27th Nordic Medical History Congress

Wednesday 22
to Saturday 25
May 2019

Table of Contents
(clickable)

Welcome!

The main purpose was to bring scholars, curators, clinicians, and students within the (Nordic) history of medicine together to present and discuss new developments and experiences.

We thank you so much for the exciting and inspiring days in Copenhagen in May 2019.

On behalf of the Danish Society of Medical History,

Ulrik Bak Kirk,
Organizing Committee President

PROGRAMME

A broad spectrum of topics were presented both as keynote talks and parallel sessions:

DNA
Professor Eske Willerslev from the University of Copenhagen will talk about "DNA Use in the Mapping of Early Human Migrations", and professor em. Jørgen Lange Thomsen from the University of Southern Denmark will talk about "DNA Use in Forensic Medicine".

ART & MEDICINE
PhD Eva Åhrén - Director at Unit for Medical History and Heritage - from the Karolinska Institute in Stockholm will talk about "Figuring it out: Visualizing medical subjects", and MD PhD MSc LicSc Jan Bondeson - writer of best sellers about medical history - will talk about "Medical Curiosities in Old Picture Postcards".

THE PAST, THE PRESENT & THE FUTURE
Professor Ken Arnold from the Medical Museion in Copenhagen will chair a panel debate about "What is the Future Role for Medical Museums?"

Professor em. Øivind Larsen from University of Oslo will share a selected few stories from "The Medical History Congresses 1967-2019".

VENUE

CPH Conference
Located at Tietgensgade 65, 1704 Copenhagen V.
Just 50 metres from Copenhagen Central Station.

DGI-Byen's new conference centre – **CPH Conference** – offers 14 super-modern meeting rooms, lounges for relaxing, a rooftop terrace, and a restaurant.

CREDITS

Abstract Book (this ePDF) & Event Photos

Peter Lübben (**website**)

Sponsors

Cand. Pharm. Povl M. Assens Fond

Direktør Michael Hermann Nielsens mindelegat

Else og Mogens Wedell-Wedellsborgs Fond

LEO Fondet

Event Photos **Here**

ORGANIZING COMMITTEE

President
Ulrik Bak Kirk, DMHS (Denmark)

Vice-president
Anne-Marie Worm, DMHS (Denmark)

Members
Niels Christian Vilstrup, DMHS & Medical Museion (Denmark)
Malthe Kouassi Bjerregaard, DMHS & Medical Museion (Denmark)
Jesper From, DMHS (Denmark)
Jesper Brandt Andersen, DMHS (Denmark)
Mette Jensen, DMHS (Denmark)

SCIENTIFIC COMMITTEE

President
Malthe Kouassi Bjerregaard, DMHS & Medical Museion (Denmark)

Members
Ole Didrik Lærum, University of Bergen & University of Copenhagen
Eva Åhrén, Karolinska Institutet (Sweden)
Hanne Bess Boelsbjerg, Interacting Minds Centre, Aarhus University.
Kari Tove Elvbakken, Department of Administration and Organization Theory at University of Bergen.

Poster Presentations

#1 Annette Frölich (Denmark):
1st millennium AD traces of physicians in Southern Scandinavia – illuminated by finding/identification of their equipment

During the last 15 years medical equipment dating back to the 1st millennium AD has been identified from different locations in Southern Scandinavia.

The presentation will show pictures of the artefacts and mention those finds which has been identified as being medical equipment/instruments excavated from Southern Scandinavian sites, with examples from: Illerup Ådal, Helgö and Birka, Uppåkra, Bornholm, Tissø and Horsens, all dating to the 1st millennium AD. Unfortunately, iron is not preserved from Kaupang (Viking Age Oslo, Norway) which explain lack of information from this site.

#2 Elina Maaniitty (Finland):
Tabellverket, Medical Science and the Importance of Statistics in Mid-Eighteenth- Century Sweden

An integral part of Enlightenment science, statistics rose to great importance in eighteenth- century Europe. They were seen as a new, undisputable and neutral way to organise and publish information on an ever-growing range of topics, in a manner similar to taxonomy.

The mid-eighteenth century also saw a rapid increase of interest in questions related to population and public health, in both of which the role of statistics quickly proved central. In Sweden, this was most visible in the formation of Tabellverket, the national population statistic, in 1749.

Meticulous statistics were also kept by hospitals and other institutions. In both scientific and public discussions statistics became an important argumentation tool, particularly in debates concerning controversial topics such as smallpox inoculation. However, the use of statistics in such texts was not always without problems. Reading and interpreting statistical data was not necessarily easy for someone new to it, despite, e.g., an academic education in medicine.

Towards the end of the century, the role of statistics became increasingly central in medical texts as a way of describing and representing empirical data, which can be seen e.g. in articles published in periodicals and in the reports of district physicians.

Tabellverket was closely intertwined with the Royal Academy of Sciences and the most prominent Swedish medical scientists. These connections cast light on the different aspects of the professional life of an eighteenth-century physician: academic, practical, and administrative.

#3 Heini Hakosalo (Finland):
Lives over Time – Birth Cohort Studies as a Form of Scientific Knowledge-Production, from the Second World War to the Present

The poster introduces a project by the same name, drawing up some of the preliminary results. The project investigates birth cohort studies as a form of knowledge-production, viewing it as a historically specific product of 20th century industrial and post-industrial society.

This was a society keen to cure social, mental and bodily ills with the help of science- informed policies and that had, for the first time in history, the practical means of following large groups of individuals around for years and decades, producing a mass of varied data on them. Cohort studies come in many forms and variations, but the membership in a birth cohort is determined simply by date and place of birth.

A BCS will seek to include all babies born within a limited span of time (e.g. a week or a year) within a country, city or other area. The first nation-wide BCS was launched in Britain in 1946 and has been followed by many others world over. BCSs have generated a vast amount of data and thousands of medical, psychological and sociological publications. Their findings have informed health, educational and social policies. The history of the BCS also coincides with a period of extraordinary scientific and technological change and dynamism, and an exploration into the BCS provides a fresh way to approach these changes.

The poster includes (1) a timeline; (2) a graphic description of the course and basic constituents of a birth cohort study, and (3) the results of a bibliometric survey (represented in the form of graphs) on the overall volume and the major clusters of BCS-based research.

#4 Ingrid Rørbæk (Denmark):
PC Abildgaard (1740-1801): Medical doctor, founder of the first veterinary school in Denmark and mineralogist

PC Abildgaard wrote "En dansk Heste og Kvæg Læge" in 1791. This book, first published in 1770, was very popular for the farmers in Denmark. It is a layman's help to understand and cure his animals, horses, cattle, sheep and pigs. The book was translated and published in Sweden 8 times, and in German 5 times and in Denmark several times up til the ends of 18th century. But who was PC Abildgaard?

After an education in pharmacy end chemistry he became a student of medicine, and in 1763 – together with 2 other bright students – he was sent to Lyon in France to the first veterinary school in Europe, ordered by the Danish king. The purpose of the study visit was to learn more about rinderpest. Back in Copenhagen, PC Abildgaard finally became a medical doctor.

His paper from 1768 was titled "De venesectione in suppresis menstruis." After that, he practiced as a doctor, but again in 1773, he was asked from the Danish government to establish a school for veterinary medicine, later known as Landbohøjskolen, now a part of University of Copenhagen.

PC Abildgaard continued his interest in chemistry, and in 1799 he named CRYOLIT – the stone of ice – found in Greenland, which in former time was important in the production process of aluminum.

Poster Presentations

#5 Kerstin Hulter Åsberg (Sweden):
Mathilde Wigert-Österlund – artist, author, and patient at Ulleråker Hospital in Uppsala, Sweden

During a mental illness, patients with artistic talents may express themselves in different ways, well-known by the works of Karin Johannisson. At Ulleråker Hospital in Uppsala, there are several examples preserved.

The Swedish poet Gustaf Fröding may be the most famous. Mathilde Wigert-Österlund (1873-1943) was an appreciated painter, educated at the Swedish Art Academy in Stockholm, and married to John Österlund, another established painter in Uppsala.

In 1921, the first symptoms of mental illness appeared, and Mathilde was admitted to hospital during two periods throughout her life. Although she was well treated by the doctors, who knew her brother, the psychiatrist Viktor Wigert, she tried to run away several times.

She wrote a book, Vox, which ended up with a proposal to the King, the Government, and the Swedish Parliament to stop the law of detaining patients with mental illness. As a sensitive and talented person, she was able to express also in words the common feelings of many deplorable patients.

Her former paintings changed into textile artworks, which are considered as unique in the time they were made. Ulleråker Hospital is now a historical ground, but the patient journals are preserved and can be studied by medical historians.

#6 Kristine Lillestøl (Norway):
"Like a jackal following the tracks of the Spanish flu": Encephalitis lethargica and its consequences, Norway 1919-1939

Encephalitis lethargica – also known as "sleeping sickness" – is one of the great mysteries of medicine. According to estimates, more than one million people worldwide were afflicted with this disease during the epidemic period beginning in 1916.

The mortality rates were high, and many of the survivors developed chronic and serious neurological sequelae, such as post-encephalitic parkinsonism. Encephalitis lethargica remains an enigmatic disease.

Possible etiological factors are still uncertain and debated, including the nature of the relationship between encephalitis lethargica and the pandemic of the Spanish flu. Consequently, there are also discussions about whether a similar epidemic may strike again, with equally dramatic consequences.

In Norway, the first cases of encephalitis lethargica were reported in 1919, and the disease remained a challenge for several years. This has so far been a largely unexplored part of the Norwegian history of medicine.

Through analyses of newspapers, patient records, medical journals and medical statistics, the main questions to be explored in the present poster are:

1) What was the extent of the of the epidemic of encephalitis lethargica in Norway – in the initial phase, and in terms of long-term sequelae during the next couple of decades?

2) How was this mysterious disease perceived, received and dealt with - by the medical profession, the public and the media in the Norwegian context 1919-1939?

#7 Mads Linnet Perner (Denmark):
The landscape of of disease in a war-struck rural parish

Through listening to more than 12000 recordings of ethnic musical studies there appears to be surprising similarities in traditional singing amongst some of the oldest cultures in the world. Mastering the technical complexities and detailed musical compositions which defines a particular cultural heritage or indigenous tribe would only be possible by growing up in that specific singing environment.

These are the traditional song rituals inherited and carefully nurtured through generations right the way back from early human migration across the continents. The traditional songs we still hear today. By examining traditional singing, genealogical research and the history of language, significant correlations can be seen. Tribes around the world have similar stories and tales about the importance of their traditional singing.

They have received spiritual help and guidance for survival via their songs and certain songs are viewed as medicine for physical and mental illnesses.

This has led to very strong ties between indigenous people and their singing traditions in order to ensure survival of their tribe for future generations. Remarkable similarities can be found in technical expression, phonetics and melodic composition between specific tribes across the different continents.

Traditional singing is obviously a dynamic entity and will change along with cultural traditions, but it appears that codes can be found in the songs of ancient tribes which gives us clues as to their genealogical heritage. Such as when a Sami elder recognises a funeral song played to her from an indigenous Siberian tribe. Without understanding a single word.

The Second Pandemic of plague in Europe during the fourteenth to eighteenth centuries was one of the most devastating pandemics in history, and questions surrounding its cause and spread remain a heated topic of debate in historical scholarship. To a certain extent, the sparsity of source material from the era of European plague (1348-1720) has limited discussions about the nature of the disease to often be purely hypothetical.

There is a particularly great need for micro-level studies of disease patterns in small communities. This poster aims to fill this gap with the case of the parish of Øster Løgum in southern Denmark, where a unique combination of sources can provide an incredibly detailed look into an early modern rural community throughout waves of devastating epidemics.

In Øster Løgum, which consisted of seven separate villages, the parish register starts as early as 1620 and reports in detail about the burials of those who died during epidemics of dysentery and plague that struck the parish in 1627-8 and 1629, respectively.

Further, a head count from 1650 lists the members of each household, and a map series from 1647, when linked to the head count, potentially enables us to geographically study the impact of the epidemics at the level of each house.

