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Miscellany

THE
LONDON SURGICAL HOME;

OR,

Modern Surgical Psychology,

BEING A POPULAR STATEMENT
OF THE OPERATIONS THEREIN PERFORMED
BY MR. ISAAC BAKER BROWN.

BY

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MODERN SURGICAL PSYCHOLOGY.

THERE cannot well be a more interesting topic for discussion than the alliance, and mutual dependence of crime and disease. It interests the physiologist, whose science brings him to contemplate normal functions; it interests the medical man of practical bent. It is a relation that cannot pass unregarded by the psychologist and metaphysician; briefly, it is interesting to all.

The great Founder of our religion—He who spake as man never spake—gave effect to the knowledge by Him, of this alliance, in some memorable words:—"If thy right hand offend thee," said Christ, "cut it off; it is better for thee to enter into life maimed, than having two hands to go into hell, into the fire that never shall be quenched." Nevertheless, for eighteen hundred centuries and a half, and more, the divine truth was unregarded. It remained for Mr. Baker Brown to give the precept effect. Strange that it should have been otherwise! The most superficial thought makes known the connection between sinning and the organic cause of sinning; the alliance indicated by Christ. Put the case thus:—If a tongue resolutely bent on evil speaking be excised, that tongue could speak ill no more. For the sake of precision we may call it the "glossodectomic" method. Hereafter it will be shown that actual tongue excision is never performed in civilized countries, to the end of securing quietude. Such an operation would be altogether too barbarous. In

Morocco it might pass—maybe in Bokhara,—but so extreme an operation would be repugnant to the feelings of advanced England. The triumph of psychological ^{urgery}~~survey~~ is seen in this, viz.:—mild, peripheral, and subcutaneous operations are made to produce the results aimed at, instead of amputation.

Again, if hands resolutely given to stealing were amputated, they could steal no more. This follows of necessity, and needs no argument. In respect of this too, I need hardly observe that actual amputation would not be tolerated in English society, to secure any psychological or moral result whatever.

The illustration need be no further carried. The organic eliminative treatment, as it admits of being called, is comprehensive, nay, universal. Of course the objection lies against this system, that mere inability to commit a crime does in no measure interfere with the power to imagine it. Granted; but systems of human polity can by no means take cognisance of imaginings. One man may imagine a liking for his neighbour's wife; but society can take no heed of the thought. Another man may violently desire to lay hold of his neighbour's cheque-book, his purse, his house, his ass, his maid-servant, or any other imaginable thing that may be his. Society can take no heed of aught but active sin. Until the last day, and the judgment, the latent sin must rest concealed; and resting concealed, unpunished.

These few remarks will suffice to place in evidence the valuable, or more properly speaking *invaluable*, labours of Mr. Isaac Baker Brown, a metropolitan surgeon of celebrity; founder of the London Surgical Home. That beneficent institution numbers amongst its supporters some of the chief personages in the land. Right reverend bishops lend it their countenance: princes and princesses condescend to insert their names on its honoured records. Higher proof could not be given of the soundness of the principles on which the establishment is based. It is but

fitting that divines should have been amongst the foremost to give practical effect to a precept of psychological surgery first indicated by Christ. It is natural that princes and princesses (God's own anointed) should be found on the same platform with reverends and right reverends; with parsons and bishops.

The London Surgical Home is an unpretending building situated in the Ladbroke Grove, Notting Hill, or as pretentious people living in the neighbourhood are wont to call the region, Kensington Park. For some reason not easy to understand, a veil of mystery has been thrown around this beneficent home. It has been my lot to hear jeers, and even imprecations, launched against it. Thus has the custom been from the beginning of time. So surely as philanthropists set about doing a good work, so surely do evil-minded people begin to rail against the work. Generally one may say, that in proportion as an institution is abused, so is the real measure of its utility assured. This proposition is wholly demonstrated in respect to the London Surgical Home.

