



Gross Knifing at the Medical Society!

PRESIDENT'S MESSAGE



By Richard Jones, MD

WHAT MIGHT GRAVE ROBBING, dissection, vivisection, venereal disease, and displays of anatomy have to do with our medical society? Membership recruitment? A new hit medical TV show? Possibly, but that is another story.

In the initiation of our profession, who can forget cleaved specimens, the cadaver-filled stainless steel tanks and the formalin miasma of the anatomy lab? It is our fundamental step in learning about the format and functioning of our calling. We still may appreciate the anatomy that supports a human body, but do we know the functional anatomy of what runs your medical society?

Having just finished reading "The Knife Man,"¹ I cogitated about the remarkable life of John Hunter, an 18th century London physician and a pillar in the development of modern medicine. From a humble Scottish farm, he ascended to become the preeminent surgeon in England, physician to King George III and mentor for many American physician pioneers.

With little formal education, he initially distinguished himself by the quality of his meticulous dissections of freshly disinterred corpses. Since there were few public medical schools, there was an industry in London for private medical education and his labors supported the lyceum his entrepreneurial brother ran. Hunter's dissections had to be carried out in the winter as the balmy spring and summers led to quick, odiferous putrefaction.

Under cover of the dark morning mists, the carts carried their harvest from the churchyard and gallows to his laboratory. What emerged from a lifetime of the dissected bodies of men, women, and children was a vast collection of exquisite medically edifying specimens and a greater understanding of anatomy and improved surgical technique.

In his era, physicians were still part of the barber society and adhered to ancient time-worn measures of bleeding, emetics, poultices and poisons. Few physicians had knowledge of the organs, muscles, nerves and systems that made the body tick, so Hunter's experimental and scientific approach to dissection and investigation heralded a renaissance in the development of modern medicine and theory. He also performed animal vivisections that, despite their PETA nightmare cruelty, led to the progress of physiology and embryology.

His amazing stamina and curiosity led him to author revolutionary treatises on dentistry, military medicine, and comparative anatomy of species partly from his private zoological menagerie in London, (he was the inspiration for the story of Dr. Doolittle of Disney fame). He had penned tomes on geology and nascent theories of evolution predating and perhaps even inspiring Darwin 100 years later.

Since venereal diseases were rampant in promiscuous, though pre-MTV, Georgian England, his clinics were full of aristocratic sufferers. In an experiment to document their

effects, he was thought to have inoculated himself with gonorrhea/syphilis. Fortunately, he didn't succumb to its tertiary effects or, even worse, its mercury or arsenic treatments.

Despite his position in the upper echelons of aristocracy, Hunter provided free surgical care in the hospital and his own private clinic. In his waiting rooms he made the rich gentility wait for the working poor, since the former had "nothing but time on their hands."

Hunter was a leader, too, in his scientific and local medical societies. Ironically, although he was the most accomplished physician in England, he was ostracized by his own hospital board. Their petty jealousies and resentment over his novel and effective systems of surgery and education kept him off the board of governors. He died arguing a point at the board; his fragile chronic anginal vessels thrombosed during one of his passionate arguments about medical education.

Consistent with his roots in anatomical work, his will specified he be subjected to an autopsy and that parts of his body be added to his specimen museum!

So apart from his 4 hours-a-night sleep, hypomanic immense opus of accomplishments, he is still much appreciated for his fine anatomical skills. These I happened to stumble upon at the Royal College of Surgeons when I was looking around that London neighborhood for a bathroom. The Hunterian Collection, besides the fine waterclosets, are a bewildering array of dissections of humans, animals and "monsters of nature" in jars preserved in spirits of alcohol.

Tragically, about 80 percent of the collection was lost in the blitz of WWII, whose blazes the flammable alcohol preservatives stoked. Still, many thousands remain for inspection, his careful "knife work" revealing structures we only imagined in our own cadavers.

To a vast many of us, SSVMS seems a bit mysterious, unknown and unfathomed in its complexity, like the human body was at the time of John Hunter's apprenticeship.

Thus I pondered, what if John Hunter was alive to dissect the medial society? What might his observations be to instruct naïve students? Perhaps it would read as thus:

Before us lies the corpus of the species SSVMS of the family CMA. In repose it is a most curious embodiment having no clear definition of its outlines, but one can observe a number of prominent systems.

The nervous system upon dissection reveals signs of tightly woven axonal and grey matter in a manner that greatly suggests this being possessed of a high intelligence and complexity. Its brain is composed of elements of a highly evolved executive function with the upper layers identified as Williamus Sandburgus and Chrisus Stincellius that appear to have multiplexed synaptic adhesions to the 15 member component of the Boardus of Direcotrus.

These structures subsequently divided and appear to interact with all 2,800 cells or organisms of the SSVMS. Cells of the SSVMS appear to differentiate into Boardus Directorus for a period of 2 years before returning to the basement membrane of members. A feedback mechanism appears in place to coordinate the reactions, movement and responses to the corpus of SSVMS.

Heart. The heart of SSVMS appears prodigiously large and muscular. In its striations, one can observe the structure known as the SPIRIT Program. It, in turn, is constituted of member physicians who volunteer to provide medical services to the indigent and underserved of the Sacramento community. Over the course of its development, this heart has provided over 2,692,630 million pounds sterling of medical care.²

The heart has other cordea and tendenae that pump beneficial medical

nourishment to the community. These are a Pediatric Care Coalition, instrumental in getting children covered with health insurance in the Sacramento Valley, a Community Clinic consortium tasked with care for the Sacramento Valley uninsured, Adopt-A-School, the generous efforts of SSVMS Alliance, and a healthcare scholarship program.

Mouth and Teeth. For such an apparently gentle creature, the SSVMS, subspecies of CMA, have a formidable orifice. This seems to be an adaptation to facilitate communication with members and more importantly to advocate to competing species such as legislators and policymakers. The teeth are concealed beneath a tunicous mucosal membrane, but when retracted reveal lobbyist incisors prepared for active defense or offensive endeavors.

Skeletal. SSVMS weight is carried by the underpinnings of over 2,800 structural elements, known as members. These also interdigitate with the nervous system. Some bones are bigger and some are smaller but all are interconnected and seem equally important in supporting the corpus and apparent functioning of SSVMS.

Tail. A vestigial appendage is noted that serves no function to the health and vitality of SSVMS. It appears to be constituted of non-member organisms. It may be parasitic in nature and is in close approximation of the cloacal area. Pathogenic organisms, identified as malpractice attorneyous terribilus afflict this area causing apparent stress, expense and hardship for the body.

My pardons to Mr. Hunter for so brief and poorly rendered description. His analyses normally ran for hundreds of pages, and a proper description of the SSVMS anatomy, accomplishments, constituents and of its staff and dedicated members would no doubt be of that length. (Editors gasp even at the length of this piece.) I think Hunter would be proud that SSVMS does embody his concerns of the scientific approach to medicine, indigent care and outspoken leadership in medical policy.

Our society is far from needing a formal autopsy, even by the talents of Mr. Hunter. But it takes a small amount of dedication, cooperation and support from all its members to keep the corpus vital. By each of us mustering just a bit of the energy similar to Hunter's passion for his profession and dedicating it to CMA and SSVMS, we will keep future "knife men" from putting us in a specimen jar.

And instead of it being gross anatomy, it would be a fine specimen of growth anatomy.

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1. The Knife Man: The Extraordinary Life and Times of John Hunter, Father of Modern Surgery, by Wendy Moore.
2. Or 5.6 million in American dollars.

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