



Tuberculosis in time

The white death: a history of tuberculosis

Thomas Dormandy

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Edward Trudeau, the American physician who through personal experience stumbled upon the “rest cure” for tuberculosis, once observed that the causative organism of the disease “bore cheerfully a degree of medication which proved fatal to its host.” A plague since the days of ancient Egypt, tuberculosis has taken millions of lives over the centuries, and it was not until a mere half-century ago that a cure seemed possible. Before that, some physicians prescribed sensible regimens based on fresh air, plain diet and moderate exercise, but all too many recommended nostrums that were valueless, ranging from the frankly harmful, such as antimony, to the innocuous but ineffective, like calcium and heliotherapy. Quacks lauded bottled mysteries such as Bumfritt’s Incomparable Sputum Softener and even Austrian alpine air. Meanwhile, a majority of the tuberculous continued to die of their disease. Not until the advent of streptomycin and para-aminosalicylic acid in the 1940s, followed by isoniazid in the 1950s, did the future for these patients begin to look bright, and by the 1970s it seemed that the struggle might have been won.

But tuberculosis is still a deadly disease. As Thomas Dormandy points out in *The White Plague: A History of Tuberculosis*, outbreaks with a mortality approaching 90% have occurred as recently as 1991 — not in a developing country, but in New York City. Events such as these must give us pause. Dormandy takes a pessimistic view of the future, raising the possibility of “a global wave of virtually incurable tuberculosis” arising from two recent developments: opportunistic infection in

HIV-positive individuals and the rise of multiple drug resistance. “The prospect,” he warns, “is not a pleasant one.”

It is instructive to read a current history of tuberculosis, now that AIDS has replaced it as our chief concern, to some extent in North America but particularly in Africa and Asia. Formerly, tuberculosis was the chief killer of young people in the western world; now, AIDS is ravaging Africa. As Dormandy shows, much nonsense was written about tuberculosis; today, some of what is said about AIDS is illogical. He reminds us that it took centuries, and much work by many physicians and scientists, to develop a vaccine and then efficacious treatment for tuberculosis, and it is to be hoped that today’s accelerated pace of discovery will mean that it will take less time for a vaccine and accessible therapy for AIDS to be developed. But in many respects the story of tuberculosis must make us wary when we ponder not only tuberculosis as a continuing threat but also AIDS.

Sir George Pickering once said that the history of medicine was a monument to human folly, and much of what Dormandy has to say about the way tuberculosis was treated bears this out. Consider some of the regimens that have been advocated: the King’s touch for scrofula (“a malady,” said Ambrose Bierce, “that was formerly cured by the

touch of a sovereign, but now has to be treated by the physicians”); the breathing of warm animals’ expired air; the administration of pig-spleen extract; the pumping of air superheated to 150° into the rectum; and *l’eau antipulmonaire du Docteur Marat*, which proved to be no more than dilute calcium phosphate. All these and many besides were reported by reputable physicians to give good results, despite, or because of, the absence of controlled trials. At the same time, Dormandy lauds the work of those physicians and scientists who built up the knowledge that led to our understanding of the cause, diagnosis and treatment of tuberculosis. So he provides informative accounts of Auenbrugger, Corvisart, Laennec, Budd, Bodington, Villemin and Koch. In these respects his knowledge of the history of medicine serves as a broad base for his history of tuberculosis.

That being said, Dormandy is at least as interested in the perceived effects of this scourge on great cultural figures of the 19th century as he is in the scientific aspects of the disease. He has an encyclopedic knowledge of the many artists, musicians and writers who died from tuberculosis, and for the most part his accounts of their short lives have undeniable interest. But the very multiplicity of these biographies — of Tobias Smollett and John Keats (both medically qualified), the Brontë sisters and Katherine Mansfield, Frederic Chopin and Robert Schumann, Antoine Watteau and Amedeo Modigliani, to name just a few — becomes at times distracting, and some readers may be inclined eventually to pass over this material, much of which is well known, as they try to follow the evolution of the scientific aspects of the disease. In this sense, Dormandy, a pathologist, surely follows too literally the advice of “context,



context, context” given to writers of history.

A few smaller points need notice. First, Dormandy writes well and pleasingly; the few flaws such as the consistent misuse of “regime” for “regimen” and the elementary error in the sentence “the intensity of the contagion in such cases must have been intense” may be excused because the book is readable and well organized. Second, the few typographical errors are of minor signifi-

cance. Third, and less excusable, is the absence of a list of primary and secondary sources. There is a bibliography, but this is, as Dormandy himself notes, “a personal selection,” and is by no means complete; in a couple of instances the bibliography failed to provide me with the answer to a query. But it is also true that Dormandy makes extensive use of footnotes. These are informative and often witty, and being located at the bottom of each page are readily understood

in the context of the main text. For myself, it is the footnotes rather than the content of the text that I will remember — an indication that this history of tuberculosis, despite its length, provides few insights that are not contained in shorter recent accounts of the disease.

