

The introductory address delivered in the Faculty of Medicine of University College London on Octobert 1, 1894 / by Herbert R. Spencer.

Contributors

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The
· **I**NTRODUCTORY · **A**DDRESS ·

Delivered in the

Faculty of Medicine of University College,

LONDON,

OCTOBER, 1894.

By

Herbert **R.** **S**pencer.

47. 2d

From the author



THE INTRODUCTORY ADDRESS

DELIVERED IN THE

Faculty of Medicine of University College,

London

ON OCTOBER 1, 1894

BY

HERBERT R. SPENCER, M.D., B.S.

Professor of Midwifery in the College

Obstetric Physician to the Hospital

London

JOHN BALE & SONS

87-89, GREAT TITCHFIELD STREET, OXFORD STREET, W.

1894



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GENTLEMEN,—This year it has fallen to my lot to deliver the introductory address, with which it is the annual custom at University College Hospital to commence the medical year. Our school is one of the few which remain conservative in this respect. As to the desirability of introductory addresses, there are at least two opinions. Some think that they serve no useful purpose, and should be discontinued. This is the view temporarily held by the man who has to give the address and, in a less degree, by those whose turn to do so has yet to come. That an introductory address is useful, is held by those who have already given it, that is, by our senior colleagues; this reminds me of the fable of the fox who, having lost his tail in a trap, tried hard to persuade his companions to submit to a similar mutilation. But our senior colleagues have this advantage over the fox in the fable, that they not only succeed in making the young fox part with his "tale," but also in enrolling him among the number of those who will recommend the practice to his successor next year. There must be something to be said in favour of a custom which in a short hour never fails to convert an opponent into an advocate.

In delivering an introductory address one halts between two impulses—the pleasurable one of welcoming, on behalf of the teachers, the new comers to our school, and the painful one of difficulty in finding anything new, or even interesting to say to you, and of saying it in suitable terms.

An introductory lecture for the purpose for which it was formerly given is now quite obsolete. By your teachers

and your text-books you will be instructed fully in the matters and methods of study, and if any information upon this subject be still required, it can always be obtained from the sub-dean.

If an introductory lecture were necessary for the purpose of preparing you for the medical profession, it would be better given to your parents and at an earlier stage of your careers. Had I to give advice to a parent who desired his son to enter the medical profession, I would strongly urge him to give his son an education in which science and modern languages form a considerable portion of his study.

His scientific studies at a good school will be so far advanced by the time he has reached the age of eighteen (which is quite early enough to commence a medical career), that he will be able to pass straight from school his examination in purely scientific subjects, and thus to devote the whole of his time, unfettered by the dread of impending examinations in those subjects, to his purely professional work. And as for modern languages, in knowledge of which Englishmen are so sadly deficient, it is impossible for a medical man to keep himself informed of the rapid advances which are being made in all branches of medicine without at least being able to read French and German.

Whether the boy has a reading knowledge of these foreign languages or not, he should at any rate have a good acquaintance with his own. I am sorry to say that this is not always the case. One occasionally hears a clinical clerk reading notes in a way which shows but an elementary acquaintance with his mother tongue. It is unfair to such a boy to enter him as a member of a learned—I would say, of *the* learned—profession, it is unfair to his profession, and it is unfair to the public. For this ill-

education—of fortunately a small proportion of medical students—the General Medical Council is mainly to blame, in not insisting upon a higher standard at the preliminary examinations. I should rejoice to see every student destined for the medical profession compelled to pass through some such portal as the matriculation examination of the University of London, and I believe that the high positions taken by students of this hospital have been largely due to the number of undergraduates of that University who are attracted to it.

If the General Medical Council will not perform its obvious duty in this respect, I think the medical examiners should take the matter into their own hands, and refuse to allow to pass into the ranks of a profession, which of all others requires a cultivated mind, a man who has not even the superficial appearances of culture. In addition to a good general education, a medical student should have a sound constitution of body, for medicine is such an arduous, engrossing and dangerous calling, that the physically weak go to the wall, perhaps sooner than in any other profession. If to a sound body and a cultivated mind, the student adds industry and (most essential of all) personal character, he may be confident of success in the work to which he is about to devote himself.

