

Dublin Masters of Clinical Expression

V. Robert Graves (1796-1853)

EOIN T. O'BRIEN, MRCPI., MRCP (UK).
St. Laurence's Hospital, Dublin

"Often have I regretted that, under the present system, experience is only to be acquired at a considerable expense of human life . . . The victims selected for this sacrifice at the shrine of experience generally belong to the poorer classes of society."

Robert Graves was born in Dublin in 1796. The Graves family was descended from a Colonel Graves, who had come to Ireland with the Cromwellian Army. His father Richard was a Senior Fellow and Regius Professor of Divinity at Trinity College and Dean of Ardagh.

Little is known of Graves' childhood. He appears to have been a promising student taking all prizes before him. He received his B.A. and medical degree from Trinity College in 1818 at the age of 22 and then set off for Europe. He spent three years studying at Berlin, Göttingen, Vienna, Copenhagen, Paris and Italy. He encountered many adventures during his travels. A facility for foreign languages landed him in an Austrian prison for ten days on the suspicion of being a German spy, the authorities claiming that he spoke German too fluently for a foreigner. During a journey through the Alps, he became friendly with an artist and the pair travelled together for a time, neither seeking the other's name. This fellow traveller was none other than J. M. W. Turner; Graves recalls how the young artist would contemplate a scene for several days and then suddenly sketch it exclaiming—"There it is!" William Stokes gives us an interesting account of Graves at sea: Graves apparently set sail from Genoa for Sicily accompanied by one other passenger, a Spaniard. The poorly

manned and unseaworthy vessel soon ran into difficulties in a storm and the Sicilian crew promptly prepared to abandon ship, leaving Graves and his fellow passenger to their fate. Graves was lying seasick on his bunk when the terrified Spaniard informed him of this decision, but acting swiftly he rushed on deck, seized an axe and wrecked the only life boat, declaring to the captain and crew — "Let us all be drowned together. It is a pity to part good company." Surprisingly Graves was not tossed overboard by the irate crew, but appears to have taken command of the vessel. He repaired the leaking pump valves with leather from his boots, restored general morale and happily for medicine the vessel eventually reached land.

His travels over, Graves returned to Dublin in 1821 and was appointed physician to the Meath Hospital at the age of 25 years. His opening lecture did little to endear him to his seniors. He claimed that many fatalities occurred as a result of indifferent treatment and he deplored the attitude of medical students who walked the wards in pursuit of entertainment rather than medical knowledge.

Graves had been greatly impressed by the method of bedside clinical teaching which he had witnessed on the Continent, especially in Germany. He praised the gentleness and humanity of the German physicians, who unlike their Irish and English colleagues, did not

have "one language for the rich, and one for the poor," and who put unpleasant diagnoses into Latin, rather than shock the unfortunate patient. But it was their method of bedside clinical teaching which had most influenced Graves and he determined to reform the teaching system then practised in Dublin and Edinburgh, whereby students could qualify without ever having examined patients. Clinical teaching, at this time, amounted basically to an interrogation of the patient by the physician, the results of the interchange being delivered



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in poor Latin by a clerk to a crowd of students, most of whom could not even see the patient. Graves bridged the gulf between teacher and student and with the help of Stokes introduced the method of bedside teaching with which we are familiar today. Together they taught Auenbrugger's method of percussion and the use of the stethoscope in diagnosis. They encouraged the student to take a history directly from the patient, to examine the patient, to make notes and finally to discuss the diagnosis, pathology and treatment. On the use of the stethoscope in the diagnosis of valvular disease, they beg their students to remember—"first that

the physical signs of valvular disease are not yet fully established; second, that taken alone, they are in no case sufficient for diagnosis; third, that even in organic disease the nature and situation of murmurs may vary in the course of a few days; fourth, that all varieties of valvular murmurs may occur without organic disease; fifth, and last, that organic disease of the valves may exist to a very great degree without any murmur whatsoever." These words could and, indeed should, be repeated verbatim to final year students in 1975. Such revolutionary methods met with initial resentment but it was not long before the pair had an international reputation. Few greater tributes could be paid to Graves and Stokes than that of William Osler—"I owe my start in the profession to James Bovell, kinsman and devoted pupil of Graves, while my teacher in Montreal, Palmer Howard, lived, moved and had his being in his old masters, Graves and Stokes."

