

## Francesco La Cava (1877-1958): humanist physician of early twentieth century

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**Abstract.** Milan's medical historiography owes the credit to the physician Francesco La Cava (1877-1958) for having dealt with Lombard health history in the 1940s. Graduating in Medicine with honors at the University of Naples in 1902, he was able to combine the medical profession with his Christian religious education and with a passion for art and literature.

**Key Words:** La Cava, Sistine Chapel, Michelangelo, art history, medical humanities

Francesco La Cava was born May 26th, 1877 in Careri, a town on the Ionian coast in the province of Reggio Calabria (RC), by Giuseppina Colacresi and Giuseppe La Cava, small landowners (1). Firstborn of six children, he was soon entrusted to the care of his uncle Rocco, archpriest of the city, who had him enter a college at the Episcopal Seminary of Gerace to carry out his first studies; subsequently he attended the Maurolico high school in Messina, where the best students were welcomed; here he reached his classical maturity in 1895. Then he continued his university studies at the Faculty of Medicine of Naples where he graduated in 1902. La Cava began to exercise the medical profession following its Christian religious education; he took care of the peasants, shepherds and the poorest of his country, with loving passion and self-sacrifice, to the point of refusing to continue his specialist studies in Medicine. He also had the opportunity to work with prof. Antonio Cardarelli (1831-1927), but the doctor refused the offer to support the family. Therefore, after having served in Florence as a medical officer in the Bersaglieri corps, in 1904 he obtained the medical conduct of Bovalino Marina (RC), a poor economic area, with serious lack of health (1). On June 30th 1907 he married Concettina Morisciano, a young Bovalinese, noble, educated and of profound Christian religion, with whom he had ten children. Their home

became a regular meeting place for those who loved to talk about science and medicine, but also about art and literature. In scientific research Francesco La Cava devoted himself to the study of tropical diseases widespread in the Locride area, reporting his results in international conferences and sector magazines; between 1910 and 1914 in Bovalese he dealt with about two hundred cases of indigenous leishmaniasis, an unknown disease in Europe, but frequent in North Africa, which managed to deal with specific therapies without the use of quinine. Thanks to these discoveries, La Cava gained international reputation. In December 1910 he attended at the Congress of internal medicine in Messina with a speech entitled "Tropical diseases in Bovalino", where he presented the results of his studies on human leishmaniasis in Southern Italy, for the first time recognized as originating in the European continent. As a direct result of his medical achievements, La Cava obtained his chair in Tropical Pathology at the University of Rome. In his research activity, La Cava also dealt with intestinal amoebiasis, tropical ulcer in the lower limbs, three-day fever, Maltese fever, human ocular myiasitis, dengue fever, beriberi (or avitaminosis B1), all the tropical pathologies that were become indigenous also in Southern Italy. In 1913 and 1914 he lectured exposing his precious discoveries at the University of Pavia, a fact for which he was praised by

Professor Golgi himself. During the First World War La Cava took up service in Gerace for a few months and in May 1915 he was called to the front as “director of some field hospitals”. The war did not dissuade him from his research and his desire for knowledge; his studies focused on lymphatic filariasis, of which he discovered the first autochthonous European case in the province of Treviso. At the end of 1917 he was transferred to Rome as director of the Aurelio Saffi Military Hospital (2). With the advent of Spanish flu he did not escape his duty and worked tirelessly to help those he loved to call “his neighbors”.

In the 1920s, after completing his service at the military hospital, he worked at the War Pensions Commission. In these years La Cava devoted himself to his youthful passions, such as literature and art. During a visit to the Sistine Chapel in May 1923, he was struck by a detail of Michelangelo’s masterpiece. The artist had represented San Bartolomeo who according to tradition was skinned alive, sitting on a cloud with a knife in his right hand and his skin in his left hand; just in the folds of the same La Cava glimpsed the face of Michelangelo instead of that of the saint. La Cava devoted himself for two years to extensive research on the life and works of Michelangelo; the results merged in 1925 in a volume entitled “The face of Michelangelo discovered in the final judgment. A psychological drama in a symbolic portrait” (Fig. 1), published by Nicola Zanichelli in Bologna, on the occasion of the 450 anniversary of the artist’s birth (2).

During the thirties, La Cava deepened his Christian faith by dedicating himself to theological and philological themes addressed through a careful and lucid scientific method. This rapprochement with faith is represented by some scientific-religious studies on the mechanism of death by crucifixion, collected in 1953 in a volume entitled “The Passion and Death of Jesus Christ illustrated by medical science”. In 1944 he published the work on “Communion Eucharistic through the gastric fistula” in the magazine *Periodica* in which he claimed the validity of Eucharistic Communion also through the administration of the host at gastric level.

