The Impossible Succession of Charcot – The Quest for a Suitable Heir

Laurent Tatu* and Julien Bogousslavsky

*Department of Neuromuscular Diseases and Department of Anatomy, CHU Jean-Minjoz, University of Franche-Comté, Besançon, France; ‡Centre for Brain and Nervous System Disorders, Genolier Swiss Medical Network and Department of Neurology and Neurorehabilitation, Clinique Valmont, Glion, Switzerland

Introduction

In 1881, following the creation of the clinical chair for nervous system diseases, Jean-Martin Charcot (1825–1893) reigned supreme over neurology in Paris. However, at the beginning of the 1890s, cracks began to appear in his neurological empire. Charcot had begun to focus less on the anatomo-clinical topics that had gained him international recognition, and more on the subject of hysteria. Some of his new ideas came under criticism, in particular from Hippolyte Bernheim (1840–1919) and the school of Nancy.

In 1893, Charcot felt the effects of his implication in the politico-financial Panama Canal scandal. As an angina sufferer, his physical health was also weak [1]. During the night of the 15th–16th August 1893, Charcot experienced acute dyspnoea and died within a few hours, despite the treatment administered by Maurice Debove (1845–1920), who diagnosed aortic insufficiency caused by aortic atheroma [2].

The complicated issue of finding Charcot’s successor immediately arose. The question was whether or not the chair for nervous system diseases, which had been created especially for Charcot by his political associates [3, 4], could be carried on without him. It was clearly going to be difficult to find a worthy successor. However, even though the collapse of a neurological empire which had been single-handedly commanded for over 10 years was inevitable, this event was also an important precursor of the institutionalisation of neurology in France [5].
In order to gain a real insight into the events that led to the choice of an official heir, we directly consulted the relevant archival sources, such as the archives at the faculty of medicine in Paris, which had not previously been exhaustively researched on this subject [6]. We also took into account letters written by the main figures involved in Charcot’s succession, which included certain unpublished documents [7–9].

**Brissaud’s Interim**

Following Charcot’s death, the authorities decided to appoint an interim successor in order to gain some thinking time. For the academic year 1893–1894, the position was temporarily entrusted to one of Charcot’s close associates, Édouard Brissaud (1852–1909) [10].

Brissaud was born in Besançon in 1852 to a family of academics and artists (fig. 1). A student of Charcot, he became a *docteur en médecine* in 1880 and, later, *chef de clinique* under Charles Lasègue (1816–1883) and Sigismond Jaccoud (1830–1913). He was appointed *médecin des hôpitaux de Paris* in 1884 and *professeur agrégé* in 1886, then becoming *chef de service* at Saint-Antoine hospital in 1889. Described as well-educated, remarkably intelligent and something of a practical joker, he remained under Charcot’s strong influence [11, 12]. Brissaud was one of the doctors of the writer Marcel Proust (1871–1922) [13], and was part of the inspiration behind doctor du Boulbon in the novel ‘In Search of Lost Time’ [14]:

‘The man to whom Charcot before his death had predicted that he would reign supreme in neurology and psychiatry.’

Brissaud’s succession came about in an abrupt manner [15]:

‘One year ago, I was asked to take on Professor Charcot’s chair overnight. I had to give improvised lectures in the lecture hall at the Salpêtrière, in which the echo of Charcot’s voice had previously resounded and would resound for a long time to come […] It was a painful obligation that I could not avoid.’

He was happy to adopt the same timetable that Charcot had established, and called upon some of his master’s former students such as Achille Souques (1860–1944), Georges Marinesco (1864–1938) and Jean-Baptiste Charcot (1867–1936), the late Professor Charcot’s son, to assist him in his duties. Brissaud gave seventy lectures, 30 of which were published by one of his students, Henry Meige (1866–1940) [15]. One of Brissaud’s major works, *Anatomie du cerveau de l’homme*, was also published in 1893, demonstrating both the depth of his anatomical knowledge and his talent for drawing [16].

**The Candidates Who Never Were**

In 1892, two of Charcot’s brilliant former *chefs de clinique*, Joseph Babinski (1857–1932) and Georges Gilles de la Tourette (1857–1904), were unable to apply for the chair for nervous system diseases, since they both failed their *agrégation* examination. They unfortunately bore the
brunt of the power struggle that was taking place at the Paris faculty of medicine between Charcot and another one of his former students, Charles Bouchard (1837–1915), president of the jury for the 1892 agrégation examination [17]. Only Bouchard’s candidates were successful. The appeals made by several candidates including Babinski made no difference to the final result [18]. Babinski and Gilles de la Tourette were therefore prematurely eliminated from the race to become Charcot’s successor.

Pierre Marie (1853–1940), professeur agrégé from 1889, was another potential successor. His fatalism prevented him from applying, since he considered his chances to be poor, faced with the seniority of the other candidates. In a letter to his Hungarian colleague Ernő Jendrassik (1858–1921), Marie recalls his decision [7]:

‘Concerning the succession of Mr Charcot, as with every position at the School, there is not much room for surprise; professors are hardly ever appointed for any reason other than seniority or camaraderie. Raymond was our elder, I didn’t even apply; what I am saying is that I was neither offended nor surprised in any way.’

In 1917, at the age of 65, Pierre Marie would finally occupy Charcot’s chair following the death of Déjerine.

