On the misuses of medical history

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On the Misuses of Medical History

A surprising amount of bad history passes peer review in the sciences and medicine. What do we mean by “bad history”? One example would be the misuse of historical images. Many images of so-called plague used in current scientific publications actually depict patients suffering from leprosy.1 Another example is when commonly repeated claims about historical persons or events are lifted from earlier scientific or medical writings, without checking whether professional historical scholarship has revised earlier interpretations. A medical article on vaginismus might dutifully repeat that the condition was first reported by the female medical writer “Trotula” in the 16th century, perpetuating a confusion debunked over 30 years ago between an authorial fiction, “Trotula,” and an authentic 12th-century healer named Trota. The passage always cited gives a remedy for a vaginal constrictive, not – as is invariably implied – a disease entity.2

Scientific and biomedical authors seem compelled to include such historical references, but history is an active, dynamic field of inquiry, with basic methodologies not unlike those that drive science.

What can be done? First, we should recognize that the norm in history is that the consensus changes as new questions are asked and new sources uncovered. Citing a 1968 survey on the Justinianic Plague because it happens to come up in a PubMed search is not appropriate when excellent historical scholarship on the pandemic has long since superseded that earlier work.3

No one now needs to be confined by the disciplinary firewalls that formerly kept disciplines unaware of what others were doing. We all have access to the riches of digital databases, but these too carry the risk of misinterpretation.4 Although much good work is online, it would be more valuable to find and talk to historians. Experts who specialize in the times and places under examination rarely feature in the peer-review process for science or biomedicine journals, and humanities scholars are rarely indexed by the major scientific and biomedical bibliographical databases. The bulk of work that has been done on the Justinianic Plague in the past decade does not appear in PubMed, SciVerse, or any other scientific database that we have consulted.

Authors and editors should be expected to invest the same amount of time on a literature review for historical questions as they do for the most recent consensus work in their own field. The payoff would be greater accuracy in historical claims and better science. As citations themselves become minable data, historical methods demand due acknowledgement.5
References