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Osler Library of the History of Medicine, McGill University, Montréal (Québec) Canada

Digitization: Approaches and Opportunities

One of the questions often asked by visitors to the Osler Library is whether we intend to digitize all of our rare books. The short and quick answer is no. The longer response includes a summary of our priorities and incentives for digitization. Some opportunities to digitize materials come from scan requests. In other instances, we have arranged for new acquisitions to go directly from Collections Services to Digital Library Services in an effort to streamline the scanning process while making new materials immediately available to a wide audience. In addition, the move to the archives management system AtoM has invited opportunities to test the capacity of AtoM to handle digital material. Above all, digitization helps us promote our collections to new audiences while increasing our own familiarity with local holdings.¹

Digitization often leads to serendipitous (re)discovery, as is illustrated in the case of two manuscript record books from

the McGill Medical Faculty's dissecting room (1883-1891; 1896-1908). Originally requested by a researcher, library staff decided to have both volumes digitized in their entirety. The greater value of these works was immediately clear. The entries themselves are fascinating for the demographic information they provide: the name of the individual, which hospital they had come from, whether they were Protestant or Roman Catholic (Figure 1). In some cases, the entry was amended to note that the family had retrieved the body, or that the person had been too far decomposed for anatomical study. There is also the peculiar presence of a small ticket, which read in bold letters, "Admittance for one body" (Figure 2). Thus, out of a standard request for digitization, we rediscovered a source we knew we can draw upon to engage many of those who use the library's resources.

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Figure 1 • Section from the 1896 Dissecting Room Record showing an increasingly explicit labeling of religion (note the circled "P" for Protestant). / Page du registre de la salle de dissection de 1896, où l'on voit de plus en plus souvent l'étiquetage explicite de la religion (notez le "P" encerclé pour désigner un protestant).

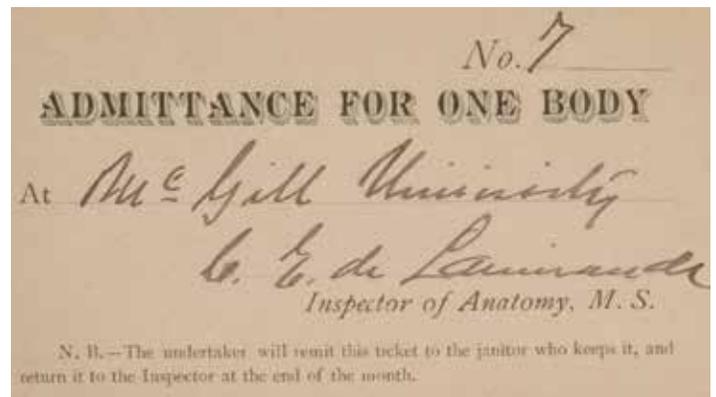


Figure 2 • Found in the 1883 Dissecting Room Record, a ticket intended to confirm the legal procurement of bodies for dissection. / Trouvé dans le registre de la salle de dissection de 1883, un billet qui confirme l'acquisition légale de corps pour la dissection.



McGill



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Digitization: Approaches and Opportunities / Numérisation : méthodes et possibilités

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The dissecting room records are now part of a small sample of works that we use to help students discover the history of anatomy as studied in medical schools: from the visually-hierarchical anatomy scene in Johannes de Ketham's *Fasciculus medicinae* (Osler Library's copy, 1500) to the resurrectionists of the 19th century, and concluding with a reflection upon the service now held each year wherein medical students express their gratitude to the families of those who donated the bodies of loved ones in order to advance medical studies. The dissecting room records encourage the engagement of the viewer; one wants to know more, and the coincidence of the first book with Quebec's revised Anatomy Act of 1883 invites immediate discussion. The profile of these records, indisputably raised by their digitization, in turn led to the inclusion of the 1883 record (among other items) in the exhibit "Autopsy from Sight to Knowledge," on display in the McLennan Library foyer through this summer.

While the dissecting room records illustrate how digitization efforts can lead to a level of engagement unimagined upon receiving an initial request from a researcher, another book on anatomy reflects our current commitment to digitizing new acquisitions that will appeal to a larger audience. Jean-Galbert Salvage's *Anatomie du Gladiateur Combattant, Applicable aux Beaux Arts* (1812) is visually appealing and the subject matter, gladiators demonstrating kinesis, is intriguing (Figures 3-4). It is a case where digitization has led to greater use of the work, as we invite visitors to engage with the elephant folio directly while advertising that it is available for further examination in digital form. *Anatomie du Gladiateur Combattant*

is made all the more curious due to the story of its creator. Salvage studied medicine in Montpellier during the French Revolution and became a military surgeon. He was also an artist and his opus represents an argument to the government to fund the arts. Salvage's story has yet another twist: he died of tuberculosis shortly after his tome was published, most likely having contracted the disease from one of the cadavers he studied at the military hospital where he worked as a surgeon.²

A third item that Osler staff sent to Digital Library Services,

Les visiteurs de la bibliothèque Osler demandent souvent si nous avons l'intention de numériser tous nos livres rares. Une réponse plus longue nécessiterait un résumé de nos priorités de numérisation. Par exemple, certaines possibilités de numérisation proviennent de demandes de copies digitales. Également, nos nouvelles acquisitions sont numérisées avant d'être livrées à la bibliothèque, les rendant immédiatement accessibles à un plus large public. En outre, le passage au système de gestion des archives AtoM a permis de

tester la capacité du système à gérer le matériel numérique. Par-dessus tout, la numérisation nous aide à promouvoir nos documents auprès de nouveaux publics tout en nous permettant de mieux nous familiariser avec les collections locales.¹

La numérisation mène souvent à une (re)découverte fortuite, comme l'illustre le cas de deux registres manuscrits de la salle de dissection de la Faculté de médecine de McGill (1883-1891; 1896-1908). À la demande d'une chercheuse, le personnel de la bibliothèque a décidé de numériser ces volumes. La valeur de ces œuvres a été immédiatement évidente. Les entrées elles-mêmes étaient fascinantes dû aux informations démographiques qu'elles fournissaient: le nom des individus, l'hôpital d'où ils venaient, s'ils étaient protestants ou catholiques romains (Figure 1). Dans certains cas, les entrées ont été modifiées pour indiquer que la famille avait récupéré le corps, ou que la personne avait été trop décomposée pour être utilisée pour l'étude anatomique. Il y avait aussi la présence particulière d'un petit billet, qui cite en gros caractères, « Admission pour un seul corps » (Figure 2). Ainsi, à partir d'une simple demande de numérisation, nous avons localisé un ouvrage qui nous permettra sans doute d'attirer un grand nombre de

chercheurs qui utilisent les ressources de la bibliothèque.

Les registres de la salle des dissections font maintenant partie d'un petit échantillon d'œuvres que nous utilisons pour que les étudiants puissent découvrir l'histoire de l'anatomie: de la scène de l'anatomie visuellement hiérarchique dans *Fasciculus medicinae* de Johannes de Ketham (exemplaire de la bibliothèque Osler, impr. 1500) aux résurrectionnistes du XIX^e siècle; la leçon se termine par une réflexion sur le service qui a lieu chaque année, où les étudiants en médecine expriment leur

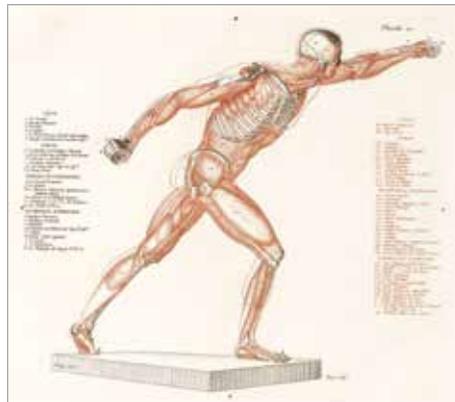


Figure 3 • One of Salvage's illustrations of the body in motion. / Le corps en mouvement, comme le montre Salvage.

