of the 19th century which brought medicine in Russia closer to the medical standards of Western Europe.*

*An introduction of clinical teaching into the subject of internal diseases at Moscow University was also connected with the name of Mudrov. He amplified the educational model of I.P. Frank with his own pedagogical ideas which helped to improve the level of clinical training of students.*

*M.Ya. Mudrov initiated the teaching of pathologic anatomy at medical faculties of Russian Universities. He was one of the first in Europe (1825) who suggested introducing pathologic anatomy to students not only as a practical subject of morphologic signs of diseases but also as fundamental science that studied the morphologic base of pathologic processes and pathologic anatomy was recognized as a scientific base of clinical medicine.*

*M.Ya. Mudrov made a great contribution to the introduction of the first unified curriculum at the medical faculty of Moscow University, which regulated a severe consecution of teaching of all subjects. This curriculum identified clinical teaching as the core and the final stage of medical education.*

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***Teaching history of medicine at I. M.  
Sechenov Moscow Medical Academy.***

*History of medicine (H.m) is a compulsory subject which is included into the curriculum of all higher medical educational establishments in Russia. At I.M. Sechenov Moscow Medical Academy the cultural-civilized method of teaching is used. Medicine is regarded as an inseparable part of culture. A compulsory course of H.m. covers a wide range of topics such as the evolution of medicine in all civilizations, the connection of medical and hygienic notions, health and disease definitions, scientific concepts and the used technologies with ethnologic cultural traditions, religious and philosophic theories. Such an approach in teaching makes it possible to show the succession in the development of ideas and technological opportunities of medicine, as well as their dependence on a cultural level, a state of economics, natural science, social ideology and technology. Other specialized topics of H.m. are discussed in the courses of different subjects such as anatomy, physiology, surgery etc.*

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**Queen Mary Karađorđević great benefactor  
Of The Red Cross Nurse School.**

*According to the memory of the contemporaries Queen Mary Karađorđević (1900-1961) has been known as a quiet, patient and modest person ever since her childhood. Through the Queen Office, Queen Mary was benefactor and founder of over fifty humanitarian societies, sometimes a lone, sometimes together with the community of Belgrade. Queen Mary, all by herself, was taking care of the donations for churches, hospitals, children's homes, students and the old people. Soon after coming in Belgrade, Queen Mary became interested in the work of the Nursery School. This School was founded in the spring of 1921. and in June of the same year, an entry competition for the school girls was opened. In the same year, a cornerstone for the School in Deligradska Street No 31 was laid. Lectures and practical exercises, according to the fixed schedule, started on the first November. Queen Mary to 1923. has given the regular, annual financial support amounting to 10.000 dinars of that time. Queen Mary visited the Red Cross Nurse School regularly. A photography of Queen Mary white the director, teacher and the schoolgirls has been conserved as a proof. There is also a photography of Queen Mary in the nurse uniform, with the face of Kosovka girl. The first emblem of the Nurse School being also a symbol of this profession, was inspired with the painting »Kosovka girl«, by Paja Jovanović. This girl was our first nurse. The chroniclers had recorded charitable work of Queen Mary, and our duty is to bring it out of oblivion.*

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**Teaching in the history of Medicine and  
Health Care in Finland.**

*Since the 1920s the history of health care has been taught in Finland. And since the 1930s courses in the history of medicine have been given when MD Gunnar Soinin was appointed docent in the history of medicine. He lectured on the history of medicine until the end of the 1950s. A new era started in 1975 when these lectures were started again by Professor Harald Teir at the Department of Medical History. In the beginning these courses were given twice a year, but later once a year. These courses have been both compulsory and optional courses. Since 1993 on the initiative of Professor Ismo Virtanen the courses have also formed a part of the postgraduate studies at the Faculty of Medicine. And the amount of the students attending these courses has increased year by year. But also courses or lectures on the history of pharmacy, odontology and veterinary medicine have been given at the University of Helsinki. Even at the other faculties of medicine in Finland history of medicine has been taught. In 2001 MD Heikki S. Vuorinen was appointed docent in the history of medicine at the University of Tampere and one year later at the University of Helsinki. And the collections of the history of medicine, health care, odontology, pharmacy and veterinary medicine, which have been used in the teaching in the history of medicine, are now, since November 2003, opened to the public at the new Helsinki University Museum.*

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***Inhalative oxygen therapy - A reassessment of the History of the most Basic Therapeutic Agent in Medicine.***

*This survey analyses the history of inhalative oxygen therapy and its interactions with the history of anaesthesiology. We start with illustrating „the long way of oxygen“ from its first isolation by Carl Wilhelm Scheele (1772) and Joseph Priestley (1774) to its breakthrough for therapeutic application in the 20th century. We show that the two main factors delaying the successful implementation of a truly rational oxygen therapy were of technical nature [1, 2]: The complicated and costly production of the gas and insufficient means to apply it continuously and with reliable and sufficient dosages to the patients. Both problems could not be satisfactorily solved until 1902. From this year on, however, the „Linde Process“ allowed cheap mass-production of oxygen. Simultaneously, various inventions of modern pressure gas technology allowed to overcome the application problems. Here, a special importance is to be awarded to pressure reducing valves. These were first introduced into medical technology by Draeger Inc. (Lübeck / Germany) on a significant scale, proving particularly successful in anaesthesia and rescue-devices [e.g. in the „Roth-Draeger Anaesthesia Apparatus“ (1902)]. Critically discussing earlier research, which assumes that „modern oxygen therapy“ was „founded“ by the British physiologist J.S. Haldane (1860 - 1936) in 1917 [2, 3], we finally propose a historical reassessment, accepting the year 1902 as the internationally decisive „turning point“ towards the development of modern oxygen therapy.*

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***Archeological discovery of medical instruments and equipment from the ancient roman period at the territory of***

