EDITOR’S NOTE

The 12th Brazilian Congress on the History of Medicine took place in Curitiba, Paraná, on November 7-10, 2007, at the headquarters of the Paraná Medical Association, under the chairmanship of Professor Hélio Germiniani (http://www.eventosprime.com.br/congressosbhm2007/). The previous congress of the Brazilian Society for the History of Medicine (http://www.sbh.org.br/) had been held in Goiânia, Goiás, and the next one will be in Fortaleza, Ceará, on November 12-15, 2008. The organizing committee welcomes suggestions on conferences, open topics, posters, and panels.

One member of the team at História, Ciências, Saúde — Manguinhos, along with the author of these humble lines, took part in the Curitiba congress, where we spoke about the journal at a round table and promoted it through a poster and through subscription sales. I would like to take this opportunity to thank the chair of the scientific commission, Clotilde de Lourdes Branco Germiniani, for her support and for the peer reviews she has done for our journal.

Two papers published in the first 2007 issue of História, Ciências, Saúde — Manguinhos (v. 14, no. 1) analyzed the trajectory of the Brazilian Institute for the History of Medicine, founded in 1945 by physician Ivolino de Vasconcellos. Brazil’s present-day Society for the History of Medicine was born two years after his death, in November 1997, at the initiative of Ulysses G. Meneghelli (Ribeirão Preto, SP), Joffre Marcondes de Rezende, and Argeu Castro Rocha (the latter two from Goiânia), with the support of renowned physician and historian Carlos da Silva Lacaz, who passed away in 2002.

Staff members at the Casa de Oswaldo Cruz and students and faculty at universities and graduate centers of history whose research focuses on medicine and public health soon began taking part in the events organized by these doctors. Yet relations between the two groups have been characterized by a certain mutual wariness. If you attend a Society conference, one glance will reveal the presence of two populations. One, accounting for the vast majority, comprises male physicians and students of medicine, who are almost always impeccably dressed in suits and ties, with their female counterparts wearing similarly formal attire; the other, historians sporting blue jeans or other casual clothes. These wardrobe choices reflect quite different *habitus*—and I’m using the term here in the full breadth intended by Pierre Bourdieu: patterns of thinking, behavior, and taste that result from the internalization of social structures through group experiences and that act as frameworks for perceptions and actions, virtually constituting a class *ethos*.

From conference to conference, the hegemonic group has displayed varying degrees of openness towards the newcomers, but the endogeneity of the historian-physicians was particularly noticeable in Paraná. One example: the Carlos da Silva Lacaz award, inaugurated in 2006 by the Brazilian Society for the History of Medicine, only accepts monographs by students at medical teaching institutions, thereby excluding the growing production from the fields of the human sciences.

From the perspective of a historian holding a formal degree in history, much of what was presented at the conference breeched important standards of our profession. The
communications contained little original research and were consequently grounded in few primary sources. It was hard to place into historical and social context facts and faces drawn from a linear, evolutionist approach to history that chains together great names and dates. Although the doctors who organize these events do so with utmost professionalism, for most of them history is something of a sidebar to their professional lives; it is a dilettante’s pastime, to which some devote themselves passionately.

Despite their differences, historian-physicians and historians of medicine share a basic concern: the humanization of medicine. They can have a common agenda: importantly, solidifying a place for the history of medicine in medical schools and at history departments, as well as sparking interest in the topic among the general public. Both groups have much to gain by strengthening their ties: while the former clearly fail to understand the contents and methodological tools of history, it is equally true that historians are not familiar with medicine’s diverse languages.

I would like to close this letter by urging our readers of História, Ciências, Saúde — Manguinhos to take part in the next congress of the Brazilian Society for the History of Medicine in the capital of the state of Ceará—a place, I should mention, well worth visiting.

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Editor