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SIR FELIX SEMON, 1849-1921

HIS CONTRIBUTION TO LARYNGOLOGY*

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THE centenary of the birth of Sir Felix Semon seems an appropriate occasion to study his life and work and attempt to assess the value of his contribution to laryngology. The character and career of Sir Felix Semon is a fascinating and complex study. He was of German Jewish origin, came to London at the age of twenty-six knowing hardly one word of English, with only a meagre financial backing but with some useful introductions. He took up laryngology from scratch, and within seven years had become the first laryngologist to be appointed to a general hospital in London, while in a few more years he received such world-wide recognition as has come to no other laryngologist in any part of the world. How did he do it—how *could* he have done it? are obvious questions to which I have tried to find the answer.

In order to understand the importance of the contribution of Semon to laryngology one must look back to the times in which he lived. Laryngology was still quite unknown when Semon was born. Garcia discovered auto-laryngoscopy in September, 1854, but laryngology as a branch of medicine began in Vienna in 1857 and 1858, urged on by the extraordinary controversies for priority between Türck and Czermak, their conflict becoming international and carried from Vienna to Paris, Berlin and London. Morell Mackenzie learned the use of the laryngoscope from Czermak in Budapest in 1859; Türck was appointed professor of laryngology at Vienna in 1864; and in 1870 a university laryngological clinic was instituted at Vienna, with von Schrötter as chief.

* Read at a Meeting of the Osler Club, December 1st, 1949.

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In England Morell Mackenzie had founded the Throat Hospital, Golden Square, in 1863, but laryngology on the whole was held in contempt by the leaders of the medical profession. In the 'seventies the teaching hospitals regarded laryngology with complete indifference, and diseases of the throat were in the charge of the most junior physician or surgeon on the staff. Thus Hughlings Jackson, "the Socrates of neurology", was in charge of the throat department at the London Hospital, Lauder Brunton the cardiologist at St. Bartholomew's Hospital, and W. S. Greenfield, assistant physician and pathologist, at St. Thomas's Hospital. When there was a vacancy at St. Bartholomew's the chairman of the medical board appealed in vain to the various assistant physicians and surgeons to undertake the charge of the throat department, and ended by saying: "Well, Butlin must take it. He is the junior and he must do it." Sir Henry Butlin, who told the story, went on to say: "I was pitch-forked into the charge of a specialty which I did not care about, and was expected to treat patients whose diseases I could not diagnose, and to teach students the use of instruments which I could not use myself."

Laryngology at this time was associated with medicine, not with surgery, and Semon always insisted on the importance of maintaining the connection with general medicine. He was a physician-laryngologist, did not practise otology at all, and had no training in surgery except as a medical student in Berlin. As late as 1919, according to his autobiography, Semon was protesting against the prevalent tendency to combine laryngology with otology. The early laryngologists were physicians who had extended to the larynx their interest in and knowledge of the chest and did not perform what they called "external" operations, but only intralaryngeal procedures. When it is remembered that the local anæsthetic properties of cocaine were discovered as recently as 1880 and it was introduced into laryngology only in 1884, it will be realized that the dexterity of the early laryngologists had to be well-nigh miraculous. Semon has put it on record that Morell Mackenzie—whose technical skill was outstanding—was accustomed to remove at the first attempt a laryngeal polypus from an absolutely unanæsthetized patient.

When Morell Mackenzie first projected the idea of a hospital for diseases of the throat in the 'sixties he was told by Sir James Paget, who was an enlightened surgeon and one of the founders of scientific surgical pathology, that he might as well found a Hospital for Diseases of the Great Toe. The general physicians and surgeons of the day on the staffs of teaching hospitals could see no use for specialism, and the special hospitals were all established in the face of great opposition. The laryngoscope was ridiculed as a "toy", declared to be useless, and *The Lancet* gravely asserted that "without its use throat diseases were perfectly well treated by every general hospital in London". Morell Mackenzie, the pioneer laryngologist in London, did little to abate the prejudices. The correct

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practice, then as now, was for a consultant to see only such patients as were sent to him by another doctor and not to retain them as his own patients. Mackenzie was pardonably vain of his unequalled skill and knowledge of diseases of the throat and outspokenly contemptuous of the ignorance of his colleagues; he felt, too, that he was bound to attend personally to every detail of a patient's examination and treatment. He had no qualms, therefore, in accepting and treating the numerous patients who came to him direct, though many doctors did also seek his help with patients.