The appreciation in which the London Surgical Home is held may be partly inferred from the comfort, nay, splendour, of the equipages which daily throng it. Carriages may be seen to draw up, and delicate girls descend, accompanied by their parents or nearest guardians; any day pale female forms may be seen to emerge; serene and tranquil. These are the patients who have been subjected to the masterly treatment of Mr. Baker Brown, a gentleman whom the medical profession honours in hardly a less degree than princes and princesses, parsons and bishops. They go in, those patients, to be operated upon; they come out cured, few but themselves the wiser for what has happened: to so high a pinnacle of excellence is the eliminative surgical method carried in these days.

One lady of voluble speech and evil tongue may have had the

operation of "glossodectomy" performed, which in plain English means a surgical operation upon the tongue, whereby its abnormal volubility is tempered. Another oppressed with the failing, not to be denominated crime, of kleptomania, or legerdemainlike abstraction of effects without payment,* may have undergone treatment whereby the thief-like deed is made impossible henceforth. Another lady may have been afflicted with the disease known as "gyromania," a morbid desire to spin round and round, her waist encircled by a male arm.† In such a case a mild subcutaneous operation does all that has to be done. In short, the treatment pursued has reference to the abatement of abnormal functions, through the performance of mild surgical processes. By and by the nature of treatment pursued will be stated *in extenso*. First, as regards the disease, kleptomania.

Every reader of newspapers must have been shocked at the perusal from time to time of thefts committed by ladies not in the least degree pressed by adverse circumstances. Usually it has taken the form of lace or shawl abstraction, though sometimes of other articles. Coarse-minded people have been heard to deliver themselves harshly concerning kleptomania. I have heard invectives launched at the perpetrators as though they had been any ordinary thieves. The man of science looks upon the matter in a very different light. He knows that kleptomania is not so much to be regarded a crime as a disease. Rather does it occupy the obscure middle ground between crime *and* disease.

* An act that if done by common people is called theft. Theft and kleptomania have sometimes been confounded by superficial thinkers, yet the difference between the two is obvious. Kleptomania partakes more of the nature of disease than of crime. Theft is crime *pur sang*. Kleptomania always affects the rich and well-to-do people (mostly ladies of refinement and education). Theft only relates to the low, the vulgar, and ill-bred. Other distinctions might be drawn, but the preceding are sufficient.

† Query,—Waltzing?—*Printer's Devil*.

It really comes within the legitimate scope of medical and surgical treatment. Any medical man admits this now to be, though it was reserved for Mr. Isaac Baker Brown to demonstrate it originally.

Kleptomania, scientifically considered, may be defined as an actuation of the palmar and digital muscles to theft, through the working of a depraved moral sense. Looking charitably on the matter, it may be conceded that many ladies are endowed with a condition of moral sense equally depraved with the most confirmed kleptomaniac; though never having committed the actual deed. Consideration will make this apparent. Should it so happen that in one individual the depraved moral sense (the desires for cashmeres, lace, ribbons and such like things) should be highly developed, in conjunction with a deficient muscular organism, then necessarily the overt act will not eventuate; and—*mutatis mutandis*—otherwise.

At this point we shall do well to direct some attention to the beautiful development of the human hand, whereby it is made competent to the performance of so many diverse functions.

“Some animals have horns, some have hoofs, some teeth, some talons, some spurs and beaks. Man hath none of all these, but is weak and feeble, and sent unarmed into the world. Why?—a hand, with reason to use it, supplies the use of all these.” Thus moralized old Ray; and since him thousands upon thousands of philosophers have descanted upon the manifold wonders of the human hand.

Common social intercourse with our friends, gives us numerous examples of the wonders the human hand and fingers may perform, under the discipline of use and experience. Piano playing is an exercise that would be calculated to fill the mind with wonder if it were not so common. Thimblerrigging is another; but in the highest degree the legerdemain tricks of professed

conjurers. "Upwards of fifty muscles (writes Sir Charles Bell) of the arm and hand may be demonstrated, which must all consent to the simplest action. The motions of the fingers," continues that same distinguished man, "do not result merely from the action of the large muscles which lie on the fore arm: these are for the more powerful efforts. In the palm of the hand, and between the metacarpal bones, are numerous small muscles (lumbricales and interossei) which perform the finer movements, expanding the fingers, and moving them in every direction with quickness and delicacy. These small muscles, attached to the extremities of the bones of the fingers, where they form the first joint, being inverted near the centre of motion, move the ends of the fingers with great velocity. They are the organs which give the hand the power of spinning, weaving, engraving, &c.; and as they produce the quick motions of the musician's fingers, they are called *fiducinales*."