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Room for a view

The reflecting pool

He was flying! He’d felt this way only once before — the time he had bungee jumped from that make-shift tower that had been set up on the sands near the Oak Beach Inn on Long Island, New York. But of course he’d had more than a couple of drinks in him then, and so hadn’t really appreciated all the little subtleties of flight he was experiencing now.

Was there anything quite as exhilarating as free fall, and at sunset?

How long would it take him to reach the water? Let’s see, considering the height of the span, and the fact that objects — and subjects? — fall with an acceleration of 32 feet per second squared, he supposed that he would splash down — well, he supposed he would splash down sometime before he figured this little physics problem out.

Yes sir, he was really moving. One might even say he was approaching terminal velocity.

Hah! Terminal velocity! That was a good one, under the circumstances, and he laughed, a deep and cathartic laugh.

He understood that some would wonder why he had done it. How bad, they might ask, could things be? But it was, he would tell them, a mistake to think that only someone who believed that anything — including nothing — would be better than the present could make this choice. Yes, that was clearly erroneous; for he knew that in life there

had been moments far darker than this, moments so filled with despair that not even the Pale Horse offered any hope of escape. Like losing, through some fault of your own, the one you loved, or being forced to endure the ebbing of your child’s life to illness.

No, death was no answer in such cases; it would only serve to immortalize the loss of what might have been. In those moments, what was needed was sleep, deep and dreamless sleep, with the promise of forgetfulness and an awakening to a new world. Perhaps that was why so many people overdosed on sleeping pills?

Would there be pain? Or rather, would there be more pain, for there had already been plenty of pain. He supposed there would — oh God — but it was too late to worry about that now.

And then? What? Anything? Or nothing? Eternal, limitless emptiness? — unimaginable! — and for just an instant he thought he would lose control. It was like that dream that he had had since childhood, the earliest dream he could remember, of being in a colourless room that just kept getting bigger and bigger and bigger until it was infinitely big, the silence echoing unbearably and relentlessly until he awoke, crying never to dream again.

Fervently hoping that he would finally see the green flash, the living light, he vaguely remembered reading

once that a man who realizes he is to die cannot give supreme concern to any other event ...

“Doctors,” said the nurse, “come quickly.”

The team — attending physician, senior medical resident and three interns — interrupted morning report and bolted from the doctor’s lounge adjacent to the nursing station in pursuit of the nurse. They followed her to a room down the hall, where they found one of their patients, face down on the floor, still tethered to an IV pole by a catheter in his left arm. He was lying in a puddle of what was either saline or very dilute urine. He was not breathing.

The senior resident knelt and felt for a pulse. There was none.

“Should I call a code blue?” the nurse asked.

“No,” one of the interns answered. “He’s a DNR.” He looked at the senior resident.

“He was my patient.”

The resident nodded.

“Interesting,” the attending physician remarked, glancing momentarily out the window at the sun rising over the nearby bay and the bridge that spanned it.

The jaded resident looked at him. He actually respected this particular attending — unlike some of the others, he really seemed to know his stuff — so he

tried to hide the scepticism in his voice when he asked, "What's so interesting?"

The physician pointed at the bed. "How'd he fall out with the rails up?"

The resident, annoyed with himself for missing such an obvious detail, thought for a moment, then smiled and waved his hand dismissively. "I'll tell you what happened." Then, sotto voce so that the nurse in attendance could not hear (there was no use making enemies), "Someone forgot to put the rail up last night, and so her friend here did it for her before she called us." Then, shrugging, "Alas, the horse was already out of the barn."

"Or maybe," one of the interns offered hesitantly, "he climbed over the rail and slipped during the night?"

"Maybe," the resident reluctantly admitted after a pause, clearly prefer-

ring his own theory. "Okay, let's get back to morning report," he said, heading back to the doctor's lounge. The interns followed dutifully.

The attending physician stood there a moment, watching the sun's red ascent and trying to recall something. It was Martin Heidegger, wasn't it, who had said that man could not postpone his concern about death, but must be concerned with it always? Yet it never ceased to amaze him how these young doctors, surrounded as they were by death, could be so unconcerned about it.

Or about sunrises.

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All forgiveness

Confession of our faults is the next thing to innocence.

