

**Remarks on the utility and importance of clinical lectures on surgery :  
addressed to the presidents and fellows of the Royal College of Surgeons  
of Edinburgh / by James Russell.**

**Contributors**

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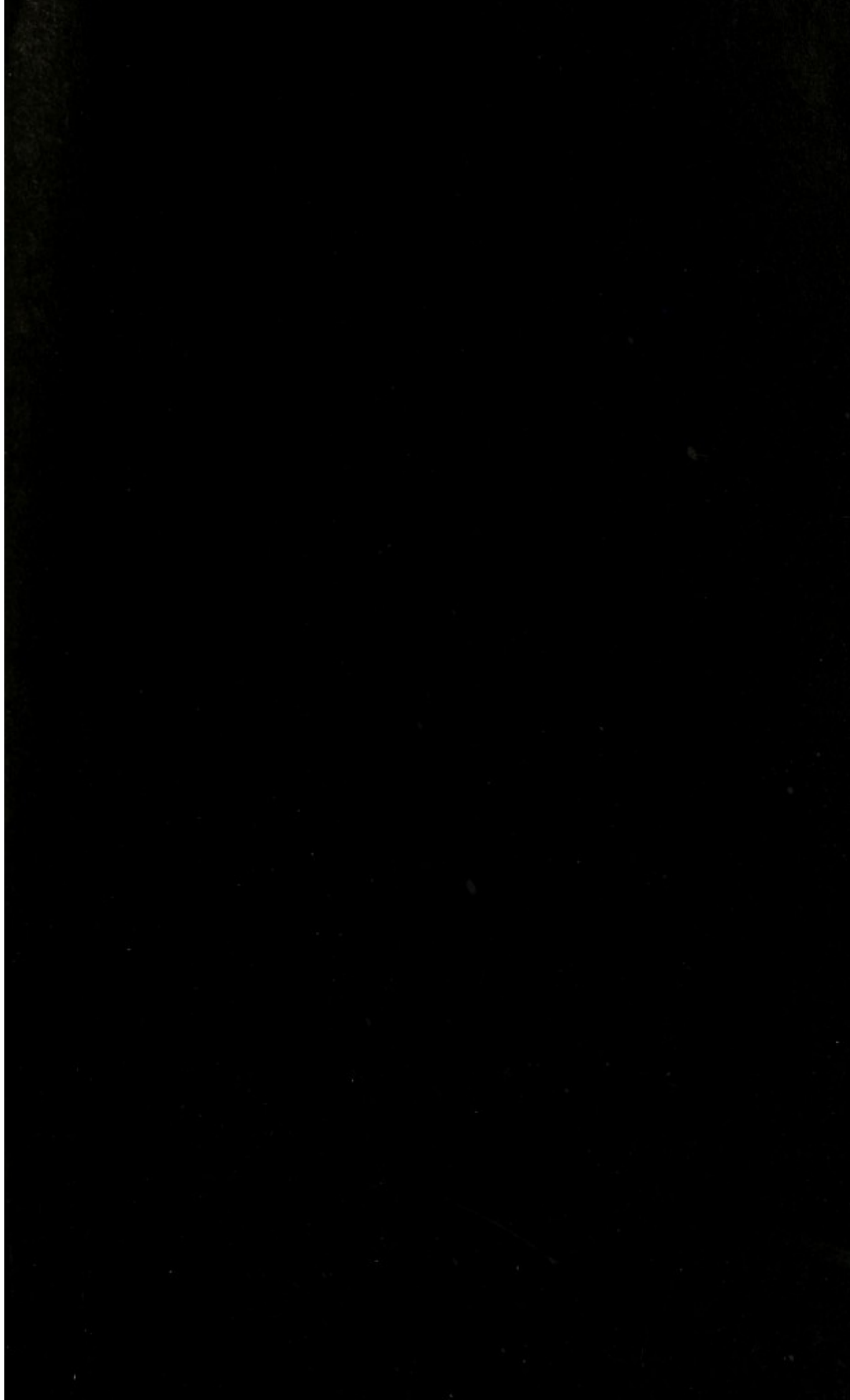
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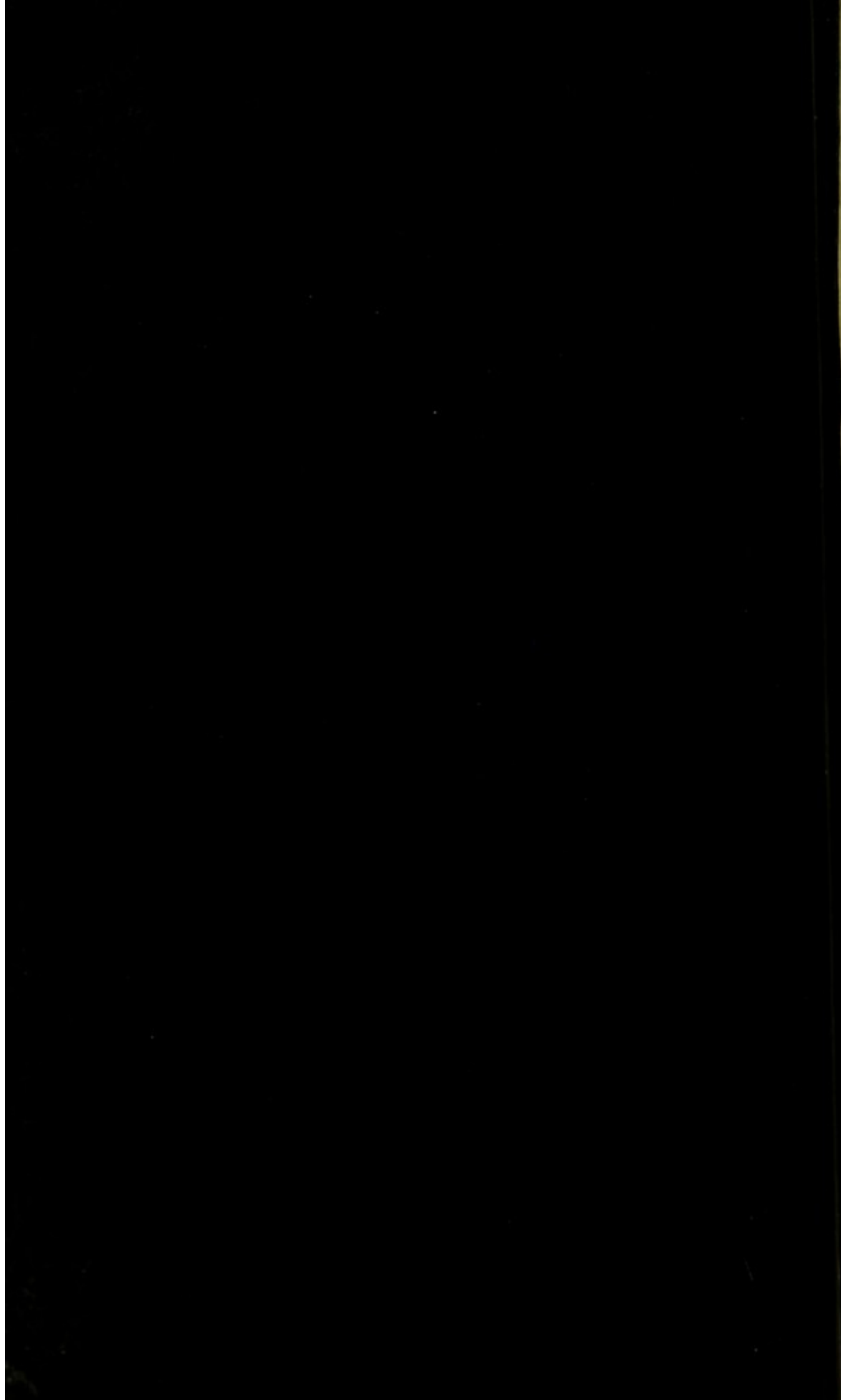
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339-1907

