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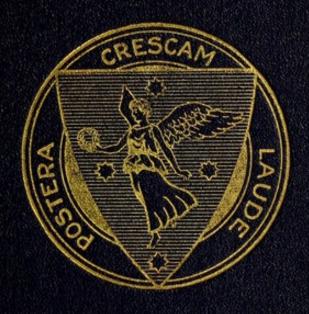
Royal College of Physicians

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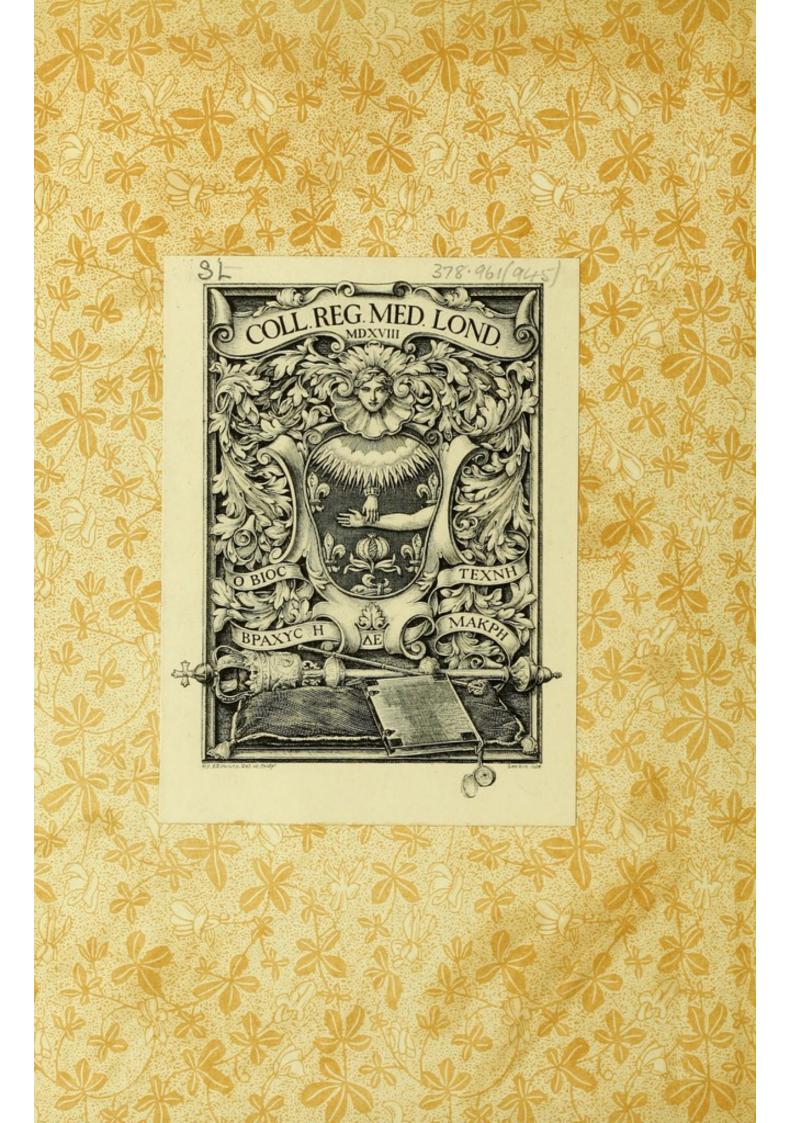
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UNIVERSITY OF MELBOURNE MEDICAL SCHOOL JUBILEE 1914





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UNIVERSITY OF MELBOURNE MEDICAL SCHOOL JUBILEE, 1914.







SIR ANTHONY COLLING BROWNLESS, K.C.M.G., M.D., LL.D. Chancellor of the University.



UNIVERSITY OF MELBOURNE MEDICAL SCHOOL JUBILEE 1914.



MELBOURNE :

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UNIVERSITY OF MELBOURNE MEDICAL SCHOOL JUBILEE, 1914.

A History of the Medical School

by

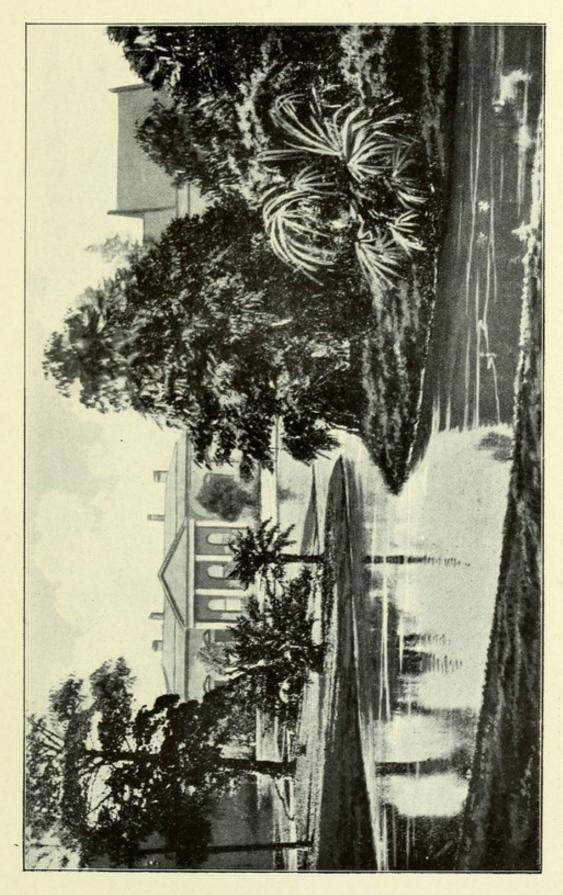
PROFESSOR SIR HARRY ALLEN, M.D., LL.D.,

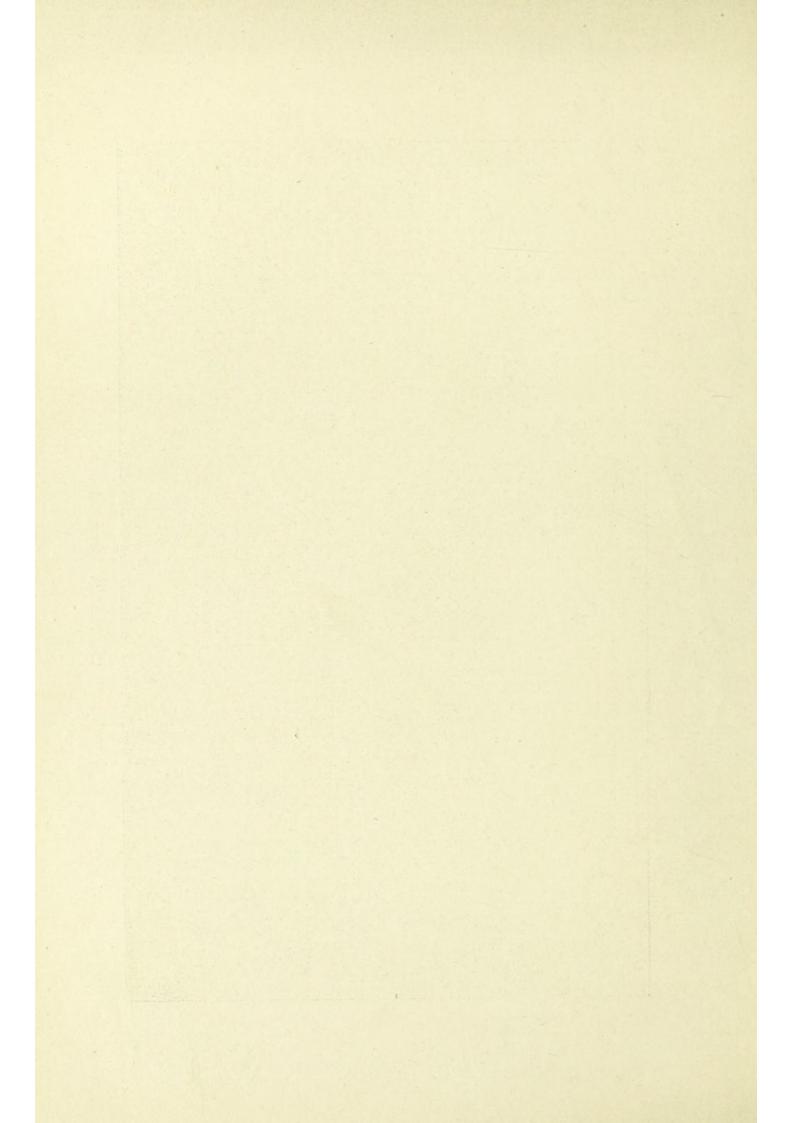
Dean of the Faculty of Medicine.

The University of Melbourne had been in active existence for seven years when its Medical School was opened on the 3rd March, 1862. The parent Institution encountered the same stages of doubt and difficulty through which the infant School slowly fought its way. On the 7th January, 1853, eighteen months after the District of Port Phillip was separated from New South Wales and converted into the Colony of Victoria, a Bill to establish and endow the University passed its second reading in the unicameral Legislative Council. A fortnight later, on the day before its third reading, the Melbourne "Morning Herald" noted that the Bill seemed to excite little interest, though "with few exceptions the most important that has yet occupied the attention of our Legislative Council," for "A University ought to be . . . the nursery of great men, of those on whom, whatever be our form of government, our true permanent welfare depends." The Bill was introduced by the Auditor-General, Mr. H. C. E. Childers. The draft of the Bill in his handwriting is in the possession of the University. Sir Anthony Brownless, in his Annual Address as Chancellor in 1896, said that "to the late Mr. Childers, therefore, the University of Melbourne owes its existence." Much gratitude is also due to the Governor, Mr. C. J. La Trobe, and to the Attorney-General, Mr. W. F. Stawell (afterwards Sir William Stawell), who was a member of the first University Council and some time Chancellor. Within a few months after the date of the Act of Incorporation, the original nominated Council of the University assembled, and Mr. Justice Redmond Barry was elected Chancellor and Mr. Childers Vice-Chancellor. In the following year the foundation-stone of the main building was laid; and on the 13th May, 1855, the inaugural ceremony was held in the Old Exhibition Building on the site where the Mint now stands. Sixteen students were then matriculated without examination, in order that classes might at once be possible. Lectures commenced in the same place three days later, but the University buildings were not opened till the following October. So, in the proud humility of our motto, Postera Crescam Laude, the little band of four Professors—Wilson, Hearn, McCoy and Irving—essayed to give actuality and living force to the new University.

Nearly two years earlier, in December 1852, the year following that in which gold was discovered in Victoria, Dr. Anthony Colling Brownless came to the Colony and settled in Melbourne, He had been a distinguished student of St. Bartholomew's Hospital, and obtained the diploma of M.R.C.S. in 1841. Subsequently he pursued his studies for five years, partly in his old Hospital where he served as dresser for two years, and partly in the University of Liége; and in 1846 he graduated as M.D., St. Andrew's, and commenced practice in London, becoming Physician to the Metropolitan Dispensary and to the Royal General Dispensary, and for a time "Teacher of Practical Midwifery" in St. Bartholomew's. Soon after his arrival in Melbourne he was elected Physician to the Benevolent Asylum, and in 1854 to the Melbourne Hospital, where he continued in active service for twelve years, before his retirement with the rank of Consulting Physician.

On the 16th June, 1855, Dr. Brownless was gazetted a member of the University Council, and at once devoted his energies to obtain the establishment of a Medical School. The Chancellor was as zealous to create a School of Law; and on his motion the Council in December. 1856, affirmed its desire that lectures on Law and Medicine be delivered in the ensuing year. The Chancellor and Dr. Brownless were requested to draft the details. Within a month a scheme for the institution of a Faculty of Medicine was submitted by Dr. Brownless, providing for a Professor of Anatomy, Physiology and Pathology, a Professor of Materia Medica, Therapeutics and Dietetics, and a staff of lecturers. Sufficient funds were not available, so Dr. Brownless advised delay, and on behalf of the Council he and Dr. Godfrey Howitt waited on the Chief Secretary, and asked for a sum not exceeding £21,000 for the erection and equipment of the necessary buildings. The Chief Secretary was at first sympathetic, but finally replied that the members of Government concurred in opinion that the time had not arrived for initiating the project of a Medical School. At this stage, Mr. Childers, now Minister of Trade and Customs (and subsequently, in 1857, the first Agent-General) entered as Vice-Chancellor into a lengthy correspondence with Professor Paget (afterwards Sir James Paget, Bart.), who





advised that after a preliminary examination there should be a course of professional study of four years, the first being dispensed with if candidates had undergone a certain amount of scientific training either before or after the preliminary examination.

On the 31st May, 1858, Dr. Brownless became Vice-Chancellor, succeeding the Hon. W. C. Haines, who followed Mr. Childers in that office for a short period. He led another deputation to Government without success. The fortunes of the University were low, for only two students presented themselves at the matriculation ceremony in that year. In 1850 Dr. Ralph, subsequently for a long time President of the Microscopical Society of Victoria, was appointed Collector of Anatomical, Physiological, Pathological and Botanical specimens; and after a time this work was supervised by a committee of Council, consisting of the Vice-Chancellor, Sir James Palmer, Dr. Howitt and Dr. Cutts. Sir James Palmer was the Speaker of the Legislative Council in the old unicameral period, and the first President of the Legislative Council in the bicameral times following the proclamation of the constitution in 1855; but he was also a qualified medical practitioner, and while resident in Golden Square, London, he edited the works of John Hunter, 4 vols., 1837. He also practised for some time in the early days of Port Phillip. He was Mayor of Melbourne in 1846, and as such he laid the foundation-stone of the Melbourne Hospital. He was President of the Hospital from 1865 till his death in 1871, and his portrait hangs in the Board-room of the Hospital. It is interesting to recall that he was grand-nephew of Sir Joshua Reynolds.

In 1850 two deputations were sent to the Chief Secretary, and again the primary answer was sympathetic, but ultimately no hope was held out by reason of the financial condition of the country. During the following year the Council reduced its request to £12,000, and sought the intervention in Parliament of Mr. Michie (afterwards Sir Archibald Michie) and Mr. B. C. Aspinall, the famous counsel, but without success. In 1861, the Medical Society of Victoria took the matter up warmly, and its representatives met the Council and afterwards the Medical School Committee, now a defined body, consisting of Dr. Brownless (Vice-Chancellor), Sir Francis Murphy (the first Speaker of the Legislative Assembly, an alumnus of Trinity College, Dublin, and a Member of the Royal College of Surgeons of England, though retired from practice), the Hon. W. C. Haines (the first Premier of Victoria, who had practised as a Surgeon in England), Dr. Godfrey Howitt (M.D. Edin., once honorary physician to the Nottingham General Hospital and County Infirmary, a botanist and entomologist of decided merit, to

whom the University owed the Howitt Bequest), Mr. J. P. Rowe (a qualified medical man, then engaged in pastoral pursuits), and Dr. W. H. Cutts (M.D. Edin., who had also studied in the University of Paris), Physician to the Melbourne Hospital, and Founder of the Victorian Medical Benevolent Association. This Committee, after consultation with the delegates of the Medical Society, approved the scheme submitted by Dr. Brownless in 1857, and advised that the School be established without further delay, but on a modest scale, the cost of buildings not to exceed £4000; and further suggested a special examination for legally qualified medical practitioners who desired to obtain the Degrees of M.B. and M.D. The Council published an announcement that lectures would soon be instituted. The Professorial Board, by request, framed Regulations for a course with five years of study and five examinations, on a severely scientific basis, including Greek, Latin, Geometry, Geology and Palaeontology, with Natural Philosophy extending into the third year, the object of the Board being to obtain the nearest approach to the degree of B.A. as a condition precedent to a medical degree. This course was adopted, together with Special Regulations for the examination of practitioners, under which Drs. G. Graham, C. McCarthy, L. J. Martin, H. L. Atkinson, E. Barker, Joseph Black, J. E. Neild and G. H. Fetherston became graduates of the University.

But in November, 1861, the Chief Secretary again said that on account of the falling off in the revenue, funds for the buildings could not be provided. The Vice-Chancellor then suggested a general scheme of retrenchment of University expenditure so as to obtain funds for the maintenance of a Medical School; and this advice was carried into effect, the Lecturers in Law (Mr. R. A. Billing and the Hon. H. S. Chapman) and the newly-appointed Lecturer in Civil Engineering (Mr. James Griffith) giving up part of their salaries.

Dr. John Macadam, who had been lecturing privately, was appointed Lecturer on Chemistry and Practical Chemistry. He was M.D. of Glasgow and Fellow of the Faculties of Physicians and Surgeons, public analyst, a brilliant speaker and sound practical teacher, a member of the Legislative Assembly, sometime Postmaster-General, for many years Honorary Secretary of the Philosophical Institute of Victoria (afterwards the Royal Society), and Health Officer of the City of Melbourne. He began his classes on the 3rd March, 1862, in his own laboratory behind the Public Library, providing his own apparatus and materials. The Chancellor, who was visiting England, was empowered to ask the assistance of Professors Paget and Owen (Sir James Paget and Sir Richard Owen) in choosing a Professor of Anatomy, Physiology and

Pathology. Paget himself had been Professor of Anatomy, Physiology and Pathology at St. Bartholomew's Hospital. The Chief Secretary, when asked to provide £6000 for the necessary buildings, suggested postponement; but the Council, undaunted, sent £500 to the Agent-General for the purchase of books and preparations by the new Professor, and finally adopted Regulations for Degrees in Medicine and Surgery, striking out much of the Science work, in spite of a protest from the Professorial Board.

The curriculum for the Degree of M.B. may be briefly described as follows. After passing the matriculation examination, which had attained a high standard, in any six of the nine subjects, candidates were to fulfil five years and pass five examinations. The first year included Greek, Latin, Chemistry and Practical Chemistry; the second year Botany, Comparative Anatomy and Zoology, Materia Medica and Therapeutics, Descriptive and Surgical Anatomy and Dissections; the third year Anatomy, Dissections, General Anatomy, Physiology and Pathology, Surgery, Surgical Hospital Practice and Practical Pharmacy; the fourth year General Anatomy, Physiology and Pathology, Dissections, Medicine, Obstetrics and Diseases of Women and Children, Clinical Surgery, Medical Hospital Practice and Practical Midwifery; the fifth year Medicine, Surgery, Forensic Medicine, Clinical Medicine and Medical Practice. This Course was adopted in May, 1862, and for that time was remarkably complete and severe. The courage of the Council is shown by the fact that the University then numbered only 92 students attending lectures in all the Faculties, and of these only 37 were matriculated. In 1862 only sixteen students matriculated for all purposes. The population of Victoria was under 100,000 when gold was discovered in 1851, rising to 364,000 in 1855, when lectures commenced in the University, and to 554,000 in 1862.

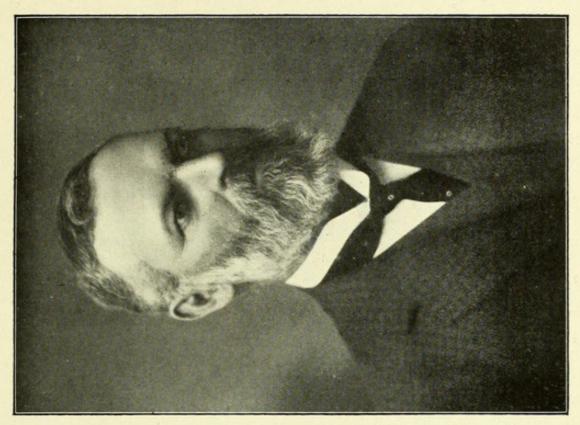
In October, 1862, the Under-Treasurer wrote that no funds were available for the buildings; but the Vice-Chancellor obtained from the Hon. Mr. Haines, then Treasurer in the O'Shanassy Administration, a promise to support a vote of £6000, if the Board of Lands and Works would consent to place such sum on its Estimates. This consent was soon obtained.

After long and interesting correspondence, Professors Owen and Paget finally selected George Britton Halford, M.D. St. Andrew's, M.R.C.S. Eng., formerly a student at St. George's Hospital and House Surgeon to Westminster Hospital, then Lecturer on Anatomy in the Grosvenor Place School of Medicine, London, to be the first Professor in the new School. Dr. Halford was characterised by the "Lancet" as

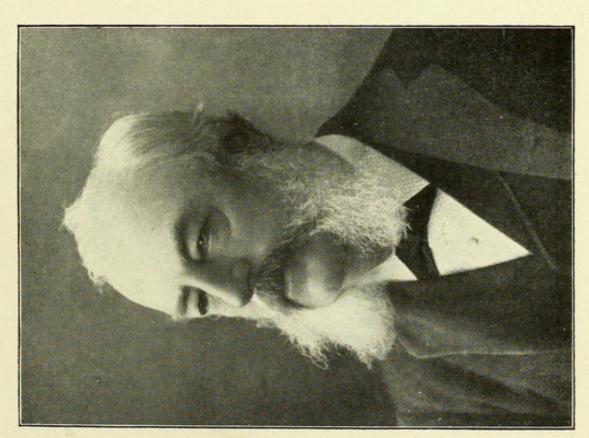
an able, industrious and skilful teacher. His experiments on the heart had gained the close attention of leading physiologists, so that Billing in his "Principles of Medicine" declared that Halford was born a physiologist. The new Professor at once gained the commendation of the Chancellor by his energy in collecting books, models, drawings and preparations; and afterwards, in Melbourne, he proved himself a man of marked personality and great directness of character,—altogether a man of the greatest value to the young Medical School.

Matters now progressed rapidly. The Chemistry lectures of 1862 were supplemented by the appointment of Mr. Richard Eades, M.A., M.B. Dublin, M.R.C.S. Eng., to lecture in 1863 on Materia Medica, Therapeutics and Medical Botany. Mr. Eades was an alumnus of Trinity College, Dublin, and afterwards studied in Paris, and became Lecturer on Materia Medica in the Park Street Medical School, and afterwards at the Richmond Medical School in Dublin. He was an active member of the Philosophical Institute of Victoria in the early days, and was Physician to the Melbourne Hospital from 1858 to 1866, when he resigned to become Health Officer to the City of Melbourne in succession to Dr. Macadam. Prior to his election as a member of the Medical School staff, Mr. Eades had for some time been lecturing privately, but the Council resolved not to recognise extra-academical teaching in medical subjects.

The University architects, Messrs, Reed and Barnes, proposed a site and submitted plans for the Medical School, and in January, 1863, application was made for about two acres of the present site, then an unappropriated part of the reserve for purposes subsidiary to University education. The reserve included not only the block now pertaining to the affiliated colleges, but ran down the Madeline Street frontage to Grattan street. The Independents and the Baptists objected to State aid to religion, and declined to accept the area that would have been allotted to them. It was in this area that the site for the Medical School was chosen. Mr. Duffy (afterwards Sir Charles Gavan Duffy), the President of the Board of Land and Works, replied that a grant would be issued when the buildings were approaching completion. Professor Halford had reached Melbourne on the 23rd December, 1862, and in January, 1863, the Vice-Chancellor submitted new plans prepared under the direction of the Professor and himself. These were generally approved, but when contracts were called for, the cost was found excessive. The Council then at the instance of Sir Francis Mitchell resolved to separate the building practically into two parts, one for Chemistry, with Materia Medica and Forensic Medicine, the other for

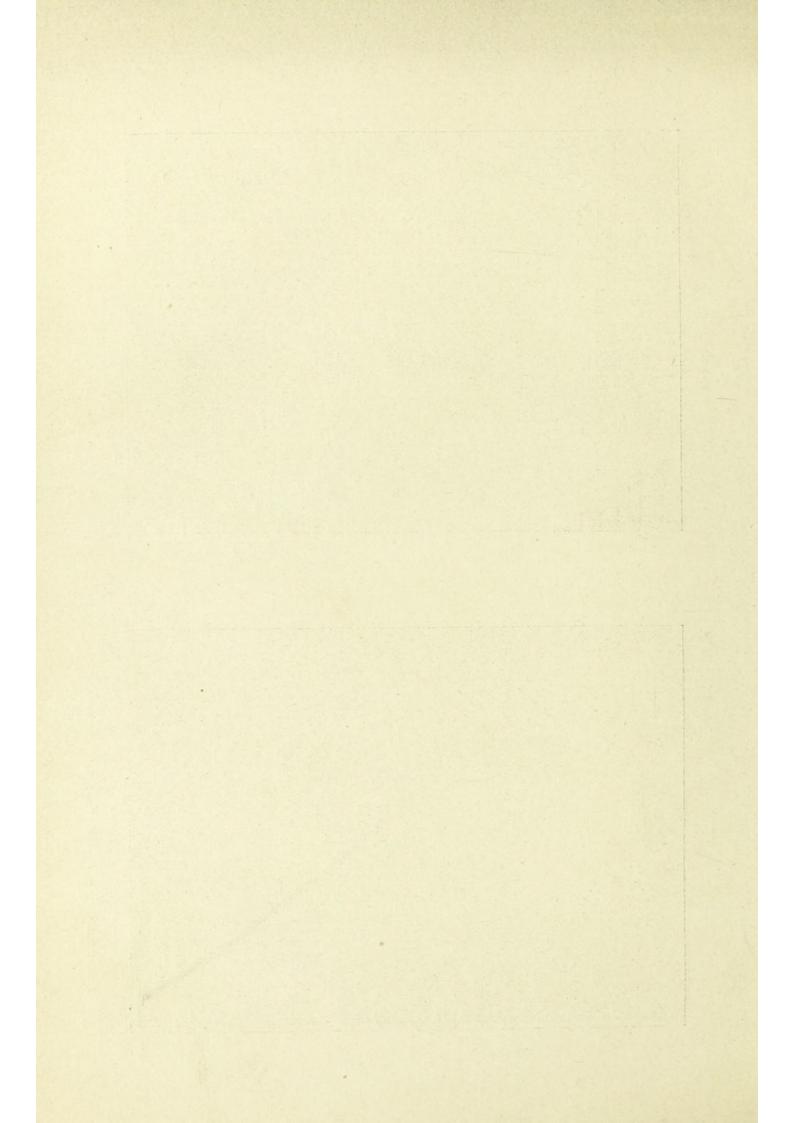


PROFESSOR SIR HARRY ALLEN Dean of the Faculty of Medicine.



PROFESSOR HALFORD.

Late Dean of the Faculty of Medicine.



Anatomy, Physiology and Pathology, with Medicine, Surgery and Midwifery. Several plans were submitted by the architects, of which one was chosen on the motion of the Hon. T. T. a'Beckett. At this time, the first Honour List of the first year in the nascent School was submitted in the Annual Report, Patrick Moloney being awarded a First Class, with the Exhibition in Classics, and William Carey Rees a Second Class, with the Exhibition in Chemistry and Mineralogy. The only other member of the original class, A. Mackie, afterwards a Presbyterian Minister, also obtained Honours.

On May 1st, 1863, Professor Halford delivered his introductory lecture before a large audience; and, contrasting the puny band of teachers and students with the greatness of their aspirations, he urged them to make that day a Crispian day, to work as did those of old, so that each in time to come

"May stand a tip-toe when this day is nam'd."

By this time plans had been adopted and tenders invited for the new buildings; but the Government had not given express authority for the expenditure of the £6000 voted. The Council determined that classes should be held as promised, so a shed was erected in the yard of Professor Halford's residence in Madeline Street, and here the first dissecting class in Australia commenced work, with three second-year students—Moloney, Rees and Mackie,—two practitioners also joining the class—Drs. Neild and Fetherston. Those who are curious as to the standard and style of the teaching given in these early days may refer to Professor Halford's lectures on the physiology of the heart, published in the "Australian Medical Journal" for August, September and October, 1864. The practical character of the examinations is shown by the papers published in the A.M.J. for 1864, pp. 370 et seq.

In July, 1863, a deputation waited on the Hon. the Treasurer, who said that the matter rested with the Commissioner of Works; and the Commissioner, though desirous to consent, would not decide till he had consulted the Cabinet. Still undaunted, in spite of all difficulties, the Council proceeded to make arrangements for the work of Third Year Students. For this, a Lecturer on Surgery was necessary, and the choice of the Council fell on Edward Barker, M.D., Melb., F.R.C.S. Eng., Senior Surgeon to the Melbourne Hospital, an old pupil, House Surgeon and Operative Assistant of Mr. Liston in the North London (University College) Hospital. Dr. Barker was at his prime a most capable surgeon, his professional library was the best in Melbourne, and he rendered good service as agent for the New Sydenham Society. His introductory lecture, published in the "Australian Medical

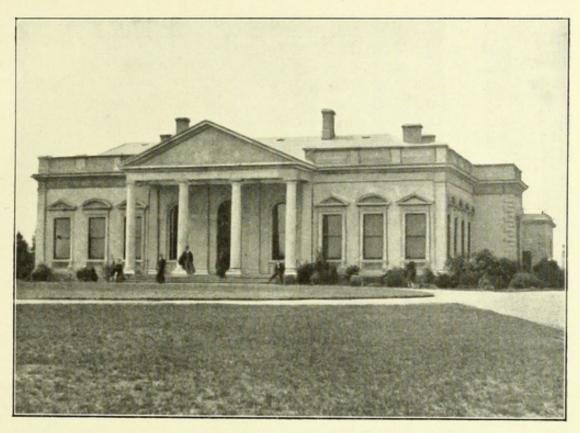
Journal" for 1864, p. 152 and p. 180, suffices to show the width of his learning.

In August, 1863, the requisite authority from the Government was obtained, and contracts to the amount of £5700 were accepted for the building and fencing of the Medical School. The School was a quadrangle of brick and stucco, in domestic style, with an Italian portico adorned with four fine pillars of solid sandstone. This portico was one of the beauties of the University grounds till it was ruthlessly destroyed in 1911. Fine photographs of it may be seen in the Medical School Library. On one side of the quadrangle was the dissecting room, 52 x 25, with a lecture room 35 x 25 and accessory rooms; on the other side the Chemistry Theatre, a laboratory 24 x 25, a balance room 15 x 10, a library 16 x 25 and a museum 26 x 25. The dissecting room was made twenty feet shorter than Professor Halford proposed, as Sir Redmond Barry (knighted in 1860) and the Council thought the plans unnecessarily large for the classes that would assemble. Time was soon to falsify these fears.

On the motion of the Vice-Chancellor, the Council in March, 1864, sent a deputation to the President of the Board of Lands and Works, to ask for a grant of the block of ten acres south of the Medical School, resumed for purposes subsidiary to University education. The Council proposed that this land should be made the site of a Hospital in immediate connection with the School. Parliamentary opinion was not favourable; and in the same month the Legislative Assembly ordered a return showing the cost to the Colony of each Medical Student who had matriculated or was then studying at the University. The Council sent a diplomatic reply.

In 1864 the Melbourne Hospital now opened its arms, it is said not very warmly, to receive the first class of Third Year students, Rees, Moloney and Mackie. The Hospital then included the East Wing (1846), the Centre block (1854), the West Wing (1857), and the outpatient department (1861).

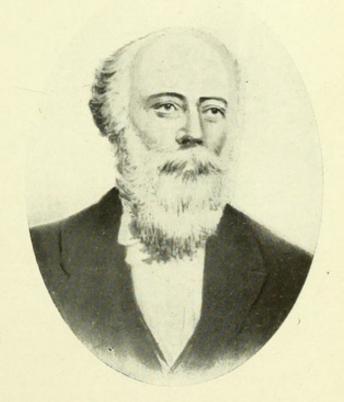
On April 2nd the Annual Commencement of the University was held in the Anatomy Theatre of the unfinished buildings. In the same month provision was made for the work of the fourth year by the appointment of the first Lecturers on Medicine and on Midwifery and Diseases of Women and Children. James Robertson, M.A., M.D. of Marischal College, Aberdeen, brought to the Chair of Medicine the conscientious care and thoroughness of the Scottish School, with a store of learning that ever increased; and though during his fifteen years'



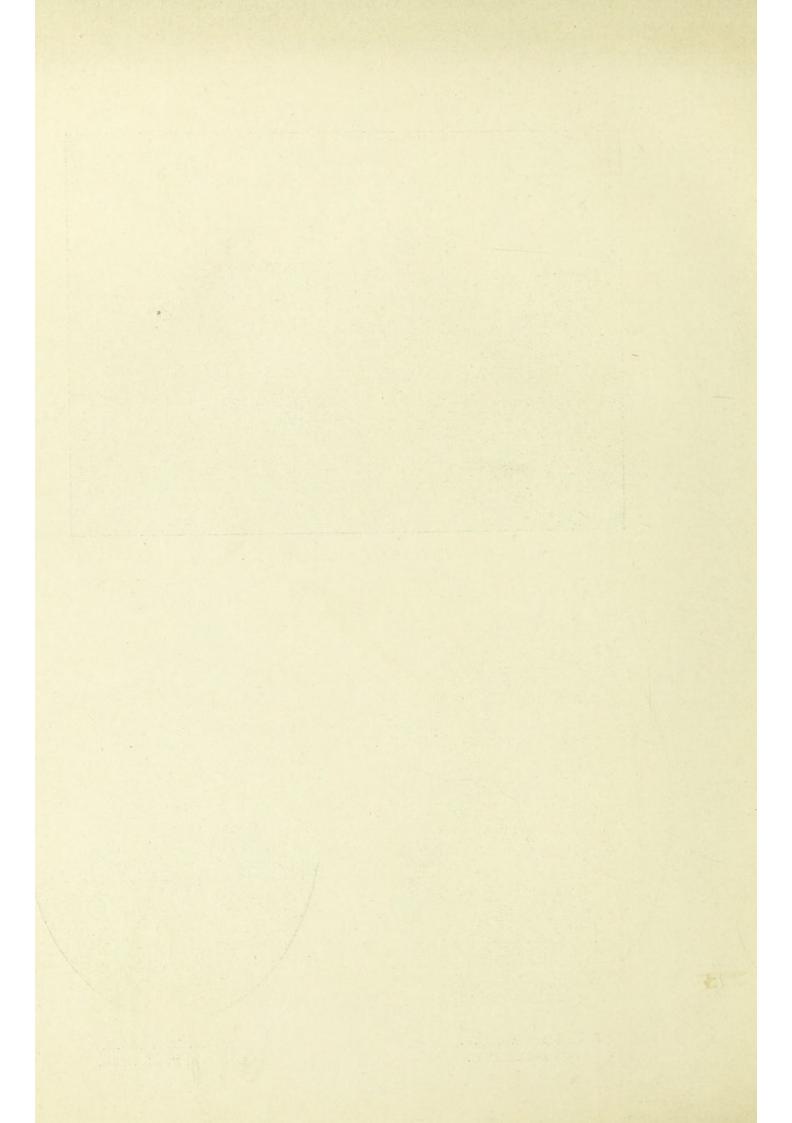
MEDICAL SCHOOL (ABOUT 1870).



JOHN MACADAM, M.D. Lecturer on Chemistry.



RICHARD EADES, M.B. Lecturer on Materia Medica.



tenure of office many students grumbled at his cautious methods, none could follow his clinique without learning invaluable lessons. Richard T. Tracy, M.D. Glasg., L.R.C.S.I., was a brilliant Irishman, then perhaps the leader of the medical profession in Victoria, one of the founders of the Lying-in Hospital (now the Women's Hospital), famous for his successful ovariotomies, the first of which was done in the month preceding his appointment to the chair of Obstetrics.

In May, 1864, the Medical School buildings were completed, and it has been thought advisable that the celebration of the Jubilee of the school should be associated with this definite stage, rather than with the homeless history of the two preceding years.

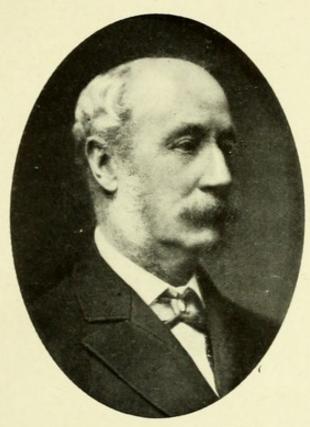
Early in 1865, after one year's experience of hospital practice and senior dissections, the medical students petitioned that they might have some vacation between Easter and December; and, looking ahead, they prayed that steps be taken to obtain recognition of Melbourne Medical Degrees by the Examining Boards in the United Kingdom. In preparation for the work of the fifth year, James Edward Neild, M.D. Melb., L.S.A., was appointed Lecturer in Forensic Medicine. Mr. Neild came to Australia in 1853, after being for a time Medical Officer to the Rochdale Infirmary. He took the Degree of M.D. Melb. under the Special Regulations in 1864. Dr. Neild devoted a large part of his energy to dramatic and musical criticism in the lay press, over the pseudonyms of Christopher Sly, Jacques, Tahite, etc. As chief forensic expert assisting the City and District Coroners, he had a very large practical experience. He was for many years Librarian of the Medical Society of Victoria, President in 1868, and Hon. Secretary from 1875 to 1879. He was Editor of the "Australian Medical Journal" from 1862 to 1879, one of the founders of the Victorian Branch of the British Medical Association in 1880, and repeatedly received from the medical profession expressions of thanks for his great services. The Annual Commencement of 1865 was held in the Anatomy Theatre of the Medical School, and Professor Halford now began to impress on the Council the necessity of appointing a Demonstrator. He was advised to be content with Prosectors for the time being. The three senior medical students addressed the Professorial Board, urging that provision be made for proper hospital instruction at convenient times.

In September, 1865, Dr. Macadam died suddenly, aged only 38. Mr. John Drummond Kirkland, then a medical undergraduate, who had been for many years the efficient assistant of Dr. Macadam as Government Analyst, was appointed Lecturer on Chemistry in his place. Mr. Kirkland afterwards graduated as Bachelor of Medicine, and proved

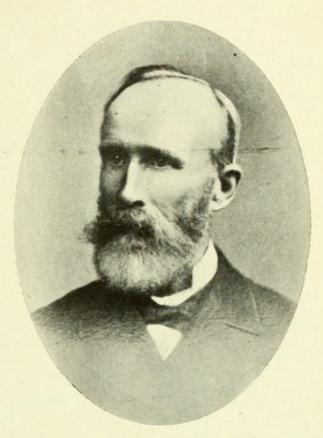
himself an excellent practical chemist and a sound teacher. The apparatus and materials belonging to Dr. Macadam were purchased by the University after valuation for £282 10s.

In 1866 the Professorial Board again attempted to add other subjects to the medical curriculum, so as to strengthen its science side, but the Council on the advice of the medical school committee declined the proposal. The death of the Hon. Mr. Haines now removed one of the original members of this committee, who as Treasurer of the Colony had provided the vote for the building of the School. Dr. James Bridgeham Motherwell succeeded to his place in the Council and the Committee. Letters were addressed to various Universities and Colleges, asking for recognition of the Medical Degrees, so as to obtain for Melbourne graduates and students admission ad eundem gradum and ad eundem statum, but with only limited success. The Finance Committee reported a deficiency in the finances, due chiefly to the Medical School, which absorbed £2000 in its maintenance. It was decided to cut down the vote for the grounds from over £1000 to about one-half, and to reduce the number and salaries of subordinate officers.

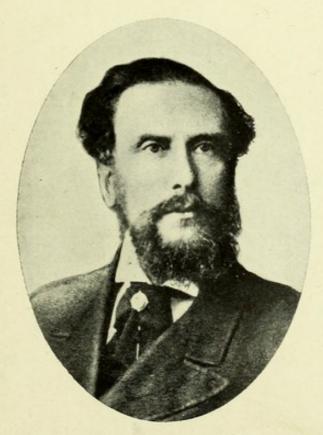
In April, 1867, the Annual Commencement had outgrown the Anatomy Theatre, and was held for the first time in the quadrangle of the Medical School, which received a temporary floor and canvas roof on each successive occasion. At this particular Commencement, two of the first students of the School, Rees and Moloney, were admitted to the Degree of Bachelor, Rees gaining first class honours and the scholarship. In June following the Senate was constituted, with four Doctors of Law, seventy-one Masters of Arts, and fifty-three Doctors of Medicine, all these last having been admitted a.e.g. or under the special regulations. The Revd. J. E. Bromby, M.A., D.D., was elected Warden, and thenceforward the consent of the Senate was necessary in all new legislation. In August the University addressed the General Medical Council concerning registration of Melbourne degrees. In this year the necessity for further hospital accommodation became acute, and two new pavilions and a new mortuary were added to the Melbourne Hospital. The Vice-Chancellor again moved that the Council agree to the erection of a General Hospital on the land south of the Medical School, but most unfortunately the Council refused. The Minister of Lands at the end of 1868 had consented to sell the land south of the Medical School, but on protest from the Council he gave way, though he strongly objected to the unsightly condition of the area. The Council spent £500 in fencing and improving the land.



EDWARD BARKER, M.D., F.R.C.S. Lecturer on Surgery.

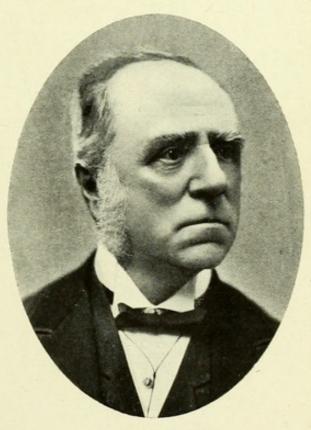


James Robertson, M.A., M.D. Lecturer on Medicine.



