Address delivered on taking the chair at the Medical Teachers' Association, on January 20th, 1868 / by John Simon.

Jeannie.
Nov. 2. 1868.

ADDRESS,

DELIVERED ON TAKING THE CHAIR

AT THE

MEDICAL TEACHERS' ASSOCIATION,

on January 20th, 1868,

BY

JOHN SIMON, F.R.S.,

PRESIDENT OF THE ASSOCIATION.

LONDON:
PRINTED BY SAVILL, EDWARDS & CO., CHANDOS STREET
COVENT GARDEN.

1868.

ADDRESS,

ETC.

GENTLEMEN,—In appearing before you for the first time in the capacity of your president and chairman, I must beg leave briefly to express my thanks for the unsolicited and unexpected honour, the very high honour, which places me here. Among the functions which have to be fulfilled by the foremost members of our profession, none, in my opinion, can be deemed of higher dignity and importance than that which they exercise when training worthy successors for offices and responsibilities like their own. And that you, gentlemen, medical teachers of this great metropolis, where ought to be the best medical teaching in the world—that you, preparing to take counsel together as to the ways by which our schools may be rendered more effective for their national, their world-wide purpose—that you should have invited me to be the first president of your new Association, is, believe me, an honour of which I can never cease to retain a most proud and most grateful recollection.

Gentlemen, on this first occasion of our meeting, I may, perhaps, with your indulgence, venture to make some few remarks, introductory to the business of our meetings, and in aid of good understanding between us, as to what are the *objects* of the Association, and what are the *means* by which they may best be attained.

Our essential object, gentlemen, is to learn by mutual consultation how we may best promote the efficiency of our respective schools, and make London all that it ought to be as a centre of professional education. Let us, then, first clearly determine what are the powers which our Association can

exercise for that object. Here, above all, we have to remember that the Association cannot claim to exercise any kind of compulsive authority in the matters which occupy its attention. We are a merely voluntary Association, having, in law or to hostile judgment, absolutely no coercive power. Indeed, hitherto we are not even authorised to consult on behalf of all the schools of London; two of the number having, I understand, not yet decided to join us. We are in a position not very dissimilar from that of our scientific Societies—the Royal, or Medico-Chirurgical, or Pathological. We have to act through opinion, through reason. The more clearly this is recognised by ourselves as our rule of conduct, the more influence are we likely, I think, to have in matters where our opinions are right.

My impression as to what will be our best mode of action in seeking to give effect to our opinions rests entirely upon that view of the case. After very carefully considering the subject, I will venture to suggest to you, at least as a provisional rule, that our reformatory resolutions ought not primarily to be aimed at any but our own members. It will of course be incumbent on our members, and specially on the representative members of Council, to communicate to their respective schools the resolutions which we may here pass. Whether such resolutions relate to mere details of school discipline, or touch (as sooner or later they may) very much larger questions —even perhaps up to the constitution and functions of the examining authorities of the medical profession, equally, for either sort of case, our best course of procedure will, I think, consist in formally remitting to our constituent schools the discretion of giving effect to the resolutions. If a resolution concern the schools themselves, each school, if it adopt the resolution, as no doubt will commonly be the case, can of course at once give effect to its adoption. If, on the other hand, the resolution be of a more general kind, requiring that other bodies be moved to action, we may fairly expect that the schools adopting our resolution will separately press the opinion where it requires to be pressed; and that thus, with also the influence of their individual members exerted to the same purpose, they will give much more effect to our intentions than we could give by any direct action of our body.

