Dr Simpson Crane

Thesis.

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Some Remarks on French Hospital Practice.

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Some Remarks on French Hospital Practice

Instead of writing an Essay on some particular disease of which perhaps all the chief points of interest are already known (for in the 19th Century there is nothing new) I determined to make an attempt to give an account of some of the more evident peculiarities of the Paris Hospitals & Hospital Staffs. Some of these peculiarities if not instructive are at least amusing. They are facts which any one can witness who attends the Paris Hospitals, and which many will remember who have attended them. I shall be fully repaid if I can stir up any pleasant recollections of by gone happy days of Student Life in the Quartier Latin. In the following Pages I shall attempt to give some reason for the well known high mortality in the Paris Hospitals: a mortality which my experience leads me to believe is not at all overated.

If the reasons I give appear extraordinary to some, there are certainly others whose memory can carry them back to their gone by days in Paris who will bear out my

statements by what they then say.
It may appear rather uncourteous in me to specify the eccentricities and peculiarities of the Physicians and Surgeons: they themselves could not be offended they are eccentricities in which they rather pride themselves, and furthermore they may be seen by any casual visitor to the wards of any of them It does not then require any heightened apology from me. I give an account of those they only which I saw, or heard from the Medical Men themselves.
I do not specify particular dates for the occurrences which I mention because at the time I did not make a note of them, not knowing that I ever should require to make use of them.
It is not my intention either to accumulate a mass of statistics to prove the truth of any assertion I make, not only because the time necessary for collecting them might be more usefully employed, but because when collected they would be as open to criticism as the unsupported assertion

When I first visited the Hospitals of Paris I expected to see at least successful Surgery, but I was very sadly disappointed, nothing worthy of the name is to be found. The French Surgeons are generally quick & brilliant Operators, but they do not understand the after treatment which is so necessary to bring their cases to a successful issue. Of what avail is the skilful use of the knife, and the display of coolness and indifference? Of what avail the successful termination of a difficult Operation? If to the Patient this is to be but a Passport to another World. This is not the result of the great Operations alone but alike the sequence of Amputations or trivial as that of a finger. All the Surgeons in all the Paris Hospitals are alike unfortunate.

The Hospital de la Pitié since I last had occasion to visit, being built in one of the most healthy parts of Paris, presents a death list almost if not quite as startling as is that of the Hotel Dieu, built on the banks of a River in a thickly populated

part of the City. I will attempt to give some reasons for the high Mortality of the Cases after Operation. Some Peculiarity in the air of Paris might be cited but M. Malgaigne states that the Operation of Lithotomy succeeds as ill in Private Practice as it does in the Hospitals. And besides the same want of success does not attend the Operations performed in the Country at a short distance from Paris by the Hospital Surgeons, shows that the fault does not rest with the Operators.

The blame cannot be thrown upon the drainage nor the state of the streets: in no town possibly in the World is greater attention paid to that head of Hygiene. Cleanliness of the streets is one of the striking Characteristics of Paris.

Whatever it may have been in former years: under the Government of the present Napoleon the stranger will in vain look for the dirty alleys, the narrow streets, the filthy courts, alike the Hotbeds of Contagion, and the Nurse of Epidemics,

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as graphically described by some of the older writers.
We are forced then to look to the Hospitals and in
them an observant eye, or a sensitive nose, is not
long in discovering, at least a very probable cause of the
shocking fatality attending the Surgical Practice of
the Hospitals. I allude to the want of proper Ventilation
in the Wards. A want which doubtless adds numberless
victims to deaths gloomy list every year.
Few People will have visited any of the Wards at
the early hour it is customary for the Medical Men
to attend without becoming painfully alive to
the fact that the Wards are extremely unpleasant
to ones Nasal Organ. The stuffiness of many of the Wards
is difficult to bear by those unaccustomed to it, and almost
impossible unless one is fortified by a good Breakfast,
a precaution which should never be omitted, although
the hour (from 7 to 10 a.m.) renders it rather difficult to
put in Practice.
One great reason for the bad ventilation is the high
price of Fuel which necessitates its being economized

