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Presidential Address

Who Dug Your Well?*

MALCOLM C. VEIDENHEIMER, M.D.

*From the Lahey Clinic Medical Center,
Burlington, Massachusetts*

To laugh often and much, to win the respect of intelligent people and the affection of children, to earn the appreciation of honest critics and endure the trial of false friends. To appreciate beauty, to find the best in others. To leave the world a bit better whether by a healthy child or redeemed social condition or a job well done, to know even one other life has breathed easier because you lived—this is to have succeeded.†

Tomorrow my son, Richard, is to use this quotation by Bessie Anderson Stanley as he gives his high school graduation address. Yet surely the expressions here “respect,” “appreciation,” “job well done,” and “one other life breathing easier” are mandates for those of us who have chosen the medical profession for our life’s work. Our very calling offers us the soul-satisfying fulfillment expressed by these words, but one cannot bask in the sunshine of such an idyllic life-style without having prepared oneself to accept the awesome responsibilities associated with manipulation of the bodies and minds of sick people.

We, as practitioners of the art and science of medicine, do not achieve this role as a result of some

single-standing, God-given talent. The knowledge we possess and the application of this knowledge to the care of the sick patient have not been obtained solely by the individual effort of any one of us but are, rather, the results of an accumulation of information provided by others who have preceded us.

A surgical resident in my hospital recently said, “Why do presidential addresses so often look backward instead of forward?” My answer would be that each step forward must be taken from the firm footing of established fact. We must know, in the language of today, “where we are coming from.” Therefore, I ask you to join me in looking back, for if one does not learn from the mistakes of history, one will repeat those same mistakes.

All of us are what we are because of the influences of others. All of us who are surgeons have had our surgical careers molded directly by those who have taught us and indirectly by those who have taught our teachers. The members of the American Society of Colon and Rectal Surgeons benefit from the activities of the Society, these activities being the results of the influences of the members of the Society who have been our earlier leaders. I would like to remind you

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Address reprint requests to Dr. Veidenheimer: Lahey Clinic Medical Center, 41 Mall Road, Burlington, Massachusetts 01805.

† Stanley BA. Success (prize-winning definition in a contest conducted by Brown Book Magazine). Brown Book Magazine, 1904.

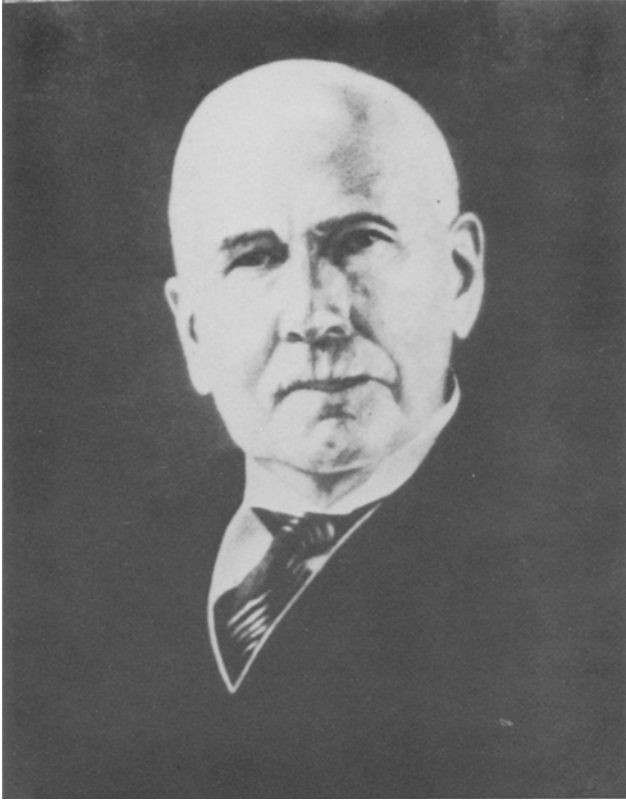


FIG. 1. Sir William Arbuthnot Lane.

cense which was absorbed by the gut into the bloodstream, thus poisoning the whole body. Initially, because of his belief that the colon full of firm fecal matter prevented drainage of the small-bowel contents and thus allowed absorption of toxins to the circulation, Lane did ileosigmoid side-to-side anastomoses. At one point in his career, Lane believed that this "autointoxication" resulted from intestinal stasis, and with time he believed this to be the foremost factor, perhaps even the cause, of severe diseases such as rheumatism, tuberculosis, and cancer. Because of this belief, Lane did colonic surgery for various indications which, in modern times, might be considered somewhat suspect by the utilization review committee.