La Cava wrote illuminating essays on the theological interpretation of controversial passages of the Holy Scriptures and on the function of parables



**Figure 1.** Book cover: *Il volto di Michelangelo scoperto nel giudizio*, 1925 - Zanichelli

(“Ut videntes non Videant” and “Ne quando convertantur”) (1). In those years, in addition to his university assignments, he was appointed expert of the Sacra Rota and also began to hold regular courses on tropical diseases at the Missionary School of the Order of Malta.

With the advent of the Second World War, the professor always tried to remain outside of ideological clashes or political affiliations; he refused to join the Social Republic and tried not to conduct active politics. Nevertheless, those years were devastating for him, as for many others, morally and physically, also approaching the years of old age.

Thanks to his meeting with Nicola Latronico, La Cava was also interested in History of Medicine. He

published a text on the health history of Lombardy “Hygiene and Health in the Statutes of Milan in the XV century” (3) and an essay on the plague of 1575-1578 “The plague of St. Charles seen by a doctor” (4).

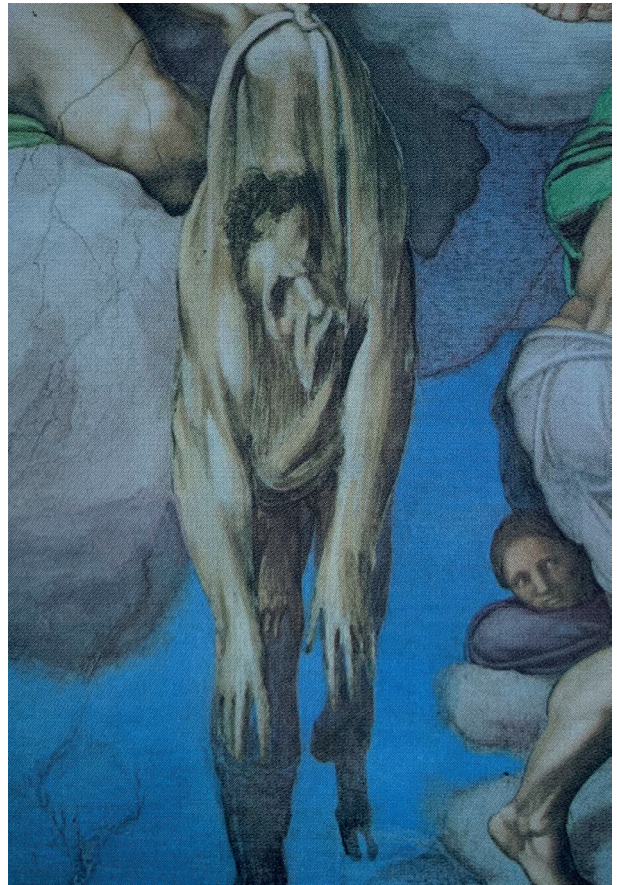
Francesco La Cava suddenly died in Rome on May 25th, 1958, suffering from cardio-circulatory shock, while he was on his way to the district polling station, accompanied by his youngest son, Virgilio. International was the condolences for the loss of the doctor and researcher, a man of culture and faith. The remains of Francesco La Cava and his wife were buried in the cemetery of Careri in November of the same year. In his memory the main square and the middle school of his native town were named, while Bovalino paid tribute by giving his name to a central avenue of the municipality (1).

Dr. Francesco La Cava wrote a lot about the history of medicine, but he had a strong passion for art that allowed to see a particular anatomical detail. He, looking at the Universal Judgment in the Sistine Chapel, he had the intuition to observe Michelangelo’s face between the folds of the skin of San Bartolomeo (Fig. 2). For four centuries, Michelangelo’s self-portrait had escaped the careful observation of groups of scholars and artists from all over the world, and was a figurative demonstration of the psychological drama of genius.

La Cava thus describes the unexpected appearance:

“Now undertaking the study of the composition in its various characters, I suddenly saw the figure of Michelangelo looking at me ... A shiver ran down my spine. It was really him! ... From that day a real spiritual torment began for me. The aching face accompanied me on hard days, on sleepless nights. Anguished doubts, feverish researches on his life and works, occupied me for almost two years, during which, hoping to find some trace that clarified the mystery, I jealously guarded the secret of that beloved face in my heart” (2).

Between 1923-1925 he was completely absorbed by the studies on the great artist. He studied and analyzed meticulousness and painstaking patience all that had been produced by and on Michelangelo, traced its psychological profile, rummaged in the verses of the sonnets of the genius, and in the existing correspondence, to find an explanation for the self-portrait. The



**Figure 2.** Detail of the universal judgment. St. Bartholomew from *Il volto di Michelangelo scoperto nel giudizio* - Zanichelli

thesis sustained in this work, perhaps a little bold, was taken up by the national press and received with amazement and consensus, which made La Cava an excellent “art historian.

