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A Sequel to McDowell's Triumph, Being a Brief Sketch of the Rise and Progress of the Samaritan Free Hospital.

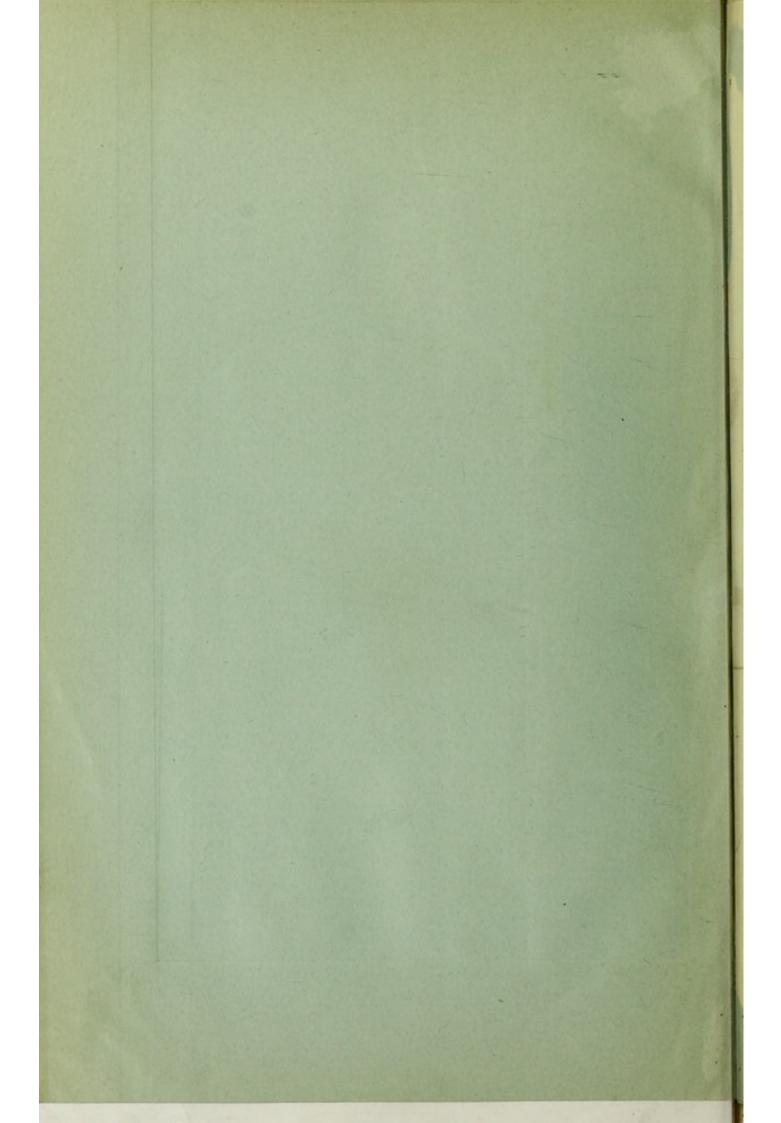
BY

ALBAN H. G. DORAN, F.R.C.S. (London).

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Digitized by the Internet Archive in 2016 https://archive.org/details/b22457562 American Onnecological Society

J. RIDDLE GOFFE, Secretary

616 MADISON AVENUE

NEW YORK CITY

January 30th, 1909.

Mr. Alban Doran,

London, England.

Dear Mr. Doran: -

Your letter December 16th, conveying the disappointing information that you will not be able to be present at our coming meeting, was duly received. I need not say that it is a great disappointment to all of us, and especially to myself. We will hope for better success next time. It will give me pleasure to present to the Society the expression of your entire sympathy with the object our celebration of the McDowell Ovariotomy. As a part of our program we shall have addresses upon the Evolution of Ovariotomy in the various Countries, and I had counted upon hearing your voice in upholding the honor of the British Empire in this work. We are assured by Mr. Herbert Spencer, of London, that he will be present, so that we are confident that justice will be done to Clay, Wells, Keith, and others.

I very much wish however that you would send a brief paper upon some subject connected with Ovariotomy or Ovarian Diseases to be read at the scientific session, or if you prefer a brief paper adapted to the anniversary exercises.