To all of you who are casting in your lot with University College Hospital I can extend my congratulations and a hearty welcome. Those of you who come from school laden with prizes may rest assured that intelligence and industry which have enabled you to obtain those prizes are essential to the successful practice of the medical profession, and those of you who have not achieved any great scholastic successes may be comforted by the thought that mere power of intellect is not the only factor in the success of medical men. With average intellectual powers and in-

dustry, a sound judgment, a sympathetic nature and high character, a very large measure of success may be obtained in medicine.

I need not urge upon University College students the necessity of hard work which has always been one of their traditional characteristics. Rather would I impress upon you the necessity of playing hard as well as working hard if you wish to keep that *mens sana in corpore sano* which is so necessary to the medical man.

It is to be hoped, therefore, that you will all join the University College Union Society, which offers special facilities for play, whereby you will cultivate that *esprit de corps*, which is one of the advantages of a collegiate education and, at the same time, form personal friendships, which are usually more durable than those of the class-room.

You are to be congratulated, gentlemen, in the first place, on joining the medical profession at the end of the nineteenth century. It is, perhaps, a natural inclination of the human mind to consider that the times in which we live are the most favoured, that the state of knowledge has in our time almost approached perfection, that there can hardly be anything else to learn. And if we look to the social and scientific advances which have been made during this century—to mention only those in printing, and steam-power, and electricity—we are justified in regarding this century as having made progress far greater than any or all which have preceded it, and in feeling thankful that we have been permitted to witness and enjoy these developments of modern civilisation instead of living in the so-called good old days, when learning was enslaved by authority and the place of science usurped by superstition.

The great modern developments of mechanical science have brought with them an increase in the comforts and amenities and luxuries of life, but they have not directly

contributed to the saving and prolongation of life. This is the high aim of medical science, which cannot justly be accused of having lagged behind in the race for knowledge; for within the last quarter of a century the most remarkable revolution has taken place in the practice of surgery, owing to the application of the antiseptic principle to the treatment of wounds. This great discovery, for which we are mainly indebted to the genius of one man, a former student of University College Hospital, is the outcome of the application of the experimental method to medical research, and might well serve as a warning to those persons who would prevent all experiment in medicine, but who are not above profiting by the information which it yields. The discovery of the antiseptic method has revolutionised surgery, has been the means of saving thousands of human lives and limbs and an immense amount of human suffering, has gone far in elevating our art into a science, and when the history of the nineteenth century is written will, I believe, prove to be its greatest achievement. You, gentlemen, who are now entering upon the study of medicine can have but little idea of the sadness and uncertainty that attended surgical operations a generation ago, when the simplest procedure was often followed by the most disastrous results, when immediate union of wounds was rarely met with, and a "good, healthy suppuration" was looked upon with admiration instead of, as now, with a feeling of disgrace.

The benefits of antiseptics have nowhere been more striking than in obstetric medicine, from which that dread terror, blood-poisoning, which used to carry off so many mothers in child-birth, would be almost completely banished if antiseptics were universally and efficiently employed.

If medicine has made no recent advance which can compare in beneficence with the application of antiseptics to surgery and obstetrics, she has made such strides in the sciences of pathology and bacteriology that diseases such as tubercle and cholera can now be diagnosed in the early stages with results of immeasurable importance to mankind, while experimental medicine has led to the exact localisation of intra-cranial lesions, hitherto impossible, and to many other benefits of which I need only mention the most recent triumph, the cure of myxœdema by the administration of thyroid extract, first carried out by a University College man.

There are some in our profession who complain that it does not receive due recognition from the State. I hope none of you will join in this petulant cry. It is true that we have not yet a minister of public health—an appointment which would be of higher value to the community at large than to the medical profession—that we have not yet had a medical peer, nor in this country a medical prince, that the excursions from our ranks into the domain of politics have been few. But the practice of the medical art is associated with higher honour than the garish glory of the hustings, and I believe that our politics may be safely entrusted to the medical journals, that any widespread mixing of individual medical men with politics would inevitably lead to personal advertisement, that we should have our honours conferred, not for any good done for humanity, but for the obsequiousness with which a party chief had been followed, and that such a method of conferring honours would lead to a lowering of our profession in the eyes of all thinking persons, whose good opinion only we should value.