Turning now, at least in general terms, to the probable subject-matter of our future deliberations, I need not suppress my conviction (to the well-foundedness of which a silent testimony is borne by the mere existence of this Association) that the present rank of London among centres of medical education is not altogether satisfactory to us. We must, I fear, confess that the art of teaching (for teaching, I need hardly insist, is an art) is less cultivated, less advanced, less organised, among us, than it is in many places of far inferior resources. It is notorious that that high quality of scientific work on which the progressive development of practical medicine and surgery depends is not pursued in our schools nearly to the extent we should desire,—that, indeed, as compared with what is done in even the minor schools of Germany, our annual harvest of scientific result is often so small as to be almost insignificant. If this were all, it would be humiliating enough. But it is not all. Many among us have great misgivings whether, in the mere business of educating medical students to a proper level of practical efficiency, London, as a general rule, accomplishes nearly all which, with its wealth and vast opportunities, it ought to accomplish. This, too, is the more mortifying as we must all be conscious that in the aggregate an immense amount of labour is given in London to the business of medical teaching. We cannot but feel that there is a great deal of that sort of waste of strength which either attests very bad economy of the resources, or else the existence of powerful adverse circumstances. I will not venture to say that the first sort of influence is inoperative; on the contrary, I recognise many points in which I think our internal school-economy might be improved. But it is my very deep conviction, and one which I am glad to have an opportunity publicly to express, that such amendments of detail as our schools can make (separately or collectively) in their own arrangements are only a fragment—an almost inappreciable and insignificant fragment—of the reforms which require to be effected, if London is to take its proper rank among the great centres of medical education.

In my judgment, gentlemen, there are two objects which are of quite paramount interest to all who wish to improve our medical education: first, to insist upon a very high standard

of efficiency and public spirit in all the EXAMINING BOARDS of the country; secondly, to insist upon a very great simplification, if not an almost entire extinction, of that ponderous code of detailed REGULATIONS under which now we either groan or sleep. That the importance of these objects in relation to the essential aim of our Association may not in any degree be underrated or misunderstood, I will venture a few remarks upon each of them,—necessarily, from the limit of time, restricting myself to some very broad considerations.

First, as regards our EXAMINING BOARDS. Think, gentlemen, what the Council of our College of Surgeons might have done in the last twenty-five years in promotion of medical science, if it had administered its great trust disinterestedly. Admitting to the profession annually several hundred members (sometimes, I believe, as many as 500, besides Fellows) with a fee of £22 a head, and able, I presume, to allot fully half of this very large income to the payment of a proper examining Board,—what is the course which it has taken? It has treated the examinerships in its gift as mere lucrative perquisites of its own body, best to be divided among its own members; and, with scarcely an exception, the ten oldest members of the Council have been the ten examiners of the College, sharing among them the payment I have described. The elder members of the Board have generally shown so much attachment to office that the succession of younger men has become more and more impeded; and of late, I believe, sixty years of age has been about the earliest time at which a man's turn could come to enter upon the functions and profits of an examiner at the College of Surgeons. Can you wonder, gentlemen, that medical education has languished in England, when suffering under an influence like this? As regards the mere examination in surgery, it has been bad enough that men should only be entering upon that duty at an age when, in a normal state of things, they would rather be preparing to abandon it; and I cannot but deem it to have been very mischievous, even for practical surgery in this country, that our examiners for long past years have been men from sixty to eighty years of age. But think, gentlemen, what the mischief must have been, in relation to the sciences of our profession, that during this period of unexampled scientific pro-

gress, persons in the fourth and fifth vicenniads of life have been empowered to settle, according to their own dim lights, what should be the standard of scientific proficiency for men first entering the medical profession! And this state of things, this utter corruption—for such it is, has been defended by arguments which, if they mean anything, mean that examinerships of vital importance to the strength and development of surgery and medicine, may be used as a kind of almshouse for effete members of the profession. How different things might have been if, some five and twenty years ago, our councillors there, instead of resolving to stand in chronic antagonism to the scientific interests of our profession, had but exercised the same sort of self-denial as the Senate of the University of London has exercised; had but resolved to disqualify themselves from appointing themselves or one another to be examiners; had allotted (say) two-thirds of their examination fund to the payment of separate examiners in the sciences, reserving one-third for surgical examiners, instead of jumbling all together, as at present; had put some decent limit of age even on their surgical examinerships; but, specially, as regards anatomy, physiology, and pathology, had gone on a quite new tack—had started with men then young enough to be their sons, but who were already eminent in scientific work, such men as Bowman, Paget, Busk, Quekett, Hewett, Birkett, Toynbee, Rainey, and others; and had from then till now taken care that all those parts of their examinations which grow with contemporary research should be in the hands of men fresh from the work-room. How different, I say, would be the present state of things if, twenty-five years ago, that course had been begun! How different, I may add, will be the future state of things—how different, twenty years hence, the status of our London schools in the eye of European science, if even now, tardily, a course of that kind should be determined on!

