Report from the Select Committee on Medical Registration : together with the minutes of evidence, appendix and index.

Contributors

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REPORT

FROM THE

SELECT COMMITTEE

ON

MEDICAL REGISTRATION;

TOGETHER WITH THE

MINUTES OF EVIDENCE,

APPENDIX, AND INDEX.

COLLEGE OF PHYSICIANS.

Ordered, by The House of Commons, *to be Printed,*
16 *July* 1847.

620.

Jovis, 13° *die Maii*, 1847.

Ordered, That a Select Committee be appointed to inquire into the Registration of Legally-Qualified Practitioners in Medicine and Surgery, and into the Laws and Charters relating to the Practice of Medicine and Surgery, in Great Britain and Ireland; and to Report the Evidence, with their Opinion thereon, to The House.

Veneris, 21° *die Maii*, 1847.

Committee nominated:

Mr. Wakley.
Mr. Macaulay.
Sir James Graham.
Mr. George Hamilton.
Mr. Bannerman.
Mr. Acland.
Mr. Hawes.
Mr. Fitzstephen French.
Sir Robert Harry Inglis.
Mr. Dennistoun.
Viscount Sandon.
Mr. Boyd.
Mr. Aldam.
Mr. Lascelles.

Ordered, That the Committee have power to send for Persons, Papers, and Records.

Ordered, That Five be the Quorum of the said Committee.

Veneris, 28° *die Maii*, 1847.

Ordered, That Colonel Thomas Wood be added to the Committee.

Mercurii, 23° *die Junii*, 1847.

Ordered, That the Committee have power to Report from time to time.

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REPORT.

THE SELECT COMMITTEE appointed to inquire into the Registration of Legally-Qualified Practitioners in Medicine and Surgery, and into the Laws and Charters relating to the Practice of Medicine and Surgery, in *Great Britain* and *Ireland*; and to Report the Evidence, with their Opinion thereon, to The House:——

HAVE examined several Witnesses on the Matters to them referred, and have agreed to Report the Evidence taken before them to The House.

16 *July* 1847.

ATTENDANCE OF MEMBERS.

Lunæ, 31° *die Maii*, 1847.

MEMBERS PRESENT.

Mr. Wakley.	Sir James Graham.
Mr. Macaulay.	Mr. G. Hamilton.
Sir R. H. Inglis.	Mr. Lascelles.
Lord Sandon.	Colonel T. Wood.
Mr. Dennistoun.	

Mr. MACAULAY called to the Chair.

LIST OF WITNESSES.

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MINUTES OF EVIDENCE.

Veneris, 4° *die Junii*, 1847.

MEMBERS PRESENT.

Mr. Acland.	Mr. Hamilton.
Mr. Aldam.	Sir Robert Harry Inglis.
Mr. Bannerman.	Mr. Lascelles.
Mr. Dennistoun.	Right Hon. T. B. Macaulay.
Mr. Fitzstephen French.	Mr. Wakley.
Sir James Graham.	Colonel T. Wood.

THE RIGHT HON. T. B. MACAULAY, IN THE CHAIR.

John Ayrton Paris, Esq. M.D. President of the Royal College of Physicians, London, called in; and Examined.

J. A. Paris, Esq. M.D.

4 June 1847.

1. Sir *James Graham*.] YOU are President of the College of Physicians?—I am.

2. Has your attention been directed to the Bill which is now before the House of Commons, introduced by Mr. Wakley and Mr. Warburton?—It has.

3. Has your College in its corporate capacity petitioned against that Bill?—It has done so.

4. Has the Bill been considered by the corporate body over which you preside?—It has.

5. By the governing portion of that body?—It has been repeatedly considered.

6. What is the governing portion of that body?—A special committee was appointed by the college, for the purpose of examining and considering the various clauses in the Bill, and that committee went into an examination of it.

7. Who appointed that committee?—The vote of the college appointed that committee.

8. When you say the college, what is the body to which you refer?—The college at large; at the *comitia majora*, or general meetings of the body, it is usual for the president to propose the names of gentlemen for a special committee, who are then balloted for and elected by the college at large.

9. How many members of the college were present at the *comitia majora*, at which this committee was appointed?—I am not clear as to the exact number, but I should say about 40 or 50, or perhaps more; not exceeding 60.

10. Were there present most of the eminent members of your body upon the occasion?—The most active and the most eminent were present on that occasion.

11. Who were the members of that committee that was appointed?—The committee was a large committee, and then that committee was found to be too large for practical purposes, and a sub-committee was formed, and that sub-committee consisted of (I will mention if you please the principal names) the president of the college, Dr. Burrows, Dr. Latham, Dr. Holland, Dr. Todd, Dr. Watson, and the registrar, Dr. Francis Hawkins; so far as my recollection serves me, those were the gentlemen who principally attended.

 12. That

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12. That committee reported to the college?—Yes; they reported from time to time.

13. Was the petition to Parliament against the Medical Registration Bill adopted in consequence of that report?—It was; it was a petition, formally speaking, presented by the president and censors of the college, with the concurrence of the college, but it is not the petition of the college at large; it was not deemed necessary to present a petition from the college at large; it would have caused unnecessary trouble, and it was well known what the sentiments of the college were, it was therefore considered that the petition might be entrusted to the president and the four censors as representing the college upon this occasion.

14. Did the committee, after having agreed upon the report, bring that report, through you, under the consideration of the *comitia*?—No.

15. The report being presented, was it brought under the consideration of the college?—It was not.

16. At a general meeting of the college?—We have had repeated meetings, and the Bill has been considered in various ways, not only at the meetings of the committee, but at the *comitia majora* of the college; it has been thoroughly sifted, and the opinion of the college has been expressed in the petition which has been presented to The House.

17. The petition therefore may be considered as containing the deliberate objections of the college to the Bill now before Parliament?—Certainly.

18. I find that you state in that petition, "That by clause 9 of the Bill the charter of the College of Physicians would be in great part, if not wholly abrogated, and the college superseded in all its important functions." Will you point out to the Committee upon what ground you rest that assertion?—It is quite obvious, from this clause, that the charter of the college, and all the laws by which that charter is supported, will be abrogated. The terms of the clause are these: "So much of any Act or charter granted before the passing of this Act as prohibits any person from practising medicine, physic, or surgery, in any place, without such licence as is mentioned in any such Act or charter respectively, or that imposes any restriction or penalty on the practice of medicine, physic, or surgery, further than is contained in this Act, shall be, and the same is, hereby repealed." That takes away, of course, all the powers of the college, as to the supervision and examination of physicians, and all the functions of the college which are so important to the welfare of that branch of the profession over which the college presides.

19. What are the functions which the college now, under their charter, exercises, which, as you contend, would be superseded by the enactment in clause 9?—The power of examining physicians would be taken away; and on examining the other clauses of the Bill, it is very evident that no physician would come to us; it would not be necessary for him to come, inasmuch as he would be licensed by other means.

20. Are your charters of ancient date?—We have had various charters, but the one we act under is that of Henry the Eighth.

21. Has that been confirmed by Act of Parliament?—Yes, an Act of the 14th & 15th of Henry the Eighth.

22. Will you state shortly what are the powers confided to the college under that charter so confirmed by Act of Parliament, which has endured from the Act of Henry the Eighth down to the present time unrepealed and unaltered?—In the first place, the jurisdiction of the college at large extends over London and seven miles round: no physician can practice within that magical circle without the authority of the College of Physicians. Then there is another important function discharged by the president and the elects of the college; we have the power of licensing all physicians in the provinces, with the exception of the graduates of Cambridge and Oxford; the medical degrees of Cambridge and Oxford confer the privilege of practice upon physicians in the provinces, and the president and elects of the College of Physicians have the power of licensing physicians in the provinces but not in London; the jurisdiction over London being left to the college at large.

23. The practice in the metropolis and in the circle seven miles round the metropolis is controlled exclusively by the College of Physicians?—Yes.

24. And throughout England and Wales no physician can practice *qua* physician except under licence from the College of Physicians, or by a degree granted by one of the two English universities?—Yes.

25. That

25. That is the present state of the law?—It is.

26. Under that state of the law the public in England and Wales have this security for the competency of a physician in England and Wales, that his efficiency has been tested by the College of Physicians or by one of the two English Universities?—They have.

27. And from the time of Henry VIII. down to the present period that security has existed?—Certainly.

28. And now exists?—Yes.

29. Those are your rights under the charter; how have they been exercised, or rather how are they now exercised; first, with respect to licensing, do you license all physicians in England and Wales who are not graduates of the Universities?—All those who present themselves for examination; and we feel it our duty if any new parties appear in London, with respect to whom we have sufficient evidence of their acting as physicians, to call upon them to come before the college, and to show their qualifications for practice and to undergo an examination.

30. If they come, what is the examination to which they must submit?—The examination consists of written answers to certain papers; a paper is given to them containing a number of questions in physiology and anatomy and in the practice of physic, and of passages from ancient medical writers, which they are called upon to translate; they are placed in a room with nothing more than paper and pen and ink, with a beadle at the door, so that they have no access to books, and for three successive mornings they answer those questions in the best way they can; those papers are then examined, and we proceed to a *vivâ voce* examination; that *vivâ voce* examination is divided into three parts; the first is upon anatomy and physiology; the second is upon pathology, and the third is upon therapeutics, or the art of curing disease; there are three distinct examinations, which are conducted before the president and four censors.

31. The four censors are annually chosen?—They are.

32. For the purpose of examining, and for the performance of other duties?—Yes.

33. When you say that the knowledge of languages is tested, is it in more than one dead language that the parties are examined?—Latin and Greek.

34. We have now considered the case of those who are summoned, and who attend; what do you do with the recusant physician who practises, and who, when summoned, refuses to attend?—We have a legal power, but, unfortunately, we have not the means of exercising that power; we have frequently done so, and when we have done so we have succeeded; but the expense of the prosecution and the difficulty attending it is so great, that we trust to the force of public opinion in preference to the strength of the law.

35. But practically are there many physicians practising in London, and within the circle of seven miles, who have not been examined, and who are not licensed?—I should honestly say that I think there are very few respectable physicians practising in that way; but it is a question the Committee will feel that I have some difficulty in answering.

36. Extending your view beyond the metropolis of this kingdom to England and Wales, have you reason to believe that there are few or that there are many physicians practising who have not been licensed by you, and who have not graduated at Oxford or Cambridge?—There are a great many, certainly.

37. Then your exclusive power of licensing, such as it is, can hardly be held to be operative under the statute?—No, I should say not.

38. Besides examining, have you any other power over physicians practising in London, and within a circle of seven miles?—Yes, we have a moral power; if any licentiates or fellows of the college conduct themselves in a way which we consider unprofessional, we summon, censure, and fine them, and we consider that that is quite sufficient; we do not want any further power as to punishment.

39. You have the legal power, if you think fit, of withdrawing his licence?—Certainly.

40. But independently of the legal power, you have the moral control of summoning him?—Yes.

41. And of admonishing him?—Yes.

42. That power has been exercised by your college, has it not?—Yes.

43. Even in modern times?—Yes, very lately.

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44. Without mentioning names, will you state a case which recently occurred, where you summoned and admonished the party?—I can state that at this moment there is a fellow of the college who is desired never to enter the building, and who has not done so for two or three years.

45. Was that order not to enter the precincts of the college made in consequence of an inquiry instituted by the college?—It was in consequence of unprofessional conduct. He was then summoned, and he did not attend; he was summoned again, and told of the consequences if he did not attend.

46. He was contumacious, and did not appear?—Yes, and he was then visited by the penalty that I have stated, that he was not to come within the precincts of the college till he thought proper to submit himself, as he was in duty bound, to the college.

47. You did not withdraw his licence?—No.

48. You contented yourselves with telling him not to come within the precincts of the college, he refusing to appear?—Yes; but I must be allowed to observe, that when we admit a licentiate there is a form; the president admits him, and the president tells him at the same time, "You hold this licence only so long as you conduct yourself with professional propriety."

49. Are there instances of the withdrawal of the licence on account of misconduct?—Not in late years; formerly there were; and at one time it was the practice to leave them out of the list of the college.

50. Has that power been exercised lately?—The last instance of that I have fresh in my recollection from the absurdity connected with it; it was a licentiate of the college; amongst other absurd things which he did, he became the proprietor of a nostrum, which he called "Water from the Pool of Bethesda," and hearing of this we sent a person for a bottle of the water from that celebrated pool; and the directions with it were, that it was to be placed upon a shelf and after some time it would become turbid, and that was an intimation that the water was troubled and that it was to be then swallowed immediately; but this water was kept by the gentleman for a considerable time, and it underwent no change; a remonstrance was then made to this doctor, and the answer he made was, "I will explain it to you directly; you bought a guinea bottle, and the quantity of water is so small that you cannot discover the change which it undergoes; but if you will buy a five guinea bottle, you will find that it will become turbid to your utmost satisfaction." That gentleman was suspended for some time, and his name left out of the list; that is the last instance that I remember, and that must have been 10 or 12 years ago.

51. Though some physicians may practise in London, and many in the country without your licence, and though some even resist your authority, are you of opinion that upon the whole the power exercised by your college has been conducive to sustain the literary attainments of the profession and their honourable and moral conduct?—I am satisfied that it has.

52. Is that the result of your experience as a member of the College of Physicians, and as now presiding over it?—Certainly, I have the strongest opinion upon that point.

53. Do you think that the abrogation of this power would be conducive to the welfare of the public or the character and advantage of the profession at large?—It would destroy the profession, in my opinion; the grade of physicians would no longer exist.

54. If the charter of the college were abrogated, and your powers at an end, you think that the profession to which you belong would not gain in public estimation, nor would the public gain from the lower standard of the qualification of physician?—Certainly not; that is my decided opinion.

55. Have any complaints come within your knowledge, or have they been preferred to you, or are you cognizant of any complaint, of any abuse of power or authority, as exercised by the college?—No.

56. No complaints have been addressed to the college of abuse of their power and authority?—No; I am not aware of any.

57. Are you aware, whether to Parliament, or to other constituted authorities, any representations have been made of the abuse of your power?—I believe there have; in the various attempts made to obtain reform, I have no doubt that statements against our college have found their way into various petitions.

58. You state in your petition that, by clauses 3, 10, and 31, in the Bill now before The House, taken in conjunction with Schedule B., all medical practitioners

practitioners would be reduced to one grade, whatever might be their respective qualifications; will you point out to the Committee how those clauses, taken in conjunction with Schedule B., would operate in producing the effect which you predicate to them of reducing the profession to a single faculty?—Clause 10 enacts, "That every person who shall be registered, and shall possess a certificate in force according to the provisions of this Act, shall be entitled, without other licence than such registry and certificate, to practise medicine throughout that part of the United Kingdom for which his certificate was issued." All that he requires, therefore, is to be registered. And then, in conjunction with clause 31, which is the explanatory clause, it is enacted that the words, "medicine" and "medical," when used in this Act, shall also mean and include the words, "physic," "surgery," and "surgical." It appears, therefore, that any person who is registered, whether medically or surgically, can perform all the duties of a physician or a surgeon, or a general practitioner, or apothecary; all he requires is to be registered. It does not signify in what way he is registered, because "medical" and "surgical" are synonimous terms; it signifies, therefore, very little whether he is registered as a surgical practitioner or a medical practitioner; they are one and the same thing.

59. Then, by the registration under this Bill, in the manner prescribed by the Bill, is it your opinion, that whatever may be the respective literary, scientific, or practical qualifications of parties so obtaining a privilege or licence to practise without any test of their respective qualifications as physicians, as surgeons, or as dispensers, they may interchangeably or collectively perform all those functions?—That is my opinion.

60. Without any sufficient test with respect to any one of them?—There seems to be no test whatever except the diploma or licence which they obtain from some chartered or legitimate body; it appears that there is no examination testing their qualifications, and they are then registered; the respectability or amount of their knowledge, of course, is only to be gathered from the certificate or diploma which they bring.

61. What, in your opinion, would be the effect of granting the same professional privileges to medical practitioners of the lowest qualification as are now granted or distributed to men possessed of the highest?—It would lower the general standard of the profession, both literary and professional.

62. Would the inducement to an extended preliminary education of the highest grade be much reduced?—I should think so; I should think that the highest grade would cease to exist.

63. If that should be so, would your profession any longer be a learned profession?—It would not.

64. The members of your profession who rise to preeminence in the college and in practice in London, generally have gone, before they commence practice, through a long course of literary study?—Certainly.

65. They are scholars generally?—Yes.

66. Their scholarship is tested both by your college and frequently by the universities before they come to your college?—Certainly.

67. Does your experience lead you to think that to the public those high attainments and that literary education give security for greater intelligence, and to science itself greater chances of knowledge by which it may be extended and perfected?—I do think so.

68. Then I need hardly ask you if you think the abrogation of your charter, ceasing to hold out inducements of this kind, would greatly lower the standard of the profession in the metropolis?—I have no doubt of it.

69. And would the effect of that lowering of the standard of the profession in the metropolis be felt throughout the kingdom?—I think you could not lower the standard throughout the metropolis without lowering it in every other part of the kingdom.

70. From your knowledge of the practice of physicians, should you say generally that a preliminary literary education enables the practitioner to extend medical science and to advance knowledge?—Unquestionably.

71. What would be the effect upon the profession generally of the extinction of the most highly educated class in that profession?—It would be reduced to one grade, and the general tone of the profession would be very much lowered indeed.

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72. To the old members of the profession, such as yourself, occupying a station in the profession, and to physicians of great eminence, such a result would be a matter of indifference, looking at it personally?—It is very evident that we have no personal interest whatever in the result of the Bill any further than as we have a desire to see the profession confined to highly respectable people, as it is at the present moment; but personally the Bill would not affect any of the seniors of the college.

73. Your place in the profession and the college is already attained?—Yes.

74. The degradation of the rising members of the profession would be a matter of personal indifference to you, except so far as the welfare of society at large is concerned?—Exactly; nor have we any interest in the college from its personal relation to ourselves. We are supporting the college upon this great principle, because we are satisfied that the existence of the college is essential to the welfare of the profession; but as far as we are concerned individually it is not of the slightest importance. We have no funds at our disposal, and no places to give away, and no personal influence arising from it; and we have therefore no motive operating upon us to induce us to sustain the college, except that which operates upon us in the conscientious discharge of a public duty.

75. You are aware that this Bill would, by the system of registration contained in it, open to the profession the right to practise in different parts of the United Kingdom?—Certainly.

76. Do you think that at the present time there is, throughout the different parts of the United Kingdom, sufficient care taken to ensure an equal standard of qualification to justify an equality of privilege?—I am quite convinced that there is not; there is every possible shade of difference in the various institutions of the country as to education, and as to what is required of candidates, and also as to duration with regard to residence; every university school has its own peculiar laws with regard to them. If you can by any means establish a uniformity of education, we are very ready to grant reciprocity of privileges.

77. Taking the licensing bodies in the different parts of the United Kingdom as now constituted, and as exercising their power of licensing unchecked at present, do you consider that security is given to the public of equality of attainments?—Certainly not.

78. Have you looked to clause 23 of this Bill, which offers the security of uniformity of education and qualifications by the means proposed to be therein taken?—I have considered it very attentively.

79. Do you think that that clause prospectively provides the security which is now wanted for equality of attainments?—I do not.

80. Why do you think it does not?—With all respect and due deference, I regard the Secretary of State and the Queen in Council as inadequate to discharge the duties that would be imposed upon them; they could only do it by calling in to assist themselves assessors; they must consult medical men, and therefore you are getting rid of the College of Physicians in order to introduce assessors; it would come to that. How can the Secretary of State possibly, amongst all his multifarious duties and occupations, superintend such an examination as would be satisfactory? He must have assessors, and who are those assessors to be?

81. The effect of clause 23 would be to transfer some of the most important functions of the existing corporate bodies to the Registrars?—It would.

82. The powers now exercised of examination by the corporate bodies would, in point of fact, be transferred under clause 24 to the officers appointed by the Secretary of State?—They would; and it appears that a physician, a surgeon, or an apothecary, might come to sit in our college, supposing the examinations are to go on (which I doubt very much), and might report to the Secretary of State his opinion on the validity of our examinations.

83. It would be possible for the Secretary of State to appoint an apothecary to come to an examination of a physician, conducted by your four censors?—Yes, and sit in judgment on our examination.

84. And that apothecary might report to the Secretary of State that those four censors, being the most eminent physicians in London, conducted the examination, in his opinion, improperly?—Certainly.

85. And

85. And the final decision, as to the adequacy or inadequacy of the examination by your four censors, under the superintendence of the inspector, must at last be decided by the judgment of the Secretary of State?—Yes.

86. Upon a matter purely medical, purely professional?—Yes; so it would appear from this clause.

87. Have you any objection to registration?—None whatever; we desire a registration.

88. You think that it would be for the good of the profession and the public that there should be an annual and a complete registration?—Certainly.

89. When you say that, does it appear to you desirable that the registration should be of that character, that at once and without any difficulty, any person searching that register with a view to obtain medical advice, should be able to know what the precise grade and qualification of the person is whom he sought in that register?—Certainly; the medical men should be registered in classes or grades.

90. What should be the classes?—Physicians, surgeons, and general practitioners.

91. General practitioners being persons with the double qualification of surgeon and apothecary, and licensed by competent authority?—Certainly.

92. To prevent mistake I will repeat the question: what is the classification in the register which you would recommend?—The one which I have stated: I would have physicians, surgeons, and general practitioners.

93. Under the head of general practitioners, what would be the qualification which you contemplate?—That they should have a diploma from the College of Surgeons, and at the same time have testimonials from the Apothecaries' Company.

94. How would you suggest that the registration which you think would be conducive to the public good should be effected?—I would recommend that each corporate body should send to the Secretary of State annually a list of their members. The College of Physicians will undertake, without any expense to the members of the profession, to secure a perfect registration, so far as they are concerned; and no doubt the College of Surgeons are equally willing to do the same, and also the Apothecaries' Company; the three lists might then be published under the authority of the Government if you please, and there is the registration.

95. What do you say to clause 6, which contemplates an annual tax for the certificate?—It is in every way objectionable; it is an *ex post facto* law; we have already paid very heavy fees in the form of stamps for the power of practising, which we supposed we held for life; and now we are called upon to pay an additional fee for the right that we have so long enjoyed, and for which we have already paid.

96. Does not clause 6 render an annual application necessary, as well as an annual payment, for the renewal of the right to practise?—Yes; and there is a penalty if you do not apply for a certificate.

97. What, in your opinion, would be the feeling of the profession generally upon that clause making it penal to practise in this country without an annual licence, for which a tax is to be paid and a fresh annual application made?—I think that there is but one opinion upon that point: however, medical men may differ upon other points, there is but one opinion upon that, viz., that it is an extremely unjust and extremely unfair measure.

98. Do you think that uniformity of qualification can ever be attained by regulations issued alone by the Secretary of State?—I am quite certain that it could not be done.

99. Is he likely to be a judge on the subject himself?—No; I think not.

100. Must he not, therefore, be entirely dependent upon the opinion and advice of other irresponsible persons?—Certainly.

101. Do you think that will give such security to the public and to the profession as is now given by licences granted to persons by members of their own profession, in the face of the public, who are responsible and competent to form an opinion?—Certainly not.

102. The Secretary of State, acting under advice unknown, or if known, possibly not possessing the confidence of the public, would not, in your judgment, be such a protection to the public interest as the licences now granted by the medical bodies acting in the face of the public?—Certainly not.

 103. Have

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103. Have I omitted to put to you any question raising an objection which you would wish to urge against the Bill now before The House?—I would observe that the registration should be nothing more than a record of existing qualifications; it should give to no person any power which he did not previously possess; it should be merely a record of what the qualification of the individual is, and nothing more. With regard to the registrars themselves, it strikes me that they are entrusted with powers to judge and decide upon matters which would render them very responsible persons indeed. I can hardly suppose that the registrars would be capable of deciding certain subtile and nice questions which must necessarily come before them with reference to qualification; numerous questions must arise which I apprehend the registrars would be incapable of deciding, and to whom it should not be left for decision.

104. Have you looked at clauses 11 and 12, which give to physicians the right, which they have not heretofore had, of recovering payment of charges for their attendance?—We object to that very much; we consider that the physician would under those clauses be converted into a tradesman; we should feel that we had lost caste by allowing those clauses to pass.

105. As relates to physicians, you wish to stand on the same footing as members of the bar, receiving an honorarium, but without having a right of charge?—Certainly.

106. Speaking for your profession, do you think that you are authorized in saying that the feeling is general among physicians in that respect?—I am sure it is.

107. You think that they would consider the transference to them of this power of charge for work done as inconsistent with their position as members of a learned profession?—That is the universal feeling amongst them.

108. I have gone through many of the clauses of the Bill, but taking it as a whole, do you think, as it now stands, that it is or is not conducive to the good of the public and of the profession?—No; I think that it is destructive of the respectability of the profession; that is my decided opinion.

109. If it were destructive of the respectability of the profession, would not the interest of the public in the result be most seriously damnified?—Certainly.

110. As president of the College of Physicians, is this your individual opinion, or do you think that you speak generally the feelings of the body?—I am satisfied that I am now representing the general feeling of my part of the profession.

111. Of the College of Physicians of England?—Yes.

112. *Chairman.*] Does there now exist any real and effectual legal prohibition to persons to practise medicine without your licence?—Yes.

113. But is the prohibition really carried into effect; are you in the habit of prosecuting all who practise without your licence?—No.

114. How long is it since a prosecution of that sort has been instituted?—The last prosecution was the prosecution of Dr. Harrison, who is now dead; he was prosecuted for practising as a physician without authority.

115. How long ago?—I have some difficulty in saying how long ago it was, but 12 years perhaps.

116. That was within the seven miles circle?—Yes.

117. Do you know how long it is since any prosecution has been instituted against any party for practising beyond that circle without authority?—I do not remember; I know that there are cases upon record.

118. It would seem, under those circumstances, that the effect which your privileges produced depends upon public opinion, and not upon the penal part of the law?—Certainly; there is no doubt of that.

119. If the effect which your college produces in keeping up the character of the profession arises, not from the penalties contained in the law, but from the character which your college bears, how should the doing away of those penalties destroy its salutary influence?—I do not know that it would very much destroy its salutary influence; we depend very much upon public opinion.

120. And, therefore, considering your college as one which stands very high in public estimation, it would not necessarily be, as the petition says, superseded in all its most important functions if it retain the public esteem without having the power of prosecuting parties for penalties?—The necessity of coming to

our college is superseded at once, because no physician will take the trouble to come to our college when he obtains all he can require without it; I apprehend that the effect of this Bill would be to annihilate our college; the bricks and mortar would remain, but nothing else.

121. Let me beg you to keep separate the distinct parts of this inquiry; the first question is with reference to clause 9, which does away with the penalties, restrictions, and prohibitions; those I understand you to acknowledge to be virtually obsolete, inasmuch as it is 12 or 15 years since any person has been prosecuted within the circle of seven miles, and you do not know when a prosecution has been instituted in any part of England beyond the circle of seven miles; I therefore wish you to say whether you do not consider the penalties to which the 9th clause relates as already virtually abrogated?—Yes.

122. If they are virtually abrogated, can any very ruinous consequence follow from legally abrogating them?—No; I am not prepared to say that there would.

123. In that case, then, I understand that the first ground taken in this petition is abandoned; the words are, "That by clause 9 the charter of the College of Physicians will be in great part, if not wholly, abrogated, and the college superseded in all its most important functions;" the objection to clause 9 must be considered as withdrawn?—Supposing that those laws were abrogated, the moral influence of the college would still remain.

124. What is the legal effect of your withdrawal of the licence from a person who should practice irregularly, like the gentleman who invented water from the Pool of Bethesda; would it make him liable to penalties if he continued to practise?—Yes, we might prosecute him.

125. But you have not done so?—No.

126. So that the effect of your censorship is, after all, a moral effect; it has arisen from the unwillingness of gentlemen to expose themselves to the censure of so respectable a body as the College of Physicians?—Certainly.

127. Would not that continue if the legal privileges which you now have were taken away?—The moral effect would remain.

128. Will you be kind enough to explain on what principle you think that the distinction can be defended which is made between persons practising within seven miles of London and persons practising throughout the rest of the country, and why a different rule should be imposed upon the man who practises at Chelsea and the man who practises at Norwich?—Such is the present law.

129. But does it appear to you to be a reasonable state of the law?—Yes, I think it is; I think that a higher order of physicians should be secured for the metropolis; that has always worked very well, and it has preserved very much the dignity of the profession. In many parts of the country it is hardly to be expected that persons can be educated to the same extent that they are for metropolitan practice; you would not be able to secure the class of physicians for the remote provinces, suppose you equalized the character of their education; but, however, the fact is now that the same examination takes place for extra licentiates (as they are called) as for licentiates.

130. Do not you conceive that the superiority and dignity of the profession in the metropolis is sufficiently explained, and would be always secured by the circumstance that the greater prizes for eminent men must always be there; is it not rather the greatness of the prizes which talent and learning obtain in the metropolis than any rule respecting a circle of seven miles, which has caused the London circle to draw to it the most eminent medical men in the kingdom?—I think not.

131. You conceive then that the cause of the superiority of the first class of medical men in London, is that rule respecting the circle of seven miles?—I have already, I think, answered that question.

132. May I ask what the functions of the general practitioner are exactly; does he not unite the functions of physician, surgeon, and apothecary?—He practises in medical cases, and, to a certain degree, in surgical cases.

133. He does then, in fact, all that the physician does and all that the surgeon does, but in a way generally not quite equal to the way in which the physician or the surgeon would do it; is that your opinion?—Yes; he treats medical and surgical cases to a certain extent.

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134. Is the inferiority of the general practitioner anything but that inferiority which must be the necessary effect of a man doing more than one thing, and is the superiority of the surgeon or of the physician anything more than the superiority which is the natural effect of the division of labour?—The preliminary education I apprehend is different. I apprehend that the education of a physician and the education of a general practitioner differ very considerably, and that the skill of the physician depends very much upon the preliminary education which he has received.

135. You hold that the previous intellectual training through which a portion of the profession goes tends to add very much to that medical skill?—I do.

136. If that be so, is it not probable that a certain portion of those who devote themselves to medical science will also exert themselves with a view to obtain that preliminary education, if it be found by experience that a liberal education is the best for medical science; is it not probable that a certain portion who have the means will always endeavour to obtain that liberal education?—Certainly, if they have the means.

137. They could not now do it if they had not the means of obtaining such an education?—Certainly not.

138. Would not the point of dignity be saved by a little difference of arrangement in the schedule, by putting three alphabetical lists; one of physicians, and one of surgeons, and one of general practitioners?—Yes; that would be some improvement, no doubt.

139. Merely dividing the list into three portions would remove a considerable objection?—It would remove one objection.

140. Sir *R. H. Inglis.*] You have stated that it would remove one objection, but you have declined to state that it would remove a considerable objection; is it or is it not the case, that the great objection entertained by yourself and your college is to the examination under the authority of a gentleman almost necessarily ignorant of the profession, aided by a person either unknown to the profession, or without the confidence of the world?—Certainly.

141. You have stated, as your petition signed by yourself and the censors also states, that you have no objection to a system of registration; will you state to this Committee whether you conceive that such a registration, made alphabetically by each of the Royal Colleges, and by the Society of Apothecaries, as far as England is concerned, might interchangeably be subjected to the registrar-general, for example, or some other public functionary, and published in one general printed form, and remitted to the municipal authorities throughout England and Wales, and might be sold at a cheap price, thereby affording to the public authorities on the one hand, and to the great mass of the people on the other, a ready access, so that they may know whether an individual residing in their particular locality be or be not registered in one of the three great divisions of the profession?—I consider that such a plan of registration would answer every purpose; but I would observe that there is an omission in the question; the English universities have the power of licensing, therefore it would be necessary that Oxford and Cambridge should send an account of the graduates passed there.

142. And such lists respectively should be inserted, in the order of their dates, in the general list to be prepared by the registrar-general?—Certainly; I think that would answer every purpose.

143. In the earlier part of your examination you seemed to feel some reluctance when the question was put to you as to the number of respectable physicians who practised in London without a licence; your expression was, "few respectable practitioners." Can you furnish the Committee with anything like an approximate number of those who, whether respectable or non-respectable, do actually practise in London and its suburbs without a certificate or licence?—I am hardly prepared to state the number.

144. Has public opinion in any degree checked the practice of non-licensed physicians within the circle of seven miles round London?—I think it has.

145. Has it checked the practice of non-licensed physicians in the country practising?—I do not think it has.

146. Do you conceive that, consistently with safety to the public health, it is desirable to relax further, or at all, the existing restrictions on the practice of non-licensed physicians?—I think not.

147. Have you any reason to think, without giving names to the Committee, that

that there are any individuals belonging to the higher branch of the profession in London, licensed by yourselves as a Royal College, or holding degrees from the Universities of Oxford or Cambridge, who are suspected of any irregular dealings with the chemists and druggists whom they employ?—I do not believe that, with regard to any of the physicians belonging to our body as fellows, or any of the licentiates, there is such a compact between the druggist and the physician as you suggest.

148. Have you every reason to believe, and to state your personal conviction to the fact, that such practices do exist with persons not entered on the list of the Royal College, and not bearing its licence, or not receiving degrees from the two universities?—I do know that there are many such.

149. Do you conceive that such a practice is not merely injurious to the moral character of both parties, but risks the public health, by inducing the parties to administer medicine which may not be required, or which, at any rate, may cost more than the private convenience of patients might admit?—I do think so.

150. Do you conceive that the existence of the Royal College of Physicians, of the Royal College of Surgeons, and of the Society of Apothecaries as established now by Act of Parliament since 1815, has tended materially to sustain and extend the character of the medical profession?—I am of that opinion.

151. In the earlier part of your examination, you stated that you were not aware of any public inconvenience arising from the existence of these chartered or statutable bodies; will you state to the Committee how far it is consistent with your knowledge that persons not holding those authorities to practise, have endeavoured to introduce themselves into public institutions deceptively, or at any rate without public announcement, and have thereby tended to depreciate the medical character, and possibly to injure the health of those committed to them; are you aware of that being the fact?—I am aware of it.

152. Are you aware that at a certain period, about 30 years ago, an attempt was made to obtain an Act of Parliament by which all those who had graduated or been licensed in Scotland, might have equal privileges of practice with those who had graduated in the two English universities, or had been admitted fellows of the Royal College of Physicians and received its licence, or had obtained the diploma of the College of Surgeons, and the diploma of the Society of Apothecaries?—I am aware of that case.

153. Are you not aware, that when those gentlemen sought equality of practice in the whole of the southern division of the island, they had not themselves the right interchangeably of practising one half of them in Glasgow, and the other half in Edinburgh respectively?—I was not aware of it.

154. You are not aware of the fact, then, that in Glasgow, Lanarkshire, Dumbartonshire, and Renfrewshire, those who are graduates of the University or College of Glasgow, and those only who have received their degrees in Glasgow, are exclusively entitled to practise?—I am not aware of the fact.

155. Nor of the corresponding restriction on the part of those who take their degrees in Edinburgh, with respect to their right to practise exclusively there?—No.

156. But are the Committee to understand that you consider, that if there be the right to practise in England extended, without distinction, to gentlemen educated either in Edinburgh or Glasgow, a similar right ought to be extended to gentlemen educated in the two universities of England, or receiving their diplomas from the Royal College of Physicians, or the Royal College of Surgeons, or the Society of Apothecaries, in London?—Certainly.

157. At present is it or not the case?—It is not.

158. Therefore a gentleman having the highest medical education that England can furnish is not competent to practise his separate branch of the profession, whatever it may be, in the northern part of the island?—So I understand.

159. Not being prepared to admit, having, on the contrary, every reason to deny, that the Royal College of Physicians has abused its powers, you contend that those powers ought not to be abridged?—Certainly.

160. You have stated in your petition, that by clause 9, "The charter of the College of Physicians will be in great part, if not wholly abrogated:" the question has been put to you whether the repeal of the penalties for illegal practising can be considered as a virtual abrogation of the privileges of the Royal College;

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do you consider that the functions, duties, and privileges of the Royal College of Physicians consist in the power of imposing penalties, or do not they consist rather in maintaining that high standard of medical practice which its examinations, under public sanction, have for many years maintained?—That is my opinion.

161. *Chairman.*] I understood you to say, in answer to a question from Sir Robert Inglis, that you approved of the system established by the Apothecaries' Act of 1815?—I am not prepared to answer that question.

162. I only wish to ask you, do you mean to include in your general approbation the system of apprenticeship?—No.

163. Mr. *Dennistoun.*] Is there any provision in this Bill which would prevent a gentleman educated in England from practising in Scotland?—No, not in this Bill.

164. Would you approve of a measure which should make the qualification, whatever the qualification may be, extend equally to the three countries, England, Ireland, and Scotland?—My answer to that question is, that we have no objection to reciprocity, provided there be uniformity of education; we do not object to an Edinburgh physician coming to London to practise, if we are satisfied that the education that he has received is the same as that which the London physician or the English physician has received.

165. You stated, that if your power of examination were abrogated, you conceived that the general standard of medical men throughout the country would be lowered?—I did.

166. At present your jurisdiction extends to England and Wales only, not to Scotland?—No.

167. What is your opinion of the standard of the medical profession now generally in Scotland?—As far as my knowledge goes, the medical education in Edinburgh is very good. It is a great many years ago since I was there, and therefore I am unable to say what the present extent of discipline is. But when I was in Edinburgh (and I was there for two years), I was perfectly satisfied that the school of medicine, as it was conducted in those days, was highly favourable to the profession. I am very grateful for the information which I received there, and I hold the university of Edinburgh in the highest respect.

168. You have no reason to believe that it has been lowered since?—I am unable to say what the present state of the school is; that the Committee can of course learn from others.

169. Might I ask how many pure physicians and pure surgeons there are in the country, according to the best of your belief; I mean by a pure physician, a gentleman who practises as a physician simply, and does not act as a surgeon in any case whatever?—I believe that in London there are a great number of pure physicians, and I believe also in the country there are a great many; there will be exceptions here and there, but I believe that physicians in large towns keep very much to their own grade. I do not think that they interfere with the surgeon or apothecary. You have exceptions, of course.

170. Are you aware how that is in Scotland?—I believe that in Scotland there is a great confusion of grades.

171. Do you think that in Scotland there is one single pure physician, or one single pure surgeon?—Yes; as far as my knowledge goes there are.

172. Are there six?—In Edinburgh I think you might find six; I know that when I was there I could have found six; that was in the days of Dr. Gregory.

173. Mr. *Wakley.*] How many physicians constitute the governing body of the College of Physicians?—The whole of the college may be considered the governing body; they of course appoint committees; there is a subdivision of labour, but the college itself must be considered as the governing body.

174. You have a president and censors?—Yes; we have a president and four censors, a registrar, and a treasurer.

175. By whom is the president elected?—By eight elects; seven elects, with the president.

176. What are the qualifications which render him eligible for the office?—He is elected by the eight senior fellows of the college; at least they are generally

generally the senior fellows of the college; those elects have functions to perform which are indicated in the several Acts of Parliament.

177. Are they spoken of in the charter?—Yes; and they are also recognized in the Acts of Parliament; they have certain distinct duties to perform.

178. The president must be a fellow of the college?—Yes.

179. That is the only qualification mentioned in the charter?—Yes.

180. There are seven elects; how are they chosen?—They are chosen by themselves. Upon the death of one of the elects, the elects meet, and the six, with the president, elect another.

181. How are the censors appointed?—The censors are elected by the college.

182. When you say the college, you mean the fellows?—Yes.

183. Not the licentiates?—No.

184. How many fellows are there?—There are, I think, 160 fellows.

185. How many licentiates?—Two hundred and seventy-six.

186. How many extra licentiates are there?—Two hundred and fifty-five.

187. What are the rights of the fellows of the college, as distinguished from the rights of the licentiates and of the extra licentiates?—The fellows of the college constitute the governing body; the licentiates and extra licentiates have nothing whatever to do with the governing body.

188. The fellows have a right to practise over England and Wales generally?—They have.

189. What are the rights of the licentiates, as distinguished from the rights of the extra licentiates?—The licentiates have a right to practise in London and seven miles round.

190. What are the rights of the extra licentiates?—They have a right to practise only in the provinces, beyond the seven miles.

191. What are the distinctions in the examinations of fellows, licentiates, and extra licentiates?—There was a distinction with regard to Greek: the candidates for fellowship formerly were obliged to construe Greek, which was not imposed upon the licentiates, but now the fellows are elected from the licentiates, and therefore I may say that the examination is the same for all; there is no distinction now, because no person comes before us as a candidate for a fellowship.

192. No distinction is made between the candidates for a fellowship and licentiates?—No.

193. Is there any distinction between the examination of licentiates and of extra licentiates?—Not within the last 12 months; previous to that there was a distinction, but now there is not.

194. What distinction existed up to 12 months since?—Instead of three examinations, the extra licentiates had but one examination. We do not expect the extra licentiates to construe Greek, but we give them the option: we say to them, "It is to your credit if you choose to be put upon a Greek book; and it is recorded."

195. Mr. *F. French.*] There is still a distinction between the examination of licentiates and extra licentiates?—No, there is now no distinction.

196. *Chairman.*] There is no distinction in qualification between the licentiate and extra licentiate?—No, not now.

197. And yet the extra licentiate may not practise within seven miles of London?—No.

198. Though he has the same qualification with those who practise within seven miles of London, he is not allowed to do so?—No.

199. Mr. *Wakley.*] If a gentleman holding an extra licence desires to practise within seven miles of London, and applies for a licence giving him power to do so, is he subjected to an additional examination?—Yes.

200. A second examination?—Yes; at least it would be in the power of the censors to subject him to a second examination.

201. Would he be subjected to that examination after having held the extra licence for several years?—That is a question I have never considered, because it never came before us. The extra licentiates have increased greatly in number; in consequence of the proposed Bill of Sir James Graham there was a rush made of all those physicians to London with a view to get the extra licence, but we had for many years only about three on the list.

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202. In the last year did an extra licentiate apply to the College of Physicians for the purpose of obtaining the licence to entitle him to practise within seven miles of London; and was he refused?—Yes; there was such a case.

203. A gentleman who had obtained an extra licence to practise beyond seven miles of London, having applied for a licence to give him a right to practise within seven miles of London, was examined and rejected by the censors?—Yes.

204. Was that gentleman a lecturer in one of the schools in London?—That I am not aware of.

205. Do you know whether he was examined by a lecturer in a neighbouring school in the metropolis?—Very likely; I really cannot charge my memory with the data at present.

206. Does one black ball, after the examination has taken place, have the effect of rejecting the candidate?—No.

207. How many black balls must there be?—At the Board there would be five, the president and the four censors; and there must be a majority in order to exclude the party.

208. How long has the question been decided by a majority?—As long as I remember; I was a censor 30 years ago, and it was decided by a majority then.

209. Do they decide openly and in writing, or do they decide by putting balls into a box?—There is a ballot, but there is no secret about the voting.

210. It is decided by ballot?—Yes; every gentleman puts in a ball.

211. And in the absence of the candidate?—Yes.

212. Have you called a meeting of the fellows of the college generally with reference to the Medical Registration Bill now before Parliament?—Yes, we have had several meetings upon it.

213. Has there been a meeting of the fellows specially convened to consider the Bill?—It was considered by a committee appointed by the vote of the college.

214. Was there a general meeting of the fellows of the college when the committee was appointed?—Yes, I believe so, but we have had so many meetings of the college that I cannot speak with certainty.

215. Do you recollect when that meeting was held?—No, I do not.

216. You say that a report on the Bill was made by a sub-committee consisting of six fellows?—Yes.

217. Do you know whether that report has ever been considered by the fellows generally specially convened for the purpose?—Yes.

218. Have you thought it to be your duty to convene a meeting of licentiates and extra licentiates, with reference to this measure?—No, I have not.

219. And no such meeting has been held?—No.

220. The fellows of the college constitute at the same time only a minority of the entire body of physicians belonging to the college?—Certainly; 160 as compared with 276.

221. Can you state, on the average, how many graduates from Oxford and Cambridge are examined for fellowships every year?—There is no examination for fellowships.

222. Will you state precisely what are the arrangements made between the college and the Universities of Oxford and Cambridge, with regard to graduates of Oxford and Cambridge who desire to practise generally?—There is no arrangement. The College of Physicians do not recognize graduates of Oxford and Cambridge as entitled to claim any privileges; they are examined in the same way as any other licentiates.

223. You make no distinction with respect to them?—No.

224. There is no peculiar arrangement between the college and the universities?—None at all.

225. Can you state how many of the graduates of Oxford and Cambridge are examined by you in a year, with a view to obtain a licence to practise?—I should say that most of those who have graduated at Oxford and Cambridge come to us; there is hardly an exception, but I cannot state the number.

226. Generally speaking, they are not extra licentiates?—No.

227. *Chairman.*] Have not the graduates of Oxford and Cambridge a right to practise beyond the circle of seven miles?—Certainly.

228. Mr. *Wakley.*] What do you deem to be the requisite qualification of a candidate

candidate for the fellowship?—That is a matter of consideration with the committee; we go over the list of licentiates and discuss the matter very fairly as to the merits of each, and then propose to the college those members that we think are eligible to the fellowship; there is a body called "The Consiliarii," which is a committee appointed by the college for this express purpose.

229. What is the difference in the examination for a licence generally and an extra licence?—There is now no difference; that is under a recent regulation.

230. You stated that there was a fellow of the college who had been requested not to appear within the college, in consequence of some unprofessional conduct of which he had been guilty, and for not attending the college when he was summoned; is there any objection to your stating what was the nature of that unprofessional conduct?—It was in connexion with the case of a very well known person of his day, Mr. St. John Long; in consequence of some very unprofessional conduct upon the occasion of the death of a patient under the care of Mr. St. John Long, the physician was summoned to appear before the college.

231. Have you any fellows of the college who practise mesmerism at this time?—I believe there are some.

232. Is it not notorious that such is the case?—Yes, it is notorious that one fellow of the college does practise mesmerism.

233. Has he received any censure from the college?—No.

234. Since he has so publicly practised mesmerism has he been permitted to deliver a public oration in the college?—He has.

235. He was selected voluntarily for the performance of that duty, was he not?—Perhaps I may be allowed to explain the circumstances under which he was appointed. The appointment rests with the president; and the rule is, that each fellow in succession should have it offered to him. When it came to the turn of this gentleman, finding that no public notice had been taken of this by the college, but that he was, so far as the college was concerned, *rectus in curiâ*, I felt it to be my duty as president not to pass him over, and I therefore appointed him.

236. You did not think that the practising of mesmerism openly was a sufficient ground for depriving him of that distinction on such an occasion?—No. As the college had not interfered I did not think it right that I should do so.

237. You have stated that you consider that, by clauses 3, 10 and 31, in the Bill now before Parliament, medical practitioners would be reduced to one grade?—That is my opinion.

238. Can you point out any portion of those clauses which justifies you in stating that opinion?—I think I can.

239. Probably the shortest way would be to direct your attention to the manner in which the registration is provided for in the schedule?—Then I beg to say that I entertain great objection to schedule C.; it is very true that you register the qualifications and their dates, and the college from which the parties have obtained those qualifications, but then comes this part, "the places of residence of registered medical practitioners (arranged alphabetically);" it is that part of the schedule which the public would consult; and supposing a person were at Bristol and wished for a physician, there is no intimation that the medical man is a physician; merely the name appears and the address, without any qualification being stated; that is a great objection.

240. Then your objection is to the alphabetical arrangement of the names without the qualification being stated?—Yes, that is one objection.

241. If the alphabetical arrangement were omitted, would your objection cease?—As far as that goes my objection would cease, but then there are many other objections; it appears that the gentlemen's names are registered according to the different qualifications, but the moment they are registered they can practice in any department; they are not restricted; there is nothing in this Bill to prevent a physician practising as an apothecary, or an apothecary practising as a physician.

242. You deem that to be objectionable?—I think it is highly objectionable, because it reduces the profession at once to what is commonly called one grade; there is an end of all distinction.

243. Does not the arrangement in the schedule now before you show distinctly what the qualification of each person registered is?—It shows the quali-

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fication which entitles the parties to be registered, but being registered they can then practise as they please.

244. Still opposite to the name it is shown from what university or college the diploma or licence has been obtained, and the date at which it was acquired?—Yes.

245. Can you conceive that any fairer system of registration could be adopted?—Yes.

246. You believe that it would be fairer to register the three classes under the titles of "physicians, surgeons, and general practitioners"?—Yes.

247. In point of fact, practically, is not the medical education of an apothecary the same as the medical education of a physician?—I should say not.

248. What is the information which, in your opinion, ought to be possessed on medical subjects by a physician which an apothecary ought not to possess?—I think that an apothecary should understand, as far as he is able, everything that the physician knows; he has to treat the same disease, and therefore it is very desirable that the apothecary should be acquainted with all the circumstances of disease, and the mode of curing it, as well as a physician; when he is called upon to treat a case it is highly desirable that he should have all the information which can be obtained; that seems to be obvious.

249. As physicians frequently are not at hand in remote country districts, do not you consider that it is most important for the interest and welfare of the public that the apothecary or general practitioner should be a highly educated man?—Yes.

250. Is there any information, medically speaking, that a London physician ought to possess which ought not to be possessed by such a practitioner?—No.

251. In what respect is the medical education of a general practitioner inferior to the medical education of a physician?—That is a matter of opinion; as far as my opinion goes, I think it is inferior.

252. Can you explain the circumstances which induce you to form that opinion?—I think that a physician devotes more time to his education than a general practitioner. As far as my experience goes, the physicians with whom I have been acquainted have attended very closely, and have devoted considerable time to the study of their profession. From the nature of their avocations, physicians cannot come into practice at so early a period of life; the general practitioner has an opportunity of starting much earlier, and the physician therefore has greater opportunities of study.

253. Have not general practitioners greater opportunities of acquiring experience?—No doubt they have great opportunities.

254. Do you conceive any portion of medical education to be of more importance than the one which furnishes experience?—No.

255. Is there any part of medical education, in fact, which conveys more practical and useful knowledge than experience?—No; experience at the bedside certainly conveys the most useful knowledge.

256. May not much time be expended in acquiring information during a protracted period of education, and yet not much experience gained?—It may be so; but the experience to which I allude is the experience at the bedside in hospitals.

257. In the treatment of the sick?—Yes.

258. I must still return to the question, and ask, if you please, if there be any subject, medically speaking, with which you consider the physician should be acquainted, of which the apothecary or general practitioner ought not to possess a knowledge?—No; I believe I have answered that.

259. You have stated that in your opinion clauses 23 and 24 do not provide for securing an equality of education in the different universities and colleges throughout the kingdom; in considering this subject, has it occurred to you to make any suggestion or proposition to the Government upon the subject, because you say that you have not the least objection to a reciprocity of rights between London, and Edinburgh, and Dublin, provided equality of education and attainment could be secured; have you considered any plan by which that object can be attained?—No, I have not; none that has satisfied my mind.

260. Under the operation of those clauses, would it not be the duty of the various colleges and universities which are empowered to grant degrees and licences to send their curricula to the Secretary of State, and would it not be his duty to submit them to the Queen in Council, and the whole of them being considered

considered and taken as one, why do you not believe that Her Majesty in Council would consider it to be her duty to adopt, as far as might be, the recommendation and wishes of the different institutions, as expressed in the rules which they had transmitted?—If Her Majesty was advised that the regulations were salutary and useful to the profession and the public, of course she would do so, I presume.

261. Do not you believe that the institutions having the highest character would be those of which the rules would be adopted?—I cannot answer that question. I do not know how far it would be convenient for the different colleges; they must be remodelled many of them. It would be an extremely difficult thing, and almost impossible, to get the uniformity which we desire, but if it can be obtained we have no objection to a reciprocity of privileges; but first of all let us have uniformity of education.

262. Your acquiescence appears, from the conclusion at which you have arrived, to depend upon that which is almost a perfect impossibility?—I see the difficulties that there are.

263. The difficulties, without doubt, are great; can you make any suggestion to the Committee as to any mode by which they may be overcome, other than as contained in the 23d and 24th clauses of this Bill?—I am not prepared to answer that question. If it were referred to the college, and they were consulted upon the subject, I have no doubt that some suggestion would be thrown out; but calling upon me at the moment to propose a plan upon a point which has puzzled every Member of the House of Commons who has meddled with it, I think is calling upon me to do rather too much.

264. Has any plan at all been considered other than those which have been proposed in the Bills which have been before the House of Commons?—No, we have not considered any plan by which we might ensure uniformity of education.

265. You have complained that under the Bill the visitor appointed by the Secretary of State might be a surgeon or an apothecary, who might be present at your examinations?—Yes.

266. You deem that to be an offensive provision?—I think it is. I do not say that invidiously.

267. Might not a surgeon or an apothecary be found who would be competent for such an office?—It is very likely.

268. You mean that you think it would be unsafe to trust the Secretary of State with such a power?—I do; he has not the judgment necessary to select the visitor, or, I should say, the assessor.

269. You say that you think the profession ought to be registered in grades?—Yes.

270. If they were registered in grades, would you not state their qualifications?—Yes; there is no objection to stating their qualifications.

271. Whence the necessity of registering them in classes, when, as in the schedule proposed to the Bill, the qualifications can be all registered opposite the names?—As far as registration goes, if you will register the medical men according to their grades, and state what their qualification is, that is a good registration, and of that I do not complain; but that is only part of the Bill.

272. You would divide them into three classess; the highest, the middle, and the lowest class?—I would not call them higher or lower; I would call them "physicians, surgeons, and general practitioners."

273. The expression that you used was "grade;" do you think that it would add to the dignity or character of the profession to exhibit the greatest body of the profession as its lowest class?—I would not do so. I deny that I represent medical practitioners as the lowest class; it is not my intention to do so, and the use of the word "grade" does not convey an idea of inferiority. The word "degree" is used with reference to bachelors and doctors of medicine in the universities, but no inferiority attaches to the term "bachelor," though he is of a lower grade than the doctor.

274. Then do you admit that there is no inferiority of attainment on the part of the general practitioner, as compared with the acquirements of physicians?—I am now merely referring to the expression of high and low.

275. But have you not, in the previous part of your examination, insisted that there is a difference, and that that difference consists in superiority with

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reference to physicians, and inferiority with reference to general practitioners?—Yes, I have stated that.

276. You have stated that you believe that there is but one opinion respecting the objectionable nature of the requirement of an annual payment from medical practitioners for registration; have you communicated with any medical bodies on the subject, besides the fellows of your own college?—Yes; I have conversed with others on the subject.

277. Are you aware that there are an immense number of petitioners in favour of the Bill?—Very likely there are.

278. Are you aware that a very high annual charge is paid by solicitors in this country?—I am not aware of it.

279. And that they make no objection to the payment itself, but merely to the amount of it?—I am not aware.

280. You state that the registrars would have to settle nice points as to qualification?—Yes; I can suppose that points may arise which would require a good deal of judgment on the part of the registrars.

281. At first there might be some difficulty, but in the subsequent working of the law do you think that there would be any?—I cannot tell.

282. To what clause of the Bill do you refer as indicative of the opinion that you have expressed?—The third clause, which is in these terms: "And be it enacted, that the several registrars shall, within 30 days after their appointment, and from time to time afterwards, register in books to be kept for that purpose the name and place of residence, together with a description of the legal qualification or qualifications of every physician, surgeon, or apothecary, who shall apply to be registered;" that gives them a power of deciding on the qualification.

283. The qualification has been decided upon already; the registrar is merely called upon to register it?—A question may arise as to the qualification. I conceive that there may be doubts as to the qualification; the registrar may be called upon to decide it, and there seems to be no check upon the registrars; they may register whom they please.

284. Does not the Bill provide that the registrar shall be liable to be indicted for a misdemeanor if he registers any person improperly; and if a person has obtained registration by fraud, is not the registration invalid?—If the registrar registers a person improperly from a corrupt motive, he is liable to be indicted; but the case that I put is a case in which he may exercise his judgment, and it may be done with great rectitude, without any corrupt motive.

285. You stated that you believe that compacts exist, to a considerable extent, between physicians and chemists and druggists, in the metropolis and other places; but you say that you do not consider that such compacts have been entered into by fellows and licentiates of the college?—We have an express law against it.

286. Do you believe such compacts to be of a discreditable character, and injurious to the public interests and to the character of the profession?—I do.

287. Have you prosecuted any of those parties?—No.

288. If you believe they are so injurious, why have you omitted to prosecute?—We have not the power; we have not the means of prosecuting; we have not the funds.

289. Then what power at law can the college now exercise for the benefit of the profession, with reference to improper practices on the part of physicians?—We can prosecute them for practising; there is a penalty of 5*l.* a month if they are unlicensed. Any physician who practises within London, or seven miles, is amenable to this law, and he must pay 5*l.* for every month that he practises; and which we can recover by law.

290. But in point of fact, the powers of the college at law are so weak and so paralyzed that they have not thought it their duty to attempt to punish parties who have entered into such compacts, although you deem those compacts in the highest degree injurious to the character of the profession?—I do not consider the law weak; the law is strong, but we have not the means of carrying it into effect.

291. You mean you have not money?—We have not money.

292. Sir *J. Graham.*] Is 5*l.* a month the penalty attached to practising without a licence under the statute of Henry the Eighth?—Yes, 5*l.* a month; and we are bound to prove that he has practised the whole month.

293. At

293. At that time 5 *l.* a month was a most heavy pecuniary penalty?—Certainly.

294. Contrasting the value of money then with the value of money now, it must have been most operative then, though it has ceased to be operative now?—Certainly.

295. Mr. *F. French.*] In saying that you have no power, do you mean to say that you have no legal power over your own fellows and licentiates or extra licentiates?—We have no legal power, certainly; there is a law which has not been put in force for a great many years, prosecuting for *mala praxis*, and sending to prison.

296. *Chairman.*] Have you any power of prosecuting on the ground of those compacts with chemists and druggists, which you think are so pernicious?—I doubt very much whether we have.

297. Sir *J. Graham.*] It would be a question for the Judge and jury, whether such compact fell within the term *mala praxis* or no?—Yes.

298. Mr. *F. French.*] Is not there a law directly condemning practices of that kind, to which all your fellows and licentiates are subject?—There is a statute of the college.

299. Do you mean to say that you could not enforce the statute of the college against parties upon the discovery of such practices?—If it came to our knowledge that any fellow or licentiate was guilty of such a practice, we should feel it our duty to call him before us and censure and fine him.

300. Are you aware that one college have gone as far as expulsion against their fellows and licentiates who act contrary to the regulations of the college?—Yes.

301. Mr. *Acland.*] You do not believe that any licentiates of your college do enter into such compacts?—As far as my knowledge goes I do not think that any fellows or licentiates are guilty of it; there may be, but I am not aware of it.

302. Mr. *Wakley.*] You stated that you considered the penal provisions of the laws, under which you now exercise your functions, to be virtually abrogated?—I think I may say that.

303. And yet you subsequently stated that you did not consider that it would be safe further to relax the restrictions you now possess. How can you relax restrictions virtually abrogated?—I spoke of various restrictions, not only legal restrictions.

304. What are the others?—In the 9th clause. The general moral influence of the college in contradistinction to the legal powers, which I consider to be very considerable.

305. Does the Bill interfere with the moral influence which the college might exercise?—Decidedly.

306. Does it interfere with your internal government?—No, certainly not; it does not interfere with the internal administration of the college at all.

307. Does the Bill prevent you from creating honorary distinctions and rewards for eminent services rendered by persons who may be members or fellows of the college?—The great mischief the Bill will do to the college is indirect; I sincerely believe that the order of physician will cease to exist if this Bill passes.

308. Would you not infer from that, that the public do not want them?—No; I speak from my own knowledge; a general practitioner this morning told me that if this Bill passed he should withdraw his son from Oxford; and he is a leading member of the body calling itself the National Institute of Medicine; he said that it was not his intention to bring his son forward as a physician if this Bill passed; that he considered that the character of the physician would be entirely lost.

309. Did he explain how the public would sustain any loss from that circumstance?—No.

310. Sir *R. H. Inglis.*] Did you collect from him that his understanding was that the effect of the Bill would be to swamp the different branches of the profession into one undistinguished mass, and that it would not be worth the while of any man to educate his son expensively for that which is now the degree of a physician, when a person without any education, comparatively, might be placed on the register, and being in point of fact an apothecary only, might be eligible to practise as a physician in London, or in Edinburgh, or in Dublin?—I so understood it.

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311. Mr. *F. French.*] Do you think it essential for the welfare of the public that the profession of pure physician should continue to exist, or do not you consider it necessary that, for a person to practise either physic or surgery to the advantage of the public, he should be educated in both?—A physician should be acquainted with all the branches of his profession; he should be accomplished in all branches.

312. Colonel *Wood.*] You have referred several times to the general practitioners; is not that a new designation in the profession?—Yes.

313. How long has that designation been common?—I think it is within 20 years that the term has sprung up. The old fashioned term was "surgeon-apothecary."

314. Is there any proposal to have a separate institute for general practitioners?—Such a proposition has been made.

315. From whence has that arisen?—From a number of general practitioners, who are desirous of being incorporated as a distinct body.

316. How has it arisen that the College of Surgeons and the Society of Apothecaries have not been satisfactory to the general body?—I do not know; I cannot answer that question.

317. Can you inform the Committee as to the numbers that have joined this institute of general practitioners?—No, I cannot.

318. Is not there a division of opinion and feeling in the profession in regard to the College of Surgeons and the Society of Apothecaries?—I believe there is.

319. Are you aware at all of the intentions of the founders of this institute, the general practitioners; do they propose this institute as a rival to the College of Physicians or the College of Surgeons; what is their object?—I cannot undertake to say what their objects are; I have not had any communication with any of them.

320. Would it be too much to ask whether you approve of the institution?—I must know something more of it before I can give any opinion upon the subject.

321. Surely, from your general knowledge of the profession, you must know the objects that the persons have in view?—I do not think that such an institution is required, either for the profession or the public.

322. Has it arisen from too exclusive a conduct on the part of the College of Surgeons or the College of Physicians?—Not the College of Physicians. The College of Physicians, surely, have nothing to do with it.

323. On the part of the College of Surgeons?—As regards the College of Surgeons, there has been dissatisfaction amongst a number of the practitioners with reference to the manner in which the College of Surgeons have conducted themselves with reference to their charter.

324. Are you not of opinion that a new institution would be injurious to the profession generally?—It would not be beneficial.

325. Mr. *F. French.*] You were understood to say that you consider that the general practitioner has more experience than the physician. Upon what do you found that opinion?—I do not think that I gave any answer of that kind. If I gave such an answer it was under a misconception of the question.

326. Will you state what is your opinion upon that point. Is the general practitioner more experienced than the physician?—I should say not.

327. Mr. *Acland.*] You were understood to say that you thought experience the most valuable part of the education of a medical man. Do not you think that the value of a medical man's experience greatly depends upon the extent of his preliminary education in ordinary cases, putting aside cases of extraordinary talent?—A man who has had an extensive preliminary education would be better able to avail himself of the fruits of experience.

328. So that the scientific and practical value of his opinion, derived from experience, would be enhanced in ordinary cases by the extent of his early education?—I believe so.

329. His powers of observation would be quickened, and his power of using what he observed would also be increased?—Yes.

330. Mr. *Bannerman.*] You stated that a number of extra licentiates crowded upon the college. At the time that the Right honourable Baronet, Sir James Graham, proposed his Bill, did the college offer any suggestions to the Secretary of State upon that Bill?—Yes.

331. Did they approve of the Bill?—They generally approved of the Bill.

332. Mr. *Wakley.*] Of what Bill are you speaking?—The last Bill. It was corrected and amended in various ways, and then the college were satisfied with it, with certain exceptions, and were willing to assist in rendering it acceptable to the profession.

333. Mr. *Bannerman.*] Was it approved by the College of Physicians?—Yes, with the exceptions alluded to.

334. Mr. *F. French.*] One objection which was stated to this Bill was, that it would throw open the power of practising to persons who had graduated in every part of the United Kingdom; and your objection appeared to be founded on the fact that the education was not equal in different parts of the United Kingdom?—Just so.

335. But is it not the fact that you equally exclude those who have a higher standard of education than you have laid down in your college, as well as those who have a lower standard?—We exclude none, if they come before us to be examined.

336. You say that one objection to the Bill is, that it would throw open the practice to persons having degrees from different colleges, in all parts of the kingdom; do not you now in effect exclude the members of colleges who have a higher curriculum than you have, as well as those who have a lower one?—I am not aware of any college having a higher curriculum.

337. Has not the Dublin College?—I believe not.

338. Mr. *Acland.*] You were understood to say, that you did not object to a registration of the existing qualifications of medical practitioners, and that you would yourself suggest that they should be arranged under three classes; would not there be a practical difficulty in taking the three classes which you mention, physicians, surgeons, and general practitioners; the term, "general practitioner," as I understand, is not a legal term at present, and there is no examination which directly corresponds to it?—An arrangement might be made between the corporate bodies of surgeons and apothecaries.

