

Distinction without separation : in a letter to the president of the College of Surgeons, on the present state of the profession / Joseph Henry Green.

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INDISTINCTION WITHOUT SEPARATION.

IN

A LETTER

TO THE

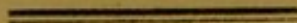
President of the College of Surgeons,

ON

THE PRESENT STATE OF THE PROFESSION.

BY JOSEPH HENRY GREEN, F.R.S., F.G.S.

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1831

SECTION WITHOUT SEPARATION

A LETTER

TO THE

MEMBERS OF THE SOCIETY OF FRIENDS

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LETTER

TO THE

PRESIDENT OF THE COLLEGE OF SURGEONS,

ON THE

PRESENT STATE OF THE PROFESSION.

SIR,

THE assertion that the character of the medical profession is no longer upheld in the public estimation, has been so frequently reiterated and re-echoed, that it has at length, for too many, assumed the force of an admitted fact. It has therefore become the duty of those who love and honor the profession, to ascertain if the opinion be well founded; and should grounds for this momentous charge exist, to endeavour to trace the causes, and discover the remedy. And it is under the strong sense of a duty which I owe to my profession, that, unwillingly relinquishing pursuits far

more congenial to my taste, I venture to address you upon this subject of present paramount importance.

Professions, like States, seem destined to have their phases and mutations. They struggle from ignorance into light, rise through error and prejudice to their full meridian glory, decline then in the subdued splendour of forms that have no longer the inward life that produced them, and sink at last into the darkness of formulæ, dicta, and precedents, the *caput mortuum* of a creative intelligence. If we look to the professions of Divinity and Law, (to the Sciences I mean, as distinct from the professors,) I fear it cannot but be confessed that these sister stems, which, entwining with Medicine, form the great trunk of the mind of the State, have ceased, in a great measure, to push forth their leaves and blossoms, and shew at present so few signs of life and living energy, that it might be doubted whether the sap continues to arise from the common root. Without attempting to disparage the useful labours of theologians and lawyers, for we are now speaking of the *Sciences* only of Theology and Law, not of the *men*—in the *literature* of these professions, we shall, I fear, look in vain for those marks of vigour which characterise the works of our elder divines and lawyers of that golden age of our national intellect, comprised in the reigns of Elizabeth, her immediate successors, and the Commonwealth:

their teaching, preaching, writings, and works, were not the records of precedents, the amassment of mere facts, but breathe an intellectual life into all the knowledge of the age, into all its feelings, hopes and aspirations, and address themselves to the whole heart and mind of man.

If it be with a feeling of humiliation that we look back to the then state of the medical profession, it is nobly redeemed by our knowledge of its rapid advance, its mature vigour, and by the assurance that it not only is progressive, but that it contains within itself the power of still continuing progression. Who shall deny this, who has duly considered the present state of medicine in its close relation to and connexion with the great body of science and truth? In all its observations, researches, and deductions, it bows to no authority save to the laws of reason; it has no object but truth,—truth for its own sake, and truth in the service of human well-being. It seeks to establish only that which may have *permanent* worth. It brings to its aid in this great work the operations and results of all other liberal pursuits and sciences: for what shall we exclude from the legitimate acquisitions and desirable knowledge of the scientific medical man and medical philosopher? And as the consequence of this truth, and its confirmation, we may confidently ask, in what department of human

knowledge have not medical men distinguished themselves, as successful cultivators and discoverers? Need we, in answering these questions, refer in detail to anatomy and physiology, human and comparative; to experimental philosophy and physics, to botany, zoology, and chemistry? These are, indeed, but the every-day pursuits and the prescribed studies of even the tyro in medicine; but for the scientific possession of these, for an enlarged view of the causes of disease, and their remedies, for bringing his observations into a scheme of philosophic unity, or the application of the same to all the detail of his labours, how much more varied and deep must the Student's research be! He must direct his studies to meteorology, geology, mathematics, physical geography, the influence of climate, the discoveries and accounts of travellers and voyagers, the various states of society, the effects of occupations, trades, and arts; nor can he be said to have attained a mastery of his profession, who is ignorant of the mutual relations of life and mind, who is unversed in psychology and metaphysics. Yet, in all these researches, he must feel that he is but laying the foundation for a future medical science and philosophy, and every extension of his knowledge becomes for him a proof of his ignorance and a ground of humility. Follow him again into society, and the practical exercise of his profession, and I need scarcely call your attention to those who, favoured by a resi-

dence in the capital, are found foremost in the society, and in the promotion of the objects of scientific men; or to those who imitate their example in the provincial towns. But trace the medical man into the market towns and obscure villages, where, with the clergyman, he forms the nucleus from which cultivation may spread; or trace his footsteps in the remote colony, or as the companion and fellow-labourer of those who are traversing the globe, in order to carry on the great work of civilization; and who will be considered as a fitter harbinger of its blessings to the savage and barbarous, than he who prepares the way by soothing and relieving their sufferings? If it were necessary or expedient to exhibit, yet further, the beneficial influences and effects of our profession, how easily might it be proved, that there is no calling more calculated to bring into exercise the best feelings of our nature; none certainly more fitted to stimulate to the active practice of humanity; and I think it would be difficult to name any body of men, whose time and labour are, in an equal degree, or to the same extent, given gratuitously and cheerfully to services often revolting in their nature, the only reward of which is the promotion of science, or the individual's own sense of duty.

It may be said that this is an overdrawn picture, and I should be unwise to assert that all is done in all times

and places, that the profession of medicine is calculated to foster and produce; but that the tendency of medical education and of medical practice is such as I have described, no one, I think, will be prepared to deny; and in the actual result, I will fearlessly declare my conviction, that I need not abate one iota of the gross sum of practical good, in comparison with the influence of any other calling or profession whatsoever; and that as medical science, in the present epoch, manifests in itself pre-eminently the still flourishing power and conditions of progression, it is in the same degree entitled to the esteem and reverence of society.

But, without doubt, if the profession is justified in claiming this rank, it is bound to shew its credentials, and prove that its members have the desire and disposition, as far as their circumstances permit, of fulfilling and realizing the idea that animates, or ought to animate, their pursuits. And it is now time that we turn to the examination of those institutions that were intended to nurture the hope of such a promise, and foster the development of the medical profession to its maturity and destination.

If we look back into the annals of the medical profession in this country, we shall find in the charters granted to the College of Physicians, and to the Barber Surgeons, that the first attempt to its more effectual incorporation was not unpromising, and began

with no inauspicious omen of future greatness. But it is no less true, that unfortunately at that time likewise were the Cadmean teeth sown, *mortalia semina dentes*, which were afterwards to start up in the armed forms of jealousy, rivalry, dissension, and separation, between the two important branches of physic and surgery. This might indeed have been prevented, had the College of Physicians acted up to their original charter; and had they continued to enforce its provisions, the right and duty of practising surgery being vested in them, the present College of Surgeons, or its humbler predecessor, the Corporation of Surgeons, would not probably have existed. And although it cannot be doubted that, sooner or later, the functions of the surgeon and physician, (at least in all large towns,) would have been exercised by different individuals, yet the well-educated surgeon would have been essentially a physician, fitted to be such by his education, and by virtue of his attainments admitted as a member or fellow of the College of Physicians; and the difference in the two classes of physicians and surgeons would have been only *practical*, whilst the absurdity of a division, where it is impossible to draw a boundary line, would have been obviated: there would have been, I say, *distinction* without *separation*. There would then have been a scheme laid of ordered unity, for which the elements must have their

rank assigned by a principle of co- and sub-ordination, in default of which the elements become hostile opponents. But, unfortunately, whatever the cause may have been, instead of this distinction, which not only permitted, but might have secured and perfected, a union, the College of Physicians resorted to an exclusive division from the surgeons; and we find them taking no other interest in the proceedings of the latter, than by instituting law processes against them, or the more summary mode of vindicating their supposed rights, by committing them to Newgate. And thus the circumstance of the distinction of function with a common object, instead of acting to fraternize and cement, became the deadly poison of jealousy and hatred. It was not, however, to be supposed, even earlier than the period alluded to, when the barbers were the appointed assistants of the physicians, that in the numerous class there should not arise some individuals who, inheriting natural talents, and prompted by curiosity, a desire of information, and the duties they had to perform, should not have profited by the opportunities which they possessed. And accordingly we find the surgeons, even under this humbler designation, increasing in knowledge and importance, becoming successively objects of jealousy to the physicians, their rivals, their opponents, and at length independent candidates for the public patronage and the favours of the

government. We thus readily trace the origin of the Corporation of Surgeons, and see the causes which led to the establishment of their college; and although we cannot but deplore the division, which in dividing has tended to weaken the profession, yet we are gratified in finding that surgery has received a momentum, which can no longer be resisted or retarded. Its course has been sure and unerring—its success gratifying and brilliant. Observation, experiment, and safe induction, unmixed with the showy hypotheses which have been the bane of the jealous sister-science, have raised surgery from a mechanical art to the rank of a liberal profession, and in close alliance with all that most ennobles the intellect of man. Hence, instead of abandoning it as a mere manual art to the hands of the ignorant, men of education, of talent, and of genius, have devoted themselves with serene enthusiasm to its study, and have found in it an ample sphere for the exertion and display of their high endowments, and an arena on which they can confidently anticipate the appropriate meed of their superior merit,—fame, fortune, and honourable distinction.

Circumstances similar to those which we have just detailed in tracing the history of surgery, present themselves in considering the establishment of the third branch of the profession, under the name of *General Practitioners*. Originally, under the name

of Apothecaries, as Druggists and Compounders in the service of the Physicians, they were soon, as a natural consequence, entrusted to administer the medicines, till gradually the needs of society led them to prescribe for those whose means did not enable them to command the services of a physician: and native talent, and the diffusion of knowledge afterwards entitled them to a confidence, which had been first reposed in them from necessity. By an easy transition, they became in towns, villages, and throughout the country, wherever, in short, higher aid could not be obtained, the substitutes for the physicians; and, naturally enough, from the necessities which their situation imposed, they conjoined with the practice of physic, that of *surgery* and *midwifery*. Their surgical functions brought them of course into connexion with the surgeons, as the surgeons in many instances arose, from very obvious causes, out of the class of general practitioners. But although thus every way connected in interest, and united in a common object with the higher branches of the profession, we find, as the advance of knowledge required a closer examination into the qualifications of the general practitioner, that in an inauspicious moment, the regulation of this department of the profession was entrusted, by Act of Parliament, to the trading company of Apothecaries, and thus a new and independent interest created in the profes-

sion. And although the society of apothecaries have, with exemplary zeal, directed their efforts to promote the better education and respectability of their members; yet it would be difficult to assign any sufficient reason for their selection to so important a trust; and we have to regret that it presents another instance of separation, where distinction without division might have been easy, and has become, like the separation of surgery from physic, another cause of disunion and weakness in the medical profession.

Thus, throughout the medical profession, in which there is essentially a community of interests and objects, instead of promoting and cementing a union of its different departments, which would have given strength to the higher, and an increase of respectability to the subordinate, their interests have been rendered independent, and conflicting to the great danger of its stability, and with the obvious tendency of crippling its energies and of lessening its sphere of utility.

But alas! we must, I fear, consider the separation of the different departments of the profession as a thing *jam consummatum*, and for the present at least irremediable; and we must now trace the operation of the same unfortunate cause in our own immediate department. We must endeavour to discover the foundation (if any) for those bitter complaints, and loudly trumpeted forth grievances, which, full of sound and

fury, threaten to shake to its foundations the College of Surgeons. We will, and if possible, dispassionately, enquire whether any change, and if a change, what change might be desirable and expedient in the present constitution of the College? And I believe that our object will be best effected, by first examining its purpose and intention, and then by determining whether its plan and administration be adequate to the same.

Colleges, societies, or institutes, for the protection and promotion of science or the fine arts, are one class of incorporations; the guilds, committees, companies, &c., of political, municipal, or commercial life, are altogether a different kind. To infer, therefore, that forms, practices, or regulations, which have been found expedient or necessary in the latter, might therefore be beneficially applied to the former, is, to say the least, a hasty presumption. On a fitting occasion, it might well repay the time of a thinking man to draw out the true character of this diversity of kind, and to place it in all the lights of which the subject is susceptible; but, for our present purpose, it will be sufficient to fix the attention on one essential and most characteristic point of difference. In all incorporations of common life, namely, the body or class of which the corporation is the supposed guardian and representative, is presumed as already existing, and complete. The functions and duties of the corporation are

strictly conservative ; the interests common to this body, whatever be the trade and calling, and whatever be the comparative number of the class, already exist as common to all the individuals, equally prized by all, and, from their palpable nature, such as may be rationally presumed to be equally understood by all. In deputing, therefore, a certain number of the whole class to watch over the common interests, and to preserve them from foreign encroachment, and from the injuries inflicted by the dishonest selfishness of unworthy associates, the electors can find easy and sufficient criteria in the wealth, extensive dealing, and fair character of the candidate or nominee. It may therefore be true, that in such institutions it is right and expedient that the few should be elected by the many ; at all events the elective scheme is perfectly congruous with the nature and design of the institute. Now, if, on the other hand, we look into the history of the different great learned or scientific colleges, academies, and institutes of civilised Europe ; or if we consider the ends and purposes of their institution ; we shall find that the paramount object has been to create a class not already existing, or to call forth a class existing only under the scum of such imperfections and deformations as necessarily intercepted every form of excellence that might be contained virtually therein. The purpose, I repeat, of the illustrious founders, has been

to take advantage of the fortunate accidents of genius, knowledge, and attainments, which the particular age and country had presented, and so to combine these, as that they should work productively as well as influentially on the mass successively subjected to their influence, so as, in the greatest possible degree, to assimilate it to themselves. They were the ferment that was to work in the production of a given body, and not merely to be choice specimens of products already existing. The colleges of learning and science may exercise various functions, and fulfil sundry purposes, which belong to the corporations of common life; but this is their peculiar character, this is that by which they have and can alone worthily retain the name of a learned or liberal incorporation—that their characteristic object is prospective, the promotion, the advancement of the science or art, in distinction from, though, thank God, in necessary union with, the interests of scientific men, as individuals. Their characteristic mode of action is to work by descent; they are to be the suns of the system to which they belong, and not mere mirrors, reflecting only the light that had been previously bestowed; and their characteristic form, from the very beginning, is by *appointment*—appointment by a higher, in contra-distinction from *election* by a supposed lower, or equal.

In every body nominated, whether by one, by few, or

by many, both the powers and the interests are determined by those of the nominators. The elector or nominator cannot delegate or confer what he does not himself possess, and with no show of modesty or propriety can he prescribe to another a higher or more comprehensive interest than that which he himself possesses, and by virtue of which he acquires his right of electing or nominating. To the directors of the East India Company, or the Governors of the Bank, the proprietors of India or Bank Stock, collectively, may well and suitably delegate the care of watching over the safety of their capital and the improvement of its yearly proceeds: but that the affairs shall be managed for the benefit of the nation at large, even to the occasional loss or detriment of the particular interest,—this it is the duty of an imperial Government or Legislature to watch over and enforce. And herein we may find, if I mistake not, an advantage and a happiness of no ordinary kind, in the circumstance under which colleges and institutes of science, learning, and the liberal arts have had their origin. If we look back to their history, we shall find the foundation and the first appointment of the members in the sovereign, or by some high authority, with the express sanction and confirmation of the sovereign power, that is of the power which, under whatever name, represents the majesty, and the permanent interests of the nation,—not only of the whole

community as at present existing, but of a nation that it is bound to contemplate its own immortality, and to prize with equal piety and solicitude its past heraldry and its reversionary rights, the honours of our ancestors and the prospects of our posterity. From a source like this, and from no lower or narrower, can be derived or conferred the authority and the duty of superintending any particular interest, or the interest of any particular class of men, for the *public* good, for the weal of the *nation*. Another peculiarity in the history of learned bodies in behoof of a profession, and which may be illustrated and exemplified in our own, is this, that the science is, in a certain sense, antecedent to the existence of the profession; such, I mean, as the profession is, and is universally assumed to be, when the practical art, from which the profession borrows its name, exists in connection with the science. Without anatomy, comparative anatomy, physiology, and pathology, chirurgery assuredly might exist and has existed; but without these the *profession* of surgeons would not exist, without these the surgeon could have no pretence to be fellow or member of a learned college. Now the consequence of this is, that the interests of the science, in subordination only to the general welfare, become the paramount object to which even the interests of the profession itself is, in a certain sense, subordinate; for the object of the original founders was

to make use of the existing science, in order gradually to create a profession that should hereafter act as an organic body for that science, a body which was to sustain, re-produce, and enlarge the life of science, by which it was governed and set in motion. Thus the science and the profession were to be alternately cause and effect, means and end. In the third place, follow the interests of the professors as individuals known to society, under the name and marks of the profession; the respectability, the improvement, the success of each and all of these, are important not only to the individuals themselves, but important to the character of the profession, which again is most important as a means to the growth and progress of the science, and this again of vital importance to the community at large—nay to the interests of all mankind. Appointed therefore by the highest authority, and exercising an influence, which evermore works descensively till as the product of its own subliming and assimilative action a correspondent ascension gradually takes place, a college thus framed perfects itself at length into a circle, ever working from above, yet ever returning on itself. Hence it is capable of embracing all the above-mentioned interests in perfect harmony and subordination: whereas in a guild or directory, chosen by the votes and major number of a body already formed, the last and lowest of these interests alone could be pretended or proposed for their efforts and their vigilance, by virtue of any

right derived from the electors. One other essential distinction remains, and cannot be passed unnoticed. The great purpose and object of a learned body is to confer honour, to delegate authority, to give an assurance to the community of competent skill, and that security for high and honourable conduct, which may be afforded by the experienced exclusion or excision from the ranks of the profession of every member proved unworthy, and by the sufficiency of the moral and scienstial criteria required, in order to memberships, in the first instance. Now, I think we may venture to assert, that the honours conferred by teachers and tutors, whose own competence thereto had been previously determined by the pupils, would be at least of a very equivocal kind.

