HENRY E. SIGERIST

(1891–1957)

In the plague year of 1933 I found myself on the pitiless pavements of Paris on a beautiful late spring afternoon. I could not enjoy it—subject as I was to those fits of depression and desperation which beset the exile in a hostile world. I drifted into the small bookshop of Mlle Droz, not with the intention of buying books-which just at that time I could ill afford-but to talk to somebody interested in our speciality. Mlle Droz informed me that Sigerist was expected to arrive shortly from Baltimore for his annual Parisian holiday. Immediately the world had changed, and when a few weeks later I had had a heart to heart talk with Sigerist, crowned as usual by one of the sumptuous dinners to which he would invite his pupils, hope and confidence had replaced desperation. For Sigerist was our strength and shield in those days—a humanist to whom history meant a challenge to understand the present and to bring about a better future. There was not a scrap of his research that was not informed by his full warm-hearted personality. Nor was there anything human that he would not tolerate, nor anything of greater repugnance to him than discrimination and prejudice against man. Indeed, he liked to live and to live well, but much of his life was really devoted to his fellow-men. To create facilities for work and publication, to make the right use of talents, to save them from starvation and misery, to draw water from rocks-for all this he felt it was worth living.

The olympian success that he had in his career and with men in all countries under the sun, is thus explained—and so is his failure in only one field where even he had to curb his good nature—the suffocating atmosphere of pre-Nazi academic intrigue and retrogressiveness. This finally made him give up the Leipzig Institute which in his hands had grown into a singular international centre of teaching and research in medical history, a centre too in which generations of young students received their first introduction to medicine—keeping alive in each of them the spark of enthusiasm for a lifetime. Sigerist's *Introduction to Medicine* has been printed in many editions and translations, indeed it has become one of our great educational classics—yet it gives but a faint reflection of the magic which radiated from his personality filling the large auditorium of the Leipzig Institute to overflowing term after term and attracting more and more auditors from lecture to lecture.

What is more, he did the same in his lectures on medical history which went deep into the kernel of the subject, exposing the unsolved problems

inherent in the source material and its tradition. Such lectures normally attracted only very few students, augmented possibly by a research worker in cognate fields and the assistants of the Institute. His predecessor, the famous Sudhoff, would read his lecture in front of one single auditor whom he would address: 'Mein Herr' instead of the customary: 'Meine Herren'.

Not so Sigerist. For he knew how to present the particular in the light of the general, facts as the product of ideas and general tendencies in medicine as the result of the make-up of a period.

There was some showmanship in his introductory lectures, although there was no pomp or affectation in anything that Sigerist said or did. Perhaps on occasions he was carried away by the success with large audiences of brilliant appraisals of periods—appraisals which, by the time they were used, had lost some of their freshness or sounded more convincing than they really were at any time. To Sigerist they meant no more than educational tools which enabled him to kindle the interest for the History and Philosophy of Medicine in his students and colleagues.

What he thus achieved for the standing of medical history in medical education as well as in academic scholarship in general, amounted to a Renaissance of the subject.

There was still strong opposition on the part of those who regarded medical history as a pleasant diversion for the retired or as directly harmful to the prosecution of the immediate task of the medical man. Sigerist triumphantly overcame it. His strategy was as simple as it was ingenious: harnessing medical statistics to history and historical surveys of the social conditions—including of necessity the present and near future.

He had thus no difficulties in demonstrating that to understand the tendency of our own period and to plan a medical policy that would satisfy its needs, *demanded* the study of History.

He developed unexpected perspectives: medical history so far had been largely the history of great doctors or medical scientists. But nobody had as yet written the history of the patient, the history of the attitudes towards medicine in an ever-changing world, the history of the appreciation of medical services, in short, the history of medicine as dependent upon the specific spirit of a given age. This, to Sigerist, was the very kernel and meaning of medical history, and to this he wanted all detailed research to be subservient. It was this leading idea which should 'save the phenomena' and protect their description against an inglorious burial in journals and archives. I cannot better summarize Sigerist's ideal of medical history than with the words of Poynter who said in his Garrison lecture (*Bull. Hist. Med.*, 1956, xxx, p. 429): Sigerist's 'insistence that the patient should share the centre of the stage with the physician did much to liberate medical history

from the narrow confines of literary history and to integrate the history of medicine with social history, both being, in his opinion, sociological studies.'

He had outlined this topic on many occasions, notably in his essays on *Civilisation and Disease* (in book form: Ithaca, Cornell University Press, 1943). We quote one passage (p. 186): 'There is a certain relation between the prevailing disease of a given period and its general character and style. The Middle Ages was a period of collectivism and the dominating diseases were such collective diseases as leprosy, plague or dancing mania that befell entire groups. In the highly individualistic Renaissance syphilis was in the foreground, a disease that does not attack just anybody, but is acquired through a highly individualistic act. The Baroque period was one of tremendous contrasts and contradictions. The diseases most frequently pictured were deficiency diseases such as hunger typhus and ergotism and luxury diseases such as gout and dropsy.'