He who would acquire a correct notion as to what those palmar and digital muscles are capable of, will do well to make friends with some conjuror, and induce him to show the mechanism of his legerdemain tricks. One very common trick of legerdemain consists in picking up a ball laid on a table, by the wrist, and making it roll up to the tips of the fingers without sensible motion of the latter. Such is the function, and when the power exists, as it sometimes *does* exist in ladies, then, if actuated by a depraved moral sense, the result may be kleptomania.

Mr. Isaac Baker Brown was the first, or at any rate *amongst* the first, to perceive that kleptomania was not to be suppressed by convictions, harsh sentences, and imprisonments. He was the first to refer the act to its true motive cause; to look upon it as a disease rather than a curse in any human sense. He argued thus:—

"The extreme development of the palmar and digital muscles so necessary to conjurors, is not necessary to any lady. The faculty is a dangerous faculty," reasoned he. "In what respect can a lady be better—more agreeable, more elegant, more happy—because she is endowed with the power of performing tricks of legerdemain? Would our daughters, our wives, our sisters, be one whit more estimable members of society because they severally might be endowed with the faculty of taking up any small thing without visible motion of the fingers? Might it not end in their sliding a cashmere or a piece of lace dexterously away from a tradesman's counter—in short, kleptomania? The faculty is dangerous (he argued). Destroy that faculty, or at least moderate it to safe proportions."

At this point the real genius of the philosopher is seen. A man less perceptive than Mr. Baker Brown would have perhaps amputated a right hand, or at any rate the right hand fingers, or a thumb. Though there be scriptural warranty for this, yet so great is the imperfection of our notions that such an operation would never be tolerated in modern civilized society. Who amongst us, having a pretty wife, would not rather see her degenerate into the most inveterate shawl-lifter (to put the case as strongly as it can be put), than permit the amputation of even the top joint of a finger? It stands to demonstration that whatever the abstract merits of the thing—whatever the amount of its scriptural warranty—no operation would be tolerated save under the one condition of its results being invisible.

The kleptodectomic method consists in partially dividing the palmar and digital muscles by a fine small knife, passed under the skin. The operation is almost bloodless, gives little pain, and, when performed, the resulting scar is almost invisible. Few of us can be much in society without encountering ladies who have dwelt for a season in the London Surgical Home; they

having gone there with the special intent of being operated upon kleptodectomically. If the right palm of one of the fair patients is examined closely, certain little white punctures will be seen on the inner aspect of each finger—the marks corresponding to the places where the knife entered and emerged respectively. It requires some close scrutiny to perceive these marks. The eye has to be brought very close, and even then if the observer's nose be beyond a certain length, it may interfere with that propinquity of vision which the occasion requires. Glasses must then be had recourse to:—not always effectually.

These remarks will serve to make known the extreme refinement of surgical skill manifested. Practically speaking, there is no scar, no disfigurement: nothing whatever is visible. A lady's hand will *look* as well, *glove* as well, serve for any honest purpose as well as though the operation had never been performed. In certain respects it will even look better. The reader will agree with me that in proportion as a lady's hand seems more listless and unimpulsive by so much will it seem more refined. What on earth does any refined man expect of a lady's hand more than that it shall wave gracefully, glove well, and in extreme cases play the piano moderately well,—play the piano up to a certain point of excellence, that is to say? Nothing can be more vulgar than the acquisition of such a degree of executive dexterity as might confound the lady with the professor!

When first Mr. Baker Brown proposed to combat the cashmere-abstracting disease crime—whichever one may elect to call it—*kleptomania* that is to say, by surgical treatment, he was met by the objection that the music of domestic society would suffer—that the faculty of piano playing would be lost. That was an error—a most grave error. I do not go so far as to assert that a certain mechanical dexterity is not sacrificed; but what I do assert is, that, for all practical purposes, the piano playing of ladies

operated upon is sufficient. As a *per contra*, or set-off, objectors who take the above line of argument would do well to ponder the following fact. It is most significant. Taking young ladies as they come, where one delights us with her piano playing, a hundred excruciate us. Guided by this consideration alone, it would be quite worth while to perform the invisible palmar section on thousands of ladies not in any way addicted to kleptomania.

