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and the novitiate is terminated only by the exercise and action which constitute experience, and confer new ability. For his training and instruction, for the gratification of that sense which appreciates and enjoys the curious and the interesting, the medical examiner needs all the opportunity and all the material which his district can possibly furnish. He is defrauded and retarded in his official growth whenever that to which he alone has a claim is converted to the use and advantage of another.

The medical examiner, required to be "learned in the science of medicine," must be a physician, and is under a double obligation to be of good repute. Even if his ideas of duty are less severe than those which have found expression here, his conduct should be regulated by those principles, a strict adherence to which has made the name of medicine so suggestive of intelligence, moral worth, and public spirit.

### MOSES AS A SANITARIAN.<sup>1</sup>

BY EDWARD T. WILLIAMS, M. D.

UNDERSTANDING that a paper on circumcision was to be read at the present meeting, it occurred to me that a few brief remarks on the sanitary regulations of the ancient Hebrews might be not inappropriate. It is true I can say nothing but what every one can read for himself in the Bible, yet there may be some to whom a brief review of the subject from a medical standpoint will be interesting.

In the first place, as to the authorship of the Mosaic books, Deuteronomy (chap. xxxi.) states that Moses wrote a book of the law, and gave it to the priests, the sons of Levi, to put into the ark with the two tables of stone containing the ten commandments, and commanded that it should be publicly read every seventh year in the presence of all the people. In Joshua (chap. viii.), after the occupation of the promised land, we learn that the book was so read before all Israel by Joshua, and that a copy of it was written upon stone at the altar near Bethel by the same hand. Joshua xvii. 1 states that the whole congregation of Israel afterwards assembled together at Shiloh, and set up there the tabernacle which contained the ark, and without doubt, also, the sacred book. At any rate the book was certainly preserved, for Joshua, in his old age, twice more assembled the people together (chaps. xxiii. and xxiv.), solemnly warned them to keep and to do all that is written in the book of Moses, and also added certain words to the book. In the time of Eli, three or four hundred years after, the tabernacle and ark (1 Sam. i., ii., iii., iv.) were still at Shiloh, which had during the whole period of the judges been a place of yearly resort by the pious Israelites (Judges xxi. 19; 1 Sam. i. 3). There can be little doubt that the sacred records were there too. Shortly before Eli's death the ark was removed from the tabernacle, and subsequently captured by the Philistines. The tabernacle remained at Shiloh under the charge of the priests, and was afterwards removed to Gibeon, a place nearer Jerusalem (1 Chron. xvi. 39; 1 Chron. xxi. 29; 2 Chron. i. 3), from which it was again removed by Solomon and deposited in the temple (1 Kings viii. 4; 2 Chron. v. 5). There is no direct mention of the

<sup>1</sup> Read before the Norfolk District Medical Society, November 29 1881, and printed by request of the Society.

books. A brazen altar, however, made under the direction of Moses by Bezaleel, the son of 'Uri, was preserved with the tabernacle at Gibeon (2 Chron. i. 5). The brazen serpent, made by Moses in the wilderness, was also preserved somewhere, probably at Gibeon, for we read (2 Kings xviii. 4) that it was purposely destroyed three hundred years after by Hezekiah. The two tables of stone were found unmolested in the ark by Solomon (1 Kings viii. 9; 2 Chron. v. 10). Is it not reasonable to suppose that the sacred books would have been guarded with equal care, and must, therefore, have been in existence at the same time? At any rate they did exist under Jehoshaphat, fourth in descent from Solomon, for he sent priests through the cities of Judah with the book of the law in their hands to teach the people (2 Chron. xvii. 9), and again, under Josiah, the same book was found in the temple by the high priest, and publicly read at the great feast of the passover (2 Chron. xxxiv. 14, 30). It was known and read by Daniel during the Babylonish captivity (Dan. ix. 13), as were also the writings of Jeremiah (Dan. ix. 2). Ezekiel (Ezek. xiv. 14) speaks familiarly of Noah and of Job. Facts which show that numerous books and probably numerous copies of them still survived. In what manner the Psalms were preserved is plainly shown in Psalm cxxxvii. How absurd, then, the idea of some skeptics that the Pentateuch was composed by Ezra, who simply carried back from Babylon at the restoration the book of the law in which he was an accomplished and "ready scribe" (Ezra vii. 6, 14). From this period its history is sufficiently well known, and though there can be no doubt to the critical mind that the book as originally written has undergone alteration, revision, and interpolation, the probability certainly is that a considerable portion of it was really written by Moses himself.

