

Dublin Masters of Clinical Expression

III. Sir Dominic Corrigan (1802-1880)

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“We know no difference of race, creed or colour, for every man is our neighbour.”

Dominic John Corrigan was born in Thomas Street in 1802. His father owned a shop which sold agricultural implements. His mother Celia, claimed direct descent from the Royal O'Connor family. The Catholic religion occupied an important place in the family life, one of Dominic's sisters becoming a Carmelite Nun. The family business was a prosperous one and all the children received an excellent education. Dominic was sent to the lay College of Maynooth where he distinguished himself in Natural Philosophy. Having expressed a wish for a medical career, he was apprenticed to Dr. O'Kelly, medical attendant at Maynooth College and on his advice was later sent to Edinburgh, where he qualified M.D. in 1825 with his famous contemporary William Stokes.

Corrigan returned to Dublin at the age of 23 years and set up in practice at Upper Ormond Quay and later at Bachelor's Walk. He was appointed to the Charitable Dispensary in Meath Street and in 1830 he was appointed Physician to Jervis Street Hospital and as was customary had to contribute a large sum of money to the hospital funds in return for which he was allocated six beds. He was also appointed physician to Maynooth College and Cork Street Fever Hospital. He obtained lectureships at the Digges Street and Peter Street medical schools and later in the Carmichael school. It was during this period that he made his greatest contributions to medicine; his final appointment as consulting physician to the Whitworth and Hardwicke Hospitals did not take place until 1840 at the age of 38 years.

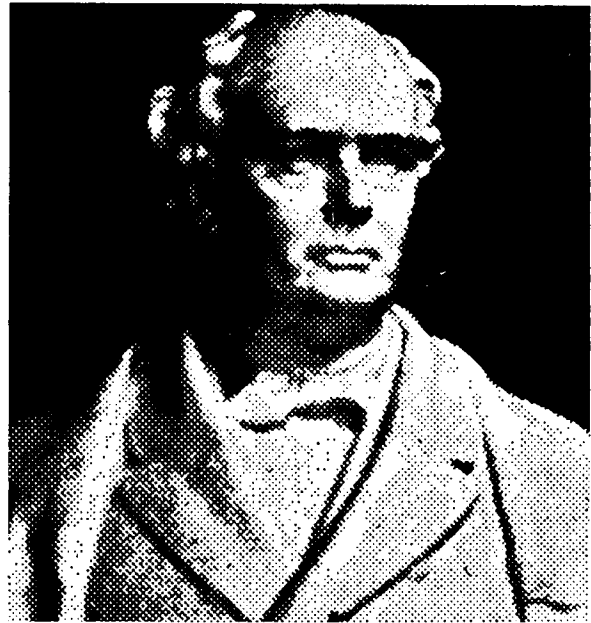
Corrigan's first publication was in the *Lancet* of 1829, the title being *Aneurism of the Aorta and the employment of the stethoscope in diagnosis of this condition*. The style of writing of

this paper is most refreshing when compared to the staid, rigid and unimaginative jargon of today's scientific literature and even ends with the delightful informality of a P.S. drawing our attention to the fact that the diseased parts were in the author's possession. However, Corrigan had made a serious error in this paper in that he ascribed marked carotid pulsation in his patient to an aneurysm of the aorta, whereas in fact it was due to associated aortic regurgitation. This he soon corrected in his famous paper of 1832 in the *Edinburgh Medical and Surgical Journal*—*On Permanent Patency of the Mouth of the Aorta, or Inadequacy of the Aortic Valves*. Here he describes for what he believes to be the first time “inefficiency of the valvular apparatus at the mouth of the aorta, in consequence of which the blood sent into the aorta regurgitates into the ventricle” and in which there will be “visible pulsation of the arteries of the head and superior extremities . . . *bruit de soufflet* and *fremissement*, or a peculiar rushing thrill felt by the finger in the carotids and subclavians; in those cases in which the deficiency of the valves is considerable . . . there is heard in the ascending aorta a double bruit . . . the impression made distinctly on the ear is, that the first sound is from a rushing of blood up the aorta, the second from a rushing of it back into the ventricle” and finally “the pulse is invariably full and swelling”. He explains left ventricular hypertrophy as a beneficial compensatory phenomenon, a remarkable concept at this time but one already alluded to by Adams. He advises caution in the use of digitalis and deprecates efforts “to diminish the general strength of the patient and that of the heart in particular” advocating instead “strengthening of the general constitution.” He points out that

the signs which he originally described as pathognomonic of aneurysm were due to involvement of the aortic valve ring with resultant aortic insufficiency. This paper has probably drawn more comment than most other medical publications and a number of historical errors are common. First of all, a number of claims were made to prior description of the condition: James Hope took violent exception claiming that he had described the disease in his lectures in 1826 and 1827 and he had indeed described a "jerky" pulse in his book published in 1831. In fact, the condition had been described by William Cowper in 1706, and in 1715 Raymond Vieussens described a pulse "which appeared to be very full, very fast, very hard, unequal and so strong that the artery . . . struck the ends of my fingers just as a cord would have done which was very tightly drawn and violently shaken." The most important claim was made for Thomas Hodgkin by Samuel Wilks and there is no doubt that he did describe the disease in 1829. It is interesting to note that Wilks also rescued from obscurity Hodgkin's account of the lymphoma now named after him. In fact, aortic insufficiency was later described by a layman Rudyard Kipling in *The Light that Failed* — "His pulse is shaking his fingers — very bad heart." However, anyone who studies these papers must agree that Corrigan's description is vastly superior in its completeness and obvious insight in the actual pathology and haemodynamics of the condition.

