

Introduction: 'The mighty influence of strange blood'

The experience of a small-town German doctor would, in the mid-1870s, start a formidable transfusion craze. Oscar Hasse of Nordhausen am Harz tried transfusion with lamb blood on fifteen patients, reported positive results in meetings and publications, and suddenly hundreds of lamb blood transfusions were made in clinics, hospitals and lunatic asylums across Europe and the USA. 'The blood of lamb and sheep was flowing in streams, the literature on transfusion was growing like an avalanche from day to day', a contemporary observer noted.¹ Doctors used it as a cure for phthisis, pellagra, cancer and epilepsy, suggested it as a means to reawaken seemingly dead soldiers on the battlefield. It was seen as 'life-giving, despite its repulsive animality'.²

I first encountered this phenomenon when researching for a book on the history of Swedish blood transfusions. I found that several lamb blood transfusions had been made in Sweden in the 1870s.³ It turned out that they were part of a wider international story. Lamb blood transfusion appeared in the early 1870s, caught on and multiplied, then disappeared. This piqued my curiosity. Why this sudden fervour for transfusing strange blood? How was it undertaken, by whom, and how did the patients feel? And, most importantly: Did it work?

This book will give some answers. It is the result of digging into archives, consulting esoteric documents, and visiting hospitals and universities across Europe. It will be rich in details about mid-19th century sick bed encounters and laboratory experiments; it will show hope and disappointment, human and animal suffering alike. Geographically, we move from North Carolina to St. Petersburg, from central London to the German countryside, from southern Sweden to northern Italy. We get to know the ambitions of the main actors, the experimental nature of the intervention, and its international ramifications.

We also follow the conflicts between proponents of clinical experience and scientific proof. This was a controversial therapy, hotly debated at the time. Strangely, it has been almost totally neglected by historians of medicine and science. If taken up at all, lamb blood transfusion has been dismissed as a roadblock to medical progress, a thoughtless experiment with patients as unsuspecting guinea pigs. My perspective is different. I think that investigating a 'losing' practice like lamb blood transfusion reveals, as medical historian Anita Guerrini suggests, that '[f]ew things are simply right or wrong, either ethically or scientifically. More often they are a muddle of mixed motives and half-clear ideas.'⁴ I therefore take seriously the arguments of 19th century doctors, patients and scientists, try to understand their mixed motives and muddled ideas, and situate them in a larger context of professional ambitions and uncertainties. My story stays close to what happened across Europe and the USA when physicians tried to save their patients' lives or sanity with the pulsating blood of a lamb. Their accounts take us into a world of pain where the patient sweats and coughs, the bleeding does not cease, and the breath becomes weaker with every second. What to do? Where to turn? Why not try the remedy that the medical press says works wonders with the severely ill and test, as one American doctor phrased it, 'the mighty influence of strange blood?'⁵

Lamb blood transfusion was, in many ways, a transgression. Its use broke rules and exceeded boundaries. To some physicians in the 1870s, it was a daring, but not irrational, choice when previous treatments had failed. To others, it was a dangerous experiment on helpless patients, and a return to pre-modern ideas about the occult qualities of blood. Thus, the experiment with lamb blood transfusion was a political phenomenon. It upset medical hierarchies and truths. It challenged medical knowledge, ethics and expertise, gave rise to controversy and debate. It had ramifications also outside the medical world. The rise – and fall – of lamb blood transfusion was, I will show, linked to mid- and late-19th century struggles for national revival, social justice and military advance.

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The book proceeds as follows.⁶ Part I sets the scene. Chapter 1 traces the often-interrupted history of blood transfusion, from its beginnings with animal blood in the 1660s, through the abandonment of the therapy in the centuries thereafter, and all the way to its revival with human blood in the early 19th century. Then, in the 1870s, came the unexpected return of lamb blood trans-

fusion. I will give a background to the excitement and confusion that would follow.

Chapter 2 presents three ambitious men – Oscar Hasse, Franz Gesellius and Joseph-Antoine Roussel – who more than others were implicated in what was seen as a transfusion 'epidemic' in the 1870s. Very different in personality, they shared a certain outsider position vis-à-vis established medical hierarchies. Still, they managed to put a mark on the history of transfusion. They met with acclaim and disdain, success and failure. We follow their respective trajectories up to and including the crucial year of 1874 when the enthusiasm for transfusion (with both human and animal blood) was at its peak. They will then reappear as central actors in several other chapters. I will eventually reveal what they did when blood transfusion was no longer in vogue.

Part II of the book – Practices – takes us into three, quite dissimilar medical worlds where lamb blood transfusion was advocated as a panacea and/or was practiced (with varying results). In chapter 3 we follow doctors onto the bloody battlefields of mid-19th century wars. In chapter 4, we move to the more serene settings of homes and hospitals where tuberculosis patients coughed their lungs out, and in chapter 5, we share the chaos and despair of mid-19th century Italian asylums where pellagra sufferers awaited a certain death. In many instances, lamb blood transfusion was argued for and sometimes it was tried out. Why was it done? How did doctors go about finding a suitable lamb, preparing it and connecting it to a patient, and how did their patients react to the sudden influx of strange blood into their veins? These situations I will depict in careful and sometimes gory detail.

But did it work? Part III is about controversy. There seemed to be no definite proof for or against the healing powers of lamb blood transfusion, neither from clinical experience nor from animal experiments. In chapter 6, I disentangle the somewhat confusing debate. I link the arguments and counterarguments to relations of power between doctors in clinical settings and physiologists in their laboratories. They had different ways of approaching diagnoses and cures, assessing evidence and results. Still, and as we shall see in chapter 7, both clinical and laboratory practices involved transgressions. Humans and animals were experimented on in often painful and perhaps futile ways. By what right did doctors and scientists tamper with the lives of others? How did they negotiate the boundaries of permissible care and approach issues of cruelty and disgust?

Finally, part IV covers the fall. Chapter 8 traces the social and medical processes that, in the early 1880s, led to the demise of lamb blood transfusion.

Hasse and Gesellius were branded as charlatans. Soon they, and later Rous-
sel, disappeared from the medical limelight. But did lamb blood transfusion
really fade forever from the medical scene? The Epilogue traces a recurring
interest in the 'mighty influence of strange blood' well into the 20th century.
We encounter some very special practices. So perhaps Hasse had got it right,
after all?