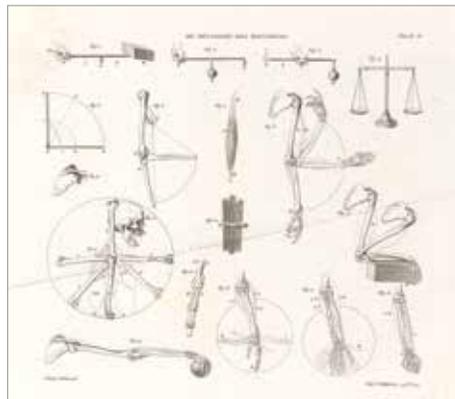


Figure 4 • Mechanisms of motion. / Les mécanismes du mouvement.

also relates to the dissecting room records and to *Anatomie du Gladiateur Combattant*: Eugène Ducrot's *Cahier d'Histoire Naturelle*, a manuscript he compiled as a student at the Collège Royal de Moulins when attending the lectures of M. Denou in the years 1835-1837. Like Salvage's opus, Ducrot's manuscript is new to the Osler and digitization is one way by which we hope to promote what we believe to be an interesting and useful work, while protecting it from excessive handling. Aesthetically, Ducrot's manuscript is beautiful: the pencil, ink, and watercolour drawings far exceed what one would expect in a collection of lesson notes. Academically, the work offers a glimpse of natural history education in France in the mid-19th century (Figure 5).

Ducrot opens with ten lessons on physiology, followed by forty-six on zoology (including a curious and dated section on ethnology), which explicitly follow the approach of Georges Cuvier. The notes end with six lessons on botany and three on geology. Of particular interest to historians of medicine are the opening ten units on physiology. Although the discussion is comparative, the focus of the text and accompanying illustrations

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Figure 5 • One of Ducrot's drawings that is less precise medically, yet interesting historically for the inclusion of the bicorn. / *Un des dessins de Ducrot qui est moins précis médicalement, mais intéressant historiquement par l'inclusion de la bicorn.*



Figure 6 • Description of the teeth. / *Description des dents.*



Figure 7 • Saliva and its function. / *La salive et sa fonction.*

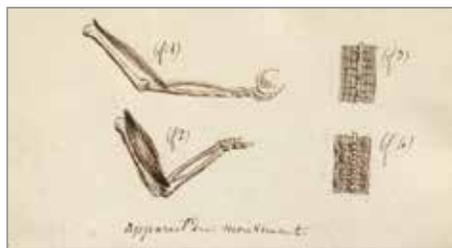


Figure 8 • Like Salvage, Ducrot took care to depict the mechanics of movement. / *Comme Salvage, Ducrot a pris soin de représenter la mécanique du mouvement.*

gratitude aux familles qui ont fait don des corps qui ont aidé la progression des études médicales. Les registres de la salle de dissection encouragent aussi l'engagement du spectateur; on veut en savoir plus, et le premier registre, qui coïncide avec la révision de la Loi sur l'anatomie du Québec en 1883, encourage

une discussion active. Le profil de ces documents, incontestablement rehaussé par leur numérisation, a fait que le registre de 1883 a été inclus (entre autres) dans l'exposition « L'autopsie du regard au savoir, » exposée dans le foyer de la bibliothèque McLennan tout au long de l'été 2018.

Alors que les documents de la salle des dissections illustrent comment les efforts de numérisation peuvent mener à un niveau d'engagement inimaginable par rapport à la demande initiale du chercheur, un autre livre sur l'anatomie reflète notre engagement actuel à numériser de nouvelles acquisitions qui plairont à un public plus large. *L'Anatomie du Gladiateur Combattant, Applicable aux Beaux Arts* (1812) de Jean-Galbert Salvage est visuellement attrayant et le sujet, les gladiateurs démontrant la kinésie, est intrigant (Figures 3-4). C'est un cas où la numérisation a mené à une plus grande utilisation de l'œuvre, car nous invitons les visiteurs à s'engager directement avec le folio éléphant tout en annonçant qu'il est disponible pour une consultation plus approfondie sous forme numérique. *Anatomie du Gladiateur Combattant* est d'autant plus curieux par l'histoire de son créateur. Salvage a étudié la médecine à Montpellier pendant la Révolution française où il est devenu chirurgien militaire. Il a également été artiste et son opus représente un argument au gouvernement pour financer les arts. L'histoire de Salvage porte encore un autre aspect: il est mort de la tuberculose peu de temps après la publication de son tome, très probablement après avoir contracté la maladie auprès de l'un des cadavres qu'il a étudié à l'hôpital militaire.²

Parmi les documents que nous avons envoyés aux Services de bibliothèque

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The McGill Dissection Room Records; An Opportune Discovery for Today's History

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The Osler Library has a pair of ledgers entitled "Faculty of Medicine, McGill University; Dissecting Room Record" dating from 1883 – 1891 and 1896 – 1907. Both are beautifully bound, and in remarkable condition for their age. In these volumes, three subjects are listed on each page. In addition to the subjects' names, the authors included the hospital, asylum, prison, or other institution the subject came from, when they were received, and other essential pieces of data including gender, age, and religion. Without knowing the context, these records appear to be a dull bureaucratic exercise, but actually present a rare piece of evidence regarding the perfectly legal trade of dead bodies in Canada.

This elusive history of the procurement of dead bodies for medical school dissections in Canada has not yet warranted a comprehensive study. The same topic has garnered considerable discussions in France, Britain, Germany, and Australia, but Canada is behind the trend. My dissertation focuses on expanding the topic in a Canadian context and comes at a prodigious moment, when the current historical approach favours 'people's history.' Ironically dubbed "history from below," this approach encourages historians to investigate the past from the perspective of common people rather than just the leaders, or in the case of medical history, the healers. Thus these banal-looking registers are even more significant to how history is examined today, for instead of listing the students who dissected or stole bodies, they list the people who were dissected for the sake of medical education.

I owe this providential discovery to



MCGILL UNIVERSITY ARCHIVES, PR03175

Figure 1. The James Building, Home of the McGill Medical School until 1907.

the generosity of the Pivnicki Award Committee and the assistance of the Osler Library staff, whose lead librarian directed me to the dissection room records which still represent the most significant find for my research.

A Brief History of Cadaver Procurement in Quebec

To contextualize these records, a short history is in order. The first Canadian Anatomy Act was passed in 1843 by the Province of Canada but it was never an effective solution to the lack of cadavers plaguing McGill and other medical schools. The new province lacked the capacity to enforce regulation of the trade and the institutions who were responsible for relinquishing bodies were unwilling to comply, owing to

the moral objections of the religious orders which ran them. This forced students and faculty members to use more nefarious methods to acquire the necessary subjects. These means not only included the practice of hauling shovels up Mont Royal to visit the cemeteries after dark, but also involved sourcing cadavers from as far away as possible to ensure a steady supply. In 1876 a farmer from Cornwall Ontario found the corpse of his wife was missing and tracked it to an unnamed Montreal school before demanding to have her back. Rather than apologizing, the dean of the faculty "who was not, however, in the best of humor, complain(ed) that the Government was neglecting its duty in not providing subjects for the use of the College."¹

The unapologetic doctor was not

wrong. Even when there were institutions willing to obey the law and relinquish cadavers, the anatomy inspector was found wanting in enthusiasm for his duties. Instead of the Montreal Inspector sourcing cadavers, inspecting them and their records, and performing the delivery, anatomists from the local colleges would assume the inspector's duties in sourcing and retrieving cadavers before tracking down the inspector to give him his fee of ten dollars for the formal permit to dissect the body.² With such an apathetic inspector, many publicly funded institutions instead buried their dead privately whenever they could to spare the deceased the indignity of dissection.

