

Correspondence

Moses Maimonides' Treatise on Asthma

Sir,—The Abstract of Dr Fred Rosner's authoritative paper, in your April issue, on Moses Maimonides' *Treatise on Asthma* refers to "a brief biographical section", which does not appear to be included in the text. May I therefore be permitted to provide a few details of the life of Maimonides, who was physician to princes, and was described by Sir William Osler as "the prince of physicians".

Moses Maimonides was born on 30 March 1135 in Cordoba, in Moorish Spain, which was at that time a great seat of Jewish learning. There is now in Cordoba a charming statue of Maimonides situated near his birthplace. Maimonides was descended from an intellectually aristocratic family of Jewish scholars, and his father was Rabbi Maimon. When Moses himself later became a Rabbi, he was known as Rabbi Moses ben Maimon, the initials of which R'M'B'M led to him being referred to as the RAMBAM. Maimonides is the Greek version, meaning the son of Maimon.

As a lad Maimonides' brilliance was soon demonstrated by his mastery of Hebrew, Arabic, and Spanish Christian writings. In 1148, when he was aged 13, a new Arab regime tried to enforce the Moslem religion. Maimonides and his family fled from Cordoba; later, in 1159, they sought refuge in Fez, in Morocco; and later still they sailed to Palestine. Finally, in 1165, Maimonides settled in Egypt, at Fostat, near Cairo, where he was Rabbi and leader of his community, and where he also became renowned for his studies in theology, philosophy, and logic, as well as mathematics and astronomy. Maimonides' philosophy and theology combined Greek thought and Jewish feeling, which produced much controversy among contemporary Jewish scholars, so that later he was to be dubbed "the Jewish Martin Luther".

It was not until 1166, when Maimonides was aged 31, that circumstances forced him to seek a means of livelihood, and he took up the study of medicine. His great qualities ensured his rapid success as a physician, and in 1174, aged 39, he was appointed Court Physician to Saladin, the Sultan of Egypt. In 1187, the fall of Jerusalem to Saladin led to the Third Crusade, during which Richard, Coeur de Lion, fell sick at Ashkelon. The fame of Saladin's physician reached Richard, who invited Maimonides to become his personal physician and to return with him to England. Maimonides refused, replying that the massacre of Jews in London, which accompanied the coronation of Richard, proved that Cairo was a safer place for a Jew than London!

Maimonides was the author of at least 10 medical treatises, all (with the exception of one in Hebrew) written in Arabic. The *Treatise on Asthma* (1190) was written for the benefit of Saladin's son and heir, Alfadhel, who suffered from melancholia and asthma, for

which Maimonides recommended among other measures a change from the humid air of Alexandria to the dry heat of Cairo.

Maimonides died on 13 December 1204, aged 69, and, at his own request, his remains were transferred to Tiberias, where his tomb may still be seen in modern Israel. Maimonides was undoubtedly one of the outstanding figures of mediaeval times. A great polymath, who excelled in theology and philosophy, his main interest was probably not in medicine. Nevertheless, he has left his mark in medical history. Although Ancient Egyptian, Hebrew, and Greek writings refer to asthma, and Aretaeus the Cappadocian (ca 200 AD) described the condition, it is true to say that it was Moses Maimonides who wrote the first major treatise on asthma.

ALEX SAKULA

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Interstitial fibrosis and alveolar cell carcinoma in a family

Sir,—In April we reported a family in which these two diseases occurred as an autosomal dominant trait (*Thorax* 1981;36:252-8). Since then, patient 6 has died. Additional azathioprine and prednisolone did not alter his progressive illness. Post-mortem studies showed extensive honey-combing with massive fibrosis. There were almost no normal acini left. At some sites, changes of the bronchiolar epithelium consistent with alveolar cell carcinoma in situ were present. Ante-mortem sputum cytology and radiographs had given no indications of developing tumour. No metastases were found.

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Correction

Palliative side-to-side oesophagogastrostomy for unresectable carcinoma of the oesophagus and cardia Kwun L-B, Kirschner PA. *Thorax* 1981;36:441-5.

We very much regret that Figure 4 on page 444 of the June issue of *Thorax* was printed upside down, and we apologise to the authors of the paper and readers of the journal for this mistake.