

COMMENTARY

Otolaryngology and Irish literature: An important medico-literary alliance

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ABSTRACT

For a comparatively small island, Ireland has made a disproportionately large contribution to world literature in all its aspects. The literary lineage of those who pursue medicine and also write is long and well established. The Irish contribution to world literature in all its aspects is well documented. Less explored, however, is the prominent influence of Dublin-based otolaryngologists in the Irish literary movement at the turn of the last century. Here, we examine two such figures, Sir William Wilde and Oliver St. John Gogarty, and their pivotal roles both professionally and in establishing Ireland on the world's literary stage. During the early part of the 1800s, otology was perceived as a defunct subspecialty that could be adequately managed, without much expertise, in the primary care setting. It was through the efforts of William Wilde and others that otology gained clinical and scientific credence during the latter half of the 19th century.

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William Wilde: Advances in Aural Surgery

William Wilde (Fig 1) followed many avocations; 10 are listed on the memorial plaque on number one Merrion Square, Dublin, where he resided for most of his life. It reads: "Sir William Wilde, 1815-1876. Aural and ophthalmic surgeon; archaeologist; ethnologist; antiquarian; biographer; statistician; naturalist; topographer; historian; folklorist."¹ He is now best known as the father of Oscar Wilde. Yet William Wilde was no ordinary man and, had he not sired a genius, might have been a little more famed in his own right. He is now considered by many as the founding father of otolaryngology in Ireland, and in addition, he was the author of significant works on poetry, archaeology, and folklore, particularly concerning his own native Ireland.

In 1837, at 22 years of age, he graduated as a doctor, and he went on to establish the first eye and ear hospital in

Dublin in 1844 (Fig 2). The following year, he became editor of the *Dublin Journal of Medical Science*. Wilde also contributed a scientific sanitary report on the city of Dublin² and was subsequently appointed Census Commissioner to Ireland in 1854, which prompted him to publish an essay on the social conditions of the deaf and dumb.³ In the wider sense, Wilde's professional legacy is his lasting contribution to otology, which in the mid-1800s was a subspecialty that had fallen largely by the wayside. Wilde published *Aural Surgery and the Nature and Treatment of the Diseases of the Ear* in 1854, reinvigorating interest in the specialty.⁴ Among the subjects treated in this book were mastoid surgery, including "Wilde's incision," and middle ear infection as a source of brain abscess, somewhat ironic when we consider the manner of his own son's death, discussed here at a later point. Coincidentally, around this time he performed surgery on the father of another famous Irish dramatist and playwright, George Bernard Shaw.

Wilde was knighted in 1864 for his medical contributions and involvement in the Irish census of 1841. His reputation was severely damaged at this point, however, by allegations from a former patient and daughter of a colleague, Mary Travers, that he had seduced her two years previously while she was a patient of Wilde's. This was followed by a series of personal tragedies. His daughter Isola died from meningitis in 1867, and two daughters of a mistress died in a house fire in 1871. From this he never fully recovered, and in this respect, the last year or two of his life parallel those of his famous son, unprolific and spent largely in social isolation.

Oscar Wilde: Beware the Discharging Ear

Despite a vast array of literature concerning all facets of Oscar Wilde's life, there has been little focus on his illness and its management.⁵ It was initially held that Wilde died from tertiary syphilis, a notion that was totally unfounded.⁶ More recent biographies on the subject further endorse this theory,⁷ though there is no suggestion that Wilde had any physical manifestations of the disease in his lifetime. More important, he would never display the neurological impair-

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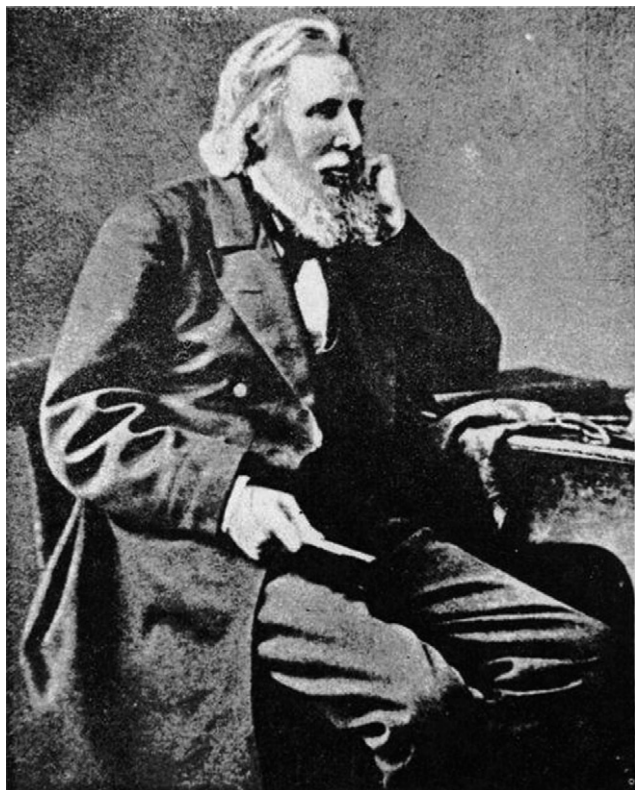


Figure 1 Sir William Wilde (1815-1876), otologist and father of Oscar Wilde.

ment, with the exception of the few days prior to his death, that is synonymous with the tertiary phase of the disease.

What we do know for certain, however, is that Oscar Wilde (Fig 3) died from meningoencephalitis secondary to chronic right middle-ear disease.⁵ The exact onset of these otological problems is uncertain. The first record of an otolaryngology consultation is with Sir William Darby, an eminent otolaryngologist in London, for right otorrhea and a precipitous decline in his hearing, just prior to Wilde's two-year incarceration at



Figure 3 Oscar Wilde (1854-1900), playwright.

Reading Gaol in 1895 (Fig 4). At this point, Wilde was falsely reassured that his hearing would eventually be restored. This assumption proved incorrect.

The next reference to Wilde's ear came from a petition that Wilde himself forwarded from Reading Gaol to the Home Secretary in July 1896. He had at this point lost almost all hearing in his right ear secondary to a perforated



Figure 2 Royal Victoria Eye & Ear Hospital, Dublin, Ireland, founded by William Wilde.

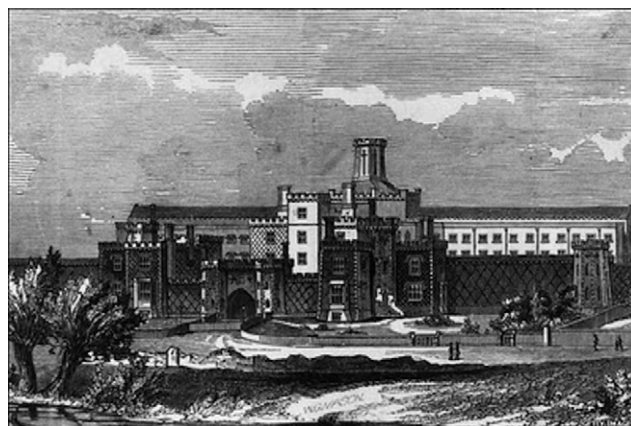


Figure 4 Reading Gaol, where Oscar Wilde was imprisoned from 1895 to 1897.

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