Now let us apply this to the design and object of our own college. The designs and object are:—first, the securing the public, their fellow-subjects collectively, against the mischievous practice or practices of dishonest or ignorant pretenders; to provide for the public, criteria of competence, skill, and integrity, such as even the public shall be capable of distinguishing and applying; and this is a trust delegated to them in their first appointment from a higher power, which is itself the rightful representative of the collective interest of the community. Individuals, electors, can confer no trusts, but such as are vested in themselves.

Secondly, the promoting the cultivation of surgery

as a science ; and lastly, and as a necessary and most influenceive mean to both the former ends, the adoption of all feasible measures for upholding the dignity and respectability of the profession.

It proposes to itself to effect this, by prescribing to the candidates for admission a supposed adequate course of study, and by requiring an examination in proof, that the opportunities of instruction have been profited by ; and further, by exacting an oath, binding the party to *honourable professional conduct*. And these objects are aided by an extensive museum, a costly library, by lectures on human anatomy and surgery, and on comparative anatomy, and by the distribution of rewards and medals for prize-essays.

The administration of the affairs of the college is entrusted to a president and council, by virtue of a royal charter, according to the provisions of which the council appoint, that is, join with them as vacancies occur, those who are judged worthy of that honour, by prosecuting surgery as a science and practising it exclusively, and by irreproachable professional conduct. Whilst the great body of the members consist in part only of those who are eligible to the council, and of an overwhelming majority of surgeon-apothecaries or general practitioners : these, according to the provisions of the same charter, forming no commonalty as in corporate bodies with specific rights, and the surgeon-

apothecaries, according to bye-laws sanctioned by the charter, excluded from any participation in the management of the college, in consequence of their making surgery subsidiary and subordinate in their calling.

How far the college has answered the purposes for which it was intended? whether it has produced all the advantages that might have been expected? or again, whether any improvements might be suggested for its more efficient administration?—these are questions which are now to occupy us, and the answers to which are to form the results of our inquiry. That it has done much good, I cannot doubt, in producing a better educated and more efficient body of surgeons, in rendering them more anxious for professional character, and in raising them in the public estimation. But whilst the college possesses no power of preventing ignorant and unqualified persons from practising surgery; whilst men of bad character are permitted to enjoy the privilege of being associated with men of honour and respectability; and whilst advertising quacks are suffered to stand on the list of its members, it may be doubted whether its influence is such as might be wished; nor am I prepared to say, that the examination of candidates for admission, and the lectures illustrative of the museum, in point of extent, are such as may be deemed worthy of the advanced state of science.

But these, Sir, are notoriously not the causes of dissatisfaction, and if any such exist, they must be sought in other grounds. It may be perhaps a matter of surprise, though not to yourself, that I put the existence of discontent conditionally, and as if there were a doubt of its existence; and it would be idle to deny that grievances have been loudly complained of. But shall we look to the meetings which were held some years ago, or to the late pretexts for violence, turbulence, and riot in the theatre of the college, as proofs that the feelings of dissatisfaction are participated in by the great body of the members of the college, or by any considerable number of its respectable associates? On the contrary, it is notorious that the loud and the turbulent, as in most cases, form but a small, and that the least respectable part of our community; and that not only has there been no complaint nor remonstrance by any number, however small, of respectable members, in respect of any mal-practice or mal-administration of the college, but it is evident from the still swelling list of members, that the candidates for general practice are anxious to obtain the college diploma, and consider it an honour and a proof of their respectability to belong to the college. I will not, however, attempt to conceal that discontent and dissatisfaction exist, and that many of the members of the college who have not given a public expression of their feelings, perhaps

from fear of being identified with persons whose motives and objects they disapprove, still sufficiently show that they are by no means cordial friends of the establishment, and evince, in various ways, their dislike and jealousy of college influence. I believe it will not be difficult to discover the nature, and trace the causes of this more or less prevalent feeling. The general practitioners feel themselves,—in consequence of their ineligibility to places of influence, and from having no voice in the affairs of the College,—under a perpetual ban of humiliating disparity, in comparison with those who practice surgery exclusively; and I apprehend that the discontented generally would, (if they could divest themselves of the sense of propriety, the absence of which characterizes the turbulent few,) adopt the same language as the latter have done, and demand for themselves eligibility to the council, the power of electing members to the same, and the controul of the application of the funds. I would, however, gladly believe that I should be wrong in attributing this feeling to the surgeon-apothecaries generally, since I cannot ascribe it, if it exist, to any desire of increasing the respectability, or of maintaining the dignity of the surgical profession, which ought to be the aim of its members; but I am constrained to account for it, as I shall endeavour to shew, by a spirit of restless ambition, and the delusive lust of individual power. Few like-

wise, I trust, would, in making such a demand, expose themselves to the conviction of the gross absurdity of making a request, the obvious answer to which would be, that they became members of a college incorporated under a charter which neither acknowledges nor knows of any such rights, and that they subscribed the obligation to the bye-laws with a perfect knowledge of the same; nor would they, I would fain hope, evince the bad feeling, nay, the absence of all moral sense, in *falsely* attributing to the administrators of the affairs of the college, the withholding of privileges which they have not the power to grant, under the present constitution of the college, and which are even contrary to the direct prescription of the charter.

But it may be said that the charter might be remodelled, so as to meet, better than in its present form, the equitable claims of the members, by granting them the privileges of a commonalty, and that the sanction of royal or parliamentary authority might then be obtained, to give it the requisite form and validity. But surely, before such a step were taken, it is but reasonable that the defects of the present charter should be shewn, that the supposed grievances of the members should be fairly discussed and ascertained, and that the proposed changes should be shewn to be necessary or desirable. Let us try these questions!

Now the whole sum and substance of the defects

complained of in the present constitution of the college, are the irresponsibility of the council, and its power of nomination and appointment, or, as it has been falsely called, self-election; and the counterpart of grievances mooted, are the exclusion of the surgeon-apothecaries from all control of the funds to which they have largely contributed, and from all places of trust, as well as from any elective franchise.

We will first dispose of the question of the *irresponsibility* of the council, and assuming the fact, we will inquire, whether in the supposed absence of all wholesome check and control, they have abused the powers with which they have been entrusted?—But really I must ask, whether any definite charge of any misapplication of the funds, any self-appropriation of monies, beyond what is openly avowed in and permitted by the bye-laws, whether any corrupt grants, presents, or bribes have been received, any undue fees enacted, or whether there has been any instance of mal-administration, of undue influence, of any system of favoritism, or tyrannical severity against particular individuals,—I must ask, I say, whether any such charge has been distinctly supported, or even brought with any seeming probability against the government of the college?—I protest most sincerely that I know of none. I recollect, indeed, that a clamour was made some time ago, respecting regulations which excluded any except hos-

pital-surgeons from teaching anatomy, and certainly I did not think that the circumstance of being a hospital-surgeon, was the best test and criterion of an anatomical teacher's capability; though I thought then, as I still think, that it is most important, and an imperative duty, that the qualifications of teachers should be ascertained with more scrupulous care than the attainments of their pupils; but at any rate, the regulations respecting teachers, the attendance on provincial hospitals, &c., are *at present* so broad and inclusive, as to satisfy even those who would require more than what might be even liberally conceded. In short, then, I cannot find that the supposed irresponsibility of the council has led to any noticeable grievance. But is the council, according to the previous assumption, really irresponsible?—So far from it that, according to the laws of England, the king, who is the founder of all corporations, is constituted by law the visitor of the same, and he exercises this jurisdiction in the Court of King's Bench, where all misbehaviours of corporations are inquired into and redressed, and which, upon a proper complaint and application, can prevent and punish any injustice of which they may be found guilty. Thus, then, for the due administration of the affairs of the surgical profession, there do not appear to be any sufficient grounds for removing it from the hands in which it is placed.

And I proceed, then, to the remaining question, that of the power of nomination and appointment, vested in the council, and the consequent exclusion of surgeon-apothecaries from eligibility thereto, and from any elective franchise. And although this question might be fairly dismissed, by referring to the distinction already established between scientific institutions and trading corporations, in drawing which it has been shewn, that the former can be in no other way renewed and perpetuated than by taking up, receiving, and appointing those, whose qualifications and attainments fit them to carry on the original purpose of the institution, and that the very objects and intentions of such learned bodies would be frustrated by popular elections; yet if, admitting even the principle of election, we can shew that the admission of surgeon-apothecaries to the same privileges as those members of the College who practice surgery exclusively, would be neither just nor desirable, nor even practicable; and that this must be granted by any reasonable man, or even by any general practitioner not wholly blinded by his passions,—then I presume it will be admitted, that the question respecting such a change in the constitution of the College, may be suffered to fall to the ground. Now it is plain, and so acknowledged by the public, that the surgeon-apothecary derives a large share of his respectability and of his general profes-

sional character, and receives the confidence of his patients in consequence of his being associated with, and having received the diploma of the college; and that it not only is so, but that the general practitioner feels it himself, and is proportionally anxious to make it known that his qualifications for practising surgery have been examined into and approved by the college. It would be wonderful if it were otherwise, for the testimonial of his ability is guaranteed by the signatures of those whose names are well known to the public, as men whose knowledge and judgment are the best warrants and authorities for the truth of the certificate. Substitute for the names of men eminent in character those who, however much and deservedly prized within a narrow circle, are not known to the public at large, and the diploma will become little better than waste paper, or at any rate comparatively insignificant and worthless. And surely if the end aimed at in the selection of the council be that of exalting the dignity of the profession, that end will be best attained by selecting and raising those who are most distinguished and eminent as surgeons; whereas by putting on an equality those who practice surgery exclusively, and those who make surgery a subsidiary qualification, and making the latter eligible to all plans of honour and trust, the object of the institution of the college, which is that of promoting the science of sur-

gery, and not the interests of the practitioners, will be defeated, and the college would in all probability dwindle into a trading corporation: not to mention that I fear that as the general practitioners are in an overwhelming proportion to the surgeons, it might not improbably happen, that the latter would be excluded altogether. And I believe we may state it as a general truth, that by a system of equalization, the higher being brought to a level with the lower, this process of levelling would infallibly vulgarize the profession; whilst on the other hand, the more you honour that which is distinguished, the more that which is lower will be raised, partake of the honour, and derive an increase of its estimation with the public.

I trust, however, that my meaning will not be misunderstood, as if I meant to undervalue the attainments and talents of general practitioners, since I am only speaking of their share in the profession of surgery as being necessarily lower, because forming really a subordinate part of their practice, in comparison with those who practice surgery exclusively. I cheerfully admit that the general practitioners number amongst them men most estimable in talent and character, yet they themselves will allow that the avocations and pursuits of the great body of their members, do not exactly fit them for the guardians of professional honour, and the promoters of science; and without wishing

even to insinuate that those who devote themselves exclusively to surgery, are men of more integrity or more talent, yet I cannot but believe that their habits as teachers, as surgeons of hospitals, their residence in London, and intercourse with those most influential in rank and talent, render it more likely that they should take enlarged views; that they should pursue professional studies with a view to the cultivation of science, and thus liberalising the profession, free it from the petty interests of a trade; that they should be awake to the wants of the profession, and supply them without jealousy or partiality; in short, that both their habits and their local advantages best fit them for constituting the governing council of the surgical department of the profession. It does appear, therefore, that it is not without justice, nor without consulting their own best interests, as professional men, that surgeon-apothecaries are, in the *present* state of the profession, excluded from forming a part of the executive administration of the affairs of the college.

But these considerations are no doubt not conclusive respecting the propriety of granting to the general practitioners the elective franchise: for though it were admitted that they should not form part of the council, still it may be urged, that they might have a voice in electing the members of that council. But

waiving for the moment the principle, that popular elections are quite inconsistent with the design and intention of a college, and granting that the council of the college should be elected by the general body of surgeon-apothecaries, yet, who, I would ask, would virtually exercise the elective franchise? I know of no other answer to this question than that they would be the *London practitioners*, since it is impossible that the country practitioners, the surgeons of the army and navy, or those resident in our colonies, though equally interested in the welfare of the profession, could attend the elections. And I need not say how unjust any arrangement of this kind would be to those members, and that thus, in pretending to make the elections popular, and give influence to the majority, you would, in fact, give power to the few at the expense of the many: and thus the measure would effectually defeat itself.

But in thus adverting to the practitioners in the country, I cannot pass over the fact, that there is a very important distinction to be made between many, or most of these, and the London practitioners. In the country, necessarily, a great deal more of surgical practice devolves upon the general practitioner than in London; and many being surgeons of county hospitals and infirmaries, and residing in large towns, like Manchester, Leeds, Birmingham, Liverpool, (names

which bring to my recollection men most eminent in practice, and sedulous cultivators of their profession as a science,) there would be found amongst them most desirable acquisitions, and men who would form bright ornaments to the college council: were it not obvious, that to the availing ourselves of their services, their residence in London is an indispensable condition. On the other hand, the London general practitioners, seldom called on in pure surgical cases, or acting only in a subordinate capacity, are therefore, of the whole body, those least fitted to direct and controul the interests of surgical practice and science.

If it were necessary to multiply the arguments against popular elections, such might easily be found in the endless turmoil of intrigue and faction, to which open elections would give rise; and I very much doubt whether any distinguished individual, whose election would be desirable, would accept an office which would tend to impose upon him the conditions of being the delegate of his constituents, instead of the representative of the scientific interests of the profession; with the probability of being associated with those who had been elevated by electioneering arts, rather than by their merits; and with the consciousness that the responsibility attached to his election was divided among so vast a number, as to be an evanescent quantity in each elector; and that the members of the

council, on whom he had been thus intruded as an associate, would be fairly entitled to disclaim any portion of that responsibility.

But enough, I trust, has been said, to shew that nothing more than a sound view of the advantages which the general practitioner actually enjoys, and of the grievances under which he labours, with the true nature and origin of both, is requisite to convince him, that it is neither his interest, nor ought to be his wish, that general practitioners, as such, should be elevated into the council, or that he himself should possess, individually, that minimum of influence which a single vote would confer upon him; and that it is much more probable that the council, with the eyes of the profession upon them, and offering, though a silent, yet an efficient controul, will elect into their body those most deserving of that honour, than that the general body of practitioners would, without any such obligation or inducement, exercise the elective franchise with a view solely to the interests and good of the profession. And if any argument were wanting, I would refer to the late elections to the council, and I would ask whether the results of any open elections would have been characterised by more liberality, discernment, or honesty? Let any man, in short, soberly ask himself whether, if the present members of the council are not fitted for their office, whom he could

by any possibility substitute for them? And if he should in vain seek for the names of any such, then I think he will agree with me, that the power of appointment cannot be considered a grievance, or form the ground for an alteration of the charter; nay, that the substitution of election for appointment would be utterly subversive of the objects of the college, and the interests of those who, having been imposed upon by the unmeaning term, self-election, claim a supposed right, that neither exists in the present charter, nor could be compatible with the permanent interests of a college, an institution for the promotion of science, or of the profession.

If, then, I have argued with any effect, I apprehend the result of our enquiry will be, that the constitution of the college is, in all essential circumstances, adequate to the purposes for which it was intended: with some exceptions, doubtless, respecting the extent of its jurisdiction, and such improvements in its regulations as the improved state of the profession may require. But still I fear that my arguments, even if they were stronger than they are, would not prevail with, and would fail in convincing, those who desire a larger share of influence and power; and so far I might be disposed to go with them,—not perhaps in agreeing with them as to the remedy, but in deploring as an evil, in the present constitution of the college, the *want of*

sympathy or communion between the members at large and the governing body. And I hold it to be a legitimate object of enquiry, whether there are any means of producing (consistently with the design of the institution and the welfare of the profession) a greater confidence in the college, a closer union of its members, and a probable extension of its influence and benefits? And though I must still contend that, having sought and accepted the distinction of membership under a perfect knowledge of the forms and bye-laws of the college, the general practitioner has no equitable grounds of complaint; yet as exclusion, even where it is not reasonable, is too natural a source of dissatisfaction, it might perhaps be possible so to modify the charter, as to satisfy the excluded, and thereby strengthen the college without interfering with the principle of its foundation.