*Archeological excavations at different locations on the territory of Serbia revealed the existence of original objects from the Ancient Roman period. The significant number of those objects belonged to the history of medicine and pharmacy's field. The equipment and instruments are well preserved and dated back between 1st and 3rd century. In Viminacium, that was the capital of the Roman province of Upper Mezia (today Kostolac), five tombs of physicians were discovered. The original medical instruments buried with the deceased, were preserved in the cylindrical bronze boxes (theca vulneraria). In one of those boxes, found in a tomb of the "medicus et chirurgus oculusarius" from Viminacium, nine medical and surgical instruments from the period of Dioscorides` were found. Interestingly enough, it also contained two-millennium old medicines in forms of pastilles (catapotiae) and powders (parapaste). Different forms of surgical and pharmaceutical instruments employed at Roman time were found in other locations in Serbia: Singidunum (today Belgrade), Sirmium (today Sremska Mitrovica), Felix-Romuliana (today Gamzigrad). The most common types of medical instruments found are: scalpels, surgical scissors, tile cautery, epilation forceps (vilsella, volsella), hooks, blunt and sharp (hamus, hamulus), cataracta hooks, bone forceps employed with fractured bone, instruments for trepanation. The pharmaceutical equipment and tools used for preparing medicines of various shapes and sizes that were discovered, included balances, mortars with pestles, mixing bowls, spatulas, storing jars and vessels for medicines and cosmetics.*

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EDO. DE MEXICO zaga8@hotmail.com***Medicine and Crime at the end of the 19th century in Mexico.***

*Mexican medicine during the last years of the 19th century was quite aware of the scientific advances of Europe and the United States of America. As part of such advances, Mexicans also observed what was done to deal with criminals and delinquency in general.*

*The positivist, liberal, Darwinian and Spencerian trends proposed a wide array of theories about the causes of crime and why a person would become a criminal. Medicine was the main engine to create hypotheses within a new branch of science called criminology. Important contributions were also made by scientific advances regarding physical and moral standards.*

*This lecture will cover the birth of this new science in Mexico and the causes and treatment of crime in this country during a peace time between two revolutions.*

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***Diseases and medicine in Soviet camps in memories of former prisoners of Gul-ag.***

*On the map of Russia, captured by Bolsheviks, the camps, called initially 'concentration camps', became characteristic islands of particular repressions. The people imprisoned there originated from all the nations of the Soviet State, from almost all the nations of the European continent; also there were people from Asia and a few from both Americas and Australia. All social groups and classes could be found in the camps. The so-called 'work reformatory camps' were supposed to fulfil two basic functions: a repressive and exterminational one and also they were a huge reservoir of almost free and mercilessly exploited labour. Work was the main right and the main duty of the prisoners (zekhs). The amount of food, the prisoners were served, depended on individual effort put into work. That system of exploiting physical possibilities as well as extremely harsh conditions in camps (severe and unhealthy climate; living in primitive and dirty barracks, dugouts or tents; scarce clothes, that did not protect from cold; a plague of parasitic insects; persecution from prisoner-criminalists, etc., etc.) resulted in numerous diseases, first of all the hunger disease. It was manifested by enormous decrease of body mass, oedemas, chronic diarrhoea (panos) and avitaminoses: scurvy, pellagra and night-blindness. The prisoners suffered and died, among others, of tuberculosis, spotted fever, dysentery, infections of respiratory and genitourinary tract. Among noncontagious diseases accident traumas and internal organs diseases (heart, kidneys) as well as skin illnesses dominated.*

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*La malaria in Calabria.*

*La malaria in Calabria trova le sue origini nella fine del periodo magno-greco (VI sec. a. C.). Da questo secolo, la storia della malaria diventa storia dell'uso del territorio ma anche storia politica, economica e sociale.*

*Dall'analisi delle carte topomalariche redatte dal Comitato Provinciale Antimalarico delle tre provincie calabresi (Cosenza, Catanzaro e Reggio Calabria) negli anni della bonifica (1930-1935), è emersa la geografia della distribuzione del vettore (zanzara "anophèles") del parassita malarico (Plasmodio) in Calabria (15.080,32 km<sup>2</sup>) ottenendo un'area con alta presenza (3.270,75 km<sup>2</sup>; 21,69%), una con media presenza (4.606,56 km<sup>2</sup>; 30,55%) e una con totale assenza (7.203,01 km<sup>2</sup>; 47,76%). Le aree storicamente (XVIII-XIX secolo) umide coprivano una superficie di 2.290,70 km<sup>2</sup>, pari al 15,19%.*

*La malaria in Calabria ha selezionato positivamente due anomalie genetiche: la talassemia ed il deficit di glucosio-6-fosfato deidrogenasi. Le distribuzioni di frequenze di queste anomalie sono perfettamente correlate alla distribuzione del vettore malarico.*

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*Il Vaiolo in Calabria.*

*Questo lavoro presenta, preliminarmente, quanto gli Archivi di Stato di Cosenza, Catanzaro e Reggio Calabria conservano sul vaiolo in Calabria. In particolare, dal fondo Sanità Pubblica e Marittima – sezione Intendenza – dell'Archivio di Stato di Cosenza, si è risaliti a sei epidemie avvenute negli anni 1858-59-68-69-70 durante le quali si ebbero 2.305 casi con 308 morti e 181 guariti. Le epidemie si susseguirono, come si evince dallo stesso fondo – sezione Prefettura – negli anni 1919-20-21 durante le quali si ebbero, nei soggetti non vaccinati, 628 casi e 154 morti su una popolazione media di 556.375; nei soggetti vaccinati, i casi furono 324 e i morti 64. Dal 1913 al 1921 furono operate 79.581 vaccinazioni di cui 62.727 con esito positivo e 84.459 rivaccinazioni di cui 52.184 con esito positivo. Dall'Archivio di Stato di Catanzaro, fondo Sanità Pubblica e Marittima – sezione Intendenza – si sono estrapolate le prime campagne di vaccinazioni effettuate tra il 1807 e il 1811 in alcuni comuni della Calabria Ulteriore (nel periodo napoleonico le due Calabrie Ulteriori erano unificate). Dallo stesso fondo – sezione Prefettura – invece, si sono estrapolate le vaccinazioni effettuate negli anni 1888-89-90-91-92, nella maggior parte dei comuni della provincia di Catanzaro (attuali provincie di Catanzaro, Crotone e Vibo Valentia), con 12.436 vaccinazioni di cui 11.142 diedero esito positivo. In particolare, si è acquisito il dato definitivo relativo ai casi e ai morti di vaiolo avvenuti nel 1889 nella intera provincia di Catanzaro. Su una popolazione media di 424.194, si registrarono 390 casi (con 126 morti).*

