

Articoli/Articles

STUDYING AND TEACHING THE HISTORY
OF MEDICINE IN GREECE: THE NATIONAL UNIVERSITY
OF ATHENS EXPERIENCE (1837-1997)

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SUMMARY

In medical education, little interest is shown in medical history. However, the history of medicine is one vital pathway to the proper study of the evolution of medicine, from ancient to modern times, and it should be a requisite of the medical curriculum. The value of medical history in the understanding of the present and in creating the medicine of the future, is enormous. Our experience has indicated that medical students and younger physicians who ignore the mistakes of their forefathers are destined to repeat them. Furthermore, the history of medicine is needed not only to broaden the students' horizon, it is also necessary in order to prevent the physicians of the 21st century from becoming dehumanized by their bio-technological training. The history of medicine, therefore, is the best antidote to overconcentration on, and overspecification in medical technology and it is the most useful stimulus to more humane professional behaviour and optimal medical education. The new history of medicine does not consist only of the accumulation of dates, events and names; it is a discipline needed for life and action. Tomorrow's historians will view the last years of the second millennium as an eventful and critical period for the medical education of the future.

I am deeply grateful to have the honor of being one of the invited speakers of the International Symposium on the History of Medicine at the Beginning of the 21st Century, and to be in the company of such distinguished colleagues. I, myself, feel very much obliged for such an honour and I regard this invitation as one directed towards my homeland,

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and its very rich medical heritage, rather than to myself as an academic teacher and medical scientist. As one of the greater physicians of our century, Sir William Osler (1849-1919), pointed out, *the tap-root of western civilization sinks deep in Greek soil, the astounding fertility of which is one of the outstanding facts of history*. The kind personality, the productive activities and the scientific work of the outstanding Professor Adalberto Pazzini, in whose honour we are here today, are very well-known and admired in the university medical community of Athens. Thirty years ago, in 1967, the distinguished professor honoured us, with his presence at the official ceremony in the *Aula Magna* of the National University of Athens and was awarded the enviable honorary degree of *Doctor Honoris Causa* (Fig. 1). During the 160-year period (1837-1967), this same honorary degree was also awarded to only three other brilliant names in Italian medicine: Professor Angelo Celli (1912), the Nobelist, Camillo Golgi (1912) and the Senator Eduardo Maragliano (1937). The history of medicine is particularly dependent on local conditions. I would like to attempt to outline the long experience (1837-1997) of the Athens University Medical School in the teaching of the history of medicine. This can be divided into three main creative peri-



Fig. 1 - A memorable photograph of the ceremony when the honorary degree was awarded to Professor Adalberto Pazzini in 1967 at National University of Athens.

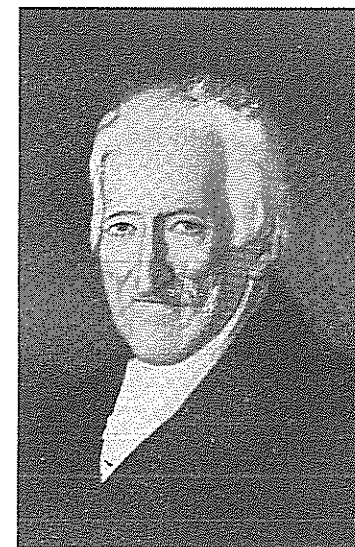


Fig. 2 - Professor of Medicine, Anastasios Lefkias-Georgiadis (1773-1853), the first Dean and first Professor of the History of Medicine at the Athens University Medical Faculty.

ods. During these periods, the teaching of the history of medicine has been an integral and required part of the medical curriculum.

1. The *first period* (1837-1853) was when the history of medicine was taught for the very first time by the first dean of the Athens University Medical School, professor of medicine, Anastasios Lefkias-Georgiadis (Fig. 2). During this period, the teaching of the history of medicine was based mainly upon the questions *who* and *what*.

2. The *second period* (1902-1935) was when the history of medicine was taught by the eminent professor of medicine, Aristoteles Kouzis (Fig. 3). At that time, the study and research of the history of medicine were mainly focused upon the questions *when* and *where*.

Where for example, is the wisdom we have lost in medical knowledge or *where* is the knowledge we have lost in medical information?

3. The *third period* (1980-present) has been a time when the study and teaching of the history of medicine has been established by my col-



Fig. 3 - Professor of Medicine, Aristoteles Kouzis (1872-1861), Chairman of the Department of the History of Medicine and President of the Athens Academy (1945).

leagues and myself. This period has not relied merely on the questions *who, what, where* and *when*, but has attempted to study the role of the medical profession in a changing, modern society, and to answer the critical questions of *how* and *why*.