There is also confusion over the term *water-hammer pulse* which is often used synonymously with *Corrigan's pulse* and this is reasonable, but the former term is frequently attributed to Corrigan which is incorrect. Dock after some diligent research discovered that it was Thomas Watson in his lectures of 1836, who first made comparison between the pulse of aortic insufficiency and the *water-hammer*, a chemical toy popular in the 19th century. Armand Trousseau named aortic regurgitation "*maladie de Corrigan*" and it is related that Corrigan whilst on a ward round during a visit to a Paris Hospital, was asked by the physician in charge if he was acquainted with Corrigan of Dublin, to which he replied "*c'est moi, Monsieur*", whereupon he was whisked off to the lecture theatre where the students rapidly gathered to gaze at Corrigan as if he himself were a pathological curiosity.

Corrigan's next important work was *Aortitis as One of the Causes of Angina Pectoris* and this original description antedated by seventy years the views of Sir Clifford Allbutt on the etiology of this disease. In 1838 he published a paper on chronic fibrosis of the lung which he called cirrhosis of the lung, preferring to "add an additional fact, rather than a new name to our science"; this was for many years known as "Corrigan's cirrhosis". There were many other publications but space does not permit discussion of these. Worthy of mention, are his works on fevers in which he recognises the difference between typhoid and typhus fever,



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a fact already clearly demonstrated but not accepted. He regarded famine as one of the main factors responsible for fever epidemics, and in a pamphlet of 1846, he speaks bitterly of the poor dying of starvation in the streets whilst Irish corn — "the forbidden fruit" — was being sold on foreign markets and he predicted that "the off-spring will inherit for generations to come the weakness of body and the apathy of mind which famine and fever have engendered". Corrigan was one of the members of a central Board of Health which was to look into the problems of famine and fever, and Graves attacked this Board and Corrigan specifically for the poor pay which

doctors received for dealing with famine. Graves even went so far as to accuse Corrigan of being affected by the high company he found himself in, namely sitting with Sir Philip Crampton, a fellow member of the Board, and there may have been truth in this allegation.

Practice was at first slow for Corrigan. Friends were as always only too willing to give him advice on how to succeed in practice, the acquisition of a showy carriage and fast driving pair being strongly recommended. Corrigan did not believe in overdoing things and he never tried to pack too many consultations into one day, nor did he believe in lecturing for more than half an hour—a practise many less erudite teachers would do well to adopt. Gradually he became a most prosperous physician and in his latter years was earning in excess of £9,000 per annum. Fleetwood tells us that his butler died an even richer man by virtue of the fact that in those days admission to a great doctor was related to the size of the tip given to the butler.

Corrigan decided in 1843 to sit the examination of Membership of the Royal College of Surgeons in London; this was an unusual step for one so well established but he was duly passed when he replied in the affirmative to a question from the examiners asking if he was the author of the article on *Permanent Patency of the Aortic Valves*. He received many honours in the course of his life, including an honorary M.D. from the University of Dublin a Fellowship of the Royal College of Physicians of Ireland and the Presidency of that body on five occasions. He was Vice-Chancellor to Queens University, representative for 21 years to the General Medical Council and a commissioner of education for many years. In 1847, he was appointed Honorary Physician-in-ordinary to Queen Victoria in Ireland, an unusual post for a Catholic and in 1860 he was created Baronet. From 1870 to 1874, he was a Liberal member of Parliament for Dublin but he did not excel in politics as in medicine and was not re-elected because of his advocacy for the temperance cause and the Sunday closing movement—support of which must surely guarantee ones political demise in Ireland. He also failed in a bid for the Mayoralty of Dublin. We gain some insight into his failings as a politician from his obituary which with customary frankness tells

us that he was given to repetition in his efforts to clinch an argument and that he had a temper which was “easily decomposed”; furthermore he was a tickler for a “point of order” which was often invalid; and “in the heat of debate, and apparently with no definite object before his mind, as the subject was not infrequently indifferent, save that of succeeding in whatever he undertook, he occasionally exhibited a disposition to snatch a vote *quocunque modo*, and quite irrespectively of the merits of the question under discussion”, a habit which although amusing to his friends “in the estimation of the thoughtful, did not raise him who, as a leader and a senior, should have set the example of seeking unbiased and irrefutable conclusions as his primary objects”. We know that in political outlook he was basically liberal and that although an ardent Catholic, he was a firm believer in religious freedom and he also advocated freedom for Ireland, whilst deploring violence as means of obtaining this end. In all his activities he appears to have been an example of integrity. He published in 1862 an interesting little book entitled *Ten days in Athens, with notes by the Way* in which he describes his travels on the Continent and along the Mediterranean mentioning the distinguished people he met, including the Queen of Greece. But at no time does he record a conversation or remark, believing conversation to be a private interchange which should be respected as such and not printed.

In manner, he was kind and cheerful with a quiet sense of humour. He was a splendid horseman and rider to hounds. One of his main interests, outside of medicine, was the Royal Zoological Society of Ireland of which he was President.

In his latter years he suffered from gout and in 1878 sustained a stroke and died two years later.

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