339. So that the third class would be a class of persons who had passed two different bodies?—Yes.

340. Might there not also be persons who had passed only one of those; as, for instance, apothecaries?—Then they would be registered as apothecaries. You must have a fourth class.

341. Must there not be a distinction also amongst the surgeons?—There is no distinction recognized in that way. I am not aware of any distinction that exists.

342. In fact you must have more than three classes; you must have physicians, surgeons, apothecaries, and general practitioners?—Those that practise surgery and medicine generally indiscriminately.

343. You were asked by the chairman whether, if a long course of education tended to success in the profession, in the event of all classes being put on a level, the value of that longer education would not lead persons to seek it for themselves, and you said that it would; do you or do you not think that practically the desire to form connexions for practice operates so strongly on the minds of ordinary students, that, except in cases of extraordinary strength of mind and ability, the tendency would be that young men would rush too early into practice instead of lengthening their education?—It might be so.

344. If that result did follow, would not the putting all classes upon a level, in fact, put a very great temptation in the way of young men to shorten their education rather than to attain that higher education which the Chairman thought that the ordinary motives of human nature would lead them to secure?—I do not think so; there might be instances where there would be great anxiety to get into practice, neglecting their education.

345. You say that the effect of this Bill would be to do away with the class of physicians; I understood the Chairman then to elicit from you an answer to this effect, that that would be of very little consequence, because the ordinary motives of human nature would still lead men to protract their education for the sake of the ultimate advantage which they would derive from it; do not you believe that, in fact, the effect of so doing away with the distinction of the class of physicians, would be to lead men all to be educated very much alike?—Yes; now I understand the question; there would be that tendency.

346. Do you believe that, except in cases of very great ability, a great number

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of young men who now go through a long and expensive education, because they mean to be physicians, would not do so under those circumstances?—Certainly.

347. Therefore do you believe that the existence of these distinct and recognised classes as they now exist, induces many young men of ordinary abilities to go through a long course of education, which, if this distinction were done away with, they never would go through?—Yes; in order to get the reward of the highest rank of the profession. A very inferior education would secure all the success which now requires a more extended education.

348. *Chairman.*] Do you happen to be acquainted with the system under which gentlemen are called to the Bar?—Yes.

349. Are you aware that a person might be called to the Bar, and enter upon legal practice at a much earlier age if he did not receive a university education, than he could do if he went through a university education, and remained at college, as the most distinguished men often do, to contend for fellowships and other college distinctions?—Yes.

350. Yet you are aware that the flower of the legal profession consists of men who have not hastened into the profession as early as they could, but have remained at the university, cultivating their minds there until they were three or four-and twenty?—Yes.

351. Have you any reason therefore to believe that in your liberal profession a similar course would not be taken by those who had the means of taking it?—I apprehend that the cases are not similar. The barrister feels that by gaining academical honours he would have a better chance of success in his profession. Now, really, I feel myself that that does not apply to the medical profession; if you take away the honours of the profession, I do not think that that argument would apply. If the humble apothecary could accomplish all that the physician now obtains, is it likely that any person would go to the expense of an extended education, when the most humble means would effect the desired end?

352. Do you not conceive that a general liberal education in science and literature is as important to a medical man as it is to a lawyer?—No doubt.

353. And that it will as distinctly be felt in the future practice of a medical man as the academical attainments of Lord Mansfield and Lord Ellenborough were felt in their professional career?—No; I cannot acquiesce in that.

354. Am I to understand you to say, that though a liberal education and an extensive knowledge of science and letters makes a man a better physician, it has no tendency to give him more practice?—With certain classes it may; but the medical profession is unlike any other.

355. Will you be kind enough to explain your view of the difference?—The race is not always to the swift, nor victory to the strong. There is a great deal of chance in it.

356. Is there any profession with respect to which persons are led by so strong a motive to look out for the best man as when they are choosing their physician?—No. Certainly they will find the best man in their judgment if they can.

357. Is it not the fact that persons who have been at the head of the practice have generally been men of the highest qualifications in the profession?—Generally I may say so.

358. If, therefore, an academical education, a liberal education, has a tendency to give a man the highest medical qualifications, is not it probable that it will also be the avenue to the highest practice?—Yes.

359. Mr. *Lascelles.*] It was stated on the Medical Relief Committee that the reputation of a medical man is founded chiefly upon the estimation in which he is held by the profession itself; is that so?—Not generally.

360. Mr. *Acland.*] That may perhaps operate with officers in hospitals, persons who practise in the face of the profession; but should you apply that to the poorer class of persons who obtain humble practice in obscurity?—Certainly not.

361. A person may obtain very great practice, perhaps, who may not be highly esteemed by his brother professional men?—No, he may have very slender qualifications.

362. Is not there this very great distinction between the Bar and, the medical profession,

profession, that the general tenour of ordinary medical practice is not pursued in the face of the profession?—Certainly.

363. And, therefore, the same amount of test is not brought to bear upon a man till he rises to that pitch of the profession that he is obliged to practise in the face of his professional brethren?—Certainly.

364. Would not that make a very great difference, with reference to some of the questions which the Honourable Chairman put to you?—Certainly.

365. Colonel *Wood*.] In any legislation for medical reform ought not provision to be made for the separation of the practice of pharmacy, and that of physic and surgery; that is, that general practitioners should not be allowed to charge for their medicines?—It would be a very good plan to make a division. The person who prescribes should not be the person to furnish the medicines, certainly, in my opinion.

366. And that if he does furnish them, he should not be allowed to charge for them?—Certainly; there is no objection to his furnishing them if he is not to receive any emolument from them.

367. Mr. *F. French*.] Is not the only remuneration received by the general practitioner, the price he gets for his medicine, as he takes no fee?—Many of them do.

368. And charge for medicine also?—Some charge for medicine, and also take fees; others take fees, and do not charge for medicine.

George Burrows, Esq., M.D., called in; and Examined.

369. Sir *J. Graham*.] YOU are the Senior Censor of the College of Physicians?—I am.

370. Your attention has been directed to the several measures which have been brought before Parliament lately with reference to establishing equality of practice throughout the United Kingdom, on the assumption that equality of attainments can be secured?—My attention has been directed upon various occasions to this subject.

371. Has your attention been directed to the last Bill brought before the House of Commons, "for the registration of qualified practitioners, and for amending the law relating to the practice of medicine" throughout the United Kingdom?—I have read the Bill with considerable attention.

371*. Have you formed such an opinion with respect to it as to be able to tell the Committee what, in your opinion, would be its bearing upon the distinct classes into which the medical profession is now divided; would it, if it became the law, enable the subdivision, in practice, between the physician, the surgeon, and the general practitioner, to be retained, or would it establish, in your opinion, one faculty?—My opinion is, that the operation of the Bill, if it became the law, would be to disorganize the profession as it is now constituted, and that it would ultimately lead to the establishment of only one class of practitioners; in fact, the establishment of what is popularly known in the profession as the one-faculty system.

372. Will you point out to the Committee what are the provisions in this Bill which lead you to the opinion that it would have that effect?—I would particularly call the attention of the Committee to clause 10, in conjunction with clause 31, which is the interpretation clause, and the terms made use of in the medical registration certificate in Schedule B. It is by the operation of those two clauses, in connexion with the language made use of in the medical registration certificate, that all medical practitioners would be placed in one list and be reduced to one class of faculty; and by the mode of registration, and by the language adopted in the medical certificate, all who are registered under this Act, whatever might be their respective literary, scientific, or practical qualifications, would obtain the same privileges, under this Bill, if it became the law, and have the same licence to practise, if they pleased, as physicians, as surgeons, or as apothecaries, or as physicians and surgeons, or as physicians and apothecaries, or as physicians, surgeons, and apothecaries, all at the same time; and a person might pursue those three parts of our profession, and might, at the same time, be engaged as a chemist and druggist with an open shop; and in this way he might be pursuing all the different branches of our profession conjointly, at the same time, in any part of the United Kingdom. I

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maintain, from the best consideration that I have given to those clauses, that that would be the operation of them.

373. In clause 10 the words used are, that the registered person is entitled "to practise medicine throughout that part of the United Kingdom for which his certificate was issued;" then clause 31 gives an interpretation to the word "medicine," that it includes the words "physic," "surgery," and "surgical"?—Just so; it is from that partly that I arrived at that conclusion.

374. The medical registration certificate in Schedule B. declares the person qualified to practise medicine in any part of England and Wales, as the case may be?—Precisely so.

375. Taking the interpretation clause, which defines the meaning of the word "medicine," and the certificate of registration with respect to practising medicine, is not the inference irresistible, that a party so registered, or so holding a medical certificate, may under that certificate, and under the registration, practise physic and surgery simultaneously?—That is the way I understand it.

376. Without any separate examination?—So it appears to me. A person who has passed an examination to practise as an apothecary according to the present law would, by the operation of this Bill, if it became the law of the land, be able to practise all parts of the profession; he would be able to practise as a surgeon or as a physician, without having been examined in his knowledge of surgery or of the higher branches of medicine.

377. The Apothecaries' Company is a trading company?—I believe it is.

378. The examiner under the Apothecaries' Act need not of necessity be a medical man?—I believe that might take place. It is in the power of the master and the court of assistants to appoint any of their members to act in that capacity.

379. A party obtaining his licence from the Apothecaries' Company under the apothecaries' examination, and who might possibly have been examined by a person not a medical man, might under the operation of this Bill, as you consider, be entitled to practise physic and surgery throughout the United Kingdom?—That appears to me to be just possible: but of course I think it is highly improbable that the Society of Apothecaries would commit themselves so far as to appoint an examiner who had not had a medical education.

380. But by the law, as it now stands, there is no security against it?—No.

381. Mr. *F. French.*] There is no necessity for the examiner for the apothecaries' Company being a medical man?—I am not very conversant with the law of 1815, under which the examination is conducted.

382. But it is not necessary for the duty of the apothecary that he should be acquainted with the structure and functions of the human frame?—For an apothecary in the present day, it is quite essential that he should.

383. Sir *J. Graham.*] Have you looked at clause 9 of the Bill?—I have.

384. Does it, in your opinion, virtually, if not in terms, repeal the Act of Henry the 8th, under which the College of Physicians is recognized by statute?—This clause 9, taken in conjunction with the other enacting clauses, this being a repealing clause, most undoubtedly takes away from the College of Physicians those duties which have been imposed upon it by its charter, confirmed by the Act of Henry the 8th.

385. What are the principal duties?—The first and most important is the direction of the education of physicians for England and Wales. The second is the examination into the qualifications of those physicians before they commence the practice of their profession. Then we are bound to admit them and register their names; and we are also bound by our charter, as censors, to exercise a supervision over the moral conduct of our members in the exercise of their professional duties. By various clauses of this Bill, those various duties are assigned to other persons or to other powers.

386. Clause 23 takes away the power of examining from you, does not it?—Clause 23 takes away from us the power of directing the education of physicians. That is taken out of the control of the College of Physicians.

387. Clause 16 takes from you the power of controlling *mala praxis*?—I think completely. It must be obvious, that under this Bill no notice can be taken of any *mala praxis*, except five brother practitioners club together and get up evidence against any practitioner in the neighbourhood; and

and then, instead of applying to any corporate body or college in the town or part of the country where the man is residing to examine into the particulars, they are compelled to go, at their own cost, and at great trouble, perhaps, to the extremity of the kingdom, to the University of Dublin or Aberdeen, where the person happened to obtain his original diploma or licence, and there they must establish their case. It might so happen, that in a small locality a new person might come who is a subject of jealousy to the neighbouring practitioners, and they may club together to ruin the man and get up a case against him, and cite him to some distant spot to answer for his conduct, although there may be no truth in the charge, and very little evidence to support it, and very great hardship would be incurred by the individual. On the other hand, if a man had been really guilty of *mala praxis*, it would be incumbent upon five gentlemen engaged in practice to club together to bring the case before the consideration of a body situated in one of the sister kingdoms; so that, with reference to preventing *mala praxis*, or to encouraging angry feelings in the profession, I cannot conceive any clause being worded more unfortunately than this is. Of course, under those circumstances, you take away from the College of Physicians the control over the practising physicians in England and Wales.

388. Clause 9 virtually or directly repealing your power of licensing in the metropolis, and the circumjacent circle; clause 16 interfering with your control over the moral conduct of the practitioners; and clauses 23 and 24 interfering with your inspection and supervision of the examinations for practice within the metropolis; and the new mode of registration provided by the Bill being substituted for your registration, what would remain of the College of Physicians if those various enactments were to become law?—We should be a college with nothing more than a name; we should be called the College of Physicians of England, but our only functions would be to perform the duties which are imposed upon us by private benefactors. Certain private benefactors have given us certain sums of money, that certain lectures may be delivered every year. I believe that that is the only duty that would remain to us.

389. The walls would remain, but the powers would be gone?—Utterly gone.

390. For what purpose would any student of physic desire to become a member of a body so emasculated?—I conceive that his only object would be that he might wish to belong to a medical club. It would be reduced to a small medical club.

391. That would be the condition to which the College of Physicians would be reduced if this Bill were passed?—I feel quite assured of it.

392. As relates to those members of the college who have risen to eminence, and are filling high stations, personally they would sustain litttle loss from such an overthrow of the college?—The effect would be rather upon the profession in future generations than at the present time. To the leading members of the college the duties are frequently a very great and oppressive charge at the present moment, both upon their time and upon their funds. But in future ages there would be, in fact, no College of Physicians, and no order of physicians; there would be no inducement to become a physician.

393. The practice would be all merged in one class, possessing equal privileges, and reduced to one common level?—There is no doubt that practitioners would be satisfied with the lowest qualification which the law would sanction their practising upon; they would commence regular practice at an early age with that qualification, and their attention would be directed to the arts of obtaining practice, and they might become fair practical men; but you would have no men of extended or liberal education; such men would not enter the profession if they were to be placed side by side with those who have only the lowest qualification. A man who had only the lowest qualification would be entitled to hold the same rank and privileges as one who had expended a long time in a liberal education.

394. You are one of the censors of the College of Physicians?—I am.

395. Is the duty of the censor limited to examination, or is it his duty to exercise some moral supervision over the conduct of the profession?—Yes; we are bound in the words of the charter to exercise considerable moral control over the members of our body, as well as to take notice of those who are practising as physicans without having obtained a licence. There are other duties,

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such as inspecting the condition of apothecaries' shops in the city of London, to see that the drugs are good.

396. Are you aware that in the charter recently granted to the College of Surgeons, a more summary power of expulsion for misconduct was granted to that college, with reference to the members of the body?—I am aware of it, and thought it an admirable clause.

397. You are aware that the College of Physicians applied to the Secretary of State for a new charter, granting them equally summary powers over the members of their body which the Crown granted recently to the College of Surgeons?—The College of Physicians has been in constant communication with the Home Secretaries of three successive Governments. It has been most importunate with them to obtain considerable modifications of the charter, in order to make the body more popular and useful, to enable it to exercise a greater influence over the profession; and more especially they have asked to have the powers which they exercise confirmed by a clause such as that which has been now referred to.

398. Do you think, that though the power of punishment may be small, yet that the moral effect of the existence of such a power in such a body, really the head of the profession, is considerable in checking misconduct on the part of the members?—The body of physicians is but a small body. They are most of them men who commence their profession at a mature age, having gone through an extended education. They are submitted to protracted examinations before they are admitted as members of the College of Physicians; and if there is any slur upon a man's character, any doubt as to his moral character, he is not admitted. Therefore the instances of *mala praxis* on the part of the members of the College of Physicians are but few; the greater number of the members are enlightened men, and men of high moral qualifications. From those causes but few instances of *mala praxis* do occur. Since I have been censor, I have had to sit in a judicial capacity on more than one inquiry. Sometimes we have been able to obtain a satisfactory explanation of the circumstances; at other times we have been obliged to reprove, and even to remove names from the list.

399. Is the existence of that control in your judgment, founded upon experience, a salutary check on the conduct of members of your body?—It is salutary as far as it goes; but there are difficulties sometimes in carrying the power into execution. We want something to confirm it, to make it more certain.

400. The deficiency of the powers, as they exist, was intended to be met by the insertion of a clause in the charter, such as that which the Crown granted to the College of Surgeons with reference to expulsion?—That was the object we had in seeking for it, and it would have been no doubt salutary.

401. You have mentioned that physicians generally practising in London have not rushed early into practice, but have postponed the commencement of their practice with a view of prolonging their education?—That is the fact.

402. Have you a strong opinion that the establishment of a single faculty would diminish those motives, and would change the nature of the education of medical men?—I have a very strong opinion upon that subject.

403. Will you state your reasons for that opinion?—At the present moment there are very few English physicians who enter into practice in this metropolis who have not continued their studies up to six or seven and twenty years of age; they continue their education at hospitals or other public institutions, for six, or seven, or eight years; they expect at the end of that time to be able to take a certain position in the profession and in society; whereas if a person with the lowest qualification allowed by law can take his position by the side of a more highly educated person, there is no doubt that in the course of time young men would see that it was not worth their while to devote their whole time to acquire that position which others with far less study and expense would acquire, and in that way I think that an enactment which would enable a person of small qualifications to stand by the side of one who was highly educated, would operate most injuriously upon the profession.

404. The temptation, as far as income is concerned, to commence practice early is strong?—Very strong indeed naturally.

405. Forbearance to commence early practice in the hope of greater future reward

reward is therefore comparatively rare?—Very rare. It must be clear that as science extends, and as more subjects must be cultivated in order to acquire a full knowledge of medicine, a longer time is required; and it is impossible in the present day for any young man of 21 or 22 really to have mastered the principles of his profession. He may acquire a certain amount of practical knowledge, which will enable him to go out into the world, and, perhaps, to practise with safety; but he is not well grounded in the principles of his profession. He cannot have grasped the principles of the different sciences auxiliary to medicine, and if he goes into practice at that time he becomes little more than an empirical prescriber. There are a certain proportion of clever men who avail themselves of their opportunities of observation, and afterwards become able practitioners, but you do not find that they are the men who add to the science of their profession, however skilful they may be in the treatment of disease. You do not find that advances in science are made by those men.

406. You yourself are a graduate at an English university?—Yes; I graduated at Cambridge.

407. Without any undue prejudice in favour of the advantages of education which you yourself enjoy, in your view of the profession, do not you think that great benefit is to be derived from devotion, for a considerable period of time, to classical literature and general science, as preparatory to entering upon medical practice?—I hardly like to answer that question, it seems to me such an obvious truism, that an extended education must have that effect, wherever that education be obtained.

408. Do you think that medicine being an inductive science, the mind is well prepared for the use of induction by the course of training received in such an education?—I think it is highly conducive to the developement of the medical mind.

409. Is foreign travel and visiting foreign schools of medicine useful, in your opinion?—I think that no man in the present day ought to assume the position of a physician in this country, at least if physicians are to be the same class of men as they have hitherto been here, men of extended education, unless he has put himself to the expense and trouble of going to foreign countries and seeing what is done there.

410. In a large metropolis, such as this, where great multitudes are congregated, is not there great advantage in a subdivision of the labour of medical practitioners?—I should think that from the subdivision of labour, men in their respective departments arrive at much higher eminence and much greater knowledge of their particular subjects.

411. The postponement of the commencement of practice being, in your opinion, judicious, with the view of rising to eminence, and the subdivision of labour in a great metropolis like this into the different classes of practice being advisable, would not any legislative measure which introduced a single faculty as opposed to such subdivision, and as opposed to such postponement of practice, be injudicious and impolitic?—It would be most injudicious and impolitic, because after a certain space of time it would be found that the medical profession would be composed of a very different order of men to that which it is now composed of; and it would be found that the men who had had a liberal education, and who happened to be blest with ability, would no longer think of entering into a profession like the medical, but they would naturally turn their talents and education to other learned and liberal professions which we have in this country, where they would have fairer play than in the medical profession.

412. Is there not an advantage reflected upon the whole profession by having gentlemen at the head of it practising in the metropolis, by their literary education and by their habits entitled to take their place side by side with the distinguished members of other learned professions?—I should think it is very difficult to appreciate the great advantages which result to society from there being an order of men in the profession who have had an education with the members of other learned professions; from a certain class of the medical profession having been educated with the gentry of the country, and having thereby acquired a tone of feeling which is very beneficial to the profession as a whole, and which is reflected from those who have had the good fortune to have enjoyed those advantages, upon others who come in contact with them in professional intercourse in after life.

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413. It sustains, in your opinion, the dignity of position of the profession itself?—No doubt of it, and the moral tone of the profession.

414. Any course of legislation which should have the effect of degrading that moral tone will, as you think, be most pernicious, not to the profession only but to the public?—I think really the public, in their domestic circles, would be far greater sufferers than the mere members of the profession themselves.

415. Does not the practice of your profession admit its members into the secrets of families, requiring the exercise of the highest honour and the utmost fidelity?—It does, sometimes, to a most painful and trying extent.

416. If the moral training of our universities, and the most approved modes of education of the gentry generally of this country, be conducive to the attainment of that moral excellence, you think that it would be a great evil if the physicians of this country should be deprived of every motive to adopt that system of education?—I think it would be most serious not only to the profession but to the country at large if there were not temptations held out to some part of the profession to seek for the advantages which have been alluded to, particularly the educational advantages which have been alluded to.

417. Have you looked at the scheme of registration which is proposed in this Bill?—Yes, I have looked at the clauses which refer to the mode in which the registration is to be conducted.

418. Do you see any objection to the mode of registration proposed?—I think there are great objections to it.

419. Will you state what occur to you?—I think the objections are, that a much more simple mode might be adopted, something so very simple. First, I think, instead of the appointment of officers for the express purpose of registration, the whole thing might be carried on in the most simple manner by merely enacting that every person in each division of the United Kingdom, in whatever order of the profession he may be, should enrol his name in that college or corporation which is appointed by law to preside over his class in the profession in the country in which he resides. That is a principle of registration which was laid down by yourself two years ago, which appeared to me and to the College of Physicians generally a very admirable mode of registration. Beyond that, I strongly object to the mode of registration of this Bill in this respect, that those who are already entitled to practise their profession, and who have obtained that right at great cost and after long education, are not enabled to enjoy those rights without year after year presenting themselves at the register office personally; and I believe, as far as I understand it, each year they will be called upon to pay 5*s.* for their certificate.

420. In what clause is that required?—In clause 6 particularly; and if he fails in doing that by accident, he will be liable subsequently to pains and penalties, as not appearing upon the register. It appears, however, that if a person accidentally omits, he may afterwards obtain a certificate on paying 20*s.*, and be put upon the register. I think it is highly objectionable that those who have acquired a right to practise their profession at great cost should be compelled, year after year, to seek a fresh certificate, when the certificate might easily be granted, through a corporate body, with no expense to the profession, and without any expense to the public.

421. Are you opposed to the free admission throughout the United Kingdom of medical practitioners to equal privileges, if equal attainments can be secured?—Certainly not. I think that, whatever the Legislature does, it certainly should establish with uniform education in the respective classes of the profession, a reciprocity of the right to practise the different parts of the profession. The College of Physicians has intimated that over and over again, and wished to have some law passed to that effect; and they have stated that if the English standard of education could be established, they themselves were willing to waive their peculiar privileges, which they have enjoyed since the time of Henry the Eighth, and to receive their professional brethren from the sister countries, if they would only raise the standard of education to the English standard of education. That is one point which we dread: if the education is to be directed by the Secretary of State for the time being, there being no responsible adviser of the Secretary of State, we have no security but that our standard of education would be lowered to meet the standard of education now adopted in Scotland.

422. Your

422. Your belief is that the Secretary of State, himself ignorant upon medical subjects, must be guided by those medical gentlemen in whom he confides?—I cannot conceive any Secretary of State to have paid sufficient attention to the subject of medical education to be able to know whether any scheme of education be right or wrong himself; he must necessarily apply to somebody for information; and the probability is, that he would apply to his medical adviser or friend, in whose personal integrity he has great confidence, and he would be guided by him in a great measure. *G. Burrows*, Esq. M. D. 4 June 1847.

423. The party really exercising the power would be irresponsible?—Quite irresponsible.

424. Possibly unknown to the profession?—Unknown to the profession, and with a great liability to various changes, perhaps consequent upon a change of Government.

425. The Secretary of State would change, and the secret medical adviser would change also?—That would be the fact, I am afraid. It would be introducing politics into our profession, which, I think, in a liberal and learned profession like ours, ought to be avoided.

426. The maintenance of the standard of medical education will depend upon the view taken by the Secretary of State for the time being?—Quite so.

Lunæ, 7° die Junii, 1847.

MEMBERS PRESENT.

Mr. Acland.
Mr. Aldam.
Mr. Bannerman.
Mr. Dennistoun.
Mr. F. French.
Sir James Graham.
Mr. Hamilton.
Mr. Hawes.
Sir R. H. Inglis.
Mr. Lascelles.
Right Hon. T. B. Macaulay.
Mr. Wakley.
Colonel T. Wood.

THE RIGHT HON. T. B. MACAULAY, IN THE CHAIR.

George Burrows, Esq., M.D., called in; and further Examined.

427. Sir *J. Graham.*] AT the close of your examination on the last day of the sitting of the Committee, you expressed the opinion that efficiency of examination by the different bodies who were to grant licences under this Bill was not adequately secured; are you of opinion that sufficient precaution is taken by this Bill for the standard itself of medical acquirement?—No; I am not at all satisfied that sufficient precautions are taken to insure a high standard of education for the different grades in the profession; quite the reverse. I think that the mode in which it is there attempted to establish a uniform system of education, and the mode that is there pointed out of directing medical education, would be highly unsatisfactory, and very uncertain in its operation, particularly in reference to the scheme of education in the different branches of the profession being entirely in the hands of the Secretary of State, as I was mentioning at the conclusion of my last day's examination. I believe, that any gentleman who held that high office would be entirely, on these matters, uninformed; and he would be quite unable himself to decide what should be the qualifications of a gentleman who wished to take the degree of doctor or bachelor of medicine in either of the English universities of Oxford or Cambridge, or the University of Dublin, or any of the Scotch universities. I do not think any gentleman holding the office of Secretary of State would have time to acquire the information, or be himself possessed of the information, which would enable him to say what should be the qualification for a medical degree in any university, or the qualification of any physician, who should be a member of the College of Physicians, if there is to be a College of Physicians, or indeed the qualifications for any other grade in the profession. He must therefore necessarily look to other sources to guide him; and the *G. Burrows*, Esq. M. D. 7 June 1847.

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the probability is, that he would be guided by the judgment of some professional gentleman in whom he had confidence as his medical attendant, and that gentleman would most probably not have paid attention to the wide subject of medical education; and he might be influenced by prejudices and local feelings, without considering the whole subject, and the information so communicated to the Secretary of State would be given by an individual who was wholly irresponsible, and who was wholly unknown to the profession at large.

428. By clause 23, you will observe that the decision upon the scheme of education to be presented by the bodies granting licences, and the amount of the fees to be demanded for such licences, are to be submitted, not to the Secretary of State only, but to Her Majesty in Council; are you of opinion that a reference to Her Majesty in Council gives any better security for the adequacy of the standard than the exclusive decision of the Secretary of State would afford?—I am not sufficiently conversant with the proceedings before Her Majesty in Council to be able to give an opinion on that subject, but I can conceive that Her Majesty in Council would be advised by somebody, and I presume that the responsible adviser in this case would be the Secretary of State for the Home Department, as he is referred to in other parts of this Bill.

429. Is it your opinion that the security for the adequacy of the medical standard, as fixed by the schemes of the licensing bodies, would be greater from their coming before Her Majesty in Council, in the absence of any medical adviser there, than if it rested on the decision of the Secretary of State?—I must answer, as I answered before upon that subject, by saying that I am not sufficiently conversant with what takes place before Her Majesty in Council, with a view to obtain information upon the matter, to enable me to speak to it.

430. The question contained the assertion that it rested with Her Majesty in Council in the absence of any medical adviser?—I conceive that such a responsibility should not be entrusted to any individual, whether he be a medical man or not, but that still less should it be entrusted to any individual not acquainted with the organization and feelings of the medical profession.

431. Are you conversant with the details of the Bill which I had the honour of introducing towards the close of the Session of 1845, for regulating the profession of physicians and surgeons, in which, in clause 2, a Council of Health is provided?—I read that Bill with very great attention at the time it was brought forward; I have not looked at it very recently, but I have it in my hand.

432. Is it your opinion or not that a Council of Health, composed partly of medical men from different parts of the United Kingdom and of the greatest eminence, combined with the Secretary of State, and certain functionaries of the Executive Government, would form a better and safer tribunal for deciding on the questions of the curricula of the universities, and the uniform fees to be levied on the granting of licences and on the standard of medical education throughout the United Kingdom?—It would form a very much better tribunal, and, in fact, one of the best tribunals that could possibly be devised in my humble opinion, and I think if such a council were appointed, it would confer a very great national benefit, and also would be of very great advantage in respect to the general regulation and harmony of the medical profession throughout the United Kingdom.

433. Does it occur to you whether such a Council of Health would or would not be useful to the country generally, by dealing with other matters besides that of fixing the standard of medical education; matters bearing upon the sanitary state of the people?—I think it would be most highly useful.

434. Do you regard the want of such a council as a deficiency in our civil polity?—A very great deficiency indeed. May I explain with regard to the formation of that Council of Health, that in my opinion it would be much better as regards the members of the medical profession who are to form part of that Council of Health, that they should be appointed by Her Majesty's Government, or some responsible persons, rather than be elected by the different orders of the profession.

435. The last edition of the Bill to which I refer is of the date of the 28th of July 1845, and it is the second clause which enacts, "That a council shall be established which shall be styled 'The Council of Health,' and that one of Her Majesty's principal Secretaries of State shall be a member of the said council in right of his office as Secretary of State, and that the other members of the said council shall be such persons, not more than 12, whom Her Majesty with the advice of Her Privy Council shall deem fit to be members of the said council."

The

The clause which I have read to you is the clause for the constitution of the Council of Health in the amended draft of the Bill to which I have referred; by that clause you will observe that the formation of the council is vested absolutely in Her Majesty, under the advice of one of her responsible ministers; does that mode of constituting the council meet your view of the necessity and policy of the case?—It does entirely do so.

436. You have stated in an earlier part of your examination, that the establishment of one faculty in medicine would be open to serious objection, as holding out an inducement to the commencement of premature practice and shortening the duration of education and of preparation by study. Have you considered the case of the bar, in which profession the inns of court may call very young men to the bar without a university education and without much previous study?—I was not aware that the inns of court did call very young men to the bar; it requires some explanation perhaps to enable us to understand what is meant by very young.

437. Twenty or twenty-one, immediately upon attaining majority?—Even if that be so, as I am now informed for the first time, I think there is a very great difference between a man who is to be called to the bar and a man who is at once to exercise a profession such as that of a physician. A man who is called to exercise the profession of a barrister comes immediately into open court, and his knowledge there is tested not merely by his equals, but also by his superiors; he cannot appear in open court without at once showing what his abilities are, and what his knowledge of the profession is, and he can be judged of by those who are his colleagues and equals, and by those who are to employ him; that is, attornies and solicitors in the court, and suitors; and an opinion can be formed of him by those persons who sit in the jury box. But it is not so with a man who exercises the calling of a physician; he goes into the private recesses of the family; he goes into the bed-room of the sick person, when perhaps that person's mind is enfeebled by disease, and attended by a servant, or a daughter, or sister, or some near relative; those persons are quite incompetent to form an opinion of the competency of the medical practitioner who is called in; they cannot know whether he understands the disease that the person is suffering from, or whether he understands the application of remedies; such persons are quite incompetent to form any opinion as to the qualification of the medical attendant.

438. But medical attendants, except in public institutions, are not forced upon patients; patients exercise a discretion in the choice of their medical attendant, and, of course, have a strong interest in choosing those medical men whom they consider the best; and is it not, therefore, the same with respect to the medical profession as with respect to the bar?—I do not think myself that the public at large, even those who are in health and have the full possession of their faculties, are competent to form, or have that knowledge which will enable them to form, a correct opinion as to whether the medical attendant really has good medical qualifications or not; as to whether he has a thorough knowledge of his profession, or really has practical skill.

439. Does not public opinion, both at the bar and in medicine generally, discover pre-eminent talent or superior merit?—I think that a man of superior talent will make his way, undoubtedly; but where one man of superior talents will make his way, many men with very little information and very small talent, but with plausible manners, who understand the weak points of humanity, will make their way in life better than a man who is possessed of much more profound information.

440. Does not that observation apply to the bar as well to medicine?—I do not think it applies in the same way or to the same extent. If medical men could be brought into some public arena and everything be done openly, rather than almost everything done in secret, I conceive that there would be a very great similarity between the two cases; but the operations of the medical man are in private, and the proceedings of the barrister are in public.

441. The public eye does not see the practice of medical men, except in cases of surgery?—No, and then only occasionally, in the case of public institutions, but not in private; no patient can judge of an operation which is performed upon him, whether it is well or ill performed; whether it is performed with skill, and whether the man who holds the knife has a perfect knowledge of anatomy or not; whether he understands the distribution of the parts and their relations one to another; he cannot tell whether the surgeon is cutting in a right direction or not.

 442. Assuming

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442. Assuming for a moment that postponement of practice and prolonged study are the roads to excellence, both at the bar and in medicine, is it not a strong circumstance, as showing that the interest of parties seeking to excel will not lead them prematurely into practice, when you consider that, though young men may be called to the bar, and commence practice at 21, yet the desire to excel leads them not so to be called, but to prolong their study to a much later period of life?—The class of persons who go to the bar, generally speaking, are very differently circumstanced from those who enter into the profession of medicine. The majority of those who enter into the profession of medicine enter into what is commonly called the lower grade of the profession; and they are persons generally of limited means; their means have not allowed them to obtain an extended education; their preliminary education has generally been very much neglected, and they just get as much medical knowledge as will enable them to fill certain public situations, such as surgeons under the poor-law, or assistant surgeons in the navy, or they commence practice as they may. They are compelled by the necessity of the case to seek to gain a livelihood as early as possible. A man who hopes to obtain eminence at the bar, where the highest distinctions are open to him, and where he may be brought into association with men of the highest rank in society, feels assured that it is worth his while to lay out a certain amount of capital in his education; it is, as far as I know, almost entirely men of large means, who can afford to expend large sums upon their education, who go to the bar; it is not men without any means at all who go to the bar.

443. You think the class in society, speaking generally, who enter upon medical study, is a class somewhat different from that which constitutes the great body of those who are called to the bar?—I certainly think that the great body of those who enter the medical profession to practise, as it is termed, as general practitioners, are rather upon a par with those gentlemen who enter into the profession of the law, to practise as solicitors and attornies; they are not persons of such ample means as those who advance to the higher order of that profession, who go to the bar.

444. You think that the means of those entering the medical profession being more scanty generally than the means of those who are intending to make the bar their profession, the temptation to premature practice on the part of those entering the medical profession is stronger than in the case of the bar?—There is not only a temptation, but an absolute necessity of their commencing the practice of their profession, in order that they may obtain a livelihood.

445. Is it your opinion that the analogy of the bar is perfect or imperfect with regard to the medical profession?—Very imperfect.

446. Are you satisfied with the scheme of registration proposed in the Bill now before the Committee?—Individually, I am very much dissatisfied indeed with it.

447. What are your objections to that scheme?—My objections are various; first, the mode of registration that is proposed in this Bill requires, that all who have obtained any diploma or licence from any public body, whatever it may be, and whatever their qualification may be, should go to the registrar, and having so gone and obtained a licence, for which they pay a certain sum of money, that they should all be arranged in one class or list, without a proper distinction of the part of the profession that they are pursuing; and the licence that is given is so worded, that in conjunction with the clauses of the Bill, it would give them the power of practising in every department of the profession, though they may have obtained the licence in respect of a qualification which may have shown that they were informed upon only one part of the profession; but having obtained that licence and that medical registration, the certificate enables a person, even with the lowest qualification, to practise just in the same way as the certificate which is given to a person of the highest qualification enables him to practise; that is one of my objections.

448. I find that in clause 10, the words of the licence are, "to practise medicine;" and I find that in the medical register the words are, that the person shall be "qualified to practise medicine in any part of England and Wales;" and when I look to the interpretation clause, in order to see what the word "medicine" means, I find that it includes the words "physic, surgery, and surgical;" what is your view of the bearing of the clause which I have read, with the interpretation, as regards the establishment of a single faculty or not; would the operation of this clause, in your opinion, be to establish a single faculty, or not?—I feel assured

class;

that, in the course of a few years, when the present generation has worn out, the whole of our profession would be reduced to one order or one faculty; men will be satisfied with such a qualification as will enable them to register and commence the practice of their profession at the earliest age allowed by law, and the whole profession will be reduced to one order or one faculty.

449. Do you object to the publication annually of the registration of all classes of practitioners?—I think it is very much required that a perfect register should be annually published; by that, I mean a registration in which the several classes should appear in separate lists, so that the public should be assured as to whether a man has a qualification to practise physic or surgery, or whether he has only such a qualification as will enable him to enter upon general practice.

450. In the Navy List, published annually by the Admiralty, all classes of officers are subdivided, and there is added an alphabetical list of all the officers in the service, and to the alphabetical list there is appended also their station in each class; would some such register as that meet your view in regard to the medical profession?—I am not very conversant with the Navy List, but in discussing this matter in committees of the College of Physicians we have thought that a much more simple mode of registration would be such a one as has been adverted to, that is to say, that separate lists should be made of each order of the profession, alphabetical lists, either by the corporate bodies or in some other way; that those lists should be supplied to some public officer, and that they should be published in conjunction with a general alphabetical list, and that in the general alphabetical list appended to each name there should be put some letter or title which should designate whether the individual was a physician or surgeon, or general practitioner. If the public wished merely to know who were authorized physicians, authorized surgeons, or authorized general practitioners, they would look to the proper list to ascertain; and if they wished to know whether a man was registered or licensed, then they might look to the alphabetical list, and they would see where they might learn more of his qualifications.

451. The list I have spoken of takes in the admirals, the captains, the commanders, the lieutenants, and all the different grades in the profession, divided according to their grades; and then comes the alphabetical list of the whole, without distinction, in the order of their names in the alphabet, and appended to each their standing in their profession, thus combining an alphabetical list with a classification?—That is what I attempted to explain in my last answer, as the best mode, as it appears to me, of an arrangement of the medical profession, having three separate lists of the different classes of the profession and a general alphabetical list; and in that alphabetical list, P. for physician, S. for surgeon, and so on, appended to each name, to indicate what the grade or peculiar calling of the individual was.

452. In the Bill to which I have already called your attention, presented by me at the end of the Session of 1845, you will find that it is provided that the College of Physicians and College of Surgeons and General Practitioners, whose incorporation was then contemplated, should each send to the Council of Health their separate lists, and that a general register should be published by the Council of Health annually; would such an arrangement meet your view, if a Council of Health were established?—I believe that is the right mode of doing it, if the present orders in the profession are to be preserved; if we are to be reduced to one faculty, that would not be necessary, but if the present orders in the profession are to be preserved, that appears to me to be the best way by far.

453. Have you any other objections to offer to the registration contemplated by this Bill than those which you have already stated?—Yes, very great objections.

454. Have the goodness to state them?—I object particularly to the mode in which we are, under this Bill, compelled to apply for an annual licence, and to the mode in which the registration is to be carried on. I and others who are physicians have gone through a long course of study, and have paid very large sums in the form of stamp duties, both at the University of Cambridge, to which I belong, and at the College of Physicians; we have expended a great length of time, and gone through very extensive examinations in the university, and before the College of Physicians; we have thus paid large sums; I had thought that I had acquired a right to practise my profession for the remainder of my life, and my brethren generally are in the same position with myself; and we feel that it would be a very great indignity imposed upon us to have to appear year by year at the Registrar's Office, and to take out a certificate, for which we must pay 5*s.*;

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we consider it an indignity to us, and a deprivation of a right which we have acquired honestly and fairly. That is one objection. There is another objection which may be misinterpreted, but still I think it right to express it, as I believe it is for the good of the profession that there should be an order of physicians in this country, and if there are physicians there must be some corporate body or college to superintend the whole of the physicians; but the College of Physicians cannot subsist, if by this Bill the registration of physicians is to be taken away from the college, and to be placed in the hands of registrars. The College of Physicians has no funds of its own which are applicable to general purposes but what are derived from fees on the admission of physicians; but by this Bill there will be no necessity for any person who wishes to have the title of doctor in medicine, or to practise as a physician in England, ever to apply to the College of Physicians at all; and there being no necessity for it, the parties being registered, and entitled to practise generally, the probability is that there will be no such application, and in that case the College of Physicians will be deprived of all its funds, and, as I said before, must be reduced simply to a restricted medical club, without functions, and without means. That is another great objection, therefore, that I have to this mode of registration.

455. With respect to the College of Physicians, is the power that is exercised, or the moral control that you have over the conduct of physicians belonging to your body, perfect or imperfect?—It is very imperfect.

456. Are you aware that a new charter was granted to the College of Surgeons by the Crown two or three years ago?—Yes, I am aware of that.

457. Did not that new charter give to the College of Surgeons a more summary power of expulsion?—I saw a copy of that charter in one of the public journals, in which I read a clause to that effect.

458. Are you aware whether the College of Physicians applied to the Crown for an amended charter?—Yes, we have applied many times.

459. Did you seek to obtain a more complete power of control over the members of your body than you now possess?—We did.

460. Similar to that which the Crown granted to the College of Surgeons?—Perfectly similar.

461. Is it your opinion, that if the College of Physicians is to be retained, the revision of the charter would be expedient?—Yes.

462. And it is desired by the body?—It has been sought by the body from the Government for many years.

463. By that body of which you are the senior censor?—Yes; I have the memorial presented last year to Sir George Grey upon this subject.

[*The Witness delivered in the same, which is as follows:*]

A Memorial presented to the Right Honourable Sir *George Grey*, Bart., M.P., Her Majesty's Principal Secretary of State for the Home Department, by the Royal College of Physicians of London, 8 August 1846.

The President and Fellows of the Royal College of Physicians are induced respectfully to address Sir George Grey, as Her Majesty's Secretary of State for the Home Department, because they are unable, without the aid of the Legislature, to complete certain changes in their constitution, which appear to be called for by the state of the profession and of society, and which they have long contemplated and desired to carry into effect.

The college is bound, by its charter of incorporation granted by Henry 8, and subsequently confirmed by Act of Parliament, to examine and to license, if found competent, all persons who desire to practise as physicians in London and within seven miles round. But the office of examining and licensing those who wish to practise beyond seven miles from London was given by the Act which confirmed the charter, not to the college at large, but to a small body composed of eight of its members, termed elects. The elects not having been chosen, even at first, by the members at large, are endowed with separate functions, which they exercise independently of the college, the constitution of their body being such, that all vacancies occurring in it are required to be filled up by the survivors.

As might be expected, inconveniences have arisen from this divided jurisdiction. And it is worthy of observation, that amongst all the grievances complained of in the petitions for medical reform, which were presented at one time in great number to Parliament, none were complained of more than the existence of local and exclusive jurisdictions; and the exercise, by numerous independent bodies, of the power of examining and licensing medical practitioners. The latter circumstance, it was alleged, had caused a want of uniformity in the education and qualifications of practitioners passing under the same denomination; and from the former circumstance it has resulted, that licences valid in one

part

part of the country are invalid in another: a restriction which proves most detrimental to the good of the profession, and even leads frequently to an infringement of the laws.

Of late years it has happened, that the demand by physicians for licences to practise in the country (termed extra licences), which was formerly small, has been greatly increased; hence the evils and inconvenience of the licences emanating from the college being divided into two kinds, and of their being granted by separate bodies, have become strikingly manifest, and have given rise to complaints, and caused disputes and dissensions in various parts of the country.

Moreover, the Act of Parliament already referred to has also given to the elects the function of choosing annually one of themselves to be the president of the college. It has been thought that this part of the constitution of the college is susceptible of improvement; for that the choice of the president ought not to be deputed to so small a body, which is neither elected by the fellows at large, nor under their control.

For the reasons which have been stated, the college is desirous that a short Act of Parliament should be passed, enabling it to accept a charter modifying its former charter as regards the elects, and transferring their functions to the general corporation. An Act for this purpose was in fact prepared, with the sanction and co-operation of the late Government, and laid before Parliament. But it proceeded no further, because it was introduced in conjunction with other measures affecting the profession more widely, which were subsequently abandoned.

There are other improvements lying more within its own power, to which the college has of late years directed its earnest attention.

In particular, it has extended and greatly improved the examinations of those whom it licenses to practise as physicians.

With respect to those who are admitted as fellows or members of the corporation, during very nearly two centuries, they were required, by the bye-laws of the college, almost exclusively, to have been educated at the English universities; so that by long prescription the graduates of Oxford and Cambridge were admitted nearly as a matter of course into the order of fellows; and, beside them, few indeed either were, or could be elected.

The object of this regulation was to ensure in the fellows of the college the best and highest education. And it had, confessedly, the effect of raising highly the character of the college, and, through its influence, that of all orders of the profession in this country.

Nevertheless the exclusiveness of the rule excited jealousy and discontent, and became a cause of frequent litigation, until, by repeated decisions of the courts of law, the right of the college to be the sole judge of the qualifications of those whom it would elect as fellows had been established beyond dispute.

In the present century, a high standard of education being adopted more generally, the restriction in favour of the Universities of Oxford and Cambridge, which had been enforced so long by the college, became proportionately less requisite and proper.

Wherefore the college, although still retaining a conviction of the superior advantages to be derived from an education in those universities with which it had been so long connected, has, nevertheless, rescinded its exclusive bye-laws.

For several years the fellows have been selected out of the order of licentiates, solely from regard to their character and attainments, and without distinction as to the place of their education.

To a considerable extent this plan has proved satisfactory to the profession. Yet a system of selection is attended always with some invidiousness. Therefore the college has resolved to adopt another principle in the admission of fellows, not liable to the foregoing objections, which will be perfectly equitable in its operation, and most honourable to those who avail themselves of it; viz. that the ordinary mode of admission to the fellowship shall be through an examination, high in character, comprehensive in extent, and open to all licentiates who may submit themselves voluntarily to it. Whilst, at the same time, a limited power shall be preserved to the college of admitting as fellows, without examination, those persons who may have greatly distinguished themselves by scientific pursuits and discoveries; who, not having enjoyed the advantage of the best early education, may have made up for this deficiency by superior talents and energy, but whose age may be such, as well as their known attainments, that they ought to be exempted from the examination intended for younger men.

As far as the college is concerned, the changes and improvements which have been mentioned might have been effected earlier, had they not been retarded by circumstances over which the college could have no control. An outline of the reforms contemplated by the college was submitted to the Marquis of Normanby when Secretary of State, and was favourably entertained by his Lordship. A change, however, in the Government followed soon afterwards, and delayed further progress.

The subject of these reforms was repeatedly brought under the consideration of Sir James Graham, and they met with his approval; but it seemed to him expedient that they should be brought forward simultaneously with the general measures which he contemplated for the regulation of the whole medical profession.

In consequence of the desire then expressed by the Government, the college proceeded, with the assistance of its own legal advisers and those of the Crown, and with considerable pains and expense, to prepare the draft of a new charter, modifying its former charter in the way which has been already explained.

The title of the College of Physicians of London was to be changed by the new charter to that of the "Royal College of Physicians of England;" and, by one of its clauses, the

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college offered, for one year after its acceptance, to admit as members, without examination, all graduates of British universities of a certain standing, now practising throughout England and Wales.

A conciliatory measure of this kind appears to be much required in the present state of the medical profession; for there are many physicians practising in England, not being graduates of Oxford or Cambridge, who yet are not, as legally they ought to be, possessed of a licence from the College of Physicians of London.

Therefore the college proposed this measure as the commencement of a more regular and effective system, and in order that it might, more perfectly than is possible at present, represent and regulate the interests of all physicians in this country.

The college will be ready to abide by the offer and concession which it then thought right to make, provided means can be devised whereby all physicians practising in England and Wales shall henceforward (reserving the rights of the universities of Oxford and Cambridge) be required to submit their pretensions to the censors' Board (to which the college deputes the examination of those whom it licenses), in order that their competency may be properly tested, and that they may be enrolled as members of the college.

By another clause in the new charter, power was given to the college, in certain specified cases, to expel unworthy members. As circumstances sometimes arise requiring the exercise of such a power, the college believes that it would be expedient that it should possess it. A similar power has recently been given by charter to the College of Surgeons.

It was also provided by the new charter, that persons who having exceeded the age of 40 years, and, having been duly examined by the college, are found competent to practise as physicians, shall be entitled to use the designation of doctor of medicine, although not graduates of any university. Whereas, for all candidates who present themselves for the licence under the age of 40, it is made an indispensable requisite that they should have obtained the degree of doctor of medicine in some recognised university, before they can be admitted to examination by the college.

The reason of this distinction is, that in a practical profession, like that of medicine, it is always right that those who, by superior talents and industry, have raised themselves in public estimation, should have the power of rising from a lower even to the highest rank in the profession. It seems reasonable that the college, to which such persons must apply for legal authority to practise as physicians, should be empowered to confer the title, which through common usage is necessary to render the license intelligible by the public and useful therefore to the possessor of it. In this way a want which is occasionally felt in the profession might be supplied, without detriment to the universities, and without material infringement of the rule, which ought to be upheld, that those who intend to be physicians should resort to the universities for preliminary and general education.

Such being the objects and principal enactments of the new charter which has been prepared for the college, the salutary changes which it would effect are calculated, in the opinion of the college, to render it an institution more generally acceptable to the physicians of this country, and more useful to the profession and the public.

Therefore, the college respectfully but earnestly requests the assistance of Government, in order that a short Act of Parliament may be passed, enabling the Crown to grant this charter, on the petition of the college, and in order that the Crown may be advised to grant it.

Francis Hawkins, M. D., Registrar.

464. Did I understand you to express the opinion, that with respect to the rising generation the abolition of grades in your profession would be an injury?—I do think that it would be a great misfortune to the public, and of course to the profession as a profession.

465. As relates to the interests of the public, do you think that they would be damnified by the abolition of the present classification of the profession and the establishment of a single faculty?—Certainly. In the first instance, the general standard of education of medical men would be lower than it now is; the profession would then be comprised merely of individuals who had obtained their licence to practise upon the lowest qualification allowed by law, and of individuals who were allowed to commence the practice of their profession at the earliest period permitted by law; the result would be that the medical practitioners of this country would be men who had perhaps a sufficient education for the ordinary necessities of the public, but leaving the schools at an early age would go at once into general practice, their minds would necessarily become so occupied with the professional duties of private practice, harassing as those duties are, that they would be quite unable and unwilling to undertake any scientific inquiries, or to pursue the literature of the profession, or to add to the science of the profession; and in that way especially the public would eventually be seriously injured, inasmuch as the standard of medical knowledge and the professional qualification in this country would be lower than it is in any other of the great states of Europe; and I think, also, that if there were a lower standard of education and a lower qualification prevailing in the medical profession, the probability is that the tone of moral feeling

feeling in the profession would be gradually lowered, and in that way again the public would most seriously suffer. I think also that if there were only one standard of qualification, and that a low standard of qualification, you would not have men of that extended education and that position in society who now enter into our profession; they would no longer enter it; they would not think it worth their while to enter our profession; the profession would be held in lower estimation than it now is, and such persons would turn their attention to other professions rather than to that of medicine.

466. If your apprehension should be well founded, that this Bill, if it became law, would not give an adequate security for a sufficiently high standard of education, or an equal standard of education among all licensing bodies, and if there were any inequality of fees, would people flock naturally to those places where licences could be obtained by the least competent in the profession and at the lowest rate of fees?—I think that is quite obvious; it is only according to human nature that men will go to the places where they are likely to be put to the least trouble and the least expense.

467. If therefore this measure failed to provide adequate security for a standard of equal education and equal fees, the effect would be to degrade the profession?—Certainly. I do not think so much about the equality of the fees as I do with respect to the equality of the standard of education. I should conceive that there would be very great difficulty in having an equality of fees, but I think all the difficulties about an equal standard of education ought to be met, and that that is a point which ought to be insisted upon, that for the several classes of the profession in each part of the kingdom there should be the same standard of education if there is to be reciprocity of privileges, which I hope there will be.

468. In large cities, where great multitudes are congregated with a view to the attainment of excellence in physic and surgery, is there an advantage in the subdivision of labour by means of the existence of the classes of pure physician and pure surgeon?—That is so universally admitted in our profession, that I should be surprised to find any man in our profession who did not hold that opinion.

469. Does not the circumstance of a man giving his attention to one branch of science lead to superior excellence and a more perfect knowledge of that branch?—Certainly, provided the individual has thoroughly acquired the principles of his profession. Education should be carried to a certain point so as to insure the individual having acquired the principles of his profession, and then continued application in any particular direction, no doubt insures that excellence which is of very great advantage to the profession and to the public.

470. Whatever may be imperfections in the constitution of the College of Physicians, and the College of Surgeons at the present moment in England, does the profession here stand on a level with the profession in other great states of Europe?—I have spent several years in the different great metropolises of Europe, and as far as I have seen, I should say that both as regards the acquirements of physicians, and the position which they hold in society, our profession in this country certainly stands rather at an advantage than a disadvantage.

471. Does human suffering throughout the world owe a greater debt to any country than to England with respect to medical and surgical discoveries?—I do not think with respect to medical or surgical discoveries it owes a greater debt to any country than to England.

472. You refer to the whole civilized world?—As far as my knowlege goes, I know of no country where greater improvements have taken place in the treatment of diseases, whether medical or surgical, or where greater advances have been made than in our own.

473. With our existing subdivisions and our existing institutions such as they are?—Yes, certainly, with our existing institutions such as they are.

474. You think that those institutions are susceptible of improvement?—I do think so.

475. But reducing the profession to a single faculty you would not hold to be one of those improvements, or a measure conducive to the spread of science and the perfecting of knowledge?—If I am right in the opinion that I have expressed of what would be the operation of this Bill if it became law, viz., that our profession would be reduced to one faculty, I am certain that science would make very slow advances, and that we should be obliged to look to other countries where a different order of things existed, for an advancement in medical science.

476. Have medicine and surgery been reduced to a single faculty in France?—I am

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—I am not very conversant with the arrangements in France as to that point; but they have different degrees there in medicine and in surgery, so that a man is distinguished according as he is qualified in medicine or surgery.

477. How is the classification controlled in France?—I am not sufficiently conversant with the details to answer that question with accuracy; I have not been resident in Paris since the year 1828, and great changes may have taken place since then. The police regulations in each town in France are very different from what they are here; an individual is obliged to produce his diploma before the police of the town, or he is not allowed to practise.

478. Have you any opinion upon the policy of separating pharmacy from the practice of medicine?—In my opinion, it is very conducive to the good of the public that a certain class of medical practitioners should practise pharmacy to a certain extent; that is, that they should provide medicines for their patients.

479. I find in a publication that I hold in my hand "Suggestions upon Medical Reform, by Dr. Carmichael, President of the Royal College of Surgeons in Ireland," the following remarks: "However, with respect to the separation of the practice of pharmacy from the practice of medicine, without which any plan of medical reform is, in my opinion, a mere fallacy and delusion, a law might provide that all general practitioners be rendered incapable of charging for the medicines they prescribe, but that they shall be merely fee'd for their advice; and likewise that all apothecaries in future entering that profession shall be restricted to their own peculiar duties. In a few years, were these two regulations established, we should get rid of that nondescript species of medical man yclept a general practitioner, a kind of jack-of-all-trades, but master of none." Does that opinion at all coincide with the opinion you take of the matter?—No, it does not; there is a part of that suggestion which I think is very good, and that is, that no general practitioner should charge his patient for medicine, but that he should be treated as a gentleman and a man of education, and should be paid for his advice, and not for the quantity of drugs that he supplies; but certainly I am of opinion that it is most desirable that any gentleman who enters that branch of the profession should provide his patients with medicines; the public derives great advantage from it. The medical man has a great interest in supplying good medicines, and to the poorer classes (I do not mean the poorest class), where they are persons of limited means, it is a great advantage to have to pay one person if they are ill, and not pay one person for advice and another person for medicine, but that with the advice they should have the medicine that is necessary, and no more than is necessary.

480. Is it conducive, do you think, to the public good, that the medical adviser should have an interest in drenching a patient with drugs, his only profit being upon the drugs so administered?—It tends very much indeed to the injury of the patient; and I do not think that it tends to the advantage of the practitioner.

481. Have you referred to clauses 11 and 12 of the Bill now before Parliament, which give to the medical practitioner a right of action for his attendance?—I have looked at those provisions.

482. Are those provisions consonant with the feelings of physicians, or, in your opinion, consonant with the honourable position that they occupy?—I do not ascribe any motive to those who may have drawn up the Bill; but it seems to us physicians as if an insult was intended to our order in supposing that we wished to have the power of recovering our charges; we have all entered into the profession considering it as a liberal calling, the calling of gentlemen, and a learned profession, and we utterly disclaim being regarded in the light of traders, and having the power to make any claim in law to actions for payment of our services; we give our services to the public, and we trust to the honourable feeling of those to whom we give our services for receiving a fair remuneration for our advice and assistance.

483. The analogy of the bar would not justify such a provision with respect to physicians, would it?—No; I think not.

484. Barristers have no power of recovering by action?—No, I believe not, and we have always regarded ourselves in that light; and I should wish, as a physician, to be regarded in that light, and should consider it an injury done to our profession if we were placed in a class which desired these clauses, or if the profession were reduced to one faculty and all were regarded as general practitioners.

485. You consider such a provision as is contemplated in clauses 11 and 12 to be unnecessary?—I would rather not express an opinion as regards those who practise

practise in the other branches of the profession; they are much better judges upon the point whether, as regards themselves, they wish for such a provision or not; I can only speak as a physician, and for physicians, and speaking in that character, I say that we do not wish to be included in such a clause.

486. *Chairman.*] The first clause to which your objections relate very strongly, is the ninth?—That is one of the clauses of the Bill that I consider most objectionable.

487. It is the clause which the College of Physicians has petitioned against in the strongest terms?—That, in conjunction with the other clauses.

488. But your petition states, that "by that clause the charter of the college will be in great part, if not wholly abrogated, and the college superseded in all its most important functions;" are you aware that the effect of that clause is solely to abolish legal penalties?—I think it says something more than that; it speaks of restrictions.

489. Legal restrictions?—Any restrictions or penalties.

490. "So much of any Act as imposes any restriction;" therefore it is a restriction imposed by Act of Parliament?—That clause, therefore, takes off the restriction upon practice, which now requires a physician to appear before the College of Physicians before he does practise as a physician.

491. How do you enforce those Acts of Parliament which impose those restrictions and penalties?—We do enforce them. I have, as censor, enforced them this year.

492. In what manner, by prosecution?—No; we sometimes write to the individual in a polite manner, sometimes we take another course; sometimes we have, besides writing to the individual, adopted the plan of calling upon some friend of the individual and intimated to him that as this individual has come to London to practise as a physician, if he does not appear before the college they will be obliged to take proceedings against him; that generally is sufficient, and the individual puts down his name for examination. Sometimes that course is not pursued, but the president and censors, through their officer, write a letter to intimate to the individual that he must appear before the college, and upon some occasions the summons is quite sufficient to bring the individual, but on other occasions the individual does not take notice of the summons.

493. Are there, then, persons now practising in London who have not taken any notice of the summons of the college?—There are.

494. Have you prosecuted those individuals?—There have been one or two prosecuted.

495. Have you prosecuted any within the last 10 years?—No.

496. Within the last 15?—I am not sure.

497. Have you found that you cannot enforce those penalties legally?—There is so much difficulty in the enforcement of them and so much expense attendant upon the attempt to enforce the penalties, that the college has not enforced them to the extent that they would wish to do, from not having the pecuniary means of doing it.

498. And, in fact, they have not enforced the penalties in London within the last 10 years?—Yes, they have enforced them in the way I have mentioned, and in the large majority of cases that has been found to be sufficient.

499. But where persons have been refractory they have not been prosecuted within the last 10 years in London?—No, I think not.

500. Beyond the circle of seven miles how has it been?—There have been no legal proceedings taken.

501. Then throughout England, beyond the seven miles of London, in addition to those who have passed the Board of Elects and the College of Physicians as extra licentiates, and the graduates of the universities of Oxford and Cambridge, persons are practising as physicians without a qualification?—Yes.

502. What notice have you taken of them?—We have no power to take notice of them. There are no penalties that we can enforce; the law merely says, that the person so practising is not a legally qualified physician. If he were guilty of *mala praxis* I am not sure that he would be able to defend himself if an action were instituted against him; or if his professional character were defamed, I think he could not maintain an action against the party so defaming his character, because he is considered to be practising as a physician without being legally qualified; and, therefore, if a person called him a quack, or any other opprobrious term, I believe it has been held that he could not maintain an action for that.

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503. What is the distinction between the functions of the elects and the functions of the censors?—The elects are a portion of the College of Physicians who are appointed under an Act of Parliament subsequent to the grant of the original charter. There are eight of them; they examine and license persons as physicians for all parts of England beyond the metropolitan district, conjointly with the universities of Oxford and Cambridge; these are their duties. The censors are officers chosen by the great body of the fellows annually, who, with the president, may be considered the executive of the college. They are the examining body for the admission of persons to practise in the metropolitan district, and also in the provinces; but the duty of the elects is a peculiar and restricted duty.

504. Will you be kind enough to let me know whether I correctly state the present practical position in which you stand; you have no power whatever of inflicting penalties upon persons practising medicine beyond the seven miles line; and within the seven miles line you have not, for 10 years, enforced such penalties?—We have found such difficulties in enforcing penalties and restrictions within the metropolitan district, and such a want of power out of the metropolitan district, that we have for many years past, at different times, applied to successive Governments, the Marquis of Normanby, Sir James Graham, and Sir George Grey, and have been most importunate in begging them to modify the powers of the College of Physicians in such a way as to remedy that inconvenience.

505. Is that answer to be taken as an admission that I correctly describe the present state of things?—Yes, at the same time I wish to put you in possession of all the facts of the case; it is an admission undoubtedly of the point in question, but it appeared to me important, as this Committee wished for information, that I should state it in such a way that they should understand it.

506. But with a view to the question I asked you, I understand you to state that beyond the seven miles line you have no power of inflicting penalties, and that within it you do not at present inflict them?—Within it we do; we do not find a necessity in many cases for enforcing it legally, because we find in many cases that the persons are amenable to reason.

507. If they are refractory you do not proceed to law against them?—No, we have not done so for 10 years.

508. But nevertheless, in spite of this want of legal power, of which you have complained to successive Secretaries of State, and which, in your opinion, is a very serious imperfection in the present system, you consider that the College of Physicians has done a great deal for science and for the respectability of your profession?—I think that it has done a great deal both for science and for the respectability of the profession.

509. The college being so deficient in legal means that it really can do nothing beyond the seven-miles line, and practically very little by law within it, must we not attribute to the moral influence of the college its high respectability and importance?—It may be ascribed in part to one cause, and in part to the other.

510. Can we ascribe to a legal power which does not exist without the seven-miles line, and which for 10 years has never been exercised within it, the influence which the college exercises?—Yes, I think so, in this way; that men who are educated to hold the station in society and position that physicians hold, do not like the idea of practising their profession illegally; and though the college is not in the habit of suing for those penalties, still I do think that they would not like the idea in London, where the penalties can be enforced, of going about the town under the imputation of not being legally qualified; and so also in the country, though not to the same extent, but to a certain extent, gentlemen of education do not like the idea of their being open to this risk of its being said of them that they are afraid of going before the College of Physicians, and that they are not legally qualified; though those penalties cannot be enforced, still those feelings operate upon men of gentlemanly feeling and education.

511. It is then a feeling of respect for public opinion, and not a dread of prosecution, which leads practitioners of that class to qualify in the manner in which they do?—I think it is partly public opinion and partly in order that they may be free from those aspersions upon their medical character to which I alluded in my answer to the previous question.

512. You conceive, that if the Bill passes, the effect will be to leave only one grade in the medical profession?—If this Bill passes into a law, I think, that not instantly, but gradually, the profession will be entirely reduced to one class or order.

513. I observe,

513. I observe that the Right honourable Baronet next me asked a question in nearly this form, Do you not conceive that very great advantage arises to the medical science and the public from that subdivision of labour which takes place among the different classes of medical men in great cities? to which you answered in the affirmative?—I do think so.

514. Have you ever considered whether the very existence of those great cities does not necessarily lead to such a subdivision?—I do not think that it necessarily leads to such a subdivision.

515. Do you not conceive that even if there were only one grade recognized by the law, a certain portion of the members of the medical profession would betake themselves to pure surgery and a certain portion to pure physic?—I do not think they would.

