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British Medical Journal.

SATURDAY, JUNE 18TH, 1898.

MODERN SURGERY IN WAR.

THE announcement that it has been found possible to bring home some of the wounded in Egypt without changing the aseptic dressings applied when [the] wounds were first treated will have been heard with great satisfaction. It is, in fact, a triumph for good surgery and good organisation, and proves that military surgery has shared to the full in the remarkable advance in surgical ideals and methods which the present generation has witnessed. The ideals which surgeons have had before them in regard to the healing of wounds at various epochs form, indeed, a very interesting part of the history of surgery, and especially of military surgery. Very great changes have taken place in the standards set up, even in our own times, and nothing has ever done more to diminish the sufferings of the wounded than the introduction of aseptic methods, which render it not only unnecessary but undesirable to resort to the frequent dressing of wounds which used to be obligatory. Many surgeons who have hardly yet reached middle life can remember the anxiety with which some Nestor of his youth looked out for a free discharge of what he would call "laudable pus" from all but the simplest wounds. To this exudation he looked to carry off, especially in lacerated wounds, all the bruised and torn tissue whose vitality was destroyed by the violence inflicted. His ideal was only realised when dressings were rapidly soaked with discharges so that they needed to be frequently changed; and he encouraged this state of things by poultices and fomentations in great variety.

Later on, in the earlier days of the antiseptic period, the hope of surgeons appeared to lie in the destruction by chemical antiseptics of all the forms of low vegetable life which under ordinary conditions gained access to most wounds, and in the carrying off, by means of numerous drainage tubes all blood and exuded serum which might have formed a favourable soil for these organisms. But the drawbacks of this treatment soon became apparent. In the laudable efforts to destroy the germs which were correctly recognised as the cause of dangerous inflammation, conditions were produced which were actually hostile to the healing of wounded tissues. The chemicals employed not only destroyed the microbes but also many of the tissue elements. And not only had the latter to be shed off before healing could take place, but in the process of elimination, and under the stimulus of the

germicides, increased exudation took place, which required elaborate provision for the escape of fluid from wounds, and the reception and disinfection of the latter in special dressings which called for frequent change, lest they in their turn should become the soil for organic life. This, though tending in the right direction, and affording a necessary transition from the older methods, was based upon a false ideal. The chemicals irritated the wounds; the secretion was consequently greater. This called for frequent interference with the injured part, and consequent risk of fresh infection from without at each exposure. But not only this, but one of the greatest factors in healing, namely, physiological rest, was not maintained, and the debilitated patient was put to much physical pain as well as psychical distress, both serious depressants of vitality in themselves.

Our present ideal is different. The highest aim of wound treatment is now to see that Nature is left as much as possible to herself. To this end we exclude ferments from wounds by every known means applied to the surrounding air, the dressing utensils, instruments, and hands brought in contact with the injured part. We do as little as possible to the actual wound, whether with antiseptics or by manipulation, and so secure a maximum of rest and a minimum of pain and fright to the patient; and if by these means the wound is left clean and at rest Nature will do the remainder.

The case of an excision of a joint well illustrates this change which has come about. In our fathers' days, if such an operation was attempted at all, which, on account of its great mortality, was rare, free suppuration was provided for as a matter of course for weeks and months, and the patient suffered untold misery all through this long after-treatment on account of the constant dressing of the wound and the physical and mental unrest thereby entailed. Then came the blessings of the antiseptic period, with the elimination of infection, but with the drain tubes and the still frequent dressing and interference with the damaged part. We have now arrived at a point where by the aseptic treatment wounds are left in a state of rest, untouched until healed under one dressing in nine out of ten cases. It is, indeed, becoming a very common experience to see these large and complicated wounds of joints, as well as of other parts, left absolutely undisturbed under the dressing put on at the operation until the tenth day. The dressing is only then removed because the wound has been perfectly healed. Indeed inconsiderate patients are often dissatisfied because so little has been done for their wound. They think it ought to have been looked at at least once every day or so. And when the surgeon who has put forth all his powers based upon his knowledge of pathological and physiological processes, as well as the experience of countless cases, points triumphantly on the tenth day to an absolute union without a spot of pus and without drainage, the patient often quietly says, "Yes; I have excellent healing flesh," and ignores his part altogether, ignorant of the fact that only the surgeon's conscientious and patient carrying out of countless details in principle and manipulation have saved him from all the disasters of sepsis. In some cases, even, he is reproached with having done so little, and consequently receives but scant gratitude.

In no branch of surgery has this rapid evolution of ideals been more strikingly illustrated than in the treatment of bullet wounds. The poultice, or frequently changed water

dressing, with all its foulness and risk, gave way at first to the cumbrous ritual of the antiseptic period, with its greatly reduced risks of septic infection, but with its constant change of dressings and frequent irrigation with chemicals. Then, with the more perfect knowledge of the nature of infection, and of its sources, came the knowledge that these could be eliminated by attention to the perfect cleansing of the media which must almost necessarily come into contact with wounds sooner or later. An ideal has thus been reached which for simplicity and the excellence of its results would excite our fathers, could they see it, almost to incredulity.

