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**Reference:**

Vanhoenacker Filip, Feydy Antoine.- History page : leaders in MSK radiology Maxime Ménard, 1872–1926  
Seminars in musculoskeletal radiology - ISSN 1098-898X - 27:04(2023), p. 487-488  
Full text (Publisher's DOI): <https://doi.org/10.1055/S-0043-1762592>  
To cite this reference: <https://hdl.handle.net/10067/1990800151162165141>

## **History page: leaders in MSK radiology**

### **Maxime Ménard, 1872-1926**

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## **Abstract**

This history page in the series “Leaders in musculoskeletal radiology” is dedicated to the memory and achievements of the French radiologist Maxime Ménard whose name is connected to the line of Shenton-Ménard, which he described independently with the British radiologist Edward Shenton. This landmark line describes the relationship of the proximal femur to the acetabulum in case of hip dysplasia and fractures of the femoral neck.

## **Keywords**

## **Main text**

Dr. Maxime Ménard ( ▶ **Fig. 1**) was born in Saint Mihiel, France in 1872.

He did his medical studies in Paris and graduated in 1896<sup>1</sup>.

He made his debut in radiology in 1896, while working in the “laboratoire d' electrothérapie de la Charité” of Dr. Régnier. Subsequently, he worked in Saint Louis Hospital and Trousseau Hospital in Paris. During that period, he worked on a medical doctorate with a thesis on the normal pelvis in radiography which was published in French language as “Le bassin normal en radiographie”.

In this work, he described a curved line running from the superior outlining of the obturator foramen and the inner side of the neck of the femur, used to determine the relationship of the head of the femur to the acetabulum. This line may be discontinuous in fractures or congenital luxation.

As this radiographic landmark was also described in 1902 by the English radiologist dr. Edward Warren Hine Shenton (1872-1955), the credit was given to both researchers calling it the Shenton-Ménard line. Sadly, the term Shenton line predominates -however- in the current Anglosaxon literature, without giving credit to Ménard<sup>2</sup>.

As a scientist, Maxime Ménard's research also focused on Forensic Medicine and shoulder imaging.

In October 1908, Dr. Ménard was appointed as chief of the radiology department at “Hôpital Cochin” in Paris.

In the early days of radiology, the radiologist was in many aspects a manual laborer and like many of his contemporary colleagues in radiology, Ménard was heavily exposed to the harmful effect of ionizing radiation. Consequently, the first signs of radiodermatitis in his fingers appeared in early 1910.

In June 1914 he had his right index finger to be amputated. Because of this amputation, Ménard was released from any military service during World War I.

However, faced with the considerable number of war casualties sent to Paris, the Red Cross opened military hospitals on all sides. As radiology played a pivotal role in the evaluation of war trauma among other to locating bullets and projectiles, Ménard offered to play an active

role as an operator in these radiologic facilities often in bad conditions of radioprotection. Therefore, he was exposed to another excessive quantity of radiation.

In 1916, the index finger of his other hand was amputated, then facial lesions appeared, on the upper left eyelid.

Unfortunately, malignant transformation progressed rapidly despite brachytherapy and surgical interventions.

Dr. Maxime Ménard passed away as an early victim and martyr of exposure to X-rays in October 1926.



**Figure 1.** Dr. Maxime Ménard as a victim of radiation exposure (used with permission from M. le Docteur Ménard (Maxime), chef du Service de radiologie à l'hôpital Cochin) - *L'informateur médical*, 1926, open licence)

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