Poster Presentations

#8 Mette Sandstrøm (Denmark):
Singing - our cultural DNA and the earliest medicine?

Through listening to more than 12000 recordings of ethnic musical studies there appears to be surprising similarities in traditional singing amongst some of the oldest cultures in the world. Mastering the technical complexities and detailed musical compositions which defines a particular cultural heritage or indigenous tribe would only be possible by growing up in that specific singing environment.

These are the traditional song rituals inherited and carefully nurtured through generations right the way back from early human migration across the continents. The traditional songs we still hear today. By examining traditional singing, genealogical research and the history of language, significant correlations can be seen. Tribes around the world have similar stories and tales about the importance of their traditional singing. They have received spiritual help and guidance for survival via their songs and certain songs are viewed as medicine for physical and mental illnesses.

This has led to very strong ties between indigenous people and their singing traditions in order to ensure survival of their tribe for future generations. Remarkable similarities can be found in technical expression, phonetics and melodic composition between specific tribes across the different continents.

Traditional singing is obviously a dynamic entity and will change along with cultural traditions, but it appears that codes can be found in the songs of ancient tribes which gives us clues as to their genealogical heritage. Such as when a Sami elder recognises a funeral song played to her from an indigenous Siberian tribe. Without understanding a single word.

#9 Michal M. Skoczylas (Poland):
Elaborations and mentions of Johann Gottlieb von Bötticher (1676-1762) in Danish, German and Polish historical-medical literature and the exhibition commemorating him at the Pomeranian Medical University in Szczecin (Poland) in the year 2019

Johann Gottlieb von Bötticher (Johannes Gottlieb von Bøtticher), born in 1676 in Falkenburg (Polish: Złocieniec) or Stargardt auf der Ihna (nowadays: Stargard), died in 1762 in Copenhagen, was a medical doctor educated in several German universities (Frankfurt (Oder), Wittenberg, Leipzig, Jena, Rostock) and at the University of Copenhagen, where he received a doctoral degree. He was remembered thanks to the fight against plague in Denmark in 1711 and his scientific work.

The travels in the footsteps of the hero and the work on gathering information from elaborations and mentions of Bötticher in currently available old and contemporary Danish, German and Polish historical-medical literature was started by the author of this report in 2012, namely on the 250th anniversary of Bötticher's death.

The results of this work are presented as an author's list of sources of information about Bötticher's biography, professional work and scientific achievements, that are dispersed in various publications stored in the academic libraries in Copenhagen, Kiel, Greifswald and Szczecin, the Danish National Archives and the Internet resources. Hitherto prevailing exposure of these results took place in the form of one of arguments to the dissertation entitled 'Selected rare diseases in the medical literature and pre- and post- graduate education programs and care for people with rare disease in industrialized countries.

History, present and perspectives' and a lecture for Polish Medical Association in Szczecin (December 17, 2015). In the year 2019, the exhibition commemorating him in the hall of the Main Library of Pomeranian Medical University in Szczecin is presented.

#10 Michal M. Skoczylas (Poland):
The application of radiology to medical problems via examples from 'Ugeskrift for Læger' 1951 and 1971 articles

The discovery of X-ray and the use of radiation to imaging the human body by Wilhelm Roentgen in 1895 resulted in numerous attempts to use X-ray in the studies of changes in the course of diseases at the turn of the 19th and 20th centuries and in the first half of the 20th century.

This study was to assess the application of imaging to medical issues in the third quarter of the 20th century basing on the sample of articles published in 'Ugeskrift for Læger', the periodical of the Danish Medical Association (Den Almindelige Danske Lægeforening), in exemplary years.

Volumes from years 1951 and 1971 were selected at random and read for these issues, giving the basis for a qualitative study. Issues of medical imaging appeared in the aspects of 1) diagnosis and 2) treatment of diseases and its monitoring as well as 3) improvement of the examination techniques.
In particular categories, they were, among others: 1) fibrous dysplasia of bone (1951), conditions resulting in ureteral obstruction (1971), focal dermal hypoplasia (1971); 2) the use of bleomycin in the treatment of diseases, in particular neoplastic changes in the lungs, including metastases of penile cancer (series of articles in 1951), congenital cysts and throat fistulas (1971); 3) bronchography with water-soluble contrast material (1951), intravenous cerebral angioscyntygraphy (1971).

The analysis revealed a wide range of medical problems supported by imaging diagnostics, including rare diseases, which prove the fact that European radiography experienced its heyday in the third quarter of the 20th century.

KEYNOTE

Eske Willerslev:
Centre for GeoGenetics, University of Copenhagen
& University of Cambridge

What we can learn from ancient genomics

Thursday 23 May, 09:30 – 10:15

Event Photos **Here**

Access Slides **Here**

Click to play video

Abstract

In the past two decades, ancient DNA research has progressed from the retrieval of small fragments of mitochondrial DNA from a few specimens to large-scale genome studies of ancient human populations, the diseases they carried, and the environment surrounding them.

Increasingly, ancient genetic information is providing a unique means to directly test theories in archaeology, anthropology, ecology, evolution, and medicine.

Initial results have changed the way we look at long debated topics such as early peopling of the Europe, Asia, Australia, and the Americas as well as on human genetic adaptations and pathogen evolution.

KEYNOTE

Jørgen Lange Thomsen:
Dept. of Forensic Medicine, University of Southern Denmark

The History of DNA Use in Forensic Medicine

Thursday 23 May, 10:15 – 11:30

Abstract

Alec Jeffreys made by accident his groundbreaking discovery in September 1984 on the use of DNA polymorphism in crime work. It only took a couple of years before the police applied his discovery on homicide cases. As a forensic pathologist I took part in 'The Miracle', since it was introduced in Denmark in the early nineties.

In my presentation, I shall describe the use of the DNA technique, including the possible pitfalls.

Cases of homicides and sexual abuse will be mentioned.

Event Photos **Here**

Access Slides **Here**

Session: The History of Signs of Death

Thursday 23 May, 11:30 – 13:00

PRESENTATION

#1 Presenter:
Jørgen Lange Thomsen

Dept. of Forensic Medicine,
University of Southern Denmark

Event Photos **Here**

Access Slides **Here**

Click to play video

How did the Danish Kings die?

It is a skill of the forensic profession (retsmedicin) to analyze fatalities with reference to cause and manner of death. I have studied the death of Danish kings starting with the Viking era, looking into their life and possible symptoms of disease. Based upon my findings I shall describe the disease pattern in a number of selected kings.

The most conspicuous finding was the total absence of symptoms or violence in half of the early kings - they died suddenly and unexpectedly.

I have formed the theory that these cases of sudden death are due to a chromosomal mutation resulting in cardiac death (channelopathy). By autosomal, dominant inheritance it is inherited in 50 percent of the descendants.

The theory is supported by the fact that this type of death disappeared completely, when almost all of the royal DNA was exchanged by Christian I taking over the throne in 1448.

Buy the book here

Session: The History of Signs of Death

Thursday 23 May, 11:30 – 13:00

PRESENTATION

#2 Presenter:
Jan Bondeson

School of Medicine,
Cardiff University, Wales

Download Power Point Slides here

Event Photos **Here**

Access Slides **Here**

The history of the signs of death and the risk of a premature burial

Readers of the tales of Edgar Allan Poe may comfort themselves with the notion that he must have exaggerated: Surely people of the 1800s could not have been at a risk of being buried alive? But such reports filled medical journals as well as popular fiction, and fear among the populace was high.

This talk will describe the medical and folkloristic aspects of the fear of a premature burial: bizarre security coffins with bell-ropes and escape hatches, waiting mortuaries for decaying corpses to ensure death was certain before burial, and the search for an infallible sign of death. And are the present-day stratagems for determining death totally reliable?

Download Power Point Slides here

Session: The Art of Medical Moulages

Thursday 23 May, 11:30 – 13:00

#1 Presenter:
Eva Åhrén

Unit for Medical History and Heritage, Karolinska Institutet, Stockholm, Sweden

Event Photos **Here**

Access Slides **Here**

Moulage Collections in the Nordic Countries

In 2016, scholars in the Nordic countries came together, at a Danish initiative, to study moulage collections in dermatological departments, museums, and in private ownership. This paper will describe the results from Finland, Denmark, Norway, and Sweden, and present the contents, history, and current state of the moulage collections.

It will also discuss the cultural, historical particularities and significance of the moulages, focusing on those that are unique and locally manufactured. The research will hopefully generate more scholarship on the subject and increase awareness of the artistic and historical value of these collections.

- "Ylppö's children" is a collection of moulages made in Berlin 1918-1920 by artist Annie Müllensiefen for Finnish pediatrician Arvo Ylppö. Eighty of the moulages, depicting a range of transmissible diseases including tuberculosis, syphilis, and poxes affecting infants, survive at the Helsinki University Museum. They have previously been on display in popular exhibitions as well as teaching collections.

- Danish artist and Panoptikon director Theodor Edelmann made moulages for the Finsen Institute of Medical Light in Copenhagen in 1900-1930. Nobel Laureate Niels Finsen initiated the making of moulages of patients treated for skin diseases, mostly lupus vulgaris. Today, sixty-seven moulages survive in the collections of the Medical Museion, but the patient records are lost.

- The Bergen Leprosy Museum holds thirty-one moulages of patients' faces and limbs. Eighteen of these were donated by German dermatologist Oscar Lassar, and probably made by the mouleur Heinrich Kasten. Leprosy specialists Daniel Cornelius Danielssen and Gerhard Armauer Hansen made Bergen an international center of leprosy research, but nothing is known about their use of moulages.

- Stockholm's mothballed Medical History Museum has a collection of more than three hundred moulages in storage. Many of these dermatological and venerological moulages were bought from German mouleurs, e.g. Fritz Kolbow, and used in medical education at Karolinska Institutet and S:t Göran's Hospital. Some were made locally by a Dr. M. Nelken, who collaborated with dermatology professor Johan Almkvist.

Ref: Worm AM, Sinisalo H, Eilertsen G, Åhrén E, Meyer I: Dermatological moulage collections in the Nordic countries. J Eur Acad Dermatol Venereol. 2018 Apr;32(4):570-580.

Session: The Art of Medical Moulages

Thursday 23 May, 11:30 – 13:00

PRESENTATION

#2 Presenter:
Thomas Schnalke

Museum of Medical History at the Charité, Berlin, Germany

Event Photos **Here**

Access Slides **Here**

Directed Views: *Focusing patients and diseases in medical moulages.*

From its very beginnings on, medicine has tried very successfully to direct and focus the view of the viewers by its ingenious image worlds: beneath the skin into the depths of a highly functional "body machinery" consisting of organs and tissues, as well as onto the skin to study surfaces and formations especially of typical signs of diseases.

The findings have been documented in a large variety of different media and materials – drawn, printed, photographed, scanned and animated with the help of servers and clouds, but also kept in 3D as true dry and wet specimens or as replicas made from plaster, wood, papier mâché, plastics or wax.

In my talk I will focus on the steering of the medical gaze referring to wax models, anatomical and pathological specimens and especially to clinical moulages in former times. This will open a door to a closer inspection of anonymous, normed and highly idealized visualisations of internal body structures in Early Modern Times on the one hand. On the other hand, this will follow the reorientation of the medical viewer's eye deep into the pathological alterations of specific body lesions on a specific patient's skin in the 19th and 20th centuries.

I would like to stress the point that in each clinical moulage the patient's subjectivity, his or her individual personality is undoubtedly ingrained and embedded to a certain degree. Thus, these highly realistic medical wax portraits form a unique source still for teaching medicine in a modern patient-orientated way, but also for discovering and reconstructing the patient in medical history.

Session: The Art of Medical Moulages

Thursday 23 May, 11:30 – 13:00

PRESENTATION

#3 Presenter:
Ion Meyer

Medical Museion,
Univsersity of Copenhagen, Denmark

Restoring Shapes: *Conservation and preparation of wax moulages*

Medicinsk Museion has - as the only museum - carried out thorough analysis of the preservation status of the collection of moulages, and carried out conservation so that they are protected for the future.

When the museum took over the collection, the moulagers were in a very bad condition and could not be used for dissemination or research. The most serious damages was that the facial moulages had been pressed; some were only one third of their original height.

