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ReachMD on the Road: Exploring the Mutter Museum

TOUR IN PHILADELPHIA WITH ANNA DHODY, THE CURATOR OF THE DISTURBINGLY INFORMATIVE MUTTER MUSEUM

This is Dr. Michael Greenberg on the road for ReachMD, The Channel For Medical Professionals and today I am in Philadelphia to visit the Mutter Museum which is part of the College of Physicians of Philadelphia and I am speaking with our special guide, Anna Dhody, its curator.

DR. MICHAEL GREENBERG:

Tell me first about the museum. How did it get its name and how did it end up here?

ANNA DHODY:

Well, the Mutter Museum is part of the College of Physicians of Philadelphia. Now the College of Physicians of Philadelphia is the oldest professional society in continuous operation in the United States. It is not a college in the sense of a degree granting institution, but it is a rather professional society for colleagues in the medical profession. It was established in 1787. We had people such as Benjamin Rush, John Morgan, some very, very famous early physicians in Philadelphia came together and establish this society. Now the Mutter Museum came about a couple of years later. In 1858, Thomas Dent Mutter who was also a fellow of the College of Physicians decided to decrease the college, its entire teaching collection as well as an endowment and that is why we call it the Mutter Museum. We started with about 2000 objects. The museum opened in 1863 and now we have well over 25,000 objects.

DR. MICHAEL GREENBERG:

Is Dr. Rush's here?

ANNA DHODY:

We actually have Dr. Rush's medicine chest, but it is actually on tour right now. It is on a traveling exhibit. This started at the National Constitution Center.

DR. MICHAEL GREENBERG:

All right, well thank you. Let's start to go around the museum

ANNA DHODY:

Okay.

DR. MICHAEL GREENBERG:

And look at some things and we will talk more about it.

DR. MICHAEL GREENBERG:

From her office Anna led me to a dank basement which looked every bit its 100 years up an ancient staircase and through a heavy oak door into the museum proper.

We have just come into this astonishing 2-level gallery and it is very much like Guys Hospital in London or the old hospitals and what do we have in this room?

ANNA DHODY:

Well, we have, actually our exhibits at the moment are divided into kind of body systems. Right behind you we have the neurology section and you will see we have got lots of brains, brain slices. We also have what we refer to as the eye wall of shame. Those who wax models are pretty much anything that can go wrong with your eye we show it, from cancer to a stick.

DR. MICHAEL GREENBERG:

It is all fun and games, right for somebody who is

ANNA DHODY:

It is all fun and games to lose and grab it, and then it is an exhibit. Now, this is of course our skeletal pathology section and being a friend again I have to apologize, this is my favorite. I know I am not supposed to play favorites, but I have got to.

DR. MICHAEL GREENBERG:

Well, tell us. I see things in the room that are on the website. Tell us what is really cool in this room.

ANNA DHODY:

One of the main things that people come to see is right here.

DR. MICHAEL GREENBERG:

All right, let's walk over here and I am looking at the hugest human skeleton I have ever seen in my life. I think it is about 85 feet. Tell us about this.

ANNA DHODY:

Well, I have to of course put in disclaimer that he is the second tallest skeleton on display. He is the tallest skeleton on display in North America. The Hunterian museum in London does have us beat by 1 inch. However, I argue with the spinal curvature right here. He is tall to be over 7 feet 7.

DR. MICHAEL GREENBERG:

We could straighten him out.

ANNA DHODY:

Yes.

DR. MICHAEL GREENBERG:

Tell us, tell us the story.

ANNA DHODY:

Yes, well, we don't really actually know terribly a lot about him because he was purchased for \$50 by Dr. Joseph Leidy. We did used to purchase our objects. We do not anymore. Now we are purely on donation base, but he is like I said 7 feet 6 inches tall. I should mention that he does have the tallest femora on display in the world. You can see that he is not entirely proportionate. He is not supposed to be this tall. He has pituitary gigantism and I believe early onset acromegaly. You will be able to see that in the face. He has got a very pronounced jaw, very robust face, and his limbs are disproportionately long. His spine is curved. He has pigeon breast, all of that.

DR. MICHAEL GREENBERG:

Well, what we are getting to here, I guess the theme is it like this is not just a freak show. This is actually something that could be studied, I mean here acromegaly, you may never see anybody with it and not even actually see what it does to the human form.