REMARKS

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ON THE

UTILITY AND IMPORTANCE

OF

CLINICAL LECTURES

ON

SURGERY.

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ADDRESSED TO THE

PRESIDENTS AND FELLOWS

OF THE

Royal College of Surgeons of Edinburgh.

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BY JAMES RUSSELL,

FELLOW OF THE ROYAL COLLEGE OF SURGEONS, EDINBURGH;  
PROFESSOR OF CLINICAL SURGERY IN THE UNIVERSITY,  
EDINBURGH; VICE-PRESIDENT OF THE ROYAL SOCIETY,  
EDINBURGH; AND PRESIDENT OF THE MEDICO  
CHIRURGICAL SOCIETY, EDINBURGH.

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EDINBURGH.

PRINTED BY J. & C. MUIRHEAD.

1824.



THE AMERICAN

1847-1848

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## REMARKS, &c.

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EVERY one conversant with the actual state of Medical Practice knows the impossibility of separating the practice of a Physician from that of a Surgeon, with any great degree of exactness; so that no one can reasonably entertain hopes of becoming a successful practitioner, who confines his studies exclusively to one department of the profession. A Physician, therefore, requires to possess a competent knowledge of Surgery to enable him to treat a numerous class of cases in a judicious manner. If he is deficient in this branch of knowledge, he will be often embarrassed with cases which should not have occasioned him any particular difficulty to understand; and may, when too late, have reason to regret his improvidence, in not having laid a more extensive foundation of knowledge during the progress of his education. I have witnessed several instances of this kind of embarrassment in the course of my own experience, and I have heard of and have read of many more. I have, therefore, no hesitation in pronouncing a competent knowledge of Surgery to be an indispensable requisite in forming the character of an accomplished Physician. In this opinion I am supported by the concurring testimony of every Physician of experience, and judgment



with whom I have conversed upon the subject.\* There is one fact, indeed, which alone is, in my opinion, so conclusive, as completely to decide the question. I refer to an existing regulation of the Army Medical Board, which interdicts any person from being promoted to the situation of Physician to the Forces unless he had for some years served in the capacity of a Regimental Surgeon. This regulation was enacted, in consequence of the extreme inconvenience which had been experienced from appointing Gentlemen ignorant of Surgery to be Physicians to the Forces.

Supported by such authority, I am well warranted to recommend the study of Surgery to the attention of all those who aspire to become distinguished members of the Medical Profession. Upon this point, as I have considered it often and thoroughly, I deliver my opinion with confidence. I farther know the advantage which results to a Student from commencing the study of Surgery at an early period of his education, from the circumstance of the symptoms of Surgical cases being obvious to the senses, simple, and easily understood. Upon these accounts, they can be followed through their whole progress with certainty and ease. The idea which the Student forms of their character is distinct and forcible, and consequently long and clearly remembered. He, therefore, has a certain prospect of making rapid and sure progress in his studies, when he begins his Medical education with the study of Surgery.

