Introductory address, delivered at the opening of the session at St. Mary's Hospital Medical School, October 1st, 1880 / by Walter Pye.

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INTRODUCTORY ADDRESS,

DELIVERED AT THE OPENING OF

THE SESSION AT ST. MARY'S HOSPITAL MEDICAL SCHOOL.

October 1*st*, 1880.

BY

WALTER PYE, F.R.C.S.,

ASSISTANT-SURGEON AND LECTURER ON PHYSIOLOGY.

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INTRODUCTORY ADDRESS.

GENTLEMEN,

The opening of the medical year has always, since our School was founded, been made an occasion for the meeting together of the medical staff and the students, and the renewal of the bond of kindly feeling which has always here existed between the teachers and the taught. I have said renewal, but the word is misleading, for, in truth, this bond stands in no need of a yearly patching-up, but only gathers strength with time; and we meet together rather as a sign that now, as heretofore, we are determined that we will stand shoulder to shoulder, and

> "Bate not a jot of heart or hope,
> But steer right onward."

And as we cannot all here speak at once, from year to year one of the staff is selected to stand spokesman for the rest, and in their name to greet you all very heartily. This then is my pleasant office to-day.

Old friends first, now and always; but it is perhaps more courteous to especially welcome our new-comers, who till now have been strangers to us,

and to express our confident hope that in choosing "St. Mary's" as their *Alma Mater* they are doing well for themselves and well for the School.

So far as I can gather from a recollection of many Introductory Addresses, and a somewhat diligent perusal of many more, you should now be congratulated on the extraordinary virtue you are showing in your choice of our profession; and I ought also to tell you that you are sure to live happily, enjoying your work, and that when you die you will leave something more than a competence to your heirs.

But among friends we have good authority for holding that it is sometimes convenient to tell the truth. And the truth is, that we cannot tell you now whether you have done wisely or not; but we *do* know, only too well, that many men are woefully unwise when they enlist in our ranks, and try painfully to do the work their fellows learn to love so well.

If there are any here who are now beginning their medical education with the object of making money, or because there seems nothing better to do, or, worse still, disliking it in their hearts, there is but one thing they have to do—they must give it up. If they have the faculty of making money, they will do so almost anywhere better and more easily than with us. The mistress we serve is a jealous mistress, and will have no lip-service, no "carpet knights." We who aspire to wear her favours in the lists must love her, or we shall hate her; and, with us, dislike of

our work means at the best failure, at the worst, disgrace. Believe me, you will never find your mistake so easy to rectify as now, and you owe it to yourselves—you owe it to us—not to make your future life a sham.

Liberavi animam meam. Being delivered of these pessimist sentiments, we will now suppose that all here are honest workers, with a genuine love for their profession. What may they look forward to? One thing, I think, is certain, and that is, that if it is only reserved for the very few to make fortunes in our profession, still fewer —I had almost said none—except through their own fault, will fail to make enough to enable them to live at least in comfort. Our profession is not so crowded yet but that all may live by it, even though it be given to the great majority to realise in their own person "Agur's" prayer, and have neither poverty nor riches.

Those, then, who are going to walk in the high road of our profession may be confident that, whether they succeed or not, at any rate they will not starve. I do not know that the same can be said of those who forsake the beaten track, and lay themselves down for a waiting game, in the hope that "time will be on their side," and that they will eventually win success as consultants. But it seems to me that they whose ambition leads them to fly at high game, and who aspire to pre-eminence as well as to opportunities for honest work, should recollect the homely proverb that "Those who play at bowls must look

out for rubbers." They cannot all command success; very likely all do not deserve it; at any rate, this bowling-green of medicine is hilly enough, is full enough of "rubs" to lay low many a stout competitor for its prizes, through no fault of his own. And I do not see that he who plays at a game in which the chances of success are against him has any particular grievance if he has only—not succeeded.

But the estimation of the mere money they are likely to make is a poor way of judging the prospects of those who are entering our profession; far more important is it to know the esteem in which they and their work will be held by those among whom they will live.

Here, on all sides, "the old order changeth, giving place to new," and I believe and hope that we are in the midst of a revolution, silent only because it is orderly, and because the changes which are going on come from inward growth, and not from outside pressure. No one, I think, who is not wilfully blind or mentally jaundiced can deny that our profession is rising steadily in the esteem of men, and that its importance for the national safety and welfare is being year by year more recognised. Assuredly, were Thackeray to write "Pendennis" now, he would not make Mr. Samuel Huxter, junior, his typical medical student, nor make Arthur Pendennis's tenderest point the fact that he was the son of a country doctor.

