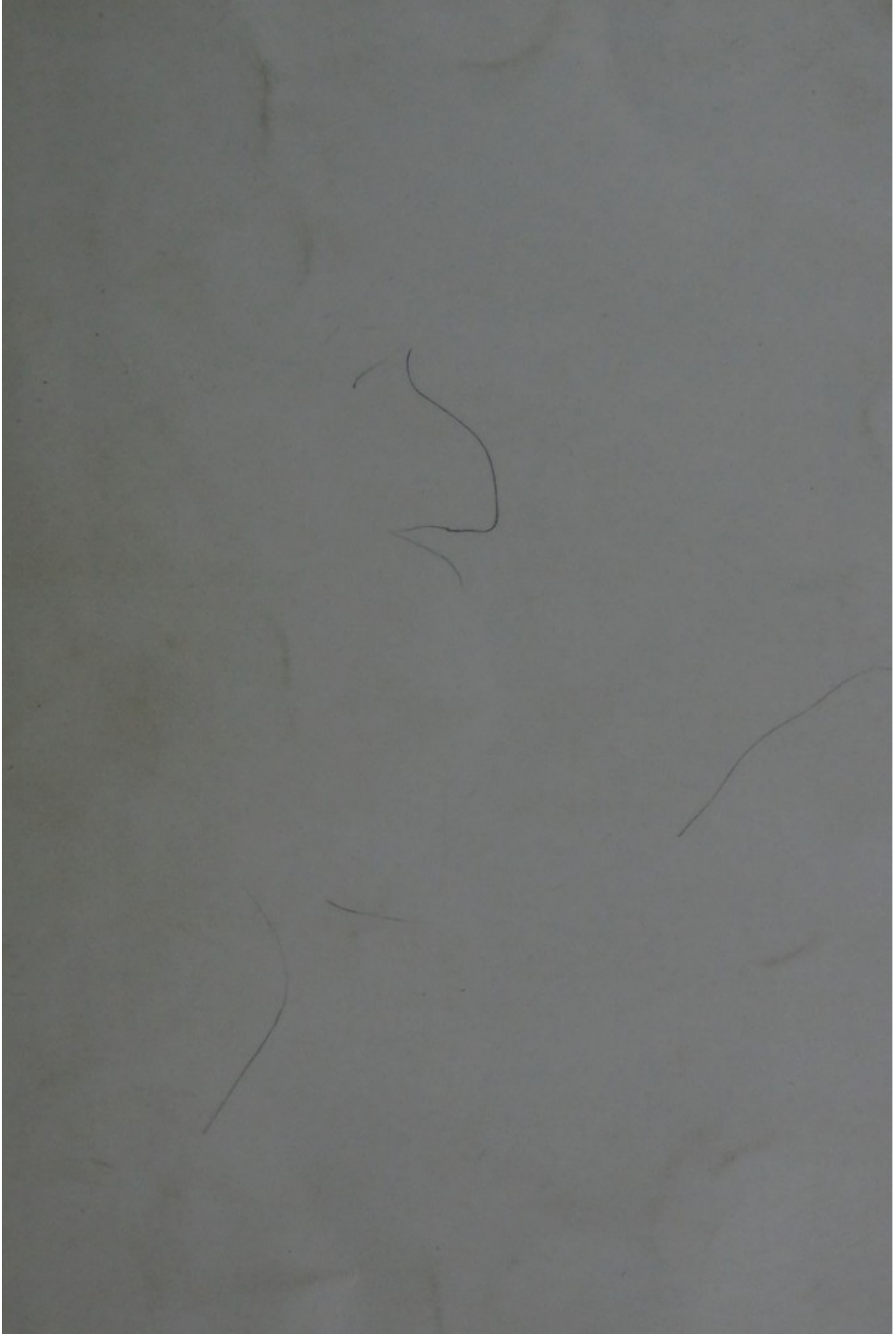
Observations on the system of clinical instruction in the Royal Infirmary of Edinburgh / by the professors of clinical medicine.