A Student, by thus studying the appearance of disease in local external affections, is acquiring an accurate knowledge of the fundamental principles of

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\* See Appendix.



diseased action, which may be easily transferred to explain the nature of similar morbid affections of the internal parts. Many internal and external diseases are perfectly alike in character. Inflammation, abscesses, swelled glands, and various other cases of daily occurrence in practice, afford instances of this identity. The benefit, therefore, which a young man derives from following this progress in the study of diseases, is incalculably great.

The superiority of Clinical Lectures, as an advantageous method of conveying practical instruction, is most conspicuous in Surgery, on account of the obvious nature of the symptoms. A Student, who is diligent in his attendance upon a ward of Surgical patients, vigilant in watching the progress of the cases, attentive to the Lectures of the Professor, and careful to compare what he hears with what he observes, is certain to derive much real practical improvement from employing his time in this manner. This profitable employment of time is, besides, attended with the farther advantage of affording the nearest approximation to actual practice which a Student can enjoy: For having the nature of the case and principles of the practice explained to him, the different reports and prescriptions communicated to him, and their effect upon the patient open to his observation, he has strong inducements to exert his own faculties in judging of the result. And as all his improvement is connected with his own personal exertions, with his activity, industry, and accuracy of observation, he is daily acquiring habits of infinite value in preparing him to enter upon practice with great advantage: for nothing is more important in the education of a young man, who is destined for a practical profession, than, early in life,



when his mind is flexible, to initiate him in those habits of observation, activity, and exertion, which are indispensable to his success, and which are so difficult to acquire at a more advanced age. Practical habits, too, together with immediate personal intercourse with the sick, prove the best corrective to that unfortunate tendency to speculation, in which young men are too apt to indulge who obtain all their knowledge of Medicine within the walls of a University. An early introduction to Clinical Surgery is, therefore, a most desirable arrangement in regulating the course of a young man's studies; for every one at all acquainted with the subject, will admit, that a ward containing Surgical patients may, with less previous knowledge, be attended advantageously, than when the patients are labouring under diseases of a more obscure and complicated nature.

Strongly impressed with the importance of promoting this mode of studying Surgery, I began to deliver a course of Clinical Lectures, upon the practice of Surgery, at the Royal Infirmary, in the month of November 1786, and I have ever since, now nearly forty years, continued to deliver one or two courses annually. The success of the experiment, and the growing estimation of the course, mark sufficiently the public opinion of the undertaking. The Royal College of Surgeons took the class under their protection, after I had lectured for fifteen years. About the same time the Senatus Academicus recommended the class to the favour of his Majesty. After the lapse of nearly fifteen years more, the Managers of the Royal Infirmary, with the additional experience of fifteen years to assist their judgment, made Clinical Lectures on Surgery an essential part of the surgical department. And the Students mark their



approbation of those measures by honouring me with a very respectable attendance. During a twelve-month from this date, including both winter and summer sessions, between 170 and 180 Students have attended Clinical Surgery. The class, therefore, is now in a very flourishing condition. And as its prosperity depends upon the intrinsic merit of the establishment, there is every encouragement to expect that it will continue to prosper so long as the University shall flourish, and Edinburgh be a distinguished School of Medicine.

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“ In a printed paper, entitled, Argument, &c.  
 “ the original form under which the above remarks  
 “ were distributed among the Members of the Se-  
 “ natus Academicus, a passage was introduced at  
 “ this place, which gave a general account of the  
 “ discussions in the Senatus respecting the class of  
 “ Clinical Surgery; including an account of the ob-  
 “ jections urged against admitting the class into  
 “ the new Medical Curriculum, together with my  
 “ answers to the said objections. All this passage  
 “ is now suppressed, out of delicacy to my colleagues,  
 “ many of whom dislike to have the private discus-  
 “ sions of the Senatus made known beyond the walls  
 “ of the University. This omission, however, will  
 “ not, I trust, prove of any disservice to the cause  
 “ of Clinical Surgery, since the objections, in my  
 “ opinion, do not rest upon a firm foundation; while  
 “ the full exposition which I have given of the advan-  
 “ tages attached to Clinical instruction in Surgery,  
 “ confirmed by the testimony of several most re-  
 “ spectable and eminent practitioners, whose letters  
 “ appear in the Appendix, will convince every per-



“ son of an enlightened understanding, who thinks  
 “ deliberately on the subject, of the justice and ex-  
 “ pediency of giving substantial support and encou-  
 “ ragement to the class of Clinical Surgery.

“ I cannot here, in justice to the Royal College  
 “ of Surgeons, pass over in silence the very noble  
 “ and dignified conduct of that respectable public  
 “ body, at the time the proposal to establish a Pro-  
 “ fessorship of Clinical Surgery was first suggested.  
 “ The College was then agitated by two contending  
 “ parties, nearly equal in numbers, who opposed  
 “ each other with much keenness. Yet, notwith-  
 “ standing the keenness of the opposition, and the  
 “ deep interest which the individual Members took  
 “ in the party questions, they at once suspended all  
 “ their differences the moment a proposal was made  
 “ to establish a Chair in the University for Clini-  
 “ cal Surgery, unanimously concurring to promote  
 “ the establishment by every means in their power,  
 “ and acting together with perfect cordiality and  
 “ kindness during the continuance of the transac-  
 “ tion; thus affording a memorable and rare ex-  
 “ ample of a set of men deeply involved in faction,  
 “ yet, greatly to their honour, and superior to every  
 “ party prejudice, sacrificing all their private feel-  
 “ ings to the public good.”