The modern soldier now carries in his knapsack simple simple antiseptic dressings, to be applied at once by himself or his comrade to his wound. The aim of this dressing is less to act as a germ-destroying covering for the wound itself than to protect the latter from the access of microbes from without, and with such a dressing the wound can be left untouched for days, and frequently to complete cicatrisation with perfect impunity. Indeed, one of its greatest advantages is that with it exposure of the wound, with all its risks of infection, is rendered unnecessary. In short, the ideal which the civil surgeon places before himself in dealing with the terrible wounds of modern operations is realised in the far simpler wounds made by the modern small-bore projectile, with its high velocity and clean-cut hole.

Those soldiers are indeed fortunate who when wounded fall into the hands of military surgeons who fully grasp the principles of asepsis. They conscientiously carry out its details, and their confidence in the precautions for warding off sepsis is such that they positively forbid the removal of a dressing once applied to a bullet wound with due regard to asepsis, so long as pulse, temperature, and general condition indicate that Nature is left undisturbed in her healing powers. These surgeons will then order their patients to be removed at once from the seat of war with a permanent antiseptic dressing and so will prevent that overcrowding of field or base hospitals which in former days not only hampered the commanders in their military movements, but also led to those outbursts of wound infections which swept away countless valuable lives.

Some of us who have seen the horrors of war under the old *régime* must feel deeply thankful that we now possess in our soldier-surgeons men fully impressed with the newer teaching and with the courage and confidence to give effect to it in their own noble work.

FAITH-HEALING IN ANCIENT GREECE.

DR. CATON'S lectures on the Temples and Ritual of Asklepios at Epidaurus and Athens are interesting in themselves as embodying a skillful reconstruction of one of the most pathetic ruins of antiquity, and also as affording a proof that even in these days of crowded scientific life there are still among us some worthy successors of the old race of scholarly physicians who found leisure for other studies in the spacious times when the art of medicine was neither so long nor so absorbing as it is at the present day. Dr. Caton has clothed the dry bones of archæology with flesh, and has enabled us not only to see in the mind's eye the buildings and material environment, but to understand the inner life, and as it were to breathe the spiritual atmosphere of the most celebrated temple of Asklepios, the god of healing.

The Greek Asklepieia had a twofold character, for they were sanatoria as well as shrines. It is difficult to say which of these characters predominated in the earlier days; probably both existed in varying degree at different times and in different places according to the mental constitution of those who had the direction of affairs. As Dr. Caton points out, sometimes the Hierophant was a physician, and in such a case it may reasonably be conjectured that hygiene and medical treatment had a prominent place in the "cure." But for the most part the priestly element was preponderant in the staff of the Asklepieia, and the treatment was thus largely of a spiritual nature. Hence gradually the shrine overshadowed the sanatorium till the temples of Asklepios became simply places to which superstitious or despairing invalids resorted in the hope of a cure by miraculous agency. As the first dawn of rational medicine brightened more and more into day, the thaumaturgic powers of the shrines became discredited, and their glory finally departed when the old gods were driven from Olympus by the triumph of Christianity.

It has been said that the Asklepieia were to some extent sanatoria, and accordingly great care seems to have been taken in the selection of their sites. That of Epidaurus was situated in a pleasant valley and well sheltered by woods. That of Athens was built on a height commanding an extensive view across the plain to the Gulf of Phaleron, Ægina, and the mountains of Argolis. It had a southern aspect, and was protected from cold winds by the rocky eminence of the Acropolis. The hygienic treatment consisted largely in baths and other hydrotherapeutic measures; walking bare-foot was also prescribed, so that Asklepios may be said to have been a precursor of Father Kneipp. Simplicity of diet was enjoined, and bodily exercise in the form not only of gymnastics, but of riding and hunting, was also insisted upon in suitable cases, while music and the drama were largely employed as adjuvants. Nor was purely medicinal treatment neglected, as is clear from the tablet to which Dr. Caton refers, on which the case of Marcus Julius Apellas is recorded. This grateful patient, whose statement is interesting as showing that valetudinarians in antiquity were curiously like unto those of the present day, testifies that he was suffering from many afflictions, not the least being indigestion. Asklepios began his course of treatment by advising the patient not to be so nervous about himself. At Epidaurus Apellas was ordered a *régime* of bread and curdled milk, and a salad of parsley with lettuce; he was to drink lemonade, and also honey mixed with milk; he was further ordered to take exercise, and to rub himself in the bath, but was nevertheless to pay the attendant his fee. He was directed to use anise and oil for his headache, and to gargle with cold water for a swelling in the glands. When his cure was accomplished, he was told that he must pay his fee; and, further, must draw up an account of his cure. Hence we have this record, which reads amusingly like one of the testimonials to the marvellous virtues of the remedies offered to a confiding world by the vendors of modern nostrums.

But in the Asklepieia hygiene, diet, and medical treatment were always supplemented, even when not altogether replaced, by faith-healing. The patient's mind was prepared beforehand for miraculous effects by means excellently adapted to the production of the highest degree of "suggestibility," which the profane describe as "gullibility" writ