OBSERVATIONS

ON THE

SYSTEM OF CLINICAL INSTRUCTION

IN THE

ROYAL INFIRMARY OF EDINBURGH.

BY THE

PROFESSORS OF CLINICAL MEDICINE.

DECEMBER 9, 1848.

EDINBURGH:
PRINTED BY NEILL AND COMPANY.
MDCCCXLVIII.

OBSERVATIONS, &c.

THE Professors of Clinical Medicine, having taken into consideration the "Statement of the Managers of the Royal Infirmary on the subject of Instruction in Clinical Medicine," beg to make the following remarks.

The purpose of that Statement is to shew that the present system of Clinical Instruction is "anything but satisfactory;" and that it is to be rectified by establishing a separate Professorship of Clinical Medicine.

The Clinical Professors must, in the first instance, set the Managers right as to some important facts, relative to the present system, which have been incorrectly given in the Statement.

The system of Clinical Instruction in this University was established by its Medical Faculty, with consent of the Infirmary Managers, just a century ago. The first course of Lectures was delivered in 1748 by the Professor of the Practice of Physic, *Dr John Rutherford*, who for some years lectured singly, but afterwards in conjunction with one of his colleagues. Since that time it has been the rule, that any member of the Medical Faculty, who desired to deliver Lectures on Clinical Medicine in the University Clinical Wards of the Hospital, might do so in his turn. The number of Clinical Professors has been generally two, sometimes three, and for a short period four. Notwithstanding that any member of the Medical Faculty might take a share of the duty, on no occasion have the Lectures been delivered by any one not a practising physician, or having an eye to practice.

In 1825, when the Students of the University were very

numerous, the Medical Faculty applied to the Managers for an extension of the Clinical Department in the Infirmary; so that two contemporaneous courses might be carried on, instead of one as formerly, for the purpose of dividing the students in attendance on the wards. This application was acceded to. The double course was conducted for eighteen years; during which period the Professors of Clinical Medicine doubled their labour, without any increase of emolument.

In 1843, the Students having for some time fallen off in number, till they did not exceed two-fifths of the former amount, and the reason for doubling the duty having thus ceased to exist, the former arrangement was reverted to. Since 1843, a single course, nine months in duration, has been carried on, sometimes by three Professors, sometimes by two, as was generally the case prior to 1825. At present there are three Professors on the list of Clinical teachers, all of whom have acted during the last twelve months.

In consequence of the premature death of Dr Graham, the retirement of another Clinical Teacher, the illness of a third, and the disinclination of the Professor of the Institutes of Medicine to take part in the duty of Clinical teaching, which had been constantly discharged by his predecessors since the Clinical wards were opened,—the number of Clinical Professors was suddenly reduced in 1846 to one only. It became necessary, therefore, to appoint an Assistant-Professor. And during *two months* of that year, and *three months* of the next, the duty was efficiently discharged by the Senior Ordinary Physician of the Hospital, with consent of the Managers. The Clinical Professors are certain, that such assistance has been required only on these two short occasions during an entire century. They do not comprehend, therefore, why it should be said by the Managers, in their Statement, that "the Clinical Staff has been at times, from various causes, so much reduced in number, that substitutes have frequently been employed to deliver the Clinical course of lectures." The Managers may rest assured that they have been misled in this matter. For, in point of fact, there is not a single Medical Professorship in the Uni-

versity, not even that of Clinical Surgery, now held up by them as a model, the duties of which have been so regularly discharged by its occupants. And at present there is every likelihood of the same regularity continuing. For the lately-appointed Professor of the Institutes of Medicine has undertaken the duty which his predecessor declined; so that there are now three Clinical Professors.