RICHARD T. TRACY, M.D.

Lecturer on Obstetrics and Diseases of Women and Children.



J. E. NIELD, M.D. Lecturer on Forensic Medicine.



The visit of H.R.H. the Duke of Edinburgh gave a great impetus to the movement for a new Hospital, and on March 6th, 1869, the foundation-stone of the Alfred Hospital was laid by His Royal Highness, and the Hospital was opened in the following year.

At the end of 1867 Mr. Eades died, and after Dr. Sturt had lectured for two years, he was succeeded in 1860 by S. Dougan Bird, M.D. St. Andrews, L.R.C.P. Lond., formerly a student in King's College, London, Staff Surgeon in the Russian War, Hon. Physician to the Benevolent Asylum, and afterwards to the Alfred Hospital from its opening until 1876, author of a work on "Australian Climates in relation to Pulmonary Consumption" (1863) and at a later date of a work on "Hydatids of the Lung." Dr. Bird was a shrewd and accomplished physician, a terse and manly writer, and a facile lecturer, and at once gained great popularity. A curious event in 1860 deserves mention as showing the great change that opinion had undergone. Professor Halford applied to the Council for permission to deliver a public lecture on "Protoplasm," and was refused on the ground that matters of politics or of religion should be avoided. In 1870 Dr. Halford was offered the Fellowship of the Royal College of Physicians of London, but he never completed his enrolment. In April of the same year he obtained an Assistant, Mr. W. Smith, M.B. Lond., being appointed Demonstrator of Anatomy; and at the end of the same year Mr. Smith was made Curator of the Pathological Museum of the Melbourne Hospital with an honorarium of £50 per annum, some cases being erected in the post mortem room, and jars borrowed from the University. Sir James Palmer resigned his seat in the Council in 1870, and Dr. Godfrey Howitt resigned in 1871. Professor Irving now relinquished the Chair of Classics and was succeeded by Professor Strong, Classics being still compulsory for Medical students in the first year. At the Annual Commencement on April 15th, 1871, the first direct Degree of M.D. was conferred, the recipient being Dr. O. V. Lawrence, who is still living in Melbourne, though retired from practice. A new operating room was now added to the Melbourne Hospital. On May 22nd the General Medical Council recognised the Matriculation Examination. At the end of the year Mr. Smith resigned the Demonstratorship of Anatomy and was succeeded by Dr. O. V. Lawrence. The question of admission of women to the University was now gravely considered. The Council resolved that the Act of Incorporation did not authorise the matriculation of women. Professor Halford, then President of the Professorial Board, declined to take part in the ceremony of matriculation, because women were excluded. The

Warden of the Senate reported that there was no sufficient reason for exclusion. Eight years passed before any further step was taken.

In 1872 Trinity College was opened for the reception of students. It was decided that medical students except in the first year might take some of their subjects for examination in November and the remainder in February, and the Honour Examinations were deferred till February. In January, 1873, the Crown grant for the Medical School ground (3) acres 3 roods 25 perches) was at last issued. In the same month Dr. Tracy was compelled by illness to take leave of absence, and after a visit to England, returned home to die, honoured and regretted by all his confrères. He was succeeded in the Chair of Obstetrics by Laurence Joseph Martin, L.A.H. Dub., L.R.C.S. Ed., who graduated as M.D. Melb. under the special regulations in 1862, and who had succeeded Dr. W. M. Turnbull (Dr. Tracy's early colleague) as Surgeon to the Lying-in Hospital in 1867. In the same year steps were taken towards the creation of Faculties in Law and Medicine, to take the place of the Professorial Board in relation to these curricula. The Faculty of Law was soon brought into existence, but that of Medicine was not established till three years later. Professor Wilson died in July, 1874, aged only 49, and was succeeded by Professor Nanson, now (1914), the senior member of the Professorial Staff, but Natural Philosophy was almost immediately placed in the hands of Mr. F. J. Pirani, M.A., as Lecturer. Natural Philosophy was now made alternative in the first year with the Greek and Latin which had hitherto been compulsory. Mr. Pirani also lectured in Logic, and examined in Logic for the Degree of M.D. In 1878 one of his papers contained the following question. Put into logical form the arguments on which the truth of the following propositions depends:—(a) All fevers are caused by germs; (b) hydrophobia is incurable. This was but a short time after Pasteur's earliest work on anthrax. In 1874 the simple requirement of matriculation as a condition precedent to the medical course was made more stringent by prescribing as compulsory subjects Greek, Latin, English, Arithmetic, Algebra and Euclid. Medical students were not to escape Classics altogether.

In 1875 the quadrangle of the Medical School was too small for the Annual Commencement, which was held in a newly-built hall, now the University Library. Saturday afternoon lectures on Anatomy were abolished. Hitherto students had attended the same course of lectures twice over and six days a week. The Council, in reply to enquiry from the Committee of the Melbourne Hospital, stated that the Degree of M.B. did not include the qualifications of a Master of Surgery nor of a member or licentiate of a College of Surgeons. Apparently there was some scruple as to the word "qualifications." At the next election of a House Surgeon, the Hospital Committee accordingly ruled that a Melbourne M.B. was not eligible; whereupon the graduates and students arose in wrath and unseated all the retiring members of Committee. Thereafter the office of Resident in the Melbourne Hospital was practically confined to Melbourne graduates. A Bill was introduced by Mr. Kerferd enabling the University to grant the Degrees of Bachelor and Master of Surgery, and after some delay the Bill received the Royal Assent on April 7th, 1876. In May, Mr. H. B. Allen, who had just been admitted to the Degree of M.B., was given charge of the Dissecting Room in the mornings, Dr. Lawrence continuing for a short time to act as Demonstrator in the afternoons; but before the year passed Mr. Allen became Demonstrator of Anatomy and Sub-conservator of the University Museum of Anatomy and Pathology, and almost immediately the Committee of the Melbourne Hospital appointed him to be Pathologist. In the same year, the Council did away with the Medical School Committee, which had rendered such good service, and all Committee work was now concentrated in a Committee of the whole Council called the Executive Committee. The newly constituted Faculty of Medicine met for the first time in June, 1876, and elected Professor Halford to be its Dean. It consisted of the Professors and Lecturers in the Medical School and of all members of Council who were legally qualified medical practitioners.

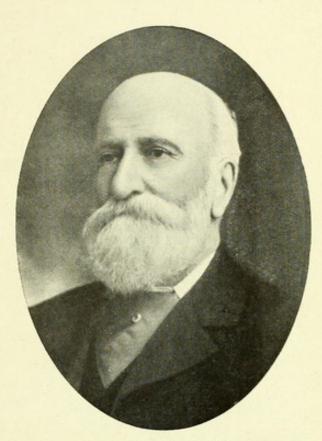
Early in 1877 Mr. Kirkland was gratified by the foundation of a new laboratory of Chemistry in the form of a capital L, the long limb running parallel with the old Medical School on the northern side, and the short limb joining the old buildings. The original students' laboratory is now the preparation room adjoining the Chemistry Theatre. In 1878 the Faculty urged that a laboratory of Physiology should be built, and that an assistant should be provided for the Lecturer in Chemistry. Dr. Martin's health was failing, and for a time Dr. T. Rowan acted as locum tenens, but in 1870 Dr. Martin died, and James Jamieson, M.D., C.M. Glasg., was appointed Lecturer on Obstetrics and Diseases of Women and Children. Sir Francis Murphy now resigned his seat in the Council. In April, 1879, the new Regulations for Degrees in Surgery were finally passed, after long passages between the Faculty, the Council and the Senate, the Bachelorship being given to all Bachelors of Medicine who had attended six months' additional surgical practice at a general hospital. A large number of candidates were admitted to the new degree of Bachelor of Surgery, Dr. Allen's name standing first on the Roll. Dr. S. Dougan Bird now visited England and Dr. Allen acted as lecturer on Materia Medica and Therapeutics. On the 2nd October, 1879, the foundation-stone of the Wilson Hall was laid. An attempt by Dr. Jamieson to establish an out-door maternity, preferably in connection with the Women's Hospital, proved unsuccessful. The Council rescinded its old resolution concerning admission of women to matriculation, and gave notice that on and after the 22nd March, 1880, women would be admitted to all the corporate privileges of the University, except that until special provision should be made, they would be restricted from proceeding to Medicine. At the beginning of 1880, as the outcome of long dissatisfaction, Mr. Booth, a medical student, was made Assistant Librarian, with charge of the Medical Library, and a definite Library Committee of the Faculty was constituted consisting of the Dean (Professor Halford), Dr. Neild and Dr. Jamieson.

On June 4th, 1880, at a meeting of the Medical Students called by F. Meyer and T. R. H. Willis, it was resolved to form a Medical Students' Society. J. W. Barrett was the first Secretary. Among the original members were F. D. Bird, W. Moore, C. J. Shields and G. A. Syme. The first meeting of the Society was held on July 1, 1880. Among the early secretaries of the society were Drs. Palmer, A. S. Aitchison, McGibbon and A. J. Wood.

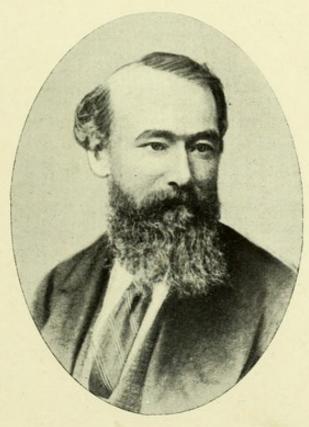
At this time the final examination included all the subjects of the fourth and fifth years, Medicine, Surgery, Obstetrics and Diseases of Women, Forensic Medicine and Physiology. This burden was now lightened, and the Final Examination was limited to Medicine, Surgery and Forensic Medicine. It was also arranged that Clinical Medicine, Clinical Surgery and Operative Surgery might be passed separately, and the Clinical subjects were introduced into Final Honours. Chemistry, Physics, Physiology and Botany were introduced as optional subjects at Matriculation, and the system of distinguishing candidates by numbers instead of by names was adopted in the entrance examination. The Alfred Hospital was now recognised by the University. The death of Sir Redmond Barry on November 23rd, 1880, closed a career never to be forgotten in the history of the University and of the Public Library. Sir William Stawell and Bishop Moorhouse and Dr. Hearn in succession followed him as Chancellor, and Dr. G. H. Fetherston was now elected a member of Council. Mr. T. M. Girdlestone, F.R.C.S. Eng., a former house-surgeon under Mr. Lawrence at St. Bartholomew's, surgeon to the Alfred Hospital, and afterwards to the Melbourne Hospital, Health Officer



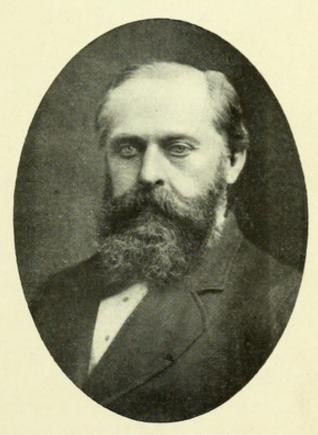
J. D. KIRKLAND, M.B. Professor of Chemistry.



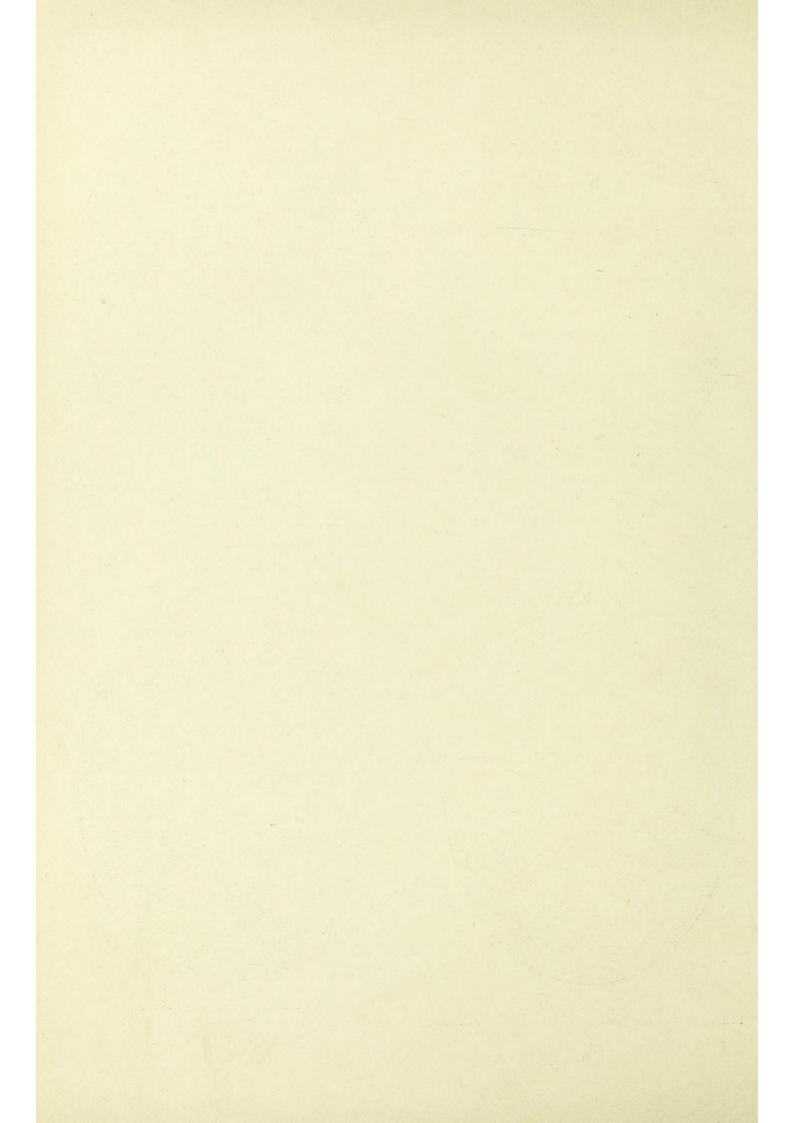
S. Dougan Bird, M.D. Lecturer on Medicine.



L. J. MARTIN, M.D. Lecturer on Obstetrics and Diseases of Women and Children.



T. M. GIRDLESTONE, F.R.C.S. Lecturer on Surgery.



to the City, succeeded Dr. Barker in the chair of Surgery. Mr. Girdlestone was one of the pioneers of proper antiseptic surgery in Melbourne.

At the end of 1880 Professor Halford was granted leave of absence to visit Europe, and Dr. Allen undertook the lectures and examinations in Anatomy, Physiology and Pathology for the greater part of the following year.

In 1881 Ormond College was opened to receive students. Women began to attend lectures in Arts. On June 7th the Amending University Act became law, permitting three salaried officers to sit in Council, reducing the tenure of Councillors from life to five years, granting the Senate power to amend all legislation, giving power to grant any Degrees (except in Divinity) conferred in any University in the British Dominions, and definitely extending the benefits of the University to women equally with men, excepting the power to become members of Senate or Council. The Council was, however, given power to exclude women from any lectures, but not from any examinations.

On the return of Professor Halford in August, 1881, he prepared, in co-operation with Dr. Allen, a report on the condition of the School, and a series of recommendations, which were adopted by the Faculty and printed and circulated by the Council. The proposals shortly were to create a Professorship of Physiology and a Professorship of Anatomy and Pathology, the latter to be divided as soon as possible; to make Natural Philosophy compulsory; to replace Comparative Anatomy and Botany by Elementary Biology; Dr. Halford to teach Physiological Chemistry and Histology in the second year and Physiology in the third year; the old dissecting room to become the Physiological laboratory; the Professor of Anatomy and Pathology to teach Anatomy in the second and third years and Pathology with practical work in the fourth year; Materia Medica to be left in the second year, but Therapeutics transferred to the fourth year and combined with Hygiene. Stress was laid on the necessity for appointing Clinical Lecturers on Medicine and Surgery. A sketch was given of the new buildings required, and suggestion made for the erection of a small Clinical Hospital in direct connection with the University.

At this time, Dr. James Robertson, after seventeen years of service, resigned the Chair of Medicine. Much later, when he ceased to be Physician to the Melbourne Hospital, his old pupils presented him with a silver jug and salver, and an address commemorative of his long and distinguished service to the Medical School. Dr. S. Dougan Bird

was promoted to the Chair of Medicine, and John Williams, M.D. Edin., M.R.C.S. Eng., succeeded Dr. Bird as Lecturer on Materia Medica, Medical Botany and Elementary Therapeutics. Dr. Williams had been formerly practising in Sudbury (Suffolk) and in London, and for some time in Chicago. He was subsequently Resident Physician, Physician to Outpatients and Physician to Inpatients at the Melbourne Hospital. He may fairly be described as the introducer of thorough clinical teaching in the Medical Wards of the Melbourne Hospital. and his example has been a potent influence in the School. This year the University suffered a great loss in the death by accident of Mr. F. J. Pirani. Mr. H. M. Andrew, formerly headmaster of Wesley College and a member of the Council, succeeded him as Lecturer on Logic and Natural Philosophy. The Council, after conference with the Faculty, found itself unable to create a Professorship of Anatomy and Pathology, and on December 22nd, 1881, Dr. Allen was elected Lecturer on these subjects, still retaining the offices of Demonstrator of Anatomy in the University and of Pathologist to the Melbourne Hospital. Professor Halford's work was defined as already described in the second and third years, practical work to be conducted in each year though not yet compulsory. As there was no physiological laboratory, it was arranged that practical demonstrations should be given in the Chemistry laboratory. In June, 1882, John David Thomas, M.D. Melb., was appointed whole-time Assistant Demonstrator of Anatomy, and Mr. John Kirkland, who had acted for many years as unrecognised assistant to his father, was appointed Assistant in the laboratories of Chemistry and Physiology. In October, statutory provision was made for five new Professorships, including Natural Philosophy, Chemistry, and Descriptive and Surgical Anatomy and Pathology. The Faculty withdrew its first schedule of new Regulations, and substituted others which were passed by Council and Senate in December, 1882. Under the new scheme, Natural Philosophy was still alternative with Greek and Latin in the first year; as no separate course of Biology was available, the Botany of the first year and the Comparative Anatomy and Zoology of the second year remained compulsory. The one course of Anatomy was still attended twice in the second and third years. Practical Pharmacy was placed in the third year, instead of the second or third. Physiological Chemistry and Histology came in the second year, Physiology with practical work in the third year, and Pathology in the fourth. The examination in Obstetric Medicine was retained in the fourth year, but the minimum number of labours to be attended was increased from twelve to twenty.

It was in this year that Co-examiners were first appointed. The teacher was first examiner and read all the papers. Of the two co-examiners, one read the answers of half the candidates, and the other those of the remainder. The teacher was forbidden to communicate his decision to the co-examiners. If the result was an agreement, the decision was final; if a difference, the other co-examiner gave the verdict. Many years passed before this system of suspicion passed away, and a sensible system of co-examiners took its place.

On the 27th November, 1882, Dr. Allen was appointed Professor of Descriptive and Surgical Anatomy and Pathology, Mr. Kirkland Professor of Chemistry, and Mr. Andrew Professor of Natural Philosophy.

In the same year, erysipelas was rife in Melbourne. Large numbers of cases were admitted to the Melbourne Hospital, and many fatalities occurred from septic infection in the surgical wards. An enquiry was conducted by the Managers of the Hospital, acting as a Committee of the whole. It was found that there was overcrowding, and seventy beds were removed out of 389, Many minor improvements were effected. But the Committee found that the chief cause of trouble in the surgical wards had been the imperfect adoption of the Listerian treatment.

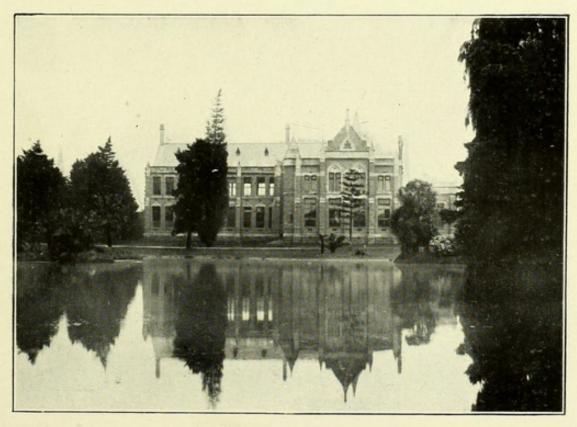
On March 31st, 1883, the Commencement was held in the new Wilson Hall. Mr. A. J. R. Lewellin, M.B., Medical Superintendent of the Melbourne Hospital, offered to supervise the records of students' attendance and suggested that all certificates of hospital work should be countersigned by him. This offer was thankfully accepted. In consequence of a special grant of £10,000 from Government, plans for the new Medical School were prepared by the architect (Mr. Reed) and Professor Allen, showing a quadrangle, with a large lecture theatre, a dissecting room 72 x 30, and a Museum of Anatomy and Pathology 110 x 40 with a wide gallery all round and various accessory rooms. It was proposed to adopt the style of the old School, a similar Italian portico forming the chief feature. The Council, however, decided to have a stone frontage and a Gothic elevation, and this involved the building of only half of the proposed Museum. During this year the Assistant Demonstrator of Anatomy, Dr. Thomas, died of rapid phthisis, and Mr. A. V. Henderson M.B. was appointed in his place. In November 1883 the collection of pathological specimens formed at the Melbourne Hospital was transferred by Deed of Gift to the University. The commencement of the collection had been made by Dr. Smith, Dr. Wigg and others; but under the control of Dr. Allen

it had outgrown the storage capacity of the pathological department of the Hospital, and at his suggestion it was given to the University, which also secured the right of appointing a Demonstrator of Morbid Anatomy, who would be Pathologist to the Hospital, subject to the veto of the Committee of Management. The only Medical School Museum was still the room now used as the Medical School library, and here the specimens were stored with difficulty for the time being. The increased Government grant also included £500 more or less appropriated for the salaries of Clinical Lecturers, and accordingly early in 1884 Dr. Williams and Mr. T. N. Fitzgerald were appointed Lecturers on Clinical Medicine and Clinical Surgery, with salary and status corresponding with those of other Lecturers in the Faculty of Medicine. It was objected that others members of the Hospital Staff were discouraged from teaching, and that it was important to utilise all available beds in clinical teaching. The Faculty desired that all beds should be utilised for instruction, but that special Lecturers, and if possible special Tutors should be appointed. The students warmly supported the policy of the Faculty.

In 1884 two half-time Demonstrators of Anatomy were appointed, instead of one whole-time Demonstrator, and the first to hold office were Mr. W. Moore M.B. and Mr. F. D. Bird M.B. In July, 1884, the Medical Students' journal, the "Speculum," made its first appearance, under the editorship of H. Salmon, assisted by A. W. Rinder and C. P. W. Dyring. The system of identifying candidates by numbers instead of names was now extended to all examinations in the Univer-Two Scholarships instead of one were provided in the Fifth Year, one for Medicine and Forensic Medicine, the other for Surgery. The Faculty reminded the Council that many of the recommendations made in its Report of 1881 remained in abeyance, and urged that steps be taken to complete the reforms, including the division of the Chair of Anatomy and Pathology. The suggestions of the Faculty were embodied in a comprehensive Report on the Curriculum which was printed and circulated on the 20th December, 1884. Early in 1885 the Council resolved to appoint a Demonstrator of Biology to conduct Huxley and Martin's practical course, and also a Demonstrator of Natural Philosophy for Senior Students. This resolution was not carried into effect. Mr. Service now provided additional endowment for the University, and a grant of £3000 for fitting up the New Medical School and for converting the old Dissecting Room into a laboratory of physiological chemistry and practical physiology. The new buildings were finished in 1885 and were finally equipped in 1886.



NEW MEDICAL SCHOOL, 1885.



THE BIOLOGY SCHOOL.



In 1885 the Council resolved to collect all fees for clinical instruction (hitherto collected at the Melbourne Hospital), and to supplement the amount with £500 from the University chest, and to divide the total sum among the four physicians and four surgeons to inpatients at the Melbourne Hospital, who were to be ex officio University Clinical Lecturers. The Faculty refused to take any part in carrying out this resolution. The University imposed special fees of three guineas each for Clinical Medicine and Clinical Surgery. In most years two physicians and two surgeons were actually appointed Clinical Lecturers. In 1888 the Council was exhausted and resolved to leave all collection of fees for Hospital practice to the Hospital authorities, asking the staffs to submit the names of such members as might be selected as clinical lecturers and tutors. The subsidy of £500 was apportioned-£400 to the Melbourne Hospital and £100 to the Alfred Hospital. The fees received by the University for Clinical Lectures were sent to the Hospitals where the students were attending. This scheme of despair remained in force for many years. In 1801 the Rules of the Melbourne Hospital were revised, and the collection of fees for clinical attendance was definitely left to the University. For the year 1900 the University, at the request of the Melbourne Hospital Staff and of the Faculty, made a special vote to provide for the appointment of Tutors from among the outdoor staff. But in 1900 the University resolved to cease collecting clinical fees or paying any subvention, and modified its own scale of fees accordingly. The Hospitals again undertook the collection of fees. Finally in 1906, with a further revision of the curriculum, a definite scheme of Clinical Instruction was introduced, each recognised Hospital submitting a syllabus for approval by the Faculty, and in 1908 the University Council again resolved to collect the clinical fees, and to supervise their allocation, so as to provide payment of instructors, lecturers, tutors, executive officers, etc. This excursus will save many explanations at later stages.

In 1885 Dr. James Robertson was elected a member of the Council. Dr. William Moore was admitted as the first Master of Surgery of the University. At the end of the year Professor Kirkland died, and the students erected a tablet to his memory in the entrance hall of the Old School, with the inscription, "Homo erat et fidus amicus." Mr. Kirkland junr. took charge of the Department of Chemistry pending the appointment of a successor. Separate lectures in Anatomy were now provided for second and third year students, instead of repeated attendance on the same course.

In 1886 the Committee of the Melbourne Hospital were compelled to remove twenty beds from the surgical wards, and, in order to find a new site, asked that ten acres of the University Reserve south of the Medical School should be used for Hospital purposes. The Council protested against the site being granted for purposes of a hospital, and the Minister of Lands refused the application. With the completion of the New Medical School, the Library was transferred to the room formerly used as a Museum; and the old Library room was fitted up as a club-room for the Medical Students' Society. Threats to remove the Medical Library from the School were ended by the appointment of Mr. Burke, Senior Clerk of the University, to act as officer in charge. David Orme Masson, M.A. D.Sc. Edin., was appointed Professor of Chemistry, Dr. Masson had been Assistant to Professor Ramsay at University College, Bristol, and subsequently for several years had held a Research Fellowship in the University of Edinburgh. On Dr. Masson's arrival in October he prepared plans for enlargement of the Chemistry Theatre and for the building of a laboratory with accommodation for 130 students. The Council adopted the plans, and appropriated £3500 from a special grant for their execution. Attempts were made to obtain for the University the right to appoint one Physician and one Surgeon to the Melbourne Hospital who would be University Clinical Lecturers. The Committee of the Hospital adopted a by-law to this effect, but the Governors negatived the proposal. In September, 1886, Professor Halford resigned the Deanship of the Faculty of Medicine and received the warm thanks of the Faculty for his services. Professor Allen was unanimously elected to succeed him. The new Curriculum drafted by the Faculty was adopted with amendments by the Council, and was referred by the Senate to a Select Committee in which Professor Allen (Convener) was the only representative of the Faculty. The Curriculum was finally adopted with amendments, and came in force at the beginning of 1887.

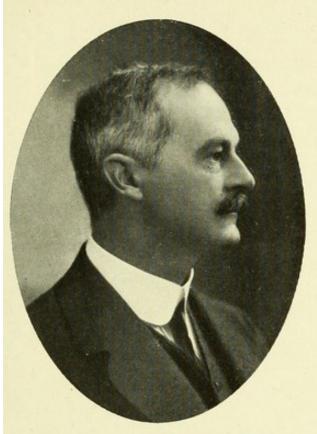
The first great feature of this Curriculum was the establishment of a proper first year of Science Study—Natural Philosophy, Biology and Chemistry, with laboratory work in Biology and Chemistry. The old classes in Botany of the first year and Comparative Anatomy of the second year were withdrawn. The recent developments in Anatomy and Physiology were continued with various improvements in detail. The Materia Medica Chair was divided, Materia Medica, Medical Botany and Elementary Therapeutics remaining in the second year, and Therapeutics, Dietetics and Hygiene being introduced in the

fourth year. Surgery was still a double course, in the third and fifth years, and Medicine a double course in the fourth and fifth years, but the examinations in these subjects and in Obstetrics and Diseases of Women and Children were confined to the final. The two Scholarships at the final examination were defined as (a) Medicine and Forensic Medicine and Psychological Medicine; (b) Surgery and Obstetric Medicine and Diseases of Women and Children. Only one exhibition was provided for each of the three preceding years. Hospital practice was made to extend over four years, and defined as including nine months in each year, elementary surgery in the second year, and elementary medicine in the third year, followed by a year of advanced surgery and a year of advanced medicine. The third course of dissections in the fourth year was still compulsory, but was directed definitely to Regional and Applied Anatomy. Oral examinations were made compulsory in most subjects, and discretional in the others. Proficiency in Vaccination became a definite requirement. Attendance in the Special Hospitals was not enjoined, but the Faculty strongly urged that special departments should be created in the Melbourne Hospital.

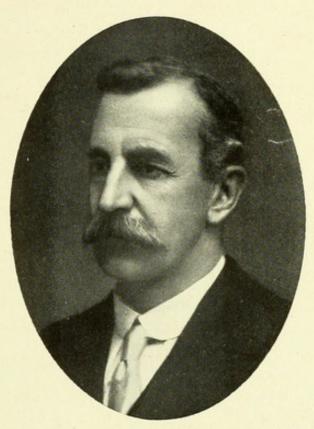
Great changes occurred in the Science Departments. Baldwin Spencer, B.A. Oxon., Fellow of Lincoln College, Assistant to the Linacre Professor of Human and Comparative Anatomy, was appointed Professor of Biology; and on his arrival in March, 1887, he prepared plans for the building of the first part of the Biology School at an estimated cost of £13,500, and contracts were soon accepted. Mr. Dendy, who had been working at the British Museum, was appointed Lecturer and Demonstrator in Biology. Mr. J. B. Kirkland was given a similar position as assistant to Professor Masson in Chemistry. Dr. J. W. Barrett, who had been Demonstrator in Physiology in King's College, London, and had now received the diploma of F.R.C.S., was appointed Demonstrator of Physiology and Histology, and thereafter never ceased his active connection with the Department. Somewhat later, Mr. E. F. J. Love, M.A., late Scholar of St. John's College, Cambridge, Demonstrator of Physics in Mason College, Birmingham, was appointed Lecturer and Demonstrator in Natural Philosophy under Professor Andrew; and a commencement was made in laying the foundations of the School of Natural Philosophy. Mr. G. A. Syme, M.B., F.R.C.S., succeeded Mr. Bird as Demonstrator of Anatomy, and so began a period of eighteen years' valuable service to the Department of Anatomy as Demonstrator and afterwards as Lecturer. J. W. Springthorpe, M.A., M.D., M.R.C.P. Lond., was appointed Lecturer on Therapeutics, Dietetics and Hygiene, and David Grant, M.A., M.D., C.M., Ettles Scholar of the University of Edinburgh, was made Lecturer on Materia Medica, Medical Botany, and Elementary Therapeutics.

The Medical School had now completed its twenty-fifth year, and to mark the occasion Dr. Neild, at the request of the Faculty, delivered in the Wilson Hall on March 22nd, 1887, a Commemorative Lecture, which may be read in the "Australian Medical Journal" for May and June, 1887. Eight women students were now admitted to the Medical School, the only special provision for them being a separate dissecting room. On April 4th, Dr. Brownless was elected Chancellor. He had already been made LL.D. St. Andrew's, and F.R.C.S. Eng., Knight of St. Gregory the Great, and Knight Commander of the Order of Pius. In 1888 he received the C.M.G., and in 1803 the K.C.M.G. The Medical School Library had hitherto languished for lack of funds, but now a yearly vote was appropriated for it, and substantial progress was made. Queen's College was opened for the reception of students. Professors ceased for many years to sit in Council. An extra strip of land, 100 feet wide, amounting to nearly an acre, was added by permanent reservation to the Medical School site. The post mortem room at the Melbourne Hospital was reconstructed in this year, and the Children's Hospital was greatly enlarged. It was determined for the teaching of Practical Pharmacy to confine recognition to the School of Pharmacy. At the end of 1887 Dr. S. D. Bird resigned the Chair of Medicine and was succeeded by Dr. Jamieson. Dr. W. Balls-Headley, M.D. Cantab., Surgeon to the Women's Hospital, was appointed Lecturer on Obstetrics and Diseases of Women and Children, and in the following year was elected a Fellow of the Royal College of Physicians of London. Dr. Headley subsequently published a work on the "Evolution of Diseases of Women." and contributed the article on "Etiology of Diseases of Women" in Allbutt and Playfair's System of Gynæcology.

Early in 1888 Dr. W. Moore resigned his office as Demonstrator of Anatomy, and was succeeded in turn by Mr. C. H. Mollison, M.B., M.R.C.S., Mr. C. J. Shields, M.B., F.R.C.S (1889), Mr. F. H. Langlands, M.B., F.R.C.S. (1894), and Mr. G. C. Rennie, M.B., M.S., F.R.C.S. (1898). Professor Allen, in 1888-89, at the request of the Government, undertook the Presidency of the Royal Commission concerning the sanitary state of Melbourne, and the practical and finally the actual presidency of the Royal Intercolonial Rabbit Commission. A schedule of the requirements of the Medical School for the next ten years was now



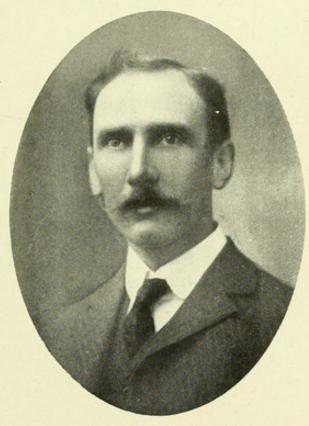
D. Orme Masson, M.A., D.Sc., F.R.S. Professor of Chemistry.



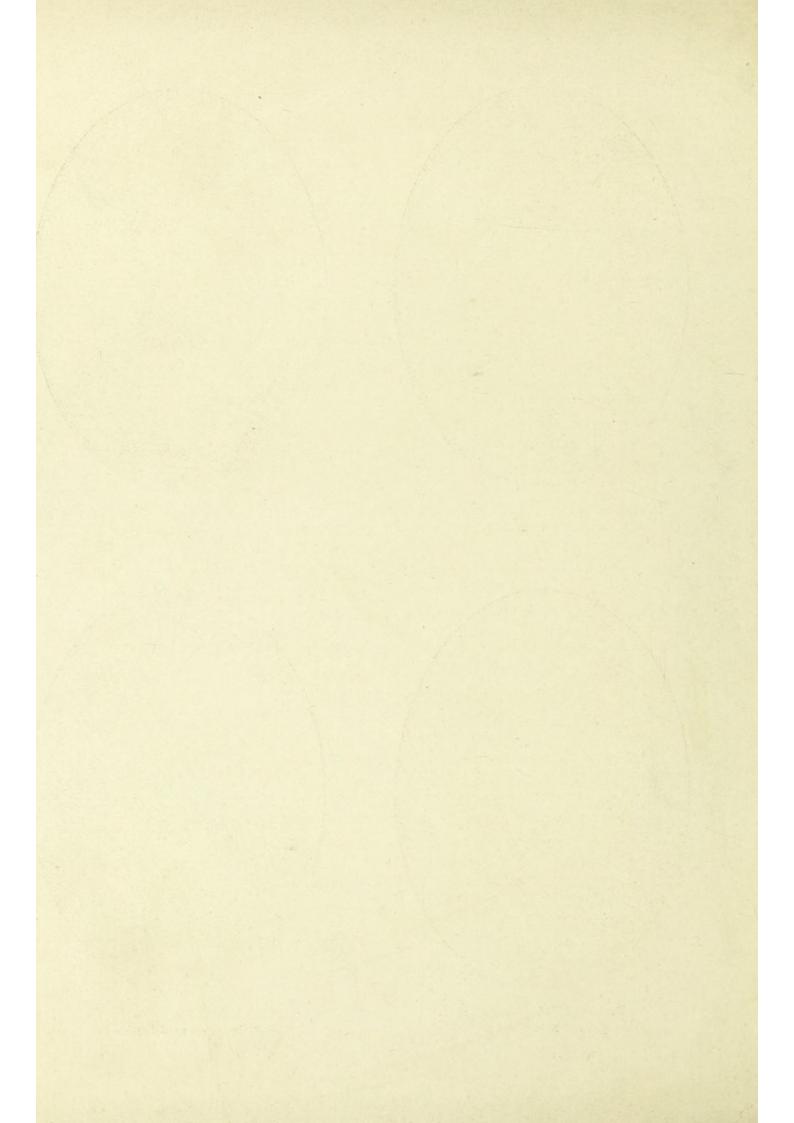
W. BALDWIN SPENCER, C.M.G., M.A., F.R.S.
Professor of Biology.



T. R. LYLE, M.A., D.Sc., F.R.S. Professor of Natural Philosophy



C. J. MARTIN, D.Sc., F.R.S. Acting Professor of Physiology.



prepared by the Dean, approved by the Faculty, and incorporated in a Report submitted by the Council to the Government, which promised very substantial assistance. The Council made enquiry as to special departments in the Melbourne and Alfred Hospitals for diseases of women, diseases of children, and diseases of the eye, ear and throat. Professor Andrew was granted leave of absence to visit Europe, but died in the Red Sea on September 18th, 1888. Thomas Ranken Lyle, M.A. Dublin, succeeded him as Professor of Natural Philosophy, and at once proceeded to redraft the plans for the new buildings in his department, and important progress was soon made. In 1889 Medical Students first attended laboratory classes in Biology. The Faculty again urged the necessity for dividing the Chair of Anatomy and Pathology. In 1889, the Parliament of Victoria amended the Medical Practitioners Statute so as to remove all disabilities from British practitioners seeking to be registered in Victoria. The Dean at the request of the Chancellor prepared a petition to the Privy Council asking that the British Medical Act be made to apply to Victoria. Dr. S. D. Bird was elected a member of Council vice the Rev. Dr. Bromby resigned.

At the end of 1889 Professor Allen obtained leave of absence to visit Europe. His duties were to be performed by Mr. Syme, Dr. Moore and Mr. Mollison. He resigned the office of Dean, which was resumed by Professor Halford. The Privy Council extended the British Medical Act to Victoria. Professor Allen made application to the General Council of Medical Education and Registration for the recognition of the degrees in Medicine and Surgery of the University of Melbourne, and submitted a synopsis of the curriculum for M.B. and B.S. which is published in the proceedings of the Executive Committee for May 26th, 1890. The President, Mr. Marshall, in his address at the opening of the 48th Session of Council, spoke as follows in reference to the proposal to insist on a minimum course of five years' study in the United Kingdom: - "A really excellent mode of utilising a five years' period, with its associated periodical tests, will be found in an interesting communication, describing the curriculum and examinations now enforced by the University of Melbourne for its Degrees of Bachelor of Medicine and Bachelor of Surgery. document, which has found place in the Minutes of the Executive Committee, might with advantage be sent, together with any recommendations which this Council may adopt, to the several Qualifying Bodies, and might also be distributed amongst both teachers and examiners." On May 28th, 1890, the General Council resolved that

the holders of the conjoint Degrees of Bachelor of Medicine and Bachelor of Surgery be registrable in the separate list of practitioners in the Colonial Register. Professor Allen accordingly obtained registration, and was the first person registered in the United Kingdom in respect of a qualification wholly derived from a British Colony. On June 6th, 1890, the General Council resolved that on and after January 1st, 1892, the course of professional study after registration as a Medical Student must occupy at least five years.

The first half of the new Institute of Natural Philosophy was opened about the middle of 1890, but at this stage no laboratory work was provided for medical students.