It is in this spirit, then, and solely with this view, that I would propose for consideration the following modifications of the charter, in regulating the administration of the affairs, and suggestions for the improvement of the regulations of the College of Surgeons.

1. That the Government of the College should be vested in a *President*, a *Supreme Council*, and a *General Council*.
2. That the Supreme Council should consist of the President and twenty members, who should have the entire management of the affairs of the College, and the conducting of examinations.

3. That the members of the Supreme Council should appoint its own members from the General Council, and consist only of those who do not practise midwifery, nor dispense medicines.

4. That the General Council should consist of the members of the Supreme Council, and of forty additional members, twenty of whom should be under the obligation not to practise midwifery nor dispense medicines, and the remaining twenty of general practitioners—making the total number of the General Council *sixty-one*.

5. That the General Council should appoint its own members.

6. That the General Council should choose auditors of the accounts, and might suggest to the Supreme Council at their meetings any measures for the benefit of the profession. And further, that all public acts of the Supreme Council should be communicated to them.

7. That the eligibility of that class of members of the General Council, under the obligation of not practising midwifery, nor dispensing medicines, should be further determined by proofs of a longer course of study, and of superior capability, evinced by severer examinations. 1. On entering the profession, they should produce certificates at the College of having been instructed and undergone examinations in *Latin, Greek, Mathematics, and Logic*. 2. That they should have devoted at least *five years* to the study of their profession, and produce certificates of having attended lectures on anatomy, physiology, chemistry, materia medica, botany, practice of medicine, medical jurisprudence, comparative anatomy, midwifery, and that during that time they have attended a public hospital. 3. That they undergo three distinct examinations; the first on anatomy and physiology, the second on pathology and therapeutics, and the third on surgery: and that they write *a thesis* on a given subject, in a closed chamber, without the aid of books.

8. That there should be a class of Honorary Members of the General Council, men of distinguished merit in provincial towns, the army, navy, or colonies.

9. That general practitioners who have given up the practice of midwifery and the dispensing of medicines, should be eligible to the first class of the General Council.

10. That teachers of anatomy and surgery should not only have undergone the examinations of the first class, but should have given *public proofs* of their capability to teach by delivering a lecture, the preparation for which should not occupy more than twenty minutes.

11. That effectual means should be taken of enforcing the duties of masters to their apprentices or articed students, by a prescribed and definite course of instruction.

12. In the provisions of a new Charter, it should be imperative that no one should be allowed to practice surgery who was not a member of the College. Since without this check upon ignorance and empiricism, it is impossible that the College can exercise one of its most important functions—that of protecting the public from the arts and practices of dishonest, unskilful, and incompetent pretenders.

13. And lastly, that the Charter should distinctly define, express, and declare, the power of expelling all those who, by dishonourable practices, have rendered themselves unworthy the character of members of a liberal profession, whether it be by the use of secret remedies, by advertizing, by partnerships in trading concerns, by calumnious reports of their professional brethren, breaches of professional confidence, or whatever else may be considered derogatory to a professional character.

In addition, however, to all this, I would have the college, with a bolder zeal, promote science from its ample resources, especially by extended courses of lec-

tures on anatomy, physiology, and pathology; on comparative anatomy, and on surgery—lectures, which might do justice to Mr. Hunter's museum, and prove worthy of the college, and of the present advanced state of science.

Nor should I think the plan complete without the publication of *transactions*: and I would suggest that these should not only consist of voluntary contributions, but that each member of the general council should, on his admission, be obliged to furnish a paper; that they should moreover contain digested *reports* from the hospitals, both in town and in the country; and that a foreign secretary should be appointed, who might correspond with the hospitals and scientific institutions for the promotion of surgery on the continent, and in America, and maintain a communication with medical men throughout the globe.

If the college shall do all this, I think it cannot fail in healing all differences with its members, or if it have opponents, in shaming them into silence; and in raising itself in the public estimation, it will deserve the gratitude of the public and of the profession. And I do not doubt that as, in order to carry these beneficent objects into effect, a modification of the charter would be necessary, that all the respectable members, in other words, the majority and great body of the profession, would cheerfully join with the college in *petitioning*

for this enlarged charter, which would secure the interests of science, the progressive improvement of the profession, and hope for all candidates for its privileges and honors.

But if such a petition were presented to me as a minister of state, appointed to consider the provisions of such a charter, I should pause before I granted it. For I should be led to reflect on the state of the whole medical profession, and considering its vital importance to the state, its objects and purposes, I should come to the conclusion, that however desirable it may be for its practical administration, that its departments should be distinguished, yet that from the unity of its character and purposes, they could not be divided. Instead, therefore, of any partial alteration or regulation, I should advise that ONE faculty of medicine be constituted, with such powers and administrative regulations as would render it efficient in promoting the science, and controlling the practice of medicine in all its branches, as a great interest of the state. Of this faculty, the colleges of physicians and surgeons, as representing the great leading distinctions of the profession, would naturally form the co-ordinates. In order to the admission of candidates to either, it might be required that they should have passed through the same course of study, which should be upon the most extended plan of a liberal and professional education,

and that the examinations for ascertaining their proficiency, should be conducted by both ; and that then from the candidate expressing his wish to enrol himself in either, as intending to devote himself practically to one or other branch pre-eminently, whether medicine or surgery, such additional proofs of competency might be required, as might shew that he was entitled to the desired privilege. And thus the practical distinction between medicine and surgery would be acknowledged, whilst their scientific unity would be preserved.

Out of both would then naturally arise a third department, partaking of the character of each,—that of midwifery. This might have its separate board or institute, and the candidates for admission having the same basis of general education, would follow a similar rule for the enrolment of its members, by requiring a special skill and knowledge in this department of the profession.

Next, as conjoining the functions of all three, the class of general practitioners would find its place : their institute forming a department of the faculty, which would in like manner regulate the admission of candidates, their education and qualifications, and watch over the affairs of their particular branch of the profession.

Lastly, from the colleges or institutes of medicine,

surgery, midwifery, and general practice, might be formed a medical convocation, for the purpose of deliberating on all matters relating to the profession at large. And thus a body would be constituted in the service of the state, with whom the government might consult, and to whom the country would look for advice and assistance in all matters appertaining to the health of the community, and to whom all questions relating to epidemics, laws of quarantine, the health of the army and navy, the building of hospitals and prisons, punishments, drainage, sewers, nuisances,—in fine, all questions of medical jurisprudence and police might be referred. And to a faculty of medicine so constituted, might be entrusted the government and supervision of the practical departments of the profession, and that not only should none practice medicine, surgery, or midwifery, without their sanction, but that all keepers of houses of reception for lunatics, all druggists and chemists, dentists, cuppers, should be obliged to have their licence for their several callings. And if the government would render the benefit complete and national, they would root up the detestable upas-tree of quack and patent medicines. And thus, Sir, we might at length see a profession flourishing in this country, the motto of which would be *DISTINCTION without SEPARATION*.

But withal it is impossible that the members of the medical profession should have that due weight in

society, and occupy the place and rank to which the science entitles them, unless their qualifications and conduct are consonant with the demands of the liberal profession, of which they claim the privileges, unless they shew, by the whole tone and tenour of their conduct, that they are fully actuated by its spirit. The character of the professional man is not a mask, or cloak, under which ignorance, vulgarity, meanness and selfishness, may play the part and assume the port of knowledge and virtue; but as the medical practitioner cannot hope to serve his interests even, except by seeming to be what he ought to be, so he cannot expect to preserve and maintain his character, unless he be what he seems. The medical man who aims at the performance of those duties which his profession requires, will, I need not say, possess himself of those requisites of knowledge which are essential to the practice of his profession, since no honest man would be without them; but he will aspire to something more,—he will seek to combine them with those knowledges, and that love of truth for its own sake, which tend to liberalise the profession, and in liberalising it, to raise it from the narrow aims and interests of a trade, and to secure it from degenerating into hollow routine, or dishonest quackery. As he will be above the ordinary vices, so likewise he will guard against the faults that insensibly blunt all finer sense of honour,

and end in the utter corruption of the moral character. In the neighbourhood, town, or parish, where he may have fixed his residence, he will avoid the vulgar ambition of distinguishing himself in parish squabbles and factious politics. Towards his patients he will betray no sordid selfishness; he will take no advantage of that weakness which disease often produces on the mind as well as on the body; he will be kind, without sycophancy or sentimentality; firm, without harshness; cheerful, without coarseness; the confidence reposed in him will be sacred; and in all things he will treat his patients with a respect and consideration so expressed, as to imply his habitual expectation of the same towards himself. Towards his professional brethren, knowing the fallibility of his own judgment, he will be lenient where error may appear; slow to condemn, and ready to praise where praise is due, he will cheerfully join and co-operate with them; and all gossipping, scandal, and detraction, he will utterly abhor. In short, he will be a gentleman in his conduct, manners and feelings; and next to the approval of his own conscience, he will prize the honour of his profession, as formed by a body of men similarly actuated; and it is deeply to be deplored, that in the absence of the wholesome checks of associations and meetings on private conduct and character, and with the baneful influences of opposition and rivalry, of conflicting interests and of weekly

gossip, all *esprit de corps* in our profession seems to be dwindling and disappearing: and the evil consequences of which have been so deeply impressed, that there have been moments in which I have been tempted to wish that the college should appoint censors, whose duty it might be to take cognizance of, and report on, any irregularities in professional conduct, in order that the unworthy members might be expelled from the profession which they had tended to disgrace.

Thus I conclude; and as, in the foregoing pages, no offence has been intended, so I trust that I shall have given no cause of offence to any one whose good opinion it must be my duty, no less than my wish to preserve.

I remain, Sir,

With every feeling of respect,

Your obedient servant,

JOSEPH HENRY GREEN.

I have been so deeply impressed
 with the college should appoint someone whose duty
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 more than my duty to bear (that is) with re-
 spect to the university.

With every feeling of respect

Your obedient servant,

JOHN HENRY GREEN.

*Editor of the
Edin Med. Jour*

SEPARATION WITHOUT DISSENSION.

OBSERVATIONS

ADDRESSED TO

GENERAL PRACTITIONERS

ON THE BEST MEANS OF

MAINTAINING THEIR PRIVILEGES AND RESPECTABILITY.

BY

WILLIAM COOKE,

MEMBER OF THE ROYAL COLLEGE OF SURGEONS, SECRETARY TO THE HUNTERIAN
SOCIETY, EDITOR OF AN ABRIDGMENT OF MORGAGNI, &c. &c.

Nam, tua res agitur paries cum proximus ardet.—HOR.

*

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THE PRACTICE WITHOUT DISCUSSION

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GENERAL PRACTITIONERS

MAINTAINING THE PRACTICE AND THE QUALITY

BY
WILLIAM W. WOOD

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PREFACE.

THE following observations formed the sequel of a pamphlet issued a few years ago on a subject of temporary interest. A few copies have remained in my possession, and as there never was a more critical period in the history of the General Practitioner than the present, I have ventured to detach this part of the work in the hope that its circulation will be beneficial. The General Practitioner, before he obtains authority to practise, is now required to present evidence of a liberal education, and must produce testimonials of a very extended process of scientific and professional instruction. This, however, alone will not secure to him the public confidence. The habits of the young medical man are more closely scrutinized than those of other young men entering upon life, and confidence will be long withheld from him—especially in the department that identifies him so closely with family affairs—if his deportment be not in accordance with his professional acquirement, and not tending to the progressive increase of his knowledge.

Various schemes have been proposed to place the General Practitioner in a new position as it regards other departments of the faculty. Some of these plans do not comport with the dignity of a liberal and enlightened profession. They involve means which impede rather than promote success—and which, were they to prove successful, would leave a blot on the reputation for which the advantages obtained would afford no adequate equivalent.

One chimerical suggestion—of uniting the different orders of the profession into one class—with, indeed, some broad lines of division—has the sanction of a name that gives weight to the proposition;—and it is sent forth endorsed with a title well adapted to secure its acceptance. The author may have the credit of good intention, but as it bears on the General Practitioner (whose mental resources he does not duly appreciate) we are reminded of the trite anecdote of the man, who, being officious and troublesome to a commander and his crew during a tempest, was directed to hold a rope with all his might lest the vessel should be

lost. The officers were relieved from the man's interference, and his self-importance was gratified, whilst in reality he had stood a cipher. With such differences of opinion as exist in the higher as well as lower departments, we are compelled to say with Horace,

——— ut nec pes, nec caput uni
Reddatur formæ.

It would greatly derogate from the interests of General Practitioners if they accepted of any concession (and some is undoubtedly due to them) that did not recognize an elevation of rank commensurate with their elevation of professional character. I am no advocate of a levelling system, and yet I think it both conducive to the advancement of medical philosophy, and congenial with the spirit of the times, that a door should be open to talent though it may have germinated among the rubbish of pharmacy and obstetricy.

It must, however, be remembered that as it relates to the public, and this is by far the most important consideration, legislation will effect little or nothing except as it affords a security against incompetence. The practical application of knowledge and skill, so as to ensure confidence—to establish reputation—and to diffuse the inestimable blessings of the healing art, must rest with ourselves.

The following pages were hastily written, under a powerful conviction that if the impetus given to the qualification of the General Practitioner be not expended in fruitless disputation—or diverted by jealousy—or neutralized by habits that degrade professional men—he will continue to hold a station in society of immense usefulness, and of high esteem.

I feel it only necessary to add, with respect to the mode of remuneration alluded to, (page 84) that I have long since *wholly* abandoned the practice of compensation by medicine, and consider its abandonment essential to the stability of practitioners, who may feel it right, both on their own account and for the welfare of the sick, to dispense as well as to prescribe.

39, TRINITY SQUARE,
August 12, 1831.

ON GENERAL PRACTICE.

IN offering a few remarks on this subject, I shall take it for granted, whatever might be said in favor of the division of labour, that it is for the good of society that medicine, surgery, and midwifery, should continue to be practised in combination.

Among the respective departments of medical labour, those who embrace these united objects, are far more numerous than those who fulfil the duties of an individual line; and I think it would not be difficult to prove, viewing their more extended connexion with society, that they have the means of being as pre-eminent in utility as they exceed in number. In making this bold assertion, it is pre-supposed that all the measures placed at their command for acquiring competency of knowledge, are legitimately used; for if they are not, the argument cannot be sustained. If there be inadequacy, the extent of the relation to society proportionably increases the evil. The individual who engages in medical practice, undertakes an office of the utmost responsibility—involving interests the most complicated and momentous. His duties do not

merely consist in the treatment of disease, though this, perhaps, may be viewed as his first and highest duty. He has often to sooth and satisfy anxiety where no disease exists. He should be moderately well acquainted with mental and moral philosophy; for many circumstances under which he is appealed to, call upon him for the exercise of some practical wisdom in the management of phenomena little subject to medical treatment. He is often referred to as a public officer, to decide points of vast importance in relation to individuals or to the community; and in the discharge of his private and public functions, it is no small advantage for him to be capable of perspicuous representation. It is not every man, however eminent his attainments in knowledge may be, whose powers of description are clear enough to satisfy an intelligent mind, or to bear the scrutiny of a legal court. Then, too, surgery presents us with an appalling catalogue of diseases and injuries which demand the most prompt and skilful interposition:—and, regular as generally are the operations of nature, the engagements of an accoucheur demand extensive knowledge, unwearied patience, and tender sympathy—combined with great decision of character, and the utmost degree of self-possession. We need not be discouraged, however, by this formidable

though not overdrawn representation ; for extensive as the qualifications of an efficient General Practitioner must be, it is possible for him, in each department, to attain an eminence well deserving of public confidence. It must, however, be evident that the gaining of this competency demands no common exertion, and the period has arrived when it is incumbent on those who embrace the general objects of medical and surgical practice, to consider how they are likely to stand in the estimation of a community rapidly advancing in intellectual attainment. People are not now contented with acquiring enlarged views of their own occupations, but whilst bestowing unprecedented care in the cultivation of their peculiar allotments, they are disposed to glance on their neighbours', and many have become very expert in detecting their imperfections. The medical, in common with other sciences, has attracted popular attention ; and I hope the scrutiny to which we are submitted will have a tendency to eradicate all dishonorable practices, to which some have resorted as a substitute for patient study and persevering industry. Appealing to the restless passion for novelty, which still exerts so much influence on the public, taking unfair advantage of their inability to appreciate suggestions for the relief of human suffering, and finding a *pabulum*

in vulgar credulity, many new and useless schemes have been promulgated, withdrawing, for a while, the confidence of the afflicted from their only safe resource for succour. However, allowing these evils their greatest weight, it may justly be maintained that there never was a period when the members of the medical profession were actuated by better sentiments than in the present day. The regulations which have been adopted by the Court of the Royal College of Surgeons, and by that of the Society of Apothecaries, as to the education and qualification of their respective members, have not only secured greater extent of elementary knowledge, but have inspired the surgeon and apothecary with unprecedented zeal for the cultivation of the art; and following up their early advantages with a course of subsequent observation and research, much greater efficiency for duty has been obtained. But, notwithstanding these auspicious circumstances, there are points regarding the general practitioner which demand his most serious consideration. The number of individuals engaged in medical pursuits, as, indeed, in those of other professions, has of late very rapidly increased. Without the least intention to impute unworthy motives to men occupied in other departments, the general practitioner cannot be insensible to the encroachments

likely to be made upon him by the overwhelming augmentation of physicians and pure surgeons. Every man, who engages in professional duty, reasonably expects to obtain a respectable subsistence: and where the ground had been pretty fully occupied before, we cannot wonder if the physician or surgeon be tempted to descend a little both in fees and habits from the high rank and dignified respectability of his established cotemporaries; so that by gleaning from the upper classes of society, and by yielding to the condition of the lower, he gradually insinuates himself into practice. This, however, is a course which cannot fail to engender some hostile feelings among his brethren, and will ultimately militate against the general interests of the profession, without conducing to the good of the community.* Advancing intelligence and efficiency in one class, and of growing numbers in both, will necessarily tend, without much caution, to excite a spirit of rivalry which will detract from the estimation in which they are both held by a sagacious and discerning people. No one

* We have heard that there are physicians and surgeons who not only prescribe and attend for half the ordinary fees, but who, whilst professing to despise the pharmaceutical art, enter into a compact with a neighbouring chemist and druggist and participate in his profits. This, however, is a subterfuge to which an ingenuous mind will not resort.

can entertain higher respect for the erudition and talent of both physicians and surgeons than myself, nor has any one greater occasion to attest the generosity of their deportment towards the general practitioner. That exceptions should exist amidst the imperfections of human nature ought not to surprise us ; but if those exceptions are numerous, it conduces to the good of the whole to bring them under animadversion.

