
London Hospital

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ledg which the filling of such offices is eminently calculated to convey the various means provided for practical instruction should be utilised; and these should no longer be regarded as optional, but as necessary parts of education. He then pointed out the importance of students studying disease for themselves, and said:—

"If I mistake not, the knowledge we derive from even one half-hour devoted to the careful and painstaking study of a single patient will be more valuable to us than many hours spent in listening to the teaching of others. It is this kind of clinical work which appears to us to be the great want in our education at the present day. We do not, I think, sufficiently recognise its importance, and hence, except in the case of those comparatively few students who are fortunate enough to secure resident hospital appointments, and of some of the more studious clerks and dressers, it is almost unknown. We do not mind going round the wards or into the out-patient room, and listening to the clinical remarks of our teachers; but we do not consider it at all necessary to examine the patients for ourselves, and even if we are asked to do so, we perhaps hardly take the trouble to do it in anything like a thorough manner. And yet, surely, it is from such study as this that we are most likely to derive that practical knowledge which we shall stand in need of when we are thrown upon our own resources. How many hours of our student life do we spend in the dissecting-room studying the dead body? Ought we not to spend a more proportionate amount of time in the wards studying the living body?"

The lecturer then remarked upon the insufficiency in the amount of time set apart in the curriculum for systematic clinical work, and continued:—

"Examine the patients for yourselves. Form your own conclusions as to the nature of their diseases. Decide upon the plan of treatment you would adopt, and make your own prognosis. And, by all means, be very thorough in what you do. Spare no pains and grudge no time in learning all that you possibly can of the case you are observing. Remember that more mistakes are made from want of care than from want of knowledge. Do not attempt to observe too many cases at a time. One done well is far better than a dozen done incompletely. Watch the same case carefully from day to day. Note the natural course of the disease, and the way in which it is influenced by remedies, and if it should terminate fatally, let nothing prevent your being present at the *post mortem* examination."

The lecturer concluded by an allusion to the rapid advances which are being made in the knowledge of pathology and therapeutics, and by an exhortation to the students to use all diligence to acquire during their student life what in the present age would be required at their hands.

LONDON HOSPITAL.

DR. LITTLE, formerly physician to the Hospital, delivered the Introductory Lecture. He was tempted, he said, to look back to the time—forty-three years ago—when he for the first time sat on the benches of the old anatomical theatre, listening to the introductory lecture of Mr. Headington. Of those who were his fellow-students, one at least—Mr. Curling—"by his persistent exertions in the cause of practical and scientific surgery, his researches in pathology, by his readiness to adopt all novelties that promise to be beneficial to humanity, has shown the present generation of students how the advantages of the London Hospital can best be utilised. He can recall, we doubt not, the glories of the discoveries and improvements of the previous forty years, as related to us in language unsurpassed for accuracy and for freedom from exaggeration—in language pure in diction, noted for clearness, quietness, and perspicuity." Mr. Headington, the lecturer remarked, "was an accomplished and sound surgeon, who had more the appearance of the learned and well-bred physician of that day. He early handed over the operating knife to the able hands of Mr. Luke, then his assistant-surgeon. The greater number of my hearers," said Dr. Little, "may never have heard the name of Headington: in fact, he lived, he practised, and died, in a part of London—Spitalfields—then wealthy and of comparatively fashionable resort. It has been a loss to surgery that he was not addicted to spreading his fame by any writings; but it is a sufficient proof of the distinguished hold he possessed on the respect and affection of his colleagues and pupils, that he was one of the few whose busts and portraits adorn the building in which we are now assembled." Mr. Headington was accustomed to make known to his pupils the labours of the men to whom the advances in medicine of the previous forty years were due; and Dr. Little occupied a large portion of his address in taking a brief retrospective view of the leading characters referred to—*e.g.*, John Hunter, Jenner, Davy, Black, Priestley, Dalton, Cuvier, Bichat, Brown, Broussais, Dupuytren, Larrey, Cline,