Following the passage of the 1867 British North America Act, when control of the Anatomy Act passed into the hands of the newly created provinces of Ontario and Québec, things gradually changed for the better in Quebec. The main catalyst proved to be a body-snatching incident that turned into a scandal when the bodies of Sister Mary, Sister Mary Margaret and a young girl named Boyer were stolen prior to burial from the Lachine churchyard in 1871.³ When the incident became public, the general populous generated “a great out-



ARNAULT / MCGILL UNIVERSITY ARCHIVES, PL00581

Figure 2. Students of McGill Medical School, class of 1900, posing with a cadaver ca. 1897. This was a common trend in Canadian medical schools.

cry,” making it impossible for the thieves to unload the politically charged bodies on any anatomical school.⁴ In a panic, the bodies were ditched in convenient snowdrifts before the exhortations of the families convinced the thieves to return the bodies for payments of \$112 each,⁵ and a pledge that the names of the body-snatchers would never be revealed.⁶ The scandal so outraged “the community and Catholic hierarchy that the Archbishops (reportedly) approached the Anatomical Departments and asked them what kind of law they wanted in order to obtain subjects legally.”⁷

Despite this show of enthusiasm, it would take until 1883 for an effective anatomy act to be passed in Quebec.⁸ This act put in place severe financial punishments for schools caught stealing the dead and for institutions that refused to obey the law.⁹ The new penalties were no mere empty threats, as proven when the St. Patrick's Orphan Asylum in Montréal was forced to give up government funding when it refused to pass on the bodies of its dead orphans.¹⁰ Further, the Catholic Church sent a circular to their institutions in Montreal with

a template the hospitals were to use when relinquishing a cadaver for dissection.¹¹ Thus, after the passage of the act, the demonstration of the penalties for non-compliance and new orders from the Catholic Church to obey, institutions began to relinquish their poor dead in earnest. With a steady, properly facilitated supply of bodies, body snatching was rendered superfluous and as noted by the *Canada Medical and Surgical Journal* in March of 1884,

...from last October until the present moment, not one single paragraph has been found in the daily papers having reference to the desecration of graves... for the first time in the history of the country, grave-robbing has been entirely unknown. The main object, therefore, for which the Act was passed –viz., the suppression of the resurrectionists—has been completely fulfilled. At the

same time the requirements of the Medical Schools have been amply met...¹²

In fact, “amply met” may very well have been an understatement. According to the dissection room records which started in 1883, the same year the new anatomy act was passed, there was a positive



MCGILL UNIVERSITY ARCHIVES, PL028661

Figure 3. McGill Medical School dissection room, ca. 1900.

inundation of cadavers to the dissection room from perfectly legal sources.

In response to this excess and in keeping with new pedagogical theories the format of the anatomical classroom changed dramatically. Gone were the days of students jostling for position around a single dissection table, watching their professor carry out a dissection. With so many cadavers available, students were now placed in small groups around a dissecting table and shared in the duties of dissection with their peers. It is because of this excess of bodies that McGill students became well known in Great Britain and North America for their anatomical knowledge.¹³

The Records: Provenance and Providence

This brings us back to the records themselves. Having visited medical school archives across Canada, I can say I have never encountered records like these before or since. Part of the Anatomy Act provided for the Anatomy Inspector to keep such records to ensure that no school was treated unfairly by the

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Contracting Habit in Nineteenth-Century French Medicine

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The Osler Library of the History of Medicine's 2015-2016 and 2016-2017 Dr. Dimitrije Pivnicki Award in Neuro and Psychiatric History allowed me to conduct research crucial to the development of my doctoral dissertation titled, "Reading between the Lines: Post-Academic Drawing Pedagogy in Nineteenth-Century France." Thanks to the Osler's generous support, I consulted the materials necessary for the intellectual framework of my dissertation—which looks at the relationship between art pedagogy and the education of the senses, especially as this concerns habit acquisition. In conjunction with this research, I drafted the article, "Contracting Habit in Nineteenth-Century French Medicine," which explores understandings of habit in nineteenth-century medical theses from the Osler Library of Medicine's Paris Medical Thesis Collection.¹ It investigates what it meant for habit to become central to modern medical theory and practice. This argument builds upon recent research that harnesses theories of habit to concepts of neuro or brain plasticity. The following is an excerpt that I will submit to a peer reviewed journal for publication:

Habit typically is defined as any behavior acquired through repetition and performed unconsciously. Coterminous with "second nature," habit is the naturalization of learned customs. While theories of habit largely have fallen within the domains of philosophy and sociology, emerging in texts by Aristotle (384-

322 BC), Félix Ravaisson (1813-1900), Maurice Merleau-Ponty (1908-1961) and Pierre Bourdieu (1930-2002), amongst others, concepts of habit acquisition also have featured prominently in the health and wellness sector. From leading scientific and medical research down to forms of "common" knowledge often described as "maternal" wisdom, habits have been praised and demonized for their ability to support good or bad health. Indeed, western society normatively decries substance abuse, nail biting, poor hygiene, and unhealthy eating as foils to "good" or "healthy" habits that range from maintaining a balanced diet, exercising regularly, and flossing daily. Unlike such valorized habits, excessive alcohol intake, smoking, and a sedentary lifestyles are denigrated as "bad habits" that ought to be "kicked," "dropped," or "broken."

Due to a growing interest in behavioral and embodied medicine models, habit has increasingly received attention in contemporary discourses that range from the popular to medical to humanistic. The connection between habit formation and good health is acknowledged widely by medical practitioners, in magazines and blogs, and in popular adages such as, "An apple a day keeps the doctor away." Yet, few scholars historicize the alliance between health and habit, or evaluate what it presently means and meant in the past for habit to become central to medical practices and beliefs. As a result, my research investigates the role of habit in the history of medicine and the conceptual ramifications of its authority over medical procedures.

The importance of habit to medical discourses is far from new; it has figured prominently in medical theories since

antiquity. Notable medical theoreticians and naturalists including Galen (239-c. 200-216), Hippocrates (c. 460-375 BCE), Joan Baptist Van Helmont (1579-1644), Georg Ernst Stahl (1659-1734), Georges Louis Le Clerc Buffon (1707-1788), Charles Bonnet (1720-1793), and Xavier Bichat (1771-1802) all set a precedent for modern physicians by describing the effects of habit on the body and health. When nineteenth-century theses, such as those by P.M. Bourrousse de Lafore, G. Voillot, J. Roumier, J.B. Téraube, Auguste Pauly, and Thomas Linn, were written, they therefore participated in a seasoned debate and depended upon earlier models of habit.² Many of these debates about habit's position relative to treatment and prognostics are found in the Osler's collection of dissertations written in Paris in the early to mid nineteenth century. That the disruption of normative habits signaled illness, and that habit governed the operations of the body, were among the chief concerns that led physicians to debate habit's place in shaping medical opinions and protocols.

As in the past, habit was a major focus of medical theorization because of its perceived authority over human temperament and health. To several physicians working in the nineteenth century, human nature was flexible and as such, was subject to habit. P.M. Bourrousse de Lafore's 1809 *Dissertation sur l'influence de l'habitude dans quelques maladies et dans leurs traitements* articulated habit's all-encompassing dominion over humanity by writing: "L'habitude n'a pas moins d'influence sur l'usage que l'homme fait des vêtements."³ A. Bouttemotte's 1812 *Propositions sur l'habitude* adopts a similar rhetoric. He explains that humans are subject or

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“submissive” to habit’s dominion. He writes: “...nos organes ne peuvent se développer sans elle [habitude]...Il n’est aucun organe, aucune fonction, aucun acte de l’économie vivante qui, dès son origine, dans tous ses développements, et même dans ses aberrations, en soient entièrement soumis à l’habitude.”⁴

As the above examples demonstrate, an analysis of competing claims about habit and habit formation sheds new light on nineteenth-century French understandings of human nature, the body, and the role of medical practice. Ultimately, this study argues that habit’s increasingly unstable place in medical thought encouraged new theorizations of humankind and what it meant to be human.

¹The Paris Medical Theses Collection includes over thirty thousand dissertations written by students at the Faculté de médecine in Paris between 1796 and 1920. The Osler Library acquired approximately 22,000 theses in 1988. Since then, the Canadian Institute for Scientific and Technical Information in Ottawa generously donated ten thousand theses to the collection.

²For instance, see: Donald Olding Hebb, *The Organization of Behavior: A Neuropsychological Theory* (London: Wiley & Sons, 1949); Jerzy Konorski, *Conditioned Reflexes and Neuron Organization* (Cambridge: Cambridge University Press, 1948); Ann M. Graybiel, “Habits, Rituals and the Evaluative Brain,” *Annual Review of Neuroscience* 31 (2008): 359-87.