Very cordially yours,

Middle Foffe

# A SEQUEL TO McDOWELL'S TRIUMPH, BEING A BRIEF SKETCH OF THE RISE AND PROGRESS OF THE SAMARITAN FREE HOSPITAL.

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ALBAN H. G. DORAN, F. R. C. S. (London),
Past President of the Obstetrical Society of London and Consulting Surgeon to the
Samaritian Free Hospital, London, Eng.

HAVING been invited by the eminent president of this society, Dr. J. Riddle Goffe, to contribute a brief communication, I have prepared the following notes on a famous institution with which I have been connected for thirty-two years, namely, the Samaritan Free Hospital. For that institution is related and by no means indirectly related, by the law of cause and effect, to Ephraim McDowell. The example of that great pioneer strongly influenced Spencer Wells, as the latter took so much pains to admit in his standard work, and it was at the hospital in question that Wells gained his well-earned fame as one of the chief establishers of ovariotomy.

The Samaritan Free Hospital was founded in 1847 by Dr. Henry Savage, assisted by Dr. William Jones, who had already set up a small dispensary with the intention of converting it into a general hospital. Savage was the author of the celebrated atlas, entitled The Surgery, Surgical Pathology, and Surgical Anatomy of the Female Pelvic Organs, which includes those drawings demonstrating the opening and extraction of the ovarian cyst so often copied in text-books up to the present day. Though lacking the qualities which make a great physician or surgeon, Savage was a man of high views and great administrative ability. Protheroe Smith had recently established the first special hospital for women in London, and Savage, prevailing over Jones, arranged that his new venture should be a special hospital of the same kind. He was joined in 1855 by Dr. C. H. F. Routh\* who had in 1848 made much stir by the reading of his paper "On the causes of the Endemic Puerperal Fever of Vienna" before the Royal Medical and Chirurgical Society, where he declared that "Semmelweiss first clearly enunciated that the real source of puerperal infection was to be found in the hands of the medical men in attendance,

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<sup>\*</sup>While I was engaged in the preparation of these notes, Dr. Routh died, on February 19, over eighty-seven years of age.

contaminated with cadaveric poisons."\* Routh lived to see that great but injured man rated at his true worth, as Routh himself had rated him sixty-one years ago. For a long time children were treated, as well as women, at the new hospital, but the arrangement did not work well and was discontinued.

By the irony of fate, the first consulting physician to the Samaritan Hospital was Dr. Robert Lee, a great obstetrician, but a fanatical opponent of ovariotomy. It was not until Spencer Wells, returning from the Crimean War, was elected surgeon that the question of following in the steps of McDowell was entertained in earnest. A decided line of separation between the ovarian and the general gynecological cases was found to be desirable when Wells began his ovariotomies in 1858. The ovarian patients were placed in newly constructed special wards in new premises in Lower Seymour Street, Portman Square, from 1859 to 1890. Between the years 1874 and 1890 nonabdominal cases were treated in a branch hospital in another street.

Thus Savage and Routh, both men of note, founded the hospital in which Spencer Wells developed ovarian surgery after the principles of McDowell. The history of his early efforts and of those of his British rivals, Clay and Baker Brown need not be related, being well known in America. A number of gynecologists of high repute joined the staff, the majority passing on to general hospitals associated with medical schools. Among them were five who became honored in the land of McDowell in being elected honorary fellows of this society, namely, Bantock, the only survivor, Graily Hewitt, Sir W. O. Priestley, J. Knowsley Thornton and Sir Spencer Wells himself. The remaining eminent birds of passage were Greenhalgh, Clement Godson, Champneys, Walter S. A. Griffith, Amand Routh, Targett, Walter Tate, and quite recently, W. S. Handley, a great advocate of the principles and practice of W. S. Halsted and the author (1906) of Cancer of the Breast and its Operative Treatment.

In the middle of the seventies two of the honorary fellows of this society, Bantock and Thornton, were associated with Spencer Wells who had previously almost monopolized the ovari-

<sup>\*</sup>Hence Spencer Wells' celebrated visitors' book at the Samaritan Hospital, in which every sugeon who desired to see an ovariotomy signed his name under a declaration that he had not recently entered a dissecting-room or been present at a necropsy. The part which Oliver Wendall Holmes played in the promotion of antiseptic midwifery was impressed on the British medical public in an article by the late Dr. Cullingworth which appeared in the Jour. of Obstet. Gynec. of the Brit. Emp., for December, 1905.

otomies. These two surgeons soon found that they each needed a junior as assistant. In consequence, Mr. Meredith and myself were elected assistant surgeons in 1877.

