He is the ideal patient. He never complains, argues or whines. He takes any prodding with patience and grace, and never loses his composure. In the last twenty years he’s lost about 500 pounds. His health is strong despite clinical signs of thirty possible heart conditions that he can display at will. His name is Harvey and he is not a giant rabbit!

If you haven’t guessed by now, Harvey is a cardio-pulmonary patient simulator featuring over two hundred clinical signs corresponding to thirty cardiac conditions. Harvey is housed in a small room on the second floor of the Hammer Building and is available for use by anyone who is a member of the CUMC community. Students may request the key to the room at the Circulation Desk of the Health Sciences Library. After a brief orientation, students may book the Harvey room for up to one hour at a time. A computer located in the room includes a set of self-assessment slide programs describing twenty cardiac diseases, and the UMedic Curriculum—an interactive audio-visual system—both of which may be used with or without Harvey.

An infrared sound transmission system makes it possible for a group of students to simultaneously learn from Harvey using individual headsets. Ten infrared stethophones are available to be borrowed from the Circulation Desk, located on the Lobby Level of the library.

Learn more at:
http://library.cpmc.columbia.edu/hsl/resources/harvey.html

Hammer Construction Update

Construction continues to progress in the Hammer Building. During the recent winter break, the flooring in much of the lobby was replaced with terrazzo, a durable and attractive material reminiscent of marble.

Access to the lower levels is still limited because of heavy construction there. So, many of our books or paper-format journals may only be accessed upon request.

For any items with a "Health Sciences Stacks" location in CLIO (http://clio.cul.columbia.edu), use our "Retrieval Request" form:
http://library.cpmc.columbia.edu/hsl/forms/_frm_req_stor.cfm
If ever there were a universal panacea, aspirin would come very close to it. Its benefits are numerous and its history fascinating. The path from the extraction of salicin from the leaves and bark of the willow tree to the processing of salicylic acid and acetylsalicylic acid, and the production of aspirin is a long and convoluted one. The Assyrians, Babylonians, and Egyptians used the willow tree to cure fever, pain and inflammation. So did the Chinese and the Greeks, who exploited the willow tree bark for its therapeutic qualities. Hippocrates prescribed it as an analgesic in childbirth, Celsius used it for its anti-inflammatory properties, and Galen for its antiseptic and disinfectant effects.

But the real history of aspirin starts in the eighteenth century with Reverend Edward Stone, who in a 1763 letter addressed to the Royal Society described how he used powdered willow bark mixed with water to treat patients suffering from ague (a fever believed to be malaria).

More than a hundred years later in 1876, Thomas MacLagan, a Scottish physician, described how he successfully treated a patient with acute rheumatism with willow powder extract after testing its anti-inflammatory properties on himself.

It seems that the first to obtain a raw form of aspirin was a French chemist named Charles-Frédéric Gerhardt, who in 1852 synthesized acetylsalicylic acid without recognizing it as such. When in 1874 the first industrial production of acetylsalicylic took place in France, it was manufactured as an antiseptic disinfectant and a food preservative, not as an analgesic drug.

The conclusion of this long history comes in the late nineteenth century, when Bayer—a German company that originally specialized in dye manufacturing—became increasingly interested in pharmaceutical products. One of its researchers, a pharmacist named Felix Hoffmann, had been investigating the therapeutic properties of acetylsalicylic acid. The story goes that he tried to find a purer form of acetylsalicylic acid for his arthritic father who could not tolerate the salicylic acid’s irritating effects on the digestive system. Building on Gerhardt’s work, Hoffmann worked to find a product with the same therapeutic properties but without the side effects. Interestingly, Hoffman and his close colleague Dr. Arthur Eichengrün did not receive any reward for their work because the acetylsalicylic acid had been produced in France first, and their contracts stated that they could be compensated only for patents produced in Germany. Bayer obtained exclusive manufacturing rights in Germany by creating a new trademark called “aspirin.” Its commercialization became one of the most successful stories in drug manufacturing.


Lévesque H, Lafont O. [Aspirin throughout the ages: a historical review] [Article in French] Rev Med Interne. 2000 Mar;21 Suppl 1:8s-17s. PMID: 10763200

Salix Alba - Illustration from Prof. Dr. Otto Wilhelm Thomé Flora von Deutschland, Österreich und der Schweiz 1885, Gera, Germany www.biolib.de