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***Asklepios in ancient cilician numismatics.***

*Various gods and goddesses were the primary subjects of ancient coins. The Healing God Asklepios and the members of his family and his attributes were among the frequent coin subjects in ancient Cilicia. As a coin type most of the time, Asklepios/Hygieia representations for many cities didn't have a particular importance unless they needed the help of the Healing God. However, there were some cities with an Asklepios temple where the cult of the Healing God was especially important. Together with others, ancient numismatic materials prove that ancient Aigeai and Irenopolis in Cilicia were two cities that owned significant cult places of Asklepios. The coins that we study in this paper will shed light to some important aspects of the Asklepios cult in Cilicia that were either obscure or unknown before. This paper will add to our knowledge on the worship of the Healing God and his cult in ancient Cilicia during the Roman Era.*

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***The history of anesthetics and recovery in Traditional Iranian Medicine (Tim):***

*Natural drugs with anesthetic properties date back to at least several centuries ago and have repeatedly administrated by ancient famous Iranian physicians for some kind of surgical interventions, even before the development of current anesthetic agents. There are many documents about this usage of traditional drugs by inhalation or by oral administration to induce or maintain anesthesia. Furthermore, there are also some strong evidence on natural medicine, which can facilitate or accelerate the recovery process following anesthesia. In this respect, a book entitled "Kerghe Bakheih" has introduced some herbal mixtures for these purposes.*

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*Historical aspects of enteral nutrition.*

*The history of nutrition is as old as the history of humanity. Interestingly, we find the first written references concerning the importance of feeding for health and life in Homer's epic poems (1200 b.c.). However, only the last decades has the principal role of enteral nutrition been adopted in clinical practice for the better outcome of diseases. The decade of the 1970's constitutes the starting point in the application of direct enteral nutrition. In 1973, Delany for the first time used elementary alimentation with an intestinal catheter directly to the small bowel and in 1980, Hoover demonstrated that with this method the intestinal mucosa remains intact. Two years later, in 1982, D. Mona proposed that enteral nutrition begin immediately after the placement of intestinal catheter, in the operation theatre. In 1987, J. Daly confirmed that with timely elementary alimentation, abdomen distension is avoided. He remarked that small initial doses of 10-20 ml are sufficient for avoiding postoperative paralytic ileus. He has also verified that the delay of nutrition commencement increases the risk of complications from intestinal inertia. F. Moore, at the same time, demonstrated the superiority of total enteral nutrition, in comparison to the total parenteral nutrition, in reducing septic complications after severe abdomen trauma. Finally, in 1992, J. Daly introduced the addition of arginin,  $\omega$ 3 fatty acids and nucleotides in the elementary diet to ensure the decrease of septic complications. The time will show, if the combination of enteral with parenteral nutrition (overlapping) constitutes the method of choice.*

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*The history of sports and sports medicine in the Philippines.*

*Sports medicine is fairly new in the Philippines and is now only being advocated. But one cannot view it apart from the history of sports in the Philippines in general. This paper traces the history of sports in the Philippines, especially its indigenous sports, and the introductions made by the American colonizers; the main problems encountered and some of the latest policies, innovations and concerns. Then it will go into the early inroads of sports medicine, what have been done so far, what the problems encountered are, mainly, in correcting many myths and misperceptions that abound, in the need for specialists, further training and the setting up of clinics nationwide, to be truly scientific and in the service of sports in the country.*

*The paper also delves into the attempts to start " a revolution in fitness and sports and the value transformation that goes with it. These were part of the nation-building and national recovery program of then President Fidel V. Ramos. At that time, a Master Plan for sports was crafted as well as a Sports Summit held.*

*Just what have been the follow-up and results of these initial moves to improve sports considerably, under subsequent administrations of Joseph Estrada and Gloria Macapagal Arroyo will be discussed, including the lessons learned and the tasks ahead.*

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### *Histoire de la Tracheotomie a travers les ages.*

*Ce geste chirurgical qui consiste en l'ouverture antérieure de la trachée est destiné à empêcher un être humain de mourir. Cette intervention est rapportée comme étant la plus ancienne de la spécialité O.R.L.*

*L'histoire de ce geste est intéressante mais étonnamment brève. Et comme tous les actes majeurs, avant de trouver sa place dans la thérapeutique, la trachéotomie, va connaître des heures de gloire et d'oubli.*

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### *Lunar position and attempte suicid with drug poisoning?*

*In This Study moon Phases ? Condition Of The moon in The SKY? and attempt To Suicide With drug intocicated policy ? effort of suicide? has been studied.*

*This Study has been ? done? From shaban 1416 to shaban 1419 during 3 Lunar years on The Patient That Contacted to mashhad Emam Reza hospital in poisoning emergency room .*

*In This Study 13422 case of Attempte Suicide who were registered in the insurance policy of hospital has been inoestigated ? studied? with out considering its success or fail ? most of Them have been failed? and patient sex ? most of Them were female?*

*Regestration was in solar day of the years so it comvoerted to the lunar years . The days have been deoided in to four groups due to the situation of the moon ? point of view of the person who was in the earth? and the cases have been categorized in four groups as follows (crescent,crescent to full moon ,full moon ,complet moon to crescent ) the conclusion has been analized statistically with ?chi?square test.*

*Conclusion : most of contact patient with attempt to suicide were in date that full moon or likeness distriubition of case in fuor groups of moon period was significant statistical different (  $p < 0.05$ ).*

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***Moctezuma: An early description of Susto from contemporary sources.***

