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What Must a Researcher Remember about the Internal Medicine?

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Introduction

Internal Medicine focused on the prevention, diagnosis and treatment of disease in adults. Internal refers to the treatment of diseases of the internal organs [1]. The term "internal medicine" in English has its etymology in the 19th century German term "Inner Medizin". Originally [2] Internal Medicine focused on determining the underlying "internal" or pathological causes of symptoms and syndromes through a combination of medical tests and bedside clinical examination of patients. This approach differed from physician Thomas Sydenham, known in 17th century, as the father of English Medicne or "the English Hippocrates". Sydenham developed the field of nosology (the study of diseases) through a clinical approach that involved diagnosing and managing diseases based on careful bedside observation of the natural history of disease and its treatment [3].

Internal Medicine as Vocation

Sir William Osler, in 1897, said … I wish there were another term to designate the wide field of medical practice which remains after the separation of Surgery, Midwifery, and Gynaecology. Not itself a specialty, its cultivators cannot be called specialists, but bear without reproaching the good old name physician, in contradistinction to general practitioners, surgeons, obstetricians, and gynecologists. The students of internal medicine cannot be specialists. The manifestations of almost anyone of the important diseases during almost anyone of the important diseases in a few years will "box the compass" of the specialties. A wonderful example of the various and different features of internal medicine is represented by syphilis disease.

So, with syphilis, which after the first few weeks I claim as medical affection. I often tell my students that it is the only disease which they need to study thoroughly. "Know syphilis in all its manifestations and relations, and all other things clinical will be added unto you. For the students of internal medicine, anything should be acceptable which brings him into contact with patients. If possible, let him be a pluralist, and, as he values his future life, let him not get early entangled in the meshes of specialism. Once established as a clinical assistant he can begin his education, and nowadays this is a very complicated matter [4].

Giovanni Battista Morgagni: The Father of Internal Medicine

The great work of Morgagni "Seats and Causes of Diseases investigated by Anatomy" is a milestone for the studies regarding Internal Medicine. This is a monument [5]. He divided up his Treatise into five books, choosing the number and arrangement, as he informs us, both to conform to the order of the "Sepulchretum" by Theophilus Bonetus and that he might severally dedicate them to the five learned Academics of which he was a member and to each book is prefixed a prefatory letter inscribed to a representative member of one or another of these bodies. A special feature and one upon which Morgagni laid great stress, is the series of four carefully prepared indexes, of which the first is a general content list, giving the subject matters of the five books: "Argumenta ex ordine estendes totius operis".

The second is an index of disease symptoms, causes and other matters appertaining thereto. The third gives the appearances

found in the cadaver internal and external: "Index visorum in cadaveribus". The fourth index is of names and things worthy of note: "Index nominum et rerum notabilium", and is the longest and most copious, being a carefully compiled list for general reference. Morgagni work shows his great service to morbid anatomy, and through this to general medicine, consisted in the impetus which he gave to the scientific study of the relations between the living and the past mortem aspects of disease by his splendid systematisation of a myriad of isolated facts and discoveries; an impulse the impetus of which the practitioner of today even now feels, though he may not know it. It was largely the work of Morgagni which made possible a rational view of disease. It paved the way for a new era of accurate and truthful work founded upon verifiable fact rather than upon elusive speculation and indiscriminate citation of authority

Conclusions

General Internal Medicine continues to face some critical challenges in research, education and clinical practice. Some of the activities are familiar (e.g., devise a longitudinal care plan for chronic disease), but others (e.g., lead an interprofessional health care team) will require new skills and men curricula to support their development. So, while many challenges remain, innovations in care delivery such as the patient centered medical home and new models of education that require turning the spotlight once again to the ambulatory setting are just some of the reasons for optimism. As Armstrong [6] concludes: An overarching mission to transform health care delivery provides a unifying force for academic General Internal Medicine at a time of tremendous opportunity and uncertainty.

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References

1. Collin PH (1998) Dictionary of Medicine. New York: Taylor & Francis p: 184.
2. Echemberg D (2007) A history of internal medicine: medical specialization, as old as antiquity. Revue Médicale Suisse 3 (135): 2737-2739.
3. Meynell GG (2006) John Locke and the preface to Thomas Sydenham's Observationes Medical. Medical History 50(1): 93-110
4. Sir Osler W (1897) Internal Medicine as vocation: an address before the section on general medicine at the New York Academy of Medicine, October 19th, 1897. New York: The Medical News.
5. Morgagni GB (1769) Seats and Causes of diseases investigated by Anatomy. 5 Libri. Londra: Millar A, Cadell T, Payne and Johnson.
6. Armstrong K, Keating NL, Landry M (2013) Academic general internal medicine: a mission for the feature. Journal of General Internal Medicine 28(6): 845-851.

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