Cooper, and others. The lecturer then noticed the changes which have taken place in medicine during the last forty years. Each of the two periods to which he referred was preceded by great changes in the world at large. The beginning of the first of these periods might be regarded as having been ushered in by the American War of Independence and the great French Revolution. "The consequent agitation of men's minds, as well as the acquisition of a new power supplementary to man's individual physical force, in the application of steam to the purposes of mankind in branches of the arts into which it had not been previously introduced, were probably all momenta aiding the progress of man in the departments of science and learning embraced by the cultivator of medicine. In this country eminent medical men worked on in our thoroughly English way, little aided by state assistance, except in the happy circumstance of the purchase by Government of Hunter's museum. Hunter's fame needed not even the preservation of his museum to render it *are perennius*. It cannot be doubted that Hunter's career exercised considerable influence on the progress both of English and foreign medicine during the first thirty years of this century. But in France in particular, at the beginning of the present century, a great impulse was given to medical studies by the appointment of a government commission on the reorganisation of the medical schools of Paris, Montpellier, and Strasburg. The names of many of the ablest physicians and philosophers of that country appeared upon that commission. In Germany, also, the younger University of Berlin, fostered by the wide confidence in the future of German science, was beginning to emulate the reputation of Leyden, Göttingen, Upsal, Halle, and Vienna." Speaking of the forty years now past, Dr. Little said: "Possibly we may be disposed to regard the cautions necessary in mistaking the *propter* for the *post*; but it appears, nevertheless, true that the last forty years, like the former period of similar duration, was ushered in by stirring changes in the world at large. One of these was the reform movement about 1830, of which certainly one consequence has been that of a greater attention to, and diffusion of, education—a direct result of the accelerated movement of ideas of that exciting period, and a great extension of periodical and higher class of literature within and without our profession. During this period the application of steam to land-travel, and especially to transatlantic and other distant maritime locomotion, followed, as it soon has been, by electric telegraphy, have all contributed to bring peoples of different countries to mutual intercommunication of ideas, opinions, and discoveries, and have stimulated improvement in our art during the last forty years, equally with other arts, professions, and pursuits."

Dr. Little remarked that anyone whose memory could carry him back to the state of medical affairs in 1830 would agree that whatever influence was exercised upon English medicine from abroad was mainly derived from the schools of Holland, Italy, and France. By far the greater part of that which came to us from the Continent proceeded from French sources. This was particularly the case during the fifteen years following the peace of 1815, which opened Paris to our predecessors, with the treasures accumulated by Dupuytren, Larrey, Corvisart, Laennec, and a host of other distinguished men. Since 1830 the most superficial student of medicine could not fail to have noticed the influence of German anatomical, physiological, and pathological discoveries, as well as of practical medical and surgical improvements, upon English medicine.

Having noticed some of the improvements effected since 1830—such as the introduction of tenotomy and lithotripsy, the researches of Bright on disease of the kidneys and of Addison on that of the spleen, the employment of auscultation, percussion, and thermometry, the discoveries in diseases of the nervous system and in syphilis, the lecturer referred to the prospects of medicine during the coming forty years. Among the departments of medical practice still requiring earnest study, he specially referred to the prevention of disease, and the successful treatment of such diseases as algide cholera, hydrophobia, and advanced consumption. "Are we too sanguine," he said, "when we express a hope that before another forty years shall have elapsed some of the diseases last named shall have become more tractable to our art?"

In giving some concluding advice to the students as to the manner in which they should endeavour to profit by the instruction afforded in the hospital, Dr. Little said: "Never be content with superficial observation; whatever you undertake to inquire into, look below the surface of things, employ all your senses in your investigations, avail yourselves of all the modes of inquiry taught you. In the present day it is useless to be merely a good auscultator, well up in the chemistry of the urine, familiar with the names and varieties of the excretions, skilful at anatomy and the setting of fractures; you must apply *thoroughly* all your ability. In fact, the English word *thorough* should be your watchword and guide in all your doings. Your first duty is so to profit by the instruction here provided that you may make capable members of

an active, honourable, and useful profession. . . Schiller says of Science and her followers—

“Einem ist sie die hohe, die himmlische Göttin, dem andern
Eine tüchtige Kuh, die ihn mit Butter versorgt.”