Let me take this opportunity to pose just four of the numerous questions which fall under these topics. a) *How*, for example, have the medical problems of people gradually changed in the western world, from epidemic to chronic or degenerative disease? b) *Why* will the 21st century physician need to have a medical education with a more humanistic approach? c) *How* far should medicine go in the relief of suffering? This issue will be important in the years ahead as contemporary medicine works to better understand its duties. d) *Why* has Hippocratic Medicine survived through the full stretch of time?

At this point, I would like to make three comments. *First*, prior to the founding of the first National University of Greece (1837), one of

the greatest Greek names in western medical historiography¹ was the Greek historian, Adamantios Coraes (Fig. 4). *Second*, during the 160-year time-frame of the Athens University Medical School, some distinguished physicians in other specialties, with both many cultural talents and a classical education, namely Andreas Anagnostakis (Fig. 5), Theodor Afentoulis (Fig. 6), Constantine Mermingas, Marinos Geroulanos, Spyridon N. Oeconomos (Fig. 7) and Nicolaos K. Louros (Fig. 8) were enthusiastic about the philosophical and social aspects of medical history. And, in their enthusiasm, they lent their support to the pedagogic value of the teaching and learning of the history of medicine at the first medical school to correlate the humanities with philosophical, natural and social studies. *Third*, the rapid growth of technological information has opened up new pathways of knowledge. The Internet and access to Electronic Media, Medline and Bioethicsline are some of the most recent examples. In addition, technological advances



Fig. 4 - Adamantios Coraes, or Adamant Coray (1748-1833), pioneer of Hippocratic historiography at the beginning of the 19th century.

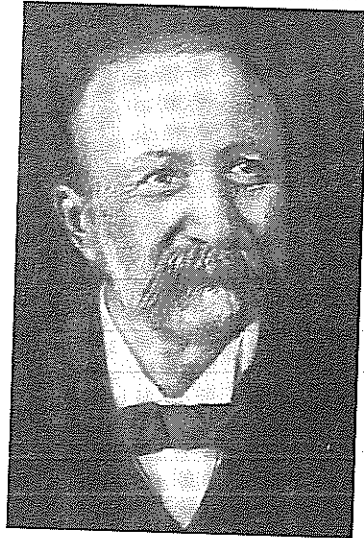


Fig. 5 - Professor of Ophthalmology, Andreas Anagnostakis (1826-1897), a distinguished medical thinker and scientist, deeply interested in Ancient Greek History of Medicine.

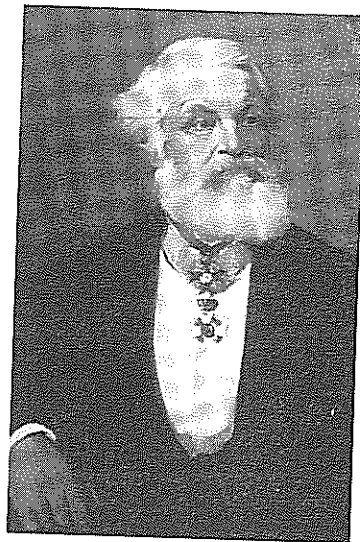


Fig. 6 - Professor of Pharmacology, Theodor Afentoulis (1824-1893), whose interests included Greek philosophy and philology.

Fig. 7 - Professor of Urology, Spyridon N. Oeconomos (1896-1975), founder of the International Hippocratic foundation (1960).

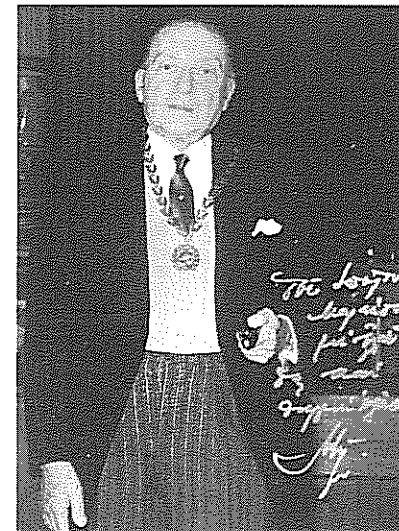


Fig. 8 - Professor of Obstetrics and Gynecology, Nicolaos K. Louros (1898-1986), pioneer of the Neo-Hellenic medical historiography and president of the Athens Academy (1976). Many of Professor Louros' writings reflect a continuing interest in the history of medicine.

have enormously extended the diagnostic and therapeutic capabilities of the modern physician. However, medical technology and bio-engineering have contributed little to traditionally human problems such as psychosomatic and functional disturbances².

I am opposed to the current tendency among young physicians to behave primarily as technicians when dealing with the disturbances of patients who are treated like an object needing repairs. The physician's objective continues to be the traditional principle to heal, to give care and benefit and not to harm the patient according to the basic concepts of Hippocratic Medicine. The history of medicine teaches that the doctor-patient relationship will survive and that more emphasis should be placed on teaching at the bedside, and that homogeneity is not a friend to cultural and scientific creativity³.

