The Hesitant Pathway to the Humours

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F ew are the words that maintain the same meaning from age to age, from continent to continent, from one professional assemblage to another. There are, for example, ordinary words captured by the medical profession, and over the centuries have been given a uniquely Hippocratic slant.

Consider the lexicographic journey of a simple Latin noun, *humnus*, meaning ‘person’, giving rise to such English terms as humanity, humane and humble. This noun, in turn, had earlier evolved from the Latin, *humus*, meaning ‘from the earth’, and in turn generating such current words as humus and humility.

*Humus* then gave rise to the French, *umble*, with a variant meaning ‘close to the earth.’ And from this source came such English words as humiliate and even chameleon.

Humble pie (sometimes spelled ‘umble’) from the French, *umble*, suggests now a sense of meekness and humble silence. Expressions such as ‘he eats humble pie’ denotes the quality of humbleness which is but one step removed from ‘humiliated.’

But when we encounter that Latin word, *humere*, we must recall that it is remotely related to the noun, *homo*, meaning a person. And this, through many adaptations, forms the lexical precursor of *humere*, meaning ‘to be moist.’ This in turn led to the English noun, humor, originally meaning ‘liquid or moisture.’ And when our professional predecessors developed a theory that disease was caused by some imbalance of the four bodily fluids (bile, choler, phlegm and blood) the word, ‘humor’ seemed an apt term to define all four of these essential fluids. This pathophysiological theory purported to identify the ailments of humans but also their temperament and mental outlook. And so, humor, embraced many variant meanings of emotional inclination, mood, whim – or, eventually, an appreciation of the comic aspects of life, a sense of humor. Comedy, in this setting, is viewed as a departure, not from the truth but from despair. And, most believe, that everything in life is really comical – as long as it happens to someone else.
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December 1917: RI Medical Teams Rush to Halifax Disaster

*Described as the most devastating pre-atomic blast ever recorded*

BY MARY KORR
RIMJ MANAGING EDITOR

During his long life, December 6, 1917 was a day Halifax native and Rhode Island physician **DR. EDWIN G. THOMPSON** (1863–1949) would never forget. The dentist and physician, a graduate of Philadelphia Dental’s College and Medico-Chirurgical College, was perhaps making his rounds at the Roger Williams Hospital when the tragic events began to unfold in his hometown’s harbor, a WW1 hub of Canadian Navy activity.

At about 8:45 a.m., the *Imo*, a steamship carrying supplies for the Belgian Relief Commission, headed south through the Narrows, passing to the port side of incoming ships, rather than on the traditional starboard side.

The French steamship *Mont Blanc*, a WW1 munitions transport, was entering the harbor to rendezvous with a military convoy that would escort it across the Atlantic. The ship was packed with 2,300 tons of picric acid, 200 tons of TNT, 35 tons of high-octane gasoline, and 10 tons of gun cotton.

Warning signals and evasion maneuvers proved futile and the ships collided. At 9:05 a.m., the ablaze *Mont Blanc* rammed Pier 6 and exploded, creating a 60-foot tsunami that swept over the harbor. Horrified onlookers were swept out to sea and drowned.

Explosion caused what has been described as a “mushroom-like” cloud.

Main building of the Nova Scotia Provincial Exhibition, Halifax, Canada, damaged in the explosion.

Dr. N. Darrell Harvey, later president of the Rhode Island Medical Society, 1931–1932, led one of the relief teams to Halifax.
Warehouse windows propelled glass missiles everywhere; 200 lost their eyes and sight. The event has been described as the most devastating pre-atomic blast ever recorded. It killed 2,000; leveled thousands of buildings, and injured tens of thousands.

**Rhode Island relief**

On the following day, December 7, 1914, at noon, a train chartered by the local chapter of the American Red Cross left Providence bound for Halifax, with a rescue team of 60 doctors and 60 nurses led by Dr. Thompson. A blizzard blanketed the tracks as the train forged northward.

According to the *New York Times* of December 8, 1917, a second provisional unit was sent from Providence on December 8 with 69 physicians and surgeons, 50 nurses, 6 secretaries, and social workers under the charge of ophthalmologist **Dr. N. Darrell Harvey** of Providence, who also worked at Newport Hospital.

The train carried a complete sterilizing plant, a large quantity of ether, alcohol, compresses and surgical equipment. On the scene, the Red Cross set up 57 makeshift hospitals. The Rhode Island contingent worked in the Ladies College Hospital, the Halifax Infirmary and Bellevue. Many remained for several months.

Upon his return, Dr. Harvey gave an accounting of the Rhode Island Red Cross Relief Unit at the Halifax disaster to the Rhode Island Medical Society on March 30, 1918 and outlined relief plans should such a disaster hit Providence. ✦