Based on comprehensive analysis, a conservation plan was developed.

With external funds, all the moulages was cleaned, stabilized and reshaped as close to their original form as possible and can now be used for museum purposes.

Event Photos **Here**

Access Slides **Here**

Session: Donating Brains and Organs:

Thursday 23 May, 11:30 – 13:00

More Than Waste?

PRESENTATION

#1 Presenter:
Thomas Erslev

School of Culture and Society,
Aarhus University, Denmark

Archiving Human Brains – *Temporality and materiality in a Danish collection of 9.479 pathological brains*

Collected 1945-1982 at Psychiatric Hospital Risskov, the brain collection is the subject of my PhD thesis. In my talk, I will present the main findings and perspectives from my research, which identifies temporality and materiality as key concerns in ethical, epistemological, political, as well as quotidian engagements with the collection throughout its existence.

Actors ranging from psychiatrists and pathologists to lay people, politicians and religious authorities mobilise understandings of time and matter, which underpin their conceptions of the brain collection as either wasteful or valuable, threatening or promising.

Event Photos **Here**

Access Slides **Here**

Session: Donating Brains and Organs:

Thursday 23 May, 11:30 – 13:00

More Than Waste?

#2 Presenter:
Maria Olejaz

Centre for Medical Science and Technology Studies, Department of Public Health, University of Copenhagen, Denmark

Event Photos **Here**

Access Slides **Here**

Making bodies available for dissection: *A discussion of historical and contemporary relations between bodies and medicine in Denmark*

Anatomical dissection is a medical practice which has taken place for centuries and continues to be relevant in medical education and research today. It is a practice which relies on a supply of dead human bodies.

Based on historical work as well as in-depth qualitative interviews with body donors and ethnographic fieldwork in Danish dissection labs, this paper situates anatomical dissection in a larger historical and societal frame.

It pays attention to the changing conditions of making bodies available for dissection, juxtaposing 18th century royal decrees that made available bodies of criminals and the poor with today's willed donation programs.

Furthermore, it asks what this availability of bodies means for the culture of medicine as well as what it says about historical and contemporary understandings of death and of the changing relationship between the state and the individual.

Session: Donating Brains and Organs:

Thursday 23 May, 11:30 – 13:00

More Than Waste?

#3 Presenter:
Einar J. Berle

Oslo Medical Centre,
Oslo, Norway

Event Photos **Here**

Access Slides **Here**

Anatomy as Entertainment
Ancient medical knowledge was based on philosophical theories. Humoral pathology was of paramount importance in diagnostics and therapeutics. Knowledge of human anatomy was rudimentary and mainly based on deductions from animal anatomy. Much to blame for this were the restrictions pertaining to dissection of the human body.

After the emergence of Christianity and later on also Islam, the ban on dissection of the human body was reinforced. During the Renaissance the ban was occasionally lifted, and artists like Leonardo da Vinci and Michelangelo were both known to have dissected human bodies, in order to acquire a more precise knowledge of the human anatomy.

The 17th century saw further lifting of the anatomy ban. Dissections became public. Tickets were sold, allowing an audience to be present during the public dissection. For executed criminals, the public dissection of their bodies was seen as a second punishment.

The paper deals with a brief history of the early history of human anatomy from classical times to the Renaissance. Special attention is given to the public anatomies carried out in the Netherlands in the 1600s.

PANEL DEBATE

What is the Future Role for Medical Museums?

Thursday 23 May, 14:15 – 15:30

Event Photos **Here**

Ken Arnold

Director of Medical Museion and Creative Director at Wellcome Collection

Abstract

Science scepticism is on the rise and old cultural institutions are facing questions of relevance, ownership, representation and inclusion. In the meantime, modern research is becoming ever more complicated and impenetrable, hard to understand and even harder to display.

Medical Museums need to navigate all these challenges, while also competing for attention with Netflix, YouTube and a whole host of other other sources of information and opinion.

Chaired by Ken Arnold, Director of Medical Museion and Creative Director at Wellcome Collection, this panel will debate these questions, trying to decide: How these institutions should stay relevant without giving up on their original DNA?

Panelists

Ken Arnold, panel moderator
Medical Museion
(Denmark)

Thomas Schnalke
Das Berliner Medizinhistorische Museum der Charité
(Germany)

Lisa Sputnes Mouwitz
Medicinhistoriska Museet
(Sweden)

Morten A. Skydsgaard
Steno Museum
(Denmark)

PANEL DEBATE

What is the Future Role for Medical Museums?

Thursday 23 May, 14:15 – 15:30

Event Photos **Here**

Lisa Sputnes Mouwitz
Medicinhistoriska Museet
(Sweden)

Lisa is Director of the Medical History Museum, Sahlgrenska University Hospital, Gothenburg, Sweden. Through exhibitions as Out of The Picture, Into The Room, and The Thing in Itself as well as inviting artist interventions she has been exploring how to interpret and mediate the museum's collections.

Morten A. Skydsgaard
Steno Museum
(Denmark)

Morten holds a PhD and is Senior Curator at the Steno Museum, Science Museums, under Aarhus University. He has curated several exhibitions about the dilemmas of technology, body culture and medicine. His research interests encompass the history of body and disease in the 19th and 20th Century and museum didactics. In 2018, he curated the exhibition Profession and Passion – a Life in Science.

Session: On the Edge of Orthodox Medicine

Thursday 23 May, 16:00 – 17:30

#1 Presenter:
Anders Bank Lodahl

Dept. of Sports Sci. & Clinical Biomechanics, University of Southern Denmark

Event Photos **Here**

Skodsborg Badesanatorium, 1898-1992

Skodsborg Badesanatorium was founded in 1898 on the Seventh-Day Adventist principles of health it promoted health through a preventive holistic lifestyle based on vegetarianism without unhealthy stimuli as alcohol, tobacco, coffee and tea with treatments with light, water and fresh air. These principles were in the beginning of the 20th century a part of the health reform movement, which held a mild critic against the established medical system.

Even though the orthodox medicine did incorporate some of these ideas, they were never fully accepted. All through its existents the sanitarium had to interpret its commitment to these principles in relation to the orthodox medicine and the established medical system.

The sanitarium is an example of how a private health institution thrived while in being alternative enough to provide, what patients could not get at the public hospitals, but still orthodox enough to keep its scientific reliability.

Especially in the 1930s the founding doctor, Carl Ottosen, succeeded in placing the sanitarium in the forefront of the orthodox medicine by its focus on preventive medicine and especially the physical treatments deriving from the health reform movement. In this period the sanatorium called itself the largest health resort in Scandinavia.

Less successful was the sanitarium in the 1980s, when it, inspired by the new preventive focus in orthodox medicine, tried to renew their image of preventive medicine build on an outspoken Adventist holistic view on health. This turn also included treatments like acupuncture, which were not fully accepted in the orthodox medicine and rejected by the Adventist organization because of religious concerns. This holistic turn was a part of an unsuccessful effort to find new ways to attract new private patients before its closure in 1992.

Session: On the Edge of Orthodox Medicine

Thursday 23 May, 16:00 – 17:30

#2 Presenter:
Heini Hakosalo

History of Science and Ideas,
University of Oulu, Finland

Event Photos **Here**

Access Slides **Here**

The rise and fall of the notion of healing environment: *The case of tuberculosis medicine*

From classical antiquity until the 19th century, western medical thinking gave environmental influences a central role in the causation and treatment of tuberculosis. Both laymen and physicians believed that certain environmental conditions were prone to trigger or aggravate the disease, while other conditions were likely to halt its progress.

For centuries, doctors were likely to prescribe a chance of scenery and a change of climate to a consumptive, even if they found it difficult to agree upon what exactly constituted the most salutogenic environment. The age-old link between the natural environment and tuberculosis was still strong during the last third of the 19th century, when modern sanatorium treatment took shape.

This chapter discusses the role that the notion of the healing environment played in the treatment of tuberculosis in the late 19th and the 20th century, suggesting that three phases can be distinguished. From one phase to another, the significance given to the environment in the treatment of tuberculosis diminished. Nevertheless, the notion lived longer in tuberculosis medicine than perhaps in any other branch of orthodox somatic medicine.

The empirical examples discussed in the chapter mostly relate to Finnish tuberculosis medicine which, by and large, followed general European developments. The sources include medical publications and descriptions of sanatoria and sanatorium life produced by architects, anti-tuberculosis experts, sanatorium staff and patients. Based on such sources, the chapter investigates how the belief in the role of the healing environment is reflected in the medical discourse, the sanatorium buildings and patient narratives.

Session: On the Edge of Orthodox Medicine

Thursday 23 May, 16:00 – 17:30

#3 Presenter:
Kristine Lillestøl

Dept. of Community Medicine, University of Oslo, Norway

Event Photos **Here**

Access Slides **Here**

'Norway for neurasthenia'

– Scandinavian neurasthenics in Norwegian sanatoria and water cure resorts, 1870-1914

In comparison with the grand spas and balneological traditions of Central Europe, Norway's history when it comes to medical institutions based on balneotherapeutic principles may rightly be judged as poor. During the "long" 19th century, however, Norwegian sanatoria and water cure establishments ("kursteder") were considered quite attractive therapeutic destinations, not only for Norwegians.

This was particularly the case for patients suffering from neurasthenia, or nervous exhaustion; a diagnosis which had its "golden age" in Europe and America from 1869 and up until World War I. As it appears, the Norwegian "kursteder" seem to have been particularly popular destinations for Danish and Swedish patients in need of rehabilitation of an exhausted nervous system.

Drawing on medical journals, patient records, prospectuses and reports from several Norwegian sanatoria and hydropathic establishments, as well as newspapers, travel guidebooks and travel reports, some of the questions to be explored in the present paper are: Why and how were these institutions recommended to potential (neurasthenic) patients and visitors from abroad? Who were these patients, what kinds of treatment did they receive in the Norwegian health resorts, how did they experience their stays, and who were their physicians?

Moreover, the paper explores the extent and nature of collaboration between physicians of the Scandinavian countries within the context of medical balneology ("kurbadmedisin") during this period, as seen from a Norwegian perspective.

Session: The Psychiatric Profession

Thursday 23 May, 16:00 – 17:30

#1 Presenter:
Jennie Sejr Junghans

Dept. of History and Civilization, European University Institute, Italy

Event Photos **Here**

Nature or nurture:
The origins of child psychiatry in Denmark and England, c. 1900-1950

At the dawn of the twentieth century, psychiatrists in Denmark and England began writing on the mental health of children and by the mid-1930's, the first few child psychiatric wards and clinics had been established.

Because the medical understanding of mentally disturbed children was heavily influenced by eugenics, treatment efforts were however limited. During the following decades, child psychiatry was slowly developed and by the early 1950's, child psychiatry was officially acknowledged as a scientific discipline.

Using medical textbooks and articles, I examine how this process was initiated and which arguments the psychiatrists in Denmark and England made use of in order to claim children's mental disorders as a medical specialty.

I pay special attention to the first two international child psychiatric conferences held in Paris in 1937 and in London in 1948, because the reports from these conferences reveal how theories and arguments changed drastically after the Second World War.

I argue that the early development of child psychiatry was a complicated process framed by the socio-political unrest of the 1930's and 1940's, but also closely tied to different and changing conceptualizations of 'mental health', 'childhood' and 'the good mother'.

Furthermore, I argue that the child psychiatric consultation was a place of conflict and negotiation due to differing therapeutic convictions and interests of psychiatrists, psychologists, parents and others.

Session: The Psychiatric Profession

Thursday 23 May, 16:00 – 17:30

#2 Presenter:
Mia Pohtola

History and Cultural Heritage, University of Helsinki, Finland

Event Photos **Here**

Access Slides **Here**

Letters to the Editor
– Critique on the revolutionary DSM-III diagnostic manual from within the psychiatric profession in the early 1980s America.

The third edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-III) radically altered the way psychiatric diagnoses were written, used and understood in psychiatry.

Published by the American Psychiatric Association in 1980 DSM-III has been regarded as a revolution of medical psychiatry, for example with the introduction of symptom-based diagnostic criteria.