*Susto is a culture-bound psychiatric syndrome prevalent in Mexico, and Central and South America, as well as among Latinos in the United States. Symptoms, as described in the DSM-1V, include sleep and appetite disturbances, feelings of sadness, lack of motivation, and feelings of worthlessness and dirtiness. Somatic symptoms may include, muscle pains, headaches, abdominal pains, and diarrhea. Victims of this condition "also experience significant strains in key social roles." It is traditionally attributed to a frightening event that causes the tonalli or "soul" to leave the body. Drawing on the observations of contemporary sources, the authors of this paper propose that Moctezuma, a brutal warrior and emperor of the Aztecs at the time of Spanish contact, displayed all the symptoms of this disorder, and was thus so immobilized that he was unable to lead a resistance to Cortez and his small band of soldiers. In the relatively short period of two years, he did nothing to counter the Spaniards as they fomented rebellion among his subject peoples, and he allowed himself to be held a virtual prisoner, though his warriors were, at least initially, more powerful than his captors. The authors conclude that a major factor in the conquest of Mexico was the lack of effective leadership because the Aztec leader suffered from this psychiatric disorder.*

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***A comparative study on basic and clinical pharmacology and traditional Iranian Medicine (Tim).***

*The following viewpoints of the present pharmacologists are very close to the scientists of the Traditional Iranian Medicine. There are many evidence for this idea as follows:*

***1. Experimental findings:***

*TIM scientists were interested in true experimentation. For instance, Zakaria Rhazi (Rhazes) had mentioned more than 60 points about trial (Al-Havi Fit-Teb). Although they believed animal experiments are very important, testing drugs on human beings could determine validity of final results (clinical trial). For the potential toxicity of drugs, testing on animals had always been primer to mankind as a matter of safety.*

***2. Classification, Pharmacodynamics & Pharmacokinetics:***

*TIM scientists have divided drugs in to different groups according to their potency-toxicity and their effects. For example, according to potency-toxicity, drugs have four degrees from safe to toxic and they are divided in 3 major categories, for their effects. They have also worked and researched on different effects of drugs on the human body. For example, Aavecima has worked on reduced effects of drugs due to frequent usage. He believed that a single drug shouldn't be used continuously for a long time because the effects would be diminished, and he calls this phenomenon as "TAHAMMOL" which equals "TOLERANCE", in the current medicine.*

***3. Logical drug therapy:***

*Traditional Iranian Medicine scientists had used diet therapy as the first choice for the treatment of diseases, then using monotherapy and, finally combination therapy.*

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***Hippocratic methods in the wandering empirical doctors of eastern mediterranean at the Ottoman period.***

*A great number of empiric doctors performed specific medical practice in the geographic and mainly in the legal frame of Ottoman Empire, presenting an explicit categorisation. They were distinguished in: a) those who dealt with internal diseases, b) those who were specialised in fractures and the re-setting of the limbs, c) practical doctors specialising in the treatment of abscesses by cutting them open or with the application of poultices, d) those who specialised in the removal of stones e) or with the treatment of hernias, and of course all these categories were differentiated by that of charlatans. In the present paper the medical action that is carried out by the empirical doctors, and mainly surgical techniques, is studied in detail and is compared with the systematic descriptions of Hippocrates and Galen, and also those of the greatest and famous Byzantine physicians. A continuous and strict application of these methods by these empirical doctors, appears to be rescued through a close oral teaching and an absolute specialisation passed on from father to son, in a very close family professional network, so much close that in certain cases required the use of special idioms, in order to prevent the perception of the medical terms from the patients and their environment. The fact that these traditional medical families did not have any relation or contact with the medical schools of West supports absolutely the opinion that medical knowledge was transferred at the same time via the Byzantine authors and the oral spread in both worlds of East and West.*

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***Greek hospitals in the eastern Mediterranean at the post Byzantine period***

*The Byzantine tradition of hospitals (xenos) is continued in the wider region of Eastern Mediterranean even after the change of historical – political background, due to the dramatic events of 1453. Two cases of xenos in Constantinople, those of Duke Petros Sofianos and monk Josef at the 16th century are the natural continuation of this tradition.*

*A line of hospitals (Nosokomeia) are developed by the local Greek communities, depending on the political conditions that prevail. Cases such as that of island Chios, that because of the sovereignty of Genoese created a powerful infrastructure in the subjects of sanitary care, that were also continued during the Ottoman domination, constitute a particular example. The action of certain economic-professional teams also imposed the building of Hospitals, such as the Hospitals of Constantinople during the 18th century.*

*In the present article the recording of all hospitals, the study of the effect of various factors in their foundation and operation, the concise analysis of the system and the quality of services in the Greek Hospitals of the wider region of Eastern Mediterranean is attempted, in order to enlighten the situation of medicine in the region, in a time period of sovereignty from a different political-religious system, and emphasize the links with the Byzantine and furthermore the Hippocratic medical tradition, and also the very important effects of Renaissance in the operation of these institutions and in the medical progress.*

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### *The great plague of Candia (1592 - 1595).*

*After the Latin conquest of Constantinople in 1204, the Venetians conquered Crete and the most of the Greek islands. Crete and its geographic place played a very important role as a colony and the capital Candia represented the major trade center and a main naval base of East Mediterranean Sea.*

*During the Venetian rule, 45 plague epidemics occurred in the city of Candia and the other cities of the island.*

*Historical sources, like the << Historia della peste nel Regno di Candia >> ( 1592 ), by the chronicler Ioannis Vergitsis and the correspondence of the Venetian officers, Nicolo Donato and Filippo Pasqualigo with the Great Council of Venice, provided us with detailed information about the disease and its political, economical and psychological effects on the Greek and Venetian population of Candia, as well as the hygienal organization, the principles of preventive medicine and the authorities' activities in emergency situations.*

*At the same time, an explanation is given to interprate the lost opportunity for the Great Ottoman Armada to conquer the deserted city.*

*Conclusion: A great epidemic of plague in Candia, Crete, under the Latin rule is analyzed and studied according to historical and various other sources.*

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### *Detecting Tuberculosis - analysis of a national campaign.*