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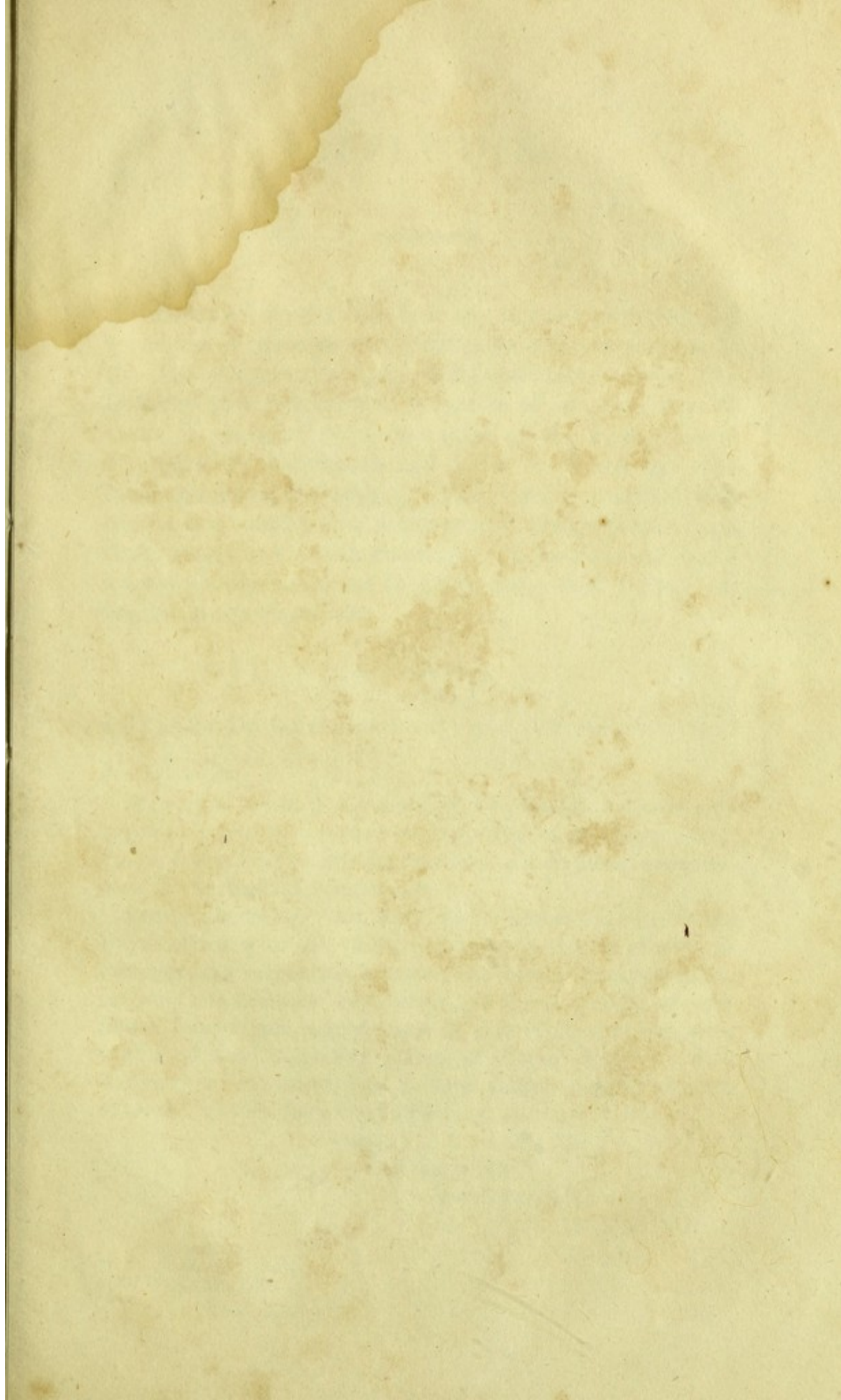
I have now brought the whole business relating to the class of Clinical Surgery under the review of the Senatus Academicus, with a fullness of detail, which will enable every one to form a decided opinion upon the merits of the question. I have stated the utility of the knowledge of Surgery to the practical Physician, and pointed out the advantages