Semon, on the other hand, from the first never saw a patient who was not sent to him by another doctor and was apparently the first laryngologist in London to maintain such a strict ethical attitude. This helps to explain his constant harping in his autobiography on his own "honesty", in comparing himself with such leading colleagues as Mackenzie and Lennox Browne, though this complacency tended to annoy some others. Sir James Dundas-Grant used to tell the story of a former patient of Semon's who consulted him, and said to Dundas-Grant that what he most liked about Sir Felix Semon was his honesty. "Who told you about Semon's honesty?" asked Dundas-Grant. "As a matter of fact," answered the patient, "when I think of it, he told me himself."

The Career of a Laryngologist

Felix Semon was born in Danzig on December 8th, 1849, the son of a substantial merchant who encountered financial difficulties, but had wealthy relatives and became an official broker on the Berlin Stock Exchange. He was educated at Heidelberg and at Berlin and took the Berlin M.D. in the summer of 1874. His training had been interrupted by the Franco-Prussian War of 1870-71, when Semon served as a "one-year volunteer" in the Prussian Uhlans Guards, seeing some active service. There is very little evidence of any antisemitic feeling in Germany at this time: two of Semon's school-fellows were the sons of the great Prince Bismarck, then Prime Minister of Prussia, and Semon was accustomed to visit their home and met the great man; while in the Uhlans he composed a military march which was played by the regimental band when his regiment entered Berlin after the war; and at Heidelberg he was elected, so he says, to the exclusive Saxo-Borussen Corps.

After graduation he went on to spend a post-graduate year at Vienna and London, studying particularly the various specialties, including dermatology, ophthalmology, gynaecology, otology and laryngology. In London he visited the chief teaching hospitals, finally attaching himself to the medical wards of St. Thomas's Hospital, where an old friend of his mother's, Richard Liebreich, was in charge of the eye department. Liebreich introduced young Semon to the senior members of the staff,

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including Dr. Bristowe and Dr. Ord, the Dean, and Sir William MacCormac, then one of the leading surgeons in the country; all three were kind to the young foreigner and took him into the bosom of their families.

Semon also attended the Brompton Hospital, Moorfields, and the Throat Hospital, Golden Square; at the last he had a letter of introduction to its founder, Morell Mackenzie, from an old friend of Mackenzie's, Fürstenberg of Berlin. Mackenzie welcomed Semon, sent McNeill Whistler, his assistant (and the painter's brother), to help him to find lodgings, and expressed a hope that he would frequently attend the clinics at his hospital. At this point Semon's mother very sensibly wrote to him suggesting that he should discuss with Dr. Liebreich whether he should not devote his time to one specialty rather than spend it in more general post-graduate studies. Liebreich did not advise him to pursue ophthalmology, for there were already many taking up that specialty in Germany, but suggested otology or laryngology. Laryngology was then a brand-new specialty, with exciting new methods of diagnosis and treatment presenting themselves almost every month, and Semon determined to embrace the opportunity presented in London, attending Golden Square Hospital with redoubled zeal.

One evening in September, 1875, Mackenzie in his friendly way invited Semon and an American post-graduate student to dinner, and at dinner asked the American whether he would take on the appointment of clinical assistant for the ensuing six months. Semon says in his autobiography that he did not know whether disappointment showed on his face—no doubt it did—but Mackenzie at once turned to him and said, "Of course I should have made the same offer to you if you were not to leave us so soon." Semon's intention had been to return to Berlin in October, but he replied that if he could have the appointment no doubt his father would allow him to stay on for another six months. By return of post his father agreed that he must not miss the opportunity.