516. Is there any grade of dentists at present known to the law?—No, I believe not.

517. Are there not certain persons who devote themselves almost entirely to that branch of the profession, and who are supposed to make very large emoluments by it?—Yes, there are some.

518. Is there any division of oculists known to the law?—No, not that I know of.

519. Are there not certain medical men who devote themselves almost exclusively to the treatment of the eye, and who find that a very lucrative branch of their profession?—There are very few who devote themselves exclusively to it, and it is very much disliked in the profession; it is thought to be a very injurious thing to the public for a man to devote himself exclusively to the treatment of the diseases of the eye.

520. But it is the fact that although there is no legal class of dentists and no legal class of oculists, yet in the great cities of England some persons devote themselves exclusively to the treatment of the ear, and others exclusively to the treatment of the eye?—There are members of the profession who practise almost exclusively as dentists, but with respect to oculists, I only know of two who do such a thing, and it is thought to be productive of much injury to the public.

521. Are there not persons who, without exactly taking a distinct name, are understood to devote themselves peculiarly to the obstetrical part of their science, and are particularly called in to such cases?—Yes, but they do not confine themselves to it by any means.

522. Is it not natural to suppose that even without any legal distinction, some portion of the profession would become pure surgeons in great cities, and would not the same cause which leads to the division of labour in other employments naturally lead to the division of labour in this science?—I beg leave to say that I think there is this distinction between an individual merely taking up one particular calling, and an individual being educated for a particular calling; it is quite possible that an individual would follow one branch of the profession, one person might practise in one branch, and another person might practise in another, but it does not follow that you would have men competent to follow those particular lines; they might not have the education necessary; a man might choose or might have the opportunity of following one line rather than any other, but he might not have had the education necessary for that particular calling.

523. Did you not say in one of your previous answers that it was necessary that the pure physician and pure surgeon should each of them know a great deal of the business of the other, in order to be perfect in their callings?—Yes, I made use of this observation, that all grades of the profession ought to be educated in the principles of their profession in the same way, up to a certain point.

524. Then if all grades, physicians, surgeons, and general practitioners, were educated in the same way, as regards the principles of their profession, up to a certain point, would they not, in great cities, where there was abundance of means, naturally diverge; some devoting themselves to surgery and some to medicine, even if there was no law which compelled them to do so?—I do not think that the law compels them to do so, but if they do so the law now compels them to have a particular education for that particular branch; it is the difference between a man taking it up from choice, and a man being compelled to educate himself for that which he takes up as his choice.

525. I understood you to say that you quite approved of equality of privileges, provided you had an equality of qualification?—I think that there should be perfect reciprocity of privilege for practice in the different parts of the kingdom,

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provided the Legislature would insure an equality of education for the respective classes of the profession in each part of the kingdom. I think it would tend very much to the harmony of the profession and the good of the public, if such a law or arrangement as that could be established.

526. May I ask whether you think that the distinction now kept up between the medical practice within seven miles of London and beyond it, is a distinction which can be defended?—It cannot be defended at all; it is most absurd; the physicians who are to practise in London, or at Brighton, or at York, or at Edinburgh, or at Dublin, or any other town in the United Kingdom, ought all to be educated alike.

527. Do you conceive that it is possible to establish a uniformity of education unless there be some common authority set up by the State over the whole?—I think it could be accomplished, but it would be with difficulty; such arrangements had nearly been come to mutually between the different bodies, some years ago.

528. In Scotland and Ireland, as well as England?—There were deputations from the universities of Scotland to the College of Physicians, and we had nearly agreed upon some common standard for the education of physicians; that the physicians of Scotland should come at once and be permitted to practise here, as it were *ad eaudem*, provided they would raise their standard to that of the College of Physicians.

529. What officer or authority did you trust to, to keep them up to the point; was it merely upon their promise that this was to be done?—The subject never went so far as to lead us to settle the mode in which it was to be carried out; I think it is highly probable that the bodies having agreed between themselves, would have applied to Government or the Legislature to sanction that agreement, and to make it law in order that it might bind them hereafter.

530. You object to investing the Secretary of State with that power?—To the Secretary of State alone being invested with that power, I object.

531. Or the Queen in Council?—As I said before, I do not know what "the Queen in Council" means.

532. But you do not object to intrusting this power to a Board to be formed by the Secretary of State, upon his responsibility as a minister?—No; I should not object to that.

533. Then, if instead of "the Secretary of State" being inserted in this 23d clause, there were inserted "some persons appointed by the Secretary of State," you would not object?—I should not, provided there were a sufficient number, and the names of those parties would be known.

534. If it were amended thus: "That the several colleges and other examining bodies shall from time to time prepare and lay before persons, to be nominated by the Secretary of State, a scheme or schemes;" and if some provisions were made, that the names of the persons so nominated by the Secretary of State should be periodically submitted to Parliament, you would see no objection to that clause?—I think that the public and the profession would, through the House of Commons, have that control over the Secretary of State and over those persons that were so appointed, that we might be assured that the Secretary of State would not appoint any but proper persons; his own character and his responsibility to the public would be such, that he would not appoint any persons but such as the public, informed by the profession, would consider to be competent persons, if it were in the form of the Bill of Sir James Graham of the 28th July 1845.

535. Then I am to understand, without saying anything about the exact wording of them, that the objections that you entertain to clauses 23 and 24 would really be removed if, instead of "the Secretary of State," the words "persons appointed by the Secretary of State," upon his responsibility and known to the public, were substituted?—Yes; I think that would be the most satisfactory plan that I could think of for forming such a body as is termed "The Council of Health." That is with reference to the 23d clause, but I have a separate objection to the 24th clause, and that is an objection to the parties who may, under that clause, perform the duty of supervision of the examinations. With respect to the supervision of the examinations at the College of Physicians, I think it should be done by a physician appointed by the Secretary of State, and that the supervision of the examination at the College of Surgeons should be done by a surgeon; and with respect to the universities, that it should be by a person acquainted with the mode of examination there, and

and that it should not be intrusted to a surgeon to supervise a physician's examination, or to a physician to supervise a surgeon's, or to either to supervise a university examination.

536. Do you think that any person, holding the high office of Secretary of State, would offer a wanton insult to a body of learned and professional men?—I think the Secretary of State, not being a professional man, and not capable of entering into the feelings of the profession, might do so without being aware of it.

537. I am speaking upon the supposition that the Secretary of State was to be guided by the advice of this body of which you have spoken?—I said that I had an objection to the 24th clause, as it stood in this Bill, but I should still object to the 24th clause if a council of the kind you have adverted to were appointed, because I think that it should not be left open to the possibility of such a thing, but that the Legislature should appoint the most proper persons, instead of leaving it open for any persons to be appointed.

538. Your objection to the 24th clause would be removed if the examinations of physicians were to be inspected by physicians, and those of surgeons by surgeons?—Yes.

539. And your objection to the registration would be removed if the registration were framed in the form of the Navy List that has been handed round?—One of my objections to the mode of registration would be removed, but by no means the only one.

540. With reference to the importance of previous education for medical men of a certain class, will you be kind enough to explain briefly why it is that you think that if this Bill became law, medical men would not carry that education as far before they enter their profession as lawyers, when they have the means; is it not the fact that a superior education tends to make a superior physician?—Certainly.

541. Is it not the fact that the practice of a medical man of eminence depends upon the amount of his scientific information?—In a metropolis like this it would be greatly so, but in country villages, and even in many parts of the metropolis, his scientific information would be rather a bar to his success than otherwise.

542. Even now, of those who practise in this country, very few have ever been to Cambridge or Oxford?—Very few; the great majority have not been to any university.

543. Then the only persons who, under the present system, have a carefully conducted and extended education are those who practise in the great cities?—Yes.

544. Would they not continue to have such an education after the Bill was passed?—It is only those who are in great cities who have had that extended education; the great mass have not had that, but their preliminary education is extremely deficient.

545. Why should not those who have the means and inclination to obtain a preliminary education obtain it after this Bill is passed?—The number who now have an extended education is but small, and after the Bill is passed there would not be an inducement to those men to enter into the profession.

546. Would the emoluments of the highest order of the profession be at all diminished?—I maintain that there would be no high order in the profession if this Bill passed into a law.

547. Would there not be the same difference between the largest practice and other practice which there at present is. When I said the highest order of the profession, I was not speaking of dignity or of grades, but of the practice. Would there not be practically as large gains made as are now made?—No, certainly not; because they will be a different class of men, who would practise for much lower fees; they might have as many patients to see, but their remuneration would not be so large. I conceive that the general emoluments of the profession would be very much diminished; even the consultation practitioner, under that order of things, I do not believe would obtain the same fee that he does under the present order of things.

548. Then you hold that the effect of this law would be distinctly to diminish the fees of the medical profession?—I think it would, eventually.

549. Will you point out in what way it would have that operation?—I think it would first reduce the profession to one order or one class, the class being that which is allowed by law to practise at the lowest qualification; and if medical

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men are allowed by law to commence practice with a moderate qualification, and at an early age, they must be content to take a moderate remuneration for their services. As such individuals went on they might obtain fresh patients, so that they would be increasing the number of their patients, and would have what is called a large practice, but be still receiving the same fee from each of their patients; they would be a very different class of men. It is very well known that in this town there are persons who have a large practice, but who have entered as general practitioners, and therefore do not realize the same income as those who have commenced as physicians; who starting with a higher qualification and larger fee, have throughout their professional career continued to realize those larger fees. A person who has commenced as a general practitioner, even with a large practice, frequently will not make more than a fourth of the income that a person who has commenced practice as a physician with the same practice will make. I hold that if this Bill be passed into a law the emoluments of the profession would, as a profession, be diminished.

550. Mr. *French*.] How could that be, if under the 23d clause the regulations that were made established a course of education which provided for a well educated faculty?—Because I maintain that from the operation of the clause before alluded to, the profession would be reduced to one class or faculty, and that class or faculty would not be composed of persons of the highest qualification that might be pointed out by this Bill, but would be composed of persons of the lowest qualification that was allowed by law.

551. I understand you to object to the mode proposed by the 23d clause with a view to obtain uniformity of education; do you believe it possible to get the different colleges in the United Kingdom to agree on any uniform course of education by themselves, left as they are?—I think it would be a work of very great difficulty to do so; the conference would be very protracted, and it would be very long before we should arrive at any satisfactory conclusion.

552. Do you think that it could ever be done, except by some impartial and independent authority?—Yes, I think it might be done, because I think that the interests of the profession would compel them to agree to something, rather than have this awful and continued agitation that we have had.

553. Has not this awful agitation that you speak of been going on since 1837?—Long before that; before the Committee of the House of Commons in 1834 it had been going on for some time.

554. The Right honourable Baronet was, on account of that agitation, obliged to change his Bill three times, was he not?—There were modifications in the Committee twice of the Bill originally introduced.

555. Do you not consider that the person who I presume must be acknowledged to be a person of very superior ability, who holds the office of Secretary of State, who is an impartial person, free from all professional prejudices, would be as likely as any council or professional college to decide fairly and impartially on the different suggestions made to him by the governing medical bodies and different corporations?—No, I do not think so, because he has no knowledge upon the point himself; he must go to some medical person, and the probability is that the person by whom he would be guided would be his medical attendant, who would be unknown to the profession, and who, though he might be a clever practical man, might understand very little of medical education, and might never have attended to the subject.

556. But still the person would have the suggestions of all the various bodies; he would not have to suggest anything, but have merely to decide upon the course prescribed by the different colleges?—Before they could place confidence in his decision they must know who he was, and he must be responsible; I think that one person would not be competent to decide on such a complicated question as this would be; he would be deciding between the schemes of a number of learned bodies in the kingdom, and he would also be irresponsible.

557. Your objection to that would be got over by the introduction into the 24th clause of a Council of Health, such as was proposed in the last Bill of Sir James Graham?—I think that would be the best way of getting over the difficulty, and I see no other myself.

558. Your objection to the registration clause 5, and clause 10, I understand to be, that you think it would be absurd to constitute a mere apothecary as surgeon or physician by Act of Parliament?—I think it would be most preposterous.

559. If the registration certificate should state in which department or departments the person registered is entitled to practise, whether as physician, surgeon, or apothecary, or in all those characters, would you see any objection to the registration, and to an authority being given to a person to practise in those different departments, for which he is qualified?—I do not think that the mere alteration of that registration would do away with the objection which I have stated at length to the registration; it would do away with one part, because it would do away with the revolutionizing of the profession, and rendering it only one faculty; by the wording of that medical certificate you would still be acknowledging the existence of the different grades or orders in our profession; so far it would certainly get rid of the objection.

560. Sir *R. H. Inglis.*] In answer to one of the last questions of the Chairman, you said that the emoluments of the profession would be diminished by the course therein recited; so far probably the public would derive a proportionate advantage; but would that advantage, in your judgment, be or be not counterbalanced by the destruction of that class of physicians from whom, at the present time, the public expect and receive an advantage, as the result of more enlarged education and of longer study directed to the cure of disease?—I do not think, that though at first sight it may appear that the public may gain some advantage in a pecuniary point of view, they would eventually gain any advantage in a pecuniary point of view; and secondly, I think that the public would suffer from the loss of more highly qualified practitioners, and the extinction of that grade, more than they would gain of trifling advantage in a pecuniary point of view.

561. Have you any reason to hope that, by the operation of this Bill, if it were to become law, and if there were consequently an amalgamation of all persons practising medicine in its present different grades into one class, there could ever arise any men of that eminence in surgery, for example, as, without referring to living men, were the late Sir Astley Cooper, or the late Mr. Abernethy, or the late Mr. Cline, without pursuing the illustration further?—I think you might have occasionally a man of genius, who would step out, and who would arrive at eminence by the force and energy of his character; but you still would not have anything like the same number. Indeed they would be exceptions to the rule, if such a system were established.

562. You do not anticipate that such a result would be likely to grow out of such a course of legislation; on the contrary, you wish the Committee to understand that such men, in your judgment, would be rare exceptions?—They would be very rare exceptions.

563. You were asked by the Chairman, in the course of his examination, whether in your judgment, admitting that the suggestion therein made by him was a great improvement upon the Bill as it now stands, you would or would not recommend certain persons to be present at the examination for medical degrees at the College of Physicians; has it occurred to you, as a graduate of the University of Cambridge, whether you would adopt the suggestion of the Chairman as being preferable to the Bill of Sir James Graham, which was printed on the 28th of July 1845?—I would beg leave to remark, that in speaking as I did in reference to that part of the question, that in the Bill which was brought into this House in July 1845, there is a clause which expressly excludes the Universities of Oxford and Cambridge from that Bill, and therefore I have not paid particular attention to the subject.

564. Would you recommend any such exclusion in any Bill to be brought forward hereafter?—I think, if the Universities of Oxford and Cambridge could, consistently with their duty, come to some understanding with the College of Physicians in London with respect to the mode of medical examination, it would be conducive to the good of those parties and the College of Physicians that such an understanding should exist, and such an attempt was made, and we had arrived at something like an understanding that should not compel the graduates of the Universities of Oxford and Cambridge to submit to an examination which by law they would be compelled to submit to by the operation of this Bill, but that some arrangement should be come to without interfering with the examination at the universities, by which all physicians should come under the same law.

565. Would you suggest the same thing with reference to the Universities of Scotland and the University of Ireland?—I should think that it is quite essential, in order to insure uniformity of education and fairness of examination, that there

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should be some supervision exercised over all bodies who educate and license, and I think, therefore, that it would be unfortunate if any were excluded from that supervision, but of course it must be done with all respect to the feelings and privileges of those respective bodies.

566. Do you conceive it possible, if you make it compulsory, to respect such feelings and privileges?—With respect to our English universities I do not myself think that there would be any considerable difficulty; if, for example, any two fellows of the College of Physicians, who were also graduates of those universities, and who were members of the Senate on the occasion of examinations at those universities, were deputed on the part of Government to be present at the examinations, and to see that those examinations came up to the standard of the examinations of other bodies.

567. That was the plan suggested two years ago?—Yes; I think it would be to the advantage of the graduates of the two universities, before such a Bill came into operation, that there should be some understanding come to under which they should be admitted, rather than that they should be excluded from it. I think that they have nothing to fear from coming into it, and inferences might be drawn from their being excluded that their standard did not come up to the standard of other bodies.

568. Do you find that such a prejudice exists at this moment?—I do not think it does, simply because there is no inspection exercised over other bodies, and it is very well known that the standard there is very high.

569. When you speak of "the standard there," you speak in reference to the standards of the Universities of Oxford and Cambridge?—I do not know so much of the regulations at Oxford as at Cambridge; but I know that the standard has been, in the last 10 or 20 years, continually raised in the University of Oxford, as well as the University of Cambridge.

570. Bearing a fair proportion to the standard of medical education throughout the medical bodies of this empire?—Yes, in Cambridge; but I cannot answer that question, because I do not know what has been done in Oxford; but I have seen that various changes have taken place there, and the result of all those changes has been to require a still higher qualification.

571. You were asked, with reference to the influence of the College of Physicians, as distinct from its legal power, two or three questions, with respect to which you stated that physicians, being gentlemen educated to fill a certain station, no man deserving of that station would wish to appear in a false character, or to take a position which did not belong to him. Will you state to the Committee whether there be not practically another indirect influence exercised by the College of Physicians, and possibly also indirect influence against the introduction of persons who are not legally licensed by the college, within the metropolis, viz. the refusal by physicians in regular practice to meet in consultation any one who is not licensed?—That, no doubt, operates to a very great extent; a gentleman who is presuming to act in London as a physician without being a member of the College of Physicians, feels, if he comes into a room where there are others, who are members of the College of Physicians, in a very unpleasant position; he is liable to be informed against, or they may object to regard him in the light of a physician, and consult with him; and therefore he may be placed in a very unpleasant situation in the family where he is called in, and in most of the public institutions in this country they make it a *sine quâ non*, when they elect officers as physicians, that they should be members of the College of Physicians. Therefore the college is not called upon so frequently to attempt to impose its penalties as they otherwise would be. Those are all causes which operate, no doubt.

572. All those are causes giving directly or indirectly to the college a more direct controlling power over the character of the profession generally than might appear, from the mere fact of their not having legally prosecuted an individual for more than 10 years?—Certainly; but by the operation of this Bill, if it became the law, it would not be necessary for any gentleman to come to the College of Physicians, or in any way subject himself to their examination.

573. Is it the fact that the power of prosecution vested by the charter in the College of Physicians cannot be exercised except against a person who has practised medicine during a whole calendar month, and is it necessary that you should sustain proof of his having practised for such a time?—I believe it is the fact, and the difficulties of sustaining such a proof are extreme.

574. Is

574. Is it not the fact that the proof of a single instance in which the party had practised medicine would not be sufficient to entitle you to bring an action against the individual so practising?—The wording of the statute is not so firmly fixed in my memory as to enable me to speak positively upon the subject, but that is my impression.

575. Looking to the state of the profession before and after the introduction of the Bill to which your attention has been called, namely, that which bears on its back the names of Mr. Wakley and Mr. Warburton, would you rather leave the profession as it is without such a Bill, or without even adopting the Bill of 1845 in its most amended form; that is to say, would you be content with the state of things at present rather than adopt the Bill of 1845 or the Bill of 1847?—I should be more content with the present state of things than have this Registration Bill passed as it stands, because I feel convinced in my own mind that it would revolutionize and disorganize the profession, and that it would degrade our profession.

576. Even as amended in accordance with the questions of the Right honourable Chairman?—Certainly; it is faulty in principle, and it has been drawn up without any regard to the feelings of the profession.

577. Would you rather have the present state of things than an amendment under the Bill of 1845?—I think a large part of the Bill of 1845 would be very subservient to the good of the profession; it is some time since I read that Bill through, and I hardly like therefore to commit myself by expressing my opinion upon the whole of the changes therein made, but except a disorganization or revolution of the profession, such as this Bill would bring about, I can hardly conceive any greater evil in a profession like ours than a continued state of agitation upon the subject. If the Government do not take up the subject of medical legislation, our profession must remain in a state of continual agitation, which is productive of the most serious mischief to the profession; not only to its harmony, but also in withdrawing from their proper duties and their proper subject of study and contemplation some of the most active and energetic minds in the profession.

578. Was it or not the object of the Council of Health, which was proposed to be established by the Bill of 1845, to supersede the independent agency of all distinct bodies within the United Kingdom?—I think, from what I understood of the Bill, that it was the intention that they should be all to a certain extent under the control of the Council of Health, so far as regarded education, but not with respect to internal control, or the internal regulation of affairs; they were to be governed by new charters, which were to be conferred at the same time.

579. So far as the Council of Health might have been authorized, under the powers of the Bill of 1845, to send examiners or assessors to the examinations in the College of Physicians, for example, or in the University of Cambridge, the independent agency of those two bodies respectively would be superseded or at least diminished?—I can hardly say that it would be superseded, because, as I understand, those assessors or inspectors were to be present at the public examinations, and if they thought that those examinations were not conducted with fairness they were to report that to the Council of Health; but they were not to take any active part in the examinations, or to take any active part in any of the internal proceedings of the College of Physicians, or of any other public body.

580. Mr. *Hawes.*] You use the expression, "the examination conducted with fairness;" what do you mean by that?—I mean that if the examiners did not examine up to the point that the law fairly required them to do, the inspectors would report it to the Council of Health.

581. Sir *R. H. Inglis.*] In answer to a question put to you in the early part of the examination of to-day, you stated that the absence of a Council of Health was a very great defect in the civil polity of England; can you state whether there be or be not, in any country of the civilized world, any Council of Health, the working of which in that country might be a recommendation for its adoption here?—I cannot say whether there is any body similar to a Council of Health in other countries, though in other countries in which I have resided I know that there are bodies who do certainly take upon them the duties which I understand would be confided to this Council of Health.

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582. In other countries it is well known that there are public bodies called by the same name, the Council of Health; but are you prepared to state that the Council of Health, for example, in Naples, represents, in its functions and objects, the Council of Health, the adoption of which was enacted in the Bill proposed to become the law in the year 1845?—So far as regards the duties of the Council of Health, as defined in the Bill of 1845, they were very limited, although it was generally understood in the profession that the probability was, that those duties would be something more than the mere regulation of medical education, and the profession, I believe, looked at it with general satisfaction.

583. One object of the Council of Health, as proposed in the Bill of 1845, was the formation of a body who might give an opinion upon matters of quarantine, for instance, or great contagions, and might act as the centre of a sanitary police for the empire?—It was more especially with reference to those great national objects, as well as exercising a control over medical education, that I understood that the Council of Health would direct their attention.

584. In other countries, has such Council of Health under its jurisdiction the medical education, or can you state whether there is any central body having such jurisdiction and functions?—I believe that in France, and in Austria, and in Prussia, there is some central body which does direct medical education, and to which all the educational bodies are obliged to conform.

585. Do you wish the Committee to understand that the University of France has such a cognizance of medical education as the Council of Health proposed by the Bill of 1845 would have over medical education in this country?—I do not know as regards the University of France, but I believe the Minister of Public Instruction in France has, and that he sanctions or not the course of education for the medical faculties in different parts of France.

586. Do you understand him to exercise such a jurisdiction as that which, by the Bill now in your hand, brought in by Mr. Wakley and Mr. Warburton, is proposed to be exercised by the Secretary of State for the Home Department?—I really hardly know how to answer that question, because I have not sufficient information with respect to the duties of the Minister of Public Instruction in France, or of the police in Austria, to say how far they are analogous with the duties proposed to be thrown on the Secretary of State by the 23d and 24th sections of this Bill.

587. Looking at the state of the profession, would you or not consider that a revised charter of the Royal College of Physicians would, as far as the practice of medicine in the higher branch is concerned, be an adequate remedy for the present evils; and could you, in such revised charter, introduce such regulations as would give more efficient powers to the College of Physicians for the discharge of the duties confided to it?—I think that if the charter were modified in the way that is pointed out, particularly in the memorial which I have produced to the Committee, and which was presented to Sir George Grey last autumn (in 1846), and also in the way which was proposed in the charter which was agreed to by Sir James Graham when he was in office, it would enable us, as far as our department of the profession is concerned, to obtain an improvement in the profession, and also to advance medical science more effectually, and it would enable us more effectually to control the conduct of physicians throughout the empire. I believe that that would be a very efficient mode of doing it.

588. Several questions were addressed to you respecting the difference between the necessity of education for the medical profession and its higher branches, carried to a considerable degree, and the education required for the bar; is there or is there not this great practical difference over and above the differences that you have stated, that the youngest practitioner in medicine has charge of the life of a patient, whereas the youngest practitioner at the bar has scarcely, in any cases, such a charge, and in the vast majority of cases no charge whatever?—There is that great difference, and in addition to the charge in the one case being much more serious and responsible than in the other, there is this advantage to the young barrister, that when he goes into court he has probably on his right and left those who are acquainted with him, who are more experienced than himself, and who may probably give him help and assistance in the management of his case; whereas the young man who has entered upon the practice of a physician, or who intends to take the rank of a physician, has to go into the sick-room without any assistance on his right or left, and has to act upon his knowledge

ledge and upon the education that he has previously undergone; it is a most serious charge imposed upon him.

589. Practically, you wish the Committee to understand that, in your judgment, there is no analogy between the laxity of requirement in the case of the bar, and the strictness of requirement in the case of medicine?—I wish the Committee to understand this, that it is not essential for the good of the public that the barrister should have such high qualifications, and that those should be ascertained before he commences practice at the Bar; but on the other hand, it is essential that the physician should have high qualifications, and that those should be ascertained before he enters his profession.

590. Therefore, do you wish the Committee to understand, that any provision which has a tendency to lower professional men in the several grades is an injury to the profession itself, and to that part of the empire in which the profession is to be exercised?—That entirely expresses my opinion.

591. Mr. *Hawes*.] Will you look at the 3d clause of the Bill, and allow me to ask you whether you understand or not by that clause that any person presenting a legal qualification is entitled to become registered under the Bill?—As I read that clause, and I have read it more than once, and I have read it in conjunction with the other clauses of the Bill, with the *bonâ fide* intention of understanding the meaning of it, I believe that any person with any description of legal qualification may obtain registration under this Bill.

592. Do you understand the Bill to confer upon the parties so registered the right to practise both medicine and surgery?—Both medicine, surgery, and pharmacy.

593. In fact all branches of the profession?—All branches of the profession indiscriminately.

594. Does it then, or not, follow that a person asking to be registered under this Bill, and presenting a qualification, for instance, from the Society of Apothecaries, would become entitled, upon registration, to practise in all branches of his profession?—I clearly understand it to be so. A person having a licence from the Apothecaries' Company in England, or the Apothecaries' Company in Dublin, may settle himself in any part of this empire, and he may go to the office in Tottenham-court-road and purchase for a small sum a degree of doctor of medicine, and may put on his door doctor so and so, and he may write under his name "surgeon," and next door he may open a shop as chemist and sell cattle medicines; so that he may practise as a doctor, surgeon, and chemist and druggist, and veterinary druggist at the same time.

595. With regard to the qualification for the certificate for the Apothecaries' Company, is it within your knowledge whether the Society of Apothecaries examine in surgery or not?—It is well known that they do not examine in surgery.

596. Is it then the fact that under this Bill any party may practise in surgery without any examination in surgery?—It is; that is my understanding of it.

597. Under the operation of the Bill, as you have described it, is there any security given to the public that the physician or surgeon is qualified by previous education and examination to practise those two branches of the profession?—No; there is security given to the public that the man shall have some one qualification, but there is nothing, as far as I can make out, to prevent the man that has that one qualification, whatever it may be, practising in every department of the profession. He would be, under this Bill, a legally qualified practitioner in every branch of the profession.

598. Will you refer to the 23d clause of the Bill. Under the 23d clause of the Bill it appears that the Secretary of State would have the absolute power to determine the education of every branch of the profession, "according to the nature thereof," at his will and pleasure?—I have before answered that question, that I understand, with reference to the Secretary of State, that no scheme of education can be carried on that does not entirely meet with his approval; and therefore, of course, if he chooses to exercise his veto upon any scheme submitted to him, he does in that way completely direct the education of every order in the profession.

599. Do you find any provision in the Bill requiring the Secretary of State to appoint responsible advisers?—No, I do not find any.

600. Do you think that the profession would be satisfied with the lodgment of this power with the Secretary of State, without some responsible person to assist him?—I think the profession would be extremely dissatisfied, and that it would

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be aggrieved if proper and responsible persons were not appointed by the Secretary of State, those persons so appointed being members of the profession.

601. Mr. *Dennistoun.*] Do you know anything of medical practice in Scotland?—No, I do not, of my own knowledge; I have never resided in Scotland; I have visited Scotland with a view to see the institutions there, and to see the country, but I never resided there for purposes of study, or any other purpose.

602. Mr. *Acland.*] You did not make quite clear the distinction between the elects and censors; do the censors now examine for a licence beyond the seven miles?—We consider that the licence granted by the censors is valid, not merely in the metropolitan districts, but that the man so licensed is a legally qualified physician throughout all England.

603. Am I wrong in supposing that a few years ago the practice grew up of general practitioners coming from the country and receiving licences as physicians from the body called "The Elects of the College"?—That practice had arisen and gone to a considerable extent.

604. Will you be kind enough to state when it arose, and how long it went on?—I have no document to refer to; but speaking from my recollection I think it must have begun about six or seven years ago, and I think it has been discontinued within the last 18 months or two years.

605. Do gentlemen in general practice in the country, now come up frequently to be examined for degrees as physicians?—They frequently apply; but the qualifications that are required by the elects have been recently raised, and when they find that the qualifications are so high as they are, they decline coming up; they make the inquiry, and finding that to be so, they decline coming up.

606. Then such examinations have ceased?—Not altogether; there will be an examination of the college next week, and one or two have made application.

607. You are of opinion that there ought to be no distinction between the examination for the metropolis and the country?—No difference.

608. Mr. *French.*] And, in fact, there is none, because the examination of licentiates and extra licentiates is the same?—It is not the same; it is much more nearly approximated than it was formerly.

609. Mr. *Acland.*] Is it conducted by the censors?—No, it is still conducted by the elects. If the Committee will permit me I will explain, that the great body of the fellows of the College of Physicians, having complained to the elects of the facilities that were given for gentlemen to take extra licences, and having remonstrated with the elects, the elects have paid attention to the remonstrance and have raised the qualifications in this way: they compel the candidates who come up for an extra licence to undergo a part of the examination which is instituted by the censors; that is to say, the examination upon paper by answering written questions; and those answers are referred to the elects, who look over them, and then they have an oral examination before themselves, in order that they may be sure that the person is competent. Up to a recent period there was no examination of the extra licentiates on paper, but the elects satisfied themselves with a simple *vivâ voce* examination.

610. Am I wrong in supposing that gentlemen distinguished in the country as surgeons have become physicians under the examination of the elects?—Yes; some have taken out a licence, and have afterwards practised as physicians in the provinces.

611. Do you think that persons of that class, rising to eminence in practice, possess all the qualifications that are possessed by a physician who has been so eduated from the beginning?—No, they do not; but though they are deficient in that, they have that standing in the country which fairly entitles them to take the title of physicians.

612. Should you think it an advantage to the profession if the class of physicians was composed of persons who gradually rose to eminence from their practice in other departments, and who were not originally trained for that special branch of the profession?—I think it would be very injurious to the profession.

613. Are there very few gentlemen who practise as apothecaries without passing the examination of the College of Surgeons?—Very few to my knowledge.

614. Will you have the goodness to explain the difference between the course of education pursued by persons in the different branches of the profession; viz. physicians, surgeons, and apothecaries?—The regulations of the different bodies that regulate that are very extensive, and are continually undergoing change, and I can hardly state with accuracy what are the regulations of the College of Physicians

Physicians or College of Surgeons at the present moment without having the printed regulations. I can state the course of study that is pursued by physicians at the present day.

615. Can you, from your observation as a teacher and as an examiner, state to the Committee the practical difference between the course pursued by students when they are intending to commence practice as general practitioners, and when they are intending to commence practice as physicians?—A young man who intends to pursue the profession of a general practitioner usually leaves school at about the age of 16, and is apprenticed to some practitioner of the same grade of the profession as that he intends to enter himself, and he usually passes two or three years with that practitioner, and then comes to some of the great public institutions where medical education is going on, and he there remains during three years, or the larger part of three years; having remained that length of time, he undergoes his examination, and leaves his place of education, and commences practice, and pursues his profession in the best way that he can. That constitutes the medical education of general practitioners. Of course, the various lectures that he attends, and the amount of hospital attendance, is laid down in the prescribed rules. The course of education of a physician, in the present day, (I speak from experience of 20 years, obtained in one of the largest hospitals in London, namely, that of St. Bartholomew's) is twofold. There are some young men who intend to become physicians, who come from the English universities at the age of one or two and twenty, having graduated in arts, or not having graduated in arts. I myself graduated in arts, and most of them do so now. They come to St. Bartholomew's, and remain there for four or five years, sometimes longer, till they have arrived at the age of six or seven and twenty. Their business, in the earlier part of their career at the hospital, is to attend lectures, just in the same way as the man who is to become a general practitioner. They attend the same course of lectures, but the probability is that they attend more courses of lectures. They remain in the hospital five or six years before they go up for their examination. Many of those gentlemen, instead of remaining so long a time in the metropolitan hospitals, go for one or two years to some of the great schools on the Continent, either Paris, or Vienna, or Berlin, or some of the other schools. I spent upwards of two years in that way, one in Paris, one in Italy, and six months in Germany. That is the usual course for young men who come from our English universities. They spend four or five years, or a longer time, in our London hospitals, and they go for one or two years to the foreign schools, and then, at the age of six, or seven, or eight and twenty, they go up for examination, the whole of their previous time having been occupied in education. There is another class of young men at our great medical schools who have not had the advantage of a university education, from limited means and other circumstances. They come to our public hospitals and go through the course of education prescribed for general practitioners, and while they are there the medical officers, and the teachers, observe that they are young men of superior attainments and talents and great industry; and in all probability, though they have not been to an English university, they have still had a good preliminary education. We urge those young men not to content themselves with the education which is acquired by general practitioners, but to aim at obtaining higher places in the profession. We urge them to graduate at the University of London, or to go to the University of Paris or of Berlin and reside there for some time before they take out their degree, and then come back and pass their examination at the College of Physicians. Every year there are generally one or two young men of great talent and superior attainments at St. Bartholomew's Hospital who have had a very fair preliminary education without having gone to the universities, and whom we urge to take a higher grade in the profession. That is the way in which young men at the present day are educated as physicians.

616. Is it your opinion that the extent of the lectures in the case of the apothecary is such as to render it impossible for young men, in the time that they devote to it, to go through the necessary course of study?—I think that it is totally impossible; it is only a person of superior talent that can accomplish it.

617. Do you find that those who intend to give more time to their profession do go through that course of study with more leisure and allowing more time for deep thought as they go on?—No doubt the education being spread over a larger number of years, they are better able to cope with the large variety of subjects, each one of which is full of considerable difficulty.

 618. Should

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618. Should you say that the education of such persons becomes more scientific, and that they have a more correct knowledge of principles?—They have a much deeper knowledge of all the principles of the sciences which may be said to be auxiliary to medicine.

619. Do you think that it is of great importance to young men that they should protract their general preliminary education to the age of 21 or 22 before they enter upon medical education?—I think it certainly a great advantage, but you cannot expect the great mass to do so; the emoluments of our profession are so small for those who enter as general practitioners, that you can hardly expect them to devote the time necessary for that purpose.

620. Have the majority of the pure surgeons of the metropolis had a university education?—No, it is very rare.

621. Do you think it very important that the inducements held out to them to go to the universities should be increased or diminished?—Certainly, that they should be increased.

622. Do you think that the effect of this Bill would be to increase or diminish them?—Diminish them, most undoubtedly.

623. Do you think that the education given at the Scotch universities, so far as you are acquainted with it, from communication with your professional brethren, is such as to give the same amount of medical knowledge as is given by the English universities?—The regulations of the universities in Scotland, as far as I am acquainted with them, require a very slight preliminary education preparatory to a degree in medicine.

624. Do you think that it is possible to make the English universities efficient as medical schools?—I do not think that they can ever become great medical schools.

625. But you think that medical men should go there?—I consider it most desirable that the preliminary education should be obtained in the English universities.

626. You think it desirable that young men should attend the English universities, in order to obtain a good preliminary education before they enter upon their medical education?—Certainly.

627. Mr. *Dennistoun.*] Did I understand you to say, that the Scotch universities were in the habit of giving diplomas without much preliminary education?—No; the answer that I intended to give was, that the Scotch universities did not require much preliminary education before a party entered upon his medical education or when he obtained his medical degree.

628. Mr. *Acland.*] I understood you to say that the education at the Scotch universities was much more professional than at the English?—I understand that it is exclusively professional.

629. *Chairman.*] You mentioned some place in Tottenham Court-road where doctors' degrees could be bought; from what universities do those degrees come?—I cannot tell.

630. Is it from any body that is competent to grant degrees?—Yes, it is a thing well known; if you look in any medical journal you will see advertisements continually.

631. We will suppose that it is so, that a man can buy such a degree now?—It is done.

632. In answer to Mr. Hawes's question about the effect of this third clause, you drew a strong picture of this sort, of an apothecary who had never attended to surgery, who, if this clause passed, might buy a degree as doctor, put surgeon upon the door-plate, and set up next door a shop for cattle drugs, and practise as physician, surgeon, and chemist; is it not perfectly competent for a man at Leeds or Manchester, or York, to do so now?—No.

633. He could now buy a degree?—Yes.

634. He could call himself a doctor?—Yes.

635. He could open a shop for drugs?—Yes.

636. He could be a surgeon; for is it not the fact that I might cut off a man's leg if he were foolish enough to trust me; is there any law which would prevent a man whom any other man would trust performing any surgical operation whatever?—I believe there is not.

637. Is there any law to prevent him putting "surgeon" upon his door-plate?—I am not aware of any.

638. Is there a single circumstance in that strongly drawn description which you

you gave the Committee of the evil to which this third clause might lead, which might not exist now; might not any who had passed the Apothecaries' Company do that at present?—Certainly not, there are many differences; if he called himself a doctor he would be amenable to the laws for practising as a physician without authority.

639. But beyond the seven miles line, to what penalty would he be exposed?—He would be practising illegally as a physician.

640. You would not be able to punish him?—That is the weakness of the law; there would be this difference also, that whereas under the existing state of things he would be doing it contrary to law, under the new state of things he would be doing it according to law.

641. Is there any law which renders it illegal for any man to perform a surgical operation?—I believe there is no direct law, but indirectly the law would affect him.

642. He would be liable to prosecution if bad consequences followed?—Yes.

643. A regularly qualified medical man would be liable in the same way; if a person undertakes to cut for the stone, and the patient dies from his want of skill, he is liable?—I meant to say that that would be the operation of this Bill if it became law.

644. I want to learn whether every one of the evils which you attribute to clause 3, may not at present exist?—I did not mean to attribute all the evils to that clause, but wished to show what would be the operation of it.

645. Mr. *Wakley*.] By what clause of the Bill do you discover that such would be its operation if this Bill were to pass?—By clauses 3, and 5, and 10, and 31, and the medical registration certificate.

646. You mean to say that you find in those clauses that if a man were to purchase a degree in Tottenham Court-road, at the office there, he would be entitled to be registered under this Act?—No, I never said anything of the kind.

647. Will you be kind enough to state what you did say with respect to the purchase of a degree in Tottenham Court-road?—What I did say was that if an individual had a legal qualification of any kind, he might be registered under this Act, and he might then purchase the degree of a doctor, and call himself a physician; and having a qualification under this Act, and calling himself a physician, he might write "doctor" over his door, and practise as surgeon, and also keep an adjoining shop, in which he might carry on the operations of a chemist and druggist; and he might in that way carry on all the grades of the profession at the same time, having received only one qualification.

648. Is there any law now to prevent him calling himself a physician?—Nobody writes upon his door, "physician."

649. Is there any law to prevent him calling himself doctor?—I do not know that there is.

650. Or surgeon?—No.

651. Or apothecary?—I am not sure how far the Act of 1815 would interfere with that.

652. How many years have you been a censor of the College of Physicians?—I have not been one year in the present censorship. I had been a censor before.

653. How many years altogether have you been a censor?—This will be my fourth year.

654. When were you a censor before the present year?—I think it must have been about four years ago.

655. Were you one of the Reform Medical Committee of the College of Physicians of 1845?—I have been one of the Committee of the College of Physicians for a great many years; long before 1845. I do not know whether you call it a reform committee.

656. Had you the Bills before you which were introduced by Sir James Graham into the House of Commons in 1845?—We had as soon as we could get them after they were printed.

657. Did you approve of the whole of the Bills?—No, not in all their parts.

658. Did you approve of the last, which was introduced on the 28th of July 1845?—We never thoroughly considered that Bill, for this reason, that Sir James Graham withdrew it before we had time to take it into consideration.

659. But was not that Bill the result of arrangements which had been entered into between the Government and the College of Physicians and other colleges in London?—So far as the College of Physicians was concerned it was, but with

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reference to the other colleges of the profession, the College of Physicians took no part in the arrangements to be made with those other colleges; we satisfied ourselves with giving our advice as to what we thought would be the best course with regard to the order of physicians.

660. As far as the College of Physicians were concerned, that Bill had the sanction of the college?—Yes, as far the general arrangements with regard to the order of physicians went we were satisfied with it: but there were regulations in the Bill which we hardly considered, because of Sir James Graham withdrawing the Bill.

661. The Bill was not withdrawn; it was introduced too late in the year to be proceeded with?—I may have used a wrong term; it was not proceeded with.

662. Sir *R. H. Inglis.*] You mean by the term "withdrawn," not proceeded with?—Exactly.

663. Mr. *Wakley.*] I was very anxious, as the College of Physicians sanctioned that Bill, to direct your attention to its provisions?—But I must object to that inference being drawn, that the College of Physicians have sanctioned it.

664. Have you not stated that they sanctioned the Bill so far as the order of physicians was concerned?—No; I have said that the College of Physicians was satisfied with the arrangements relative to physicians, with the exception of certain regulations which were proposed, and in consequence of this Bill not having been proceeded with, the College of Physicians never took those regulations into consideration or expressed any opinion upon them; in my evidence, I expressed an opinion as regards the Council of Health, that was my individual opinion; but the College of Physicians never had an opportunity of considering the provisions introduced into the amended Bill, which was brought in by Sir James Graham, because after the Bill was printed, it was not proceeded with; and in consequence the college was never called upon to deliberate upon it.

665. Have you not stated that you prefer the constitution of a Board such as was provided for in that Bill to giving such a power to the Secretary of State, as regards medical education, as is given by the Bill before the House?—I think it would be very preferable that there should be a body such as was provided for in the Bill of 1845, introduced by Sir James Graham, to leaving that extensive power in the hands of the Secretary of State, as is proposed in the Bill introduced by yourself.

666. Will you be good enough to refer to clause 2 of the Bill introduced on the 28th of July 1845, and state who were to be the members of the Council of Health?—It does not specify who were to be members. It says, "And be it enacted, that a council shall be established, which shall be styled 'The Council of Health,' and that one of Her Majesty's Principal Secretaries of State shall be a member of the said council in right of his office as Secretary of State, and that the other members of the said council shall be such persons, not more than 12, whom Her Majesty, with the advice of Her Privy Council, shall deem fit to be members of the said council."

667. It does provide that there shall be not more than 13 members of the Council of Health, that the Secretary of State shall be one, and that the other 12 shall be such persons as shall be approved of by the Queen in Council?—Yes.

668. Does that clause provide that any one of the 13 shall be a medical practitioner?—No, it does not in words provide for it.

669. Does it by implication?—Yes, in conjunction with the other clauses of the Bill, I think it does.

670. What is there to denote an implication that there shall be a single medical practitioner in that council?—When you look at the Bill and see what the objects of the Bill are, and when you see how it is defined what the duties of this Council of Health are to be, you can hardly suppose any Secretary of State to be so insane as not to yield to public opinion and to common sense, by appointing a medical man to act in that council.

671. But still there is no provision in the clause that there shall be any medical man in that council?—No, there is not.

672. Does clause 6 provide that the Secretary of State shall be president of that council?—Yes.

673. And also that he shall have the power of nominating the vice-president, who, at every meeting of the council, shall act as president in his absence?—Yes.

674. Does clause 9 provide, "That a register shall be kept and published from time

time to time, under the direction of the council, of all persons who shall have been examined, and shall have received, and shall exhibit before the said council, letters testimonial as hereinafter mentioned"?—Yes, "of their qualification to practise as a physician, or as a surgeon, or as a general practitioner."

675. In clause 10 is it provided, "That every person shall be entitled to be registered by the council as a general practitioner, who, at the time of the passing of this Act, shall be legally practising or entitled to practise as a physician, surgeon, or apothecary, in some part of Her Majesty's dominions"?—Yes, it states that, but you must excuse my ignorance upon this matter, because I have not looked at the Bill for two years, and my attention has not been kept up to the subject.

676. In clause 17 is it not provided, "That the several colleges shall, from time to time, when required by the Council of Health, prepare and lay before the council a scheme or schemes of the course of study, and particulars of the examination to be gone through by all persons applying to be examined by such colleges respectively, and of the fees to be taken by the said respective colleges respectively"?—Yes.

677. Does it also provide "That the said council shall be empowered to make, from time to time, such changes in any of the schemes so laid before them as to the said council shall seem expedient"?—Yes.

678. According, therefore, to the provisions of this Bill, could all those powers with reference to medical matters be exercised by this council, without the assistance of a single medical member?—No.

679. Can you show the contrary?—Yes, from the other parts of this Bill, and from the duties imposed upon this council, I think one may fairly infer that that council would have been composed in part of medical men of eminence named by Her Majesty's Secretary of State as being the persons most competent to take up the question.

680. I am not asking for an inference, but does the Bill provide for the introduction into the council of a single medical practitioner, surgeon or apothecary?—I do not see that it does in words provide for it. But I would beg to submit this to the Committee: I am asked to give my opinion on several clauses of this Bill. I have not read it for two years, and I think that it is hardly fair to call upon me to express my opinion at this moment upon clauses, the wording of which I cannot at the moment understand. I see that I have already been led into a misstatement. I have stated that there was nothing in this Bill to authorize me to say that there would be a medical man upon the council. I see that in the 21st clause there is something to show that there would be upon the council a physician, a surgeon, and a general practitioner.

681. Sir *R. H. Inglis.*] You were asked whether there were any enacting words, or whether any inferences could be drawn from the contents of the Bill, which would justify the conclusion that the Council of Health to be established by the Bill introduced as amended in July 1845 would contain any medical men of any grade whatever; will you look at clause 21, and see whether, by inference at least, the council would not contain at least one physician, one surgeon, and one general practitioner, inasmuch as the council, meaning the Council of Health, is by such clause authorized to depute any member of its body, being a physician, surgeon, or general practitioner, to be present at such examinations?—From a perusal of that clause, which I had not had an opportunity of doing before, I should certainly infer that at least on that council there must be one physician, and one surgeon, and one general practitioner. But I beg to apologize to Mr. Wakley for not having answered the questions more accurately as to this Bill; it arose from want of information. If Mr. Wakley would examine me upon the previous Bills brought in by Sir James Graham, I could express my opinion more accurately; and indeed this memorial which was presented to Sir James Graham was drawn up by the committee of which I am a member, and it would explain the opinion of the college better than I could do.

[*The Witness delivered in the same, which is as follows:*]

A Memorial addressed to the Right Honourable Sir *James Graham*, Bart., M.P., Her Majesty's Principal Secretary of State for the Home Department, by the Royal College of Physicians of London, 18 June 1845.

The Royal College of Physicians of London feels itself called upon respectfully to address Sir James Graham on the important alterations which have been made by the

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Committee of the House of Commons, in the Bill for regulating the Profession of Physic and Surgery.

Enactments equally new and important have now been introduced into it for the first time, which were never contemplated in the course of the discussions that have hitherto taken place between the college and Sir James Graham.

In order to explain its views respecting these enactments, the college begs, in the first place, briefly to recal to Sir James Graham's recollection the tenor of those discussions, and the circumstances connected with them.

Before any measures affecting the medical profession had been submitted to Parliament by the Secretary of State, the college had carefully investigated the grievances complained of in numerous petitions to Parliament for medical reform, and had laid before the Government some suggestions concerning them.

The most prominent of the alleged grievances were found to be as follows :—

1. The want of a general registration of licensed practitioners.

2. The want of some body or Board to which questions of medical polity and of public health might be referred.

3. The existence of local jurisdictions, and consequent restrictions upon practice and inequality of privileges.

4. The want of uniformity in the education and examinations conducted by different institutions, and great disparity thence arising in the qualifications of practitioners passing under the same denomination.

5. The continuance of self-election into the governing bodies of the different medical corporations.

The college has already taken occasion to express to Sir James Graham its approbation of the manner in which the two first-mentioned wants are supplied by the Bill, viz., by the system of general registration therein directed, and the establishment of a Council of Health.

With respect to the two following grievances, the college suggested that, provided uniformity of qualifications could be obtained, reciprocity of privileges might properly be granted. And it professed itself ready to concede to a considerable extent its own peculiar privileges, and to confer, without further examination, the licence to practise in London on the graduates and licentiates of Ireland and Scotland, provided it could be assured that such licentiates and graduates had been educated up to the standard which the college had fixed as necessary for physicians.

For the college has constantly retained, and often expressed its desire that nothing should be done to lower the standard of the general and professional acquirements of physicians; and it is but justice to Sir James Graham to state that he has always manifested a cordial participation in this desire of the college.

Nevertheless the college fears that clauses which have been introduced into the Bill are not unlikely to cause that standard to be lowered. For instance, the 23d clause allows any university to confer the degree of licentiate in the faculty of medicine upon students, of the age of 22, after five years of professional study, only two of which will have been passed in a university, and without any security for a preliminary education or examination in literature and science. Now there will be no restriction to prevent these licentiates from graduating as doctors of medicine, so soon as they shall have reached the age of 26, and that without further university residence or professional study; for the 22d clause, the only one imposing any restriction on medical degrees, does not require for doctors of medicine a term of residence of longer duration or a course of study of greater extent and comprehensiveness than those already specified.

This early age of graduation and limited course of study are clearly at variance with the intentions of the college and the spirit of the 16th clause of the Bill, by which physicians ought to be devoted to their studies up to the age of 26.

For the reasons which have been assigned, the college considers the 23d clause to be inexpedient. It would seem also to be introduced unnecessarily, because, by the 14th clause, provision is, as it should be, made to enable those who wish to act as general practitioners to do so at an early age. And such persons may afterwards, by one of the provisions of the 16th clause, become physicians, if by successful cultivation of medical science they have raised themselves in general estimation.

With respect to the last of the grievances above mentioned, self-election into the governing bodies of the medical corporations, the college offered to redress this grievance, as far at least as physicians in this country are concerned, in the most complete manner, by opening the fellowship to all licentiates of four years' standing, and by giving to all the right of voting in the election of fellows, as well as by other provisions of a liberal nature, especially by offering to admit as associates, without examination, and upon a reduced fee, all *bonâ fide* physicians now practising in England and Wales.

The college was then informed, by a letter which its president had the honour to receive from Sir James Graham, in February 1842, that if the alterations above stated, and others of a similar nature suggested in that letter, were made in the internal constitution of the college, it was the intention of Her Majesty's Government to propose a measure to Parliament, whereby the powers and privileges of the college, as an examining body, would be greatly increased. According to the advice thus tendered, and with the sanction and co-operation of the law officers of the Crown, the college proceeded to prepare, with considerable pains and expense, the draft of a new charter, embracing the alterations which it had itself proposed, as well as those suggested by Sir James Graham. The college has ever

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ever since been waiting for an Act of the Legislature to enable it to accept this charter. It deeply regrets, that meanwhile the general Bill, in conjunction with which the new charter was to have been accepted, has in many respects been materially altered.

As the Bill was originally framed, the college was required indeed to surrender the examination of all Scotch and Irish physicians; but it was authorized to superintend the examination of all persons, of whatever grade, who should seek to obtain in this country a licence to practise medicine. And as the College was instituted for the promotion of medical science, it does indeed seem proper that to it should be entrusted the duty of testing the qualifications of all those who are to have the sanction intended to be given by the Bill of being qualified to practise medicine, just as to the College of Surgeons was to be entrusted the duty of testing the qualification of persons to practise surgery. In the Bill as previously framed, and even in its amended form, this idea is carried out in regard to general practitioners in Scotland and Ireland; for to the respective Colleges of Physicians and Surgeons, in each of those parts of the United Kingdom, is entrusted the function of examining general practitioners. And the college believes that such a principle, if carried out in England, would ultimately give satisfaction to the great body of general practitioners throughout England and Wales, as well as tend to the advantage of the public.

By the amended Bill, however, the authority to examine general practitioners is no longer given to the College of Physicians of England, although it is still given to those of Scotland and Ireland. Nor, in the opinion of the college, is anything like an equivalent for it afforded by the 17th clause of the Bill as amended, which clause prescribes only a preliminary examination before a joint medical and surgical board.

It does not appear to the college to be at all a proper arrangement, that persons who have undergone a previous examination by physicians and surgeons, should be examined, subsequently, in medicine and surgery, by general practitioners.

It is a further and a great objection to such double examination, that it must operate as a discouragement to medical education in England, since in Scotland and Ireland a single examination will be sufficient to qualify for practice.

With respect to the new incorporation, made known in the amended Bill by the name of "the Royal College of General Practitioners in Medicine, Surgery, and Midwifery of England," the college, without objecting to the incorporation of the general practitioners, would press upon the attention of Sir James Graham, that as the College of Physicians was specially founded for the promotion of medical science and for the regulation of medical practice, there are strong objections to the assumption by this new institution of the title of the "Royal College of Practitioners in Medicine."

Nor is it to the assumption of a title only that the college sees reason to object. It must object, even more strongly, to the latter part of the 32d clause, which gives to general practitioners the right to fill all medical and surgical offices, and thus confides the highest duties of the profession to the members of that class which is required to pass through the least extended education, and which is admitted to practise at the earliest age.

In offering the foregoing observations, the college is so fully convinced of Sir James Graham's desire to maintain a high standard of education for physicians, as well as to support the college in the discharge of its proper functions, and even to extend, if possible, its sphere of utility, that it cannot doubt that the remarks which a sense of duty has dictated, will be received with the candour and the attention which the college has met with from Sir James Graham on every occasion.

There are other points in the Bill of minor importance, to which the college is also desirous of requesting Sir James Graham's attention.

With respect to the constitution of the Council of Health, if the representative principle is to be retained, at least in part, there ought not be two members of it returned by the College of General Practitioners, since one member only is to be returned by each of the Colleges of Physicians and Surgeons.

In clause 37, "For securing efficiency of examination," Sir James Graham has yielded to the wish of the college, that none but professional persons should be allowed to be present at the examinations. The alteration, however, which has been made in the composition of the council seems to render it even more desirable than before, in order to obviate some possible jealousies and interferences between the different orders of the profession, that no one should have an absolute right to be present at the examinations, unless deputed by the council for that purpose.

As regards the arrangements for general registration, the college observes with satisfaction that the register is now expressly ordered to be received as evidence in courts of law. It does not seem, however, sufficiently clear whether the supplemental register, provided by the amended Bill, is intended to contain the names of all persons now legally practising, as well those with general as those with only local privileges. Those also who are entered on the supplemental register should be required to send in annually their names and places of abode, as ordered by a previous clause with respect to the register.

In some points the Bill has been amended to the satisfaction of the college. In particular the college approves of physicians and surgeons being compelled to enrol themselves in the college of the country in which they practise, under the penalty of being struck off the register. Also of a penalty for false pretences of qualification being imposed by clause 38, not only on persons unregistered, but on those also who should use a name or title belonging to a class in the registry to which they do not belong.

In conclusion, the college ventures to express a hope that Sir James Graham may find

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it possible to modify the Bill in accordance with the views which have now been respectfully offered. For thus, in the judgment of the college, it is likely to be productive of greater advantage to the profession and the public than can justly be expected from it under its present form.

Francis Hawkins, Registrar.

682. Mr. *Wakley*.] Did you, as far as the order of physicians was concerned, approve of the Bill of May?—As far as the regulation for the education and registration of physicians went, it appeared to me to be a very good arrangement, so far as it enforced uniformity of education; and as regards the mode of education and the extent of education, and also the mode of registration, it appeared to me to be very good.

Veneris, 11° *die Junii*, 1847.

MEMBERS PRESENT.

Mr. Acland.	Mr. Hamilton.
Mr. Aldam.	Sir R. H. Inglis.
Mr. Bannerman.	Mr. Lascelles.
Mr. Dennistoun.	Right Hon. T. B. Macaulay.
Mr. French.	Mr. Wakley.
Sir James Graham.	Colonel T. Wood.

THE RIGHT HON. T. B. MACAULAY, IN THE CHAIR.

George Burrows, Esq. M.D.; called in, and further Examined.

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683. Mr. *Wakley*.] SINCE your last examination, have you referred to the Bill of July 28th, 1845, which was introduced into The House by Sir James Graham?—I have, since my last examination, looked through that Bill.

684. Are there any corrections which you desire to make in the answers which you gave with respect to that measure in your last examination?—Not having my examination before me, I cannot say distinctly; but I remember that I was asked whether the College of Physicians had then approved of that Bill, and I replied that the College of Physicians had not approved of it, because they had never taken it into their consideration. I believe I may state that that is quite correct, although there was an apparent discrepancy between what I stated and what was stated, as I understood, here by the President of the college; the fact was, that the College of Physicians had various objections to the previous Bill, as introduced by Sir James Graham, and those objections of the college were made known to Sir James Graham through a memorial which was presented to him, and which I placed before this Committee, and some of those objections were removed in the last or amended Bill of Sir James Graham; I presume that that fact led the President of the college to say that the college generally approved of the last or amended Bill; but still I am quite correct in stating that neither the committee of the college nor the great body of the college ever proceeded to consider that last amended Bill in its details.

685. You are speaking now of the Bill of the 28th of July?—I am speaking of the last Bill, of the 28th of July.

686. Which was the amended Bill?—Yes, the Bill as amended in the Committee.

687. The committee of the college did not sit in judgment upon that Bill at all?—They did not.

688. That was in consequence of the Bill having been introduced at so late a period of the Session?—The college did not go on with the consideration of the subject, in consequence of finding that the Bill so amended by the Committee would not be proceeded with.

689. You are aware probably that the Session terminated 12 days after that Bill was introduced?—No, I am not; but the Bill having been introduced on the 28th of July, and then printed, perhaps a week elapsed before it came to the college; of course there was no time for the college to consider it. The Session broke up directly afterwards.

690. How many memorials were presented to Sir James Graham with respect to his Bills? The one which had reference to the Bill of the 28th July was dated the 18th of June 1845?—That had reference to the Bill of May.

691. Was

691. Was there a memorial previous to that?—There was a petition to the House of Commons; I do not think that there was a distinct memorial from the College of Physicians; a deputation of the Committee waited upon Sir James Graham, and expressed to him verbally their objections, but I have no recollection of any distinct memorial having been presented.

692. Have you anything to add to your answers previously given in Nos. 677, 678, and 679, with respect to the provisions in clause 17 of the Bill of the 28th of July 1845?—(*The Witness read the answers.*) I still adhere to the opinions expressed in those answers, and upon a re-perusal of the Bill I see that, in the 21st clause, it is stated, that for the purpose of securing efficiency of examination, a member of the Council of Health may be deputed to be present at that examination, and report to the council, "such member of the council being a physician, surgeon, or general practitioner;" from that I conclude that there would be upon that council three members at least of our profession.

693. It states that the person "being deputed by the council for that purpose, being a physician, surgeon, or general practitioner, shall be present at the examination;" if there be such persons, they may be present at the examination?—I see by the 21st clause that it is only a member of the council, deputed by the council, and such member of the council being a physician, surgeon, or general practitioner, who can be present at such examinations.

694. He must be deputed by the council?—Yes, he must be a member of the council, and also a physician, surgeon, or general practitioner.

695. If, then, there be any person on the council who is a surgeon, he may be deputed to attend an examination at the College of Physicians?—It appears to me that no person, but the person defined by that clause, can be present at such an examination.

696. Will you refer to clause 19; do you find there that it was provided that no bye-law to be made by any of the colleges should be valid until it had received the approval of the Council of Health?—Yes, I do.

697. Is there any such restrictive provision with respect to the internal government of the College of Physicians in the Bill which is now before The House?—There is not any provision which goes to affect every bye-law; there is a clause in the Bill which affects all the bye-laws that may relate to the education of physicians, but not as to the other internal arrangements of the college.

698. Beyond the question of education and examination, does the Bill before The House in any respect interfere with the internal government of the College of Physicians?—Yes, materially.

699. How does it interfere with your internal government?—Inasmuch as it deprives us of those various functions which we have hitherto exercised, particularly the admission of members, and the registration of our members, and the moral control over our members.

700. In what clause do you find such restrictions specified?—The Bill takes away the necessity for any persons being admitted to the College of Physicians; and even if there were such persons as physicians, by clause 16, which is for "the expulsion of registered practitioners for disgraceful conduct," the control over physicians would be entirely taken away from the College of Physicians, and placed in other hands.

701. In whose hands would that control be placed?—In the hands of any five registered practitioners under this Bill primarily, and ultimately in the hands of the registrar appointed by the Secretary of State.

702. Are the five practitioners to do more than take the initiative, and ask the college to inquire into the conduct of the offending party?—I understand that they are to do more than that.

703. Will you be kind enough to point out the words in which more than that is indicated?—I understand that the college, whatever college it may be, is to have the various charges laid before it by five practitioners, who have joined together for the purpose of bringing such complaints; and that unless five practitioners brought charges against an individual, and I presume established those charges, the college could do nothing in the matter; so that unless five registered practitioners agreed to make the complaint, and to establish that complaint, against an individual, the college itself, or its officers, could take no notice of any improper conduct on the part of one of its members.

704. If you will read the clause again, I think you will find that there is no

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restriction upon the college of that kind; that you will find nothing in the clause to warrant the conclusion that you have formed?—That is the conclusion that I have formed upon reading the clause, and I read it carefully by myself.

705. Can you point out any words which would justify you, after re-considering the subject, in coming to that conclusion?—In the first place it says, "If five registered practitioners shall at any time complain;" and I do not see in any part of the clause that the college, or the governing body, could take any notice, unless five registered practitioners complained.

706. Does the clause declare that the college shall take no proceeding unless the complaint be made by five registered practitioners?—It is difficult for me to say how far the legal construction would entitle the college, without any complaint being made, to initiate any inquiry; but from my reading of the clause, it appears to me that they could not initiate it: it says, that upon receiving such complaints, "the committee or other governing body are hereby empowered to cite the person accused before them;" and I presume from these words, that unless the charge were made by five registered practitioners, the college would not have the power of citing the person.

707. Have you the power now of citing individuals before you?—Yes.

708. Is there any negation of that power in the Bill?—I think in a previous clause it says, that everything contrary to what therein is enacted is repealed.

709. That is with reference to the restriction of practice?—It would be a restriction of practice if we were to take away the right of a physician to practise.

710. The one refers to the right to practise, and the other to the punishment of a party?—But in that punishment we should take away the individual's rights.

711. Do not you consider that the power of depriving an individual of his licence could be beneficially exercised by the college, if such individual had conducted himself improperly?—Certainly; it is quite essential that that power should be lodged in the governing body.

712. Do you think that the powers that the College of Physicians now possess are adequate?—No, they are inadequate.

713. Do you feel the inadequacy of them?—Yes.

714. And you have applied for additional powers?—Yes.

715. And you think that if the powers of the College of Physicians were adequate, they might be usefully exercised in maintaining the character, utility, and respectability of the profession?—Yes, I think they might.

716. If the present Bill conferred more power than the College of Physicians now possesses, you would not object to it?—No, certainly not; any Bill that gave additional power to the college, so that they might exercise a greater moral control over the members, would be beneficial to the public.

717. With the exceptions that you have stated, does the Bill now before The House interfere with the internal government of the College of Physicians?—No, I do not myself recollect that in any points it interferes with the internal government besides those which I have specified in the previous answers.

718. You did not object to the 19th clause of the Bill of July, and I may state that the same clause was in the preceding Bills?—I would wish to say, in answer to that question, that we did not object to that; but in not objecting to various clauses in the Bill that was brought into The House by Sir James Graham, it must be borne in mind that the college did not altogether approve of every clause, but they felt that a great effort was being made to settle the principles of medical legislation, and the general principles enunciated in that Bill were highly satisfactory to our order in the profession, because we felt that the standard of medical education was maintained, and also that the various orders of the profession were preserved, and therefore minor points the college were not disposed to press. They did not like to have every bye-law regarding the internal regulation of the college submitted to the Council of Health, but still they were not afraid to submit them to authority, and therefore rather than raise any objection to that, they thought it better to let it pass.