A narrative of the history of that hospital, as I have known it, from that date down to the present year may, for reasons already given, be of some interest to the society. When I joined the staff, and indeed until 1905, fifteen years after the hospital had been moved to the Marylebone Road, every ovariotomy as well as every other abdominal operation was performed in a special single-bedded ward. The reasons for this arrangement are well understood, and equally familiar to us are the reasons why the single-ward system has been discontinued. In 1877 that system was still the best for the patient; by the middle of the nineties so great were 'the improvements in the construction and management of operating theatres that the single-bed ward became inferior to the theatre and general ward. For various reasons the single-bed wards were retained till quite recently in the Samaritan Hospital, but for several years before their abolition the operation was often performed in the small theatre originally designed for perineal and vaginal surgery,

Sir Spencer Wells retired in 1878 from the surgeoncy to the hospital. His right hand had not forgotten its cunning and his fame was at its height, but he had already two great rivals in the United Kingdom, Keith and Lawson Tait, and several in the States and Continental Europe. Wells' successor, Bantock, is renowned in the history of his hospital for his researches throwing light on the effect of the ligature on the ovarian pedicle, for the advances which he made in the surgical treatment of the uterine fibroids, and for his extreme opposition to the carbolic spray and Listerian antisepsis in general. Some of his views on asepsis have been shown to be correct. Knowsley Thornton, Wells' other immediate successor, was a bold surgeon and a shrewd man who played a very prominent part in the extension of abdominal surgery beyond the limits of the female organs, being one of the most illustrious pioneers of renal and hepatic surgery. Toward the end of the eighties surgeons from all parts of the globe came to the old house in Seymour Street to witness Bantock dexterously applying the serre-næud to the supravaginal part of the cervix, or to see Knowsley Thornton remove a renal tumor or extract calculi from the bile-ducts.

The chief errors in our practice at the hospital in 1877 and for many years later were a strange dread of long incisions and an unreasonable fear of opening the bowels till many days after ovariotomy. I must point out that Lawson Tait was quite as prejudiced against long incisions as was his great rival. Wells himself once insisted, in respect to one of my own earlier operations, that in increasing the length of the incision the operator decidedly increased the chances of death. Tait on one occasion, when he honored me by his presence at an operation where I delivered a multilocular cyst through a three-inch incision, boasted that he could have easily extracted it through a two-inch wound. What unrecognized prejudices have we who have overcome those entertained by a Spencer Wells and a Lawson Tait?

In 1890 a fine new building was completed in the Marylebone Road, almost opposite the more recently erected Hotel Great Central. Among the physicians were Dr. Amand Routh and also Dr. Percy Boulton who, with Sir John Williams, Sir W. J. Sinclair, Drs. Cullingworth, Champneys and other leading obstetricians, were active in urging on the British Parliament the Midwives bill which ultimately became law. The surgical practice of the hospital was greatly extended in the nineties. Meredith raised ovariotomy as a special operation to its highest perfection. I must here observe that, like his predecessors, he was accustomed to detach closely adherent intestine from the cyst wall without sacrificing any of the liberated bowel. I have heard that resection is too readily undertaken under similar circumstances in the present day. J. D. Malcolm, still on our active staff, always lays great stress on after-treatment. As the result of observations carried on for over twenty years on patients recovering or dying after ovariotomy and other abdominal operations, that surgeon has published certain views on sapremia, septicemia, and the effects of shock on the peripheral vascular system, views which have been widely discussed on both sides of the Atlantic. We all admit that the physiologist and bacteriologist have done wonders, but clinical experience must not be slighted. Therefore we must feel the justice of Drs. Seelig and Lyon's favorable criticism of the English surgeon: "Malcolm makes an uncommonly strong clinical argument against the views of Crile in a fashion that refreshingly demonstrates the invaluable aid of clinical medicine to laboratory experimentation."\*

\*"The Condition of the Peripheral Blood-vessels in Shock." By M. G. See-lig, M. D., and E. P. Lyon, Ph. D., St. Louis, Mo. Journ. Amer. Med. Assoc. January 2, 1909, p. 45.

