

BOOKS

Poisonous cures

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Poison in Small Measure: Dr. Christopherson and the Cure for Bilharzia

Ann Crichton-Harris
Brill; 2009.

The history of medicine is littered with researchers who were later lauded for discoveries their contemporaries ignored. Think of Ignac Semmelweis's struggle to eliminate "child bed fever" through ward-based hygiene or John Snow's insistence that cholera was water-borne, not airborne.

In other cases, real breakthroughs are simply never acknowledged. The issue is not the science in these cases, but the prickly personalities of the researchers themselves. Science is a communal affair and those who do not play nice with their fellows are rarely remembered generously.

That, this new biography suggests, is the story of British physician John B. Christopherson (1868–1955), one among the legions of colonial physicians dispatched across British and French empires in the late 19th and early 20th centuries. As an administrator and physician, Christopherson founded the Sudan Medical Service, built the Khartoum Civil Hospital, brought British nursing to the colonial medical service and, in 1902, led a brilliant campaign against a local smallpox outbreak.

As a medical researcher, Christopherson authored 95 papers on tropical diseases. He identified a critical spirochete that caused relapsing fever (*Borrelia recurrentis*) and, most importantly, pioneered the use of antimony tartrate as a successful treatment for schistosomiasis (bilharzia).

Despite these achievements, after his Sudanese medical service ended, he never received an Order of the British



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Empire, knighthood, prestigious post or posh sinecure. Christopherson's niece, Toronto writer Ann Crichton-Harris, spent eight years in an attempt to understand why the pride of her family, "the kindly old uncle" was so thorough ignored by his contemporaries and by history.

To her credit, *Poison in Small Measure: Dr Christopherson and the Cure for Bilharzia* is not an attempt to bring delayed fame to a deceased family member; rather it aims to provide an understanding of the relation between science and personality in the world of scientific fame and recognition. "Christopherson was in Sudan for the better part of 18 years," Crichton-Harris writes, "and during that time three major personal conflicts interfered with his career path."

These conflicts with colleagues and superiors owed much to what she acknowledges was a stubborn and unbending insistence on his own views and his own way of doing things.

One of Christopherson's powerful adversaries for example, was Dr. Andrew Balfour, director of the Wellcome Tropical Research Laboratory in

the Sudan and later director of the London School of Hygiene and Tropical Medicine in England. He and Christopherson, who was the medical director of the Sudan hospital, engaged in periodic turf wars and chronic administrative frictions that later shifted into a battle over naming rights of a spirochete that Christopherson believed caused relapsing fever. Was the microscopic entity a new thing, and thus a new disease, or just a parasite already known? Was it Christopherson's discovery or another's?

Others might have found a way to share the bragging rights or at least smooth the disagreement. But Balfour was unbending and Christopherson remained strident. For a time it looked like the whole thing could only be settled by a threatened suit Balfour was to initiate in British Courts.

In 1919, Christopherson published a germinal paper describing his use of intravenous injections of antimony tartrate to treat 70 cases of schistosomiasis. "It was an important breakthrough for a disease that had wrought havoc on millions of people," his biographer states.

Almost immediately, others jumped in to stake their claims. Major C.J. Wiley claimed to have treated one case in Cairo with antimony tartrate and the race was on. In competing papers, others insisted they had similarly treated the disease, or advocated its use, even if they did not publish their findings.

Christopherson's claim prevailed — his study was definitive — but his political capital was expended. Returning to England, he continued medical work and research until his death in 1955. He was a hero in his family but otherwise largely forgotten until this welcome, new biography was published.

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