³P.M. Bourrousse de Laffore, *Dissertation sur l’influence de l’habitude dans quelques maladies et dans leurs traitements* (Paris: De l’imprimerie de Didot Jeune, 1809); G. Voillot, *De l’habitude* (Paris: De l’imprimerie de Didot le Jeune, 1815); J. Roumier, *Essai sur l’habitude* (Paris: De l’imprimerie de Didot le Jeune, 1827); Auguste Pauly, *De l’habitude dans ses rapports avec la physiologie et l’hygiène* (Paris: A. Parent, 1872); and Thomas Linn, *De l’habitude et de ses rapports avec l’hygiène et la thérapeutique* (Paris: Imprimerie des écoles, 1888).

⁴He continued to explain that second nature is equally imperial as primary nature, “Les besoins factices que l’habitude nous donne ne sont pas moins impériaux que ceux qu’on nomme besoins naturels.” P.M. Bourrousse de Laffore, *Dissertation sur l’influence de l’habitude dans quelques maladies et dans leurs traitements* (Paris: de l’imprimerie de Didot Jeune, 1809), 6-7.

system of distribution, to confirm that all bodies were accounted for, and that none such as those murdered for their bodies by Burke and Hare of Edinburgh entered the system again. But why did McGill keep these records?

One explanation might have been related to the failures of the earlier inspectorate which neglected their duties, inspiring the school keep a careful ledger to ensure that everything done was above-board and that there was a proper paper trail. Should the records of the inspector be found wanting or another bereaved farmer from Cornwall show up looking for the body of his wife, the school would have a solid record to point to. A secondary reason might simply be that they were receiving so many cadavers, they needed a record to keep them straight and date each one by when it was received.

Regardless of why these records exist, they have become available for study at a fortunate time in history, when we are actively seeking out alternative narratives. I wouldn’t presume to think

that the record keepers who recorded all the cadavers were interested in helping my research or anticipated trends in how history has shifted over time 100+ years later, but the records have done just that.

To help flesh out the other side of the narrative, these records have already proven invaluable. By using the Dissection Room Records like a Rosetta Stone, I’ve been able to decrypt registries from other Quebec institutions to obtain further details on the subjects and thereby discover patterns and vague justifications for why dissection subjects ended up on the slab while others did not.

So much of this record’s context as demonstrated above is wrapped up in the history of those who dissected while little is told of those who were dissected. We know so much about the healers, but what of the healed, and what of those necessary to their success? Only the future will tell if we are able to create a stronger and more balanced narrative that includes these personalities, but these records and the people they represent are definitely a step in the right direction.

⁵Anonymous article quoted in Royce MacGillivray, “What did you do with the body?” *University of Waterloo Courier* (December 1985): 10.

⁶Francis J. Shephard, *Reminiscences of student days and dissecting room*, (Montréal: [s.n.], 1919), 21.

⁷*The Gazette*, Montréal, (Monday, February 6, 1871).

⁸Shephard, *Reminiscences*, 27.

⁹Incidentally, the snatchers made more than twice the price they would have obtained from any school of anatomy. *The Gazette*, Montréal, (Monday, February 6, 1871).¹⁰Shephard, *Reminiscences*, 27.

¹¹*Ibid.*, 28.

¹²D.G. Lawrence, “‘Resurrection’ and legislation on body-snatching in relation to the Anatomy Act in the province of Quebec,” *Bull Hist Med* Vol. 32 (1958):422.

¹³Matthew Rankin, “Anatomically Incorrect: Bodysnatching in the Nineteenth Century,” *Beaver* Vol. 82 No. 5 (Oct/Nov2002): 32.

¹⁴*Ibid.*

¹⁵Église catholique, Diocèse de Montréal, *Mandements, lettres pastorales, circulaires et autres documents publiés dans le diocèse de Montréal depuis son érection...*, (Montréal: Typographie Le Nouveau monde, 1869), 528.

¹⁶Editorial, *Canada Medical and Surgical Journal*, (March 1884), 504.

¹⁷Joseph Hanaway and Richard Cruess, *McGill medicine. First half-century, 1829-1885*, (Montreal: McGill-Queen’s University Press, 1996), 184.

Reflective Pieces from the finalists of the Pam and Rolando Del Maestro William Osler Medical Students' Essay Awards



CLARE FOGARTY, JOINT 1ST PLACE

Clare Fogarty participated as a first-year medical student at McGill. Prior to medicine, she pursued an honours degree in Microbiology and Immunology with a minor in the History and Philosophy of Science. Clare's undergraduate studies inspired her interests in public health and the social studies of medicine.

The Osler Library of the History of Medicine provides McGill students with the unique opportunity to use a world-renowned repository for research in the social studies of medicine. We are incredibly lucky to have access to such a major resource center for scholarship in medical history, one that I came to know and deeply appreciate through the process of writing my Osler Essay Contest submission. Through the help of the librarians as well as my mentor, Dr. David Wright, I was able not only to improve my ability to search relevant primary and secondary historical documents, but also to better develop my research question and think critically about the information that I gathered. Without the ability to skim through, analyze, and engage in the texts that I appraised firsthand, my experience with the Osler Essay contest would have felt much less rewarding.

My interest in the history of medicine was sparked through taking related courses during my undergraduate degree before beginning my medical studies this year at McGill, although I had not previously undertaken such extensive research in this field. The opportunity to use such a comprehensive resource for this paper provided an incredible learning experience to develop my research skills. I made extensive use of the archive, print, and digital collections at the Osler Library in addressing my topic and developing my thesis. While online databases do indeed provide a wide-ranging supply of academic scholarship, I found that the opportunity physically to sift through dozens of books and texts allowed for proper reflection and consideration of the information that I was gathering. Through the process of finding, reading, and returning texts that were relevant to my research topic, I found myself able to better appreciate the responsibilities of academia. Indeed, while nearly any student is able to scroll through online databases, it takes perseverance and dedication to comprehensively explore a research topic and thoroughly analyze the texts that may be relevant. The Osler Library provided me not only with an abundant collection of texts to appraise throughout

my writing, but also with this full appreciation of the work that I underwent.

While I did indeed learn a significant amount of information on my research topic during this process, the Osler Essay Contest left me with an array of new questions and interests that I hope one day to pursue in future research projects. It may be easy to find the vast amount of unexplored topics in the history of medicine daunting, however, this experience allowed me to better understand the process of tackling broad, difficult, and under-explored fields. As a result, I feel more confident in my abilities to translate my own interests and curiosities into tangible academic scholarship. This critical thinking is an aptitude that I believe can be applied beyond the academic environment and perhaps even to my career as a physician—observing, considering, and critically appraising all sources of information in order to develop an educated and supported point of view. Indeed, I believe that the research skills used in the social studies of medicine can be directly applied to clinical work in a more nuanced way than simply appreciating the history behind modern practices.

Reflecting on this experience, I feel very grateful to have had the opportunity to research under the supervision of Dr. David Wright, an established historian and thoughtful mentor. My research topic is one that I am incredibly interested in, and I am proud of the product that resulted from my hard work. While I was able to better appreciate my research experience through the use of the Osler library resources, my mentor also helped me to fully understand the scope and applicability of my topic. I hope to continue developing my knowledge in the field of immigration policy and particularly cases of medical inadmissibility, and may perhaps even apply this understanding in the future should I pursue work in policy or government after my medical studies. Immigrant health policy is an increasingly more important field in modern Canadian society, and I hope that my essay may be seen as a contribution to this complex discussion.



ANDRÉ LAMETTI, JOINT 1ST PLACE

André Lametti participated as a second-year medical student at McGill University. He had the opportunity to continue his study of Latin during his medical preparatory year. In addition to Latin, his interests include the tradition of ancient languages in medicine.

Writing my essay on Ugo Benzi's commentary on Hippocrates' Aphorisms was a unique opportunity for me to engage with real manuscripts, that I had only previously read through the intermediary of collations and critical editions. In all honesty, I decided to enter this essay contest because I knew that as a student of medicine, it would probably be my final chance to engage Latin texts in an academic setting. Having discovered that the Osler Library held a collection of rare books, including original handwritten editions, the choice was clear.