719. You did not remonstrate with the Government against the power taken by that clause?—I do not think that we did; but whatever remonstrance was made appears in the printed memorial which I laid before the Committee.

720. I asked you that question because you have objected to the power given by the Bill now before The House to the Secretary of State. I may remind you that in the Council of Health proposed by the Secretary of State, there were 18 members,

members, and only one was a representative of the College of Physicians; and yet it is provided in the 19th clause that no bye-law of the college shall be valid or have any force until it shall have received the sanction and approval of the council so constituted; that being the case, you did not object to such a provision?—I beg your pardon; in the Council of Health as it was to be then constituted, I mean in the Bill of May 1845, there was one representative of the College of Physicians to be elected by the College of Physicians; there was the Regius Professor of Medicine at Oxford and the Regius Professor of Medicine at Cambridge, both of whom were and always have been members of the College of Physicians; besides which, in the memorial presented to Sir James Graham, it was distinctly stated that if that mode of appointing the council were adhered to, the College of Physicians thought that they ought to have two representatives, therefore we should have had four in that council.

721. Though you asked for only one?—We asked to elect two; and we felt assured that there were two others who would be members of the council, who having been educated as most of us had been educated ourselves, would understand what related to the education of physicians.

722. You say that you approve of the plan of registration which was adopted in that Bill?—Yes, the college approved of the plan of registration, and I also individually approve of it.

723. You do not approve of the plan of registration recommended in the Bill before The House?—No, I do not.

724. You consider that it is unjust after you have acquired certain rights, that those rights should be made contingent upon something which is now to transpire?—I think it is unfair that we should be called upon each year to establish our right to take out a certificate, and each year to pay for that certificate.

725. The payment is not very large?—No; I wish it were larger if payment is to be made at all.

726. Are you aware that in the Bill formerly before The House, introduced by Sir James Graham, you were required every year to make application to be registered?—It was merely necessary to write to the registrar to ask to have the name continued on the register.

727. In a certain month of every year?—Yes, in the month of September of every year, an individual already registered was to write to the registrar to ask to have his name continued on the register and without paying any fee.

728. Unless you adopted that proceeding, and your name was continued on the register, could you legally hold any public appointment under that Bill?—The 22d clause says, "none but those registered to be appointed to public situations;" I presume therefore that those not registered could not be so appointed.

729. Had you a draft of the first Bill which was introduced into Parliament by Sir James Graham, before it was introduced into the House of Commons, I mean the Bill of August 1844?—No.

730. You did not see it before it was in Parliament, and had been presented to The House?—No; not the draft of the Bill. We never saw the drafts of any Bills before they were presented to The House; we always sent our officer, our secretary, to purchase the Bills; he was ordered to purchase a certain number for the committee on hearing that a Bill was printed, and they were laid before the committee at the next meeting.

731. Do you remember whether any memorial was presented to the Secretary of State respecting the Bill of August 1844?—I really do not recollect at the present moment whether any memorial was presented against the Bill or not.

732. Do you recollect whether in any memorial which was presented to the Secretary of State, or in any representations which were made to him at any time, objections were made to the powers contained in the 22d clause of the Bill of the 7th of August 1844, in which it is declared that the bye-laws of the colleges shall not be valid or be of force till they are approved of by the Council of Health. My object is to ascertain whether the college, in the first instance, objected to the extraordinary power which was then conferred upon the Council of Health?—I have not that Bill in my hand, and it is so long a time ago that I cannot speak to it.

733. Sir *J. Graham.*] If anything took place with respect to the Bill of August 1844, will not Dr. Hawkins, the registrar, have a record of what occurred?—If any memorial were presented to you as Secretary of State, no doubt

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the college annals will show what it was, and when the memorial was presented.

734. Mr. *Wakley.*] At the sittings of the committee were minutes kept?—Yes, minutes giving the heads of what was agreed to, the number of persons present, and any resolutions; but those resolutions were generally embodied in the form of a report from the committee to the college if there was anything to report to them.

735. Sir *J. Graham.*] Has the registrar a record of those reports?—I have no doubt that he has.

736. Mr. *Wakley.*] Have you the Bill of February 1845 before you?—I have.

737. Will you refer to clause 16 of that Bill, and state upon whom you consider would be conferred the right to practise as physicians if they were registered according to the provisions of that Bill; the right, of course I mean, to practise throughout Great Britain and Ireland?—It is very clearly defined in that 16th clause of the Bill of February 1845, who shall be entitled to practise as physicians.

738. Does not that clause provide that all persons who have been examined and received diplomas and licences from the College of Physicians of London, or Edinburgh or Dublin, or from any other place which is authorized to grant licences, shall have the right to practise throughout the United Kingdom of Great Britain and Ireland, upon being registered by the Council of Health. There are other clauses to the same effect, but that will show the principle; and I put the question in that form in order that it may not be complicated?—It is therein specified that only certain individuals who have certain degrees, and who have gone through a certain course of study, and who have been examined by a College of Physicians in some one part of the United Kingdom, shall be entitled to register and to practise as physicians.

739. And that would confer upon Scotch and Irish physicians the right of practising as physicians in London without undergoing any examination, or obtaining any licence from the College of Physicians in London?—Yes, if their education comes up to the education of English physicians.

740. Does it say so in that clause?—Yes; it says distinctly that the education of physicians in England, Scotland, and Ireland is to be alike.

741. That is in another part of the Bill?—No, it is in that clause. The party is to be "examined by one of the Royal Colleges of Physicians in England, Scotland, or Ireland, after such proof as shall be satisfactory to the examining college that he has applied himself to medical studies during at least five years;" and it is also required that he "shall have graduated as a bachelor or doctor of medicine in some university of the United Kingdom of Great Britain and Ireland, or, subject to the restrictions hereinafter contained, in some foreign university, or shall have graduated as a master of arts in the University of Oxford or Cambridge." It is only individuals who have complied with all those regulations who are to be examined by the Colleges of Physicians, and registered as physicians, and licensed to practise in any part of the United Kingdom.

742. Are not the words "after such proof as shall be satisfactory to the examining college he has applied himself to medical studies during at least five years"?—But there are other words.

743. In other parts of the Bill the qualification is provided for by the decision of the Council of Health; is it not provided in the Bill that the curricula shall be presented from the different universities and colleges to the Council of Health, and that they shall not be in force till they have been approved by the Council of Health; was not that provision in all the Bills?—I cannot at this moment say.

744. I am now referring you to the Bill of February 1845; I will refer you to clauses 21 and 24, and ask you whether you do not find the provisions I have specified in those two clauses?—I see by clauses 21 and 24 security given for the qualifications, inasmuch as by clause 21 it is provided that schemes of the course of study, and particulars of the examination, and the amount of fees, and so on, must be laid before the Council of Health; and in the 24th clause it is provided that no bye-law is to be valid until it shall have been laid before, and approved by, the Council of Health.

745. Do not the provisions of these two clauses accomplish the object which I have

have specified, viz., that the education and the fees should be as uniform as possible, and that any individual having obtained his licence or diploma at the College of Physicians of Edinburgh or Dublin, should on being registered as a physician, be qualified to practise as a physician in any part of Great Britain or Ireland?—Yes, I understand those clauses in that light, and they do provide such a registration as you have now stated.

746. Would such a provision interfere more with the powers of the College of Physicians than anything you find in the Bill now before the House?—No, it would not interfere with the College of Physicians to anything like the same extent as the clauses of the Bill now before The House would interfere with it.

747. In what respect does the Bill now before The House interfere with your powers more than the provisions I have stated would do?—In this respect: in the Bill of February 1845, it is made one of the essential points of registration that any individual who wishes to practise as a physician shall have been admitted by the College of Physicians in the country in which he wishes to practise, or that he shall have been examined by the College of Physicians, and shall have enrolled himself a member of the College of Physicians in the country in which he wishes to practise; whereas by the Bill now before The House it is not necessary for an individual who wishes to practise as a physician, ever to be examined by any College of Physicians, or ever to become a member of any College of Physicians.

748. You draw that inference with regard to the Bill now before The House?—I draw the inference that under the former Bills it would have been necessary that a person wishing to practise as a physician should be examined by the College of Physicians, or enrolled by the College of Physicians in the country in which he wished to practise; but that in the Bill now before The House there is no necessity for an individual who wishes to practise as a physician, to be examined by any College of Physicians, or ever to become a member of any College of Physicians.

749. If he be registered, must he not show, under the schedule of the Bill now before The House, whence he derives his qualification, and what the nature of that qualification is?—That is the general provision for all grades of the profession.

750. Then it includes, of course, the grade of physician?—No, it only requires the degree of doctor of medicine; it says nothing of physician.

751. But you have stated that it includes all grades of the profession; the doctor of medicine belongs to one grade?—A doctor of medicine is not necessarily a physician.

752. But having obtained his licence or diploma as a doctor of medicine, is it not specified in the form of registration which is adopted when he proves his qualification, what the nature of the qualification is?—In the words of the registration certificate it is required that he should specify whence he has obtained his diploma; but it does not say whether he is to be a member of the College of Physicians or of the College of Surgeons, but only whence he has derived his diploma.

753. And the date of it?—Yes.

754. Does it not specify whether he has a diploma as a fellow, or a licence as a licentiate?—It specifies that, but it does not imply any necessity that he should be a member of the College of Physicians or College of Surgeons.

755. Do you consider your licentiates members of the college?—I do.

756. Are they regarded as such by the fellows of the college?—In a certain light they are; they have not all the rights of fellows, but they have many of the rights of fellows.

757. What rights can the licentiates exercise?—They can walk into the college at any time they like, and go into the library, and make use of the library.

758. That is a permission granted by the college?—Yes.

759. Does the charter of Henry the Eighth give them that right?—The charter says little or nothing upon that subject, it leaves to the governing body a discretionary power.

760. Have not the licentiates complained of the manner in which they have been treated by the fellows?—I think they have made complaints.

761. Do you think that they are satisfied with the new arrangements?—I do; under the new arrangements I feel assured that all the licentiates feel

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confidence that they will have justice done them if their qualifications are such as to entitle them to consideration.

762. There is no war raging at the present time between the fellows and the licentiates?—Not any that I am aware of; quite thereverse. I am in the habit of meeting licentiates about the town in practice, and I have been told by many of those who were most adverse to the college under its former arrangements that they felt confident that they should have justice done to them, as to any scientific or literary claims that they might have.

763. Your objection lies to the mode of registration adopted in the present Bill, because it does not compel the doctor to go to the college of the country in which he is practising?—In relation to the order of physicians, I think that a very great and serious objection to the Bill now before The House. As I stated before, there being by this Bill no necessity for a man who wishes to practise as a physician to become a member of the College of Physicians, in order to obtain certificate, no man would deem it necessary to come to the College of Physicians, or think it worth his while to incur the heavy expense of enrolment as a member of the College of Physicians, and the consequence would be that the College of Physicians would exist without any members.

764. You do not believe that the reputation of the College of Physicians would be sufficient to induce men to incur the expense of enrolment as members?—The reputation of the College of Physicians is made up of its members; and if there be no members there will be no reputation.

765. You think, in short, that if these privileges were conferred, those members of the College of Physicians would not exist?—I conscientiously and firmly believe that that would be the inevitable result of the Bill now before The House.

766. You are aware that there is not any law existing to compel persons to become members of the College of Surgeons, in order that they may practise surgery in this country?—I am aware of that.

767. But is it not evident that the reputation of that college has induced many thousands of men to flock to it for diplomas?—That is not simply owing to the reputation of the college, but to the circumstance that there is no other power in this country which can give a surgeon a certificate of competency which can be produced; a diploma from the College of Surgeons is the only document which an individual can produce to give to the public anything like a warranty that he has had a surgical education.

768. But in consequence of the reputation of the College of Surgeons, do you not believe that surgeons have resorted to it to obtain diplomas?—I think the College of Surgeons has acquired, and justly acquired, a high reputation in this country; but I may say that neither in past times nor in the present has it been from its reputation alone that members of the profession have sought the diploma of the college, but I believe that it has been the cause I have mentioned, that there has been no other source from which an individual in our profession could get any surgical diploma, which he could produce to the public when he was a candidate for a public appointment, except this diploma obtained from the College of Surgeons; at the present time I believe I am right in stating that there are many public appointments, in regard to which it is provided that an individual shall not be elected as a surgeon unless he be a member of the College of Surgeons in England; in all the medical appointments under the Poor-law it is essential that the individual should have a surgical diploma. The only surgical qualification that a man can have is the diploma of the College of Surgeons; a medical qualification may be either a licence of the Society of Apothecaries, or any medical degree conferred by any British universities.

769. It has been decided that a person holding a diploma of any of the other colleges may hold office under the Poor-law?—I think I am correct in stating that they require a double qualification, a medical and surgical qualification.

770. But it is not necessary that the qualification should be from the College of Surgeons in London?—But it must be borne in mind that London is the great medical school of England, and that individuals before they leave London, wishing to obtain a surgical qualification to enable them to go at once into practice in the country, necessarily are obliged to go to the College of Surgeons here rather than go to Dublin or Edinburgh to the College of Surgeons there.

771. Will you refer to the 14th clause of the Bill of the 7th of May 1845, and

and state to the Committee whether the College of Physicians had under its consideration the provisions which that clause contains?—Yes; the College of Physicians had under their consideration the provisions of the 14th clause.

772. Were there any objections urged to it in the memorial which was presented to the Secretary of State?—Yes, you will see them in the memorial of our college: "With respect to the new incorporation, made known in the amended Bill by the name of 'The Royal College of General Practitioners in Medicine, Surgery, and Midwifery of England,' the college, without objecting to the incorporation of the general practitioners, would press upon the attention of Sir James Graham, that as the College of Physicians was specially founded for the promotion of medical science, and for the regulation of medical practice, there are strong objections to the assumption by this new institution of the title of the 'Royal College of Practitioners in Medicine.'" That is the only objection that was urged to that particular clause.

773. It is to the title of the college only that objection is made?—Yes, the objection to that clause was the title adopted.

774. Do not you find it provided in that clause that physicians, surgeons, and apothecaries might all register as general practitioners?—If they enrolled themselves as members of this new college then they might register, but not unless they enrolled themselves as members of that college; that is a preliminary step to their being registered; they must be members of the new college.

775. Do you find anything in the existing Bill more conducive to the formation of one faculty than such a provision?—Yes, much more so. There is no necessity in the Bill now under the consideration of The House for an individual to make himself a member of any college, so as to put himself into any one particular class of the profession; but he may, upon any diploma or licence granted from any body that has the power to grant diplomas or licences, be registered, and being registered, he is entitled to practise in every department of his profession, whatever his qualification may be.

776. Would not that be the case under the provisions of clause 14, which you have been reading?—No. Any physician, surgeon, or apothecary, might, if he had the proper qualification, enrol himself as a member of this new body that was proposed to be formed, but he would not be entitled to practise in every department of the profession.

777. Does not a general practitioner actually practise in every department of his profession?—Undoubtedly he does.

778. Does he not practise as a physician and as a surgeon, and does he not also practise as an apothecary?—I am not aware that he practises as a physician; no doubt he practises medicine.

779. Does not he perform the duties of a physician?—No, I do not think he does perform the duties of a physician.

780. In what respect?—He is not appointed as principal medical officer in public institutions, and he is not called in consultation on difficult cases.

781. In remote districts are not eminent general practitioners called in in consultation in difficult cases?—That is the exception rather than the rule.

782. Is not the whole range of medical practice within the arena in which the general practitioner acts?—The whole range of practice is, but not the whole range of medical knowledge.

783. You think his knowledge is inferior to that of the physician?—In certain parts of his profession undoubtedly it is.

784. But under that clause, physicians, surgeons, and apothecaries who might enrol themselves as members of the new college were to be permitted to act as general practitioners?—If they enrolled themselves as members of that college. In the course of enrolling themselves members they must be presumed to have, and must have the qualification for enrolment; and they would then be allowed to practise as general practitioners.

785. When this Bill was under consideration, you did not think the proposal degrading to the body of physicians?—We certainly did think that it would be degrading to physicians to enrol themselves in the new college, and we should have struck such persons out of the list. I have, as censor, during the last year, struck out of the list of the college the names of gentlemen who have become general practitioners, and who are therefore no longer considered to be members of the College of Physicians.

786. Do those persons still hold their licences?—I can hardly tell you; their

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names are struck out of the list, and therefore they are no longer considered as licensed physicians.

787. But they still hold their licences?—We do not consider them any longer as licensed physicians; and if they attempted to practise as physicians, we should probably take notice of it. We have struck their names out, and they no longer appear as members of the College of Physicians; and if they were to contravene our laws, we should act towards them as we should act towards any others who attempted to do so.

788. Do those gentlemen practise in London?—The cases are very few, but some of them do, and some do not.

789. How many such cases have occurred in the last eight or ten years?—I cannot answer the question; I am only conversant with what has taken place while I have held the office of censor. You are aware that in a list a name is often omitted; but you do not, in looking over the list, detect the omission of that particular name.

790. In the Bill of May, upon which you presented a memorial to the Secretary of State, in clause 30 is it not provided that all persons who shall be registered by the council as physicians shall be entitled, without other licence than such register, to exercise or practise physic throughout the United Kingdom of Great Britain and Ireland, and all other parts of Her Majesty's dominions?—Yes; it is enacted, "that all who shall be registered as physicians by the Council of Health shall be entitled, without other licence, to exercise and practise physic throughout the United Kingdom of Great Britain and Ireland, and all other parts of Her Majesty's dominions."

791. You believe that, under the provisions of the Bill now before The House, it would not be necessary to obtain any diploma or licence from the College of Physicians?—I see no necessity, under the provisions of the Bill now before The House, for an individual to seek or to obtain a diploma or licence from any College of Physicians.

792. Would it not be necessary for him to obtain that diploma or licence from some body which was authorized to grant it, before he could register?—It would be necessary for him to obtain some medical qualification before he could register, but it would not be necessary for him to obtain a licence of the College of Physicians, or to become a member of the College of Physicians.

793. Is it not provided in the Bill that a party cannot register unless he has obtained a legal qualification to practise specially from some body that is legally authorized to grant it?—I understand that in the Bill it is required that the individual should have some legal qualification in order to register.

794. Is it not likely that individuals would seek their qualification from an institution of the highest possible repute before they attempted to register?—I think they would most likely obtain it where they could get the qualification in the easiest and cheapest manner.

795. But does not the Bill provide for the equality of education, equality of qualification, and equality in respect to the payment of fees?—We have no security at all that that qualification will be the qualification which is now required by the College of Physicians, or the qualifications which were so clearly and admirably specified in the Bills brought into The House by Sir James Graham.

796. The Bills which you approved of?—Not the whole of the Bills; but those parts of the Bill which referred to the order of physicians, I believe, we generally approved of.

797. Although under the Bill of July the Council of Health might be a lay council entirely, and not have a single medical man as member?—I have already protested against that inference being drawn.

798. But out of 13 members, by inference you can only gather that three are to be medical men?—That would be the minimum; there must be three.

799. Was not the president of that council to be the Secretary of State?—Yes.

800. Considering generally the great abilities of the Secretary of State, and his influence in such a body, he having to appoint that body, and that they must be removable at his will and pleasure, do you not believe that, in fact, his will in such a council would be law?—No; I am sure it would not.

801. What do you suppose would influence the decisions of such a council?—I conceive

—I conceive in the first instance that the Secretary of State, in appointing such a council, would be very much influenced by public opinion, by the desire to maintain his own character, and he would therefore appoint proper persons in the first instance; and if he had appointed proper persons, they would be men of intelligence and standing, who would have characters to lose, as well as the Secretary of State, and they would not be mere tools in his hands, but would act as conscientious men, and as Englishmen generally do act.

802. You feel confidence in a Board so constituted?—I should have confidence in a Board so constituted for the purposes specified in that Bill.

803. It was provided in that Bill that the schemes of the different colleges should be laid before the council, and that the council should be empowered from time to time to demand them. In the Bill now before The House it is provided, that the schemes shall be laid before the Queen in Council; in both cases those schemes go through the hands of the Secretary of State for the Home Department. In the course of the answers which you have given to many of the questions which have been put to you, you have constantly spoken of reducing the profession to one faculty?—I have.

804. What is there in the Bill now before The House which induces you to believe that the highest scheme of education would not be adopted in preference to the lowest?—I have already answered that question before, but I shall be very happy to reply to it again.

805. I shall be glad to hear the answer?—If an individual can obtain a medical certificate which authorizes him to practise in every grade of his profession upon the lowest qualification, and upon the easiest terms upon which such legal qualification can be obtained, it is in human nature that he will be satisfied with that lowest qualification which can be obtained in the shortest time, in the easiest way, and at the cheapest rate, and I maintain that, in that Bill, there is no inducement held out to an individual to seek the highest qualification, because an individual with the lowest qualification will be placed on a par, as far as all privileges and professional advantages are concerned, with an individual of the highest qualification.

806. I fear the question was not understood; I was not speaking with reference to the qualifications or the places that they would resort to in order to obtain them, but I was referring to the whole of the schemes of education being placed before the Queen in Council or the Council of Health. You had previously stated, that you believed that if the present Bill were enacted the profession would be reduced to one faculty; I want to know why you believe that if the schemes were placed before the bodies I have named, the lowest schemes of education would be selected instead of the highest?—I have mentioned already the reason why I think there would be only one qualification for all medical practice, and that that would be the lowest one; if there be only one qualification, then of course we shall be reduced to one class, and there are no inducements to seek a higher qualification than such a qualification as will give the person a privilege to practise his profession.

807. If the Council of Health or the Queen in Council were to adopt as the curriculum of education the highest which was presented by any college or university, and if that highest scheme were enforced generally throughout all the institutions in the kingdom which could grant medical degrees or licences, would you not consider that the profession was raised to the highest standard?—Such an idea is quite Utopian; the thing is impossible; you cannot expect that every man who is to enter into the medical profession shall obtain, by a good general education and a good professional education, those acquirements which are now required of individuals who occupy the highest position in our profession.

808. Would it be impossible for the Council of Health, or the Secretary of State, to adopt the highest standard presented by any college or university, and say, we think this does not demand too much of any individual who seeks to practise in the medical profession, and consequently it is our desire that it should be enforced generally?—I should say, that if the Secretary of State, or the Queen in Council, were properly informed on the subject they would not make such a regulation as that, because it could never be carried into effect.

809. Not in reference to mode of education?—No, they could not attempt to enforce the highest qualification upon every individual entering the profession.

810. Do you consider that any man ought to be permitted to practise medi-

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cine who is not qualified to perform the duties of a medical practitioner?—The duties of a medical practitioner are manifold. I think that a man may be permitted to practise with safety to the public, but that he may not be able to advance the science of the profession, or to add anything to what is known on professional matters.

811. Do you consider that the law should require that he should do more than practise his profession with safety to the public?—So far as a most narrow view of the profession goes, if it is merely to be regarded as a practising profession, without reference to improving its science, the law perhaps has no right to require more of any man than that he should be qualified to practise with safety to the public.

812. Might not any higher inducement be left to the exertions of the colleges themselves, with reference to their internal arrangements, by creating scholarships, giving rewards and honorary titles, and conferring peculiar distinction; might not all those things be done by the colleges themselves, the law only taking care that no man should practise the profession who had not proved that he was sufficiently qualified to undertake the duties of the medical profession?—If the several colleges continued to exist, or if those colleges had any funds independent of those which are obtained by the admission of members, they might possibly create inducements to individuals to seek higher attainments; but as it is well known that the colleges have not those funds, as they have no means of supporting themselves but by the admission of members, if no members were admitted they could not do that to which you allude.

813. From want of funds?—Exactly.

814. Do you consider that the education of general practitioners ought to be inferior in any respect to the education of physicians?—I think in relation to the higher subjects in medicine, and also in relation to general literature, the education of general practitioners may, with safety to the public, be allowed to be lower than that of the physician.

815. Will you explain what you mean by the "higher subjects in medicine"?—I mean that with reference to pathology particularly, with reference perhaps to the study of mental philosophy, and perhaps with respect to some of the higher parts of physiology, it may not be necessary for a general practitioner to go so deeply into those subjects, as it is incumbent upon the physician to go into them; that is, with reference to professional education.

816. From what cause does the necessity exist in the one case and not in the other?—In the one case the individual is called upon or expected merely to practise his profession; and in the other case, the individual is called upon both to teach his profession and to improve the science of his profession, and in that way to improve the practice of his profession.

817. By whom is he so called upon in either case?—In the present state of things he is called upon by the profession and the public.

818. Is it not entirely a matter of choice with himself whether he will teach or not?—No, it is not a matter of choice whether a physician will teach or not; every time a physician is called in, in consultation, or to give an opinion, he is expected to teach; nor if he does teach, is it a matter of choice whether he will qualify himself to teach those subjects which he is called upon teach.

819. Is it not dependent upon his choice whether he will be placed in those situations or not?—He cannot be placed in those situations unless he has a qualification.

820. Then it is a voluntary act of his own to make the selection whether he will become qualified?—Certainly; but he cannot make the selection if he wishes, unless he has the qualification.

821. There are some inefficient teachers?—There are some inefficient men in all trades and in all professions.

822. Do you think that the general practitioner ought to have less knowledge of pathology than the physician has?—I think it is not necessary that the general practitioner should have so strict a knowledge of pathology.

823. Is not the safety of the patient to be consulted in all cases?—Take the general run of practice, and the general practitioner has not such severe and complicated cases to deal with as the physician has.

824. Can you refer at this moment to any subject in pathology on which you consider that the physician ought to be well informed, and the general practitioner not well informed?—I think that the physician ought not only to be well informed, but more than that, deeply informed, as highly informed as the state

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of the science admits; whereas the general practitioner need only be so far informed as will enable him to practise his profession with safety.

825. You are for giving to the physician a species of ornamental knowledge which is to raise him above the other grades of his profession?—I think he should not only have a more ornamental knowledge, but a more profound knowledge, than the other grades of the profession; such a knowledge as will enable him to grasp the whole of medical science, so that he may bring it to bear upon the improvement of the practice.

826. It is your opinion that it is not necessary that the general practitioner should be so fully informed upon medical subjects as the physician?—I think upon practical subjects he should be fully informed.

827. Do you not consider pathology a practical subject; is it not the very thing with which the general practitioner has to deal?—Part of pathology is practical, that relating to the bedside; he has to deal with that; but not with the whole of pathology, by any means.

828. Is not the general practitioner thrown entirely upon his own resources in remote country districts, where there are no physicians and no pure surgeons to come to his aid; and is it not therefore requisite for the safety of the public that he should be profoundly informed with respect to his profession?—It would be desirable, if it were possible, that all men should be philosophers, and that all general practitioners should be good physicians.

829. Will you state what branches of the profession you conceive that it is not possible to communicate to the general practitioner?—I conceive that in the time which a gentleman who is going into general practice can afford to give to his medical education, it is impossible for him to acquire that full knowledge of the different sciences which are auxiliary to medicine, which will enable him to promote or advance the science of his profession; he has not time, in the period which he can afford to devote to his medical education, to grasp all those sciences which are auxiliary to medicine, and through which the science of medicine is advanced.

830. You consider that the persons who are admitted as general practitioners are selected from a poorer class of the community than that from which physicians are selected?—I do not like that term, "poorer class;" it may mean to infer some degree of inferiority, when all classes are equally respectable.

831. There are answers in which you have already stated that they are under the necessity of commencing at an early period, in order to obtain a livelihood?—Yes; but I do not like to use the term "poorer class" in reference to any branch of my profession; I said that they were "persons of more limited means."

832. You assimilated the general practitioner to the attorney or the solicitor, and the physician to the barrister; and if I recollect correctly, the bearing of your answer was, that the barrister was a person of more ample means than the solicitor, and so also was the physician a person of more ample means than the general practitioner?—That was not my expression; all I said was, that in commencing a profession, before the individual becomes either a physician or general practitioner, or a barrister or solicitor, a man will look to his means before he sets about studying for either one or the other order of his profession.

833. I have now before me your answer to Question 442, which was put to you by Sir James Graham; the answer was as follows: "The class of persons who go to the bar, generally speaking, are very differently circumstanced from those who enter into the profession of medicine. The majority of those who enter into the profession of medicine enter into what is commonly called the lower grade of the profession, and they are persons generally of humble means; their means have not allowed them to obtain an extended education; their preliminary education has generally been very much neglected, and they just get as much medical knowledge as will enable them to fill certain public situations, such as surgeons under the poor law, or assistant surgeons in the navy, or they commence practice in a small way. They are compelled by the necessity of the case to seek to gain a livelihood as early as possible"?—That was my answer, and I still adhere to that opinion.

834. You think that that was a correct description?—I have had very large intercourse with the gentlemen who practise in our profession as general practitioners, having been for 12 years physician to St. Bartholomew's Hospital, and having many hundreds of them under me in the course of those years, and being in constant communication with them; and I feel assured that I have only stated the truth in the answer which I have given to that question.

 835. Are

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835. Are you aware at what period of life they commence the profession?—I believe about 16 or 17; 16 is a very common age.

836. If a gentleman desires to place his son with a general practitioner, is he not under the necessity of paying a premium for him?—I believe that is usual; but I am not very well informed on that subject, as to whether they pay a premium or not; that is generally a subject of private negotiation; it does not transpire; it is commonly supposed that they do.

837. Do you know that men sometimes pay some hundreds of pounds in the way of premium?—To medical men in London I have heard of such sums being paid.

838. Does not the Apothecaries' Act require that they shall serve an apprenship of five years?—I believe it does so.

839. Does not it also require that they should spend three years in the metropolis, or in some other town the hospitals of which are recognized?—Yes; not exactly three years; three winter sessions and two summer sessions.

840. Three years are consumed; there is an expenditure of three years?—The greater part of three years.

841. Thus consuming, in the education of a general practitioner, a period of seven or eight years?—Five years at the outside.

842. There are five years for the apprenticeship?—I have never known any young man who has not been allowed two or three years out of his apprenticeship for the purpose of pursuing his study at some of the great medical schools. That is the usual course of things.

843. Are you aware that it is contrary to law?—I do not know that; such is the custom. At St. Bartholomew's Hospital you will find nine young men out of ten who are studying during the period of their apprenticeship. I am constantly asking them why they do not go up to their examination, and the answer is that they are not out of their apprenticeship.

844. Though they have finished their education at one of the great medical schools in London, the period of their apprenticeship has not expired?—They tell me that it has not.

845. Sir *J. Graham.*] Are you an advocate for the Apothecaries' Act in that particular, of requiring a five years' apprenticeship?—No; I think that period is far too long; I think it should be reduced to two years.

846. *Chairman.*] Do you think apprenticeship at all desirable?—I think that to youths, very great advantages would arise from their being one or two years (I think not longer than two years) with a person in the same line of practice as they are about to pursue; they will in that way obtain a great deal of medical knowledge, which cannot be communicated to a student either in the hospitals or by lectures, but which may be communicated from a master to his pupil, when that pupil is resident in the house with him; there are a great many proceedings which occupy much of the attention of the general practitioner, and there are details as regards the sick room which are best learned by communication in that way from one person to another.

847. But do you think that the relation of master and apprentice is at all necessary to such residence as that?—I do not speak of apprenticeship, but of the benefit that will be derived by a pupil who is about to follow a particular branch of the medical profession from being resident, for a couple of years or so, with some gentleman who is pursuing the same line of practice as he is about to pursue.

848. You would have him stay with such a person while he was a learner, and go away as soon as he had learned what he was able to learn from such residence?—Yes.

849. Is not the principle of apprenticeship, that during the first part of his term the apprentice is learning, but during the latter part he is exercising the profession for the benefit of his master?—I think that that is the nature of all apprenticeships.

850. You would not, then, have this in the nature of an apprenticeship, but as soon as the individual had learned what was to be learned, you would set him at liberty?—Yes.

851. Sir *J. Graham.*] But in some way or other you think it desirable that a young man training for general medical practice in rural districts, where he will have to compound medicine as well as dispense it, should have acquired in early life some acquaintance with pharmacy?—Yes; I feel assured that

that if a young man merely had a medical education in one of our great hospitals, and he were then at once to go to practice, for some considerable time he would be an inefficient practitioner from not having learned many of those details which can be communicated from person to person, but which can hardly be made the subject of instruction by the lecturer, or communicated at the bedside in the hospitals. I think that any young man who was going to be a general practitioner, would derive advantage from being two years resident with a general practitioner.

852. You would not deny that it would be an advantage, that in every country village there should be a solicitor as able as the most eminent solicitors in London, or a watchmaker as expert as the first-rate watchmaker in London?—No doubt that would be an advantageous state of things, if it could be brought about.

853. The obstacle is the impossibility of it?—I believe it would be impossible.

854. Do you believe that any law, or any provision which the State could make, could secure for every village in England as able medical practitioners as the most expert physicians in London?—I do not think the thing is possible. The means of young men entering the medical profession, would not allow of their carrying on their education to that protracted period which would ensure their being as well educated as it is possible to conceive; but you must be content to require their education to be carried to that point that they may practise with safety to the public, and you must trust to their improving themselves afterwards.

855. The interests of the public would be secured by the minimum standard being that which is consistent with the safety of the public in the exercise of the profession?—Yes; the safety of the public would be secured by such a standard, but the public would suffer if there were only one standard for medical education.

856. Is it not a matter of the last importance, that in large cities and towns there should be consulting surgeons and physicians who have acquired greater eminence than the ordinary level, and who in particular cases of great difficulty may give advice founded upon their enlarged experience and knowledge?—It is a great advantage to the public that there should be men of that class, and it is of great advantage to our profession that there should be men of that class.

857. Do you consider that the existence of the College of Physicians and the College of Surgeons in London does give security to the public of the permanent continuance of such men?—I do; as far as I have had experience in the college we have but one view, and that is, to maintain a high standard of education among that class of men who would take the rank of physicians.

858. Have such physicians and surgeons been wanting in London, Glasgow, and Edinburgh, throughout the last century, under existing institutions?—They have not only not been wanting, but they have been found in large numbers. I have never resided in Edinburgh or Glasgow; I only know the gentlemen there by repute; but from their holding public appointments, such as professorships, and from their works, I estimate their abilities and their literary productions very highly.

859. Dr. Culling and Dr. Gregory?—Yes, and Drs. Abercrombie, Christison, and Alison.

860. Mr. *Dennistoun.*] Do you know whether at this moment there is a single pure surgeon or physician in Glasgow?—I do not know anything about Glasgow, except that I have spent a few days there to see the place.

861. Do you know Dr. Burns by reputation?—Yes, I have heard of him, and I know his productions; he is highly esteemed.

862. Do you know that he is a medical practitioner?—I suppose he is; but I believe he holds an appointment as a professor.

863. Mr. *Wakley.*] With reference to the questions which have been asked you, do you know whether it has ever been proposed in Parliament that the minds of medical men should be equalized throughout the kingdom; has such a project ever been set on foot?—I do not know whether it was intended that they should be stultified, or rarefied, or what, but I think such an idea can never have entered anybody's mind.

864. You are of opinion that no medical man should be permitted to practise his profession unless he is qualified?—No man should be permitted to practise in the medical profession unless he is qualified.

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865–6. Do you think that the attainments of a general practitioner ought to be less than the attainments of a physician?—Yes, in particular points.

867. Will you mention those; you have mentioned some: pathology?—Yes, and the higher parts of physiology.

868. You mean minute physiology?—Yes; and perhaps also in animal chemistry, and also in general literary knowledge particularly.

869. Have you with you the qualifications which you now require in the College of Physicians of your candidates?—No, I have not.

870. Can you mention them to the Committee?—I could obtain them for the Committee; there is an officer of the college I think in attendance who might furnish them, if it was an important point.

871. Can you account for the education of the physicians being so superior from there not being more of them, and their being more sought after by the public?—I think that they are sought after by the public.

872. Generally are they sought after by the public?—As far as I know, very generally.

873. What proportion do you suppose the physicians practising in London bear to the general practitioners?—About one in 10 perhaps.

874. Are half the physicians practising in London belonging to your college?—I should think so; I do not of course know all who are practising, or anything like all who are not members of the college.

875. On what subject do you now examine the extra licentiates, which are not included in the examinations at Apothecaries' Hall?—I have nothing to do with the examinations of the extra licentiates; I was never present at any examination of an extra licentiate, and therefore I cannot answer the question.

876. They are examined by the elects?—They are.

877. Do you examine the licentiates?—Yes.

878. On what subjects are the licentiates examined, which are not included in the examinations at Apothecaries' Hall?—They are examined as to their literary qualifications much more extensively; and they are examined as to their previous education.

879. What is the extent of their examination relative to general literature?—They have placed before them for three successive days, passages from Latin and Greek authors, which they are required to translate, and they are also required to answer one of the questions in Latin on paper; and they have also three *vivâ voce* or oral examinations when some medical classical work is placed before them, either a Latin or Greek classic; and in each of those examinations they are required to translate passages in the presence of the president and the censors: and also in the course of the examination, the president and censors, whenever they think proper, put a question in Latin, and require an answer in Latin.

880. With regard to general literature, the examination merely refers to a knowledge of the two dead languages?—Only that; we judge of their knowledge of the English language, of course, from their composition in their replies to the questions.

881. One question is answered in Latin?—Yes; they are told to answer one question in Latin in the written answers, and they may have an indefinite number of questions in Latin in the oral examination.

882. It is stated that occasionally in the oral examination, a question is put in Latin of only three or four words, and that the answer is equally short?—The question may be very long, and if it is understood the answer to it may be very short; or the question may be very short, and the answer long where the individual is told to describe a particular thing.

883. To what extent does your examination go in anatomy?—It goes to the very deepest subjects in anatomy; to what is called general anatomy and microscopic anatomy, and also to animal chemistry as part of anatomy.

884. Do you think that the examiners would reject any candidate in consequence of his deficiency in a knowledge of anatomy?—Yes; I remember one very recently, who was rejected on account of his want of a knowledge of anatomy: but we seldom reject a candidate on account of his want of knowledge upon one subject; we give the man a chance by examining him upon other points, in order to see whether he has a profound knowledge on those other subjects.

885. Had not the person who was rejected recently been long engaged in practice?—

tice?—We have recently rejected a gentleman, but I do not know if he had been for some time engaged in practice.

886. Was he an extra licentiate?—Yes, he was an extra licentiate when he came before the censors.

887. He is now by the college admitted to be qualified to practise beyond seven miles from London, but the college has also declared him to be disqualified from practising within seven miles of London?—The college did not declare him to be qualified to practise beyond seven miles of London, because the elects are quite separate from the college; they are not elected by the college; the college have no control over them.

888. The elects are an examining body?—Yes; they are constituted by the Act confirming the charter an examining body.

889. How many are there?—Eight: but the examining body constituted by the college are the president and censors.

890. Does the president sit at the Board when the examination is conducted before the elects?—I was never present; but I believe he usually does, but not always; professional engagements might take him away, and then the elects would act without him.

891. Then a gentleman examined by the elects, and who had obtained his license to practise, has been rejected by the censors as not being qualified to practise?—I am not aware that he had been for years in practice in London. I did not know the individual that I presume you allude to, before he appeared at the censors' board.

892. You examine in minute anatomy?—Yes; principally on paper, but sometimes also in the oral examinations.

893. You do not examine on surgery?—No; we require that the individual should give us evidence of having attended lectures on surgery.

894. You examine on pathology?—Yes, very extensively in pathology.

895. Do you examine on animal chemistry?—Yes.

896. Is there any fellow of the college who is a lecturer on animal chemistry?—I cannot say at this moment. Animal chemistry is not a subject which is lectured upon in England in a separate course; it is given partly in lectures on chemistry, and partly in lectures on general anatomy and physiology.

897. Your examinations are conducted in secret, I believe?—No, they are not in secret, inasmuch as any fellow of the college who wishes may attend at the examinations.

898. Licentiates may not be present?—No.

899. Do you determine on the admission or rejection of a candidate by ballot?—Yes, we determine the question whether or not we should recommend the college to admit him by ballot.

900. What letters of testimonial do you require before you admit a candidate for examination?—The printed papers will show you that better than I can state it.

901. Can you state the general heads?—The individual must be of 26 years of age complete, and he must have been *bonâ fide* five years engaged in medical studies, three years of which must have been spent in some great hospital having duly appointed physicians and surgeons; and then he must have attended certain courses of lectures, which are enumerated; and he must also give proof at the censors' Board of his general preliminary education, and also of his good moral character. I do not remember any other point at present.

902. What proof of preliminary education do you require?—The proofs have varied at different times: under our present regulations, with a view to secure something that we can safely act upon, we require proof of a degree in medicine acquired at some university; and there is the examination, which I before adverted to, in the dead languages.

903. A degree in medicine at some British university?—No, a foreign university would do, provided the individual had been five years pursuing medical studies, and three of those years in hospital practice.

904. You are satisfied if his medical education commences at 21?—We should be satisfied if his medical education commenced at 21, but we do not specify any particular time; we think that the age of 26 being the lowest age at which persons can be admitted for examination as physicians, gives us a security of

the individual having had sufficient time to pursue a general education as well as an extended professional education.

905. Then, in fact, the time expended in the education of an apothecary is greater than that required by your regulations for a physician?—No, I should say that it is not more than half.

906. With regard to an apothecary, as I have already stated, and probably you know it to be the law, notwithstanding there may be arrangements to the contrary between the parties, the law requires the student who has to go for his examination to Apothecaries' Hall to have expended five years in his apprenticeship, and to have expended three years afterwards in attendance on one of the great hospitals or medical schools?—I did not know that that was the law; the custom is to the contrary, and I thought that the custom was the law.

907. You believe that not more than five years, as the rule, are expended by candidates for the licence at Apothecaries' Hall, in the completing of their medical studies?—Certainly; and I believe in some cases it is less; I believe that the apprenticeship is even evaded further than that; that many parents have an understanding with the general practitioners with whom their children are placed, and that they allow them to remain a longer time at school before they commence their apprenticeship, so that the time that the apprentice spends with the general practitioner is sometimes limited to a year, or two years at the outside.

908. Is there any branch of the inquiry which you are now enforcing in the College of Physicians, with respect to licentiates and extra-licentiates, which you consider ought not to be enforced in the examination of candidates for the diploma of the College of Surgeons, or the licence of Apothecaries' Hall?—I think there are several of our regulations which ought not to be enforced with regard to gentlemen who are going into general practice: first, I think that they should not require such a high age as 26 of the candidates who come up for examination; and, secondly, I do not think that it is necessary that they should have been five years at a school of medical education; and with respect to attendance upon hospital practice, I do not think three years' attendance is essential for a gentleman who is going to practise as a general practitioner, and I do not think it is necessary to inquire so deeply into his knowledge of the dead languages, with a view to see that he is so highly educated a person.

909. You are aware that the Apothecaries' Hall examine in Latin?—There is a short examination in Latin.

910. Yours is not very long, is it?—I should think it is ten times as long as the examination at Apothecaries' Hall, and deep in proportion. I believe that their examination merely consists in placing before the candidates a very easy Latin book, or a physician's prescription, and asking them to give an interpretation of it. My knowledge of the examination there is obtained from the young men who are going up from the great school of St. Bartholomew's Hospital.

911. Do you consider that there should be a difference between the education of a physician and a surgeon?—Yes, I think so, certainly.

912. In what respect?—I think, for a physician to be a good physician, it is necessary that he should be taught to exercise his reasoning powers more than a surgeon, whereas I think a surgeon should have a more perfect knowledge of anatomy. In those particulars I think that there should be a great difference between a physician and a surgeon; but there are other minor points.

913. You say that your examination in anatomy is very close?—Yes, but it is very different from surgical anatomy; we examine in minute anatomy, and structural anatomy, and physiology, whereas it is of importance to the surgeon to understand what is called relative anatomy, that is to say, the relative position of the different parts of the human body, their course, and distribution.

914. Do you consider that the functions of a surgeon can be sufficiently exercised with less reasoning powers than the functions of a physician?—His duties do not require the consideration of so many circumstances as the duties of the physician impose upon him; for example, the surgeon does not undertake the treatment of mental diseases.

915. That is not the universal rule; general practitioners do so, do they not?—Very few of them; they usually seek the assistance of those who make mental diseases a subject of study.

916. Do you not consider that the surgeon is frequently placed in a much more trying position than the physician, and that a greater command of feeling

is necessary, greater coolness and deliberation, for an adequate discharge of the duties which devolve upon him?—Surgeons are very often placed in very critical positions, where it requires greater decision and greater energy, but not so much cool deliberation and patient thought.

917. Do you believe that the public would be injured if a system of education were pursued which should assure the examiners as well as the public that all who entered the profession were thoroughly competent to discharge their professional duties; do you not conceive that the means of persons who enter the profession should be adequate to obtain for them that amount of information?—It would be very desirable if their means were adequate to enable them to obtain that amount of information.

918. Have not all the colleges of late years, and all the institutions which have granted licences, both in England, Scotland, and Ireland, raised their standard of education?—I cannot speak of the institutions in Ireland and in Scotland, because I am not conversant with what they have done; but I know that in England the universities of Cambridge and Oxford have raised their standard very much; and the University of London has instituted a high standard for their degrees; and the Colleges of Physicians and Surgeons, and the Society of Apothecaries, have all gone on increasing their standards.

919. Consequently there is now a much greater expenditure, on the part of the students, of time and money?—Yes, more than there was some years ago; but no great change has taken place in the last 10 years.

920. Has there been any deficiency in the number of students in consequence of the standards having been raised?—I should think that the proportion is rather less than it used to be, but whether there is a deficiency or not of medical students I cannot say.

921. You are referring to London; you are aware that provincial schools have been opened?—Yes.

922. And in consequence of the reputation of those schools, and the attendance of students at them, the number of medical students in London has diminished?—I do not think it has diminished from that cause, if at all; I never heard any of the persons who had attended at those schools speak of them in high terms; I believe it has been the cheapness of the education, and the education being brought home to them, that has been the inducement to students to seek their education in those schools rather than in the metropolitan schools; that it has not been from the goodness of the article: I do not think it is possible, in the nature of things, that those medical schools can rise to great eminence from this cause, that the number of students being small, there is not adequate remuneration to induce men of talent to devote themselves to the subject of tuition; the inducements to such men to devote themselves to private practice are so great as compared with the advantages to be obtained from tuition, that eminent men in those places will not give their time to tuition.

923. Mr. *Bannerman.*] I observe in several of the petitions that have been presented to Parliament, that the petitioners state that the Bill contains a provision for giving legal sanction to an individual to practise all branches of the profession though qualified in only one; and that they consider that such a provision would establish an evil which now exists only by sufferance; is that your opinion?—I believe that would be the case if this Bill became the law; that that which now exists only by sufferance, or contrary to law, would then be tolerated by law.

924. I observe that that is a statement made in a great many of the petitions presented to Parliament; and they further state, that if the Medical Registration Bill were to obtain the sanction of Parliament, security should be given for the public knowing whether persons are qualified in whole or in part?—I think that if such a Bill passed, the mode of registration should specify distinctly whether the individual was qualified for one grade of the profession or another, and what his qualifications really were.

925. Mr. *Hamilton.*] Have you not omitted some branches on which candidates are examined, such as midwifery and botany?—I mentioned, in reply to a question put to me by the Honourable Member, that I thought the printed regulations would inform him better than I could, but that the general course of examination was so and so; but in addition to what I stated, the candidates must prove attendance upon courses of lectures upon certain subjects. Botany is one of those courses; and they are expected to attend lectures on the principles

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of midwifery, and the principles of surgery, though we do not examine on the subject of surgery.

926. Sir *R. H. Inglis.*] You were asked to state what was the number of physicians practising in London, as far as you could give an approximate answer; will you extend your answer and favour the Committee with your general view of the number of those who are now practising throughout England under your licence or under licences obtained by diplomas from either university?—I wish I could give the Committee that information, but I have no data upon which I can form anything like a probable estimate.

927. The president of the college having stated that the aggregate number of the fellows of the college, and licentiates, and extra-licentiates, was 671, do you consider that the total number practising in England will exceed the number of 1,000?—I dare say that it does; I should say there may be 400 or 500 physicians at least who are practising, principally in the provinces, and a certain number practising in London, who are not members of the College of Physicians.

928. Is it correct to state that there are somewhere about 1,000 members of the profession who are physicians?—I do not know.

929. Can you state the number of persons who are supposed to be practising under the Society of Apothecaries?—No.

930. Would it surprise you to be told that it is 14,000?—No; I have heard it stated, but I do not know on what authority, that there are from 20,000 to 30,000 medical practitioners in England and Wales.

931. Do you conceive it possible that the gentlemen who practise as surgeons, apothecaries, and general practitioners throughout this country, forming an aggregate of perhaps 20,000, or 23,000, or 25,000 individuals, can be raised, under any state of society which the world has seen, into a grade of attainment as high as the class of physicians, a number not more at the utmost than 1,100 or 1,200?—It would be a source of very great satisfaction to me if the wisdom of the Legislature was such that they could devise a plan by which those persons could be so educated, but it appears to me to be an imaginary case, and not one which can be realized.

932. Your general view is, that every individual should be educated to the extent of his means, but that that must vary in each case according to the respective classes in which the Legislature authorized individual candidates to enter the profession?—Yes, that is what I think.

933. Without depreciating the pursuit of high attainments on the part of the general practitioner in the obscurest village in England, you do not conceive it possible to raise the standard generally much above that which exists in this country?—I do not wish at all to disparage the knowledge of the general practitioner, for I must say that through the creditable manner in which the Society of Apothecaries have performed the functions which were conferred upon them by the Act of the Legislature of 1815, the standard of education of general practitioners has been gradually raised very much, and the improvement has been considerable. The qualification of a general practitioner in the present day is more than respectable, and more than sufficient I believe for his ordinary duties. I do not mean to say that it may be adequate for all the difficult occasions on which they may be called upon to act; but I am sure that with the pecuniary means possessed by those who go into that branch of the profession you could not impose upon them a much more expensive or extended education than that which they are now compelled to undergo.

934. *Chairman.*] On what ground is it that a general education of a much higher or more ornamental character is thought necessary for the pure physician than for the pure surgeon; it appears that an accurate and extensive knowledge of the ancient languages is not a qualification necessary for the surgeon?—It is thought desirable that the physician should be educated as highly as any other gentleman in the country, or as any gentleman who is going to enter any other of the learned professions in this country.

935. Is there any distinction in that respect between a surgeon and a physician?—I should be glad to see surgeons educated in the same way.

936. Is it the fact that at present very few surgeons have been educated at the universities?—Very few of them.

937. Do you know one?—Yes, a contemporary of my own, and one not long after yourself, in the University of Cambridge, the son of the late Professor Farish.

938. It

938. It is only very rare?—Very rare.

939. Are you aware whether, even in those cases where a surgeon has been educated at one of our universities, he has been educated there with a view to his being a surgeon, or whether he did not afterwards become a surgeon, having been originally intended for the church, or some other calling?—I cannot answer that question.

940. Have you known any case in which the family, intending a young man for a surgeon, have sent him to Cambridge or Oxford?—It is difficult to recall all the persons I have known; but I think I know one, the son of the late Dr. Bostock.

941. It is very rare?—Yes.

942. Is there any reason why a finished English education should be more important to a physician than a surgeon?—I think it is of less importance to a surgeon than to a physician, and it is considered, I believe (but I am expressing what I understand to be the opinions of surgeons more than my own), that it is undesirable for young men who are going to practise as surgeons to be kept so long out of the practical part of their profession. In surgery there is a great deal that is manual and operative, in which is required, to make use of a common term, a sort of apprenticeship. There are many operations in surgery which are very unpleasant to the feelings, and it is thought better that young men should get accustomed to that sort of occupation at an early period rather than that they should come to it at a later period, when their feelings are more likely to be shocked, and they are more likely to take a disgust of the thing. But I am speaking only of what I understand to be the opinions of others.

943. But when you require so great an amount of classical attainments from the physician, you do so, I imagine, not because you think that he is likely to learn much medically from Galen or Celsus, but because you conceive that those studies will open and improve the mind?—That is the chief reason: I should think it was beneficial in regard to the general improvement of the mental powers, and developement of the medical mind, and not that any particular knowledge was to be obtained from Galen or Celsus.

944. Is not an improvement of the general mental powers quite as important for those who mean to cultivate the science of surgery as for those who mean to attend to medicine?—It would be desirable in both cases; but a surgeon can acquire information upon the practical part of the profession, and that is all that is essential for him to carry on his profession successfully.

945. Is it the fact that the surgeons of England are found to be, as a class, inferior to the physicians of England; are they a class who look upon science in a less philosophical manner than physicians?—I think as a class they are less learned, and that in certain branches of science they are less accomplished.

946. Have the great discoveries which have been made in modern times in England, in science and learning, been made more by physicians than by surgeons, or have not surgeons had a fair share?—In particular departments they have had their share, but in others they have not; their attention has been directed to some departments, and in those they have been pre-eminent, but others they have not touched. I know no surgeon who has advanced chemistry at all.

947. You said that you feared that if the time devoted to the education of physicians were shortened, if there should be earlier practice with a more imperfect education, the effect would be, that the emoluments of the highest class of the profession would fall to a much lower point than that at which they now are?—I do not think I had any question of that kind put to me, or that I gave such an answer; I recollect giving an answer, implying that the order of things brought about by the Bill before The House would have the effect of diminishing very materially the emoluments of the profession.

948. You were asked in Question 548, "Then you hold that the effect of this law would be distinctly to diminish the fees of the medical profession;" and your answer was: "I think it would eventually." The question was then put, "Will you point out in what way it would have that operation;" and your answer was, "I think it would first reduce the profession to one order or one class, the class being that which is allowed by law to practise at the lowest qualification; and if medical men are allowed by law to commence practice with a moderate qualification, and at an early age, they must be content to

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take a moderate remuneration for their services"?—I remember making that answer.

949. But if that were the case, should we not find that the remuneration of surgeons would be much lower than that of physicians?—I do not know that; a surgeon may be equally well educated, and equally highly educated for his particular department, as a physician is for his department; and then it will depend, of course, upon how an individual estimates the service of his medical attendant.

950. It is understood to be the fact that the highest gains of the surgeon are equal to the highest gains of the physician?—They are very often larger from the nature of the practice, and not from their being more highly esteemed; attendance upon surgical patients can be got through with much greater rapidity than attendance upon medical patients.

951. Are there fees paid on surgical operations upon a higher scale than are ever paid upon medical advice?—Yes, very much higher; and a great deal of a surgeon's income is made by persons calling upon him at his own house. A surgeon can have a much larger number of persons calling at his house than a physician can: generally speaking, the patient of the physician is confined to his house or bed, and the physician has to go to the house; whereas the patient of the surgeon comes to his house, and in the same space of time the surgeon can see twice as many people as the physician can.

952. Is not the line of distinction between the practice of the surgeon and that of the physician an arbitrary line?—There is about the same distinction as there is between night and day; the one merges into the other, but you can clearly see when it is night and when it is day.

953. There are a vast number of cases which the surgeon treats, which are treated by internal remedies, by the administration of drugs?—There are a great many diseases which are treated by the surgeon which require internal treatment, and on the other hand there are a great many cases which come under the view of the surgeon which require no internal treatment; as for example, accidents occurring to the human body in a previous state of health, where it is only necessary properly to adjust the part; and if the individual be healthy, nature does the rest.

954. But in the cases where the surgeon has to treat disease in an internal manner, what he does is in no respect distinguishable from what the physician does, and the talent which the surgeon would require would be, I suppose, precisely the same as that which the physician would require?—The diseases the care of which is usually undertaken by the surgeon, are different from those the care of which is usually undertaken by the physician; but of course there are certain diseases which are usually treated by the physician, which very closely trench upon those which are usually undertaken by the surgeon; so that the two provinces do run very much the one into the other.

955. Is it not the fact, that in regard to febrile symptoms arising from wounds, surgeons are in the habit of treating them medically?—There is no necessity for any febrile symptoms to arise from a wound.

956. When a surgeon is treating a wound, and fever arises in connexion with it, is it not the fact that the surgeon treats the fever as well as the wound?—The fever which would arise in consequence of a wound, in a healthy state of the body, would be very different from the fever which would be treated by the physician under the name of fever, though it is called by the same name; the one being merely dependent upon the state of the wound, and the other being dependent upon some very occult cause pervading the system generally.

957. Mr. *Hamilton.*] Do the same differences between the physician and surgeon exist abroad which exist in this country?—No, I believe not; the divisions of the profession in our country are rather more in accordance with the institutions of the country, whereas in foreign countries, perhaps, the profession is more regulated according to the institutions and divisions of society in those countries.

958. They have not pure physicians and pure surgeons abroad, as you have here?—There are in some parts pure physicians and pure surgeons, but in other parts they are mixed up together.

959. Is the physician abroad considered to be better educated than the surgeon abroad?—That differs materially in different countries. In France, as far as I recollect, the education of physicians and surgeons is nearly the same, the difference

difference is very slight; whereas in Germany the surgeon is a very inferior person, and does not hold the same rank as the physician, and not nearly the same rank as the surgeon does in this country.

960. Sir *J. Graham.*] You were asked, in No. 541, this question: "Is it not the fact that the practice of a medical man of eminence depends upon the amount of his scientific information?" and your answer was: "In a metropolis like this it would be so; but in country villages, and even in many parts of the metropolis, his scientific information would be rather a bar to his success than otherwise." Will you explain under what circumstances scientific information would be a bar to the success of a medical practitioner?—When I had that question asked me with respect to scientific information, I answered the question in a broader sense than perhaps it was intended: upon hearing the question, I thought it was meant to refer to extended education generally, and in my answer I meant to refer to literary as well as scientific attainments; and it is my opinion that if a man were educated above his station, and educated to the highest point that medical men are educated in the metropolis, he would not succeed so well in practice among the poorer classes of society in country villages and in the manufacturing and mining districts, as he would do if he were a person less highly educated, and more likely to associate with his patients.

961. Is your meaning, that he would be above his business and above his patients?—I would not say so much that he would be above his work, as that he would be placed out of relation with the persons with whom he would have to associate, and amongst whom he had to practise.

962. It was in that sense that you used the expression "bar to success"?—It was, and not in reference merely to scientific information.

963. If your theory be right that scientific information leads to excellence in the profession, you have no doubt that it must also lead to a better knowledge of, and a better treatment of diseases?—Yes; and I rather meant success among his patients in acquiring practice, than success in treating the diseases of his patients.

964. Colonel *T. Wood.*] Are you not of opinion that a person of a superior education going among the lower classes, would meet with more success than a person of less high attainments?—He must also be more successful in the treatment of diseases, but not more successful in securing a large practice.

965. Do not you think that he would be more acceptable to the people?—I do not think so; they would think him so much of a gentleman that they would not consult him. I have remonstrated with country people on many occasions when I have been in the country, and they have taken advantage of my being in the country to ask my opinion upon their cases, and I have remonstrated with them for going to the chemists and druggists, to seek their advice, instead of the medical man; and I have had this answer given me, "He is so much of a gentleman I do not like to go to him." Therefore I infer, that if a highly educated gentleman went into a country village, or into a part where education was not so much diffused, the people would not appreciate those high qualifications, but it would be rather a bar to the success of the individual among that class of persons.

966. In the instance you stated, was it not the apprehension that they would have to pay a higher fee which deterred them from going to the medical man?—That might operate on their minds; but the expressions that they have used have led me to infer that they did not feel at ease with the individual; that they could not talk to him in the way they liked.

967. Sir *J. Graham.*] The bone-setter can frequently compete successfully with the general practitioner?—No doubt; and he often gains a very large practice.

Francis Hawkins, M. D., called in; and Examined.

968. Sir *J. Graham.*] YOU are Registrar of the College of Physicians?—I am.

969. How long have you filled that situation?—Between 17 and 18 years.

970. You are aware of the several Bills which, in the last two or three years, have been brought under the consideration of the House of Commons, with a view of effecting medical reform?—I am aware of the several Bills, and I have a perfect recollection of the last two, and I may say of the first also; the exact

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course of the alterations which the Bill underwent I do not retain in my memory at present.

971. Do you remember the first Bill which I had the honour of introducing towards the close of the Session of 1844?—I have a recollection of that Bill.

972. Was that Bill brought under the consideration of the College of Physicians?—It was.

973. In what way was it brought under their notice, officially by me, or from general notoriety was their attention directed to it?—It was first brought under the notice of the College of Physicians, or I should say, perhaps, of a committee of the College of Physicians, appointed to confer with the Government and various public bodies, respecting enactments relative to medical laws, by a letter which you were good enough to address to the president, stating your intention of introducing a Bill with certain objects; and you stated that, if certain alterations were made in the constitution of the college, you would feel it to be in your power to recommend to Her Majesty's Government that the power of the College of Physicians, as an examining body, should be considerably extended.

974. Did I communicate that to the College of Physicians by a written communication, or was it a verbal communication to the president?—A written communication, addressed to our late president, Sir Henry Halford.

975. Have you a copy of that letter among your records?—I have the original letter in my possession, among the papers of the college, and I rather think that I have a copy of it in the annals of the college.

976. What I wish to know is this, whether the communications which took place in 1844, respecting the Bill then introduced or about to be introduced, are matters of record in the College of Physicians?—They are; I have the annals of the college with me.

977. Would it be possible for you, on the next day of the sitting of the Committee, to bring copies of those communications, or would there be any objection on the part of the college producing copies?—I am not prepared to say that I can produce copies of all the correspondence that passed; I know that I have the original letter which you were good enough to address to the president, but whether I have copies of all the documents which passed upon the subject I am not prepared to say.

978. Was the letter and the Bill in question brought under the consideration of the governing body of the college, and was any communication made to the Secretary of State, after considering that letter and the draft of the Bill?—I have a difficulty in answering that question, because the letter which you addressed to the president of the college was, to a certain extent, a private communication, but I think you signified to the president that he was at liberty to mention the matter to the college, and the college appointed a committee, with full powers to consider this matter, and report upon it from time to time when they should think it right and proper to report to the college; the committee, as I have said, had full power to proceed, and I find it very difficult to recollect now the precise course which the discussion took.

979. Was not the intention of the Secretary of State, in conjunction with the Bill for Medical Reform, to offer to the college an amended charter as a concomitant measure?—From the commencement the college understood that its charter would be altered, and it immediately began to consider in what way the charter should be altered, in order to render the college better adapted to discharge those duties for which it was originally founded.

980. The negotiation between the Secretary of State and the College of Physicians, beginning in 1844, was continued throughout the recess of 1844 and during the Session of 1845, prior to the introduction of the Bill in May 1845?—It was so continued.

981. The draft of the Bill of May 1845 was settled as moved; an understanding was arrived at between the Secretary of State, on the part of the Crown, and the College of Physicians, as a chartered body, with reference to the alteration of the charter which should be proposed with the consent of the college?—With the exception of some few points which remained to be finally decided upon, the charter was agreed upon between yourself and the college, and I have a copy of that charter as finally agreed upon, which I could lay before the Committee.

982. I introduced a Bill in February 1845, and another in May 1845; was the

the final agreement between the Crown and the College of Physicians with respect to the amended charter completed before February 1845, or not till May 1845? —Before February 1845, as far as the College of Physicians was concerned, all the negotiations between yourself and the college had been completed for some time; they stood over till you could effect to your own satisfaction various changes which you were obliged to effect with reference to other branches of the profession; the negotiation respecting the charter had ceased for some time before the discussions on the Bill, which you found it necessary to alter several times in several important respects.

983. The question arose about granting a charter of incorporation to general practitioners, which created the necessity for some variation in the terms of your proposed charter, with reference to the agreement with the college exclusively? —Yes, that question did arise, and it caused a variation in the Bill; but it did not affect the charter, which related to the internal constitution of the college: certainly the college did not approve of the alteration which you thought proper to introduce with reference to general practitioners; and the college stated in a paper, dated the 18th of June 1845, that it approved of the Bill as you originally intended to introduce it, more than of the subsequently altered Bill.

984. Would you have any objection to lay before the Committee the amended charter, as agreed upon prior to the introduction of the Bill of July 1845, and after the introduction of the first Medical Bill of 1845?—I have a copy of the proposed charter agreed upon between yourself and the College of Physicians; the copy which I have with me has certain marks upon it, indicating further alterations to be made in it in case the present Government should agree to grant a new charter to the College of Physicians; because the college had determined upon alterations in its internal constitution subsequently to the charter agreed upon between you and the college.

985. Has a negotiation been carried on with the present Secretary of State for the Home Department? —Only so far as this; the college has presented a memorial to the Secretary of State for the Home Department, stating their reasons for suggesting various alterations, and explaining the nature of the alterations which they have thought it proper to make subsequently to the arrangement entered into with you.

986. Were the Crown and the college advised that, as your charter rested upon Statute, no alteration could legally be made in it, except with the concurrence of Parliament?—Exactly; it was to be done in this manner: you were to introduce a Bill into Parliament to enable the Crown to grant a new charter to the college, modifying its former charter in certain respects, and into that Bill there was to be a clause introduced, to say that, in all other respects in which the old charter was not modified, it was to be confirmed and renewed.

