

Dr. Edward William Archibald

Chair of the Department of Surgery – 1923-1935



Dr. Edward William Archibald, MD

“Archibald received his formal education in the Montreal Schools and McGill—BA, 1892; MD and CM, 1896. After a surgical internship at the Royal Victoria Hospital he traveled abroad to visit the major surgical clinics in Britain, France, and Germany and pursue his interest in surgical pathology at Freiburg. He returned to McGill in 1902 as demonstrator of clinical surgery and progressed in a linear fashion to become professor of surgery and director of the department, 1923 to 1937, and chief surgeon at the Royal Victoria Hospital, 1918 to 1932. He was also surgeon to Children's Memorial Hospital, Montreal.

At the outbreak of the first World War he joined the Canadian Army Medical Corps and served more than two years overseas with No. 3 Canadian General Hospital, including four months at the front with No. 1 Canadian casualty clearing station. He presented this first hand experience in the treatment of shock, including his disappointment in his pioneer efforts to reverse shock by the limited transfusions then available, to the American Surgical Association's meeting in June 1917.

Archibald's interest in thoracic surgery may well be attributed to the tentative treatment of chest wounds he witnessed during his army service. On returning home his interest rapidly extended to the surgical treatment of pulmonary tuberculosis. Familiar with the German scene, and particularly the work of Sauerbruch, and with Saranac not too far away, he introduced to this continent extrapleural thoracoplasty for predominantly unilateral cavitory disease. As a condition favoring operation, he set a great store on evidence of patient's resistance as manifest by fibrosis and scar contraction, delivering the following dictum: *Do not operate if the trachea is in the midline*. Persistence of exudative disease meant poor resistance by the patient, a surgical red flag. He stressed the obvious—intelligent cooperation between the surgeon, the patient's physician, and the radiologist. After returning from the army at the age of 46 years, Archibald devoted his professional career to founding a school of surgery at McGill that combined scientific research with clinical practice and still emphasizes this scientific basis beyond the technical explosion that anesthesia and asepsis allowed. His advocacy of thoracoplasty is an example. His own special study centered on edema of

the pancreas and its relationship to the biliary tree. His organizational foresight is well demonstrated in the founding of the Montreal Neurological Institute under his colleague Wilder Penfield.”

Source: J. Gordon Scannell, MD *J Thorac Cardiovasc Surg* 1997;114:307