As a result of his interest in the colon and colonic surgery, he put colectomy on the list of safe abdominal operations. Around the turn of this century he abandoned side-to-side anastomosis and popularized the end-to-end anastomosis. According to the *British Journal of Surgery* of 1920, Lane's perfection as an abdominal technician was related to his free incision, allowing adequate exposure of organs, and to his speed. He took less than an hour to perform colectomy with anastomosis and yet gave an impression of purposefulness and lack of haste.

of several men who have influenced us by virtue of their leadership in the development of the field of colon and rectal surgery and by virtue of their leadership and guidance in the activities of the American Society of Colon and Rectal Surgeons.

The first man that I wish to talk of is Sir William Arbuthnot Lane, the great surgeon of Guy's Hospital in London (Fig. 1). He may well be the true father of colonic surgery. Lane was born in 1856 and died in 1943 at age 86. His surgical interests were broad, as attested to by his 382 published articles which cover areas pertaining to wounds, joints, bones, arthritis, heart, surgical instruments, the care of harelip and cleft palate, the genitourinary system, fractures and dislocations, surgery of the face and mouth, pharynx, larynx, and ear, surgical implications of cervical ribs, surgery for the spinal cord, the brain, and the broad subject of surgical anatomy. A major interest of Lane's was the gastrointestinal tract, about which he wrote 132 articles, many of them pertaining to the colon.

Lane was a great disciple and friend of Ilya Mechnikov, who wrote the book *La Vie Humaine*, and from Mechnikov he developed a theory that the contents of the colon formed a seeping mass of putres-

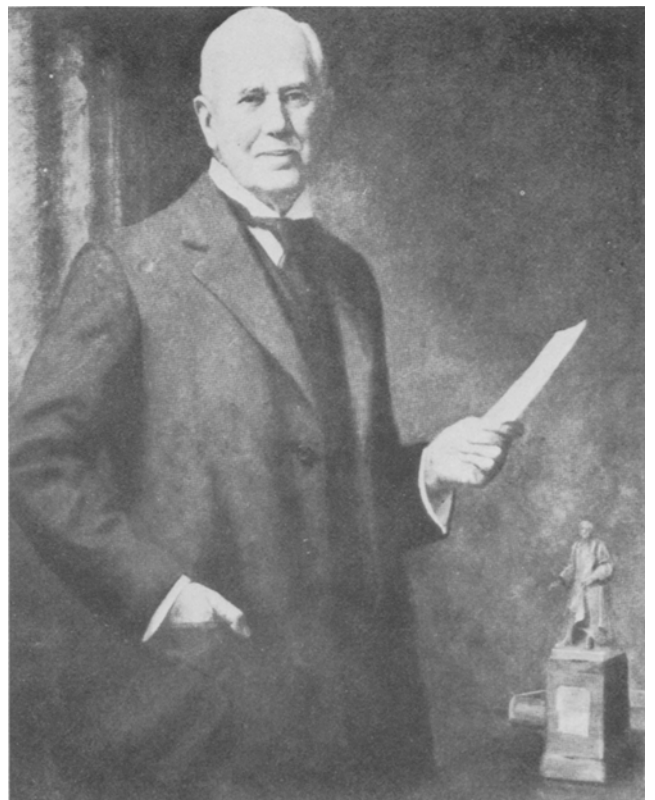


FIG. 2. Sir William Arbuthnot Lane.



FIG. 3. A. W. Martin Marino, Sr., M.D.

Lane was in the forefront of understanding the condition now known of as "the irritable colon." His favorite theme was that the road to disease began in the nursery when the infant was trained to dispense with its napkins and made to sit down on the potty once daily. He felt that children should emulate the free habits of defecation of native mankind in its more primitive state. There, where the fruits of the earth were used in their natural and often rare state, cancer and most of the diseases of civilization were unknown. He appears to have been 50 years ahead of Dennis Burkett in this concept. In his essay on civilization, Lane attributed many of our ills to our erect posture. He particularly abhorred "our habit of using chairs," meaning the commode which is so common in our defecatory activities. Lane was keen to have us revert to the position used by primitive man, squatting with the thighs against the belly, as we evacuate our colon. He even devised a water closet in which one could assume this posture, but this new device did not gain popularity. Technically, Lane appears to

have been superb. Sampson Hanley referred to him as follows:

In point of technique Lane was the most perfect surgical workman I have ever watched, that when Lane was operating, no matter how difficult the operation, in his hands it appeared easy. No haste and no violence, but long easy strokes of the knife guided by profound anatomical knowledge. Every stroke purposive and the stage of sewing up soon arrived.