The Managers have quoted in their Statement the evidence delivered before the University Commissioners in 1826, by Dr Alison, one of the present Clinical Professors, to shew that, in his opinion, a separate Professorship of Clinical Medicine ought to be established, if the number of Professors of the Faculty willing to undertake the duty should ever be reduced so low that it could not be discharged effectually; and they argue that the time is now arrived, because the number was lately reduced too low. But they must observe, that Dr Alison's evidence related to a time when two contemporaneous courses were carried on, and four Professors were necessary to conduct them effectively. At present two Professors are sufficient. And as to the difficulties in which the Chair of Clinical Medicine was lately placed for a short time, by a very unusual conjunction of circumstances, the Clinical Professors can scarcely imagine that the Managers would propose to make now a permanent change, on account of a temporary embarrassment, which no longer exists.

It is admitted on all hands, that the system of Clinical Instruction in Medicine pursued in this University has been of great service to its Students, and contributed materially to its celebrity as a School of Medicine. Accordingly, no alteration was ever proposed to be made in it until about twenty years ago, when the fondness which prevailed at that period for the adoption of Continental customs led to the proposal that a distinct Professorship of Clinical Medicine should be established. And this plan was urged, as the Managers have stated, by several eminent members of the Medical Profession before the Royal University Commission in 1826. The opinions given on that occasion, however, do not appear to have been founded on a careful consideration of the matter.

They were certainly given without attention to a long and able argument by the late *Dr Gregory*, in favour of the present system, contained in his Memorial, printed in 1803. And it is well known that the evidence quoted by the Managers was very much designed to favour the views of one gentleman, whose ambition it was at that time to enter the Medical Faculty as Professor of Clinical Medicine.

The Managers quote in their Statement the evidence of *Dr Davidson* before the University Commission, that "he suspects we must ascribe to the want of a permanent Professor of Clinical Medicine, the dearth of Reports in Scotland, whilst these most useful of all medical publications abound in France, Germany, and Italy." The opinion thus loosely grounded on a "suspicion" merely, is a sample of the vague ideas entertained on the subject by the various gentlemen who gave evidence on this occasion. For it is certain that in Paris, the authors of the most esteemed works on Clinical Medicine, such as *Andral*, *Louis*, *Chomel*, *Grisolle*, were not Professors at all at the time when they wrote; or, if they were Professors of Clinical Medicine, such as *Pinel* and *Laennec*, they happened to be precisely in the same predicament as the Clinical Professors of Edinburgh, being at the same time Professors of Systematic Medicine. The same is the case with *Brera* in Italy, the author of the Prolegomeni Clinici, who was at the time Professor of "Terapia Speciali," and of "Clinica Medica," at Pavia. The same is also true of *Dr Graves* and *Dr Stokes* of Dublin, who have both contributed important Clinical reports to the records of Medicine. The one was Professor of the Institutes of Medicine in Trinity College, and the other of Medicine in the School of Physic, at the same time that they were also Lecturers on Clinical Medicine at the Meath Hospital.

The Clinical Professors must also take the liberty of observing, that the Managers of the Infirmary were about the last persons from whom they would have expected that the disparaging contrast, attempted to be drawn by Dr Davidson, would have received countenance and currency, instead of contradiction. It may not perhaps become the Professors to speak of the exertions of their predecessors and themselves to

render their opportunities of observation useful to the Medical Profession. But when such a statement as that of Dr Davidson is quoted by the Managers, as if it were correct, they consider themselves warranted in observing, that, beginning with the publication of the Clinical Reports of the late *Dr Duncan, junior*, and his paper on Diffuse Inflammation,—the first, ablest, and most elaborate dissertation on that subject,—which was founded greatly on his experience as Clinical Professor, various practical inquiries have appeared both in the Journals and in a separate form, proving that the University Clinical Wards have been turned to account in more ways than as a school of instruction. And if the efforts of the Clinical Professors in this line have not been commensurate to the expectations of the Managers, it will be for the Managers to consider, whether that result may not have been owing, in part at least, to measures taken by their predecessors, which have had the effect of materially crippling the resources of the Clinical Professors, to the serious diminution of the interest and value of the instruction given by them, and of their own opportunities of observation and scientific inquiry.