I have said that the change is coming from

within ourselves. The outside public is as incapable now as it has ever been of understanding our higher aims, the better ends for which our work is done. But it is quick enough to estimate the general and intellectual capacity of the workers, and to accord them that place on the social ladder for which they are fit. Let us clear our minds of the cant phrase of "the profession making the gentleman." No profession ever did or ever will.

Whether a man be a tinker, or a tailor, or a soldier, or a sailor, or an apothecary, he will live among those he is most fit to live among; his position will depend on himself, and not on his trade or calling, and he can make it what he will.

But it may be said, "Does not here the proverb apply, 'The fathers have eaten sour grapes, and the children's teeth are set on edge?' The writings of Fielding and Smollett show that the doctor of a few generations back was often more in his element in a taproom than a drawing-room. This may be untrue now, but does not the tradition of past times linger yet?"

If this is so—which I doubt—it rests with those who argue thus to explain why our profession should thus be singled out, while all around we see other men respected in accordance with their ability and culture, quite irrespectively of their profession and antecedents.

The improvement is, I hold, entirely due to the fact that those who yearly join our ranks are recruits of a higher standard of intellect and

cultivation than they used to be. But I believe that the minimum standard of preliminary education is still neither high enough nor broad enough, and that it would be well if all who wished to be medical men were obliged, before they were allowed to come up to the hospitals, to show that not only was their general education up to at least what may be called "fifth form" standard, but that they had also acquired a sufficient knowledge of biology and botany, chemistry and physics, to enable them to set to work fairly on the study of those physical, chemical, and biological problems which we call human anatomy and physiology.

Many anomalies would cease to exist in our curriculum if this preliminary scientific education were made compulsory. A student would not be expected, for example, to go from one class-room where it has been explained to him that an acid and a base mixed together will form a salt, to another where he will be supposed to comprehend the molecular arrangements wherein cyanate of ammonia differs from urea, or, the difference in the physical properties of egg-albumin, syntonin, and the peptones.

The three Southern universities have recognised this. The latest-born expressly states that its undergraduates should pass the scientific part of their M.B. examination before they commence their proper professional studies. But still there has to be maintained in every medical school in the metropolis the machinery for teaching elementary chemistry, elementary botany, elementary

biology—for teaching, that is, what should have been acquired before our students come to us. Even if this involved another year of preparatory study, the time would still be short enough ; and few, I think, would be sorry to see the minimum age increased at which students can come up to the hospitals.

But while it is hardly possible to overrate the importance to you of this scientific education, still you are not to be botanists, nor biologists, nor chemists, but doctors. The main facts of general science will probably be all you will have time to acquire, and these will stay by you. Even if in after years the details slip away from your memory, as they will, still the habit of mind which is born of a study of science will remain, and will be of the utmost service.

Moreover, as year by year we see the State taking more and more into its hands all sanitary questions, so the greater becomes the necessity that medical men throughout the kingdom should be possessed of general scientific knowledge, unless we would see a formal divorce between those who look after the public health and those who look after the health of the individuals.

Putting aside then, those subjects which I cannot but regard as being foreign to your real work up here, let us look to the course you will have to run. And here I may, with a clear conscience, assure you that the four or five years which will probably be the term of your hospital life should be one of its happiest lustra.

I know no professional course save ours which leads a man steadily forward from the dry bones of abstract knowledge to the closest acquaintance with the inmost thoughts and feelings of his fellow-man—

> "As men may rise on stepping stones
> Of their dead selves, to higher things."

I know none in which there is such a progressive increase of interest from beginning to finish, or I should rather say, till each one of us has finished his bit of work in the world and gone to his rest.

It is our peculiar privilege that our work itself will know no ending "till sorrow and sighing shall flee away," but each of us may, and must if we are worthy at all of our high calling, get better able every day to fight the good fight against illness and the causes of illness. I have said that from first to last the time you spend at the hospital will be spent in work which will grow steadily more and more congenial to you, but this is only if you take the work in the right way. And that right way is, I am sure, to get the first part over first, and have done with it.

Some there are, I know, who take a real, genuine interest in the study of anatomy for its own sake, and well it is for them that they can do so; but I see no use in pretending that an abstract taste for this branch of your necessary work should be felt by all. And perhaps the same may be said of that branch of medical education in which I am more especially interested, in this school. But, nevertheless, it seems

to me that the student of medicine should look at these two subjects, anatomy and physiology, from somewhat different points of view.