At the end of that year Dr. Cutts retired from the Council. About the same time Mr. E. M. James retired from active work as Surgeon to the Melbourne Hospital, wherein he had rendered most important service. At New Year, 1801, Professor McCov received the honour of K.C.M.G. Large additions were initiated to the Departments of Natural Philosophy, Biology and Chemistry. The Governors of the Women's Hospital conceded that the Lecturer on Obstetrics and Gynaecology should be ex officio Physician in both the Midwifery and Gynaecology Departments. Dr. Headley was the first to benefit by this provision. In 1891 the medical graduates of the University of Melbourne formed themselves into a Society, called the Melbourne Medical Association. Dr. Snowball was the first President, and Dr. Goodall the first Secretary. Professor Allen now returned, having purchased a large collection of models, apparatus and microscopic and bacteriological preparations. Mr. Thomas Cherry, M.B., after consultation with Professor Allen, went to Europe and worked at Pathological Histology and Bacteriology, especially under Professor D. J. Hamilton at Aberdeen. The Government declined to provide funds for the division of the Chair of Anatomy and Pathology, but Dr. Cherry was appointed Demonstrator of Pathology, and in 1892 systematic practical classes in Pathological Histology and Bacteriology were held for the first time. The classes were at first conducted in the Professor's room, but after a time a bench with sinks and gas and water was placed round the gallery of the Museum, and here the class met for several years. A class for graduates soon followed. Greek now became alternative with French and German in the preliminary examination. In 1802 also a bequest of £2000 under the Will of the Hon. Dr. J. G. Beaney provided for the Beaney Scholarships in Surgery and Pathology, and the fund was subsequently increased by a further sum of over £1900. A proposal from the Women's Hospital to establish

an outdoor maternity was approved. It was resolved to place the Final Honour Examination in December instead of in March. Mr. J. S. Robertson became Secretary and Librarian to the School in place of Mr. Burke. In 1892 Dr. John Williams became a member of Council, in the room of Dr. S. D. Bird. But with 1892-93, misfortune came upon the State, and the Annual Grant was repeatedly reduced, the maximum of retrenchment being £5000. Salaries were cut down, and votes for apparatus and for libraries were at a minimum. The struggle was to maintain the position won. Dr. James Robertson died in January, 1893, and was succeeded in the Council by Dr. James Jackson. Dr. Cherry in April, 1893, was given the status of Demonstrator and Assistant Lecturer. In January, 1804, Dr. Dendy resigned the office of Demonstrator and Assistant Lecturer in Biology and was succeeded by Mr. T. S. Hall, M.A. In 1895 Mr. Girdlestone resigned the Chair of Surgery, and was succeeded by Mr. F. D. Bird, M.B., M.S., M.R.C.S. Eng., Surgeon to the Melbourne Hospital.

In 1896 St. Vincent's Hospital was opened. At the end of the year Professor Halford retired from active service. The Faculty of Medicine recorded in the minutes its high appreciation of the great services he had rendered in the foundation and building up of the School. Among his early published works may be mentioned "The action and sounds of the heart" (Churchill, 1860); "Not like man" and "Bimanous or Quadrumanous," and "Observations on the Metacarpal and Metatarsal Bones of the human skeleton," "Australian Medical Journal," 1863; "Lectures on the Heart" and "On the use of Magenta," A.M.J., 1864; "Lines of demarcation between Man, Gorilla and Macaque," 1864; "On the skeleton of the gorilla," Royal Society of Victoria, 1865; "Experiments and Observations on Absorption," Royal Society of Victoria, 1866; "Condition of the blood after snake poisoning," 1868. To these may be added his various papers connected with intravenous injection of ammonia, his brochure on measurements and characters of the skull in Australian aboriginals, and a late paper, "Thoughts and observations and experiments on the action of snake venom on the blood" (1894), the experiments being performed in collaboration with C. J. Martin.

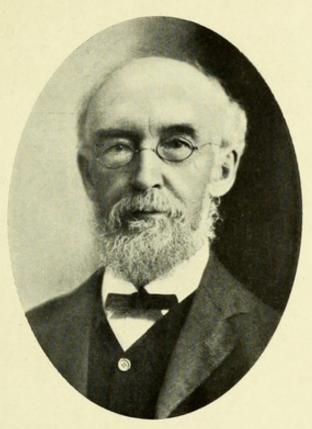
Charles James Martin, M.B., D.Sc. Lond., who had been educated at King's College and St. Thomas's Hospital, London, and at the University of Leipzig, formerly Demonstrator of Physiology at King's College (1887) and at the University of Sydney (1891) was appointed locum tenens for Professor Halford with the rank of Lecturer. Professor Allen was re-elected Dean of the Faculty. At Dr. Martin's

request £700 was made available to reorganise the physiological theatre and laboratories and to purchase apparatus, books and periodicals. The theatre was now confined to its proper purpose, and the lectures on medicine were for a time given in the Classical Theatre, and those on obstetrics in the Law Lecture Room, and those on Forensic Medicine in the Library. Dr. Barrett became Honorary Assistant Lecturer in Physiology, undertaking the Lectures on the Special Senses; and, on Dr. Martin's nomination, Mr. W. Fielder was made Demonstrator in Physiology. The physiological work of the second year was increased, but, in view of the practical nature of the teaching in the 3rd year, practical physiology was omitted as a separate pass subject. Provision was soon made for access to the Degree of B.Sc. through the School of Physiology.

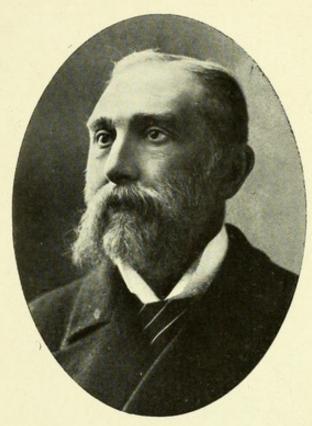
At the beginning of 1897 there was an influx of seventeen students from the University of Adelaide into the advanced years, which owing to local troubles could not be completed in Adelaide. Similar migration continued for several years.

In August, 1887, the Board of Public Health and the Metropolitan Board of Works offered to make annual payments to the Bacteriological Fund in return for services in the diagnosis of diphtheria, typhoid and tubercle, and regular examination of the Melbourne water supply. The offer was accepted, and Dr. R. J. Bull was appointed Junior Demonstrator to assist Dr. Cherry. Other similar undertakings followed.

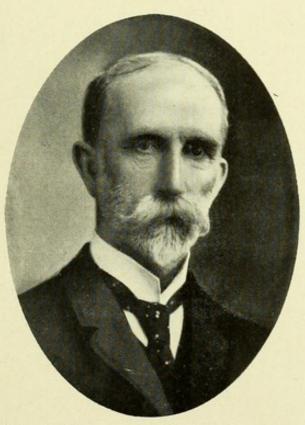
On the 3rd December, 1897, the venerable Chancellor, Sir Anthony Colling Brownless, died at the University, where he had resided for several years, and he was accorded a University funeral. A special Brownless Memorial Supplement of the University Journal, "Alma Mater," was published in September, 1898, containing a brief history of the School, with an account of the curriculum and the teachers, with many illustrations. The new Chancellor was the Hon. Sir John Madden, Kt., LL.D., who had rendered long service as Warden of the Senate and Vice-Chancellor. At the request of his colleagues in the Professorial Board, Professor Allen consented to be nominated for the vacant seat in the Council, and was elected, being for the next six years the sole representative of the professors in the Council. In March, 1808, Mr. J. S. Robertson died, and the Registrar, Mr. a'Beckett, once more became Secretary to the School, while Mr. Stirton Robertson took charge of the Library. Mr. J. B. Kirkland resigned the office of Demonstrator and Assistant Lecturer in Chemistry at the end of 1898, and was succeeded by Mr. G. B. Pritchard and Mr. W. H. Green, B.Sc. The former soon retired, and after an interval of some years Mr. B. D.



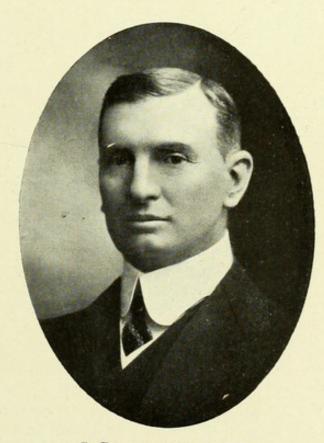
James Jamieson, M.D. Lecturer on Medicine.



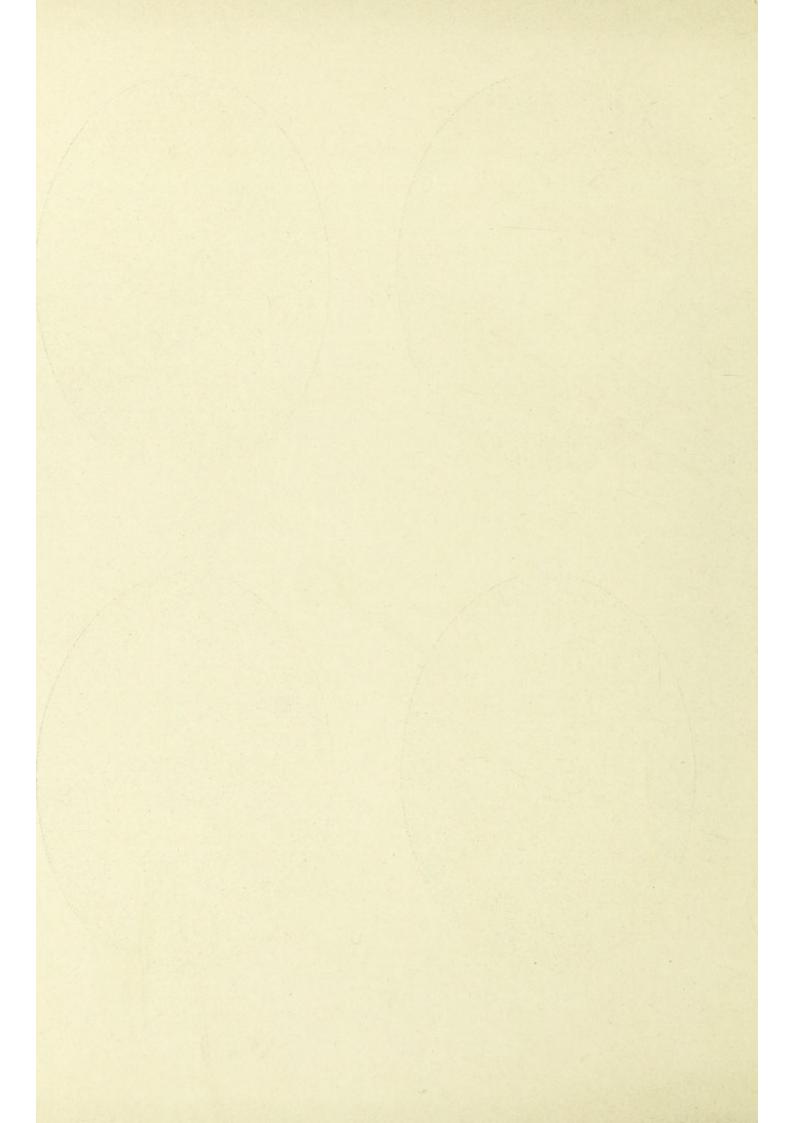
W. Balls Headley, M.D., F.R.C.P. Lecturer on Obstetrics and Gynæcology.



DAVID GRANT, M.A., M.D. Lecturer on Materia Medica.



G. ROTHWELL ADAM, M.D. Lecturer on Obstetrics and Gynæcology.



Steele was appointed in his place, and still later Dr. Steele was succeeded by Dr. A. C. D. Rivett. On May 13th, 1899, the death of Sir Frederick McCoy removed the last of the original Professors of the University. About the same time the out-patient department of the Melbourne Hospital was reorganised with large additions.

The Government, as an act of retrenchment, promised to give the University the use of the building in Grattan Street, used as a Training College for Teachers, and it was arranged that part of the central block and the whole of the eastern wing should be allotted to the Medical School. The promise was afterwards withdrawn, and by way of compensation the Government agreed to provide a grant of £15,000, of which £10,000 was to be devoted to the Medical School. Faculty, much encouraged, again revised the curriculum, and sent a draft Report thereon to the staffs of all the clinical hospitals for con-The scheme was further amended in some particulars by Faculty, Council and Senate, but was finally adopted and came in force at the beginning of 1900. The main contentions of the Faculty were that the working year was too short, that it was overcrowded with systematic lectures, and that there was no sufficient time for practical work, particularly on the clinical side. Hence it was provided that there should be three terms of ten weeks each, with the main examination in the middle of November instead of the middle of October. The Medical Terms thus ceased to harmonise with the general University terms. Junior Anatomy and Senior Anatomy lectures were cut down. In the second year a special course of instruction (largely anatomical) in the post-mortem room in the first term was followed by Surgical Tutorial and Out-patient work in the second and third terms. In the third year there was Tutorial Medicine in the first and second terms and Out-patient Medicine in the second and third terms. The mounting of specimens in Pathological Histology was placed in the third term of the third year. The dissections of the fourth year disappeared, so that one striking feature of the course ceased to exist. An examination in Junior Surgery and Surgical Anatomy was retained in the fourth year. Lectures on Therapeutics, Dietetics and Hygiene, and those on Obstetric Medicine and Diseases of Women and Children were reduced to two terms. Medicine and Surgery were reduced to one course each. Forensic Medicine was limited to one lecture a week. In the fourth and in the fifth year nine full months of Hospital practice were made compulsory, in surgery in the fourth year, in medicine with post mortem examinations in the fifth year. Attendance during one term in the out-patient department as Clinical Assistant was made

compulsory, and also practical demonstrations in Therapeutics, Dietetics and Hygiene and in Forensic Medicine. Practical Gynaecology was also introduced, together with attendance on clinical instruction in two out of four special departments—eye, skin, children, mental diseases. Separate honour schools with scholarships were provided in Medicine, Surgery, and Obstetrics, and also a prize in Forensic Medicine. In Surgery the Beaney Scholarship took the place of the University Scholarship, and was no longer given separately. The Degree of M.D. might be obtained by Thesis or by an examination limited to Theory and Practice of Medicine and Insanity. For the Degree of Master of Surgery, Surgical Anatomy and Surgical Pathology became one subject. The Faculty of Medicine was modified by introducing two representatives of the Staff of the Melbourne Hospital, one of the Alfred Hospital and one of the Women's Hospital, and giving the Council power of appointing (after nomination by the Faculty) other members from among the University or the Clinical Teachers. The Faculty again urged that the Chair of Anatomy and Pathology should be divided. but funds were not available. As a measure of relief, Mr. G. A. Syme was appointed to lecture on Junior Anatomy and act as Senior Demonstrator of Anatomy. Dr. Headley resigned the Chair of Obstetric Medicine, and George Rothwell Adam, M.B., C.M. Edin., was appointed to fill the vacancy. Professor Spencer received the distinction of F.R.S. In 1900, University Terms and Medical Terms were again harmonised, with a First Term of eleven weeks, and Second and Third Terms of nine weeks each.

The new buildings were now approaching completion. Two lecture theatres were included, of which one was fitted up in some fashion for lectures on Medicine and Surgery and Therapeutics; but one theatre long remained unoccupied, and was used as a Students' Common Room. A second story was added to the Physiological laboratories, thus doubling the amount of accommodation, the upper floor being devoted to Physiological Chemistry and the ground floor to experimental physiology. By the kindness of Professor Spencer, Mr. Fielder's classes in Histology were for a long time housed in the Department of Biology. The Museum of Pathology was completed to its full length. Bacteriological Laboratory was erected in its present outward form; and, owing to the great increase in the practical applications of Bacteriology, it was made a separate Department under Dr. Cherry as Lecturer. Dr. Martin, who had just been made F.R.S., was given the title of Acting Professor of Physiology in 1900, and Dr. J. F. Wilkinson joined his staff as Assistant Demonstrator, taking charge particularly

of the applications of Physiology to Clinical Medicine. The Course of Materia Medica and Practical Pharmacy at the School of Pharmacy was systematised in 1900, under Dr. F. H. Cole and Mr. S. Plowman.

The war in South Africa was now in progress. Sir Thomas Fitzgerald offered his services, and went to the field of operations as Consulting Surgeon. Among the graduates and students who volunteered from the Medical School, W. F. Hopkins, M.B., Surgeon to the First Contingent, died of enteric fever; H. A. Palmer, M.B., was killed in action at Wilmansrust, and Lieutenant J. C. Roberts was killed in action at Rensburg. R. A. Buntine, M.B., was specially mentioned for rescue work under heavy fire at Ladysmith.

Dr. Grant entered the Council in 1900, in succession to Dr. Jackson; and Dr. J. W. Barrett was elected in 1901, in place of Mr. Murray Smith. The death of Dr. G. H. Fetherston in 1901 removed one who had rendered long service in the Council.

But now, when University finance seemed to be recovering from the retrenchment of the previous decade, new misfortune came. In August, 1901, the defalcations of Dickson, the Accountant of the University, were discovered, and during many years further retrenchment followed; for the University determined that all the missing Trust Funds should be restored, and that interest should be forthcoming upon them year by year as if they were intact. Moreover, the distress of the University evoked a grand united movement by the Government and by the public, a movement in which Janet Lady Clarke was a great controlling influence, and ultimately the disaster led to the University being placed on a much more sound financial basis. The retrenchment which was made in the salaries of Lecturers, however, remained permanent. In 1902, practical work in Natural Philosophy became compulsory. The death of Dr. W. Snowball on April 22 removed a graduate who had rendered splendid service to the Children's Hospital ever since he became Resident Medical Officer in 1878. His influence largely contributed to the growth of the Institution from small beginnings into a great Charity. Dr. Stawell, in an obituary notice in the "Speculum," speaking of the days when he himself was Resident Medical Officer, said that "every parent who brought her sick child for treatment came to the Hospital to see 'Snowball'; he was, to them, the Hospital."

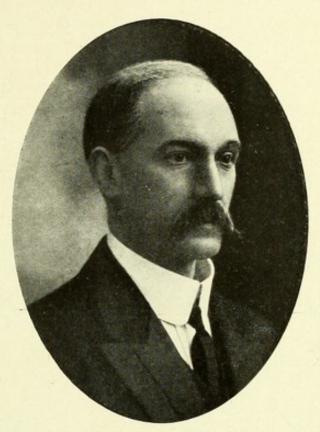
In 1903 the School suffered a great loss by the resignation of Acting Professor C. J. Martin, who accepted the Directorship of the Lister Institute of Preventive Medicine in London. The Council specially thanked him for having raised the Department of Physiology to the highest pitch of efficiency. Dr. Martin had been untiring in the promotion of research, and had gathered round him a small but enthusiastic band of workers. Among the researches conducted by him in Melbourne may be cited his work on snake poison, on toxins and antitoxins, on cardiac thrombosis, on cyanide poisoning, and on the cortical centres in the platypus. Professor Martin was succeeded by William Alexander Osborne, M.B., D.Sc. Lond., of University College, London, and the University of Tübingen, Assistant Professor of Physiology in University College. In the same year Dr. E. A. Spowers was first appointed Hon. Demonstrator in Obstetrics. Dr. Maudsley also became Physician to the Melbourne Hospital.

In 1904 Dr. John Williams resigned the office of Physician to the Melbourne Hospital, where he had been the great promoter of clinical teaching in Medicine ever since he became Resident Medical Officer in November, 1875.

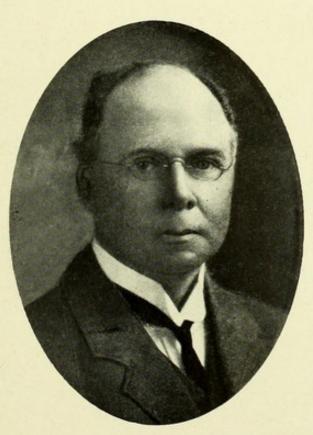
In 1904, also, the final report of the Royal Commission on the University, while admitting that the Medical School had been progressive and succeessful, and was playing a most important part in the community, criticised the arrangement of the curriculum somewhat severely, laying special stress on the interference of the hospital work of the second and third years with proper work in Anatomy and Physiology. The Commission strongly urged that the Chair of Anatomy and Pathology should be divided, and that Clinical Instruction should be better organised. Professor Spencer was now elected a member of Council. At the end of 1904 Mr. G. A. Syme resigned the Lectureship in Anatomy, wherein he had rendered long and excellent service, and was succeeded by Dr. G. C. Rennie, with the title of Senior Lecturer in Anatomy, lecturing to second year students; and as a further relief to Professor Allen it was arranged with the Committee of the Melbourne Hospital that Dr. Kilvington should be Junior Lecturer on Anatomy and should undertake the duties of pathologist on two mornings a week. Mr. C. H. Mollison, M.B., M.R.C.S., now succeeded Dr. Neild in the Chair of Forensic Medicine, and at the instance of the Faculty a substantial testimonial was presented to Dr. Neild by members of the medical profession and others, to show how highly his services, extending over forty years, were appreciated. In March, 1905, Dr. Cherry became Director of Agriculture, and Dr. Bull was made Lecturer on Bacteriology and Director of the Bacteriological Laboratories, with Mr. A. O. Savce as Demonstrator. Lecturers were now given a five years' tenure. Dr. Harvey Sutton was elected the first Medical Rhodes Scholar. The Medical Students' Club Room was now reno-



J. W. Springthorpe, M.A., M.D., M.R.C.P. Lecturer on Therapeutics, Dietetics and Hygiene.



H. C. MAUDSLEY, M.D., F.R.C.P. Lecturer on Medicine



C. H. Mollison, M.B., M.R.C.S. Lecturer on Forensic Medicine.



Felix H. Meyer, M.D. Lecturer on Obstetrics and Gynacology.



vated, and the spare lecture theatre continued to be utilised for several years as a Common Room.

The special appeal for financial assistance in 1904-05 led to the erection in 1905-06 of the new building at the back of the physiology department, of which the ground floor was for a time the laboratory of pathological histology, while the upper floor was devoted to experimental physiology and biochemistry. The bacteriological department was at last properly fitted up throughout. A special benefaction of £500 from Mrs. Aubrey Bowen permitted the completion of the furnishings of the Museum of Pathology, and a donation of £205 from the Melbourne Medical Association was of great assistance to the physiological department and to the Museum of Anatomy and Pathology. The Committee of the Melbourne Hospital at the end of 1905 definitely agreed that the Demonstrators of Pathology should act as Junior Assistant Pathologists.

Meantime a Committee of the Faculty had revised the course of study, and a new Curriculum was finally adopted to come in force at the beginning of 1906. The Faculty desired to divide the course into two equal parts, the first half being devoted wholly to Science, ending with the examination in Anatomy and Physiology near the middle of the third year, the remainder being reserved for advanced subjects and Hospital work. But in the Senate there was a strong demonstration in favour of two full years of Anatomy, with one year of Hospital practice overlapping Anatomy and Physiology. Hence the new curriculum constituted a compromise between the curriculum of 1000 and that which now obtains. The course was arranged in divisions instead of years. The first division occupied the first year Biology was confined within two terms, so as to allow a course of Organic Chemistry and a course of laboratory work in Histology at the end of the year. Division II. occupied the second and third years It was mainly devoted to Anatomy and Physiology; but Materia Medica and Pharmacy came at the end of the second year, and the class series of specimens of pathological histology was mounted at the beginning of the third year. In the third year also students attended the surgical practice of a General Hospital with tutorial classes. A scheme of clinical training was to be submitted by each hospital yearly for approval by the Faculty. There was no examination in the second year. The examination at the end of the third year was in Anatomy, Physiology and Histology, Materia Medica and Pharmacy. The third Division was broken into two subdivisions, the first including General Pathology with Bacteriology, and Therapeutics, Dietetics and Hygiene,

with examination at the end of the fourth year, while the second subdivision embraced Medicine, Surgery, Obstetrics and Gynaecology, Forensic Medicine and Special Pathology, these subjects forming the final examination at the end of the fifth year. But the lectures of Division III. were so arranged as to end at the close of the second term of the fifth year. The Hospital practice of the fourth and fifth year was roughly indicated, but here again a scheme was to be submitted yearly by each Hospital and approved by the Faculty. Attendance in all the special departments was made compulsory, including attendance at the Infectious Diseases Hospital, and special training in Anaesthetics. On the other hand, lectures in Obstetrics and Diseases of Women, and in Therapeutics, Dietetics and Hygiene were reduced to two terms. Four Scholarships were provided for Medicine and Obstetrics, Surgery and Gynaecology (the Beaney Scholarship), General and Special Pathology, and Therapeutics, Dietetics and Hygiene. A prize for Forensic Medicine was also given.

The Examination for M.D. was also modified. The road by Thesis still remained; but for the road by examination, Medicine with Medical Ophthalmology was made compulsory, together with either (a) Obstetrics and Medical Gynaecology, (b) Diseases of Children, including infectious diseases, or (c) Diseases of the Nervous System, including Insanity.

Regulations were also adopted for a Diploma of Public Health practically on the present lines. The Beaney Scholarship of Pathology was increased in value by the University, and it was incumbent on the Scholar to act as Junior Demonstrator in the Department of Pathology. A University Scholarship in Physiology was also established, the Scholar similarly acting as Junior Demonstrator. Great difficulty was experienced in finding time for all the subjects of the M.B. Course, and for a while the expedient was tried of having a short fourth term of lectures, but without success. It was also provided that work in the special departments might be taken before or after the final examination, but no advantage was taken of this provision.

Effective action had also at last been taken for the division of the Chair of Anatomy and Pathology. The recent increase of University Endowment had been absorbed in other ways. The fees of Medical Students and the fees for Degrees were raised. It was agreed that the two Professors should for a time be content with a very small staff of assistants. Professor Allen elected to become Professor of Pathology. The new Professor of Anatomy, who arrived early in 1906, was Richard J. A. Berry, M.D., C.M. Edin., F.R.C.S. Ed., F.R.S.E., Lecturer on

Anatomy at the Royal College of Surgeons, Edinburgh. Mr. A. C. H. Rothera, B.A., M.R.C.S., L.R.C.P., of Emmanuel College, Cambridge, was appointed to the new Lectureship of Biochemistry for purposes of Agriculture, acting also as Assistant to Professor Osborne in Physiological Chemistry. One of the Caroline Kay Scholarships was now for a time awarded in Anatomy, and the Scholar formed a welcome addition to the Demonstrators in the School of Anatomy. Mr. A. E. Morris, M.B., was the first of these Kay Scholars, and Mr. S. Patterson, M.B., was the first Scholar in Physiology. In April, 1906, the Jubilee of the University was celebrated, aid Sir Arthur Renwick, Professor Anderson Stuart and Professor Stirling were admitted to the Degree of M.D. a.e.g. An attempt was made to induce various Hospitals to follow the example of the Melbourne Hospital in appointing Resident Medical Officers yearly according to their places in the last Final Honours Lists. At first the success was very limited, but subsequently the Alfred and St. Vincent's Hospitals, and several hospitals outside of Melbourne adopted this practice to the great advantage of the School.

In 1907 the Faculty concurred in the proposals of the Right Rev. Dr. Frodsham, Bishop of North Queensland, for the establishment of an Australian Institute of Tropical Medicine at Townsville, in organic connection with the Universities of Sydney, Melbourne and Adelaide. The Organising Committee first met in Melbourne, with Professor Allen in the chair, His Excellency Lord Chelmsford kindly attending and taking important part in the proceedings; and in 1909 the Institute was actually established under the able Directorship of Dr. Anton Breinl, formerly in charge of the Runcorn Laboratories in the University of Liverpool. In 1907 it was arranged that, in the final examination for the Degree of M.B., pass and honour papers should be taken at the same time, thus greatly reducing the work of Examiners. Special Boards of Examiners were provided for Clinical Medicine and Clinical Surgery, which now became separate subjects of Examination. On the suggestion of Mr. Bird, Mr. J. A. R. Smith, M.B., was appointed the first Hon. Assistant Demonstrator in Surgery. Human and Comparative Anatomy and Physical Anthropology were introduced into the Science Course. On the suggestion of Professor Berry, a new Society was formed, to promote the study of Anatomy and Anthropology. Dr. Beattie Smith resigned the office of Instructor in Mental Diseases, and received the thanks of Council and Faculty for his long and valuable services. The long correspondence concerning the reserve south of the Medical School was ended, half of the land being attached

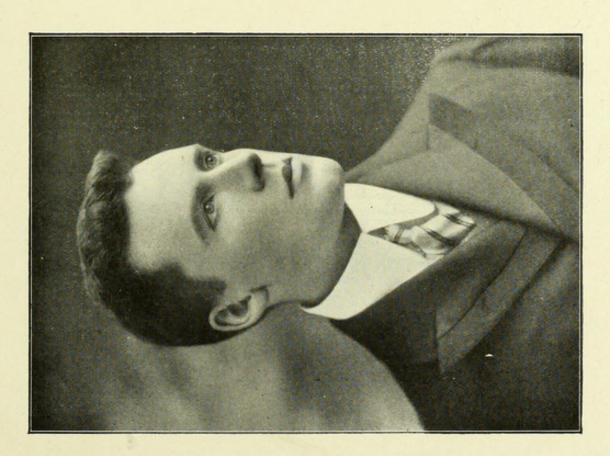
to the Training College for Teachers, and half granted to the University. At the end of the year the Dean of the Faculty made strong representations to the Council concerning the mode of election of the staff of the Melbourne Hospital, and urged that the time was ripe for the establishment of an Electoral College. The Council strongly endorsed the report of the Dean, and sent it to the Staff of the Hospital. It was resolved that an attempt be made to secure similar procedure at all recognised Clinical Hospitals.

The rapid development of the School of Anatomy under Professor Berry now led to extensive alterations in the New Medical School. The whole of the building except the Museum of Pathology was carried up into a second story. The old dissecting room became the Museum of Anatomy, and to it were transferred all the old anatomical collections, including the aboriginal skulls gathered by Professor Halford. But the great feature of the new Museum was the series of frozen sections and of permanent dissections prepared by Professor Berry, and a complete department of anthropology was speedily organised and enriched with great numbers of specimens and casts. A new dissecting room, beautifully lit, was provided on the floor above the Museum. Bone room, prosectors' room, photographic room, work room with dynamo and vertical saw, and various accessory rooms were provided. For the pathological side, the whole upper story was converted into a fine laboratory for pathological histology, accommodating eighty students. The lecture theatre was transferred to the upper floor and enlarged, and continued to be used for purposes of Anatomy and Pathology, being provided with new tables, electric light, improved provision for lantern work, etc. The ground floor corresponding was divided into six rooms attached to the Pathological department. These changes set free the ground floor of the building behind the Physiology department erected in 1905-06, and this was added to Professor Osborne's department, and fitted up as a laboratory of experimental physiology. The new buildings were opened in 1908.

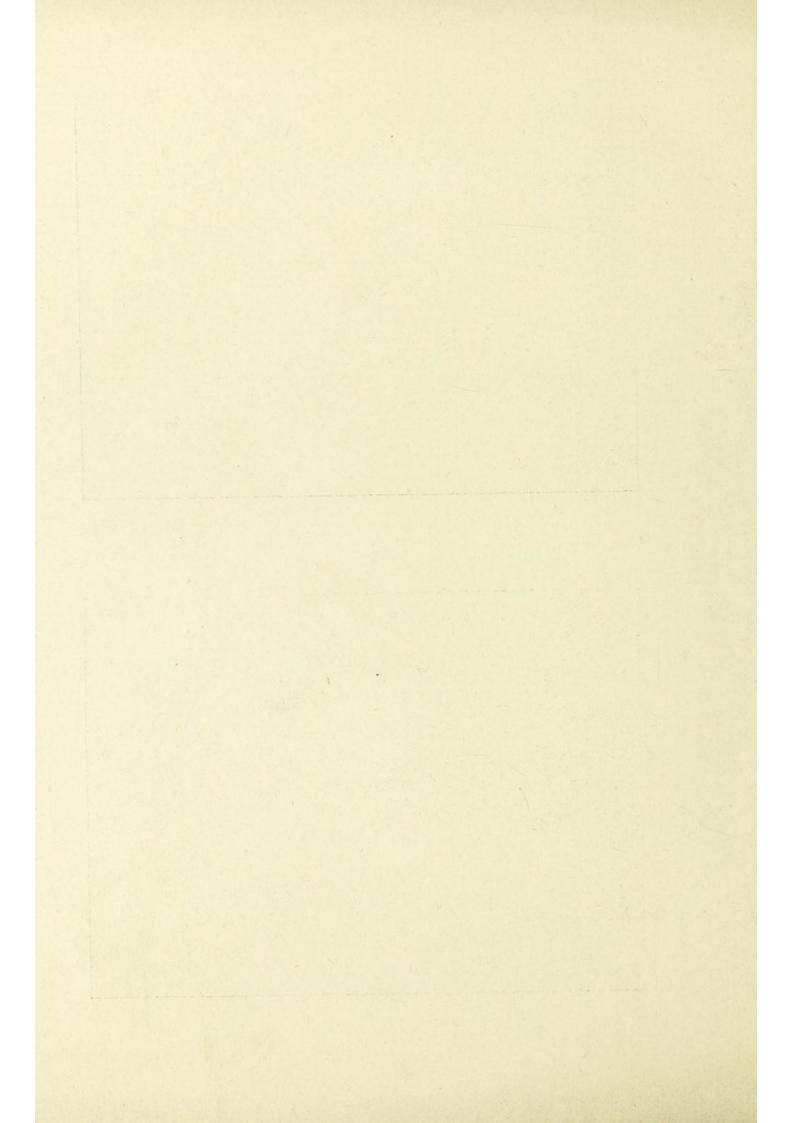
The death of Sir Thomas Naghten FitzGerald, C.B., in the same year removed one who had been a glory of the Clinical School in the Melbourne Hospital from its inception until his retirement as Consulting Surgeon in 1902. In him all the great qualities of the born surgeon found full expression, immense experience being combined with insight and judgment that seemed like intuition, and with exquisite technique, while his personal qualities fitted him to act as the unquestioned leader of the medical profession. At the end of 1908, Dr. Jamieson resigned the Chair of Medicine and received a very special



R. J. A. Berry, M.D., F.R.C.S.Ed. Professor of Anatomy.



W. A. Osborne, M.B., D.Sc. Professor of Physiology.



vote of thanks from the Council and Faculty for his services as Lecturer on Medicine and previously on Obstetrics and Gynaecology, extending over thirty years. His profound knowledge, his attractive literary style, his sense of perspective in teaching, and his personal qualities had won the esteem and affection of many generations of students. These feelings were expressed in the foundation of the Jamieson Prize in Clinical Medicine. The new Lecturer on Medicine was Henry C. Maudsley, M.D. Lond., F.R.C.P., Physician to the Melbourne Hospital, formerly Medical Tutor at University College, London.

In 1908 it was finally decided to rebuild the Melbourne Hospital on the old site. Large additions were also made to the Women's Hospital and to the Eye and Ear Hospital.

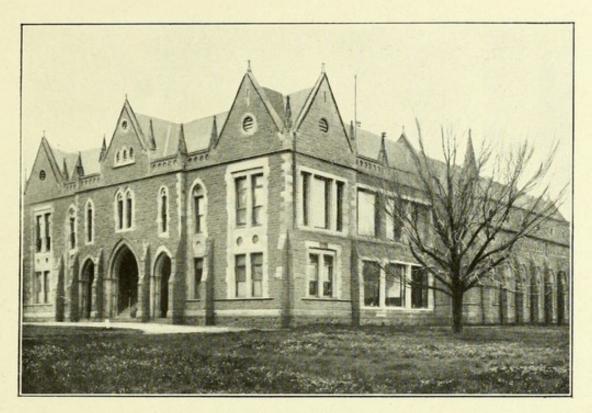
Early in 1909 the University received a bequest of over £25,000 from the estate of the late Dr. James Stewart, who had been a medical practitioner in Ballarat in the early days. The income of the fund was to be devoted to Scholarships in Anatomy, Medicine and Surgery, and in other ways for the advancement of these Sciences. Three scholarships were accordingly founded on the basis that the Scholars should be assistants in the respective departments. The Lectureship in Medicine and the Lectureship in Surgery were placed upon the fund, and named after the benefactor. Provision was made for apparatus, fittings and upkeep in the three departments. At the suggestion of Professor Berry, it was arranged that every second year there should be a course of three Stewart Lectures on some subject of national importance to Australia. Already two courses of lectures have been given, the first by Professor Osborne, on the Climatology of Australia from a physiological and medical standpoint, and the second by Dr. Breinl, Director of the Australian Institute of Tropical Medicine, on the geography of infectious disease in the East, on protozoa and disease and on the influence of climate, disease and surroundings on the white race living in the tropics. In respect of the financial relief afforded by these provisions, the University undertook to provide a Stewart Lecturer and Demonstrator in Anatomy, and a Stewart Lecturer and Demonstrator in Pathology, and to provide for the appointment of a Lecturer and Assistant Demonstrator in Physiology. In this way an important step was taken towards the creation of a proper staff in each of these Departments, but much still remains to be done.

The Medical Students at this time sent in a petition representing that Hospital work ought not to commence till after the main examination in Anatomy and Physiology, that there was unreasonable congestion

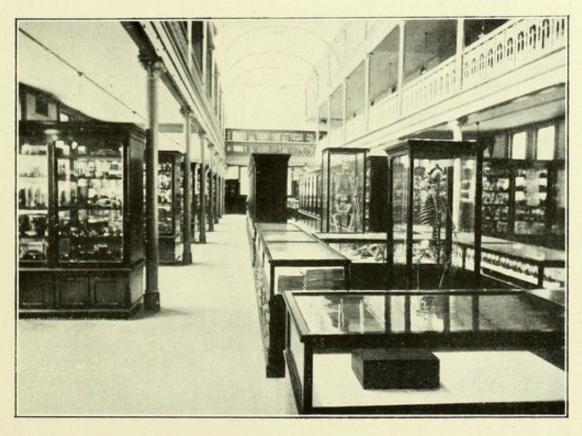
of the course at the beginning of the fourth year, and that Special Pathology might with advantage be removed from the Final Examination. A special course of Biology was now provided for Medical Students, with a minimum of Botany. Histology was joined to Anatomy instead of to Physiology, both for teaching and examination. Rooms were fitted up in Professor Berry's department for the Lecturer on Histology, and the classes were transferred to the new laboratory in the Pathological department. St. Vincent's Hospital and the Alfred Hospital were definitely recognised as Clinical Hospitals, provision being made for Pathological and Clinical laboratories in each. St. Vincent's, now a fine modern hospital of 120 beds, led the way in establishing an Advisory Board in connection with all appointments to the Honorary Staff, the Board consisting of the Professors of Anatomy, Physiology and Pathology, the Dean acting as Chairman. In 1910, the Melbourne Hospital, the Alfred Hospital and the Women's Hospital also established Advisory Boards, including representatives of the Hospital, the University Council, and the Faculty of Medicine, and thus the system of appointing the Honorary Medical and Surgical Staffs was placed on a sound foundation. The Melbourne Hospital Staff issued rules and regulations for the guidance of students in their clinical studies. At the middle of the year Professor Halford died, and so passed away the last of the early professors to whom the University is so profoundly indebted. Steps were taken to fit up the old Natural Museum building as a Clubhouse for students of all Faculties. The Medical Students' Society surrendered their old room, which was added to the Library. The room which had been used as a Common Room was finally fitted up as the main Theatre of Physiology. The School of Anatomy now lost the Kay Scholarship, which in pursuance of the Regulation was transferred to Veterinary Anatomy.

Meantime a special Committee of the Faculty of Medicine, strengthened by the addition of Dr. W. Moore and Dr. Stawell, had been revising the curriculum and preparing an amended draft. The proposals of the Committee had a safe and speedy passage into law, and came in force at the beginning of 1911.