How far the system of Moses was original with himself no one can say. He certainly borrowed largely from the Egyptians, as archæology shows, a fact which strikingly corroborates the Scriptural account of his early education, and the broad historic fact of the Exodus. But from whatever source the fragments of his system may have been derived the system was his own and the Power's which guided him.

So far as we know Moses was the creator of preventive medicine, an idea thought to be peculiarly modern. We know little of the treatment of the sick as pursued by the ancient Jews. The references even to physicians as a distinct class are rare in the Old Testament. But the idea of a sound mind in a sound body, the value of physical health to the state and the individual, were profoundly felt by the Jews. The notion of promoting health by preventing themselves from becoming sick was the foundation stone of their sanitary legislation.

The foremost subject of their code was dietetics. The Jews were good feeders. They were rich in sheep and cattle, and partook liberally of fresh meat. It has been said that the greatness of England is founded on beef and beer. Undoubtedly that of the Jews was partly due to a plentiful supply of meat. The flesh of reptiles, however, of all carnivorous animals, and of swine was condemned as unclean (Lev. xi.). So, also, the flesh of diseased animals or those which died a natural death. The prohibition against pork, considering the heat of the climate and its liability to be diseased, must be considered as a safe, if not absolutely

necessary, provision. It was left for the youngest of the sciences, histology, through the discovery of the trichina, to fully expose to the modern world the transcendent wisdom of the Hebrew lawgiver on this point.

The laws concerning "issues" or discharges from the genital organs, both of men and women, display a similar wisdom. The word "issue" seems to be used indifferently for discharges of blood, pus, or mucus. The dangerous character of all such discharges was fully understood, and but little attempt was made to discriminate between them. All persons so affected were declared "unclean." (Lev. xv.) They were obliged to live apart, and abstain from sexual intercourse. Their clothes, bedding, and cooking utensils were also declared "unclean." Any person even touching them was obliged to wash carefully his body and his clothes. This régime was continued for seven days after the cessation of all discharge, after which a thorough ablution of both person and clothing was necessary before the affected individual could resume his place in society. With women after childbirth from one to two months of isolation were required. It is easy to see that these rules if faithfully carried out would be an efficient preventive of gonorrhœa. Yet we, in our enlightened age and country, dare not legislate on the subject of venereal disease, blindly refusing the protection of the law not only to the guilty victims of illicit pleasure, but to great numbers of innocent men, women, and children, who have to suffer and often to die for the faults of others. Leaving wholly out of view the humane aspect of the question, the mere pecuniary loss to the State from such defective legislation is incalculable.

The nature of the tsaraath or Mosaic leprosy has been much disputed. That it was something quite different from the Grecian elephantiasis, commonly called leprosy, of the present day is clear enough from the description given (Lev. xiii., xiv.), and from the fact of its attacking articles of wearing apparel, whether of wool, linen, or skin, and even the walls of houses. Nothing but some species of *vegetable mould* or *parasite* could possibly produce such an effect. It affected by preference the hairy parts of the body, like favus, and, like favus, caused the diseased surfaces to turn white. It also affected the hairs, like favus, causing them to turn white or yellow and thin. This affection of the hairs was the crucial test by which the priestly physician was to decide the true character of the disease, as it still is the chief point of diagnosis with all parasitic affections of the hair. It was also excessively contagious, so that it seems pretty clear that the disease must have been some species of vegetable parasite, and may possibly have been favus.

The laws concerning this disease were most strict. Every person having a suspicious eruption on his body was obliged to present himself to the priest for inspection. If it proved to be leprosy he had his clothes torn and his upper lip covered in some way to make him conspicuous, and was turned outside the camp, where he was compelled to live alone until cured. If the diagnosis was doubtful he was shut up a week or a fortnight and then reëxamined. If the leprosy had not declared itself by this time he was discharged; another fact which goes to show that the disease was one of rapid progress, like a parasitic disease, and not a chronic one like elephantiasis.