The physician and surgeon have no warrant when called in consultation with brethren inferior to themselves, perhaps, only in rank, to maintain an air of supercilious and studied distance—nor by any inuendo to impair the confidence in the family attendant—nor by any extraneous attentions to aim to supplant him, any more than the general practitioner would be justified in an effort to withhold from gentlemen, whose aid he has solicited, the award which may be fairly due to the exercise of superior skill. It does not, however, fall beneath the intention of the present address, to intermeddle with any interests except those of the surgeon-apothecary ; nevertheless they are so interwoven with the other departments in practice, that it was impossible wholly to disunite them.

Sometimes we are embarrassed in appreciating the distinctions which the various titles

we sustain convey, and of which distinctions some amongst us are exceedingly tenacious. We are often at a loss in ascertaining where to draw the line between the physician and surgeon, and between the *pure* and *medical* surgeon; but the public do not encounter equal difficulty. A man feels that he has a malady, with the name and nature of which he is wholly unacquainted. He hears of, or knows an individual who stands in good repute, but whether he be a physician or surgeon, whether he be a fellow or a licentiate of London, or a diplomatist of Aberdeen, gives him no concern, (and certainly need give him none) so that he find a remedy for his disease. He perceives too, that his disregard of titles does not in the least inconvenience him, for, if cutting instruments are not required, few physicians object to undertaking the management of a surgical case. And I believe it is undeniable, that by far the majority of cases, which, in private engagements, pass under the observation of the pure surgeon, demand the adoption of medical treatment; so that the principal difference between him and the general practitioner is, that the latter dispenses his own medicine, and usually acts as an accoucheur.

If the surgeon-apothecary associate the business of a chemist and druggist with his medical occupation, his extra-professional

machinery becomes so complicated as to occasion such a diversion of the mind from professional studies as must inevitably detract from his efficiency. Should he also conjoin the dispensing of quack - medicine and perfumery, a circumstance not very unfrequently observed, he is not only disabled for the duties which he avows himself competent to undertake, but he allows an alienation of professional and honorable feeling. Such an individual can neither expect to stand well in the estimation of his brethren, nor to rise high in the confidence of his intelligent neighbours.

Conceding every thing that is due to the general learning and distinguished ability of physicians and surgeons, yet if we estimate the value of any occupation according to its adaptation to the ordinary wants of mankind, it must be admitted that the general practitioner has the means of the most extended usefulness, provided he employ those means in the most effectual manner.

No man, however, can expect to rise above mediocrity who does not devote all his energies to the duties of his profession. Occasional seasons of recreation will not be incompatible with the surrender of himself to pursuits or to trains of thought which either directly or mediately bear on the alleviation of human suffering. Nothing can afford, to a well-

disposed mind, so powerful an incentive to exertion, as the due impression of the extent of its responsibility, and a full consciousness of its opportunities of doing good. I have already adverted, though in very inadequate terms, to the extent of our responsibility, from which a mind duly susceptible would shrink, were it not supported by the assurance that no means had been wilfully neglected of gaining all the knowledge which could be put in requisition.

Numerous benefits undoubtedly arise from the division of labour, but these advantages are not without their attendant disadvantages; and this is peculiarly the case in the practice of medicine. In demonstrating this, we need only advert to the constitutional origin of topical diseases; and the reverse of this, the local origin of many constitutional derangements. Affections strictly surgical so often merge into disorders which demand medical treatment, that it is impossible wholly to disjoin them, and to define the termination of one and the commencement of the other. How often are physicians called to witness attacks which demand the immediate use of the lancet, but before it can be employed a surgeon must be summoned, often at considerable loss of time! Many serious diseases are allowed to go on without efficient management, because the

examination requisite to disclose the precise condition of the patient was rather of a surgical than of a medical nature! If we can but secure a clear understanding—deep and extensive information of the general principles of medical and surgical science—and accuracy of discrimination, it will not detract from the efficiency of the executive, that it centre in the same person, that individual having every expedient for the relief of the sufferer at his immediate command. Still the accountability he undertakes is a very serious one, and were it not that the same fundamental principles must guide us in each department; the individual who combines the whole, would require an unattainable comprehensiveness and versatility of talent.

It is, however, an encouraging fact, that the possibility of obtaining great distinction, even in general practice, has been occasionally demonstrated. A conscientious man will not satisfy himself, in the performance of his important duties, that in the season of emergency he can solicit the aid of others, by whose greater skill his own deficiencies might be supplied. In general, the period when disease is most under control is its early development; and if our treatment be inefficient then, the mischief might be irreparable. The practitioner, indeed, may shield himself from censure, but

the mind that can be contented with escaping reproach, when by his ignorance he has been accessory to the mutilation, or irremediable suffering, or death of a fellow creature, must be destitute of humane and honorable feeling. It is true that, with every possible acquirement and after the most enlarged experience, errors of judgment will be sometimes committed; but the want of absolute certainty in the application of the mental powers forms no pretext or apology for the great culpability of neglecting their cultivation.

We ought not to overlook the fact, that, in departments requiring operations of a very delicate nature, great manual dexterity has been acquired by persons who have devoted themselves rather closely to that particular branch; but it has not generally resulted that the science itself has been promoted by exclusive application of the mind. Where considerable improvements have taken place, they have usually been effected by men who may have cultivated one branch in connexion with attentive observation and extensive practice in other departments of labour, or who had previously allowed themselves to range freely through the whole field of medical and surgical science.

The comparison of the respective claims of different classes of men to public regard would

involve us in a discussion equally unpleasant and unprofitable. Our physicians and surgeons are deserving of the highest respect, and the general practitioner would very properly retire from competition with them if it were only on the ground of their higher rank. Sometimes, however, this courteousness has been carried too far, and has tended to disparage themselves in the estimation of the public. The deference due to the opinions of superior and able men must be distinguished from the abject submission sometimes demanded where there exists no other than a nominal superiority. Genuine talent is unassuming, and men of the highest cultivation and discernment are usually found the most affable and kind in their counsels. On various points of frequent occurrence, the general practitioner will gladly avail himself of a second opinion; and he certainly cannot do better than solicit the aid of an able physician or hospital surgeon, according to the nature of the case. In many parts of the country a general practitioner, a man of intelligence and of ample experience, often becomes the consulting physician and surgeon to a wide circle of his brethren; and I believe is as little disposed to take undue advantage of the confidence reposed in him as the most enlightened men of higher rank. We should do honor to ourselves, and raise

our department of labour in public estimation, by cherishing mutual confidence more extensively. Physicians themselves often derive satisfaction from consultation with their brethren; and the assurance that the most efficient measures were adopted to avert the consequences of disease, is no slight relief to the feelings of surviving friends. Whatever might be the consequence to ourselves, the peculiarly interesting trust reposed in us demands the most inflexible regard to integrity and candour in the performance of our duties. Nothing is more unworthy of a professional man than to exaggerate the danger attendant on disease, for the purpose of ensuring additional merit in relieving it; nor is any thing more unmanly than to disguise danger, from an apprehension that another practitioner would be consulted. The delinquency in both cases may be the same, though the consequences in the latter instance, would be by far the most lamentable.

There is an ostentation about the attendance of two medical men, as well as a partial exoneration from responsibility, to which the conduct of some individuals rather indicates a fondness; but if a general practitioner appear habitually to distrust himself, he must not wonder if he be distrusted by others. In deference, too, to the feelings of patients and their friends, it is desirable to avoid needless

attendance, for when multiplied, it never fails to excite apprehensions of considerable peril which, probably, might have no existence. However, the evils arising from this source are much less deplorable than those which originate in neglecting that advice, which, if it had not really been beneficial to the patient, might have soothed the agony of deeply afflicted survivors. We have known individuals who have rather exulted in not calling in physicians, except when the fate of the patient was inevitable:—the sentiment conveyed by such expressions, shows a dereliction of principle towards the patient, and is extremely unjust towards the physician. If any discredit attend the issue, he participates in it—or the whole of the odium is cast upon him—though he was withheld from the opportunity of averting the catastrophe.

Whilst considering the important influence exerted on the mind of the patient, by the professional attendance, we must not be indifferent to the effects produced by the habits of the individual practitioner. Were I to dwell on the inconsiderateness, indeed it might be justly termed cruelty, of chiefly occupying the time of a visit, in a case of serious indisposition, in extraneous conversation, it would be deemed trifling and superfluous; and yet from observations frequently made by patients, I doubt

whether it does not occur sufficiently often to render it deserving of exposure and reprobation. The frequency of visits has some influence on the comfort and recovery of the sick. Whilst they should be sufficiently frequent to meet every real exigency, and to satisfy the solicitude of friends ; yet, if unnecessarily repeated, they excite the expectation of a crisis, for which there might be no warrant. I have known anxiety and watchfulness kept up in this way, by an over-solicitous attendant, to a pitch of intensity for which there was not the least occasion.

The individual who enters on general practice, certainly engages in no sinecure ; and if he estimate correctly the seriousness of the obligations he undertakes, he will feel it incumbent upon him to pursue a course of unwearied assiduity. But, if he have had the advantage of a good early education—if he have spent his years of professional initiation under favorable guidance, and have completed his preliminary studies creditably — if he embark in practice with ardent feelings, and cultivate the habit of close observation and well-directed study, he undoubtedly has a fair opportunity of becoming most extensively useful.

It cannot be denied that many and great advantages, of a collateral nature, are derived from collegiate studies ; nevertheless, whilst

explicitly admitting this, I affirm that we limit our energies unwarrantably, and do ourselves injustice, if we entertain the notion that the highest acquisitions of professional knowledge are not attainable to men who walk in the more humble ranks. This observation might be confirmed by mentioning the names of many who have been in general practice, but who now do honor to a more elevated order. It has been illiberally insinuated, that an individual who had been accustomed to pharmaceutical duties, could not directly emerge from his low occupations, without carrying with him some traits of a grovelling nature; but the examples just alluded to, falsify and refute the imputation. I would not willingly indulge in recrimination, nor engage in controversy with an anonymous and uncandid, though well-known essayist; but would rather feel it a call on those of us who still undertake the more complicated duties, to endeavour by redoubled and persevering exertions, to show, in our deportment, that mean and disingenuous practices are not necessarily associated with our habits:—rather esteem it an additional impulse to exemplify not only the power of knowledge, but another quality which imparts to science its utmost value; namely—probity in its application.

Considerable efforts have been made of late

years to exclude those who are termed irregular physicians from public appointments, not only in London, but also in the country; and if the epithet be applicable to a deviation from right conduct, or if incompetency be implied, the exclusion is not merely just, but laudable. But, surely, an individual who has emerged from the more busy occupations of the general practitioner by great industry and talent, and whose unfitness rests alone on his not having been qualified by university graduation, is a far more eligible person for appointments demanding practical knowledge than an inexperienced young man, though invested with the highest collegiate honors. Public appointments of this nature are trusts of great importance, and should only be accessible to men who are both capable of fulfilling, and willing to perform the duty they undertake with integrity and advantage; but let us not countenance that which has a tendency to discourage or repress the energies of a superior mind struggling against impediments, and yet capable of surmounting them.

The pleasure of gaining increasing competency to alleviate the sufferings of our fellow-creatures will ever prove a powerful incentive to labour, and the individual who duly estimates his interest in the world—who values public opinion, and especially that of his more respectable brethren, will obtain ample recompence

for all his exertions to acquire and diffuse useful information. Toilsome as the formation of studious habits may be, whilst science unfolds some of the richest treasures, and supplies the most exquisite delight that the human mind is capable of realizing, the maintenance of a good system of mental application will carry with it an adequate reward. The range of sciences embraced by medical men is so wide, and the materials for deep research are so diffusive, as to meet the utmost wishes of an expanded or powerful intellect. The frequent interruptions that occur in general practice, and the harassing nature of some of the duties, which certainly are not friendly to a regular series of mental exercises, too often form a pretext for laxity, or limit the literary occupation of leisure seasons to the perusal of journals or other ephemeral works.

The mode of remuneration usually adopted by general practitioners is not only disreputable to themselves, but is derogatory to the interests of their patients; and the period has arrived, in which, owing to more exalted sentiments in society, and to the augmented number of physicians and surgeons, the plan ought to be relinquished. It will not be possible to establish any regular scale of charges, for whilst individuals in affluent or easy circumstances will not object to a proportionate

remuneration, the medical man ought to be accessible to the poorer classes on easy terms. The man of a liberal and humane disposition will be as remote from extortion on the one hand, as from taking a pitiful recompence on the other. He will willingly adapt himself to the condition of his patients, and will cheerfully render unrequited services where suffering and poverty are unhappily combined. It is true that a patient may suffer no personal injury from the redundant medicine, for this can be avoided in the form of administration; but the idea that the advantages expected to result from it are divided between the patient and practitioner renders the former more lax in his attention to a course which, in many cases, demands the strictest punctuality. An unprincipled man, too, has an opportunity of crowding in his supplies most disgracefully, and may impose on the sufferer by an apparently moderate charge on the items, whilst making an extravagant total. It affords a temptation also to misrepresentation, by which the morbid sensibilities of a person may be needlessly excited to secure a reward in medicine, when none was really necessary. These customs might not be repulsive to a man who subsists by trade, and who invites his customer to view the article in which he deals. But the medical man should endeavour to withdraw

from the estimation of his employers every notion of traffic, and lead them to regard the exercise of his judgment as that only for which they offer their compensation. It is both detrimental and degrading to him to connive at the supposition that the fee for his services demands the intervention of physic. I wish to see general practice conducted on efficient and honorable principles, but it cannot be so till this disgraceful custom is abandoned.

Having of late years pretty generally adopted a different course of proceeding, and having heard of others who have done so, I cannot entertain a doubt but that the alteration might readily be effected, and never was there a period more favourable for it than the present. The character and qualifications of the general practitioner are greatly elevated—the public are directed by a more liberal policy—and an impulse to the effort might be derived from the example of other departments in the profession. If noble and generous sentiments actuate the practitioner, he will have little difficulty to encounter in accomplishing the object. Indeed, we may rest assured that, unless the plan be altered, the community, disposed as many of them already are to detest the principle of swallowing a nauseous drug, if perchance it might be merely to reward the apothecary, will direct into other channels the

confidence they have been accustomed to bestow on the general practitioner, at the very period when, in other respects, he is most deserving of that confidence.

Various means have been suggested to carry this mode of remuneration into effect. But I think a family medical attendant will find it necessary to draw out a statement periodically; and so long as tradesmen adopt the practice of sending in their accounts annually, we, perhaps, cannot with propriety do otherwise.

With respect to the manner of making the charge, we must be guided a little by circumstances. The more intelligent part of the community may be satisfied with a line and sum total; and others expecting a detail of the particulars, may be satisfied with an affixed total without the specification of individual charges. Where the charge must be considerable, and where the circumstances chargeable are scattered over an entire year, they are liable to be forgotten, and the practitioner may be suspected of committing a breach of trust. Instead, therefore, of distinguishing the form of medicine, whether mixtures, draughts, pills, etc; it is preferable to use the terms visit, visit and medicine, medicine, or similar expression, where it may appear requisite to draw out an account; and then to place a sum at the bottom of each page, or a total at the end of the account.