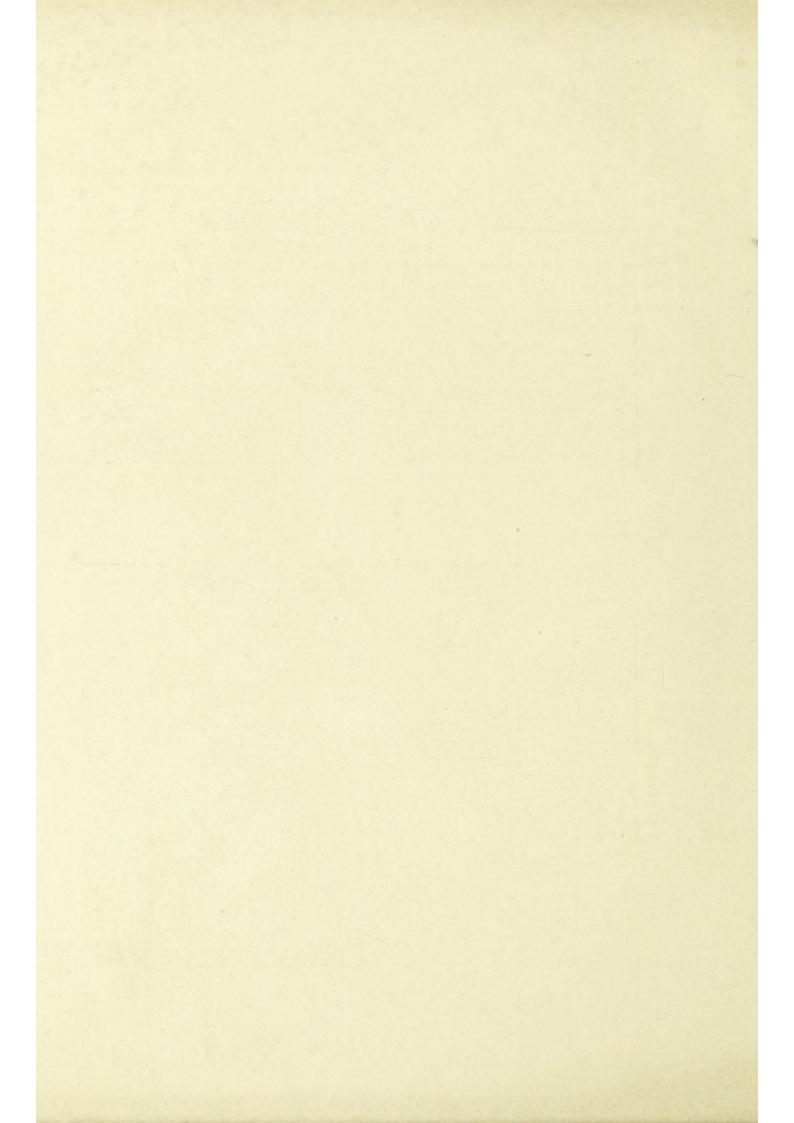
The curriculum was now divided into two halves, one for the foundation subjects, one for applied medicine and surgery with clinical work. Its duration was lengthened to five calendar years. Each half contains two divisions. The first division corresponds to the first year, and is devoted to Natural Philosophy, Chemistry and Biology, with Elementary Anatomy in the third term. The second division occupies the second year and two terms of the third year, and is devoted to



The New Medical School (1908)



INTERIOR OF MUSEUM OF PATHOLOGY



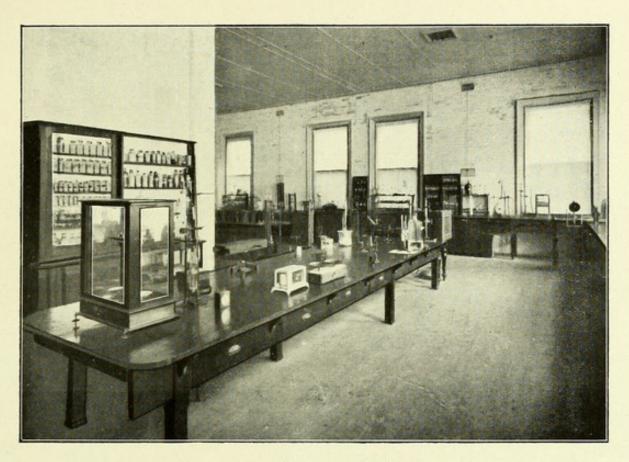
Anatomy (with Histology) and Physiology, the latter in many sections for teaching purposes, including biochemistry, physiology, physiological pharmacology, and clinical physiology. The third division occupies the third term of the third year, and two terms of the fourth year, and includes General and Special Pathology with pathological histology and bacteriology, Materia Medica and Pharmacy, Therapeutics, Dietetics and Hygiene, and Regional and Applied Anatomy. Lectures in Obstetrics and Diseases of Women and Children are given in this division, but without examination. The fourth division is broken into two subdivisions, Forensic Medicine being treated as a single subject with examination following the conclusion of lectures. The main subdivision is devoted to Medicine and Surgery. All systematic lectures are finished by the end of the second term of the fifth year. Hospital practice begins in the third term of the third year with out-patient surgical practice and tutorial instruction in Medicine and Surgery. A definite scheme of Hospital work is prescribed for the fourth and fifth years, and a special long vacation Hospital term is prescribed following the fifth year. Attendance in all the special departments is compulsory, including Gynaecology, Diseases of the Throat, Nose and Ear, and Anaesthetics, as well as Ophthalmology, Diseases of Children, Diseases of the Skin and Mental Diseases. The main examination in March for Pass and Honours includes Medicine, Clinical Medicine, Surgery, Clinical Surgery, Obstetrics and Gynaecology. Three Scholarships are provided for the three great qualifying subjects, and a prize for Forensic Medicine. The Clinical Examinations for Pass are highly organised, with separate Boards of Examiners, two members of each Board examining each candidate. The course for M.D. remained practically unaltered. That for M.S. was modified by division into two parts, so that the subject of Surgical Anatomy and Surgical Pathology might be passed separately.

A new scheme of Terms and Examinations was passed about the same time, under which the Fourth Term of lectures disappeared. It was also arranged that the work of the first two Divisions might count towards the Degree of Bachelor of Science. At the end of 1910 the Council determined once more to collect all fees for clinical instruction, and a scheme was adopted appropriating the fees in each recognised general hospital, making provision for executive officers, such as Registrars, Clinical Instructors for general purposes, Tutors for junior students, Lecturers for senior students, Clinical Pathologists, apparatus, etc. In 1911, at the request of the Staff of the Melbourne Hospital, £500 a year was set aside out of the Clinical fees

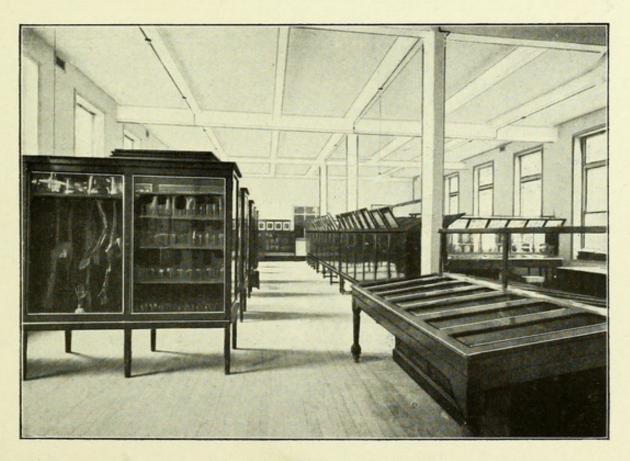
for the appointment of a Sub-director of the Clinical Laboratories, and Dr. G. C. Mathison, Demonstrator of Physiology in University College, London, and a Research Worker in the Lister Institute of Preventive Medicine, returned to Melbourne in 1912 to occupy the new position.

In 1911 the Department of Bacteriology suffered a serious loss by the death of the Demonstrator, Mr. Sayce; and in 1912 the Medical School had to lament the death of Dr. G. C. Rennie, who had rendered such excellent service for so long in the Department of Anatomy and as Surgeon to the Melbourne Hospital. The Fulton Bequest of £1000 accrued in 1911, and the income was devoted to the Scholarship in Obstetrics and Gynaecology. The private foundations in the Medical School now include the Beaney Scholarships in Surgery and in Pathology, the great Stewart Bequest, the Jamieson Prize in Clinical Medicine, and the Fulton Scholarship.

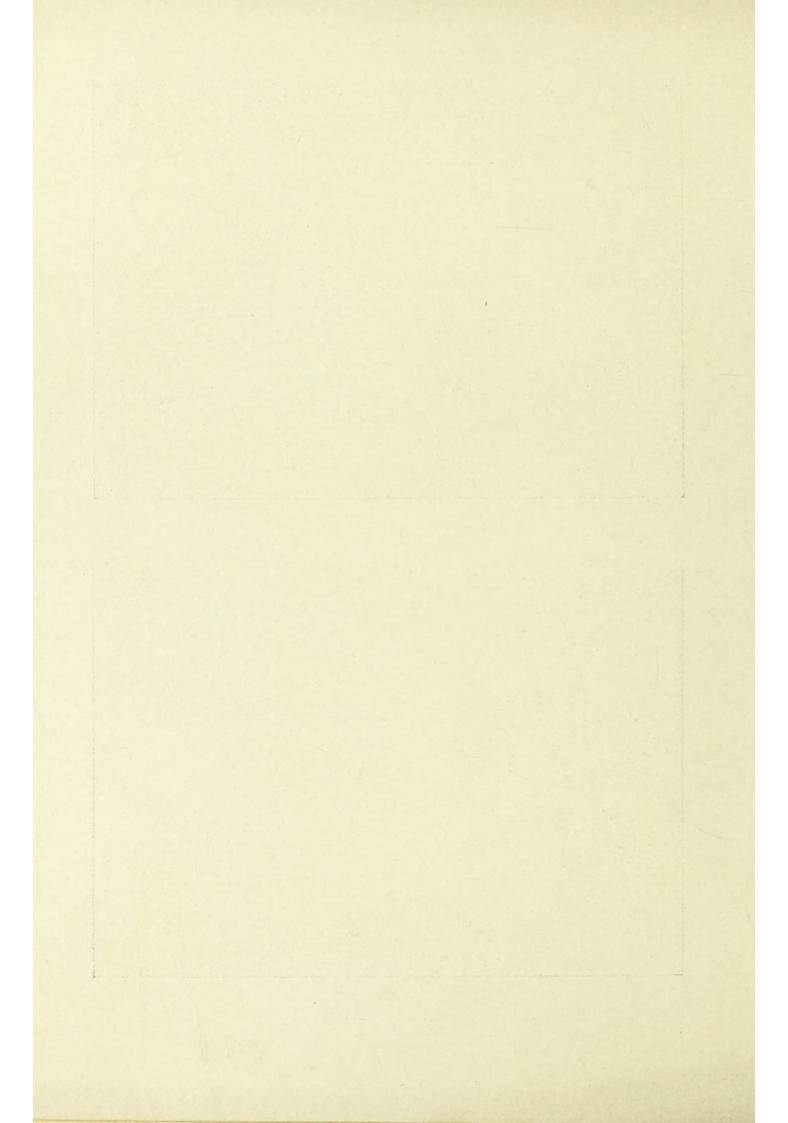
In 1912 Professor Allen visited Europe, and represented the University at the Congress of Universities of the Empire and at the Bicentenary of the Medical School of Trinity College, Dublin. University of Edinburgh conferred upon him the honorary degree of LL.D. A special vote by the Council enabled him to purchase a Zeiss epidiascope for the Theatre of Anatomy and Pathology, and a Zeiss microphotographic outfit and ultramicroscope for the Department of Pathology. Professor Berry was Acting Dean during 1912. During the same year the front of the Old Medical School was pulled down so as to enlarge the Lecture Theatre and main Laboratory of the Department of Chemistry and to provide a laboratory and accessory rooms in Biochemistry, reconstructing and refitting the old theatre of the Department of Physiology. Excellent rooms were obtained, but the external appearance of the buildings was spoilt. In 1913 Mr. F. D. Bird, the Lecturer on Surgery, received the Honorary Fellowship of the College of Surgeons of London. Dr. J. W. Springthorpe, Lecturer on Therapeutics, Dietetics and Hygiene, was created a Knight of Grace of St. John of Jerusalem in recognition of his eminent services in connection with St. John Ambulance Association. Dr. G. Rothwell Adam resigned the office of Lecturer on Obstetrics and Gynaecology after fifteen years' service, and received the hearty thanks of the Faculty, which recognised that the building up of the system of clinical teaching at the Women's Hospital was largely due to Dr. Adam's personal work and initiative. Dr. Felix Meyer, Surgeon to In-patients in the Women's Hospital, was elected to the vacant chair. It was arranged that after 1914 there should be only one class list in the Final Honour Examination, the Scholarships being given independently of position in the



INTERIOR OF A LABORATORY OF PHYSIOLOGY.



INTERIOR OF MUSEUM OF ANATOMY.



class list. The Lecturer on Histology, Mr. W. Fielder, died in 1913, greatly regretted and esteemed, and was succeeded by Dr. Gilbert Lamble as whole time Lecturer and Demonstrator. The Faculty reported on the needs of the Medical School as regards buildings, estimating the immediate necessities at £11,350, and the prospective requirements at £19,100. The Faculty was able to pay back part of its old debt to the Faculties of Arts and Law by permitting the Professor of English to use the Medical Theatre in the mornings. The first sections were now being opened of the New Melbourne Hospital, which is being erected at a cost of about £200,000, largely through the beneficence of the Wilson Trust. It is certain that, as a Clinical School, the Melbourne Hospital will now rank far higher than was possible in the past. Dr. Barrett brought forward proposals for the appointment of Professors of Clinical Medicine and Clinical Surgery, and also for the appointment of Research Residents in the Clinical Hospitals. Mr. John Grice, President of the Melbourne Hospital, provided £1000 for the temporary endowment of a Cancer Research Resident Officer in the Melbourne Hospital. At the close of the year, subscriptions by medical practitioners and a grant from the David Syme Trust provided for a considerable enlargement of the central portion of the old Department of Physiology, giving a larger laboratory for physiological chemistry on the first floor, and additional rooms for aseptic operations, skiagraphy, etc., on the ground floor. At New Year, 1914, Professor Allen, Dean of the Faculty, received the honour of Knighthood.

Reference has been made to the eminent services rendered in the middle period of the School by such workers as Mr. G. A. Syme and Dr. G. C. Rennie, as well as by the Lecturers in Natural Philosophy, Chemistry and Biology. But in recent years, new foundations have greatly multiplied the staff of demonstrators and assistant lecturers in the several departments. It must suffice here to mention such men as Dr. Colin Mackenzie, Dr. J. H. Anderson, Dr. A. W. D. Robertson and Dr. Upjohn in Anatomy, Dr. Chapman, Dr. S. W. Patterson, Dr. Mathison and Dr. Jona in Physiology, Dr. Kilvington, Dr. Chapman, Dr. Constance Ellis, Dr. Sewell, Dr. Trinca and Dr. G. Lamble in Pathology, Miss Davies, Mr. Adeney and Miss FitzGerald in Bacteriology. This history has naturally been devoted mainly to the Medical School within the University, but incidentally large reference has been made to the part played by the staffs of the Clinical Hospitals. To the members of these Staffs the University owes a deep debt of gratitude, and the Medical School proudly recognises that its own alumni

now form a large portion of the Clinical Teachers of the School. The future of the School is to a great degree in the hands of its own young graduates. To their care the School commits itself with affection and confidence.

THE MEDICAL SCHOOL JUBILEE.

April 29th - May 2nd, 1914.

PROCEEDINGS:

THE JUBILEE DINNER.

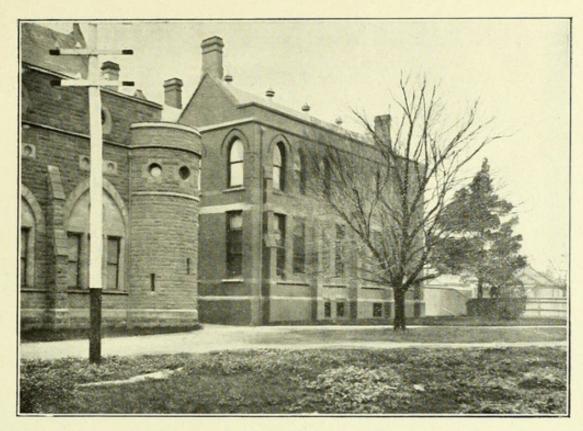
The Jubilee Dinner was held at the Grand Hotel on Wednesday, 20th April, 1914, His Excellency the Governor of Victoria, Sir Arthur Lyulph Stanley, K.C.M.G., occupying the chair. On the right of His Excellency were the Vice-Chancellor of the University (Dr. J. H. MacFarland), the Speaker of the Legislative Assembly (Sir Frank Madden), Professor Anderson Stuart, Dean of the Faculty of Medicine in the University of Sydney, the Lord Mayor of Melbourne (Councillor D. V. Hennessy), the Hon. Victor Hood, the President of the Professorial Board (Dr. Orme Masson), the President of the Victorian Branch of the British Medical Association (Dr. A. L. Kenny), Professor Berry, the Warden of the University Senate (Dr. J. P. McInerney), and the Registrar (Mr. J. P. Bainbridge). On the left were Professor Sir Harry Allen (Dean of the Faculty of Medicine), the Minister of Public Works (the Hon. F. Hagelthorn), representing the Government of Victoria, Professor E. C. Stirling, Dean of the Faculty of Medicine in the University of Adelaide, Sir Hartmann Just, K.C.M.G. (Permanent Under-Secretary of State for the Colonies), Mr. John Grice (President of the Melbourne Hospital), Professor Osborne, the President of the Melbourne Medical Association (Dr. Altmann), Colonel C. S. Ryan, P.M.O., and the A.D.C. to H.E. the Governor. The gathering numbered about 180, including many lady graduates, and members of the Council, Senate and Graduates' Association.

The toast of "The King" was given by His Excellency the Governor.

DR. ALTMANN, President of the Melbourne Medical Association, in proposing the toast of "His Excellency the Governor," offered His Excellency a hearty welcome. It had been said at intervals that Imperial Governors could be dispensed with. Such remarks reminded

him of a tale of a guide in Switzerland. There was a very dangerous turn in the path, and a post was put up to warn tourists. After many years the post was removed; and when the guide was asked the reason for its removal, he replied that no one had fallen over at that spot, so that it was deemed useless. Apart from all other services rendered by the Imperial Governors, they constantly reminded the people of the State that they were part of the British Empire, and that their safety lay in the firmness of that connection. He welcomed His Excellency for three reasons, as Governor of Victoria, as a graduate of a famous University, and as the son of a distinguished scientist, who recently visited Australia with the Imperial Parliamentary party. He trusted that His Excellency would complete his full term of office, for the people of Victoria would endeavour to make his stay as pleasant as possible.

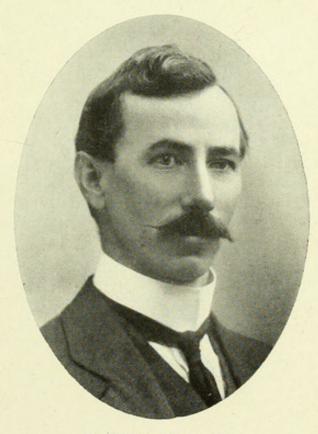
HIS EXCELLENCY THE GOVERNOR, in acknowledging the toast, said that he had always been deeply interested in the medical profession. Doctors were the missionaries of civilisation and the forerunners of social reform. The medical profession was truly cosmopolitan. Looking back on the fifty years that had elapsed since the Melbourne Medical School was founded, even a layman was astounded at the progress in medical theory and practice. By wise advice given to politicians, doctors had greatly reduced the death rate in Victoria. In comparing the death rate of England with that of Victoria, it should be remembered that England had been sending away its virile youth, and retaining the old people, so that a crude comparison of death rates would not be fair. But with children under one year the death rate was considerably lower in Victoria than in England, and lower in Melbourne than in London, though England did not stand badly in its care for the children born in her midst. Victoria stood nearly first among the countries of the world in safeguarding the health of the This result was largely due to the work of the Medical School. Victoria had also reduced very largely other avoidable mortalities, especially from diseases of the lungs. We sometimes put up statues in honour of conquerors, but if merit had its deserts, statues would go up for those who are fighting, not without danger, the battle against disease. Doctors, men and women, were in a sense "Admirable Crichtons." If in some ways they resembled soldiers, they also were like solicitors, in that they gained the confidence of their patients. They were diplomatists in that they arranged points of war in people. They were politicians, not in the crude sense, but in supplying politicians with facts upon which to build their sometimes airy superstructures. They were priests, giving good advice after hearing confession.



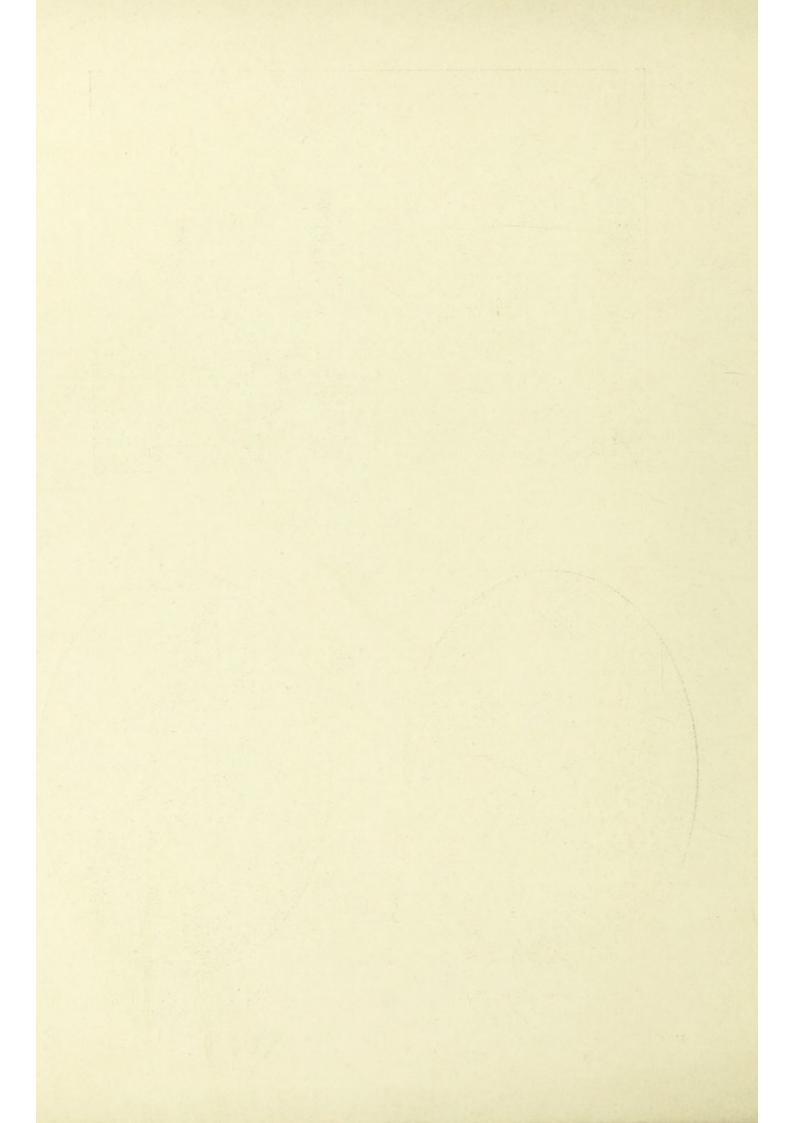
BACTERIOLOGICAL LABORATORIES.



THOMAS CHERRY, M.D., M.S. Professor of Agriculture.



R. J. Bull, M.D., B.S. Lecturer on Bacteriology.



It was a great profession, in which the average was very high. One rarely met a bad doctor. (Laughter.) You meet bad parsons, bad lawyers, bad politicians, bad specimens of every other profession, but a layman did not know when the doctor was bad, so it came to much the same thing in the end. (Laughter.) It had been said that a man was either a fool or a physician at forty. Most of those present had made their choice. He had still a little time in which to decide, but he assured his audience that when the choice came, he would choose to be a physician. (Cheers.)

THE HON. F. HAGELTHORN (Minister of Public Works) proposed the toast of "The University of Melbourne." The people of Victoria were proud of their University, proud of the Medical School, proud of the other Schools. Victoria could well admit that much of its progress and prosperity was due to the educational work of the Melbourne University and the achievements of its graduates. Apart from Medicine, the University had departed largely from the traditions of the old world Universities, and had come into closer touch with the industrial life of the community. He was sorry to introduce a note of criticism in referring to the School of Agriculture. He did not criticise the government of the University, for they were all responsible. Here was a School without students, and a Professor without equipment, a condition of things that could not remain without discredit to the University as well as to the Government. He trusted that the University Council and others would devise a scheme which would be a credit to the State and enable agriculture to do more for the people of Victoria. He hoped that the extension of educational work which had been disinterestedly undertaken by the Council of the University would be appreciated by all sections of the community. All countries which had been most efficient had been those efficient in education. He trusted that the University would continue to do as good work as it was now doing, and that the work would be on a still more extensive basis. (Cheers.)

THE VICE-CHANCELLOR (Dr. J. H. MacFarland) thanked the Minister of Works for the sympathetic way in which he had proposed the toast of "The University of Melbourne." As a University they lived on the goodwill of the people of the State, on the goodwill of its representatives in Parliament, on the goodwill of the Government. It was therefore with peculiar pleasure they listened to the kindly way in which Mr. Hagelthorn acknowledged the work done by the University. They thanked him for suggesting improvement of the School of Agriculture in that University. Although the number of students was small, and although, perhaps, there was not much in the window to

show for the work done by the professor and the lecturers, he could assure Mr. Hagelthorn that there was a great deal of quiet, genuine work being carried out on the best lines in the University, and there was every encouragement for the Government to give further funds for that particular School.

It was, indeed, necessary to remember that when the Professorship of Agriculture was established, a condition was imposed that the University should not proceed forthwith to create a Department of Agriculture. But the University had endeavoured to make the best use of Dookie College, and of other existing organisations, and proposals were under consideration for the provision of further facilities for practical work With larger endowment, other developments would follow.

In responding to the toast of the University, one's mind naturally turned to two questions, firstly, as to the benefits which the Medical School received from its connection with the University, and secondly, the benefit which the University as a whole received from the fact that the Medical School was one of its most important parts. The Vice-Chancellor read a definition of a University given by Viscount Bryce from which the answer to the first question was easily obtained. "A University is a body of persons teaching the highest knowledge, that knowledge which is of most worth to men, either because it deals with their highest interests, appeals to their noblest feelings, evokes their finest powers, or because it is the root of their practical achievements, forms the basis of their control of nature, supplies the explanations of the phenomena of their own life, guides them in the path of moral and social advancement." It was because our University Medical Students were brought into contact with some of the ideals set forth in that definition that the connection of the Medical School with the University had its benefits. It was true that this definition was of an ideal University, but a University should be the home of ideals; and so soon as the University lost those ideals, he would recommend the Government to close its doors and supply the technique in small schools for medical men, for lawyers and for engineers. It was the association of students with some of the ideals so set forth, at a time of life when impressions had their most lasting effects, that seemed to be the advantage received by the Medical School as a part of their University. It was the duty of a University to train students for life, not merely for a means of livelihood. (Applause.) They had all heard that man was born a gregarious animal. The sympathy of the members with each other heightened the emotions and raised men above their normal selves. It was that fact which made oral teaching superior to the

printed page. It was that motive which induced the Medical Council to make lectures compulsory, whatever the quality of the lectures might be. (Laughter.) Take the average of all lectures delivered, and one could then see the enormous advantage which oral teaching possessed. Outside the class room the student received advantages from coming in contact with students of other Schools, and in that way had his outlook widened, and had some training for citizenship as well as for his profession. The lecturers also received great encouragement from their converse with lecturers in other subjects with the same general outlook on the questions of the day.

As to the advantages that the University received from the Medical School, which forms such an important part of it, the list would be far too large to give. The chief advantage was to be found in the three men whom they had there acting as Medical Professors. The pictures of six medical professors appeared in a morning paper, but the Medical School could not be allowed to claim as its own more than three of them, who for devotion to duty would do honour to any University in the world. (Cheers.) And he expressed himself as glad to see their devotion to duty extending beyond the limits of their departments, for they had a great deal to do with regard to administration and organisation, which to them must be wearisome and dreary. They had also a number of leading medical practitioners of the city, who were teaching in the class rooms and hospital wards; and on behalf of the University he desired to acknowledge the loyal support it had always received from the Medical profession in every undertaking which required support of the graduates of the University.

MR. JOHN GRICE (President of the Melbourne Hospital) proposed the toast of "The Medical School." The word "school" reminded him of one of the postulates of Euclid—"the whole is greater than its part"—consequently the University which included the Medical School should be the toast of the evening. As they were celebrating the 50th anniversary of the Medical School, he would claim to contradict Euclid for once and say that the part was greater than the whole. It was thought proper that the President of the Melbourne Hospital should propose that toast, but he regretted that the duty had not been entrusted to one who could do fuller justice to it. The connection between the Medical School and the Hospital had been a very old one. The Melbourne was for many years the sole clinical school recognised by the University, but now the Alfred and St. Vincent were also recognised; Melbourne was still the largest clinical school and was bound to the Medical School by close and unseverable ties; for the curriculum of

the University consists of a five years' course in two moieties—the first spent in gaining scientific knowledge and the second in applying that scientific knowledge to practical work both at the hospital and at the University. Many of those present forgot the examinations they passed through; they looked back and said that the University and the Hospital days were the happiest of their lives. (Hear, hear.) Very probably they were not. They had forgotten the unpleasant and remembered only the jolly days of their youth.

His time at the University commenced four years after the opening of the Medical School, but he did not propose to worry them with reminiscences. The medical students were good fellows in those days. There were no residential colleges, Union Rooms, palatial luncheon places. (Laughter.) The consequence was that friends were made at the different sports in which they were engaged. His chief friends happened to be medical students, in that they took more assiduously to rowing than any other schools did. He recalled the names of the late Dr. Tom Hope and Dave Wilkie, who won for two or three years in succession the Challenge Pairs on the Yarra. He had no hesitation in stating that they were the finest pair of oarsmen (they rowed without coxswains in those days) that ever rowed in fixed seats on the Yarra.

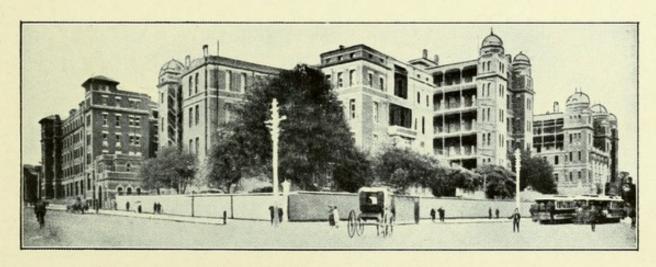
Hebrew and Theology were not taught in the Medical curriculum, but the derivation of the word "Jubilee" came from a Hebrew word meaning "a ram," then a ram's horn. According to the Jewish laws their Jubilee of 50 years had to be proclaimed by a blast on the ram's horn, that is by trumpets. Medical schools and other great institutions could live to celebrate jubilees and centenaries and possibly to millenaries, while we poor mortals could only count our existence by years. If any institution had a chance to have a long and prosperous career, it should be the Medical School of Melbourne, which was a prosperous and growing city in a State that was not as fully developed as it would be, free from the trouble and strife of nations around them. The Medical School of Melbourne was bound to have a long life, and 950 years hence it would be celebrating its Millenary, and the graduates of that day would be wondering in what wild orgy they were in 1914 celebrating their first Jubilee. (Laughter.)

It was a pity to introduce an element of sadness into their gathering. He felt he must refer to those members of the original Council of the University who worked so hard to get that school established. They all felt with him a deep regret that not one of them was alive. How proud would they have felt to see the monument built on this



The Old Melbourne Hospital, Founded 1846.

Lonsdale Street Elevation.



THE NEW MELBOURNE HOSPITAL. South-west View.



foundation, and see how the prediction in the motto, "Postera crescam laude" had been fulfilled in the case of the Medical School.

From the early Reports issued from time to time they learnt that the Medical School was contemplated within two years of the opening of the University, namely, in 1857. Despondent reports followed—"no money available"—although pressure was brought to bear on Governments. At last came the Report of 1864: "The confident hope may well be entertained that this, the first and only Medical School open in Australia, will not fail to attract in due time a large volume of students, and expanding will redound in great credit and honour to the usefulness of the University."

These predictions had been abundantly fulfilled; the expansion of the Medical School had been phenomenal, and great credit had been brought to the University by the large body of Graduates that had been sent forth through the State of Victoria, and into sister States, and into other lands. At a very early stage it encouraged women to come into it, and they have brought great credit to the School; considering the moderate number, they have held a high place in the final honour lists at the University. The enormous attendance at that gathering showed more clearly than anything he could say the popularity of the Medical School and the high esteem in which it was held. It had succeeded because of the wealth in the community, which had called forth a demand for competent and well-trained medical men; but it would not stand in such high repute if it were not for the high standard of teaching set in the University, and the zeal of its teachers both in the University and at the Hospital. Their School was singularly fortunate in having men of such stamp. They had high ideals of Education, and sympathised with the Students and helped them to become enthusiastic over their work.

They were also fortunate in that they had generally been able to get Clinical Instructors from among the leading Physicians and Surgeons in Melbourne. They had also been able to select their Demonstrators from among their most distinguished Graduates. Their Dean, Professor Sir Harry Allen, one of their own graduates, had been selected by His Majesty the King as the representative of the Medical Profession for the honour of Knighthood, with which honour the whole of the profession of Melbourne agreed. Professor Allen took over the position from Professor Halford in two of its branches—Pathology and Anatomy. That was in 1882.

They had also Professors Masson, Spencer and Lyle. These gentlemen of distinguished attainment and works had been recognised by being accorded the Fellowship of the Royal Society. They subsequently appointed Professors Osborne and Berry, both of whom were distinguished in their particular subjects. With men such as these at the head it stood to reason that the Medical School was what it was —as good, having regard to its equipment, as any school in the world. He hoped that in the future it would even surpass the attainments of the present.

PROFESSOR SIR HARRY ALLEN, DEAN OF THE FACULTY OF MEDICINE, in replying to the toast on behalf of the Faculty of Medicine, the Graduates and the Under-Graduates, acknowledged with thanks the kind terms in which the toast had been proposed, and the warmth with which it had been received. He desired in the first place to read various messages which had been received.

The first was from the Dean of the Medical Faculty of the Otago University. "In the name of the Otago Medical Faculty, I beg to offer you and your Colleagues most hearty felicitations on the approaching Jubilee of the Melbourne Medical School, and in congratulating you on the record of its growth during the past fifty years to express the hope that its future may be as prosperous as that record forecasts."

(Signed) H. L. Ferguson, M.D.

Secondly, a letter of regret from Dr. Challinor Purchas, President of the Australasian Medical Congress. He was to have been with them, but found that he was unable to leave Auckland. He wished them every success in their celebrations.

3. From Professor Frank Cole Madden, of Cairo. "Hardly have our congratulations been expressed to you . . . than we must again extend them fifty-fold to our dear Alma Mater, who is now becoming so old and big. I am sorry I cannot be with you. . . I should very much like to have a copy of the Jubilee History, and hope that your natural diffidence will not prevent you from laying due stress on the excellent prestige of the University of Melbourne among the heads of the Profession, more especially the examining bodies in England."

Your grateful old Student,

Frank C. Madden.

4. A cable from Dr. Isaac Jones, in London: "Fifteen Graduates send Jubilee congratulations."

5. A cable from Dr. Arthur Halford: "Returning from America. Wish to express my felicitations honour conferred you and Jubilee celebrations. Dear Old School. Affectionate regards to Old Teachers and Colleagues."

Sir Harry Allen also desired to take this opportunity of expressing thanks to the Executive Officers of the Jubilee celebrations, especially to the Hon. Treasurer, Mr. C. H. Mollison, and to the Hon. Secretaries, Drs. Konrad Hiller and E. Douglas Stephens, who had been untiring in their work.

In replying to the toast of the Medical School, he said: - "We cannot help thinking of the initial difficulties which beset those who laid the foundations of the Medical School, and of the constant difficulties which attended its advance up to the present day. Think also of the enormous changes which have taken place in scientific methods. Think of the changes which have taken place in the Physical Sciences in the last fifty years. Think of the periodic law in Chemistry, which has been described as the 'Alphabet of the Creator.' Think of the coming of the doctrine of Evolution, which has transformed our whole outlook on the world around us, and on ourselves even in our highest relations. Think of the coming of the practice of Antiseptic Surgery which has revolutionised all surgery. Think of the coming of the new science of Bacteriology which has been built up with such insistent care. Think of the great men who have been responsible for these new developments,-Mendeléef, Darwin, Lister, Pasteur and their successors,and you will see how all opinion has been in a state of flux, and the task of teachers and taught has been correspondingly difficult.

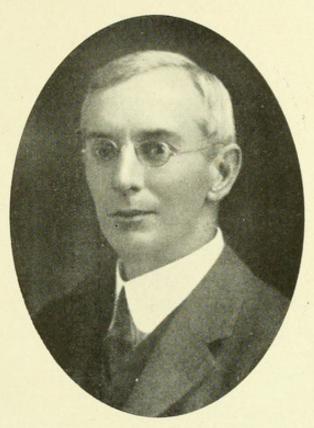
"Turn to the initial difficulties of our own School. The Council tried to get funds wherewith to start it, but there were no funds available. £9000 a year was the outside the Government would give, and that was appropriated for general purposes of the University. No money was available for buildings. Yet the Council resolved that the Medical School should be opened notwithstanding those difficulties. Victoria at that time had only 550,000 people; the finances were not in a good state; the excitement of the gold fever had passed, and the Government had difficulty in its own finance. We had not a powerful University as now. The total number of new Students in one year was two. In the very year when the Medical School was opened, there were only 92 attending lectures in all branches, and of those only 37 were matriculated. Such were the conditions under which the Medical School came into being. What was the driving power that compelled

the Council? It was largely the will of one man, Anthony Colling Brownless. (Applause.) How did they get funds? By a willing act of self-retrenchment, so that Lecturers in other departments contributed to the Medical School out of their own salaries, and so some small funds were got for the primary living expenses of the Medical School. We have found a way to return a little of our debt in that we have been able recently to house part of the Arts School in the Medical Building. As a commencement a lecturer was appointed in Medical Chemistry, Dr. Macadam, the Government Analyst, who lectured in his own laboratory in Russell Street. That was the only teaching provided for the first year. At the end of the first year Professor Halford arrived. I read you the telegram from one of his sons, Arthur; I am pleased to see his eldest son, George, here to-night. (Cheers.) It was Dr. Halford who with Dr. Brownless devised and carried out the early curriculum, and that was another act of great courage. Under the circumstances already narrated, in spite of the advice of Professor Paget that we should have a course of three years or at most of four, they decided on a five years' course, a thing that was practically unknown,-five years with five stiff examinations! The courage was almost superhuman. Year by year the necessary staff was provided, till the young School was complete; and soon the hopes of the founders were justified in large degree, while later results have fulfilled them completely."

What is our present condition? We have on our roll over a thousand graduates who have gone through the curriculum from beginning to end, and who have spread widely over Australia and beyond its limits. We have 380 students taking out the full course, and large numbers are attending lectures in special subjects, for example in connection with Dentistry, Massage, Domestic Science, Dairy Bacteriology, etc. In the School of Anatomy alone, over five hundred names are on the roll. If we look higher we find that nearly two-thirds of the members of the Faculty of Medicine were trained in our own School. In the Melbourne Hospital 19 physicians and surgeons out of 21 are our own graduates, and in the Alfred Hospital 9 out of 12. In St. Vincent's Hospital, of the physicians and surgeons acting as clinical instructors, 10 out of 12 belong to our School. Among the special hospitals, we claim 12 out of 13 at the Children's Hospital, and 10 out of 12 at the Eve and Ear. The record of work accomplished is a subject of legitimate pride. For example, there is the name of William Snowball, which should never be forgotten-(applause)-a great man and a great reformer. He did wonders at the Children's Hospital, and was worthily succeeded by a line of our own graduates, P. B. Bennie,



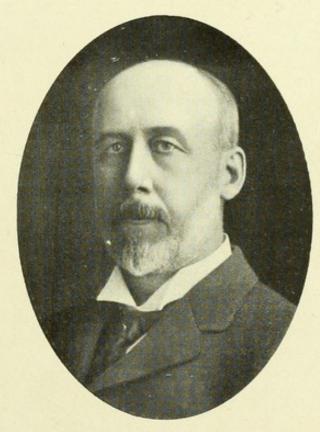
W. Snowball, M.B.
Late Surgeon, Hospital for Sick Children.



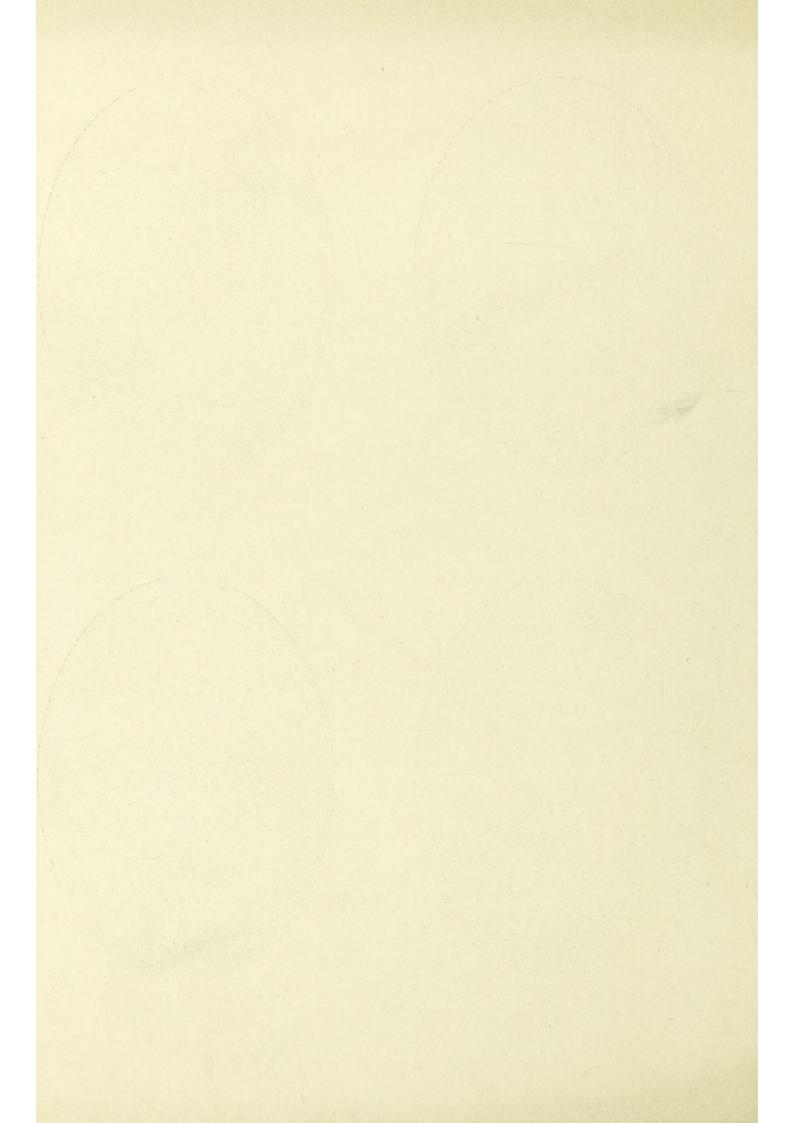
A. J. WOOD, M.D., B.S. Physician and Surgeon, Children's Hospital.