*At the end of World War II, many countries made a concerted effort to deal with the endemic scourge of pulmonary tuberculosis. The Australian Federal government began a national campaign which the Prime Minister expected 'to reduce tuberculosis to a problem of minor importance within two decades'. This ambitious project involved regular compulsory mass screening of the entire adult population, spread over an area of nearly eight million square kilometres. Thirty mobile X-ray units traversed cities, rural areas and offshore territories until 1981, when the campaign finished. By that date, the incidence and mortality rates of tuberculosis were amongst the lowest in the world. Public health officials credited this achievement to the intensive case-finding project, but their confidence may be misplaced because the commencement of the campaign coincided with the introduction of effective chemotherapy. In any case, the incidence of the disease in Australia had been steadily declining for almost a century.*

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***17th century Turkish medical works by  
unknown autors on experimental medicine.***

*In this paper I have introduced some works written by unknown authors on medicine in Turkish in the 17th century. This sort of works are in few in number some of them even has no dates. They mainly deal with mystic and medical subjects. One of these works was a treatise on colds ,influenza (ailments). The author of the work says that he treated an Ottoman official in Smyrna (Izmir) and he was asked to write about on the subject.*

*In comparison to 14th century unknown authors ' works in Arabic these 17th century Turkish medical treatises merely deal with treatments of common ailments. To clarify the matter I also give some examples from the 14th century medical works by unknown authors in Arabic on human anatomy and medical science probably based on translations from ancient Greek works or Avicenna's work.*

*This research work of mine based on my recent studies in the University libraries in England, and Scotland and the British Library in London.*

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***The life and works of an Ottoman  
Pharmacist of italian origin: Antoine  
Calleja (1806-1893).***

*Belonging to a Ottoman family of Italian origin, Antoine Calleja was born in Constantinople in the beginning of the 19th century. He studied pharmacy probably in Italy-Pisa. On his return to the Ottoman Empire he was charged in teaching chemistry and pharmacy at the Imperial Medical School in Istanbul and ran pharmacies at the Capital City for forty years.*

✦ *Named as Kalye Effendi Kalya Bey or Master Antuvan in the archival sources, he was formally gratified with the top civilian title (ula evveli) equivalent of military pasha due to his services to the Empire. He was the founding member of several associations of pharmacy and medicine in Constantinople, contributor of legal texts regulating the pharmaceutical practice in the Ottoman Empire and author of coursebooks he professed at the Medical School.*

✦ *The paper will deal with this interesting Ottoman-Italian figure on the basis of excerpts from his life and works in the Ottoman State.*

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**Kepler among the doctors: V. F. Plempius's  
'Ophthalmographia' (1632).**

*In 1632, V.F. Plempius (1601-1671), a Dutch doctor known for his participation in the scientific polemics of his time, published an ophthalmic treatise entitled Ophthalmographia, which included anatomical, physical, mathematical - i.e. optical - and philosophical approaches to sight, as well as a section on ocular pathology. Most of the seventeenth century doctors believed vision occurred by an extramission of visual rays, following Galen (ca.129-ca.199), while mathematicians had tried to prove, and further refine, the so-called intromission theory. An important step in the mathematical tradition was made in 1604 with the publication of Kepler's theory of image formation. In an attempt to bridge the gap between mathematicians and doctors, Plempius advocated Kepler's theory of the retinal image in his 'Ophthalmographia'.*

*In this paper I will explore how Plempius tried to make Kepler's theory understandable for his colleagues, by fitting it into the framework of Aristotelian philosophy and humoural medicine, and discuss some of the medical consequences of drawing on Kepler's insights. One of the main consequences for a doctor of assuming the Keplerian theory was that the entire process of image-formation in the eye could be explained without any additional flux of visual spirit, a process which I will call 'the emancipation of the eye': the eye can deliver itself from the 'tyranny' of the body. This means not only an important step in the decline of the humoural therapy, but also a step towards specialization.*

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**Sui "Principi elementari di Frenologia" del  
Dottore Giuseppe Canziani (1838).**

*Viene presentata l'opera del Canziani sulla frenologia. Trattasi di un testo originale pubblicato a Milano nel 1838, dedicato dall'autore a Pietro Molossi, nel quale si tenta di sistematizzare le relazioni tra struttura anatomo-fisiologica del sistema nervoso e attività psichiche.*

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*Erbario medicinale magico folklorico sudamericano.*

➤ *Intendiamo per piante magiche quelle piante dell' America meridionale alle quali si attribuiscono proprietà che vanno oltre i limiti del normale, e il cui uso non si limita ad una applicazione puramente terapeutica o medicinale, ma abbraccia il mondo fantastico, sia perché il loro consumo per essere effettivo presuppone qualche rito o cerimonia, sia perché sono circondate da misteriose leggende, o perché sono usate dagli indigeni e nativi con scopi rituali o mistici. Alcune di queste piante hanno virtù benefiche: sollevano mali spirituali e curano malattie causate da influenze negative. Altre, invece, possiedono proprietà malevole, e sono capaci di provocare indisposizioni, disagi e danni mortali secondo la quantità usata. Questo favoloso universo della botanica locale ereditato dall' antico lascito aborigeno insieme con la miscellanea razziale ed il bagaglio di credenze magiche di tre culture (l' autottona, la spagnola e l' africana) combinate armoniosamente in una sola, forma parte della vita del latinoamericano in generale, ancora oggi. Esiste un gran numero di alberi, radici, foglie, fiori, erbe, la cui esistenza è legata perennemente a quella di queste genti, abitino esse nei campi o nelle città, che ricorrono abitualmente alle piante, amiche da sempre. Fra loro abbiamo eseguito la nostra ricerca ed abbiamo raccolto informazioni corroborandole con varie fonti di distinte origini. Ai fini della nostra esposizione abbiamo organizzato il materiale raccolto in tre sezioni. Senza pretendere esaurire il tema, proporremo di ogni sezione investigata alcuni esempi che consideriamo significativi.*