The medical profession has never stood higher in the estimation of the intelligent public than at the present

time; and in support of this assertion I think I need only allude to some remarkable speeches recently delivered by the chiefs of the political parties in this country. Speaking at the Radcliffe Infirmary, at Oxford, last year, the Marquis of Salisbury said: "I always think that the science of medicine has scarcely received among us all the tribute that it ought to receive among the sciences which rest on observation. It is the most sober, the most absolute, the most positive among all the sciences. Again, there is no other science which is but another name for a work of mercy; there is no other science that is so closely linked with the relief of human suffering, as a remedy for human calamity in its most overwhelming form." And, in his recent presidential address before the British Association, he alluded to antiseptic surgery and the inoculation against anthrax and hydrophobia as "the great glory of the scientific workers of the past century." On May 3 of this year, speaking in eulogy of his departed physician and friend, Sir Andrew Clark, Mr. Gladstone said: "While such men remained it should not be said that the age of chivalry was past. He was old enough to have observed a change in the members of the medical profession, an increase in their capacity and attainment to deal with the almost insoluble problems which presented themselves to the physician." And he spoke of medicine as "that noble profession of which the past advance had been great, and the future advance would in all probability be still greater." These expressions coming from men of the highest intellectual power and character, and the widest experience of men and things, show that, whether or not medical men are neglected by the State, they are at least appreciated by the chief men of the State.

There are, however, some directions in which not only for the benefit of medical men, but for the safeguard of the

public I believe that legislation is urgently required. I would allude in the first place to the absence in this country of medical jurists whose duty it would be to investigate all cases of sudden and suspicious death. And in connection with this subject I would express my decided opinion in favour of coroners being chosen from the ranks of medical men. One frequently reads of the most astounding cases of sudden death in which a coroner without medical training decides that an inquest is unnecessary, when to a medical man there is an obvious possibility that the death has been due to foul play. Surely an inquest, which is an inquiry into the cause of death, is most properly made by one who by education and calling has an intimate acquaintance with disease and injuries, and with the knowledge, reputation and reliability of the medical witnesses upon whose evidence the result of the inquiry so much depends.

The amount of legal knowledge necessary for the conduct of such an inquiry is easily acquired, whereas the medical knowledge can only be obtained by extensive experience of practice, and is such as a lawyer cannot have opportunities of gaining. I think, therefore, that in all cases where the coroner belongs to the legal profession, in the interests of public safety there should be associated with him a medical referee of high standing to whom the medical questions involved could be referred.

But a danger far greater and more urgently needing redress is the practice of appointing any medical man (often the practitioner in attendance) to perform the autopsy, upon the result of which may depend the reputation or even the life of a human being. There are few hospital physicians or surgeons who would consider themselves competent to report upon a case of possible poisoning, which involves an acquaintance with the most intricate problems of chemical science, and yet a coroner often in-

structs a general practitioner, who, perhaps, has not seen a *post-mortem* examination for years, to conduct this difficult and important investigation.

The interests of public safety not less than the interests of science require that autopsies in the case of all sudden, unnatural and suspicious deaths should no longer be performed by any practitioner who may happen to be in attendance, but by expert pathologists and pathological chemists who should devote themselves entirely to the study of medical jurisprudence and be debarred from private practice. It would be necessary that they should be paid high salaries in order to obtain men of the highest ability and character. But this arrangement would not make such a call upon the public funds as might at first appear, inasmuch as the fees at present paid to medical witnesses would be saved. In any case the State cannot afford to be niggardly in matters of such supreme importance. How important they are has never been more strongly set forth in an official document than in the recently issued parliamentary report upon Certification of Death, which every thoughtful man should read. It is a highly entertaining blue-book with a serious, not to say grave interest, for the most part; but is not altogether wanting in elements of grim humour, as is shown by the following verdicts which were seriously brought in by coroners' juries. One stated that "the child died aged three months; but there was no evidence whether it had been born alive;" the other that "the man died of stone in the kidney, which he had swallowed when lying in a drunken state on a gravel path."