G. C. RENNIE, M.S., F.R.C.S. Late Lecturer on Anatomy.



J. W. BARRETT, M.D., M.S., F.R.C.S. Ophthalmologist, Melbourne Hospital.



A. Jeffreys Wood, R. R. Stawell and others. At the Eye and Ear Hospital, J. W. Barrett found a fine field for his energies. The list might be indefinitely extended. He wished on behalf of the School to thank the Staffs and the Managers of the Clinical Hospitals for all they had done to facilitate education in their midst. If time permitted, he would gladly have spoken of the work of our graduates in provincial cities and towns in Victoria, and especially of the service rendered in small country districts, where in many instances distinct local medical and surgical centres had been created. His heart went out very warmly to those who laboured so well under the limitations of circumstance. In other States they had not been idle. The late Dr. McAllister was a worthy representative in the Royal Prince Alfred Hospital, Sydney, and at present Dr. Chapman was assistant to their guest, Professor Anderson Stuart, and Dr. Lidwill was on the staff of the Royal Prince Alfred. In Queensland, Ernest Jackson was President of the Medical Board, and quite a colony of Melbourne graduates had gathered round him. In Adelaide, Dr. Poulton was Lecturer on Surgery, and Dr. de Crespigny was Director of the Pathological and Bacteriological Laboratories. In Tasmania one of their oldest graduates, Dr. W. H. Macfarlane, was Superintendent of the New Norfolk Asylum for the Insane. In New Zealand, another very early student was found in Walter Thomas, of Christchurch, and Auckland could show Dr. Pabst, Dr. Tracy Inglis and others. Outside Australasia time would allow only the mention of Professor Frank Cole Madden, of Cairo, and of the medical missionaries working in India, China and Corea. In the field of research, they could quote with pride the investigations of Embley in anaesthetics, of Kilvington in nerve splicing, of Nattrass in transplantation of the ovaries. In the School of Anatomy, he could mention the Atlas of Tasmanian crania, the Atlas of Australian Aboriginal Crania, and other important works; in Bacteriology, valuable enquiries had been conducted concerning germcarriers; and in Pathology he could not omit Dr. Gilbert Lamble's investigation of the relations between the Wassermann test and the histological criteria of syphilis. Much remained to be done in the promotion of research, but grateful reference must be made to the recent provision of new rooms in the Department of Physiology, by the generosity of the graduates and the trustees of the David Syme Fund. The donors might be sure that their generosity would be productive of great good, not only to the Medical School, but also to the community.

"I have already trespassed too far on your attention and hasten to a close. To you, as representing the body of medical graduates, I make one last appeal. Remember your own power. The future of the Medical School, the honour of the Medical School, and the work of the Medical School are largely in your hands. What you determine to make the School, it will probably become. I thank you most heartily for the way in which you have received this toast."

DR. A. L. Kenny (President of the Victorian Branch of the British Medical Association) proposed the toast of The Guests. He said:—
"The time is late, but much might have been said as to the eminence of our guests. We have a man here, a distinguished man from the Councils of Empire, in the person of Sir Hartmann Just, who is Assistant Under-Secretary of State for the Colonies. He has come with his eyes widely open to see the management of affairs in this daughter of empire, and I am sure that this audience will welcome whatever he may be willing to communicate.

"Sir Frank Madden we have also with us, the Speaker of the Legislative Assembly. We welcome him here both because of his exalted position and because of his close relationship to our beloved Chancellor. (Applause.)

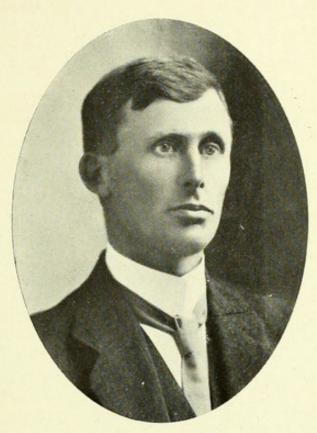
"We have also the Minister of Public Works, Mr. F. Hagelthorn, who proposed the toast of the University of Melbourne. I should like to thank him for his sympathetic remarks, and to say that during the past year when certain members had occasion to approach him and put certain proposals before him to protect the public against a raging epidemic, those members came away persuaded of the ability and boldness and fearlessness with which he takes charge of the affairs of his department. We congratulate the State as well as Mr. Hagelthorn on his appointment as Commissioner of the Panama Exhibition. We know that he will organise his work well, and that the representation of this State will be in most excellent hands.

"We offer a welcome to the Lord Mayor. He is a great friend of the medical profession, a gentleman who in his official capacity speedily put into practice measures to stay the epidemic. It will be in the memory of all persons here that when it was made clear that steps should be taken, no department was more quickly at work than the officers of the City Council under his direction.

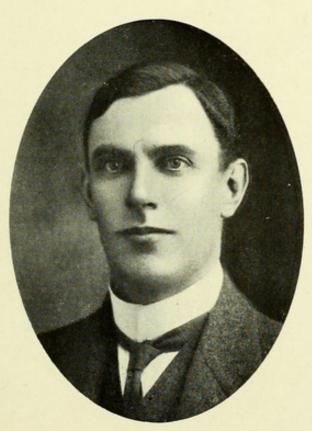
"We welcome, too, the Dean of the Faculty of Medicine in the University of Sydney, Professor Anderson Stuart. He represents a sister School and brings with him the greetings of its members in the



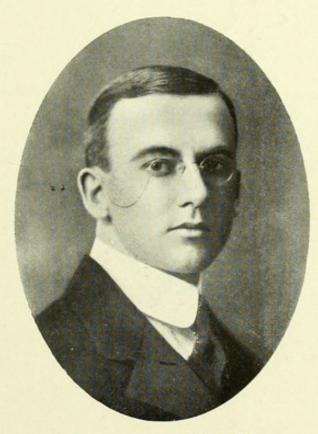
E. H. EMBLEY, M.D., B.S. Chief Anæsthetist, Melbourne Hospital.



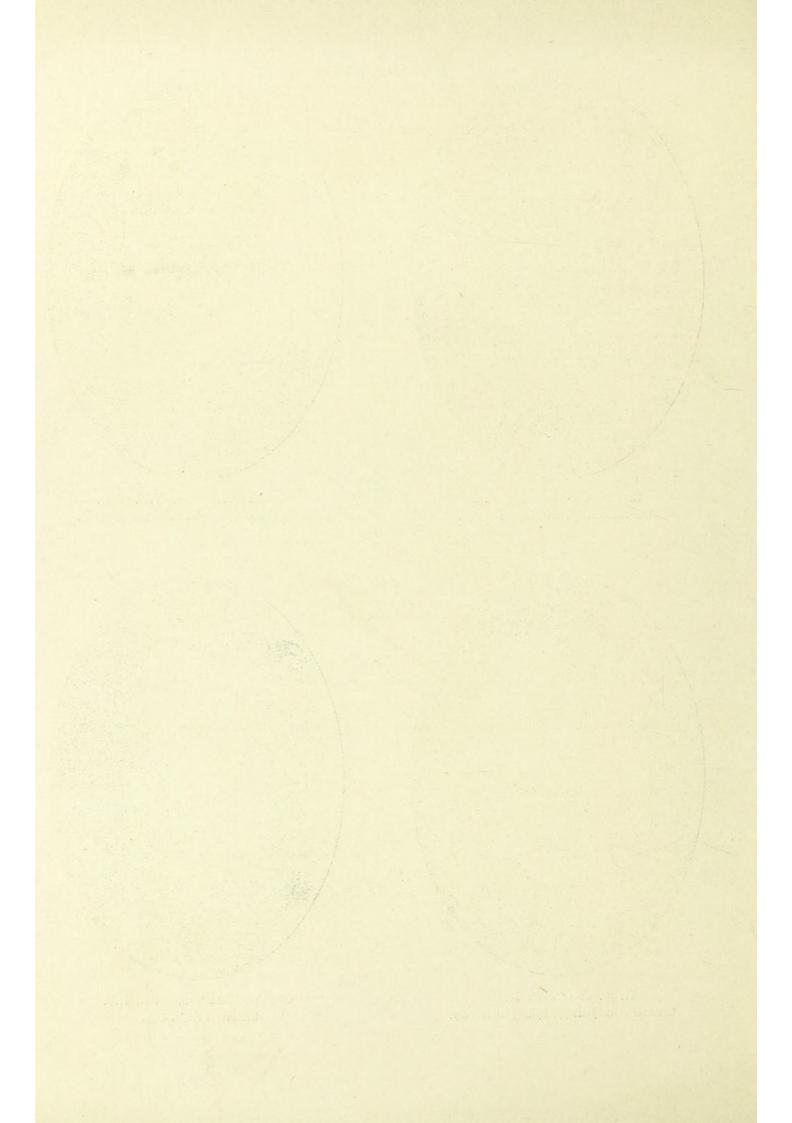
Basil Kilvington, M.D., M.S. Surgeon to Out-Patients, Melbourne Hospital.



H. G. Chapman, M.D. Lecturer on Physiology, Sydney University.



GILBERT LAMBLE, M.D., B.S. Lecturer on Histology.



celebration of our Jubilee. No one could have been more worthily sent; and we accept the greetings in the spirit in which they were sent. Their Medical School is in a différent position from ours. The development was not attended with such difficulties as our own. They had the experience of generous benefactions of wealthy citizens, an experience which we have yet to realise in such measure. It did them no harm; they responded to the stimulus and they have no more ardent admirers than the graduates of the Melbourne University.

"We extend a welcome also to the Dean of the Faculty of Medicine in the University of Adelaide, Professor E. C. Stirling, the doyen of all Deans. It is impossible for me to indicate his manifold activities. He has done great things for Medicine in Australia as well as in his own State. At one time there were internal troubles in that State, and they asked the hospitality of other medical schools in the sister States. The students who were sent gained high distinction, and if they were a fair sample we shall have to look to our laurels in the University of Melbourne.

"I take it as a good-natured joke to propose to drink the health of the superior medical military officer in the State of Victoria. Colonel Ryan is honorary surgeon to the Medical Hospital and a member of the staff of the Children's Hospital. Even if we regard him as the Turkish consul, we can hardly realise we have Charlie Ryan as a visitor amongst us. I was associated with him in 1888. He was the most popular and most lovable man we ever had to do with as undergraduates.

"I have great pleasure in wishing you all welcome to our board. We do our best to entertain you, and I ask you, gentlemen, to rise and drink to the health of our guests, coupled with the name of Sir Hartmann Just."

SIR HARTMANN JUST, in reply, said that he was a perfect stranger here, and as to the other guests he felt very diffident in replying in their presence. He supposed that he had been selected because he had come from a great distance and that his interest would be directly proportional to the length of that distance. He had visited the University, and he was struck with the vitality and vigour with which all proceedings were conducted. He congratulated the Medical School on attaining its Jubilee. He viewed with special interest the local progress in Tropical Medicine, a subject in which the Colonial Office had grave concern. He was confident that every guest of the graduates felt the warmest desire for the welfare of the Medical School and of the Medical Profession.

THE INAUGURAL CEREMONY.

Wilson Hall, Thursday, 30th April, 1914.

At 3 p.m. the Wilson Hall was filled with a brilliant and representative assembly, awaiting the arrival of His Excellency the Governor of Victoria and Lady Stanley. The gathering included graduates in Medicine and Surgery from the earliest days of the Medical School to the present time. About three hundred Medical Students were also present. Punctually to the time appointed, the University procession entered the Hall by the great doors and proceeded to the dais. The following was the appointed order of the procession:-

ORDER OF PROCESSION.

Members of the Executive Committee.

Dr. Helen Sexton Dr. Hurley	Dr. Constance Ellis Dr. Janet Greig
Dr. A. V. M. Anderson	Dr. Douglas Stephens

Members of the Faculty of Medicine.

Mr. Ernest Jones	Mr. Plowman
Mr. E. Robertson	Mr. Alan Mackay
Dr. Percy Webster	Dr. Murray Morton
Mr. F. W. W. Morton	Dr. Konrad Hiller
Dr. H. I aurie	Di. J. I. WIRINSON
Dr. G. T. Howard	Dr. H. C. Maudsley
Dr. Felix Meyer	Dr. R. J. Bull
Mr. C. H. Mollison	Dr. W. J. Springthorpe
Mr. F. D. Bird	

Members of the Professorial Board.

Professor	Scott	Professor	Woodruff
Professor	Gibson	Professor	Cherry
Professor		Professor	
Professor		Professor	
Professor	Osborne	Professor	
Professor	Spencer	Professor	Nanson

The Warden of the Senate (Dr. T. P. McInerney).

Members of the Council.

Mr. L. A. Adamson	Colonel Monash
Mr. G. A. Syme	Professor Masson
Dr. J. P. Wilson Revd. Dr. Marshall	The Archbishop of Melbourne
	(Rt. Rev. Dr. Lowther Clarke)
Dr. A. Leeper	Dr. J. W. Barrett
Mr. John Grice.	Revd. E. H. Sugden

Representatives of Sister Universities.

Professor Stirling (University of Adelaide)
Professor Anderson Stuart (University of Sydney)

The Dean of the Faculty of Medicine (Professor Sir Harry Allen).

H.E. the Governor (Sir Arthur Stanley, K.C.M.G.) The Vice-Chancellor (Dr. J. H. MacFarland)

OPENING OF PROCEEDINGS.

THE VICE-CHANCELLOR (Dr. J. H. MacFarland) briefly opened the proceedings, and called upon the Deans of the Medical Faculties in the Universities of Sydney and Adelaide to address the meeting.

CONGRATULATIONS FROM THE UNIVERSITY OF SYDNEY.

PROFESSOR ANDERSON STUART, M.D., LL.D., D.Sc., Dean of the Faculty of Medicine in the University of Sydney, then delivered the following address:—

Mr. Vice-Chancellor, Your Excellency, Ladies and Gentlemen,-I accepted the invitation of your Executive to be with you to-day with great pleasure, for it is always a pleasure to come to Melbourne for a short time, and I would not willingly be absent from your festival when you celebrate the Jubilee of the Medical School which I have known so intimately and so long, and which has done me the honour of conferring upon me the degree of Doctor of Medicine. When I first landed in Australia thirty-two years ago, I made straight for this University and its Medical School Building, and there I was most kindly received by the Founder of the School, your late Chancellor, Sir Anthony Colling Brownless, who devoted his life and possible fortune to the service of your University. I was most courteously received also by the late Professor Halford, who built on the foundations which had been laid by Brownless. I take pleasure in commemorating these men to-day, for though the work they did may not be very visible, yet I remark that good foundations are never seen, but on them nevertheless rests all the superstructure. From that time, also, I date my unbroken friendship with Sir Harry Brookes Allen, to whom is due the Medical School as we see it to-day, and I may be now permitted, on this the first public occasion on which I have had the opportunity, to add my song to the paeans of satisfaction which have sounded throughout the

land, since His Majesty was pleased to single him out for the honour of knighthood. (Applause.) My acquaintance with the Melbourne Medical School has thus been continuous throughout the third part of a century, and during all that time the Melbourne School and the Sydney School have never failed to act together in friendly co-operation and never as rivals. (Applause.) May it ever be so! On behalf of the Sydney Medical School I offer the Melbourne School our heartiest good wishes. May it go on and on, from good to better, working ever for the public good and the good of humanity. (Loud applause.)

CONGRATULATIONS FROM THE UNIVERSITY OF ADELAIDE.

PROFESSOR E. C. STIRLING, M.D., F.R.C.S., F.R.S., Dean of the Faculty of Medicine in the University of Adelaide, then spoke as follows:—

Mr. Vice-Chancellor, Your Excellency, Ladies and Gentlemen,-I have much pleasure in conveying to the University of Melbourne the hearty congratulations of the University of Adelaide on the occasion of its Jubilee. In attaining its Jubilee, the Medical School of the University of Melbourne has attained also the worthier dignity of a well-earned and well-deserved reputation for the high standard of efficiency that it has maintained, and for the high ideals that it has set before itself. That reputation has been reflected by the eminence reached by the Medical Graduates of the University, and the esteem in which they are held wherever medical science has penetrated. One of the most distinguished graduates of the University is Professor Sir Harry Allen, Dean of the Faculty of Medicine. The honour that has been conferred upon him is not too great for the work he has done. The Medical School of the University of Adelaide has seen much to admire in the great School of the Melbourne University. I trust that when the time-still far off-comes for the Adelaide School to hold a similar celebration, it will be able to look back on a half-century of development and progress comparable with the history of the Melbourne Medical School. (Loud applause.)

ADDRESS BY HIS EXCELLENCY THE GOVERNOR.

SIR ARTHUR STANLEY said that the medical man was a man of science, and had a double duty to perform. He had the duty of the man of the world, facing every-day conditions. But he had another duty of research and discovery. (Loud applause.) It was proper that

they should lay some stress on the scientific and theoretical side of the medical man's life rather than on his everyday functions. During the last 50 years medical science had escaped from the realms of empiricism, and had become a far more exact science than it had been in the days when the School had been established. No Science was worthy of the name until it took to exact measurements. The science of Chemistry remained very little more than a mere groping in the dark until the great scientists of the later part of the 18th and the early part of the 10th centuries began to measure, and to conduct, not qualitative, but quantitative experiments. Medicine had become more and more a science of exactitude. It was perfectly true that even now medical science did try the effect of drugs upon the human and animal frame. Although medical science was bound to be always to some extent experimental, he believed that, as the years went on, it would become more and more certain. Science to be progressive must be a measuring science. The University of Melbourne had not been in the past as munificently endowed as some others. There was no cause more worthy of endowment by those who were able to afford such gifts. (Loud applause.) Any endowment they might give to the University would be repaid to the State one thousand-fold. Medical men in the secrets of their patients might know of some intention on their part to leave money to the University after death. (Laughter.) Mr. Clough, in his "New Decalogue," had said, "Thou shalt not kill, but need not strive officiously to keep alive." (Loud laughter.) Although the dignity of the profession prevented them from accepting Mr. Clough's advice, medical men had great opportunities of influencing those wealthy patients not yet dead. (Laughter.) He wished increasing success to the Medical School and the University. (Loud applause.)

THE VICE-CHANCELLOR then called upon the Dean of the Faculty of Medicine to address the meeting.

THE FOUNDATION AND EARLY HISTORY OF THE MEDICAL SCHOOL OF THE UNIVERSITY OF MELBOURNE.

An Address.

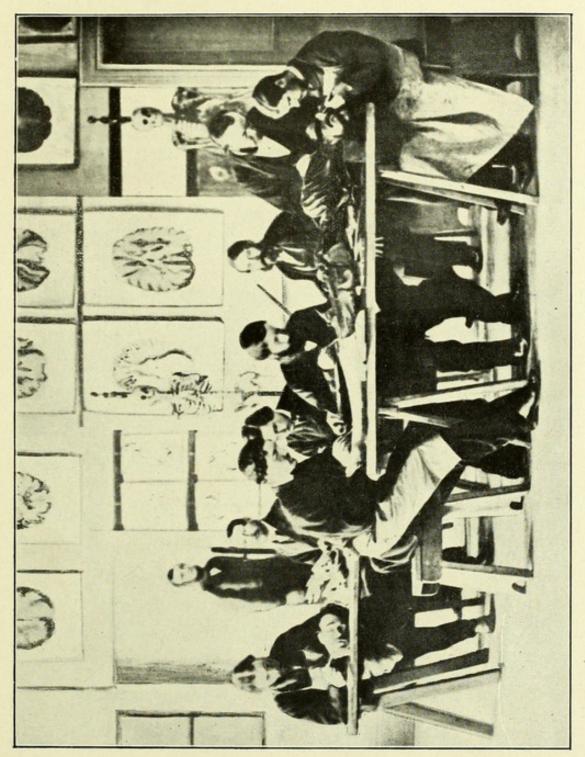
By PROFESSOR SIR HARRY ALLEN, M.D. Melb., Hon. LL.D. Edin., Dean of the Faculty of Medicine.

Mr. Vice-Chancellor, Your Excellency, Ladies and Gentlemen,-

In the years preceding the foundation of the Medical School, the government of the University was vested entirely in the Council, the

members of which were nominated by the Governor acting on the advice of the Executive Council. There was no Senate, no organised body of graduates. No Faculty had been created in any department. The only statutory advisory body was the Professorial Board, consisting of the Chancellor and Vice-Chancellor (ex officio), and the four original Professors. But what a Board of all the talents was thus constituted. The Chancellor, Sir Redmond Barry, an eminent judge of the Supreme Court, dignified, cultured, scrupulously fair, watchful over all the interests of the University; the Vice-Chancellor (Sir) Anthony Colling Brownless, courteous in manner, unbending in determination, the founder and fosterer of the Medical School; Professor Hearn, with his massive philosophical intellect; Professor Irving, the chivalrous classic and philologist; Professor Wilson, the polished exact Senior Wrangler; Professor (Sir) Frederick McCoy, the untiring methodical zoologist and palaentologist. Can it be wondered, however, that such a Board desired the nearest possible approach to making the Degree of Bachelor of Arts a necessary precedent to Degrees in Medicine and Surgery? Sir James Paget, then Professor Paget of St. Bartholomew's Hospital, had recommended the Council to adopt a four years' course, reduced to three years for Candidate's who had received a sufficient training in Science. But, on the advice of the Professorial Board, the Council adopted a five years' course, including Greek, Latin, Geometry, Geology and Palaeontology, with Natural Philosophy extending into the third year. This was the curriculum which the original freshman class faced in 1862. But, before the year was out, the Council, in spite of protest from the Board, struck out most of the Science, and made the course essentially medical, qualified only by retention of Classics in the first year; and, although the Medical Society favoured a four years' course, the Council kept the revised curriculum one of five years, with three complete courses of dissection.

It is therefore evident that the Council had some effective advice in Medical matters from within, and, in fact, its Medical members had for some time been formed into a Medical School Committee, which was made up of very remarkable men. It included the Vice-Chancellor (Dr. Brownless), Sir James Palmer (President of the Legislative Council), Sir Francis Murphy (Speaker of the Legislative Assembly), the Hon. W. C. Haines (the first Premier of Victoria), Mr. J. P. Rowe (the pastoralist), Dr. Godfrey Howitt (the botanist and entomologist), and Dr. W. H. Cutts. Dr. Brownless, Dr. Howitt, and Dr. Cutts were still engaged in active practice, but the others had retired from professional work. It is a noteworthy fact that so many



AN EARLY DISSECTING CLASS.

T. R. Ashworth P. Moloney

O. V. Lawrence

Professor Halford W. C. Rees

A. Mackie

18



of the leaders of political life in the early days were men trained for the medical profession.

At the end of 1862 Dr. G. B. Halford arrived to take up his duties as Professor of Anatomy, Physiology and Pathology. He had already won renown by his experiments on the action of the heart and the causes of its sounds, and had proved himself a successful teacher of anatomy. In his introductory address on May 1st, 1863, he pleaded for the study of Natural Philosophy, and showed his resolve to make his teaching thorough and practical, to encourage experimental work, and to use the Medical School as a centre of research for the whole profession. At the close of this address, he compared the puny band of teachers and students with the English army of Agincourt, and urged his hearers to make that first of May a Crispian day, so that each in time to come—

"May stand a tip-toe when this day is nam'd."

Professor Halford was not only a sound teacher of Anatomy and Physiology, with natural bent towards research; he was a good Wordsworthian, an excellent French scholar, a man of strong personality, with great directness and straightforwardness, one well qualified to act as Head of the young School. It was May, 1864, however, before the original School buildings were completed, and, as the Council made no appointments till they were actually needed, the first staff was not complete till 1865. Dr. Macadam, the public analyst, a good chemist, a brilliant public speaker, with experience in Parliament and in Cabinet Office, was Lecturer on Chemistry; Dr. Eades, one of the most popular members of the profession, and formerly a lecturer in Medical Schools in Dublin, was Lecturer on Materia Medica, Therapeutics, and Medical Botany; Dr. Edward Barker, who, in his early days, was Mr. Liston's House Surgeon and Operative Assistant in University College, and who in his prime was deemed by Sir Thomas FitzGerald the best Surgeon in Melbourne, was Lecturer on Surgery; Dr. James Robertson, the most distinguished physician of the Melbourne Hospital, the incarnation of learning, industry and caution, was Lecturer on Medicine; Dr. Tracy, then the leader of the profession, fresh from the success of his first ovariotomy, was Lecturer on Obstetrics and Diseases of Women; and Dr. Neild, the able littérateur, the foster-father of the profession, the trusted adviser of City and District Coroners, was Lecturer on Forensic Medicine. But the Staff was no sooner complete than a gap was made by the sudden death of Dr. Macadam, whose place was filled by his assistant, Mr.

J. D. Kirkland, at that time a student, and afterwards a graduate in the Medical School. Mr. Kirkland had not the thorough academic training, nor the oratorical gifts of Dr. Macadam, but he was a sound training nor the oratorical gifts of Dr. Macadam, but he was a sound as Professor of Chemistry, after twenty years' service, his old pupils erected a tablet to his memory in the School, with the inscription—

"Homo erat et fidus amicus."

The School was at last complete, and in April, 1867, its proper roll of direct graduates under ordinary regulations was worthily opened by W. Carey Rees, afterwards an honoured physician to the Alfred Hospital, and Patrick Moloney, afterwards the brilliant physician of the Melbourne Hospital. The Senate of the University was now constituted, with over 40 per cent. of its members Doctors of Medicine, but all these were graduates ad eundem or under the special regulations. The first of our own graduates to enter the Senate was Dr. O. V. Lawrence in 1871, at the present time our oldest surviving graduate.

As 1871 was the year in which the speaker entered the Medical School, after a year spent in Arts, a few words may be of value in showing the degree of evolution of the School. There was no proper first year of Science. No medical student could attend the classes of Natural Philosophy. There were no separate teachers of Natural Philosophy or of Biology. There was no students' laboratory in the entire University, except the Dissecting Room, for which the first Demonstrator was only appointed in 1870, and the laboratory for first year Chemistry, which barely accommodated the unusually large class of thirteen freshmen in 1871. Students attended the same course of lectures on Anatomy in the second year and again in the third year. There was no practical class in Histology or Physiology. Pathology was represented only by some scattered teaching in the courses of Physiology, Medicine and Surgery. There was no organised pathological teaching even in the post mortem room. On the other hand, the classes were very small, the teachers were in close contact with the taught, and every student had enormous practical experience in the wards and in the out-patient department of the Melbourne Hospital.

Time allows only a brief sketch of the subsequent development, which will be found described more fully elsewhere in the "History of the School." On the Science side, Mr. F. J. Pirani was made Lecturer on Natural Philosophy in 1874, and this subject became alternative with Classics in the first year. In 1876 the Faculty of Medi-

ERRATUM.

Page 62, line 4, should read—
"teacher and an excellent practical chemist, and when he died"

MUTTASTITU

"both ad nody has Jeinstell (designed and one has reflect

cine was established, with Professor Halford as Dean, and systematic demonstrations in Pathology now commenced in the Melbourne Hospital, under the direction of the speaker (Dr. Allen), who was also given charge of the Dissecting Room. In 1877 a large new laboratory was provided for Chemistry. At the end of 1880, Professor Halford visited Europe, Dr. Allen undertaking his Lectures, and at the end of 1881 Dr. Allen was appointed Lecturer on Anatomy and Pathology. Professor Halford became Professor of Physiology and Histology, and practical classes, at first optional, were soon introduced in these subjects. At the end of 1882, Professorships were created in Chemistry, and in Natural Philosophy, and in Anatomy and Pathology, and Professors Kirkland, Andrew and Allen were appointed accordingly.

In 1883 an instalment of the first great revision of the curriculum came in force. The New Medical School, a fine building, but as yet only one story high, was built. In the following year the old Dissecting Room was reorganised as a laboratory for practical physiology, physiological chemistry and histology; and the fittings of the New School were completed, the Museum receiving the valuable pathological collection which had been transferred from the Melbourne Hospital by Deed of Gift.

Meantime many changes occurred in the Staff of Lecturers. Dr. Tracy died in 1872, and was succeeded by Dr. L. J. Martin, who by hard work and carefulness had risen to a high position as a gynaecologist. After Dr. Martin's death in 1870 Dr. James Jamieson for several years devoted his great abilities to the Chair of Obstetrics and Gynaecology. At the end of 1880, Mr. T. M. Girdlestone, F.R.C.S., an old pupil of Lawrence and Stanley at St. Bartholomew's, and a pioneer of Listerism in Melbourne, succeeded Dr. Barker as Lecturer on Surgery. A year later Dr. James Robertson retired from the chair of Medicine after seventeen years of invaluable service. His successor was Dr. S. Dougan Bird, a physician with keen gifts of intuition, an able lecturer, a terse and manly writer. The chair of Materia Medica and Therapeutics was given to Dr. John Williams, who was now becoming par excellence Melbourne's great teacher of Clinical Medicine. He had a wonderful influence over the students for many years, and only last week the community was made poorer by his death.

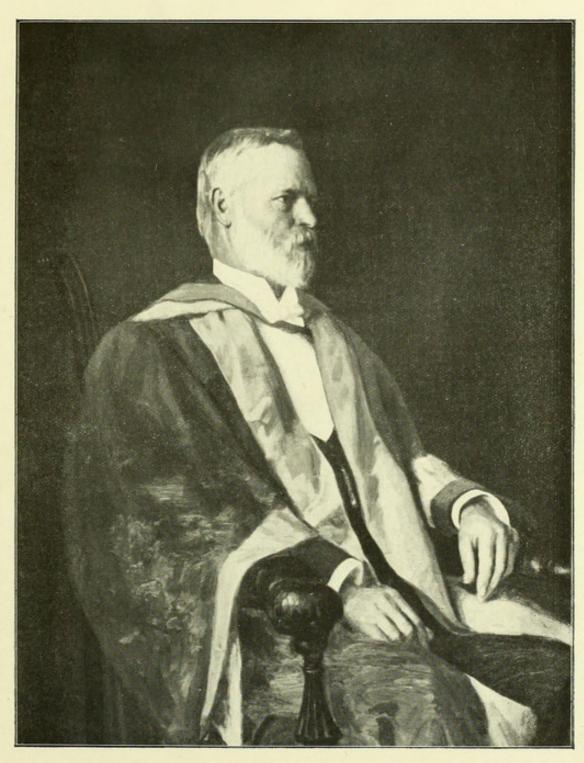
Next in order came the great development of the Science Departments, following the appointments of Professor Masson (1886), Professor Spencer (1887), and Professor Lyle (1889). In each case, new Theatres and Laboratories were provided, and subsequently ex-

tended, forming a group of Institutes of which the University is justly proud.

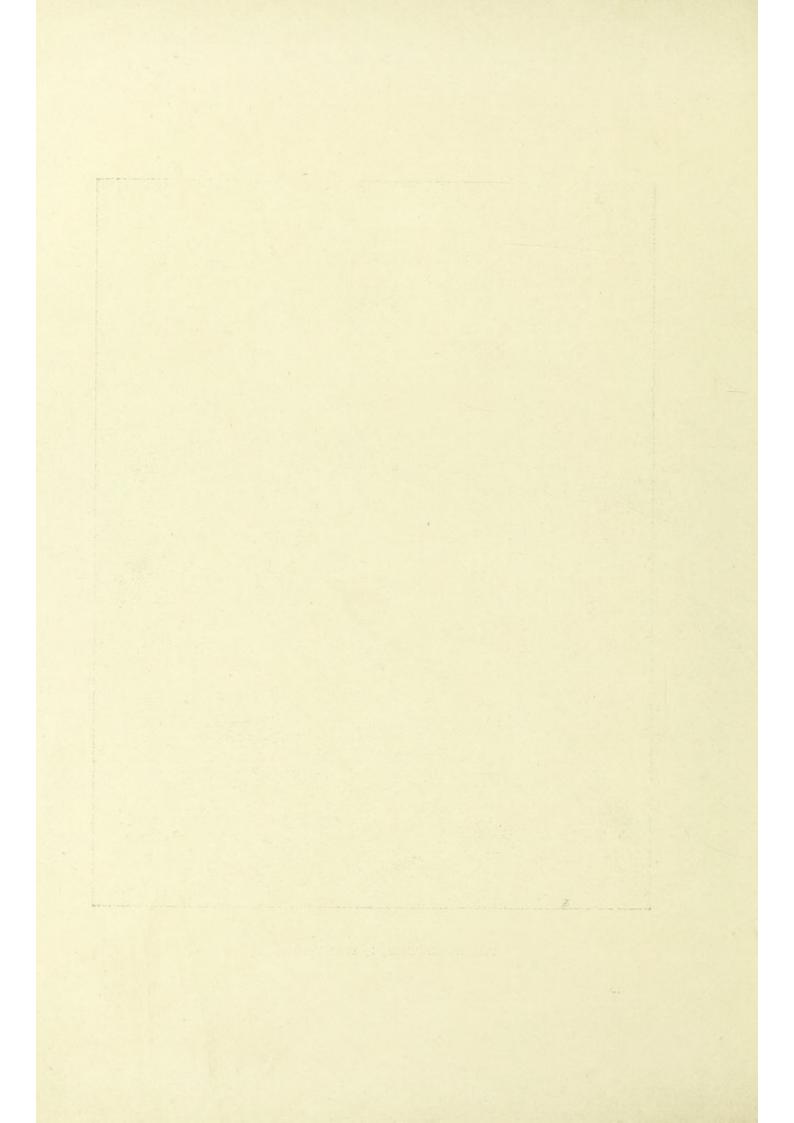
In 1887 the work of revising the curriculum was complete, and a new Scheme came in force, but the arduous preparations had led to the resignation by Professor Halford of the Deanship of the Faculty of Medicine, and Professor Allen became Dean and carried the proposals through the Senate. There was now a first year devoted to Chemistry, Biology, and Natural Philosophy. The Materia Medica Chair was divided. Dr. David Grant, the learned Ettles Scholar of the University of Edinburgh, became Lecturer to second year students on Materia Medica and Elementary Therapeutics, and retained this office till the teaching of Materia Medica was finally transferred to the School of Pharmacy. Dr. J. W. Springthorpe, the present veteran Lecturer of the School, was appointed to the new Chair of Therapeutics, Dietetics and Hygiene in the fourth year. Hospital practice now, and for many years after, extended through four years instead of three, the junior students learning much of regional anatomy and organography in the post-mortem room.

The Medical School had by this time completed its twenty-fifth year, and at the request of the Faculty Dr. Neild delivered a Commemorative Lecture in the Wilson Hall on March 22nd, 1887. At this stage women students were for the first time admitted to the school, and immediately justified their admission. At the end of 1887 Dr. S. D. Bird retired from the Chair of Medicine, and his successor, Dr. James Jamieson, now found the congenial field for his abilities. In him, learning lightly borne was wedded with literary grace and kindly humour, and he continued as the Bayard of the Lecturing Staff until. after a total service of thirty years, he resigned and was succeeded by our present Lecturer on Medicine, Dr. H. C. Maudsley, formerly Medical Tutor in University College Hospital. Dr. W. Balls-Headley followed Dr. Jamieson in the Chair of Obstetrics, and he in his turn was succeeded by Dr. G. Rothwell Adam, to whom is owing in large measure the present greatly improved organisation of the Clinical School of the Women's Hospital.

In 1890 Professor Allen visited Europe, and obtained the recognition of Melbourne Degrees in Medicine and Surgery by the General Medical Council of the United Kingdom. Professor Halford was re-elected Dean. After Professor Allen's return in 1891, Dr. T. Cherry was appointed demonstrator of Pathology, and under his immediate supervision practical classes were established in Pathological Histology



SIR HARRY ALLEN.
From the Oil Painting by E. Phillips Fox, Esq.



and Bacteriology. In 1895 Mr. Girdlestone resigned the Chair of Surgery, and was succeeded by one of our most brilliant graduates, Mr. F. D. Bird, who has recently received the Honorary Fellowship of the College of Surgeons of England. At the end of 1896, Professor Halford retired from active service, and was succeeded by Dr. C. J. Martin, but the coming of Dr. Martin will be dealt with by Dr. Stawell in his sketch of the later history of the school. Professor Allen was now re-elected Dean of the Faculty. At the end of 1897 death removed the venerable founder of the School, Sir Anthony Colling Brownless, K.C.M.G., who had been Chancellor for over ten years, and with his death this sketch of foundations may properly end.

PRESENTATION OF PORTRAIT OF SIR HARRY ALLEN.

THE VICE-CHANCELLOR then requested Mr. G. A. Syme, M.S., F.R.C.S., to address the meeting on behalf of the subscribers to the Jubilee Portrait.

MR. G. A. SYME said that the jubilee celebrations had been selected as a fitting occasion to present to the school a memorial of the vast services rendered to it by Sir Harry Allen. It might be said that his best and most lasting monument was that which he had reared himself in the Medical School—(loud applause)—and in the magnificent museum which was to be found there. But it has been desired that the University should have a memorial of the man himself in his habit, as he lived, and a very large number of graduates had commissioned Mr. Phillips Fox to paint a portrait of Sir Harry Allen, to be presented to the University, to hang beside the portraits and busts of those distinguished men who had rendered service to the University, but none with greater distinction that Sir Harry Allen. (Loud applause.)

THE VICE-CHANCELLOR said that it gave the whole University the most sincere pleasure to have the portrait of one of the staff—a man who had given the whole of his life to the work of the University, and who had been so eminently successful in building up the medical school. (Loud applause.) He had much pleasure in asking His Excellency the Governor to unveil the portrait.

H.E. THE GOVERNOR said that it did not take long to discover that Sir Harry Allen was not only a man of science, but that he was a really good fellow, and one did not need to be a good fellow himself to recognise that. It gave him very great pleasure to unveil the

portrait. The portraits in that hall would be looked upon with interest and veneration by succeeding generations of University graduates and undergraduates. He therefore looked upon it as a high honour to unveil the new portrait. (Loud applause.)

The Vice-Chancellor thanked his Excellency the Governor and Lady Stanley for their presence, and the Academic Procession then left the Wilson Hall in inverse order.

RECEPTION IN THE UNION ROOMS.

A Reception was then held by the wives of members of the Faculty of Medicine in the Union Rooms, the ladies receiving His Excellency and Lady Stanley and other guests of the University at the entrance. A bouquet was presented to Lady Stanley by the twin children of Professor and Mrs. Berry on behalf of the hostesses. The rooms were draped in the University colours, and beautifully decorated with trellis work and a profusion of flowers and autumn foliage. Tea was served at small tables, a band of young ladies in picturesque attire kindly undertaking the supervision of this part of the function.

LECTURETTES AT THE MASONIC HALL.

On the evening of Friday, May 1, a series of Lecturettes were given at the Masonic Hall, Collins Street, the Vice-Chancellor, Dr. J. H. MacFarland, occupying the chair. There was a large attendance of graduates, students and guests of the University, including the Deans of the Faculties of Medicine in Sydney and Adelaide. The Vice-Chancellor read a telegram of congratulation from Dr. B. Poulton, Lecturer on Surgery in the University of Adelaide, one of the graduates of the Medical School.

"THE UPBUILDING OF THE MEDICAL SCHOOL OF THE MELBOURNE UNIVERSITY."

By R. R. STAWELL, M.D. (Melb.).

Physician to Outpatients in the Melbourne Hospital. Consulting Physician to the Children's Hospital.

In connection with our Jubilee celebrations, I have been asked to deliver a short address, dealing with the building up and development of the Melbourne University Medical School, during the last twenty years.

Professor Sir Harry Allen has already told us something of the early history of Medical Education in Victoria, and this short lecture should be regarded as a continuation of his address.

While I recognise that, if an address of this kind is to have any value at all, it should be permeated with a proper degree of historical feeling, yet I must point out that it is very difficult, and granted to very few, to give the correct proportion of significance to recent events, or to apply the historical spirit to present day affairs.

I feel therefore that, in my address, it will be found I have omitted some points which ought to have been recorded, and perhaps have emphasised other points, which need not have been mentioned. I venture to feel, however, that I can rely upon the knowledge of many and the cordiality of all my listeners, to "piece out my imperfections."

May I ask you to listen to this short address as if there were being read to you a few pages of the history of the Melbourne Medical School.

In commencing to consider some of the chief influences and most important events which have occurred during the last quarter of a century, in relation to the up-building of the Medical School, I cannot refrain from a few fore-words of personal appreciation of Professor Halford.

At the time that I entered my second year of medical education, Professor Halford was already showing the defects so frequently inseparable from advanced years. He was not then a hard worker, nor was he then, in the ordinary sense, a good teacher; but there was something always really "great" about the old professor; and, when he discussed with us the records of his original work of long ago, there was to be got from his lectures something splendid, and even inspiring. It was to a young medical student in those days a sudden personal introduction to the great realm of original research, and seemed to link Halford's work up with the great historical discoveries of medical science.