For, gentlemen, observe critically—and this not alone for the Royal College of Surgeons, but generally for all our boards—what are the effects of any abuse, either in the appointment of our professional examiners, or in the exercise of their functions when appointed. So long as incompetent men are appointed to these places, or maintained in them, it is at the expense of proper claimants; and these "proper claimants"

are, or under happier auspices would be, the very life-blood of our medical schools. To such men, still comparatively young, the examinerships would have been great prizes, great rewards, great inducements—indeed often the only possible enablements, for continuing a scientific career; but they have been wasted from their legitimate application. That, however, is only part of the injury so done to the scientific interests of our schools.

Look in this other direction:—an excessively low standard of scientific proficiency is encouraged among candidates for examination; and against the depressing and demoralising influence of such a standard it is quite impossible for any teacher to contend. The demand for first-class teaching, which of course a first-class examining board ought always to be maintaining at a maximum, falls within a hair's breadth of zero. See, for instance, what loyalty to science has long been shown, what gallant work has long been done, year after year, by Dr. Beale and by Mr. Huxley in their respective fields; and ask yourselves what special demand they, and others like them, can find in our medical schools for a quality of teaching of which any country might be proud! The teacher most in request is not the master of the science, who cares above all things for the truth in it, but the grinder who can cram the emptiest head with the pattest antediluvian answers. When high attainments are thus brought to a discount, what wonder that, with rare exception, scientific medical teaching is only incidentally cultivated among us!—cultivated just transitionally for a year or two, and then, even by our most promising young investigators, almost necessarily relinquished as impracticable! I apprehend that among our younger men there is as much disposition for scientific work as in Germany, as much disinterested love for science: in neither country will the career give wealth, nor does the man who is in earnest about science make wealth his consideration; but in Germany it will give a fair livelihood, while here, generally speaking, it will not. And the reason why it will not is, in my opinion, mainly to be found in the sort of abuses to which I have adverted. When we lament in the interest of our schools that, with very rare exceptions, medical teaching (and particularly the more scientific teaching) is not made a career, or even the leading element in a career, in London, note how those influences have told against it.

But, unfortunately, even this is not all. The case has another aspect in which the public and the profession are almost equally interested. The responsibility of admitting members to the medical profession of the United Kingdom is, as you know, trusted by the Legislature to some 19 separate bodies, some of which have no interest, or but the smallest and most indirect interest, in their own popularity as admission-boards; while others (like our College of Surgeons) depend entirely, or almost entirely, for income on the candidates whom they pass into the profession. An examining body, in the last-described financial position, is, perhaps, at the best, apt to be a somewhat partial judge whether its diplomas may not be too easy of attainment. And yet, according to the constitution I have described, it is necessarily, as regards income, competing with other bodies similarly circumstanced,—competing, gentlemen, for the patronage of candidates. I am afraid we must not expect that, as a general rule, the young patrons will prefer the institutions which have the most genuine and most searching examinations. To their honour be it said, they will sometimes do so; but we must not wonder if it be only to a small extent. In looking over the list of last year's registrations under the Medical Act, so far as some of our London bodies are concerned, I count that 345 diplomas of membership of the Royal College of Surgeons were registered in the year, and 191 licences of the Apothecaries' Company, but only 12 degrees derived from the University of London. Now, I believe there can be no difference of opinion in this meeting as to which of the three qualifications I have named best represents the standard of knowledge with which a man should enter upon the medical profession; but I need not observe that if the University of London had to maintain itself by its medical degrees, it would soon have to desist from the competition. Gentlemen, the question suggests itself, what becomes of the public, what of the profession, if admission to the Medical Register be made too easily attainable? Our profession often complains that its ranks are numerically overcrowded; and yet, sometimes, I am sorry to say, also the public complains that qualitatively a want has been ill-supplied. Have these facts anything to do with such defects of examining boards as those to which I invite your attention? Surely,