ANNA DHODY:

Absolutely, absolutely. I personally do not like to use the term freak. I like to think of it as we are kind of witness to the extremes of the bell curve of humanity.

DR. MICHAEL GREENBERG:

I like that and this is a normal human.

ANNA DHODY:

Yes, exactly, so what we have here, right in the middle, he is referred to as a Mutter American giant. Now, to his right we have Mary Ashbury. Now, she is a dwarf. She has a chondroplasia. Well, lot of people do not know is there is actually about over 200 types of dwarfism. By and large, the most common you will see is the chondroplasia and then of course on the other side we have a "normal adult male skeleton" for a frame of reference. He unfortunately does not get much face time. He is just kind of there as a thing, but you know we have to give him his due.

DR. MICHAEL GREENBERG:

No one comes and asks for more curly Americans, do they?

ANNA DHODY:

No, actually. They do not. Actually, good one. Now, I have not had that one.

DR. MICHAEL GREENBERG:

This is a fascinating start in this museum because as I see it is very important that this is a repository of learning, it is not a show.

ANNA DHODY:

No, it is not. Well, we would like to call it disturbingly informative. Whatever it is that you are intent when coming here, you might come here to be grossed out or freaked up, but you are going to leave informed, whether you like it or not. You are going to learn something about the human body and probably about yourself.

DR. MICHAEL GREENBERG:

And back here is one of your stars.

ANNA DHODY:

Back here, one of my favorites. Notice I stated this among a lot of things is one my favorites.

DR. MICHAEL GREENBERG:

I understand. Now, this is real.

ANNA DHODY:

This is absolutely real. This is what we have to tell people is that the colon on the top shelf is real. The colon on the bottom is a waxed model depicting a normal intestinal tract.

DR. MICHAEL GREENBERG:

For our listeners, I have to say I am looking at the hugest toxic megacolon stuck with straw, is it?

ANNA DHODY:

It is struck with straw and may be some sponge there and straw.

DR. MICHAEL GREENBERG:

This looks like something out of a science fiction movie. It is huge.

ANNA DHODY:

Now the interesting thing is the result of a condition that is still present to this day. It is called Hirschsprung disease and it results in this mega colon if left untreated. This individual was born with this condition. He began manifesting symptoms at around 18 months and he only lived to be about 29 years of age. Towards the end of his life, they were recording something along the lines of 1 bowel movement a month. At the time of death, the colon actually measured about 8 feet 4 inches in length about a foot and half in diameter and had 40 pounds of fecal material in it at the time of death.

DR. MICHAEL GREENBERG:

And you have a picture of him down here.

ANNA DHODY:

Whenever we possibly can, we like to have records. We like to have antemortem photographs. That really enhances the people's understanding of it.

DR. MICHAEL GREENBERG:

How old is this?

ANNA DHODY:

This is in the 1800s. I would not say the predominant amount, but most of the items we have here are in excess of 100 years old, the specimens themselves. Like I said he died at the age of 29.

DR. MICHAEL GREENBERG:

If you just tuned in. You are on the road with me, your host, Dr. Michael Greenberg on ReachMD, the channel for medical professionals and we are on tour in Philadelphia with Anna Dhody, the curator of the disturbingly informative Mutter Museum.

What else do we have in this room along the walls of the cabin that in there?

ANNA DHODY:

Well, I want to introduce you to Harry Islak.

DR. MICHAEL GREENBERG:

Okay.

ANNA DHODY:

He is the only skeleton on display in the world with fibrodysplasia ossificans progressiva or FOP for short. This is a congenital disorder whereby you have extra bone growing where it is not supposed to grow. You also have all the joints fusing together. As of now, we estimated about 400 diagnosed cases in the world, maybe about 1200 cases worldwide, extremely rare, no cure, no real effective treatment. Harry himself is a wonderful just example, he is completely skeletonized, of course he is prepared and one thing to notice about Harry when you come and see him is look how much metal is used to articulate him, hardly any. He is self-articulated. He is completely fused.

DR. MICHAEL GREENBERG:

Now did Harry donate his skeleton?

ANNA DHODY:

Yes. Harry actively wanted to have his body donated to science. Donated to have doctors and everybody take a look at him and

hopefully he used to further the study of FOP and as matter of fact one of the foremost FOP researches in the world, his name is Dr. Frederick Kaplan. He is at the University of Pennsylvania, medical school, and not this past April, but the April before he actually isolated and discovered the 1 gene in our 6 billion plus, they call it as FOP. Now that is the main beginning to help.