“Let it be your resolve, whilst seeking an honourable existence through your profession, to cultivate it more in the spirit of the first of these lines than in that of the second. This alone can make you satisfied with it.”

THE MIDDLESEX HOSPITAL.

DR. JOHN MURRAY delivered the Inaugural Address. The lecturer commenced by urging the new students of medicine to inquire of themselves whether they were adopting a profession for which they were naturally fitted. According to the comparative vivacity and force of a young man's intellect, his fitness for a profession should be gauged. If a youth afforded no evidence of predominant interest in literary study and the delights of scholastic ambition, he ought not to be encouraged to adopt a profession requiring that considerable amount of application to such pursuits demanded by medicine. He referred to the unhappy instances daily to be seen, of men possessed of excellent abilities engaged in the half-hearted pursuit of occupations wholly unsuited to their natural turn of mind—abilities which, if they had been directed into the proper channels, would have placed the possessors in positions in which they would not only have excelled, but would have increased their enjoyment of life—perhaps also the depths of their pockets, and certainly their value to the public. Most young men's minds, he believed, afforded a clue, if properly scrutinised, to their natural fitness, to ascertain which was the duty of parents and guardians; and this was becoming daily more and more imperative as free trade, the correlative of natural selection, was, in this country at least, in the ascendant. To make the most of this natural fitness, the preliminary education of the young man should be of a most liberal character. The great acuteness in the observation and treatment of disease displayed by men of the present day distinguished in medicine does not, he believed, rest on the possession of medical facts alone, but on a sound general education, aided by natural ability for the practice of their profession. He decried the growing tendency amongst the advocates of the real or modern or so-called useful studies to underrate the value of classics, by the study of which we are made acquainted with the spirit and power of Greek and Roman antiquity, learned from its original works. A liberal education should make a man know himself and the world, not in a narrow sense, as Matthew Arnold expresses it, “to make a man a good citizen, or a good Christian, or a gentleman, or to fit himself to get on in the world, or to enable him to do his duty in that state of life to which he is called. There is a wider and a more noble sphere—to do good to mankind, and to advance his fellow-creatures.”

After offering a few words of advice as to the manner in which the student of medicine should proceed in surmounting the mass of work before him, Dr. Murray continued: “To assist and guide the student in his studies, medical schools have been formed, in which more or less compulsory attendance is required; the different subjects taught being arranged in such a manner as to afford a very considerable amount of assistance to the pupil. Our metropolitan system of medical schools, as it at present exists, has found many able opponents, men whose opinions carry with them great authority, and in whose views I am prepared largely to sympathise. But, while we should sanguinely look forward to a future still greater than the present in the medical education of the metropolis, there still can be no doubt that even now, with its disadvantages, London affords many unrivalled opportunities for the study of medicine unattainable elsewhere.

“The mission of a medical school, it seems to me, should be not alone to cram the student with facts, but to effect as far as possible his total cultivation in his strictly medical studies. What is to be avoided is, the degeneration of the instruction into a preparation for examination, instead of providing that the pupil may have the requisite time to come steadily and without hurrying to the fulness of the measure of his powers and character; that he may be securely and thoroughly formed, instead of being bewildered and oppressed by a mass of information hastily heaped together. Do the medical schools of London effect this? That there is much room for improvement in their teaching, that the tutorial system might be with advantage grafted more largely into them, less stress laid upon certain subjects, and other compulsory courses instituted, I am very strongly of opinion; but that they do much to develop general medical education, I most certainly assert. If this desirable object be not attained, it is not entirely the fault of the schools. What faults they do possess are in a great measure due to the baneful influences of certain of our licensing bodies, which do not demand a sufficiently high standard for qualification, and do not