Manuscript studies and reading ancient texts composed for their own time poses many challenges. My specific case also had added difficulties. My experience with Latin essentially only covered the classical variant and its authors; medieval Italianate Latin, with its different vocabulary, orthography and occasionally syntax, forced me to relearn some aspects of the language. My translation efforts also progressed more slowly than what I was accustomed to.

I was initially bamboozled by vastly different calligraphic conventions than what my modern self is accustomed to: "r" looked more like a 2, "s" was either written as f or, terminally, as a 6, and "c" resembling a truncated t. Further, the profuse use of abbreviation was often downright impenetrable: for example, the phrase "est huiusmodi ergo et cetera" is condensed down to only 7 (!) characters. Even using tools like Cappelli's *Lexicon Abbrivaturarum*, a vital resource to decode abbreviations in medieval manuscripts that I became accustomed to rapidly, it was difficult to tease out meaning at a very basic level. I am lucky that a recent edition was available for loan at the McLennan Library.

Handling precious books also requires preparation. I read selections from a textbook on manuscript studies, also available at the McLennan Library, including a very helpful section on "what to expect" when entering an archive to consult manuscripts. I was also grateful to the staff at the Osler Library, that granted me access to the consultation room

and demonstrated proper handling and care. I tried my hand at live transcription using pencil and paper; but I was not up to the task at the time, and was graciously allowed to take photographs.

I am confident in stating that my ability to approach original sources greatly increased as a result of this experience. I was undoubtedly faster and better by the end of my transcription and translation; and as I revised my previous work, I realized I was able to understand passages that had previously caused me great difficulty. For those passages that I was not able to understand, or that were rife with scribal error or corrupt, I delved for the first time into light textual criticism, by comparing the manuscript to a later printed edition. From this, I attempted to emend my transcription according to the standards found in the literature, which was more difficult than I expected: choosing the correct reading of a lemma or phrase often requires true comprehension of the passage in question.

I am asked, in this reflective piece, to explain "how using library material helped [me] to increase the scope, depth, and significance of [my] subject." This is quite an understatement. Without the Osler Library, my project would have been simply impossible. There is no substitute to the real, physical manuscript, with its imperfections and annotations that betray its history. To read words as they were written nearly six hundred years ago puts my life into perspective. There is something very powerful and indelible about thoughts that have outlived generations and travelled across continents; one feels humbled by something so much larger than oneself. I am keen to believe that a flicker of this awe was also shared by Ugo as he studied Galen, his predecessor of 1200 years, or by Galen as he commented on the Hippocratic corpus half a millennium older.

I am no Luddite, but this project has convinced me more than ever of the necessity for libraries to maintain some

Continued on page 10

Reflective Pieces from the finalists of the Pam and Rolando Del Maestro William Osler Medical Students' Essay Awards

Continued from page 9

sort of a physical and accessible collection; these works truly are the heritage of humanity. This is not a heritage however, that is simply limited to the works themselves; the archival tradition and the expertise of librarians is also crucial to future researchers, historians, and the general public. This appreciation is not new. Dean P. Lockwood expressed a similar sentiment of gratitude regarding the same manuscript that I studied in a letter to William Willoughby Francis, of the Osler Library: “[...] I hasten to tell you how deeply I appreciate your

helpful interest and your care in looking over the pages and annotating them. Your offer to give me further help is very generous, and I shall probably appeal to you again [...]”.

It is difficult to exaggerate the value of this research essay to me. In a curriculum that neglects the humanities aspect of medicine more and more, this was an opportunity I simply could not miss. I believe it was a rare synthesis of my interests in History, Latin, and medicine, and I am deeply grateful to my mentor Faith Wallis and the Osler Library for making this fantastic experience possible.

PHILIPPE-ANTOINE BILODEAU, 2ND PLACE

Philippe-Antoine Bilodeau participated as a third-year medical student at McGill University. He has a strong interest in neuroscience, humanities, medical education and leadership.

There has always been this idea in medicine that students should have a strong biomedical sciences background in order to properly understand disease. It is no surprise that there are even some programs dedicated entirely to preparing you for medical school and which include various courses in biology, physiology and anatomy. However, in the last few years, medical schools and medical educators have started to realize that the so-called social studies of medicine also contribute greatly to one's understanding of the clinical world. McGill is best placed to appreciate that; the Osler Library of the History of Medicine has one of the most extensive collections of rare historical texts and books. From items described in the *Bibliotheca Osleriana* to the Wilder Penfield Collection, it is a true gem for historically-minded students. Having always been interested by the neurosciences, these unique resources proved to be both fascinating and incredibly helpful.

My essay focused on the paradigm-changing discoveries of the 19th and 20th century. One of the key actors of these rapid changes was Jean-Martin Charcot, a famous French neurologist. While many books have been written on Charcot's life and discoveries, I had the privilege of seeing the neurologist's drawings and observations and the famous lessons he gave at La Salpêtrière, thanks to the Osler Library. As I read the great neurologist's lessons and as I saw his precise neuroanatomical drawings, I could appreciate in real time the development of the anatomoclinical approach, which would prove to be so influential in neurology. Later in my essay, I introduced the work of famous Montreal neurosurgeon Wilder Penfield. The

Osler library is perhaps the best place in the world to study Penfield's work; as I was reading the correspondence he had with Charles Scott Sherrington and his own autobiography, I came to understand Penfield's aspirations as a clinician-scientist and how he embodied the challenges and ambitions of neurological sciences. This proved to be important for my essay; while I had been arguing that the 19th and 20th century saw the emergence of two different visions of the brain, here was a man who set out to integrate all available knowledge, to understand both the neuroanatomical and the neurophysiological brain. This both nuanced and strengthened my thesis, in addition to providing me with a glimpse into the life of the man who founded the Montreal Neurological Institute and Hospital and modern neurosurgery.

The Osler library resources did not only allow me to read rare source materials; the wealth of material that I had access to also significantly changed the scope of what I had intended to do. As I was working, I realized that unlike in biological sciences, theses in social studies of medicine often form while one is reading the primary and secondary sources. My thesis, which had started out very large, gradually narrowed as I was learning more and more about the history of neuroscience. My initial drafts included a rather extensive analysis of Greek and Renaissance philosophers and their vision of the brain; following the advice of my mentor Dr. Schlich, I narrowed it down to the 19th and 20th century, which increased the strength of my essay and the clarity of my arguments. Despite having taken some CEGEP and university-level humanities classes, I had very little experience in formal historical research, and my skills as a researcher grew exponentially as I was working on the project. I learned how to interpret historical facts, pitfalls to avoid when commenting about history and search strategies to find primary material. I grew both professionally and personally while researching for and writing my Osler Essay.

Medical Students' Osler Society, Annual Report 2017-18

Established in 1921, the Osler Society is the oldest student-run club at McGill. We aim to promote the values that Sir William Osler embodied during his lifetime – an appreciation for humanities and social sciences in the context of medicine, a love for storytelling, and a passion for philanthropy. Through a variety of events and initiatives each year, the Society's ultimate goal is to expose medical students to enriching experiences that will serve to make more well-rounded physicians.

The 2017-18 year was quite eventful, starting off with our annual Osler Day, organized in collaboration with the Department of Social Studies of Medicine (SSoM) and the Osler Library. As is tradition, the three finalists of the Pam & Rolando Del Maestro William Osler Medical Students' Essay Award presented their essays at the Osler Library. This event was open to the public, and drew students from both the Faculty of Medicine as well as other programs. With three very talented finalists, the decision for 1st place was a tough one, and this year saw a tie between two students – Clare Fogarty (Med-1) and André Lametti (Med-2). Later, in May of 2018, both André and Clare had the chance to present their essays at the American Osler Society annual meeting in Pittsburgh, Pennsylvania. André's essay was titled "Ars uero longa: Teaching Hippocrates in

Medieval Italy", and Clare's was titled "Sanitation, Sanity, and (Moral) Suitability: The History of the Medical Inadmissibility of Immigrants into Canada (1840s-1950s)".