Although the Apothecaries' Company has, undoubtedly, in many respects exercised the power entrusted with it, so as to secure a far better medical education than was generally obtained before, yet commendable as many of its plans and processes might be, the circumstance of being compelled to resort to a trading company for a testimonial of competency, is by no means friendly to the character of a professional man. But, although it must be perceived that the Company is doing good, and though many of its active members are men of considerable reputation, yet every needless badge of trade detracts from the respectability of men who should live by the exercise of knowledge, not by the exchanges of commerce.

It has been thought that the time demanded for preparing medicinals, compounding and dispensing medicines, must inevitably make so great an inroad on the time of the general practitioner, that he can have little leisure for intellectual cultivation. But there is now no occasion for him to prepare his more elaborate articles, because their preparation is accomplished by the company or by the chemist, on an extended scale, with greater accuracy than could be secured by private operations. If he limit himself to the dispensing of what he himself prescribes, and supposing the quantity not to exceed that which is requisite,

he will suffer no disadvantage commensurate with what he gains in having the medicine faithfully compounded under his own inspection.

Viewed under every possible aspect, the general practitioner is called upon to make exertion in the cultivation of science, and in the more respectable modification of his practice. His own interests cannot but suggest, that unless he be pressing onward in the pursuit of knowledge, the reward he has been accustomed to reap, will be withheld. Reputation urges him to redoubled efforts, by pointing out that the standard is raised both by professional and extra-professional judges—and his “good name, better than riches,” will be tarnished, unless he be determined in the noble contest. Science directs to the pleasures she affords, and to the power she confers, as incentives to strenuous exertion; whilst humanity unfolds to us the multifarious afflictions, and perils, in all the diversities of disease and injury, to which the human body is liable; sudden or insidious in their occurrence, painful and rapid in their course, and destructive in their tendency, unless prompt and well-directed skill alleviate the suffering, or arrest the progress. If neither a solicitude to mitigate human suffering—nor a love of science—nor a regard for the good

opinion of others—nor even considerations of interest—excite us to close and persevering application in this department of human labour, then we are unworthy of the high trust reposed in us, and confidence would be misplaced. Indeed, if the duties we perform are exacted from us merely as a means of subsistence, and we are incapable of realizing any pleasure in the acquisition of knowledge, and in its subserviency to the noble and important design of benefitting others, as well as ourselves, we shall find it a most unsatisfactory speculation. But, on the other hand, arduous as the duties undoubtedly are, to a man of an active and well-informed mind, who will adopt the motto *labor omnia vincit*, a wide and fertile field is presented. If, however, he do not labour, he will neither merit the esteem, nor secure the influence, nor diffuse the benefits which are at his command. And when a few years more shall have rolled by, and he shall be compelled to retire from active employment, he will not have the satisfaction which the man experiences, who, having sedulously employed his talents, finds himself honored and beloved by a large circle of grateful friends, themselves being the trophies of his success in the useful occupation to which his life has been devoted. Nor can he enjoy the hope, that when his earthly existence shall

terminate, he will leave behind him some proofs that he was not endowed with fine feelings and a powerful understanding in vain. It is truly humiliating to suffer the consciousness of having exercised the rational faculties merely to secure self-gratification and subsistence ; passing a useless and parasitical life, a pensioner on others for resources, whether intellectual, moral, or professional. The man who has exerted his own powers—who has multiplied his resources, and directed them steadily to some valuable end—will not fail of his reward. He will enjoy pleasure in his work—he will secure pleasure in the review of what he has done—and in the hope that he will be survived by those who will be somewhat benefitted by his previous existence. Whilst those who are unsteady in their pursuits—negligent in their habits—who do not provide themselves with the means, nor acquire the capacity, for prompt and independent action, can have no real enjoyment in their work ; nor will they be outlived by the good fruits of their labour. It has justly been said—

“ ————— some when they die, die all—

The space quite closes up through which they pass.”

terminate, he will leave behind him some
 proofs that he was not without will, his
 feelings and a powerful understanding in vain.
 It is truly humiliating to suffer the consoling-
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 success for the British arms in
 the East. The British fleet
 was victorious in the East
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Liverpool, Medical Journal, January 1833.

"He thinks it likewise his duty to state the gratification he has recently
received from an attentive perusal of the abridgement of Hodge's by Dr.
Cooke of Trinity Square; a work judiciously selected—able in execution—
and deserving in explanation and practical notes;—a work which ought to
be read by every student and possessed by every practitioner in medicine."

Liverpool, Medical Journal, August 1834.

See also Preface to Dr. Uwins's Compendium of Medicine.

from the Author

THOUGHTS
ON
MEDICAL REFORM.

sup

BY A
RETIRED PRACTITIONER.

John ...



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THOUGHTS

MEDICAL REFORM.

BY A RETIRED PRACTITIONER.

LONDON:

J. KILLICK, LEADENHALL STREET.

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THOUGHTS

ON

MEDICAL REFORM.

It is a just, though trite observation, that persons invested with privileges for the public good are apt to forget the conditions on which they were granted, and to act as if the prerogatives they enjoy were given to them for their own pleasure and advantage, and not for the use or benefit of the community. Governments are too much disposed to regard the delegated authority they hold as their inherent right, and where their interests or prejudices are at variance with those of their subjects, to employ the power they possess as an instrument of tyranny instead of being a shield of protection to the governed. Divines raise a cry of sacrilege, if possessions once dedicated to the Church are alienated or invaded, or even touched by the rude hands of Laymen, though these possessions be no longer available, or even applicable to the purposes for which they were destined

originally. There are Lawyers who resist innovations in the administration of justice, that disturb the ancient abuses they have been bred up to venerate, exerting all the astuteness of their profession to defeat every scheme of improvement that tends to lessen the expense, or to shorten the forms, and get rid of the useless technicalities of established practice. Universities contend with an odious, narrow, and illiberal pertinacity for the preservation of the exclusive privileges they have been vested with, though unable or unwilling to employ them for any useful purpose. The medical faculty are not more exempt than others from this infirmity. Some members of the profession appear to consider the sick as their exclusive property, and to regard irregular practitioners as so many poachers or interlopers on their manor. Others maintain, at the expense of their brethren, invidious privileges and distinctions, useless to the public and of little benefit to themselves, though galling to those who are excluded from them. Against this spirit of monopoly it is the purpose of the following pages to contend. The suggestions of the Author may be founded on a mistaken or imperfect view of the subject; but whatever be their faults, they are dictated by no desire to uphold the interests of the medical profession against the public, or to give to any one class of medical men an advantage over the others that is not manifestly conducive to the

general benefit of society. His observations may be thought crude and superficial, and those actually engaged in teaching or practising physic may discern objections to his plans of reform, which, on examination, will be found insurmountable. But his object will be obtained if he draws attention to the subject. The time is arrived when our medical, like our other establishments, must undergo a thorough and complete revision. Whether this be effected by the House of Commons or by a Royal Commission, much previous discussion is wanting, before those invested with authority to reform, can have sufficient means of information to direct them, safely and wisely, in that difficult and important work.

As individuals, who have not studied medicine must be unable to judge of the professional attainments, of those who undertake the treatment and cure of diseases, they have a right to expect from the State some means of distinguishing persons, qualified to practise physic from ignorant pretenders to that art; from the duty thus imposed on the State, arises the obligation of instituting medical degrees or diplomas, attainable by none who have not received a sufficient education in medicine, and procured a certificate of their qualifications from those competent and authorised to grant it.

That such certificates may be satisfactory testimonials of merit, it is necessary, that the persons who obtain them, should have completed the

course of education, and undergone the examination prescribed by law, and that the Boards or other public bodies, authorised to grant them, should be competent to discharge the office of examiners, and be composed of persons as far removed as possible from the influence of local prejudice or private interest.

More cannot be expected, nor should more be attempted by the State. If an individual chooses to confide his health to an ignorant quack, instead of employing a well-informed physician, after the difference has been pointed out to him by public authority, it is his own concern. Let him have full liberty to select his medical adviser, as he is at liberty to select his spiritual guide. If he errs in either case, he will be himself the sufferer. To interfere with his choice, on pretence of consulting his advantage, would be an infringement of individual liberty—a species of bondage or tutelage—as presumptuous and uncalled for, as to compel him to entrust to a particular banker the care of his money, or to purchase his beef and mutton from a particular butcher. What individuals can do for themselves, without hazard or mischief to others, no government should attempt to do for them. The utmost that can be required from the State, in favour of those who have obtained from the public authorities it has established, certificates of their proficiency in medicine, is to employ no other persons in its immediate service, or in the hospi-

tals and other public institutions placed under its superintendence.

Attempts have been often made to exclude from the practice of physic, all persons who had not been regularly educated in certain schools of medicine, and obtained certificates of their qualifications, from the public bodies constituted and appointed for that purpose by the government. But such attempts have uniformly failed. The prohibitory law is evaded, and falls into disuse; or it leads, when enforced, to vexatious, vindictive and protracted litigation, ending, as it not unfrequently happens, in the escape and triumph of the culprit. Irregular practitioners may be prevented from recovering their demands in a court of justice, but no law can prevent them from being paid before-hand. They may be prohibited from dispensing their drugs for money, but in what manner effectually prohibit them from receiving money for their advice? Not only is the attempt fruitless, but if it could be carried into complete effect, the result would be injurious to society. If partial and questionable evils have here and there crept in from the inefficacy of exclusive laws, they are not to be compared with those which must have inevitably resulted from their success. If no one were permitted to relieve the bodily sufferings of his fellow-creatures, unless he had a medical diploma in his pocket, consequences must follow that would be equally mischievous

and absurd. An accident may happen—an illness may surprise—where no medical practitioner is at hand. Is no one to lend assistance but the person authorised by government to afford relief? If a man breaks his leg, or dislocates his shoulder, must no one re-place the fractured bones, or reduce the dislocation—but a regular surgeon? If a man has a sudden attack of pleurisy, or falls from his chair in a fit of apoplexy, must no one bleed him till the surgeon arrives? If a man has swallowed laudanum, must no one administer an emetic, or use the stomach-pump for his relief, till the apothecary is sent for, and makes his appearance? If a child suffers from indigestion, must its mother or its nurse delay giving it an emetic or a purgative, till some licensed practitioner has sanctioned the prescription? Is no benevolent clergyman or Lady Bountiful to intercept the gains of the village-doctor by substituting their gratuitous drugs in the place of his? Districts there are many, so poor and so thinly peopled, that they cannot afford to a regular practitioner the means of decent subsistence, much less a suitable remuneration for the labour and expence he has bestowed in the study of his profession. Are such districts to be deprived of the possibility of having medical assistance? Are the inhabitants to sicken and die without aid, because none but an old nurse or a self-taught practitioner is at hand to prescribe for their maladies.

Degrees in medicine should confer distinction, but give no monopoly. No one should be permitted to assume the title conferred by a medical diploma, unless he had acquired a right to the appellation according to the forms, and in the manner prescribed by law. But there the privilege of the licensed practitioner ought to terminate, while availing himself of the advantages which his rank and superior education afford, let him have no power to molest or impede his unlicensed or inferior rivals in their progress to the same goal. He might be allowed, and even encouraged to associate with his fellows in the same colleges or companies, for their mutual improvement, convenience, and instruction, and regulations might be made by themselves, or if it was thought of sufficient importance, by the public authorities of the State, to settle the terms of admission into such bodies. But they ought to have no monopoly of medical practice secured to them by law. As every one is allowed to preach the Gospel who can procure hearers, so every one should have liberty to practise physic who can obtain patients. If any one suffered from the ignorance, incapacity or negligence of his medical attendant, he should have redress, as at present, by an action for damages in a court of law. But no complaint should be received from a rival practitioner, on the ground that the person complained of had not been regularly educated to his profession.

The advantage of medical degrees being admitted, it has been a question, whether it would be better for the public to exact the same qualifications from all persons who obtain such diplomas, or to require different qualifications from different members of the profession with corresponding differences of rank. The latter has been the system universally adopted, and there seem to be reasons for the preference given to it.

If the same education and attainments were required from all persons who applied for medical diplomas, one of two consequences must follow. If a long and expensive education were necessary for every medical degree, the number of graduates would be small, and the bulk of mankind would be compelled, in sickness and in suffering, to confide the care of their health to persons who had no certificate to produce of their fitness to practise physic, in which case, as far as the public is concerned, there might as well be no degrees at all.

If, on the other hand, the standard of qualification were made so low as to admit a sufficient number of graduates to meet the demands of society for medical assistance, few physicians would be found thoroughly instructed in all the branches of knowledge necessary for the advancement of their profession; medicine whether considered as a liberal science, or as a practical art for the relief and cure of human sufferings, would improve slowly, if at all. We must therefore either abandon all

hope of a steady and progressive improvement in medicine, or establish different classes of medical practitioners, the one qualified to advance as well as practise their art, the other chiefly destined to practise it. The most numerous class would naturally consist of persons, who had sufficient knowledge of medicine and surgery to manage ordinary complaints on ordinary occasions. The higher and less numerous class would be composed of persons who had studied with minuteness and care all that was known of the structure and functions of the body in health and disease, and who possessed, in addition to that knowledge, an extensive acquaintance with every branch of science that could throw light upon their own. Such men would be equally qualified with the others for the ordinary exercise of their profession; and they would be enabled, besides, by their superior attainments and habits of reflection, to detect the origin of obscure and direct the management of dangerous diseases, which had baffled the skill and embarrassed the judgment of common practitioners. Possessing a wider range of knowledge and more enlarged views of science; and accustomed, by the place they held in the medical profession and by the nature of the practice in which they were engaged, to judge of difficult, complicated and extraordinary cases, they would be qualified to supply the deficiencies that must be expected in those members of the faculty, whose field of observation is more limited

and confined chiefly to ordinary practise. Consulted in all emergencies, the most intricate, obscure and dangerous cases would be precisely those with which they were most familiar, and on which they were most frequently called upon to exercise their judgment.

To this class of graduates the care of instruction, in most branches of medical science, ought exclusively to be committed. No one should be prevented from giving lectures or instructions in medicine. But, unless the qualifications of the teacher were attested by a diploma of the first class, attendance on his lectures should be no passport to examination for medical degrees. Some few exceptions from this rule, and but few, it would be necessary to make. The art of preparing and compounding medicines can be learned only from a retail druggist or an apothecary, or in a public dispensary conducted by some practitioner of an inferior class. The demonstrators in dissecting rooms and the superintendents of chemical laboratories are, not unfrequently, either persons of a like description, or young men who have not finished their studies. With these and perhaps, no other exceptions, attendance on lectures purely medical or surgical ought to give no qualification for a medical or surgical degree, unless delivered by a physician or surgeon of the highest class. The multiplication of lecturers who teach in order to learn, and who must therefore

give inadequate instructions to their pupils, ought to make this rule quite imperative.

There is still room for a third class of medical practitioners. No one will deny that those who prepare medical prescriptions ought to be versed in pharmacy; and that those who vend medicines in retail ought to know the proper doses and usual effects of the preparations they dispense. But, if this be admitted, it is clear that persons who undertake that branch of the medical profession, ought to have some definite course of education prescribed for them, and, an opportunity afforded them of proving, by examination before a competent tribunal, that they are duly qualified to exercise the art which they profess. It is unnecessary to add, that the persons who prepare and vend medicines in retail, are not bound at present to follow any course of study whatever, or to produce any test, however small of their sufficiency; and that the public has, of course, no means of distinguishing those who understand their business from those who understand it not. Many retail druggists have been bred to physic, and are quite competent to act as ordinary practitioners. Others are without medical education. Ought there not to be a line of separation drawn between them? Should there not be diplomas for this, as well as for the higher branches of the medical profession? Persons in want of medical assistance have as good a right to know who are

qualified to compound and prepare drugs for their use, as to know who are qualified to write prescriptions for their maladies. After such notice, if they suffer from the ignorance of the medicine-venders they employ, they will have themselves only to blame for it.

There seems to have been at one time some intention of applying a legislative remedy to this defect. In the preamble to the Apothecaries' Act (55 Geo. 3. c. 194, § 7.) it is stated, that "much mischief and inconvenience had arisen from great numbers of persons in many parts of England and Wales *exercising the functions of an apothecary, who are wholly ignorant and utterly incompetent to the exercise of such functions, whereby the health and lives of the community are greatly endangered;*" for which reason "it is become necessary that provision should be made for remedying such evils"—a statement from which we should naturally expect some enactment to follow, securing "the health and lives of the community" from "persons wholly ignorant and utterly incompetent," who presumed "to exercise the functions of a apothecary;" those functions, in their strict and legitimate exercise, being reducible to the art of preparing, compounding, and dispensing medicines under the direction of a physician. But, if such was the intention of the original projectors of the Act, they were forced to abandon it in the

progress of their Bill through Parliament. The 28th section of the Apothecaries' Act contains a proviso, "that nothing in this act contained shall extend, or be construed to extend to pre-judice, or in any way affect *the trade or business* of a Chemist, or Druggist, in the buying, *preparing, compounding, dispensing,* and vending drugs, *medicines,* and *medicinable compounds,* wholesale and *retail*;" and secures to those persons, and to all such persons in future, "the use and exercise" of their "trade or business"—"as fully and amply, to all intents and purposes, as before the passing of this act." In short, the proviso defeats the professed object of the Bill.