At the very time when advancing years were robbing Professor Halford of much of his capacity for continuous work as Professor of Physiology, and as Dean of the Faculty, the need for watchful control, the need for the further development and upbuilding of the Medical School was getting greater every year. What happened at that most critical period? Professor Allen, then a very young man, only recently appointed as Professor of Anatomy and Pathology, came forward and quietly and steadily took upon his shoulders practically the whole weight of the responsibility of the management and organisation of the

Medical School. For many years he carried this burden almost alone, and carried it unwaveringly, successfully. In the upbuilding of the Medical School Professor Sir Harry Allen proved himself to be a master builder of the first rank, and his name will ever be honoured in our University as of one who has given his great gifts to the service of the Medical School, and the Medical profession in Victoria. Inseparably associated with these jubilee rejoicings, run in the hearts of his friends feelings of cordial congratulations to Sir Harry Allen for the honours which have been recently bestowed upon him.

Apart from his work as a good citizen and a great organiser, Allen's influence as a teacher should be recorded. At the time to which I refer his great influence was to make men work hard and study closely. It was as if he said, "General intelligence won't teach you anatomy, and even fine imaginings are to be discouraged in the study of pathology. Work and read, and 'you have got to come to my lectures!'" His was fine dogmatic teaching, and very valuable at the time it was given. I know it had a great influence for good upon me, and upon most of his students. It didn't make things easy, but then, things are not easy, and it did make us work.

Before I pass on to consider the influence of other workers, I feel, in a historical review, I must make it clear that the successful development of the Medical School was founded, as it were, on the successful development of the University as a whole. In the eighties of last century, our University had won for itself, as a whole, a high and honorable position. Men of learning and culture throughout Australia were then content that their sons should enter the learned professions through the portals of the Melbourne University. The University was rapidly growing, and the better part of the community recognised it; Trinity College had been established a few years, and Ormond College had just been opened.

A movement, greater in its influence than the attraction of a fine University education, was also at work at this time, a movement worldwide in its influence. "Medicine" was developing into a great scientific study, and was showing itself to be one of the most attractive of the learned professions, and a great career. It must be realised that many of the best students came to the Medical School at Melbourne, because that school was part of the University of Melbourne. If our mutual congratulations at this Jubilee time are well founded, they should be extended to all the Professors and all the teachers who have worked and are now working in the wider University sphere.

At the end of 1896, nearly eighteen years ago, there came to the building-up of our Medical School one of the ablest men who have worked within the walls of our University. C. J. Martin was at that time appointed Lecturer, and later, acting Professor of Physiology. Apart from his great abilities and industry, he had that most rare gift, that he worked best when he was working with others. In this way he inspired men and students to effort and high endeavour, and helped them in their work with genuine sympathy and vigorous breezy criticism. The students called him "the Plugger." Could any praise be greater? A plugger is a man who works with all his might against difficulties, and that's what Martin did. The chief difficulties which Professor Martin had to face were, insufficient room for his work, insufficient equipment, and an altogether inadequate staff of assistants.

But with Professor Allen and Professor Martin working together, a great advance was made in the building and development of the Medical School. The Physiological Laboratory accommodation was doubled, the Pathological Museum buildings were completed, a Bacteriology Laboratory was built for Dr. Cherry's work, and two additional lecture theatres were planned for future development. All this was completed in 1900.

Quite apart from any work which he did in the matter of planning new buildings, Martin's great work and influence as one of the master builders of our Medical School showed itself in his view, that the Medical School of a University must be something more than an institute for the teaching of students. It must of course be that, but it must be something more. It should be the very home of original research and investigation, and he felt that, no matter how cramped was the accommodation, or how insufficient the equipment, room must be found, and help and encouragement should be given even to the poorest workers in the field of research. That view, which Martin most of all intro duced into our school, is held and practised with broad sympathy by his successor, Professor Osborne, and his colleagues.

Insufficiency of University funds had always been the cause of delayed and imperfect development of the Medical School; suddenly in 1900, in consequence of the great financial loss which the University suffered through fraud, all departments became actually impoverished, and grave and disheartening retrenchment was considered necessary. Later, this deplorable shortage was to some extent made good by a public contribution, organised by Janet Lady Clarke, and generously supported by the Government of the day. But never during the whole

period under review, has any department of the Medical School had adequate money endowment to allow of the development of full usefulness; and in these Jubilee celebrations, congratulation is not to be felt only for the work done, but praise and appreciation is to be given to the men who worked and are still working under such burden of difficulties. From time to time the members of the medical profession have responded to a personal appeal from some hard-working harassed professor to help him in the equipment or in the actual building of some urgently needed Laboratory. With the exception of a generous personal gift in 1901 from the late Mrs. Aubrey Bowen (herself the widow of a distinguished oculist of this city), and in 1909, the fine bequest of £25,000 from the late Dr. Stewart of Ballarat, the Medical School and the University itself have received but scanty financial support from individual members of the community.

It seems to be so difficult for anyone who is not, as it were, in the thick of the work, to realise that Medical Science and Medical Education are advancing, and not merely changing.

Enlargement of buildings is not only required for the accommodation of more students, but more subjects have to be taught, and old subjects have to be handled in a different way; and time and accommodation should be given to Professors and their fellow workers, to test the new work and the new methods that are being carried out in the great domain of Medicine in other parts of the world. Osborne has now the same kind of difficulties which Martin had to meet, and is fighting them in a steady, steadfast way; in the midst of all his work, he finds time to help every medical man throughout the community who comes to him for advice in reference to important problems. No one knows better than I do how much that help is appreciated. When Professor Berry was appointed to the Chair of Anatomy, the same difficulties beset him, but with an enthusiasm and energy which influenced not only his own department, but the whole Medical School, Professor Berry triumphed over most of his difficulties, and has enlarged and improved all the buildings and equipment in connection with his department, has widened the field of his work, so as to deal with modern development, has organised and carried out important research work, and has, best of all, used his great gifts to help and encourage junior fellow workers. In a few months, Professor Berry showed himself to be one of the master builders of our Medical School.

In even this short record, some reference must be made to one of the great developments of Modern Medicine, the Science of Bacteriology. In 1900, a special Bacteriological Laboratory was built, and Dr. Cherry in his capacity of Lecturer on Bacteriology was appointed to take charge of the new Laboratory. As a matter of fact, some years before this time, Dr. Cherry had done, here, pioneer work in Bacteriology, by applying this form of special investigation in connection with work done in Professor Allen's Pathological Laboratory.

In 1905, after Dr. Cherry's resignation, Dr. Bull was appointed Director of the Bacteriological Laboratory, and now the work of this department has increased so largely that the Director and his staff are compelled to give up all their time to teaching and routine work. This routine work is of great and necessary value. More than any other special department of the Medical School, the Bacteriological Laboratory is linked up with the actual daily practice of medical men, and this combination of Laboratory investigation with the personal help given by the doctor to the sick man at the bedside is one of the best' developments of Medicine. No one can overstate the value of the laboratory influence on practice. It is one of the series of stepping stones, over which we walk carefully to the knowledge of disease. It means this, that the modern doctor strives in his practice "to know," and cannot be content with judgment and experience only. But "to know" means to investigate, to measure, to test each suitable case, and these investigations mean time and industry and training, and industry and time mean money.

Modern medicine is not going to be cheap, and if it is cheap, it's going to be nasty, like old medicine, and ineffective. But it's not for me to speak about the future, it's for me to recognise and record the valuable works which Dr. Cherry and Dr. Bull have done in the development of Bacteriology in this part of the world.

There are two other great influences in the development of the Medical School, which I have just time to refer to. One is the comparatively small but most important band of workers who act as demonstrators and assistants, and the other is the large army of medical graduates.

The influence which is exerted by demonstrators, who come into contact with the actual laboratory work of students, is one of the most stimulating factors in the University. Many of the demonstrators get but a very poor reward, and quite inadequate recognition. One of them, I know, in the midst of a busy life—Dr. J. F. Wilkinson—gives up a great deal of his time to these demonstrations, and receives no salary and no honorarium. He offered his services many years ago to

Martin, and has worked hard ever since. That is one example of Martin's influence that will live as long as the school endures.

Last of all some reference should be made to the influence which during the last few years has been exercised by those graduates of the Medical School (of whom I am one) who are not on the Faculty of Medicine, and who are not engaged in teaching within the precincts of the University. This influence has been chiefly exercised in reference to the difficult problem of medical education.

Though it cannot be held that the decisions of any mass of people, even of medical graduates, are always wise, or that their influence is always for the very best, such influence can never without danger be ignored.

In connection with our Medical School, all round mutual improvement followed from broad based debates upon the subject of the medical curriculum. The educated public opinion of the mass of medical graduates is one of the foundation stones upon which the structure and fabric of our Melbourne University Medical School has been built in the immediate past, and upon which it must stand for the future.

THE CLINICAL SCHOOLS OF THE MELBOURNE UNIVERSITY.

An Address by G. A. Syme, M.B., M.S., Melb., F.R.C.S. Eng., Surgeon to the Melbourne Hospital and Lecturer on Clinical Surgery.

The first Clinical School in Australia arose in 1864 at the Melbourne Hospital, when Messrs. P. Moloney, W. Carey Rees, and B Mackie, in the third year of their medical course, attended the practice of that institution. The rules of the hospital, according to the earliest copy of them available—for 1863—had already provided that "Pupils to the Medical and Surgical practice of the hospital will be admitted upon payment of fees, to be arranged by the Medical officers with approval of the Board."

The honorary physicians on the staff were Drs. Brownless, Cutts, Eades, Haddon, Livingstone, Motherwell, Robertson and Wilkie, and the Surgeons were Messrs. Barker, Beaney, FitzGerald, Garrard, Gillbee, Knaggs, Lempriere and Thomas. They all attended out-patients as well as in-patients. In 1872 the Medical staff was divided into Physicians, with charge of in-patients, and assistant Physicians, in charge of

out-patients. Dr. Lawrence, the first M.D. of the Melbourne University, was elected Assistant Physician. In 1875 the seven Surgeons with charge of in-patients and out-patients were similarly replaced by four Surgeons and four Assistant Surgeons.

Dr. Moloney, one of the two first graduates of the Melbourne University, and Dr. Lawrence were elected full Physicians. Dr. Carey Rees, the actual first graduate, was elected Assistant Surgeon, and the young Clinical School had now three teachers trained wholly within its own walls.

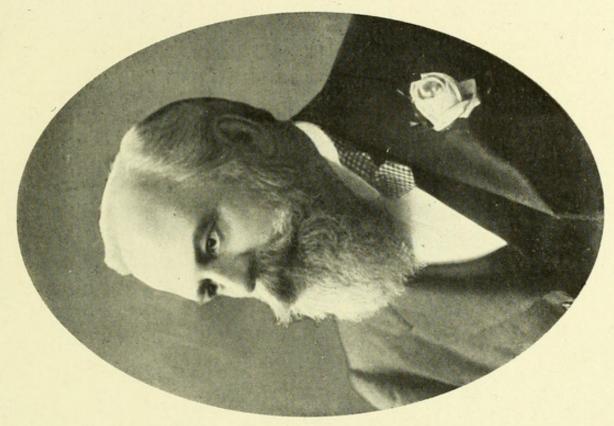
Of the extent and character of the clinical teaching in the very early days little is known now, but rumour hath it that even then complaints were made of its inadequacy. In May, 1875, the committee of the Hospital deliberated on "the best arrangements for securing to the students of the Medical School the fullest advantages in attending the practice of the hospital," and the following rule was made: "Every Physician and Surgeon shall, at each of his ordinary visits, give special Clinical instruction to the pupils in attendance on him, and shall permit all other pupils to see his practice, and each Physician and Surgeon shall, once at least during his taking-in week, deliver a Clinical Lecture, which shall be open to all pupils of the hospital." It is noteworthy that the Committee also complained of the indifference to Clinical teaching shown by the University, which did not require any certificates, except of mere attendance, until the new curriculum of 1887.

A description of what was done in my own studentship may be given as fairly typical of the Clinical School during the period of the seventies and early eighties. Students began attendance in their third year, acting as dressers in the Surgical wards. it was not compulsory they also attended in a desultory fashion in the out-patients' department, where the Surgeons were Messrs Girdlestone, J. P. Ryan, John Webb, and Le Fevre. It was the time when Lister's methods of freating wounds were being introduced into the Hospital. Mr. Le Fevre had been a student under Lister, and Messrs. Girdlestone and Webb were very enthusiastic in carrying out the details of the system. All three instructed such students as cared to learn very carefully and thoroughly in the dressing of wounds. It was also the time when plaster of paris bandages, and Sayre's jackets for spinal disease were coming into use. Mr. Webb was carrying on original work on this subject, and gave the students much instruction thereon. Ample opportunity was given of acquiring a thorough and practical knowledge of the application of these methods.

The students were few and the patients many, and though there were no tutorial classes, and no systematic instruction, students learnt on the Wackford Squeers principle of "doing things." As in-patients' dressers students were allocated to the four Surgeons, Messrs. Fitz-Gerald, James, Howitt and Beaney. Mr. FitzGerald was the Surgeon for whom everyone wished to dress, and whose visits all attended. His great personality, his keenness of observation, and his enthusiasm, not less than his brilliance as a diagnostician and operator, made him a most stimulating influence. Yet he would hardly be called an ideal clinical teacher. His own knowledge, the result of his unrivalled experience, seemed intuitive, and he had difficulty in giving clear verbal expression to it. But he talked freely as he went round the wards, and in his own way, partly by his words, but oftener by his actions, imparted an immense amount of most valuable instruction. He insisted on students cultivating that tactus eruditus, which in himself seemed almost magical. Occasionally he delivered clinical lectures, which were extremely practical, and illustrated by the exhibition of patients. instruments and appliances.

Time will not permit lengthy reference to all the members of the staff, but mention must be made of Mr. E. M. James, who was most regular in his attendance, and took a great personal interest in his students. He instructed them most carefully in surgical handicraft, and gave a great deal of sound and useful practical information in a very precise common-sense fashion.

In the fourth year students attended medical practice in the wards of Drs. Motherwell and Moloney. They came somewhat irregularly, and mostly in the afternoons. Dr. Moloney talked very brilliantly when he came, and was always conversant with the latest medical literature. The students did good work in mastering the physical signs by constant examination of patients, and were greatly helped by the Resident Physicians. The want of authoritative teachers was felt very much, however, and students appreciated all the more the splendid teaching in the fifth year of Dr. Williams, who had been elected Physician in 1879. He was an ideal clinical teacher, and taught according to the Edinburgh system. This was derived directly from the University of Leyden, where the Clinical School, in the modern sense, may be said to have originated in 1630. Up to then the great Universities of Europe had limited their teaching entirely to systematic lectures. The following account is given by the Puschman of the method adopted at Leyden, which was "for the students first of all to examine the patient on his complaint, then for each one to state his views upon the nature, causes, symptoms,



JOHN WILLIAMS, M.D. Lecturer on Clinical Medicine.



SIR T. N. FITZGERALD, C.B., F.R.C.S.I. Lecturer on Clinical Surgery.



prognosis and treatment of the disease, and last of all for the Professor to confirm the correct opinion, to correct erroneous ones, and to add any explanations required." What has been quoted might be a description of the way Dr. Williams taught. His gift of clear, terse expression, and his profound knowledge, combined with his patience and kindly geniality, made the method in his hands most effective. "His death," to use the words of Hartley Coleridge, "is a recent sorrow; his image still lives in eyes that weep for him."

During the fourth and fifth years also the greatest possible benefit was derived from the able and practical demonstrations in Morbid Anatomy, given by Dr. H. B. Allen. Attendance on these was not compulsory, but they were so valuable that students attended very regularly.

Thus, in that period, some of the teaching was satisfactory, but much was not. There was a want of organisation and supervision, largely due to the slight attention paid to Clinical teaching by the University. Ouoting some words of Molière, it may be said, "Nous avons changé tout cela, et nous faisons maintenant la médecine d'une méthode nouvelle." The change came gradually, however. In 1882, as the result of complaints, the University Council requested the Hospital Committee to appoint one Physician and one Surgeon as special Clinical teachers. The Committee replied that such appointments should be made by the Council. After further negotiation the Council in 1884 agreed, and appointed Dr. Williams Lecturer in Clinical Medicine, and Mr. FitzGerald Lecturer in Clinical Surgery. But the students were not satisfied. They complained that they could not all be allocated to these two lecturers as clerks and dressers, and that the other members of the staff felt themselves relieved from teaching, and gave less instruction than before. As a compromise the Faculty of Medicine suggested the appointment of two Lecturers in each subject, to which the Council agreed in September, 1886, and appointed Drs. Williams and Fulton' in Clinical Medicine, and Messrs. FitzGerald and Girdlestone in Surgery, for one term only. In May, 1887, Dr. Williams and Messrs. FitzGerald and Girdlestone were re-appointed for one term, and Dr. Moloney replaced Dr. Fulton. In 1887 the new curriculum came into force, which definitely provided by the University regulations for clinical lectures and tutorial instruction; and in 1888 the Council decided that all arrangements for providing the necessary clinical instruction should be carried out by the staffs of the hospitals concerned. In the same year, 1888, a Clinical School was formally opened at the Alfred Hospital. In the previous year women had been admitted as medical students, and of the seven students who attended at the Alfred

Hospital six were women. For some years the Alfred Hospital became the Clinical School for women students. Its staff notified the University that the three in-patient physicians and the three in-patient surgeons had been selected to give clinical lectures. The staff of the Melbourne Hospital arranged "that such tutorial instruction as is required by the University regulations be given to second and third year students by all the out-patient surgeons and out-patient physicians respectively, who will undertake the duty, and that such clinical lectures as are required by the University regulations be given by all the in-patient physicians and surgeons, in rotation, who will undertake the duty." A syllabus of instruction and a time-table were also drawn up. The inaugural lecture of the new clinical course at the Melbourne Hospital was delivered by Mr. E. M. James on the 20th June, 1888. At the end of the year the Registrar of the School, Dr. Lewellin, reported to the University Council that the lectures had been regularly delivered and tutorial instruction given, and the staff and students had been regular in attendance. The Registrar collected the fees paid by students for clinical instruction, and the University Council paid to the Clinical Fund of the Melbourne Hospital £400, and to that of the Alfred Hospital £100 per annum.

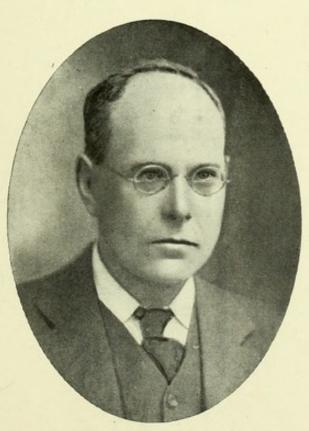
Little change occurred, except in the personnel of the teachers, until 1906, when again a new curriculum was introduced, in which a precise scheme of clinical instruction was defined. It was still left to each hospital to prepare a syllabus showing how its staff proposed to carry out the details of the scheme, subject to the approval of the Faculty of Medicine. The University had thus gradually assumed more control over the extent and nature of clinical teaching, though it had no voice in the appointment of the members of the hospital staff who gave the instruction. In the year 1910, however, a great change occurred. The subscribers to the Melbourne Hospital agreed to alter the mode of election of the staff. An Advisory Board was appointed to recommend candidates for election by the Committee. On this Advisory Board the University had substantial representation, both of the Council and of the Faculty of Medicine. At the end of the previous year the University Council decided to recognise St. Vincent's Hospital as a Clinical School, and work began there in the beginning of 1910. Housed in modern well-equipped buildings, and with a keen and capable staff, the young school has progressed rapidly. The Alfred Hospital has also revived its Clinical School, and its able and energetic staff is attracting more students than before, and is doing most excellent work. Both the Alfred and St. Vincent's Hospitals have Advisory Boards, on which the University is strongly represented. Finally in 1911 the University



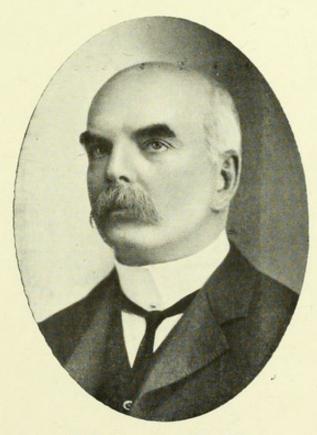
F. D. BIRD, M.S., Hon.F.R.C.S. Lecturer on Surgery. Surgeon to the Melbourne Hospital.



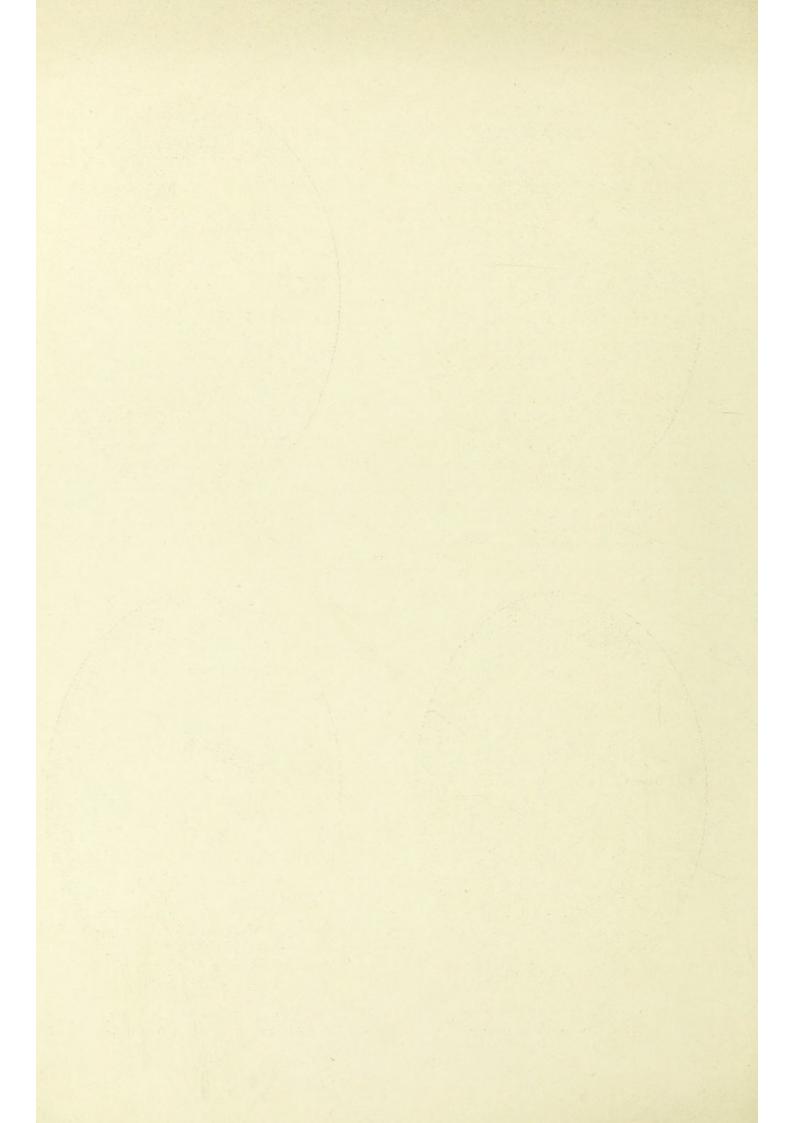
WILLIAM MOORE, M.D., M.S. Consulting Surgeon, Melbourne Hospital.



G. A. SYME, M.B., M.S., F.R.C.S. Surgeon to the Melbourne Hospital.



R. A. STIRLING, M.D., B.S. Consulting Surgeon, Melbourne Hospital.



undertook the collection of the fees for clinical instruction, and their allocation to the teachers, and made the appointments of Clinical Lecturers, Clinical Tutors, and Clinical Instructors from those members of the staffs of the three hospitals who offered themselves for the positions. The number of Lecturers and Tutors is limited in each hospital, but practically all the members of the staffs are Clinical Instructors. The work is now thoroughly organised and supervised, and full use is made of the available clinical material. Since the appointment in 1910 of clinical assistants at the Melbourne Hospital, the out-patient staff there has been able to give much more time and attention to teaching. Time will not permit more than the baldest recital of the names of the various men who have succeeded to the senior position at the various hospitals. As regards the physicians at the Melbourne Hospital, in 1883 Dr. Motherwell was succeeded by Dr. Fulton, and he in 1887 by Dr. Macinerney. In the same year Dr. Springthorpe took Dr. Robertson's position. In 1898 Dr. Howard replaced Dr. Moloney, and in 1903 Dr. Maudsley succeeded Dr. Macinerney. In the same year a senior position was created to which Dr. Nihill was appointed. In 1904 Dr. Williams' place was taken by Dr. W. R. Boyd. On the surgical side, Mr. Howitt was succeeded by Mr. Girdlestone in 1883, who in turn, in 1887, was replaced by Mr. Chas. Ryan. In 1801 Messrs. Bird and Stirling took the positions of Messrs. James and Beaney, and in 1902 Dr. Moore that of Sir T. N. FitzGerald. In 1903 Mr. Syme was appointed to a senior position. Under the new system of succession from the out-patient staff on the advice of the Advisory Board Mr. Rennie, in 1910, took Dr. Moore's place, and on his death was followed by Mr. Langlands. When Mr. Ryan retired last year Mr. T. H. Boyd succeeded.

At the Alfred Hospital the Clinical Lecturers in 1888 were Drs. Embling, Jamieson and Barclay Thomson as physicians, and Messrs. O'Hara, Cooke and Rudall as surgeons. None of these are now on the staff. Drs. Lempriere, Maudsley and Henry were for some time physicians. Then came Drs. A. V. M. Anderson, Mackeddie and Player, the last being succeeded by Dr. H. Laurie. Mr. Hamilton Russell succeeded Mr. Rudall, Mr. Buchanan Mr. Cooke, and Mr. R. C. Brown Mr. O'Hara. The St. Vincent's staff in 1910 consisted of Drs. Alex. Lewers and Latham as physicians, and Dr. Murray Morton and Douglas Shields as surgeons. Dr. Dunhill has taken Dr. Shields' place.

Besides the Clinical Schools at the general hospitals, students have always attended the Women's Hospital for instruction in Midwifery and Gynaecology. The curriculum of 1887 and 1910 provided also for instruction in Diseases of the Skin, of Children, of the Eye and Ear, and in Mental Disease. Time forbids any reference to these special schools, or the teachers in them, but it may just be mentioned that earlier students were very grateful to the late Dr. Snowball for teaching at the Children's Hospital long before it was recognised by the University.

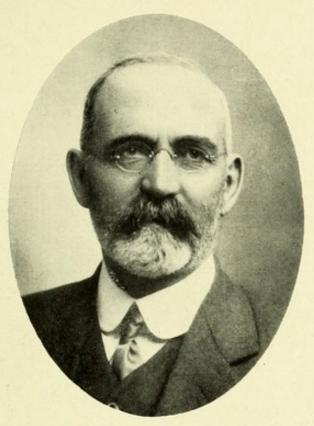
In conclusion, may I be permitted to express my conviction of the great importance of the Clinical Schools in any scheme of Medical Education? The knowledge acquired by clinical study is always solid and permanent. Theories as to the causation, nature and treatment of disease change; means of investigation are improved, new interpretations given of old symptoms and signs; but the symptoms and signs themselves never alter. The clinical descriptions by Hippocrates are as true to-day as when they were written. Further, the methodical investigation of patients if properly conducted in a Clinical School adequately equipped with laboratories, is as truly scientific, being a rigorous observation of facts, as any other part of the curriculum. Clinical work is the crown of the whole system.

THE PRESENT NEEDS AND FUTURE REQUIREMENTS OF THE MEDICAL SCHOOL OF THE UNIVERSITY OF MELBOURNE.

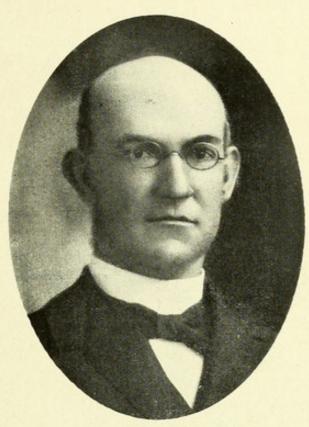
An Address by R. J. A. Berry, M.D., C.M., F.R.C.S. Edin., F.R.S.E., Professor of Anatomy in the University of Melbourne.

To me, to-night, has been allotted the role of the seer, and upon my shoulders falls temporarily the ill-fitting mantle of the prophet. If it be indeed true that the prophet is without honour in his own country, I take consolation in the fact that the part is mine for a brief ten minutes only. Fortunately it is not given to man to see into the future, and any attempt to achieve the impossible can only be based on a close study of the past. Here it has always seemed to me lies the difference between the statesman and the politician, the one studies history, and the other speculates in "futures." In attempting, therefore, to lay before you a brief account of the present and future requirements of the Medical School of the University of Melbourne, I would ask you to be good enough to remember that I can only apply to the future experience derived from the lessons of the past, and I shall do so under three main heads, equipment, buildings and staff.

As regards equipment, it is a pleasure to record the fact that in its Jubilee year our Medical School more than holds its own, but we shall do well to remember that this gratifying state of affairs has only been



G. T. HOWARD, B.A., M.D. Physician to the Melbourne Hospital



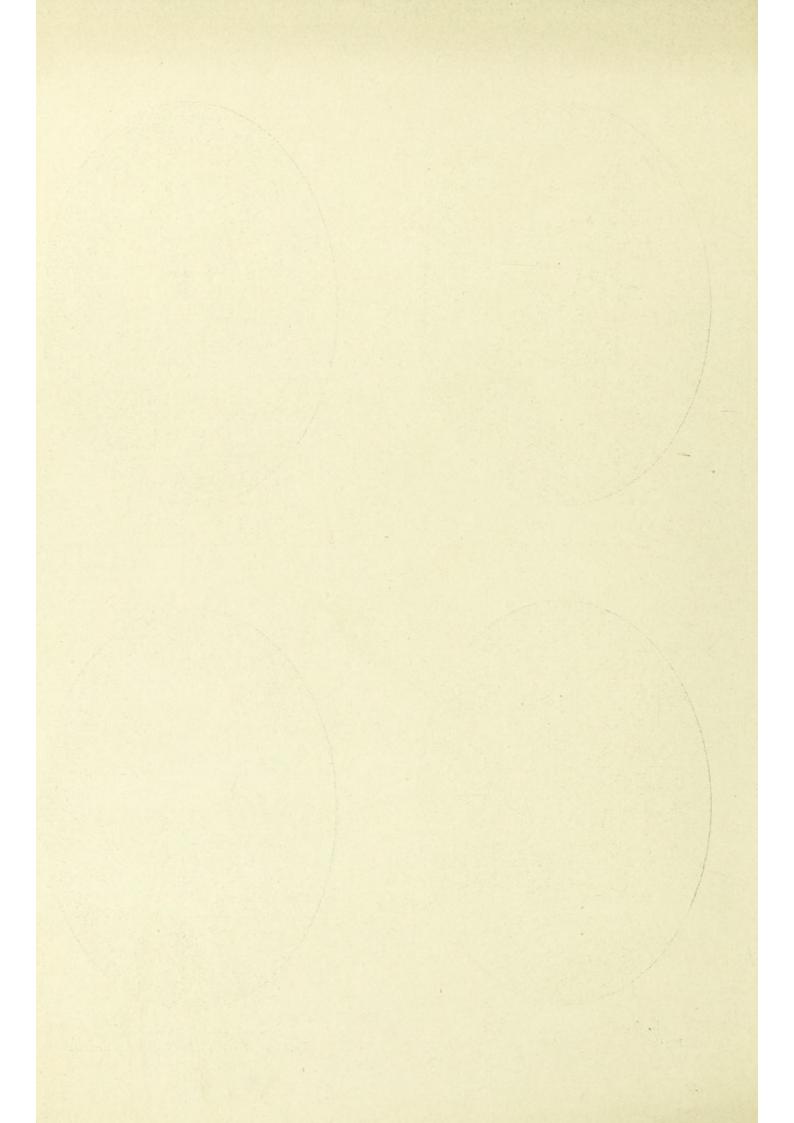
W. R. BOYD, M.D., B.S. Physician to the Melbourne Hospital.



R. R. STAWELL, M.D., D.P.H.
Physician to Outpatients, Melbourne Hospital.



J. F. WILKINSON, M.D., B.S. Physician to Outpatients, Melbourne Hospital.



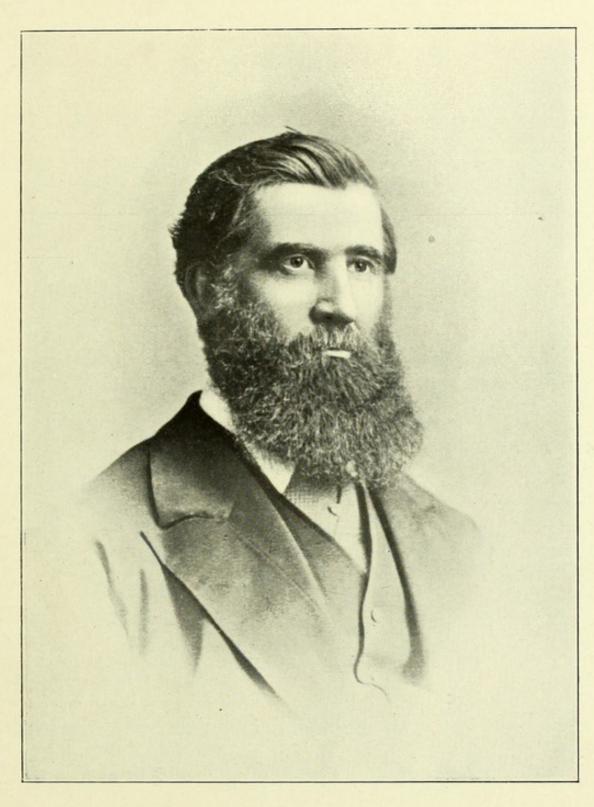
brought about by the munificent foresight of the late Dr. James Stewart, of Ballarat, who, in the year 1909, bequeathed to the University of Melbourne the princely sum of over £25,000. It is perfectly true that he specified that the primary objects he had in view were the advancement of Anatomy, Surgery and Medicine, but the Committee of the Faculty which has been mainly entrusted with appropriations under the Bequest has taken the broadest view of the case, and it is a genuine pleasure to record the conviction that the Committee has done, and is doing, its work in the most harmonious manner. Its recommendations are conspicuously devoid of that trumpery feeling of jealousy which only too frequently mars University legislation. We find, therefore, that all sections of the Medical School are profiting by the Bequest. Its Professors find they have a reasonable chance of acquiring the costly apparatus which modern scientific methods so frequently demand. Its students benefit by an increased efficiency in their teaching, and its Graduates are enabled to return to us with a reasonable certainty that any assistance they may require will be forthcoming. Notwithstanding that the Bequest has only been in operation three years, the three great medical departments of the University have already been materially benefited. There have already been acquired, to mention but a few, the costly Zeiss Projection apparatus, a Zeiss micro-photographic projection outfit of the newest pattern, large numbers of embryological reconstructions by modern masters of the method, equipment for the Museum of Pathology and the Elliott-Fisher printing machine for teaching and museum purposes. It is perfectly true that even to-day we find a Lecturer in Histology without a modern microscope, but it is also equally true that the Stewart Bequest will enable us to rectify this somewhat startling deficiency and that without delay. When we reflect that from this source alone there will be spent upon the equipment of the Medical School the sum of from £175 to £275 annually, and that for all time, it will be readily realised that we have but little to fear as regards equipment.

Quite apart from the Stewart Bequest, though possibly as an indirect outcome from it, a visit to any one of the existing departments of the Medical School will convince the most sceptical that this medical side of the University is very much better equipped than is either commonly realised or supposed. In Physiology, for example, there are exceptional facilities for teaching and investigation with the most modern instruments. An Einthoven string galvanometer is kept constantly ready for use, whilst physico-chemical methods for the investigation of body fluids, such as electric conductivity, hydrogen ion concentration, vapour pressure, osmotic pressure, calorimetry and spectrophotometry are applied and taught. With its wealth of apparatus the Physiology department can claim to be thoroughly well equipped.

The Anatomy department with its many photographic cameras and instruments of precision, its calculating machines, mechanical appliances for freezing and section cutting, and an Anthropological laboratory better equipped than anything at present existing in Europe, is in no way behind its competitors elsewhere.

In Pathology the great museum with its 10,000 specimens, the histological laboratories, the microphotographic room with its singularly beautiful microphotographic projection apparatus, and the photographic and other workrooms more than speak for themselves.

Passing next to the consideration of Buildings, only so recently as 1907 the Government of Victoria, under the Premiership of the late Sir Thomas Bent, enabled a great forward step to be made when it granted the sum of £6500 for the extension of the New Medical School. The effect of these building operations was to double the whole Medical School, and the practical result was immediate. The numbers of Medical Students, probably attracted by the extra facilities offered, increased so rapidly that even to-day, only six years later, further extensions are urgently required. Those of the most pressing character are an addition to the ever-growing Museum of Pathology, and also to that most useful section of the School, the Department of Bacteriology. In Physiology, thanks largely to the generosity of the medical profession and also to the David Syme Trustees, the teaching laboratories for biochemistry have been enlarged and new and well-equipped rooms for animal surgery and for X-ray work have been built. But withal there are still urgently wanted new buildings for Bio-Chemistry, whilst Experimental Psychology may even be reckoned as a subject that will need early consideration. In Anatomy, consequent on certain alterations in the curriculum and on an all-round increase in its activities, the accommodation is now insufficient. A theatre designed to hold 150 is having crowded into it three days a week over 200 students, and it is estimated that during the current year there will be over 500 students on its roll books. There are also urgently wanted new laboratories for Histology, Embryology and Neurology, and locker rooms for students. The entire School suffers from the fact that in the past its buildings have been added piecemeal and not according to any fixed plan, but it is again a pleasure to state that those primarily responsible for the wellbeing of the School are so thoroughly in accord as to its present and future



James Stewart, F.R.C.S.I. Founder of the Stewart Bequest.



requirements, that a scheme of unification and extension is already prepared, and only awaits for its consummation the necessary financial benefactor, State, University, or other. Any or all are equally welcome.

Equipment apart, there are still some startling deficiencies. My first impression of the University of Melbourne obtained on a hot summer's day in February, 1906—a day which I have since learned from experience is commonly called a brickfielder—has never been altered. That impression was then, and is now, its startling inequality. Side by side are magnificent laboratories and "insanitary hovels," as they have recently been termed. Gothic architecture in stone and teratological deformities in cement. Completely equipped and independent departments of Pathology and Bacteriology—a conjunction which even few of the most modern Universities can show,—but no provision whatsoever for neurology or embryology. No chairs in Medicine, Surgery, Obstetrics or Forensic Medicine, nay, not even a room the lecturer can call his own As these were in 1906, so are they in this our Jubilee year, except that provision has been made for a commencement in Embryology, and Stewart funds may at any time be applied to Neurology.

Turning now to the last and most important question, without which all is as nothing, namely, that of Staff, the position is deplorable In these days when superficiality is apt to be mistaken for genius, we should do well to pause awhile and ask ourselves, should we not do better to wipe off the slate Lord Rosebery's celebrated dictum of "muddling through" and write thereon instead "efficiency." It is incredible that to-day, in 1914, the fiftieth birthday of this, the oldest medical school in Australasia, there is not, in any one of the three University Medical Departments, a single permanent assistant. There is instead an irritating and nerve-rending procession of young graduates who have, perhaps, designs on a higher degree. Good men though these undoubtedly are, it is exasperating in the extreme to find that, just when the assistant has been trained to the duties of his department, he departs to those Elysian fields where money apparently grows on every tree, and the weary process commences all over again. Quite apart from the fact that both students and staff suffer under this pernicious system, the former from lack of good teaching-for good teaching is not to be acquired in a twelvemonth-and the latter in time and patience and nerve energy, there is the still more grave disadvantage that, were serious illness to overtake the head of a department at the commencement of an academic year and in one of those soul-destroying periods of change, the whole work of that particular school would come temporarily to a standstill. In view of the fact that there is a very large amount of public money invested in this Medical School, the present policy of drift is as dangerous as it is deplorable. The labourer, too, is worthy of his hire. In the past the Council has apparently viewed the medical salary through a microscope and it has, in consequence, appeared enormously magnified. When looked at with the naked eye it will be seen in its true proportions, and the princely salary of the imagination becomes the miserable pittance of reality.