Articles of clothing attacked by leprosy had also to

be submitted to the priest. If found diseased they were burnt forthwith. If doubtful they were washed, and reëxamined at the end of a week, when they were either burnt or pronounced clean.

When the walls of a house were attacked the parts affected had to be torn down and carried to a refuse heap outside the city. The remainder of the wall was thoroughly scraped, the scrapings themselves being carried out of the city, and the broken places rebuilt with fresh materials. If these means proved insufficient the whole house was demolished and the *débris* removed from the town.

Modern science may have discovered simpler methods of disinfection, but certainly nothing more thorough or effective.

It remains to speak of circumcision. The origin of this rite is doubtful. It was certainly practiced by the Egyptians, but whether before the time of Abraham or not is perhaps difficult to say. According to the Bible account it was not adopted by Abraham till some time after his residence in Egypt, and may therefore have been borrowed from Egyptian usage, a notion which nowise conflicts with the statement that it was enjoined upon Abraham and his descendants by divine command. It does not appear to have been too faithfully carried out even under Moses, who, it would seem from Exodus iv. 25, even neglected to circumcise his own son, till Zipporah, his wife, thoughtfully rectified the omission. Again, it is stated in Joshua v. 2-5, that none of the Israelites who were born in the wilderness during the forty years' wandering had been circumcised, though their fathers who came out of Egypt had been. For this reason Joshua, as soon as he had crossed the Jordan, made a halt and consummated the rite upon all the people at Gilgal. The law ordained that it should be practiced upon every male child on the eighth day after birth (Lev. xii. 3).

The object of this singular rite is nowhere stated in the Bible. It probably does good in several ways.

First, the exposure of the glans penis to the air and to friction from the clothes dries and hardens its surface and renders it less liable to abrasion in sexual intercourse, and consequently to venereal ulcers. It is known that Jews rarely have syphilis, though it is an open question whether this disease prevailed among the ancients. It may perhaps have been included under those plagues of Egypt, the "botch," the "emerods," and the "scab" (Deut. xxviii. 27), with which Moses threatened the Israelites as a punishment for disobedience to the divine command. At any rate soft chancres must have been well known. I find proof of this in the account given, in 1 Samuel v., of the plague of "emerods" which occurred among the Philistines of Samuel's time after their capture of the sacred ark. These "emerods" (a corruption for hæmorrhoids) affected the "men of the city, both small and great, in their secret parts," and caused great destruction of life. The word "emerods" is certainly a mistranslation, for the description given bears no resemblance to the disease now known as hæmorrhoids or piles. If the account is true, it could hardly have been anything else than some severe species of phagedænic chancre, like the famous "black lion" of Portugal, or the "Chinese pox" familiar to Pacific Ocean sailors. Such epidemics would be largely prevented by the general adoption of circumcision.

Second, the removal of the foreskin is acknowledged to be useful as a preventive of masturbation. It not only

renders the act itself more difficult, but by diminishing the sensibility of the part and favoring the removal of irritating secretions diminishes also the propensity to the act. It is certain that this vice is a prolific cause of nervous diseases and even of insanity among Christian nations. Its effects in this direction may have been overstated by some writers, yet it is undeniably true that it often does produce the most serious results. The habit itself when fully formed, and a species of paralysis resulting from it, have in numerous instances been cured by circumcision. Hence one of the strongest arguments in its favor.

Third, it prevents the accidents of phymosis and paraphymosis, with their train of evils. Among these may be reckoned cancer, which is stated to be peculiarly common in persons affected with phymosis.

Fourth, it prevents the retention of the sebaceous secretion, and the ensuing balanitis to which many persons are subject.

