Neuropsychiatry and politics: the clash between Gonzalo R. Lafora and José María Villaverde

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ABSTRACT

Introduction. In 1933, shortly after the proclamation of the Second Spanish Republic, Madrid’s Hospital Provincial announced that it would hold a competitive examination to fill the position of the head of its neurology and psychiatry department. Lafora and Villaverde, the sole contenders, had a history of vehement professional disagreements, and even their ideologies were diametrically opposed. For reasons that have not yet been fully explained, the outcome of the examination was a department divided between the two doctors, in clear violation of the law.

Methods. We searched government archives for official documents having to do with the competitive examination. We also located any comments in the general and medical press clarifying the ideological stances of the contenders.

Results. The names on the board of examiners, and the struggle among those examiners in order to present exam topics that would benefit one candidate over the other, draw a clear picture of political tension. As had been expected, Lafora carried the most votes and the board awarded him the position. The surprise came a few days later when the examiners changed their verdict: by splitting the department into men’s and women’s units, they were able to assign one to Villaverde and the other to Lafora. However, contemporary medical newspapers and a letter written by Lafora himself both suggest that the decision had more to do with Lafora’s famously poor oratory than with politics.

Conclusions. Although the political backdrop did influence the constitution of Spain’s first neurology and psychiatry department to select staff by means of a competitive exam, it is also clear that memorisation and polished oratory were rated higher than other professional qualities. Lafora, faithful to his reputation as a staunch defender of the truth, graciously accepted the partition of the department.

KEYWORDS
Gonzalo R. Lafora, José María Villaverde, competitive examination, neurology, psychiatry, Hospital Provincial de Madrid

Introduction

On 13 October 1932, the Official Gazette of the Province of Madrid announced that a competitive examination would be held to hire the head of the Neurology and Psychiatry Department at Hospital Provincial (Figure 1). This news was unquestionably historic; ever since the 19th century, the department had been known as the ‘Mental Patient Observation Department’, a short-stay in-patient unit from which most patients were later transferred to asylums after being diagnosed with ‘mental derangement’. Many years had already passed since the earlier generation of French alienists had come to be called psychiatrists; Spain was now also spearheading changes, and not just in nomenclature. In fact, this competitive exam represented a totally new concept in care: patients with nervous system disorders would, from this time on, be studied in a general hospital, using modern diagnostic methods and updated scientific criteria. This was a ground-breaking decision; in Italy, for example, neurological patients were still attended in psychiatric hospitals (clinica delle malattie nervose e mentali) until well into the 1950s.
This new position, which came with a salary of 4500 pesetas a year, was an attractive proposition and one that awakened considerable interest among neuropsychiatrists in Madrid. While a professorship at Hospital Provincial was intrinsically prestigious, it could also be used as a springboard for attaining the chair of psychiatry that would soon be created in the nearby Faculty of Medicine. It might also position the candidate for the directorship of the new psychiatric hospital being built in Alcalá de Henares (although that building was converted into a barracks in the end).

Gonzalo R. Lafora and José María Villaverde, the only aspirants to take the exams, had a history of bitter professional disputes and were also known for their profound ideological differences. As it was feared, the examination process took place in a climate of political strife, and the result was the illegal decision to divide the department between the two candidates. Shortly thereafter, both doctors would suffer the harsh consequences of Spain's deep political rift, and so would many members of the board of examiners. Since this delicate affair has only been mentioned in passing in the biographies of Lafora and Villaverde, we believe that it is time to present an analysis of the events based on original sources.

### Methods

We consulted a copy of the hospital's candidate selection dossier (Expediente de selección de personal para la provisión de una plaza de Médico de neurología y psiquiatría en el Hospital Provincial de Madrid). That dossier is kept in sheaf 545/5 of the document collection at the Madrid Regional Archive. Any mentions made of that hiring process were then investigated in newspapers with an anti-liberal, monarchic slant (La Época, La Nación, Acción Española) and those with liberal or republican views (El Sol, Diario de Madrid) in the digital periodical collection at the National Library of Spain. We also searched for any news about the competitive exams in the 1933 and 1934 issues of Archivos de Neurobiología (Lafora was a member
of the journal’s editorial board), as well as El Siglo Médico, La Medicina Ibera and Archivo de Medicina, Cirugía y Especialidades (of which Villaverde was a board member).