In March, 1876, Semon approached Mackenzie to know what his views would be if he were to stay on in London, and Mackenzie kindly promised him that as soon as possible he would get him appointed a physician to Golden Square Hospital—this less than a year after he had come to England. He passed the M.R.C.P. examination in October, 1876, got elected to the old Royal Medical and Chirurgical Society, and began private practice at 6 Chandos Street, just opposite Queen Anne Street. In his first year of practice Semon tells us that he had twenty-six private patients, and earned £331 (£130 of it from one patient). On the strength of this rather exceptional success—for his income did not reach that amount again for several years—Semon became engaged to be married to Miss Augusta Redeker, a young but well-known professional singer. In the peaceful and spacious days of Queen Victoria it was no

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disadvantage in London to be German : Queen Victoria herself liked to converse in German, as she had done with her dear Prince Albert, and it may be remembered that King Edward VII spoke with a marked German accent and numbered some Germans among his intimate friends. Musical London—and those were the great days of Jenny Lind and Sims Reeves, Richter, Joachim, Rubinstein and Paderewski—was dominated by the German element. Semon was a good pianist and a composer of ability, and made many musical contacts among his fellow-countrymen. Soon after his arrival he joined the old German Athenaeum with its many useful offshoots, and George Henschel, the well-known singer and composer (afterwards Sir George), had lodgings in the same house.

Felix Semon undoubtedly made his mark as secretary of the Sub-section of Laryngology at the great International Congress of Medicine in 1881—in fact, when Semon died in 1921, forty years later, his old colleague, Dr. de Havilland Hall, in contributing a personal note to Semon's obituary notice in *The Lancet*, recalled not his other considerable achievements, but the impact he made upon the medical world as secretary of this sub-section. Dining out one evening in 1880 Semon discovered from the secretary of the International Congress, Sir William MacCormac, that there was to be no Section of Laryngology, chiefly because so many of the leading physicians and surgeons had crossed swords with Morell Mackenzie, who could hardly have been passed over as president. Semon tactfully suggested to MacCormac that laryngology should be a sub-section of the Section of Medicine, under one of the vice-presidents of that section, Sir George Johnson, who had been a pioneer laryngologist as well as a distinguished physician. Sir William MacCormac accepted the suggestion, and asked Semon to be secretary of the sub-section, along with de Havilland Hall and T. J. Walker of Peterborough, another pioneer laryngologist—incidentally, Sir StClair Thomson began his medical career as a pupil of Walker's at Peterborough. Semon was the most active of the secretaries and managed the affairs of the sub-section in a masterly manner; at the beginning of each session he gave out in English, French, German and Italian the programme of the morning, 342 laryngologists or physicians interested in laryngology inscribed their names as members of the sub-section, and by the time the Congress was over everyone in Europe or America associated with laryngology was well acquainted with the name of Felix Semon.

In 1882 Semon heard by accident that Dr. W. S. Greenfield, assistant physician to St. Thomas's Hospital, who also acted as the pathologist and as head of the throat department of the Hospital, had accepted the chair of pathology at Edinburgh University. Semon thereupon sent a memorandum to the Treasurer of St. Thomas's Hospital, suggesting that the throat department should have a specialist at its head and that he himself was willing to accept such an appointment. Backed by his

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friends MacCormac, Bristowe and Ord, though not without some opposition, Semon became the first laryngologist to be appointed to any general or teaching hospital in this country.