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*Melancholy and Islam.*

*The word "melancholy" carries different meanings as its significance deeply varied in different epochs and context. In the Islamic world too the term "melancholy" has connoted diverse morbid conditions according to the historical time, the geographical setting and the interpretation of the scholar who was describing the "melancholic" manifestation.*

*The present paper describes the various meanings of the term "melancholy" as they are discussed in Islamic medical texts; in addition, it brings about some samples of the concept of "melancholy" has it has been shaped in the Muslim imaginary.*

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***Evolution of Sanitary-Quarantine measures' development in Russia and Ukraine.***

*There are some stages in the history of sanitary-quarantine measures in Russia and Ukraine: a) sources are building the temporary barriers on the boarders if some signal connecting with epidemic conditions have appeared neighboring countries; b) the creation of permanent bordering quarantine on the land borders and in the sea-ports; c) the creation of the sanitary-quarantine net of offices on the boarders which are regulated by General Quarantine Charter; d) Russia's and USSR's joining the International Sanitary Convention due to which activity of realized according to the International Sanitary rules/ Long term is the transition from the national quarantine to the International epidemiologic guard (International Quarantine).*

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***Dall'Antichità Classica A G. Mercuriale: Il Nuoto Come Pratica Medica E "Apoterapeutica"***

*"Gli antichi tennero sempre il nuoto in grandissima considerazione,..."*, riferisce Girolamo Mercuriale nel *De Arte Gymnastica*. La "scienza del nuoto", più di qualsiasi esercizio ginnico, era ritenuta parte fondamentale della paideia, insieme al saper leggere e allo scrivere. Storici e lirici, da Omero ad Erodoto, decantarono la competenza natatoria come capacità salvifica e vantaggiosa in caso di battaglia navale, propria di ogni singolo combattente greco. Il valore del nuoto venne poi mutuato dai medici dell'antichità per le sue intrinseche proprietà curative ed "apoterapeutiche", atte, cioè, a migliorare la forma fisica. Sono sottolineate dai diversi autori le prerogative salutari dei vari tipi di acque: da quella marina a quella sorgiva, da quella lacustre a quella stagnante, in relazione alla temperatura dell'acqua e dell'ambiente. Il nuoto, di cui però non si specificano gli stili adeguati, e le abluzioni vengono indicate per i più diversi stati patologici.

*L'analisi delle virtù terapeutiche del nuoto ricopre due capitoli dell'opera De Arte Gymnastica. Nell'ambito del rinnovato interesse rinascimentale per la cultura del corpo, l'eruditissimo Mercuriale raccoglie l'eredità dei suoi illustri predecessori, nel tentativo di proporre ai suoi contemporanei di dedicarsi agli esercizi ginnici, di essi il nuoto è considerato il più completo, a scopo medico-preventivo, sostanziando le proprie opinioni attraverso l'autorità dei classici.*

*Il lavoro ha lo scopo di ripercorrere, attraverso la lettura delle fonti classiche, la dotta opera di collazione di Mercuriale, di adattamento ai propri tempi e divulgazione.*

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***Pathological representations in Mexican prehispanic plastic arts.***

*Mexican Prehispanic plastic arts are an important source for the History of Medicine because the high number and variety of pathological representations. From the first mesoamerican cultures, around 2000 BC, to the Aztec (mexica) Empire, illnesses were represented vividly and with luxury of details. There are some beautiful representatoions of life and death, a circular process, in the form of a face with normal traits in one half and the other as a skeleton or affected with facial paralysis. There are also representations of dwarfs, of endocrine transtorns, rheumatic illnesses and some genetical syndromes, club foot, etc. We present a revision of their tipólogy and the illnesses represented and an interpretation of illnesses from the double point of view, that of their identification in modern medicine and that corresponding to mexican prehispanic medical system.*

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***A. P. Chekhov as a historian of medicine.***

*The great Russian writer A. P. Chekhov died 100 years ago at the age of 44 years. His dramas and short stories are known all over the world. The great L. N. Tolstoi wrote: "Chekhov is Pushkin in literature".*

*Chekhov entered the Medical Faculty of Moscow University in 1879. His first literary work "A Letter to a Learned Neighbor" was published in the "Strekoza" ("Grasshopper") journal in 1880. When a student, he first thinks about research activity.*

*He chooses the theme "History of Sexual Authority" and starts its active development. He collects data for his thesis, in fact, in history of medicine: "Practical Medicine in Russia". This thesis was never finished.*

*In 1884 A. P. Chekhov got his Diploma and Certificate of a Zemstvo doctor and started working in the Zvenigorod hospital near Moscow. In 1888 he won the Pushkin Prize for collection of short stories "In the Dusk".*

*In 1890 he made a voyage to the island of Sakhalin, where he conducted extensive socio-hygienic studies. He wished to present his book "Island of Sakhalin" as a thesis for a Doctor Degree.*

*In 1892-1893 he took part in cholera control measures and published "Ward No. 6". Like in his short stories "Ionych", "Scamperer", etc., he depicted here the history and status of zemstvo medicine in Russia at the end of the 19th and beginning the 20th century.*

### *Hospitals for the insane in Palestine (1895-1948).*

*In 1895, first institutes for the care of insane and incurables in established in Jerusalem, by Jewish initiatives. That was the first hospital in Palestine for that object, and maybe the first in the entire modern- times Middle East.*

*The treatment of sick people in an institute outside their house is relatively recent. Accept Leprosy, treatment was the family's responsibility, at their house. Chaining the insane, taking them to holy places, turning to witchcraft or praying- considering the alternative treatments of lunatics till then, none of which was based on modern attitude of medicine- this hospital was a great step forward in the history of Palestine medicine, an adequate one.*

*As time went on, the population grew as well as the awareness of the need to a professional treatment and the need (combined with a successive change of social norms) to isolate the insane from society. Three were the limiting factors of building more homes: first, there was the Othman law concerning the establishment of such hospitals, second is the lack of funds and the third, most dominant factor, is the British Policy in Palestine. As a state with explicit rules for the treatment of insane people running an experienced mechanism of hospitals and state care of them, it would be expected that the British government would encourage this trend. Alas, it contradicted a fiscal policy of investing money in British colonial territories. Hence, not only we find a consistent refusal to build more hospitals, in spite of the great demand for it, but we also find a refusal to aid those Jewish initiators.*