Results

The candidates

Truth be told, Gonzalo Rodríguez Lafora (1886-1971) (Figure 2) and José María Villaverde y Larraz (1888-1936) (Figure 3) had many things in common. Nearly the same age and both well-regarded neuropsychiatrists in Madrid, they had received their initial training in Cajal’s school of neurohistology (Figure 4). It is also true that they exhibited marked differences in personality: Lafora was brusque and stiff, although warmhearted; Villaverde was the charming extrovert who entertained Cajal after the summer holidays with his gossip of amours among aristocrats, but he was also said to have “an odd personality that limited his private practice.” At the venerable age of 79, Lafora indiscreetly let slip that when Villaverde was a student, he had journeyed to Madrid “to be treated by Simarro for a psychiatric syndrome.”

Another point to ponder is that Hospital Provincial was not an attractive assignment at that time; G. Marañón called it “a storeroom of invalids with no sign of scientific organisation”. Lafora had already been branded as unpatriotic for having published criticism of the cold, poorly lit conditions in the Mental Patient Observation Department (Kraepelin had requested photographs of those facilities for his museum of asylum history). In contrast, the Neuropathic Sanatorium that Lafora had founded in 1923 in Carabanchel, and which he often advertised in the newspaper El Sol, was financially successful. Furthermore, its organisation and staff was such that “no similar institution ever surpassed it, whether during its time or after it.”

Villaverde was working in a neuropsychiatry department in the now-vanished Hospital del Buen Suceso, a lesser institution located in Calle de la Princesa. As stated above, the candidates’ political views could not have been more divergent. Lafora was a progressive liberal and staunch republican who voted for the coalition known as the Popular Front. He also became a signatory member of the Alliance of Antifascist Intellectuals in July 1936. Villaverde’s emblematic green hat (green = verde, S. Giménez-Roldán

Figure 3. José María Villaverde y Larraz (1888-1936), wearing his characteristic green hat to show his support for the restoration of the Spanish monarchy.

Figure 4. Very faded photograph taken on the terrace of the National Museum of Anthropology (then known as the Institute of Biological Research). Shown from left to right: José María Villaverde (1), Santiago Ramón y Cajal (2), Fernando De Castro (3), and the secretary Enriqueta Lewy Rodríguez (4). Some sources identify the seated woman on the far left as Carmen Sanz, another secretary.
dating tableau: Don Gonzalo, a dry and distant presence armed with an impressive trocar, flanked by Mouriz, who would perform the Wassermann test in CSF, and Escudé, entrusted with preparing the salvarsanised serum. Like a mental model 25 and the questionable long-term benefits were up-to-date in the literature, but periosteal sensitivity also demonstrated relatively preserved "deep sensitivity", meaning periosteal sensitivity. It was Villaverde who offered an ingenious explanation: the initial stages of tabes dorsalis result in selective damage to the cornucommissural fibres, which are collateral to afferent fibres of the posterior root ganglion. This would elicit patellar areflexia and hypotonia, but not ataxia. Both doctors were up-to-date in the literature, but periosteal sensitivity is no longer thought to be exclusively conveyed by posterior fibres. To this day, the mechanism by which tabes dorsalis selectively damages fibres in the Redlich-Obersteiner zone (dorsal root entry zone), or in the radicular nerve of Nageotte, has not been clarified.

What was perhaps their bitterest dispute revolved around intrathecal treatment for neurosyphilis. Lafora staunchly but tersely defended sodium nucleinate as treatment for schizophrenia. Villaverde, on the other hand, argued that improvements after treatment, if any, reflected only the well-known fluctuations that were typical of the disease. When Villaverde described Lafora’s drug-induced sleep cures as “inappropriate and dangerous”, Lafora rebuked the former’s “profoundly unscientific attitude explained only by deficient understanding; the doctor could well deserve a reprimand for toying with the trust of private patients”. Like a surprised Lafora described the discordant finding that some tabes dorsalis patients with marked clinical ataxia also demonstrated relatively preserved “deep sensitivity”19,20 meaning periosteal sensitivity. It was Villaverde who offered an ingenious explanation: the initial stages of tabes dorsalis result in selective damage to the cornucommissural fibres, which are collateral to afferent fibres of the posterior root ganglion. This would elicit patellar areflexia and hypotonia, but not ataxia. Both doctors were up-to-date in the literature, but periosteal sensitivity is no longer thought to be exclusively conveyed by posterior fibres. To this day, the mechanism by which tabes dorsalis selectively damages fibres in the Redlich-Obersteiner zone (dorsal root entry zone), or in the radicular nerve of Nageotte, has not been clarified.

