

# Death and the doctor

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By medicine life may be prolonged,  
yet death will seize the doctor too.  
— William Shakespeare, *Cymbeline*

Shakespeare was right — the fountain of youth is still a mythical dream, and the fact is everyone, including doctors, ultimately dies. Most doctors have had uninspiring deaths, much like their patients. However, consider the following physicians who were different, for they died in style.

## Death by murderous quarrel

Poor Johann Wirsung, Professor of Anatomy in Padua, Italy, was murdered while entering his house at night, in 1643, probably as a result of a quarrel over who was the first to discover a duct. He was killed by a Belgian student named Giacomo Cambier one year after he discovered the duct. The duct, whose function was never known to Wirsung, was eventually named after him and is now termed the duct of Wirsung, or the main pancreatic duct.<sup>1,2</sup>

## Death by autopsy

Pathologists claim that autopsies save lives. But autopsies can take lives too. Joachim Giralde's was Professor of Surgery in Paris and is known to students of the history of medicine as the surgeon after whom the paracelsus is named "the organ of Giralde's." Giralde's died in 1875 due to septicemia following a self-inflicted injury during an autopsy.<sup>3</sup>

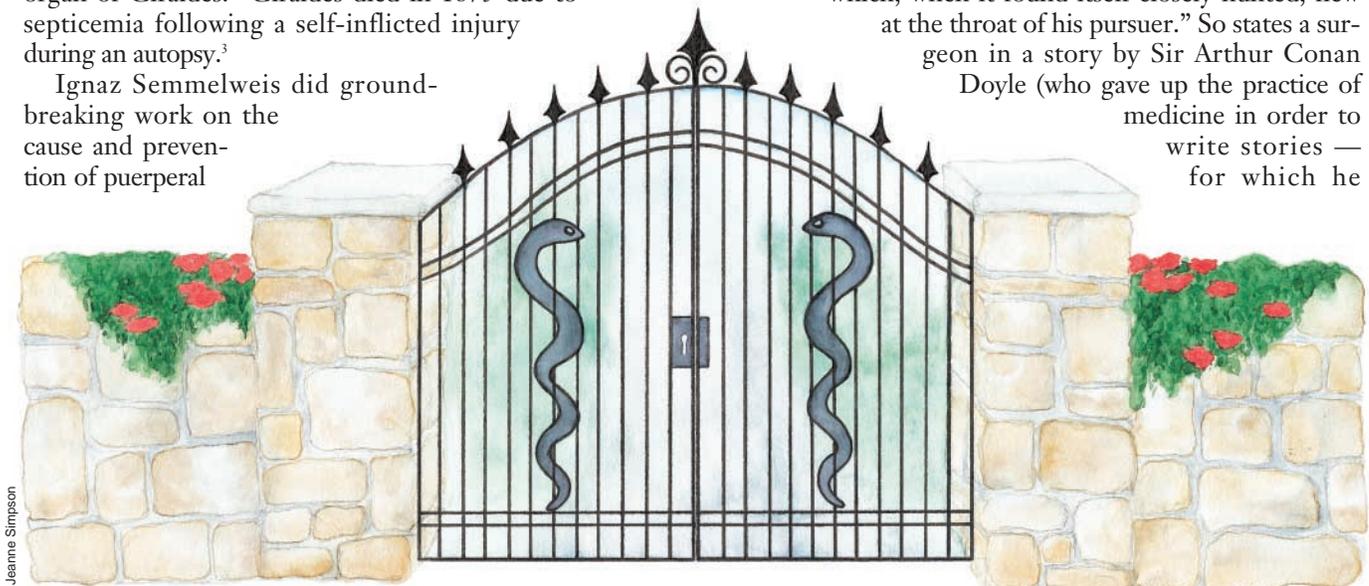
Ignaz Semmelweis did groundbreaking work on the cause and prevention of puerperal

fever (the problem lies in dirty hands while the solution lies in washing them, advice pretty similar to that given by Sir Percival Pott to chimney sweeps regarding squamous cell carcinoma of the scrotum). Semmelweis developed his ideas about puerperal fever on learning that his close friend, Jacob Kolletschka, had died of septicemia in 1847 after a wound at autopsy, but not before exhibiting symptoms similar to those of Semmelweis' patients with puerperal fever. It would have been in keeping with the spirit of this essay to state that Semmelweis too died the same way — of septicemia caused after infection through a self-inflicted accidental injury while examining a patient with puerperal fever.<sup>4</sup> Indeed, this has always been the accepted theory about the manner of his death. However, recent examination of the evidence by Sherwin Nuland suggests that Semmelweis died as a result of injuries caused by overenthusiastic staff at an asylum where he was being held. Semmelweis died insane, partly the result of his having failed to convince the world of his discovery.<sup>5</sup>

Sir James Paget, of various eponymous conditions, was luckier. He developed septicemia after a self-inflicted injury during autopsy, but cheated death — and always claimed, thereafter, that he was the first person ever to survive the attention of 10 doctors.<sup>6</sup>

## Death by the disease being studied

"Men die of the disease which they have studied most. ... It's as if the morbid condition was an evil creature which, when it found itself closely hunted, flew at the throat of his pursuer." So states a surgeon in a story by Sir Arthur Conan Doyle (who gave up the practice of medicine in order to write stories — for which he



Jeannie Simpson

was more highly paid — and who died a natural death).<sup>7</sup>

Examples of such deaths abound, of course. Evarts A. Graham was the first person to perform a pneumonectomy for carcinoma of the lung in 1933. While his patient, a 40-year-old obstetrician, survived 30 more years and died of an unrelated disease, Graham himself died in 1957, well before the patient — of lung cancer.<sup>8,9</sup> Likewise, René Laennec did much to elucidate tuberculosis. He invented the stethoscope and showed that the tubercle was the pathognomonic lesion of tuberculosis and could be demonstrated in the lungs, gut, liver and brain — and died of tuberculosis.<sup>10</sup>

William Mayo, Sir David Wilkie (famous for the “supraduodenal artery of Wilkie”) and Ernest Borges, India’s greatest ever cancer surgeon, died of carcinoma of the stomach. They were all gastrointestinal surgeons.<sup>11</sup> Armand Trousseau, a physician at the Hôtel-Dieu hospital in Paris, went one step further, believing that “self-help is the best help” — he diagnosed his own stomach cancer with what is now known as Trousseau’s sign (thrombophlebitis of the superficial veins of the leg).<sup>12</sup>

## Supernatural knowledge of impending doom

Scottish surgeon John Hunter had no doubt about how he would go. He suffered from angina pectoris and had stated that his life was “in the hands of any rascal who chooses to annoy and tease me.” Hunter died of a heart attack after an acrimonious board meeting at his hospital in 1793.<sup>13,14</sup>

## Bad timing

For sheer misfortune, consider German neurologist and physiologist Hans Queckenstedt. He was consulting internist to the German troops during World War I. In the final days of the conflict, he accepted his last academic position as physician-in-chief to the medical section of the city hospital of Harburg, near Hamburg. While still on military duty, just before the armistice, he was thrown from a horse and killed by a munitions truck.<sup>15</sup>

## Survivors

But not all doctors have died premature deaths. William Boyd, the pathologist and man of letters, developed a carcinoma of the salivary gland in 1948 but survived to edit his textbook as late as 1970.<sup>16</sup> The star of this last section, though, is Sigmund Freud. He survived a myocardial infarction in his mid-thirties and was operated on 33 times for an oral cancer. How he reached the great couch in the sky though is entirely another matter — euthanasia, by means of intravenous morphine.<sup>17</sup>

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Death be not proud — John Donne, *Holy Sonnets*