Charcot's skepticism
O ceticismo de Charcot

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ABSTRACT
This paper brings a short review about a peculiar characteristic of Professor Charcot, the father of neurology: the skepticism, emphasizing his personal view regarding the prognosis of several neurological conditions.

Key words: Jean-Martin M Charcot, neurology, history, prognosis

RESUMO
Este artigo traz uma revisão acerca de uma característica peculiar do professor Charcot, pai da neurologia: o ceticismo, enfatizando a sua visão pessoal sobre o prognóstico de diversas doenças neurológicas.

Palavras-Chave: Jean-Martin Charcot, neurologia, história, prognóstico

Jean-Martin Charcot (1825–1893), the brilliant French neurologist referred to as the father of modern neurology and the first professor of nervous system diseases, is regarded as one of the most important researchers in the field of clinical neurology in the 19th century (Figure)¹⁻³.

Neurology emerged as a specialty in Internal Medicine in the second half of the 19th century, at La Salpêtrière Hospital, in Paris, France, through the work of Charcot and his many disciples. In this period, the French School of Neurology was known and respected as the Mecca of clinical neurology, a center of reference for many physicians, who visited Charcot and his service from all over the world¹⁻³.

From a personal standpoint, his biographers outlines a particular image of austere presence, reserved manners, shyness, economy of gestures and an impassive and impenetrable unmoving face. This austere and authoritarian personality was also notorious among other European neurological circles. German neurologists, for instance, gave him the nickname Napoleonkopf (Napoleon’s head)¹⁻⁶.

The aim of this study is to describe one facet of the Charcot’s personality: the skepticism.

SKEPTICISM

It was only in modern times, after René Descartes, that skepticism became synonymous with hyperbolic doubt⁷. In its traditional form (called “Pyrrhonian skepticism”), skepticism meant to withheld assent to every non-evident proposition and the continuous pursuit of knowledge (suspending judgment if that knowledge is discoverable or inapprehensible). This meaning of skepticism is founded in its etymological sense, since the Greek radical present in the word “skepticism” meant “search”⁸. Another important variety of skepticism

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Over the last decades, neurology has evolved from therapeutic nihilism to the development of up-to-date and promising therapeutic interventions destined to several diseases. However, in the case of most neurodegenerative disorders, such as Alzheimer's disease, Parkinson's disease (PD), and particularly, spinocerebellar ataxias, hereditary neuropathies, and amyotrophic lateral sclerosis (ALS), the available interventions do not significantly interfere with disease progression. Additionally, neurology has been considered to be a kind of “bête noire” for the medical student, due to the complexity of its anatomical basis, physiology, and clinical pathology. Neurophobia is a term coined by Józefowicz, meaning “a fear of the neural sciences and clinical neurology”.

The skepticism regarding the management of several common neurological diseases is real and inherent to neurologists since Charcot, in the XIX century. In fact, Charcot was not a therapeutic nihilist; he investigated the efficacy of different drugs for the treatment of disorders, including PD (anticholinergic drugs) and epilepsy (bromides), as well as non-pharmacological interventions such as hydrotherapy and electrical stimulation, among others (vibratory chair and helmet, for example).

Interesting enough, in 1892, one year before his sudden death, Charcot published a short essay entitled La Foi qui Guérit, or “Faith-Cure”. On the other hand, evidence shows that Charcot described and studied several neurodegenerative diseases with a great dose of skepticism specially referring to the prognosis of patients.

CHARCOT’S SKEPTICISM

Charcot’s view of neurological disorders was that their primary cause was hereditary, with no possible cure, consequently requiring palliative care. Charcot emphasized the necessity to protect patients with neurological diseases from dangerous interventions, always pointing out the improvement in the quality of life. One famous quote by this physician was: “If you do not have a proven treatment for certain illnesses, bide your time, do what you can, but do not harm your patient”.

ALS or Charcot’s disease, is the most common motor neuron disease (MND). It was described by Charcot in 1874, with great clinical and pathological precision. Since then, no effective treatment to this fatal disease has emerged. When Charcot was examining a patient with ALS, during the famous “Leçons du mardi”, he said to the audience: “The prognosis is deplorable; alas, he is a lost soul and it is only a question of time”.

PD is another neurodegenerative disease studied extensively by Charcot, including seminal contributions to its clinical definition. On a different occasion, Charcot was reviewing pharmacological treatments of PD, and then exclaimed: “Everything, or almost everything, has been tried against this disease. Among the medicinal substances that have been extolled, and which I have myself administered to no avail, I need only enumerate a few.”

Tourette syndrome (TS), a complex disorder described by Gilles de la Tourette under Charcot’s supervision, was considered to be hereditary with a combination of tics and behavioral problems. During the famous Tuesday lessons, in 1888, Charcot presented a child with tics and coprolalia. Regarding the therapy of this condition, he stated: “Certainly it will be very difficult to ever get him back to normal”.

In another occasion during the Tuesday lessons, in 1888, Charcot presented to the audience two young men with ataxia due to Friedreich’s disease, a hereditary disease described by Nikolaus Friedreich in Germany, in 1862. Charcot stated about the prognosis of this disease: “All I can tell you is that it is terrible. The disease never stops and just continually progresses.”

Finally, once Charcot was discussing a patient with amyotrophy of Charcot-Marie (Charcot-Marie-Tooth’s disease), and while explaining the inheritance, course and prognosis of this disease, he cited: “What have we done, Oh! Zeus! to deserve this destiny? Our fathers were wanting, but we, what have we done?”

In conclusion, Professor Jean-Martin Charcot had a complex personality; he was an authoritarian, austere, and shy person, but his personality also included some characteristics of skepticism and profound understanding of the prognosis of neurological diseases.
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References