When addressing the Royal College of Physicians in London in 1944, Sir Winston Churchill remarked that "the longer you look back, the further you can look forward". No branch in history can claim a longer history than the art of medicine. The practice of medicine is in a continuous state of evolutionary progress, with today's advances being considered outdated and outmoded tomorrow. Disease are not unchanging phenomena. Their appearance and character are subject to historical development and varying geographical and demographical conditions of population. Some diseases seem able to disappear, other new ones appear. The overall picture of disease within one country or community, which one can call the "disease panorama", varies from time to time, from country to country, and from town to town. Infectious disease, which only a few generations ago formed the largest group in our statistics on mortality and morbidity, has been driven back by the advance of medicine. Instead two other groups of disease - cardiovascular disease and tumours - have taken the first place, a development which is partly connected with a rising average expectation of life. The continuous assessment of the changing demography and disease panorama in a community is essential to
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establish the priorities of the health services. The study of medical history is the record of how our present knowledge of medicine has been gained and of how we are learning to apply that knowledge to the prevention, control and treatment of disease. Medical history, by exposing the facts and results, allows the development of prudence and foresight. It has been said that those who forget history will have to repeat it.

The history of disease stretches very far back in time, for as long as man has existed he has been tormented by disease. If one also includes animal disease, then one must take the history of disease back to early pre-history measured in geological period of time. Palaeopathology has described traumatic, infective, and degenerative bone lesions in animal fossil remains with the oldest known fracture and evidence of osteomyelitis being described in the Permian reptile Dimetrodon. The Upper Pleistocene hippopotamus from Ghar Dalam Cave at Birzebbuga, Malta dated by electron spin resonance to 130000-110000 years BP (Riss-Würm interglacial or Early Würm glacial) has been shown to have suffered osteoarthritis, fractures and congenital variations. The vertebral osteoarthritis appeared to be most pronounced in the thoracic vertebra, in contrast to cervical and lumbar
vertebrae. This observation suggests that the thoracic segment of the Maltese Pleistocene hippopotamus was subject to a greater environmental stress than either of the adjoining segments. The environmental stress responsible has not been elucidated, but may have been decreased buoyancy effects caused by lower water levels in the Maltese Pleistocene rivers and lakes.

Human disease similarly has a long history. Some skulls of the South African hominoid Australopithecus dated to about 1.5 million years show a distinctive form of fracture consisting of two depressions lying close together. These are considered to be the blows made by an antelope humerus, since its wide condyles correspond with the depressions. More recent Palaeolithic and Neolithic human remains in Europe and elsewhere have also yielded pathological material, while art representations and burial customs have also suggested a preoccupation of these people with fertility and death, often giving rise to magico-religious medicine.

The history of medicine considers the development of the art of healing from ancient times. Medical practice has changed from magico-superstitious concepts prevalent mainly in prehistoric and ancient communities, moving on to a philosophical type of practice that made its appearance during the Classical Period and laid the ground for the eventual development of the scientific basis of modern medicine. The study of the history of medicine trains the physician to question even what appears to be scientific dogma today. It helps the physician realise that "It is only when we know very little about a subject that we are quite sure; and with knowledge, doubt arises and grows" [J.W. von Goethe, German poet 1749-1832]. The study of medical history helps to put current accepted scientific dogma in perspective and enables the physician to acknowledge the work of his predecessors who made giant strides often without any sound foundation of science, for "We are like children standing on the shoulders of a giant, for we can see all that the giant can see, and a little more" [Guy de Chauliac, 14th cent. surgeon]

The influence of disease upon the history of mankind has been somewhat neglected by professional historians, the main contributions being generally made by the medical fraternity. History and disease,
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however, must be, like mind and body, inseparable, the one being inevitably influenced by the other. The records of historical pathology fall into three different categories of somewhat different scientific value:

1. Written records, whether accounts of variations in disease or descriptions of epidemics, are often extremely subjective and coloured by prevailing medical trends of thought or by lay prejudice and beliefs.

2. Representations of diseased conditions such as drawings, paintings or models may be diagrammatic, subjective and possibly founded on misapprehensions and thus may make possible divergent interpretations.

3. Nature's records in the form of the preservation of hard human remains are reliable but unfortunately not always easy to interpret.

Only 93 kilometers away from Sicily and 290 km from Northern Africa, the Maltese group of islands occupies a central position in the Mediterranean. This central position made the Islands an important meeting place for the various Mediterranean cultures throughout the ages. For an adequate understanding of Maltese medical history, one must not consider events in the Islands in isolation from contemporary developments in the Mediterranean basin, but must view Maltese
Though history is a continuous process without any clear-cut distinctions between one period and another, the history of the Maltese Islands can be conveniently divided into five basic periods of study.

A. **Prehistory** ranging from the earliest times to about the ninth century BC. when Malta was occupied by Neolithic Man.

B. **Ancient History** leading up to the ninth century AD. by which time Malta had witnessed the arrival of the Phoenicians, the Carthaginians, the Romans & Byzantines, and the Arabs.

C. **Medieval History** leading to the sixteenth century. During these centuries, Malta changed hands a number of times and was dominated by the Arabs, the Normans, the Angevins, the Aragonese, and the Order of St. John.

D. **Modern History** follows the Great Siege in the mid-sixteenth century up to the expulsion of the Order by the French, and of the latter in 1800.

E. **Contemporary History** is the final phase leading up to recent events, with the Islands falling under British dominion until the attainment of Independence within the Commonwealth in 1964 and the declaration of a Republic ten years later.
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The medical history of the Maltese Islands before the mid-sixteenth century presents a general dearth of information, and any excursions into ancient and medieval history must be based on archaeology, scant written material and often conjecture. In the modern and contemporary periods, written material becomes abundantly more available allowing a deeper analysis of disease processes and developments in medical practice.

The Maltese Islands are rich in all aspects of cultural heritage, including that of medicine and related subjects. The medical historical heritage on the Maltese Islands can be traced back as far as man has been recorded to inhabit the Islands. Thus items related to "superstitious medicine" have been excavated from several prehistoric sites in Malta and Gozo. Other items pertaining to medical history have also been excavated from various Punic and Roman sites in Malta and Gozo, these items reflecting the superstitious medicine as practised in these cultures, and also mark the introduction of an organised medical profession with "philosophical concepts" in medical care, concepts which became stronger during the medieval periods. The advent of the Order of St. John of Jerusalem further gave an important impetus towards Maltese medical heritage with a boost, not only to public health concepts, but also towards the introduction of
"scientific medicine" introduced during the Renaissance. The nineteenth and twentieth century saw the scientific advances made in concepts related to microbiology and pharmaceutics. The close relationship between Malta and Britain during this new renaissance in medicine allowed for the early introduction of these advances in medical concepts, besides allowing Maltese doctors and foreign researchers in Malta to contribute towards these advances.