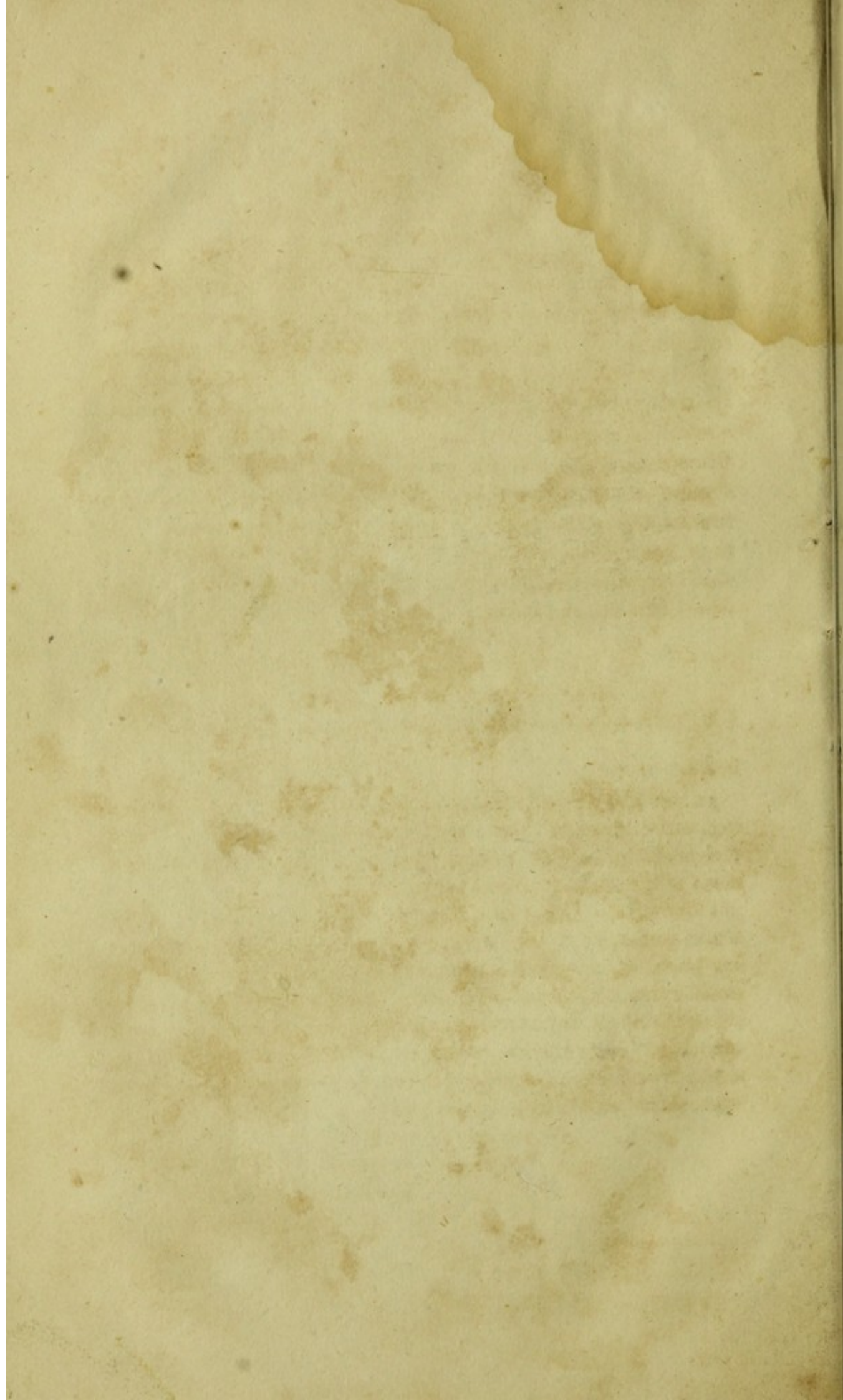
which Clinical Lectures possess in conveying useful instruction in the practice of Surgery. I have likewise brought forward all the arguments urged against the proposed arrangement, accompanied, I trust, with a satisfactory answer to every one of them. If I have the good fortune to succeed in the attempt, I shall feel much gratified in having been the instrument of conferring a benefit upon the profession of medicine. If, on the contrary, I shall be disappointed of my object, I shall still have the consolation to reflect, with much satisfaction, on having done my duty to the Chair which I have the honour to hold in the University, to the profession of medicine, and to the public at large. The result of this business is a matter of indifference to me as an individual; since, at my advanced time of life, a few years will soon put an end to my labours as a public teacher. I already divide the duties of my office with another practitioner, who shares in the emoluments. The effect of an arrangement, the operation of which does not commence for several years, cannot affect one who is gradually retiring from the scenes of active life. Neither my reputation, nor my fortune, nor my rank in society, can be influenced by the vote which the Senatus Academicus gives on this occasion. There are no motives of self-interest prompting me to exert my endeavours to promote the proposed arrangement; and I most sincerely hope, that every one who is to vote on this occasion, will divest himself from all feelings of prejudice and prepossession as completely as I am at this moment. My sole wish is, that the measure most advantageous to the public may ultimately be adopted.













## APPENDIX.

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ALTHOUGH I do not entertain any doubt concerning the soundness of the argument relative to the arrangements for the class of Clinical Surgery, I did not choose to trust solely to my own judgment in a matter of so great importance. I therefore requested some of the most eminent Physicians of Edinburgh and Leith to favour me with their opinion on the subject. They readily complied with the request; and I now flatter myself, that whoever reads their letters to me with attention, will be satisfied that I am completely borne out in every thing that I have advanced in the Argument.

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LETTER—Dr. JAMES HAMILTON, Senior, to Professor RUSSELL.

MY DEAR SIR,

In reply to your's of this morning, I have no hesitation in saying, that I consider a competent knowledge of Anatomy, and of the general principles of Surgery, to be an indispensable acquirement of the Medical Practitioner.