It is known that Michelangelo did not like to paint portraits which he considered useless adulation of vanity and imperfect illusions of the senses. Vasari wrote: “Aborriva il fare somigliare vivo, se non era d’infinita bellezza ...”. Perhaps the only exception is the portrait of the young Messer Tommaso dei Cavalieri. The artist never painted his own image and rarely agreed to pose for others. Vasari says: “Di Michelagnolo non ci è altri ritratti che duoi di pittura; uno di mano del Bugiardino e l’altro di Jacopo Del Conte; e uno di bronzo tutto rilievo, fatto da Daniello Ricciarelli; e questo del Cavalier Leone: da e quali se n’è fatte tante copie, che n’ho visto, in molti luoghi d’Italia e fuori, assai numero”.

Why did Michelangelo choose to represent himself in this terrible portrait? The figure of San Bartolomeo of the Last Judgment is perhaps the most famous representation of the holy apostle. According to tradition, his death had been horrible: stripped alive! Michelangelo in fact represents the saint with the knife used for martyrdom in his right hand while in his left hand he holds the skin torn from his body. La Cava was convinced that it was a self-portrait of Michelangelo: Bartholomew's head is completely bald, while the skin shows abundant hair; the saint's forehead is wide and smooth, in the representation of his own skin the forehead is clearly a square; there are also obvious differences in the form of the nose, eyes and other anatomical details. The intention of the artist to portray two distinct figures was clear. To confirm his hypothesis, La Cava compares the face of the Sistine Chapel and the portrait performed by Jacopo Del Conte between 1544 and 1545, after the serious illness during which Michelangelo was hosted and treated by the Strozzi. This portrait, today in the Uffizi, repeats the same physical features of Michelangelo: the black and frizzy hair, the almost square forehead that "in profile almost advances the nose".

For La Cava this frowning and painful face finds a precise motivation in the history of Michelangelo's life, in the peculiar traits of his character, in the psychological drama that accompanied the realization of some works by the artist up to the masterpiece of the Judgment. In particular, reference is made to the commission in 1505 of the burial of Julius II, whose construction was postponed to 1544. This artistic stalemate caused Michelangelo a profound restlessness, disappointment and bitterness. The artist himself defined the project "the tragedy of the burial", a true ordeal that disturbed the last years of his life and was an inexhaustible source of accusations, torments and remorse: "Infiniti impacci, dispiaceri, travagli e, quel che è peggio, per la malizia di certi uomini, infamia". Michelangelo was also accused of having stolen and worn the money from the Burial of the Pope. In this regard, Vasari still confirms the artist's prostration status: Mentre che Michelagnolo dava ordine a far questi disegni e cartoni della prima facciata del "Giudizio",

non restava giornalmente essere alle mani con gli agenti del Duca d'Urbino, dai quali era incaricato aver ricevuto da Giulio II sedici mila scudi per la sepoltura, e non poteva sopportare questo carico: e desiderava finirla un giorno, quantunque e' fussi già vecchio".

According to La Cava, this self-portrait contained a tragic symbolic meaning: the skin of the falling and lifeless martyr was the emblem of the suffering and anguish felt by Michelangelo. The artist, now old, paints in his face his state of mind, the enormous physical and spiritual effort necessary to complete the great fresco of the Judgment, his disdain for the slanders and injustices suffered.

The frightening anamorphic face with two black holes in place of the eyes and a black gash in place of the mouth is that of a man broken and torn by enormous physical and psychological suffering. And it is precisely in the incorporeal and decaying skin of the Saint that Michelangelo concealed his tragic and painful portrait. A few years later the execution of the Judgment, some verses of the Rhymes reflect the intimate spirituality of the artist, the most effective commentary on the deformed self-portrait of San Bartolomeo (5):

"I' sto rinchiuso come la midolla / da la sua scorza, qua pover e solo, / come spirto legato in un'ampolla /.../ Dilombato, crepato, infranto e rotto / son già per le fatiche, e l'osteria / è morte, dov'io viv' e mangio a scotto. /.../ La mia allegrezza' è la maninconia..."

Francesco La Cava, already in the 1920s, put into practice what Medical Humanities claim: the doctor must approach literature, music and the figurative arts from which his profession must draw those feelings of "humanity" that today, due to an increasingly technological medicine, they are disappearing. La Cava has been able to combine its scientific training with a personality rich in spirituality and humanity. In the light of current experience, the recovery of the humanistic aspect of medicine must be a fundamental feature both in the doctor-patient relationship and in making a correct diagnosis and therapeutic path. Visiting museums, attending literary seminars or immersing yourself in the reading of narrative medicine texts must go back to being an integral part of the life of health professional, which sometimes leads to "intuitions" that could then be part of history.

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