Obituary.

JOHN KNOWSLEY THORNTON, M.B.C.M. (Edin.), J.P.,
Consulting Surgeon, Samaritan Free Hospital, London.

JOHN KNOWSLEY THORNTON was born in Northampton, on January 15th, 1845. His father, the Rev. John Thornton, at the time Curate of All Saints', Northampton, was afterwards appointed Head-master of Kimbolton School, and lastly became Vicar of Aston Abbots, near Aylesbury, Bucks., holding that living for thirty years. Educated at Rossall School, Knowsley Thornton began life in a public office, where he acquired business habits, but he felt that medicine was his vocation, for already, when a boy, he had distinguished himself by feats of amateur surgery. He therefore abandoned the desk and the quill and entered as a student at the University of Edinburgh when twenty-two years of age. He was of opinion, as the result of his own experience, that the study of medicine and sciences allied to it should not be commenced by youths still in their teens. Graduating in 1871, he then filled the appointment of house-surgeon to Lord Lister at the Royal Infirmary, Edinburgh. He discharged his duties to the full satisfaction of his chief and the great future advantage of himself and the cause of surgical progress. All must agree with him that a young man is more fitted to be house-surgeon at twenty-six than at an earlier age. He mastered most thoroughly during his tenure of office the full technical details of "Listerism" as then understood, that system to which he remained faithful throughout his professional career.

After leaving Edinburgh he took a practice at Ford, close to Flodden Field, in Northumberland, on the Scottish border, where he stayed but for a very few months. He naturally had the tastes of a country gentleman and distinguished himself in the hunting-field, whilst owing to high social qualities he made many friends. He observed in later years that the purely medical experience which he acquired during his short career as a general practitioner proved of high value when he became a surgeon.

A mere accident brought Knowsley Thornton to London. A fellow-student, Dr. William Thomson, now of Mustapha, Algiers, who held the appointment of Assistant-surgeon to the Samaritan Free Hospital, determined to practice abroad, and resigned in 1873, the vacancy being at once filled by Knowsley Thornton, whom Dr. Thomson had introduced to Sir Spencer Wells. That great ovariotomist was then at the height of his fame, and his speciality was still almost a monopoly in which only a very few other surgeons enjoyed

JOHN KNOWSLEY THORNTON.

a successful and profitable share. Knowsley Thornton became his private assistant and within a few years was appointed, together with Dr. Granville Bantock, full surgeon to his hospital. The first three or four ovariectomies which he performed were followed by the most discouraging results, and it was suggested to him that he had mistaken his vocation, but he was by nature bold and hopeful. He took to the practice of rigid antiseptic precautions, carbolic spray, solutions, gauze and so forth. Speedily his results improved, but our present knowledge of surgical technique compels us to attribute his steadily increasing success in great part to his skill and his accumulating experience, rather than to his antiseptics. By 1880 he had already gained a high reputation as an operator and was at the same time quite a familiar speaker at societies, whilst his writings in medical papers had become well known to the profession. His strong power of will and his tact and persuasiveness induced his great chief—at that time of a mature age and therefore somewhat distrustful about innovations—to adopt many of his assistant's methods. Knowsley Thornton soon introduced important modifications in the details of ovariectomy, in particular he was very careful about securing the ovarian pedicle. He was a slow, steady and extremely painstaking operator, emergencies and unforeseen difficulties in the course of an operation showed him at his best, and his patient study and registration of the after-progress of every case, however simple, was one of his strongest points. Before an operation he was accustomed to make a few observations on the history of the case and what he expected to discover. He was a stern disciplinarian, insisting on smartness and attention in his assistant and nurses, and an absolute silence amongst the spectators, so that distinguished British and foreign visitors were not rarely called to order. He, however, often noted a point of interest or explained a manœuvre during the course of an operation. Together with his colleague Dr. Bantock, who differed entirely from him in theory and practice, and was one of the founders of purely aseptic operating, Knowsley Thornton maintained the reputation of the Samaritan Hospital at a high level, and did much to generalise ovariectomy.