The new DSM system, its effects on the general population and the notion of normality, has been critically examined from outside the mental health field, especially from a sociological perspective.

However, the immediate reaction to DSM-III from within the profession has not been thoroughly examined: why did the new manual create confusion within the mental health field and psychiatry after its publication?

By researching and analyzing the Letters to the Editor - sections of two most highly cited general Journals in American psychiatry (The American Journal of Psychiatry and The Archives of General Psychiatry) from February 1980 to May 1983, I argue that concerns about the new DSM-III are possible to be divided into four general themes:

1) concerns about the scientific credibility
2) political goals
3) sociocultural pressures of the time
4) battle of power within the profession.

The current DSM-5 is created on the foundations of the DSM-III tradition.

Furthermore, the debate within the profession has not subsided but instead has grown even more complex over the past four decades. Therefore, it is crucial to understand where the core controversies originated.

Session: The Psychiatric Profession

Thursday 23 May, 16:00 – 17:30

#3 Presenter:
Rebecka Klette

Dept. of History, Classics and Archeology, Birkbeck, University of London, England

Event Photos **Here**

Access Slides **Here**

Transnationalising the Conceptual History of Degeneration Theory within Danish Psychiatry, 1880-1920

During the last decades of the nineteenth century, the prospect of degeneration emerged as the spectre haunting European civilisation, eventually permeating Scandinavian debates concerning perceived racial deterioration, insanity, and criminality. While British, Italian, French, and German degeneration theories have been thoroughly explicated, little scholarly attention has been given to the influences and transnational exchanges of degenerationist knowledge between Scandinavia and the rest of Europe.

This paper will trace the reception, appropriation, and critique of European degeneration theories within Danish psychiatry between 1880 and 1920, focusing specifically on the writings of A. Wimmer, A. Friedenreich, and Christian Geill.

In adopting degenerationist frameworks, these psychiatrists did not passively import or accept the assumptions of international researchers, but critically engaged with – and contributed to – an ongoing transnational and cross-disciplinary research field on the causes and mechanisms of degeneration, atavism, and morbid heredity.

Moreover, I will seek to identify the impact of concepts concerning hereditary degeneration on Danish psychiatric nomenclature and asylum practices. This will allow me to outline the unique characteristics of several theories on degeneration and atavism within Danish as well as Scandinavian research networks, and how these conceptualisations and critiques influenced each other across disciplines, institutions, and national borders.

Session: Visual Arts, Literature & Medicine

Thursday 23 May, 16:00 – 17:30

#1 Presenter:
Carl Lindgren

Swedish Journal of History of Medicine, Stockholm, Sweden

Event Photos **Here**

Access Slides **Here**

Virginia Woolf, her symptoms, doctors and treatment

In the light of modern medicine and literary remains it is generally agreed that the novelist Virginia Woolf (1882 – 1941) suffered from bipolar disease. In addition to her inherited vulnerability she experienced a number of traumatic events including being repeatedly sexually molested by her half-brother(s) at an early age and onwards. The most prominent local doctors of the time were consulted by her parents and later herself and her husband, but none was able to offer a treatment that would alleviate her of her symptoms.

On the contrary their recommendations were contra productive and consequently her compliance was low. "*My life is a constant fight against Doctors follies, it seems to me*", she wrote in her diary in 1904.

Instead she used her protagonists in her literary work, as a way to express and process her experiences during her depressions and maniac periods, as well as illustrate how she experienced how she was perceived by her doctors. Her literary production thus served as a kind of self-treatment.

The state-of-the-art treatment for women with mental instability at that time was the "rest cure", initiated by the American neurologist Silas Weird Mitchell. It consisted of strict bed rest and abstention from all kinds of intellectual work.

This paper will highlight her medical treatment and factors conducive to her suicide in 1941.

It will in addition give a brief overview of the development of the effective treatment for bipolar disease including the work of the Danish psychiatrist Mogens Schou.

Session: Visual Arts, Literature & Medicine

Thursday 23 May, 16:00 – 17:30

#2 Presenter:
Diana-Andreea Novaceanu

Space, Image, Text, Territory,
Doctoral School, University of Bucharest, Romania

Event Photos **Here**

Access Slides **Here**

Redrawing the Clinic:
Presence of The Medical Gaze in Visual Arts

This paper addresses the ways in which contemporary visual arts are able to creatively subvert the Foucaultian 'gaze'. It builds upon a growing body of interdisciplinary scholarship to argue that artists may utilise a methodology that draws on the conventions of medical practice but nevertheless provides an avenue in which its ideological foundations can be critically evaluated, and alternate perspectives explored.

Focusing on Western medicine, several particularly representative works will serve as the loci of the discussion, which will encompass the entire span from the emergence of the first recognisably 'modern' clinic in the mid-eighteenth century to the present day.

It will highlight how artists have been able to repurpose the tools of the clinic outside of their original site and scope. Such a 'gaze' is not a diagnostic one, but a particular form of seeing that both contemplates and probes the corporeal space, based on the perceptual field and guided by the exercise of observation.

These artists have a longstanding affair with medical imagery and thought, and their medical knowledge is obtained, reviewed, and revisited over a number of years via, for example, clinic-based interdisciplinary projects, hospital archiving work and use of medical technologies.

Examples will be provided in the form of productions by Cristin Millet and Christine Boreland. The discussion will conclude with an assessment of potential further research directions, and will emphasise that artistic discourse has the ability to cross temporal and spatial boundaries while offering valuable insights for the broader study of the history of medicine, its thought, practice and influence on society.

Session: Visual Arts, Literature & Medicine

Thursday 23 May, 16:00 – 17:30

#3 Presenter:
Birgit Bundesen

Mental Health Care Centre, Amager, Copenhagen, Denmark

Event Photos **Here**

Access Slides **Here**

What doctors can learn from literature

Narrative medicine has for the last 20 years focused on narrative competence in clinical practice **(1)**. Research has shown that medical students' ability for empathy diminishes during clinical training **(2)**. For the doctor, the clinical interview requires a special combination of skills that involves the empirical, objective knowledge as well as the ability to establish a therapeutic alliance with the patient and listen to the subjective experience of the patient and understanding what the symptoms do to that particular person in the context of his or her lifeworld.

Empathy is a clinical skill that doctors need to fully understand the problems they face. In the busy clinical work, narrative skills and the ability for radical listening can be effective working-tools to carve out the relevant data needed to perform good clinical work.

Reading and writing literary fiction can be an efficient way to gain insight into other people's minds and their lifeworlds, while furthermore enhancing the ability for empathy **(3)**, which are as important working tools for doctors as knowledge of anatomy and pharmacology.

I will argue that literary competence is relevant for clinical practice by drawing on concepts introduced by fiction writers such as Robert Musil and Ludvig Feilberg. I will show how examples from literature may help us to better understand topics such as mind-wandering and the Default Mode Network that currently receives attention in neuroscience. This also ties in with current research in creativity, boredom, and mental well-being.

1: Charon, Rita et al. (2017): The Principles and Practice of Narrative Medicine. New York.

2: Mitra Khademalhosseini, Zeinab Khademalhosseini, & Farzad Mahmoodian. (2014). Comparison of empathy score among medical students in both basic and clinical levels. Journal of Advances in Medical Education and Professionalism, 2(2), 88-91.

3: Arizpe, E. (2015). Reading Changes: Adolescents, Young Adult Literature, and Literacy Practices in Mexico. Journal of Children's Literature, 41(1), 75-77.

KEYNOTE

Eva Åhrén:
Unit for Medical History and Heritage,
Karolinska Institutet, Stockholm, Sweden

Figuring it out:
Visualizing medical subjects

Friday 24 May, 09:30 – 10:15

Event Photos **Here**

Access Slides **Here**

Abstract
Throughout history, visual communication has been crucial in medical practice, education, and research. This talk deals with image-making in the history of Western medicine, focusing on three main categories: anatomical illustrations, patient portraits, and representations of microscopic observations. I will argue that visualizations are an integral part of medical knowledge production, as well as communication.

The remarkable woodcuts in Andreas Vesalius' De humani corporis fabrica of 1543, represent a qualitatively and quantitatively new approach to visualization. The sheer number of images, expertly printed on large paper sheets had never been seen in a book on the human body before. Neither had the degree of accurate detail and the high quality of the work of the artists involved. Whereas earlier representations of bodies were more schematic, this new style emphasized a kind of naturalism, drawing on the rhetoric of direct observation. This section of the talk will discuss two main styles of anatomical art in the Western tradition: universalization and specificity.

While anatomical imagery could idealize bodies for the sake of universality, images of morbid anatomy and diseased patients have to be specific. There are many ways of achieving this.

First, I will show Norwegian artist J. L. Losting's portraits of patients with leprosy, which open a window into a specific time and place.

Second: old photographs of people with war wounds or disorders like scoliosis, approach the patients head-on, in a revealing, but often respectful manner.

Third: wax moulages and photos of dermatological and venerological conditions focus instead on the lesion, making it the object of the portrait, rather than the patient.

Finally, I will discuss how scientific objects in medicine are visualized, as a crucial part of the research process, as well as a means of communicating results. Making images is a way of figuring things out.

KEYNOTE

Jan Bondeson:
School of Medicine, Cardiff University, Wales

The Lion Boy and Other Medical Curiousities in Old Picture Postcards

Thursday 24 May, 10:15 – 11:30

Abstract

In the 1900s and 1910s, there was a multitude of human curiosities on show both in Britain and continental Europe: giants, dwarfs, conjoined twins, abnormally fat or thin people, and individuals with severe congenital deformities. Some of the 'freaks' were self-made: men growing abnormally long beards, fasting artists going without food for months, and people aiming to walk around the world for a wager.

Since this period of high interest in human phenomena on show coincided with the great postcard boom in Edwardian times, there is no shortage of images to illustrate this forgotten chapter of the history of medicine.

CV

Jan Bondeson MD PhD is a former senior lecturer and consultant physician at Cardiff University, and the author of *Cabinet of Medical Curiosities* (Cornell UP 1997), *The Two-headed Boy and Other Medical Marvels* (Cornell UP 2000), *Buried Alive: The Terrifying History of our Most Primal Fear* (WW Norton 2001), *The Lion Boy and Other Medical Curiosities* (Amberley 2018) and other history of medicine books.

Event Photos **Here**

Access Slides **Here**

articles

Two **clickable** articles extracted from Dr Jan Bondeson's book *The Lion Boy and Other Medical Curiosities* (Amberley Publishing, 2018):

HUNGER GAMES:
LIVES OF THE FASTING ARTISTS

PORTRAIT OF THE ARTIST AS A SEVERED HEAD

Session: ‘Let there be light’

Friday 24 May, 11:30 – 13:00

- and there was light

#1 Presenter:
Ian G. Bearden

The Niels Bohr Institute,
University of Copenhagen, Denmark

Event Photos **Here**

Access Slides **Here**

The secrets of light

This talk will, I hope, shed some light on some of the properties of electromagnetic radiation. Not only the visible part of the spectrum, a very small range of frequencies which our eyes evolved to see; but the entire spectrum from very long wavelengths to ultra-high energy gamma rays.

I will attempt to illuminate some of the connections between physics and medicine relating to light, at least as it appears seen through the lens of an experimental particle physicist. Using various examples from medical imaging and nuclear and particle physics, I will discuss the close relationship between these fields.

Finally, I will discuss the physics behind PET scanners, from the world’s most famous equation - E=MC2 - to a few of the technical details of these incredible machines to illustrate how short lived anti-particles can now being used to save lives. A table top “toy” PET scanner we have developed at the Niels Bohr Institute will be presented.

After the session, participants will be able to use this small device to scan a small object to locate where matter and anti-matter meet, annihilate, and send out a recognizable signature of high energy “light”.

Session: ‘Let there be light’

Friday 24 May, 11:30 – 13:00

- and there was light

#2 Presenter:
Benny Vittrup

Dep. of Oncology, Herlev Hospital, Copenhagen, Denmark

Event Photos **Here**

Access Slides **Here**

A Historical Light On The War Against Cancer: *Can We Win This War?*

Cancer is a distorted version of ourselves and has been perceived as the emperor of all maladies. As a threat towards human survival cancer has a profound impact on the thinking in philosophy, science, culture and politics. Cancer is the lens through which mankind get the clearest light on the limitations in our existence.