Osler Day continued with the 40th Annual Osler Lectureship, "Infamous Medical Research: Bad Guys, Duped Victims or Something Else?", given by Susan Reverby, PhD, McLean Professor Emerita in the History of Ideas at Wellesley College. Professor Reverby inspired all guests with her thought-provoking examination of the Tuskegee syphilis experiment and other infamous medical research studies, pushing us to question our own biases and reframe our perspectives. The day finished off with the 96th annual Osler Banquet, held at the University Club. This event was attended by many medical students, faculty, and Osler Library Curators, as well as the guest of honour, Professor Reverby. This was a bittersweet year for the Osler Banquet, as the University Club is closing its doors after many years of hosting the Banquet, and next year's Banquet will take place in a new location. The banquet ended on a positive note; thanks to a philanthropy initiative started by Marissa Le Gallee, our VP Fundraising, a portion of each ticket sold to the Banquet was donated to Université Shalom Bunia in the Congo. The funds, which totaled

500\$, will go towards purchasing tablets for the university's medical students, so as to improve their access to online medical resources.

After the fall semester, the Osler Society hosted a handful of other events. In February, we carried on the Discovering Osler Library Treasures lecture series, an initiative started by last year's co-president, Steph A. Pang. This lecture series features a number of guest speakers who speak about various topics in the medical humanities realm, and give students access to a curated collection of the Library's rare materials. Our first lecture was given by Dr. Faith Wallis, who explored the life of Sir William Osler. Dr. Wallis is an expert in the history of medieval science and medicine, and was Osler Librarian in the past. The lecture series continued with a talk from Dr. Bernard Brais in April, entitled "Jean-Martin Charcot and the 'Caesarism' of the Faculty of Medicine" Dr. Brais delved into the illustrious career of Charcot - often called the father of modern neurology - and examined what exactly was the key to Charcot's great success.

Also in April, the Osler Society joined forces with Dr. Rolando Del Maestro, one of our greatest supporters, to organize a student visit to the Montreal Neurological Institute's Neurosurgical Simulation Centre. Students had the chance to practice

their surgery skills on state-of-the-art simulators that current residents and doctors use. The visit finished with a tour of the MNI, including the OR in which Dr. Wilder Penfield performed some of the most influential experiments in neurology. All of the proceeds from this event went towards funding the construction of the Aequanimitas Garden, a special project that the Osler Society has been working on in honour of the centenary of Sir William Osler's death.

We finished the 2017-18 year with an information session about the annual Pam & Rolando Del Maestro William Osler Medical Students' Essay Award, followed by a Q&A with Dr. Del Maestro about careers in medicine and surgery.

We would like to extend our warmest thanks to everyone who helped support and organize our events this year; it would not have been possible without you! These include but are not limited to: Dr. Rolando Del Maestro, Dr. Richard Fraser, Dr. Mary Hague-Yearl, Dean David Eidelman, Mr. Christopher Lyons, Ms. Lily Szczygiel, Ms. Bozena Latincic, Prof. Andrea Tone, Dr. Annmarie Adams, Ms. Heike Farber, and Ms. Elena Bernier. We look forward to many years of new endeavours for the Osler Society, and thank you for your continued encouragement!

Montréal-Marseille: Henri Gastaut et la réception française des recherches sur l'électroencéphalographie de l'épilepsie

Emmanuel Delille,
Centre Marc Bloch,
Humboldt Universität zu Berlin

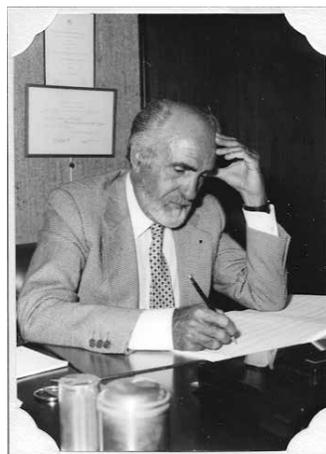
Il existe déjà des études historiques consacrées à l'Institut neurologique de Montréal (voir, par exemple, l'ouvrage collectif *The Wounded Brain Healed: The Golden Age of the Montreal Neurological Institute*, 2016). Mais il est également possible de renouveler l'histoire des neurosciences en prenant des chemins de traverse: les acteurs significatifs d'un champ scientifique sont souvent présentés de manière statique de pieds en cap dans leur laboratoire, alors qu'ils voyagent, échangent et débattent avec leurs collègues de par le monde. Cet aspect de l'histoire des sciences est connu à travers l'étude des controverses scientifiques. Toutefois, c'est plutôt à une analyse des phénomènes de réception que je me propose d'introduire. Mon exposé se limite ici à un cas d'étude concernant les techniques de l'électroencéphalographie (EEG). Pour ce faire, j'utilise les archives conservées à la bibliothèque Osler et le corpus de l'Encyclopédie Médico-Chirurgicale (EMC), une publication française fondée dans l'entre-deux-guerres, constituée de fascicules mis à jour périodiquement, qui constitue une sorte de « lieu de mémoire » de la médecine française. Cependant, ce n'est pas le réseau parisien de cette encyclopédie qui m'intéresse ici, mais l'axe de communication scientifique Montréal-Marseille.

À Montréal, le psychologue américain Herbert H. Jasper (1906-1999) a été le premier à développer la technique de l'EEG en convainquant Wilder Penfield (1891-1976), neurochirurgien et fondateur de l'Institut neurologique de Montréal, de sa pertinence pour l'investigation de l'épilepsie. Dès lors, les aspects cliniques et électro-encéphalographiques de l'épilepsie sont devenus indissociables. Cette histoire est déjà bien connue; ce qui l'est moins, ce sont les vecteurs de diffusion des savoirs élaborés par les neuroscientifiques de Montréal à l'étranger. Or les fonds Penfield et Jasper offrent la possibilité d'élaborer une chronologie fine et d'identifier des intermédiaires. Par exemple, la correspondance échangée entre Penfield, Jasper et Henri Gastaut (1915-1995) montre que ce médecin de Marseille a entretenu des liens forts avec l'Institut neurologique de Montréal. D'abord sous la forme d'un stage en 1949-1950, puis de publications remarquées et enfin de communications scientifiques concordantes à l'occasion de congrès. L'année 1954 est particulièrement marquante: elle voit la parution aux États-Unis de deux livres majeurs, *Epilepsy and the Functional Anatomy of the Human Brain*, de Jasper

et Penfield, et *The Epilepsies: electro-clinical correlations*, de Gastaut, avec une préface de Penfield.

Parmi les nombreuses initiatives de Gastaut, soulignons qu'il est l'organisateur d'une série de symposiums annuels à Marseille, et que celui de 1954 (*Colloque sur les Problèmes d'anatomie normale et pathologique posés par les décharges épileptiques*) retranscrit les discussions entre les représentants des écoles de Montréal et Marseille. Sans entrer dans les détails, on constate que si Gastaut, Penfield et Jasper partagent largement leurs idées, les échanges de vues portent plus précisément sur leur classification des épilepsies, c'est-à-dire sur la recherche fondamentale telle qu'elle est produite à Montréal et Marseille, et moins sur la thérapeutique (discutée dans leur correspondance), les interlocuteurs se présentant donc d'abord comme des chercheurs et pas seulement comme des médecins. Ici, les ego-documents conservés dans le fonds Penfield peuvent aussi être mis à contribution: dans son journal de voyage, Penfield loue la qualité des présentations de Gastaut et leurs affinités scientifiques: « Nov. 18, 1954. Four days of meetings and this morning's discussions and conclusions all asked by the brilliant mind and the eloquent tireless tongue of Henri Gastaut » (fonds Wilder Penfield, boîte 471). Du point de vue de l'histoire des sciences, cette alliance peut être interprétée selon une logique de distinction, par opposition ou en alternative à d'autres écoles et classifications, comme celle de William Lennox (1884-1960) à Harvard.