While you must bear in mind that an intelligent interest in the work you are doing is of course essential to any success in the pursuing of it, and that this interest you must determine to take in your work in the histology and dissecting-rooms, still you may solace yourselves in your hours of weariness by recollecting that as you were not to be botanists or biologists, so you are not to be anatomists or histologists, but doctors. Nay, you may even remind yourselves that "that way lies danger," and beware of the fate of the Caliph of Baghdat, who forsook the living for the dead, and passionately embraced a corpse.

But we must regard physiology—the study of how we live and move and have our being—somewhat differently. Forgive me if for one moment I seem to plead the cause of this branch of your work unduly.

So far as the bare limits of public safety are concerned, it may be only essential that every student should be acquainted roughly with the ordinary working of the human machinery before he is allowed to try his "'prentice hand" on the bodies of his fellow-creatures.

But let us think for a moment what effect a general and a generally increasing knowledge of physiology would have on the whole progress of medicine. I believe that the understanding of this question aright is of more importance to this

generation than it ever has been before, for we seem now to be witnessing a renewal of the old battle between Empiricism and the Hippocratic method; between the practice of medicine according to certain laws definitely laid down, and that practice which is guided solely by past clinical experience.

False as their system was, the old Empirics died hard; and at the present day the tide of medical progress seems to be running with those who are striving through the knowledge gained by experiment of the physiological working of the body in health, and the exact nature of the alterations in that working which are caused by drugs or other disturbing agents, to render medicine once more an exact science, and once more establish an empirical treatment, founded this time on the truths of physiology, and not on the fantastic imaginings of those who looked anywhere rather than to their own bodies to find out how they were made.

The ideal triumph of this school would be, I suppose, that the consideration and treatment of all disease should be reduced to the conditions of the solution of mathematical problems—that we should be able to know, as surely as we know that two and two make four, simply from our knowledge of the way our machine works, that such or such a thing will be the result of what we do to our patients.

A truly exact science, Medicine will of course never become; and, indeed, if this ideal aim were

ever attained, it would, like all ideals, be unsatisfactory enough. Still, it is not the less true that every step we take towards that visionary end is a step in the right direction, and the road we must travel is that of the advancement of all physiological knowledge, normal and pathological.

We have only to look at the work which has been and is being done by such men as Brunton, Ringer, Liebreich, or Schmiedeburg, in the field of working out the physiological action of drugs, to convince ourselves that the advances which are being made are real; and if any of us can throw but a little pebble on the rising cairn of knowledge, we have, in that we have done it, helped to justify our existence as workers in our calling.

But this demand for progress in the way of exactness is not confined to the knowledge of the action of drugs. In surgery, as well as in medicine, there is great need for a sounder physiological basis for our treatment. To illustrate this I need only mention our crying want of firmer, more rational, grounds on which to base our treatment of shock, or of that series of changes we group under the name of glaucoma or of cerebral lesions.

And the labours of Charcot, Ferrier, Yeo, and many more, stand as evidence that this field of work is fruitful now, and gives promise of a yet more abundant harvest.

But, whether you be among the few who will have the opportunity and good fortune to be able

to leave medicine more scientific than you found it, or whether you will determine, and rightly determine, to follow out Goethe's advice, and do that which lies next to you, pursuing your calling as skilfully and honourably as you may —in any case, to descend from the sublime to the commonplace, there *is* a standard of physiological and anatomical knowledge, though it be but a low one, to which you *must* attain before you can pass your first professional examination, and enter upon the real sweets of your student-life.

This examination will be, for most of you, the "First College"; but whatever it may be, let me urge upon you the practical importance of passing it as soon as you possibly can. Before you have done so you may, if you please, go round the wards and attend the out-patient rooms; but all the time you spend there will really be little better than simple diversion or lost labour—time which might just as well have been spent in exercise, or else which has been filched from what is really your proper work.

You cannot eat your cake and have it; and I do think most strongly that those who devote their attention entirely, during the first twenty months of their time at the hospital, to the subjects of their lectures, and especially to the dissecting and histology rooms, who then pass their first examination, and start clear of embarrassments on their clinical work as dressers or clerks, have an immense advantage over those who are

tempted to defer their first time of trial "till a more convenient season."