Another direction in which legislation is required, is in the total prohibition of unqualified practice. The lawyers are very strict in this matter, whereas the medical profession, which deals with interests not less important than the legal, can be practised by anyone, however

ignorant, without any legal restraint or risk of punishment, unless the patient dies, and very little then. Actually, medical men are less protected by law from unqualified practitioners than dental and veterinary surgeons. One of the most dangerous of the unqualified practitioners is the doctor who has had his name erased from the medical register for infamous conduct in a professional respect, but who still continues to carry on his practice, with the single disability that he cannot sign certificates of death. Surely it should be in the power of the authorities to take away the diploma of a man who has been guilty of such disgraceful conduct, and the exercise of this power would be a much more adequate punishment than the almost nominal one of erasing his name from the register.

There is one other subject to which I would, in passing, allude, viz., the treatment of the medical profession by a small portion of the public, which has recently accused doctors of experimenting on hospital patients. Such an accusation is a calumny, which so far as it affects the medical profession is beneath contempt, but to the suffering poor is inhumanly cruel, and by preventing those who are sufficiently ignorant to believe those charges from resorting to hospitals until too late for relief, may lead to an appalling loss of human life for which the unprincipled persons who disseminate such unfounded charges are morally responsible.

But, as, in spite of the drawbacks to which I have alluded, you are fortunate in joining the ranks of the medical profession at a time when thoughtful persons hold it in high esteem on account of the rapid progress and development which it has undergone, so you are to be congratulated upon having chosen, as the scene of your labours, University College, an institution which from its foundation until the present day has always stood in the

front rank of medical education in this country. I would especially like to direct your attention to some facts in connection with the work of University College Hospital.

Since our hospital was opened for the reception of patients, just sixty years ago, over 100,000 in-patients have been treated within its walls, more than a million and a quarter out-patients have been relieved, and 60,000 lying-in women have been delivered. It is as impossible for the mind to grasp figures of this magnitude as it is for the emotions to realise the pathos which underlies them; but they will give you some idea of the magnitude and beneficence of the work in which it has been engaged during its eventful life of sixty years. That work has gone on increasing until at the present day the hospital does a greater amount of work, in proportion to the number of its beds, than the hospital of any other medical school in London. But the hospital of a medical school has another and, in reality, a more important function than the care of the sick within its walls, viz., the training of medical students. In this respect University College Hospital has always stood second to none in this country. Not only in the honours taken by its students in examinations—the gold medal at the M.D. examination of the University of London has been taken eight times in the last ten years by University College men—but also in the appointments obtained by them upon the staffs of other hospitals is the excellence of its teaching shown. University College has done for medical teaching in this country as much as its offspring, the University of London, has done for examining. It is the teacher of the teachers. The number of its pupils who have obtained appointments upon the staffs of other medical schools is twice that of any other hospital in London, and there is only one medical school which does not possess a teacher trained within its walls.

This is neither the place nor the occasion for an appeal to the public for pecuniary support of our hospitals; but some considerations may be stated concerning the bestowal of that support. There is no institution so worthy of generous support as the hospital of a great medical school, which not only confers the highest benefits upon the poor, but also, in training the rising generation of doctors, spreads in new and ever-widening circles the benefits of its teaching. Those institutions are most worthy of the support of the charitable which are reserved for the free treatment of the poor, and not those which make a small charge for each attendance, or which admit, for a weekly payment of a guinea or two, patients who are well able to pay for private treatment. In this connection, it is astonishing to see the meanness and misrepresentation to which certain well-to-do people will resort in order to get gratuitous medical treatment. Instances of persons disguising themselves in order to elude the vigilance of the hospital officials are by no means rare, and I know of one case where a rich patient assumed the virtue of charity, though she had it not, by becoming a subscriber to the hospital and then distributed the tickets for admission to herself and her children. So that for the sum of one guinea this woman was able to obtain skilled medical treatment for eight months, and at the same time to pose as a dispenser of charity, which with her certainly had the merit of beginning at home. This abuse of medical charity is a very real grievance at the present time. I am glad to see that the British Medical Association is occupying itself with this matter, which is, undoubtedly, beset with many difficulties. The object of our great hospitals is to relieve the sufferings of the poor; but the meaning of the word "poverty" will vary with the circumstances of the patient, and the nature of the medical relief to be afforded. It will