Permit me to add, that from my connexion with you in the Royal Infirmary of this place, I had an opportunity of witnessing your early essays as a Lecturer, and have since observed the assiduity and attention with which, to the advantage of your hearers, and to the improvement of your profession, you have conducted many successive courses of Clinical Surgery. This testimony on my part is due to your various merits; to have withheld it would have been unjust.

I am,

My DEAR SIR,

Your's very sincerely.

J. HAMILTON.

EDINBURGH,  
22, St. Andrew's Square, }  
5th November, 1824.

*To Professor Russell.*



## LETTER—Dr. JOHN BARCLAY to Professor RUSSELL.

*Friday Morning.*

The following letter, from unavoidable necessity, was written in a hurry.—J. B.

MY DEAR SIR,

In answer to your questions, Whether I consider a competent knowledge of Surgery requisite to form the character of an accomplished Physician? and, secondly, How far I regard Clinical Lectures to be an advantageous method of conveying practical instruction? With respect to the first question, there are some phrases which to me seem rather indefinite. There are different degrees of surgical knowledge, but I know not which of these is meant by a competent degree, unless a diploma from a College of Surgeons constitutes them competent; nor do I know what is meant by an accomplished Physician, unless the title of an M. D., legally conferred by a University, render him accomplished, and entitle him to take as large a fee as any other M. D. whatever be his education, learning, or merit.

With respect to the general question, Whether or not a knowledge of Surgery be necessary for a medical practitioner? I most decidedly answer, Yes; and may add, that I never yet found a satisfactory reason why the practice of Surgery and the practice of Medicine were separated, and not even the shadow of a reason, excepting this, that Surgeons or Chirurgeons, implying in the Greek language those persons who live by the labour of their hand, were considered as of an inferior cast to those who were not reduced to the necessity of manual labour. From these foolish and absurd ideas, the corporate bodies of Surgeons in many countries, and particularly in this, are still, at least in the eye of law, ranked as tradesmen, and the Physicians as gentlemen. Another absurd distinction is, it is not education, learning, or liberality of sentiment, that are now thought to constitute gentlemen, but money or wealth, however acquired. In this sense, many Surgeons are not only as good, but even better gentlemen than the generality of Physicians. In point of education and opportunities of acquiring knowledge, both in this country are upon a par; while the studies of the Surgeon are equally important, much better defined, and better understood than those of the Physician. Hence learned Physicians, being left to conjecture about the nature of internal diseases, and about the remedies to be prescribed, have given rise to the common observation that Doctors will differ, and to the fact, that the



skill and prescriptions of ignorant persons and old women are not unfrequently preferred to theirs, but seldom consulted about the mode of performing a difficult surgical operation. I would therefore conclude, that not only is Surgery more important than what is commonly called Physic, but Clinical Lectures upon Surgery much more important than those upon Physic, where so very much is left to conjecture, not only with respect to the causes of disease, but with respect to the relation between them and their symptoms; and hence the frequency of morbid dissections, to ascertain facts, to remove doubts, and establish the truth.

I am,

With much respect and esteem,

My DEAR SIR,

Your's always,

JOHN BARCLAY.

LETTER—Dr JOHN THOMSON, late Professor of Military Surgery in the University, to Professor RUSSELL.

*5 George Street, Edinburgh,*

*10th November 1824.*

MY DEAR SIR,

In answer to your letter of last evening, requesting my opinion respecting "the best plan of education for young men breeding for the profession of Medicine," I beg leave to state, that I have been accustomed to consider this education in two points of view,—that which is preparatory, and that which is strictly professional. With regard to the preparatory education, all, I believe, who are acquainted with the science of Medicine agree in thinking, that it ought to consist in the acquisition of a competent knowledge of the Latin and Greek languages,—of the elementary parts of Mathematics and Natural Philosophy,—and of that branch of Philosophy which treats of the Faculties of the Human Mind, and of their proper employment in the investigation and communication of truth. But on these points I need not dilate; for, in the circle of my acquaintances, I know no one better qualified than yourself to appreciate the advantages which young men, in beginning the study of Medicine, would derive from the possession of a competent knowledge of these branches.

With regard to the professional education of Medical Men, I believe that all who have considered this subject attentively, and without prejudice, will allow that it should commence in the study of Anatomy and Chemistry, branches the practical



and useful knowledge of which can be acquired only in the Dissecting room and in the Laboratory. A knowledge of these sciences will, in some measure, prepare the mind of the Student for entering with advantage on the study of the functions of the human body in the state of health,—of the derangements to which these functions are liable in diseases,—and of the general means to be employed in preventing, alleviating, and curing these derangements,—branches of medical knowledge which form the Institutions or Theory of Medicine. With the study of the Theory of Medicine that of Natural History and of Botany is very closely allied, and would, in my opinion, be very advantageously associated.

Without this previous course of professional instruction, a Student can be but very imperfectly prepared for entering upon the study of particular diseases, and of the various remedies to be employed in their treatment.

In order to derive advantage from attendance upon courses of lectures on the Practice of Physic and Surgery, and on *Materia Medica*, the student would require either to enjoy, or to have previously enjoyed, opportunities of observing diseases in private practice,—in Dispensaries for the sick,—or in Public Hospitals,—for, without the actual observation of diseases, it appears to me to be absolutely impossible for him to form any accurate notions of the morbid phenomena which he hears described, or of the uses and effects of remedies.