We will suppose now that you have sailed dexterously past the Scylla of the anatomical *vivâ voce* table in the college theatre, and have escaped being engulphed in the eddies of Charybdis which ensnare the voyager who attempts too rashly to identify the microscopic and other objects ranged in order before the physiologists.

Having got once more outside those dread swinging doors, you have the really enjoyable time of your student career to come. All the work you have now to look forward to will not merely be connected with that to which you propose to devote your life, but the very work itself, robbed only of its greatest drawback, undue responsibility.

Now, indeed, a change will have come o'er the spirit of your dream. Instead of feeling that the glimpses of real hospital life which you have had have been visions of work in which you have neither part nor parcel, now it is your duty to see as many sick people as you possibly can in the time which remains to you; and you will find the task a pleasant contrast indeed to your former work.

You will probably all hold appointments as clerks in the medical wards and in the out-patients' room, and as dressers in the surgical wards. In all of these posts you will find opportunities for work enough.

Let me say just a few words as to the way in

which you can use your appointments in the house to the best advantage.

In the first place, you must bear in mind that, speaking generally, those who are in-patients are *very ill*, and generally their illnesses are severe forms of some of the more common types of disease. Acute rheumatism, for example, on the medical side, or chronic disorganisation of the knee-joint on the surgical, may seem uninteresting and ordinary ailments enough, when contrasted with the fierce and rapid course of pneumonia or a case of impacted fracture of the skull with compression, but suppose them in a private house by themselves, with you as the person whose reputation depends on their treatment, and see how the importance of the case rises in your estimation.

When you are clerking or dressing, therefore, do not omit to carefully watch those cases which seem at first sight "commonplace." In that they are commonplace here, they will be almost certainly those you will have to deal with in future; and do not forget that the standard of illness which you will here have to watch and take notes of is very high.

And on this point let me urge you to take notes as fully as you can of the cases you have to dress and clerk for—*Litera scripta manet;* but the notes remain not only on paper—they are engraved on the brain of those who write them, and, like bread cast on the waters, the experience fixed by memory in the wards may return again after many days, wholesome and palatable stuff

enough. And the amount of ground is extraordinary which twenty or thirty cases, medical or surgical, will cover if taken carefully.

A case goes on from week to week, and the first interest taken in it is only too apt to pall, but if you stick to recording the ups and downs of its course faithfully, believe me you will be well repaid in the end.

Especially valuable to you will be those cases which you will have to study in death as well as in life—those cases in which, on the post-mortem table, you will have the opportunity either of establishing your preconceived notions, or else of reading there for the first time the answer to some obscure problem hitherto unsolved, perhaps hitherto unsolvable.

And as I urge you to lose no opportunity of attending the post-mortem room, so in the operating theatre, do not let your opportunities slip. Do not, for example, be satisfied with seeing an amputation of the thigh performed, but pay especial attention to the condition of the limb which has been condemned. The understanding the steps of the operation itself is a small thing compared with comprehension of the reasons for which it has been done.

Thus your work in the wards should be done patiently and methodically ; you cannot afford to let any of it pass, for you should feel all the time that you are placed in conditions for acquiring experience that you will very likely never be placed in again. And you must bear in mind,

too, that the patients themselves are placed in the very best possible conditions for getting well if they can.

In the wards you see medical and surgical practice in their most favourable aspects; but you must not therefore expect that all your work will bear the same rose-coloured hue.

The in-patients of the hospital you will have the opportunity of watching, even if they all be "good cases," will still be numerically few; and you have to make yourself really trustworthy, to see as many sick people, and see them treated, as you possibly can.

You have to learn, too, what you can hardly learn in the wards—the physiognomy and bearing of illness. You have to learn to be able almost instinctively to separate those who are really ill from those who are ailing, to distinguish the sober man from the beer-soaker, and this one again from the gin-drinking sot, and to form your prognosis accordingly; to balance tales of subjective sensations against the objective evidence of your own senses.

Knowledge of the different types of humanity, of the various aspects of health as well as of disease—all this you have to acquire; and it is chiefly in the out-patients' room and in the casualty-room that you must get it.

And first, of the out-patients' room. What I have just said will prevent any suspicion that I underrate their value when I say that to those who attend them, the atmosphere, in a mental

as well as in a physical sense, is not altogether wholesome unless some sort of moral respirator be worn.

Descendamus ad inferos, and let us see what we shall find.