### *The religious life of the Christian Physicians according to Ibn abu Usaybia (D. a.D. 1270).*

*Ibn Abu Usaybia is a historian of medicine dying in the late 13th century or so. His writing the so-called 'Uyun al-Anba fi Tabaqat al-Atibba is a unique work for having records from missing books and valuable information. Thus it enlightened widely the medical development and the previous history of cultures before Islam in the Islamic world.*

*Ibn Abu Usaybia containing opulent knowledge of Christian physicians in the Islamic world is one of the highly important sources. Some details that it gives in the biographies of Christian physicians are quite enough to make right interpretations about their religious life.*

*It shows that Christian physicians used to go to the churches for praying, have some mystic experiences, sometimes be influenced in election and appointment of religious functionaries, participate in festivals in the churches, taking permission, to go to churches and pray while travelling with the caliphs.*

*In the light of these records it's possible to reach a conclusion about Christian physician's religious life and to get a nearly certain view of religious life of Christian physicians being under the Islamic Caliphate in the East.*

*In this paper we are concerning to get a general view of Christian physician's religious life through the information that Ibn Abu Usaybia presented.*

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### *Hughlings Jackson's neurological method.*

*This study is intended to demonstrate John Hughlings Jackson's method of case analysis. Physicians in mid-Victorian England did not use a systematic method of clinical case analysis. Many, but not all, followed Moritz Romberg's 1840 classification of neurological diseases into disorders of increased and decreased sensation and movement. Robert Bentley Todd and Charles Edouard Brown-Séquard advocated an inherently physiological approach to analysis of sensory and motor signs and symptoms. We examined Hughlings Jackson's published works up to the published exposition of his method of study of diseases of the nervous system, given at the London Hospital in June 1864. Hughlings Jackson proposed to make an explicit evaluation of the anatomy, tissue pathology and pathological physiology in every patient with disease of the nervous system. This was an expressly biological approach to case study, a scientific method that had not been previously applied to neurology. Hughlings Jackson showed the power of his method by publishing a series of thirty-eight patients with mitral stenosis, middle cerebral artery embolism, aphasia and right hemiparesis. This study supported Broca's assertion that there is a center for language in the left inferior frontal lobe. Hughlings Jackson went on to use his tripartite method of scientific case analysis to produce his theory of cerebral localization.*

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### *The Health Care in South-West Bulgaria in the period 1900-1970.*

*The aim of the study is to presents special features of the health care in historical aspect. The medical-historical survey for development of health care in SouthWest is presented. The stress is made on the role of Bulgarian Church authority for carry out of holistic health-social care.*

*The impact of foreign doctors, worked in Bulgaria before and after the liberation, as well as young generation of Bulgarian doctors, received their education in the foreign countries are discussed. All of them are inspired from charity idea for improvement of health and health education of population in this region. These efforts were base for building of good health care in Pirin region.*

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### ***History, Art And Patient-Physician relationship in Headache.***

*A historical outline of this fascinating chapter of medicine, headache, allows an ample overview on beliefs, conception, knowledge, cultural and social backgrounds of different epochs; indeed, there is not a more widespread pain experience. This intimate suffering, so individually perceived, has found various artistic expressions. To be more specific, it may stimulate patients to represent their feelings and/or their visual perceptions, documenting the extensive variation of this peculiar ailment. In a subtle, indirect way, it possibly inspires some artists in their creativity.*

*From the complex dimension of this very common form of human suffering, the primary headaches, characterized by chronic periodic recurrence and by the emotional as well as physical participation of the patient, it emerges that in the cure of diseases the individual comprehensive consideration of the patient in all of his human aspects is of paramount relevance. An attitude already present at the first beginnings of medical treatment when the care, rather than the cure, was the help medicine had to offer.*

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### ***Headache causes and prevention in the De Morbis Artificum Diatriba (1713)***

*Bernardino Ramazzini (Carpi 1633 – Padova 1714) demonstrated a great interest in the cause and prevention of headaches. The second, larger and final edition (1713) of his most important work, De morbis artificum diatriba, which marks the birth of modern occupational medicine, reports headaches as caused by work-related activities in 12 of 69 professions considered.*

*Ramazzini does not limit himself to clinical description, but also often adds considerations on possible etiopathogenic factors and preventative suggestions, such as with regards to the following professional categories: wet-nurse (“exhaustion,” sleep); clerks, menders (prolonged attention); footmen, singers (blood plethora in the brain); hunters, sailors (temperature fluctuations); wine producers, brewers (an excess of animal spirits); carpenters, confectioners, and those that work with oil and leather (bad odors).*

*From what he reports about his own experience with irritating, unbearable odors when visiting grimy shops, Ramazzini seems to have been a migraineur himself, for whom bad smells could have triggered role on attacks.*

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***A Brief History Of Mastectomy***

*Breast cancer has always been a major health problem. The first written evidence suggestive of breast cancer is from ancient Egypt and is found in the Edwin Smith Surgical Papyrus dating back from 3000 to 2500 b.C.E. Surgery was recognized as a "form of therapy" in the second century C.E. by the greek physician Leonides, who related the first mastectomies. From the fall of the Roman Empire to the Renaissance medical progress remained stagnant as Christianity and Islam prohibited anatomical dissection and, in turn, limited surgical practice. Anatomical paradigms for breast cancer arose with the Renaissance and the renewed study of anatomy. The same Andreas Vesalius (1514-1564) who was also a surgeon, advocated the complete removal of the breast. But it was Jean Louis Petit of Paris (1674-1750) who developed an en bloc resection of the breast and palpable axillary lymph nodes. In the second half of nineteenth century, the establishment of the cellular origins of disease and the local pattern of cancer's progression, provided a more rational framework on which to structure surgical treatment. The surgical revolution brought by general anaesthesia in 1846 and antiseptic practice in 1867 led to an escalated effort to surgically treat breast cancer until the en bloc removal of breast and pectoralis major muscle with wide resection of the skin and axillary nodes known as the Halsted mastectomy (1894).*

