Sarton Chair Lecture 1988-89

LAUDATIO ANTONIE M. LUYENDIJK-ELSHOUT

M. Thiery

Dear Professor Luyendijk,

Let me, in my turn, welcome you to this temple of science, where you must feel at home because of the historical ties linking our two universities. As you know, our university was a gift from King Guillaume I during the happy years when your country and mine were still a single nation. In this room, the historical bonds between your medical faculty and ours are symbolized by the row of medaillions from which three of your Leiden professors look down at you, benevolently I trust: Rembert Dodoens, who taught materia medica; your great Herman Boerhaave, European citizen avant la lettre and communi Europeae praeceptor, as von Haller liked to call him; and, finally, Pieter Camper, a native of your city in which he took his degree and, after a hectic life, found eternal rest in the Pieterskerk.

But even more personal ties unite our medical faculties. I myself have had the privilege of working in Leiden, and it is with gratitude and affection that I remember the superb hospitality offered to me by the then Director of the Institute of Pathology, Prof. Th. van Rijssel. Gratitude is the right word for what I feel toward your university, because my stay in Leiden, so close to the place where you were then working, was to be such an important turning-point in my scientific career.

Dear Colleague. Since I happen to be your collega proximus, it is my privilege to introduce you and your work to this audience today. You were born in the town of Gorinchem. The date I shall not mention, because it would not become me to do so and because this detail is superfluous: both your strong personality and your

lively spirit render you ageless. Having passed through the *gymnasium* you studied medicine from 1941 to 1950, first at the University of Amsterdam, later at the University of Leiden, and it is the latter institution that you have been connected with from 1943 to the present.

You started your medical career as a morphologist but from the beginning you made it clear that your special interest was the historical background of your field. During the very first year of your prosectorate you published a paper, the first of a long series, on the restoration of nineteenth-century anatomical specimens preserved in the Institute of Anatomy. This paper was the first step toward the thesis entitled The Leiden Cabinet of Anatomy you were to defend in 1952. By adding a subtitle, "Cultural and historical importance of a scientific collection" (italics mine) you wished to stress the importance of cultural factors in medical historiography, a notion you were to go on defending and developing in the following years. As indicated once more by the title of your acceptance speech today, concept and culture are two words you cherish and in fact introduced in this context. I wish to briefly define the scope of these words and the importance you gave them in your philosophical approach to this subject.

As you indicated in your farewell lecture in 1987, it is your view that medical historiography should no longer be restricted to the study of what you like to call the accumulation of "knowledge" and that this science must pay more attention to the cultural climate in which new medical advances occurred. The two notions "increase of knowledge" and "culture" are complementary and synonymous with your words "concept" and "culture", respectively.

Although concepts (i.e., the insight into disease states giving rise to prophylactic and therapeutic measures, in fewer words: medical discoveries) are and should continue to be the backbone of medical historiography, our vision of disease and the human organism has always been very significantly influenced by factors that are not purely scientific, even to the point that in many areas the impact of these "other" factors (e.g. cultural, social, economic, ideologic, and ethical), which you group under the term cultural, has been

conclusive of the final result. *In concreto*: because discoveries in medicine tend to reach the recipient in a haphazard way, their impact on the condition of life of the population at large has been utterly inconsistent. It is your contention that medical historiographers have not paid enough attention to the interdependence of concept and culture and, by overemphasizing the contribution of the great pioneers and overelaborating "the gospel according to the hagiographers" (Richardson 1985), have distorted the course of history. By the emphasis it has put on the interdependence of concept and culture and its concentration on these neglected aspects of the history of science, your work has reached the Sartonian dimension.

Having obtained your medical degree, you spent a year in the USA qualifying in the morphologic sciences at the Institute of Anatomy of New York University, the Carnegie Institute for Embryology in Baltimore, Maryland, and the Jackson Memorial Laboratory in Bar Harbor, Maine. You resumed your work at the Leiden Laboratory of Anatomy and Embryology in September 1953, took leave in 1955, and nine years later took up your connection with the Laboratory again, as part-time scientific staff member. During that period one of the things you studied was the historical evolution of our knowledge of the sympathic system, with special attention to Frederik Ruysch (1638-1731). Ruysch, who first described the valves of the lymph vessels (Jan Swammerdam was to challenge the priority of this invention), was also an accomplished male-midwife and the man who shared with Roonhuysen the notorious secret instrument, the obstretic vectis. Your investigations led you to re-edit Ruysch's 1665 opus princeps, his famous Dilucidatio Valvularum. When Ruysch's cabinet was later sold to Czar Peter the Great, the rare anatomical specimens it contained were packed by Herman Boerhaave with his own hands. Through the years, this renowned cabinet has been a source of inspiration, and the allegorical meaning you gave to one of the specimens, the weeping fetus (Luyendijk-Elshout, 1987), has permeated all of your subsequent literary-medical writings.

In 1967, you became secretary to the Organizing Committee which prepared the Commemoration of Boerhaave's birth in 1668.