Darwin’s observational evolution theories – later understood as adaptive oncogenic mutations – gradually pulled cancer into the light from the darkness of religion. In the mid 1800’s Virchow by help from the light microscope could demonstrate that all cells come from normal cells including cancer cells.

In the late 1800’s Paul Ehrlich could selectively color cells and microbes with chemicals. He formed the idea of “magic chemical bullet” that selectively could kill cancer cells.

In 1953 the 4-letter molecular language of nature (DNA, RNA and protein synthesis) was revealed forming the scientific basic for mankind’s war on cancer that was politically declared in 1971. The weapons were cell toxins originally discovered during world war I and radiation aiming at killing cancer cells by destroying their DNA, RNA and protein machinery.

With the discovery of the oncogenes new weapons was added aiming at killing mutated carcinogenic oncogenes. The discovery that our immune system daily destroys billions of carcinogenic oncogene mutations and protects us from cancer led to the aim of using the immune system as a weapon.

This lecture casts a historical light on the development of cancer therapy and a cautious optimism of winning this war.

Session: ‘Let there be light’

Friday 24 May, 11:30 – 13:00

- and there was light

#3 Presenter:
Morten Møller

Department of Neuroscience,
Faculty of Health and Medical Sciences,
University of Copenhagen, Denmark

Event Photos **Here**

Access Slides **Here**

Influence of light on circadian rhythm generating centers in the brain. A historical review

In our planetary system, all natural light comes from the sun. Since life arose on earth about 4 billion year ago, all living organisms have adapted to the daily and annual changes of light intensity, caused by the earth’s daily and annual rotations in relation to the sun.

This adaptation has been done by a phylogenetic development of neuronal centers and networks in the brain generating and controlling daily biochemical and physiological rhythms, called circadian rhythms (circadian rhythm; latin, circa = about, dies = day) in the brain and in peripheral organs in the body.

Also annual rhythms are present in many living organism. The centers in the brain controlling the daily and annual rhythms exhibit their own independent rhythms.

However, these autonomous rhythms are influenced by light in the environment, which in animals is perceived by the newly detected photoreceptors in the retina, which contain the photopigment melanopsin, and the light from these photoreceptors is transmitted to the brain via neuronal pathways, shown during the last decades in the brain of all investigated higher animals.

The circadian rhythm generating center in the brain is the anatomical well know suprachiasmatic nucleus (SCN) of the hypothalamus, located above the optic chiasm. The nerve cell bodies in the SCN contains “clock genes”, which show a 24 hour rhythm in their transcriptional activity, and is the genetic substrate for the “endogenous clock” of the brain.

The circadian system is in lower vertebrates regulating reproduction, and in the human involved in sleep, melatonin production, mood disorders and metabolic processes.

The talk will explain and visualize the above system, with emphasis on the historical scientific breakthroughs related to the description of system we now call the photo neuroendocrine-circadian system.

Session: Leprosy Revisited

Friday 24 May, 11:30 – 13:00

#1 Presenter:
Jesper Lier Boldsen

Unit of Anthropology, Dept. of Forensic Medicine, University of Southern Denmark

Event Photos **Here**

Access Slides **Here**

Leprosy: *The Menace of the Medieval Period*

The diagnosis of leprosy based on ancient skeletons is a probability statement as are all diagnoses. A lot of diagnostic tests with high sensitivities and specificities are available for modern diagnostic medicine. This is not the case n paleopathology.

In the case of leprosy it has been necessary to estimate sensitivity and specificity of six different leprosy related lesions by optimizing a 15-dimensional likelihood function. Using these statistics it has been possible to estimate the frequency of leprosy at death in several samples of skeletons.

The statistical methodology developed is better suited to estimate sample frequency than to classify individual skeletons as those from people who did or did not suffer from leprosy.

Several historical and medically interesting conclusions have come out of this research. First of all, leprosy was a very common disease that affected a large but variable fraction of the adult population.

The frequency of leprosy was, of course, higher among those buried on leprosarium cemeteries; but on ordinary medieval cemeteries between 4 and 47 % of the adults buried there suffered from leprosy at the time of death.

Leprosy is generally an adult onset disease. Based on Norwegian leprosy data from 1850-1920 it has been possible to describe the transition profile from the healthy to the leprous stage in a pre-antibiotic population. Using this profile it has been estimated that the relative risk of dying for people suffering from leprosy was two time as high as for people who did not have leprosy.

Following this it appears that in the village community of Tirup (Eastern Jutland, AD 1150-1350) leprosy reduced the productivity of the population by 10%. The leprosaria (Sct. Jørgensgård) were established in Denmark from the 13th to the 17th century. In Odense it appears that the founding of Sct. Jørgensgård in the 1270s lead to the eradication of leprosy within 75 years – around 1350. In rural communities leprosy prevailed to shortly after the end of the Medieval Period in the middle of the 16th century.

Session: Leprosy Revisited

Friday 24 May, 11:30 – 13:00

PRESENTATION

#2 Presenter:
Magnus Vollset

Department of Global Public Health and Primary Care, University of Bergen, Norway

Event Photos **Here**

Access Slides **Here**

Leprosy in Scandinavia: *Institutions and legislations, 1840-1940*

After Danielssen and Boeck's celebrated monograph "Om Spedalskhed" (1847/48), the Norwegian state established a research hospital tasked with developing a cure, as well as three large institutions to serve as "good homes" for people affected by the disease.

In Iceland, the same publication led to the leprosy hospitals being closed: Now that the disease was decidedly hereditary, segregation in run-down institutions was seen as unnecessary cruelty. Fifty years later, however, research proving an increased prevalence, the rise of contagionism, and money from the Danish branch of Odd Fellows, meant both new leprosy legislation and the opening of a new leprosy hospital.

In Sweden, a 'leper asylum' with twenty beds opened at Järvsö in 1870, and was soon expanded. In Finland, a state leprosy institution opened near Helsinki in 1900. Barely a decade later, at the Second International Leprosy Congress in Bergen in 1909, Germany, Iceland, Norway and Sweden were hailed as the exemplary in their isolation of 'lepers'.

This paper will give an overview of leprosy institutions and legislations in Scandinavia, 1840-1940, based on published reports and discussion from the period. It will discuss differences and similarities between the Scandinavian approaches, as well as how they influenced one another.

Session: Leprosy Revisited

Friday 24 May, 11:30 – 13:00

PRESENTATION

#3 Presenter:
Ib Christian Bygbjerg

Division of Global Health, Department of Public Health, University of Copenhagen, Denmark

Event Photos **Here**

Access Slides **Here**

Leprosy: *From Extract of an Elegy from Bergen (1820) to Elimination of Leprosy in India by Multidrug Blister Calendar Packs (1986-2003)*

Abstract

Isolation of lepers was considered 'best practice' in leprosy control till modern multidrug therapy was launched in the early 1980s. Peder Olsen Feidie, patient at Sct. George's Leprosarium (Skt. Jørgens Hospital) in Bergen, Norway, was isolated for life as a young man and expressed what that implicated in a Mourning Song ("En Klagesang"). Verse 12 of 24 begins (my translation):

"The first disfigured: sore on sore.
the second walks on toes no more.
the third is mute – only sighing.
the fourth day-light for always is banned.
the fifth for ever lost nose and hand … etc."

("Den ene haver Saar i Saar,
den Anden han paa Krykker gaaer,
den Tredie kan ei tale,
den Fjerde kan ei Dagen see,
den Femte har ei Hænderne … etc.)"

A Mourning song - On Leprosy (PDF)

Modern multidrug therapy made leprosy a curable disease, but uptake and adherence to therapy was poor: multibacillary leprosy requires two different drugs daily for 12 months plus single dose of a third drug and increased dose of the former once monthly. Learning from the p-pill and by involving the patients, the Danlep staff and a Danish drug company developed blister packages for multi - as well as pauci-bacillary leprosy.

Combined with training and eventually integration into the primary health care system, elimination of leprosy as a public health was almost reached, when the Danish involvement ended in 2003.

The multinational company Roche has now taken over manufacturing and supply of blister packages (free), and leprosy is nearly eliminated as a public health problem in most parts of the World, including India.

References

Peder Olsen Feidie, patient at Sct. George's Leprosarium (Skt. Jørgens Hospital), Bergen, Norway. "En Klagesang", ca. 1820.

Georgiev GD & Kielstrup RW. "Blister calendar packs for the implementation of multiple drug therapy in Danida-assisted leprosy control projects in India", Lepr Rev 1987 58:249-255.

Sundaram C & Narayanan G. "Leprosy Elimination in India. The DANLEP Experience 1986-2003". DANLEP 2003.

Session: The Family Doctor and Medical Uncertainty

Thursday 24 May, 11:30 – 13:00

#1 Presenter:
Ole Didrik Lærum

The Gade Laboratory of Pathology, Institute of Clinical Research, Haukeland University Hospital, Bergen, Norway

The Finsen Laboratory and Laboratory of Radiation Biology, Rigshospitalet/University of Copenhagen, Denmark

Event Photos **Here**

Access Slides **Here**

General Practice at Voss:
Experiences from Community Medicine in Western Norway 1850-1950

The municipality of Voss is a mountainous area 100 km east of Bergen with an urban center at the Voss Lake, called Vossevangen.

Since the middle of the 19th century they have had a stable medical service, where the doctors stayed there for most of their lives, altogether 7 over a hundred years' period.

Since about 2/3 of their working time was spent on the way to and from their patients, often with no suitable roads and rather primitive conditions in general, their spouses had to participate in the medical work, taking care of patients who came when the doctor was away. One single visit to a patient could take up to 24 hours.

Until around 1900 the work as a community doctor was considered a dangerous profession. Their mean age at death was 6-7 years lower than the general population, and in 1/3 of the cases the cause of death was due to their work: Accidents, heart failure, total exhaustion and serious infections.

Essentially, the medical care for patients was a personal responsibility for the doctor, which throughout the 20thcentury was gradually replaced by a social system, ending with the welfare state after the second world war.

Session: The Family Doctor and Medical Uncertainty

Thursday 24 May, 11:30 – 13:00

#2 Presenter:
Pieter Dhondt

Dept. of Geographical and Historical Studies,
University of Eastern Finland

Event Photos **Here**

Access Slides **Here**

Courses on the 'encyclopaedia and history of medicine' in answer to medical uncertainty around 1900

Even the continuously succeeding breakthroughs in medical science never will be able to take away uncertainty completely in clinical decision making and therapeutic treatments. The risks of an insufficient degree of tolerance of ambiguity are well known and therefore there is general agreement about the need of more attention for it in the curriculum. However, how to realise this ambition is much less clear.

This paper is part of a larger project addressing this shortcoming, through a strong interdisciplinary approach, yet starting primarily from a historical orientation. It explores the history of changing attitudes towards medical uncertainty in the training of (primary care) physicians from the 1880s up to the present day.

One option has been the introduction of courses on the 'encyclopaedia and history of medicine', following the example of leading German universities. However, to what extent and in which way these courses were indeed used to compensate for the increasing scientification of medical education in the laboratories is much less clear.

One of the specific aims of this article will be to explain the gradual disappearance of these courses in Finland from the beginning of the twentieth century despite the overwhelming German orientation of Finnish academia in general. Courses were still often suggested (e.g. in 1911), but no longer organised.

By using a large variety of educational primary sources, we will get a view on what the education really consisted of, also focusing on the transfer of tacit knowledge by 'reading between the lines'.

Session: The Family Doctor and Medical Uncertainty

Thursday 24 May, 11:30 – 13:00

#3 Presenter:
Ruben Michael Zwierlein

Institute of Family Medicine,
University Hospital Schlesweig-Holstein, Germany

Event Photos **Here**

Access Slides **Here**

ADAM – a new Archive of German-speaking General Practice

The presentation describes a new Archive, documenting the development of general practice (GP) as a medical specialization of its own right and institutional status in German-speaking countries (Austria, Germany and Switzerland) at the University of Lübeck, Germany.

