A truly European urologist: Amatus Lusitanus

Living in the Iberian Jewish diaspora in the wake of the inquisition (16th century)

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Modern Europe as a unified and progressively expanded zone, with more or less clearly defined geographical orders, has only existed for around few years. Prior to this period, Europe was an amalgam of nations, countries and empires, of lesser or greater scale, and of more or less power, based on the Christian faith, with colonial empires in the Americas, Africa and Asia, with internal divisions and alliances, and links to Islamic and the Far East, including Russia.

Five centuries ago, many European countries were subject to the Jewish diaspora, in the wake of the Inquisition. The primary source of the diaspora was the Iberian peninsula. Many Jews were driven out from this zone and as a consequence struggled for survival. It was a very difficult period but in which there was cultural dialogue and enrichment in all areas including medicine. Bankers such as Mendes, philosophers such as Spinoza, artists such as Rembrandt, and doctors such as Amatus Lusitanus, were fruits of this diaspora. Amatus Lusitanus, Amato Lusitano - an illustrious botanist, physician and doctor - was a pioneer in the treatment of urological illnesses. He taught and discussed elsewhere his concepts and therapeutic remedies including in particular urological treatments, as a result of which he may be considered a truly European urologist.

Born in Castelo Branco (Portugal) and died in Salonica, of Jewish origin. His surname, Amatus, is probably the Latin translation of the family’s Hebrew name (Habib = loved one, dear one or beloved). He studied and graduated in Salamanca, where he was one of Eldere’s disciples and was a fellow student of André Laguna. He returned to Portugal in 1529, and practised medicine in Cimbra and subsequently in Lisbon, where he earned fame as a doctor and botanist. He was a contemporary of Filipe Velez, to whom he probably taught the technique of urethral dilation with small candles. 1533-34. After the establishment of the Inquisition in Portugal, he fled to Antwerp, where he ran a clinic during seven years, treating various famous patients. In 1542 he moved to Venice, where he taught in the university and mixed with famous doctors and anatomists such as Falopio and Canio. In 1542, due to the political situation, he fled to Venice and finally in 1550 to Rome where he treated Pope Paolo III (despite his Jewish origins), and subsequently moved to Pesaro and Raguza (nowadays known as Dubrovnik), finally settling in Salonica, in Macedonia in 1559, where he was nominated First Doctor of the Grand Turk. He died in 1568 in the plague epidemic in Salonica.

Amatus – an erudite man, thinker, poliglot, and renowned botanist - was the most distinguished Portuguese doctor and probably the leading European doctor in the 16th century. He is considered to be the first Portuguese urologist, and pioneer (although with some controversy – Amatus’ authorship is questioned) in the treatment of tightening of the urethra, with dilution using small candles, and also practising surgery, lithotomies, external urethrotomies, treatment of fistulas and pathologies of the genitals. He was probably the first person to describe neurogenic bladder, and to refer to urinary incontinence as a result of vertebral fracture. To widespread amazement he treated a case of hermaphroditism, changing the patient’s sex from female to male. His medical activity extended to the rich and poor, nobles and wise men and also slaves, prostitutes, merchants, soldiers and sailors. He published various works on botany and medicine, the most famous of which was his seven volume “Hundred of medicinal cures” (“Curationem Medicinalin Centuriae Septem”). In this compendium he wrote about the observations, advice and treatment of the seven hundred clinical cases - many of a urological nature. These cases include nephriptes, sphyllis, hydropsydeum, ureteromxy (Hundred II), incontinence due to vertebral fracture, hermaphroditism, priapism, fistulas (Hundred III), gonorea, hydrole (Hundred III), tightening of the urethra, dilation with small candles, urine suppression (Hundred IV), ulcers, phimosis and tightening of the urethra operations (Hundred V), urine retention, imbedded calculus, feminine cystitis, abscesses (Hundred VI), vesical lithiasis, dysuria (Hundred VII). In 1559, he also published – following in the footsteps of Hippocrates and Galeno – a comprehensive code of professional conduct known as the “Amatus Oath”. Notwithstanding his Jewish origin, this Oath was universal, reflected medical ethics of that time, and was of major importance during that time.

Amatus Lusitanus was undoubtedly a pioneer of Portuguese urology. We believe that he was also a pioneer of European urology as it is now known, albeit due to the struggle for survival in the wake of the Jewish diaspora from the Iberian peninsula in the 16th century.

Cooperation and friendship between Bonn and Tbilisi

Professor Stefan Müller, Chief of the Urological Department of Bonn University Hospital (Germany) and I collaborated already 12 years ago when as a young urologist and holder of the DAAD scholarship I visited Professor Müller’s department for the first time in the period 1996-97. At that time we carried out research on chemotherapies of urinary stones, but at that time I was already impressed by the surgical skills and clinical competence of Professor Müller. Afterwards, we met several times at various urological congresses worldwide and maintained very good personal and collegial relations.

In 2005 I was awarded with a very prestigious scholarship from the Alexander von Humboldt Foundation (Germany) and spent 6 months together with Professor Müller in Bonn, actively participating in surgery and research work – radical prostatectomy in locally advanced prostate cancer patients.

My stay in Germany was very productive in improving many skills – working side by side with Professor Müller - and I also received a temporary license to practice medicine in Germany after I successfully passed a German language test at the Goethe Institute in Bonn. With the support of Professor Müller a urological anasthesiologist from Georgia was given a German language test for an internship. This time was very fruitful in strengthening our friendship and professional relation.

In October of 2006 we organised professor Müller’s first visit to the Tbilisi State University Medical Center (Georgia) and spent 14 days together with Professor Müller in Tbilisi, establishing a partnership between our institutions. During this visit Professor Müller performed 5 operations in patients with difficult oncological and stone cases. A German-Georgian Urological Symposium was organised at the Tbilisi State University at the end of which Professor Stefan Müller was awarded with the title of an Honorary Doctor of the Tbilisi State University.

In January 2007 - back in Georgia – I was appointed Director General of the Tbilisi State University Medical Center and Chief of the Urological Department. This is a rather new urological department and urological practice at our department benefited greatly from the next two visits from Professor Müller – in April and August 2007. During these visits many interesting urological operations, covering a whole range from paediatric to adult urology and from endoscopy to oncology - were performed by Professor Müller. All procedures were free of any complications and the Georgia team was really impressed by Professor Müller’s outstanding surgical skills and professionalism.

But, at the same time he is a very friendly and interesting person and it is always a great pleasure to work with him. As an operator for an international urologist I strongly interact with him. The social programme during these visits was also very interesting: we visited old churches and palaces in Tbilisi, in west and east Georgia and also spent some time at the Black Sea and in the Caucasian Mountains.

We believe that this is an excellent example of an international collaboration between urologists coming from such different socio-cultural countries like Germany and Georgia. The visits of Professor Müller were very helpful in strengthening our newly created urological department. It was like a test for us to see if, in the future, we are able to carry out the most difficult surgical procedures in the various urological subspecialties.

Our department is now one of the two departments in Georgia where almost all types of adult and paediatric urological surgical interventions are being carried out.

I should, once more, like to express my gratitude to the EAU and the Alexander von Humboldt foundation for their support of a special friendship and making and exchange of professional experience among urologists from different countries possible.