We shall find a great number of people—some hardly ill at all, most distinctly ill, some very ill; and of all these, with the exception of the first class, I am bold to say that the treatment they receive is a compromise between the necessity of their having some treatment and the impossibility of giving them the treatment which would be the best for them,

But let me beware of Christian's troubles, and tread lightly o'er that Slough of Despond, the out-patient question, and be content with warning you that the modes of treatment which you will see employed in those rooms are often not the best; are not those which we would, but those we must perforce, adopt.

But if you bear this caution in mind, I do not think it possible for you to spend too much of your time in the out-patient department; six months' attendance there will probably give you experience of almost all the ills that London flesh is heir to. Here too you will learn not only to make up your mind as to the nature of an illness, but to make it up quickly. A case often clears itself up in twenty-four hours, but you have here only a minute or two to give to it; and to be successful you must add to strictly medical knowledge a capacity for the

dispassionate weighing of evidence and judgment of character. And where will you find a better field for that "proper study of mankind" than in the men and women who day after day crowd the benches of the waiting-rooms downstairs?

So, in the same way, you should haunt the casualty-room. Here, all day long, cases of all kinds and of all varieties of severity may be seen; and it is the knowledge taken in "through the pores" in this way that gives a man that confidence which is only got by having seen very many people ill in very many ways.

When you are actually holding dressers' or clerks' appointments, be careful, in the first place, to learn mechanical neatness in bandaging and splinting. This may seem an unimportant matter, but it is not so in reality. A broken leg will no doubt mend just as firmly if the side-splints are not pairs and are differently padded, but the dresser to whom this is not an eyesore will not be scrupulously particular about the position of the limb.

And, in addition, let me advise you, if you have any gift at all for practical mechanics, to cultivate it diligently. Recollect that we are χειρουργοὶ, handicraftsmen; and yet I fear that if a working mechanic were to criticise much of our boasted apparatus, he would have a poor opinion of the intellects of its devisers. Believe me, there is abundant room for improvement. If, for example, anyone here would make a really

good stethometer, or invent an irrigation apparatus which would not give the patient a cold in his head from exposure, he would be doing a very good work indeed.

Therefore, be as much in the hospital as you can; and in order that you may do this with ease, I recommend you to live near its walls. Do not think that you are loafing if you are there without any distinct object; you will find your account in it, if you only keep your eyes open and your brains alert. Patients, too, look very different at different times of the day and night, and your knowledge of the condition and progress of a case will be a very one-sided one if you only see the patient when refreshed by the quietness and coolness of the early morning, or flushed and sleepy after a midday meal.

But though I say to you, Know the hospital and its work in every aspect and at all hours of the day and night, do not suppose that I mean that you should do nothing else during the years you spend in this great city but live in this little corner of it.

It is not necessary for me here to remind you that a good digestion, and that physical health which goes with a properly organised gastric juice, is essential to success in any career; I need not tell you that a temporary gain won by neglect of the ordinary rules of health is dearly purchased at the price of a trigeminal neuralgia or a six months' dyspepsia.

Assuredly, while St. Mary's keeps green the

memory of her past victories in the athletic-ground, there is no room for fear that her students will degenerate into the type of hydro-cephalic, examination-fearing bipeds, for a further study of which species I may refer to Kingsley's "Water-Babies."

But, as well as being healthy, you must, if you are to get the best out of life, study to appreciate, as far as you possibly can, all forms of intellectual culture, all forms of artistic taste. You must study, then, to be, in the highest sense, men of the world. Do not let the single point of contact between yourself and your patient be his or her pains and aches, but study earnestly to fit yourselves to hold your own, so far as knowledge of men and things and of books is concerned, wherever you may find yourself.

Even if it were for no other reason than that it is essential to success that you should comprehend all sides of the character of your patient, you should do this; but it concerns, moreover, your own happiness in the highest degree.

And where will you find better opportunities for the cultivation of your higher faculties than in London? If you care for music (in the true sense of the word), here you may, for a shilling, hear the best, by the best musicians, nearly all the year round. In Trafalgar Square and South Kensington you have storehouses of art you can never exhaust; while as for books, the

visiting card of a householder will give you the run of a library which could swallow up that of Alexandria, and hardly know there had been an addition to its shelves!

Do not regard these enjoyments as dissipations. If you really work while you *are* working, you will find no lack of time which you may honestly give to them.