What was perhaps their bitterest dispute revolved around intrathecal treatment for neurosyphilis. Lafora was an unwavering supporter, despite the risks shown in experimental models25 and the questionable long-term benefits associated with that treatment. His unwavering patients at the Neuropathic Sanatorium must have witnessed an intimidating tableau: Don Gonzalo, a dry and distant presence armed with an impressive trocar, flanked by Mouriz, who would perform the Wassermann test in CSF, and Escudé, entrusted with preparing the salvarsanised serum. Like a new version of medieval theriac, a barrage of salvarsan, neosalvarsan, and mercury salt injections were administered to the patient intrathecally and intravenously, and the entire procedure had to be repeated every 15 days. Lafora might have anticipated our current understanding of the blood-brain barrier with his belief that it would be theoretically difficult for these drugs to “pass through the choroid plexus if delivered by the oral or parenteral routes”. Villaverde countered that if this were the case, the method would only act as a topical treatment, and therefore fail to treat parenchymatous lesions.27,28 While on the subject, he let drop an ironic comment about the diagnosis of Lafora’s first case, a young man aged 20 with a negative Wassermann test, who had experienced “flu-related” weakness in his legs the previous year and was now afflicted with multifocal symptoms. This patient had supposedly been cured by the second injection.

Historical background

The pretext for holding a competitive exam was the death of José Sanchís Banús on 22 July 1932 in Ibi, his hometown in the province of Alicante. Dr Sanchís Banús’s poorly-defined position in the Mental Patient Observation Department is best explained by the documents kept by the Madrid Regional Archive in sheaf 545/5. The director of that department was in fact Francisco Huertas, who had been given the unfortunate nickname of “Paquito” because of his lack of leadership. Suffice to say that his father, Francisco Huertas y Barrero (1845-1934), doctor to the prominent politicians of his time, had used his influence to bring about his son’s appointment.

Announcing the vacancy and publishing the exam conditions provided proof that there would be a new approach to nervous system disorders within the framework of a Neurology and Psychiatry Department. There was some resistance by those who attempted to derail the hiring process. The panel recognised that there had been “a period of cooperation between Sanchís and Huertas”, during which “Sanchís was assigned to Ward 1, a ward essentially reserved for neurological patients and which in fact had been relinquished by Huertas, the department head” (emphasis in the original). With the death of Sanchís Banús, “the temporary transfer of half of the department would revert to the previous situation. It is therefore impossible to recognise a vacancy”. According to this logic, there could be no call for an exam, but that objection was overruled and the exam was held.

The candidates were well-qualified. Gregorio Marañón, who openly campaigned for Lafora, hastily published a flattering biography in Archivos de Neurobiología that included the impressive list of Lafora’s published works. Villaverde’s contributions were also numerous: 32 histological studies as a co-author with Cajal, and a total of 111 publications. This was a far cry from the “three studies on lead
neuropathy” that Lafora recalled in his old age, when his memory tended to exhibit curiously biased gaps.13

The dean of the corps of doctors and pharmacists at Madrid’s regional healthcare authority proposed selecting the examiners from among the doctors at that hospital. Mindful of the growing climate of political tension in which the exam would take place, he attempted to provide an ideologically equitable solution, but a count of the expected votes shows that the board only gave the appearance of being balanced. On the one hand, its members included Gregorio Marañón Posadillo (1887-1960), a known republican and liberal; José Miguel Sacristán Gutiérrez (1887-1957), branded a ‘leftist liberal’32; and Agustín del Cañizo García (1876-1956), all of whom were members of Lafora’s camp. The board’s chair, pharmacologist José Mouriz Riesgo (1884-1934), was a member of the Socialist Party and probably had similar leanings. In the opposite camp, we find Fernando Enríquez de Salamanca (1890-1966), a prestigious doctor of internal medicine,30 and Francisco Huertas, the current head of the department, who seems to have been amenable to relinquishing his position.

