THE VAL-DE-GRÂCE, CHURCH, HOSPITAL, MUSEUM AND MEDICAL SCHOOL*

BY

Late Royal Army Medical Corps

From the ninth century a Benedictine monastery had been located at Bievres near the present French airfield at Villacoublay. In 1515, during the reign of Francis I, the monastery, in recognition of favours received, assumed the title of “Val-de-Grâce de Notre Dame de la Crèche.”

In 1621, Anne of Austria, wife of the French King Louis XIII, seeing the old monastery at Bievres falling into ruins, obtained the king’s permission to transfer it to the then outskirts of Paris in the Faubourg St. Jacques. Here the original monastery comprised a small church, a chapter house, and a cloister. The French queen during her subsequent visits to the Val-de-Grâce vowed that if she were granted a son she would replace the small monastery church with a splendid new basilica. In 1638, after twenty-three years of married life, she gave birth to a son, Louis-Dieudonné, the future Louis XIV (Le Roi Soleil).

This unexpected birth of a son and heir caused great joy throughout the whole of France. In fulfilment of her vow, Anne of Austria, with the support of the Prime Minister Mazarin, commenced the construction of the beautiful new church. François Mansart, greatest of French architects, drew up the plans and commenced the construction. The architects Le Mercier and later Le Duc continued the work based on his designs.

The church, which was completed in 1666, is in the baroque style and is most famous for its dome, 131 feet high, which rivals those of the Sorbonne, Panthéon and the Invalides. Inside the church is the magnificent cupola with the celebrated fresco painted by Mignard, containing 200 figures, each three times life-size. Amongst the figures can be seen Anne of Austria and St. Louis.

Before the French Revolution it was the custom to bury the hearts of princes and princesses of the royal blood in the chapel of St. Anne, to the left of the high altar. Two queens, Anne of Austria and Henrietta, wife of Charles I of England, are buried here.

The chapel of St. Louis to the right of the high altar (now used by hospital in-patients) was formerly the nuns’ choir which communicated with the convent cloister with its semi-circular arcades.

Hardly had this magnificent church been completed in 1666 when Anne of Austria, amidst great suffering, died of cancer of the breast.

From 1666 until the commencement of the French Revolution in 1789, the Abbey of Val-de-Grâce was visited by almost every royal visitor to Paris, includ-

* The Val-de-Grâce Hospital is concerned with post-graduate medical training only. Undergraduate training of the potential French Army medical officer is carried out at L’Ecole du Service de Santé Militaire, described elsewhere in this issue.—Ed.
ing Queen Henrietta Maria of England, Charles II, James II, and the Austrian Empress Maria-Theresa. By 1790 twenty-three nuns resided at the Val-de-Grâce.

But in 1793, following a decree of the Revolutionary Convention, the monastery was suppressed, and the buildings converted into a military hospital. Both the church and monastery were severely damaged and mutilated. The chapter hall was converted into the hospital kitchen, but considerable difficulty was experienced in converting the monastery as a whole into a general military hospital. In 1795 the Military Hospital of Val-de-Grâce was officially opened, and recognised in 1796 as a teaching hospital, on a par with the military hospitals of Lille, Metz, Strasbourg and Toulon. This role continues today. The church after the desecration of 1793 was used as an anatomy theatre and a military medical store until 1826, when it was restored to its proper mission.

In 1836 the hospital commenced to provide facilities for post-graduate studies; in 1850, by a decree of the 9th August, the hospital was officially designated as the “École d'Application du Service de Santé,” the equivalent of the Royal Army Medical College, and The Queen Alexandra Military Hospital, Millbank, and the Walter Reed Army Medical Centre, Washington, D.C.

Between 1836 and 1856, new hospital buildings were added in the monastery gardens, and some of the damage caused during the Revolution was repaired. Hardly had these restorations been completed when in 1870, during the Franco-Prussian War, over 300 shells fell on the hospital, causing casualties amongst the patients. During the insurrection of the Commune in 1871, the hospital was again bombarded.

The former nuns’ refectory and buildings surrounding the cloisters now form the Musée du Service de Santé. As early as 1850, the year of the commencement of the medical school, a collection of anatomical specimens was in existence, containing specimens provided by such famous military surgeons as Larrey, Begin, and Sedillot; also a collection of souvenirs, relics, tableaux, busts, and portraits covering the whole previous history of the French Army Medical Services. But it was by the influence of Justin Godart, Under-Secretary of State, that the museum attained its present superb achievements. Today the Val-de-Grâce Military Medical Museum, with its spacious halls and galleries, contains the finest available collection of documents, archives, models, relics, and souvenirs of military medicine. Being located near the hospital and medical school, it provides unique sources of information for students of the medical aspects of warfare.