That disease reflects the characteristics of the age is a 'Romantic' idea; it was developed by the 'Naturphilosophen' and the 'Naturalist' School ('Naturhistorische Schule') of the early XIXth century. It would be unwise to see in such brilliant flashes of the mind more than fruitful stimuli and directives to research. Though perhaps too generous towards others who tended to exaggerate the application of economics and sociology in medical history, Sigerist himself never lost the sound basis of the historical facts. This is well shown in his History of Medicine which was to elaborate the idea of *Civilisation and Disease* on a grand scale—a work of eight volumes. He was not to survive more than the publication of the first and the preparation of substantial parts of the second volume. Ex ungue leonem: The first volume confronts us with a largely new approach towards the ideal of a textbook of medical history. Sigerists asks: What was the daily life of the Egyptian bondsman employed in the erection of the gigantic public works, what were the risks to his health specifically attending this employment, what were the specific taboos, what the factual knowledge of medicine at different periods and sociological levels throughout the history of Egypt and Mesopotamia? To ask such questions already means a call for revision of such time-honoured clichés as 'progress' and 'continuity' in medical history.

In setting and solving these problems as far as possible, Sigerist emerges as a man of great stature—conjuring up the historical scene and catching the spirit of the period with secure grasp, and above all, a singular harmony between vision and learning.

He not only mastered, but thought in many languages—oriental and western. He was fond of remembering his studies in Persian as a young beginner in London where he was the only one in the class, and the professor made a long journey each time purely for the purpose of lecturing to him.

Sigerist was a brilliant palaeographer and 'editor princeps' of manuscripts, possessed of all the auxiliary techniques of historical workmanship.

All this came to full effect in his seminars in which between him and his pupils a re-interpretation of the Hippocratic Corpus was attempted, and a multitude of learned papers was conceived and produced—as is particularly evident from the year book of the Institute, the famous *Kyklos* which in its third volume (1932) ran into 500 pages.

Of the large number of smaller masterpieces from his pen we mention in particular his essay on Harvey (*Archiv. f. Kulturgeschichte*, 1928, XIX, 158) in which, for the first time, calculus, as employed by Harvey, is assessed as the line dividing him from his predecessors. It is in this that Sigerist finds Harvey to be a typical exponent of the Baroque period, and its tendency to explain phenomena in terms of movement rather than structure.

His labour of love belonged to the Middle Ages—a subject bound to be neglected at all times, even after the monumental efforts of Julius Pagel, of Sigerist's own master, Sudhoff, of Toeply and in more recent times of Charles Singer. Sigerist explored new avenues, first early mediaeval pharmacological lore. His *Studien zur Geschichte der frühmittelalterlichen Rezeptileratur*, his critical edition of the Herbarius Pseudo-Apuleii, and a host of papers and essays by himself and his pupils show the great advance in this field that is due to him—then still a young man just over thirty.

From here he almost automatically lighted upon the continuity of classical tradition in the Occident prior to Salerno as well as the reception of Islamic tradition. Where there had been but scanty scraps of material he was able to submit the rich harvest of his library visits in the South of France and Northern Italy. His reports published in the first volumes of the *Bulletin of the History of Medicine* remain literary monuments of the first order. I remember him talking about this, and in particular of traces of classical continuity in a sixth century medical school at Ravenna, to the late F. Saxl whose own experiences in the tradition of art and symbolism eminently concurred with those of Sigerist.

This was a visit to the Warburg Library in its first London quarters at Millbank, in the summer of 1935. Sigerist had not been in London for many years, but after the war his visits became more frequent—he took a deep interest in the British Health Service—and culminated in the Health-Clark lectures of 1952. From all that has been said, the history of hygiene and preventive medicine was of necessity his favourite subject. He developed it on this occasion before an ever-increasing and spellbound audience in a sequence of scenes—headed by Galen as an exponent of the Hellenic spirit. As Sigerist saw it, to Galen scientific hygiene was applied physiology—not meant, however, for the common people but only for freeborn 'Greeks and for those who, though born barbarians by nature, yet emulate the culture

of the Greeks'. One colourful figure to whom Sigerist accorded a special lecture was Johann Peter Frank. To him, as the typical exponent of enlightenment in medicine, Sigerist felt personally attached.

In 1932, just in time to avoid the open eruption of the dark ages in Germany, Sigerist had accepted the chair of Medical History at Johns Hopkins. Now, just over forty, he found himself in front of a vast field to be conquered by the charm of his personality, his vision and ingenuity. His success—spectacular and memorable already in Germany—became multiplied in direct proportion to the unlimited possibilities in the United States. However quick, dramatic and complete—this conquest claimed his physical stamina to the full. He never refused to travel hundreds of miles to attend a convention or to read papers, to talk and to persuade, mostly on behalf of his fellow workers and the subject as a whole. He created the Bulletin now beyond its thirtieth volume, the Supplements and the Texts and Documents, he organized the American Association of the History of Medicine with its host of sub-committees and laid the foundation to a historical survey of American Medicine (on lines similar to his survey of Medicine in Soviet Russia). It was in such sociological and historical surveys that he could prove his old thesis: that medical history is medicine.

Sigerist soon became a byword in medicine, and attracted to himself all the appreciation and honours which a great international medical figure can expect. His works eminently readable, convincing and informed—notably his *Great Doctors* and *American Medicine*, went through many editions and translations.

Yet it could not last—the strain had been superhuman, he was not spared the disappointments that fate has in store for the outspoken critic and medical strategist. Sigerist retired to his native Switzerland. Here, in a happy family atmosphere, a true philosopher, surrounded by his cat and books, he worked at his great 'History', and continued receiving friends from near and far, conducting a seminar or presiding over a historical medical meeting at his 'Casa Serena' on the shores of the Lake of Lugano.

I have known and loved Sigerist for some thirty years. I know he would not have us mourn him. It is rather gratitude that we feel when looking back at this great life. For No $\delta\varsigma$ $\zeta\tilde{a}$ —his spirit lives, even if he is at rest.

WALTER PAGEL