Semon had an excellent opinion of his own abilities and an instinct for knowing which way the wind was likely to blow. In his autobiography he tells that his first contribution of any note to a discussion was at the Clinical Society in 1878, when he attacked the great Lister for recommending the operation of thyrotomy to remove an innocent tumour from the larynx ; when it is remembered that Semon was then still under thirty, had been in London only three years and still spoke English imperfectly, his self-confidence may excite astonishment rather than admiration—until one remembers that Lister had come to London only a year previously and, although professor of surgery at King's College, had yet very few friends or adherents in medical London; Semon's attack was received " with loud applause ".

In 1884 Semon founded and edited until his retirement the *Centralblatt für Laryngologie*, published in Berlin, for many years the leading laryngological journal and index of laryngological literature—although it survived World War I, World War II proved too much for it. By now Semon's position in London and, indeed, in the world, had become assured. He was happily married, lived in one of the largest houses in Wimpole Street, had a carriage and pair with coachman and footman, gave musical parties where he played the accompaniments and his charming wife sang, began to attend royalty and was consulted by both Mr. Gladstone and the Marquess of Salisbury and (as he says in his autobiography) even advised the latter, when Prime Minister, to see that one of his deserving friends got a knighthood !

In the *cause célèbre* of Morell Mackenzie and the Emperor Frederick III in 1887-8, Semon, as he himself wrote, played a leading part behind the scenes, and kept Herbert Bismarck, Prince Bismarck's son, primed with medical ammunition to use against Mackenzie. He supported Mackenzie's leading German antagonists, Gerhardt and von Bergmann, and attacked Mackenzie with all the vindictiveness of ingratitude. Semon considered Mackenzie responsible for the Emperor's death and years after Mackenzie had died he still repeated, " Mackenzie killed my Emperor ".

In 1903 Semon founded the London Laryngological Society as a clinical society with an eclectic membership, in opposition to the British Rhino-Laryngological Association, founded by Morell Mackenzie in 1888 ; the two amalgamated, however, in 1907, to form the Section of Laryngology of the Royal Society of Medicine. In any matter of laryngological interest Semon took a leading part. He raised a fund for a monument in Copenhagen to Wilhelm Meyer, the discoverer of adenoids, and was then invited to unveil it. When Manuel Garcia had his one-hundredth

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birthday in 1905 it was Semon who arranged the brilliant international reception that celebrated the occasion, and persuaded King Edward VII to give the veteran singing teacher and laryngoscopist the C.V.O. and the German Emperor to award him the Great Gold Medal for Science. Semon was himself knighted in 1897. He retired from active practice in 1909 at the zenith of his career; a great banquet was held in London in his honour with Sir Henry Butlin, then President of the Royal College of Surgeons, in the Chair, and £1,200 that had been subscribed by friends and colleagues as a testimonial was applied by Semon to endow a lectureship in the University of London, known as the "Semon Lectureship in Laryngology", now often considered the blue riband of European laryngology. Sir Felix Semon died in 1921, his last years unfortunately rather troubled by the war of 1914-18 and the anti-German feelings then generated.

Cancer of the Larynx

Semon prided himself chiefly on his work on cancer of the larynx: in his autobiography he claims "the world's record for laryngeal cancer, 80 per cent. of lasting cures". But his idea of a "lasting cure" was a patient who survived for one year after operation, he includes in his cases patients whom he diagnosed but did not operate upon, and the 80 per cent. refers to laryngo-fissure patients only. Semon insisted that a malignant growth was more common in the posterior part of the vocal cords—this is quite wrong, and helped to mislead a whole generation. He said that a malignant growth caused greater hoarseness than an innocent growth—wrong again, the degree and progress of the hoarseness depend on the site of origin of the growth, not on its malignancy or innocence. And also that impaired mobility was an early sign of cancer of a vocal cord—once again he was wrong: impaired mobility is a sign of advanced not early cancer. All of these points Semon used to try to discredit Morell Mackenzie in his management of the case of the Emperor Frederick III—yet subsequent experience has shown that he was wrong in every one of them. It is true, however, that Semon's advocacy of the operation of laryngo-fissure did much to advance the surgery of cancer of the larynx. But it was Sir Henry Butlin, not Semon, who revived the previously discredited operation of laryngo-fissure, and Semon was wise enough never to attempt the operation without a skilled surgical assistant. Semon's contribution to advances in the study and treatment of cancer of the larynx is mainly that of an ardent propagandist, undoubtedly useful in the times in which he flourished, but his own work in this field has had little permanent value.