At the symposium *Boerhaave and his Time*, to which several distinguished scholars were invited, you presented a paper on the anatomical illustrations in Boerhaave's *Institutiones Medicae*. The commemoration festivities also included an exhibition on Boerhaave in the National Museum for the History of Science at Leiden. The then-Director of the Museum, Dr. Maria Rooseboom, and your then-Chief Prof. Johan Dankmeyer, advised you to accept a temporary position at the Museum to become better acquainted with museology. You were appointed as a part-time Conservator for the medical section between 1970 and 1972. During this period you took part in the activities of the Museum Staff but you also continued your publications, e.g. your study on Vesalius, which prompted an analysis of the changing pattern of sixteenth-century medicine in the Low Countries.

Until 1976, your main task had been the presentation and exhibition of anatomical collections, teaching the history of anatomy and embryology, and preparing medical-historical exhibitions, both within and outside your university. The exhibitions absorbed the greater part of your time and energy, and between 1972 and 1975 you were responsible for five such events. One of the latter characterizes your interest in cooperating with colleagues from other disciplines: the exhibition on the Evolution of Cystoscopy at the 16th International Congress of Urology in Amsterdam 1973.

In 1976, your dream came true and from then on you were able to devote yourself entirely to the teaching of and research on the history of medicine. The scope of your endeavors was broad indeed, as you managed to instruct medical students, social workers, and nurses; provide courses for medical historians at the Free University of Amsterdam; add introductory lectures to the Boerhaave courses; and teach students of the Subfaculty of History. An excellent example of the multidisciplinary and multisided approach you wished the science of medical history to take.

Finally, in 1977, the Leiden University appointed you *Professor* extraordinarius of the History of Medecine in recognition of your special approach to teaching and research. Automatically, this appointment enabled you to form and head a team of physicians,

historians, and literary men and woman, and at the same time to realize an old dream of yours: to demonstrate the complementarity of concept and culture concretely.

The activities of the Luvendiik team were threefold: teaching of men and women belonging to different disciplines, research, and assistance. Your research essentially remained directed toward the evolution of the Medical Faculty of Leiden University in the eighteenth and nineteenth centuries, a task for which the young professor had been eminently prepared. Over the years, scanning of the international relationships of Dutch medicine became an important and original topic of your group. Focus was put mainly on the historical ties between Japan and The Netherlands, and in this area, too, your team did pioneer work. This line of your interest dates back to 1973, when the Japanese Academy of Sciences based in Nagasaki, invited you to discuss the transfer of "Dutch" science to Japanese physicians in the nineteenth century. The title of your lecture was The introduction of Western Anatomy into Japanese Textbooks and your source of inspiration was the Kaitai Shinsho, a Western textbook on anatomy translated from the Dutch in 1772 by the Japanese physician Sugati Genpaku. The contacts you made in that year were to be of a permanent nature and they led to the bilateral exchange of Leiden and Japanese investigators. But your project had an ethical dimension as well. It was intended to settle a debt of honor owed by The Netherlands to a group of brave and capable men who managed to Westernize medicine and public health in that far-away country in the nineteenth century. You continually quoted the names of von Sieboldt. Pompe van Meerdervoort, and Gratama, three pioneers who, although well known abroad, had hitherto been almost totally ignored by their own countrymen.

Giving concrete answers to the historical aspects of a variety of medical queries was to be the second task of your group, a task for which her background had prepared its chief well.

Although you no longer took an active part in the realization of medical exhibitions after 1976, you went on collaborating with the Boerhaave Museum on the collection of documents concerning the Leiden Medical Faculty. You continued to supervize the museum of

the Anatomy Laboratory until 1985, and on a temporary basis acted as Professor regius in the field of physical anthropology. Having reached the age of retirement in 1987, you became Professor emeritus. Although this event put a stop to an important part of your scientific career, you kept on working. In ending your farewell lecture you quoted Winston Churchill ("I hope I have still some services to render"), but let me paraphrase Sir Winston and say that "You still render invaluable services". Indeed, you continue to advise the team you once headed so remarkably and to serve as the editorin-chief of the journal Clio Medica, as president of the Consilium Medico-Historicum, and co-editor of the Dutch Journal of the History of Medecine. You are still active on the board of the Einthoven Foundation, you are President of the Thijssen-Schoute Fund and a member of the Leeuwenhoek Committee. Your stream of publications continues to flow, and you still keep yourself busy lecturing. What more could an emeritus professor do?

Ladies and Gentlemen,

I trust I have not bored you and have refrained from hagiography, but I sincerely hope that I have shown you who Professor Luyendijk is and what part she has played in contemporary medical historiography. On the grounds of her immeasurable personal contributions to and her original vision of this field — a vision which is perfectly in line with that of George Sarton — the members of the ad hoc Committee have decided unanimously to award the G. Sarton Memorial Chair 1988-89 to Professor Antonie Maria Luyendijk-Elshout.

References

- Luyendijk-Elshout AM. De Vier Gedaanten van de Arts en de Wenende Filosoof. Drukkerij de Kempenaer, Oegstgeest (The Netherlands), 1987.
- Richardson R. Death, Dissection and the Destitute. Routledge & Kegan Paul, Ltd., London 1985, p.XIV.