Valuable historic material from the pioneer period of GP and documenting the development of the German-language variant of its development is spread across different countries and institutions – or must be expected to exist only in privately owned copies.

In addition, the development differed from country to country. The Austria-born Robert Braun, for example, started a particularly strong and lasting initiative for GP.

Another important facet is the different trajectories of GP in East and West Germany: In East Germany, GP was introduced and professionalized in the year 1961, whereas the academic birth of GP started in West Germany five years later with the teaching assignment of MD Siegfried Häussler at the University of Freiburg.

The (Western) German Medical Association introduced the specialization "General Practitioner" as late as 1968.

So far, an archive of GP has not yet been established in Germany, but time is pressing, as many of the first-generation actors have reached advanced age.

With them, a huge amount of the unique information about the professionalization of GP is at risk to be extinguished.

Therefore, ADAM is implemented to safeguard historic documents, to digitalize them, and to collaborate with other archives and institutions to with the aim to foster research on the history and development of GP.

KEYNOTE

Øivind Larsen:
Institute of Health and Society, University of Oslo

The medical history congresses 1967-2019 – some reflections

Friday 24 May 14:15-14:45

Event Photos **Here**

Access Slides **Here**

Abstract
In this keynote presentation, some impressions from the Nordic Medical History Congresses (NMHC), which started in Gothenburg in 1967, are put forward. With its biannual pace, the series has arrived at number 27 - 52 years later - with its present conference in Copenhagen in 2019.

Based on personal attendance at most of the conferences, glimpses from the series of meetings are reviewed in order to reflect on some basic traits of medical history as a topic and as a discipline.

Most sides of what has been perceived as belonging to medical history, have been presented at the conferences. Topics have varied from e.g. Icelandic sagas to hard core demography. In their approach, papers have ranged on a scale between in-depth science and journalistic overviews. Methodological issues of different kinds relating to history, medicine, and health have come to sight.

The congresses also reflect the sometimes strained relationship to neighbouring disciplines as different as epidemiology and history of ideas, and also the relationship between different professions in medicine and the health services.

The question about what medical history really **is**, and what it is **used for**, has been an underlying theme all the time. It is argued that five decades of Nordic medical congresses not have been able to solve the identity problem of medical history. Why so?

An international congress series like this should have an obvious potential to define borders and standards for topics taken up, and to develop as an arena where new knowledge is presented.

To what extent has the congress series succeeded to unite all those people in the Nordic countries who are interested in the past and the future progress in medicine and health?

Ole Didrik Lærum:

Berømte Danske Kræftforskere

The Gade Laboratory of Pathology, Institute of Clinical Research,Haukeland University Hospital, Bergen, Norway

The Finsen Laboratory and Laboratory of Radiation Biology,Rigshospitalet/University of Copenhagen, Denmark

Event Photos **Here**

Access Slides **Here**

Danish pioneers in basic cancer research

Denmark, a nation with about 5.7 million inhabitants, has had a remarkable position in international research from the early 20th century until present. Several Danish scientists have been awarded the Nobel Prize, both in areas as physics, in literature and in medical sciences. However, it has received less attention that Denmark has fostered several of the pioneers in basic cancer research.

11 Famous Danish Cancer Researchers

In the present book, altogether 11 Danish scientists who made remarkable discoveries on malignant tumours and their development are presented.

The main reason is that they provided entirely new knowledge which opened a new avenue of research, and they caused paradigm shifts in cancer research, with consequences for generations of other scientists.

Some of them were credited for their discoveries, but some of them were not. And not least: They often had to wait for years before their achievements were generally accepted. Several of them also became more or less forgotten after their death.

Who were these researchers?

Eight of them were pathologists, one was a microbiologist, one was an anatomist and one was a pediatrician who had specialised in endocrine physiology. Two of them had veterinary medicine as their primary education, and the others were medical doctors. The selected pioneers were the following:

Adolph Hannover (1814-1894). Based on his observations he wrote a book about epithelioma as a separate entity. This places him as one of the pioneers in cellular pathology together with Johannes Müller and Rudolf Virchow.

Carl Oluf Jensen (1864-1934), professor at the Veterinary College in Copenhagen, was the first in history to perform systematic serial transplantation of mouse and rat tumours. This occurred shortly before 1900.

Vilhelm Ellermann (1871-1924) was a pathologist and professor of forensic medicine and **Oluf Bang** (1881-1937), professor of veterinary microbiology at the University of Copenhagen, were the first to demonstrate that a virus could induce neoplasia in chicken, which they did in 1908.

Johannes Fibiger (1867-1928), professor of pathology at the University Hospital in Copenhagen (Rigshospitalet) was awarded the Nobel Prize in the 1927 for his studies on exogenous influences causing cancer of the stomach in rats.

Albert Fischer (1891-1956), head of the Rockefeller Foundation / Carlsberg Laboratories in Copenhagen, became a leading researcher on cell and tissue culture from the 1920es.

Johannes Clemmesen (1908-2010) was instrumental for the establishment of cancer epidemiology and statistics at the national level which he developed from the 1940'ies.

Gunnar Teilum (1902-1980) was a medical doctor with a long background in forensic and diagnostic pathology. In his lifetime he was considered as one of the most outstanding histopathologist in the Nordic countries.

Niels Erik Skakkebæk (1936 -) was originally a pediatrician who specialised in endocrine physiology, a field where he became a pioneer in Denmark.

Keld Danø (1936-2018), experimental pathologist and Head of the Finsen Laboratory at the University Hospital, and professor at the University of Copenhagen, was the first to show that resistance to cytostatics occurred because the malignant cells were able to 'pump out' the drug.

Jørgen Rygaard (1934-2016), professor pathology at the Municipal hospital in Copenhagen, was the first to employ immune deficient 'nude mice' for transplantation of cancer tissue from other species, and not least human tumours.

The short biographies illustrate how the legacy of these pioneers has contributed to Denmark's position in cancer research. One of them (Clemmesen) has published his autobiography, and another has been the subject of a biography in Danish (Fibiger). Otherwise, information about these researchers is spread and not easily accessible. Several of them have not received the international credits for their discoveries which they deserve.

Session: Wartime Nursing & Tuberculosis

Friday 24 May, 16:00 – 17:30

#1 Presenter:
Gunilla Svensmark

The Danish Museum of Nursing History, Kolding, Denmark

Event Photos **Here**

Access Slides **Here**

Danish Nursing and Nurses during the German Occupation 1940-1945

During WWII Denmark was occupied by Germany 1940-1945. Although Denmark did not suffer the same deprivations as other countries, rationing of most commodities was severe.

Till now, it has not been documented how Danish hospitals coped without linen, soap, fuel etc.

To secure the memories of nurses still alive for posterity, the museum 2016-2017 therefore performed 50 interviews with nurses who had worked as nurses and student nurses 1940-1945.

Initially, focus was strictly on everyday life: how to cope without proper linen, soap, fuel anddecent food. The intention was to leave out the more dramatic events, as it was assumedthat they were already documented.

The findings about daily hospital routines were rich and detailed with tales of poor hygiene, scabies, and ingenious substitutes for textiles, soap and decent food.

However, it soon proved impossible to curb the nurses' need to talk about dramatic events such as hiding members of the resistance, Gestapo raids and acting as couriers for theresistance, and there were unexpectedly many reports about hospitals being a common residence for the resistance.

It is well known that hospitals in Copenhagen were central for rescuing Jews and members of the resistance to neutral Sweden, but the interviews indicate, that most hospitals all over the country acted as refuge for the resistance.

Only one interviewee defined herself as a member of a resistance group, the rest did not perceive themselves as such, they just happened to find themselves in a central position at a very special time.

Session: Wartime Nursing & Tuberculosis

Friday 24 May, 16:00 – 17:30

#2 Presenter:
Jan Knudtzon Sommerfelt-Pettersen

Center for Maritime and Diving Medicine,
Haukeland University Hospital, Bergen, Norway

Event Photos **Here**

Access Slides **Here**

Tuberculosis in the Royal Norwegian Navy during The Second World War

Abstract

Tuberculosis became a great problem in the Royal Norwegian Navy during the first years of the Second World War - when it operated in allied services mainly from Great Britain - with the highest incidence (9.6 per 1 000) during the first half of 1943.

Main reasons were insufficient medical examination of recruits, crowded living conditions on board (favoured the contagion) and the physical and psychological pressure during sea operations, which may have reduced the immune defence.

Preventive measures in terms of tuberculin testing, chest X-rays of the positives, vaccination of the negatives, environment investigation when disease was discovered, and isolation of those infected, gave control from the second half of 1943 and onwards. Also treatment, repatriation and the incidence of tuberculosis in the Navy before and after the war is discussed.

The tuberculosis situation became so favourable that routine chest X-ray of the recruits was discontinued.

Session: Wartime Nursing & Tuberculosis

Friday 24 May, 16:00 – 17:30

#3 Presenter:
Marie Clark Nelson

Linköping University, Linköping, Sweden

Event Photos **Here**

Reacting to Koch's bacillus:

Discussing tuberculosis and its treatments

Abstract

Around the turn of the century, 1900, the War on Tuberculosis in Sweden became part of a European effort to stamp out the disease and improve public health. It was the German researcher Robert Koch, who identified the tuberculosis bacillus mikrobakterium tuberculosis in 1882. News spread, even to Sweden, and a search for a cure began.

When Koch announced the discovery of a vaccine in 1890, the medical community became hysterical. The vaccine proved unsuccessful. Debates ensued. What was included as tuberculosis? What was done to fight the disease? Spreading information in pamphlet form was a tried and true measure. So, too, were the efforts of philanthropic associations. Even the royal family became involved.

In 1904 the parliament enacted laws that dealt with the disease and strengthened them in 1914. These reactions together bring to light the changes taking place in the health policies in Sweden.

The sources include government investigative committees, parliamentary papers, law proposals and laws, journals and reports of the Swedish Medical Society.

This contribution is based on a book chapter manuscript: Sun, Wind and Water: Treating Non-pulmonary Tuberculosis in Early 20th Century Sweden (preliminary title) by Marie Clark Nelson and Staffan Förhammar.

Session: Knowledge Translation & Social Networks

Friday 24 May, 16:00 – 17:30

#1 Presenter:
Sophy Bergenheim

Dept. of Political and Economic Studies, University of Helsinki, Finland

Event Photos **Here**

No inferior Swedes shall be found in this country! *Swedish-speaking Finns, public health and minority nationalism, 1920s–1950s*

Abstract

The paper showcases how transnational movements, ideologies and medical knowledge have been transformed into local phenomena and activities. It studies two social and health policy organisations in Swedish-speaking Finland, Folkhälsan (the Public Health Association of Swedish Finland, est. 1921) and Befolkningsförbundet (the Swedish Population League in Finland, est. 1942), from a biopolitical perspective in the 1920-1950s.

By looking at non-governmental organisations, the paper draws attention to actors that thus far have largely been disregarded in Nordic welfare state research as well as history of medicine.

The paper examines the connection between public health, population policy and Finland- Swedish minority nationalism in Folkhälsan's and Befolkningsförbundet's discourses and activities. Both organisations represented the Swedish-speaking bourgeois elite and were markedly pronatalist with a pronounced racial hygienic streak, as was commonplace in Finland at that time.

Their goal was to elevate not only the number of the Swedish-speaking population but also its quality; to hamper the genetic, physical, mental and moral degeneration the Finland- Swedish population. Public health and population policy were thus also tools for racial survival and the construction of a Finland-Swedish 'nation'.

However, the organisations differed in composition and 'main frames'. Folkhälsan consisted of medical experts, and it interpreted everything within a public health–racial hygiene frame.

The experts in Befolkningsförbundet come from more diverse backgrounds, and the organisation's main frame was population policy, in which public health was only one factor.

These similarities and differences provide an interesting glimpse into the various political aspects and applications of medical knowledge and expertise.

Session: Knowledge Translation & Social Networks

Friday 24 May, 16:00 – 17:30

#2 Presenter:
Allan Rye Lyngs

Centre for Studies in Research and Research Policy, Aarhus University, Denmark

Event Photos **Here**

Access Slides **Here**

Mapping the Social Network of Nobel Laurate August Krogh.