be at once apparent that one cannot set a hard-and-fast wage-limit beyond which a patient shall not be entitled to hospital treatment. Moreover, the appointment of an officer to inquire into the circumstances of the applicant and the distribution of letters of admission are both open to abuse, though they certainly form some check upon it. But I see no reason why a lesson should not be taken from the poor law. When a person obtains relief at the parish workhouse by falsely representing himself to be a pauper, the Board of Guardians can recover fees for his maintenance; and so it appears to me that a hospital should be able to recover fees for the treatment of a rich patient who has fraudulently obtained admission by representing himself to be unable to pay for private treatment. The poor are to be envied in this respect at least, that when ill they obtain in our hospitals the very highest medical skill and treatment, such as none but the very wealthy can procure. The persons who are most to be pitied when seriously ill are those who are above the hospital class in the social scale, and yet are not sufficiently well off to pay for skilled medical advice in cases of difficulty and danger. And I think it is something to the credit of the medical profession that there is not a physician or surgeon in London who does not often give his advice in such cases without any recompense but the gratitude of his patients. It is for the benefit of patients of this class that institutions have been started, where for a small weekly payment they can obtain the best medical treatment, the medical officers giving their services gratuitously. These institutions require the most careful management, being very liable to abuse, which, I think, would be limited by the publication, in the report of such institutions, of the names and addresses of the patients who accept charity within their walls.

An introductory lecture would be necessarily incomplete which did not include advice upon your studies. Concerning your preliminary studies, I shall say little. Your success in clinical work will depend upon the thoroughness of your training in anatomy and physiology, and chemistry and pathology. There is not one of these subjects which you can afford to neglect, and if I mention certain subjects as worthy of your especial attention, it is not in any way to minimise the value of the others, but because their importance, from the point of view of the medical student, is not always obvious at the time when you study them, and they are therefore apt to be shirked. Such subjects are practical pathological chemistry, and the anatomy and physiology of the nervous system. I think I am not exaggerating when I say that medical students always treat these subjects with a certain amount of disdain. The study of the central nervous system is put off until just before the examinations, and is often read up by means of models. I would very strongly advise you to personally dissect at least two brains and spinal cords. The peripheral nervous system you will study in your general dissections, and it is a subject which will repay any amount of care you bestow upon it. Without an exact knowledge of the anatomy and physiology of the nervous system, you cannot profitably study its diseases, which form the most interesting and difficult branch of medicine. But there is not one subject in your curriculum which is not essential to your education; not one which you should not study with all your powers, and which will not train you in those habits of accurate observation and sound reasoning upon which your success in after-life so much depends. With regard to lectures, I am not at all of the opinion that they are not necessary in these days, when every one can read.

Lectures have, in medicine, many advantages over book reading, one being that many persons have a more retentive auditory than visual memory; another that, incorporating the most recent researches, they are more up-to-date than a text-book. Again, a lecturer is able to give a due sense of proportion to facts baldly set out in print; he is also able to illustrate the subject of his lecture by specimens and drawings and cases, which the text-book writer cannot do, and he is available after the lecture for the elucidation of difficult points. I therefore strongly advise you to regularly attend the lectures.

In the matter of taking notes I feel more difficulty in giving you advice. It is a great advantage to be able to take them in shorthand, which I suppose will soon be taught to every schoolboy. But it is not difficult to teach it to yourselves; in a few weeks you can learn to write it much faster than longhand. There is at first a good deal more difficulty in reading than in writing shorthand, but this is simply a matter of practice, of which your daily lectures will afford you plenty. Not only in taking notes of lectures but in reporting notes dictated at the bedside, the use of shorthand is very great, and I think that a student could not spend more profitably the three months previous to his joining a medical school than by studying at a school of shorthand. Your lecture notes should not aim at being verbatim reports, but only the main headings and most important points should be taken. In the matter of notes you should take as your model Pliny, who never read a book without making extracts from it, who took his tablets always with him, even when he went to make notes on the great eruption of Vesuvius in which he lost his life. His zeal should be that of the medical student in taking notes of eruptions of another kind. You will find it useful to embellish your note-books with drawings,

which afford one of the best means of insuring accuracy of observation. When you are more advanced, at the time when you will be holding a clinical post, you should read the standard works upon your cases, and arrange the features of the disease in your note-books under headings in tabular form. You will then be able in a few minutes to take notes of subsequent cases of the same disease and to compare them with the standard, and you will be surprised at the amount of information which you will thus obtain. Accurate note-taking is as necessary for advance in medicine as accurate observation, of which indeed it is a repetition in a permanent form. Observation is of little value unless it is recorded, nor of value then unless the record can be found.