Enfin, l'examen des articles publiés par Gastaut sur l'épilepsie invite à reserrer l'analyse historique: deux séries de fascicules parus dans l'EMC, publiés respectivement en 1951 (*Traité de Neurologie*) et 1955 (*Traité de Psychiatrie*), donnent en effet à observer une évolution. Car, si en 1951 Penfield est de loin l'auteur le plus cité par Gastaut, on constate que cette domination de l'école de Montréal a évolué quatre ans plus tard: premièrement, Jasper est davantage cité en 1955 qu'en 1951, ce qui signifie que le livre publié par ce dernier avec Penfield en 1954 est



Henri Gastaut (1915-1995)

surtout mis au crédit des apports scientifiques de Jasper sur l'EGG; deuxièmement, en 1955, Gastaut cite davantage les travaux produits par son propre Laboratoire de Neurobiologie à Marseille. Les effets de ce phénomène de réception peuvent être précisés: les équipes de recherche de Montréal et Marseille sont mises sur un point d'égalité, au détriment d'autres écoles, pas seulement en Amérique du Nord, mais aussi implicitement en France, par un subtil jeu d'équivalences. En discutant la classification de Montréal et en ignorant Paris, Gastaut se place ainsi avantageusement dans une lignée prestigieuse de langue anglaise, qui va de John Hughlings Jackson (1835-1911) à Penfield. En résumé, connecter deux histoires locales, en France et au Canada permet d'analyser la logique de professionnalisation et d'excellence scientifique dans les neurosciences. Pour conclure, cette histoire croisée franco-canadienne est également l'occasion de souligner un effet en retour des échanges scientifiques: par exemple, un proche collaborateur de Gastaut, Maurice Dongier (1925-1915), d'abord étudiant à Marseille, puis à Montréal en 1954, reviendra à l'Université McGill en 1971 pour prendre la direction du Allan Memorial Institute, le département de psychiatrie voisin de l'Institut neurologique de Montréal. Un Français à la tête d'un département d'enseignement et de recherche médicale anglophone?! On ne peut pas comprendre cette évolution institutionnelle sans prendre en compte l'espace de communication transatlantique construit durablement par les universitaires français et canadiens après 1945.



MONTREAL NEUROLOGICAL INSTITUTE AND HOSPITAL, MCGILL UNIVERSITY

Wilder Penfield and Herbert Jasper, November 12, 1962.

Je remercie vivement Mary Hague-Yearl, Lily Szczygiel, Bozena Latincic et le comité scientifique du Mary Louise Nickerson Award qui ont rendu possible mon séjour de recherche, Annmarie Adams et ses collègues du SSoM à l'Université McGill, ainsi que Robert-Michel Palem qui, le premier, m'a indiqué l'intérêt qu'il y aurait à étudier l'œuvre scientifique d'Henri Gastaut au-delà des frontières disciplinaires de la neurologie et de la psychiatrie.

American Osler Society honours Pamela Miller, former Head Librarian, Osler Library, with a Lifetime Achievement Award



*Clyde Partin, Jr., MD
President, American Osler Society*

While the AOS is comprised mostly by physicians, it is the diminutive percentage of other members representing a diverse array of knowledge and professional training that raise the level of scholarship, effectiveness, and uniqueness of the American Osler Society. A premier example of that professional diversity that so benefits the AOS is Pam Miller. She has served as a personal savior for me in my own quest for obscure information related to Osler and a sounding board for various issues related to the AOS, especially publications. I have always been warmly welcomed by Pam and her staff at the Osler Library. She has served the AOS tirelessly and effectively before, during, and after her presidency. If we had a knock down drag out fight among the 50 people in the world who knew the most about Osler and who best understood the Oslerian world and its foundations, she would be among the last few standing. What a delight it is to know her. She is much beloved by members of the AOS.

Digitization: Approaches and Opportunities / Numérisation : méthodes et possibilités



Figure 9 • Striking depiction of muscles and tendons. / *Représentation impressionnante des muscles et des tendons.*

Continued from page 3

is human physiology. He works his way through the body, including detailed descriptions of the organs and properties of blood; circulation; respiration; digestion (immediately preceded by an illustrated discussion of the teeth and mouth); intestines; nervous system; the senses; and the skeletal system (Figures 6-11).

Through digitization, we hope that Ducrot's work will be studied, appreciated, and indeed that future viewers will find applications for his manuscript beyond the immediate interests we have identified. As with the dissecting room records and Salvage's *Anatomie*, there are multiple reasons for digitization. Above all, we see it as an opportunity: an opportunity not only to send materials to researchers who request it, but also to further promote the wonders held in the Osler Library while helping us to preserve them for generations to come.

¹ For all works described in this piece, electronic versions are available via the library catalogue: <https://www.mcgill.ca/library/>

² Lifchez, Raymond. 2009. "Jean-Galbert Salvage and His *Anatomie Du Gladiateur Combattant*: Art and Patronage in Post-Revolutionary France." *Metropolitan Museum Journal* 44: 163-84.

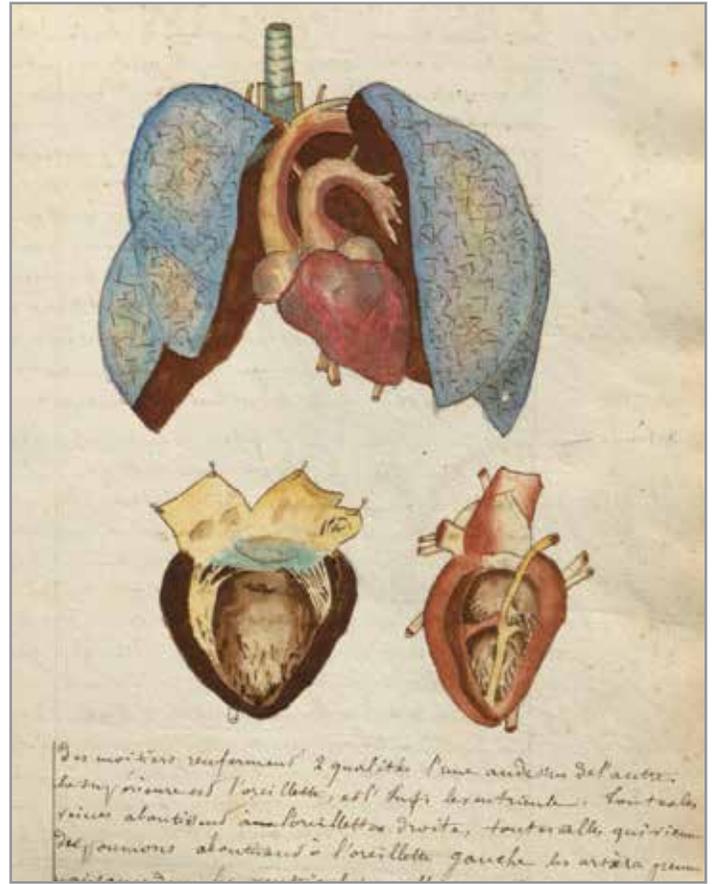


Figure 10 • Illustration of the heart and lungs. / *Illustration du cœur et des poumons.*

Suite de la page 3

numérique, il y en a un en particulier qui se rapporte à la fiche de la salle de dissection et à *Anatomie du gladiateur combattant*: c'est le *Cahier d'Histoire Naturelle* d'Eugène Ducrot, le manuscrit qu'il a rédigé pendant ses études au Collège Royal de Moulins lors des leçons de M. Denou dans les années 1835-1837. Le manuscrit de Ducrot est nouveau pour l'Osler, comme l'opus de Salvage, et la numérisation est un moyen par lequel nous espérons promouvoir ce que nous considérons comme étant un travail intéressant et utile, tout en le protégeant contre la manipulation excessive. Esthétiquement, le manuscrit de Ducrot est magnifique: les dessins au crayon, à l'encre et à l'aquarelle dépassent de loin ce que l'on pourrait espérer d'une collection de notes de cours. Sur le plan académique, l'ouvrage offre un aperçu de l'enseignement de l'histoire naturelle en France au milieu du XIXe siècle (figure 5).