Abstract

Nobel Laureate August Krogh was the most successful Danish physiologist and was among the top scientists in Denmark in the first half of the 20th century.

Besides the 1920 Nobel Prize for his discovery of the capillary motor regulating mechanism, Krogh's achievements include extensive funding from the Rockefeller Foundation and bringing insulin production to Denmark.

Furthermore, Krogh established a comprehensive network during his career, where he co-authored articles with 48 different scientists, had numerous scientists visiting his laboratory, and corresponded with even more.

Krogh was even remembered as the 'professors' professor' at Harvard Medical School, underlining the fact that many prominent Danish and international physiologists of the next generation had been in contact with Krogh.

The story of August Krogh is often told in individualistic terms, attributing most agency to him and his wife Marie Krogh. Using a quantitative approach to social network mapping based on information from existing biographies, bibliometric data, and archival materials, this paper shines a new light on Krogh's story in terms of his extended social network.

The mapping is used to investigate how Krogh's diverse social network helped him procure knowledge, research partners, funding, and the contract to produce insulin in Scandinavia. Likewise, the paper studies how Krogh helped physiologists in his network secure academic positions, funding, and publications.

Session: Knowledge Translation & Social Networks

Friday 24 May, 16:00 – 17:30

#3 Presenter:
Katariina Lehto

Finnish Medico-Historical Society & Tampere University, Finland

Event Photos **Here**

Access Slides **Here**

Ideas concerning effective medicines in the early professionalization of medicine: *Peter Elfving (1677–1726), professor of medicine at the Royal Academy of Turku.*

Abstract

According to the general historiography of medicine, the field was professionalized during the nineteenth century, but early signs of normative and formal regulation, and efforts to define limits for acceptable actions, were clearly visible in the seventeenth and the eighteenth century.

Macro-level factors contributing to the increase of professionalization can be found, for example, in the history of medical markets and university education. In my paper, I approach this broad phenomenon from the perspective of one individual, Peter Elfving (1677–1726) provincial doctor in Västmanland, Sweden, and professor of medicine at the Royal Academy of Turku, Finland (then part of Sweden).

His work forms an example on how theories about medicinal substances could work as a way to strengthen the authoritative position of learned physicians.

This focus on individual brings afore questions of representativeness, which I will consider together with recent historiographical discussion of biographical approach in history.

During his professorship, Elfving was intrigued by medicinal substances and the theoretical basis behind their effects. He was well informed about the contemporary study of medicines in Europe, utilising the education he had acquired in Sweden and abroad.

Beside his theoretical endeavours, Elfving occupied himself with healing and societal questions. During the time of a plague epidemic in Sweden, he worked as a provincial physician in the city of Arbog a. In the course of his career, he emphasised the importance of knowing the right causes for events, such as the effects of medicinal substances, rather than reliance to practical, hands - on experience alone.

Session: Medical Memory, Public Health & Politics

Friday 24 May, 16:00 – 17:30

#1 Presenter:
Mathilde Martinais

University Paris-Diderot, France

Event Photos **Here**

Access Slides **Here**

Curing syphilis through mercurial fumigations in 18thcentury France

Abstract

Developing in Europe during the 16th century, syphilis was a plague the physicians of the time had difficulties to cope with. It soon appeared to them that mercury was the most efficient cure, but being fully aware of its shortcomings, they tried to improve this remedy throughout the early modern period.

One of the betterments considered was the use of mercurial fumigations. Already used in France in the middle of the 16th century, the mercurial smoke was ruled out a century later due to its dangerousness. Yet, during the 18th century, several men tried to reintroduce this practice, claiming to have discovered more secured ways to administer it for the sake of mankind.

But the secrecy they shrouded their discoveries in, as well as the heavy promotion they made of their remedy, suggest that they were only trying to take advantage of the developing medical market.

In order to determine the reliability of this supposed new kind of fumigations, state authorities proceeded to public demonstrations. However, this publicity given by state administrators to potentially dangerous cures were criticized by physicians who claimed to be the only ones able to assess these remedies.

The professionalization of medicine was thus at stake in those debates as "inventors" made a perverse use of the physicians' advice to promote their cure. Studying the reintroduction of mercurial fumigations in France during the 18th century is, therefore, a privileged way to witness the evolution of medicine during the Enlightenment.

Session: Medical Memory, Public Health & Politics

Friday 24 May, 16:00 – 17:30

#2 Presenter:
Karin Tybjerg

Medical Museion,
Univsersity of Copenhagen, Denmark

Event Photos **Here**

Medical Anamnesis

– opening the historic memory of medicine

Abstract

Anamnesis is the medical history of a patient disease taken by the doctor when he or she meets the patient as part of the diagnostic process. The term anamnesis comes from Greek, aná "open" plus mnesis "memory". This paper will "open the memory" of medical diagnosis itself showing the role played by historical cases in the establishment of diagnostic categories.

Understandings of disease, disease categories and diagnosis change over time. While diagnosis seems increasingly to concern the future with an interest in early detection and pre-disease, this paper will outline how concepts of diagnosis are always anchored in the past, as much diagnostic practice in essence is about using past cases, specimens and samples to understand present and future disease.

As Daston in her Sciences of the Archive pointed to the role of historical archives in the sciences, this paper will focus on the role of historical specimens in medicine.

"Medical Anamnesis" will trace a history of how diagnostics have relied on collected material of diseased bodies from the 18th and 19th centuries where disease was localized and generalized on the basis of collections of specimens, to the same process in 21st research projects based on slides and tissue samples from biobanks.

It will compare how autopsy reports in the late 19th century compares to an "diagnosis card index" at the Frederiks Hospital in Copenhagen with the investigations into old material in a just launched big data project on aging.

Session: Medical Memory, Public Health & Politics

Friday 24 May, 16:00 – 17:30

#3 Presenter:
Petri Eskola

Faculty of Social Sciences and Business Studies, Univsersity of Eastern Finland

Event Photos **Here**

Access Slides **Here**

Eugenics and Racial Hygiene in 20th Century Finnish Politics

Abstract

This paper examines how the political weight of certain professional groups with a eugenic mindset and a firm belief in the soundness of contemporary biomedical science manifested itself in a series of committee reports, government bills and legislation, promoting racial hygiene in Finland. I will also bring up the problematic intellectual-historical question of medicine and genetics often presented as "exact sciences".

The internationally oriented eugenic movement had gained a strong foothold in Finland during the first two decades of the 20th century. Among racial hygienists, often professionals in medicine or hereditary sciences, it was acknowledged as a scientific fact that not only medically diagnosed pathologies, such as mental illness or feeblemindedness, but also a variety of societal behavioral problems, including alcoholism, lewdness, laziness and criminal behavior, were indicators of hereditary degeneration.

With the goal of limiting the procreation of population considered genetically or otherwise inferior the most drastic legislative measures included compulsory sterilization, restrictions on marriage, forced abortion or even castration. Interpretations of the newly discovered Mendelian laws of heredity and the institutionalization of psychometric intelligence measurement as an integral part of the Finnish educational and mental health institutions resulted in a classification system compromising the constitutional subjective rights of select marginalized groups of Finnish citizens.

Eugenics and race hygiene are to be considered synonyms. Eugenics is a British, race hygiene a German term, both referring to the same sciento-political ideology.

Diseases and Medicine in Antiquity

Thursday 23 May, 19:30 – 20:30

(Ny Carlsberg Glyptotek)

Jens Ole Schwarz-Nielsen

Museum Guide,
Ny Carlsberg Glyptotek,
Dantes Plads 7, 1556 Copenhagen V

A guided tour of the Classical Collection has specifically been arranged for you, focusing upon disease and medicine when looking at statues and reliefs from antiquity.

We shall mingle with gods and mortals, athletes and heroes as well as Roman emperors.

Marble statues and masterpieces, mummies and Mediterranean moods. With its unique blend of art and magnificent architecture, Glyptoteket is a place for active contemplation and quiet repose. The world-class collection of art and antiquities continues to offer new perspectives on human existence, culture and civilization as seen through 6.000 years of art.

Art and beer

Ny Carlsberg Glyptotek was founded by the brewer, Carl Jacobsen (1842-1914), who was one of the great industrial magnates of the 19th century and the greatest art patron Denmark has seen. Carl Jacobsen was a passionate collector. From the profits generated by his brewery Ny Carlsberg, he built a rich collection of art and cultural artefacts. In 1888, Carl Jacobsen gave his art collection to the public and began the building of Glyptoteket to house it. Another exceptional donation followed in 1899, this time of the master brewer's vast collection of antiquities, which lead to the building of an entire new wing to the new museum.

Glyptoteket has been open to the public since 1897 and holds over 10,000 works primarily divided between ancient antiquities and Danish and French sculpture and painting from the 19th century.

Not like other museums

Carl Jacobsen's conviction that art could beautify, touch and enrich the lives of everyone is till the rule at Glyptoteket. Brewing magnate Jacobsen was an absolute believer in the didactic significance of art, but in contrast to the character of traditional museums, he did not believe that either works of art or museum visitors should be overburdened with scientific and academic systems. Art should rather speak directly to the individual visitor. This was why Jacobsen also set great store by works which made considerable impact, most of all masterpieces with a certain monumentality.

At the same time Glyptoteket was also to be an oasis. The museum's richly varied architecture with the Winter Garden as a fertile point of rotation should give every visitor a chance to disengage from the day-to-day, making the visit a pleasure without any sense of obligation.

The Glyptotek's superlative collection contains over 10,000 works of art and archaeological objects and offers ever-new perspectives on life, culture and civilization through a time span of 6,000 years.

In the world of the Ancient Greeks and Romans sculpture was one of the most important means of expression and communication. Every single statue, head and relief was produced with an eye to its specific purpose and message. In most cases, the sculpture was set up in the public space, e.g. the city's market place, burial ground, theatre and sanctuary.

The multiple meanings and functions of sculpture in Antiquity can be experienced in the fourteen rooms that house Glyptoteket's extensive collection of ancient sculpture from the Mediterranean world – primarily from Greece and the Roman Empire. The exhibition is a journey through a crucial chapter in European cultural history. From around 600 BCE when Greek large-scale sculpture emerged, to c. 400 CE the Roman Empire. When its form of government and religion, had to make way for Christianity and the Empire of Byzantium.

Guided tour in the unique collections of Thomas Bartholin and Nicolas Steno

Saturday 25 May, 10:00 – 13:00

(Det Kongelige Bibliotek)

By Jesper Brandt Andersen
and Troels Kardel

Venue

The Royal Library National Library of Denmark
Copenhagen University Library
Postbox 2149
DK-1016 Copenhagen K

http://www.kb.dk/en/

Abstract

The two anatomists Professor Thomas Bartholin (1616-1680) and his student Niels Stensen (1638-1686) are among the most famous Danish doctors and scientists. During the middle of the 17th century Bartholin and his anatomy school raised the medical faculty at Copenhagen University from a position as virtually unknown to a wanted training site.

Bartholin is well known for the discovery of the thoracic duct in man and the lymph vessels in dogs and man, and for coining the term lymph vessels, vasa lymphatica. He was also the founder of the first scientific medical journal, *Acta Medica & Philosophica Hafniensia*, and the author of more than 80 scientific books on a variety of topics from anatomy, medicine and bioluminescence, to unicorns, archaeology and comets, showing his nature as a true polyhistor of the Renaissance.

Through extensive travels to leading centres, Bartholin remained in contact and became a diligent and passionate intermediary of scientific issues, a scientist characterized by openness. Often, he was among the first to recognize, verify and publish on new knowledge.

Niels Stensen, widely recognized as a pioneer in natural science and natural philosophy, is renowned for ground-breaking discoveries in anatomy and geology, and he is considered to be among the founders of the latter discipline. Concerning anatomy his works and discoveries spans the fields of glands, muscles, the heart, the brain, the eye and the reproductive organs.

In 2019 we can celebrate the 350th anniversary of two landmark editions by Stensen, one dealing with earth science and the other with the anatomy of the brain, respectively, *De solido intra solidum naturaliter contento* (On a solid naturally contained within a solid) published in Florence and the *Discours de Monsieur Stenon sur l´anatomie du cerveau* (Mr. Stensen´s discourse on the anatomy of the brain) published in Paris.