987. That course was taken upon the best legal advice?—Yes; it was agreed upon between the legal advisers of the college and the officers of the Crown.

988. As it was proposed to give powers to the Crown to alter the charter, it was thought right to give to Parliament a draft of the proposed instrument? —Undoubtedly it was.

989. That instrument you have now in your possession?—I have.

990. The proposed alterations deal with several acknowledged imperfections in your existing charter?—They do.

991. Will you state what are the principal alterations, first with respect to the portion of your body termed the elects?—The elects, without being formally deposed, were not to be mentioned in the new charter, which it was thought would amount to the same thing. The elects and the college have a divided jurisdiction, one Board having the power to grant licences for the London district, and a different Board having the power to grant licences out of the London district. That had been found to be extremely inconvenient, and had been followed by injurious consequences; it was understood that the college was to be made no longer a College of Physicians for London only, but a College of Physcians for England, and that the power now possessed by the elects, conjointly with the English universities, of granting licences to practise as physicians out of the London district, should be transferred to the college, which has at present only the power of lisensing physicians for the London district.

992. The anomaly of a double examining body has been found to be an imperfection in your constitution?—A very great imperfection, for those different bodies are not bound to maintain a uniform standard, and they have taken

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different views of the duties which they have to perform. The licence for the country district for many years was required only by those persons who had been perhaps general practitioners in the country, and who by long experience had acquired a right to practise as consulting practitioners, to assume in fact a senior grade in the profesion. Now it was not thought that persons in that class ought to be submitted to an examination of exactly the same kind as young men educated to enter at once into the higher class ought to undergo. These were persons of advanced age, residing in a part of the country where they had acquired a high character, and where they were looked upon almost in the light of physicians; it was thought that a short examination, not entering so much into the extent of their preliminary education, would be more proper for them; they were required to come only once, and an examination of a more limited nature, and confined rather to practical subjects, was thought, for many years, sufficient for them. But this extra licence has of late come into much greater demand, partly, I believe, from the expected changes in the medical profession, which has caused many persons to wish at once to secure certain vested rights, of which they thought they would not be deprived afterwards, and partly, I think, from the spirit of the times, which has led many persons to think that they ought not to be confined to a lower grade in the profession; but many persons have thought that they were entitled at once to assume the higher grade, who, to the best of my belief, would not have thought so some years ago; and it was supposed that they could obtain a legal title to be physicians, at least in the country, by applying for the extra licence of the college. Regulations adapted for one state of things are often not altered quite so fast as the state of circumstances may alter; and as the same regulations were continued, at first adopted for reasons which I have endeavoured to explain, although under an altered state of circumstances, the demand for the extra licence had become greater; the extra licence became a sort of side-door by which many persons sought to gain admission, with less trouble and less expense, into the order of physicians.

993. Though the state of matters, as regards physicians, has been most extensively altered since the granting of your charter, which I think bears date in the reign of Henry the Eighth, the constitution of the governing body has not been changed since that time?—In no respect; the charter having been confirmed by an Act of Henry the Eighth, and subsequently additions having been made to it by another Act of the same reign, there has been no alteration whatever made since that; other charters have been granted to the College of Physicians, but they have not been formally accepted, and they have never been acted upon.

994. What is the number of the elects?—Eight; and it is their office to choose one of themselves to be president of the college.

995. What is the qualification of the elects?—They are to be eight of the most learned and discreet of the college.

996. How is their learning and discretion tested?—It is required that they should be examined, but they are generally men of such an age and standing that the college have not thought it necessary to submit them to any formal examination; they are thoroughly acquainted with them.

997. Then without any inquiry, age is taken as the test of superior wisdom and discretion?—At the present time it has come to be so.

998. Therefore, virtually, the qualification of an elect is age greater than that of the other members of the body?—His standing in the body is taken as one test, and also his residence in London; if he were resident out of London, the elects would not choose him.

999. The president must by the charter be one of the elects?—The eight elects must choose one of themselves annually to be the president of the college.

1000. Therefore, as the college is now constituted, the fellows cannot choose for their president a man pre-eminent for wisdom and discretion and skill, unless he be one of the elects, which, practically, is one of the eight oldest men of the body?—The fellows have no voice at all in the election of a president; the charter of Henry the Eighth appoints eight elects, and they are annually to choose one of themselves to be president of the College of Physicians; and in the letter to which you have alluded, which you wrote to the college, you said that the internal constitution of the college appeared to you to be susceptible of improvement, and you pointed to this as one part in which it might be improved.

1001. Seniority may be taken as the rule in the appointment of the elects?—Yes.

1002. Mr. *Wakley*.] Was Dr. Paris the senior elect when he was chosen president?—He was not the senior elect; he was an elect, or he could not have been chosen as president.

1003. Sir *J. Graham*.] I stipulated that the mode of electing the elects and the presidents should be changed; was that stipulation accepted or rejected by the college?—It was accepted; and the new proposed charter provides a different mode of electing the president.

1004. That imperfection was removed by the charter which the Crown proposed to grant?—It was.

1005. Will you state what was substituted as the mode of choosing the president of the governing body?—The mode substituted was that the fellows at large should elect a certain number of themselves, 16, to be called *consiliarii*, and——

1006. There is no objection on the part of the college to putting in the proposed charter?—No objection at all; I will put in the proposed charter, as it stood at the close of the discussion with you.

[*The Witness delivered in the same, which is as follows:*]

ROYAL COLLEGE OF PHYSICIANS.

Draft of Charter.

Victoria, by the Grace of God of the United Kingdom of Great Britain and Ireland, Queen, Defender of the Faith: To all to whom these presents shall come, greeting: Whereas the Commonalty or Fellowship of the Royal College of Physicians in London have, by their petition, humbly represented unto Us, that the said college was incorporated by letters patent, bearing date the 23d day of September, in the 10th year of the reign of King Henry the Eighth; which letters patent were confirmed by an Act passed in the session of Parliament holden in the 14th & 15th years of the reign of King Henry the Eighth, intituled, "The Privileges and Authority of Physicians in London;" and that by such Act of Parliament, certain other powers and privileges were granted to the said commonalty: and whereas the said college has also represented unto Us, that since the making of the said letters patent divers other charters have been granted to the said college: and whereas the said college has also represented unto Us, that by an Act of Parliament made and passed in the present year of our reign, intituled, "An Act making provision for the granting a New Charter to the College of Physicians," after reciting as or to the effect hereinbefore stated, and that it was expedient that certain changes should be made in the constitution of the said college, and particularly that new regulations should be made for the election of the officers of the said college, and that the present number of the fellows of the said college should be increased; it was enacted, that it should be lawful for the said corporation to surrender all the charters which had heretofore been granted to them, other than and except the said charter of King Henry the Eighth; and also so much and such part of the last-mentioned charter as should be in anywise inconsistent with, or repugnant to, any new charter to be granted to them by Us; and that it should be lawful for Us to grant, and for the said corporation to accept, from Us a new charter, which charter might make such alterations as should be deemed by Us expedient in the constitution of the said corporation, and might, if We should so think proper, change the name of the same corporation. And further, that when and so soon as the said corporation, under their then present common seal, should have accepted any new charter so to be granted as aforesaid, the acceptance thereof should operate as a surrender of all the other charters of the said corporation, except the said charter of King Henry the Eighth, and should also operate as a surrender of the said charter of King Henry the Eighth, and as a repeal of the first-mentioned Act of Parliament, so far as the same should be inconsistent with, or repugnant to, such new charter. And further, that from and after such acceptance of such new charter, the said charter of Henry the Eighth should stand, and be ratified and confirmed, except so far as the same should be so surrendered as aforesaid; provided always, that nothing therein contained should extend to authorize Us to create any new restriction in the practice of physic, or to grant to the said corporation any new powers or privileges contrary to the common law of the land; and that no such new charter, whether the name of the corporation should be changed or not, should in any wise prejudice, affect, or annul any of the existing statutes or bye-laws of the said corporation, further than should be necessary for giving full and complete effect to the alterations which should be intended to be effected by such new charter in the constitution of the said corporation. Now know ye, that We, taking the premises into our Royal consideration, of our especial grace, certain knowledge, and mere motion, have granted, declared, ordained, and appointed, and by these presents, for Us, Our Heirs and Successors, do grant, declare, ordain, and appoint, in manner following; to wit:

1. That the said corporation shall henceforth be styled "The Royal College of Physicians in England."

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2. That the said corporation shall consist of fellows and associates, including a president and council, four vice-presidents, four censors, a treasurer, and a registrar.

3 That all the present licentiates of the said corporation shall be associates of the said corporation.

4. That each of the present extra-licentiates of the said corporation shall be admitted an associate of the said corporation on the production, to the said censors of the said corporation, of testimonials of character and professional qualification which shall be satisfactory to the said censors, and on passing such examination before the said censors as shall be required by and shall be satisfactory to the said censors, and on his paying to the said corporation a fee of 25 *l.* exclusive of the stamp duty.

5. That every person now practising as a physician in England or Wales, and who shall have taken the degree of doctor in medicine at any university in the United Kingdom of Great Britain and Ireland, after regular examination (previously to the 1st day of January 1842), and who shall have attained the age of 30 years, and who shall not be engaged in the practice of pharmacy, shall, at any time within 12 calendar months from the acceptance of these our letters patent by the said corporation, in the manner mentioned in the Act of Parliament hereinbefore stated to have been passed in the present year of our reign, be admitted an associate of the said corporation, without any examination, on the production to the censors of the said corporation of his diploma, and of such testimonials of character and professional qualifications as shall be satisfactory to such censors; and on his proving himself to be of the said age, and on his assuring such censors that he is not engaged in pharmacy, and on his paying to the said corporation a fee of 25 *l.*, exclusive of the stamp duty.

6. That any person who, after regular examination, shall have taken a degree in medicine at any university in the United Kingdom of Great Britain and Ireland, or from any foreign university, to be from time to time recognized by the said corporation, and who shall have attained the age of 26 years, and shall not be engaged in the practice of pharmacy, and shall have gone through such course of studies, and who shall have passed such examination before the censors of the said corporation, touching his knowledge of medical and general science and literature, and complied with such other regulations as are or shall be required by the bye laws of the said corporation, shall be entitled to become an associate of the said corporation without being subject to any other election.

7. That there shall be 200 fellows of the said corporation, and that such number shall be hereafter regulated in such manner as hereinafter stated.

8. That the present fellows of the said corporation shall continue to be fellows of the said corporation, and that previously to the 25th day of June 1845, a meeting, or several meetings of the fellows and associates of the said corporation shall be holden, at which so many fellows as will make up the number of fellows to 200, shall be elected, and that such fellows shall be elected out of the list of associates who are hereby admitted, or shall hereafter be admitted associates of the said corporation, all of whom shall be eligible to be fellows; and that, on the 25th day of June 1847, and on the same day in every subsequent year (except when the same shall fall on a Sunday, and then on the 26th day of June), a meeting shall be holden of the fellows and associates of the said corporation, for filling up vacancies which shall have occurred in the fellowship since the last election of fellows, so as to make up the number of fellows to 200; and that if on the day of holding any such meeting as last aforesaid, the number of fellows and associates of the said corporation shall exceed the number of fellows and associates on the 5th day of June 1846, then and in every such case so many additional fellows shall be elected at such meeting as will make up the entire number of fellows to a number bearing the same proportion to the number of fellows and associates for the time being, as the said number of 200 fellows shall have borne to the existing number of fellows and associates on the 12th day of June 1846, or as near thereto as circumstances will permit; the new fellows being always elected out of the list of associates for the time being of the said corporation; but no new fellow shall be elected so long as the entire number of fellows shall bear a larger proportion to the number of fellows and associates for the time being than the said number of 200 fellows shall have borne to the existing number of fellows and associates on the 25th day of June 1846.

9. That the fellows and associates shall have an equal right of voting in the election of fellows; and the fellows to be elected shall be elected by ballot, either by lists or otherwise, as the said corporation shall from time to time determine by their bye-laws.

10. That if it shall at any time hereafter appear that any present or future fellow or associate of the said corporation shall have obtained admission to the said corporation by any fraud, false statement, or imposition, or that he shall have violated any bye-law, rule, or regulation of the said corporation, then and in every such case, and after such previous notice to and such hearing of such associate or fellow as under the circumstances the president and censors of the said corporation shall think proper, it shall be lawful for a majority of the fellows present at a meeting of the fellows, to declare such fellow or associate to be expelled from the said corporation; and thereupon every such associate or fellow shall cease to be an associate, or an associate and fellow of the said corporation, as the case may be, accordingly; and all the privileges granted to such associate, or associate and fellow, as the case may be, shall cease and be extinguished.

11. That the present president of the corporation shall continue to be president of the said corporation until a new president shall be actually appointed in his place; and that upon the day next after Palm Sunday, in the year 1844, and on the same day in every subsequent year, a new president of the said corporation shall be elected, at a meeting of the fellows of the

the said corporation, but the retiring president shall always be capable of being re-elected; and every president shall remain in office until the actual election of the new president.

12. That at the meeting of the fellows held for the election of the new president, the council of the said corporation shall, out of the first 50 fellows in the list of fellows of the said corporation, nominate some one of such 50 fellows to be proposed to the fellows of the said corporation to be by them elected president; but if the fellow so nominated shall not be elected president by a majority of the fellows present at such meeting, another fellow shall in like manner be nominated by the council out of the first 50 fellows in the list of fellows to be proposed as aforesaid, and so on, until a president shall have been elected. The election of president shall be taken by ballot; and in case of any difference in the council concerning their selection of a president, the president nominated by the majority shall be proposed to the fellows; and in case of an equality of votes in the council, the senior fellow so nominated shall be so proposed.

13. That in case of the death or resignation of the president for the time being, a new president shall with all convenient speed be elected in his place, such election to be made in all respects in the same manner as is provided by the last preceding regulation.

14. That at any time before or at the meeting of the fellows of the said corporation, after the meeting of the fellows at which the president of the said corporation shall have been elected, the president so elected shall appoint four fellows out of the first 50 on the list of fellows, which four fellows shall be called vice-presidents, any one of whom may act as president in the temporary absence of the president, upon such president expressing his desire to such effect to any such vice-president, in writing, or to the registrar: and in case of the death of the president, the first vice-president for the time being in the list of vice-presidents shall act as president until a president shall have been appointed; and the present president of the said corporation shall, at the meeting of the fellows of the said corporation next after the granting of these our letters patent, appoint four vice-presidents for the purposes aforesaid.

15. That the vice-presidents shall cease to be vice-presidents when a new president shall have been appointed in the place of the president by whom they were nominated.

16. That there shall be 16 fellows on the council of the said corporation.

17. That the present council of the said corporation shall continue to be the council of the said corporation until a new council shall have been actually elected in their place; and that on the 22d day of December next, four fellows shall be elected to make up the number of the council to 16; and that on the 22d day of December 1844, and on the same day in every year (except when the same shall fall on a Sunday, and then on the 23d day of December), four of the council shall go out of office, and four fellows shall be elected of the council; but the fellows going out of office shall not be re-eligible until they have been one year out of office; and the fellows to be elected as aforesaid shall remain in office until others shall have been actually elected in their place, and that on the same day other fellows shall be elected to the council to fill up vacancies occasioned by death or resignation since the last election.

18. That the council shall be elected by the fellows out of their own body by ballot, either by list or otherwise, as the said corporation shall from time to time determine by the bye-laws.

19. That in addition to the 16 fellows so elected, the president, censors, and treasurer of the said corporation shall, *ex officio*, be of the council of the said corporation.

20. That the present censors of the corporation shall continue to be the censors thereof until new censors shall have been actually elected in their place; and that on the day after Palm Sunday, in the year 1844, and on the same day in every subsequent year, four new censors shall be elected; and censors going out of office shall be re-eligible; and the censors to be elected as aforesaid shall remain in office until other censors shall actually have been elected in their place.

21. That on the day for electing censors the council shall nominate four of the fellows of the said corporation to be proposed to the fellows, to be by them elected censors; but if any fellow or fellows so nominated shall not be elected a censor or censors by a majority of the fellows present at the meeting, another fellow or fellows shall be nominated at such meeting by the council, to be proposed by the fellows, and so on, until four censors shall have been elected. The election of censors shall be taken by ballot. In case of a difference in the council concerning the nomination of censors, the censors nominated by the majority shall be proposed to the fellows; and in case of an equality of votes in the council, the president shall have a casting vote.

22. That in case of the death or resignation of either of the censors for the time being, a new censor shall, with all convenient speed be elected in his place, such election to be made in the same manner as is provided by the last regulation.

23. That the present treasurer of the corporation shall continue to be treasurer of the said corporation until a new treasurer shall be actually elected in his place; and that on the day after Palm Sunday, in the year 1844, and on the same day in every subsequent year, the president shall nominate one of the fellows, to be elected by the fellows as treasurer, in the same manner in all respects as is before appointed for the election of censors by the fellows; and the treasurer shall be re-eligible. And every treasurer shall remain in office until a new treasurer shall be actually elected in his place.

24. That in case of the death or resignation of the treasurer for the time being, a new treasurer shall, with all convenient speed, be elected in his place, such election to be made in all respects in the same manner as is provided by the last preceding regulation.

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25. That the present registrar of the said corporation shall continue to be the registrar of the said corporation, until a new registrar shall be actually elected in his place; and that on the day after Palm Sunday, in the year 1844, and on the same day in every subsequent year, the president shall nominate one of the fellows to be elected by the fellows as registrar, in the same manner in all respects as is before appointed for the election of censors by the fellows, and the registrar shall be re-eligible; and every registrar shall remain in office until a new registrar shall be actually elected in his place.

26. That in case of the death or resignation of the registrar for the time being, a new registrar shall with all convenient speed be elected in his place, such election to be made in all respects in the same manner as is provided by the last preceding regulation.

27. That the president, council, censors, treasurer, and registrar, shall be considered as remaining in office during the whole of the day on which their successors shall be elected.

28. That the said corporation may, from time to time, by a bye-law, change the day hereby appointed for any election to take place; and if from any cause whatsoever any election shall not take place on the day hereby, or by any bye-law, appointed for that purpose, the same shall take place on some other day appointed for that purpose by the said corporation.

29. That proxies shall not be allowed at any election.

And we do hereby, for Us, and our heirs and successors, further grant, that the duties, powers, and privileges of, and incident to, the said respective offices, shall, except so far as the same are varied by these presents, and subject to any variations therein which may be made by the said corporation, continue to be the same as the duties, powers, and privileges of the same offices respectively now are.

And we do hereby, for Us and our heirs and successors, further grant that it shall be lawful for the said corporation to admit as an associate of the said corporation any person who shall have exceeded the age of forty years, on the production to the censors of the said corporation of such testimonials of professional education as shall be satisfactory to such censors, and on passing the usual examination before the censors; and such person shall, after such his admission as an associate of the said corporation, be entitled to have and use the degree or designation of doctor of medicine.

And we do hereby, for Us and our heirs and successors, further give and grant unto the said corporation full and lawful power and authority to hold, possess, and enjoy, for the use and benefit of the said corporation, all manors, messuages, lands, tenements, rents, services, possessions, or hereditaments whatsoever (whether the same are or shall be holden of Us, our heirs and successors, or of any other person or persons whatsoever), already given, granted, sold, aliened, assigned, disposed of, devised, or bequeathed unto or to the use of or in trust for the said corporation, and to have, hold, take, purchase, receive, possess, and enjoy, for the use of the said corporation, any other manors, messuages, lands, tenements, rents, services, possessions, or hereditaments whatsoever (whether the same are or shall be held of Us, our heirs and successors, or of any other person or persons whomsoever), so as that such other manors, messuages, lands, tenements, rents, services, possessions, or hereditaments hereinafter to be had, holden, taken, purchased, received, possessed, or enjoyed by the said corporation, shall not at any one time exceed in value the clear yearly value of 2,000*l.* above all reprises, according to the value thereof, when respectively acquired by the said corporation.

And we do hereby, for Us and our heirs and successors, further give and grant unto every subject or subjects whatsoever of Us, our heirs and successors, whether incorporated or not incorporated, special licence, power, faculty, and authority to give, grant, sell, alien, assign, dispose of, devise, or bequeath unto the said corporation, for the use and benefit of the said corporation, any manors, messuages, lands, tenements, rents, services, possessions, or hereditaments whatsoever (whether the same are or shall be holden of Us, our heirs and successors, or of any other person or persons whatsoever), so as that the same do not at any one time exceed in the whole the clear yearly value of 2,000*l.* above all reprises, according to the value thereof respectively, when acquired by the said corporation.

And we do hereby, for Us and our heirs and successors, further grant, that all the said provisions in the said Act of Parliament of our present reign, shall be and the same are hereby expressly confirmed in such and the same manner, to all intents, constructions, and purposes, as the same might have been by being herein repeated; but this present provision shall not be deemed in any way to weaken, control, or affect the provisions of the same Act of Parliament, or any of them.

And we do hereby, for Us, our heirs and successors, further grant unto the said corporation and their successors, that these our letters patent, or the enrolment or exemplification thereof, shall be, in and by all things, good, firm, valid, sufficient, and effectual in the law, according to the true intent and meaning thereof, notwithstanding the not fully or duly reciting the said letters patent, or the date thereof, or any other omission, imperfection, defect, matter, cause, or thing whatsoever to the contrary thereof in anywise notwithstanding. In witness whereof we have caused these our letters to be made patent. Witness Ourself, at our Palace at Westminster, this day of in the year of our reign.

It was arranged "that at the meeting of the fellows held for the election of the new president, the council of the said corporation should, out of the first 50 fellows

fellows in the list of fellows of the corporation, nominate one to be proposed to the fellows of the corporation to be by them elected president."

1007. Have you not found that your controlling power even over your own members under the charter, as it now exists, is an imperfect power?—Undoubtedly it is imperfect.

1008. You are aware of the power which, under a new charter granted by the Crown, has been given to the College of Surgeons, increasing its control over its members?—The College of Physicians highly approves of that increased power of expulsion in certain cases, and it was proposed that a similar clause should be provided in the new charter of the College of Physicians.

1009. That formed part of the proposed arrangement?—It did.

1010. What other material alterations in your constitution were then agreed upon?—The principal alteration was the disposing otherwise of the duties now assigned to the elects, namely, the election of president, to which we have now alluded, and also its separate jurisdiction. It was agreed upon also that the number of fellows should be limited to 200, or to such a number as should bear the same proportion to the existing number of physicians, fellows, and licentiates, as the number 200 then bore.

1011. You have stated that there being two distinct bodies of examiners in the college as it is now constituted, an inequality of standard of examination has been thereby introduced, in some instances lowering the standard itself; was that guarded against by the amended charter?—It was arranged that the admission of members to the college should be confined to persons of a certain qualification, which should not be lower than the qualification which was then insisted upon by the college.

1012. The practical effect of that would have been to have had a uniform standard of qualification, and a high standard?—It would have been so; it was the special object of the college that the standard of qualification for physicians should not be lowered beyond what the college had at that time agreed upon.

1013. The getting rid of two modes of examining, and two bodies of examiners, would have been an additional security for the maintenance of a single standard?—Undoubtedly.

1014. Your attention has been directed to the Bill now before the House of Commons for medical reform; does your view, with respect to that Bill generally, agree with the petition of the College of Physicians against it?—It agrees in all respects with that petition.

1015. Does your experience, as registrar of the college for 18 years, and your knowledge of the medical profession in which you hold a distinguished station, lead you to object to the Bill in all the particulars set forth in that petition?—In every one of them: I am convinced from my experience for a good many years as registrar of the college, that if that Bill were to pass into law, all the objects which the college has had in view, from its very foundation I may say, would be most materially impaired. The college has laboured from its foundation to maintain a high standard of literary and scientific qualifications for physicians; but if persons with much lower qualifications, who could obtain a legal qualification from other bodies to practise under this Bill, might at once be allowed to practise, if they chose, as physicians, I do not think that the number that would come to the College of Physicians, and over whose education the college could exercise any control, would be large, because at the present time numbers are constantly applying to me, as registrar, to know whether they can become physicians, with qualifications very inferior to those which the College of Physicians will admit: they state a variety of reasons, which might be very good if they had sufficient qualifications besides; but not having those, they are wholly insufficient; private reasons, such as their state of health, or the health of their family; or, what is a very frequent private reason, that they have some independence left them, and therefore wish at once to become physicians: when I inquire into their qualifications they are very much surprised when it is my unpleasant duty to inform them that they have not the qualifications necessary.

1016. Do you think that persons who, in your judgment, under the present qualification required, are disqualified, would have facilities under the present Bill, of taking their rank as physicians with that lower standard of qualification?—Undoubtedly they would, because, if they had a legal qualification to practise in any one of the three departments, they can obtain a certificate, and, as far as I understand the Bill, there would be nothing then to prevent their practising

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tising as physicians; and in these days many more are desirous of doing that, I apprehend, than desired it many years ago. Persons frequently come to me and say, "I wish to obtain a licence, or an extra licence from the college;" and they will say, "I have been content to practise as a general practitioner in the country; but my neighbour, with no better pretensions than mine, has put 'Doctor' on his door; he is practising as a physician, and he is looked upon as being in a higher station than myself; and I want to know, therefore, whether the College of Physicians will admit me."

1017. When you reject a candidate, what is there to prevent him from going to Leyden and buying a degree, or going to St. Andrew's and obtaining a degree? —Many do so, but there is the stigma upon them, that they are practising contrary to law; but if this Bill were to pass, they would be practising according to law.

1018. Though practising contrary to law after rejection by you, you have no power, or, having the power, you would not exercise it, of restraining individuals from practising either in London or in the country? — We have not a legal power, but I think that we have a considerable moral influence at present; which moral influence can of course no longer exist if scarcely any persons come to the college, and, according to my understanding of the Bill, very few would have any inducement to do so.

1019. Under the existing charter, what is the moral influence which you have within the metropolis and the seven miles circuit, for the purpose of effectually restraining the practice of physicians not members of your body?—All persons, or almost all who really are well qualified, and who are not afraid of passing an examination, had rather do so than not; as good citizens they wish to comply with the law, and as respects themselves they do not like to expose themselves to the affronts which they may well meet with if they are not obeying the existing state of the law.

1020. Do you think there are many men of talent and respectability practising in the metropolis and within the seven miles, as physicians, who are not members of your body?—To the best of my belief there are but few men of character and talent who are doing so.

1021. Therefore, though your legal power of restraint is small, your moral restraint is, in your opinion, of great efficacy?—I believe it to be so: there are other causes that coincide; the public bodies that have the best appointments to give, require the physicians to be licensed by the College of Physicians.

1022. Did your new charter grant a new power of restraint in any degree?—The charter did not; but we always understood that the Bill would introduce good order into the profession; that it would require every physician to be a member of the college of the country in which he practised.

1023. In the Bill of May 1845, and in the last draft of the Bill in July 1845, provisions for that specific object were contained?—Yes; and of those the college highly approved.

1024. The new charter, taken in combination with those provisions, would, in the opinion of the college and of yourself, have been efficacious as a restraint? —I believe they would; that they would have introduced something like order into the profession, which has been long in a disorderly state. I believe that a great part of the disorder of the profession has been owing to a circumstance which the present Bill which you have asked me about does not touch at all; viz. the vast number of licensing bodies. Eight or ten years ago, when the subject of medical reform was first obtruded upon the public, one of the most prominent grievances then brought forward was the number of the licensing bodies, as being entirely inconsistent with uniformity of qualification or education. I recollect well a pamphlet by Dr. Kidd, the learned professor of Oxford, in which he stated that it was the number of examining bodies that existed which was the cause of the inequality in the education of the medical men, and of the state of disorder in the medical profession; he enumerated 17 different licensing bodies. Sir James Graham's Bill would have cured this great defect; it would have limited the bodies from whom the licences of different kinds should proceed in the three kingdoms; and in that way uniformity of qualification might have been obtained; but I think the present Bill not only does not cure that defect, not only does not limit the vast number of licensing bodies, but increases the confusion which they are likely to occasion, by destroying the distinction in the nature of the qualification.

1025. Both

1025. Both the Bill of May and the Bill of July 1845 contain a clause creating a Council of Health with supreme control over the medical profession throughout the United Kingdom; did that clause meet with the approbation of the college, and has that proposed arrangement been approved by you?—That arrangement was approved by the college and by me; it appears to be absolutely necessary for the purpose of introducing and maintaining order in our profession; and this also was frequently affirmed in the petitions that were presented to Parliament, in great numbers, some years ago, for medical reform; that there was a want of some governing body, to keep order in our profession.

1026. Do you think the arrangement then proposed better than the arrangement in the Bill which we are now considering, wherein the whole power is left either to the Secretary of State or to Her Majesty in Council?—It is decidedly my opinion that a Council of Health would be a far better arrangement, and one which in the result would, I think, be much more satisfactory to the profession at large.

1027. You have reason to believe that the medical body generally, of all grades, would prefer a Council of Health to the comparatively irresponsible power of the Secretary of State or the Council?—Of course I know most of that order of the profession to which I myself belong; but as far as I have had an opportunity of knowing the sentiments of the generality of the profession to which I belong, I believe that a Council of Health, if constituted in such a way as to avoid jealousies in the profession, would be an arrangement more satisfactory to the profession than that in the Bill for Medical Registration now before Parliament.

1028. The Bills of February and May 1845 contemplated the constitution of partly nominative and partly elective members of the Council of Health, and the last draft of the Bill in July gave to the Crown the power of nomination without any specified qualification, even a medical qualification. Will you state which of those two constitutions was regarded with the most favour, first by the college, and then by yourself?—The mode in which that Council of Health should be constituted was a subject that the college much debated for a considerable time, and very different opinions were entertained at different times; but I believe the opinion gradually settled down in harmony with the arrangement last proposed; it was found that the difficulties of rendering any other arrangement generally satisfactory were so great, that it would be far better that the Crown should have the sole responsibility of appointing the members of that Council; but certainly it was understood by the profession that a proportion of the members of that Council would be medical men.

1029. The Bill in terms only contemplates the necessity of one physician, one surgeon, and one general practitioner, being members of that council; when the College of Physicians assented to that arrangement, did they contemplate that that restricted number would be the whole number of medical members which any responsible officer of the Crown would nominate to the Council of Health?—I believe that the general idea was that the Secretary of State would find it necessary for his own convenience and the good working of the council, that there should be a much larger number of medical men upon it than one of each branch of the profession; but opinions were divided as to what number of medical men there should be: on the one hand I have met with some who thought that the business would be better done by laymen, but the number was few of those who had that opinion; my opinion was that the greater number of the council would be medical men.

1030. As that was to be a council for the whole kingdom, was it not expected that the medical profession in the different parts of the United Kingdom would be represented on that council?—Originally it had been expected that it would be so; and for a long time it was understood that the council was to be representative, and although the mode of appointment of its members was to be altered, yet the general idea, it was supposed, would be still carried out; in short, it was supposed that the council would not be able to work well otherwise; that they would not otherwise be well acquainted with the condition and feelings of the different parts of the United Kingdom which they would have to deal with.

1031. It was not apprehended by you, or the college, that any Secretary of State would be found who would appoint, as members of that Council of Health, only three medical men?—I never heard of such an idea; and I think that a Secretary of State would not have consulted his own convenience if he had done so.

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1032. Would not public opinion overbear the exercise of any such power?—I think so.

1033. With reference to the registration under the Bills as introduced by me, compared with the registration in the present Bill, do you think that the imperfection of the registration in the present Bill is flagrant and patent when compared with the registration in the former Bills?—The registration now proposed I consider to be so injurious to the profession altogether, that we should be far better without it; but the registration as proposed in the Bill of 1845 was highly approved of by the College of Physicians.

1034. Mr. *Wakley*.] In that system of registration the profession were to be registered in classes?—Yes.

Lunæ, 14° *die Junii*, 1847.

MEMBERS PRESENT.

Mr. Acland.	Mr. Hamilton.
Mr. Aldam.	Sir R. H. Inglis.
Mr. Bannerman.	Right Hon. T. B. Macaulay.
Mr. Dennistoun.	Mr. Wakley.
Mr. Ffrench.	Colonel T. Wood.
Sir James Graham.	

THE RIGHT HON. T. B. MACAULAY, IN THE CHAIR.

Francis Hawkins, M. D., called in; and further Examined.

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1035. Sir *J. Graham*.] HAVE you brought the papers of which you were so kind as to say you would have copies prepared for the Committee?—A copy of the charter, as it stood at the close of the negotiation with yourself, has been put in. I am afraid that I did not exactly understand what other papers were to be furnished to the Committee.

1036. Have you looked at the correspondence which took place between myself and the president of the College of Physicians, in 1844?—I have with me the letter which you wrote to the president of the college.

1037. Is that letter of a public nature, or is it of a confidential nature?—I apprehend that there can be no objection whatever to the production of that letter.

[*The Witness delivered in the same, which was read, as follows:*]

Sir, Whitehall, 23 February 1842.

You have already learned, from my former confidential communication to you, that it is the intention of Her Majesty's Government to propose a measure to Parliament whereby the powers and privileges of your college, as an examining body, will be greatly increased. But I am well aware, and I believe that the college itself is sensible, that there are some points in the present constitution of your body which will require alteration before Parliament can be advised to consent to the grant of additional privileges. I have seen the outline of a scheme for a new charter, to which I understand that the consent of the college has been already obtained; and with some modifications and additions it appears to me well calculated for its purpose. The present manner of electing the president is not touched by that scheme; it appears to me susceptible of improvement, and I consider it a necessary part of any plan that this mode of election should be prospectively altered. It would, however, be very desirable that the details of your internal constitution should be contained only in your new charter, and kept out of the intended general Act; and the only method by which this can be done is by the college agreeing to a plan embracing those alterations to which I have alluded, in addition to those on which it has already decided. I am aware that these changes can only be authorized by Act of Parliament; but if, as I hope, the college should take this view of the matter, I am ready to introduce a short Bill, merely for the purpose of enabling the college to surrender its present charters, and to accept a new one from the Crown. When this has been granted, Parliament might proceed to the discussion of the general measure unembarrassed by debates on the details of your internal polity. If the college concur in this opinion, it will be desirable that you should immediately proceed to prepare the draft of a new charter, to be submitted to the law officers of the Crown.

The President of the
Royal College of Physicians.

I have, &c.
(signed) *J. R. G. Graham.*

1038. That letter appears to have been written in 1842; then in 1844, before the introduction of a Bill at the end of the Session of 1844, there was a further correspondence,

correspondence, was there not?—I have no distinct recollection of that; our proceedings were wholly founded upon that communication of 1842; the college proceeded according to the advice which you tendered to them then, to prepare the draft of a new charter, which draft has been already put in, and that draft contains the alterations which you allude to in your letter as having been previously agreed to by the college and approved of by yourself, together with that which you suggested with relation to the election of the president, and the doing away with the self-elected body of elects. I do not think that any correspondence which took place afterwards related to any material point regarding the internal constitution of the college.

1039. The draft of the proposed charter which you have already given in contains the alterations contemplated by the college in 1842, together with the suggestion tendered by me to the college in the letter which you have just read?—It does.

1040. And it is upon that draft that the advisers of the Crown and of the college were agreed when I introduced the first Bill in 1844?—Yes.

1041. Sir *R. H. Inglis.*] Do you attend the examinations before the censors and also before the elects?—I attend them both.

1042. Will you state what is the relative difficulty of those two examinations, as far as you can appreciate them?—Some years ago the examination instituted by the elects was almost entirely a practical one, because, as I endeavoured to explain to the Committee on the former day, the extra licence was scarcely demanded, except by practitioners of an advanced age; and the auxiliary sciences and preliminary education were therefore less entered into by the elects naturally than by the censors, who were to examine younger men. Then when the demand for the extra licence began to increase, the elects, slowly, indeed not quite in time to meet the altered state of circumstances, but gradually, raised their examination nearer and nearer to a similarity to the examinations instituted by the censors; and within the last 12 months, the examination by the elects has been precisely the same as the examination by the censors.

1043. At the time when a particular individual, referred to in the evidence before this Committee in Question 202 and the following question, was examined by the censors, were you present?—I was present at both his examinations.

1044. Was the examination before the elects, the first?—Yes, it was some few years before the other.

1045. Was the examination at which the individual in question did not pass, one of greater difficulty than that at which he did pass?—Undoubtedly; it was an examination much more extensive, and comprehending other subjects which were not thought necessary to be taken by the elects, who had previously examined the gentleman, and given him an extra licence.

1046. And therefore a gentleman who might pass an examination of the elects might, without any censure upon the elects, not pass with equal success a more difficult examination, conducted at that time upon different principles by the censors?—Precisely so.

1047. Mr. *Wakley.*] You have put in the draft of the charter which was agreed to by the college in 1842; were the fellows of the college generally convened to consider the draft of that charter?—They were; the charter was read to them by the solicitor to the college, and the college fully assented to the seal being affixed to the petition to the Crown for an amended charter according to the draft then read to the college.

1048. Were the licentiates consulted with regard to that draft?—The licentiates were not consulted, and they never have been consulted in reference to the management of the college; the fellows of the college constitute the governing body; I never knew an instance of the licentiates being formally consulted, but of course the college would wish to ascertain their feelings, and often has taken measures to ascertain their feelings upon particular subjects.

1049. Do you consider licentiates to be members of the college?—The term "members" I do not exactly understand, for we do not use the term "members of the college;" in one sense they are members, and in another sense they are not; but some years ago, as it was understood that the licentiates did attach some importance to that term, and that they had felt aggrieved at not being considered members of the college, by a formal vote the college agreed that the licentiates should be called members; and it was agreed that in the new charter they should be called members, though that term was afterwards altered to the term "associates."

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1050. What is the term now, associates or licentiates?—They have received the licence of the college, but by a formal vote the college have agreed that they should be called members.

1051. Has the college power by its charter of adopting a resolution of that kind?—I apprehend that it certainly has. The terms of the charter are vague upon all these matters, but in courts of law it has, I know, been laid down that originally the charter included the idea of persons who were to govern and persons who were to be governed; that there was a body more especially called the college, to whom the duty was to be confided of licensing all persons whom they found proper to practise as physicians in London, and within a circle of seven miles round; and that is the origin of the term "licentiates."

1052. By a vote of the college the licentiates are now entitled to call themselves members?—Yes; the term "members" has been adopted by the college.

1053. You stated that you did not understand what was meant by a member?—I must refer to the idea of the charter, of which the terms are somewhat vague; as I said before, the charter seems to recognise the idea of a governing body and a body to be governed; the governing body of the college is to inquire who are proper parties to receive licences to practise; those persons receive licences, but they are not at once admitted into the corporation; they are not of the governing body.

1054. Have the present members any rights or privileges which the licentiates of former times had not?—One right I can mention that has been accorded to those who hold the licence of the college now, by whatever name you may choose to designate them or they wish to be designated; they have admission to the library of the college, which they had not formerly.

1055. At the time that it was agreed by the college that the name should be changed, were any additional powers or privileges conferred upon the members which the licentiates did not possess?—Not at that time; the subject was one that related to the name only, and I take it that names cannot alter the legal status of the parties alluded to; the name licentiate is only an adopted term; it is not, so far as I am aware, a legal term; the charter recognises a governing body, and a governed body; the duty is imposed upon the governing body of granting a licence to practise to certain parties, and hence the term "licentiate" has arisen.

1056. Is the term "licentiate" used in the charter of Henry the Eighth, or in the Act of Parliament of the same date?—No.

1057. Are the extra licentiates allowed the same privileges as the licentiates or the members of the present day?—The extra licentiates do not come under the charter at all; they are licensed under a power granted by a subsequent Act of Henry the Eighth to the president and elects of the college; they are merely persons licensed to practise out of London; they receive no licence under the common seal of the college.

1058. Their licence is not under the common seal of the college, but is a power granted to them by the president and elects?—Exactly; they receive what are called "letters of testimonial" from the president and elects, empowering them to practise in England, but not in London, or a circle of seven miles round.

1059. What are the testimonials which the extra licentiates are required to produce to entitle them to examination?—For some years they have been required to produce the same testimonials of qualification as the licentiates.

1060. Can you state from what year the letters of testimonial have been the same with reference to licentiates and extra licentiates?—I have before stated that the process has been gradual by which the qualification and examination to which the extra licentiates are subjected, have been raised up to an equality with those required by the Board of Censors.

1061. When was the last important change made in those testimonials?—I cannot precisely state when it was. The whole power of licensing extra licentiates belongs to the president and elects, who have at different times empowered me to require different qualifications; but some years now have elapsed since they authorized me to say that they should exact from those who applied for extra licences the same qualifications as the college had been, for some years, in the habit of requiring from those who applied for licences.

1062. Were the alterations made by the registrar?—No, they were made under the authority of the president and elects, to whom the power is committed by Act of Parliament.

1063. As

1063. As it is of importance with respect to the examination which has gone before in this inquiry, I should be glad if you could state when the last important alteration was made in reference to the letters of testimonial entitling the candidate to an examination?—On referring to the annals, I might perhaps ascertain; but it is not a matter formally entered in the annals. By the Act of Parliament, the matter is committed entirely to the president and elects; it rests with them to require at any time such qualifications as they may think are essential for the good of the public, before granting a licence. It is five or six years ago that the qualifications of licentiates and extra licentiates were required to be the same; I think it was in the year 1840.

1064. Colonel *T. Wood.*] You do not mean to say that the elects are under the authority of the college?—Not at all; they are a law to themselves; formerly they used to exercise their discretion upon each individual case, in determining whether the person was a proper person or not to be examined. Afterwards, for the convenience of the public, they formed certain rules, but they have not laid down rules so strict as those which the college have laid down with regard to the persons to be examined.

1065. Mr. *Wakley.*] Are there any circumstances now within your recollection which enable you to point to the year 1840 as the year in which the qualifications of licentiates and extra licentiates became the same?—The annals which I have with me do not go back farther than 1840, but I find at that time some cases of persons receiving extra licences whose qualifications were the same as those required of candidates for the licence; and I think, therefore, that at that time an equality of qualification was insisted upon.

1066. And that was the same as the qualification required for a licence in the present day?—Yes.

1067. You state that the college have had under their consideration the Bill now before Parliament, and you have given your individual opinion that the enactment of that Bill would be injurious to the interests of the profession; do you mean the interests of the profession or the interests of the college?—I mean the interests of the profession as well as the interests of the college.

1068. You mean the interests of the profession generally, and not particularly the order of physicians?—I mean both, because I have already said that the keeping up of a highly educated order in the profession is, in my opinion, advantageous to the whole profession.

1069. Do you consider that the physicians belonging to your college are the most highly educated order of physicians to be found in the United Kingdom of Great Britain and Ireland?—I do.

1070. Are you enabled to state that as a fact, from what you know of the curricula required to be gone through by candidates for fellowships in the other universities and colleges of this kingdom?—I know of no college which requires a more extended curriculum of medical study than the College of Physicians requires, but I ground my opinion upon the amount of general literary and scientific education which those persons who generally come to the College of Physicians are known to have had. We have many members of the two English universities; I know of no class of men in this country, or any other, who are more highly educated in preliminary studies than the members of the two universities of Oxford and Cambridge; and I think it of immense importance, not only to the order of physicians, but to the profession generally, that members of the English universities should be induced, if possible, to enter the medical profession, and that the connexion between the College of Physicians and education at the English universities should, as far as possible, be maintained.

1071. When you refer to preliminary studies, to what branches of study do you particularly allude?—To all those studies which train the mind to render it equal to mastering any branch of human science; in the words often quoted, those studies "quæ si non faciant medicum, aptiorem tamen medicinæ faciunt."

1072. Will you explain the particular subjects; you say all; but as all branches are not required, will you specify those to which you particularly refer?—I think that all those branches of study that are supposed to be best calculated to train the mind should be, if possible, attended to by those who are to constitute the more highly educated order of the medical profession. If you left out any branch, if you left out classical studies, which have been objected to by some, we should lose a class of men whom it is most important to secure; we should no longer have men like Friend, and Mead, and Akenside, the two

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Heberdens, father and son, Sir George Baker, and I may say the late Sir Henry Halford; they were not only distinguished as scholars, but were also known as practical men, men who advanced the practical part of their profession; I think it most desirable that we should have those men, and that we should tempt persons of high character and ability to enter our profession.

1073. Admitting the utility of classical learning, what are the sciences of which you consider an elementary knowledge to be the most necessary with respect to the practice of physicians?—Physicians ought to have a certain acquaintance with pure mathematics and the natural sciences generally.

1074. Have the great discoveries in medicine been made by men of extensive learning?—I believe that many of them have.

1075. To what would you refer, and to whom?—Harvey was a man of great and various learning; he was a classical scholar as well as a man of science.

1076. Was John Hunter?—John Hunter, it is well known, was not a man whose early education had been much attended to.

1077. Was Jenner distinguished for his learning?—Jenner had a certain acquaintance with general literature.

1078. Was not Jenner, in the early period of his life, a general practitioner?—I believe he was.

1079. Do you consider that the attainments of general practitioners are, generally speaking, less than those which you now demand from persons admitted as licentiates and extra licentiates of your college?—I think that the requirements of the poorer orders in society do demand that persons should be admitted to practise with lower qualifications than are required for the licence and extra licence of the College of Physicians.

1080. When you speak of the poorer orders, to whom do you refer?—I should say, that persons practising in the country, who must engage in all branches of practice, and who must be medical officers of poor-law unions, generally speaking, could not afford to go through so extensive a general and professional education as is required of licentiates and extra licentiates of the College of Physicians.

1081. What do you consider, as the rule, would be the expenditure made by a person before he would be qualified by your regulations to be admitted as a candidate for the licence of the college?—I am not prepared to answer that.

1082. You were speaking of the competence of a certain class to undergo a certain expenditure; how can you speak to their competence or incompetence, unless you are acquainted with the general amount of expenditure?—In this way: I should say that the Society of Apothecaries have raised the qualifications of medical practitioners to as high a point as the state of the profession will bear, but they do not require so much as the college requires of licentiates and extra licentiates.

1083. Are you able to state that the expenditure demanded of a person who is compelled to comply with the regulations of the Apothecaries' Society is less than that which an individual must undergo to qualify him to become a candidate before the College of Physicians?—Certainly, because it does not extend over so many years.

1084. To take your regulations, do the number of years exceed five?—Yes, because we require more preliminary education as well as five years of professional education. I apprehend that the Society of Apothecaries does not require five years' professional education.

1085. Are you not aware that the Act of the 55th of George the Third requires, in the first place, an apprenticeship of five years?—But I do not look at apprenticeship as constituting a free and unshackled part of professional education; the apprentice is bound to obey all the reasonable behests of his master, and cannot employ himself all the time in pursuing his professional education.

1086. But still, on the part of the parent or guardian, is not a considerable expenditure incurred; must not a premium be paid for the apprentice, and must he not be maintained during his five years' apprenticeship?—Yes; but the apprentice is bound at an early age, which makes an important difference. His expenditure cannot be the same during his apprenticeship as that of a person of more advanced age, who has still to continue his education; the education of a boy is not so expensive as that of a man.

1087. Are you not aware that very high premiums are frequently paid for apprentices, and that there is also an expenditure incurred for his maintenance during

during the five years of apprenticeship; and subsequently to that apprenticeship, do not the regulations of the Apothecaries' Society require that between two and three years should be devoted to medical education in medical schools?—I apprehend that the difference is not to be estimated so much by any particular premium, or any single expense, as by the period of life to which the education is to be protracted. The education of the physician in this country must be protracted to the age of 26; and, therefore, I say that the poorer classes could not afford to be attended only by persons who must extend their education up to the age of 26, and who cannot obtain any return for their outlay till that time.

1088. The point, then, to which you chiefly refer is, the protracted period at which the licence of the college can be obtained?—I think that makes all the difference as to the result of obtaining a proper education, as well as with regard to the expense; the period of life to which the education is to be protracted is very important.

1089. What is the kind of information which you consider the physician obtains from the age of 22 to 26, which is not obtained by the surgeon or by the apothecary from the age of 20 to 23?—I think that the physician and the surgeon, having had their minds previously trained, devote their time at a maturer age than those who are to practise at the age of 21, to a general and systematic study of their profession, by which I think they obtain a more comprehensive view than persons who are to enter into the detail of practice at a much earlier period.

1090. You infer, because a certain amount of time has been devoted to study, that therefore it has been employed in study?—I think that a system must be framed for the multitude, looking to the results which are to be expected from the generality of mankind, and that you are not to argue against a particular system because some men may, by their superior vigour of mind, distinguish themselves without complying with such rules.

1091. Do you adopt sessional examinations at the College of Physicians?—No, we do not.

1092. If an individual states before you that he has been in the profession 12 years, and his testimonials denote that fact, you subject him to an examination at one period only, and that at the time that he applies?—The duty of the college is to ascertain that no one practises as a physician within their jurisdiction without a certain amount of knowledge, which the college take care shall be as high as the state of society admits; and when a person applies for a licence to practise, he has to be examined, and the examination is now a protracted and very comprehensive one: he is engaged during three days in answering questions upon paper, and during two other days he is engaged in answering questions *vivâ voce*; and in that way most of the subjects immediately connected with the practice of a physician are entered into.

1093. What length of time each day does the examination occupy?—The candidates, whilst performing their exercises on paper, sit from 10 till dusk during the three days. The length of the examination *vivâ voce* will depend in some degree upon the merits of the candidate, inasmuch as a well-prepared candidate will satisfy the examiners in a much shorter time than a person of whose pretensions they are somewhat doubtful.

1094. In what branches of knowledge do you examine your candidates, with reference especially to medical subjects, which you think ought not to be included in the examination of persons who are to practise as surgeons or apothecaries, or general practitioners?—I do not think that the subjects can be divided in that way; but I think that those who are to be consulting authorities may be supposed to have entered into the various subjects more deeply than others who are to minister to the ordinary wants of the public, and are not to be considered as the authorities to which we look up in very unusual and very complicated cases.

1095. Do you not consider that in medicine the best way of training the mind of a physician or surgeon is by the experience and observation of disease, and that therefore he is likely to become more competent by years of experience than by mere study at the schools?—No doubt information is to be obtained chiefly in the way you have mentioned, but yet I think that experience can be made greater use of by minds that have been well trained than it can be by persons whose time and opportunities have not admitted of their exercising their mental faculties to such an extent. Experience to a person who is

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ill trained, and whose natural faculties may not be great, may only confirm him in error instead of being turned to good account; it must depend partly upon a man's natural faculties, and partly upon his training, what use he makes of experience.

1096. Is there any branch of medical knowledge in which you examine your candidates, in which you consider that surgeons, apothecaries, or general practitioners ought not to be examined?—I think it is hardly right to make such a distinction as that, to say that there are any subjects on which general practitioners ought not to be examined. I have said, that I think it right that physicians should be examined to a greater extent than persons who are called upon to discharge the ordinary duties of our profession; but I may mention, that more minute points of physiology and pathology may be entered into in the examination of persons of extended education than ought to be entered into by those who are to become general practitioners.

1097. You have adverted again to the ordinary duties of the profession; do you consider that the gentlemen who have to practise in remote districts, who have to take upon themselves the office of surgeons to unions and other public bodies, and to discharge duties which pertain to the profession generally, ought to be less competent than the members of your college?—Everybody ought to be as competent as he can possibly be; but there is a practical limit to that, and you cannot raise the standard of education of the persons who are to be engaged in the practical professions beyond a certain extent.

1098. Do you carry your medical examination further than you deem affords to the public an adequate protection in regard to the competency of the practitioner?—Yes, I think we do; because we think that in the present day physicians ought to be acquainted with the modern discoveries in science to a certain extent, even those which have not immediately been brought to bear upon practice, but which they ought to have some knowledge of, that need not be required of persons engaged in the ordinary duties of the profession.

1099. With what object do you carry the examination of your candidates further than that which secures to the public the competency of the practitioner?—To keep up the order of physicians by their character as a learned and scientific body; and perhaps you may permit me to mention the desirableness of having learning and science among us, not merely as an ornament to attract others to become physicians, but because learned and scientific men have been found to be useful men in regard to the science of medicine in particular. Unless physicians had the character of being a learned and scientific body, persons who might not immediately wish to be engaged in the practice of the profession, but who hitherto have not had any objection to belong to us, would do so no longer. I have mentioned already men of learning, but for science I may mention the late Dr. Wollaston and Dr. Daubeny, of Oxford, who had no objection to belonging to the order of physicians, from the character it had of being a scientific body.

1100. Are your examinations conducted in public?—They are open to all the fellows of the college, but they are not open to the public.

1101. The fellows are 167 in number?—Yes; but they do not all reside in London.

1102. If your examinations are so scientific, and the tests are found to be so severe, do you not consider that you inflict an injury upon the college and the profession generally by not allowing the examinations to be conducted in public?—Not at all.

1103. By making the examinations public, would not the public become more readily acquainted than they now are with the very great acquirements which you demand from your candidates?—I think it is sufficient if they see the results, if they see that such persons belong to us; but what would be the case with regard to persons rejected, if you made the examinations public?

1104. Would it not convey useful lessons to persons proposing hereafter to offer themselves as candidates?—I think that it would inflict great hardship upon persons who were rejected.

1105. Would not that hardship be more than counterbalanced by the public good that would be obtained?—I think not; public good may be obtained otherwise, and therefore it is unnecessary to inflict this hardship upon individuals.

1106. Will you state, in as few words as may be, what are your leading objections to the Bill now before The House?—My chief objection is, that I think it would

would throw all the orders of the profession into one class; and the utmost good that could be expected from it would be, possibly, that the attainments of the less educated might be raised. I do not say that that would follow, but I think the attainments of those who have hitherto been the most highly educated in the medical profession would undoubtedly be lowered.

1107. Does the Bill interfere with the internal government of the College of Physicians?—I think it does, in taking from them the management of those questions which have hitherto been entrusted to them.

1108. Was not that done by the Bills of which the college approved, and which were introduced into Parliament in 1844 and 1845?—Certainly not to the same extent.

1109. Are you prepared to say that it was not to an infinitely greater extent?—I do not think it was.

1110. Have you examined all the Bills for the purpose of ascertaining the power which would have been conferred upon the Council of Health in the first four Bills which were introduced into Parliament, and the powers which would be conferred upon the Queen in Council, and the Secretary of State, by the Bill which is now before The House?—I have examined all the Bills, and I may say with that view; more especially, of course, as they would affect the College of Physicians.

1111. Have you before you the Bill of the 28th of July 1845, introduced by Sir James Graham?—Yes.

1112. Will you refer to clause 19 of that Bill, and be kind enough to state the power which it confers upon the Council of Health?—I find it enacted, "That no bye-law to be made by any of the Royal Colleges of Physicians or Surgeons of England, Scotland, or Ireland respectively, or by the Royal College of General Practitioners of England, shall be of any force until a copy thereof, sealed with the seal of the same college, shall have been laid before and approved by the said Council of Health." I am aware of that clause.

1113. Is there any such power in any of the clauses in the Bill now before The House?—There may not be such a clause, but the college, seeing that the important and essential powers that they then possessed were left to them, had no objection to such a restriction as that which appears in the Bill of the 28th of July 1845. By that Bill it was rendered necessary that every person practising as a physician in this country should be enrolled as a member of the College of Physicians, and the college had the power to control and to regulate the interests of that branch of the medical profession; but, as I have already said, by the Bill now before Parliament, I believe that the College of Physicians would be annihilated, because the inducement which now ordinarily brings persons to the College of Physicians would cease; and therefore I say that the powers of the College of Physicians, notwithstanding there may be in the present Bill no such restriction as that which appears in the 19th clause of the Bill of July 1845, are much more interfered with than they would have been by that Bill.

1114. By the Bill now before The House, is it not provided that all the Colleges of Physicians should stand on precisely the same footing with respect to the granting of licences?—No; because by it anybody may act as a physician upon any qualification whatever; and, as I said before, my experience as registrar leads me to conclude that if that were the case, persons would act as physicians upon qualifications inferior to those now required of physicians.

1115. In what clause of the Bill now before The House do you find such a power conferred?—I find that any person who is on the register may obtain a certificate, and any person who has a certificate may practise medicine, and the term "medicine" is indefinite, it includes everything; therefore he may practise as a physician, or surgeon, or in any other way that he pleases.

1116. Will you state in what clause of the Bill you find that power conferred?—It follows upon certain clauses taken together, from clause 3, clause 10, and the interpretation clause, 31, in conjunction with Schedule (B.)

1117. Are not the words, "that he shall be entitled to practise medicine"? Yes; and as I understand the interpretation clause, that means any branch of medicine; it is used in the largest sense.

1118. But does it state in words that he shall practise as a physician or as a doctor of medicine?—Not in words, but there is such an implication as I cannot doubt would be acted upon; seeing the great desire that many, whose qualifications would now be objected to, have to practise as physicians, I have no doubt

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that they would find out their powers under this Bill of practising as physicians without coming before the College of Physicians.

1119. Are you acquainted with the provisions of the Act of the 55 Geo. 3, the Apothecaries' Act?—Not very particularly, only in a general way.

1120. Are you acquainted with the words in the 14th section of that Act?—I am not.

1121. Will you be kind enough to read them?—"And to prevent any person or persons from practising as an apothecary without being properly qualified to practise as such, be it further enacted, that from and after the 1st day of August 1815, it shall not be lawful for any person or persons (except persons already in practice as such) to practise as an apothecary in any part of England or Wales, unless he or they shall have been examined by the said court of examiners, or the major part of them, and have received a certificate of his or their being duly qualified to practise as such from the said court of examiners, or the major part of them, as aforesaid, who are hereby authorized and required to examine all person and persons applying to them, for the purpose of ascertaining the skill and abilities of such person or persons in the science and practice of medicine, and his or their fitness and qualification to practise as an apothecary."

1122. The examiners are empowered to examine all candidates as to their qualifications to practise in medicine?—Yes.

1123. Does the Bill which is now before the House of Commons state more than that?—I think a great deal more by implication, if not in express terms; and I think the saving clause appended to that Act of the 55 Geo. 3, makes a very great difference indeed, because by that all the rights of the College of Physicians were reserved to the college.

1124. I believe, on looking to the clause, you will find that the words are "except as they have been altered by this Act"?—I will read it: "Provided always, and be it further enacted, that nothing in this Act contained shall extend, or be construed to extend, to lessen, prejudice, or defeat, or in anywise to interfere with any of the rights, authorities, privileges, and immunities heretofore vested in and exercised and enjoyed by either of the two Universities of Oxford or Cambridge, the Royal College of Physicians, the Royal College of Surgeons, or the said Society of Apothecaries respectively, other than and except such as shall or may have been altered, varied, or amended in and by this Act; or of any person or persons practising as an apothecary previously to the 1st day of August 1815; but the said Universities, Royal Colleges, and the said society, and all such persons or person shall have, use, exercise, and enjoy all such rights, authorities, privileges, and immunities, save and except as aforesaid, in as full, ample, and beneficial a manner to all intents and purposes as they might have done before the passing of this Act, and in case the same had never been passed."

1125. So you find that their rights and privileges were not abridged, with the exception of the manner in which they might have been abridged by the provisions of that Act?—Yes, it is so.

1126. You have read the words "other than and except such as shall have been altered by this Act"?—Yes; by the words which I have read out of the 14th clause, power was given to the Apothecaries' Company to ascertain the skill of "all person and persons applying to them." Those words are immediately coupled with "his or their fitness and qualification to practise as an apothecary," whereby the extent to which they might practise medicine is distinctly recognised and kept in view, whereas I think it is quite lost in the Bill now before Parliament.

1127. Of what use would it be to examine an individual as to his knowledge of medicine, if he were not allowed to practise medicine after he had been examined and produced his letters of testimonial?—He is to practise as an apothecary under this Act, whereas no such restriction is to be found in the Bill now before Parliament; hence I conclude that he might, if he pleased, practise as a physician.

1128. Does not the apothecary, in point of fact, practise medicine to as great an extent as the physician?—There can be no question that many apothecaries practise medicine in the same degree as physicians, and yet by the public generally I do not suppose that they are looked upon quite in the same light. My objection to the Bill now before Parliament is, that all things are so mixed together that all distinctions would in process of time be destroyed, not only in the profession, but also in the public mind.

1129. But

1129. But still you admit that the apothecary does practise as a physician, as the law stands at the present day?—To a certain extent the practice of the two is the same, but the physicians have more of what may be called consulting practice than, generally speaking, apothecaries have.

1130. Will you describe in what consists the practice of the physician at the present day?—The practice of the physician in the present day consists in prescribing according to the best of his judgment for internal disorders of all sorts, and in fact all disorders which require constitutional treatment; he may not have the entire management of all that require constitutional treatment, but he may take a share, at all events, in the treatment of all disorders which require constitutional treatment.

1131. Does not the apothecary undertake and discharge precisely the same duty as the physician?—There can be no doubt that, to a certain extent, their practice is the same; but still, in the public mind, there is a difference in the way in which they are viewed.

1132. Will you be kind enough to explain in what, according to your judgment, the difference consists?—Speaking not of individuals, but of the system, for all general systems are formed for the generality of mankind, and not for individuals only, I think that those whose education is extended to a more mature age will have more comprehensive views by which they will be able, through analogy, to unravel difficult cases better than persons who have been more confined to the details of practice.

1133. Do you not consider that experience is the best part of medical education?—All science is founded upon experience; but if that experience be not systematized, it becomes limited and empirical.

1134. Is not the practice of a surgeon, who holds the double qualification of a member of the College of Surgeons and the licence of Apothecaries' Hall, of a much more extended character, as to the number of diseases that he treats, than the practice of a pure physician practising in London?—The surgeon and apothecary must of course treat a greater number of diseases than a pure physician or a pure surgeon individually will undertake to do.

1135. If a person holding that double qualification be in extensive practice, does not his practice include the whole range of those diseases which attack human beings under ordinary circumstances?—It does.

1136. Is not an individual so practising frequently thrown entirely upon his own resources; has he an opportunity of calling to his aid either pure physicians or pure surgeons in any remote district?—He must be thrown upon his own resources very often; and often, I think, he would be very glad to have aid in such circumstances.

1137. Do you consider that the medical education of a person so situated ought to be deficient in any respect?—I think that it ought to be a very general and comprehensive education; I think he ought to know as much of the art of surgery and medicine as possible, but he need not know so much of science.

1138. You consider that a person who has to exercise such functions and incur such responsibilities ought not to possess the knowledge of so much of the science of medicine as the gentleman who is practising as a pure physician in London, or in one of our large towns?—I would not adopt the words, "ought not to possess such a knowledge," but I say that the wants of the public may be administered to in 99 cases out of 100 effectually and well without such extensive scientific knowledge; but the hundredth case will occur in which a still larger knowledge is necessary, not only of what actually exists, but of combinations which perhaps never were met with before, and a person whose mind can grasp analogies and combinations will be able to deal with such a case far more effectually than a person of less extensive scientific knowledge.

1139. Can you state what departments of the science you consider such an individual ought to be permitted to practise, having less information of it than the physician who is practising in London?—He need not know so much, at all events, of the preliminary branches; he need not know so much of the principles upon which physiological, pathological, and therapeutical facts rest, or can be explained.

1140. Ought he not to possess as clear a knowledge of principles as is required in the schools of the highest authority?—I do not think the question is what a person ought to know, but how much, in the existing state of society, he can be expected to know; we ought all of us perhaps to know more than we do;

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but the question is, whether, with advantage to society, we can educate persons beyond a certain point.

1141. Besides the attainments in preliminary education to which you have adverted with respect to the examination in the College of Physicians, what branches of medical knowledge do you examine in as a college, which are not examined in at Apothecaries' Hall and at the College of Surgeons?—At the present day, I think it fair that physicians should be examined in what is called minute anatomy, facts which rest upon microscopic observation, and upon chemical science, to an extent which those whose limited means will not allow them to extend their education beyond a certain point, cannot be expected fully to enter into.

1142. Then do you consider that it is in consequence of the limited means of the candidates that such studies ought not to be pursued generally?—I do; I think it rests upon that.

1143. Do you consider that you carry your examination beyond the point of security to the public?—The security of the public requires two things; it requires that you should have persons competent to administer to ordinary cases, and it also requires that you should have minds capable of dealing with extraordinary cases.

1144. Are you enabled, by any examination you can institute, to ascertain that quality of mind when a candidate presents himself at the college?—As I have before said, I think a general system must be framed, not for particular individuals, but with a view to the general results which it may produce. We must legislate for the generality of mankind, and not for men who, like John Hunter, will emerge out of any difficult circumstances whatsoever.

1145. Have you not often found that the men who were best acquainted with literature and science were the worst practitioners?—I would not say the worst, because I have found that the worst practitioners of all are those who, without general education, have a little practical experience, of which they are very proud, and fancy that their knowledge is much greater than it really is.

1146. Taking into consideration the reputation and attainments of the different classes of practitioners as they now exist, do you consider that the registration of physicians in alphabetical order would be injurious to their reputation, provided they were registered with the general body of practitioners?—I think that if the registration were to be formed upon the principle of their being placed together, it would tend to destroy those distinctions which have been found to be beneficial to the whole profession, and also to the public.