Whilst the hospital practice of these two distinguished surgeons led others to remove ovarian cysts elsewhere, Knowsley Thornton soon began to play a leading part in extending abdominal surgery far beyond the limit of tumours of pelvic origin. In greatly advancing hysterectomy for uterine fibroids beyond the point obtained by Spencer Wells, he was most creditably rivalled by his colleague, known to be very skilful at that operation, but it was in the field of renal, hepatic and splenic surgery that Knowsley Thornton so especially distinguished himself. As a pioneer he was indeed destined to go further, for just as he took a prominent part in making

ovariotomy a stock operation which every hospital surgeon of fair ability might undertake, so he succeeded by his example in the operating theatre in ultimately reducing nephrectomy, cholecystotomy and splenectomy to the useful level of routine surgical procedures.

We may review his work more satisfactorily by turning attention to the literary records of his labours. He never wrote a book, although he published his "Harveian Lectures for 1899," with additions and emendations. He contributed two articles on ovariotomy and operations on the uterus to "Heath's Dictionary of Practical Surgery," the former including a valuable summary of what he held to be the best rules for after-treatment. His comparatively recent contribution on hysterectomy, prepared nine years ago for "Allbutt and Playfair's System of Gynæcology," is in great part an instructive criticism of the different methods of removing the fibroid uterus, a question still far from solution.

Knowsley Thornton's voice was very often heard at meetings of medical societies and associations. He was not exactly a scientist, although he was sound in his methods of applying science to clinical and surgical purposes. His earliest work, however, was made public before the Pathological Society of London, and was essentially scientific. In the twenty-fifth volume of that Society's "Transactions" will be found his earliest paper, the subject is "Carcinoma of an Ovarian Cyst." Still, in perusing it, we feel that his aim was clinical, for he notes that a secondary growth was detected in the rectus close to a tapping puncture, and from the first Knowsley Thornton deprecated paracentesis. His best purely pathological work is published in the twenty-eighth volume of the same "Transactions," it is an excellent report of a case of tumour of both ovaries with peritoneal infection by "epithelial grafts" or "implantations." There has been much discussion, since, about these "grafts," especially as to whether they may originate from a purely innocent cystic adenoma of the ovary. In 1875 he took part in the discussion on the "Germ Theory of Disease," introduced by Dr. Charlton Bastian, at the same Society. Most of Knowsley Thornton's later communications to the Pathological Society were reports of specimens which he had removed by operation. In this category are included some of the kidneys which he removed, a remarkable case of cystic spleen successfully extirpated, and a mass of felted hair extracted from the stomach by gastrotomy. A large number of specimens from Knowsley Thornton's practice are preserved in the Pathological Series of the Museum of the Royal College of Surgeons of England. They include several above-mentioned and many more prepared by a junior colleague at that date on the staff of the museum. We must note in particular a great omentum full of hydatid cysts, the particulars of which are to be found in the *Medical Times and*

Gazette for November 16th, 1878. The diseased structure was removed, together with other hydatid cysts in the pelvis from a woman aged 32, in the seventh month of pregnancy. Premature labour occurred on the eighth day and rupture of the abdominal incision on the twelfth, yet the patient recovered. At that date, 1878, such an operation was held to be almost unjustifiable on account of its risks, so the specimen is a testimony to the great share which Knowsley Thornton could claim in the evolution of general abdominal surgery from ovariectomy. Sir Prescott Hewitt, viewing the specimen when newly mounted, exclaimed: "What a wonderful case! We shall hear much more about abdominal surgery." That prophecy has come true.

In the eighties, Knowsley Thornton's voice was often heard at the meetings of the Royal Medical and Chirurgical Society. His notes on "Two Cases of Splenectomy," with tables showing the experience of other operators, were published in 1886 in the sixty-ninth volume of that Society's "Transactions," and testify once more how, beginning as an ovariectomist, he took a prominent part in the development of splenic as well as other departments of abdominal surgery. Three statistical papers illustrating his own experience in ovariectomy appeared in the sixtieth, sixty-fourth, and seventieth volumes of the "Medico-chirurgical Transactions." The third (1886) is of high value on account of the summary, which includes observations on causes of death after the operation, matter that can never be out of date. If we glance at the records of temperature we feel that operators of to-day might think that its average was high and attribute the frequent rise, not without reason, to carbolicism; more correctly, we fancy, less stress is placed on high temperatures now-a-days, so that they are not recorded. The pulses, most faithfully reported, often range high, but at the present day a pulse of 120 does not necessarily excite alarm unless associated with other symptoms indicating sepsis or obstruction. The increased employment of strychnine since 1886 may account in part for the slow pulses which many operators note in their practice. This third paper on ovariectomy may fairly be signalised as the last of its class as originated by Spencer Wells. Thanks to the exertions of the surgeons which they represented the necessity for them has passed away.