It is not to be imagined that the advantages of the London Surgical Home are restricted to the treatment of kleptomania by the palmar section, as already indicated. Another striking exemplification of the principles embodied in Mr. Baker Brown's philosophy is seen in the *glossodectomic* operation, already adverted to in a passing and casual way. Commonly does one hear it affirmed of certain ladies that their tongues are too long. This is a mere figure of speech. Volubility of utterance in no degree depends on mere length of tongue, but on such a development of the lingual muscles as promotes rapidity of motion. There are tens of thousands of silent women not one whit less inclined towards scolding, curtailing utterances, and scandalizing, than the veriest talkers. I have no doubt that the deaf and dumb, could they hear and speak, would be found amongst the direst back-biters, veritable Xantippes to many an excruciated Socrates. The mere inability to speak much without languor often insures peace when the desire of war is present. The problem, then, which the Surgical Home surgeon proposes to himself in such cases is this,—Given a woman who pours forth objurgations continuously, without pause or languor, to reduce that woman's power of utterance to a normal state by partially dividing some of the lingual muscles. On this point considerable misapprehension, out of medical circles, prevails. Some I have heard affirm that the over-garrulous female patients enter the London Surgical Home to have a piece of their tongues cut off; others

affirm that the operation consists in slitting. It is neither the one nor the other. In the course of a somewhat active professional career the writer has—he need hardly state—occasion to see many human tongues, both male and female. He most emphatically asserts that on no one occasion did he ever meet with a female tongue either partially amputated, or wholly or partially slit. In point of fact, the lingual operation is the precise analogue of the palmar operation, already noticed in detail. The patient being brought under the effects of chloroform, a very fine knife is run quite through the tongue and rapidly withdrawn. The result is that certain muscular fibres are cut; the mobility of the organ is in some measure impaired,—to the extent, namely, of making continuous and violent objurgation impossible, but not of interfering with any temperate conversation.

Medical men, possessing special opportunities of examining ladies' tongues may, in most cases, discover the traces of operation in the shape of small white marks. Confessedly, however, the case is more difficult than when the palms of the hands are concerned. Not only does the cave-like formation of the mouth interfere with that free access of light so necessary to close ocular investigation, but the tongue, even in its tempered state, is always a mobile organ. Perfect quietude of this member is impossible to attain, however much the patient may be willing. A small mirror placed in the mouth is generally a valuable aid, by reflecting light upon successive small surfaces. Near-sighted eyes are more adapted to this scrutiny than long-sighted ones; myopia is a condition better than presbyopia. A long nose in the observer is a most serious drawback, as may readily be imagined, if all the conditions of experiment be well borne in mind.

If it be inquired whether the operation of *glossodectomy* do not injure the female utterance within the normal and legitimate limits of temperate conversation and agreeable singing? I unre-

servedly answer, No. On the contrary, according to my opinion, it imparts a charm in which scores of female utterances are deficient—the charm, to wit, of the very slightest *souppçon* of a lisp, than which nothing can be more agreeable to refined ears. It, moreover, does away with a certain metallic sharpness of speech, which, when heard, mars the charm of female beauty, just as the slightest smack of acetic acid (vinegar) impairs the excellence of otherwise excellent wine.