Of the general means hitherto employed to communicate useful information to those engaged in the study of the medical profession, I know of none which, in point of importance, can be at all compared to Clinical Courses of Lectures on Physic and Surgery, where Students are directed in their observation of diseases, and of the effects of remedies, by able and skilful practitioners.

To those who are to be engaged in the general practice of Medicine, no branch of knowledge is more necessary, and requires to be more assiduously cultivated, than that which relates to the proper management of women in the states of pregnancy and parturition, and to the diseases to which they and children are liable.

The variety of occasions on which medical men are called to give evidence in Courts of Justice, renders a certain degree of knowledge of those matters which are likely to become subjects of judicial investigation, necessary to every medical practitioner, since ignorance of, and errors in, these matters, may injure the cause of humanity, or frustrate the ends of justice, and must tend



to degrade the profession in the eyes of the public. Accordingly, I regard the study of Medical Police, or Legal Medicine, as it has been termed, as forming an essential part of medical education. In short, I cannot consider any Course of Medical Education as complete, or as deserving the approbation of the Public, which does not comprehend all the branches of preparatory and professional education which I have enumerated in this letter.

You do me but justice in believing, that I take a warm interest in whatever relates to the proper education of medical men; and it gives me a most sincere pleasure to find, that, at your advanced period of life, and after having so long enjoyed all the honours and emoluments of the profession, you are engaged in endeavouring to extend and improve the education of those who are to succeed us. Whatever degree of success may attend your present efforts, it must always be to you a source of much satisfaction to reflect, that, by your steady and continued labours, Clinical Surgery has been added to the studies required in the education of those who obtain diplomas from the Colleges of Surgery in these kingdoms; and that you have been the means of founding, in the University of Edinburgh, a Professorship for teaching a branch of medical education, which must sooner or later be recognised by the Patrons and Professors of that Institution, as it is universally regarded by the Medical Public, as indispensable to those who are to practise Physic.

I remain,

My DEAR SIR,

With much regard and esteem,

Your's very truly,

JOHN THOMSON, M. D.

*James Russell, Esq.*

*Professor of Clinical Surgery in the  
University of Edinburgh.*

LETTER—Dr. DAVIDSON to Professor RUSSELL.

MY DEAR SIR,

As I have no doubt upon the subject, I return an almost immediate answer to your question, “Whether or not a competent knowledge of Medical Surgery should be possessed by every practising Physician?”

Judging from my own experience, and more particularly from my own deficiencies, I cannot help concluding, that a



Physician, for the sake of his patients, and for his own satisfaction, should have such a knowledge of Clinical Surgery as to enable him to regulate the treatment of affections, either original or intercurrent (glandular swellings, inflammation of absorbents, extensive abscesses, &c.), not strictly medical:— That he may know, at the proper time, when medicine requires the assistance of Surgery (in cynanche, laryngitis, effusions into the chest, abdomen, &c.); cases in which the hesitation of ignorance is often fatal to the patient. Many additional arguments might be advanced in support of the opinion which I now venture to give you, but so convinced am I of its self-apparent correctness, that I do not wish to trouble you by entering farther into particulars. In giving my advice to a medical Student yesterday, I impressed him strongly with the necessity of devoting part of his time to the study of Surgery; and recommended an attendance of, at least six months, in the Surgical Wards of the Royal Infirmary, and on the Clinical Lecturers, who explain the nature and treatment of the cases which occur in that department of the hospital.

I remain,

My DEAR SIR,

Your's very truly,

J. H. DAVIDSON,

23, YORK PLACE, }  
Nov. 9, 1824. }

#### LETTER—Dr. KENNEDY to Professor RUSSELL.

MY DEAR SIR,

EDINBURGH, 10th Nov. 1824.

I now sit down to reply to the query, which you did me the honour, verbally, to refer to my judgment two nights ago, viz. Whether instruction in the department of Surgery was, in my opinion, necessary to the education of a Physician?

To put this query generally, would only be to ask, whether every man ought not, as far as possible, to be instructed, and even versant in every branch of the profession to which he belongs? To state it in such terms, removes all doubt as to the nature of the answer. In fact, emergencies must often arise, wherein a Physician, ignorant of this branch of the healing art, could be of no use whatever.

I am even disposed, and I think upon very solid grounds, to go one step farther, and to say, that those medical men who have most distinguished themselves as general practitioners, and



particularly in the province of Surgery, are of all others most likely to make expert Physicians. Discernment, promptitude, and facility of prescription, are the rewards of a practice, not limited exclusively to any one branch of the profession.

It may perhaps add some weight to the opinion which I have above given, to say, that it is founded upon the experience of an active and diversified medical life, of not less than forty years' standing.

I have the honour to remain,

Your's very sincerely,

ALEXR. KENNEDY, M. D.

*To James Russell, Esq.*

LETTER—Dr. ABERCROMBY to Professor RUSSELL.

MY DEAR SIR,

*York Place, 12th Nov. 1824.*

I regret that I have been so long prevented from replying to the queries which you have done me the honour of proposing to me,—and that I now must do it very briefly. Allow me to add, that I never should have presumed to obtrude my opinion on the important subject at present under consideration in the University, had it not been expressly requested by yourself, and by several other members of the *Senatus Academicus*.