Laryngeal Tuberculosis

Semon also did good work in advocating complete vocal rest in the treatment of laryngeal tuberculosis. He read a paper, with a long and

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detailed report of seven cases, at the Berlin Laryngological Society in 1906 and subsequently published it in the *British Medical Journal*. But the idea dates back to Broussais in 1824, and Professor Moritz Schmidt of Frankfort advocated it in 1887, while others claimed to have done so about the same time. Semon emphasized the importance of persevering with silence in the face of initial disappointment and repeated relapses, and he pointed out the value of treatment in a sanatorium, where it was easier to maintain the discipline of silence.

Innervation of the Larynx

Before Semon laryngologists had quite chaotic ideas about laryngeal paralysis, and whether the abductors or the adductors were affected seemed to depend entirely on chance. Semon published many papers on the innervation of the larynx and laryngeal paralysis, and there is no doubt that he did clear up many misconceptions on this subject. He was not a trained physiological worker and his early experimental work was unsuccessful, as he himself says, owing to deficiencies in technique ; but after he made the acquaintance of Victor Horsley in 1884, he found a helpful collaborator, experienced in physiological investigation, and Semon's enthusiasm with Horsley's skill produced fruitful results. Semon's observation that in a progressive organic lesion the nerve fibres supplying the abductor muscles of the larynx are affected before those of the adductors, has been termed "Semon's law". The name became attached mainly because Semon wrote so much and so vehemently on the subject when it was first promulgated. The idea had been in Semon's mind, he had said something about it at the Clinical Society of London in 1878, and in 1880, in the German edition of Mackenzie's great textbook on *Diseases of the Throat and Nose*, translated and annotated by Semon, he elaborated this in a footnote ; but Professor Otto Rosenbach actually published his own observations and conclusions about the abductors and adductors in 1880 before Semon. The battle of priority was fought with considerable violence on both sides and a bitter controversy ensued.

Conclusion

Semon's main contribution to laryngology lies in his having enhanced the status and consolidated the general recognition of the specialty. In his early days prejudice against specialism and specialists was still strong and sometimes found intemperate expression. Semon was always ready to speak for the defence and not infrequently became engaged in rather heated controversies. He made some mistakes—perhaps his chief one was in writing his autobiography, which filial piety published in 1926, some years after his death. It is filled with self-justifications, with details of his well-known patients (who included Queen Victoria and

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King Edward VII), and of his prowess on the Scottish moors—the walls of his country home at Great Missenden were covered with the heads of noble stags. One finds it hard to forgive his attitude towards Morell Mackenzie, who gave him his start in London and stood up for him when he was nearly dismissed, in his early days, from Golden Square Hospital, on account of a tragic mistake; and one dislikes his reference to a well-known colleague as a “sly competitor”. But the autobiography is a very human document and of undoubted interest to students of the period.

Semon's published work, though much of it is naturally out-dated, was founded on personal observations and always carefully documented, if sometimes long-winded. He published altogether—according to his friend Dr. Peter McBride—132 papers. He was an assiduous attendant at meetings of societies and conferences, and at home and abroad was, in his generation, looked upon as the representative English laryngologist—though in the end he preferred to print his collected papers (in two handsome volumes) in German. His geniality and courtesy, his generous hospitality and vivacious conversation made him a conspicuous figure and a general favourite in the society of late Victorian and Edwardian London. He was undoubtedly vain and self-centred, but he was a conscientious worker and lived for the advancement of laryngology. The centenary of his birth well deserves to be remembered.