According to a student questionnaire conducted at the end of 1997, of the eighteen two-hour periods of curricular time on the history medicine, the most popular issues, and the most attractive lectures for medical students, were Hippocratic Medicine (20%) and twentieth century medicine (25%). The results of our statistical study (Fig. 9) il-

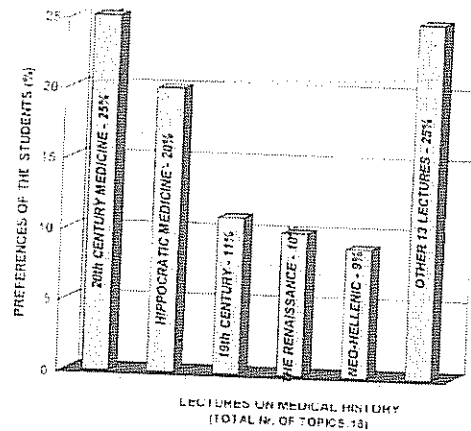


Fig. 9 - The results of the statistical survey of the Department of the History of Medicine, Athens University Medical School (1997).

lustrate a great diversity and reveal a wide variety of 3rd-year student interests and thus emphasize the need for a multi-disciplinary teaching strategy. Our survey also shows that current historiography mainly reflects contemporary concerns (45%).

It does, however, seem very odd that even in our times, in medical education only a scant interest in the study of medical history and of medical bio-ethics is evident. In addition, the medical profession also shows little liking for the history of medicine!

Although this may sound pessimistic, it should be pointed out that in the past, the history of medicine has never been a favoured subject in European medical *curricula*! This is probably because teachers of medicine underestimate the Hippocratic concept *that an important part of medicine is to be able to understand correctly what has been written about it.*⁴

The history of medicine demonstrates that medicine is not an exact science, that it is not universally valid, nor is it independent of time, place, social aspects of health and disease, and technological influences⁵⁻¹². It shows us the cultural aspects of life and thus does not allow us to become mere medical technicians¹³. For example, historians and geneticists have recently described the cultural icon of DNA as the *Bible*, the *Koran* or the *Book of Man*.¹⁴ For all of these reasons, generalizations are hazardous. However, the one and only generalization to which I am fully committed is that the history of medicine should be part of the required medical *curriculum* since the terms *history of medicine* and *culture* are more or less synonymous¹⁵.

I would like to close my lecture with eight very important conclusions which have resulted from the 1837-1997 National University of Athens experience (Fig. 10).

1. The utility of medical history to the understanding of the present and the shaping of the future is immense.
2. Studying, teaching and building upon our national and international medical heritage is a valuable part of the undergraduate medical student's education.
3. The history of medicine provides a social and ethical context for the scientific and professional life of the physician as well as for ethics in medical practice.

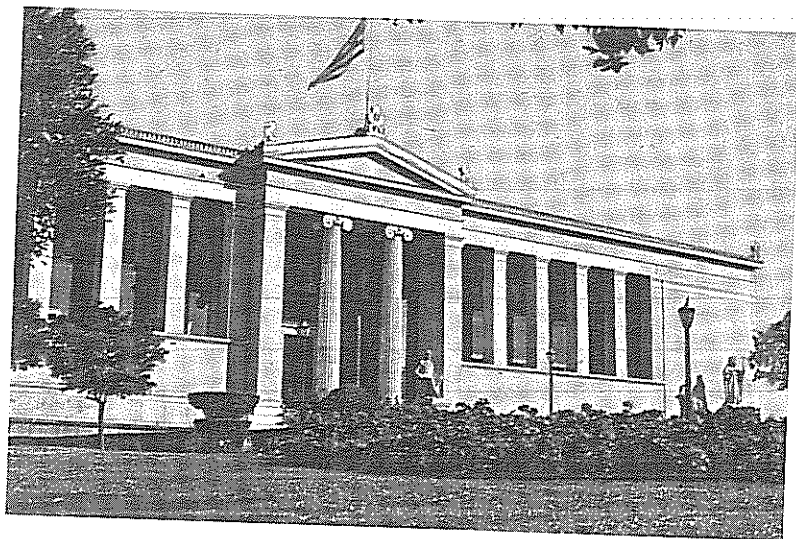


Fig. 10 - The National University of Athens.

4. The history of medicine is needed in order to provide the basis on which medical projects can be planned.
5. Modern medicine, with its gains in medical technology has also lost something, and has contributed little to the traditionally human fields of psychosomatic problems. Technological progress is expected to solve and not pose problems in the field of health care!
6. Modern medicine needs to have its own internal compass, based more than ever, upon the experience of the national and international history of medicine.
7. Medical educators of the history of medicine who have no interest in cultural education are second-rate teachers.
8. The physician who is respected today is the one who can answer the patient's problems and the questions posed by the community. His cultural education must contribute to making him even more humane and competent in the use he makes of the best modern methods of medical technology at his disposal.

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