this is done by the use of stoves, which at once does away with the open fire place, from which no little ventilation exists. The escape of heat is watchfully guarded against by the Nurses and the Patients. An Open Window in Winter is a Phenomenon but rarely seen and in many of the Hospitals it is the only perceptible means of Ventilation.
The use of Curtains to the beds is another of the circumstances which also militates against the recovery of the Patients especially those suffering from suppurating wounds, and who are thus obliged to breathe in the noxious emanations from their own foetid discharges. The evil does not rest here but future Patients are liable to be contaminated by the poison absorbed by the excess of drapery. I have many times seen a Bed round which you might walk, as incapable of seeing the Patient inside, as though he were the famous Chaldean shut up in the Pyramids.
Indeed it is one of the means employed by the

Surgeons themselves of excluding the light in certain diseases of the Eyes.

2. The stopping of wounds which is excessive in all cases is another reason. For instead of at least attempting to obtain healing by the first intention, they rather seem to Court Suppuration by stuffing the wound with Amadou, Plastering it with Cerat & keeping it up with Charpie. A mode of treatment which can not but produce those numerous complications which carry off or greet a proportion of their Cases. Perhaps when Compresses come to be more universal and healing by first intention, becomes the rule instead of the exception the Hospital returns will tell a very different tale. It is not shock which kills the most healthy from amputations, but those secondary diseases acquired whilst the Patient is going on apace by the incessant suppuration. If this stage (of suppuration) can be got over who can tell what glorious results may not follow? How many dangers does the Patient not escape

by being able to quit the Poisonous atmosphere of Wards a little sooner than usual.

3. Another reason is that the Diet is insufficient to support a Patient when most he requires it. Consisting of Ptisan. Weak Soups & slops generally. Of the judicious use of stimulants they know absolutely nothing. In illustration of their ignorance of this Branch of treatment it will be quite sufficient to mention one circumstance which I witnessed during my attendance at the Hospital de La Faculté. A Man was brought in who was about to undergo resection of the Shoulder he fainted from weakness as soon as he was placed upon the operation table. M. Nelaton one of the most eminent Surgeons in Paris, remarked to his Page Clap that in such a case it was the custom in Great Britain to give Brandy, the better to enable the Patient to undergo the operation, and that he would try the English Plan of treatment He sent the attendant for some Brandy, but in

the whole Hospital, Medicine wards included they were unable to find a single drop. The strongest Alcoholic stimulant the Place could produce was a little Vin Ordinaire (generally very much the better in Hospitals) which was accordingly administered & the result I leave you to imagine.

4. I would add as another reason the inefficient way in which Chloroform is administered may add to the Mortality, rendering the Patient as liable to death as though the Anæsthetic had never been administered, & all the additional advantage of Opposing the risks (if any) of the Chloroform.

The Manner of administering Chloroform, after seeing the expeditious and safe way this invaluable Pain Killer is given in Britain, strikes one as to say the least ridiculous. In M. Jobert's Service at the Hotel Dieu, a small quantity is poured upon a Sponge and waved about at a most judicious distance from the Patient. If the inspiration ceases to excite the Chloroform & partially Anæsthetize the Assistants. The first time I saw it thus given

I was one time in persuading myself that they were not trying to Mesmerise the Patient by the Mandarin passes that were being made. I once had the good fortune to see Professor Simpson Chloroform a Patient of M. Jobert who was to undergo an amputation of the Mamma. It was given with the usual skill & success: the result was that the operation was concluded in a much shorter time than usual, without a groan from the Patient, but ended with great shock to the nerves of the operator unaccustomed to see such deep insensibility produced. The rapidity with which the operation was concluded partly depended upon the fact that the Operator thought the Patient would succumb before he could conclude the operation. M. Jobert was not caught by this example but went on half mesmerising half Anæsthetising his Patients until the expiration of my attendance at his Class.

