HISTORICAL PERSPECTIVES OF THE AMERICAN ASSOCIATION FOR THORACIC SURGERY

HOWARD LILIENTHAL (1861-1946)

Howard Lilienthal, fifth president of The American Association for Thoracic Surgery, was born in Albany, New York, in 1861. Prepared by Von Below of Saratoga, he graduated with honors from Harvard College in 1883 and from Harvard Medical School in 1887. Standing first in the house staff examination of Mt. Sinai in New York, he began his lifelong association with the surgical services of that institution, rising rapidly to the rank of attending surgeon. In 1909 his growing interest in thoracic surgery led him to join the surgical staff of Bellevue Hospital as well. He was professor of clinical surgery at Cornell.

A master surgeon, his clinical interests were broad. His first publication dealt with suture of tendons and nerves at the wrist; he was among the first to advocate staged suprapubic prostatectomy; in the early days of clinical radiology he advocated radiographic control of osteoplastic procedures; he pioneered one-stage cholecystectomy for acute cholecystitis. At the turn of the century he became aware of the possibilities of thoracic surgery as the feasibility of open thoracotomy was established. Indeed he was the surgeon in the first operation (a patient with lung abscess) done with intratracheal anesthesia (Ellsberg). He was particularly interested in bronchiectasis and performed his first lobectomy for this disease in 1914. From this time on his clinical research and surgical practice were directed principally toward thoracic disease, culminating in his classic two-volume *Thoracic Surgery—the Surgical Treatment of Thoracic Disease*, the first textbook on the subject in English (1925). In contrast to today's publication practice, it is primarily a single-authored record of wide personal experience and study.

In the early twenties he toyed with drainage of tuberculous cavities and was among the early followers of Archibald's pioneering thoracoplasties. At the 1921 meeting of the American Surgical Association he reported a landmark resection of the lower third of the esophagus, a multistaged procedure that involved constructing a skin tube *en passant*. The patient did well for more than a year. The following year, Lilienthal reported his major series of 15 single lobectomies for bronchiectasis with six deaths plus 10 multiple lobectomies with seven deaths. These

were multistaged affairs similar to tourniquet lobectomy, which antedated individual ligation techniques.

In 1923, at the height of his clinical career, Lilienthal served as president of The American Association for Thoracic Surgery. He continued to participate actively at surgical meetings, a dependable discussant on a wide range of surgical topics. At the American Surgical Association meeting of 1927 he led the discussion of the surgical treatment of bronchiectasis as well as drainage and collapse procedures for tuberculosis. Resection for the latter was not even mentioned, and cancer of the lung was not on the program.

Tucked away in the Fiftieth Reunion Report of his Harvard college class is an interesting autobiographical sidelight. In 1917-1918 Lilienthal served overseas as chief surgeon of Base Hospital No. 3 (Mt. Sinai) and for 2 months as ranking surgeon at Base Hospital 101, St. Nazaire, dealing with a great number of chest wounds, particularly chronic empyema. In September of 1918 he moved up to Evacuation No. 8, close to the front, for 2 months. While he was there his only son, Howard, Jr., who had volunteered while still an undergraduate at Harvard, a private first class brigaded with the British, was killed in action. At war's end Howard, Sr., was cited for a Distinguished Service Medal but, as he ruefully wrote, the medal never arrived.

Mark Ravitch, in his chronicles of the American Surgical Association, describes Lilienthal as elegant and aristocratic, very much in keeping with the Mt. Sinai tradition. His scholarly achievements, broad interests, and hard work are evident in his textbook. He was also a first-rate artist, working chiefly in water colors and pastels, a discerning critic and lover of fine music, and a great sportsman with rod (dry fly, of course) and gun.

Lilienthal's last recorded appearance at an American Surgical Association meeting was in 1938. In his late seventies and early eighties, with failing vision, he rested from his surgical labors and turned back to water colors and pastels, and to short stories, particularly for children. He died in 1946 at the age of 85.

J. Gordon Scannell, MD