In 1893, Alix Joffroy (1844–1908), another former student of Charcot, had just been appointed to the chair for mind and brain diseases following the death of Benjamin Ball (1833–1893). However, his intention was to request a transfer to the chair left vacant by Charcot. This is confirmed in a letter addressed to Joffroy in the autumn of 1893. The letter was probably written by Antoine-Auguste Pierret (1845–1920), professor at the faculty of medicine in Lyon [9]:

‘I saw Straus yesterday evening […] He informed me about your possible transfer and told me that 1) Debove would never compete against you (as you probably know); 2) your transfer was strongly opposed by Raymond’s friends […] When we shook hands to say goodbye, he told me he was going to campaign in your favour. I therefore advise you not to prepare your first lecture and to pay your friends a visit to firmly request your transfer.’

Alix Joffroy would later abandon his plan and be appointed to the chair for mind and brain diseases in November 1893.

The Choice of a Permanent Successor

The French ministry of public instruction was responsible for electing Charcot’s successor from a list of candidates presented and ranked by the council of the faculty of medicine. The administrative process began in March 1894, 2 months after the official decision not to abolish the chair [19]. Only three candidates were officially declared: Édouard Brissaud, who had temporarily held the position, Fulgence Raymond (1844–1910), one of Charcot’s oldest students, and Jules Déjerine (1849–1917), Charcot’s strongest rival in neurology.

The rapporteurs for the three candidates were named during the faculty council session on 8th March 1894: Maurice Debove for Brissaud, Carl Édouard Potain (1825–1901) for Déjerine and Alfred Fournier (1832–1914) for Raymond [19]. They had to present a report on their candidate’s scientific work.

There are few witnesses of the campaign that preceded the vote at the faculty council. E. Gauckler, Jules Déjerine’s biographer wrote that [20]:

‘Déjerine, one of the candidates for Charcot’s chair, talked in the department about the results of his efforts. All the professors that he visited recognised Déjerine to be the best qualified. Some of them promised him their vote.’

The faculty council proceeded to the final vote on 15th March 1894. In the vote for first place, Raymond gained 30 votes and Déjerine just 1. The vote for second place earned 26 votes for Déjerine and 4 for Brissaud. Finally, Brissaud unanimously won the vote for third place. The faculty council ultimately ranked the three candidates in the following order: 1. Raymond, 2. Déjerine, 3. Brissaud [19] (fig. 2).

The seniority criterion was an important factor in the choice to elect Raymond. He was indeed the eldest of Charcot’s internes and the eldest agrégé. Raymond tried to provide an alternative reason for his nomination [21]:

‘Five days before he died, in the final conversation I had with him, Charcot talked about some of his future projects […] he told me of his desire to see me take his place, next to him, at the Salpêtrière, and of his hopes that I would one day become his successor.’

The appointment of Jules Déjerine, chef de service at Bicêtre hospital, and a strong opponent of the Salpêtrière, would have been seen as a disavowal of Charcot’s work. Déjerine’s slim chances in this election were confirmed by his wife in November 1893 in a letter to Professor August Forel (1848–1931) in Zurich [8]:

‘You are aware, are you not, that my husband will be applying for the chair of Mr. Charcot, but here in Paris, people’s work and merits and unanimity of opinion seem to count for less than seniority […] people scarcely recognise that for the last twenty years, my husband has been a victim of Charcot, not an enemy.’

Déjerine would later be appointed to the clinical chair for nervous system diseases when Raymond died in 1910.
Brissaud’s clear defeat did not come as a great surprise; in fact, it was probably to be expected. He had had the honour, as compensation, of provisionally occupying his master’s chair, but the intention had never been to appoint him permanently. Gauckler confirmed that there were only ever two candidates in the electoral campaign [20]. Brissaud went on to have a brilliant university career as holder of the chair for the history of medicine and then for medical pathology.

Raymond, the Atypical Successor

Fulgence Raymond, who began his new role during the faculty council meeting on 8th November 1894 [22], had not followed a typical career path (fig. 1). The son of a farmer, he was born in 1844 in a small village in Central France. He was initially accepted into veterinary school where in 1866 he was appointed as head of anatomy and physiology. However, he had always intended to practice human medicine, and so enrolled at the faculty of medicine in Paris at the age of 24. His memory and intelligence enabled him to advance quickly in his studies, but his progress was interrupted by the 1870–1871 Franco-Prussian war, and by the death of his wife. A student of Alfred Vulpian (1826–1887) and Charcot, he defended his doctoral thesis in 1876. He was named chef de clinique under Professor Germain Sée (1818–1896) at Hôtel Dieu hospital and professor agrégé in 1880. He practised at Lariboisière hospital in 1893 when Charcot left the scene. Raymond was described as an optimistic, likeable and happy person with a passion for hunting [23–25].

Raymond kept the same timetable that Charcot had established, with clinical lessons on Tuesdays and neuropathology on Fridays. He demonstrated his eclecticism by publishing works on structural neurological diseases as well as the psychological aspects of nervous diseases with Pierre Janet (1859–1947) [26, 27].

Raymond was less dogmatic than his predecessor and was sometimes criticised for his lack of charisma when lecturing [28]. He displayed a certain impartiality in his teaching methods [24]:

‘But if Charcot sinned through oversimplifying, his successor could be accused of attention to unnecessary detail. He stated everyone’s opinion with such impartiality that it was difficult to conclude anything.’

Nevertheless, Raymond gained true international recognition. He became one of the editors of the journal Epilepsia, and was awarded an honorary doctorate from the University of Oxford.

Fulgence Raymond suffered from serious heart problems, which forced him to be replaced in his university functions on several occasions [22]. It was during a bout of his cardiac disease that he died on 26th September 1910.

Although the succession of Charcot may have been too great a challenge for Fulgence Raymond, he nevertheless deserves to be recognised as one of the most important French neurologists of the early 20th century.

Fig. 2. Results of the faculty council vote for the permanent successor of Charcot’s chair (National Archives Paris: AJ/16/6283).
References