You should also test your class work by competing in the examinations, although the prizes might well be of more educational value. I should like to see the abolition of medals, and the substitution for them of books or other useful prizes such as that given by our President.

When you commence working at the hospital it is well for you to reside in the vicinity, so that you may be able to see interesting emergency cases. You may often obtain special facilities for the study of such cases by making friends with the resident officers—the way to whose affections lies through the excellence of your ward-notes. Let your aim be to examine as many patients as possible, not in a haphazard manner, but methodically, with a view to the elucidation of the main points of the disease.

It is to be hoped that you will all endeavour to obtain one or more of the resident posts at the hospital. No part of the training of a doctor compares in importance with this. You then learn for the first time what medical responsibility means, and you soon find out the superiority of practical training over mere theoretical book work. It is a very simple

matter to apply a Liston's splint to a fractured thigh ; yet, the first time a house-surgeon applies one, he is apt to be a little perplexed, not yet knowing by practical experience how much tension, pressure and padding he should apply. It is this, however, which will make all the difference to the patient, whom you can more easily convince that you know all about his accident, than that he is not suffering pain, if the bandages are too tight. Residence in a hospital, in addition to giving you practical experience in the diagnosis and treatment of the cases under your own care, enables you to see all the interesting cases in the hospital, and you will always look back with pleasure to the period of your residence, which is perhaps the happiest of a doctor's life. The great advances which have been made in the science of medicine—in antiseptics, in bacteriology and pathological chemistry—have led to the neglect, in some quarters, of its study as an art, and to a disdain for practical details against which it is the duty of a teacher to warn you at this early period of your careers. I think it was Lowell who said that science is now so fine a dame that she will hardly acknowledge country-cousinship with horny-handed practice. I would be the last to say anything disparaging of science, and I regard the high scientific training which this College affords, as of inestimable value to the medical student ; but even in the study of the preliminary scientific subjects, I would strongly urge upon you the necessity of assiduous attendance at the practical classes. You will not learn your anatomy and physiology by reading, and prepared specimens, and demonstrations and coaching classes ; but by practical work in the dissecting-room and laboratories. Still less will you ever become skilful medical practitioners unless you take every opportunity of personally examining patients in the wards and out-patient rooms of the hospital. This neglect of prac-

tical work is, I believe, on the increase, if one may judge by the outcry by students for cramming classes—a means of learning which, though it may help the student to pass his examinations, does not give him a sound knowledge of his professional work. There is no royal road to medical learning; its rugged steepes can only be climbed by assiduous clinical investigation and practical work. Do not think, after reading an account of a disease, and seeing and carefully examining a patient suffering from it, that you know all about the malady—the manifestations of a disease vary with the persons it affects. Take every opportunity of examining cases—there is not one from which something may not be learnt—even though the malady seems to be trifling; you will learn later on that there is nothing trifling in medicine. You will thus acquire skill in recognising the various forms that a disease may assume and the points of resemblance and difference in individual cases. You will also train your faculty of observation, and acquire that practical skill which is the most powerful weapon you can have in your war against disease.

But there are some amongst you who have completed your student career, and being now qualified practitioners are passing forth from the sheltering wing of your *alma mater* to undertake the responsibilities of private practice. To those a word of advice. You have passed through an expensive, and arduous, and lengthened course of study, and you will naturally wish to be earning your living; but before you settle down in private practice I think it will well repay you, in increased health and knowledge of the world, to undertake a voyage for a few months, to some distant part of the globe. Medical men, fortunately, can take such voyages as surgeons to steamships, free of cost, and even with pecuniary gain to themselves. Whether you make the short voyage to the Cape or India or the