The Surgical Home discipline is made subservient to yet other ends. One of the most remarkable cases I have heard of is the following. A young lady, Miss —, æt. eighteen, of excellent family and superior education, was in all respects but one a perfect woman, almost literally, so to speak. Handsome, accomplished, of irreproachable manners and conversation, she was universally called an ornament to her sex. Retiring of disposition, dignified, and modest, she would listen to the most venomous whispered dowager scandal without affecting to understand one word. In her reading she was choice. Of Ingoldsby she had perused the “Jackdaw of Rheims and the Little Vulgar Boy,”—no more. Of Byron the “Prisoner of Chillon.” She could not understand the rest. She wrote a delicate hand, devoid of all masculine firmness. You might have thought she had dipped a spider in the ink, and set the arachnoid crawling. She would loll on the sofa for hours together in the most approved fashion of female insouciance, could sit out Dundreary without a laugh, and gaze without a tear on the smothering of Desdemona. She played a little, drew a little, sang a little, but in neither art aimed at the vulgarity of rivalling professionals. She could crochet and tat, and work fancy robes for meek-eyed curates, but no sort of plain sewing ever disgraced her coralline fingers. She knew Debrett by rote, and never vexed her papa and mamma by admiring younger sons. You would have said she had no emotions, they

were held so much in check. Perfect in all respects was Miss —— save one. She had a disordered rage for waltzing. Once on her feet to three-four time, once her slim waist encircled by a male arm, and she would waltz up to half an inch of death's door. The fabled cork leg which ran a Dutch merchant to death, and then danced away with his skeleton, was hardly more mobile than Miss —— under the circumstances indicated. Not only did she induce heart disease in herself, but she sent to Kensal Green more than a dozen promising young men who had stood in the relation of waltzing partners. She had become a pest—this otherwise charming girl. Remonstrances and persuasion were tried and thrown away. As well might her well-wishers have whistled to the winds as tried to stop her fatal gyromania. In this emergency the Bishop of —— was consulted, with the intent of bringing his moral suasion to bear. The right reverend divine was wise in his generation. Not relying overmuch on his moral power, he invoked the aid of surgery. It seems that the Bishop of —— had perused in the *Morning Herald* newspaper a letter written by one Dr. Kidd, specifying that the waltzing mania, like certain other manias, might be cured by a mild peripheral operation. The Bishop of —— thereupon placed himself in communication with Dr. Kidd, and Dr. Kidd recommended the London Surgical Home. To that beneficent institution Miss —— went, and having undergone a slight peripheral operation came out cured. She is now, I learn, as complete an ornament to her sex as any charming woman can well be.

The case having struck me as very remarkable, I made it my business to inquire of one of the medical officers of the London Surgical Home relative to the exact nature of the operation. "The simplest thing imaginable," he said; "division of a few fibres of the glutæi and gastrocnemii muscles, no more." For

the benefit of laymen it may here be stated that the gastrocnemii muscles are situated on the posterior aspect of the lower leg. They constitute the calf of the leg, in point of fact. As for the glutæi, they lie higher up, on either side of the pelvis.

Perhaps this, for the public and non-professional, is as much as is desirable to be written concerning the London Surgical Home and the operations therein performed. There are yet others, but to specify them would be tedious. Enough to state that the system pursued is founded on the Biblical precept of cutting away offending members to promote well-being. The practice marks an epoch of surgical psychology. It remains to be seen whether a practice inaugurated on the higher class may not be successfully extended to the lower. It remains further to be seen whether the excisive treatment of these cases, the characteristic of which is that they do not involve the idea of crime so much as that of an affliction, may not be extended to actual crime. May it not be that the time shall come when our entire prison discipline shall be remodelled under the lights evolved by Mr. Baker Brown's experiences? May it not be that actual theft, from petty larceny to garotting, shall be treated by the Brunonian methods? I put the question for the public to answer according to *their* lights, as I already am able to answer it to self-satisfaction according to mine. This is a wondrous world—a passing phase of sin and suffering, mingled with some bright day-dreams! That the period of human existence can be rendered the more happy in proportion as we moderate excesses and check active sin, is a time-worn truism. All people who have sorrowed over the imperfection of human laws and human lawgivers, who have seen the guilty escape and the innocent suffer; all who have sighed at the thought that human punishment should commonly fall, not on the doing but the discovery, will know how to value, according to its worth, the surgical eliminative method. Honour, then,

to the princesses and princes, the peeresses and peers, the bishops and the parsons, who uphold this method! Double praise, profit, honour, emolument, peace, happiness, more services of plate—everything that talent can merit and gratitude bestow—to Mr. Baker Brown!

Wm. John Fuller

College of Virginia