In 1843, Graves published his famous *Clinical Lectures on the Practice of Medicine*. Even today this book makes fascinating and informative reading. The literary style of medical writing at this time was calculated to hold the reader's attention; Hale-White puts it nicely—"the Lectures are unlike a modern textbook in that they can be read with enjoyment in front of the fire." The famous French physician Trousseau considered this book a masterpiece and entreated his students to regard it as their breviary. In his preface to the French edition he writes—"I have become inspired with it in my teaching . . . when he (Graves) inculcated the necessity of giving nourishment in long continued pyrexia the Dublin physician, single-handed assailed an opinion which appeared to be justified by the practice of all ages." Perhaps this tribute more than any other epitomises the iconoclastic ideology of the great nineteenth century physicians. And it was Trousseau who suggested that exophthalmic goitre, described in the *Lectures*, be named Graves' Disease—"I have lately seen three cases of violent and long continued palpitations in females, in each of which the same peculiarity presented itself, viz. enlargement of the thyroid gland; the size of this gland, at all times considerably greater than natural, was subject to remarkable variations in every one of these patients. . . . The palpitations have in all lasted considerably more than a year and with such

violence as to be at times exceedingly distressing, and yet there seems no certain grounds for concluding that organic disease of the heart exists. . . . She next complained of weakness on exertion, and began to look pale and thin . . . It was now observed that the eyes assumed a singular appearance, for the eyeballs were apparently enlarged, so that when she slept or tried to shut her eyes, the lids were incapable of closing. When the eyes were open, the white sclerotic could be seen, to a breadth of several lines, all around the cornea." As with many eponymous titles controversial discussions followed as to who actually described the condition first and in 1897 Sir William Osler drew attention to a description of the disease by Caleb Hillier Parry ten years before Graves' publication, and suggested that it be named Parry's Disease. In Germany the illness is known as Basedow's Disease, and indeed, if one searches the literature a number of references to the condition may be found which precede Graves. However, of all these descriptions that of Graves is the most comprehensive.

The *Lectures* deals with many medical topics other than exophthalmic goitre. Graves was probably describing Raynaud's disease (Raynaud's thesis was not published until 1862) rather than, as some authorities suggest, erythromelalgia, when he presented the case history of a groom who "being obliged to have his hands almost constantly in cold water at an inclement season of the year, the capillaries of the tips of the fingers in both his hands became so deranged in their condition, that they did not recover their proper degree of vitality and tone for many months. When he permitted his hands to hang for any length of time, or when they were exposed to the ordinary winter temperature of the air, the pain and blueness increased to a considerable degree, but if he held them up or plunged them into tepid water, the pain ceased and the blueness became much diminished, or even went away altogether." He described angioneurotic oedema 39 years before Heinrich Quincke's detailed description—"His face begins to swell at various points . . . sometimes the lips, inside of the mouth, palate and uvula are attacked, giving rise to a very considerable inconvenience. Were such tumours to occur in the neighbourhood of the glottis, I need not say that they would be pregnant with danger of no ordinary character." Also mentioned in this

book are the pinhole pupil of pontine haemorrhage, scleroderma and the use of the watch in counting the pulse.

One of the most popular anecdotes about Graves concerned his revolutionary treatment of patients with fever, in whom he advocated supportive therapy. The story goes that one day on his rounds, he was struck by the healthy appearance of a patient recently recovered from severe typhus fever and said to his followers—"This is the effect of our good feeding, and gentlemen, lest when I am gone, you may be at a loss for an epitaph for me, let me give you one in three words: 'He fed fevers'." Graves made the logical observation that a healthy man starved for weeks became weakened but that oddly the medical profession expected a man ill with fever to improve when starved and continuously bled. He attributed many fatalities to this form of therapy and advocated frequent meals of steak, mutton or fowl, washed down with wine and porter. Likewise, he deplored the practice of purging the hapless patient merely because the tongue was furred.

In 1843, Graves was chosen President of the Royal College of Physicians in Ireland and in 1849 he was elected Fellow of the Royal Society of London. During his professional career he received many honours, including a fellowship of the Kings and Queens College of Physicians, Honorary Membership of the Medical Societies of Berlin, Vienna, Hamburg, Tübingen, Bruges and Montreal.

Graves died in 1853 from cancer of the liver at the age of 57 years. In the following year Stokes in a discourse on the life and works of "his teacher, colleague and friend." wrote thus—"his active mind was ever seeking for and finding analogies, and this led him to the discrimination of things similar, and to the assimilation of things dissimilar in a degree seldom surpassed by any medical teacher."

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