The National Character of both Patient and
Practitioner should play a not insignificant
part in our considerations of the causes of Mortality.
The excitability of the Patient so well expressed by
the word Lycitè, exercises great influence upon the
chances of recovery from serious operations, it renders
them less capable of withstanding the shock than the
more unimpassioned character of the English Nation
And as a Nation they are less robust & healthy.
The influence of Character is more conspicuous in the
Practitioners themselves. The young Surgeon when appointed
to a Hospital desirous of immortalizing himself by some
great discovery in Medicine or Surgery, is led into all
sorts of experiments upon his Hospital Patients until
at last he thinks he has discovered something, which
only requires to be sufficiently tried, to write his name
in Letters of Gold upon the Historical Page of Medical
Science. Fully possessed with this idea he sets
to work to save all his Patients by this one (to be) great
discovery. He is undeterred by the want of success

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in the most favourable cases, but lays the blame on some accidental complication or some unpropitious state of the atmosphere, and tries again only again to be disappointed by its failure and to be driven to abandon it only for some new remedy The Perseverance with which they pursue an idea and ride a hobby to Death is truly marvelous Utterly regardless of the discoveries of other men and the well known efficacy of a certain plan of treatment in particular cases they still rush on blindly, conveying their patients to premature + untimely graves.

In M. Trousseau's Wards at the Hôtel Dieu I saw little else than Terpentine prescribed for diseases of every kind and degree. One might well hope that they had indeed discovered the Elixir Vitæ, all other remedies sank into insignificance before this one Universal Remedy for all the ills of Life. It is not in the practice of one man alone that such an example is found but in M

in that of many. One has only to go to the Charité to see to what length this one (Frenchmen) will go in the use of a favourite help to Diagnosis. With one Practitioner at least the Clinique reigns supreme, and with him is made directly or indirectly, to diagnose every form of disease. Percussing a Virgin Uterus through the Sacrum and delineating its exact shape upon the skin, is one of the least of the absurdities committed: others more flagrant must be seen to be believed. A Surgeon at the Hôtel Dieu is the originator of a daring proposal to take off limbs by breaking the bones with a machine invented for the purpose and then severing the Muscles with the twisted wire Ecraseur. A proposal which as far as I know he has never put in practice except in experiments upon the lower animals. Drenches all his wounds with Alcohol in some form or another. Tincture of Arnica, Glycerine and Pure Alcohol are dashed about indiscriminately upon all wounds: under the belief that it

prevents suppuration, a belief with which no one would be impressed who saw the result of his operations and treatment.

Self glorification is a striking feature in his Clinical Lectures; he tells you or rather he would lead you to believe by what he says that there is but one Surgeon in the World, Himself. He ridicules the discoveries of other men, but quietly appropriates their inventions with a slight Modification of his own, taking most credit to himself for the slight and often useless addition. With the twisted Wire Ecraseur which he employs to divide the muscles of the Stump in a form of Amputation, leaving a Contused and Uneven wound instead of a Clean cut Surface, because forsooth it saves a few drops of Blood in a Patient whom he would bleed a few hours afterwards ~~if~~ to the extent of several Ounces if any so called inflammatory Symptoms

set in. In M. Chapaignac's Wards at l'Hopital
La Abroisiere one may see numerous cases all
of which have been operated upon by means of
the Chain Ecraseur. Here again is the use of an
instrument useful in some cases applied
to all. It is generally used with the intention
of saving blood (which it does not always do
secondary hæmorrhage being not uncommon)
at a great sacrifice of time, and the production
of a wound more difficult to heal than that
produced by a sweep of the knife. It is amusing
to see the attempts to fix the Chain of the
instrument over a small Condyloma, which
might be removed with a pair of scissors with
quite as much safety, in a tenth part of the
time necessary to prepare the Ecraseur.
In cases where hæmorrhage is liable to be
profuse and difficult to arrest, and where it
is of importance to save the Vital Fluid:
the Twisted Wire Ecraseur will be found of

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must prefer service than the Chain Ecraseur, the former acts purely by constriction, the latter tends to cut like a knife, and troublesome Hæmorrhage is apt to supervene.