It was common knowledge that Lafora preferred neurology as a specialty, whereas Villaverde showed more interest in psychoanalysis and psychology, at least in his earlier years. Choosing the subject matter must have come down to a tug-of-war between Enríquez de Salamanca, professor of medicine, and José Miguel Sacristán, secretary of the board and a prestigious psychiatrist. Enríquez de Salamanca proposed a list of purely psychological topics: ‘sensory emotions’, perception of space and time, tendencies and volition, psychotic disposition, and psychopath in society were just a few examples. In turn, Sacristán fought to include neurological subjects including CSF analysis; extrapyramidal disorders; sensory disorders; cortical cytoarchitectonics; aphasia, apraxia, and agnosia; Wilson disease; and the aetiology, diagnosis, and treatment of general paresis. After a heated debate, they reached a consensus to present a total of 35 topics, including only 12 ‘purely’ neurological or neuropsychiatric topics. This placed Lafora at a clear disadvantage.

Completion of the exercises
The test consisted of four exercises, and a single low score would result in elimination. 1) Presentation of the candidate’s educational experience and accolades, with the candidate also delivering a presentation on the concept of psychiatric care (neurological care was not mentioned); 2) Elaborating on a topic chosen at random, to be completed within a maximum of four hours; 3) Examining a patient selected at random (patient names were drawn from a pool of twice the number of candidates); 4) Preparing a forensic psychiatric report on one of the patients selected from the same pool.

The exam was scheduled for 10.00 on 14 October 1933 in the assembly room at Hospital Provincial. The atmosphere was strained. Villaverde’s followers could be identified by their green hats; their number included Carlos González Bueno (1898-1984), who would be the one to spearhead the construction of Madrid’s Francisco Franco medical centre in the 1960s. Lafora’s followers were also numerous and no less enthusiastic. We were unable to recover a copy of the written exam. In the practical section, however, Lafora was given the task of determining the legal capacity of a patient drawn from a pool, and Villaverde had to address criminal responsibility in the case assigned to him.

A surprising verdict
Once the candidates had finished, the board of examiners met on 23 October at 9.00 to deliberate, but it would not reach a decision for another two weeks. At last, the board formally named Lafora for the position on 8 December
Strange as it might seem, just four days later on 12 December 1933, the board modified its decision. While Lafora's victory was not contested, the examiners "decided to declare an additional vacancy in the same department for reasons of imperative necessity, designating the candidate Dr José María de Villaverde y Larrar [sic] for that position in light of the exceptional circumstances surrounding the event, which the board cites as providing due justification". The board had met on 12 occasions and the entire hiring process lasted 16 months (Table 1).

Valenciano Gayá's magnificent biography of Lafora only dedicated a line or two to this unexpected decision. Gonzalo Moya discovered two conflicting versions of the story, one of which was told by Lafora's own son. According to this version, while Lafora emerged victorious from the contest, he did not object to the proposal to divide the department down the middle (emphasis added). The other version states that Lafora was betrayed by his poor speaking skills, whereas Villaverde's delivery was so impressive that he was offered half of the department despite having scored lower on the test. Two of Lafora's students (Dionisio Nieto Gómez and Ángel Domínguez Borreguero) contested that decision on the grounds that Villaverde's appointment violated the Provincial Statute of 2 March 1920, according to which "the selection of a greater number of candidates than the stated number of vacant positions is invalid". Another complaint, signed by

(Table 1). Documents from the dossier for the competitive exams held to fill an opening for a neurologist and psychiatrist at Hospital Provincial de Madrid (Madrid Regional Archive, sheaf 545/5).

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>13 October 1932</td>
<td>Announcement that selection would take place by means of a competitive exam, at the request of Dr Mouriz.</td>
</tr>
<tr>
<td>19 October 1932</td>
<td>The regional healthcare committee sends its report to the corps of doctors.</td>
</tr>
<tr>
<td>19 November 1932</td>
<td>The report by the corps of doctors does not support the proposal put forth by Dr Mouriz.</td>
</tr>
<tr>
<td>29 November 1932</td>
<td>The regional healthcare committee agrees to postpone the process.</td>
</tr>
<tr>
<td>6 December 1932</td>
<td>The regional healthcare committee decides to hold competitive exams to fill the position of Director of the Psychiatric Institute of Alcalá de Henares. The successful candidate would be responsible for caring for mental patients as soon as the facilities were ready.</td>
</tr>
<tr>
<td>15 December 1932</td>
<td>The regional healthcare committee decides to create a position for a psychiatrist and fill it by means of a competitive exam.</td>
</tr>
<tr>
<td>11 March 1933</td>
<td>The hospital publishes the guidelines for the competitive exam (modified on 15 July) to fill the vacancy left by Dr Sanchis Banús. The process would be supervised by the dean of the corps of doctors.</td>
</tr>
<tr>
<td>26 May 1933</td>
<td>The dean appoints the examiners on the board and names Dr Mouriz as the chair.</td>
</tr>
<tr>
<td>22 June 1933</td>
<td>The board determines the time, venue, rules, and subject matter for the examination.</td>
</tr>
<tr>
<td>14 October 1933</td>
<td>Candidates are summoned to complete the first exercise.</td>
</tr>
<tr>
<td>12 December 1933</td>
<td>The panel announces the appointment of Dr Lafora and the creation of an additional position for Dr Villaverde. Dionisio Nieto Gómez and Ángel Domínguez Borreguero launch an appeal against the appointment of Dr Villaverde.</td>
</tr>
<tr>
<td>27 January 1934</td>
<td>The Board of Examiners denies the appeal.</td>
</tr>
</tbody>
</table>
numerous followers of Lafora and dated 22 October 1933, highlighted that the candidates’ respective scores had not yet been made public.9 Neither of these complaints was taken under advisement.