— Publius Syrus, maxim 1060

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Lifeworks

The Famous 5 and the infamous Lizzie

Living tree. Any law student worth his or her salt instantly identifies these two words with *Edwards v. A.G. of Canada*,¹ more commonly known as the "Persons" case. This 1929 ruling overturned an earlier decision of the Supreme Court of Canada that the provisions of the *British North America Act* for the appointment of "qualified persons" to the Canadian Senate did not include women. In those days our highest court of appeal was the Judicial Committee of the British Privy Council; and so it was that a British court, not a Canadian one, opened the doors of our Senate to women.

Law students are taught that the "Persons" case marked a turning-point in the development of Canadian constitutional law. It gave new meaning to the term "responsible government" by ruling that the *BNA Act* was to be interpreted progressively, like a "living tree ... capable of growth and expansion."² And so, in keeping with the times, the Act could now be read as including

women in the governance of our society. In the words of Emily Murphy, one of the "Famous 5" who brought the case before the courts, "We, and the women of Canada whom we had the high honour to represent, are not considering the pronouncement of standing as a sex victory, but rather, as one which will permit our saying 'we' instead of 'you' in affairs of State."³

In reaching their decision the British law lords reviewed external evidence such as case law and other legal precedents, and in so doing acknowledged and gave further validity to the changing role of women in Canadian society. But the history of this case, fraught with many interesting twists and turns, is also telling. Consider one of the items of external evidence reviewed by the Privy Council, the case of Lizzie Cyr.

Lizzie Cyr was a prostitute who in 1917 was brought before magistrate Alice Jamieson, in Calgary, on a charge of vagrancy. In the early decades of the

20th century, prostitution was controlled primarily by vagrancy laws. Societal prejudices that laid the blame at the feet of the prostitutes, combined with the rising fear of the spread of venereal disease, caused Lizzie to receive harsh treatment at the hands of Jamieson, the second female magistrate to be appointed in the British Empire. David Bright observes that "an enduring sexual discrimination existed at the core of legislative measures — regulation, prohibition and rehabilitation — adopted by the state to combat prostitution."⁴ In reviewing Jamieson's handling of the case, Bright concludes that she acted prematurely and unfairly in handing down a sentence of six months' hard labour without allowing the defence to present its case.

Cyr's lawyer appealed the case on a number of grounds, one of which was that Jamieson, as a woman, did not have the legal capacity to hold the public office of magistrate. The Alberta Court of Appeal addressed this argument head



Mark Mennie

Barbara Paterson, maquette for *Women are Persons!* (1997). A larger-than-life bronze casting of this sculpture was erected in Calgary last year on the 70th anniversary of the “Persons” case. On October 18, 2000, an identical monument will be unveiled on Parliament Hill. The sculpture depicts an imaginary moment when the Famous 5 received the news of the Privy Council’s decision that the word “persons” in Section 24 of the *British North America Act* included women. The “Persons” case was spurred by the desire of Emily Murphy, the first female magistrate in the British Empire, to become the first woman in the Canadian Senate. Advised that any five people could initiate an appeal to the Supreme Court of Canada for clarification of any point in the *BNA Act*, she invited Henrietta Muir Edwards (holding teacup), Nellie McClung (holding newspaper), Louise McKinney (seated) and Irene Parlby (pointing) to join her cause. The ruling by the Supreme Court of Canada on March 14, 1928, that women were not “persons” for the purposes of holding high office was unanimously overruled on October 18, 1929, by the assertion of the Judicial Committee of the Privy Council of England that “the exclusion of women from all public offices is a relic of days more barbarous than ours.” Emily Murphy never was appointed to the Senate; the first Canadian woman to achieve this was Cairine Wilson, in 1930.

on and found that in “presently existing conditions there is at common law no legal disqualification for holding public office in the government of the country arising from any distinction of sex.”⁵ This legal decision, along with other evidence of women’s involvement in public office at that time, served to lay the foundation for the appeal to the Privy Council in the *Edwards* case.

The many achievements of the Famous 5 (Emily Murphy, Nellie McClung, Henrietta Muir Edwards,

Louise McKinney and Irene Parlby) are acknowledged on October 18 with the unveiling of a statue on Parliament Hill — an honour that, until now, has been reserved for monarchs, deceased prime ministers and the Fathers of Confederation. The road to social change is often paved with irony, and so perhaps it shouldn’t surprise us that the history of legal personhood for Canadian women is so strangely bound up with the less satisfactory history of that *persona non grata*, Lizzie Cyr.

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5. [1917] 12 Alta L R 325 at 336 (CA).