The sanatorium of Saint Eleousa: An important part of the history of Respiratory Medicine on the island of Rhodes

Andriana I. Papaioannou¹, Konstantinos T. Kostikas²

¹SpR in Pneumonology Medicine, 3rd Pneumonology Medicine Department Sismanogleion General Hospital, Athens ²Pneumonology Physician, Editorial Board "PNEUMON"

Correspondence to:

Andriana I Papaioannou 3rd Pneumonology Medicine Department, Sismanogleion General Hospital 1 Sismanogleiou Str., Marousi 15126, Athens Greece Tel.: +30 210 8039422 E-mail: andriana78@vodafone.net.gr

INTRODUCTION

The Sanatorium of Saint Eleousa was the main institution for the inhospital care of patients with tuberculosis in the Dodecanese for 23 years (1947-1970). It started functioning in August 1947 in the Italian buildings of Campo Chiaro and initially had a capacity of 80 patients and 54 staff members. Although the village of Saint Eleousa was not ideal from a climatic point of view, since the area is exposed to strong cold winds, the selection of this site was determined by the need for quarantine of patients with tuberculosis.

The first patients of the sanatorium were patients with tuberculosis who until that time had been hospitalized in the "Thermai" Hospital in the centre of the town of Rhodes, or in a small hospital called "Villa Passa" in the village of Kremasti. The central personality in the history of the sanatorium was the respiratory physician Emmanuel G. Kostaridis (Figure 2), who was the scientific director of the institute for the greater part of the 23 years of its operation. He was also the administrative director for more than 15 years and for a long period of time he was the only physician working in the sanatorium.

The main operational difficulty of the sanatorium was its long distance from the town of Rhodes, which caused problems for both the replenishment of supplies and the recruitment of specialized staff. Dr Kostaridis worked untiringly to solve the problems of the institution, trying to provide solutions for not only the practical difficulties related to the long distance from the town and the lack of basic laboratory support, but also the multiple bureaucratic obstacles¹.

THE MANAGEMENT OF PATIENTS WITH TUBERCULOSIS

Two doctors with a special interest and special training in tuberculosis, the director and a consultant, were responsible for the management of care of the patients in the Sanatorium. The institute had a small laboratory in which basic examinations were performed (sputum stain for Koch's bacillus, EST, urine examination), while the rest of the laboratory tests required



FIGURE 1. The main building of the Sanatorium of Saint Eleousa the way it stands at the present time.



FIGURE 2. Dr Emanuel G Kostaridis, Respiratory Physician.

were performed in the General Hospital of Rhodes. Tests on the sensitivity of the Tb bacillus to antituberculous drugs was started in 1964, on specimens that were sent to the "Sotiria" Hospital in Athens. The sanatorium of Saint Eleousa had also a Radiological Department where simple chest X-rays and fluoroscopy could be performed¹.

The management of patients during the first years of operation of the sanatorium included administration of the drugs that were available at that time (i.e., streptomycin and PAS), an abundance of fresh air, bed rest, and a well-balanced diet rich in vitamins and minerals. In those early days a surgical procedure with the application of iatrogenic pneumothorax was a very important aspect of the management of patients with tuberculosis². For major thoracic surgical procedures (e.g. thoracoplasty) patients were transported to the "Sotiria" Hospital in Athens³, but minor procedures, such as symphysiolisis, were performed thoracoscopically in the Sanatorium of Saint Eleousa.

The sanatorium was one of the first of the therapeutic institutions in Greece where isoniazid, the "new" drug for that time, was used. Dr Kostaridis, having a great sense of responsibility towards his patients, along with an instinct for scientific research, handled the administration of this new drug with great caution. In his manuscripts he notes "...for the administration of that new drug we needed to observe the patients very closely and perform serial clinical radiological and laboratory tests because the adverse events of that drug were not yet known". This was the reason why isoniazid was given initially to 3 patients in the sanatorium with the most advanced disease, under close observation¹.

Dr Kostaridis recognized early on the advantages of the simultaneous administration of 3 or more drugs and he observed that treatment failure was more common in patients who had previously been treated with inadequate dosage and/or an interrupted therapeutic regime, something common in those days^{4,5}. According to the testimonies of his patients and colleagues, he treated each patient holistically, as a mental and physical entity. He was able to identify the social and economic problems that the disease caused to the patients and he did his best to support them, aiming at the same time at the protection of the community¹.

THE OUTPATIENT ANTITUBERCULOSIS CLINIC

An outpatient antituberculosis clinic was held 3 times weekly in the Sanatorium of Saint Eleousa and a further 3 times weekly at the General Hospital of Rhodes. The main aim of this clinic was the clinical, laboratory and radiological follow-up of patients who had been discharged from the sanatorium, verification of the continuation of treatment, administration of chemoprophylaxis to close contacts of the patients and education of the community of the island about tuberculosis. The staff of the clinic was working constantly for the success of the battle against tuberculosis on the island of Rhodes. Ultimately, the outpatient antituberculosis clinic broadened its activity outside the hospital and started visiting schools in the town of Rhodes and the villages on the island, performing tuberculin skin testing of the children and vaccination against tuberculosis¹.

THE CONTINUOUS BATTLE AGAINST TUBERCULOSIS

Despite the initial impressive effectiveness of the new drugs against tuberculosis, Dr Kostaridis predicted the development of bacilli resistant to medication, linking the emergence of resistance to the incorrect and inadequate administration of drug treatment, a phenomenon that has been confirmed nowadays⁵. He stated that tuberculosis is a powerful enemy which "starts recovering after the first wounds that are achieved and prepares its counterstrike by becoming resistant to treatment"⁶. In 1964 the keynote address of the World Health Organization was "No reprieve in the fight against tuberculosis". Dr Kostaridis always used these precise words in his attempts to keep the Rhodian community well informed with his speeches about the war against tuberculosis¹.

The Sanatorium of Saint Eleousa was closed in August 1970, but the outpatient antituberculosis clinic continued functioning until the December of 1971, when its operation was terminated after the retirement of its director. Having hospitalized 1,581 patients in total from various different regions of Greece, and having informed and educated the community about the prevention and therapy of tuberculosis, the Sanatorium of Saint Eleousa represents an important part of the history of respiratory medicine in the Dodecanese.

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