It is difficult to imagine what justification, or even plausible excuse can be offered, for this contradiction between the preamble of the act and a proviso, nullifying, in a point of such importance, its intended operation. It was apparently the result of a compromise between two trading companies, in which the public was sacrificed to their mutual jealousies and interests. It was (comparing great things to small) like the Empress Queen taking up arms for the protection of the Polish Confederates against Russia, and ending with a share of Poland for herself, and the sacrifice to Russia and Prussia of the remainder. The Chemists and Druggists, who *may be* persons "wholly ignorant and utterly incompetent to exer-

“cise the functions of an apothecary,” were maintained in their ancient right, of “preparing, compounding, and dispensing medicines,” though it *may* greatly endanger the health and lives of the community.” The Apothecaries’ Company obtained, on pretence of preventing “such evils,” the new and lucrative privilege of being the sole dispensers of certificates, qualifying persons to act as apothecaries, that is, as general practitioners, in England and Wales; with authority to prosecute every one, not then actually engaged in practice, who should exercise in future the functions of an apothecary without procuring such a certificate. In other words, the humblest and lowest branch of the medical profession, were constituted the sole judges of the qualifications required from nine-tenths of the medical practitioners in England; and were armed, besides, with full powers to prevent and punish, by legal process, all persons, though graduates of Oxford or Cambridge, who presumed, without undergoing an examination before them, to prepare, compound, or dispense medicines, saving always and excepting Chemists and Druggists, who might exercise, as before, “the trade or business,” they had been accustomed to “use.” Not only was this extraordinary power conferred on the Apothecaries’ Company, but such was the confidence of the Legislature in the members of this newly erected tribunal, that no limit was set to their discretion,

except the obligation imposed on every candidate of a five years' apprenticeship to one of themselves. It was, in short, an act to serve the Apothecaries and save the Chemists, without any advantage to the public, and with injurious consequences to every Surgeon and Physician, who does not submit to be examined by the members of an inferior branch of his own profession.

To return from this digression to the immediate subject of these pages, we have thus arrived at three different classes of medical practitioners, distinguished by their education, their attainments and the rank they hold in the medical profession:—

1. The highest class, qualified not only to practise but to teach the different branches of medicine required in examinations for medical diplomas.

2. The second and most numerous class, usually termed General Practitioners, qualified to practise medicine in all its branches, but not authorised to give lectures that entitle to examination for degrees.

3. Approved Druggists, who have received an education and obtained a diploma testifying their knowledge of pharmacy and materia medica and their fitness to compound and prepare medicines and sell them in retail.

It is not necessary that the first class should be numerous. There can be no reason why the highest honours in medicine should be lavished on hundreds who never aspire beyond the condi-

tion of general practitioners. It is to be lamented, that the Scotch Universities have inundated the Island with Doctors of physic, which has been hitherto the highest designation in the medical profession. Many graduates from Scotland have been eminently qualified to sustain the rank they had acquired. But others, and, it is feared a great majority of these gentlemen, are inferior to the graduates from Oxford and Cambridge, not perhaps in medical knowledge, but certainly in literary attainments, general education and acquaintance with the collateral branches of science. As a natural consequence of this disparity the whole body is lowered in public estimation. The coinage from the Scotch mint, though it contains many specimens of sterling value, is depreciated by the admixture of inferior pieces, with the same stamp, from the same authority, affixed to each. Individuals of superior talents and attainments surmount this difficulty; but a large proportion, throwing aside the diplomas they have earned, are content to take at once the station and silently assume the more humble place of general practitioners. This evil requires a remedy; and, as it would be harsh and unjust to take from any one a title he had legally acquired, there seems no alternative but to invent some other designation than that of Doctor of physic for the highest rank in the medical profession.

But if it is not necessary that the first class of

medical practitioners should be numerous, it is most essential that they should be well educated and well informed. It is chiefly from the exertions of this class of persons that improvements in medical science are to be expected; and to them should be exclusively entrusted the instruction of young men, who mean to qualify themselves for medical degrees.

While the general superiority of the Oxford and Cambridge graduates, in many attainments useful and ornamental to a physician, is freely admitted, it must not be concealed, that neither of these Universities afford sufficient means of medical instruction, or can by possibility be converted into a medical school of even second rate eminence. The want of great hospitals and the difficulties of anatomical dissection must render the attempt for ever hopeless. It is not the medical instruction received at the English universities that gives any advantage to their graduates, but the number of years they must devote to academical studies before they can obtain the honors to which they aspire. The young men are permitted, during that interval, to seek at a distance from the University the medical knowledge which they cannot acquire within its walls; and, as the period of probation is long, nothing but incorrigible idleness or invincible stupidity can prevent them from being well-informed physicians before its completion.

The education that ought to be required from candidates for the highest honours in medicine, may be divided into three heads, preliminary, collateral and professional.

The preliminary education should be a competent knowledge of the Greek and Latin, and of the French and German languages, with such proficiency in Geometry and Algebra, as to enable the student to follow the fundamental demonstrations of mechanical philosophy.

The collateral branches of science that ought to be required from a physician of the first class, are numerous and multifarious. It would be too much to exact from medical practitioners a minute acquaintance with all the branches of natural philosophy. There is not one, however, with the elementary principles and general results of which he ought not to be familiar. There is not a department of physics that is not useful or necessary to a medical enquirer in the study and exercise of his profession. Without a knowledge of mechanics, it is impossible for him to comprehend the combined actions of the muscles, the use and adaptation of the joints, the various admirable contrivances employed by nature in the construction of animal bodies, or the inventions of art for the relief of their defects and infirmities. The vital functions cannot be understood without an acquaintance with hydrostatics, hydraulics and pneumatics, nor the natural func-

tions without chemistry, electricity and other cognate sciences. The phenomena of vision are inexplicable without reference to optics and attention to the laws of perception. Nor can the mental aberrations, which fall under the cognizance of physicians, and which, in slighter shades and in various degrees, facilitate or obstruct their efforts for the cure of other diseases, receive a suitable treatment at their hands, unless they are instructed in those branches of knowledge that have our moral and intellectual nature for their object. All these departments of science are necessary for an accomplished physician, who proposes to improve his art, and undertakes to instruct others in his profession; and a competent knowledge in all of them ought to be required from every student who aspires to be a physician of the highest class.

There are other collateral branches of knowledge still more intimately connected with medical science. Nothing throws so much light on the human constitution as the structure and functions of animals, minutely studied and carefully observed. Many important questions cannot be solved, many doubts cannot be dissipated, many obscurities cannot be removed, except by experiments on living animals. Much of our knowledge in physiology and pathology is derived from that source; and it is only by perseverance in the same plan that our efforts for the

improvement of either can be crowned with success. Zoology and comparative Anatomy are, therefore, branches of science essential to a well-informed physician ; and for the same purpose, though in a less degree, a knowledge of botany and of vegetable physiology is required. Botany has been hitherto one of the studies imposed on Candidates for Medical Degrees on account of its connection with *Materia Medica* ; but, like Chemistry, it ought to be placed among the collateral branches of education. Both sciences have outgrown the purposes for which they were originally included in the course of study required from Medical Students ; and, by detaching them from the branches strictly medical, an opportunity will be afforded of appointing persons, who are not Physicians, though excellent Chemists and Botanists, to fill those chairs in Universities that confer Medical Degrees.

That the elements at least of these sciences may be acquired before the regular commencement of medical education, no candidate should begin his course of professional study with a view to graduation, till he had attained his eighteenth year. No one should be prevented from applying to medicine before he arrived at that age but the lectures he had attended, the instructions he had received at an earlier period, should not be taken into account as qualifications for a medical degree. From the commencement of his

professional education, five years applications to study should be required from every candidate before he could present himself for examination. But, if in that interval he chose to mingle with his medical pursuits any of the collateral sciences, it ought to be no impediment to his graduation, the object of the regulation not being to tie down the student to an invariable course of study, but to require from him such a length of education as with ordinary parts and attention must fit him for the exercise of his profession. A particular course of study might be recommended in medicine, as the most conducive to improvement, but a servile adherence to it should not be exacted. It may be sufficient to require that certain branches of study should precede others; as for instance, that Anatomy and Chemistry should go before Physiology and Pathology, that Physiology and Pathology should be studied before the Practice of Physic and Surgery and that the Practice of Physic and Surgery should take precedence of clinical lectures in these branches. If any one inverted that order he should be obliged to attend a second time the course of lectures which he had followed before he was qualified to benefit by them.

A course of medical education conducted on the preceding plan would comprehend the following branches of study, Chemistry and Botany, being placed among the collateral sciences.

1. Anatomy; with practical dissection.
2. Physiology and Pathology, taught by separate lecturers, or included in the same course, under the name of Institutes or Theory of Physic.
3. Practice of Physic.
4. Surgery and Surgical diseases.
5. Midwifery, with Diseases of Women and Children.
6. Clinical Lectures on Medicine.
7. Clinical Lectures on Surgery.
8. Materia Medica, and Pharmaceutical Chemistry.
9. Medical Jurisprudence.

With these lectures should be combined attendance on hospitals and dispensaries; and, at least six months practical application to the art of compounding and preparing medicines for use.

To enlarge on the necessity of a sedulous attendance on hospitals would be superfluous, as every one engaged in the study of physic is fully aware that familiarity with the appearances of disease is the only mode of impressing its features on his mind. It is of no less importance for his professional improvement, that, as soon as he is qualified for the charge, he should endeavour, by connecting himself with some dispensary or by his gratuitous services to the poor, to have patients under his immediate care. It is only in early life that he can acquire that prompt-

ness and decision of judgment on critical occasions which are as essential to a good physician as to the general of an army. A rapid induction from a multitude of minute and ever changing particulars—an instant decision, resembling instinct more than reason—must be the guides to both in the sudden and unexpected emergencies in which they are placed; and to both no quality is so fatal as an unsteady and vacillating turn of mind, which foresees all that may possibly happen, but cannot decide on what is best to be done.

No physician ought ever to write a prescription which he is not able to prepare with his own hands.

When a student has completed his five years course of professional education, he should be admissible to examination for a degree of the highest class. But to secure a proper knowledge of the preliminary and collateral branches of study, he ought to be examined on these subjects before he is admitted to his medical trials; and, if it suited his convenience, he might undergo this preliminary examination before the commencement, or at any time during the course of his medical studies.

It is of little importance by what name physicians of the first class are distinguished from the inferior members of the profession. The titles of doctor of physic has been hitherto the

highest appellation in medicine. But it has been bestowed with so lavish a hand by the Scotch Universities that some change is unavoidable. Some new nomenclature must be invented. This being the case, why should not all persons, who obtain the highest diploma in medicine, bear the same designation? As they must all have studied the branches of education prescribed by law, and must all have undergone the same examination, and ought all to have the same rank and privileges; why should they not be considered as Members of the same College or Faculty? Let their appellation be Fellow of the Royal College of medicine, with the addition of London, Edinburgh or Dublin, if they belong to the Royal Colleges established in any of these places, or with no addition at all, if they belong to none of them.

For a Surgical diploma of the first class, the same preliminary and collateral education should be required as for the same rank in medicine; nor should there be much difference in the professional education of Surgeons and Physicians. A well-informed Physician ought to understand surgery in all its branches, and a well-educated surgeon should be able to practise physic. If any difference is made in their education it should be slight. A Physician might be compelled to attend two courses of lectures on the Practice of Physic and on clinical medi-

cine, and only one course of lectures on Surgery and on clinical Surgery. A Surgeon, on the other hand, might be required to attend two courses on Surgery and on Clinical Surgery, and only one course on the Practice of Physic and on Clinical Medicine. A Physician ought to be practically conversant with Anatomical Dissection. A Surgeon ought, besides, to have performed on the dead body all the more important and difficult operations of Surgery. In other respects their education should be the same. Surgeons of the highest class, like Physicians of the same rank, should be considered members of the same College or Faculty, and have the title of Fellow of the Royal College of Surgeons, with a similar addition, or with no addition at all, as the case might happen.

Surgeons of the first class, like Physicians of the same rank, should have the exclusive privilege of giving lectures on professional subjects that qualified for graduation.

It is for the improvement of Medical Science, for the instruction of youth in Medical knowledge, and for the encouragement of a laudable ambition in Medical Students—that a class of Medical men is proposed above the rank of general practitioners. But let no one imagine that the highest diploma will ensure to him success in his profession. Many requisites, besides a Medical degree, are necessary to introduce a

Physician into extensive practice. Good sense and good conduct, discernment of character, attention to his patients, experience in his art, accuracy in his diagnosis of disease, foresight in his prognoses of its termination, firmness and decision of judgment, are qualities as essential to the success of a Medical Practitioner as knowledge and professional acquirements. Medicine is a practical art, and those who are esteemed, whether justly or not, the most skilful practitioners will obtain the largest share of practice. A young Physician may be mortified, but he ought not to be discouraged, when a general practitioner of many years standing is preferred before him. Time and assiduity will acquire for him the same reputation, after years passed in useful, though in the first instance unprofitable labour.

General practitioners form a variegated and multifarious class—from the Scottish graduate, who may attain the highest place in his profession, to the humble Apothecary who received five years ago, from Apothecaries' Hall, his certificate of possessing the scanty attainments then required from Candidates for general practice in England and Wales—from the skilful Surgeon of a provincial hospital to the village doctor, who never ventures further than to breathe a vein or open an abscess. They constitute nevertheless a most important part of the Medical Profession, and comprehend at least nine-tenths of the whole.

The greater part of them, from choice or necessity, prepare Medicines for their own patients; but in great cities many have abandoned that practice, and, like the Surgeon and Physician, send their prescriptions to be made up at some Chemist's or Apothecary's shop. Some decline operations in Surgery, unless of the simplest kind. Others undertake important operations. Most of them practise Midwifery and in large towns some confine themselves entirely to that branch of Practice. In many situations they are the only Medical Assistants that can be procured, and in slight and incipient complaints they are the usual attendants on all classes of society; and on the judgment and foresight they evince at the commencement of serious maladies the fate of the patient in a great measure depends. It is, therefore, indispensably necessary that a suitable education should be exacted from them and examining bodies appointed, fully qualified to judge of their attainments.

What extent of education ought to be required from general practitioners, is a problem difficult to solve. If it be made too high, there is danger that the supply may be deficient, and that numbers of persons may be thereby compelled to entrust the care of their health to individuals who have no certificate of their medical qualifications to produce. If it were made too low, those who had received a good education would be con-

founded with the less informed, and reduced in public estimation to the same level. We have some experience, however, on the subject. Various public bodies have a right to examine and grant certificates to general practitioners, with powers to regulate from time to time, at their discretion, the qualifications of the Candidates that appear before them. For the last twenty or thirty years, these examining bodies have been gradually raising the qualifications they exact from Candidates, and in the same proportion have the number of Candidates increased, and the number of persons who merited and received diplomas. No public body has exerted itself more steadily and judiciously in improving the education of general practitioners than the Royal College of Surgeons at Edinburgh; and, in every instance where they have increased their demands for education, there has been a corresponding increase in the number of applicants for their degrees. The scale they have adopted is not, therefore, too high. Let it be extended to other medical schools, and taken as the general standard of qualifications for practitioners of the second class. Let all who have received this education and obtained a certificate of their proficiency, whether from England, Scotland or Ireland, be considered as general practitioners in Medicine, Surgery, Pharmacy and Midwifery; and let them follow, as they are inclined, all or any of these

branches of the medical art. If any university persists in making doctors of physic, who are not of the highest rank, let them be aggregated to the class of general practitioners: provided their medical diploma contains a certificate of their qualifications to practise Surgery.

It may happen that one who was prevented at the outset of life by the narrowness of his circumstances, or by other fortuitous causes, from obtaining the highest rank in medicine, finds afterwards the means of acquiring that general as well as professional knowledge which would fit him to earn and to do honour to the station he was originally unable to attain. It would be unjust both to him and to the public if, when qualified, he were excluded from it. Medical degrees like other distinctions were instituted for the benefit of the Community, and, if withheld by pride or prejudice, means should be taken to correct the evil. They were intended not to gratify the vanity or to promote the private interest of individuals, but to hold out to the deserving an honourable distinction, and afford to the public a test of the merits of those who are soliciting its patronage. If there is a bye-law or custom in any College or Corporation, that inflicts a ban of perpetual exclusion on all who have ever exercised, or who continue to exercise a lower branch of the profession, it ought to be annulled without hesitation. If a general

practitioner has acquired by his own exertions the knowledge which in early life he was unable to obtain, and after several years application to practice offers himself as a candidate for the highest honours in his profession, let him be admitted to examination, though he has not followed the regular course of education required from younger students; and, if qualified, let him be received into the first class, on a par with the other members. There are said to be bye-laws in some Colleges still more reprehensible, which prohibit Fellows of the College from meeting in consultation with persons of inferior rank in medicine. Such regulations cannot be too severely reprobated. They are incompatible with the first duty of a Physician, which is to omit no means in his power for the relief of the unhappy patient, who has confided to him the care of his life. In practice, it is to be hoped, they are violated. In principle they are indefensible.