In making a complete revisal of the Curriculum of medical study, it appears to me that the improvement which is chiefly wanted, and by which the *Senatus* may contribute in a most essential manner to raise the character of the medical profession, is, some provision for securing a liberal and extensive previous education in literature and science:—such an education as shall enable the Student to commence his medical Studies with a mind well stored with scientific knowledge,—and, in particular, with a mind well trained to habits of correct reasoning, and philosophical inquiry. The branches most likely to contribute to this purpose, appear to be the Greek and Latin languages, Mathematics, Moral Philosophy, and Logic, Natural Philosophy, and Natural History. I am well aware of the difficulties that would attend such an alteration in the *statuta* as this would require; but I think there are various ways by which the difficulties might be overcome, and there can be little doubt that the result would be, both to elevate the character of the medical profession, and to raise the value of the Edinburgh degree, which is already so highly, and so deservedly esteemed.



In regard to the various branches of medical science, it is difficult to say which of them can with propriety be dispensed with. In particular, I have no hesitation in saying, that, in the present state of medical practice, it is necessary for a physician to be correctly acquainted with Surgery in all its departments, except the mere practice of operation; and farther, it does appear worthy of serious consideration, whether all the branches of medical and surgical science, which are *bona fide* taught in the University, ought not to be included in the Curriculum, or, at least, to be strongly and decidedly recommended to the attention of the Student. The utmost extent of knowledge that he can acquire from all of them, he will find to be scanty enough, when he comes to the extensive exercise of a profession, in which the responsibility is so tremendous, while, at the same time, new difficulties will meet him at every step; and the result of his most zealous researches will only lead him more and more to lament the imperfection of the art itself, and the deficiencies of his personal knowledge.

I am,

My DEAR SIR,

Most sincerely your's,

JOHN ABERCROMBIE.

*To Professor Russell.*

#### LETTER—DR. KELLIE to PROFESSOR RUSSELL.

MY DEAR SIR,

LEITH, 11th Nov. 1824.

The points on which you have done me the honour to solicit my opinion have not overtaken me unprepared. For many years past my attention has necessarily been much directed to the subject of medical education, having, in common with most of the practitioners in this part of the kingdom, had constantly to superintend the studies of Pupils destined for the different departments of our profession.

My professional principles, if I may so speak, are perhaps somewhat more aristocratic than those of many of my friends. I am convinced that where the numbers and the wealth of any given population admit of the necessary division of labour, Medicine and Surgery should be kept as distinct and separate as possible; I shall found no argument, therefore, on the more frequent necessity of the union of both professions in the same individual, nor on the debateable and common or neutral grounds



which form the confines of Medicine and Surgery—however conclusive such arguments may be. I shall consider your questions as bearing solely on him who is to be educated exclusively to Medicine, without the prospect of ever interfering with the practice of Surgery, though in this country such a case be a rare one. Even in this extreme case, however, I regard “a competent knowledge of Surgery to be not only a requisite qualification to form an accomplished practical Physician,”—but, next to Anatomy, I have long been led, from much observation and reflection, to consider a *clinical* or *practical* knowledge of the principles of *Surgery* as one of the most important elements of a regular *medical* education, and, indeed, as the very ground-work of pathological science. I could say much on this most important subject, but to you a very few hints will suffice to enable you to comprehend my meaning. It is in the observation and study of those *external* diseases which belong to the province of Surgery, that the various morbid and curative processes, on which are founded the sciences of pathology and therapeutics, can best be explained and demonstrated to the young Physician. The Student, for example, who has opportunities of becoming practically acquainted with the phenomena and management of wounds—whose attention is directed to the slight inflammation, the adhesion, and speedy reunion in one case,—to the increased pain, throbbing, heat, redness, and tension, and to the consequent suppurations, abscesses, and sinuses in another,—to the ulcerations, gleetings, fungosities, and calosities in a third,—to the gangrenes and sloughings in a fourth,—and to the varieties of symptomatic fever in all, must acquire a knowledge of the doctrines and pathology of inflammation, more precise and intimate than can be obtained from any other source with which I am acquainted. The surgical study of aneurism is in like manner necessary to the right apprehension of the diseases of the heart and vascular system within the three internal cavities of the body, and of many therefore of the most obscure and important diseases which fall to the care of the Physician; while the Clinical observation of the structure, characters, and progress of external tumors is admirably calculated to illustrate the history of many analogous and more obscure diseases of internal organs. It were easy to multiply examples of this kind. The greater number of surgical diseases being obvious to the sight and other senses, the Clinical Teacher has in them the means of directing the Student’s attention to the whole series and progression of those morbid actions and changes, which are



*secretly* and in the dark going on in internal diseases, the termination of which the Physician has sometimes the means of demonstrating to his Pupil only after the patient's death. I regard Clinical Lectures, therefore, not only "to be a useful mode of conveying practical instruction in Surgery;" but I consider such Lectures as you have for many years past delivered in this great Medical School, to be of infinite importance even to the Medical Student, and calculated to convey to him many illustrations and much practical knowledge of the pathology of internal diseases, which he will in vain look for elsewhere. From my heart, I wish you every success in your present laudable enterprise; as I can conceive few greater improvements in the *mere medical education* of our future graduates than the introduction of the Clinical Lectures on Surgery into the Curriculum of the University.

I am,

My DEAR SIR,

Your's most truly,

GEORGE KELLIE.