allow the schools time to develop the student. That systematic teaching is, as asserted, carried to an excess in them I do not believe; in fact, the very reverse. That students should be allowed to study whosoever and howsoever they please, as recommended by not a few, is a doctrine which I think should be resisted as opposed to reason, and a retrograde step in education. Were it possible, as is proposed to render the examinations all-sufficient as tests, which I deny they can be made to be, the more or less want of system in the preparation for these examinations would entail a waste of time and strength, and by-reaction, tend to reduce the standard of examinations. It is this absence of system which, I believe, is the bane of education in this country. In everything we lean upon our energy and wealth to overcome the drawbacks necessarily dependent on our want of gradual training and method. We forget that, ‘if the iron be blunt and a man do not whet the edge, then must he put forth the more strength: but wisdom is profitable to direct’.

“How are students, I would ask, to be guided in their studies unless in a systematic school? where are they to learn exact habits of mind? Not in books, certainly. They must be brought to the water and taught systematically and gradually how to drink. But they must be compelled to do so; and I believe in spite of all that has been said to the contrary, this can be done if properly tried. Most students are willing and anxious to learn if intelligently managed; and if the teacher fail, it is, in the majority of cases, as much the fault of the teacher as of the pupil. If there be those indisposed to apply themselves to their work, much can yet be done to make them learn by methodical and compulsory teaching. Were it not for our compulsory system, however, what would become of students? One would stay at home and cram; another would go Will-o'-Wisp from place to place, ‘taking tithe of mint and anise and cummin’, but neglecting the principles and more important matters of his profession, picking up crumbs which he would mould together into some crude idea representing his peculiar notions of the theory and practice of medicine; while only a comparatively small number, chiefly through their inherent natural good qualities, possessed of a comprehensive medical education, would pass their examinations. A considerable number would probably be able to pass the examinations, however strict and searching they might be; but their minds would not have been gradually formed, and taught that exactness of reasoning which is likely to be engendered by a proper system of teaching, such as is aimed at in some at least of our medical schools. I would have you, therefore, to bear in mind that system and regularity in your work are all-important.”

The remaining portions of Dr. Murray's address were chiefly directed to detailed advice in reading, in attending lectures, and in clinical work—in the last of which he pointed out that our metropolitan system is deficient. He earnestly urged upon students the desirability of going abroad for a time, and extending their term of student-work beyond that required by the licensing corporations, and advised them to obtain the highest qualifications possible; and alluded to the shameful state of ignorance in which some young men commence practice, possessed though they be of one or more British qualifications.

The lecturer concluded his address by reminding his hearers that beneficence formed medicine's highest title to respect; that their duty, their real pleasure, would be found in allaying misery, in assuaging suffering, and advancing the physical and moral well-being of man. He pointed out that *succurrere miseris* was the first lesson of their profession; and in carrying out their great and noble object they should do it as best as they could.

QUEEN'S COLLEGE, BIRMINGHAM.

THE Introductory Lecture was delivered by Dr. JAMES RUSSELL, Professor of Medicine.

He commenced by quoting the introductory remarks with which Burton opens the chapter on the cure of “Melancholy,” because, as he observed, they present a more correct representation of the function of the medical practitioner than that which generally obtains. In place of imposing the entire responsibility in treating disease upon the medical adviser, leaving the patient to digest the medicine and swallow the advice he receives without co-operation on his own part, the author regards the patient as an active agent in effecting his own cure, and reminds him that, if the doctor has a duty to perform towards him, he has also a duty which he owes the doctor. Dr. Russell was thus led to dwell upon the two-sided character presented by the medical profession, its relation to medicine as a science, and its relation to the society in which the science is to be applied. The lecturer commented on the influence which public thought has exerted over the interests of the medical profession viewed merely in its scientific relation; noticing how