An assortment of manuscripts, books and original letters will be demonstrated with introduction by Jesper Brandt Andersen and Troels Kardel, authors on Thomas Bartholin and Niels Stensen.

Cholera in Copenhagen & Doctors at War

Saturday 25 May, 10:00 – 13:00

(Nyboders Mindestuer)

Excursions

Program

10:00 - 10:10 Jakob Laustsen: *Welcome*

10:10 - 10:30 Peter Kjær Mackie Jensen: *Combating Cholera*

10:30 - 10:45 Elizabeth Viskum: *Becoming an Army Doctor*

10:45 - 11:15 Coffee and Tea & Reading Time

11:15 - 12:00 Jan Sommerfeldt-Pettersen: *From ships doctor to rear admiral*

12:00 - 12:15 Jakob Laustsen: *Concluding Remarks*

Cholera remains a major cause of morbidity and mortality worldwide, with an estimated 2–3 million cases and +100,000 deaths each year.

Some strains of toxigenic Vibrio cholerae can result in explosive outbreaks when introduced into immunologically naive populations with poor sanitary infrastructure, as was evident in the devastating 2010 cholera epidemic in Haiti after the earthquake disaster.

But cholera epidemics also became well-known from the 1830s in Europe, and Denmark provides an interesting case as its population was not exposed to cholera - likely due to a quarantine at the Danish coast - before 1853, a year after the quarantine was lifted.

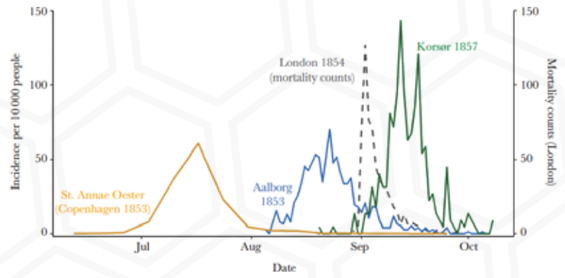
The cholera index case was typically a traveler arriving by ship or foot from an outbreak area where he or she was recorded as recently caring for cholera-infected relatives in other towns. The cholera was brought to Copenhagen by a 19-year old ship builder, who was hospitalized in Nyboder on 11 June 1853.

A single and catastrophic outbreak hit the nation in 1853, including Copenhagen (population 138,030) - a large city mostly confined behind city walls with a high population density - and the town of Aalborg (population 8,621), whereas Korsør (population 2,258) was hit in 1857.

These three cases all experienced substantial epidemics with large death tolls in the period of a few months and had daily morbidity and mortality counts, along with corresponding data and information about water systems and other characteristics.

The Danish cholera epidemics were characterized by a singular late-summer severe outbreak in each town and city. The epidemic periods ranged from mid-summer to mid-autumn in all locales.

The outbreaks were largely unmitigated, as contemporary physicians had no effective medical treatment and the miasmic theory was the dominant paradigm for cholera transmission.



Nyboder Memorial Rooms (Mindestuerne)
Støtteforeningen Nyboders Minde was established in 1926 to convey the proud history of Nyboder and the Royal Danish Navy. The Memorial Rooms (Minderstuerne) constitute the special Nyboder Museum in Copenhagen in the unique ocher-colored buildings from 1632.

Volunteers conduct regular guided tours and open the Nyboder Museum every Sunday. More than 2,500 guests visited the Memorial Rooms in 2017.

In May 2019, the third Nyboder *special exhibition* will be consecrated. It will emphasize the cholera epidemic in Copenhagen in 1853, which originated in Nyboder, but it will also embed the event into a military medicine context - and the work as a medical doctor in the Danish Defence today. Also, current initiatives for war veterans will be exhibited and emphasized.

Postal address
Skt. Paulsgade 24
DK-1313 Copenhagen K

Chairman of the Board
Historian Jakob K.V. Laustsen
formand@nybodersmindestuer.dk

https://nybodersmindestuer.dk/

Cholera in Copenhagen & Doctors at War

Saturday 25 May, 10:00 – 13:00

(Nyboders Mindestuer)

Excursions

From ships doctor to rear admiral

Jan Knudtzon Sommerfelt-Pettersen

Surgeon Rear Admiral (r), Specialist in Public Health, MD

Special Advisor, Center for Maritime and Diving Medicine, Haukeland University Hospital, Bergen, Norway

Former Surgeon General, Norwegian Armed Forces Joint Medical Service

Access Slides **Here**

I started my career in the Navy as a ship's doctor on a frigate in the Royal Norwegian Navy more in 1986. Since then I have been active in both naval and maritime medicine, both as an active practitioner in both fields and in the study of the medical history of both fields.

In my military career – after sailing as a ship's doctor and medical officer on board a frigate – my first regular job was seven years as the chief medical instructor in the Royal Norwegian Navy. This was a new position and the task was to re-establish naval medical education.

Then followed 13 years as the head of Naval medicine in the Royal Norwegian Navy developing and extending an important service which had not received enough support for many years.

Naval medicine is international and the Royal Norwegian Navy is tiny. My strategy was to develop an international network of naval medical subject matter experts. Chairing the only naval medical body in NATO – Medical Naval Expert Panel - for 15 years and developing this panel together with the operational naval medical side of NATO was my main aim for the period.

The Joint Medical Service of the Armed Forces of Norway was established in Great Britain in 1941 during the Second World War when the Norwegian King and his Government continued the fight for liberation in exile.

In 2013, I became the commander of this unit, directly subordinated to the Chief of Defence, and reorganized and developed the organization for five years - I was the first ever medical admiral in Norway.

Besides reorganizing the service, the most important task was to modernize and invigorate civilian-military health cooperation – called Total Defence. The work was done as the vice chair of the Norwegian Health Preparedness Council.

The military medical services – in peace – have few patients. To keep clinical skills all military doctors have to have a civilian career besides their military one. I worked 26 years as a general practitioner in private practice, 16 years as Consultant in Norwegian Labour and Welfare Administration, 2 years as Assistant County Chief Physician at The County Governor of Hordaland - I thus became a specialist in public health.

Besides work, I have been the President of The Norwegian Association for Maritime Medicine for 22 years and an editor of its journal since 1996. I have also edited the journal of The Naval Medical Service for 15 years. I was part of the effort to re-establish the Norwegian Association of Naval Medical Officers in 2006.

One important effect of these voluntary efforts was the establishment of a Norwegian Centre for Maritime and Diving Medicine at Haukeland University Hospital in Bergen in 2005 – the first institutional and academic anchor for maritime medicine in Norway.

During those years a combined civilian and military education and career has touched important issues in both naval and maritime medicine. Did a long working life witch ended as the first doctor to become an admiral in Norway make any impact and if it did, how, what and possibly why?

List of **84** Participants

Allan Rye Lyngs, Denmark
Anders Bank Lodahl, Denmark
Anders Jeppsson, Sweden
Anne Dorthe Suderbo, Denmark
Anne Marie Worm, Denmark
Annette Frölich, Denmark
Benny Vittrup, Denmark
Birgit Bundesen, Denmark
Carl Lindgren, Sweden
Claus Fenger, Denmark
Diana-Andreea Novaceanu, Romania
Doina Vacalie, Denmark
Einar J. Berle, Norway
Elina Maaniitty, Finland
Elizabeth Viskum, Denmark
Emma Madvig Nexø, Denmark
Eske Willerslev, Denmark
Eva Åhrén, Sweden
Finn Gyntelberg, Denmark
Grete Møller, Denmark
Gunilla Svensmark, Denmark
Hans Anders Bernhard Hedlin, Norway
Heikki. S. Vuorinen, Finland
Heini Hakosalo, Finland
Helgi Sigurdsson, Iceland
Ian Baerden, Denmark
Ib Christian Bygbjerg, Denmark
Inge Muurmand Jessen, Denmark
Ingrid Rørbæk, Denmark
Ion Meyer, Denmark
Jakob Laustsen, Denmark
Jan Bondeson, Sweden
Jan Sommerfeldt-Pettersen, Norway
Jennie Sejr Junghans, Denmark
Jesper Boldsen, Denmark
Jesper Brandt Andersen, Denmark
Jesper From, Denmark
Johan Laustsen, Denmark
John Carl Larsen, Denmark
Jørgen Lange Thomsen, Denmark
Karin Tybjerg, Denmark
Katariina Lehto, Finland
Katrine Minddal, Denmark
Ken Arnold, UK
Kerstin Hulter Åsberg, Sweden
Kirsten Jungersen, Denmark
Kristin Øhrn, Denmark
Kristine Lillestøl, Norway
Lars Oreland, Sweden
Lisa Sputnes Mouwitz, Sweden
Mads Linnet Perner, Denmark
Magne Nylenna, Norway
Magnus Vollset, Norway
Malthe Kouassi Bjerregaard, Denmark
Maria Olejaz, Denmark
Marie Clark Nelson, Sweden
Mathilde Martinais, France
Mette Jensen, Denmark
Mette Sandstrøm, Denmark
Mia Pohtola, Finland
Michal M. Skoczylas, Poland
Michael Sappol, Sweden
Morten Møller, Denmark
Morten Skydsgaard, Denmark
Natsume Anzai, Japan
Niels Christian Bech Vilstrup, Denmark
Niels Nørskov-Lauritsen, Denmark
Ole Didrik Lærum, Norway
Peter Kjær Mackie Jensen, Denmark
Peter Schmidt, Denmark
Petri Eskola, Finland
Pieter Dhondt, Finland
Rebecka Klette, UK
Ruben Zwierlein, Germany
Sophy Bergenheim, Finland
Steffen Strøbæk, Denmark
Svend Strandgaard, Denmark
Sven Erik Hansen, Denmark
Thomas Erslev, Denmark
Thomas Schnalke, Germany
Tom Nicolaisen, Denmark
Ulrik Bak Kirk, Denmark
Urban Josefsson, Sweden
Øivind Larsen, Norway

84 Congress Participants
53 Reception Attendees
49 Dinner Guests
35 Oral Presentations
12 PhD Fellows
12 Poster Presentations
11 Contries Represented
7 Museums Represented
5 Keynote Talks
3 Exquisite Excursions
1 Rector Welcoming
1 Panel Debate
1 Book Release

You said

"Mange tak for en meget velorganiseret og vellykket kongres, som det var en fornøjelse at deltage i."
(Finn Gyntelberg)

"Tak for nogle gode og inspirerende dage. Jeg nød især de meget interessante keynotes."
(Jennie Sejr Junghans)

"Tak for en organisatorisk og indholdsmæssig meget fin kongres, som tilmed blev afholdt i nogle meget fine rammer. Jeg havde ikke hørt Eske Willerslev før, så det var én af de store oplevelser."
(Morten Skydsgaard, Steno)

"Tak for en meget fin dag til konferencen. Jeg ærgrede mig over ikke at kunne deltage de andre dage, men var meget glad for at deltage i rundvisningen på Glyptoteket torsdag aften. Spændende præsentationer ved keynote-talerne, og jeg havde mange interessante samtaler i pauserne. Maden var lækker, og lokalerne var skønne!"
(Birgit Ærenlund Bundesen)

"Thank you very much for a fantastic conference. I enjoyed every aspect of the event: the venue itself suited really well for the occasion and it was easy to find accommodation nearby, the food was excellent, the variety of keynote and presentation topics as well as the posters resulted in a very interesting multi-disciplined approach while still falling perfectly under the category 'medical history'. I enjoyed the excursion Saturday to Nyboder very much. All in all the atmosphere was really pleasant."
(Petri Eskola, University of Eastern Finland)

"I would like to express my sincere gratitude for the wonderful organization of the Congress. In my opinion, it functioned very well: excellent programma - both scientific as well as the entertainment program; I particularly enjoyed the guided tour in the Glyptotek and the dinner of course - very nice organization and the perfect venue, offering marvelous lunches"
(Morten Skydsgaard, Steno)

27th Nordic Medical History Congress

Thank you for attending!

See you in Helsinki in 2021!