DR. MICHAEL GREENBERG:

From working with this?

ANNA DHODY:

He comes to visit Harry all the time. He brings his students. I open up the case. I do not let anybody touch him, but they can get little bit closer, really kind of get in there and see things because we will see he has his heterotopic bone plate formation that is his extra bone plate formation that is kind of in response to perhaps the trauma or flare-up where his body will replace connective tissue with bone. He also has these extra bone outcroppings. I think they are called osteochondromas. They are noncancerous, but they are bone formation spurs. They look a little bit different. Right there, you have one on his left femur. You take a look at his femora. I bet you can guess which one they operated on. Now unfortunately with FOP because this is so rare, it is extraordinarily misdiagnosed, often times it is a type of juvenile cancer and as result the treatments often make the FOP worse. Now, in Harry's case, they performed surgery on his femur to try and help him and of course with disastrous results. Now Harry actually lived to be a couple days shy of his 40th birthday and he died in the 1970s. To this day, the average life expectancy of an individual with FOP is only 45.

DR. MICHAEL GREENBERG:

Who comes at this museum more often? Did groups of doctors and medical students coming or more tourists.

ANNA DHODY:

Well, that is a great question. Thirty years ago it was almost entirely people with some sort of medical degree. Now over 85% of our visitors have no medical background whatsoever and our main demographic is kind of 18 to 35 which is a very young, very hip demographic which seemed to attract that. We do get lot of school groups too. We have no age restriction. You can come to the museum. We like to think that parents know their children better than we do. We encourage you to go to our website, take a look, see if it is appropriate for your children. Some 7-year-old might have just a wonderful time while a 17-year-old might get freaked out. It is all very personal.

DR. MICHAEL GREENBERG:

To the people who come to tour aren't medical people with a sense of reverence or do you think that they just see the museum. Do they leave comments?

ANNA DHODY:

Oh, absolutely there are comments, but you can go up and take a look at it. Like, I said, whatever the reasons for coming here is I definitely think they leave informed and I think they do leave with a couple of names. They leave with appreciation of the modern medical system, because you will see here infections pre-penicillin, pre-antiseptic and you do not think that you will see horrible infections, you will see horrible bone breaks. We have tertiary syphilis. You get a very strong reaction may be when you are looking at this and you leave with the impression of gosh I am glad I am in the born area of penicillin or I am glad I am born, you know, when there is chemotherapy or when there is these modern medical advances. So, I think that is definitely something to believe with an impression of knowing that. I think they also informed about current situations, the fact that they might not have to worry about getting rickets or scurvy or yellow fever even, where so many of our specimens here did have to worry about.

DR. MICHAEL GREENBERG:

So, as a physician my response is that I get to see things that I would never get to see otherwise. I really do not see tertiary syphilis these days.

ANNA DHODY:

Exactly, exactly.

DR. MICHAEL GREENBERG:

So, a museum like this offers me that kind of sacred space to learn.

ANNA DHODY:

Yes, we actually do have physicians coming here to look like I said Dr. Kaplan and his group come to see Harry and to look at the only fully articulated skeleton with FOP. We also have a lot of things that you might not think are applicable to modern medicine, but really are. We have very accurate wax models showing all the various stages of small pox. Now unfortunately after 9/11 and when bioterrorism became an issue, those are perhaps things that doctors might have to know about.

DR. MICHAEL GREENBERG:

And which models are they?

ANNA DHODY:

These are our models, on the wax models that were made primarily from 2 main sources, from Tremont in Paris and Town of London. These of course were made for teaching specimens for doctors pre-photographed.

DR. MICHAEL GREENBERG:

I had seen Towns models at Guys Hospital in London. They are fabulous and as a dermatologist I was astonished I could see things that I could not see anywhere else.

Thanks for joining us today at the Mutter Museum with our guest, Anna Dhody, its curator who has shown us not simply an interesting museum of the dead, but a living institution of medical education. ReachMD is here for you to help professionals who care for your patients. We welcome your questions and comments. Please visit us at www.reachmd.com where our newly redecorated website with its on demand and pod cast features will allow you to access our entire program library, register on the website and enter promo code radio for 6 months of free pod cast and we truly thank you for listening.