Having made these remarks on some of the leading facts and arguments brought forward by the Managers in support of the proposal to institute a separate Chair of Clinical Medicine, they will now proceed to state their own views on the question.

Wherever the whole Medical Professorships of a Faculty are supported, as abroad, by endowment, and where Hospitals are numerous, the most efficient mode of teaching Clinical Medicine would be by the foundation of two Chairs, expressly for that purpose alone. But these two conditions are essential; and yet they have been entirely overlooked by the Managers.

Even the establishment of a single Clinical Chair is not without its advantage. For the Professor would have his energies concentrated upon the single subject which he is appointed to teach. But in that case, the University would be exposed to the serious disadvantage, that a Professorship, which, more than any other, requires for the effective dis-

charge of its duties great activity of body as well as of mind, —because its occupant must not only teach for nine months of the year, but likewise act as Attending Physician for the whole twelvemonth without intermission—must almost to a certainty be taught every now and then by one whom advancing years or infirmities will render unfit, for a considerable period, to act with zeal and efficiency. That this is no idle supposition, those Managers can tell, who recollect how the Chair of Clinical Surgery was circumstanced for many years during the incumbency of the last Professor. There is, in fact, no Chair which requires, so much as that of Clinical Medicine, that the holder of it shall be in the vigour of life.

On the other hand, it is not denied to be at first view a disadvantage in the system hitherto pursued at this University, that each Clinical Professor has other important University duties to discharge; that his attention and time are consequently divided; and that he may not always be able therefore to devote so much of his energies to the business of Clinical Teaching as would be desirable.

This disadvantage, however, does not operate to so great an extent as might naturally be supposed. For each Professor acts, in ordinary circumstances, as Clinical Teacher for only three months of each year. And, if the Clinical system were properly organised, as it might easily be, the duty would be discharged only by those Professors whose principal Chairs connect them directly and intimately with medical practice; so that they must possess the necessary qualifications, and may, in ordinary circumstances, find the requisite leisure.

But, even admitting the reality of the disadvantage, there are compensating advantages which ought not to be lost sight of, especially as the Medical Professorships of this University are constituted.

The Chair of Clinical Medicine is thus constantly taught by men in the vigour of life. The emoluments, divided among several Professors, are not such as to induce any one to cling to the office as approaching age or infirmities gradually im-

pair his activity. He gives place, therefore, in time, to a younger and more enthusiastic colleague.

It is a manifest advantage to the Students that they shall witness the practice, and hear the practical reflections of more than one Professor. The Clinical Professors believe that the freedom from exclusive or dogmatic opinions, often remarked in the Graduates of this University, has been justly ascribed, in part at least, to this very circumstance. Considering who have been the occupants of the systematic Chairs of the University in past times, the Clinical Professors beg to represent that the system would have been a vicious one, which would have deprived the Students of their practical instructions as Clinical Teachers. When the Clinical Lectures were delivered by *Dr Cullen* and *Dr John Gregory*, by *Dr James Gregory* and *Dr Francis Home*, by *Dr James Home* and *Dr Duncan, junior*, who were all teaching other branches at the same time, it may be confidently asserted that the Clinical instruction was at least equal to what could have been obtained by securing the exclusive services of any other teachers then known in this country. Nor do the Clinical Professors understand that any such change has taken place in the nature of Clinical teaching, or in its relations to other practical Chairs, as to render the same result impossible or improbable for the future.

By acting periodically as Clinical Teachers, the Professors of the practical Chairs have an opportunity of practical study in an Hospital. It is of great moment to the Chairs of Practice of Physic, Materia Medica, Institutes of Medicine, and General Pathology, that the holders of them shall have an opportunity, if they desire it, of applying to practice the precepts they are in the habit of teaching, and of studying, by actual experience, the discoveries which every successive year brings forth in all departments of medical science. This opportunity can be obtained satisfactorily only in Hospital practice. Hence, in Paris, for example, every Professor of a practical branch of Medicine or Surgery, is a physician or surgeon of a great hospital; which is easily arranged where hospitals are numerous. In Edinburgh, possessing only one Hospital, the only available method of supplying such oppor-

tunities of self-instruction to the Professors is by the present system of Clinical teaching.