The new generation are ably maintaining the honor of the Samaritan Hospital. In their ranks are Dr. Frederick McCann, an authority on cancer of the uterus, and Dr. Cuthbert Ludiger, the translator of Wertheim's "Vagino-peritoneal Operations," himself a pupil of the Viennese professor, skillful and successful in the performance of the radical operation for uterine cancer known by the name of his teacher.

Much valuable pathological work has been carried on from the very year that Spencer Wells first followed in the steps of McDowell. In the first edition of Wells' Diseases of the Ovaries: Their Diagnosis and Treatment, published in 1865,\* a most instructive record of his first 114 cases in detail, he publicly thanks Drs. Wilson Fox, Ritchie, Aitken, Barrett, and Frank for their valuable pathological examination of the ovarian tumors which he had removed, Dr. Wadham Webb, who often assisted Wells in his earlier operations, also reported on his tumors; he had previously worked with Barry, aiding him in his study of the ovum, and Dr. Junker, the designer of the well-known inhaler, likewise did much scientific work, analyzing ovarian fluid, etc.

Two Samaritan pathologists were destined to die young. The first was Dr. Charles G. Ritchie, whose "Contributions to Assist the Study of Ovarian Physiology and Pathology," published in 1865, were based entirely on the examination of Wells' tumors, and the record Dr. R. Hamilton Bell, who died at the age of thirty-five, only two years ago. A posthumous paper of high value, "Early Tubal Gestation: A Clinical Study Based on a Personal Observation of Eighty-eight Cases" appeared in the Journal of Obstetrics and Gynecology of the British Empire for December, 1906.

Bantock, early in his career, published a report on parovarian cysts which has been widely quoted. Dr. C. Herbert Roberts, a very active member of the present staff, issued in 1901 his Outlines of Gynecological Pathology and Morbid Anatomy, based largely on work at the Samaritan Hospital and distinguished for the excellence of its illustrations demonstrating tumors and ectopic gestation, samples of medical art worthily recalling that which adorns several famous American and German text-books.

Lastly, having had the inestimable privilege of being a pupil

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<sup>\*</sup>This issue has been for long out of print, having been superseded by the world-famed edition of 1872. Copies are now very difficult to procure. All who desire to know the early history of Spencer Wells' operative experience and his first associates, must study this record of his 114 cases.

of Sir James Paget whom, in company with Dr. Goodhart, I assisted in preparing the second edition of the catalogue of the pathological collection in the museum of the Royal College of Surgeons of England, I have found that the Samaritan Hospital offered me ample opportunities for pathological, study and during the past thirty-two years I have published a considerable number of observations, some of which are, I understand, known to you. I have also endeavored to follow up all patients on whom I have operated, having learned that, expecially in respect to uterine myoma, the cure or removal of the tumor by any known method or operation by no means necessarily means the cure of the patient. I have further learned from personal experience that it is not only for cases of operations for malignant disease that after-histories are demanded before we can determine the real value of any surgical procedure.

Such is the tale of the British Hospital, founded by a gynecologist of high scientific eminence, but made famous by that great surgeon whose determination to overcome those obstacles which barred the way to the extablishment of ovariotomy as a legitimate surgical operation, the key as was afterward proved to general abdominal surgery, was so largely inspired by the example of Ephraim McDowell.

TELEPHONE RESE

The Lancet Offices, 423, Strand, and 182. Bedford St. adjoining. Ondon, W.C. May 22, 1909.

Dear Mr. Doran,

Thank you very much for sending us the copy of your interesting obituary of Dr. Routh. I wonder why Dr. Routh was never made a Fellow of the Royal College of Physicians of London.

Yours very sincerely, were amon

S. Spure prige

Alban Doran, Esq., F.R. C. S. Eng., &c.,

9, Granville Place, sould siftyment, 0

Portman square, W.

.R. C. S. Hng., &cc.,

Thank you very midle for sending Interesting of trunca of Dr. Boutin. I were Alban somm, Esq., F. t. C. S. Suc., &c.