longer voyage to China or Australasia, you will benefit by the change of scene, and climate, and people; your view of life will be widened, your sympathies deepened, and you will have opportunities of studying human character, a knowledge of which is almost as essential to the doctor as his purely professional work. For those of you who have not yet decided to practise in England a voyage to our colonies has this further advantage, that it enables you to judge for yourselves of the prospects of settling there. Moreover, you are able to speak from personal knowledge of the advantages and disadvantages of a sea voyage, and of the actual conditions of climate in the countries you visit, and this knowledge will be of much use to you in future when the question of sending your patients abroad will arise. Too often quite unsuitable cases are sent upon long sea voyages, without any inquiry as to the trying climatic changes which such voyages entail, and which may greatly aggravate the patient's disease; or an invalid is advised to go to "New Zealand" or "Australia," without any instructions as to the parts of those countries which he should visit or avoid, and as if the climate of those countries were everywhere the same. Evidence upon these matters can be obtained only by actual experience or inquiry on the spot.

I am the more inclined to urge the advisability of your taking a voyage after you have obtained your qualification by the fact that so many University College men have, in this way, found excellent openings for practice in our colonies. It has been said of Englishmen, that if a party of them were wrecked upon a desert island the first thing they would do would be to go into committee, and I have no doubt they would put the doctor in the chair. This, at any rate, is what is constantly happening in our colonies, where the well-educated doctor always takes a high posi-

tion. To the adventurous spirit an up-country practice may offer attractions, and, if a doctor has leanings towards politics, he may attain to a position of great eminence and responsibility, as an instance of which I need only mention to you Dr. Jameson, a late resident medical officer of our hospital, who is the administrator of Mashonaland and Matabeleland, the most recent additions to our great African Empire. It may be objected that in taking a voyage you will be risking the loss of some suitable appointment while you are away, and that it unsettles you for practice. The first of these objections is of course true, though I think it has compensating advantages in the directions I have mentioned. The second objection, that it unsettles you for practice, is not a real one. Neither travel nor anything else can alienate the affection for his profession which every doctor has who is fit to practise it. Do not, when you have left the hospital, leave hospital methods behind you. Remember that it is only by that systematic examination which you have practised in the wards that you can arrive at accuracy in diagnosis, the grandest part of medicine. Often a doctor's reputation is irretrievably damaged, not by ignorance, but by making a careless examination, or not making an examination at all, in cases where it is impossible to make a diagnosis without it. Such a doctor becomes a treater of symptoms, and from a medical degenerates into a medicine-man.

And be not in too great a hurry to "settle down," but, if possible, take a resident post in a provincial hospital, which will increase your experience and perhaps furnish you with the opportunity of starting in private practice. Of that practice—your life-work—what shall I say? The profession of medicine is one associated with much hard and disagreeable work, in which the body is wearied and weakened by attendance upon the suffering sick at all

hours of the day and night, amidst unhealthy surroundings, and with the sad accompaniments of sickness, and sorrow and death. But it is also a profession which has its brighter side. As the sorrows of a doctor are greater than others' in that he has in part to bear theirs as well as his own, so his joys are greater, for to no other is so frequently given the greatest of pleasures, the saving of human life. It is the fact of its being concerned with the great interests of life and health and happiness which gives to medicine a fascination which no other profession possesses. Of the spirit in which you should carry on such a profession it is unnecessary to speak—no amount of advice could make up for want of proper feeling on your part. By lectures you may be made learned, but not honest, sympathetic, and kind—qualities essential to success.

And talk not of patients' ingratitude: you will more often receive thanks for benefits not of your giving than ingratitude for those which are. Let your aim be to deserve the gratitude of your patients, and if you deserve it you are sufficiently thanked. Gratitude has been cynically defined as a lively sense of favours to come. I think it is really so in a patient, and that there is more true gratitude in the trust of a patient than in any mere verbal thanks. And I think there are few doctors who will not be ready to exclaim with Wordsworth—

"I've heard of unkind hearts kind deeds
With coldness still returning :
Alas ! the gratitude of men
Has oftener left me mourning."

And, again, don't complain of want of social recognition. It will be your own fault if you are not amongst the most respected members of the community in which you live. You will neither be looked up to nor looked down upon on account of your being doctors; but according to the

way in which you perform your duties will you gain or lose respect.

No social class can look down upon those to whom such sacred interests as reputation and life are entrusted. Greater trust has no man than this—that he trusts his life to his friend. May you all prove worthy of that trust, of your profession, and of your school!