It cannot be overlooked, in considering the present question, that the emoluments of the existing Medical Chairs depend in part upon the fees of the Clinical Students ; that the present occupants have rights, derived from the uninterrupted usage of a century, which cannot be lightly dealt with ; and that their Chairs have an interest in the question which must form an important element in considering the present proposal. On the Continent, where Professorships are supported always mainly, and in general entirely, by endowments, projected changes are untrammelled by such considerations. In Edinburgh it is not so. The transference of the right of Clinical teaching to a separate Professor would involve the sacrifice of a fifth part of the income of the present Professors of the most important practical Chairs. Before the Managers, therefore, resolve to recommend a change in the University involving so great a reduction, the Clinical Professors would submit, that three very serious questions must be taken into consideration.

1. Whether such reduction, without consent of those now interested, be legal ?

2. Whether the present incomes of the most important practical Chairs in the University, reduced, as they have been, by various causes, to two-fifths of what they were fifteen years ago, can be safely reduced any farther ? And,

3. Whether this experiment should be made for the sake of carrying out an innovation, *of the working of which no Academic or Corporate body in this country has any experience ?*

The first two of these questions they will leave without commentary to the Managers themselves, being assured both of their capability and willingness to make inquiry, and to arrive at the truth, and of their anxiety to do justice.

But upon the third it is necessary to put them right as to certain relative facts which have been incorrectly represented in their Statement. It is there mentioned, that " other Medical Schools at home and abroad," in following the example of Edinburgh, improved upon it, " by instituting separate Chairs" of Clinical Medicine. And again allusion is made

to "a separate Professorship of Clinical Medicine, such as now exists in various Schools of Medicine in England, and on the Continent." It is certainly most desirable that so radical a change as is contemplated by the proposal of the Managers, were supported by the previous example and success of some other great Medical School *in this country*. But the fact really is, that no such Professorship as the Managers describe exists in any of the great Schools of England, Scotland, or Ireland. Where Clinical Medicine is taught at all, it is taught by the Professors of other practical branches, just as in Edinburgh. In University College, London, alone, is there a distinct Professorship of Clinical Medicine. But the Professors of the other practical branches there have an equal right of teaching Clinical Medicine, and exercise it; the system there is in other respects quite different from that followed here, inasmuch as none of the Clinical Teachers derive any emolument from the fees of Clinical Students; and if the Managers will make inquiry, as the Clinical Professors have done, they will not find in the result any great reason to imitate the system of Clinical Instruction pursued in University College.

In conclusion, the Clinical Professors beg respectfully to express their regret, that the Managers, before coming to the conclusion at which they have arrived, had not consulted them as to the causes which may have led to a depreciation of the system of Clinical Instruction at Edinburgh, compared with that followed elsewhere. They might then perhaps have become satisfied, as the Clinical Professors have for some time been, that the cause is not the want of a separate Professorship, so long as zealous teachers may be found in the Medical Faculty as it stands,—but that the Managers have not themselves followed the march of improvement in various particulars which lie under their own control, and under theirs only.

Since 1825, when the Clinical Wards were extended, nothing has been done for improving the opportunities of instruction there. On the contrary, the resources of the Professors have been materially crippled by the Managers' pre-

decessors having deprived them of the right of the daily choice of Patients, which they had previously enjoyed from the period when the Clinical Courses were first established. The Professors have accordingly, on more occasions than one, complained of the dearth of materials for practice and lecture. But the deficiency has never been adequately made up. The interest of the Students consequently flags ; and it would not be surprising if that of the Teacher sometimes did so likewise, when he feels that he has not before him a fit subject for prelection.

But there are many other wants besides this to be supplied, in order to give a stimulus to the system of Medical Clinical Instruction at this University, and to raise it to a level with the Clinical Instruction given at some Foreign Schools. In this respect, the Clinical Professors speak the sentiments of the Medical Faculty at large.