Ducrot commence avec dix leçons de physiologie, suivies de quarante-six leçons de zoologie (qui contient une section curieuse sur l'ethnologie), que Ducrot identifie comme suivant la méthode de Georges Cuvier. Les notes se terminent par

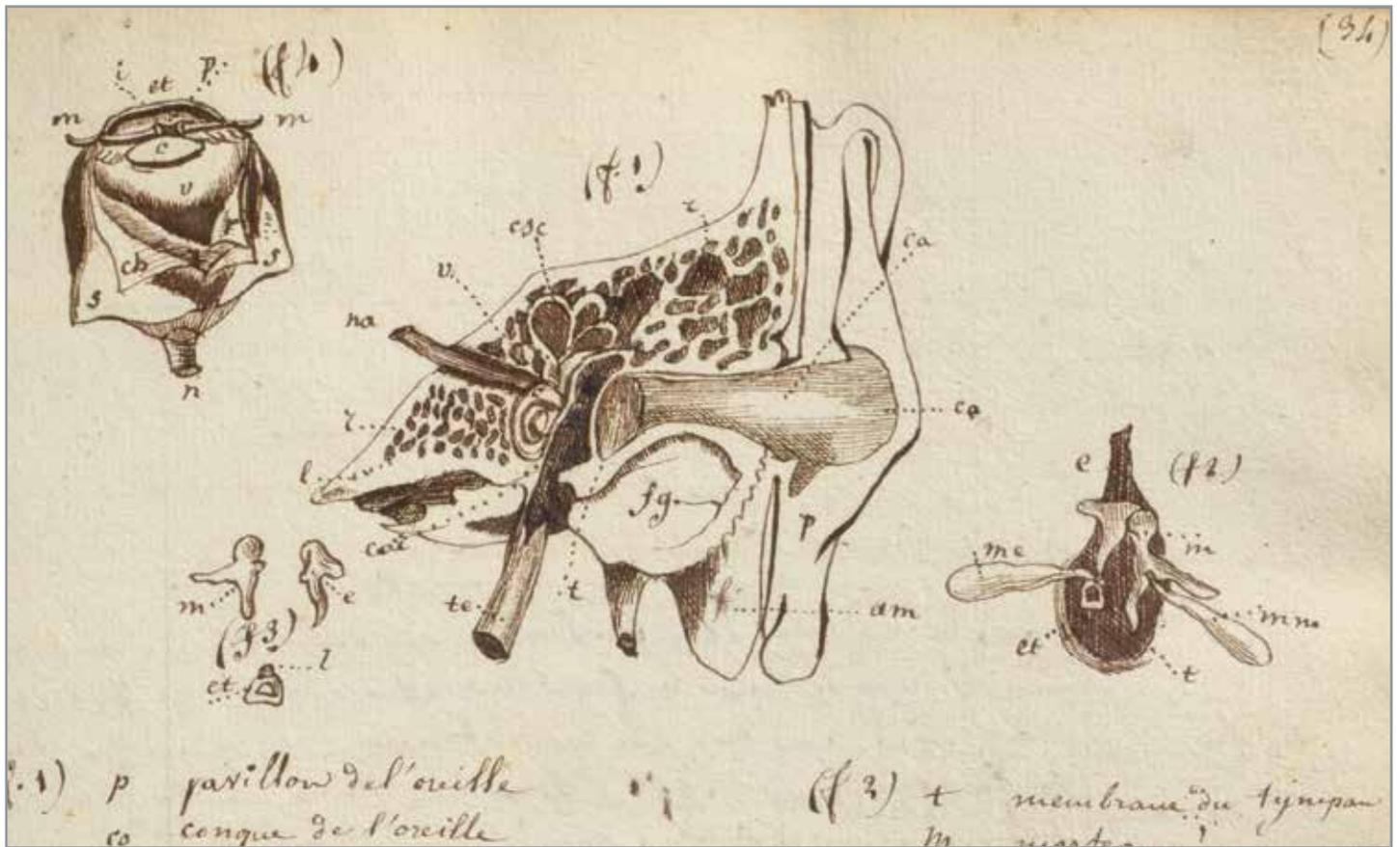


Figure 11 • Organs of sight and hearing. / *Organes de la vue et de l'ouïe.*

six leçons de botanique et trois de géologie. Les historiens de la médecine s'intéressent particulièrement aux dix premières unités de physiologie. Bien que la discussion soit comparative, le texte et les illustrations qui l'accompagnent mettent l'accent sur la physiologie humaine. Il s'adresse à chaque système du corps: il commence avec une description des organes et des propriétés du sang, et continue avec des discussions sur la circulation, la respiration, la digestion (immédiatement précédée d'une discussion illustrée sur les dents et la bouche), les intestins, le système nerveux, les sens et le système squelettique (Figures 6-11).

Grâce à la numérisation, nous espérons que le travail de Ducrot sera étudié, apprécié et que les futurs téléspectateurs trouveront des applications pour son manuscrit au-delà des intérêts immédiats que nous avons identifiés. Comme dans le cas des registres de la salle de dissection et de *L'Anatomie* de

Salvage, les motifs et les résultats des efforts de numérisation sont multiples. Avant tout, nous voyons la numérisation comme une occasion: une opportunité non seulement d'envoyer des documents aux chercheurs qui en font la demande, mais aussi une possibilité de promouvoir davantage les merveilles de la bibliothèque Osler tout en nous aidant à les préserver pour les générations à venir.

Mary Yearl, Head Librarian, Osler Library and Associate Member, Department of Social Studies of Medicine

¹ Pour toutes les œuvres décrites ici, les copies numérisées sont disponibles dans le catalogue de la bibliothèque: <https://www.mcgill.ca/library/>

² Lifchez, Raymond. 2009. "Jean-Galbert Salvage and His *Anatomie Du Gladiateur Combattant*: Art and Patronage in Post-Revolutionary France." *Metropolitan Museum Journal* 44: 163-84.

GIFT IN RECOGNITION OF THE LIVES OF DRS. SHENA AND THEODORE SOURKES

The Shena and Theodore Sourkes Fund for Pediatric Palliative Care at Lucile Packard Children's Hospital Stanford has recently been established by John A. Kriewall and Elizabeth A. Haehl to recognize the late parents of Barbara Sourkes, PhD, the first John A. Kriewall and Elizabeth A. Haehl Director of the Program. This gift will provide support for the Pediatric Palliative Care Program at Lucile Packard Children's Hospital Stanford by increasing the number of interdisciplinary staff members and developing new clinical and educational opportunities.

Drs. Shena and Ted Sourkes had illustrious careers in the fields of medicine and science and lived their lives defined by integrity and humanity. Establishing this fund in their names ensures that their legacy

continues through the work of their daughter, Dr. Barbara Sourkes, and of those who come after her in our Pediatric Palliative Care Program.

Ted Sourkes, neurochemist and Emeritus Professor, served for many years as a much valued Chairman of the Standing Committee of the Osler Library. When Shena retired from practicing anesthesiology, she worked as a volunteer professional in the Osler Library Archives, using her significant language skills to catalogue complex collections. Their daughters, Barbara (B.A. 1971) and Myra (MDCM 1977) both graduated from McGill. Barbara worked as a psychologist at the Montreal Children's Hospital before being recruited to Stanford University, and Myra as a neurologist at the Montreal General Hospital.

STOP PRESS: TEMPORARY CLOSURE OF THE OSLER LIBRARY

On Friday 13 July, there was a fire on the terrace of the McIntyre Medical Building. Although there was no fire damage to the Osler Library, our offices and circulating collection are located directly beneath the area where the fire occurred and were subject to some water infiltration. We are fortunate that the Osler Room, holding our most rare and valuable items, was not affected.

We are particularly grateful to the first responders, who were aware of the significance of the Osler Library and who took special care to protect our holdings. Moreover, we offer our deepest thanks to our colleagues who were on the scene within minutes and thus were able to organize a swift response.

Nonetheless, the Osler Library will be closed while necessary building repairs are carried out. In order to safeguard the collections during construction, all materials are being moved into secure, climate-controlled, storage. For now, materials are inaccessible but discussions are ongoing to make items accessible as soon as possible. Messaging has been added to the Library website and catalogue to inform our users.

Thank you for your patience, and for your support.

Please consult the McGill Library information channel for updates on the Osler: <http://bit.ly/OslerLibraryClosure>.

For further information and updates on the McIntyre Medical Building, please see: <http://bit.ly/McIntyreFireUpdates>.

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On p.8 and p.9 the students brought to the library by Dr. André Turmel were identified as neurology residents; they were all residents in neurosurgery and Dr. Turmel's lecture was on the history of neurosurgery.



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