And now let me leave the rôle of critic and assume that of the seer and gaze into futurity. I see the oldest Medical School of Australasia with an imposing frontage to Madeline Street, an administrative block and library, departments of Medicine, Surgery, Obstetrics, Therapeutics and Forensic Medicine, each with its teaching museum, retiring room and research laboratories. Departments of Anatomy, Physiology, Pathology and Bacteriology, with two to four Associate and Assistant Professors according to requirement. Theatres properly furnished, equipped and even ventilated, and, quaintest conceit of all, large enough to accommodate the students. I see also a large and enthusiastic staff adequately paid and, in consequence, contented, benefiting the State by their teaching, the Commonwealth by their example, and the world by their researches. I see its students carrying the fair name of their Alma Mater, with no thought of "shop," to all parts of the world, and becoming in their turn leaders of men and acknowledged masters of thought. None do I see who become the mere Academe always so hopelessly out of touch with the people. All this a mere vision, but after all nothing more than can be seen to-day in almost any other University. Why not then in Melbourne? If not now, at least when we and our generation shall sleep "the sleep that knows not breaking," and those who come after us perpetuate our memories at the Centenary of the greatest School. of Medicine under the Southern Cross. But alas! "The baseless fabric of this vision shall dissolve, and like this insubstantial pageant faded leave not a wrack behind." For the immediate present the most pressing need of Melbourne's Medical School is an adequate and properly paid staff, and I cannot better take my leave of you than in a paraphrase of Danton's immortal words-" Que faut-il? A staff, again a staff and always a staff."

THE MEDICAL SCHOOL IN RELATION TO THE STATE.

An Address by W. A. Osborne, M.B., B.Ch., D.Sc., Professor of Physiology in the University of Melbourne.

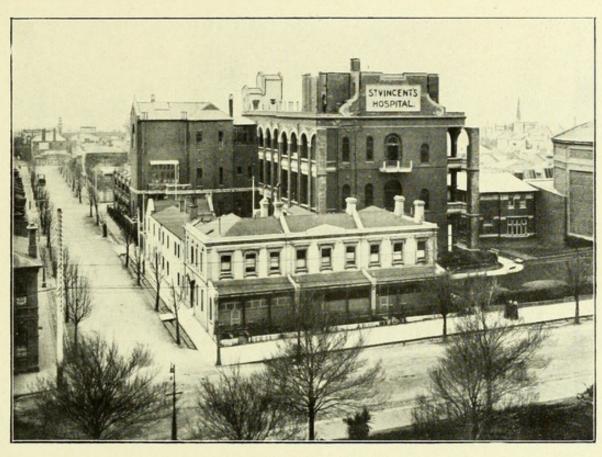
What service has our Medical School rendered to the State? this question, whether propounded in a spirit of enquiry, or of criticism, friendly or unfriendly, the reply is simple and adequate-it has educated the medical profession of Victoria. To gain some idea of that service, imagine for a moment the profession inoperative. Is there another group of intellectual workers the removal of which would produce more dislocation of society? I can think of the State surviving for a brief period without gentlemen of legal training; but one day without the skilled efforts of the surgeon and the physician would create an unthinkable amount of distress. It is true that medical graduates could be obtained from schools of other States, but we should then be writing ourselves down as inferior in civilisation to those States, and, moreover, it is recognised, the world over, that the physician and the surgeon should not only be familiar with the disease but should also be intimately familiar with the patient and the surroundings of the patient. In no school can this be learned. Both doctor and surgeon must be of the people they attempt to heal.

Yet there may be those who demand a record of service more directly departmental and more intimately associated with the function of administration. Here the difficulty of the apologist is to choose without invidiousness a few instances out of the many available. Let me essay this task.

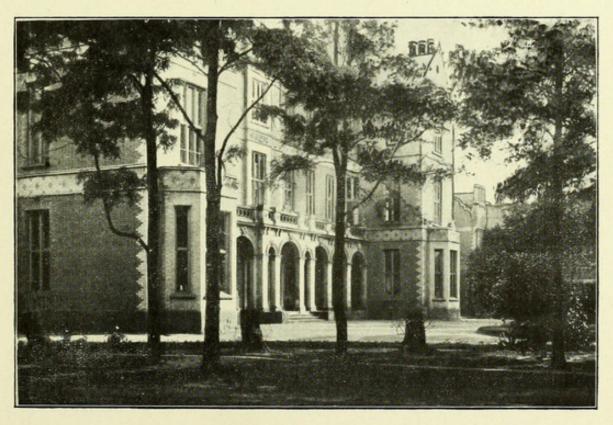
We will begin with public health. It is inbred in men of British race to distrust the expert when it comes to administration. But in public health this prejudice must give way. A lay chairman of a Board of Public Health has been and always will be a sure begetter of trouble. One may venture on the criticism that if medical experts were better represented on Boards of Health, public hygiene would be more effective. As to the direct value to the community of preventive medicine, no more striking evidence can be obtained than the abatement of typhoid in Melbourne. Many other examples could be chosen, but there is in this a triumph of applied knowledge of rare magnitude. In the eighties the death rate from typhoid in Melbourne was 78.4 per 100,000 of population. Typhoid was regarded as the Australian epidemic disease. From 78.4 the rate suddenly fell and went on falling until it is now 7.7, or less than a tenth. We may say then that in this year 1914 over four

hundred fellow citizens in Melbourne are alive, who, under conditions existing twenty years ago, would be condemned to death within the year. This great and beneficent change is a direct outcome of the Royal Commission concerning the Sanitary State of Melbourne which sat in the years 1888-90. Were time less pressing I should like to dwell at some length on this great work, a model of what a Commission's labours should be. The President of that Commission is here to-night in the person of Sir Harry Allen, whose untiring energy and penetrating mind are visible throughout the report. The Secretary of the Commission was Mr. Syme, one of our most distinguished clinical teachers in Surgery. Another member of the Commission was my colleague, Professor Orme Masson. It is surely a significant fact that typhoid is now twice as prevalent in the country as in the metropolis, and that in the latter the few cases which arise are to be found chiefly in those areas and institutions in which the recommendations of the Commission have not been followed. At the same time as this Commission was sitting Sir Harry Allen was President of the Royal Intercolonial Rabbit Commission. He had before this been a member of the Tuberculosis in Cattle Board, and had written a large part of its report. The remainder was mainly the work of Dr. Jamieson, our former Lecturer on Medicine. For several years Sir Harry Allen was a member of the central Board of Health, and was specially thanked for drafting model by-laws for Local Boards of Health. His skilled advice was sought when early shipments of meat failed through lack of scientific methods. From him the State Government has received reports on a number of topics, some purely professional, others of wider scope, such as sewage disposal, hospital construc-Again and again has his unsurpassed knowledge in the conduct of post-mortem examinations been of prominent utility in coronial inquiries and in criminal trials. I think I have said enough to indicate the extent of the service of Sir Harry Allen to the State, using the word service again in its very narrow and, of course, inexact significance.

Confining our attention still to public health we find that two of the three occupants of the chairmanship of the Board on whose shoulders so much responsibility rests have, since the death of Dr. Gresswell, been graduates from our own school—first Dr. Norris, and now Dr. Robertson. The duties of Health Officer to the City of Melbourne were during a long term of years fulfilled by Mr. Girdlestone, our Lecturer on Surgery, and afterwards by Dr. Jamieson, our Lecturer on Medicine; and Dr. Jamieson, when entering on a well-earned retirement, handed on his duties to a graduate of our school, Dr. Sinclair.



THE ST. VINCENT'S HOSPITAL.



THE ALFRED HOSPITAL.



Let me pass to another topic of considerable national importance. In the very near future, it may be a matter of a few months, there will be established uniform standards for food and drugs for the whole Commonwealth. For the first time in history such unification will be enforced over a federation of States. The full importance of this measure may not be grasped all at once. It means, however, that into whatever State one passes, the same standard of purity will be observed in foods and drugs. I dread anything like hyperbole, but I do not honestly know of any country where a higher grade of purity in foods is to be met with than in our own and neighbouring States. Every substance which the sane human being may, at any time, deliberately swallow, as food, stimulant or drug, will be provided for in specific regulations. There will be uniform standards throughout the Commonwealth for each and all of these-peas, pepper, pastry, pickles and paraldehyde. Only in the case of a very few substances of variable composition and not of inter-State commerce may slight differences be allowed between State and State. How is it that we are so soon to possess this uniform standardisation, or, for that matter, how is it that each State already possesses high standards of food, though uniformity be not fully attained? Future historians will certainly find the beginning of this great pioneer movement in the Pure Food Act of Victoria, passed in the year 1905, one of the provisions of which was the appointment of a Foods Standards Committee to make definitions and propose standards after exhaustive investigation. Victoria will always have the credit of being the first State in Australia, more than that, the first State in the Empire, to bring out a set of standards for practically every food-stuff. In common fairness we must admit that some good service was rendered by men who were not graduates of our University. I would mention particularly in this connection the name of Mr. Percy Wilkinson. But the man whose energy and statesmanlike qualities pervaded this complex inquiry, who later, as Chairman of the Standards Committee, worked untiringly until success was achieved, was our own Dr. W. P. Norris. The original Foods Standards Committee, nine in all, contained, in addition to Dr. Norris, who was of our School, and Dr. Heber Green, of our Chemistry School, and other gentlemen whom we cannot claim,-Dr. James Jamieson, our Lecturer on Medicine. Dr. Thos. Cherry, again one of our own medical graduates, and lastly, a member of the teaching staff of our Medical School.*

Let me next turn to the Bacteriology Department. A glance at the day-book of this institution ought to have a sobering influence on any critic who asks what the Medical School or the University does to benefit

^{*} This member was Professor Osborne himself. [ED.]

the community outside vocational instruction. Apart from the thronging swabs and exudates, we find all manner of expert work done for agriculture, e.g., starters for butter factories. One of our medical graduates who became director of this institution afterwards left us to become State Director of Agriculture, and has lately come back to us as professor of that subject; whilst the name of the present head of the laboratory, Dr. Bull, is likely, with that of his helper, Dr. Hiller, and the then Chairman of the Board of Health, Dr. Ham, to go down to history as that of a pioneer in the crusade against specific disease.

I have picked out these instances of high service, though there are many others I could name. I am tempted to deal with the organisation of Federal Quarantine by Dr. Norris, who was succeeded by Dr. Cumpston; with the work done in connection with infantile mortality-some of it is pretty thankless, too-which is associated with the names of Drs. Stawell and Atkinson Wood; with the untiring energy of Dr. Springthorpe in raising the status of Dentistry and Massage and a host of other activities; with the investigation on sight-testing for pilots, and much and varied public service by Dr. J. W. Barrett; with the work of my predecessor, Dr. Martin, on the Darling pea and on snake-bite; with the service being rendered to education by Dr. Harvey Sutton and Dr. Jean Greig; with the investigation on miners' phthisis by Dr. Summons. I could also say much on the subject of our graduates in other States; take as an example the initiation of medical inspection of schools in Tasmania by Dr. Elkington, with the help of Dr. Gertrude Halley. With such a wealth of instances at my disposal it seems almost invidious to mention some and not all.

However, I will close as I began this paper with the reiterated statement that the chief service of the Medical School is the training of the medical profession. To think that hygiene, however advanced and however well administered, will ever obliterate disease is an empty dream. As long as man is progressive, getting into touch with a more extended environment and utilising more and more of the forces of nature, there will always be pathological results due to changed habits. There is a great lesson to be learned in this respect from obstetrics; also in a minor degree from dentistry. We are, however, far from the day when influenza and measles, not to speak of cancer and diabetes, will be obsolete words. The citizens of the State in the presence of pain and threatened death call loudly for relief. To train men to attempt this, often to effect it, is our service.

POSSIBLE DEVELOPMENTS.

An Address by J. W. Barrett, M.D., M.S. Melb., F.R.C.S., C.M.G.,

Hon. Ophthalmologist to the Melbourne Hospital, Hon. Lecturer on the Physiology of the Special Senses in the University.

It was the custom in ancient Egypt at the end of a feast to carry round a skeleton. The object was a desire to remind men in the midst of enjoyment that their lot was not one of earthly immortality. If you will be kind enough to regard me this evening as the skeleton, I desire to remind you, not of problems of mortality or immortality, but of the absolute necessity for the continual modification of medical organisation. Cessation of change implies stagnation. With the rapid changes in knowledge comes the urgent necessity for change of view-point, and the business of those who conduct great educational organisations is to ascertain what is solid and what is ephemeral in scientific changes, and then to make the necessary modifications in machinery.

In the few minutes at my disposal, I propose to abandon the tone of congratulation which has justly characterised the proceedings of the last three days. I desire to make the most ample acknowledgment of the splendid work that has been done in the past, including some fine though scattered pieces of original research. I propose, however, to indicate the shortcomings of the School and of medical organisation, and to try and suggest the road by which the deficiency may be rectified.

If the future of medicine is to be all that we desire, a profound re-adaptation of our ideas of medical education is necessary. May I therefore deal in sketch form with two great problems which appear to me to dominate all others with regard to the future of medicine:—

(1) Clinical Research.

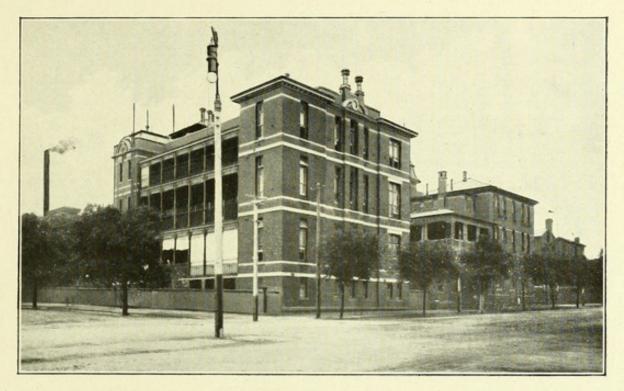
If I may become for a moment retrospective the position can be best illustrated. When I went to London in 1884 there were only two examiners on the Board of the College of Surgeons who were pure physiologists, and even they had been in medical or surgical practice. Shortly after it became the custom to appoint to the Examining Board men who had given up practice or who had never practised, and who were experts in pure physiology. The immediate advantage seemed to be considerable, because they could devote themselves entirely to the

study of physiology, and were consequently much better acquainted with the continual change of front which is taking place than those who were earning their livings in private practice.

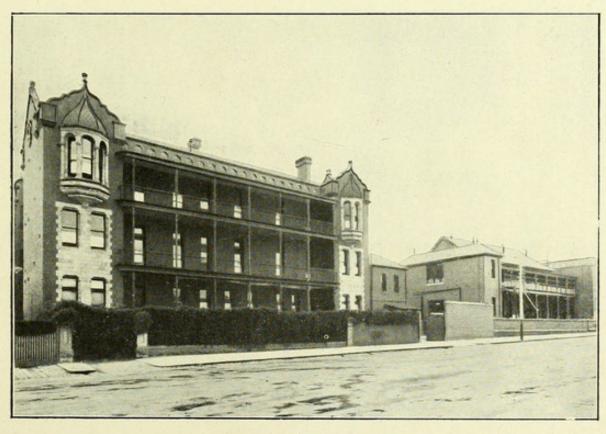
The same observation applies to pathology, and similar changes have taken place. It is, however, in the minds of many, questionable whether the change which has taken place is wholly to the advantage of medicine or medical science. Surely the just basis of criticism was not that those men followed the practice of medicine, but that they were practising medicine for a living, and consequently devoting too much of their time to the business side of the undertaking? Is it not the feeling of every dispassionate observer at present that it would be an advantage if the pathologist to any hospital was a member of the medical staff of the hospital, but was not engaged in private practice, and was consequently able to devote himself to medicine and pathology. After all, is not pathology included in medicine?

It is not a little remarkable as indicating the change of opinion which has taken place, that in Dunedin the pathological laboratories and museum of the University of New Zealand are being built alongside the hospital. It would be better still if they could be in the hospital. The action, however, indicates the belief that the problem of pathology is the problem of medicine, and the problem of medicine is the problem of pathology, and the investigations in both professions had better be undertaken by a man who is both a pathologist and physician. In a word, it is the separation of what is called pure science (an objectionable term) from its human context that constitutes a fault. It means that our conception of the term "science" wants amendment. Medicine and surgery are not the application of science to practical problems, but are divisions of science in themselves. That is to say, from the study of phenomena principles can be inferred. You may say medicine depends on the basic studies, chemistry and physics, anatomy and physiology but if analysis is pushed further back again, anatomy and physiology depend on chemistry and physics, which again depend for their existence on other branches of knowledge. It is very difficult to say that any subject is absolutely basic, until we reach the undecomposable elements of knowledge.

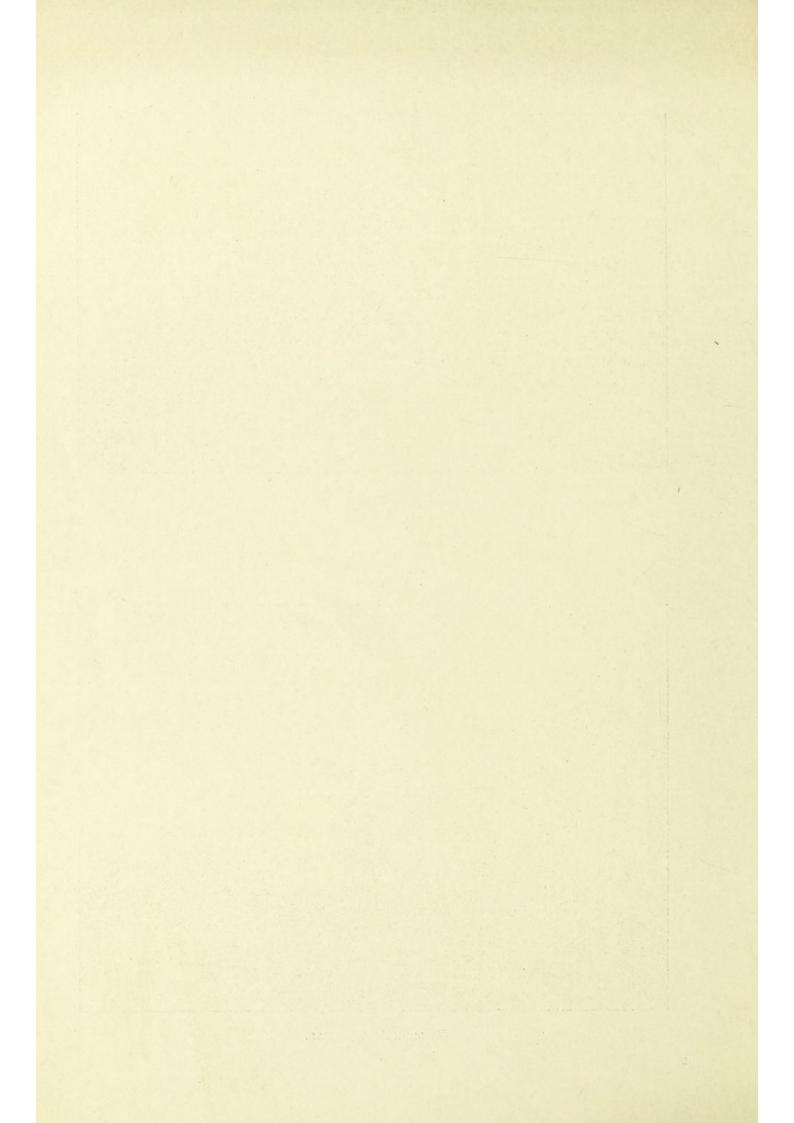
It is probable that in the future in every great hospital there will be a physician and a surgeon devoting themselevs entirely to the study of medicine and of medical education, and who are relieved wholly or to a large extent from the necessity of engaging in private practice. This principle has been in vogue in the German Universities, and accounts for



WOMEN'S HOSPITAL.



CHILDREN'S HOSPITAL.



their eminence in one direction. It has been rapidly introduced into the American Universities, as the recent benefaction of Mr. Rockefeller to the John Hopkins Hospital shows. It will be within your recollection that Mr. Rockefeller gave a sum of £300,000 to the John Hopkins Hospital on the understanding that the interest on three separate sums of £100,000 was to be expended for the Chairs and Departments of Medicine, Surgery and Gynaecology. This decisive step is likely to be followed by the universal adoption of this practice in the United States, just as the action of the John Hopkins University in placing research in the front rank was followed by the other Universities in the Great Republic. The change has been recommended by the last Royal Commission in the University of London, and it has had as one of its most powerful advocates in Great Britain, Professor Starling of University College.

By such arrangements an expert is given a sufficient salary to enable him to approach medicine from the standpoint of science, and to devote his life to the study of medicine, just as at present men devote themselves to physiology or pathology. It is most unlikely that a medical faculty will ever be normally balanced until it contains such men. As at present constituted, the academic element is sure to weigh heaviest even though it be weaker numerically.

Sometime since I was taken to task respecting the allocation of the money obtained for the University by means of the Stewart Bequest. It was asserted that it should have been devoted to clinical research. Without entering on the merits of the question, I pointed out that the arrangement made was that determined by the Faculty of Medicine after full consideration, and that the clinicians of the Faculty constituted an overwhelming majority and could have done as they pleased. The Professorial Staff in the Faculty always attend meetings and give consideration to the business beforehand, and justly exercise the great influence which all men exercise who come to a meeting with their minds prepared.

Further, it is not undesirable that the Professor of Physiology and the Professor of Anatomy should be permitted to do a certain amount of Hospital clinical work.

You may ask what advantage would be gained by a closer association of practice with the work of the Chairs indicated. The advantage is the ever present sense of the nature of the problem which must be daily faced, and the consequent inducement to the Professor to mould the teaching of his subject in accordance with practical suggestion. Is it not clear that many of the methods of Chemistry could be taught equally well, if the problems submitted to examination were those connected with the human body, healthy or diseased? Is it not clear that Physiology might to a very great extent be taught in the same way if equipment and staff were provided? In fact, the teaching is tending in that direction. Is it not clear that the occupants of the professorial chairs would be stimulated to devote their leisure to purposes of research more directly connected with the work of the physician and the surgeon?

The fundamental fault of the Medical School of the Melbourne University is that at present it is relatively unproductive from the clinical point of view. Less than justice would be done if its merits as a high school of medicine were not fully acknowledged. The men and women who are turned out can do their immediate work exceedingly well, and compare favourably with practitioners in other parts of the world. There is, however, no denying the fact that so far as original methods are concerned, so far as the great advances in medicine and surgery are concerned, it is not playing the part that it should. The reason is not far to seek. Nearly all the graduates have to earn a living by private practice, and the earning of a living by practice and the full participation in the great advances in medicine are to an extent mutually incompatible.

The great discoveries of medicine do not come from men in large practice. Men in large practice have a great and special value of their own, a value which is the greater if they are quick in adapting advances to practical necessities. Great advances require leisure for work, and leisure for thought. Such types as Starling, Martin, Ehrlich, Wassermann, Behring, are not largely engaged in private practice, and can consequently survey the matter from a point of view far removed from that of the busy practitioner.

If you agree that these changes are desirable, you may ask, "How can they be effected?" We then reach the usual question of finance. Clinical Research is not likely to be provided for at present except by private beneficence, and two forward steps have been made during the present year.

Mr. John Grice, President of the Melbourne Hospital, has placed at the disposal of the University of Melbourne a sum of £1000 to be expended at an average rate of £125 per annum. The Government has supplemented this by a contribution of £125 a year for three years, so that for the next three years, £250 a year is available for a Cancer Research Scholar who is to be resident at the Melbourne Hospital. The

University and the Hospital have accepted the terms, and the details alone remain to be fixed.

Furthermore, as you know, the graduates of the University are forming a clinical research fund which, with present offers, amounts to about £2000. The interest of this money is to be allocated amongst the three Medical Schools in proportion to the number of students attending. The sum is small, but it represents the beginning of a proper endowment of that which is essential to modern medicine—clinical research.

It is right that the most ample and generous acknowledgment should be made of the action of Dr. Sewell in establishing this fund. It is due to his initiative and energy, patience and courtesy, that the movement is successfully established.

Summarising what has been said, it means that the English system of teaching medicine has become partly obsolete. It has well served its purpose in the past, it is still very useful; but it needs modification and should be brought up to date.

(2) A Board of Preventive Medicine.

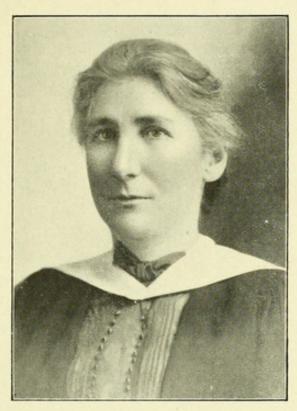
The second matter to which I wish to allude is, to me, the pressing necessity for the organisation of preventive medicine. Anything more absurd and really ludicrous than the present organisation of medicine in Victoria it would be difficult to imagine. The Government of the country and the people of the country are spending large sums of money in training excellent practitioners who pass into the world to earn a living by curing or trying to cure diseases which ought not to exist. A portion of the sum spent in the training, if applied to prevention, would have rendered some of the training unnecessary. We have a Board of Health of Municipal character presided over by one medical officer who has some assistance. We have part time medical officers throughout the country who are in practice, and consequently unable to act at times in the manner they would desire. We have three whole time school medical officers, who are doing excellent work as far as it goes. Has the time not come for the creation of an organised system of preventive medicine which will include all these agencies, which shall begin with the school and take charge of the public health in all its ramifications? It would mean dividing Victoria into a set of provinces of an area depending on the physical features of the country and the number of people in it. It would mean placing at the head of each province an assistant health officer subordinate to the Central Board in Melbourne, with powers to be devolved so that the officer would not be too much hampered.

We require a reorganised Central Board of Health. It should include one or two representative medical men in addition to the Chairman; it should include an engineer, an architect, and perhaps one or two municipal representatives. The functions of such a Board would be the general development of preventive medicine, the control of the assistant medical health officers, and the establishment of bye-laws and general regulations. It is to me, however, absolutely certain that any scheme of preventive medicine will be inefficient unless the full co-operation of the profession is assured, and the co-operation of the profession can only be assured by asking them to take a hand in the business. Not only should there be one or two representative medical men on the Central Board, but each District Officer, i.e., assistant officer of health in charge of a province, should have associated with him a Council composed of representatives of the medical profession in the district, and of municipal councils. This Council, with the officer, would control the local officers of health through the municipalities. Great powers would be devolved, and the administration would fall on a whole time expert, assisted by a Council of men who are in actual practice as medical men or in managing municipalities.

What diseases then could be extirpated, and what functions could Boards of Health Discharge? There is no doubt that Venereal diseases might be almost completely extirpated without a very great deal of trouble. There is no doubt that Scarlet Fever and Diphtheria could be rendered negligible. There is no doubt that Tuberculosis could be rendered much less frequent. But the functions of the Board of Health or, as I should like to see it called, the Board of Preventive Medicine, would go much further than direct eradication. Such a Board would consider questions of Town-planning, of Housing, of Rural Civilisation and Food Supplies, of Smoke Abatement and all those problems which are concerned in the consideration of a more complete and better enjoyment of life.

But if such an organisation for the development of preventive medicine is to be created, the status of the health officer and the emolument must be very much better than they are at present. Positions in the Health Department should be the prizes of the profession akin to the judgeships in the legal profession, and should be given only to men who have shown efficiency in some other direction.

If objection is raised on the ground of expense, it may be replied that a fraction of the sum spent annually in Victoria for the cure of venereal diseases would render the necessity for cure almost non-existent.



Helen Sexton, M.B., B.S. Formerly Surgeon Women's Hospital.



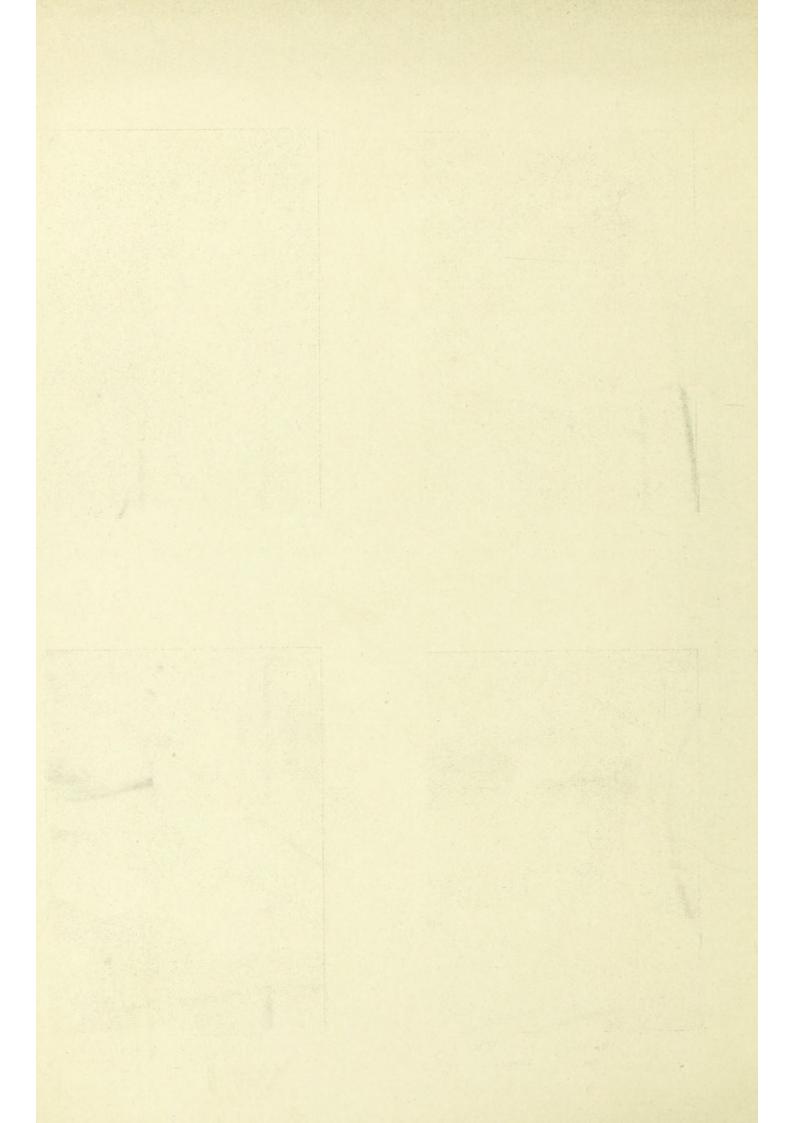
Janet Greig, M.B., B.S. Hon. Medical Officer, Queen Victoria Hospital.



G. CLARA STONE, M.B., B.S. Hon. Medical Officer, Queen Victoria Hospital.



Constance Ellis, M.D. Formerly Demonstrator of Pathology.



I can imagine no more fitting time than the Jubilee of the Melbourne Medical School to formally mark the manœuvre, to clearly indicate the opinion of the profession that the futile system of curing or trying to cure disease should be regarded as belonging to the Dark Ages, and that an organised, systematic and scientific attempt be made to prevent its development.

The medical profession in the past has always been willing to lend its powerful aid in the direction of controlling and preventing disease. From that ideal its leaders and the rank and file have never for a moment turned away, in other words, they have deliberately recognised that they must assume the position of being men of science first and tradesmen afterwards. It is perfectly true that a system of Preventive Medicine properly organised and developed would reduce the necessity for the existence of a number of medical practitioners. The change would come gradually, but it would come nevertheless. At the same time I know the feelings of my brother medical men so well that I can confidently say that they would share in the general rejoicing that would rightly follow the more or less complete extinction of disease. I can imagine no worthier or higher ideal than an attempt to largely transform the profession whose energies are devoted chiefly to the cure of disease into a profession whose energies are directed to the prevention of disease. The sublimation of the one into the other might be accompanied by ethical emanations of the finest and most exalted character.

RECEPTION AND SUPPER AT THE ORIENTAL HOTEL.

At the close of the Lecturettes, a reception was held by the Women Medical Graduates and Undergraduates in the Oriental Hotel. The guests were received by Dr. Mary Henderson (President), and Dr. J. Lindsay Greig (Hon. Secretary), of the Women Medical Graduates' Association. The rooms were beautifully decorated, and supper was served at little tables. The hostesses were unremitting in their endeavours to promote the enjoyment of those present.

THE CLINICAL RESEARCH FUND.

A meeting of the General Committee formed for the purpose of carrying into effect the celebrations connected with the Jubilee of the Medical School of the Melbourne University was held in the Hall of the Medical Society on December 5th, the Vice-Chancellor of the University, Dr. MacFarland, presiding.

It was unanimously decided that there be established in the University of Melbourne a fund for the promotion of Clinical Research.

At a further meeting it was resolved, on the motion of Dr. Stawell, seconded by Dr. A. V. M. Anderson:—"That this meeting re-affirms the desirability of establishing a University Fund for Clinical Research as a memorial of the Jubilee of the Melbourne Medical School, and suggests to the donors that, at first, the interest of the fund be applied to clinical pathological research at the Clinical Schools."

An appeal is made to all who feel desirous of establishing a permanent memorial of the Jubilee of the Medical School of the University of Melbourne to contribute to the fund. All contributions will be placed to a Capital Account, the principal to be maintained intact in perpetuity, and the interest alone employed. By this means it is hoped that an ever-increasing fund will be provided for the purpose of stimulating and encouraging Clinical Research, a field which, so far, has remained largely unexplored in Australia. It is the hope of those who have inaugurated the fund that it will give effective and lasting help to the scientific study of clinical medicine and surgery at the hospitals, and ultimately provide for the establishment of whole time Directors of Clinical Research.

The following donors have come forward: -

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Dr. J. W. Barrett
                -
                      - £100 per annum for 5 years.
Dr. Dunbar Hooper -
                          £25
Dr. McArthur - -
                          £10
Dr. Newton
                          £,20
Dr. F. A. Newman -
                          £20
Dr. Noves -
                          £5
Dr. Stawell
                          £50
Dr. Sewell
                          £50
Dr. Syme -
                          £50
Dr. Percy Webster -
                          £50
Dr. Silberberg -
                          £5
                          (amount not specified).
Dr. Zwar -
                          (amount not specified).
Dr. MacKeddie - -
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Several of these Benefactors have since paid in full their instalments for the five years. Mr.J. S. Horsfall has also most generously promised to subscribe £500 per annum for five years. Further subscriptions may at any time be forwarded to the Registrar (J. P. Bainbridge, Esquire) at the University.

UNIVERSITY AND HOSPITAL DEMONSTRATIONS.

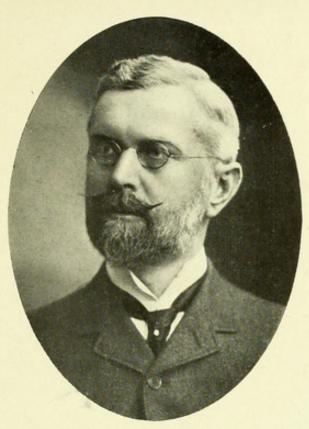
On Thursday, April 30th, and Friday and Saturday, May 1st and 2nd, an extensive series of Demonstrations was conducted in the Departments of Anatomy, Physiology, Pathology and Bacteriology at the University, and at all the Clinical Hospitals, including the Melbourne, the St. Vincent's, the Alfred, the Queen Victoria, the Women's, the Children's, the Eye and Ear, and the Receiving House and Acute Mental Diseases Hospital, Royal Park. New buildings and appliances were shown, numerous cases and specimens were exhibited, and many operations were performed. A great number of modern methods were demonstrated. A booklet was issued giving a full programme of all that was done. The demonstrations were arranged by a Special Committee representing the various Hospitals, Dr. T. E. V. Hurley, Medical Superintendent of the Melbourne Hospital, acting as Convener and Editor.

FINAL CONVERSAZIONE.

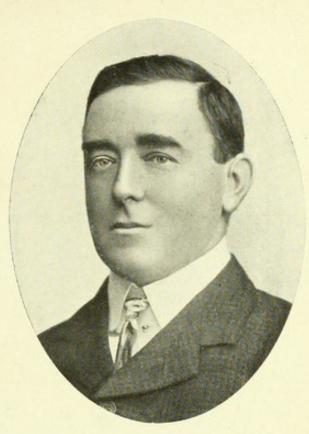
On Saturday evening, May 2nd, a Conversazione was held in the Wilson Hall under the auspices of the Melbourne Medical Association. The guests were received by Dr. Altmann, President of the Association, and Mrs. Altmann, assisted by the Hon. Secretaries, Dr. Konrad Hiller and Dr. Douglas Stephens. The hall was beautifully decorated, the floor being covered with great rugs and broken up by masses of palms and ornamental plants. An excellent programme of songs and recitations was performed by various artistes. Afterwards supper was served from the dais at small tables.

During a pause in the programme, Professor Sir Harry Allen expressed the thanks of the Executive Committee to all who had aided in making the Jubilee so brilliant and so effective. They were under a great debt to His Excellency the Governor for his presence and his speeches. He thanked the Vice-Chancellor and members of Council, the Warden of the Senate, and members of other Faculties for their concurrence and help. He thanked the representatives of sister Universities for their fellowship and their greetings. He was most grateful to the graduates and students for their co-operation, and to all who had sent kindly messages from distant parts. A warm recognition was due to those who had organised the excellent demonstrations in the University laboratories and in the various clinical hospitals. He thanked those who had so generously contributed to the entertainment of members

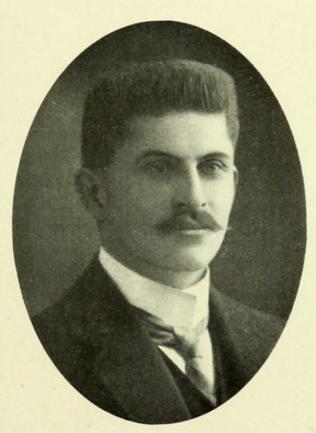
of the Jubilee, especially the wives of members of the Faculty, the women graduates and undergraduates, and the President and members of the Melbourne Medical Association. The University Registrar and his staff, and all the employés of the University had been most helpful. Special thanks were due to the Press for kindly notices in advance, and for excellent reports of the proceedings. Thanks therefore, in unstinted measure, to all who have helped us; and so "Good-bye to our Jubilee; God speed the School in the years to come."



C. A. ALTMANN, M.B., B.S. President.



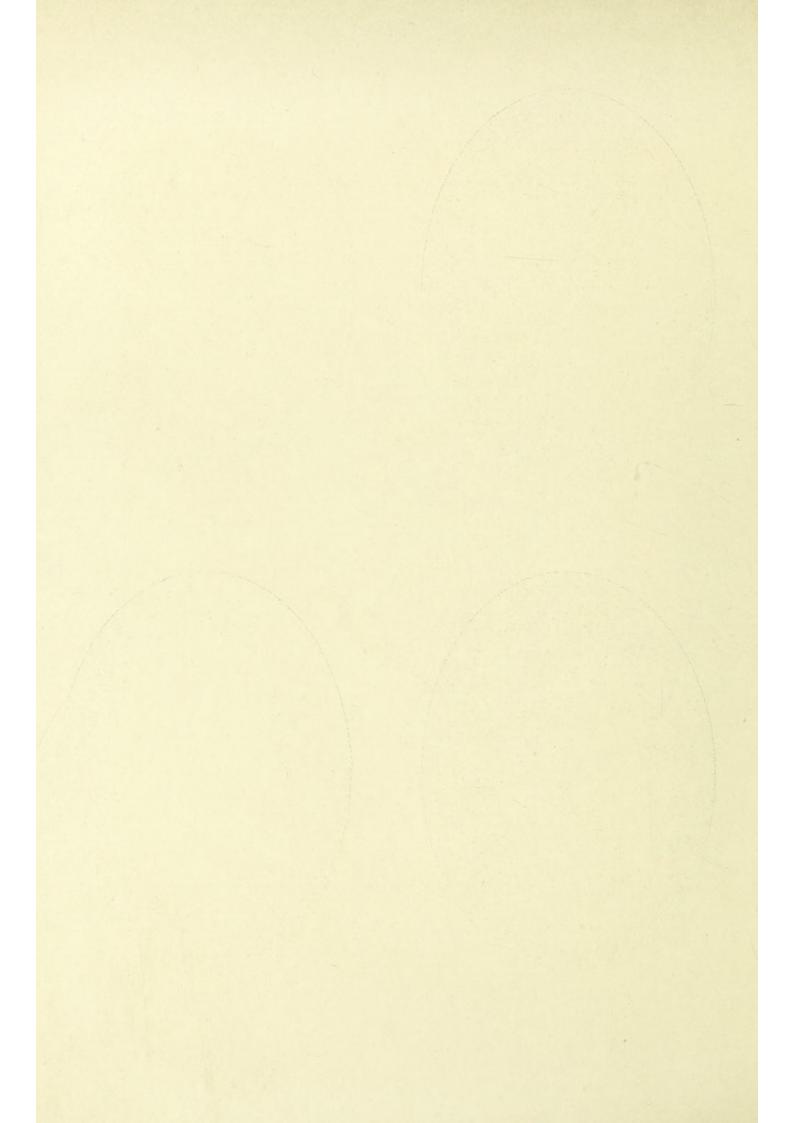
STANLEY S. ARGYLE, M.B., B.S. Hon. Treasurer.



KONRAD HILLER, M.D., B.S. Hon. Secretary.



H. Douglas Stephens, M.D., M.S. Hon. Secretary.



UNIVERSITY OF MELBOURNE. FACULTY OF MEDICINE.

ROLL OF GRADUATES.

(Abbreviations .- a.e.g. = ad eundem gradum; S.R. = Under Special Regulations.)

BACHELORS OF MEDICINE.