The Central Library. This at present includes over 110,000 volumes relating to military medical studies. It also houses an imposing collection of military medical journals, French and foreign, ancient and modern. Amongst these it is interesting to note that the Journal de médecine militaire commenced in 1766.

The Archives. These are housed in portions of the vaulted kitchens of the former monastery and are divided into two portions. The first portion comprises archives of great historical interest relating to the French Army Medical Services during the period 1781 to 1914. Amongst those may be seen the first commission
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granted to the great military surgeon, Larrey, in 1792; also a letter from Frederick William of Prussia, dated 1803, congratulating Larrey upon his successes during the Egyptian campaign. The second portion of the archives covers the period 1914-1918. This unique collection includes monographs, reports, photographs, diagrams and films covering all aspects of the French, allied and enemy armies, both in Europe and the middle and far eastern theatres of war.

The Anatomical Section. This is located in two vaulted halls which formerly, before the Revolution, served as the monastery refectory. There are over 6,000 specimens (wax and plaster models, anatomical specimens dried and mounted, fragments of projectiles, etc.). These specimens have been collected during the Revolutionary wars, as well as the wars in the Crimea, Italy, Mexico, and in 1870, 1914-1918, and 1939-1945. This unique museum of military surgery has special sections devoted to wounds of the skull, the orbits, and maxillo-facial injuries, neurological lesions resulting from war injuries, and finally injuries of the limbs and trunk. One portion of this section is devoted to projectiles of all sorts removed from war-wounds.

The Field Medical Section. This portion of the museum, installed on the first floor overlooking the gardens of the cloister, contains a unique collection of equipment relating to almost every activity of the medical services in the field. Firstly, one can examine every kind of weapon used by belligerents, and the various protective measures devised to counteract them, e.g., steel-helmets, body-armour, respirators, etc. There follows a series of specimens showing the efficiency or otherwise of these protective devices. Secondly, there is a superb demonstration of every form of transport used in evacuating casualties from front to rear, by road, rail, water and air. In this connection the French army were the pioneers in transporting casualties by air. Apart from over 160 cases flown out from the siege of Paris by balloon in 1870, the credit of being the first to transport a wounded man by air belongs to a French pilot, Captain Dancelzer, who flew a wounded Serbian airman to safety during the retreat of the Serbian army in 1915. The French army was also the first to introduce air ambulances, in Morocco in 1918. The museum includes models of these and other aircraft. This section also includes models showing every kind of shelter, aid-post, collecting centre and hospital used in the various campaigns.

The therapeutic section demonstrates the different methods of therapy used in the practice of military surgery in the field. It was during the Franco-Prussian War of 1870 that Ollier recommended the combination of free drainage, absorbent dressings infrequently changed and immobilization in plaster of Paris. Included in this section also is the apparatus used by Carrel in the First World War for the intermittent irrigation of war-wounds with hypochlorite solutions; also a unique collection of splints of every kind, fracture apparatus, and prostheses for amputations. A collection of over 20,000 films and photographs of different kinds of apparatus used portrays the development of diagnostic radiology in the field.
The preventive medicine section demonstrates the struggles against malaria, typhoid, tuberculosis, dysenteries and other infections, and includes experiences gained in Korea and Indo-China. A fascinating exhibit in this section is the work of a young French army medical officer, Ernest Duchesne, who in 1897, at the age of 23, first discovered the antibiotic action of penicillin, forty-three years before the discoveries by Fleming, Florey and Chain. Working under the guidance of the celebrated Professor Roux at Lyons, Duchesne on 17th December, 1897, submitted his thesis on *Contribution à l'Etude de l' Antagonisme entre les Moisissures et les Microbes*. This thesis clearly demonstrated the prophylactic and therapeutic possibilities of penicillin.

**The Historical Section.** This is accommodated on the first floor of the monastic building, in large halls adjacent to the chapel, forming part of the original choir. These historic galleries recall to memory the great French military surgeons and physicians of the past such as Larrey, Percy, Desgenettes, Villemin, Laveran, and Vincent. The whole panorama of French military medicine from the Renaissance to the present day is covered with a magnificent display of paintings, drawings, documents, old instruments and books. Mingled with this collection are a number of scenes on the French front during the First World War. This section is approached by a Louis XIII staircase.