The partisan response by El Siglo Médico
Lafora was conscious of his limitations in the arena: his exasperating long-windedness, his sudden memory lapses that left him speechless, and his unusual ‘chronological impairment’ that left him unable to gauge time. The time he devoted to preparing for the test was pure torture; he spent an entire summer shut away in his house in Camorritos, 57 km from Madrid.8 As for Villaverde, the popular medical journal El Siglo Médico sang the praises of his supposedly dazzling performance (Figure 6). Villaverde was a member of the journal’s editorial board.33

In an attempt to appear impartial, El Siglo Médico expressed “admiration for the merits of both contenders”, although “from the first exercise, those attending became aware that Villaverde’s skill surpassed Lafora’s” (emphasis in the original). “As for the second...Lafora’s presentation was frankly deficient. During the third exercise, public opinion and that of the board seemed to favour Villaverde....In the fourth, we regret having to say that Lafora’s answer was very poor and he displayed a total lack of technique” (referring to the forensic report). “The panel awarded the position to Lafora, (with Mouriz, Marañón, Cañizo, and Goyanes voting in favour); Enríquez de Salamanca and Huertas voted for Villaverde”. A note signed ‘Decio Carlán’, the pseudonym adopted by the journal’s editor-in-chief Carlos María Cortezo, announced an event in honour of Villaverde, “a significant and appropriate gesture...reflecting the well-known merits of this illustrious Spanish psychiatrist and neurologist...and a glorious name in Spanish neurological research”. He told a bold-faced lie in declaring “let the reader take note that the appointment made by the board of examiners was in fact UNANIMOUS” (capitals in the original text). “While this proposal may have clashed with trifling bureaucratic barriers, it obeyed the strictest principles of justice”.34 By “trifling bureaucratic barriers” he was actually referring to a flagrant violation of applicable law.

More surprising still was the lukewarm response from Lafora, who had always been more pugnacious: “it is an unfortunate fact that this merely ‘technical’ matter has been given a political spin from the very beginning”. Lafora also criticised the omission of any comments by Sacristán; “as the only one possessing ample knowledge of the technical aspects, he held a decisive vote”. Above all, he let drop ironic references to “the class of attendee to become aware of Villaverde’s superior skill”, referring to his rival’s green-hatted supporters. The director of El Siglo Médico answered that the journal “had dispatched qualified staff...to cover the exercises and had presented its findings in a completely fair and objective way”.35 In other words, El Siglo Médico had sent an inside tribunal as part of a crowd of boisterous onlookers, and then published its own anonymous verdict.

The aftermath
Only a few years later, the events that rocked the nation took a terrible toll on those who had been involved in the competitive exam. José María Villaverde disappeared in September 1936 as Madrid was swept up by the military rebellion. His body was never found; some believe that he may have fallen in the Paracuellos massacres, but proof is lacking (Figure 7).36 His sister María reported his disappearance on 29 May 1939 before a judge of the Francoist Causa General. She pointed a finger at the “leftist employees at Hospital General, who must have been the ones to denounce him”.10
This vague implication of Lafora, who went into exile in Mexico City in September 1938, had no factual basis whatsoever but was to cause him a great deal of trouble when he returned to Spain in late 1947 and had to be “politically sanitised”. Lafora’s republican convictions made him no friends at the Neuropathic Sanatorium, and its employees threatened him; since the local revolutionary committee suspected that some of his income had been “appropriated” from right-wing sources, his very life was at risk. Valenciano relates that after Lafora’s return, “there was a hidden and self-serving hand that slowed his political sanitisation process”, which was a cryptic reference to Dr López Ibor. Lafora’s department was only returned to him when he was 64 years old and soon to retire.