I have seen a flap divided by the Twisted suture, which contained the Superficial Artery, without the loss of a single drop of Blood. No Tourniquet or compression of any kind having applied above.

M. Bean of the Charité [illegible] says that he has discovered the origin and cause of all diseases attributes them to Moral Causes. There is no malady which he does not include from Diarrhœa to Typhoid Fever. The questions he puts to his Patients are something like the following. Have you not had some distressing news? Have you not heard of the loss of a Friend or Relation? Perhaps your feelings have been shocked by reading an account of some sad accident in the Papers? and having in this manner exhausted all the possible occurrences which

might affect the feelings he seldom fails to
get an answer in the affirmative. For who
on any day of his life could say that he was
perfectly free from Care. Freedom from care is
incompatible with life "Dans ce Bas Monde"
Upon such flimsy grounds as these he attempts
to prove that diseases are due to Moral Causes.
M. Jobert one of the quickest and best Operators
in Paris is not to Mount his little peculiarities
the most remarkable of which is his attachment
to the Actual Cautery, especially in diseases
of the Os and Cervix Uteri. The visitor to his
wards may always see a Pan of Charcoal to all
irons at a white heat, placed at the door,
and within some half dozen Women ready
each in her turn to be placed upon the Table
to undergo the operation of Cauterization of the
Os. The operation which I never saw attended
with the least pain, except the Speculum was
allowed to get too warm and burn the Vagina

The Class smells remarkably like a boiling frog at the end of the exhibition.

The result of all these peculiarities in the French practitioners, is that the British Surgeon or Physician being by nature more dispassionate, and less likely to be led away by his own ideas, is capable of taking advantage of whatever discoveries they may make, rejecting the useless and retaining the really useful portion. The British Practitioner is in this way able to treat his Patients with much greater chance of success than the French. The consequence is that cases occur in British Practice which would inevitably perish on the other side of the Channel. The least eccentric and most successful Surgeon in Paris is without exception M. Velpeau. At his Clinical Lectures one may always be sure of hearing common sense assisted by an extensive experience. They who go to Paris to learn Surgery should attend at the.

the Hospital de la Faculté. Thy who are desirous of attending a Medical Ward should go to M. Trousseau a good speaker whom it is a pleasure to hear, notwithstanding his love for Vesperation. If one wants to be amused I should strongly advise them to go to the Charité and hear the Father of Vivisection expiate upon its insalubrity, and on him show to what perfection we may arrive with a little practice, and a good deal of imagination, combined with a thorough knowledge of Regional Anatomy.

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Whatever may be the peculiarities of the Hospital Physicians & Surgeons, they are always ready to show the Stranger every civility, pointing out the most interesting cases in their Wards and ever ready to give any information in their power with respect to anything concerning which we may enquire. I dare say the French would be quite as surprised at our mode of

treatment as we are at Paris. They would fancy we were killing the Patient if we did not bleed him in inflammatory diseases, and that we were poisoning them by wholesale in giving Brandy + Stimulants.

For the Study of Certain Special diseases Paris presents facilities surpassed by few if any other towns in the World.

Where could we find another Hospital equal to the Hospital St Louis for the Study of Skin diseases. Where any two equal to St Lazare and l'Ourcine for Syphilitic affections.

In Conclusion I must apologize for many imperfections of this short sketch as well as for its shortness. Had I not had to devote much time to many other subjects, an apology for its shortcomings would not have been quite so necessary as I am painfully aware it is in the present case.

Many no doubt will object to the personality of some of

The remarks, those wh. do I must refer to what I said above.

Charles A. Cane.

p. 3. French language - read

p. 7 Newspaper &c

p. 8. Study of proverbs

p. 11 N. Attempt to make

[illegible]

p. 14 Explain customs of Explanation