Ludwig Guttmann and the Paralympic Games

While the origins of the Olympic Games may be popular knowledge, little thought is given to the Paralympics, and the individuals who laid the foundations for their creation. The same man responsible for the Paralympic Games also introduced a new treatment regime for spinal injury patients, including frequent turning and pressure ulcer (PU) prevention, forever changing the treatment of paraplegics in the UK and elsewhere. That man was Ludwig Guttmann.

German-born neurologist Professor Sir Ludwig Guttmann (1899–1980) is primarily credited with both the creation of the Paralympic Games and with the establishment of the National Spinal Injuries Centre (NSIC) at Stoke Mandeville (Albin, 2014). His introduction of ‘frequent turning, bed contact surfaces without creases, ridges, or pressure points, [and] near-sterile techniques for wound treatment or dressing changes’ (Albin, 2014) are still relevant for wound care management in the present day.

After escaping Nazi persecution, fleeing to England, and continuing his research under Hugh Cairns at the Nuffield neurosurgery department at the Radcliffe Infirmary (Wellcome Library, 2004), renowned neurosurgeon Guttmann was asked by the British government to establish the NSIC at Stoke Mandeville in 1943 (Poppa Guttmann Trust, 2010), reportedly ‘the first successful unit in Europe to treat spinal injury patients’ (Silver, 2013).

His work was even more meritorious as it directly counteracted and disproved the nihilistic attitudes surrounding spinal cord injuries at the time (Poppa Guttmann Trust, 2010; International Spinal Cord Society [ISCOS], 2015). According to John Russell Silver, treatment of spinal patients was so poor that sepsis and urinary infections were usual, with patients rapidly dying from ‘a combination of pressure sores and urinary tract infection’ (Silver, 2005). Guttmann knew through experience that infection was the primary cause of the 80% mortality rate (Albin, 2014) among spinal injury patients in Germany, so took to turning and catheterising patients himself at the NSIC in an effort to prevent PU and infection.

Guttmann’s pioneering treatment of spinal injury patients extended to the introduction of mandatory involvement in sport and exercise as a means of therapy (Schülke, 2001). This integration of disabled patients into society through participation in sporting events resulted in the inaugural Stoke Mandeville Games in 1948. The annual meeting consequently became the Paralympic Games, fulfilling Guttmann’s vision of a large forum, international competition (Poppa Guttmann Trust, 2010), coinciding with the 1948 London Olympic Games (Frankel, 2012).

While he is largely revered for his Paralympic legacy and his establishment of the NSIC at Stoke Mandeville, Guttmann will remain relevant to nurses and wound care specialists worldwide thanks to his considered, fastidious approach to turning patients and preventing pressure ulcers. At a time when preventable PU is the vogue topic within wound care and medical litigation, this anonymous letter to the Lancet in 1967 is food for thought: ‘During the four years that I worked there [NSIC] I did not see a single pressure sore develop on any of the 200 inpatients at that centre. The key to Sir Ludwig Guttmann’s management is that he stresses the responsibility for the care of the skin and pressure-sore areas rests with the consultant in charge of the patient.’

REFERENCES


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