In addition to Lane's pioneer work dealing with colectomy and its safety, he had a lifelong interest in nonsurgical mechanisms for keeping the bowel empty without vigorous purgings. At one point in his life, he used a pint of cream a day, thinking that this would act to cause the gut to move mechanically without any action on the lining of the bowel wall. He pushed for the utilization of olive oil and cod liver oil until the patients' insides "revolted." He finally landed upon the use of liquid paraffin as the ideal vehicle for aiding elimination. He, himself, used liquid paraffin throughout his lifetime and, on one occasion, when he attended a banquet of some 200 people in the United States, his host had a small champagne bottle



FIG. 4. Neil W. Swinton, Sr., M.D.

filled with liquid paraffin positioned at each place setting. Lane, who was not a flamboyant man, modestly wrote, "I think I may safely assert that no remedy has rendered so much good to the human race as paraffin."

Lane was certainly in the forefront of the wonderful British surgeons who cemented a relationship between Great Britain and the United States of America (Fig. 2) He first visited the United States in the early 1900s, and the Mayo brothers visited with him in 1907. Writing at the time, Lane stated, "I have had the good fortune to meet old Dr. Mayo, their father. He was very amusing in that he was really jealous of the admiration which his sons received. He informed me that he deserved the whole credit of the organization and handed it on to his boys as a going concern." In 1911, the organizer of an international congress in New York, Dr. Franklin Martin, one of the founders of our College of Surgeons, brought Lane to New York where he received a spectacular ovation after his descriptions of colectomy. Dr. John B. Murphy of Chicago, writing to Lane, stated, "Your indefatigable zeal in your clinics

made you the ideal busy surgeon of the world. You cannot comprehend how much you have endeared yourself to the American medical profession." In the picture of Lane (Fig. 2) you can see a bronze statue of Christopher Columbus, a beautiful work by Luchesi, presented to Lane by Sir John MacAlister, Secretary of the Royal Society of Medicine. The inscription reads "Colon exporto el mundo nuove pero Lane exploto el colon." The implication of this quotation is that Columbus discovered the New World, but Lane discovered the colon.

Later, Lane was asked to give the Murphy oration, and, in the introduction, the President of the American College of Surgeons, Dr. Rudolph Matas, referred to Lane as a "surgeon whose courage and daring were only surpassed by his originality, resourcefulness and skill." In 1925, when Lane was in semi-retirement, Matas referred to him in these terms: "The mind in conception of ideas and the hands with the cunning of the craft are united in harmony to obtain great objectives, to open new and untrodden paths. The craft of the artisan is inspired and guided by the imagination of the artist."

In his late years, Lane became involved with an organization he founded, known as the New Health Society. This was a public health endeavor which had much merit. The principles of the organization were threefold: to teach the people the simple laws of health; to attempt to render fruits and vegetables as abundant as possible and accessible to the general public at a reasonable cost; and to put the people back upon the land.

And so I ask you to look back upon a true father of colonic surgery, a man who combined an inquiring mind with a spectacular technical talent. He developed the use of the "no-touch technique" in orthopedic operations. Referring to Lane, Arthur Conan Doyle stated that the methods of close observation and reasoning which the detective uses so skillfully were practically those carried out by Lane in the dissecting room. Lane was the leader in establishing the splendid relationship which we colonic surgeons in the United States now have with our British confreres. He was a man interested in public health measures for the prevention of colonic diseases, and as Sir Cooper Perry said, "and with it all he was such a gentleman." We have much for which to look back to Sir William Arbuthnot Lane.

The American Society of Colon and Rectal Surgeons was founded in 1899. Through the years it has prospered as an educational body, and all of us are greatly indebted to it. The qualities that make the society great are a result of the input of the membership. During this past year, four former presidents of this organization have passed away.