For the third class of the medical profession, one years' attendance at lectures on *Materia Medica*, Chemistry and Pharmacy, and one years' application to the art of compounding and preparing medicines, might be a sufficient course of education to entitle candidates to be examined in Pharmacy and *Materia Medica*; and, if qualified in these branches, they might be distinguished from persons having no such qualification by the name of approved druggists. If any

one after his introduction into the profession of Physic in this its lowest department, should afterwards qualify himself to be a general practitioner, he ought to be admitted to examination, and obtain, if he deserves it, a diploma testifying his ability to practise Physic.

Of existing colleges, companies and corporations connected with Medicine or Surgery, a few words will suffice. Where they possess any exclusive privilege to practise Physic or Surgery, the monopoly they enjoy ought to be abolished. If public duties are imposed on them, they ought to receive an adequate remuneration for the services they perform. But, as all physicians and Surgeons of the same class will have the same privileges and the same rank in the profession, whether aggregated or not to particular Colleges, it comes to be a question of minor importance, on what terms individuals may claim admission into existing corporations, so as to share in their property or participate in the administration of their affairs. If interference became necessary, it is in the competence of the legislature to interpose, but with that caution and forbearance which should ever be exercised, where the rights of individuals are concerned. It will perhaps be sufficient, if no bye-law is tolerated in such corporations, which stigmatizes any members of the profession as unworthy of admission, not on account of their inferiority in

medical rank, but on pretence that they are occasionally, or habitually, employed in some inferior department of the profession.

It would be premature at present to discuss in what manner the existing members of the profession should be classified, what persons should be left in the second class, and what number elevated at once to the highest rank. Whatever reform be adopted, these questions must ultimately force themselves upon us: but to draw the line at present could have no other effect than to awaken jealousies and bring into action envious and selfish passions, when the general good ought to be the sole object of our consideration.

It would be equally premature to consider what should be the number and composition of the boards or public bodies appointed to examine the future Candidates for diplomas. It might be expedient, perhaps, to institute a board of Examiners in every City of the United Kingdom, where *all* the branches of Medicine are adequately taught. The capacity of every Student would be tried in the place where he had been educated, without unnecessary trouble and expense, and without the apprehension of being exposed to a harassing examination and unjust rejection by the rival teachers of a different school. Regard to their own reputation, and a desire to maintain the character of the school to which they belonged, would prevent any Board

of Examiners from granting undue facilities to the ignorant and idle.

It is almost unnecessary to add, that a suitable remuneration should be made to those who discharge the duty of Examiners, by the persons who obtain from them diplomas. But there can be no reason why any additional fees should be exacted. It would be most unjust to impose a tax on Graduates, in order to relieve the wants, or repair the fortunes, of any Corporate body.

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LETTER

TO

HENRY WARBURTON, ESQ.

CHAIRMAN OF A COMMITTEE

OF THE

sub

HOUSE OF COMMONS,

APPOINTED TO INQUIRE INTO THE STATE

OF THE

MEDICAL PROFESSION.

EDINBURGH :

PRINTED BY A. BALFOUR & CO.

M.DCCC.XXXIV.

LITTON

HENRY WARRINGTON, ESQ.

CHAIRMAN OF A COMMITTEE

The following is a list of the names of the members of the
 committee appointed by the House of Commons to inquire into
 the state of the law relating to the medical profession
 in England and Wales, and to report thereon to the House
 of Commons. The names of the members are given in the
 order in which they were appointed, and the names of the
 members who have since died are given in italics. The
 names of the members who have since resigned are given
 in italics and followed by the word "resigned". The
 names of the members who have since been re-elected are
 given in italics and followed by the word "re-elected".
 The names of the members who have since been appointed
 to the committee are given in italics and followed by the
 word "appointed". The names of the members who have
 since been appointed to the committee are given in italics
 and followed by the word "appointed". The names of the
 members who have since been appointed to the committee
 are given in italics and followed by the word "appointed".

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LETTER, &c.

SIR,

Holding as I do the only Professorship of Military Surgery in this country, and being of opinion that the nature and objects of the Course of Lectures which I have annually delivered in this University for ten years past, is but imperfectly known either to the profession or to the public, I deem it my duty to lay before your Committee the following Queries, with the annexed answers, from some of my professional brethren in the Army, the Navy, and the Honourable East India Company's Service.

These Queries I have submitted, exclusively, to gentlemen of standing and experience in the above departments of the public service, who are enabled, from personal attendance on my Lectures, to speak to their nature and objects, and only to a few of these to whom I had immediate and easy access. I have added some extracts from the periodical journals, in support of the utility of such a course of instruction, and am in possession of the strongest expressions of approbation of this course from Baron Larrey, from Sir James M'Grigor, and from Sir William Burnett.

In relation to the class of Military Surgery, Sir James M'Grigor thus speaks in his evidence before the Royal Commission for visiting the Universities of Scotland. " In so far as the public service is concerned,

the Army, the Navy, and the Service of the Honourable East India Company, I think it has been a most beneficial addition to the Chairs of the Medical School at Edinburgh. Besides wounds, and what is termed Military Surgery, the economy of hospitals and of hospital arrangements, is in this school taught by a gentleman who has served much in the field and in various climates. At the end of the last war, upwards of 300 medical officers of the Army were placed on half-pay, and it is within my knowledge that many of them profited greatly by attendance on this class before they returned to employment on full pay."

As the opinions of the heads of the Medical Departments of the Army and Navy are easily accessible to the Committee, I forbear troubling you with farther details, and will only state, that by a recent intimation, the Director-General has enjoined attendance upon the class of Military Surgery, on those young gentlemen educating at this University for the Medical Department of the Army; that the Physician of the Navy has given to candidates for his Department the option of attending this class in lieu of part of the surgical attendance required of them; and that the Royal College of Surgeons of Edinburgh had previously given the same option to candidates for their Diploma.

Under these circumstances, I would most humbly submit to the Committee the propriety of giving a similar option to all students educating for the general practice of the profession, and also of establishing similar courses of instruction in the other great schools of medicine, by which it appears to me that the public may be materially benefited; in the first place, by giving to the Army and Navy Surgeons facilities and encouragement to preserve, to record, and to make

known the results of that valuable experience which in the course of service they necessarily acquire ; and in the second place, by having always at command a body of professional men, who, without prejudice to their qualifications as general practitioners, may be more particularly instructed in the duties devolving upon medical officers in the public service, and thus competent to act upon every emergency.

I have the honour to be,

SIR,

Your most obedient humble servant,

GEO. BALLINGALL, M.D.

Regius Professor of Military Surgery.

University of Edinburgh, 25th February, 1834.

QUERIES addressed to HENRY MARSHALL, Esq., Deputy-Inspector General of Army Hospitals, and to Dr. BADENACH, Surgeon to the Forces, by SIR GEORGE BALLINGALL, Professor of Military Surgery in the University of Edinburgh.

1. Q. ARE you acquainted with the nature and objects of the course of lectures which is annually delivered upon Military Surgery in the University of Edinburgh ?

A. We are acquainted with the nature and objects of this course of lectures as annually delivered in the University of Edinburgh, having not only attended the lectures of the Professor, but perused the volume he has lately published, entitled, " Outlines of the Course," &c.

2. Q. What is your opinion in regard to the utility of a course of lectures on Military Surgery to young gentlemen intended

for the medical departments of the Army, the Navy, and the East India Company's service?

A. We have a very high opinion of the utility of a course of lectures of this kind. A student who has attended a course of lectures on Military Hygiene and Military Medicine is prepared to avail himself with great benefit of the practical advantages of experience, by which means he will be much sooner able to assume in an efficient manner the medical charge of a body of men, than if he had not received such instructions.

3. *Q.* What is your opinion respecting the plan of the course of lectures in question, and can you suggest any means by which it may be improved? On this latter subject state your sentiments candidly and fully, and add what topics you think should be particularly discussed in a course of lectures on Military Surgery.

A. The plan of the course is in many respects excellent, and well adapted for instructing students with regard to the duties of medical officers in the public service. A course of lectures on Military Surgery, is, as we have already observed, extremely useful, inasmuch as it supplies that information which is peculiarly required by medical officers, and which can be but imperfectly communicated in a course of lectures, either on the practice of Medicine or Surgery. Among the many important topics which require to be considered in a course of lectures of this kind, the following seem to demand especial attention:—

1. The selection of recruits for the army or navy.
2. The means of preserving the health of soldiers and sailors under all circumstances, and in all situations to which they are liable.
3. The establishment, economy, and discipline of hospitals.
4. Military punishments, both coercive and corporal.
5. The peculiarities of gun-shot wounds.
6. Feigned disabilities.
7. The causes which permanently disable men for the public service.
8. The subject of climates in as far as regards health—Geographical distribution of diseases—Medical Topography—Causes of endemic diseases.
9. Intertropical diseases.
10. Returns of sick, reports, military statistics.

11. Instructions to young medical officers regarding their general conduct, especially in relation to their superiors, their equals, inferiors, and patients.

H. MARSHALL, *Deputy Inspector General of Hospitals.*

ROBERT BADENACH, M.D. *Surgeon to the Forces.*

Edinburgh Castle, 15th February, 1834.

The same Queries were submitted to Dr. WHITE, Deputy Inspector General of Hospitals, and answered as follows :

1. I have attended Sir George Ballingall's Lectures on Military Surgery, the principal object of which is to fit young medical gentlemen for the Army, Navy, and the East India Company's service.

2. A young man who carefully attends this course of lectures, may receive much valuable instruction with respect to the character and habits of soldiers and sailors,—on the examination of recruits,—the fitness or unfitness of men for future service,—on feigned diseases,—the transport of the sick and wounded,—the means of keeping the troops healthy in tropical climates,—the proper medical treatment,—the economy and discipline of hospitals,—and much other information, so that he is enabled thereby to become at once a more efficient medical officer than he can well be expected to be from attending a course of surgical lectures as usually delivered.

3. The plan of the course of lectures appears to me to be excellent, and so complete, that I have nothing to suggest with respect to them which I would consider as an improvement.

A. WHITE, M.D.

Deputy Inspector General of Hospitals.

3, West Circus Place, Edinburgh, Feb. 14, 1834.

The same Queries were submitted to Dr. EASTON on the Half-Pay of the 15th Hussars, and answered as follows :

1. I am well acquainted with the nature and objects of the course of lectures delivered in the University of Edinburgh on Military Surgery, having attended a regular course of these lectures, and from residing in Edinburgh have had frequent opportunities of visiting that class.

2. The utility of this course of lectures to young gentlemen intended for the medical department of the Army, Navy, and Honourable East India Company's service must appear evi-

dent to every medical officer who has had an opportunity of being present with a large army on actual service, or long harassing marches in a tropical climate; he must feel how deficient he was in performing the duty that was required from him in those arduous situations without a knowledge of Military Surgery.

The various topics discussed by the learned Professor in these lectures in regard to preserving the health of soldiers and seamen, diet, clothing, and exercise of troops, accommodation of troops in camp and barracks, site, construction and ventilation of hospitals, means of transporting sick and wounded, &c. &c. form an essential part of the education of those who are destined for the public service.

3. I have only to state, in answer to the third Query, that it is my opinion that the plan of the course of Lectures on Military Surgery is well adapted for conveying important knowledge to those gentlemen intended for the service in question, and it is so ably conducted by its present Professor that I have nothing to suggest for improvement.

JOHN EASTON, M. D.

H.P. Surgeon 15th King's Hussars.

Edinburgh, February 13, 1834.

The same Queries were submitted to W. C. CALLOW, Esq., of the 6th or Inniskilling Dragoons, and answered as follows:

1. I am well acquainted with the nature and with the objects of the course of Lectures on Military Surgery, delivered in the University of Edinburgh,—having, with much profit to myself, attended the lectures and demonstrations of the Professor, and reaped very useful information from a volume of “*Outlines of the Lectures,*” recently published.

2. I am thoroughly impressed with the very great utility, and with the importance to the British service, of a course of lectures of this nature, and have no hesitation in stating that a medical student entering His Majesty's service after regular attendance upon these lectures, must carry with him a foreknowledge of the soldier,—the casualties he is liable to,—and the best means to obviate or to cure, which it would require many years of service and laborious research for him otherwise to acquire.

The present Professor, in the clearest manner directs the student to the best manner of treating wounds and disease,—the most improved methods of performing the various opera-

tions,—instructs them in the medical police of camps, cantonments, and quarters,—with the manner to discriminate between the malingerer, and the sufferer from disease. The perseverance and research of the Professor has likewise enabled him to collect a mass of valuable facts and results, and so to place them before his auditors, that it is my opinion there are few medical officers, no matter what the length of their service, or the campaigns they have witnessed, but would be highly repaid by an attendance upon this course of lectures; it is therefore equally my opinion, that considerable advantage to the service is afforded by the medical officers within reach of these lectures being able to renew their recollections and increase their information.

3. The plan of these lectures appears well chosen; I am not aware of any important omission; and I am free to declare that I can scarcely conceive them susceptible of improvement under existing circumstances.

W. C. CALLOW,

Surgeon, Inniskilling Dragoons.

Piershill Barracks, 20th February, 1834.

The same Queries were submitted to ALEXANDER COPLAND HUTCHISON, Esq. Surgeon, Royal Navy, formerly Surgeon to the Naval Hospital at Deal, and answered as follows:

1. I am acquainted with the nature and objects of the Course of Lectures annually delivered in the University of Edinburgh, on Naval and Military Surgery, not only by the perusal of your published writings, but by having derived great pleasure and instruction in personally attending the greater part of a course of Lectures several years ago.

2. There can be no doubt of the great utility and advantage of these Lectures to such young gentlemen as are intended for the public service of the State, more especially the Army and Navy; for they inform the student of the best situations for encampments,—for the erection and arrangement of temporary or stationary hospitals, besides innumerable other particulars connected with these departments of the king's service which cannot be taught by a Lecturer on Surgery who has not been, for several years, in actual service at sea or land. Moreover, the habits, modes of living, and acting of the soldiers and seamen are so totally different from men of the same rank in common life, that they may be considered, as far as regards medical and surgical treatment, a distinct class of persons.

3. With regard to the best plan for a course of Military

Surgery, I can offer no suggestion that can in any way improve that which you have delivered for so many years with such credit to yourself and benefit to others. To offer, therefore, any change or alteration in your course would be as likely to impair as to improve the present system; for it has been long and well digested.

A. COPLAND HUTCHISON.

3, *Duchess Street, Portland Place, 19th Feb. 1834.*

The same Queries were submitted to ALEXANDER COCKBURN, Esq. Surgeon, Royal Navy, Agent for Sick and Wounded Seamen and Marines at the Port of Leith, and answered as follows:

1. I have attended the Course of Lectures on Military Surgery, delivered by Sir George Ballingall; the nature and objects of which are most valuable and interesting to young gentlemen intending to enter the public service, of either Army, Navy, or East India Company.

2. The different topics discussed in this course of Lectures I consider of the utmost consequence to a young gentleman entering the public service, as they illustrate, in a most perspicuous and able manner, every variety of disease and wound to which soldiers and sailors are more especially liable, from climate, and their particular duties; thus rendering him far better qualified for entering the service.

3. I think the plan of the course so exceedingly well arranged, and so comprehensive, that the lectures appear to me most complete.

ALEXANDER COCKBURN, *Surgeon, R. N.*

4, *Forth Street, 17th Feb. 1834.*

The same Queries were submitted to ANDREW MORISON, Esq. Surgeon, Royal Navy, and answered as follows:

1. I am,—having attended these Lectures.

2. I have the highest opinion of the utility of such a course of Lectures,—the great variety of wounds and accidents to which soldiers and sailors are liable,—the various diseases,—the effects of climate,—Military and Naval Hygiene, &c. are so fully and ably illustrated by the present Professor, that the student who attends these interesting and useful lectures, en-

tering either the Army, Navy, or East India Company's service, will have the advantage of many years' experience.

3. I think the plan of the course well arranged and complete. The Lectures convey much valuable information, (especially to those designed for the public service,) which cannot be obtained by any other course of Lectures delivered in the University.

ANDREW MORISON, *Surgeon, R. N.*

3, *Crichton Street, 21st Feb. 1834.*

The same Queries were submitted to ALLEN M'LAREN, Esq. Surgeon, Royal Navy, and answered as follows :

1. I am,—having attended two courses,—one previous to my entering the navy, and another on my return home, after a period of nineteen years' service.