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***Formation of University Medical education  
in Russia.***

*The formation of the University Medical education in Russia took place from 1758-1863 in three stages. The first stage (1758-1804) consisted of a transfer of the fundamentals of the canon of the European tradition of the University Medical education onto Russia ground. Only the students who had studied the Philosophical Faculty curriculum were admitted to the medical faculty. Ten to fifteen disciplines grouped into four to five professorial courses were taught. The two modes of teaching — lectures and disputes — were mainly used. There was no clinical base and no training at the patient's bed. The graduates received the degree of Candidate of Medicine which gave no right to practice medicine. The second stage (1804-1840) aimed at the creation of the Institute of Medical Faculties and a reorientation of their work towards the training of doctors with the right to enter into private practice, and was known for the introduction of clinical teaching, visual aids and new principles of teaching process management. Universities were given the commission to confer the rights for medical practice. The aim of the third stage (1840-1863) was the elaboration and introduction of a common all-Russian standard for medical training. For this purpose State reforms of higher medical education were implemented and a principally new curriculum based on the idea of the stepwise principle of clinical training was elaborated and introduced.*

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***Studying and teaching the medicine history  
of the XX- the beginning of the XXI  
centuries.***

*A new medicine history textbook is written. The half of it is devoted exactly to the XX - the beginning of the XXI centuries. In the textbook and the corresponding syllabus such problems as: medicine development conditions of the XX century; prominent achievements; basic conceptions; the most well-known medicine schools in all branches of the science; the main medicine course of the XX century (socio-prophylactic); changes in population's health; the development and usage of modern technologies, especially demonstrative in surgical disciplines; appearance of new diseases (more than 80); the risk factor's role in social health and others are popular elucidated to students. All pedagogical methods are used in teaching: lectures, seminars, discussions and others. The approximate curriculum is given.*

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***Un inedito 'librecto de la conservazione de  
la sanità' di area meridionale del XVI  
secolo.***

*Serbato in un manoscritto miscelaneo della Biblioteca Nazionale di Napoli, il Librecto de la conservazione della sanità è una redazione manoscritta acefala di più 500 pagine composta probabilmente agli inizi del XVI secolo da una medico tarantino di origine lucana. Suddiviso in sette trattati, destinati progressivamente 1) all'aria, 2) al cibo e alle bevande, 3) al sonno e alla veglia, 4) al moto e alla quiete, 5) agli accidenti dell'anima, 6) alla reple-zione e all'evacuazione, 7) alle prescrizioni medi-che per i viaggiatori, il Trattato è dedicato ad uno degli ultimi rappresentanti della casa regnante aragonese in procinto di fug-gire in esilio dopo la vana resistenza all'assedio francese di Taranto. Nel suo corposo compendio l'autore, probabilmente addottoratosi all'Università di Padova, trasfonde i principi della dottrina umorale di Avicenna adeguando le pre-scrizioni rivolte al giovane erede aragonese alla ti-pologia delle condizioni dettate dal luogo e dal tempo; si rinven-gono così utili e interessanti casi-stiche per l'instaurazione di un corretto regime dietetico alimentare fondato sulle peculiarità cli-matiche e produttive dell'area meridionale italiana, non trascurando una serie di consigli utili per l'individuazione di idonei ambienti abitativi. Il materiale presente nel Trattato si rivela di indubbia importanza per lo studio della situazione lingui-stica della zona meridionale adriatica della nostra penisola, ma può rappresentare anche una sicura base documentale per la storia di una branca della medicina, quella preventiva, oggi fon-damen-tale per i suoi riflessi sociali.*

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### *Historical use of liquorice in therapy.*

*L'uso della liquirizia in ambito medico-farmacologico affonda le sue radici a tempi lontanissimi. I Cinesi la indicano, nei loro testi di medicina, come rimedio per allungare la vita, mentre gli antichi Egizi, i Greci, i Romani e gli Sciiti la consideravano essenziale per la cura di tosse secca, asma, bronchite e tisi nonché per la cura di malattie gastroenteriche e delle vie urinarie. Diversi medici naturalisti greci, da Teofrasto (IV sec. a.C.) a Dioscoride di Anazarba di Tarso (I sec. a.C.), l'hanno tenuta in grande considerazione anche per curare, sotto forma di pomata, le infezioni oculari. In clima di Rivoluzione francese, il filosofo Rousseau consigliava di far succhiare ai neonati un bastoncino di liquirizia in modo da farli crescere in maniera sana e naturale, mentre si dice che Napoleone tenesse sempre a portata di mano pasticche di liquirizia per combattere i suoi famosi bruciori di stomaco sul campo di battaglia. L'Autore illustra l'exkursus storico dell'uso terapeutico della liquirizia*

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### *Le fanciulle miracolose del XVI Secolo.*

*Vengono presentate le storie di due fanciulle miracolose: Margaretha Wiss e Eva Vliegen, vissute nel 1500 circa.*

*La prima aveva rifiutato di nutrirsi da quando aveva 10 anni. La sua celebrità si era diffusa ovunque e tale miracoloso digiuno divenne oggetto di una quantità di opuscoli e trattati medici. Anche un poeta e diversi artisti la scelsero come fonte di ispirazione e fu addirittura convocata a Corte.*

*La seconda, Eva Vliegen, invece, perse l'appetito nel 1594, a 19 anni, e dopo tre anni smise di toccare cibo e bevande. Diceva di vivere della fragranza dei fiori e di avere contatti con gli Angeli.*

*Dopo aver dichiarato per trent'anni un digiuno assoluto, però, Eva fu smascherata: furono trovati nella sua stanza diversi generi alimentari e, in seguito a tali eventi, fu arrestata e condannata alla flagellazione.*

*Sono espone in dettaglio le due storie, dalle quali emergono tipologie psicologiche di particolare interesse.*