

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 peninsular. Many Jews were driven out



Amatus Lusitano

Amatus Lusitano (João Rodrigues De Castelo Branco) 1508? 1511? – 1568

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 possibly one of Alderete's disciples and was a fellow student of André Laguna. He returned to Portugal in 1529, and practised medicine in Coimbra 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. In 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 1541 he moved to Ferrara, where he taught in the University and mixed with famous doctors and anatomists such as Falópio and Canini. In 1547, due to the general persecution, he fled to Venice and Ancona and in 1550 to Rome where he treated Pope Paulo III (despite his Jewish origins), and subsequently moved to Pesaro and Raguza (nowadays known as Dubrovnik), finally settling in Salónica, in Macedonia in 1559, where he was nominated First Doctor of the Grand Turk. He died in 1568 in the plague epidemic in Salónica.

Amatus - an erudite man, thinker, polyglot, 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? Alderete? Filipe Velez?) in the treatment of tightening of the urethra, with dilation 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 "Hundreds of medicinal cures" ("Curationem Medicinalium Centuria Septem"). In this compendium he wrote about the observations, advice and treatment of 700 (seven hundreds) clinical cases - many of a urological nature. These cases include nephritis, syphilis, hypospadias, urethrotomy (Hundred I), incontinence due to vertebral fracture, hermaphroditism, priapism, fistules (Hundred II), gonorrhoea, hydrocele (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 calculi, 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 the period, 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 peninsular in the 16th century.

TRANSITIONS

APPOINTED Konstantinos Dimopoulos, professor of urology of the University of Athens and chairman of the Governing Council of the University of Peloponnese, has assumed chairmanship of Rectors and Chairmen of the Governing Councils of the Greek Universities for the academic year 2007-2008. As chairman, he organised the 56th council summit which was held from 2 to 4 November 2007.

RE-ELECTED Prof. Nikolai Lopatkin, academican of the Russian Academy of Medical Sciences, was re-elected as chairman of the Russian Society of Urologists during the association's national congress held in November last year. Lopatkin headed specialists from the Research Institute of Urology who were the first in Russia to introduce into clinical practice the method of interstitial radiotherapy (brachtherapy) of local prostate cancer. Also elected was Dmitry Pushkar as the society's General Scientific Secretary.

PASSED AWAY Judah Folkman, MD, whose groundbreaking work involving tumour angiogenesis led to the development of targeted therapies for the disease, died January 14 in Denver, USA, of an apparent heart attack. He was 74. At the time of his death, Folkman was director of the vascular biology program, Julia Dyckman Andrus Professor of Pediatric Surgery, and professor of cell biology at Children's Hospital in Boston, where he formerly was surgeon-in-chief. His research identified two natural compounds, endostatin and angiostatin, capable of shrinking and eradicating cancer in mice.



Cooperation and friendship between Bonn and Tbilisi



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We very much appreciated the financial support of the EUSP's "Visiting Professor Programme" and of the Alexander von Humboldt Foundation, which made it possible to establish this unique collaboration.

Professor Stefan Müller, Chief of the Urological Department of Bonn University Hospital (Germany) and I collaborated already 11 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 1996-1997. At that time we carried out research on chemolitholysis 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.



Stefan Müller and Guram Karazanashvili

In 2005 I was awarded with a very prestigious scholarship from the Alexander von Humboldt Foundation (Germany) and spent 14 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 my surgical 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 anaesthesiologist from Georgia was sent to Germany 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). This visit was the cornerstone in establishing a partnership between our institutions. During this visit Professor Müller performed 5 operations in patients with difficult oncurological 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 oncurology - 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 in the operating room and just to 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 socioeconomic 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.

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