2. That it is eminently useful, and that it ought to form an essential branch of the education of every young surgeon intended for the public service, as it comprehends many points not included in other courses of surgery, and brings under one view the various duties of a medical officer, who, on entering his official situation, without such information, must find himself wofully ignorant, however well educated he may otherwise be, if placed in a situation where he must act by himself.

3. The plan is now so judicious, that I cannot think that any alteration would improve it.

A. M'LAREN, *Surgeon, R. N.*

Woodlands, Blairgowrie, 19th February, 1834.

The same Queries were submitted to GEORGE OGILVY, Esq. late Superintending Surgeon at Bombay, and answered as follows :

1. In reply to the First Query, I have the pleasure to state, that I am acquainted with the nature and objects of the course of lectures delivered by Sir George Ballingall, Regius Professor of Military Surgery in the University of Edinburgh, having regularly attended a course of these Lectures, besides an occasional attendance at different times.

2. In reply to the Second Query, I am of opinion, that these Lectures are well calculated for young men qualifying for any of the medical departments of the public service, whether for that of His Majesty, or of the Honourable East India Company. The instructions that are given respecting the means

of preserving the health of troops, in the various situations in which they may be placed,—in camp, and in quarters,—the site and construction of hospitals and barracks; together with their internal economy, arrangements, and discipline, I consider to be particularly valuable, and essential to those on whom such important responsibilities may devolve.

I esteem the Lectures in question, therefore, especially important as they direct the attention of young medical men preparing for the army and navy to such subjects as are more immediately connected with these great branches of the public service.

3. With regard to the third and last Query, I have nothing to suggest. The plan appeared to me good; and I do not recollect the omission of any important subject whatever. My reply to the Second Query points to the topics which, I conceive, should be particularly discussed in a course of military surgery; and it is on account of the instruction and information given on these very points that I deem the course peculiarly important for medical students preparing for the army or the navy.

GEORGE OGILVY,

*Late Superintending Surgeon, and formerly
Secretary to the Medical Board at Bombay.*

Edinburgh, 15th Feb. 1834.

The same Queries were submitted to DAVID BOYD, Esq. Surgeon in the Honourable East India Company's Service, and answered as follows:

1. I attended a complete course of the present Professor's Lectures on Military Surgery in the Edinburgh University last year.

2. I am decidedly of opinion that every young gentleman intended for the Army, Navy, or East India Company's Service, would derive much useful and necessary instruction by a regular attendance on a course of Military Surgery, as delivered under the present experienced Professor, and that he would enter on his professional duties with infinitely greater credit and satisfaction to himself and advantage to the public service, and have no hesitation in stating, that had I had the benefit of such a course previous to commencing my professional career in the army of the East India Company, I should have profited materially by the useful practical information

conveyed as to the mode of conducting the duties of a medical officer both in garrison and in the field.

3. I think the method in which the course is conducted most judicious, and to embrace every topic of practical utility connected with the medical department of the public service. The occasional visits made during the course by the Professor and his pupils to the regimental hospitals in the castle, accompanied by the regimental surgeons, are, in my opinion, of peculiar advantage, by making them in a great degree acquainted with the economy and government of military hospitals, and perhaps a more minute attention to this department of the course might be beneficial. The weekly examinations I particularly approve of, and think them a most essential improvement in medical education, as making a lasting impression on the student, and felt much gratification with the manner in which they were conducted by Sir George Ballingall.

D. BOYD, *Surgeon,*

Hon. East India Company's Service.

Edinburgh, 16th Feb. 1834.

The same Queries were submitted to GEORGE BAILLIE, Esq., Surgeon in the Honourable East India Company's Service, and answered as follows :

1. I am acquainted with the nature and objects of the course of Lectures annually delivered in the University of Edinburgh on Military Surgery, having attended the Lectures of Sir George Ballingall in 1832-33, and also examined the "Outlines of his Course of Lectures," recently published in a thick octavo volume.

2. The utility of a course of lectures of this nature appears to me quite incontrovertible, and that a student who has attended these Lectures on Military Hygiene, Military Surgery and Medicine, would be prepared to avail himself more readily of the practical advantages to be derived from experience in the treatment of various disorders, and consequently be sooner qualified to acquit himself in a creditable and efficient manner of the medical charge of a body of men, than if he had not received such instructions.

3. The plan of Sir George Ballingall's course seems to me peculiarly adapted to the object in view, viz. the instruction of students in the duties of medical officers for the public service—a matter but little adverted to in ordinary courses of Lectures on the practice of medicine and surgery in my day.

I speak, however, with much diffidence on this point, and due deference to the opinion of more competent judges than I can pretend to be, having for some time past been in a very precarious state of health, and unequal to much exertion.

GEORGE BAILLIE, *Surgeon,*
Hon. East India Company's Service,
Bengal Establishment.

Edinburgh, 16th February, 1834.

OPINION given by several Medical Officers of the Honourable East India Company's Army relative to the Lectures on Military Surgery delivered in the University of Edinburgh in 1827.

We, the undersigned Medical Officers of the Honourable East India Company's Service, do most willingly express our opinion of the great utility of the Lectures on Military Surgery delivered in the University of Edinburgh to those young men educating with a view to our service. Some of us, who have now retired from that service, have to regret that no similar source of instruction existed at the period when we were educated; and others of us, who are about returning to India, have eagerly embraced the opportunity afforded us by Dr. Ballingall of profiting by his experience in the treatment of the diseases incident to European troops in India.

(Signed) ALEX. KENNEDY, M.D., *formerly Superintending Surgeon, Madras Establishment.*

COLIN ROGERS, M.D., *formerly Superintending Surgeon, Madras Establishment.*

JOHN MACWHIRTER, M.D., *formerly Apothecary-General, Bengal Establishment.*

WHITELAW AINSLIE, M.D., *formerly Superintending Surgeon of the Madras Establishment.*

JAMES HARE, JUN. M.D., *Surgeon, and formerly Apothecary-General, Bengal Establishment.*

PATRICK HALKET, *Surgeon, Bengal Establishment.*

THOS. STEWART, M.D., *Bombay Establishment.*

ALEXANDER HENDERSON, *Surgeon, Bombay Establishment.*

W. DUFF, *Assistant Surgeon, Bengal Establishment.*

THOMAS INGLIS, M.D., *Bengal Establishment.*

Edinburgh, 2d January, 1827.

*Extracts from Reviews of Dr. Ballingall's Introductory Lectures
to his course of Military Surgery.*

“ Upon duty in either service, the practice of medicine is the department in which the army or navy surgeon is mostly called upon to exercise his professional skill, even during war, and in peace almost entirely so. During war, however, he has not unfrequently to add to these medical duties the more serious and anxious one of the experienced operating surgeon, and in situations, too, the most unpropitious—very different, indeed, from the accommodation afforded in the theatre of a London or Edinburgh hospital. The military surgeon is frequently called upon to perform some of the most difficult and hazardous operations on the field of battle, possibly under a scorching sun, or exposed to the utmost inclemencies of the weather, to say nothing of the difficulties and danger in transporting those brave men afterwards over bad roads to considerable distances. * * * * *

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“ The professional attainments of such young medical gentlemen as are intended for the public service, ought to be of the highest order. The government seeing this, thought proper to establish a Regius Professorship of Military Surgery in the University of Edinburgh; and we may safely say, that no chair in that celebrated school has been more ably filled than that of Military Surgery.

“ We say, unhesitatingly, of these Lectures, that they ought to be in the possession of every medical officer in the king's service, for they embrace subjects which never before formed part of a course of surgery in this country.

“ The historical notice he has given of the rise and progress of military surgery is interesting, nor are we aware that the same kind of information is to be found elsewhere; neither ought the author's judicious remarks on the site of camps and hospitals, and on the transport of the sick and wounded, to be passed unnoticed.”—*London Medical Gazette*, vol. vi. p. 950.

“ We congratulate the army on the publication of these Lectures, which contain an outline of the measures which ought to be adopted with the view of promoting the health and efficiency of an army. A complete code of instruction on this

branch of the duty of a medical officer would embrace the following leading topics:—General principles of the recruiting of an army, including the period of engagements, &c. &c.—Minimum and maximum age of recruits;—The qualities of recruits required for different branches of the service, as the infantry, cavalry or artillery;—Medical inspection of recruits;—The peculiar attentions which should be devoted to the care of recruits;—The provisioning of troops. This is a very important subject, and deserves the most careful consideration; it ought, of course, to embrace fully, and in detail, every essential fact in regard to the quantity and quality of rations suitable in different climates; as also the hours of repast, and the best mode of dressing the rations, and cooking utensils. The clothing of soldiers, in as far as health, comfort, and convenience are concerned; connected with this topic is personal cleanliness, a measure intimately related to health. The construction of barracks—barrack equipment—hospitals—hospital equipment—general principles of military discipline—punishments—duty—amusements—marching—means of preserving health in the field—encampments—bivouacks—the embarkation of troops—the influence of climate upon the health of soldiers, and the best means of preventing hurtful consequences—the duty of discharging soldiers on account of disabilities, and of assisting in awarding to individuals a recompense in proportion to the claims they may have upon the country.

“ Dr. Ballingall’s work embraces a great number of the topics which we have enumerated; and we trust he will find an opportunity of further extending it, and of discussing some of the subjects, merely glanced at for the present, more in detail. Dr. Ballingall will recollect, that he fills the only chair of military surgery in this country, and that to him particularly the army have a right to look for instruction upon the means of preserving the health of soldiers. His talents, his industry, his success as an author, and, perhaps above all, his experience of the duties of a medical officer, in a tropical as well as in a temperate climate, eminently qualify him for the task. His present work does him infinite credit; it is full of important facts and observations, with which not only medical, but all classes of officers of the army ought to be intimately acquainted. We are aware that some individuals, even of the medical profession, endeavour to undervalue the importance of Lectures on Military Surgery, and the means of preserving the health of soldiers; the best conclusion we can come to on this point is to infer, that they never had any

practical acquaintance with this subject respecting which they venture to give an opinion.

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“ The Doctor evinces an intimate practical acquaintance with the subjects discussed in these Lectures, as well as with the best authors who have written upon the means of preserving the health of soldiers. Our limits will not permit us to extend our remarks upon this valuable publication; we shall therefore conclude by observing, that it ought to be in the possession of every medical officer of the army, and that commanding officers should be intimately acquainted with its pages.”—*United Service Journal*, vol. ii. pp. 733 and 737.

Extracts from Reviews of Sir George Ballingall's "Outlines of Military Surgery."

“ The idea of a school of Military Surgery appears to have occurred with great force to the original mind of the late Mr. John Bell of this city. Zealously devoted, for a whole lifetime, to the study of surgery, and especially to the operative department, that gentleman, with his characteristic enthusiasm and desire for improvement, repaired to Yarmouth, in the autumn of 1797, to witness, in the Naval Hospital there, the treatment of the wounded seamen after the battle of Camperdown. It is probable that Mr. Bell saw much adventitious, as well as necessary suffering, in these men; for he expresses himself as if he saw great room for improvement in the education of the persons intrusted with the care of the wounded. The general result of this visit was, the conviction in the mind of Mr. Bell of the necessity for the establishment of a general school of military surgery, in which officers destined for the public service in the army or navy might be taught all those principles and rules which might afterwards enable them to perform their duties in a manner satisfactory to themselves and useful to their country. He therefore addressed to Earl Spencer, then First Lord of the Admiralty, a memoir, dated from Yarmouth, 1798, in which he explains the reasons requiring the institution of *one great school of military surgery*, shows how beneficial it might be expected to be, and explains the duties which he conceives belong to the Professor of military surgery.

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“ Of the result of Mr. Bell’s suggestions to government we are not informed ; and several years of naval and military war-like operations, with the single exception of the short-lived peace of Amiens, elapsed, with the usual proportion of sickness and mortality, bloodshed and slaughter, without any other step being taken to qualify the surgeons of the army and navy for their specific duties, than what was afforded to the civil practitioner. Of these even, it may be remarked, from the limited qualifications then prescribed, with the great number of medical officers required, the supply was rather stinted and penurious. At length, in the year 1806, when Lord Grenville was in office, it was deemed expedient to institute a professorship of Military Surgery in the University of Edinburgh. * * *

“ On the resignation of Dr. Thomson, in the year 1822, the professorship of Military Surgery was conferred on the author of the present volume, who forthwith proceeded, in the winter of 1823-4, to deliver a course of lectures. Dr. Ballingall had at first to contend with great difficulties, in consequence of a very general impression, that lectures on military surgery were superfluous, if not useless ; that all the necessary information was communicated by the teachers of surgery generally ; and that, even if instructions of this kind were requisite in time of war, the existence and prospect of a long period of peace held out little inducement to spend, in the acquisition of details which might never be requisite, time and money, which were urgently required for other professional studies.

“ These considerations contributed to keep the chair long in the back-ground ; and to a teacher of less perseverance and assiduity, might have formed insurmountable impediments. By persevering, however, in delivering annual courses of lectures,—by showing his capacity for the task—by collecting, digesting and publishing, whatever information was pertinent to the duty of the medical officer,—and, above all, by making the course one not of military surgery, but military medicine and surgery, in the most comprehensive sense of the term, Sir George Ballingall has succeeded in obtaining for his department of professional study a degree of consideration which it probably never would have acquired by any other mode. In 1829, a favourable change of public opinion was evinced by the Royal College of Surgeons of Edinburgh, who had already prescribed two courses of surgery, allowing students to attend lectures on military surgery in place of one of these ; and last season, the heads of the medical departments of the

army and navy signified their desire, that the course of military surgery in the University of Edinburgh should be allowed to stand for six of the twelve months' study of surgery prescribed to candidates for admission into either of these divisions of the public service.

“ In this manner, it may be observed, that the chair of Military Surgery in the University of Edinburgh, which has been the earliest establishment of the kind in Europe, may at length become the model of similar establishments in different countries. War, and all its demoralizing and expensive consequences, are doubtless conditions not to be desired ; and, if it were possible to cease to cultivate the military art, it would be infinitely to the advantage both of nations and individuals. Such anticipations, however, it is scarcely permitted us to entertain, in the present state of the habitable globe. War is a necessary evil ; and it becomes both nations and individuals to be prepared against its casualties and calamities. If one institution is more necessary than any other, it is that, the object of which is to diminish the number, and mitigate the severity, of the various evils necessarily attendant on those engaged in military and naval duties.”—*Edinburgh Medical and Surgical Journal*, No. 117.

“ Surgery has been greatly improved within a brief period by the writings of the medical officers of the army and navy ; and those entering both these branches of the public service possess sources of information which had not existed even twenty years ago. So great was the demand for military and naval surgeons during the late wars, that young men were sent out as medical officers who were as incompetent as it was possible for them to be. When they commenced duty they were incapable of performing the simplest operation, venesection excepted, and their incompetence led to the most fatal consequences in numberless cases. After the peace of 1815, the senior surgeons of both army and navy made such representations to the heads of their respective departments, as led to a total change in the education of future military and naval surgeons. The course of education was so much enlarged, that the highest testimonial of competency was required for the subordinate situations of the medical department.

“ Military and naval surgery was now enriched by the works of Baron Larrey, Dr. Hennen, Mr. Samuel Cooper, Mr. Guthrie, Mr. Hutchison and Mr. Hammick, and by various

essays contributed by Sir James M'Grigor, Sir William Ferriarini, Dr. Vetch, Sir Andrew Halliday, Mr. Bacot, Mr. Marshall, Mr. Murray, Mr. Dease, Mr. Lindsay and many others. These writers communicated a fund of the most useful information, a great part of which was new, as it never had been noticed in the best standard works on surgery. Cooper's Surgical Dictionary, Hennen's Military Surgery, Guthrie's Gun-shot Wounds, and Hutchison's Naval Surgery deservedly rank as works of authority and reference. In the production before us, the author has analyzed the labours of his predecessors,—he has laid all under contribution. He has collected and arranged the whole of the established facts,—he has added the results of his own experience, and executed a system of military and naval surgery of inestimable value to the engaged in the practice of that branch of the healing art.

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“Some persons assert, that there is no difference between Civil and Military Surgery; and this must be granted so far as operations are concerned; but there is a vast deal of important information contained in the latter which is not in the former. In the works on surgery there is no allusion to the examination of recruits, the diet, clothing, and exercise of troops, their accommodation in camp, barracks and billeting, diseases in camps, garrisons, and hospitals, transportation of the sick and wounded, diseases of troops on foreign stations, punishments, feigned and fictitious diseases, medicine chest, and surgical instruments, &c. &c. The medical directors of the army and navy boards have therefore very properly recognized one course of Military Surgery as a part of the course of education of surgeons for the services over which they preside. It is a remarkable fact, that there is no Professor of Military Surgery in the numerous medical schools of London or Edinburgh.”—*London Medical and Surgical Journal for October 1800*