1147. But does not the registration in the Bill before The House denote, clearly and distinctly, whence the individual derived his qualification, and at what date it was obtained?—In one of the forms the register does point out the fact, but the form which would be more generally consulted does not make any distinction as to the nature of the qualification at all.

1148. If "M. D." were attached to the names of physicians, would that remove your objection?—Nothing would remove my objection, if all were to be classed together, without the distinctions having been previously pointed out.

1149. But that would be a distinction; and would the insertion of that distinction remove your objection?—My objection would not be removed unless there were a distinction of registration in regard to all classes.

1150. That is, under the different titles of physicians, surgeons, and apothecaries?—Yes.

1151. Would you have a distinct title with regard to general practitioners?—I do not know that that is necessary. I would have a general index, and then the general practitioner would be found under two heads, under the head of surgeon and apothecary.

1152. If the reputation of the College of Physicians is such as to attract candidates, and to induce gentlemen who are seeking for medical distinction to attach importance to belonging to that college, why do you apprehend that the interests of the college would suffer from the enactment of the Bill now before The House?—Because I think that the general order of physicians would suffer, and that the college itself would not be kept up, for very few indeed would come to the college.

1153. Do they now go to the college from the force of the law, or in consequence of the attractions which extrinsically the college presents to them?—

From both causes combined; if you destroy either, probably the other motive also will cease to exist.

1154. Is there in the Bill which is before Parliament any direct provision for destroying the one, or any direct provision for detracting from the influence of the other?—I have before stated my opinion, that any person who has a qualification of surgeon or apothecary may, if he likes, under this Bill set up as a physician; and I think that a much fewer number of persons at all events would come to the College of Physicians than now apply to the college.

1155. You say that the college approved of the Bill which was before Parliament in May 1845?—No, the Bill of the 28th of July 1845. I never said that the Bill of May was approved of by the college; on the contrary, I stated that there were certain provisions in the Bill of May 1845 which the college did not approve of, and concerning which it addressed to the Secretary of State the memorial which has been already given in; and some of those suggestions which the college there made to the Secretary of State he was good enough to attend to, and the Bill of July 1845 was altered more in accordance with the views of the college.

1156. Then you consider that the Bill of the 28th of July 1845 had in fact the approval of the college?—It had not formally the approval of the college, but the alterations that were introduced in that Bill embraced generally the suggestions of the college, and the college therefore could not but approve of those alterations.

1157. Sir *J. Graham.*] But the Bill of July, even, did not contain all the alterations of the Bill of May which the College of Physicians desired?—I think not all.

1158. Mr. *Wakley.*] Your objection to the Bill now before The House chiefly consists in the belief that, if it were enacted into a law, the order of physicians would be abolished in the course of time?—That is one of my principal objections, but I have other objections besides.

1159. Is it because in your opinion it empowers a person holding one qualification, that is, a qualification from the College of Surgeons or the Society of Apothecaries, to practise in all branches of the profession?—Yes; I think in that way it would destroy all those objects for which the college has laboured since its foundation; the college has laboured since its foundation to keep up a high standard of general education for physicians, which I think would be lowered by this Bill. I think I may say that the object of the College of Physicians has been to render physicians, generally speaking, scholars, and by its practical examinations to render persons who are members of the universities practical, who might be in danger perhaps of becoming too scholastic.

1160. Do you recommend that penalties should be imposed upon persons who assume a title in the profession which does not belong to them?—I have no great desire to see any penalties of that kind imposed.

1161. Then although you are anxious that the profession should be registered in classes, you would not recommend that there should be a penalty, in order to confine persons strictly to the class of practitioners to which they belong?—I am not inclined to recommend penalties.

1162. Sir *R. H. Inglis.*] In what other way would you maintain the distinction between the classes of practitioners?—I would have an education distinct for each; by which I mean to say, that I would have the education of each as good and as much extended as the condition of society will admit of; but I would have it clearly shown to the public that certain persons were educated to a greater extent than others.

1163. You consider that such general reputation, and such moral control, would be sufficient, without recourse to a system of penalties?—I am of that opinion, decidedly.

1164. Sir *J. Graham.*] Have you the letter that was addressed to you by the Secretary of State in July 1845?—I have; the letter comments on the memorial which has been already given in.

[*The Witness delivered in the same, which was read, as follows:*

Sir, Whitehall, 14 July 1845.

I HAVE given to the memorial, addressed to me by the Royal College of Physicians of London, bearing date 18th June 1845, that attentive consideration to which it is entitled, both on account of the high character of the body from which it proceeds, and of the temperate

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perate manner in which the college has stated its opinion on those parts of the amended Bill for regulating the profession of physic and surgery, to which it sees reason to object.

I hear with regret that alterations to which I was induced to assent, in the hope of reconciling the conflicting claims of the several branches of the medical profession, have been viewed by your college as likely to impair the dignity and usefulness of your body; in the maintenance of which, I conceive every class of medical practitioners and the entire community to be deeply interested. I will never intentionally be a party to any measure which can be proved to have a tendency to lower the standard of the general and professional acquirements of physicians. I have anxiously re-examined the present plan of the Bill in connexion with the memorial of your college, and I have endeavoured to discover what further changes can be proposed, without reviving those jealousies which were excited in other branches of the profession by the form in which the Bill was first introduced.

I observe that great stress is laid by the College of Physicians on the impropriety of subjecting persons who have undergone a previous examination by physicians and surgeons, to a subsequent examination in medicine and surgery by general practitioners.

I have always insisted on an examination by the Colleges of Physicians and Surgeons, as an indispensable part of my scheme; and I now intend to propose that the examination by the new college should precede, instead of following this examination.

By this change your principal objection is obviated in the fullest manner, without detriment to the security which the general practitioners consider themselves entitled to claim, that they shall concur in preventing the standard of qualification for practising in their rank of the profession from being kept too low.

According to this plan, a candidate for general practice will first offer himself for examination by the new college. Having passed that examination, and become thereby a member of the new corporation, he will be entitled to offer himself for examination by the College of Surgeons, to which will be conjoined such examiners of your college as you may think fit to depute for this purpose; and upon passing that second examination the candidate will be entitled to be registered as a general practitioner, and a member of the College of Surgeons.

The fees which were proposed to be allowed for the preliminary examination have been inadvertently fixed too low, and in the proposed change I contemplate the insertion of an adequate sum for the remuneration of the examiners of your college, as well as of the College of Surgeons.

This alteration will not, indeed, meet that part of your objection which points to the discouragement given to medical education in England, if more examinations are required here for admission to practise than are necessary in Scotland or Ireland. I do not think it advisable to obviate this inconvenience by the establishment of a similar body in those other parts of the United Kingdom; but as my Bill is founded on the principle of admitting to equal privileges upon equal qualifications, I am quite ready to consider any other fair expedient which you can devise for this purpose.

It has been suggested to me that this might be partly accomplished by not allowing the coalition of the Colleges of Physicians and Surgeons in Scotland and Ireland, for the examination of general practitioners; or by enacting that those who had passed the Scotch or Irish Board should not be admitted to practise in England within three years, without passing another examination in England, sufficient to prevent the abuse of English students resorting to Scotland or Ireland merely for the purpose of evading the more stringent English regulations. Before the Bill is again discussed, these or other suggestions may be considered.

I attach much less importance to the title by which the new college is to be distinguished; but to meet your objection on this head, and a similar one urged by the College of Surgeons, I have intimated to the petitioners for the new college, that in case the Crown should grant them a charter, it will be under the title of General Practitioners, without those specific additions to which you have objected.

Alterations will be proposed in various parts of the Bill, with reference to other objections stated in the memorial, which I hope will be found to remove them in a manner satisfactory to all parties.

I look forward with hope to the fulfilment of your anticipation, that with these modifications the Bill may prove advantageous to the medical profession.

I have, &c.

The Registrar of the Royal College of Physicians.

(signed) *J. R. G. Graham.*

1165. Was any answer given to that letter?—An answer to this extent was given by the college, that they thanked you for so courteous and considerate a letter; and they stated that the college would reserve their opinion on the alterations you intended to make, till they could see the Bill in its amended state; which they were not enabled to do before it was too late to express an opinion upon it. Parliament was very shortly after prorogued.

1166. Nothing more occurred between the Secretary of State and the college, in reference to the Bill of May 1845?—No.

1167. Mr. *Wakley*.] Do you remember what the nature of the College of Physicians' objection was to giving the new college the title first proposed, namely, that of "The Royal College of General Practitioners in Medicine, Surgery,

gery, and Midwifery, of England"?—You will find the objections of the college to the title stated in the memorial that has been given in; I can read the passage: "With respect to the new incorporation made known in the amended Bill by the name of 'The Royal College of General Practitioners in Medicine, Surgery, and Midwifery, of England,' the college, without objecting to the incorporation of the general practitioners, would press upon the attention of Sir James Graham, that as the College of Physicians was specially founded for the promotion of medical science, and for the regulation of medical practice, there are strong objections to the assumption by this new institution of the title of 'The Royal College of Practitioners in Medicine.'"

1168. But the objections are not stated in that memorial?—They are stated.

1169. It is rather by inference?—The reason that they give is, that the College of Physicians was a college of practitioners in medicine.

1170. Was it at that time discussed by the fellows whether it was advisable that another college should be established, having the power to practise medicine?—The fellows of the college were never consulted upon it; and they could not be consulted upon that which did not lie within their control.

1171. They might have been consulted, and they might have memorialized the Government?—The only memorial drawn up was that which has been laid before this Committee, and in that memorial it will be seen that the college did not object to this new incorporation; they did not enter into the question of the policy of creating at the present time a new college; if the general practitioners wished to have a new college, the College of Physicians did not feel itself entitled to object to it, such a matter lying out of its control and jurisdiction.

1172. The college acquiesced in the proposition then made by the Government to create a new college?—The college was never called upon to express its assent or dissent upon that point; therefore I cannot undertake to say whether they acquiesced or not.

1173. The college took no other objection than that which is stated in the memorial which you have read?—They stated no other objection than that.

1174. And that was to the title alone?—The college formally made no objection, except with reference to the title; but if you wish to ask me whether the college approved of the new incorporation, I cannot answer that question.

1175. The college object to the Bill now before Parliament because it feels that all classes of practitioners will ultimately be blended in one by its operation; is that the case?—Yes.

1176. Will you be kind enough to refer to clause 32 of the Bill of May 1845, the one which the college had under consideration, and the one respecting which the memorial from which you have now read was presented to the Secretary of State?—This is the clause: "And be it enacted, that all persons who shall be registered as general practitioners by the said council shall be entitled to demand and take reasonable fees for medical and surgical advice and attendance, and for medicines prescribed or administered by them to their patients, throughout Great Britain and Ireland, and in all other parts of Her Majesty's dominions, without other licence than such registry, and shall be exempt from being sued, or liable to any penalty under the provisions of any Act of Parliament passed, or charter granted before the passing of this Act, in restraint of the practice of medicine or surgery, or the appointment of medical or surgical practitioners in any place, or to any office, and shall be deemed qualified to be appointed medical or surgical attendants to any public or local institution in all parts of Her Majesty's dominions, without such examination, certificate, licence, or qualification as is mentioned in such Act or charter respectively."

1177. In that clause is not unlimited power given to the members of the new college to hold any medical or surgical office in any public, parochial, or other institution?—It appears to be so.

1178. And the College of Physicians made no objection to that proposal?—I think the College of Physicians did make an objection to that proposal; I know that they did not approve of it.

1179. Can you find any objection stated in that memorial?—Yes; I will read the objection that they made: "Nor is it to the assumption of a title only that the college sees reason to object. It must object even more strongly to the latter part of the 32d clause, which gives to general practitioners the right to fill all medical and surgical offices, and thus confides the highest duties of the profession to the members of that class which is required to pass through the least

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least extended educations, and which is admitted to practise at the earliest age."

1180. Was that provision expunged from the Bill which was subsequently introduced into the House in July?—I think it was altered.

1181. Sir *R. H. Inglis.*] Will you be kind enough to read clause 26 of the Bill of July?—Clause 26 says, "And be it enacted, that all persons who shall be registered as general practitioners by the said council, shall be entitled to demand and take reasonable fees for medical and surgical advice and attendance, and for medicines prescribed or administered by them to their patients throughout Great Britain and Ireland, and in all other parts of Her Majesty's dominions, without other licence than such registry." I do not find the same words added as in the former Bill. It was stated in the Bill of May that persons holding such certificates should be entitled to hold any medical office whatever. That expression is, I believe, nowhere found in the Bill of July. I may be mistaken, but as I have stated, this Bill of July was never formally considered by the college; the other Bill was altered in many respects; but my impression is that the objectionable part of that clause, the 32d, in the Bill of May, did not appear in the Bill of July.

1182. Mr. *Wakley.*] You find that that latter part of clause 32, by which powers were conferred upon members of the new college to hold offices in public institutions, and to which the College of Physicians objected, was omitted from the Bill of July?—I think it was.

1183. Sir *R. H. Inglis.*] And that was subsequently to your stating your objection, and the objection of the college to that clause; and not merely subsequently, but in consequence of it?—We have reason to believe that it was partly, at all events, in consequence of our objecting to it, that that clause was omitted from the Bill of July.

1184. Mr. *Wakley.*] Under the title of the college, reduced as has been stated, and with the powers abridged as they have now been explained, do the College of Physicians object to its establishment?—The College of Physicians, as I have said, have never entertained that question formally.

1185. Do you consider that it would be advantageous for the profession to establish a new medical college?—Speaking as a private individual, I have my doubts upon the subject; I think it would be better, instead of forming a new college, to reform, in certain respects, the existing governing bodies. I think we have enough already.

1186. Mr. *Acland.*] Do you object to an Act passing for the better regulation of the medical profession?—By no means; I think it would be very desirable that the medical profession should be registered in a manner better than it is now.

1187. Can you describe to the Committee a plan of registration which you would think would be desirable?—I think that registration ought to be effected in classes, and that such registration in classes might very simply be effected by means of the existing corporate bodies. The College of Physicians might register all physicians, the College of Surgeons might register all surgeons, and the Society of Apothecaries might register all apothecaries. A general alphabetical list might be formed at the end, of all the names, designating by a mere letter whether the individual was a physician, surgeon, or apothecary, or surgeon apothecary, and referring to the special list of each class, in which the name of every person in that class might be contained.

1188. Would you have any objection to prepare such a specimen of a register as you would think desirable?—Not at all.

Vide Appendix.

1189. Do you think that the registration could be carried out by the three corporate bodies without some controlling central body?—The Act of Parliament might commit to some body the general control over it.

1190. Has it occurred to you to what body you would desire to commit that?—It might be committed to either of the existing corporate bodies, if it was thought proper.

1191. Sir *R. H. Inglis.*] Would it be better to commit it to some such officer as the registrar of England and Wales?—I have not considered the question; there might be advantages in that plan.

1192. Would you not include in the list gentlemen licensed to practise by the two English universities?—I think the Act should require that the two universities should send in their lists.

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1193. Mr. *Acland.*] Do you think that if the control of the registration were committed to one of the corporate bodies, that would be satisfactory to the others?—I do not know why it should not be so.

1194. Colonel *T. Wood.*] Are any members of the College of Physicians also members of the College of Surgeons?—I believe there are. Until about eight or ten years ago the College of Physicians required that every person admitted should be disfranchised from the College of Surgeons, or from the Society of Apothecaries, if previously they happened to be members of either of those bodies. The college has since dispensed with that regulation, not with the view of encouraging any person to be a member of each, for that it considers undesirable, but because the disfranchisement was attended with vexatious difficulties on the part of the corporate bodies; and there was so much trouble and expense in obtaining a disfranchisement, that the College of Physicians thought it was unnecessary to insist upon it, although at the same time they supposed that when a person became a member of the College of Physicians, he would, either virtually or actually, give up his membership of either of the two other bodies.

1195. Was it beneficial in practice, or was it for the advancement of medical science, that individuals should be members of the two?—Believing, as I do, that the division of the medical profession into classes is, upon the whole, beneficial to all, I think the regulation was a good one; it was given up on account of certain matters of detail, not on principle.

1196. Practically speaking, are the generality of the members of the College of Physicians also members of the College of Surgeons?—Certainly not the generality; the cases are the exception, and not the rule.

1197. Have the generality of them practised as surgeons?—The generality have not practised as surgeons.

1198. May they legally practise as surgeons now?—Anybody may practise legally as a surgeon.

1199. A fellow of the College of Physicians may do so?—There is no law against it.

1200. If not for the advancement of science, would it not be for the better harmony of the profession that members of the College of Physicians should also be members of the College of Surgeons?—I do not think that that is desirable.

1201. What are the reasons against such a regulation?—I approve of no regulation which tends to destroy the distinctions now established in the profession.

Veneris, 18° *die Junii*, 1847.

MEMBERS PRESENT.

Mr. Acland.	Sir James Graham
Mr. Aldam.	Mr. Hamilton.
Mr. Bannerman.	Right Hon. T. B. Macaulay.
Mr. French.	Mr. Wakley.

THE RIGHT HON. T. B. MACAULAY, IN THE CHAIR.

Edward James Seymour, M. D. called in; and Examined.

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1202. Sir *J. Graham.*] YOU are a Member of the College of Physicians?—I am.

1203. May I ask how long you have been a member of the college?—I have been a member of the college, that is, not a fellow, 23 years; I have been a fellow 21 years.

1204. You graduated at one of the English universities?—Yes, I graduated at Cambridge.

1205. At what age did you come to London to commence practice?—Between 26 and 27.

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1206. At what age did you take your degree at Cambridge?—I took my doctor's degree at the age of 28; I went out in arts; under the laws at that time the period was much longer than it is now, so that it was 14 years instead of 10 before I got my degree.

1207. The interval between your taking your master's degree at Cambridge and coming to London to commence practice, how did you occupy?—After obtaining my master's degree I went abroad, and I practised on the Continent, at Florence. I first went to Paris and then into Italy, and then I received my licence to practise; and for two years after I received my licence to practise from Cambridge, I practised abroad in Florence.

1208. You visited the medical schools abroad?—Yes; I went there for the purpose, and I resided in Paris 12 months for the purpose.

1209. You had opportunities at Paris of increasing your medical knowledge?—Yes.

1210. And you availed yourself of those opportunities to the utmost?—Of course; I went there for the express purpose.

1211. You came to London at the age of 26, the earliest period at which you could obtain admission into the College of Physicians?—Exactly.

1212. Have you at all considered the Bill which is now before Parliament for the purpose of introducing an amendment of the law as affecting the practice of medicine in the United Kingdom?—Yes; my attention has been drawn to it particularly.

1213. Have you formed an opinion as to the merits or demerits of that Bill?—I have; I think it would be very injurious, if it were to pass, to the profession; that it would be a great discouragement to the scientific part of the profession, and I think it would be injurious to the public from that circumstance.

1214. Are you aware of the petition presented against that Bill, on behalf of the College of Physicians?—Yes; I have seen the petition.

1215. Do you concur, not only in the prayer of the petition that the Bill may not pass, but in the objections urged against that Bill contained in the petition?—Yes, generally I concur in them; I cannot say that I concur in every one of the points, because I had not the Bill before me at the time, but, generally speaking, it expresses my opinion.

1216. We have heard the evidence of the president of the College of Physicians, of the senior censor, and of the registrar, stating in detail the objections set forth in that petition, and I will not therefore trouble you to go over the whole of those objections; but I would ask you this question, is it your opinion, when you look at certain clauses contained in that Bill, combined with the scheme of registration therein provided, that that Bill if passed would lead to the establishment of a single faculty in this country?—I think that is its tendency, and I think that would be its effect.

1217. Will you state shortly to the Committee why you think the effect of the passing of that Bill would be to lead, practically, to the establishment of a single faculty in this country?—I think the clauses of the Bill, 3, 5, 10, and 31, and Schedule (B.), taken together, would enable a man, not perhaps legally, but still it would enable a man of any qualification in our profession, to be registered as an apothecary, or as a general practitioner as it is called; and it would enable him, particularly under Schedule (B.), to practise medicine in all its parts; and that being the case, a large number of persons would avail themselves of that power, and in my opinion it would tend to diminish the number of persons who take a long time to study the medical profession, and who have a very extended examination before they practise the profession; it would diminish the number of those, if it did not destroy them altogether, and I think that would not be a benefit to the public; such a knowledge of science is a pledge given to the public that those persons are not only fit to practise, but that they are the best, and gentlemen who may be called in on an emergency, and *bonâ fide* persons willing to do their duty. I think without such a pledge, that there would be a great deterioration in the character of the profession, and in the position which it holds.

1218. If the result of the passing of such a Bill should be the establishment of a single faculty, as you apprehend, what would be the effect of such a state of affairs upon the College of Physicians; would it long survive?—It would be a very great discouragement to our branch of the profession; it is impossible for

for me to say what would be the effect, but my impression is that it would diminish greatly the number of persons in my particular branch of the profession. I believe that it is not in human nature, and I am sure that it is not so in practice (for I have been a teacher), that persons will go through a long preliminary education, and subsequently a long examination, and wait a considerable time, when they can obtain the means of supporting themselves and their families by going through a much shorter education.

1219. With your experience, looking back to your past career, have you reason to be glad that you postponed the commencement of practice till you arrived at the age of 27 or 28, and that you bestowed so long a portion of your early life on the acquirement of knowledge and in study, without commencing practice?—Certainly; so much so, that I have a son whom I intend to bring up to the profession; but if I could not give him that education, I should not bring him up to the profession.

1220. From what you have experienced in your own person, and from what you think advantageous for your son, with the feelings of a father, do you think that the interest of the public is also concerned in securing a race of physicians who shall postpone their practice, and devote a large portion of the early period of their life to study previous to practice?—Certainly. I see every day many young men who have not had education (speaking of those who come up to study with a view to become general practitioners); they come up at 14, 15, 16, and 17 years of age, as it may happen to be, and particularly those who have not been bred in towns; their whole object is, in the great majority of instances, to pass the College of Surgeons or the Apothecaries' Hall, with as little knowledge as can be gained; and in the great majority of instances (I do not say in all) their minds are not so constituted as to understand a large portion of what they learn at that time; and of the two or three years that they are in London, a great deal of their study is consequently thrown away. I look upon it also in this point of view: it is a commodity of which the public cannot judge; we see *that* every hour of our lives; for instance, the most eminent subject in the State is the president of a homœopathic hospital. A Cabinet Minister, a man of the highest talent (I am sure all the gentlemen who hear me will say so), is president of a Mesmeric hospital. Take the case of St. John Long; who were the persons who most supported him? two noblemen of the highest talent; one remarkably astute, and another whom I knew, a person of considerable talent; those were the persons that supported the greatest system of quackery that we have seen in modern times. Under such circumstances you must have a pledge given to the public that the men are educated, and capable and willing to serve the public as physicians, surgeons, or apothecaries; and without that pledge, I believe the greatest possible injury to the public would take place.

1221. Are you of opinion that the examination before the College of Physicians, and the licence which it necessarily gives according to law, to practise in the metropolis, and within a circuit of seven miles round the metropolis, operates practically as a check upon quackery?—Certainly it operates as a check, but in the present state of things it is an indifferent check; it holds out that there are these fit persons to practise; and if the public know that, they are much less likely to have recourse to quacks than they would be under other circumstances.

1222. There is a standard fixed by competent authority of a sufficiency of attainments, on which the public may rely if they think fit?—Clearly there is.

1223. You do not say that, upon the whole, the state of the law is perfect at the present moment, as relates to the practice of medicine?—No; very far from it, I think.

1224. Have you contemplated any reform of that law, which you think will be expedient upon the whole; for instance, any alteration in the charter of the College of Physicians?—Of course the extra licence is an abomination; it is a thing which cannot be upheld; but we are in a difficult situation about it. It is not in the charter; it is provided for in the last clause of the Act of Parliament confirming the charter, and there it provides a special tribunal for the granting extra licences. The power of making bye-laws cannot apply to that, inasmuch as it would be an alteration in the Act of Parliament; and the College of Physicians has frequently made representations upon that, and has entreated successive Governments that that might be cancelled altogether, or

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that there might be a new regulation made. It is absurd in itself that it should be necessary to go before one tribunal in order to obtain a licence to practise in London, or within seven miles, and to go before another tribunal in order to obtain a licence to practise in Shrewsbury or Birmingham, or any other part of Great Britain. It arose out of the circumstances of the time, but that is so long ago that it ought to be changed.

1225. The distinction between the metropolis and seven miles round, and the rest of England and Wales, you would wish to see abolished?—Certainly.

1226. You are aware of the applications which have been made from time to time to the Crown by the college, for a revision of the charter?—Yes.

1227. Did the last alteration meet with your approval, in which there was a change in the system of elects, and also in the mode of electing the president?—Yes; I was then senior censor, and I entirely approved of that alteration; and I approved of another alteration very much, which was, that all penal enactments should be taken away from the college; it is a Bill of yours to which I allude; but by raising the character of the profession in other respects, I thought it would tend more to the extirpation of quackery than anything else; and if I remember rightly, the Bill specified that persons under the new regulation should be capable of practising throughout England and Wales, and that there should be a reciprocity of education with the other countries of Scotland and Ireland, which is perfectly proper, provided the standard of education be equalized; and that no person should be eligible to become a medical officer, not only of any of the larger hospitals, but of any Government employment, who had not been in his class regularly educated; that such persons not educated according to law should not be exempt from serving on juries, or exempt from serving in the militia. I think, taking those two together, very great advantage would be derived to the profession by doing away with the penal enactment on one side, and at the same time raising the character of the legally qualified medical practitioners on the other.

1228. That Bill proceeded on the principle of encouraging by inducements, rather than of deterring by fear of penalties?—Yes, and it discouraged by implication at the same time.

1229. Mr. *Wakley*.] Will you state the Bill to which you refer?—I refer to the heads of the Bill which were presented to the college in 1843 or 1844. I never saw the Bill itself, but I speak of the heads of the Bill that Sir James Graham sent us. I am not speaking of the last Bill; of that I have no knowledge.

1230. You are speaking of the heads of the Bill sent to the college before any Bill was introduced into the House?—Yes; the first Bill that was introduced was spoken of as encouraging quackery; it is not my opinion that it encouraged quackery, but the majority of the college were of that opinion.

1231. Sir *J. Graham*.] In that Bill, and all the Bills which I subsequently introduced, there were provisions for the establishment of a council of health; did that meet with your approbation?—The first scheme I entirely approved of; its tendency was to give a certain voice to the profession, by providing that there should be a mixed council, composed of laymen and medical men; but I think if it were to consist of laymen, without medical men, it would be injurious to the profession.

1232. I think I never contemplated a council of health composed exclusively of laymen. I always contemplated a council of health combining the presence of officers of state, laymen, and medical men?—That was the first scheme; afterwards there was an alteration made; and it was not specified in the last Bill that there should be medical men.

1233. But by me it was always intended to have some medical men; in the early drafts of the Bill there was a system of selection, and at last it rested upon the nomination of the Crown; but it was always intended to combine laymen with persons of distinction in the medical profession, from the three parts of the United Kingdom. Do you think that some such arrangement would be conducive to public good?—I think that would be the best council of health that could be instituted.

1234. It has been said that the existence of such a body in aid of the Government, in regard to sanitary police, would be useful, but that it would not be useful to give to such a council of health the supreme control over medical education. Are you of opinion that it would be advisable or otherwise?—

wise so to vest the controlling power?—I think that the body which is to have to do with the health of the whole country would be sufficiently taken up, without entering into the quarrels of the colleges and of medical men; I think that would be quite enough to occupy any body or any set of men.

1235. I contemplated that the registration of medical men, and the curricula for the education of medical men, in the various universities and institutions at which medical men are educated throughout the United Kingdom, should be submitted for approval to that council of health; would you think such a provision right or wrong?—I think such a provision would be very right, provided always that there were on the council a sufficient number of the different classes of medical men as they now stand, not to be able to ride over the laymen, but to inform them on subjects which they could not understand, but which their good sense might at the same time well regulate.

1236. I always contemplated the presence, under that Bill, of a physician of eminence from each of the three parts of the United Kingdom, and a surgeon of eminence from each of the three parts of the United Kingdom, and latterly a general practitioner, in conjunction with laymen; do you think that a body constituted as I have described, should have, in addition to the power of advising the Government on sanitary questions generally, a power of controlling medical education throughout the United Kingdom?—I think it should have the power of controlling medical education. I am not able to say whether that would constitute the best sanitary Board; I am not able to give an opinion upon that. In France, by the new Bill which is now being passed there, the Government having taken that into consideration, have discontinued the *officiers de santé*, which were something like our extra licentiates, and they are going to establish *médecins cantonnaux*, or a medical man for each canton, and those are to receive something from the State, besides what they can make for themselves in the district; and those persons, being educated under the order of the Government, are to be in constant correspondence with the Central Board of Health, or some body similar to that, in order to give an account of the health of the district, and they are to be appointed for the express purpose.

1237. That law has been introduced, and is now encountering much resistance?—Yes; but the last time the opposition was beaten upon the proposition for forming a medical education for the *officiers de santé*.

1238. The attempt to establish an inferior standard of education has failed?—Yes; but there is a great difference between this country and France in this respect: the Government of France undertook to insist upon a very high standard of education for all medical men, but inasmuch as there are inferior districts for the medical men, the remuneration in which would not encourage them to go through such an education, they give a salary from the State to a certain number of them for presiding over and corresponding with the Government on the health of the district, and likewise they form what we should call exhibitioners or boursiers. Degrees in arts must first be taken in a school of secondary instruction; and then any eminent men who have distinguished themselves in sciences and have obtained the degree of bachelor, or have matriculated in arts, are to be provided by the Government with a sum of money to enable them to fulfil the period of five years of medical instruction, which is to be rendered compulsory, as well as the education in arts. The Government give a large sum of money; and that must be the necessary consequence of raising the education to a high standard, that the medical men in the poorer districts must be supported by the State.

1239. A high standard of uniformity, strictly enforced by law under the responsibility of the Executive Government, would, in your opinion, leave unprovided the poorer districts?—Entirely; it would be impossible to carry it out in the present state of society and of the Government in this country.

1240. Take the converse; a lower standard, rendered available to the entire community, in order to meet the wants of the poorer districts, where a lower rate of remuneration would exist; in your opinion would that become the general rule of education for the single faculty, and lower the attainments of the profession generally?—It would be degrading to the profession, and would bring it down to a much lower level in society than it has ever been in this country, and it would therefore do injury to the public; the public would be attended by persons having the minimum of knowledge, instead of by persons having the maximum.

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1241. The prolonged education, and the opportunity of acquiring scientific knowledge on the part of those possessing larger means, willing therefore to postpone practice, and seeking the acquirement of knowledge, in a generation or two would pass away, and then we should have one general faculty?—That is my impression; those persons would go into other professions, and by degrees our branch of the profession would be entirely destroyed.

1242. If your view be correct, the passing of such a law, with reference to the rising generation, would be a most serious injury?—I consider that it would be such.

1243. In your opinion caution is necessary in so legislating?—Yes, the greatest caution.

1244. With respect to the arrangement contemplated in the Session of 1845, of the establishment of a College of General Practitioners, in lieu of the Society of Apothecaries as now constituted under the Act of 1815, would that have been, in your opinion, a good or a bad substitution?—It is difficult to answer that question. I have no objection to an incorporation of general practitioners. It is only fair to say that the Apothecaries' Society have done a good deal for those belonging to them: it has been by the whip, but nevertheless there has been a great deal done, and the class of general practitioners has been raised in the last 25 years in an extraordinary degree. As regards the knowledge of a great many, they only come to town to get a licence to practise in their profession, and such men do not succeed; but I believe that generally those men who have been educated under the apothecaries' system are men of considerable talent in their profession, and many of them supply the want of general education by considerable attention and study afterwards.

1245. On the whole do you approve of the Apothecaries' Act, as it appears on the statute book?—No, I do not approve of it; I do not approve of apprenticeship.

1246. Should you say that the five years apprenticeship is advantageous in the training of general practitioners?—No, it is a great loss of time: the young men come to London at a very early age; I think it would be desirable that they should reside two years in the house of a medical man, if it could be so arranged, under the title of apprenticeship, or under whatever name you please. My objection to apprenticeship is to the length of time, and to the fact that it has been used, not to the instruction of the young man, but to the service, and I believe, often the menial service of the apothecary himself.

1247. But in the practice of medicine, more especially in the rural districts, some skill in compounding is advantageous?—Certainly.

1248. And that is acquired by the residence you would desire, not for five years but for some short period, in the house or shop of an apothecary?—If that be the object of it, I apprehend that might be supplied by the regulations of the hospitals, that every young man who is to come there for a certain time should be taught a certain amount of pharmacy, and should not proceed to the higher branches before he had been taught that; but still it is of great advantage for a young man that he should be residing in the house of a medical man when he comes to London, and if it is a respectable family it must influence his studies and regularity.

1249. The Apothecaries' Company, under their Act and under their charter, is a trading company, is it not?—Yes.

1250. The governing body need not be composed exclusively of medical men?—I do not know that; I know that it is a trading body, and that that is felt to be a very great objection.

1251. Is the examination of such a body, not necessarily composed exclusively of medical men, a satisfactory examination with regard to the efficiency of medical practitioners?—The examination is always conducted by medical men.

1252. But is it an examination that is satisfactory as regards the efficiency of medical men?—I have said already that it has done a great deal of good; of course there is nothing on earth that might not be amended; sometimes there has been a little severity and a little inconsideration, but still they have had a vast number of persons to examine. I cannot find fault with a body that has done so much good, although undoubtedly it might be improved.

1253. Supposing for the moment that the examinations in England are satisfactory, as conducted by the College of Physicians, the College of Surgeons, and

and the Society of Apothecaries, respectively, you having said that the equality of practice throughout the United Kingdom should be made dependent upon the equality of standard and of efficiency throughout the United Kingdom; are you satisfied with the provisions for securing that equality of attainments as contained in the Bill introduced in the present Session?—No; I do not remember to have seen anything of the kind in that Bill.

1254. You see no provision which would secure that equality of attainments?—No.

1255. You are aware that there is a provision, that the question of the course of study in the different institutions granting licences in Scotland and in Ireland shall be submitted to the Secretary of State, in the Bill which we are now considering?—Yes; but I think the Secretary of State a very bad authority to submit it to.

1256. You disapprove of that?—Quite.

1257. You see no security for equality of attainments under that provision?—I see no security when it is left to the judgment of the Secretary of State, as it is under that provision.

1258. Do you see any security in the Queen in Council deciding upon those matters?—Surely that is the same thing.

1259. In either case is there any medical authority responsible for the exercise of the power?—No; and what has happened before may happen again with persons in high office. The Secretaries of State would be content with the opinion of those in whom they had confidence; they might be eminent medical men, but they might be unknown to our profession, and every man has a bias; that bias would be transferred to the mind of the Secretary of State. One Secretary of State would have his family apothecary, who had attended his family in the measles; he might be of the old school, or he might be of the new school. Another Secretary of State might have no regular medical man, but he might consult his wife's accoucheur. That is the way it would go on.

1260. The President of the Council and the Secretary of State by no means hold permanent situations in this country; and as they change, the advice of the medical attendant of the family in the measles, and of the accoucheur, would vary also, and there would be anything but a fixed standard for education under that system?—Certainly; we have had a good many schemes proposed by several Secretaries of State already.

1261. The fixed standard depends upon the opinion of the Secretary of State and the President of the Council for the time being; would that be, in your opinion, satisfactory or otherwise to the public?—I think it would be worse than nothing.

1262. Does the Bill now before the Committee give any better security than that which you think worse than nothing?—No, certainly not; I think that a council composed partly of medical men, and partly of high officers of state, would be a good tribunal. I may be permitted to say that I was a Commissioner of Lunacy for a good many years; I am not now; and that Board consisted of five medical men, two lawyers, and a number of noblemen and gentlemen who visited for the sake of humanity; and I must say that I saw there the great benefit that arose from the mixture of those three classes of persons; no set of men overruled the opinions of any others, but where they required to be informed the medical men were able to inform them, and the good sense of the laymen influenced the doctors where their sense was not perfect, and they kept one another in check, all being educated men, in a very remarkable and useful degree.

1263. A Council of Health, constituted in a similar manner, would in your opinion have similar advantages?—I think it would be of the greatest advantage in this country, in reference to the government of our profession, of any improvement that could be introduced.

1264. Understanding what has heretofore been contemplated with regard to the composition of a Council of Health, and contrasting that body exercising a general control over the profession, with the control proposed to be vested by this Bill in the Secretary of State or the Queen in Council, which would you prefer?—I have already stated that I look upon the reference to the Secretary of State or the Queen in Council as most objectionable, but I look upon the establishment of a Council of Health or Council of Control as the greatest practical improvement that could be introduced into our profession.

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It would introduce a fresh scheme for the control of the medical profession, which everybody would be satisfied with, but nobody is satisfied with the existing control.

1265. You have commented adversely on Schedule (B.) in this Bill, which contains the form of the proposed registration; you do not object to registration itself?—Not at all; I object to paying for it.

1266. First, as to the form of registration: would you approve of a registration which commenced with giving the different classes of the profession according to their respective grades, accompanied with an alphabetical list, to which alphabetical list should be appended the grades of each person so practising, together with his residence?—Yes, I think that would be very good.

1267. Will you be good enough to look at the form of register which has been put in by Dr. Hawkins; what is your opinion of it?—I think that would be very good: each corporate body might send to some officer, the registrar-general or any officer of that kind, on the 1st of January or any other period, their corrected list; that might be made up under a penalty if it was not correct; that should be done in each of the three countries, and there should be published at the end an alphabetical list of the whole.

1268. Mr. *Acland.*] You will find in that list men who have passed the universities; how would you class those?—They might be returned by the universities, but they have no right to practise in London as physicians unless they have been examined by the College of Physicians; and I hold it of the greatest importance that that should not be done away with, but that gentlemen educated at the universities should have their knowledge tested by men actually in practice and at the head of the profession; otherwise learning might occupy the whole, and practical knowledge very little.

1269. Sir *J. Graham.*] Before you admitted a graduate in medicine, at either of the universities, to practise in the United Kingdom according to law, you would have his medical skill tested by some other examination than that undergone at the university?—Yes; and I am sure that that is the general impression of those who belong to our part of the profession, and yet it is principally composed of members of the universities. I think a register should be sent from the universities in the same way as the registers should be sent from the corporate bodies; it would simplify the thing.

1270. Mr. *Acland.*] You will find that the first of those pages contains physicians; the second, surgeons; the third, apothecaries; and the fourth, an alphabetical list of all: would that be satisfactory to you?—I think that is a very good plan, but I think that they should be made separate documents; and I think that the document should be transmitted by the different corporate bodies.

1271. There would then be a separate class for the graduates of each of the universities?—Yes, a separate class at the beginning; and they would be put with all the others, alphabetically, at the end.

1272. I observe that that plan proposes to put together all the physicians legally entitled to practise in England; and that term would include those who had been examined in London, and also those who had taken their degrees at Cambridge and Oxford?—I would rather they were put separate; that the university sent their list to the registrar-general, of those that were qualified to practise under their licence.

1273. Would not that multiply the classes?—There are very few qualified to practise from the universities.

1274. Sir *J. Graham.*] Where should the power of purifying the list be vested; that is, the power of taking men off the list?—That should be vested in the Council of Health, supposing it to be created, or in the Board of Control.

1275. I think I had never the pleasure of conferring personally with you upon any of the drafts of the Bill which I introduced?—Yes; I had the honour of being with you twice when I was senior censor, and I spoke to you particularly upon that obnoxious clause with regard to visiting apothecaries' shops; we wished it to be vested in a mixed commission, and to extend to all apothecaries' shops, or that it should be abolished, because at present we can only visit apothecaries' shops within the city of London; and it seems a great absurdity to go and turn out the medicines at a shop on one side of Holborn, and not to be able to visit a shop on the other side.

1276. That

1276. That was varied in the last draft of the Bill?—I did not see that.

1277. But on the whole, considering this Bill as contrasted with the former Bills which I introduced, do you prefer the former Bills to this Bill?—I prefer the former. I do not say that it was perfect; a good deal might be polished in it, but I greatly prefer it to the present one. I think it would be beneficial to the profession, whereas I think this would be a discouragement to the profession, and an injury.

1278. Do you approve, in connexion with the register, of levying an annual fee upon registration?—No, I do not think it would be right; it would be better that something more should be paid on the original register.

1279. Do you approve of the provision which would give physicians a legal right to recover payment of their fees?—It would remove us from the position we have occupied for so many years; it would reduce us from a profession to a trade. You had better ask the question how barristers would like it.

1280. Is there any leading provision in this Bill of which you approve?—Taking all things together, I cannot say that there is; and there is another thing that strikes me as being very hurtful in it, as compared with the present state of things: it is the clause which exempts chemists. I have been bred up among lawyers, and therefore I know that a lawyer can make a good deal of a clause of that kind. Clause 28 says, "Provided always, and be it enacted, that nothing in this Act contained shall extend, or be construed to extend, to prejudice or in any way to affect the trade or business of a chemist and druggist, in the buying, preparing, compounding, dispensing, and vending drugs, medicines, and medicinable compounds, wholesale or retail; but all persons using or exercising the said trade or business, or who shall or may hereafter use or exercise the same, shall and may use, exercise, and carry on the same trade or business in such manner, and as fully and amply, to all intents and purposes, as the same trade or business was used, exercised, or carried on by chemists and druggists before the passing of this Act." Now the fact is, and it is a notorious circumstance, that a very large number of those chemists and druggists have no medical education, but they practise, as it is called, over the counter. We say it is not legal, and that it ought to be prevented; but it is done to an enormous extent, particularly in the City. Now when this Bill says, "that they shall and may use, exercise, and carry on the same trade or business in such manner and as fully and amply, to all intents and purposes, as the same trade or business was used, exercised, or carried on by chemists and druggists before the passing of this Act," it appears to me that that would legalize those parties practising over the counter.

1281. Though not legal, it is now done to a great extent?—Yes, to a very great extent.

1282. And you are an enemy to penalties?—Yes, but I am not an enemy to education; therefore I would have them educated, and in that way the evil would be removed.

1283. In addition, then, to a test of the knowledge of the physician, surgeon, and general practitioner, you would recommend the extension of the provision with a view to apply a test of the medical knowledge of the chemist and druggist?—Yes; to some extent they act as medical men whether we like it or not, and consequently it is a very important thing to the public that they should have some medical education, and that the public should have some pledge of their capability.

1284. Then the imperfection in the law, you think, ought to be remedied which leaves the practice of chemists and druggists devoid of any previous test of their proficiency in medical knowledge?—Yes; there is a petition coming up to Parliament, signed by the first men in the profession, to that effect, and also signed by chemists themselves.

1285. This clause which legalizes, either directly or indirectly, the practice of chemists and druggists without that test, is the very converse of what you would desire?—It is; I think it very hurtful. I think that this Bill is not very popular in itself, and it will be still more unpopular if that clause remains in it. The medical men, the general practitioners, say that the Bill is stringent upon them, whereas it confirms the chemist in his illegal practice without any medical education at all.

1286. Mr. *Acland.*] Will you be kind enough to explain what you mean by the medical knowledge that you would require of the chemists and druggists?—I mean

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—I mean a knowledge of pharmacy, and a knowledge of the drugs which they would have under their control.

1287. Do you mean a knowledge of diseases, or only a knowledge of drugs?—A knowledge of the medical properties of the drugs which they sell. I did not mean that they were to be licensed to practice medicine.

1288. How would you enforce that education if you had no penalties?—Simply by saying that a person should not be permitted to act as a chemist and druggist without having undergone such an education.

1289. If he did so act would you not have penalties?—Yes; that is a trade which is a different thing from a profession.

1290. *Chairman.*] You are for taking away all penalties from unlicensed practice in physic and in surgery?—There is none in surgery at present.

1291. The only class of persons upon whom you would impose penalties are the chemists and druggists, for selling without having a medical education?—I referred to punishment by penal laws; I meant such a punishment as exists under the charter of the College of Physicians, but I consider it a penalty by induction (if I may use the expression): if no person is eligible to any consideration or any place for which emolument by the State is paid as a medical man, except one who has been regularly licensed, I do not think the sending a man to prison is the way to correct the thing, but only to make it worse.

1292. What would be the penalty you would impose upon a person opening a shop as a chemist and druggist without having a medical education?—I would do as they do in France, make it a misdemeanor.

1293. And make the party liable to fine and imprisonment?—Yes.

1294. If you do not punish a person for cutting off a man's leg without a licence to practice, would it not be hard to punish a man for opening a chemist's shop without having medical education?—It would not exist, I think, but you would get rid of quackery under those circumstances. I think that the chemist and druggist ought to be under the same law as the haberdashers or persons in any other trade; it is a great evil in the profession at the present moment that there is no security: if a man had a medical education that would be sufficient, but any man, without having proved that he at all understands the nature of the drugs under his care, is allowed to take a chemist and druggist's shop.

1295. Would it not be rather a violent measure, when you permit a man to cut for the stone without a licence to practise, to refuse to allow a chemist and druggist to sell an ounce of salts without having had a medical education?—Not if, in point of fact, the party does not cut for the stone.

1296. Are there any reasons for having penal laws upon people who sell drugs without a qualification, and not also having penal laws on the persons who prescribe and operate without a qualification?—Yes, because penal laws in the one instance are supplied by measures which prevent a necessity for them, and in the other instance you cannot apply the same means.

1297. In France, to which you referred as an exemplification, medical and surgical practice without a licence are severely prohibited?—Yes, they are brought up by the police in the same way as any other parties; and by the present law there is a very stringent regulation: a man who has been brought up before the police for any cause whatever is never permitted to practise again as a physician or surgeon; but I do not approve of that.

1298. Do you conceive that the evils arising from the disposition of powerful and influential persons to be misled by quacks, are removed by the system now pursued by the College of Physicians?—The College of Physicians act in the way of example; its edicts, and so on, act as an example to deter; but since Rose's case, I believe, in the time of Charles 2, and especially since the establishment of the College of Surgeons, under which men may ride off as being surgeons, as one man did in a case some years ago, in point of fact the powers of the College of Physicians to prosecute have never been put in force.

1299. Its power then is reduced to its moral influence and authority?—Yes, but there is still a legal power: if a man bring an action for assault, or bring a civil action of any kind, if he brings it as a physician, and he has not been licensed by the College of Physicians, he is nonsuited.

1300. You mentioned as a remarkable instance, that a person of great rank in the State was a patron of the Mesmeric Hospital?—Yes, I have seen a proposal going round with his name at the head of it.

1301. Do you conceive that in patronizing the Mesmeric Hospital he showed a disregard to the College of Physicians?—I think he showed a great disregard to our acquirements, to common sense, and to everything else.

1302. Is not the principal of the Mesmeric Hospital a fellow of the Royal College of Physicians?—That I cannot help; he became a fellow before he took up his Apostolic mission.

1303. Has he been allowed by the college to make a public appearance upon an occasion of great interest?—He was not passed over, that was all; I think it was a bad measure, but I cannot help it.

1304. Might it not be fairly said, that the countenance apparently given to that individual by the College of Physicians, might have influenced him in giving his patronage to the Mesmeric Hospital?—I rather think not, because his patronage was given to the Mesmeric Hospital before the lecture was made; and while we wish everything, to a certain extent, to be free in regard to opinion, yet at the same time it is not to be supposed that the college agreed with the sentiments of the gentleman who delivered that oration.

1305. You mentioned homœopathy; are there any members of the College of Physicians who practise as homœopathists?—None, nor do I know of any licentiates who practise as homœopathists; and it is very remarkable, that though that is the first road to money and the first road to influence, as can be shown, amongst the aristocracy of this country, and although a large number of the licentiates of the College of Physicans derive no considerable emolument from their profession, yet they have not been led to adopt that piece of quackery, notwithstanding it would place them among men high up in business in this country, and amongst the highest aristocratic families.

1306. Sir *J. Graham.*] Your opinion is, that the tendency among mankind generally in favour of quackery is very strong?—Decidedly; in all countries.

1307. Is it not very natural, that where established medical science has failed in desperate cases, men clinging to life should be anxious to try some attempt apart from professional skill and science?—Yes, that is very much in accordance with human nature; but what I mean to point out is this: a lady will come to a physician, and say, "I want some particular pills;" she will not take what you give her, but she will take only pills put up in a particular box; she will say, "I cannot take aloes," when perhaps what she is taking is aloes, though she does not know it; but she takes particular pills simply because they are "Morrison's" or somebody else's.

1308. This tendency in human nature is so strong to try experiments that are almost hopeless, in order to save life, that you would despair of penalties to restrain quackery which is so frequently countenanced by persons of great influence?—Will you allow me to illustrate it: the College of Surgeons was established 40 years ago; the College of Surgeons have no power whatever to prevent a man from practising as a surgeon; a man might go and practise as a surgeon next door to the College of Surgeons; but inasmuch as no man is admitted to any office of any sort or kind (except some offices under the poor law, from want of a sufficient number), who cannot show a diploma of the College of Surgeons, there are fewer unlicensed practitioners among the surgeons than in any other profession in the world. I mention that as an illustration.

1309. Is not surgery a practical and demonstrative science as compared with medicine, which is more or less speculative?—Yes, but the surgeons do not confine themselves to the practical science; they mix a good deal of speculative science with the practical.

1310. *Chairman.*] Is it not the fact, that in those complaints which surgeons treat entirely, there is more quackery than in all other parts of the medical profession put together?—There is; but that arises out of the condition of society.

1311. Sir *J. Graham.*] Do you think that in Scotland at this moment where there are various bodies that grant licences, there is the same security as in England among the licensing bodies for ensuring the sufficiency of medical and surgical attainments?—I have not been in Scotland for many years. At the time I was studying in Edinburgh I could have answered that question better. The practical teaching of medicine which would belong to a general practitioner is, I think, carried to a very great height of perfection in Scotland. I can say nothing against that; but I think, with the Royal Commission which existed some years ago, that their preliminary education previous to commencing the study of medicine is defective.

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1312. The University of St. Andrew's has the power of granting medical degrees in common with the University of Edinburgh, and upon equal terms?—Yes.

1313. Do you think that the security for medical skill in the University of St. Andrew's ought to be put upon the same level with that in the University of Edinburgh?—No; but we cannot distinguish between the degrees. Degrees can be bought in Germany, and they can be got here; and it appears to me that it is desirable that there should be some mode of granting degrees to persons qualified to become physicians, without going through all the routine; that there should be, as Lord Mansfield called it, a door set open for that purpose. St. Andrew's is the only place in this country that has the power of granting degrees in that manner, and by ancient prescription they have the power of doing that. If that were done away, some other means, either by a Board of Health, or a Board of Control, or some other body, should, I think, be devised, by which that honorary distinction should be given to persons qualified; for instance, a young man may be extremely well educated and have gone through all the branches of his education, but not have taken a degree; he goes abroad as a medical man, and he is obliged to call himself a doctor or nobody would attend to him.

1314. Would you have a small wicket opened by favour?—No, opened for persons who have worked hard at their profession and have not been able to obtain a licence in the ordinary mode. It was formerly held, in the College of Physicians, that the president had such a dispensing power.

1315. Would not that be liable to great abuse?—Certainly it would; but I throw that out as requiring consideration.

1316. With regard to the general subject of the highway to be opened to general practice, would it not be extremely important, with a view to secure equality of attainment, that the superintendence of the standards of acquirement should be vested in some responsible authority known to the State and provided by the law?—Certainly; if equality of qualification and equality of practice in the three kingdoms be carried out, there must be one standard for the three kingdoms, for each of the branches of the profession, and there must be some superintendence of that, in order to see that the standards are equal, so that an Englishman may not go over to Ireland, or an Irishman come here, on account of there being a lower standard in one country than in the other; we must not undersell one another.

1317. Can that equality of standard be obtained unless you have the curricula, and the examinations under those curricula, tested by inspectors and assessors sent down from time to time by the central body?—I think that the central Board should somehow or other, through the medium of some of their members, be aware of the nature of the examinations, but I do not think it is necessary that they should send down assessors. We are an irritable race, like the poets, and I think the medical men would dislike that exceedingly.

1318. How would the State have a security for the observance even of the same fixed standard at St. Andrew's practically, unless the examination for licences and degrees of St. Andrew's were from time to time scrutinized by the assessors?—They would submit their curriculum to a Board of Control, either here or in Scotland, and that Board of Control having medical men belonging to it, would very soon find out, without any difficulty, whether the examination was carried up to that extent or not.

1319. How would they ascertain that, unless from time to time they were present by means of their officers at the examinations?—I think that they should take it upon the word of the university, that being the curriculum required by law. It would be very unfair to suppose that the university, which was bound to adhere to a certain curriculum by the law of the land, would not do that, but would act *mala fide*.

1320. Is not the natural tendency of the curricula being fixed, when you have rival bodies, to endeavour to attract a greater number of students, by giving greater facilities at one university than at another?—The rival bodies will tell of one another, if there is anything wrong; you may rest assured of that.

1321. But the tendency will be, a certain curriculum being fixed, to give greater facilities under it, in the hope of attracting a larger number of students?—I think not; I have too high an opinion of my profession to suppose that that would be done.

1322. The

1322. The question refers not to the profession, but to the examination at the universities of St. Andrew's, Glasgow, Aberdeen, and Edinburgh, all rival universities with equal powers of granting degrees; and the questions I am putting suppose the same curriculum of medical education to be acted upon by all, without, as you suppose, inspection to ensure that curriculum being observed, and then I ask whether the natural tendency in one or in some of those universities, the curriculum being the same, will not be to administer that curriculum in a more easy manner in one university than in another?—I think that there should be a power of inspecting, but I think that it should not be frequently used; I think it would appear to be ultra suspicious if a curriculum was insisted upon as regards those bodies. If you had medical men on the council it would be very easily discovered, without that system of espionage upon them, whether it was *bonâ fide* adhered to or not.

1323. It has been alleged from Ireland, that even in this metropolis the licence has been rendered more easy than it has been in Dublin, from that very competition?—I do not think that; the young men will tell you that it is difficult to master the examination; and there is another disadvantage which arises from its being difficult: there are persons in this town who make a large sum of money by what was called at the university, "cramming" the young men, so that they may get up the mannerism of the examination in three months: a man who has not attended the medical school, if he is pretty sharp, may be enabled in that way to pass one of these examinations, and that is one of the great disadvantages of the examination being screwed too tight sometimes.

1324. The facilities for evading the present examination being great, what do you say to a legal provision with respect to the postponement of the commencement of practice, as a security?—I think it impossible for the general practitioner to have it postponed too long; the very existence and the health of society require their entering into practice at a very early age; especially in Scotland they begin very early. The degree of doctor is conferred at 21 in Scotland, but those gentlemen act not as physicians, but only as general practitioners. In this country society requires a large supply of medical men, and if the age was to be postponed much the supply would be hardly to be obtained; and it would not stop there, but it would open the gate to irregular practice, because young men would endeavour to practise at an earlier age than the law permitted, in order to maintain themselves and their families. The education now is expensive enough; it falls very heavy upon what I call the third-class (not by way of disparagement, for they may be as respectable as I am), but it falls very heavily upon them from their being obliged to study so long a time in London, and it is frequently the ruin of a family in the country, from the time that a son is obliged to pass in London for his medical education. You could not postpone the commencement of general practice beyond 22.

1325. But do you see any objection to the postponement of the practice of a physician, thereby securing to the public a longer education with the prospect of obtaining a greater knowledge of science?—No; I think that is quite right and necessary; I see no objection to that for the physician or for the body who are called pure surgeons; the line of distinction between the two is an arbitrary line. Those men who become hospital surgeons wait a considerable length of time before they get into practice; such a person studies anatomy and becomes well acquainted with anatomy; he then goes to an hospital, where he dresses; that takes a considerable time and manual labour, if the man is to succeed; he then becomes a demonstrator in the hospital where he has been brought up, or the school, and from that he becomes an assistant surgeon: all that takes a good deal of time, so that we never hear of gentlemen becoming surgeons of the great hospitals at a very early age; I believe that Sir Benjamin Brodie was assistant surgeon at as early an age as any, before he was 24; but men who aspire to higher offices in that profession do not begin practice really before 26; but that is only a small class of surgeons, and there is no harm in that class being small who devote a considerable portion of their time in that way, because they are called in in consultation to assist other persons, and such persons must exist in every country.

1326. You have expressed an opinion that the postponement of the commencement of the practice of a physician is conducive to ultimate excellence in his profession; is that so clear that you think it might be safely left to the

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discretion of the young man himself, or his parents or guardians who control him, or that it would be better on the whole by direct enactment to say that the commencement of the practice of a physician shall not take place before a certain age?—That is the law at present in London.

1327. That is the law, but in your opinion is it best to leave it open or to enact it?—I think it is better that it should be enacted, but I must make a little addition to that: young men, before they obtain their licence to practise, at the age of 26, frequently put their name over their door, and I dare say get some little practice, and that is never interfered with, provided they intend to come before the College of Physicians when they are properly qualified, and I believe that in fact they get very little practice; but if they came up at the age of 26, and went on practising without a licence from the College of Physicians, and in defiance of the college, the college would state to them, "This is contrary to law;" but there has been some slight usage on the subject with regard to young men who were intending to come up; they have not been interfered with by the college, though they have been practising under 26.

1328. The penalty has not been enforced in London and within seven miles, though the law is that a young man cannot be licensed to practise as a physician under 26?—Yes; and parties have been prosecuted for not having been licensed.

1329. To what penalty are they subject?—Subject to the penalty imposed by the charter; 5 *l.* for every such action, during the period that they have been practising.

1330. Has the college acted upon that?—Yes, the college has acted upon it; the last time it was evaded, but they have acted upon it repeatedly; and I may say, though I do not admire that effect, that in almost every instance in which it was acted upon, though the college did not succeed, it affected the reputation of the man who had been so prosecuted; he was always injured by it, and in one or two instances I have been told that the disappointment and disgrace even occasioned the death of the individual; there was a case that happened more than 20 years ago; that party was prosecuted and he suffered judgment to go by default for 50 *l.* or 60 *l.*, and as I understand he never looked up after it.

1331. The moral effect of this controlling power is far greater than the limited legal effect would lead one in the first instance to suppose?—Yes; the legal effect is nothing. The Habeas Corpus Act passed after our charter, and then the Apothecaries' Act was passed; and after that the charter was granted to the College of Surgeons; and if the parties can prove that they have a right to practise under either of those, it takes them out of the record; so that, except that it is a misdemeanor, and that person practising is liable to be nonsuited in a civil action, it is inoperative.

1332. You allude to the origin of the power of the College of Physicians being under a charter of Henry the Eighth, so ancient as to have been before the Habeas Corpus Act?—Yes. I remember one case being tried by Sir James Mansfield. It was an action brought by a person practising as a physician, against another person, in the Court of Common Pleas; and he was nonsuited; and the Judge got into a great rage, and said, "I cannot make these gentlemen understand that they are not legally physicians, and cannot be regarded as such, unless they have qualified under the Statute of Henry 8." And at Bristol there was a case where a man, practising as a physician, brought an action against another for slander, for saying that he had killed an old lady; and Doctor M'Michael was obliged to go down to prove that the plaintiff was not a physician, and I think that he was nonsuited.

1333. Mr. *Wakley.*] Doctor M'Michael was registrar of the College of Physicians at that time?—Yes; it is exceedingly disagreeable to prosecute those parties, and it has hardly ever been put in force.

1334. Sir *J. Graham.*] You would recommend that, as regards physicians, the present limit to the commencement of practice, the age of 26, should be maintained?—Yes; undoubtedly it gives a man time to get a mind to apply to his profession; the evil, as regards the generality of those entering the profession, is that they want a mind to begin with: young men begin to learn medical subjects with a very imperfect general education.

1335. Mr. *Wakley.*] You stated, that after you had graduated at Cambridge you visited the Continent, and attended the medical institutions of Paris?—Yes.

1336. Do you recollect what fees you paid for your attendance at those institutions?—None at all; they are under the Government.

1337. All the institutions there were open to you?—Yes; they are all paid by the Government.

1338. Had you an opportunity of remaining there an unlimited length of time, as far as the schools were concerned?—I might have remained 20 years if I had liked.

1339. And attended the hospitals gratuitously?—Yes, as well as the lectures: they are paid by the Government.

1340. Have we any similar arrangement in this metropolis?—No; there is nothing paid by the Government here in the medical department.

1341. Do you consider, that if medical education were equal for the whole of England, the establishment of a single faculty would be injurious to the profession and the public?—I do not see how that would be possible: they are about now to raise their qualification in France; but I think that it would be impossible to have a single qualification in England which should be raised beyond the qualification now required for general practitioners, unless the Government interfered, as they propose to do in France, by the establishment of *médecins cantonnaux;* which is, in short, the payment of a large proportion of the money from the Government, to those who could not get the money by other means.

1342. Have you read the debates in the French Houses with respect to the arrangements now in progress?—Yes, I have.

1343. Do you concur in the argument advanced for the abolition of the order called the *officiers de santé*?—Yes; they were the greatest disgrace that could exist.

1344. Are you in favour of maintaining in England the three orders of practitioners?—I am in favour of maintaining in England the division of labour, and, of course, a different education for each. I would not have an inferior physician, or an inferior surgeon, or an inferior apothecary; but I would have three grades.

1345. You are in favour of an inferior order of practitioners?—Yes, if you choose to consider it such; but even in France the physician and the surgeon are totally distinct, and in Germany too.

1346. You are aware that previous to the present arrangements in France, the physicians and surgeons underwent the same education?—To a certain extent; but I think not entirely the same.

1347. Are you aware of there being any great difference in Germany?—I cannot speak to that; there is a great distinction in Paris: Monsieur Dupuytren and Monsieur Boyer practised in my day as pure surgeons, in the same way as Sir Benjamin Brodie, and persons of his class, practise here; and Messieurs Fonquier, Andral, Cruveillhier, and others practise as physicians, as we do here. Practically speaking, they do not attend both classes of diseases. There are also *pharmaciens*, or apothecaries.

1348. But the candidate having presented his letters of testimonial, might he not choose whether he would take his degrees in medicine or in surgery?—I am not sure; I did not graduate there, and I cannot therefore speak positively to the fact.

1349. Did you undergo any examination in the institutions of Paris?—Not any.

1350. You say that you think the enactment of the Bill now before The House would be injurious to the profession, by lowering its scientific character?—That, I fear, would be its effect.

1351. Can you point out the provision of the Bill that would have that effect?—You must take the clauses together, 3, 5, 10, and 31, and Schedule (B.), which I look upon as particularly objectionable.

1352. What is your particular objection to Schedule (B.)?—My objection is to the definition of the practice of medicine; medicine means everything. By clause 31 it is said, "And be it enacted, that the words 'medicine' and 'medical,' when used in this Act, shall also mean and include the words 'physic,' 'surgery,' and 'surgical.'"

1353. Did not you in your former answer, rather refer to lessening the influence which you conceive would be produced as far as the College of Physicians was concerned?—No; my answer was, that if a man can, as I hold that he

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he could under this Bill, if he were registered only as an apothecary, practise as a physician, and obtain all the advantages of so practising, the public being unable to judge, and get a large practice, a great many persons would follow that example, and they would be placed on the same footing as gentlemen who had been to the universities, and had given up 10 or 12 years to their education, and had given a pledge to the public that they were proper persons to consult as physicians.

1354. You do not think that the high character of the College of Physicians, and its moral influence, would sufficiently guard against that?—No.

1355. Does not the apothecary now actually practise as a physician, without any law to prevent it?—He practises medicine, but he is not looked upon by the public as a physician; in extraordinary cases he sends for a physician to assist him; he does not look upon himself as a physician, nor does the public.

1356. Are there not persons who are practising in London and who call themselves physicians, who have no qualification in law?—I am not conversant with them: there are the homœopathists.

1357. Are there not persons who have purchased foreign diplomas, who are practising as physicians?—I am not acquainted with them.

1358. Have any such cases come before the college?—Never at the time when I was a censor. If a man opens a shop, and he chooses to pass and does pass the Apothecaries' Company, there is nothing to prevent him calling himself by any name he pleases.

1359. Are you one of the censors of the college?—I have been senior censor and junior censor.

1360. Are you not aware that many persons are calling themselves physicians, and are practising as physicians, who have no other authority for so doing than the diploma of a foreign university?—I know of no such persons but the homœopathists, and there is a chrono-thermal man, or something of the kind, but I am not personally acquainted with that case.

1361. Are you acquainted with the shop in Tottenham Court-road which was mentioned by Dr. Burrowes?—Yes, I am aware of that. I know that diplomas are purchased in Germany; they make a regular traffic of it. If a man kept a shop under the authority of a diploma from Apothecaries' Hall, and he wished to be called a doctor, he represents himself a doctor, but he is not a physician either in the practice of his profession, nor is he a physician in the estimation of the world.

