

60. SPECHT, W. and FISCHER, K., 'Vergiftungsnachweis an den Resten einer 900 Jahre alten Leiche', *Arch. krimonol.*, 1959, 124, 61-84.
61. That this problem is far from simple is demonstrated by M. Rostovtzeff, *The Social and Economic History of the Roman Empire*, Oxford, 1957, 2 vols., vol. 1, pp. 532-41.

H. A. WALDRON

A PALAEOPATHOLOGICAL RARITY IN A SKELETON OF ROMAN DATE

AN EXTREMELY unusual skeleton has recently been found at Cirencester, Gloucestershire. It dates from the Romano-British period, about A.D. 150, and is one of some two hundred burials excavated at this site. It is the skeleton of a well-built man, in the 45-65 age range, and most of the bones have survived in excellent condition, apart from a few small elements of hands and feet.

The interest of the specimen lies in a number of abnormalities that are rarely encountered in ancient material. These consist of partial destruction of various joints and of small cavitations in the cortex of several long bones. In all, more than fifty of these lesions are present and they are widely scattered throughout the limbs.

There is a small hole, about 4 x 7 mm., in the medial side of the trochlea of the R. humerus and another, symmetrically pairing with it, in the L. humerus but this second one is about only 3 mm. in diameter and is less deep. Both ulnae and radii are also affected: the ulnae proximally and all four bones distally. The radial heads are slightly damaged by soil erosion and are difficult to assess but at least the L. radius seems to have had one of these lesions on it. In addition to this, both ulnae have small excavations on their dorsal borders about 55 mm. distal to the olecranon. The hands are incomplete: only 6 carpals, 9 metacarpals and 7 phalanges survive but this is enough to show that they were extensively diseased. Of the 22 bones, at least 15 are affected and most of the metacarpals and phalanges show well-marked cupping or little pits on, or closely adjacent to, their joint surfaces (fig. 1).

In the lower limbs the condition is more advanced. Small lesions occur on the anterior surface of both patellae. On the R. tibia there is a hole in the tuberosity measuring 18 x 10 mm. and 5 mm. deep. Large cavities are present in the R. ankle joint and have involved the medial and lateral aspects of the tibia, talus and also the calcaneus. Similar, but smaller, lesions are extensive among the tarsals and metatarsals of this foot, although the full extent of the disease cannot be known because of post-inhumation loss of some of the bones (figs. 2 and 3). The L. tibia, fibula and foot are more complete but show almost identical lesions. Of 7 tarsals, 5 metatarsals and 2 phalanges, every bone is extensively affected (figs. 4 and 5). Figure 6 shows the radiographic appearance of some isolated metacarpals, metatarsals and phalanges.

Visual inspection of these multiple defects, and especially their radiographic features, leaves no doubt that an abundant bony reaction occurred around them. They do not at all resemble any form of malignant invasion but strongly suggest that some more or less encapsulated or circumscribed lesion had pressed on and re-moulded the osseous tissue.

The sum of the evidence leaves little doubt about the diagnosis. This is a classic example of gout. The cup-shaped destruction on and around the joint surfaces would

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have been the result of tophi—large deposits of chalky concretions composed of needle-shaped crystals of monosodium urate. Unfortunately, if any tophi survived after two millennia in the soil, they were not recognized at the excavation and subsequent cleaning of the skeleton.

It will be noted from the above description and from the plates that many of the lesions are not strictly para-articular but occur well away from the joints. Gouty tophi with this distribution are not especially unusual. These clear, punched-out defects and the relatively well-preserved articular surfaces of the ankle joints all agree with this diagnosis.

The outstanding example of gout in the history of palaeopathology is an Egyptian mummy of the Coptic period, which was described by Elliot Smith and Warren Dawson (1924). In that case tophi survived and were retained in position by the tendons of the feet and elsewhere. Apart from that solitary specimen there seems to be no other wholly convincing and unambiguous example in early material. The present case, therefore, must rank as being of quite exceptional interest and importance.

One further fact may be significant. This skeleton came from a cemetery whose occupants had a low economic standard, as shown by the paucity and poverty of their grave goods and by their inhumation in cheap wooden coffins or simple shrouds. Of the 268 burials only two were buried in handsome stone sarcophagi—a sign of relative opulence. One of these is the man described here and we may wonder, perhaps, whether his gout was causally related to a well-lined pocket and an over-indulged belly.

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SMITH, G. ELLIOT and DAWSON, WARREN, R., *Egyptian Mummies*, London, Allen & Unwin, 1924, pp. 157–58.

CALVIN WELLS

DOCTOR RODERIGO LOPES* SOME ITEMS OF MEDICO-HISTORICAL INTEREST

Much has been written during the last few years about Dr. Lopes (see bibliography at the end of this paper). We just wish to draw attention to some points which, as far as we know, have not been stressed in other pages. Nevertheless, we shall include a short biography, in order to remind ourselves of the unusual fate of Dr. Lopes.

I. BIOGRAPHY

c. 1525 Born in Portugal.

1559 Lopes arrives in London. Coming from Antwerp, or having been brought by Drake as a prisoner.

1567 Married Sara, seventeen-year-old daughter of the wealthy merchant, Dunstan Añes,

*His name should be written either 'Roderigo Lopes' in Portuguese, or 'Rodrigo Lopez' in Spanish. Usually, in his time, he was called 'Doctor Lopus'.