1. There ought to be distinct Wards for certain classes of diseases,—one for Cutaneous Diseases,—another for Diseases peculiar to Females,—another for the Diseases of Children. These diseases are at present scattered throughout the whole Hospital in small numbers ; so that no Clinical Teacher has sufficient materials for giving practical instructions upon them. Paris has distinct Hospitals for such cases. Surely Edinburgh can afford to supply distinct Wards.

2. The hospital for Syphilitic cases ought to be opened to the Students, and for Clinical instruction. At present, the Students have no opportunity of becoming acquainted with the symptoms and treatment of primary syphilis ; and they see only a few stray cases of secondary syphilis, admitted into the general wards "per incuriam," and contrary to the Hospital regulations. This is a most serious defect in the Edinburgh Infirmary, as a school of instruction.

3. More spacious accommodation, with all the requisite modern appliances, should be provided, instead of the two very inadequate Wards, No. 10, for cases of delirium tremens and symptomatic insanity. Excellent opportunities of instruction are at present entirely thrown away, from the small size of the apartments ; and the patients themselves are unfa-

vourably circumstanced, owing to the want of most of the approved means available in these times for their treatment.

4. There ought to be, as in all the English hospitals, a Dispensary, or "out-of-doors" practice, connected with the Clinical Wards, by which the senior Students may be instructed, as they now are imperfectly at the two Dispensaries of the city, and by means of which the Infirmary, as well as the Clinical Teachers, may at once be relieved of objects unfit for treatment in hospital, and be supplied with a better choice of cases for admission.

5. There should be attached to the Clinical Wards a room immediately adjoining, into which the Professor may take the Students for a few minutes before, during, or after his visit, to point out to their immediate attention any points of passing interest, which are constantly occurring among the patients under his charge. This is done abroad in the wards at the patient's bedside. But such a practice is in this country impossible. Even if the feelings of patients and their friends could be overlooked, the Teacher himself can never overcome the feeling of restraint.

Under an arrangement of Wards such as is now suggested, an important advantage of the present system of Clinical Instruction in the University is, that the ordinary Clinical Professors might have the aid of others of their colleagues, whose pursuits may happen to be directed, by taste or profession, to particular classes of diseases.

The Clinical Professors, however, must guard against being thought desirous of having the wards for special classes of disease placed at the disposal of the University Professors alone. The first point is to establish them; so that the Students may find in the Edinburgh Infirmary the means of self-instruction in various departments of Medicine, which at present they have no opportunity of studying practically here, and for which the Professors know that third and fourth year Students are sometimes in the habit of resorting to other schools at home and abroad. The next point is to assist them in their studies by Clinical Lectures. This may be accomplished in various ways, but probably in no way better than by giving equal opportunities of observation to all the Medi-

cal Officers of the Hospital in these special wards, the charge of them being assigned alternately to the Clinical Professors and the Extra-academic Teachers of Clinical Medicine during the School-Session, and to the other Ordinary Physicians during the autumn.

It is by improvements such as these, far more than by any novel and doubtful alteration of Teachers, that the Clinical School of the University and Royal Infirmary is to be elevated to its right position. And the Clinical Professors must also add, that, if such improvements are called for, as they firmly believe to be the case, they are equally demanded under the present system of teaching, and any new one which may be contemplated by the Managers.

It may be said that these improvements are extensive, and will require time and funds to carry them out. This is true. But if the Managers are as much impressed with their importance as are the Clinical Professors and Medical Faculty, they will find the way to effect them. And, indeed, two of the measures may be effected in a few days, at a very trifling expense. For the two small wards, attached between 1825 and 1843 to the University Clinical Department, may be appropriated at once, the one for Diseases peculiar to Females, and the other for Males labouring under Chronic Cutaneous Diseases. Nor is it supposed that much difficulty would be encountered in supplying the Professors with a room closely adjoining the Clinical Wards, for assembling and instructing the Students.