And, though I know that on this point I may be thought heretical, I will say, also, do not neglect to read those novels which have proved themselves worthy by the test of time. Who ever read "Vanity Fair" or "Esmond," "Romola" or "Silas Marner," without feeling that he had gained an insight into the character and thoughts of men and women which he never had before? Who ever regretted the intense human interest which Victor Hugo calls forth in us when we follow Fantine's fortunes in "Les Misérables," or which George Sand evokes in "Consuelo"?

But these books only are for when the work is done—for the Saturday evening and the easy-chair. I have said nothing of the books you are to study during this, the time of practical work in the Hospital. The only professional books you will now find it worth while to read will be text-books, and of these the fewer the better. The time will soon come when you will read with the keenest delight the thoughts and words of those who do not merely formulate the ideas of others, but who write to advance our art.

But till you are yourselves firmly established in practical knowledge of disease as seen by the bedside, the study of the writings of others is, I am sure, a source of danger to you ; you must feel the ground somewhat firmly under your own feet before your can trust your judgment as to the soundness of the arguments of others.

Text-books, however, of some kind or another you will have to use ; but let them be as few as possible, and use them rather as aids towards the methodical arrangement of the knowledge you are practically acquiring than as sources of knowledge.

With rare exceptions you will find the book descriptions of disease absolutely worthless in practice ; and a man may well be able to run glibly through the list of the thirteen or fourteen different kinds of tumours which may affect the groin, and yet bungle over the actual distinguishing of an enlarged gland from a hernia.

The Hospital, then, must be your home, her wards and out-patient rooms the sources of all your real knowledge ; and in claiming for yourselves the right of using to the full all the opportunities of acquiring that knowledge which she can afford, you are claiming only your just dues.

It has been said, and with a certain show of truth, of some of the older hospitals, that they owe no duty to their schools ; nay, even the school has been described as a parasite drawing its life-blood from the hospital, and giving little or nothing in return. But this can never be said

of us, for the foundation of our Hospital and our School are but parts of one great scheme.

Our early records show this over and over again ; and were it not that I must recollect how long I have occupied your time, I should be tempted to trace with some care the story of the efforts and trials, the hopes and fears, of those who brought St. Mary's within the "sphere of practical benevolence," to use a catchword of the day.

But on this point I need only quote this passage from the important report of 1852 :—

" The immediate erection of a separate building of the character contemplated by the original promoters of the Hospital, and the establishment of a Medical School, must now be regarded, not merely as an object highly desirable in itself, but one upon which the vital interests of the institution depend."

Similar expressions we find scattered throughout the history of the progress of the Hospital, all indicating the great importance in which the School was held in the minds of the founders.

We, therefore, School and Hospital, have one common origin, and in that we cannot exist apart from each other, we may justly claim a position not held by any other hospital in London.

Happy, it is said, is the nation which has no history ; and happy are we in that time has dealt so gently with us, and has left to us still so many to whose exertions we owe our existence to-day.

May the day be far distant when in losing them we lose the present memory of our birth, and see it year by year more deeply involved in the "ever deepening shadows of the past."

The fourth decade will commence to-morrow since Dr. (now Sir James) Alderson gave the first clinical lecture at the Hospital, and we reckon him among our staff to this day. And more especially should we gladly count among us our first Dean, Mr. Spencer Smith, who watched this building rise, with jealous care, both day and night, lest it should not be finished by October 1, 1854.

And now, in conclusion, let us not blink the fact that St. Mary's is still a Zoar among the Cities of the Plain. It is somewhat startling to read that when the scheme of raising this Hospital was set on foot by the Committee of 1844, it was considered that 380 beds was the least number that would meet the requirements of the district, and then to remember that, in spite of the enormous increase of population, in spite of no new large hospital being built to limit our collecting area, St. Mary's can but make up 200 beds all told to-day.

Every year, I had almost said every month, increases the pressure on our accommodation, and our resident staff know only too well how great that pressure sometimes is.

Surely what was contemplated thirty-six years ago is not impossible now! Let us hope that but few years will pass before our Hospital will

have grown to be an institution equal to the work it ought to do in this great town, and not unworthy of the high hopes of those who met on March 10, 1843, in Titchborne Street, and resolved that St. Mary's should be built.

These are our hopes for the future. We can look back upon the past history of our School, and bear ourselves as those on whom the mantle of a glorious inheritance has fallen. Be ours the task to-day to determine that, come what may, we will hand down the fair shield of the good name and good fame of St. Mary's as stainless to our successors as we have received it.