- 1862.—George Graham (S.R.), Lawrence Joseph Martin (S.R.), Charles McCarthy (S.R.).
- 1863.—Harry Leigh Atkinson (S.R.), Edward Barker (S.R.), Joseph Black (S.R.).
- 1864.—Gerald Henry Fetherston (S.R.), James Edward Neild (S.R.).
- 1865 .- George Bull a.e.g.
- 1867.—John Fulton a.e.g., Edmond Kelly a.e.g., Patrick Moloney, William Carey Rees.
- 1868.—Francis Long, Henry Widenham Maunsell a.e.g., William McCrea a.e.g., Octavius Vernon Lawrence.
- 1869.-Thomas Ramsden Ashworth.
- 1871 .- William Smith a.e.g.
- 1872-73.—George Annand, John Drummond Kirkland, Augustus John Richard Lewellin, John Walter Phillips.
- 1873-74.—William Holdsworth MacFarlane, Sylvanus James Magarey, John Johnson, George Thomas Teague, David William Balfour Wilkie.
- 1874-75.- James Cox, Benjamin Poulton.
- 1875-76.—Harry Brookes Allen, Edward Hamilton Blair Barker, George Haley, William Edward Le Fanu Hearn, Edward Bonaventure Heffernan, Thomas Rowan, William Snowball.
- 1876-77.—John Patrick Fitzgerald, Thomas Augustine Garlick, Frank Haley, John Alexander Kennison, Angus Munro.
- 1877-78.—John Henry Browning, George Le Fevre a.e.g., Alexander Murray, Charles Henry Scott, Richard Sides, Robert A. Stirling.
- 1878-79.—Peter Bruce Bennie, James Galbraith a.e.g., Charles Snodgrass Ryan a.e.g., John Rae Menzies Thomson, Henry Simpson Wood.
- 1879-80.—William Armstrong, Henry Louis Harris, Thomas Ross Lewers, Fossey James Newman, Henry Augustus Samson, John William Springthorpe, John David Thomas, Charles John Trood, John Arthur Cromwell Welchman, Stanislaus Emil Antony Zichy-Woinarski.
- 1880-81.—John Burder Backhouse, Anthony Colling Brownless junr., William Henry Coutie, Francis Hudson Eastwood, Henry Friedman, Richard Richards Harvey, Samuel Ormsby Higgins, William Henry De Burgh Hocter, Archibald Martin Macfarlane, Felix Henry Meyer, Robert Stewart, Alexander Sutherland, Thomas Rupert Henry Willis.
- 1881-82.—Eugene Wilton Anderson, Charles Bage, James William Barrett, Ernest Sandford Jackson, Thomas Loughrey, William Walter McGuire, John Nelson Mullen, Timothy Bernard Ryan, George Adlington Syme.

1882-83.—Frederic Dougan Bird, James Eadie, Herbert Augustus Embling, James William Florance, John Wesley Harbison, Charles Henry William Hardy, Charles Hedley, Arthur Vincent Henderson, Charles Louis McCarthy, William Francis Miller, John Park Montgomery, William Moore, Frederick James Owen, George Palmer, Robert Richard Rimington, William Robertson, Martin Joseph Ryan, Arthur Edward Salter, Gustave Henry Stephen Zichy-Woinarski.

1883-84.—Alexander Smith Aitchison, Roderick Aitchison, Charles August Altmann, William Henry Cutts junr., Arthur Augustus Fletcher, Melrose Mailer, Ernest Knight Overend, Charles William Pardey,

Charles James Shields, John Steel, John Cam Wight.

1884-85.—George Rothwell Wilson Adam a.e.g., Lewis John Birch, William Joshua Bird, George Horne, Alexander Sydney Joske, Charles George Kent, Harry Findlay Main, Crawford Henry Mollison, William Patrick Murphy, Nicholas Michael O'Donnell, James McImery Pardey, Edward Ryan, Noel Crawford Atterbury Vance, Alfred Purdue Vaughan.

1885-86.—James Amess, William Andrews, Edwin Jeffery Bird, Francis Cole, William Christian Daish, George Thomas Howard, Augustus Leo Kenny, Charles Timon Lane, John Francis McAllister, Charles Henry Molloy, Francis Armand Nyulasy, William Chisholm Ross, Reginald George Ruddle, Harry Robert Salmon, Reginald Edward Weigall, John Francis Wilkinson, Arthur Jeffreys Wood, William Atkinson Wood.

- 1886-87.—Alfred Victor Millard Anderson, William Robert Boyd, John Henry Carney, Henry O'Brien Deck, Hugh Alexander Deravin, Carl Peter Wilhelm Dyring, George James Archibald Billing Halford, Thomas Hodgson, William Kilpatrick, Robert James Loosli, Martin Magill, John Frederick William Manson, William Lowell Mullen, Albert Alexander Parry, George Campbell Rennie, Edward Emerson Rosenblum, Charles Donald Russell, Thomas Francis Ryan, Charles Yaldwyn Shuter a.e.g., James Service Thomson, Arthur Mackenzie Wilkinson.
- 1887-88.—Joseph Francis Bartley, George Lawaluk Bell, Henry William Cardiff,
 Frank Hobill Cole, Joseph Cookson, Walter Joseph Craig, Frank Smith
 Crowther, John Herbert Evans, Charles Edwin Goodall, Horace
 Frederick Hayes, Godfrey Howitt junr., Thomas Edwin Ick, Fred. D.
 Jermyn, Percy H. Liddle, Daniel Florance MacGillicuddy, Conway
 Montgomery MacKnight, James Frederick Merrillees, Joseph John
 Miller, William Joseph Alleine Moss, Lionel Francis Praagst, Richard
 Rawdon Stawell, Charles Stanford Sutton, Johnstone Simon Thwaites.

1888-89.—John Chalmers Baird, Arthur Gideon Hugh Colquhoun, Gerald Eugene Cussen, Francis John Drake, Edward Henry Embley, Patrick James Flanagan, Edward Leslie Gault, Charles de Wolfe Heard a.e.g., Charles Herbert Hill, Robert Wilson Hughston, William Howard James, Thomas John Moore Kennedy, Francis Henry Langlands, Richardson Wakefield Lewers, Edward Alan Mackay, George Frederick McWilliams, Thomas Murphy, William Perrin Norris, James F. Rudall, Charles Seal, Francis Edward Webb.

1889-90.—John Edward Barrett, Alexander Bruce Bennie, Albert Otto Bobardt, William Isaac Boyes, Walter Hansford Bracewell, Thomas Cherry, George William Damman, John Raymond Fox, Edmund Joseph Gleeson, Patrick Francis Gleeson, William Jens Gregerson, Emil Gutheil, John Thomas Harvey a.e.g., Walter Thomas Harse, Walter

Herbert Jermyn, Alfred Fleming Joyce, Richard Augustus Aloysius Manly, Horatio Percy Martell, John Michie, Charles Albert Müller, Frank Montgomerie Peebles, John Quilter, George Owen Rigby, John Harry Saunders, John Melby Scott, Robert Glen Vickery, James

Ramsay Webb, James Purves White.

1890-91.—Stanley Seymour Argyle, Thomas Hugh Boyd, John Thomas Robert Cook, John Henry Joseph Crowley, Leslie Davies, Joseph Milton Damer-Drew, John Flynn, Horace Percy Godfrey, John Richards Harris, Arthur Machen Hill, Edgar Holcroft, William Waugh Hope, Robert Henry Jones, Caleb Joyce, Matthew Lang, John Gilbert McKay, Garnet Soilleux.

1891-92.—James Abernethy, George Armstrong, Edward Brookes, Robert Andrew Buntine, Edward Champion, Ernest Alfred Deravin, Paul Ward Farmer, John Gordon, John Leslie Henderson, William Fleming Hopkins, Robert Alexander Horne, William Kenny, John James Kitchen, David Henry Edward Lines, William Lowe, William David Kerr MacGillivray, George Gray Nicholls, William Wilkinson Boothroyd Pinniger, William Henry Rigby, Patrick Joseph Aloysius Rockett, Ernest Edward Robert Sawrey, Richard Ernest Shuter, James Henry Sleeman, Albert Edward Sprod, Grace Clara Stone, Margaret Whyte.

1892-93.—Stuart Letcher Angwin, George William Armstrong, Edgar Alfred Barrett, John Box, Ralph Charles Brown, Thomas William Brown, William Thomas Chenhall, Egbert John Connell, Alfred Cowen, William Edward Davies, William Davies, Julian Gilbert Desailly, David Thomas Harbison, John Alison Hawkes, Mathew Francis Kelly, Frank Ernest Littlewood, William John Long, Martin Moylan Lyons, James Charles Morton, David Murray Morton, David Murdoch, Elizabeth Alice Maude O'Hara, Joseph Charles Pabst, Charles Richard Player, Hannah Mary Helen Sexton, Edward Alfred Strahan, Gerald Carl Weigall, Thomas

1893-94.—Frederick Charles Acton, Lilian Helen Alexander, Robert Hodgson Anderson, Charles James Alsop, Louis Naish Ashworth, Marie Elizabeth Amy Castilla, Frederick Waltham Dickins, Patrick Paul Dowling, Frederick John Gawne, Wilfred Kent Hughes a.e.g., Alfred Herbert Horsfall, James Kennedy Jackson, Thomas James William Kenny, George Joseph Ley, Frank Cole Madden, John Ruddock Mouritz, David McMaster Officer, John Ramsay, Stanley James Docker Read, Llewellyn William Roberts, Charles Joseph Sabelberg, Herbert Spence, Emily Mary Page Stone, Robert Henry Strong, Ernest Robinson Sutton.

1894-95.—Alfred Austin Brown, George Harward Brown, Arthur Waldo Connelly, Joseph Cunning, Edwin Zerubabel Davies, Ernest Arthur Dombrain, William Alexander Forsyth, Colin Gray, Thomas Ernest Green, Arthur Charles Frederick Halford, William Weston Hearne, John Daniel Hurst, Stanley Connebee Jamieson, Glen Alburn Knight, Bernard Loughrey, Oscar Rudolfe Percy Müller, Francis Alexander Newman, Annie Genevieve O'Hara, William Francis Orr, Robert Henry Ritchie, Richard Napoleon Francis Rockett, Alexander George Salter, Herbert George Tymms, Grace Vale, William Booker Vance, Alfred Ernest Walsh, Arthur Bridges Webb, Howard Gladstone Williams.

1895-96.—William Lewis Aitken, Thomas Lynewolde Anderson, Charles William Bruce, Alfred Nicholas Chenhall, Charles Christie, William Kelynack

Dale, Edward Wilkinson Deane, George Ernest Dennis, Arthur Edward Blackett Forster, Aelfreda Hilda Gamble, James Morison Gardiner, Edward Alfred Graham, Jane Stocks Greig, Janet Lindsay Greig, Gustave Alfred Hagenauer, Ida Gertrude Margaret Halley, Frank Julius Edward Juttner, Herbert Richard Letcher, Harold Lister, Ernest Thorburn Macgowan, Murdoch MacKenzie, Roland Maclean, Emily Bertha Main, William Alexander Morton, Douglas Oakley White, George Vincent White.

1896-97.—Lewis John Balfour, Richard Joseph Bull, William Watkin Winne Chaplin, Cornelius George Crowley, William Henry Donaldson, Mary Elizabeth Diggle Fletcher, James Charles Kennedy, Archibald Albert Love, Robert Augustus Meek, Edward Albert Officer, Alexander Park a.e.g., Warren Parsons, Charles Perry, William Ostermeyer, John Daniel King Scott, William Ernest Williams, Robert Neville Woodside.

- 1897-98.—Edwin Marston Allester, George Hugh Spencer Blackburne, Frederick John Chapple, Donald Arthur Campbell, Ethel Mary Vaughan Cowan, Wyatt Bristow Docker, Francis John Douglas, Henry Francis Herbert Elvins, Harold Maund Evans, Albert Ernest Ffrost, Arthur Palmer Henzell, William Beaumont Heyward, William Arthur James, Simon Joel, Edward Angus Johnson, Henry Laurie, John Robert Lee, James Robert Loughnan, Andrew Hardie Mackenzie, Francis Hedley Masters, Arthur Gerald McGowan, Robert George McPhee, Gertrude Ella Mead, Vivian Bernard Orr, Mathias Michael Perl, Albert John William Philpott, Violet May Plummer, Allan Elliott Randell, Reuben Laman Rosenfield, Douglas Andrew Shields, Oswald Clive Graeme Shields, Thomas Walker Sinclair, Harold South, Henry Riddell Stanley, Percy Bloomfield Stewart, Godfrey Unwin Taylor, Alfred Charles William Yelland.
- 1898-99.—Harold Vincent Bennett, Frederick Stanley Butler, Claude Tidswell Cooper, Constance Ellis, Edward Feilchenfeld, Christina Love Goode, George Myer Hains, Edwin Theophilus Jesse Ick, Basil Kilvington, William Colin MacKenzie, Michael Stanislaus McSweeney, John Hodgson Nattrass, William Henry Orchard, George Daniel Praagst, Julian Augustus Romaine Smith, Edward Augustus Spowers, William Ambrose Spring, Frederick Michael Thomas, James Thompson.
- 1899-1900.—David Duncan Cade, Harold Robert Catford, Henry George Chapman, Arthur Francis Deravin, Claude Fulton Hodgkinson, Joseph Thomas Hollow, James Herbert Ingham, Tracy Russell Inglis, Daniel Kelly, Patrick Henry Lang, James Edward Fancourt McDonald, John Clark Muir, John Thomas Murphy, Arthur Geoffrey Owen, Herbert Appleton Palmer, Philip Timothy Putman, James Riddell, Herbert Henry Ernest Russell, Walter Monckton Sanders, Herbert Frank Shorney, George Francis Sleeman, Henry Douglas Stephens, Charles Franklin Garcia Webster, Edgar Ernest Webster, Alfred Edward Rowden White, Charles Ernest Cameron Wilson, Robert Charles Withington, John Sandison Yule, Bernard Traugott Zwar, Hermann Zwar.

Barnard, James Morehead Baxter, Francis Josiah Bonnin, Edward William Buckley, John Costelloe, Bertram Crellin, Thomas Mitchell Drew, Henry Harper Formby, Leslie Thomson Gillespie, Wesley Rainsford Groves, George Craig Harper, Thomas Edwin Llewellyn Lambert, Oliver Leitch, James Brook Lewis, James Perrins Major,

Frank Humphrey Makin, Donald McLean, John Barr McLean, Thomas Alexander McLean, Lindsay Stevens Miller, James Alexander David Nish, Jacob Rosenthal, Percy Moira Shackell, Samuel Grenville Skewes, Septimus George Strahan, Harold Oscar Teague, Waldemar Harold Ulbrick, Gerald Walsh, Elizabeth Eleanor Weld, Charles Emanuel Williams.

Brown, James Calhoun, James Bennett, Percy Arthur Bona, Edgar Jabez Brown, James Calhoun, James Douglas Cooke, Warren James Fearnley, William Joseph Forshaw, Henry Gilbert, James Frederick Harris, Hermann Herlitz, Konrad Hiller, Horace Iles Holmes, William Nichols Horsfall, William Spalding Laurie, Ferguson Augustus Lemon, John Fullarton Mackeddie, John Forbes Cock Mackenzie, Charles Edward Marsden, Richard Alfred O'Brien, William Laurence O'Connor, Herbert Reginald Pitt, Ernest Horatio Rigby, Annie Susan Robertson, Helen Shaw, Effie Stillwell, Frances Snow, Samuel William Henry Summons, William George Herbert Tregear, Antonio Joseph James Triado.

1902-03.—Mary Baldwin, Hubert Sheppard Bush, Thomas Carlyle Leichardt Camm, John Howard Lidgett Cumpston, Wilfrid Norman Davies, Albert Degenhardt, Charles Edgar Dennis, Walter Eugene Deravin, Stewart William Ferguson, Charles William Henry Fleming, William Campbell Grindrod, Henry Talbot Hamilton, Reginald Howden, Edgar Victor Roy Huckell, James Patrick Kelly, William Ryton Kelly, Mark Cowley Lidwill, Roland Maston Lane, Charles Maxwell, Luther Morris, Matthew Kasner Moss, Charles Joseph Oliver, Owen Herbert Peters, Allen William David Robertson, John Patrick Spring, Bertram Milne Sutherland, Harvey Sutton, Denis Byrne Walshe, Albert Antliff Weir.

- 1903-04.—Frank Carl Frederic Andrew, Albert Edward Kemp Bishop, Edmund Holloway Booth, William Francis Stamp Bottomley, Percy Gore Brett, Charles James Brown, Arthur James Cahill, Archibald Brown Campbell, Francis Lethieullier Davies, Constantine Trent Champion De Crespigny, Michael Henry Downey, Thomas Peel Dunhill, Herbert William Fankhauser, Wiley Drummond Ferguson, Bryan Foster, Frederick Arthur Horace Gibson, William Green, Robert Gartly Healy, Harold Alfred Cardale Irving, Benjamin Joel, Thomas Campbell Ker, William Alexander Tear Lind, Maurice Edmund Lynch, David William Hartnell Mackie, Arthur Edward Morris, John Newman Morris, Arthur Norman McArthur, John Adrian Newell, John Andrew Angwin Rail, Frederick Arthur Rodway, Thomas Gordon Ross, Benjamin Sleeman, Walter Ernest Summons, Roderick Tate Sutherland a.e.g., George Sutton, Cecil Finn Tucker, Albert Wallace Weihen, Francis Aldersley Wood.
- Darby, Mary Clementina De Garis, Robert Leslie Forsyth, Harold Vernon Foxton, Howard Cecil Fulford, Ada Isabella Valentine Griffiths, Clive Harcourt, Douglas Dunbar Jamieson, Arthur Wellesley Homan Langley, Percy Vance Langmore a.e.g., Leslie Scott Latham, Frank Robert Legge, Henry Gerald Loughran, Archibald MacDonald, John Thomas Matthews, William Caldwell McLelland, David Mendelsohn, George William Parramore, Sydney Wentworth Patterson, Balcombe Quick, Andrew Stuart Robertson, Harrie Leslie Hugo Schultze, John Warburton Shields, Robert Edgecumbe Short, Alfred Herbert Swindley, Henry Hume Turnbull, William Charles Blackley Turner, Adela Williams.

Mabel Gertrude Sutton Crutchfield, Paul Greig Dane, Hugh Rennie Duncan, Mary Eleanor Edelsten, Norman James Gerrard, Claude Greer, Alfred Edwin Harker, Herbert Maunsell Hewlett, Leslie Stuart Kidd, Francis Ernest Langley, John Howard Leon, Charles Vincent Mackay, Jeremiah James Maloney, Gordon Clunes McKay Mathison, Mortimer Durnford Nesbitt, Ralph Daniel O'Leary, Sidney Frederick Ridley, Ernest Robertson, John Semple, Sidney Valentine Sewell, Clive Shields, William Edward Tulloch, Henry Hale Vogler, Harry Greately Wadelton, Albert Weigall, Roland Ravenscroft Wettenhall, Isabella

Wilkinson, Hugh Campbell Wilson.

John Catarinich, James Iver McIver Chirnside, Muriel Kate Davies, Garnet Wesley Deravin, Hugh Berchmans Devine, John Webster Dunhill, George Williams Foster, Hubert Baldwin Gill, Joseph James Lloyd Gill, Ethel Good, Mary Anketell Henderson, Ellen Elizabeth Henry, Thomas Stawell Hutchings, Margaret Jamieson, Oswald Joynt, Mark Aloysius Ley, Frank Harold Looney, Alfred Fay Maclure, Charles Inglis McLaren, Robert Galloway McLay, Alice Mary McLean, Douglas Murray McWhae, Edward Percy Oldham, Archelaus James Opie, John Ignatius Parer, Gordon Andrew Paton, George Leslie Perry, Montefiore David Silberberg, James Francis Spring, Viva St. George Sproule, Herbert William Sweetnam, John Ward, Royle Newton Wawn, Laura Weir, Edward Rowden White, Norman Leslie Galloway Wilson, Andrew Stewart Young.

Arthur Albert Crooke, Maud Dodgson, Rupert Major Downes, Harold David Downing, Richard Henry Ebsworth, Otto Albert Feilchenfeld, Frederick Allen Ferris, Robert Norman Scott Good, Herbert John Gray, Mervyn John Holmes, John Kennedy, Joseph Love, Crawford Clelland Marshall, John Joseph McMahon, William Horner Nelson, Charles Leslie Park, Samuel Henry Phillips, Dudley Denham Pinnock, Frank William Augustus Ponsford, Wilton Henry Francis Rail, Christopher Paul Rowan, John Hemphill Rutter, Charles Gordon Shaw, John Grantley Vincent Shelton, John Arthur Hopkins Sherwin, Lancelot Osbert Sleeman, Carl Vivian Stephens, Charles George Thompson, Frank Tipping, Alfred John Trinca, Inman Way, William Edgar

Wilson, Lindsay Page Winterbotham.

Burleigh Bell, Sibyl Caridwen Bevan, Andrew Joseph Brenan, Edward Thomas Brennan, Cyril Lowther Clarke, Elizabeth Emily Clucas, Frank Elton Cox, William George Henry Cuscaden, Charles John Daniel, Maurice Charles Davies, John Reginald Davis, Robert Leslie Gough Elcoate, Henry Newark Featonby, Paul Louis Florance, Mark Clayson Gardner, Ethel May Hawkins, Charles Edgar King, Gilbert Lamble, Alice Muriel Lavarack, George Leonard Lillies, Philip Alan Maplestone, Leonard John Cole Mitchell, Arthur William Morgan, Reginald Lonsdale Morton, Arthur Youl Nankivell, John Aloysius O'Brien, Reginald Bishop Perrins, William Lockyer Potter, Christina Hamilton Reid, William Bernard Ryan, Algernon Claude Herbert Salter, Richard Salts, William Clifford Sangster, Frank Victor Gordon Scholes, Norman Lennox Speirs, Maldwyn Leslie Williams.

1909-10.- John Kellermann Adey, Arthur Francis Bell, James Jamieson Black, Vernon Leopold Bowman, Duncan Buchanan, Samuel Roy Burston, Harry Nairn Butler, John Charles Campbell, Stanley Jacob Cantor, Thomas Oswald Chenoweth, Basil Walter Cohen, Keith Gemmell Colquhoun, Henry Cordner, James Chambers Craig, Stuart Patrick Croom, Valentine Francis Crowe, James Fairburn Fairley, James Gerald Roy Felstead, Robert Fowler, Hilda Adella Greenshields, Robert Percival Hodgson, John Patrick Horgan, Thomas Ernest Victor Hurley, Morris Jacobs, Isaac Jones, Peter Anthony Richard Lalor, Arthur Theodore Langley, Robert Dillon Lemon, Frank Beauchamp Martin, Sydney Fancourt McDonald, Arthur Andrean McKay, Cletus McShane, Albert Guy Miller, Edward Thomas Campbell Milligan, Hibbert Alan Stephen Newton, Richard Francis O'Sullivan, Thomas Roberts, Robert Affleck Robertson, Matthew Edward Robinson, Arthur Eustace South, Elsie Lillian Thomas, William George Dismore Upjohn, George Henry Wickens, John Smythe Yule.

1910-11.-William Norman Abbott, Charles Norman Atkins, George Atkinson, Edward Dennis Ahern, Donald Bennett, Francis Lawrence Bignell, Dougan Bird, Walter Freeman Brownell, Gertrude Clemes Buzzard, Sydney James Campbell, Mylles Wyamarus Cave, Leslie Jack Clendinnen, Horatio Victor Patrick Conrick, Edward Rae Cordner, Kenneth Stuart Cross, William Edward Lodewyk Hamilton Crowther, David Moore Embleton, William Angus Frazer, Wade Shenton Garnett, William James Garfield Gilbert, Mary Glowrey, Alexander McGregor Grant, Rachel Henrietta Gross, Thomas Francis Hayes, Edward Bonaventure Heffernan, Neil Raoul Henderson, Judah Leon Jona, Francis Esmond Keane, George Norman Lorimer, Robert Allan Gordon Malcolm, Philip Matenson, Margaret Harkness McLorinan, Charles George Gordon Moodie, Ethel Remfry Morris, Sydney John Newing, Thomas Patrick Noonan, Gerald Patrick O'Day, Philip Aloysius Parer, James Ernest Piper, Martin William Ratz, Benjamin Robert Richards, Henry Rogerson, David Rosenberg, James Ignatius Rowan, William Campbell Sawers, Adolph Henry Seelenmeyer, James Lee Selwood, Percy Gerald Shelton, Francis John Short, Colman Silbermann, Isaac Judah Silbermann, William George Southey, Edward Ernest Joseph Spring, Elizabeth Mary Sweet, Athol Stanley Mortimer Tymms, Edwin Tyrie, Arthur Moorhouse Watkins, Herbert Henry Woollard, Alan Neil Yuille.

Algernon Andrews, Jonathan Percy Moss Black, Henty de Courcy Browning, Francis John Burns, Colin Campbell, Roy William Chambers, Wendell Inglis Clark, Michael Joseph Costelloe, Joseph Ivan Cowan, John Hamilton Crawford, Robert Melville Crookston, Lionel Braim Daly, Leonard Darby, William John Denehy, Robert Oliver Douglas, Ambrose Hedley Dunstan, Clive Menzies Eadie, Thomas Roy Edmeades, Arthur James McKenzie Fargie, Joseph Patrick Fogarty, Thomas Edwin George, Frank Llewellyn Gill, Alexander Goldstein, Augustus Ian Green, Harry Franklyn Green, David Peter Greenham, Frederick William Grützner, Oliver Keith Hartridge, James Cameron Hemsley, Albert Henry Aloysius Hughes, Alan Syme Johnson, Jacob Jona, Charles Halliley Kellaway, Harrie Bertie Lee, George Alexander Douglas McArthur, Alan Bothwell

McCutcheon, William Walter McLaren, Hugh William Fancourt Mitchell, John Wyndham Morgan, James Joachim Nicholas, James Finlay Patrick, Arthur Hunter Powell, Margaret Helen Urquhart Robertson, Cedric Watson Gray Roche, Ernest Spargo, Francis William Stone, Ernest Weston Sutcliffe, John Thomson Tait, Norman Charles Talbot, Clifton Eric Tucker, Frank Leslie Utber, Reginald Webster, Raymond Stanley Whitford, Henry James Williams, Jack

Rupert Law Willis, Arthur Mitchell Wilson.

1913.-Kenneth George McKay Aberdeen, Arthur Stanley Addison, Francis Teulon Beamish, Hilda Wager Bull, John Norman Bullen, Reginald Morley Clarke, George Edward Cole, Roydon Herbert Minton Connell, Leonard Roy Cook, Francis Bartlett Crawford, Louis Pierre Urbain Crivelli, Arthur Augustus Crooks, Joseph Horace Downing, Leo Doyle, Robert Agnew Eakin, John Fleming, Herbert Shine Forrest, Henry Charles Graham, John Gray, Justinian Valentine Griffith, Harley Grover, Eric Wilkins Gutteridge, Malcolm Talbot Hamilton, Albert Valdemar Roy Hansen, Edwin Archibald Holland, Andrew Victor Honman, Hugh Bowen James, Frank Robison Kerr, Leonard Cyril Lade, Frederick Donald Herbert Blois Lawton, Charles Herbert Leedman, Hugh Bunnett Lewers, Percy Oswald Lord, Samuel Percival Lyttle, Norman John Mackay, Frampton Garnsey Meade, Claude Morlet, Jack Morlet, Francis Lyth Nance, Leo Augustine Neal, John Joseph O'Neill, Michael Brendan O'Sullivan, FitzWalter Maurice Read, Olive Murray Rivett, William Lincoln Robertson, Edward Rogerson, Raymond William Ryan, James Alexander Smeal, Marcus Vicars Southey, Percy Alexander Stevens, Roy Fallowes Watson, John Wilkie Young.

BACHELORS OF SURGERY.

All Bachelors of Medicine, subject to very few exceptions, either have received, or are entitled to receive the Degree of Bachelor of Surgery.

DOCTORS OF MEDICINE.

1856.—Anthony Colling Brownless a.e.g.

John Maund a.e.g., John Macadam a.e.g., John Macfarlane a.e.g., John Maund a.e.g., James Bridgeham Motherwell a.e.g., John Thomson a.e.g., Daniel Joseph Tierney a.e.g., Richard Thomas Tracy a.e.g.

1858.—Andrew Cairneross Livingston a.e.g., William Mackie Turnbull a.e.g.

1859 .- Adolphus Robert Berndt a.e.g., William Henry Cutts a.e.g.

1860.—George Sackville Cotter Butler a.e.g., Robert Fawell Hudson a.e.g.

1862.—Samuel Dougan Bird a.e.g., George Graham (S.R.), Lawrence Joseph Martin (S.R.), Charles McCarthy (S.R.), David John Thomas a.e.g.

1863.—Harry Leigh Atkinson (S.R.), Edward Barker (S.R.), Joseph Black (S.R.), Jacob Selig Caro a.e.g., William Crambe a.e.g., George Crosland a.e.g., George Britton Halford a.e.g., James Sutherland a.e.g.

1864.—Thomas Thomson Dick a.e.g., Gerald Henry Fetherston (S.R.), James Robert Gillespie a.e.g., Hermann Jonasson a.e.g., Bernhard Lilienfeld a.e.g., Joseph Mackenzie a.e.g., James Edward Neild (S.R.), Daniel Grant Robertson a.e.g., Robert Talbot a.e.g.

- 1865.—Alexander Stuart Peterson a.e.g., Antony George Hayden Starke a.e.g., William Turner a.e.g.
- 1866 .- Walter Lindsay Richardson a.e.g., David Elliot Wilkie a.e.g.
- 1867.—William Leslie Gordon a.e.g., John William Hadden a.e.g., Charles Henry Hardy a.e.g., Edward Hunt a.e.g., James Thomas Brudenell Laurie a.e.g., James Alexander Martin a.e.g., Antoine Moussé a.e.g., Andrew Plummer a.e.g., George Owen Rigby a.e.g., Alexander Robertson a.e.g., William Henry Semple a.e.g.
- 1868.-James Jackson a.e.g., Thomas John Sturt a.e.g., John Singleton a.e.g.
- 1869.-John Day a.e.g., John Fulton a.e.g., Ernest Magnus Wuth a.e.g.
- 1870 .- Daniel Curdie a.e.g.
- 1871.-Octavius Vernon Lawrence, Charles Smith a.e.g.
- 1872.—George Addison a.e.g., Edwin Hinchcliff a.e.g., William Horsfall Hinchcliff a.e.g., William Carey Rees.
- 1873.-Robert Tassell a.e.g.
- 1875 .- George Annand.
- 1876.-Walter Balls-Headley a.e.g., John Williams a.e.g.
- 1878.-Harry Brookes Allen, James Jamieson a.e.g.
- 1879.- James Galbraith a.e.g., James George Beaney a.e.g.
- 1880.-John Henry Browning, James Cox, Edward Bonaventure Heffernan.
- 1881.-Joseph Whitaker a.e.g.
- 1882.—William Armstrong, Thomas Rowan a.e.g., John David Thomas, William Butler Walsh a.e.g., David John Williams a.e.g.
- 1883 .- John Blair a.e.g., George Le Fevre, Jeremiah McKenna a.e.g.
- 1884.—Charles Bage, Peter Bruce Bennie, Benjamin Clay Hutchinson a.e.g., Benjamin Poulton, John William Springthorpe.
- 1885.—James William Florance, William Moore, William Morrison a.e.g., Frederick James Owen.
- 1886.—Samuel Connor a.e.g., Patrick Doyle a.e.g., Edward Graham Ochiltree a.e.g., James Joseph Prendergast a.e.g., Robert Stewart, Henry C. Wigg a.e.g.
- 1887 .- James William Barrett, William Simpson Flett a.e.g,
- 1888.—Eugene Wilton Anderson, Harvey Eustace Astles a.e.g., William Christian Daish, Arthur Augustus Fletcher, David Grant a.e.g., Louis Henry a.e.g., George Thomas Howard, Sylvanus James Magarey, William Lowell Mullen, John Nicholson a.e.g., William Camac Wilkinson a.e.g.
- 1889.—William Andrews, Harold Knowles Bean a.e.g., Roland Herbert Joseph Fetherston a.e.g., Reginald George Ruddle, Arthur Jeffreys Wood.
- 1890.—Richard Rawdon Stawell, William Atkinson Wood.
- 1891.—James Boyd a.e.g., William Robert Boyd, Charles Maslen Dean a.e.g., Dan Astley Gresswell a.e.g., Frederick Miller Johnson a.e.g., James Richard MacInerney a.e.g., Henry Carr Maudsley a.e.g.
- 1892.—Alfred Victor Millard Anderson, John Francis McAllister, Charles Henry Molloy, William Perrin Norris.
- 1893 .- Thomas Cherry.
- 1895.—George James Archibald Billing Halford.
- 1897.—Hugh Boyd a.e.g., Joseph Charles Pabst.
- 1898.—Edward Buller Allan a.e.g., Arthur Gideon Hugh Colquhoun, Arthur Charles Frederick Halford, John Henry McGee a.e.g., John Kildahl Richards a.e.g.

1899.—Marcel Urbain Crivelli a.e.g., John Gordon, David Thomas Harbison, Thomas Butler Kerr a.e.g., David Murray Morton, David McMaster Officer, Ernest Edward Robert Sawrey, John Francis Wilkinson.

1900.-Robert Scott a.e.g., John Rae Menzies Thomson, Maximilian Eugen Wall

a.e.g.

1901.—Albert Otto Bobardt, Richard Joseph Bull, Edward Henry Embley, Alexander Sydney Joske, Basil Kilvington, Henry Laurie, William Colin Mackenzie, Thomas Murphy, Charles Richard Player, Douglas Andrew Shields, Thomas Walker Sinclair, Julian Augustus Romaine Smith, Thomas Rupert Henry Willis, William Cleaver Woods a.e.g.

1902.—George Rothwell Wilson Adam, Henry George Chapman, John Richards Harris, George Horne, Felix Meyer, Philip Timothy Putnam, Robert

Andrew Stirling, John Sandison Yule, Bernhard Traugott Zwar.

1903.—Francis Josiah Bonnin, William Thomas Chenhall, Constance Ellis, William Arthur James, Thomas Edwin Llewellyn Lambert, Henry Cairns Lloyd a.e.g., John Thomas Murphy, Arthur Geoffrey Owen, Herbert Frank Shorney, Richard Ernest Shuter, Edward Augustus Spowers, Henry Douglas Stephens, Charles Emmanuel Williams.

1904.—Thomas Lynewolde Anderson, Frank Hobill Cole, Arthur Palmer Henzell, Konrad Hiller, Horace Iles Holmes, Edgar Victor Roy Huckell, William Spalding Laurie, Frank Cole Madden, John Fullarton Mackeddie, Samuel William Henry Summons, Percy Samuel Webster a.e.g.

1905.—Hubert Sheppard Bush, Charles Edgar Dennis, Stewart William Ferguson, Wesley Rainsford Groves, James Frederick Harris, William Beaumont Heyward, Mark Cowley Lidwill, James Perrins Major, Harvey Sutton,

1906.—Frank Carl Frederic Andrew, Richard James Arthur Berry a.e.g., William Francis Stamp Bottomley, Robert Hodgson Cole a.e.g., Constantine Trent Champion de Crespigny, Thomas Peel Dunhill, Walter Thomas Harse, William Weston Hearne, Luther Morris, John Edward Nihill a.e.g., William Ostermeyer, Edward Francis O'Sullivan a.e.g., Arthur Renwick a.e.g., Edward Charles Stirling a.e.g., Thomas Peter Anderson Stuart a.e.g., Roderick Tate Sutherland, Albert Wallace Weihen, Alfred Edward Rowden White.

1907.—John Howard Lidgett Cumpston, Mary Clementina De Garis, Robert Leslie Forsyth, Leslie Scott Latham, Sydney Wentworth Patterson, Owen Herbert Peters, Walter Ernest Summons, Henry Hume Turnbull.

1908.-John William Dunbar Hooper a.e.g., John Robert Lee, Douglas Murray McWhae, Richard Alfred O'Brien, Robert George Reid a.e.g.

1909.—James Morehead Baxter, Paul Greig Dane, Howard Cecil Fulford, Thomas Stawell Hutchings, Glen Alburn Knight, Allen William David Robertson, Montefiore David Silberberg, James Francis Spring.

1910.—John Kennedy, Leslie Stuart Kidd, Charles Vincent MacKay, Alfred Fay Maclure, Charles Inglis McLaren, Francis Armand Nyulasy, Edward Percy Oldham, Sydney Valentine Sewell, Charles Gordon Shaw, Robert Edgecumbe Short, Carl Vivian Stephens, John Hodgson Nattrass, Alfred John Trinca.

Cuscaden, Rupert Major Downes, Charles Edgar King, Gilbert Lamble, Charles Edward Marsden, Gordon Clunes McKay Mathison, John Joseph McMahon, Reginald Herbert Morrison a.e.g., William Clifford Sangster, Hedley Barry Thomson a.e.g., Edward Rowden White, William Edgar Wilson.

Robert Fowler, Mark Clayson Gardner, Thomas Ernest Victor Hurley, Isaac Jones, George Leonard Lillies, Edward Thomas Campbell Milligan, James Ernest Piper, William Lockyer Potter, Sidney Frederick Ridley, Edward John Roberts, Frank Victor Gordon Scholes, William George Dismore Upjohn.

1913.—Keith Gemmell Colquhoun, Kenneth Stuart Cross, Judah Leon Jona, Charles Halliley Kellaway, Sydney Fancourt McDonald, James Joachim Nicholas, William Francis Orr, Cedric Watson Gray Roche, John Thomson Tait, Athol Stanley Mortimer Tymms, Reginald Webster,

Arthur Mitchell Wilson, Herbert Henry Woollard.

MASTERS OF SURGERY.

1885 .- William Moore.

1886.-Frederic Dougan Bird.

1888 .- James William Barrett, George Adlington Syme.

1891.—George Campbell Rennie.

1894.-Thomas Cherry.

1901.-William Atkinson Wood.

1902.-Basil Kilvington, John Ramsay.

1903 .- Edward Leslie Gault, John Gordon.

1904.-William Arthur James, Thomas Edwin Llewellyn Lambert, Thomas Murphy.

1905.-Henry Douglas Stephens.

1908.—Bernhard Traugott Zwar.

1912.-Rupert Major Downes, Hibbert Alan Stephen Newton.

1913 .-- William George Dismore Upjohn.

STATISTICS OF THE MEDICAL SCHOOL.

SHOWING NUMBER OF STUDENTS UNDER INSTRUCTION IN MEDICAL SCHOOL.

(a) Early Period up to First General Revision of Curriculum.

Year.				1xt Year Students calculated from Roll in Medical Chemistry.	2nd, 3rd, and 4th Years calculated from Roll in Dissections.	5th Year Students calculated from Roll in Forensic Medicine.	Total.	
1862	-	-	-	4		_	4	
1864	-	-	-	3 6	4	_	7	
1866	-	-	-	6	4	3	13	
1872	-	-	-	13	20	4		
1876	-	-	-	24	30	4	58	
1877	-	-	-	33	38	5	37 58 76	
1878	-	-	-	43	48	4	95	
1879	-	-	-	38	58	13	109	
1880	-		-	62	63	12	137	
1881		-	-	72	75	12	159	
1882	-	-	-	77	78	26	181	
1883	-	-	-	61	100	14	175	
1884	-	-	-	76	94	22	192	
1886	-	-	-				208	

16) Since	First	General	Revision	01	Curriculum.
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Year.	1st Year.	2nd Year.	3rd Year.	.4th Year.	5th Year.	Single Subjects.		Total.	
1887	83	35	39	21	27	2	7	232	
						Dissections only.	Others.		
1892	62	39	24	30	40	_	15	210	
1893	74	28	33	29	25	- 1	14	203	
1894	71	47	29	32	27	-	14	220	
1895	88	36	45	24	32	- 1	12	237	
1896	75	49	35	45	20	-	13	237	
1897	74	46	45	34	46	13	12	270	
1898	78	49	45	48	29	22	• 14	285	
1899	71	43	48	41	43	29	19	294	
1900	53	47	47	38	44	24	8	261	
1901	73	35	46	35	38	21	6	254	
1902	73	52	34	39	36	18	4	256	
1903	60	46	43	33	40	19	10	251	

Note.—This schedule does not include students presenting themselves for Examination without attendance on Lectures in consequence of ad eundum admission or failing to pass in the preceding year. The number of such students is small, never exceeding six.

Year.	1st Year.	2nd Year.	3rd Year.	4th Year.	5th Year.	Single Subjects.	Total
1904	62	52	48	36	37	46	281
1905	73	51	51	42	36	15	268
1906	78	50	57	40	47	13	285
1907	100	53	54	52	41	5	305
1908	IOI	59	61	48	54	4	327
1909	82	75	62	52	56	19	346
1910	103	60	79	55	58	9	364
1911	105	69	65	72	58	3 8	372
1912	113	60	79	58	70	8	388
1913	98	75	77	57	59	6	372
1914	116	66	99	48	58	7	394