it is impossible not to connect them. Look, gentlemen, at our system of fragmentary professional qualifications — so different from that which obtains in other civilised countries: surgeons, who may be totally untested in medical knowledge; physicians and apothecaries, who may be totally untested in surgical knowledge; yet, both indifferently on the Medical Register, and virtually free to practise all departments of the art. Let me read to you a short extract from a very interesting summary in the *British Medical Journal* of last year on the composition of the medical profession :—"One-tenth of the whole number of practitioners of the country are practising under a diploma given without examination in medicine, materia medica, or botany, and without any kind of clinical test whatever—that of the Royal College of Surgeons in England. Nearly one-fifth are practising with a surgical diploma only (obtained from various sources) which would not be accepted by the Poor-law Board, by the authorities of the army and navy, or others, as alone qualifying them to treat the persons under their charge; and which would not allow them to recover fees in a court of law for attendance or medicine in any other than purely surgical cases. Of course only a small proportion are practising pure surgery. In respect to medical degrees, the numbers are not quite so large; but there are 577 practitioners holding only the diploma of the Apothecaries' Hall of London, which does not imply of necessity any knowledge of surgery, or any adequate knowledge of anatomy. They are equally disqualified from holding any public appointment, and would be unable to recover for surgical attendance in any court of law. As a matter of law, the one in practising surgery and the other in practising medicine, are doing that which the law does not recognise, and which their legal status does not justify..... It will assuredly not fail to attract very serious attention, that upwards of 5000, out of a total of 20,000, practitioners, are not qualified by law to practise more than one department of their profession."

And, as the sufficiency of some of our most frequented examining boards may seem called in question by certain of the remarks which I have made, let me remind you that our public services of the army and navy have not been able to

recognise the guarantee of our civil examining boards as sufficient for their respective purposes. They have had to appoint special pass examinations for their candidates, even though those candidates are on our Medical Register as competent to practise on the civil population; and, gentlemen, not unfrequently it has happened that this re-examination has been "a pluck." I regard this fact as so extremely significant that I beg to bring under your particular attention the last notice of it which I read in print. It was in THE LANCET last summer, and here was the state of the case as then reported to the Medical Council:—The Army Board had had before it for examination in 1866 fourteen candidates who were members of our Royal College of Surgeons, and four of these failed to pass the re-examination. I observe, however, that a happier batch of candidates from our Royal College was before the Army Board in February last, when five members (all who were then examined) succeeded in passing the test. The Navy Board had had before it in 1866 six candidates who were members of our Royal College, and their fate (arranging them in order of merit) was as follows:—No. 1 passed "good," but it is noted that he had failed twice before; No. 2 passed, "indifferent, and deficient in anatomy;" No. 3 rejected, "ignorant of anatomy and surgery;" No. 4 rejected, "ignorant of anatomy and surgery;" No. 5 rejected, "ignorant of anatomy, surgery, and practice of medicine;" No. 6 rejected, "ignorant in all branches."

Gentlemen, I told you that in the scientific interests of our medical schools it is a first essential condition that you should insist upon a very high standard of efficiency and public spirit in the examining boards of the country. I venture to think that, besides proving that position, I have shown you that some other interests are concerned as directly as the interests of science, and indeed, referring to such statements as I last quoted, that the whole credit of our profession with the public is at stake, if any inefficiency of examining boards is to be tolerated.