Perhaps the most classical of Knowsley Thornton's writings are the series of contributions to the *Transactions of the Medical Society* on gall-bladder surgery. He began with a good clinical report on "Two Cases of Cholecystotomy" (vol. xi.), followed by "Observations on some Additional Cases Illustrating Hepatic Surgery" (vol. xii. and xiv.) and concluding with a final communication in the fifteenth volume, which terminates with a judicious summary of his views. He carefully defended himself from the

assertion that he desired to operate on all biliary calculi. In the light of so much advance in hepatic surgery since 1892, when the fourth of the series of communications was read, we may still profitably study them. They tell much of the history of how hepatic surgery became established and how it owes so much to one who started as an ovariologist. In 1890 Knowsley Thornton was elected President of this Society.

Before the Obstetrical Society of London Knowsley Thornton exhibited a large number of specimens and took an active part in several discussions on antiseptics, hysterectomy, oöphorectomy for the cure of fibroids, etc. He was likewise an energetic member of the Council of that Society, but when elected Honorary Secretary was unable to hold that appointment for more than a very short space of time owing to pressure of professional work, and was never President. After his retirement from active hospital work he held the chair for a year at the Harveian Society in 1896, where he had previously distinguished himself as Harveian Lecturer in 1889.

Numerous valuable records of his experience in clinical and surgical matters of detail lie preserved in the medical papers of about twenty years since. Great prominence should be given to his "Unsuccessful Ovariectomy with Cases," in the *Medical Times and Gazette*, 1878. There were some who informed him at the time that the publication of such a paper was imprudent, but the proportion of brilliant operators who have followed his example is not high, though we must admit that losses are, often at least, modestly admitted in records where triumphant cures predominate. A pamphlet on the "Antiseptic Method in Relation to Drainage of the Peritoneum in Abdominal Surgery," published in 1879, is the most typical of Knowsley Thornton's polemical papers. A firm believer in antiseptics, he held, contrary to the opinion of several well-known professional rivals, that the drainage tube was a disadvantage without antiseptics, and usually to be rejected even when the spray and carbolic solutions were used. Most operators have now exceeded Knowsley Thornton, who forestalled Howard Kelly's researches when he wrote that the tube "keeps open a possible track for the entry of the causes of putrefaction." Yet drainage has still its uses. Very early in his operative career Knowsley Thornton practised the separate ligation of the ovarian vessels when the pedicle of an ovarian tumour is secured, a practice which has saved many lives from fatal hæmorrhage.

Knowsley Thornton was highly successful in practice, but his prosperity as well as the satisfaction which he derived from the encouraging results of his labours were sadly alloyed by frequent ill-health. During the first ten years of his residence in London he was often laid up with gout and also distressed by sickness in his

home-circle. By 1891 he found it impossible to endure the fatigues of hospital duties added to his private work, and he therefore resigned his appointment at the Samaritan Hospital. For five years he continued in private practice, but after a severe illness in 1896 he retired altogether and lived henceforward at his estate, Hildersham Hall, near Cambridge. His country tastes and partial restoration to health brought him a little well-earned enjoyment. He became a Justice of the Peace and was very popular in his neighbourhood. Unfortunately he at length fell very ill and became tormented with peripheral neuritis and other debilitating complications. His death occurred at Hildersham Hall on the night of Sunday, January 3rd, within a few days of his fifty-ninth anniversary.

Knowsley Thornton was twice married, first to the eldest daughter of Captain Paterson, of Castle Huntley, Scotland, by whom he had a son, who went to South Africa, and two daughters; and secondly to the Hon. Mary Agnes Clive, sister to the present Lord Windsor who, with one daughter, survives him.

Knowsley Thornton was a little above the average height and of powerful physique, his force of character was self-evident to all who know his professional career. His name will rank very high in the history of gynæcology for reasons which we have endeavoured to make clear.

The portrait, which is appended to this notice, was taken by Barraud, of Oxford Street, in 1889, and is, we believe, the best extant likeness of the deceased surgeon.