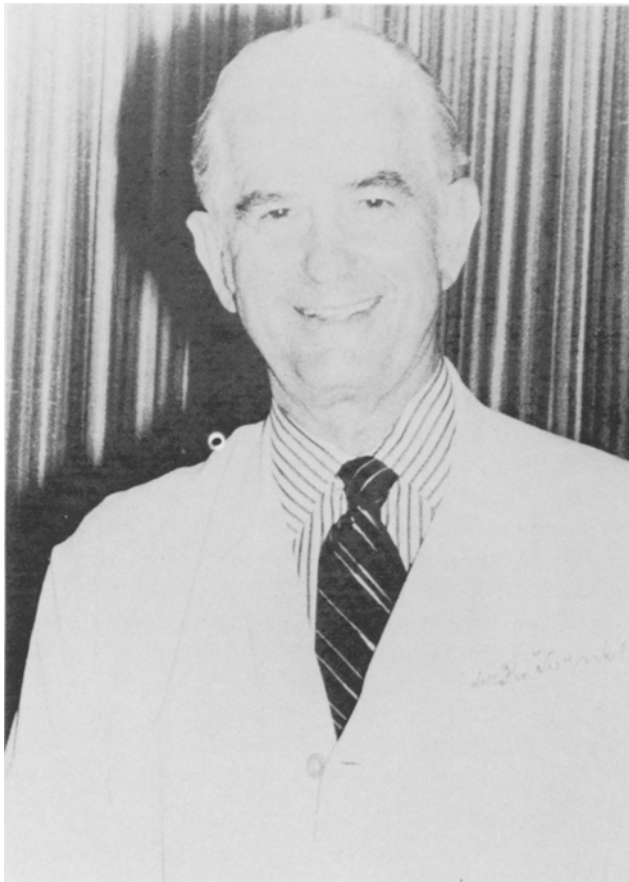


FIG. 5. Rupert B. Turnbull, M.D.

These men have been leaders in our field and leaders of this society. I would like to look back at them.

Dr. A. W. Martin Marino, Sr., died on October the 8, 1980 (Fig. 3). He became a member of the American Society of Colon and Rectal Surgeons in 1935. Dr. Marino was very active in the society's affairs and represented colon and rectal surgery in the American Medical Association's House of Delegates. From this platform, Dr. Marino was instrumental in establishing a separate section of Colon and Rectal Surgery in the American Medical Association. Dr. Marino was a member of the Board of Colon and Rectal Surgery for 14 years. He was President of our Society in 1954 and 1955.

Dr. Neil W. Swinton, Sr., died on November the 13, 1980 (Fig. 4). He was also leader in our society and served as our president in the year 1968 to 1969. Neil Swinton was an Honorary Member of the Royal Society of Medicine and an Honorary Fellow of the Surgical Societies of Uruguay and Chile. He was a friend and counselor, without whose influence I would not be here. He was a truly nice man.

Dr. Rupert B. Turnbull died on February 18, 1981 (Fig. 5). Rupe Turnbull was a giant in the field of colon and rectal surgery. He achieved international acclaim, and one of his most prized honors was his Honorary Fellowship of the Royal Australasian College of Surgeons. Dr. Turnbull's technique for performance of the operation of ileostomy opened the door to happier lives for thousands of patients around the world. He was an underlying organizer in the development of the field of enterostomal therapy. Rupe Turnbull provided a great deal of stimulation for all of us. He served as our president from 1974 to 1975.

Dr. Harry E. Bacon died on May the 12, 1981 (Fig. 6). Ted Bacon was a teacher of many; he was an innovative surgeon whose techniques of pull-through operations have been a milestone in surgery. He was an internationally renowned surgeon who held Honorary Fellowships in the Brazilian College of Surgeons, the Chilean Society of Surgery, and the Mexican Academy of Surgery and was an Honorary Member of the Royal Society of Medicine. Dr. Bacon was a principal organizer of the American Board of Colon and Rectal Surgery and in the development of the



FIG. 6. Harry E. Bacon, M.D.

journal, *Diseases of the Colon & Rectum*. Dr. Bacon was President of our Society in 1948 to 1949.

These four past presidents were men that most of us in this room have known personally. They have played vital roles in the development of this society. They have also played vital roles in the professional development of many of us now practicing colon and rectal surgery. We shall miss them as friends, as teachers, and as administrative leaders.

We have examined the work of five great men in our field. One man of these men was probably unknown to all of us, but his principles have had an important role in the development of our own personal skills. The other four men have been our friends but have also instilled in us our surgical principles. None of us are where we are today, doing what we do today, without having had a leg up by the others who came before us. I believe it is appropriate from time to time to stop and look back and appreciate those who make our daily lives possible. There is a saying of Chou En Lai's which I believe is appropriate here: "When you are drinking the water, don't forget the people who dug the well."