Biographical Sketch

Franz König, MD 1832–1910

Richard A. Brand MD

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Abstract This biographical sketch on Franz König corresponds to the historic text, *The Classic: Ueber freie Körper in den Gelenken* [On loose bodies in the joint] (1887), available at DOI [10.1007/s11999-013-2824-y](https://doi.org/10.1007/s11999-013-2824-y)

(Translated by Drs. Richard A. Brand and Christian-Dominik Peterlein).

Franz König was born in 1832 in Rotenburg an der Fulda, Germany, the son of the personal physician to the Landgraf von Hessen-Rotenberg [2]. He studied in Marburg and received his doctorate in 1855. König continued his studies in Berlin with von Langenbeck and others, and passed his state examinations in 1856. He became an assistant at the medical clinic in Heidelberg, but returned to Berlin for further study. From 1858 to 1859 he was an assistant in Marburg, then became a private practitioner, focusing on surgery. After passing a second set of examinations, he worked as a district trauma surgeon (*Amstwundarzt*) in Hanau, until he was appointed professor of surgery at the University of Rostock 10 years later. He became seriously ill with arthritis in 1875, and after a slow recovery accepted the post of professor of surgery in Göttingen. Twenty years later, in 1895, he was named the professor of surgery at the Charité in Berlin, where he retired in 1904. After his retirement he remained active in Jena and Berlin.

According to Enersen, “König demanded the same high standards of his colleagues and assistants, and in particular insisted that any operation, no matter how minor, be

justified, berating those who did not do so. By some he was called the conscience of German surgery, by others he was heartily disliked for his almost tyrannical demarcations of what he considered ill-practice.” [2].

König was a prolific writer, including many original papers on the bones and joints and several textbooks [3, 4]. Among his many papers was one entitled “On Free Bodies in Joints” (“*Ueber freie Körper in den Gelenken*”) in which he introduced the term “osteochondritis dissecans” [5] and which we reproduce in English translation in this issue of CORR (the original article is available in German with the online version of CORR). König made several crucial observations. First, if not associated with a ligament avulsion, trauma was an unusual cause of flat (“*flache*”) articular defects with the corresponding underlying bone. Second,

Fig. 1 Franz König is shown (From [http://en.wikipedia.org/wiki/Franz_K%C3%B6nig_\(surgeon\)](http://en.wikipedia.org/wiki/Franz_K%C3%B6nig_(surgeon))).

R. A. Brand (✉)
Clinical Orthopaedics and Related Research, 1600 Spruce Street,
Philadelphia, PA 19103, USA
e-mail: dick.brand@clinorthop.org

some of these free bodies had the same size and shape as defects in the articular surfaces. Since these were apparently not of traumatic origin, he speculated a contusion of the articular surface could affect the adjacent bone, causing a “dissecting process” (“Dissectionsvorgang”) initiated by necrosis and subsequent detachment. He recognized such spontaneous detachments could occur without major trauma, and referred to these as “Osteochondritis dissecans” and suggested that such cases accounted for the greater part of loose bodies with histories of remote trauma.

König’s interpretations were not without controversy: according to Barrie [1], “König’s paper would have caused little stir if he had not offered the term “osteochondritis dissecans” and “The uproar that greeted König’s paper soon had everyone confused as to what he had said.” For sure, some of König’s writing is confusing, but his term has persisted. While the occurrence of nontraumatic separation of loose bodies is well accepted today, the final statement in his paper remains true: “The etiology of the proposed

pathological processes is still unknown.” What is remarkable is how König correctly speculated on the basic process when he had so little material available.

References

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