1362. Are you not aware that many persons write doctor upon their door who keep no shop, and yet who practise as physicians in this metropolis?—I have excepted those who are of the apocryphal class; I do not know any others. I know one or two young men who have their names up, but who propose to be examined within six months; I never met with any other practising as physicians without authority, excepting one in the household of the Queen Dowager.

1363. You state that there is no fellow or licentiate of the College of Physicians who at the present time is practising homœopathy in London?—I am not aware of any.

1364. But are there not several persons practising extensively as physicians, who call themselves homœopathists, in London?—They practise as homœopathists, but not as physicians.

1365. Do they denominate themselves physicians?—Homœopathic physicians.

1366. But they do designate themselves homœopathic physicians?—Yes; that is their glory.

1367. In the titles of their publications they are so called?—Yes; they call themselves doctors of physic, and physicians of homœopathic institutions.

1368. They are practising as physicians?—They are practising as homœopathists.

1369. You wish to confine it to homœopathy?—I know that they practise only homœopathy; they confine their practice to that.

1370. Is it not notorious that they practise as physicians?—No; they pretend to practise a particular branch of philosophy of their own.

1371. Do they not pretend they are physicians, though as physicians they practise homœopathy only?—I do not know what they pretend. I know that I do not meet them as physicians. I have repeatedly been asked to do so, and have declined

1372. You have declined to meet them in consultation?—Yes.

1373. On several occasions?—Certainly.

1374. Has the College of Physicans interfered with them in any way?—The college, in one instance, summoned a party repeatedly.

1375. Do you regard homœopathy as quackery?—Distinctly.

1376. Was it stated to the individual whom you summoned before you, that you considered he was practising as a quack?—I apprehend that the summons was in these terms, that he was practising without a licence. As a quack they should have committed him to Newgate, according to their power; they could not summon him as a quack.

1377. Did he attend before the college?—He did not, so far as I know; I am not speaking of my own knowledge.

1378. Have any steps been taken beyond that of sending summonses, which appear to have been useless, to persons practising as homœopathists and as physicians?—I am not aware; but it was understood throughout the whole profession that such persons could not be met in consultation.

1379. Was any resolution of the fellows of the college passed to that effect?—No; but there is a bye-law in these terms, that no physician shall meet another in consultation, and consider him as consulted upon a case, upon a subject purely medical, unless he has been licensed by the college; there is a bye-law which I have subscribed to, to that effect.

1380. Do you consider homœopathy to be quackery?—Yes.

1381. And yet the College of Physicians have taken no step beyond that which you have described, to put such practice down?—No, I think not; I do not think that they have any power.

1382. *Chairman.*] Has the college ever, within your memory, taken any measures whatever against the quackery of fellows or licentiates of the college?—Persons have been summoned and fined for what we considered irregular or *mala praxis*; we took the opinion of the present Lord Chief Justice as to the power that we had, and we found that we could not at once strike a gentleman's name off; that we could only fine him so much, and again so much, and then strike off his name; the college have taken opinions frequently upon the subject.

1383. Mr. *Wakley.*] Do you consider that the college are powerless in regard to putting down such practice, or that having the power they have declined to exercise it?—They are powerless; the difficulties attending it are so great that except the moral influence that the college have, they are without any real power. When Mr. ——— was prosecuted he got off; he dared the college to prosecute, and he admitted that he was practising without a licence; all the letters were read by the late Lord Chief Justice, but his counsel got him off by saying that he was practising as a surgeon.

1384. How could the enactment of the Bill which is now before The House place you in a worse situation than you now occupy?—It would place us in a worse situation, because it would allow persons to practise as physicians, and call themselves physicians, without the smallest qualification.

1385. Are they not now, without your being enabled to prevent it, practising without any qualification at all?—No; only those parties that I have spoken of, whom I do not look upon as physicians. There is a worm doctor at the corner of Long Acre; he may call himself a doctor, and he may practise in worms, but that is a kind of thing that is an exception and an anomaly.

1386. According to your experience, can any person practise as a physician in London who has no qualification at all?—No, I do not think he could do it; at least, not to succeed in such an attempt.

1387. If he were to make the attempt, have you any power to prevent it?—We have no more power than I have already stated; it is a misdemeanor and punishable by a fine; but the recovery of that fine is placed under such difficulties, that in fact it can hardly be recovered.

1388. Does not the Bill now before The House provide that no man shall be entitled to practise physic who is not registered?—Yes.

1389. Does not it also provide that no person shall be entitled to practise who has not received a licence or diploma from some institution authorized to grant licences or diplomas?—Yes; but after being so registered, he is able to practise medicine without any further qualification than that register gives him.

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1390. But can he register without having first proved his qualification before one of the bodies which is legally authorized to grant licences?—No, but with his minimum education and minimum qualification, he can practise in any department; the register places him upon a level with the man who has been 12 years studying the profession, and has spent perhaps 3,000*l.* upon his education.

1391. But at present he can practise without any medical education?—I am not aware of it.

1392. Are you not aware that many persons are doing so at this moment?—I know nothing of the kind.

1393. Could not a man come as a physician to London and pretend that he had a qualification, and you knowing that he had none, could he not pursue his course without you having the power of checking him?—No, he could not, because he would be summoned by us; and if he did not appear he would be stigmatized, and he would not succeed, and he would be arrested for debt at the end of a year; that would be the end of him.

1394. Do you believe that the course you have adopted of summoning homœopathic quacks has had the effect of checking that practice?—Yes, I think it has; if I were in the situation of one of those gentlemen, I should feel exceedingly uncomfortable under the circumstances.

1395. When you refer to the minimum of education, does not the Bill now before The House provide that all the schemes of education propounded by all the licensing bodies shall be submitted to the Queen in Council, before they are to have the force of law?—I think that that is a very bad enactment.

1396. Whether bad or good, is not that the provision in the Bill?—Yes, and I think that that would be injurious; that is one of the things that I object to.

1397. For what reason do you consider that it would injurious?—Because the Queen in Council is in fact the Secretary of State; the Queen in Council or the President of the Council might sanction a very proper curriculum, or they might sanction a very injurious one; it is not *coram judice* in any way.

1398. Did the Bill of Sir James Graham, which was before The House in July 1845, propose that the schemes of medical education should be laid before a council to be appointed by the Secretary of State?—Yes, but that council was to contain medical men of high position.

1399. Are you aware that there is no provision in the clause which empowers the Secretary of State to make those appointments securing to the public the presence in that council of a single medical practitioner?—There was in the Bill that I saw; but if there was not, I should object to it as much as I do to yours.

1400. You are referring to a prior Bill to that of 28th July 1845?—Yes. The Council of Health was to be composed, among others, of the president of the College of Physicians, two professors of the Universities, both fellows of the College of Physicians, the president of the College of Surgeons, and I think a general practitioner; it was to contain a minority of members of the medical profession, but who were to represent the three bodies of the profession.

1401. The provision with regard to general practitioners was in a subsequent Bill?—I understood that it was the intention to introduce such a provision in the Bill; I never saw the Bill after it was drawn, nor was it submitted to the College of Physicians.

1402. Will you be kind enough to refer to the second clause of the Bill which Sir James Graham introduced on the 28th of July 1845, and state how the Council of Health were to be appointed under the provisions of that clause?—I never saw that before, but it runs thus: "And be it enacted, that a council shall be established, which shall be styled the Council of Health, and that one of Her Majesty's principal Secretaries of State shall be a member of the said council, in right of his office as Secretary of State; and that the other members of the said council shall be such persons, not more than 12, whom Her Majesty, with the advice of Her Privy Council, shall deem fit to be members of the said council." That was never presented to me, and I have never seen it before; and I should object to it from its vagueness, unless it specified that a portion, I do not mean a majority, of the members should represent the medical profession.

1403. Do you consider that any Bill laid before The House, in which a provision is made for a Council of Health, should contain a security for the introduction of a certain number of medical practitioners?—Certainly; without that I think

I think it would be most injurious; in the original draft of the Bill it was so; and if I remember rightly, the College of Physicians made a representation to Sir James Graham that they did not think that their interests were sufficiently secured, but that there ought to be another member of the college.

1404. You believe that if the council were so constituted it would furnish a better security for the regulations of the universities and colleges, on medical subjects, being what they ought to be, than would be furnished if they were left simply to the consideration of the Secretary of State or the Queen in Council?—I have already stated that in the strongest terms, at least as strong as I can speak, because I entertain a strong opinion upon it.

1405. Do you consider that the recommendations of the medical men on that council, on medical subjects, ought to be followed in all cases?—I think that they should be discussed at such a tribunal, and all the members would then hear what they had to say; if they were men of science and character their recommendations would be listened to; if the other members perceived any intention on the part of either of those bodies to override or obtain exclusive privileges beyond the rest, their judgment would temper the decision arrived at, so far as was necessary.

1406. If a curriculum or scheme of education were laid down by the Secretary of State, do not you consider that his mind would be guided and controlled in a great measure by the recommendations of those institutions which are in the highest repute with the public?—No; he would not have time to consider it, and he would be liable to be overruled by the high reputation or by the ambition of either of those bodies, and it would be referring the matter to a person not able to judge upon it. I would not have his judgment either biassed on the one hand by the medical bodies, or on the other by individuals unconnected with the profession.

1407. Do not you think that the Secretary of State would consider that the heads of the colleges were the best judges, and that they had displayed their judgment in the recommendations which they had made?—No; I am not sure that they are the best judges. I have said before that if you had a council, the decision would be tempered by the science, knowledge, and judgment of other persons than medical men. I would not give the heads of the college the exclusive power in any case, nor the Secretary of State. Supposing it were some matter relating to the College of Physicians, the president of the college would state his opinion upon the subject; he would state that the proposed step would be very injurious to the college, or the other way; and the other gentleman present would be able to judge from the arguments urged, and the matter would be sifted by a body of men calculated to judge upon other subjects, but willing to be guided to some extent by the medical men. The Secretary of State could not do that.

1408. Would not the Secretary of State be able to decide upon the schemes laid before them?—I do not think he would have time; he must leave it to his secretary; and the secretary has, perhaps, a friend high in the profession, and the secretary comes back to the Secretary of State, who is worried to death with other political business, and perhaps going to be attacked in the House of Commons; and he says, "Let it be so." Is not that human nature?

1409. But you would trust to the Secretary of State the power of selecting the most competent parties to sit upon this council?—They were pointed out in the heads of the Bill which I saw; that was, I think, the most perfect system.

1410. Will you be kind enough to refer to clause 2 of the Bill of August 1844, and state whether you find in the second clause the provision which you so much approve, with reference to the appointment of a Council of Health?—That is the one to which I allude, that I entirely approve of. I do not mean to say that there might not have been modifications in it which I might have wished; but that, as a general enactment, is the one I look upon as being so very advantageous.

1411. In that council there were to be the Regius professors of medicine at Oxford, and Cambridge, and Dublin, the Regius professor of clinical surgery of Edinburgh, the Regius professor of clinical surgery of Glasgow, and one physician and one surgeon to be chosen respectively by the Colleges of Physicians and Surgeons of England, and one physician and one surgeon to be chosen

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respectively by the Colleges of Physicians and Surgeons in Scotland, and one physician and one surgeon to be chosen by the Colleges of Physicians and Surgeons respectively in Ireland; those were to be members of that council, and such other persons whom Her Majesty, by the advice of her Privy Council, should deem fit to be members of that council?—Yes.

1412. With the exception of those persons, you are aware that any others would hold their offices at the pleasure of the Crown?—Yes.

1413. And, in fact, anything that was considered to be misbehaviour might subject any of them to removal by the Crown?—Yes.

1414. You think that a body so constituted would be the best that could be proposed to regulate the medical education of this country?—That is my opinion.

1415. Are the Regius professors of the different universities and colleges appointed as members of this council, in consequence of its being supposed that they are capable of discharging the functions that would devolve upon them as members?—The Regius professors of Oxford and Cambridge, to whom I should particularly apply my observations, are fellows of the College of Physicians, men of a certain age, who have had to do with instructing others, and who therefore are very fit persons to defend their privileges in conjunction with the college to which they belong.

1416. Might they be called upon to act very soon after their appointment?—They are never young men.

1417. Can you speak to the competency of the other members of the council to exercise the functions that would devolve upon them?—I think they would be very fit persons.

1418. Because they would be acquainted with the affairs of the colleges?—Yes, and of the universities; besides, being of some standing, having practised in the world, they must have acquired information.

1419. Then you conceive that such a council would be a good machinery for the regulation of medical education throughout this kingdom?—The general practitioners ought to be represented upon it; and I always understood that that was to be the law.

1420. Do you conceive that persons holding office in Edinburgh and Dublin, and Oxford and Cambridge, could be readily brought together to sit in London?—Yes, by the railroads without any difficulty, if it was made worth their while to meet in that way.

1421. What would become of their duties in the respective places while they were away?—That might be easily managed, because the duties in all those universities are in abeyance during the vacations.

1422. Might not it be necessary that the most important duties should be discharged not in the vacations?—Yes: that might apply to any number of persons; a man's wife may be dead, or she may be ill, and prevent his attending, but generally I think those persons might be brought together, considering the great facility that there now is of travelling from one end of the country to the other; and they would consider it their duty to meet together, and I see no objection to the working of such a council.

1423. But do you not think that if the Secretary of State had the power of dismissing the other members of the council, he being the permanent president of the council, all the powers of the council would in fact be exercised by him?—No; I think that they would not at all be exercised by him, but that the Secretary of State would be guided by the opinion of that council so constituted; and I think that it would be a great advantage to him, for I do not see how he is to obtain the necessary information upon the matter without such a council.

1424. Would you not prefer a system under which the parties who constituted that council should be elected by the profession generally?—No, I should not.

1425. Cannot you trust the members of your profession to perform such a duty?—I did not mean to say I could not trust the members of my profession, but in all professions there is a great deal of rivalry, and I think it would be much better that the members of the council should be nominated by the Crown. I sat 70 times upon committee on this subject, and besides that there have been meetings of the College of Physicians, and I have heard everybody's opinion as well as my own, and I come to the conclusion that it would be

be better to have the members of the council appointed by the Crown; that was the general opinion of the College of Physicians; there was a good deal of disputation, but the most liberal among the fellows were of opinion that the members of the council should be appointed by the Crown.

1426. Having the whole of the curricula from the different institutions laid before him, you consider that the Secretary of State would be inclined to select the lowest?—Indeed I did not say that; that must depend upon the person whom he sees or asks, or whom his secretary sees; I think that the Secretary of State is not capable of judging.

1427. You are aware that all the schemes of education are to be laid before him?—Yes, and I think it the most objectionable tribunal that can possibly be selected.

1428. But would not the schemes be accompanied in every instance by the reasons which had induced the heads of the institutions to adopt them?—Yes, but how is the Secretary of State to read that with all his other duties? it must be a delegated authority from the Secretary of State to some other person; he could not read a box full of the papers in a week.

1429. Would he not be guided by the recommendations of the institutions of the highest character?—No, I think he would be guided by private opinion. I know of one gentlemen, high in station, who was guided in every portion of his business on this subject by his apothecary; that is one of the reasons why I think it probable that that would happen.

1430. Would not the Secretary of State, presiding at the head of the Council, be exposed to the same influence?—No.

1431. He would be exposed to it, but you mean to say that that would be counteracted by the other individuals sitting at the Board?—Yes; if an apothecary, or other confidential medical man, came to him with his own views, he would say to him, "No, that will not do; I have heard better things."

1432. You say that you consider the extra licence an abomination?—I do; it is very injurious to the profession in every way, and ought to be done away with, unless we wish to have *officiers de santé* in this country.

1433. Are not the examinations now for the extra licence, as well as the other licence, precisely the same?—No; by the Act of Parliament the president and the elects are the persons to grant the extra licences; but the qualification has been raised very much, but still there is a great difference between the two: the examinations for the licence are upon paper for three days, and then there are examinations in Greek and Latin, but there is only one examination for the extra licence. Very recently, the examinations have been greatly increased in severity for the extra licence, and very few applications have been the consequence; but this does not make me approve the double jurisdiction.

1434. If such a council were appointed, you have stated that you consider it would have quite enough to do in looking after the public health, without being taken up with medical education?—Yes; I meant that if such a body had the regulation of medical education, I consider sanitary arrangements should be in some other body, or in a portion of that body; in short, I think the sanitary arrangements would require the whole attention of a Board, without anything else. I think the sanitary correspondence of this country would be something enormous, if proper pains were taken to ascertain the exact state of health in the rural towns, and in all the mills, and so on.

1435. If you had what you would deem a sufficient security for equality of education and equality of qualification, would you object to physicians and surgeons that belonged to the Irish and Scotch Colleges practising in London without belonging to the institutions here?—I should have no objection to it.

1436. You would not require physicians to enter at your college?—Certainly not, provided of course that the education was equalized?

1437. You state that you strongly object to the 28th clause of the Bill now before The House; the clause that relates to chemists and druggists. Are you aware that that is identically word for word the clause in the present Apothecaries' Act?—No, I have never read the Apothecaries' Act. I have no objection to the chemists being left alone, but I think there must be some regulation of the chemists before long; all parties wish it, but I think that the effect of this clause would be to give them powers which they do not possess at present,

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or it might confirm those powers, and I think that would be very injurious to the profession.

1438. If you read the clause more closely I think you will find that it relates simply to the carrying on of their business and to the compounding of medicines, and that it gives them no power whatever to practise?—It confirms the powers that they have now, and they tell you that by usage they have that power now.

1439. It relates to the power of carrying on the trade or business of a chemist and druggist?—It says, "All persons using or exercising the said trade or business, or who shall or may hereafter use or exercise the same, shall and may use, exercise, and carry on the same trade or business in such manner and as fully and amply, to all intents and purposes, as the same trade or business was used, exercised, or carried on by chemists and druggists before the passing of this Act." I think that that is a clause which might operate most injuriously.

1440. When I state to you that the clause is copied from the Apothecaries' Act of 1815, would you still be alarmed at its introduction into this Bill?—Yes; I think it would be found very injurious, but there is no doubt that a lawyer could state what its effects would be better than I can; and I object to it on this ground, that by this Bill it appears there is something to be done in favour of chemists and druggists, when nothing is to be done in favour of the general body of practitioners. The general body of practitioners object that they are to be obliged to undergo a long and expensive education, and chemists who have no medical education have this power entrusted to them.

1441. Are you in favour of some regulation of chemists?—I consider that that should go on *pari passu* with any Bill for medical education.

1442. What amount of education would you require?—That they should know the manner in which medicines act; for instance, that jalap purges, and antimony vomits, and they should know what drugs are poison.

1443. Such a regulation you consider would be beneficial to the public health?—I believe that nothing would be so beneficial to the public health as an inquiry into the adulteration of drugs, and the sale of drugs; at present there is nothing whatever to prevent a chemist from giving white arsenic instead of magnesia; and if a stupid boy is put in a shop, he may give bitter almond water and not be aware of its character. One chemist stated lately on oath that almond water was of 6 or 7 different strengths; here was a deadly poison, which was to be used at the order of anybody; the chemist would give it whether it was ordered by prescription or not.

1444. You consider that a chemist and druggist ought not to be permitted to carry on his business before he has undergone an examination to prove his ability?—No.

1445. Have not the College of Physicians the charge of the pharmacopœia, under their charter?—They have.

1446. When was the last edition of the pharmacopœia published?—Six or seven years ago, and I know that a large portion of the reformed codex of the French was taken from that; and I may say in our defence, as the college has been a good deal run down, that we were the first body in the world that published a pharmacopœia.

1447. Do you consider that the chemists and druggists ought to be permitted to practise over the counter?—I cannot answer that question; if they came under a proper examination they might do it, but there is no doubt that they do it now to a great extent; I hardly see how it could be prevented, but if it cannot be prevented, it ought to be regulated.

1448. In what way would you regulate it?—I cannot say; it is impossible for me to give an opinion without having considered it.

1449. Is it a subject which has been discussed at the College of Physicians, at any of the 70 meetings which you have attended?—No; those meetings were in committee upon the subject of the Bills introduced into Parliament.

1450. You are for drawing a distinct line between a man who is proved by examination to be qualified, and a man who has received no medical education whatever?—I am.

Henry Holland, M. D., called in; and Examined.

1451. Sir *James Graham.*] YOU are a Member of the College of Physicians?—I am.

1452. How long have you been a member of the College of Physicians?—Since 1816.

1453. In what year did you become a fellow?—In 1828.

1454. You were not a member of either of the Universities of Oxford or Cambridge?—No, I was not.

1455. Where did you, in early life, pursue your studies?—First in London, and subsequently in Edinburgh.

1456. At what age did you commence practice as a physician?—At 27.

1457. Have you formed the opinion that it is desirable that a physician should not commence practice at a very early age?—I have.

1458. Do you think that prolonged study at the universities previous to devoting attention to medical science only, is upon the whole advantageous?—I do think it decidedly advantageous that there should be preliminary study.

1459. Any alteration, then, in the law which directly or indirectly should act as a discouragement to such previous literary study, would be pernicious, in your opinion?—Such an alteration I should think decidedly injurious.

1460. Have you looked at the Bill which is now before Parliament for the better regulation of the practice of medicine in Great Britain?—I have.

1461. Have you formed any opinion with reference to that Bill, whether its tendency be or be not to introduce a single faculty in this country?—My impression is, on the perusal of that Bill, that its tendency would be to introduce a single faculty.

1462. If that should be its tendency, is it, in your opinion, a pernicious or a salutary one?—I should say distinctly that it is pernicious.

1463. What would be the effect, first, on the attainments of members of the medical profession, of the introduction of a single faculty, in lieu of the subdivision into classes such as now exist in this country?—My opinion is that it is exceedingly important for the profession and the public that there should be grades in the profession, and that any measure that might tend to abolish those grades, or even to weaken their influence, would be as injurious to the public as to the profession.

1464. If the effect of abolishing those grades should be to lower the standard of physicians and surgeons, as contradistinguished from the general practitioners, would not the public suffer from the general deterioration in the scale of those two classes?—My belief is that they would suffer.

1465. In the metropolis, where the numbers of the population are great, does the subdivision into classes of physicians and surgeons lead to greater skill in those two classes?—I entertain no doubt that by the existing separation of these higher grades the profession is improved, and professional knowledge extended in each branch.

1466. Does not the facility of communication with the metropolis now lead to more frequent consultation in difficult cases throughout the whole districts of the country?—It does.

1467. If your view be right, that subdivision leads to greater skill, even distant parts of the country would obtain the benefit of the consultation of that superior skill acquired by subdivision?—No doubt.

1468. Does the position occupied in the metropolis by the physicians and surgeons of eminence, in your opinion elevate the profession of medicine and surgery generally in the estimation of the public?—I have no question of the tendency of the higher qualifications which, generally speaking, exist in the London practitioners, to diffuse themselves over every part of the kingdom, to raise the character of the profession generally, and to elevate their relations to society throughout every grade.

1469. Their literary attainments, as acquired at the universities, and their habits of intercourse with the most distinguished members of other professions, elevate them in the scale of society?—Yes.

1470. And the effect of such elevation is reflected upon the profession at large?—Yes, I entertain the opinion that there is no degree of attainment in a London practitioner, physician or surgeon, which does not extend its influence over every part of the profession throughout every part of the empire.

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1471. If their position in society were degraded by any alteration in the profession which lowered them in public estimation, the profession would not attract men either of ample means or of great natural talents in the same degree as at present?—It is difficult to answer questions on so complicated a subject as that of medical education; but my impression is, that whatever had the effect of removing worthy and honourable objects of ambition from the higher classes of medical men, would *pro tanto* degrade the profession throughout, and that you would have a lower and less valuable class of society attaching themselves to it.

1472. Does the connexion existing between the London physician and the English universities, in your opinion (though you were not yourself a member of either of the universities) conduce to that which you think desirable to an intimate connexion of the profession with the learned universities?—Yes, it is productive of good; and invariably in the proceedings of the College of Physicians I have strongly urged, as my own individual opinion, that that connexion should be maintained and extended as far as might be possible.

1473. Though you have risen to great eminence in the profession, you have no prejudice, from having been connected with either of the universities: in your instance it is an unprejudiced opinion; it is the result of your observation?—I hope it is unprejudiced; there is no prejudice that I am conscious of as operating upon my mind.

1474. Is it your opinion that the introduction of a single faculty would be a discouragement to young men intending to practise as physicians to go to the universities, and to prolong their literary studies as distinct from medical studies?—I cannot doubt that the existence of a single faculty of medicine in this country would have the effect of lowering the whole to an inferior standard; and such being the effect, I cannot doubt that it would be a great discouragement to the connexion between physicians and the universities, and to that higher class of literary and scientific attainments which it is so desirable to maintain.

1475. The temptation would be to commence early practice, relying upon medical attainments only, without literary acquirements?—It would seem to me in such a case inevitable. I believe that there would be a general press for practice at a very early age, and merit would be mainly estimated by the grosser test of success, that is the comparative income of the medical men, rather than by any other and higher standard.

1476. Are you not of opinion that the possession of literary and scientific acquirements on the part of medical men of eminence, does in the scale of society raise the estimation of the profession generally?—I do not doubt it.

1477. Have you any objection to a registration of medical men?—None whatever.

1478. Do you think that it would be advisable to have a register of an authentic kind?—I think it would be desirable that the registration of medical men should be much more authentic and effective than it now is.

1479. Objecting as you do to a single faculty, and desiring to maintain the great subdivisions of your profession, to render the registry correct and useful, in your opinion should those subdivisions be set forth in it and upheld?—I think so.

1480. Combined with an alphabetical list, there ought to be a classification setting forth the grades?—Yes, there ought to be a specification of the grades in any registration adopted.

1481. A registration, under the authority of an Act of Parliament, omitting such a classification, would have, you think, a tendency to establish a single faculty?—I have already stated my opinion that the proposed registration, as I find it in this Bill, would have that tendency.

1482. On that ground, objecting to a single faculty, you would also object to that mode of registration?—Certainly, and on that consideration.

1483. Have you any opinion with reference to the introduction of a different mode of payment of medical men; that the honorarium should cease, and that there should be a legal right for recovering as for work done; would that be advantageous or disadvantageous?—It is an extremely difficult subject on which to give an opinion, and I confess myself I have never made up my mind upon the question of the mode of payment. There are certain advantages and disadvantages in the present mode, but I doubt the policy of any material change.

1484. You have stated that you do not object to a general registration of medical men; have you any objection to opening the practice of England, including even the

the metropolis and the circuit of seven miles round, to medical men from all parts of the United Kingdom, if precautions be taken which shall secure equality of attainments?—Not the slightest objection; I should consider that it was fitting to do so under such circumstances and conditions.

1485. In Scotland you are aware that there are four bodies having equal rights of conferring licences to practise; namely, the universities of Edinburgh, Glasgow, Aberdeen, and St. Andrew's; would it not be necessary to take strong precautions that the same standard should be observed in those four bodies, and that, the same standard being fixed, it should, by examination, be practically carried into effect?—I have no doubt of the necessity of such an equality of qualification as consists in the same age being determined upon for the commencement of practice, and also in a much closer approach to equality in those examinations, which are the tests of general study, and of ability for practice.

1486. It would be inexpedient that in the same country there should be unequal standards, with different schemes of scientific acquirement; and if the standards were the same, it would be expedient that there should be the same strict examination?—Certainly. These conditions are necessary to justify the full admission to privileges which English physicians obtain only at a certain age, and under strict requisitions as to study and examination.

1487. Can that security to the public, in your opinion, be obtained without some central controlling power?—It appears to me to be a question of difficulty. I believe, from the experience I have had of former attempts at coalition on points of medical and academical usage, that it would be difficult, if not impossible, for those bodies themselves to come to such terms of agreement as to ensure the object; therefore I see no alternative but that there should be a controlling power which might provide means of union and assimilation, incapable of being otherwise attained.

1488. Has the policy of vesting such a power in a Council of Health, in this metropolis, ever presented itself to your mind?—It has, in connexion with the Bills which you have brought forward at successive times.

1489. On the whole, did you approve of the project of instituting a Council of Health with such powers in London?—In the form in which it was last presented in 845, it had, with certain exceptions which I cannot advert to at this moment, my entire approval; I felt that it would be of advantage to the profession.

1490. As relates to the public as well as the profession, do you think that the want of such a body is an imperfection in our civil polity?—I had doubts about the mode of constitution of the Council of Health; but if rightly constituted, it appeared to me that it would be a useful institution for effecting various improvements relative to sanitary matters affecting the public at large.

1491. And among others, they might have the power of controlling the different schemes of examination for the medical licences of the different licensing bodies, and more or less a power of investigating the examinations be safely vested in that body?—That must depend, of course, upon the constitution of the body, the Council of Health, which never appeared to me to be fully determined upon.

1492. What is the constitution which you would have recommended?—That it should be composed partly of medical men. There was some doubt existing in my mind whether that council might best be constituted, as regarded the medical portion of it, of persons chosen by the medical bodies, or exclusively by the Secretary of State.

1493. It was first proposed that certain members of the medical profession should be members of the Council of Health, that those should be *ex officio* members, and that there should be some chosen from the medical bodies superadded, and that there should be a certain number nominated by the Crown. Does that composition appear to you to be a better one than that the whole should be nominated by the Crown?—I cannot give a decided opinion upon the subject without further and more close consideration.

1494. Though difficulties might exist, as to the mode in which the medical men should be nominated, you are favourable to a Council of Health composed partly of laymen and partly of medical men of eminence?—Yes; I think the general scheme reasonable and just.

1495. And that body might be entrusted with safety with the supervision of the schemes of education with the view of obtaining equal qualifications, upon which might be conferred the right of equality of practice throughout the kingdom?—I have some hesitation in answering this question, because a good

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deal would depend upon the actual constitution of the Council of Health; unless I could be furnished with the means of knowing the proportion of medical men, and the proportion of the different branches of the profession, it would be difficult for me to affirm that it could be rightly entrusted with that superintendence.

1496. But suppose it for a moment practicable to overcome that difficulty, will you contrast that scheme with the scheme contained in this Bill, which relies upon the Secretary of State and the Queen in Council?—On that point of comparison I have no doubt, and it involves one of the greatest objections which I entertain to this Bill. The Secretary of State cannot advantageously, as it appears to me, operate upon the profession with the powers which it entrusts to him; he must inevitably act upon advice furnished to him by some one or more persons in the profession, and those persons so furnishing him with information and suggestions would be unknown to the profession generally, and not responsible.

1497. The Council of Health would be a body known to the public, and public opinion would operate upon that body?—Yes; and it would feel a responsibility which it appears to me would not attach to the actions of a Secretary of State, according to the provisions of this Bill, or to the conduct and opinions of those who might advise him.

1498. The Secretary of State in the plan contemplated by this Bill, or the Queen in Council, as represented by the President of the Council, would alone in the eye of the public be responsible, and those who were advising them would not be known; do you think that public confidence could be commanded by the decision thus arrived at?—It is my opinion that it would be unsatisfactory to the profession, and far from advantageous to the public.

1499. *Chairman.*] Does it appear to you that the composition of a council intended to regulate medical education, and the composition of a council intended to watch over sanitary police, ought to be necessarily the same?—Not necessarily the same.

1500. On the contrary, might it not be very probable that a council which might be well calculated for one purpose, might altogether fail as regards the other?—I can conceive a council to be so composed that it might beneficially effect both purposes; but, as I have before remarked, everything that relates to this point must depend upon the composition of the council.

1501. You would wish that a body of control that was to regulate medical education throughout the kingdom should consist of men of very high eminence from different parts of the United Kingdom?—Certainly.

1502. Their meetings must be only occasional, and their sittings short?—This might be so, after they had completed and brought their plans into action.

1503. And with occasional meetings and short sittings, they would probably be able to transact the business of regulating the medical education?—Yes, eventually so.

1504. But a body appointed to regulate the sanitary police of the kingdom is a body that would sit almost uninterruptedly?—That is a question which I cannot answer without more consideration, but my impression would be that sanitary regulations once adopted, might be carried on by committees of the council, having frequent communications with each other.

1505. Would it not be necessary that such a council of health regulating sanitary police should go a good deal into detail?—No doubt it would.

1506. You, as a physician in extensive practice, would perhaps be able to spare time with a view to give advice to a council that was intended to regulate medical education?—I should certainly hesitate at present in allowing myself to be embodied in a council which was to regulate medical education, because that is a matter that I think would involve as much difficulty as any matter of sanitary police.

1507. Would it occupy as much time?—Probably it might.

1508. Would it not be impossible for you to be a member of a Board which was to regulate the sanitary police of the whole kingdom, and which would have to enter into matters of detail, such as the supply of water at Edinburgh and the sewers at Newcastle?—I do not believe that a Council of Health could ever have upon it many physicians in large practice; but there is a most valuable class of men who have retired from practice, or who have never had full practice, and who might be selected for the very functions you are describing; and probably in the event of its being an elective body as regards the medical men, these would be the persons chiefly chosen by the respective colleges.

1509. Objections

1509. Objections have been made to the first draft of the Bill of the Right honourable Gentleman by some members of your college, and to the last draft of the Bill by others; do you conceive that all opinions might be reconciled by a clause drawn in this form, that the control of the medical education should be given to a body not exceeding a certain number, to be named by the Queen in Council or by the Secretary of State, a certain proportion of whom should be necessarily medical men?—Yes; my own firm opinion is, and that I stated in answering to the question of Sir James Graham, that the clause in the last draft of the Bill would not be efficient, and that it ought not to stand unless it were qualified by the condition that a certain proportion should be medical men.

1510. Sir *J. Graham.*] Do you think that the College of Physicians could really, for useful purposes, long survive the establishment of a single faculty in the medical profession?—My opinion is, from looking as closely as I can to the clauses of this Bill, that those clauses would in their operation produce something equivalent to a single faculty, and in that case I am of opinion that the College of Physicians would virtually cease to exist.

1511. If this Bill became law, and if its effects should be to establish a single faculty, and the College of Physicians did not long survive the introduction of a single faculty, would the public, in your opinion, be losers by the overthrow of the College of Physicians?—If I were asked with reference to the College of Physicians in its present state, I am bound to state my opinion that the loss to the public would be much less than it might be rendered, were the college improved in its efficiency by an amended charter and new regulations.

1512. You are aware of the several applications that have been made by the College of Physicians to successive Secretaries of State, myself among the rest, for an amendment of the charter?—Yes.

1513. Have you seen the draft of the charter, in which I, on behalf of the Government, and the college, came to an agreement as regards the alterations to be made?—Yes, I have seen it, but not recently; in its general character I remember it, but not particular clauses.

1514. I will mention to you two or three leading points for which that draft of the amended charter provided: it provided first for the abolition of the elects, next for a new mode of choosing the president by the whole of the fellows at large; and thirdly, it gave a more summary power to the College of Physicians, such a power as the Crown has given to the College of Surgeons, of their removing from their body parties who were guilty of *mala praxis*; with such alterations as these, in your opinion would the constitution of the College of Physicians be such as to render their maintenance a public good?—Reverting to my remembrance of these clauses when they were before us, I have no hesitation in saying that in my opinion they would be very beneficial to the college and the public at large, and especially those clauses which provide for the abolition of the body of elects and the removal of unworthy members.

1515. Suppose the Crown, with the sanction of Parliament, should amend the charter of the college in these respects, your objection to its maintenance as a corporate body would be removed?—Yes; I would not be understood as deprecating the existence of the College of Physicians in its present state, further than saying that it is inefficient, as compared with that efficiency which it might have under an alteration of the charter and a better constitution of the body.

1516. On the whole, you approved of the scheme that I was desirous of carrying. Would the amendment of the law as relates to the practice generally, opening the United Kingdom on terms to all persons equally qualified in Scotland and Ireland, and also the amendment of the charter of the College of Physicians, appear to you to be politic?—Speaking generally from my recollection, I did approve of the changes that were contemplated.

1517. *Chairman.*] Supposing the Bill now before The House, or a Bill a little different, to be carried, do you not conceive that there must always be a decided superiority in the skill of the physician in the treatment of internal diseases, and in the skill of the pure surgeon in dealing with external injuries, as compared with the general practitioner, who divides his attention between both branches of the profession?—My impression is, that if this Bill were carried in its present form, the effect of it would be so far to abrogate all degrees and ranks in the profession, that it would deter from entering into the profession at all many highly qualified persons who do enter into it in its present state, and lower the scale of attainment both among physicians and surgeons. I believe it would, in the course of practice,

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amalgamate all classes together, and reduce to an inferior standard the higher standards of practice that now exist.

1518. Do you not think that in whatever way you shaped your legislation, there would always be a class of men who would employ themselves in pure surgery, beyond the general class, and another class who would devote themselves to the treatment of internal disorders beyond the general class?—It is the natural tendency there is towards that distinction which makes me regard it as a very important division, and one which it is desirable to maintain, because it has been established almost by the common understanding of mankind.

1519. Does not that division exist even where there are no laws establishing it?—To a certain extent it has always existed. Celsus indicates it in the most precise terms, and describes persons as applying themselves severally to the one branch or the other.

1520. Does not Herodotus mention, that among the Egyptians there was a different medical man for almost every limb in every part of the body?—Yes.

1521. At present, without any legal distinction, is there not a class of dentists deriving very considerable emoluments?—Yes.

1522. Are there not oculists also?—In places of large wealth you will have subdivisions of labour in every profession, and those subdivisions are beneficial if they go to a certain extent, but they become injurious to science if they are carried too far. There are certain divisions which are essential, and ought to be maintained.

1523. You consider that of surgeons and physicians to be one of those?—Yes.

1524. If you had by law only one faculty, would there not still be divisions, which the nature of the circumstances would inevitably call for?—My objection to a single faculty is, that it would give a less distinct indication to those natural divisions, and would tend to bring down the whole to a lower level than now exists in the higher classes of each. Whether it might elevate the subordinate classes of the profession, I cannot say; I believe not; I believe its tendency would be chiefly one of degradation.

1525. Do you believe that if there were a single faculty, there would be some persons devoting themselves exclusively to surgery, and others to physic?—I think it probable in the nature of things.

1526. If there were a College of Physicians of very high character, whose diploma commanded general confidence and respect, might not such a body still hold up its head though there were a single faculty; and might not persons be as proud of adding "Fellow of the Royal College of Physicians" to their name then, as men of science are of adding "F. R. S." to their name?—My answer to this is, that the tendency of the Bill would be to bring the general practitioners, without regard to the distinction between physicians and surgeons, into the condition of physicians; and in so doing, they being the great mass, the smaller number, the physicians, would be absorbed in the multitude, and their condition would be deteriorated.

1527. Do you attach much importance to preliminary education, with reference to the subsequent science and practice of the medical man?—I attach infinite importance to preliminary education, not merely with reference to medical science and practice, but to position in society, which is of great importance to the condition and character of medical men. I am satisfied that too great a value cannot be attached to the relation which exists between the higher ranks in our profession and the higher class of society.

1528. High as the rank is which the distinguished physicians occupy, do you think that it is very decidedly higher than the rank which is occupied by surgeons of the first class?—I cannot affirm that it is. Surgeons in general have not had a university education; and I attach great importance to this, and to the attainments which are derived from this source.

1529. If surgeons of the highest class rank in society as high as the most eminent physicians, and if physicians have generally had a prolonged university education, whereas such education is very rare indeed among the surgeons, is it not possible that you may a little overrate the importance of such education?—It is somewhat difficult to answer the question, because it involves a comparison between physicians and surgeons, in regard to their position in society, which I should be reluctant or unable to draw; but if there be any distinction in the case, my impression is that the connexion of physicians with the universities has determined that difference.

1530. Then

1530. Then although it might be a thing unpleasant to persons in the higher classes of society to miss some of those ornamental accomplishments which we now find in distinguished physicians, yet looking at the thing with a view to the preservation of health and the prolongation of life, and the progress of science, do you conceive that the academical education of physicians is a matter of high importance?—I do. I will give an instance in which I deem it to be of great importance. I refer to a particular class of disorders exceedingly prevalent among the higher classes and very difficult of treatment, that class of disorders which depend upon mental and moral causes. I consider that the higher the qualification of the physician, and the more generous and extended his education, in that same proportion is he more fitted to deal with such cases. They constitute some of the most delicate and difficult cases in practice, only very partially known to the world at large, but forming a considerable part of the practice of physicians in the metropolis and great cities.

1531. Should you say that science had owed less to the exertions of eminent English surgeons during the last half century, than to the exertions of physicians? Speaking generally of physical science, I believe more on the whole to be due to physicians, as regards its progress and extension. But this, with full admission of the extraordinary merits of John Hunter, and other eminent surgeons who have followed him in the same career of research.

1532. Do you attribute that superiority to their longer education and their superior attainments?—I would rather not use the term "superiority," because it is an obnoxious word, and it would require a long and accurate comparison to bear out that result.

1533. Mr. *Acland.*] In reference to the difference between physicians and surgeons, do you not think that the university education, speaking generally of our English physicians, has operated in some degree upon the eminent surgeons of the metropolis?—I believe, as I have before stated, that the effect of a university education among a certain class of English physicians does, in fact, extend itself through all branches of the profession, and that the results of that are favourable on the whole to the medical profession, even down to the lower branches.

1534. So that if the physicians were not to go to the universities, the general position of the surgeons would not be so high as it now is?—I believe that the influence extends more or less to all. If the great proprietor of Sutherlandshire goes down to Scotland and consults his medical man there, he carries with him a feeling towards that person, which depends in part on his relation to the London physician.

1535. Bearing in mind the improvement in the College of Physicians, by the creation of an order of fellows, is it not to be hoped that the higher description of surgeons will before long be in the habit of going to the universities for their education?—I think it very possible.

1536. With reference to the question of the Right honourable Gentleman in the chair, as to the tendency of the wants of mankind to divide medical practitioners into different classes, admitting that the wants of mankind divide medical men into different classes, would there not be a great loss to the profession if the preliminary education were not defined?—Certainly. As a general proposition, I should say that the higher the qualification of all classes of the profession can be raised the better; I believe that there is no more meritorious class than the general practitioners of England, and I do not believe that there is any class, who, in proportion to their education and their attainments, are so ill remunerated.

1537. Are there not strong inducements operating upon the student to press early into practice?—Yes, with the great mass of practitioners that is the case, and must ever be the case.

1538. And unless that inducement be counteracted by the existence of different grades in the profession young men will go early into practice?—It is my firm belief, that unless there were different grades there would be an indiscriminate rush into that practice which would secure the most speedy emoluments.

1539. *Chairman.*] To take the analogy of the two other learned professions, any man may be called to the bar at the age of 21, and there would be some advantages in sending a man at the age of 16 to a special pleader, and in his being introduced to practice at the age of 21; but is it not the fact, nevertheless, that the higher branch of the legal profession consists of persons who have been to the

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universities and have postponed their entrance on legal study till they arrived at the age of 24 or 25?—Yes, I believe so.

1540. With reference to the clergy, though of late a university education has been required, was it not the fact that a great proportion of the livings in this country were supplied by men who had never received an academical education?—So I believe.

1541. But, nevertheless, there was always a higher class of men, who were the great lights of the Church, and were educated at the universities?—Yes.

1542. Is it not possible that without any legal distinction you might have a class of persons with a lower standard of attainments and less prolonged education practising medicine in the rural districts, and yet that you might have persons of the highest classes, physicians and surgeons, who might still obtain their education at Cambridge and Oxford and postpone their practice?—The operation of this Bill would be more immediately injurious as regards the upper classes of the profession in the metropolis, because there its effect, as it appears to me, would be to remove those who now attach themselves to our universities, and go through a course of preliminary study, but who would then cease to have the inducement for it, from the crowd of persons who would press upon them having the same privilege as they themselves have.

1543. But if it was found in practice that preliminary education made a man a better physician in the long run, would there not still be persons who would devote themselves to preliminary education?—We must recollect that we are speaking of a body of 30,000 men in one generation, and those who enter into the higher part of the profession are a very small proportion of this number. If, by a Bill of this nature, you give an equal right and an equal character of practice to the great mass, the smaller number must surrender their place, and would lose the inducement to extensive or laborious preliminary study.

1544. Mr. *Acland.*] Is it not the fact that at the bar the distinction between the barrister and the attorney is kept up by certain artificial distinctions, which are of value in sustaining the honour and high character of the bar?—I imagine it to be so. In every profession the functions and duties run so much into each other, and the conditions of society are so complex, that we never can draw accurate and strongly-marked lines of division; for instance, between medicine and surgery we cannot draw such line very clearly.

1545. Sir *J. Graham.*] If a single faculty were introduced into the law, and that faculty were the faculty of attorneys, do you believe that the postponement of the education of the barrister would in that case take place?—I should say not, for the same reasons as I have given regarding our profession.

1546. Those who pre-eminently succeed derive large emoluments, but they are few; if the standard were to be lowered, would not the prize be taken out of the lottery?—I think so.

1547. And the inducement to acquire greater knowledge would in that case be removed?—I believe so. In the medical profession more especially than the law or the church, it appears to me necessary that the Legislature, or some other authority, should indicate to the public the relative qualifications for different parts of the profession, and the distinction between legitimate and illegitimate practice. It is a point on which human credulity and human ignorance are singularly current, and everything is less defined than it is in other professions; the very business of the law is to define itself; we cannot define ourselves as explicitly as is done in the profession of the law.

1548. *Chairman.*] Are you acquainted with the state of the medical profession in France?—Partially only.

1549. Do you know whether by law there is more than one faculty there?—There is a Bill under discussion at this moment in the French Chambers, having relation in part to this subject.

1550. Is not the physician and surgeon the same person?—The physician and surgeon are perhaps more closely blended in practice in France than in England; but I cannot speak with exactness on the subject.

1551. The separation is just such a separation as I was asking you about; it is by law one faculty, but in great towns a division of labour takes place, in the same way as it does in other branches of trade.

1552. Monsieur Dupuytren practised surgery exclusively?—I believe so. The United States I believe to be the country where the practice of medicine and surgery are most closely blended.

1553. You have examined into that?—Yes, but my examination was a very cursory one.

1554. Will you state the conclusion at which you arrived?—I believe that the combination of medical and surgical practice is the general usage in the United States; and that the licence to practise includes this combination, in some of the States at least. In the great cities there, as elsewhere, I apprehend that the natural practical distinction between physic and surgery has grown up and been recognized, though less definitely perhaps than in England.

1555. There is one faculty there, is there not?—Yes.

1556. Does not the American medical school stand high?—I should rank it next to the English, on the whole; but I am speaking on partial information on a wide subject.

1557. Colonel *T. Wood.*] Do not the most eminent men in America become well known to the public there?—Yes. From the constitution of society in other respects in the United States they are much more closely on a level with the highest classes than medical men can be here.

1558. *Chairman.*] Are there persons at New York of eminence in the profession, to whom, nevertheless, one would never think of going in a surgical case?—I best know the medical practitioners in Boston; and here, undoubtedly, men who bear the title of Doctors of Medicine, and have graduated as such, are the most eminent surgical practitioners of the city. But I presume and believe there are others who are more especially consulted in cases strictly medical in their nature.

1559. Sir *J. Graham.*] Do we owe any great discovery in medicine or surgery to the American school?—The discovery of the application of ether in surgical operations may be said to be due to an individual of the American school, if such phrase may be used.

1560. Are there any writings of any eminent American physicians or surgeons which are regarded as standard works?—Not so known here; but there are many very valuable works written by physicians of the United States.

1561. *Chairman.*] Did you ever attend their schools?—No; and I would be understood as speaking on very limited information.

1562. Mr. *Aldam.*] Is there not an advantage in this American system, that the individual chooses the line he is to follow, after he has had some experience, and therefore after he is able to judge what line he is fitted for?—I would not be understood as formally describing any American system, because what I know upon the subject is derived from a few weeks' residence only, in particular parts of the United States.

1563. Are there not some advantages in a man choosing the branch of the profession which he will follow, at a somewhat advanced period of life?—No doubt; and chiefly in regard to literary education. A young man entering upon his preliminary education need not absolutely determine what line he shall hereafter follow, though after a certain time it will become expedient to do so.

1564. There would be an advantage in a man in the first instance following a complete range of academical study, and afterwards choosing the branch of the profession that he will enter upon?—This must be taken with limitation as to time.

1565. *Chairman.*] Some of the gentlemen who have been before us have mentioned, as one important point for the physicians, foreign travel; and they have gone so far as to say that the education of a medical man of the highest class was not complete unless he had seen foreign medical schools. What is your opinion upon that?—I believe such travel to be highly advantageous. In the early part of my own professional life, I spent, as a traveller, several months in the army hospitals in the Peninsula.

1566. Do you think that an important part of the education of a physician?—Yes; not an essential part, but an important part.

1567. Do you agree with those gentlemen who have said that they thought that if there were only one faculty, that part of education would be almost entirely given up?—In so far as the existence of one faculty tends to depress the whole character of the profession, I believe it would be less probable that medical men would have the opportunity of travelling, and visiting the foreign medical schools. The most advantageous time for travelling, to a medical man, is when he has finished his medical studies; that is the time at which he is best able to appreciate the diversities of practice existing in different countries.

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1568. In the medical schools of London and Paris are there not a considerable number of students from the United States?—Yes.

1569. The circumstance of their not having any legal distinctions in the medical profession does not prevent them from going there?—It does not; but I may remark that there are many motives which lead Americans of all professions to visit Europe. I would repeat that I cannot speak with any exactness of medical distinctions and usages as they exist in the United States.

Lunæ, 21° die Junii, 1847.

MEMBERS PRESENT.

Mr. Acland.
Mr. Aldam.
Mr. Bannerman.
Mr. Dennistoun.
Mr. French.
Sir James Graham.
Mr. Hamilton.
Sir R. H. Inglis.
Right Hon. T. B. Macaulay.
Mr. Wakley.
Colonel T. Wood.

THE RIGHT HON. T. B. MACAULAY, IN THE CHAIR.

William Lawrence, Esq. F.R.S. called in; and Examined.

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1570. Sir *J. Graham.*] YOU are President of the College of Surgeons?—I am.

1571. How long have you been a member of that college?—I cannot say exactly; a great many years; I suppose about 40 years.

1572. In latter years several attempts have been made to legislate with respect to the medical profession; have you seen the last Bill introduced in the present Session, purporting to be a Bill for the amendment of the law regulating the practice of medicine?—I have.

1573. Have you formed an opinion favourable or unfavourable to that Bill?—I have formed an individual opinion unfavourable to the Bill.

1574. I have before me the petition presented to the House of Commons against that Bill, on behalf of the college over which you preside, signed by you as president; do the objections contained in that petition set forth the general outline of your individual objections, or are they objections entertained by the college to which you have affixed your name ministerially as president?—They may be taken in both senses; the petition itself as the petition of the president and vice-presidents, for it was considered necessary that the petition should be sent in at a short notice with a certain time, and the notice was not sufficiently long to allow the council of the college to be summoned, and their collective opinion to be taken on the subject; but the petition so sent in has been subsequently approved by the council, as expressing their sentiments; indeed the council had previously met and resolved on opposing the Bill, considering it injurious to the college and detrimental to the profession; and it was in virtue of that resolution and a further direction from the council to the president and vice-presidents to act in the matter as circumstances might seem to require, that the petition in question was sent in by the president and vice-presidents.

1575. Then not only officially have you signed the petition, but individually you entertain the objection set forth in that petition?—Certainly.

1576. Are you opposed in principle to a registration of medical practitioners in England and Wales?—I do not see any objection to a registration of medical practitioners that should set forth the qualifications under which they practise.

1577. A registration setting forth the qualifications under which they practise would necessarily also set forth the classes into which the medical profession generally is now divided?—Unquestionably; I should consider that the only kind of registration which would give the public proper information. Such a registration as is proposed in this Bill, in my opinion, would delude the public; it would lead them to form erroneous opinions.

1578. In what way would the registration proposed by the Bill introduced this Session lead to false conclusions?—The registration proposed in this Bill would

would place together, under one common description of persons "qualified to practise medicine," all physicians, surgeons, apothecaries and persons who were in practice before the passing of the Apothecaries' Act, who have given no evidence of education and undergone no examination at all.

1579. A person who had only obtained a licence from the Society of Apothecaries would be legally qualified, when registered, to act not only as an apothecary, but as a physician or surgeon, or both; I see that that is set forth as an objection in the petition?—If I interpret the Bill rightly, a person who had been examined by the Society of Apothecaries only, or a person who, having been in practice before the passing of the Apothecaries' Act, had undergone no examination and given no evidence of education, would be qualified to hold any description of professional situation as physician or surgeon, or any other situation belonging to the profession.

1580. According to your interpretation of the Bill, it would be possible for a person licensed only by the Apothecaries' Society, and never examined by the College of Surgeons, to be appointed surgeon to any hospital or public institution in England or Wales?—The Bill seems to me to give such persons a legislative qualification. I suppose the good sense of the managers of those institutions would rather correct the absurdity; but as far as the Bill goes, it would go to do that.

1581. The security to the public would be, the good sense of the governing body of the institution, not the registration required by the Act of Parliament?—I think the safety of the public would entirely depend upon the governors of their institutions, and not upon the law.

1582. If your interpretation be right, the sanction of the Legislature would be given to a measure, under which a person passing the Apothecaries' Society, and obtaining a licence to practise as an apothecary, might be appointed surgeon to the largest hospital in London?—Yes; according to this Bill that might be so.

1583. I need not ask you whether you think the public safety or public policy would be consulted by such legislation?—I think quite the contrary.

1584. This Bill provides that there shall be a fee annually exacted from the members of your profession for such register, even defective as you consider it; would that fee be in your opinion just?—I consider that the certificate would be wholly unnecessary to parties who are now in possession of the diploma of the College of Surgeons; that is a regular document, showing that they have undergone an examination, and showing the department of practice which they are legally qualified to undertake. I think the certificate in addition to that cannot be necessary, and it would not convey the information which the diploma under which those parties practise does convey.

1585. If your interpretation of the Bill be correct, and its tendency should be the establishment of a single faculty, would such an effect, if produced, lower the profession generally according to your anticipation?—I think it would be calculated to do so as far as legislative enactment could do it.

1586. What would be the effect on the College of Surgeons of the establishment of a single faculty in medicine?—The character of the individual as a surgeon would be lost. There would be no inducement, as I conceive, to any individual to undergo the longer and more elaborate education, which it has been the object of the recent charter granted to the college to encourage.

1587. In what respect did the new charter granted to the college encourage the prolongation of the period of study previous to the commencement of practice?—The charter requires that the person shall have attained the age of 25 before he can be admitted as a fellow of the college, and the charter, in connexion with the bye-laws framed under it, requires a much longer period of study; for instance, six years in a medical school.

1588. Does that postponement of the period of practice, in connexion with the fellowship of your college, appear to you to be judicious?—I think it affords all the encouragement that such regulations can afford to a longer and more elaborate education; it gives a greater time for a good preliminary education, which the council of the college consider a matter of great consequence; and that leads to a much more elaborate and perfect professional education.

1589. On the whole, does the new charter, granted to the College of Surgeons, meet with your approbation?—It does, and the opinion of the council collec-

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tively is, that it has answered the purposes for which it was bestowed on the college, and that it works very well.

1590. The experience which you have had under it has confirmed you in the opinion, that on the whole the changes made were judicious?—Certainly.

1591. Under the charter, before it was changed, of how many did the council consist?—Twenty-one.

1592. Under the new charter, of how many does it consist?—Twenty-four.

1593. Under the old charter, how were the members elected to supply the vacancies in their own body?—The remaining members elected one to supply a vacancy.

1594. The governing body under the old charter were self-elected?—The council was self-elected.

1595. How are the vacancies under the new charter filled up?—The vacancies under the new charter are filled up by election by the body of fellows created under that charter, amounting now to about 600 in number.

1596. The vacancies in the governing body under the old charter were filled up by the governing body itself, but the vacancies now are filled up by the election by the whole body of fellows, 600 in number?—Yes.

1597. How were the members of the council under the old charter elected; for life, or for a limited period?—For life.

1598. How are the members under the new charter elected?—For a limited period.

1599. What is that limited period?—Three years; at least the provision is, that three members shall go out each year, being eligible for re-election.

1600. The parties going out in rotation are re-eligible under the new charter?—They are.

1601. But their claims are submitted, of course, to the opinion of the 600 fellows, the constituent body?—They must be proposed and seconded, and submitted to ballot, just in the same way as members newly elected.

1602. The old council made their bye-laws subject to the sanction of some superior body which was in authority?—The bye-laws were submitted to the judges; the signatures of three judges to the bye-laws were required.

1603. The question with respect to the bye-laws under the old charter so submitted to the judges, was the question only of their legality, and not their expediency?—The object was merely to see that they were conformable to law.

1604. To whom are the bye-laws under the new charter submitted?—To the Secretary of State, who, of course, is to consider the expediency or non-expediency of the bye-law.

1605. Therefore, whereas heretofore the legality only of the bye-laws was controlled by supervision, now the expediency of the bye-laws is controlled by the supervision of the responsible officer of the Crown?—Yes.

1606. The bye-laws, if I remember rightly, must not only be submitted to the Secretary of State as touching their expediency, but there is retained the provision that they must be submitted to the Chief Justices with respect to their legality?—I do not know whether that provision exists in the supplementary charter; but at all events, the council have retained the practice of so submitting them; they wish to be quite secure on all points.

1607. How were the Examiners under the old charter elected; for life, or for a limited period?—They were elected for life; or, I believe, the expression was, "during the pleasure of the council." I am not quite certain without referring to the bye-laws; but it was in the power of the council to remove an examiner for sufficient causes, if they thought fit.

1608. Under the present charter how are the examiners appointed?—They are appointed during the pleasure of the council.

1609. Under the old charter they were for life, and under the existing charter they are during pleasure?—I am not sure that there is any great difference between the two cases; I cannot tell exactly, without referring to the bye-laws; at all events, under the present charter, they are elected during the pleasure of the council.

1610. Under the old charter were any persons eligible to be examiners except members of the council, which was limited in number to 21?—They were not.

1611. Under the new charter who are eligible as examiners?—Any of the body of fellows.

1612. Six

1612. Six hundred in number?—Yes.

1613. Under the old charter had the members of the college any privileges whatever except such as might be conceded to them by the council of the college; had they of right any privilege?—In the first place, the members of the college have always been considered by the council to be entitled in the exercise of their profession to such protection as it was in the power of the council to grant legally; they enjoy, I think, by certain laws, some immunities, that is, exemption from liability to serve on juries, or to fill parish offices. They have always been entitled to enter the museum and make use of the library of the college, and attend all the lectures delivered there. Those were the chief privileges belonging to the members.

1614. Any member of the college now, under the new charter, may become a fellow on examination?—The new charter confers on the members of the college privileges or rights which they did not possess before, namely, that of becoming a fellow; and in virtue of that position of fellow, of holding office either as a member of the council or as examiner, if elected, or any other office of the college.

1615. And they have the privilege, when they become fellows, of joining in the election from among themselves, to any vacancies which may occur in the council?—They enjoy the elective franchise so far as the election of the members of the council goes.

1616. And they choose from among themselves?—They do.

1617. How is that fellowship now obtained, by favour or by merit?—The fellowship is only obtained now by those who have undergone a long course of education, comprising six years' study in a medical school, of which three years must be passed in the schools of London; then there must be evidence of a good preliminary education, either the degree of Master of Arts in an University, or evidence of an education equivalent to that which would be required for that degree. There must also be some other evidences of professional acquirements. They must give in reports of cases taken by themselves. They must have attained the age of 25, and they must undergo a long examination; they are examined on two successive days; the subjects of examination on the first day being anatomy and physiology; and on the second day pathology and surgery. The fellowship is granted on the evidence of such an education, at such an age, and after having gone through such an examination.

1618. The prolonged study is secured by the advanced period of age which is necessary in the party applying for the fellowship?—Of course a person would not begin his professional study until 18 or 19 years of age, so that he would have time for a good preliminary education in the classics and mathematics, and evidence of that is required.

1619. Evidence of classical attainments is required?—Yes; and of mathematical attainments; that is not the case at this present moment, but it will be after 1850. Notice has been given that that will be required after that time; but the regulations as regards age and all other points are such as I have mentioned.

1620. It was thought unfair to introduce so decided a change without notice?—Yes; without notice to those likely to conform themselves to it.

1621. With regard to the examination, it is an examination of a stringent description, applied to the higher branches of knowledge of the profession?—Entirely of that character.

1622. Are not the parties required to perform dissection in the presence of the examiners?—Yes; that is part of the examination in anatomy, the performance of dissection, or the execution of surgical operations on a dead body in the presence of the examiners.

1623. On the whole, is it your opinion that a greater degree of knowledge is secured by that arrangement for the fellowship than heretofore was necessary for admission into the governing body of the college?—I think there can be no doubt on that point.

1624. Are you confident in your expectation that this new charter, carried faithfully into execution, will operate for the advantage of society by ensuring emulation in the profession, and higher attainments generally in those who stand out as candidates for the fellowship?—I see its operation in that respect already; and I have no doubt that as time passes on, as the fellowships will in future be confined to those who have undergone that kind of education, it will

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do all that an Act of Parliament or a charter can do towards accomplishing the object of promoting a more extensive and elaborate education; and thus, of course, advancing medical science and increasing the utility of the medical profession.

1625. If this new charter be allowed to operate without interference by legislation, adverse to the maintenance of the high position of the College of Surgeons, you think that the profession and science of surgery will be advanced?—I have no doubt that it will.

1626. If your view should be correct, that this Bill would militate against the College of Surgeons and against the advancement of surgical science as promoted by the new charter, I need hardly ask you whether you would be opposed to such legislation?—I entertain a strong objection to it, from feeling convinced that it would be injurious to the College of Surgeons, and therefore hurtful to the public.

1627. Consequently, upon general principles, do you think that the tendency of this Bill is injurious?—It appears to me to be entirely calculated to do injury, and incapable of doing any good. I would beg to observe to the Committee, that I speak with reference to the nature and operation of this Bill as the organ of the council, I may say as instructed by them on that subject; and my own individual opinion coincides.

1628. Therefore we have the advantage of having both the collective opinion of the council and your own individual opinion on the point you have just expressed with respect to the tendency and operation of this Bill?—Yes.

1629. When you say the council, is there unanimity in the council upon this matter, or diversity of opinion?—The council met when this Bill was first introduced, in order to consider it, and form an opinion on the subject, and they came to a unanimous vote that it would be necessary to oppose the Bill; there was no hand held up against the resolution.

1630. You have observed that in this Bill, with reference to security being taken for equal attainments as tested by the licence of the different licensing bodies in different parts of the United Kingdom, their respective schemes of education for medical students are to be submitted to the Secretary of State or the Queen in Council; may I ask whether you think such a provision gives adequate security for the establishment of an equality of attainments in the different schools of medicine?—I am hardly able to give an opinion on that subject. It appears to me that the Secretary of State for the Home Department is not likely to have the knowledge that would be necessary to enable him to perform the duties that are imposed on him by this Bill, unless when he received the seals he should also become impregnated with a knowledge of the medical profession. He is, I think, required (I have not the exact words of the clause in my mind) to regulate medical education and medical examinations, and to have returns from time to time of the nature of the examinations, and to depute persons to attend and to see how they are carried on; I do not consider that the Secretary of State can be competent to exercise those functions. I should think that he cannot have the information which would be necessary for the performance of those offices which require the best judgment of persons well acquainted with medical education, and with the arrangements and the general wants of the profession. I do not see how a Secretary of State can be competent to such duties.

1631. He must himself be incompetent, and he would therefore be compelled to rely upon the advice of persons conversant with the profession?—I should think he must necessarily in the performance of those functions rely upon others; he cannot discharge them himself, and somebody must instruct him, or tell him what ought to be done.

1632. The parties who so advised him would not act in the eye of the public, or be known to the public?—I suppose he would take the advice of anybody that he chose to consult, if he acted upon advice; there does not appear to be any intermediate agency, by which the Secretary of State could perform those offices; there is no council or body of that kind on which he could rely.

1633. Would the decision of the Secretary of State, acting on irresponsible advice given by unknown parties, command the confidence of the public and of the profession in the decision?—It does not seem to me likely to do so.

1634. Have you ever reflected on the policy of establishing a Council of Health in this country?—That is a subject that engaged the attention of the Council

Council of the College of Surgeons on a former occasion, with reference to Bills previously introduced into the House of Commons.

1635. You, individually, have reflected upon it?—I have.

1636. Is your opinion favourable or unfavourable to the establishment of a Council of Health, which shall be composed partly of officers of the Crown of distinguished station, laymen, and partly of medical men of the three great branches of physic and surgery?—As far as the regulation of professional education goes, and the regulation of the examinations which parties who are to enter into the profession have to undergo, I do not consider such a council necessary. I conceive that the constituted bodies in the profession as they now exist, the Colleges of Physicians and Surgeons, for example, can best regulate those matters. If, however, a further superintending authority were required, I think that a Council of Health, which might embrace medical education, examinations, registration, and perhaps other subjects, consisting of such persons as you have now suggested, would command the public confidence, and would not be disapproved of by the profession.