The remaining point on which I undertook to say a few words (and they shall be few) relates to the code of REGULATIONS under which the work of education has to be conducted. I complain of them as ponderous and futile, and I believe them

to rest altogether on a basis of wrong principle. The State, in licensing a man to practise medicine, need, I think, trouble itself only with two questions : (1) is the candidate of an age for undertaking civil responsibilities ? and (2) is he competent according to a proper standard of competency ? The first is a matter of documentary evidence ; the second is for the examining authority to measure. For this, and this only, is an examining authority wanted ; and the perfection of such an authority would be shown by its being able to settle this, quite conclusively and finally, without reference to any other considerations whatsoever.

Now, gentlemen, turn from these general principles, which I dare say no one will question, and call to mind the regulations to which our pupils are subject ; not, observe, as to the quantity of knowledge they shall have attained, but as to the exact mode in which the attainment shall have been made. See, in some cases, how subordinate a part is held by the examination, which in a perfect system would be (except age) the sole condition ; and see how very much has to be settled besides the candidate's possession of knowledge—how very many conditions of a really inessential and frivolous kind. The regulations are so well known to you that it would be idle to discuss them here at length, but I take at random a few points in order only to illustrate what I mean. Botany :—how good a thing it might often be that the student had previously learned it ! Perhaps he has done so. He may have spent half his boyhood at it in the fields. But *cui bono ?* If he were a second Linnæus, it wouln't help him with the Apothecaries' Company. Whether he knows or does not know the subject beforehand, equally to lectures he must go during his "first year" in a "recognised medical school"; and the lectures must be "in the summer session"; and he must take care to give timely notice to the examining court that he is in attendance on these lectures. This sort of minuteness and superfluity pervades our whole system. A professor may have written a book—say of materia medica, or surgery, or forensic medicine—a book which virtually contains all his lectures, except perhaps the "hums" and the "haws"; yet the student may not compound by buying, or even by both buying and reading, the book. Whatever economy of money, time, and

temper this compromise would represent to him—whatever better digestion he may have for written as against oral teaching, *nolens volens* he must hear, or at least must bodily attend, the speaking of this printed book, or of some exactly equivalent discourse. And all this, of course, "in a recognised medical school." And some courses of lectures must actually be attended more than once—perhaps identically the same lectures repeated: scarcely necessary, one would think, if lectures answer their purpose; and, on other grounds, still less necessary if they don't. And the College of Surgeons very particularly rules with regard to teachers (what it has not yet found expedient with regard to examiners) that no one shall be deemed competent to certify respecting any two branches of the curriculum. Gentlemen, I invite you to judge all this sort of thing in the light of a principle universally recognised in this constitutional country as the basis of all common relations of citizens to government—that *every unnecessary law is an evil.* Observe, too, gentlemen, if you please, that I have barely alluded to the machinery by which the absurd practice of compelling bodily attendances is maintained: the pedagogic census of the lecture-room, the voluminous schedules, the reiterated certificates, the manifold and exactive central registrations: wearisome necessities, if necessities they were; but how intolerable and oppressive a nuisance, when the bodily compulsion for which they provide is itself altogether illusory.

There are two points of view in which I strongly object to it all. First, as regards the student. Why should he be forced to learn in a particular way, or at a particular time, or with particular apportionments of dose? The essential thing is that he should *know.* Let him choose his own way of learning. If the examining board is an effective test of knowledge, surely it is above all things his interest to qualify himself in the best mode he can. If the regulations represent that best mode, he will need no compulsion to follow it. If they be not the best mode, *à fortiori* let them go. Judge the question by the analogous case of a recruiting officer for the army. He does not require a long schedule of his man's antecedents of diet—what oatmeal he ate in his childhood, and what eggs afterwards, and whether his beer was from "re-

cognised" publics, and what previous notice was given of his several meals, and which were taken sitting and which standing. No: he makes his estimate of the bumpkin, such as he is, goes with thorough care over all his points, strictly judging his thews and sinews, and accepts or rejects him accordingly. The candidate for a medical licence in any country has, I think, a moral right to demand from the State this sort of examination of his merits—has a claim, I think, to be let stand or fall according to the essential fact whether he is competent to practise his profession, not according to inessential and trivial circumstances of how or when he has learnt this or that part of his business. He may fairly make appeal to "results"; and if regulations are thrown into his teeth, he may fairly answer, as Mrs. Glasse did to Scholasticus, "the proof of the pudding is in the eating."