Lastly, it probably promotes continence by diminishing the pruriency of the sexual appetite. It might naturally be expected that the removal of a portion of the prepuce with its sensitive nervous filaments, the blunted sensibility of the parts remaining, and their free exposure to cold air, might tend to produce this result without in the least impairing the virile power of the individual. It might farther be expected to strengthen the general, and especially the nervous, system, by removing those sources of irritation which by sympathy and reflex action so often act unfavorably upon it. That it really does produce these effects is a matter of wide-spread belief. The remarkable exemption of the Jews from insanity and nervous diseases, even their general good health and longevity, may in no small degree be attributable to these causes. At any rate it is a fact that the Jews are the healthiest race in existence. They have produced the greatest men, and contributed more to the advancement of civilization than any nation known to history. However degenerate, morally speaking, some of their modern descendants may be, they certainly have not degenerated physically, a sufficient answer to the often repeated assertion that civilization tends to physical weakness, for the Jews have been longer civilized than any other highly civilized people. May we not then venture the inference that the rite of Abraham, or Moses, has had its share, and possibly a very important share, in the production of these wonderful results, and that it might perhaps be profitably imitated by other nations?

The above is a brief summary of the most important sanitary provisions of the Mosaic code. Proud as we are of the great discoveries of modern science we cannot repress a feeling of wonder at the astonishing wisdom of these old laws. We find in them much that we ourselves might advantageously copy. We are far too apt to forget the greatness of former ages in our boastful praises of the times in which we live. It is good for us to turn back now and then to cull a lesson from the past, and do reverence to the memory of the mighty dead.

— The physicians of Copenhagen lately held a meeting, when a resolution was adopted approving the proposal to hold the next International Medical Congress, in 1884, at their city, and pledging their cordial welcome and hospitality to the Congress.

## RECENT PROGRESS IN GYNÆCOLOGY.

BY W. H. BAKER, M. D.

### TREATMENT OF UTERINE FLEXIONS.<sup>1</sup>

THE author agrees with Dr. Hewitt that, in cases of acquired flexion, an unhealthy condition of the uterine tissues, "undue softness," connected probably in a large proportion of them with general malnutrition, is the condition antecedent to the bend, and he thinks a recognition of this to be primarily important in the treatment. The necessity for treatment depends rather upon the amount of obstruction occasioned by the flexion than upon the amount or form of the flexion itself. In cases of retroflexion, if there be no exudation or active inflammatory action present, he would replace at once and adjust a pessary, even if endometritis exist, which he has found to disappear gradually as the uterus is kept in a normal position. In cases of antelexion uncomplicated, he advises the frequent careful passing of graduated bougies during the intermenstrual period, not using them, however, within ten days of an expected menstruation.

### LACERATION OF THE CERVIX AS COMPARED WITH COMPLETE INTERNAL DIVISION OF THE CERVIX.<sup>2</sup>

In considering the extent of this lesion, which is followed by changes requiring, sooner or later, treatment by surgical interference, the author advances the statement which we have so often insisted upon, namely, it is only when the laceration is lateral and extends beyond the crown of the cervix upon one or both sides that evil consequences follow. Among the factors which derange the circulation of the uterus while undergoing involution, he gives prominence to open lacerated wounds of the cervix extending entirely through the cervical wall. He shows how the lips of the cervix are forced apart by the superincumbent pressure, the womb finally resting upon the inner surfaces of the everted lips. This gives rise to influences which bring about ulceration and areolar hyperplasia. No such conditions or influences are present in the division of the cervix, for then the uterine structure is healthy, the weight of the uterus is not increased, and the constant tendency of the divided surface is to unite by first intention. It is often with the greatest difficulty, in fact, that such union is prevented. The author concludes as follows:—

I. Parturient laceration of the cervix occurs in a womb whose tissues are in a state of fatty degeneration, and therefore have no tendency to heal.

Division of the cervix is performed upon a womb whose tissues are in a perfectly normal state, with an almost insuperable tendency to heal.

II. Parturient laceration interferes with a physiological function of the womb, namely, the process of involution.

Division of the cervix interferes with no function of the womb, but on the contrary facilitates the performance of one of its most important functions.

III. Parturient laceration occurs at a time when the weight of the womb is so great as to force the divided lips apart by pressure against the posterior vaginal wall, and so to prevent healing.

Division of the cervix is performed while the womb

<sup>1</sup> By Henry Gervis, M. D., F. R. C. P., *British Medical Journal*, June 25, 1881.

<sup>2</sup> By Virgil O. Hardon, M. D., *American Journal of Obstetrics*, July, 1881.