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A BRANCHIAL FISTULA TERMINATING IN A TUBULO-DERMOID CYST
LYING POSTERIOR TO THE TONSIL—N. W. GILL

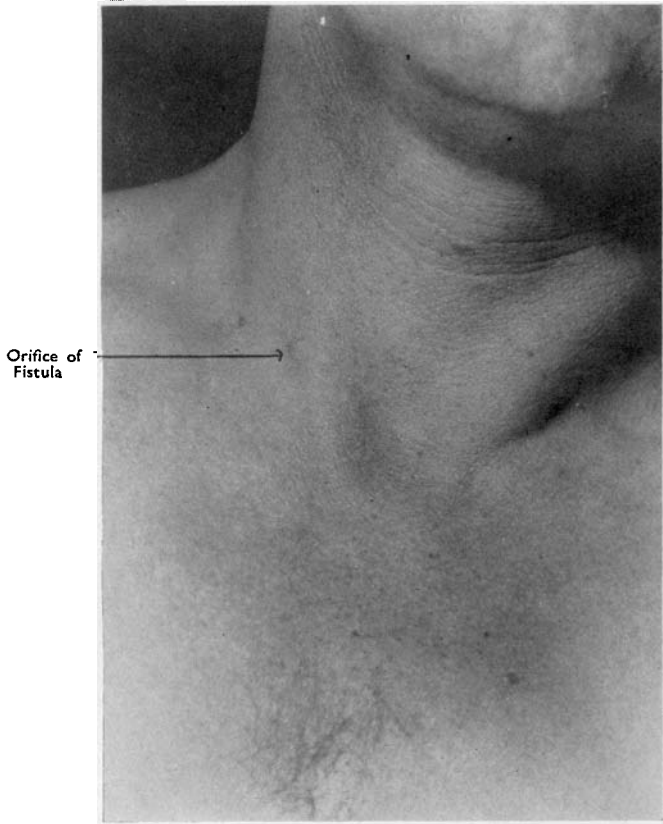


FIG. 1

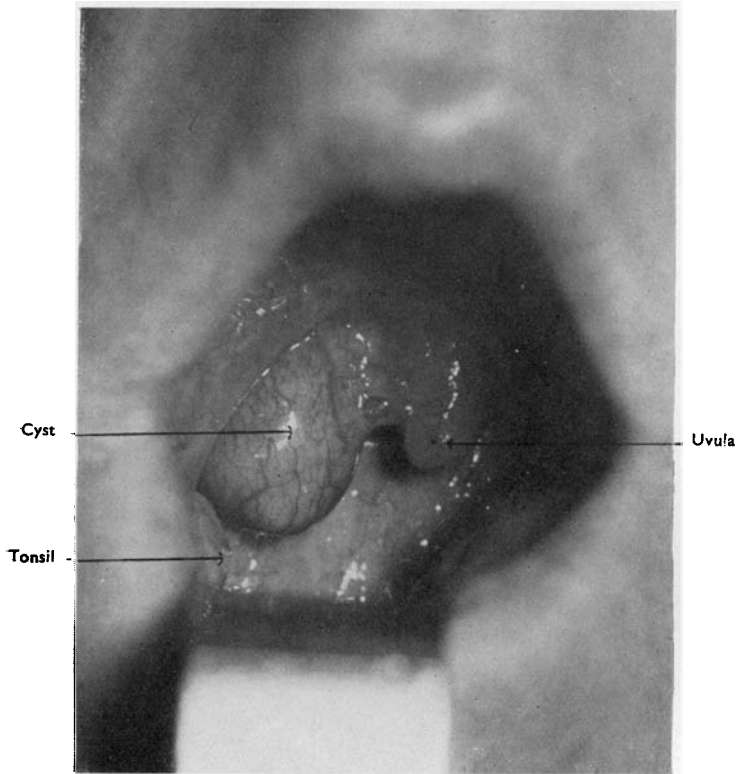


FIG. 2