My principal reason, however, for adverting to the matter on this occasion is that the system, in my opinion, exercises a depressing and deleterious influence on the mode of medical teaching. It tends entirely to spoil the natural competition of schools and teachers, both as with one another and as against books. No school is permitted to have anything like an individual character; every step must be in exact pattern appointed by the authorities; no teacher is fairly put on his mettle to show that oral teaching is better then print. There is something in all this which looks like what in commerce is called "protection;" but we may see here, as people have long seen in other markets of supply and demand, that "protection" may be as pernicious a gift to the "protected" as it is an unjust and impolitic treatment of the public. Our "protected" interest of the lecture-room is indeed stimulated to numerical increase; every school, whatever its aptitude, is forced to have every possible lectureship; men who would much rather be at other work must perforce lecture on subjects to which they are not inclined; and thus, as I need hardly observe, the profuse competition which is forced is the reverse of a stimulus to excellence, and one more heavy discouragement to the man who would make medical teaching his career. In the interests of medical teaching, properly understood, as also emphatically in the general interests of our profession, and in the still larger interests of the public, what I would wish to see as the system

of our medical schools would be an entire freedom of choice; that no one should enter them upon compulsion; that every one who enters should enter only because the commodity which he wants is better supplied to him in that market than in any other market. And similarly with our individual lecture-rooms, I would wish that no one should encumber our benches who comes otherwise than by free will, coming for something which neither books nor unassisted observation can give him with equal facility and completeness.

If asked where I would draw my line in this matter of regulations, I answer—subject to one very important qualification—that I would have no line. *If I could assume the thorough efficiency and disinterestedness of our examining boards*, I may say for myself that I would be well satisfied to look to the *stringency of the examination as a substitute for all regulations whatever*, and would admit to be examined, with a view to registration, *anyone who had arrived at the age for undertaking civil responsibilities*. Looking to the University of London as incomparably the best-constituted of our examining boards, I most sincerely wish that it could be induced to try the experiment of examinations conducted upon that principle. "But," I may be asked, "would there be no chance of passing candidates who had not been properly educated?" I answer by another question: What is the object of the examination, but to test whether there has been "proper education"? If the examination cannot test that, what is it for? If it can test that, why continue the regulations? I can suppose the belief of those who enact them that they are advantageous to the student, and enable him to attain higher competency in equal time, or equal competency in shorter time, than other arrangements which he might for other reasons prefer; but, as I have already said, if an uniform test of competency were strictly and skilfully applied, surely students, if that supposed advantage be real, would not fail to discover it. Human nature is commonly believed capable of knowing on which side its bread is buttered; and there seems no particular reason why medical students, if option were allowed them, should not choose what is manifestly to their advantage. The real difficulty, I suspect, lies in a very different direction. The regulations, I can well conceive, may represent the misgivings of those who have

enacted them as to the sufficiency of their powers of examination—misgivings which assuredly in some cases are well founded; and thus far, they are forced upon our acceptance as part of the bad system against which I have raised my protest; innumerable vexatious rules, to supplement ineffective examinations; stones given us when we ask for bread, and empty forms instead of living energy.

Gentlemen, I must both apologise to you for the length at which I have spoken, and thank you for the kindness with which you have listened to me. The views which I have expressed, and which I am glad to know are shared abundantly by men of whose concurrence I may be most proud, are, I well know, not views on which any effective action can now be taken by our Association. Our proceedings at present are of detail. But I think I should not have done justice to the position in which you have done me the honour of placing me, if I had not, at this first opportunity, expressed the very strong opinions which I entertain as to what are the real stumbling-blocks in the way of medical education in London. And I will venture to add, that however hasty (from unavoidable causes) may be the form in which my opinions are expressed, the opinions themselves are at least so far not unworthy of your acceptance that they are the results of long experience and very earnest consideration in the matter.