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## Why (and how) should we Study the History of Pharmacology?

## G. Papadopoulos

Dept of Experimental Pharmacology, Medical School, University of Athens, M. Asias 75, 115 27 Athens, Greece

The history of pharmacology is often simply viewed as a collection of interesting or curious or even amusing stories. At a more serious level, one usually argues that it is important to follow the enormous progress made through the centuries both in establishing knowledge and in developing new methods - or, alternatively, to realize the tragical mistakes made sometimes with the development and use of drugs. But such mistakes could be dependably demonstrated only for the period of the last century. On the other hand, instead of studying a presumably triumphant course, it is rather more interesting to concentrate on the merits and the problems of the end of the course, i.e. of today's situation.

Here we focus on some rather deeper aspects of the study of the history of pharmacology. Such a deeper study could discern some important features characterizing this history. Instead of confirming an upward course with continuous accumulation of knowledge and improvement of therapeutic applications, one could see to emerge, again and again, a quite different picture: Presumable knowledge about drugs and therapeutic uses of drugs change during the history on grounds and under conditions that are difficult to consider as related to what could be called sound scientific argumentation and practice. Such changes, as well as the controversies

preceding or accompanying them, were connected to theoretical systems or even world views, which contrasted one another and could also, at a time, change or be accepted more widely by the medical community.

The historical research could try to understand better some motives or factors underlying such changes in views and in practices. But it cannot reasonably hope to establish a satisfactory judgement about whether one system was, on the overall, better than another or constituted a real progress in comparison to a previous one. The most we can achieve, in some cases, is to find out - or to have reasonable evidence about relative gains and losses in the transition from one 'system of knowledge' about drugs to another. (These gains and losses are of course parallel to those concerning the respective systems of knowledge about human nature and human diseases.)

Such insights into the relative merits of different historical therapeutic systems could also be important in the framework of discussions about today's situation in pharmacology and therapeutics. They could, at least, make us more thoughtful and more humble, when we are trying to estimate present achievements and to anticipate future progresses.