José Miguel Sacristán “remained to the end of his days in a peculiar state of internal exile”; he faced ostracism and had to eke out a living as a translator of German texts. Gregorio Marañón exiled himself to Paris in 1937. His position as professor and department head at Hospital Provincial was not restored until 1944. An inquiry was also launched against Agustín del Cañizo, accused of being a “leftist whose friends...including Miguel de Unamuno...were preparing a Marxist revolution”. He was declared ineligible to hold a leadership position.

Lafora’s situation in the post-war years contrasted cruelly with that of F. Enrique de Salamanca, who had played a crucial role in the atypical ruling handed down by the examiners at Hospital Provincial. After that incident, Enríquez also managed to select Villaverde to fill Cajal’s seat in the Academy of Medicine, this time by vetoing the candidacy of Pío del Río-Hortega. Following the Spanish Civil War, he was made the Examining Magistrate of the Political Decontamination Tribunal at the University of Madrid, or as some called him, “the Inquisitor of San Carlos”. Enríquez, branded by his fellow professors as an “obsolent right-winger” and “strict and almost fanatical Catholic”, had been physician to Alfonso XIII. His approval sealed the fortunes of future aspiring department chairs, and his verdicts also resulted in the expulsion of hundreds of university professors, some of whom were imprisoned.

Conclusions

The political tensions surrounding Lafora and Villaverde’s infamous examination during the 16 months that passed between publication of the announcement and publication of the decision were the product of that time in Spanish history. Whereas “an overjoyed and hopeful crowd celebrated the unexpected collapse of the monarchy and the inauguration of the Second Republic in the plaza of Puerta del Sol in Madrid...another crowd [of royalists], perhaps a little less numerous, gathered before the Royal Palace, where the Queen and her children had spent a sleepless night.” The atmosphere was even more volatile by the date of the exam, which coincided with the announcement of legislative elections on 17 November 1933. Under the rallying cry of “order and religion”, a coalition of right-wing parties, including Villaverde’s monarchist Renovación Española, finally carried the day.

This article reveals that the competitive exams took place in a profoundly politicised atmosphere, as evidenced by the composition of the board of examiners, which leaned toward Lafora. Further proof was the struggle between Sacristán and Enríquez to choose topics that would be suited for one candidate or the other. If we examine only the vote count, it seems that Lafora was the clear winner. This cannot begin to explain the board’s unprecedented decision to overrule its own initial ruling and split the department in two.

We could not say which strings were moved and what arguments might have swayed Sacristán, backed by Enríquez de Salamanca, to propose the King Solomon-style departmental split (Gonzalo Moya’s version of the story based on accounts from Lafora’s son). Nothing ever came of the petition signed by Lafora’s students (Germain, Valenciano, Nieto, Prados Such, Fernando de Castro, and others) and submitted on 22 October 1933. The students alleged that “Dr Villaverde’s result on the third exercise was not only inferior, but also demonstrated his considerable lack of skill in clinical examination”.

The key to understanding what happened can be found in the letter published in El Siglo Médico that its director, ‘Decio Carlán’, had received from Lafora himself. The latter laments the political tone that soured the exams and even mentions the unruly crowd that cheered for Villaverde. He says nothing at all about the atypical decision, which he seems to take in his stride.

Gonzalo Rodríguez Lafora was without a doubt highly influenced by his “almost visceral urge to tell the truth, no matter the consequences” and “his impassioned defence of fair play”. This trait was even evident on occasions like this one in which the facts ran counter to his own interests, and he always followed through on his convictions. To cite just one example, he was the only scholar ever to have resigned from Spain’s National Academy of Medicine because of his quixotic worldview. The surgeon Bastos Ansart, a member of Lafora’s
extended family,\(^4\) refers to these events in his comment about the "personal rivalries that have fed the conceit of an insignificant man [once again, Villaverde] and so evidently snubbed the one who by all rights deserved the position so unfairly awarded to the other".

Be that as it may, Gonzalo Moya suggested two alternative explanations: political intrigue, or Lafora's poor oratory ability in the exam. This article provides documentary evidence suggesting that both of these factors were present and had an impact on the outcome.

References