On the staircase, which formerly led to the monastery infirmary, are exhibited a series of eleven plastic models portraying different hazards which casualties may encounter between the point where they are first picked up, and the aid post where triage is first carried out. A striking canvas with life-size figures shows Napoleon III, after the battle of Montebello, being shown wounded by Hippolyte Larrey, son of the great Larrey. Another canvas shows Ambroise Paré, the father of military surgery, at the siege of Metz in 1552. Paré took part in no fewer than forty campaigns. (During a siege of Boulogne by the English army, he describes having to duck his head to avoid a cannon-ball!). Ambroise Paré replaced the cautery with ligatures for hæmostasis in amputations; invented artery forceps; described in detail treatment of fractures and made great advances in nursing techniques. For the treatment of gunshot wounds he substituted cooling soothing balms instead of scalding hot oil as had been the custom. When praised for his treatment of gunshot wounds he modestly stated: "Je le pansait; Dieu le guérit."

The historical section also contains numerous souvenirs of Jean Dominique Larrey, Napoleon's great Surgeon-in-Chief, who served the French armies continuously from 1792 to 1842, from the Revolutionary Directory to King Louis-Philippe. Larrey took part in the siege of Toulon, and in the campaigns of Spain, Italy, Egypt, Russia, Germany, and France itself in 1814. He was present at the battles of the Pyramids, Aboukir, Jaffa, Acre, Austerlitz, Jena, Essling (where he performed a successful thigh amputation on Marshal Lannes in two minutes), Wagram (where he was made a baron), Borodino (where, after performing 250 amputations, he accomplished prodigious feats with the care of the wounded); Lutzen (where he attended to over 2,000 wounded), and finally
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Waterloo, where, whilst Surgeon-in-Chief to the Imperial Guards, he narrowly escaped being shot by the Prussians and was saved only by the intervention of Blücher himself. Whilst in St. Helena, Napoleon described Larrey as "l'homme le plus vertueux que j'aie connu." The portion of the historical section devoted to Alphonse Laveran is of particular interest to visitors from Great Britain.

In 1880, whilst serving in the military hospital at Constantine in Algeria, Laveran, examining unstained blood films of a soldier under treatment for fever, noticed highly motile flagellated elements attached to pigmented spherical bodies, and moving with such vigour as to displace neighbouring blood corpuscles. Laveran's original "Description d'un nouveau parasite trouvé dans le sang des malades atteints de fièvre palustre" (Paris, 1884) was initially received with great scepticism. It was not until 1889 that, Laveran's parasites having been found in the blood of malarial patients in numerous other parts of the world, his researches were proved beyond doubt. Laveran, who subsequently continued his researches on pathogenic protozoa, was awarded the Nobel Prize in 1907. Included in the letters of congratulations to Laveran is one in original, dated 11th December, 1907, addressed by General Sir David Bruce, from the Royal Army Medical College, London.

The historical section contains numerous other fascinating souvenirs, such as those appertaining to Médecin Général Inspecteur H. Vincent who, in 1892, first discovered the fusiform spirilla of ulceromembranous angina and also discovered Streptothrix madurea, the cause of Madura foot. He also carried out numerous researches in prophylactic immunisation against the typhoid group of fevers.

The Val-de-Grâce Hospital, which at present comprises 1,000 beds, has since the Second World War commenced a long-term programme of modernisation. New diagnostic and therapeutic radiological departments, surgical wards and a new neuro-surgical department have been built.

It is intended to erect a 2,000-bedded military hospital on the most modern lines within the grounds of the former royal abbey of Notre Dame de Val-de-Grâce. The intention is that this historic monument, the cradle of French military medicine, with its church, hospital, medical school and museum, shall continue its mission of training medical officers of all three services with the most advanced facilities available.

When we recall the superb contributions made to military medicine by Larrey, Percy, Desgenettes, Villemin, Laveran and Vincent, we can but wish to Val-de-Grâce, "Ad Multos Annos."

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Fig. 1.
The Curator of the museum showing the Director-General the skull of a French soldier wounded at the battle of Waterloo, with the bullet embedded in the parietal bone.

Fig. 2.
Médecin Colonel Hassenforder, Curator of the Museum of the Val-de-Grâce, showing Lieut.-General Sir Alexander Drummond the original letter sent by Sir David Bruce to Alphonse Laveran.