1637. Would you object to the admission to equal privileges of practice all members of the profession throughout the United Kingdom, if security were taken for equality of attainments?—That is a very extensive subject, and would require, I think, to be considered with reference to the general scheme of arrangement of the whole profession. If there was to be a general plan of medical reform, so called, or anything that should give a new arrangement to the profession, such a scheme as you now suggest might probably be a part of it; but I should be unwilling to give an opinion upon a point of that kind unless I saw it in connexion with the entire plan.

1638. The Bill which we are now considering purports to be such a plan; do you regard it as a plan which would give security for equality of attainments, such as ought to lead to an equal right of practice throughout the United Kingdom?—I doubt very much on the subject myself; I do not think that you can insure equality of attainments exactly.

1639. By that Bill it rests upon the power to be exercised by the Secretary of State and the Queen in Council; does that afford a security which you think sufficient?—As I have already said, it does not appear to me that the Secretary of State can regulate a subject of that kind; he has not the knowledge necessary for that purpose.

1640. You would not be willing to let in the Scotch practitioners, generally, without any other test except that which this Bill provides, to metropolitan practice as surgeons or physicians?—Your question is a very general one. Assuming that Scotch physicians, for example, had, as far as circumstances will admit of, an equivalent education (I put that first), it is necessary to exercise a strict supervision to see that the education is equivalent. It would then be a question whether Scotch physicians should be admitted to practise in England in the same way as English physicians are. Another question would be, whether Scotch physicians should be admitted to practise as apothecaries in England, without undergoing the same special examination which the law compels English apothecaries to undergo. In order to answer we must descend into details.

1641. To descend into details. You perhaps know the standard of the University of St. Andrew's; does St. Andrew's afford security for equivalent education which would, in your opinion, justify the grant of a power to St. Andrew's to confer licences giving a right to parties to practise as physicians throughout the United Kingdom?—I rather think that they have no medical school and no hospital, and that they do not require residence at the university in order to confer a degree.

1642. Would you be afraid to admit St. Andrew's physicians to equality of practice in London?—If you do that, you may as well throw away all qualifications and all examinations, and leave it open altogether.

1643. Trusting to chance as regards attainments?—Yes, I think so; I think it would be quite illusory.

1644. It has been suggested that man has so great an interest in the preservation of his own life and limbs, that he will exercise due caution in the selection of his medical adviser, without any legal qualification being required; have you any opinion upon that point, whether it is safe to leave man to the exercise of his own judgment as regards those whom he calls in to aid him in his last extremities?—

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extremities?—The general practice of all countries supposes that men are not capable of forming a sound judgment upon the matter, for certain examinations, and qualifications founded upon those, are, I believe, usual in all countries.

1645. And that is for the protection of mankind against their own error, which is very probable in such a choice?—Mankind are not judges of professional skill. The medical profession, in that respect, is different from the profession of the law; the talent and skill of the barrister are exhibited before the public, and the public therefore are competent to judge; but the skill of the medical practitioner they are no judges of.

1646. Then, again, it has been suggested in defence of a single faculty that the poorest subject is entitled to the protection of the State, as well as the highest and the richest, and that having established that standard which shall be a security to the poorest, you have no right to affix a higher standard, which shall be open to the choice of the richer and the greater; do you think that there is any force in that argument in favour of a single faculty?—The argument would be, that a certain standard is adopted by the Legislature for the poor; for instance, in reference to the general practitioners, and that you do not want any further for the rich. Now I do not know that you have any other standard for the rich; as the thing at present stands, the standard is the same for all; that is to say, the standard of qualification for the physician, the standard of qualification for the surgeon, and the standard of qualification for the apothecary are the same, whether attending the poor or attending the rich; there is no difference.

1647. The examination of a fellow of your own college is very different from the examination of the Society of Apothecaries for a general practitioner?—It is; but that stricter examination is not so much in reference to actual practice as to the point of encouraging longer study and more perfect cultivation of medical science; and of course that acts ultimately in raising the qualification of the whole profession.

1648. You are of opinion that the superior excellence tested by the higher examination which is confined only to a few practitioners, does by emulation stimulate the exertions of the great body of the profession usefully to the public?—I think it must unquestionably have that effect; I see that it does so at this moment in reference to the fellowship of the College of Surgeons. Among the rising members of the profession who are qualifying themselves to come into it, greater exertion is manifest in consequence of that higher examination which they intend to undergo, in order to enter the higher department of the profession. They are required to work harder.

1649. Is the effect of that excellence, and the dignity attendant upon that excellence in this country, when attained by the highest class in the profession, reflected upon the profession generally as relates to their social condition?—I think that is the only thing on which the high position of the profession can depend; I mean that the general estimation of the whole body of the profession depends upon public confidence in and upon the social position of some particular members of it who are more distinguished.

1650. If the standard of the single faculty should be somewhat raised, but not much, on account of the small remuneration which can be given in the rural districts to the great body of the profession, would the new standard compensate for the loss of dignity in the higher branches of the profession, even though a somewhat higher examination of the whole body of general practitioners should be the consequence of the establishment of a single faculty?—I think it would not; the idea of a single faculty proceeds on those levelling principles of equality which are found to be injurious wherever they exist in practice. If you were to attempt the same thing in the law, or in the church, or in the army or navy, it would be prejudicial; and in those cases it would be so absurd, that it would be scouted at once.

1651. It is more easy to pull down than to raise?—Exactly; you cannot produce equality by raising; you can only do it by pulling down.

1652. That as a general principle is applicable to surgery, among other things?—Yes; and more particularly with reference to the medical profession, because there is very little encouragement to men of superior talent to enter it; it offers none of the great prizes which the professions of the law and the church hold out; and, consequently, the superior heads go into those professions.

1653. Your petition ends with the expression of this opinion: "That your petitioners

petitioners consider that in this and several other respects the proposed Bill would injure, if not destroy, the rights and privileges conferred by Royal Charters and Acts of Parliament on the Royal College of Surgeons of England and its members; they believe that by blending the existing institutions in the profession, and reducing all its members to one level, it would discourage persons of education and respectable position from devoting themselves to the study and practice of medicine, and thus be deeply injurious to the public." Do you adopt that opinion, and state it to be individually your own?—Entirely; I adopt it individually; and it has been adopted, as I said before, by the council since that petition was presented.

1654. *Chairman.*] Did I understand you rightly to say, that by the new charter of the College of Surgeons all its bye-laws must have the approbation of the Secretary of State?—All its bye-laws and ordinances.

1655. Do those bye-laws and ordinances extend in any way to the subject of surgical education?—They embrace the education and examinations of the new order of fellows.

1656. Then the rules, according to which the examinations of the fellows to be admitted under the new charter take place, must have the approbation of one of Her Majesty's Secretaries of State?—They must.

1657. You approve of that regulation of the charter?—I do; it affords a security, in the opinion of the public.

1658. But you conceive that the Secretary of State is not necessarily an officer competent to judge of the proper course which the parties conducting those medical examinations ought to take?—He may be competent to sanction regulations originated and framed by the college authorities.

1659. You think, then, that for the general superintendence of medical education he is not altogether an unfit officer?—The regulations in the bye-laws are of simple character, such as, "There shall be an examination of two days; one day on such a subject, and one day on such another." The Secretary of State can judge of such matters. But to determine all the particulars in the curriculum of education, to fix the subjects and the mode of examination, requires a knowledge of details, which the Secretary of State cannot be expected to possess.

1660. You entertain no objection to entrusting a similar power to a body to be nominated by the Secretary of State?—Not to a properly constituted body.

1661. What security do you take for the constitution of that body?—It would depend entirely upon the parties who are to have the nomination.

1662. Did you approve of the measure which the Right honourable Baronet near me introduced in 1845 respecting the Council of Health?—I think there were three or four editions of the Bill, differing from one another. If there were to be a measure for the general regulation of the profession, it did not appear to the College of Surgeons that the establishment of a Council of Health would be objectionable; in fact it would afford a security on some points.

1663. Do you conceive that that can be a proper state of things, under which a person who is competent to practise on one side of the Tweed is not competent to practise on the other side, and under which, a person who is competent to perform any operation, and to prescribe in Dublin, is not competent at Holyhead to do so?—Parties who have possessed powers of qualification have been unwilling to surrender their rights; for instance, an authorization to practise in Edinburgh does not qualify for practice in Glasgow, and *vice versâ*, that is bringing the matter within a very narrow compass. Then a more general question might be, whether the authorization in Scotland should be valid in England, and *vice versâ*. Now the question would be, I think, what is likely to be best for the public in that respect, whether it would be more advantageous to the public that the authorities in Scotland should qualify for Scotland only, those of England for England, and those of Ireland for Ireland, or whether the education of one should confer an equality of privilege in all three countries. I think it likely that it might be the most advantageous to the public that the examining body should qualify for their own division of the United Kingdom, and that a party passing from one into the other should be bound to belong to the corporation or examining body of that division of the kingdom. I think that might be required at all events.

1664. But what advantage does that system give to the public?—The advan-

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tage I should consider likely to follow from that is, that it would keep up emu- emulation and competition among the examining bodies in each division of the kingdom. I think that they would each be inclined to do all in their power to raise and maintain the character of the profession, and of the examinations and qualifications in their respective divisions of the kingdom. Under the other arrangement, I mean that of allowing persons to choose their schools without reference to the division of the kingdom in which they mean to practise, there is danger of lowering the standard of education and the character of examinations by inducing students to resort where education and examination can be got through on the easiest and cheapest terms.

1665. Then your view seems to be, that the best way to produce excellence, is to grant local monopolies for the exercise of physic?—I do not think the establishment of monopolies likely to produce excellence. The proper question in this case would be, What is most likely to benefit the public? That is the point of view in which I regard the matter.

1666. In what way are the English schools and the Scotch schools excited to emulation by a law which provides that no man educated in the Scotch schools shall practise in England, and that no man educated in the English schools shall practise in Scotland?—I think if you have an examining body in each country, there is an inducement in each case to raise the character to the highest point; there is a competition between them.

1667. Can that be said to be a system of competition under which the Scotch practitioners, however low their standard may be, have a monopoly of the Scotch practice, and under which, however high their merit may be, they can never get into English practice?—Supposing it should so happen that a person educated in Scotland should wish to come and practise in England, I think it would be fair that he should be allowed to do so upon attaching himself to the corporation which relates to that division of the profession in England.

1668. Would you impose upon him any obligation other than that of merely going through the form of becoming a member; would you require of him any other examination?—Your question, like the one put to me before, is general; it includes different cases, therefore I cannot give you a general answer to it. I know that great dissatisfaction has existed, because persons who have received the diploma of the University of Edinburgh could not practise as apothecaries in England without an examination by the Apothecaries' Society. I think that dissatisfaction is unreasonable, because it is the business of an university to educate physicians. The University of Edinburgh never, in former times, were anxious to make apothecaries; it is not the business of an university to do so. They have the higher office of granting degrees in medicine, laws, and so forth.

1669. Was it not with a view to become, as it is called, a general practitioner, that the degree of the University of Edinburgh was obtained?—Yes, in some cases; that is, persons intending to practise as apothecaries in England have graduated in Edinburgh, thus being prepared to act in either character, according to circumstances. They wished to be exempted from that examination by the Society of Apothecaries which the law has established in England. General practitioner is not a legal term; and the Apothecaries' Act enables the Apothecaries' Company to examine persons who propose to practise as apothecaries.

1670. Do you conceive that it would be reasonable that a man of medical eminence in Scotland should be interdicted from practising in England without going through an apprenticeship to an English apothecary?—I certainly do not think that that would be reasonable.

1671. That is what the law now requires?—I do not know that the law requires that; at all events I am sure that several persons possessing the diploma of the University of Edinburgh have undergone an examination before the Apothecaries' Society, and I believe that there has been no difficulty in persons possessed of the diploma of the University of Edinburgh, if they think fit to practise as apothecaries, undergoing an examination by the Apothecaries' Society; but I do not pretend to know everything relating to the Society of Apothecaries.

1672. Is it not the fact that the Apothecaries' Act requires an apprenticeship of five years for every person admitted?—The Apothecaries' Act requires an apprenticeship of five years.

1673. Without exception?—I do not know that there is any exception; but the

the provision is nugatory, because it is a common practice for parties, though apprenticed, as required by the Act, to pursue their studies in medical schools.

1674. But the Act requires apprenticeship without any exception; and no dispensing power is given to any authority connected with the Apothecaries' Company?—No; but the thing is constantly managed in the way I have mentioned.

1675. That is, the law is broken?—Perhaps it is not strictly complied with.

1676. Your college has no privilege in the nature of a monopoly?—No; not that I know of.

1677. Any person may practise as a surgeon who likes?—I do not know of any legal difficulty.

1678. There is no penalty upon a man for cutting off a leg, or doing any other surgical act?—No, none. With respect to the apprenticeship clause, I would beg you to understand, that persons are apprenticed because the law requires it; but though apprenticed, they are pursuing their studies in the London schools. The law does not require an apprenticeship in the house.

1679. They are apprenticed and the law is evaded, because they pass five years not as apprentices, but in studying?—Yes, if that is an evasion of the law.

1680. If a medical man of great eminence should come from Scotland or Ireland into England, and wished to practise as an apothecary, he must go through a term of apprenticeship, and must pass five years with a general practitioner?—I never heard of such a case; I never heard of any difficulty being experienced by any individual having a diploma of the University of Edinburgh, and wishing to practise as an apothecary in England, in presenting himself, and undergoing an examination at Apothecaries' Hall; but other parties can, of course, tell you more about that than I can.

1681. Are you not aware that difficulties have arisen with regard to very distinguished Scotch practitioners; with reference to their being attached to poor-law unions, and other public institutions?—I do not know whether there have or have not been difficulties. I have not heard of any such case.

1682. Sir *J. Graham.*] Are you an advocate for the maintenance of the Apothecaries' Act as it now stands on the Statute book?—In the first place, I think compulsory apprenticeship for five years is objectionable; I think that people should be left to their own choice, to be apprenticed or not, as they see fit, and for what term they consider fit. There are other things included in that Act of which I do not entertain a favourable opinion.

1683. But with respect to an apprenticeship of five years; you think that particular provision ought to be repealed?—Yes, I think that a compulsory apprenticeship of five years is by no means a good provision.

1684. Sir *R. H. Inglis.*] When you say that compulsory apprenticeship for five years ought to be repealed, will you state to the Committee whether you do or do not regard the residence in the house of a practitioner very valuable for a young man who is destined to fill a higher branch of the profession, whether under the name of apothecary or general practitioner?—I think that the state of apprenticeship, when there are proper opportunities of information, is an advantageous mode of initiation into the profession.

1685. When you state that you regard a compulsory apprenticeship for five years as a comparative evil, you wish the Committee to understand that it is chiefly to the duration, and not to the fact, of a young man destined to compound medicines, and to act the part of a general practitioner, being subject to it for such a time?—I think an apprenticeship, properly conducted and of proper length, is the best mode of initiating young men into the profession.

1686. You have been asked whether you do not think it a hardship that men of eminence in Scotland (and the phrase was repeated), that men of great eminence in Scotland should be precluded from practising the profession in England; will you state to the Committee whether you consider, from your knowledge and observation, that it would be a great hardship for a person receiving his degree at the college of St. Andrew's to be prevented from practising in England, or whether it might not be a greater hardship upon the people of England that he should be permitted so to practise, without any further examination than that which the University of St. Andrew's requires?—I should think that it would be very improper to allow a person in possession of a degree from the University of St. Andrew's, which I assume to be a place without a medical school and without an hospital, to practise his profession anywhere; and if there

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is to be any law restraining parties from practising, that is a thing which ought to be prevented.

1687. Admitting the fact that the examinations of the University of St. Andrew's have considerably improved from the standard, if it may be so called, which was adopted there 40 years ago, do you or do you not still consider that a degree so conferred is not sufficient to justify the title of the party holding it to practise in England, without a further examination in England?—I do not think that a St. Andrew's degree, conferred as it is at present, a proper authority for a party to practise here or indeed anywhere.

1688. Under the terms of the Bill which Mr. Wakley and Mr. Warburton, whose names are upon the back of the Bill introduced into the House of Commons, do you or do you not consider that a person receiving a degree from St. Andrew's might be competent, so far as the legal power is concerned, to be appointed first physician to St. Bartholomew's Hospital, Guy's, or St. George's?—I think that he would have a legal qualification under this Bill.

1689. Do you consider that such a person would be a fit candidate for the office of surgeon or of general practitioner in the smallest poor-law unions in England?—There would not be any evidence, to my mind, to prove his fitness for that situation.

1690. Do you or do you not consider that a measure which would lay open the poor-law unions of England to the practice of parties so educated, can be represented as a measure which has for its object the welfare of the poor of England?—I think that it would not tend to the welfare of the poor to allow persons with such qualification, or rather want of proper qualification, to practise upon them.

1691. Do you consider it safe to allow such persons, what has been called a chance of succeeding amongst the rich or the poor of England?—I can see no public advantage to be derived from giving them any power of practising in England.

1692. You have already stated that the position of the highest men in your profession reflects upon the lowest; will you also state how far you do or do not consider the higher education required for the first physician to a great county infirmary operates as a great and direct benefit, irrespective of its collateral benefit upon the village practitioner, who may have occasion to refer to him?—I think that it is productive of very great benefits.

1693. Do you, then, consider and wish this Committee to receive it as your opinion, that the division of the profession into classes, the highest class of which requires longer experience, and the application of larger pecuniary means to its attainment, is a great benefit, not only to the rich who may command the services of such higher class, but to the poor also who indirectly derive a benefit from the power which their immediate attendants enjoy of consulting such persons?—I think that such higher amount of knowledge, and such greater qualifications, are calculated to benefit the whole community.

1694. Though you would yourself desire that all men should be educated to the same height as yourself, do you or do you not consider, in the present state of society, such a degree of attainment is practically impossible?—I think that you cannot have all members of the profession educated to the same point, unless you make that a low point, and one that would not include a very long and elaborate education.

1695. In other words, you must pull down the highest classes to the level of the general practitioners, instead of indulging the hope that you can ever raise the general practitioners to the level of the highest physicians and surgeons who may practise in London?—If you have all on one level, it must be by depressing those who are higher to the level of those who are lower in public opinion and confidence.

1696. *Chairman.*] Should you consider it just to form an opinion of the medical schools of Scotland generally, from the University of St. Andrew's?—Certainly not.

1697. Mr. *Acland.*] You stated that you thought an apprenticeship a good initiation into the practice of the profession; will you state whether, in your opinion, that apprenticeship should precede the professional education, or come after it?—I think that it should be the first; if we take the case of a young man about to enter upon medical education, he goes into the house of a practitioner employed in a general line of practice, he sees the ordinary cases of disease, and

and becomes familiar with drugs and their properties, and their mode of preparing them, and in that way he gets a practical knowledge which he could not get in any university or great school.

1698. You think it desirable for him to get that practical knowledge before he enters the hospitals?—I think so; he will not get it afterwards.

1699. Do not you think that making such a regulation compulsory upon the general practitioners of this country, tends to curtail their early general education?—Certainly, it has that effect if you made it compulsory, and especially if you made it an apprenticeship for the duration of five years, it would encroach upon the time that ought to be devoted by the young man to general education.

1700. Do not you think that an improvement in the general preliminary education of all the country practitioners is desirable?—I do; in fact, the education and the amount of knowledge of the profession generally has been considerably increased since I became acquainted with it.

1701. Have you found generally that the young men who come up from the country to attend the medical schools in London, have their minds prepared to digest the medical knowledge required of them?—They come up in every different state of preparation. Speaking generally, one would wish to have a greater amount of preliminary education. The Apothecaries' Society, by the law, may give their certificate to a young man at the age of 21, and that does not allow time for a good preliminary education, and for a sufficient amount of professional education. In point of fact I may say (which of course you will hear more completely from other witnesses), that about 23 is the average age; the law allows them to enter at 21, but if you take the age of the persons at the time they receive their licence from the Apothecaries' Society, they are at least 23 years of age on the average.

1702. Am I not right in supposing that the Apothecaries' Company requires a degree of attendance at lectures, and an amount of professional knowledge which a young man cannot properly acquire without some previous education?—He cannot derive the full benefit from his medical studies unless he has had a good previous education.

1703. I understood you to say that you had no objection to a proper mode of registration of the medical practitioners?—There is a proper mode of registration of medical practitioners at the present time.

1704. Will you be kind enough to explain what that is?—Annual lists are published by the College of Surgeons, by the College of Physicians, and by the Society of Apothecaries, of persons who have been examined by them, and have received their letters testimonial.

1705. How does that enable persons in the country, such as members of Boards of Guardians, to judge of the qualifications of persons educated in Scotland or in Ireland?—It only gives negative evidence that they have not been educated in England; they know nothing further; those lists contain the names of all the persons who have been examined by the three bodies here.

1706. But you are, doubtless, aware of the difficulties in which some persons acting as guardians in the country and residing in the country have found themselves placed in ascertaining the medical qualification of other candidates than those who have been licensed by the authorities in England?—It would require a more extended system of registration.

1707. Do you think that desirable?—A registration should present the result of the laws relating to the medical profession; if you are to make a medical reform or a change of any description in the medical profession, you must first determine the classes of the profession, and their respective qualifications, and then your list must present the result of those arrangements; but it appears to me that it is putting the cart before the horse to make the registration first, and to make the medical reform afterwards.

1708. I wish to repeat my question, which I think you have not answered; do you think such a registration desirable without reference to any problematical scheme of medical reform?—I think it desirable, if the parties you allude to labour under a difficulty, that some means should be adopted of enlightening them upon the point.

1709. Do you think that they would be enlightened by the registration of practitioners, as it at present exists?—I think they would.

1710. Can you explain to the Committee in what way a registration might be devised, so as to give actual information of those who are really *bonâ fide* quali-

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fied to practise?—You would include the St. Andrew's doctors, I suppose? The difficulty that you present is, that Boards of Guardians are not aware of the qualifications conferred in Scotland or Ireland, for example. So far as England goes, a registration can be easily made, which should include under one list all parties qualified to practise in England; the three examining bodies in London, the College of Physicians, the College of Surgeons, and the Society of Apothecaries, could with very little additional trouble convert their several lists into a general annual list, in which the particular qualification of each person should be set forth. I think that there would be no difficulty in obtaining from the Scotch and Irish Colleges lists of persons who are qualified under their examinations, which might be either incorporated with the London list, or published with it as a separate catalogue. Such a publication would afford to all parties every necessary information respecting the education and qualifications of individual practitioners.

1711. I understood you to say, that the regulation of the medical profession was better left in the hands of the several governing bodies under the present state of things, unless we embarked in a reorganization of the profession; was I right in so understanding you?—That is my opinion, and I found that opinion partly upon this circumstance, that the individuals belonging to those bodies are persons, who by their professional position and their experience, know most of the medical profession, and who in fact, during a long course of years, have been constantly occupied with the subject of medical education; and the state of medical education, as compared with what it was some years ago, is very considerably improved. If we take the great schools of London, it would be hardly possible to introduce any material improvement in the arrangements for medical education, and if you were to create a Board, or some general authority, I cannot tell what the effect might be in interfering with, or disturbing those arrangements.

1712. That being your opinion, if the Legislature of this country should agree with you, and leave it to those bodies to regulate their respective modes of education, how would you correct the evil of bodies granting degrees without proper security for the examinations upon which those degrees were granted?—I suppose that the Legislature will not presume that any body authorized by itself, and having power conferred by itself, would neglect the duty thus entrusted to it.

1713. But we have already had the opinion of a very eminent surgical authority, as to the value of one of those qualifications, and I wish to know how you propose to reconcile those two opinions, viz., the desirableness of some regulation of the examining bodies and the admitted fact, as stated by yourself, that the licence of one of those examining bodies is not to be trusted?—My opinion is founded upon a knowledge of the part of the kingdom with which I am conversant; the arrangements for medical education in London seem to me to be nearly perfect, and I speak in reference to those.

1714. But how can we obtain a sensible register without having some mode of superintending the examining bodies?—If the plan which I have suggested were pursued, namely, that the three bodies in London should unite, and form a registration; then the College of Physicians, for example, and the College of Surgeons might take the trouble (and I do not think it would be any great trouble) to procure from the colleges in Scotland and in Ireland a list of their graduates and licentiates. The lists might be published together, but it does not follow that all should be put on one list; for instance, those licensed to practise by the University of St. Andrew's might appear separately, and then persons who might so wish would be able to select a graduate of St. Andrew's.

1715. You said that you thought it, on the whole, desirable that persons examined by the Scotch authorities should receive the right to practise in Scotland, and so in other branches of the United Kingdom, but that if they moved from one to the other, they should enrol themselves in the college of the country to which they moved; would you accompany that with any examination, or not?—I think it would be unpleasant to have examinations by which the second body would have an opportunity of objecting to or disregarding the qualification conferred by the first body, therefore it would be necessary, under any arrangement, to take very great care that the course of education was of equal value in point of extent as regards the points embraced in it; so far as the subject would admit of it, the kind of examination should be equivalent.

1716. Do you not think that there is a great advantage in the occasional moving

moving of any eminent practitioner from one part of the kingdom to another?—I think it is desirable to give to persons of talent and knowledge full scope for the exercise of their endowments.

1717. You would not wish to impose restrictions on persons of the highest character of talent finding their way to the metropolis if they were so disposed?—Certainly not.

1718. Do you think that it would be desirable as a general rule for English medical men to go into other countries to seek their education, and then to come back and practise in England?—There are particular circumstances that may occasionally make it convenient for a person to receive his education partly or wholly in foreign countries, and parties are admitted for examination by the College of Surgeons and the College of Physicians, on certificates or diplomas which they have received from those schools.

1719. Would there be a sufficient check if we left the local authorities in each kingdom to examine or not to examine in those cases as they might think fit?—Of course they must do that under general regulations; of course every authority that is entitled to examine, lays down regulations respecting candidates' qualifications and age, and so on.

1720. Do you think that it would be possible to combine the advantage of a constant interchange of men, educated in different countries, with perfect security for the equal education in each branch of the United Kingdom?—I think so; the College of Surgeons will admit a person to examination if he presents a diploma or letters testimonial from a foreign university. This is only allowed in the case of universities requiring residence, and where the education, in respect to the subjects embraced and the time occupied, is equivalent to that required of those educated in England.

1721. You were asked what were the privileges of the members of the College of Surgeons, and according to my apprehension you did not clearly answer that question?—The College possesses a museum far surpassing all similar collections. The members possess the freest access and power of examination; they thus have the opportunity of acquiring the most accurate information on human anatomy and physiology, on the structure and functions of organised beings generally, on the changes caused by disease, and on various connected subjects. They can attend the lectures delivered annually, in illustration of the museum, by persons of eminent talent and knowledge. The College has likewise collected an immense library, which is open every day to its members. They are exempted from serving on juries and parish offices. By the Act relating to gaols, the diploma of the college is required as a qualification for the office of surgeon. Further, the diploma of the college is required in the case of surgeons to the poor-law unions, by order of the Poor-law Commissioners, and also of surgeons in the army and navy, under the regulations of those departments.

1722. What would be the evil which you apprehend would result from giving all the members of the college a power in regard to the management and control of the College of Surgeons?—They amount to several thousands, and the college could not very conveniently hold them.

1723. Is it likely that they would all attend?—I should think not.

1724. Into whose hands, then, would the government practically fall?—Those of the members residing in and near London. I think it probable that they would elect nearly the same persons that now constitute the governing body. I do not know whether they would or would not. If they were to elect the same persons as would be elected by the fellows the result would be the same, and the thing would be safe; but I think a different result might ensue.

1725. Mr. *Dennistoun.*] You stated that you thought it desirable to continue the separate examinations in England, Scotland, and Ireland?—I think it might be beneficial.

1726. Supposing an eminent London physician or surgeon went, by some accident, to reside in Edinburgh, would you think it desirable that he should undergo a second examination there?—I said that I thought it would be well to continue the separate qualifications, and that the party moving from one country to the other should attach himself to the governing body in the country which he goes to; I do not say that he should undergo an examination, but I think that a person who had a qualification from the Scotch College of Physicians should become a member of the College of Physicians in London.

 1727. Without

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1727. Without examination?—Yes.

1728. Is that the case at present?—I cannot state exactly what is the case; but I dare say other gentlemen will be able to state that. With respect to the College of Surgeons of Edinburgh, I am not prepared to say that that would be quite the fair thing; because the College of Surgeons of Edinburgh is different from the College of Surgeons of London: the College of Surgeons of Edinburgh is composed of general practitioners, and the College of Surgeons of London is composed of surgeons only.

1729. So that you would not apply to the Edinburgh surgeon coming here the same rule as you would apply to a London surgeon going to Edinburgh?—The cases are not quite analogous.

1730. Why not?—I have already said that the College of Surgeons of Edinburgh consists of general practitioners, and the College of Surgeons of London consists of surgeons simply.

1731. And you think that the College of Surgeons in Edinburgh is not sufficiently qualified to give a diploma for practise as a surgeon in England?—I mean to say that the two things are so far different: the College of Surgeons of Edinburgh consists of persons corresponding with those who constitute the examining body of the Society of Apothecaries in London.

1732. What is the state of the Edinburgh school of medicine; does it not stand high?—Unquestionably it does.

1733. And also the medical school of Glasgow?—I do not know much about that; there is a curious body there, called the faculty of physicians and surgeons, with a limited local jurisdiction. I know nothing about that body.

1734. Leaving out London, and taking the great towns in Scotland and in England, do you mean to say that, generally speaking, the standard of medical education is higher in England than in Scotland?—I do not mean to compare them, or to give any opinion on the subject. It is a point for the profession and the public to judge of.

1735. Are you aware whether there is any pure physician or pure surgeon in Scotland?—I think there is one pure surgeon; there may be two or three, for what I know; but of one I am pretty confident.

1736. How many may there be in London?—I cannot tell you.

1737. You have no idea?—No.

1738. Sir *R. H. Inglis.*] Do you reckon them by scores or by hundreds in London?—They are rather to be reckoned by scores than by hundreds.

1739. Mr. *Dennistoun.*] You have stated that the standard of medical education has been increasing; to how long a period do you apply that?—To the last 40 years.

1740. Has that been owing to legislative interference?—The improvement has proceeded from the exertions of the medical officers and teachers of the hospitals, aided and supported by the governing bodies of those institutions.

1741. Supposing there were any legislative interference as regards the law which requires the examination of any college in any of the three countries, in your opinion, would medical education not go on increasing?—That is a difficult problem; one cannot foretel what the effect of a total change would be; at least I do not feel myself able to do so. I know that there has been a regular improvement; but that has been under the influence of the bodies to which examination has been entrusted. To meet the regulations of those bodies, longer study has been required, and the examinations have been more stringent.

1742. You said, in answer to a question of who was the best judge, the public would be the best judge?—I said that it was for the public to judge.

1743. Will not the public still continue to judge of the qualifications of medical men?—No doubt they do judge as well as they can.

1744. Colonel *T. Wood.*] You did not explain the difference between the examination for members and the examination for fellows?—I can explain that, if you wish; the examination for members is after this manner: the Court of Examiners are 10 in number, and they divide themselves into four tables; the president does not examine, because he regulates and superintends the affair; there are two members at each of three of the tables, and three members at the fourth; then each of the candidates is examined at each table; one person asks the questions, and the other, who is sitting by, minutes the subjects of the examination. Each table reports its opinion as to the results of the examination; and on collecting those opinions they express three degrees of merit, "good,"

"moderate,"

"moderate," and "bad." The president collects the opinions when those examinations are concluded, and they determine on admitting the candidate or on giving him a further written examination, or on remitting him for his studies. All this is done in one night. The examination of the fellows occupies two days; it is by written examinations from ten in the morning till five in the evening of each day; written questions are given to each of the candidates, who is placed in an apartment where he has pens, ink, and paper; he has no books or other aids, and he has got to answer those questions; and then the answers to those questions are considered by the examiners. That is the mode of examination for fellows.

1745. Do you consider the examinations of members sufficiently stringent?—I do. We examine them in the way most calculated to enable us to judge of their qualifications.

1746. Is it not necessary that there should be some means of preventing improper practice?—That is a very large question; the question of irregular practice or quackery.

1747. You spoke of a new arrangement or remodelling of the profession; will you shortly explain your view?—I was alluding to the plans which were formerly brought in for medical reform; they include alterations which might be considered a remodelling of the profession; this Bill, for example, if it registered all parties, and gave a common certificate to persons to practise in medicine, would be a remodelling; that is, it would throw the whole into one mass.

1748. I wish the Committee to be informed of your own notion of remodelling the profession?—I do not think the profession wants remodelling; I should object to any such course.

1749. Sir *R. H. Inglis.*] In the account of the examination which you have just given, you have omitted to state whether for the member or for the fellow it be or be not necessary that there should be an examination of the human subject?—That is required in the examination for the fellowship; with respect to the examination of members, there are bones and a skeleton at hand, which we make use of in the examinations.

1750. But not what is called a subject?—No; not a dead body.

1751. Mr. *Hamilton.*] Is the examination open to the public, or any part of the profession?—No; it is conducted in the presence of the examiners; no other parties.

1752. Mr. *Acland.*] Is there a large number examined at the same time?—The general rule is to examine 12 at one meeting of the Court of Examiners, and the arrangement I have mentioned is such, that every examiner has an opportunity of judging of the answers given by each candidate.

1753. How many hours does it occupy?—The examiners meet at 6 o'clock, and they are occupied till between 10 and 11; 11 commonly.

1754. Sir *J. Graham.*] I omitted to ask you whether the number of fellows is limited under the new charter?—It is unlimited.

1755. Therefore any member of the college who has acquired the stipulated age may come forward as a candidate for the fellowship if he be willing to undergo the examination?—Any member of the college can offer himself for examination as a fellow on certain conditions, which are laid down.

1756. There is no limitation of number?—No.

1757. The practical limitation is the attainment by a person of a certain age, and the necessary qualification, if he seek to attain it?—That is the only limitation that I know of.

1758. Have you observed during your short experience of your new charter, a growing desire on the part of young medical men to attain this honour?—So far as I am acquainted with the matter, I should say that those about to come forward for examination, and who have concluded their education, are much more desirous than formerly to qualify themselves for the fellowship.

1759. The conclusion is legitimate, that the honour of the fellowship of the College of Surgeons is rising in public estimation?—I consider that it is.

1760. Mr. *Hamilton.*] Do you consider it desirable that the law should continue with reference to the power of recovering fees in your profession?—I think that there ought to be such a power.

1761. Has the state of the law, as it has existed heretofore, operated, in your opinion, to depreciate your branch of the profession in any way?—I am not

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aware that it has; the fees of apothecaries and the fees of surgeons are recoverable by law.

1762. Mr. *Wakley.*] Have you any other objections to the Bill than those which you have stated?—The Bill includes a great many particulars; the petition that was presented by the College of Surgeons embraces, I think, the principal points. I will not state that there are not others which might suggest themselves to me if I were to read it over, but that petition expresses generally our opinion on the whole of the Bill.

1763. The council were unanimous in opposition to it?—Yes.

1764. Do you recollect how many members of the council were present on the occasion?—I believe nearly all the council were present.

1765. Is there any minute kept of the proceedings on that occasion?—Minutes are kept of all the proceedings of the council.

1766. And of course there is a minute of the proceedings on that occasion?—Yes; the minutes do not express the numbers that vote in case of any difference of opinion.

1767. You say in that case there was no division?—There was no hand held up against the resolution.

1768. The council were unanimous?—Yes.

1769. Can you state whether there were 16 or 17, or what number present?—The council consists of 24, and I believe there is no vacancy in it at present, and I should think that there were not more than two absent.

1770. You say that you do not object to a system of registration which would secure equality of qualification throughout the three countries?—I should have no objection to a system of registration that should express the nature of the qualification which an individual possesses.

1771. But you are of opinion that the system of registration which is proposed in this Bill would be delusive?—I consider that the giving to all parties, physicians, surgeons, and apothecaries, and parties who practised before the passing of the Apothecaries' Act, a common certificate of their being persons "qualified to practice medicine," would deceive the public.

1772. Have you examined the schedule with reference to the certificate?—I have.

1773. Will you be kind enough to look at it again, and see whether it does not distinctly state the particular qualification which the individual has attained?—Yes; but here is a common certificate to all of their being qualified to practise medicine.

1774. But how can you say that the certificate is common to all, and that its terms are in strict accordance in all cases, when you find that the particular qualification of the individual is specified therein; for example, if an individual has obtained the licence of the College of Physicians, it is so stated; if he has obtained the diploma of the College of Surgeons, it is so stated in the certificate?—The particular diploma or licence is stated in the commencement of the document, which ends with a common certificate to all, of qualification to practise medicine.

1775. But still the certificate states whether the individual has attained his qualification as a surgeon, physician, or an apothecary?—The former part of the document does, but the certificate states that the party is "qualified to practise medicine."

1776. Then do you consider this paragraph in your petition to be correctly worded, "That it is provided by this Bill that all legally qualified medical practitioners shall be registered, and that they shall all receive one and the same certificate, purporting that they are 'qualified to practise medicine'"?—That is the purport of the certificate which they are to receive.

1777. But does not the certificate show whether the individual has obtained his licence from the College of Physicians, or the College of Surgeons, or the Society of Apothecaries?—Yes, it does.

1778. You would not regard that as one certificate?—The certificate of qualification is one; namely, that the party is qualified to practise medicine.

1779. But still, can the public be deluded by such a certificate, when it shows where the individual obtained his qualification, and what is the nature of that qualification?—If the certificate had expressed that the party had been examined by the College of Surgeons of London, and that, therefore, he was a party qualified to practise surgery, I think there would have been no objection

to

to it; or if he were qualified to practise medicine, or to practise according to the particular body who has licensed him.

1780. You consider that the surgeon ought, by law, to practise in strictly surgical cases?—I consider that the document which he is to possess, should express what the nature of his qualification is. The College of Surgeons institute an examination in anatomy and surgery; and the certificate that they give is a certificate of a qualification to practise surgery. The College of Physicians do not examine on surgery, but on medicine, and they give a certificate of qualification to practise medicine. There has been no such thing hitherto as a general qualification for the profession. This certificate states that persons are "qualified to practise medicine," and there is an interpretation clause that medicine includes "physic, surgery, and surgical." In this way I think the certificate is calculated to deceive. The fact of a man having obtained the diploma of the College of Physicians, is no proof that he is qualified to practise surgery; but the interpretation clause of the Bill expressly provides that medicine includes surgery.

1781. If the public were deceived in such a case, would they not be deceived with their eyes open, inasmuch as the terms of the certificate clearly and distinctly denote whence the qualification has been obtained?—This is the very source of the inconsistency and deception. The document sets out with stating a special examination, and then deduces a general certificate of qualification. The particular diploma or licence can only prove a particular qualification.

1782. But supposing the same system of examination were enforced by law in all the three institutions, would there be any inconsistency in the certificate?—If all the medical bodies instituted the same examination, of course they would confer a common qualification.

1783. Then there would be no inconsistency in the certificate?—No; the certificate would then express the state of facts.

1784. Do you consider that a person who professes himself to be a surgeon should confine himself strictly to the practice of surgery?—I think that when parties have received their qualifications from a body which is entitled by law to give those qualifications, you must leave it to the judgment of patients to select those to whom they choose to entrust their health. To draw the line between surgical and medical practice is often extremely difficult; parties who are patients cannot make the distinction, and even medical men are often at a loss. I do not consider that it would be possible by law to point out the distinction between the lines of practice.

1785. And yet you object to this certificate because it does not endeavour to do that?—I object to that certificate because it does not express the true state of facts. The College of Surgeons has the duty of examining parties respecting their qualification to practise surgery. The College of Physicians inquire into the candidate's knowledge of medicine, and the Society of Apothecaries has been entrusted with the power to license apothecaries. The certificate, which is a legal document, should not go beyond the truth, namely, the legal fact of the person having been examined by a particular body, and thereby having been found competent to practise that branch of the profession.

1786. But the certificate does express that, because it does state whence the diploma or licence has been obtained. Then as it is known that there is the greatest possible difficulty; in fact, that it is impossible to draw the line of distinction between medical and surgical practice, and as it is known that surgeons practise as physicians, and physicians often practise as surgeons, that is legalized in the certificate, and all are empowered to practise medicine?—If it is the particular object of the certificate, according to your phrase, to legalize that course of proceeding, it appears well calculated to do so. Then there is another point: in the list containing the residences the particular qualification is not stated; for example, under the head of London, everybody would be put as a party qualified to practise medicine, and there would be no distinction between physicians and surgeons and general practitioners.

1787. Sir *R. H. Inglis.*] You refer to the latter half of Schedule (C.)?—Yes; there is an alphabetical list for towns, and under the head of London, all parties, physicians, surgeons, apothecaries, and persons who were in practice before the Apothecaries' Act, appear in one list, as persons qualified to practise medicine. Now suppose a party was ill, and he wanted to look at the register (although I think people do not call in their medical practitioners from looking at registers),

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ters), if a person from the country is taken ill in London, and he asks for this register, he looks, and he sees a name; he has a fever; some person comes to him, whose name he sees in the register, and asks him, "What is the matter with you?" He says, "I have a fever." The reply is, "You should not have sent for me; I should have been very glad to attend your wife, if she was going to be delivered; I am an accoucheur." He then sends for two or three others; he may send for a surgeon, who would attend him if he had a broken head, but who cannot attend him in fever, but who under the certificate is qualified to practise medicine; or he may send to a mere apothecary, who would say, "If you had a slight cold I could prescribe for you, but as you have a fever you must send for a physician." That would be the fate of a person looking at this register. He finds a number of people huddled together, who are all represented as persons qualified to practise medicine.

1788. Mr. *Wakley*.] You are now confining your remarks to the registration of the place of residence?—Yes, coupled with the certificate.

1789. But are you not entirely overlooking the first part of the schedule in which the names are registered, and the precise qualifications of the practitioners, and the dates of their diplomas or licences?—Yes. Then this person with a fever must ask the medical man to show him his certificate before he will find out whether he is a person duly qualified to take care of him.

1790. That may not be necessary; but are you not assuming this case, that a person might, in a country town, be taken suddenly ill, and be desirous to have the attendance of a medical practitioner, a gentleman duly qualified to practise?—Yes.

1791. You assume that he would refer to the name of the town and the list of persons qualified; do not you consider that the next thing he would do would be to refer to the name of the individual in the other list contained in the schedule, and there ascertain his qualification?—People do not like to take a great deal of trouble in matters of this kind. I do not think that a person who was ill would be likely to look beyond the name in the first list.

1792. Do you think that that would occupy a single moment?—I do not think that it would be done, and therefore it does not signify; it would not occupy any time.

1793. You are not opposed to a good system of registration?—I see no objection to it; there are conveniences in a good system of registration.

1794. Do not you think that the qualified practitioners of this country are entitled to a good registration?—The qualified practitioners are all registered.

1795. But they are registered in such a manner, that no person can discover their qualification, or their places of residence?—I think there is nothing easier than to discover that there is a regular list of persons licensed by the Colleges of Physicians and Surgeons.

1796. Are you aware that you have in your own list some thousands of names without any residence at all?—There are a great many parties who have never sent in their residence, and many who are dead are on the list, but they are put separately on the list.

1797. Without any place of residence?—The dead people have no places of residence.

1798. Have the others places of residence?—We have taken every pains to get the residences of all the members of the college. We have put advertisements in the paper, and taken all other measures to get the residences, and the residences are put to the list as far as they are known, and the parties whose residences are not known are in a separate list.

1799. But you have thousands of names without any residence attached to them?—Yes, the same inconvenience must attach to any registration. The members of the College of Surgeons are dispersed all over the British empire; you cannot tell whether they are dead, or where they are residing, in a vast number of instances; and you never can under any system of registration.

1800. You say that if you interpret the Bill rightly it legalizes the holding, by an apothecary, of any situation as a physician; or the holding by a physician of any situation as a surgeon, and also that it legalizes any person who was in practice before the 1st of August 1815?—All those parties are entitled to be put upon the register by the present Bill; and then I think there is clause 9, which repeals all restrictions and penalties, other than those contained in the Bill, and clause 17, which renders the holders of the certificate eligible to every professional situation.

1801. Is there any statute law at present to render it unlawful for any person to hold the office of physician in a public institution who is only a member of your college?—I am not aware of any.

1802. Or the converse?—No.

1803. Is the Bill, therefore, doing more than legalizing that which is not unlawful at the present moment?—The Bill seems to me to confer a legal sanction on a thing which would be improper, and which, in fact, is absurd.

1804. If carried into effect in particular instances it might be absurd, but do you object to the principle that all medical men should undergo, as far as may be, the same kind of examination, and prove their competency to practise in all the branches of their profession, before they are allowed to practise at all?—I do not see that it would be fit and proper that all medical men should undergo exactly the same examination; there are different departments of the profession, those of the physician, surgeon, and apothecary, or general practitioner, and the same qualifications are not required in all those departments.

1805. Are you for rigidly maintaining the distinctions which now exist?—I am not for anything rigid in the matter at all. The distinctions which now exist are not the offspring of law, but they are arrangements which have gradually arisen in the course of things, with a view to supply the wants of the community; they are found to answer their purpose, and they are in accordance with the habits of the public.

1806. Do you consider that a gentleman who is to practise as a general practitioner in the country should receive an efficient medical as well as surgical education?—I think it necessary that he should.

1807. And having received it, do you see any objection to his practising all branches of the profession?—He must do so in the ordinary course of things in he country.

1808. You do not object to it?—No, that is what is established, and answers the purpose very well.

1809. You consider that the operation of the Bill would be to melt down the profession into a single faculty?—It appears designed to accomplish that object. I rather think that the distinctions at present existing would subsist in spite of the Bill; but that seems to be the object as far as the Bill can do it, to reduce the profession to a single faculty.

1810. Is there anything in the Bill to prevent your continuing the examinations for the fellowship as you do now?—No, I do not think there is, except the indirect discouragement from this common certificate. This certificate seems to be put in the place of the particular evidences derived from the present governing bodies of the particular examinations that the individual has undergone.

1811. Could you not by your internal arrangements in the college hold out inducements to men of high mental attainments to belong to your institution, and to acquire those honours which you consider your institution is calculated to confer?—That is what the college does as far at it can do it.

1812. Do you find anything in this Bill to prevent your adopting such a course, or to interfere with your internal regulations?—I think that this common certificate, and the whole state of things under this common list, is calculated as far as legislative provisions can go to discourage us.

1813. Before your new charter was granted you had one list of members of your college?—Yes.

1814. And did not the names of Sir Astley Cooper and Mr. Abernethy appear as members upon that one list?—Yes.

1815. Did not the name of John Hunter appear as a member of your profession upon that one list?—Yes.

1816. The most distinguished members of the profession were all in that common list?—Yes. I am not speaking particularly of the College of Surgeons, but of the arrangements of the profession altogether.

1817. Was there any other list before the new charter was granted, than the list of members of the college?—No, there was not.

1818. Did you find that such arrangements had a levelling effect, and prevented men of high capabilities from belonging to the profession, and did they endeavour to study elsewhere, with a view to acquiring greater reputation?—Certainly not.

1819. Why do you consider that under the new arrangements provided for in this Bill, which is not of a levelling character, that effect would be produced?

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—I have not been speaking with regard to the College of Surgeons, or the distinction between members and fellows; my observations apply to the arrangements of the profession generally. The part of this Bill which provides for the registration of persons qualified to practise medicine, as far as any such arrangement could accomplish the purpose, I think would destroy the distinctions which at present exist, and exist beneficially to the public.

1820. Then does your objection lie rather to the principle of allowing all men to practise medicine indiscriminately, who have undergone a medical examination, or merely to the manner in which their names would be entered in the registration to which I have referred?—My objection to the registration part of the Bill is, that it is calculated to do away with the existing distinctions of the profession, physicians, surgeons, and general practitioners, and to confound them all in one common mass of persons, "qualified to practise medicine."

1821. Is your objection virtually against their being so blended in the certificate, or against the practice itself; in other words, do you object that a surgeon should practise medicine?—I do not object to the existing arrangements of the profession, or the existing modes of practice.

1822. You will perceive that that is not an answer to the question; do you object that a surgeon, calling himself, if you please, a pure surgeon, should practise medicine or not; in other words, do you consider that a person practising as a pure surgeon avowedly, should strictly confine himself to the treatment of surgical cases?—I do not think it possible to confine physicians strictly to medical cases, or surgeons to surgical cases, nor do I think that it would be any advantage that they should be so confined. I think it is desirable that they should be well educated, and that the public should have the choice of being attended by those in whom they have the greatest confidence. I think that the qualification should be according to the department of the profession that the parties belong to. I see no reason for interfering with the existing division of the profession into physicians, surgeons, and general practitioners; the public do not complain of that division, and the profession are not dissatisfied with it, and I see no reason whatever for the very important alteration which is indirectly attempted by this Bill.

1823. If the present certificate denotes that a person has undergone an examination as a surgeon, and he is practising medicine, that is, treating medical cases, is there not some impropriety of conduct somewhere?—No, the public choose to be attended and to entrust their health to those in whom they place the greatest confidence, and if those parties have been well educated and examined, I see no objection to a party in a surgical case putting himself under the care of a physician if he chooses, or *vice versâ*. The general course of practice is in that particular branch to which the individual belongs, but the boundaries are indistinct, and you cannot define them by law.

1824. The certificate in Schedule (B.), and the mode of registration in Schedule (C.), indicate to the public from what place the individual has derived his qualification, and the period at which he obtained it; can you conceive that there is any objection, on better reflection, to such an arrangement?—I object to giving one certificate to all members of the profession as being duly qualified to practise medicine; I do not object to a certificate that shall express what the qualification is, because it is expressed in the letters testimonial which the individual possesses, that he has been examined as a surgeon, and that he is qualified to practise surgery, or that he has been examined as a physician, and that he is qualified to practise medicine, or that he has been examined as a general practitioner.

1825. And yet you admit that it is not possible to draw a distinct line, or for an individual to confine himself to the practice of surgery?—The difference, as I have said, is not well defined.

1826. In what department of medical knowledge do you conceive that the surgeon ought to be educated in which the physician ought not?—The performance of surgical operations, the management of accidents, and a great deal of manual work; those are things which physicians never undertake.

1827. Now, I will put the same question with regard to physicians; in what department of the profession do you consider that a physician ought to be educated in which a surgeon should not be educated?—I do not think that there is any branch of medical science that the physician is educated in, in which the surgeon ought not to be informed. Those scientific principles which are the

basis

basis of the practical art as conducted by physicians are common to the physician and the surgeon; the extra education must be that of the surgeon in the manual part of the profession.

1828. Looking to what you regard to be a competent education for physicians and surgeons, take men of the highest class in each, which do you consider the higher department of the profession, that of surgery strictly so called, or that of medicine so called?—I think the public consider the physicians to be the highest department.

1829. But you have stated that the public are incapable of judging in these matters; I wish therefore to know your opinion?—I do not think they are incapable of judging upon such a point as that; the public are not capable of judging of the amount of medical skill of individuals. But in point of rank the Herald's College would put physicians first. They study and obtain degrees in universities, and have always been justly respected as learned men. English physicians have generally been educated at Oxford or Cambridge with the nobility and gentry of the realm, and thus in public estimation they hold the highest social rank in the profession.

1830. My object is to ascertain how you would rank the physicians and surgeons?—I should be inclined to put them on a par, but I am not at all unwilling to concede the priority to the physicians; they are more learned and receive a better education. I wish surgeons received as good an education as they do.

1831. You have expressed your approval of the new charter of the College of Surgeons?—I think it has worked very well.

1832. Do you recollect under what circumstances that charter was conferred on the College?—That is a large question, the circumstances under which it was conferred. I remember that a member of Her Majesty's Government considered that it might be expedient to make some change in the profession, and I suppose that led to the new charter of the college, which, as I apprehend, was intended to form part of a more general measure relative to the medical profession. I do not suppose that the charter of the college would have been granted in reference to the college alone; I should think it was part of a general scheme.

1833. Did the council take the initiative in this matter?—No.

1834. In the preamble of the charter it states that you presented a memorial to the Crown praying that it might be granted?—I dare say we did; but that was not the first step.

1835. Was not that memorial the first proceeding?—It might be apparently the first, when you came to see the public representation of the affair, but that was not the very commencement of the business. If a charter is to be granted, you must present a certain petition asking for it.

1836. Does your memory enable you to state what was the first proceeding in the business?—I think the first proceeding in the business was, that the Secretary of State for the Home Department was kind enough to send to the college a sort of sketch of an intended Bill for the reform of the medical profession, in which this change in the constitution of the college was included.

1837. Were the heads of the charter furnished to the council?—I do not think the heads of the charter were furnished, I think that some of the heads of the general measure were furnished.

1838. Do you recollect what proceeding was taken in consequence of the first application from the Secretary of State?—The first proceeding was to do what the Secretary of State intimated to the council; viz. to see those heads and to form an opinion respecting them.

1839. Did the plan of the new charter originate, as far as you remember, with the Secretary of State, or with the council?—I think the Secretary of State had more to do with it than the council as to the general plan of the charter, but it was ultimately determined upon after a great deal of consideration and many conferences. I will not pretend to distinguish accurately between the amount which was contributed by the Secretary of State and the modifications or alterations which might have arisen from conferences with, or consideration by the council.

1840. Do you recollect whether any suggestions were made by the council, and whether those suggestions were adopted?—I dare say they were, but this was a considerable time ago, and it was a complicated business; there have been

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a good many meetings of the council on many other matters, and I cannot therefore pretend to say exactly.

1841. Are not persons ineligible to be admitted on the council who are practitioners in midwifery?—They are.

1842. Did that proposal originate with the Secretary of State or with the council?—I think it is very likely that that originated with the council.

1843. Do you recollect whether that was discussed in the council?—I recollect that it was discussed, because there was a difference of opinion upon it.

1844. Do you recollect whether that suggestion was contained in the original sketch which you received from the Secretary of State?—I do not think it was, but I cannot speak positively upon that, and I would not wish to speak to it without being sure that I was correct.

1845. By the charter you were empowered in the first instance to nominate, at your pleasure, within a year a certain number of members as fellows?—Yes.

1846. How many did you nominate in the first instance?—The charter required the council within three months to nominate a certain number, not fewer than 250 and not more than 300; and then the charter further empowered the college to nominate other members within a year, apparently under the consideration that there might be omissions and something wanting to be rectified, and under that power 300 more were nominated before the end of the year.

1847. Sir *J. Graham.*] Were these the words of the charter (*a paper being shown to the Witness*): "The council of the said college with all convenient speed after the date of these our Letters Patent, and before the expiration of three calendar months from the date hereof, and in such manner as the said council shall deem best, shall elect to be fellows of the said college any such number of persons, being members of the said college, and not being in the whole less than 250 nor more than 300, as the said council shall think proper. It shall also be lawful for the council of the said college, at any time or times after the expiration of the said three calendar months, and before the expiration of one year from the date hereof, by diploma or diplomas under the seal of the said college, and in such form as the said council shall think fit, and without any fee, to appoint any other person or persons, being a member or members of the said college, to be a fellow or fellows of the said Royal College of Surgeons of England"?—Yes, several have come in for examination since those were nominated; the latter were the older members of the profession, and many of them have died.

1848. Mr. *Wakley.*] Do you recollect what particular rule you observed in electing the fellows in the first instance; that is, with regard to the selection of the persons whom you deemed the best qualified to occupy the position of fellows?—Yes. I would say in the first place that the council determined not to make the nomination an individual question in any case, but to take them by classes. In the first place they took the surgeons of all the hospitals in England and Wales which are recognized by the council as schools of surgery; all recognised teachers of anatomy and surgery; then persons having considerable reputation as surgeons, and called in to consultation in surgical cases by the practitioners in their neighbourhood, although they had no connexion with hospitals. Then next they took a certain number of medical officers in the military and naval service of the country, recommended by the heads of the respective departments; the council had not a knowledge of the qualifications of those gentlemen, and therefore referred upon that subject to the director-general of the army, and to the physician-general of the navy. Next they took gentlemen practising as surgeons in London, who though not connected with hospitals, were considered eligible to the council under the former charter, and according to former usages; those were parties who generally had practised surgery simply under that denomination, and parties who had a kind of right recognised by usage to come on in their turn for nomination to the council; some of those were put upon the list of fellows. Next they took persons distinguished for the cultivation of the kindred sciences of anatomy, physiology, and natural history, such as Professor Owen, Mr. Mantell, a gentleman of the name of Newport, a general practitioner, who had gained the medal of the Royal Society, and some other members who had distinguished themselves in the cultivation of science. Lastly, other names were inserted for special reasons, being principally those of teachers who had been recognised by former acts of the council; for instance, persons who had been teachers of anatomy and surgery, or persons holding important

important public offices; among the latter were four senators of the London University.

1849. Were surgeons of public dispensaries selected?—Yes. I think the surgeons of dispensaries in London were admitted.

1850. And of infirmaries generally throughout the country?—The surgeons of those recognised by the college were all placed on the first list. Subsequently the college put upon the second list the surgeons of hospitals in the country, which were not recognised by the college, and also surgeons of dispensaries.

1851. How are the appointments of surgeons to infirmaries and hospitals in the country made?—There may be particular rules in each case; I do not know of any general rules that are applicable.

1852. Are they in general elected by the subscribers?—Yes.

1853. In other words, by the public?—Yes, in the same way as in London by the governors.

1854. The public having appointed those persons to the institutions you have named, the council approved of the proposition of making them fellows of the college when they had the power under the new charter?—Yes.

1855. Did you institute any inquiry in such cases to ascertain whether the public had made a good choice, and whether the persons whom they had selected were pre-eminent above their professional brethren for the services which they had rendered to surgical science?—No, such an inquiry would have been impracticable; they were appointed on the ground of their holding important public situations.

1856. In one part of your examination, you stated that the public were not capable of judging of medical skill?—I stated that in reference to the confidence reposed by patients in their medical attendants. The case of a subscriber to an hospital voting for a surgeon is totally different from that of a patient sending for a medical man. Although unable to estimate professional skill, the public can judge well enough of professional character. In the case of public professional appointments they usually select the persons best qualified.

1857. Such appointments you believe are not generally obtained by improper means?—I am not acquainted with any instance of their being obtained by improper means.

1858. Not the office of surgeon or physician to a public institution?—I cannot deny the possibility of such a thing; the question is a very general one. I cannot state any particular instances. I can state generally my belief that the best qualified men get those situations; it has been so as a general result.

1859. That is your impression?—I am sure of it, because I know the individuals.

1860. The college having to confer an honorary title and an important privilege, adopted no course of inquiry to ascertain what was the competency of the individual in each particular case, otherwise than the approval which had been bestowed upon him as regards his professional reputation by the public who were living in his immediate vicinage?—We considered that the best criterion.

1861. Then you believe that mankind are capable of judging of medical skill?—I think they will generally select the persons best qualified. I do not think that mankind are capable of judging of the skilfulness or unskilfulness of a medical man; if a person is ill and sends for a physician or surgeon, if he has administered to him a quantity of medicine, he does not know whether that is or is not the proper treatment; but a gentleman living in the country, and subscribing to an infirmary, is pretty well acquainted with the general reputation for skill of the medical men who live around him.

1862. If you can rely upon the judgment of the public to the extent you have described, what danger do you fear can arise to the character of the profession from the adoption of the certificate as it is found in the Schedule of the Bill before the House?—I have said that I think that the good sense of the public would neutralize the effect of your Registration Bill.

1863. Mr. *Acland.*] Does not the practice of a surgeon in a public hospital, in the face of his professional brethren, afford the strongest test of professional competency which your profession has?—I know of no better.

1864. Is it not that which brings the medical man more nearly into the position of the barrister than any other?—I think it is.

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1865. Sir *J. Graham.*] Was not the selection of fellows under the new charter, while it was allowed to be nominative, made once for all, and under the charter it cannot be repeated?—The nomination could not be repeated after the expiration of 12 months; it was at an end then.

1866. It was necessary to form a constituent body under the charter?—There would not have been a constituency unless parties had been so nominated.

1867. Henceforth your power of nomination is at an end?—Yes, the fellowship is now confined to those who have undergone a more extensive education, have a higher degree of qualification, and have attained a greater age.

1868. Whatever defect may have existed in the nomination granted for a year has now ceased?—Entirely.

1869. Henceforth for ever, under the charter, admission must be obtained by test of merit?—Yes; the nomination was only a temporary contrivance to produce a constituency at the moment, which could not have been created in the regular course of examination for a long time.

1870. The imperfections in that system, whatever they were, are now at an end?—Yes, and the evils and imperfections of the thing, if impartially looked into, will be found to have been exceedingly few. I am rather surprised that they were not more, considering the nature and difficulty of the affair.

1871. Mr. *Wakley.*] Great improvements in the nature of the college have been effected within the last 20 years?—I think the efficiency of the college and its utility as a public institution have been much increased in the last 20 years.

1872. Sir *J. Graham.*] Looking from the height which you occupy in the profession, and considering the matter dispassionately, do you think that the 600 most eminent surgeons in England are now fellows of your college?—I should say that there is no one surgeon of great eminence that is out of the register; I do not mean to say that they are all eminent men that are in it.

1873. But on the whole, are the 600 most eminent surgeons in England and Wales now fellows of the college?—No doubt of it; I will state, without any hesitation at all, that there was not a single name put upon that list of fellows from any private feeling or favouritism, or a single name left out from any private feeling against that individual.

1874. Mr. *Wakley.*] Did you introduce the names of all whose schools you recognized?—There may have been an omission or two.

1875. You stated that none were excluded from any private feeling?—None were excluded from any private feeling.

1876. Is it the fact that you are now receiving the certificates of the competency of individuals in anatomy and surgery from persons whose names have been excluded from the list of fellows of the college?—No, that is not the fact.

1877. Is it not so with regard to one individual?—It is; you said persons.

1878. It is the fact that there is one exclusion?—It is; that individual was not placed on the list.

1879. Sir *J. Graham.*] Was that individual excluded on account of personal prejudice, apart from demerit, as it appeared to the council?—Certainly not from personal prejudice.

1880. Mr. *Wakley.*] Is his competency as a teacher admitted?—It is, and I believe that he is competent in the branches that he teaches.

1881. Sir *R. H. Inglis.*] His demerit then was not professional but personal?—Exactly.

1882. Mr. *Wakley.*] Do you consider it desirable that the qualification of practitioners should be equalized as far as possible throughout the kingdom, and that the right of practice should be general upon that equality of qualification?—I think it desirable that practitioners should be as highly qualified as you can make them; that they should possess as much knowledge as possible.

1883. In your discussion upon the subject in the council did you at all agree upon any plan for making the qualification equal throughout the different parts of the United Kingdom of Great Britain and Ireland?—The council has not had to consider such a question as that; the council is the council of the College of Surgeons of England, acting under their charter, which defines the objects for which they are created, and it is not their business to endeavour to equalize the education throughout the whole of the profession.

1884. But you are aware, in reference to the Bills of the Right honourable Baronet, that that proposition was contained in all the Bills that he submitted

to

to Parliament?—I will not speak to all the provisions of all the Bills; I do not recollect that that was one of the provisions of the Bill.

1885. It was proposed that there should be a mode of equalizing the examinations and the education in the different colleges and universities, and that if that proved satisfactory, and they could act upon it, the right to practise should be general; you would agree to that?—Yes, supposing sufficient security is given for the amount of education, and the nature of the examination; that of course would be a necessary condition to giving a general liberty of practice.

1886. Then I wish to ascertain what the council deemed a sufficient security?—That I cannot state. I cannot state what the council thought upon a vast variety of things, and upon a vast variety of occasions, with reference to this matter.

1887. You are aware that all the curricula and ordonnances and bye-laws were to be submitted, under the Right honourable Gentleman's Bill, to the Council of Health?—Yes.

1888. And that council had full power to prevent your laws and regulations from being carried into effect if it should disapprove of them?—I dare say it had. I do not remember the powers exactly, or whether they were absolutely defined. I rather think there was some very general power given, but there was nothing definite expressed as to that power, and one cannot say what would be the best form in which to give it.

1889. You have stated in a previous part of your examination that you did not consider a council of health was necessary for the purpose, but that the whole should be left to the colleges?—I think that the determination of the course of education, and the nature and extent of the examinations, would be best left to the examining bodies. I think that they can regulate those matters in the best way.

1890. If there be not an authority established riding supreme over the control which the different colleges can exercise, how is it possible that anything like uniformity of qualification can be obtained?—I have not expressed myself in favour of uniformity of qualification, because I do not know that it is possible to obtain it.

1891. Do you not consider if you have discovered what is proved to be a good system of education, and an efficient education, and one which affords ample security to the public for the competency of practitioners, that that should be required from all institutions as nearly as possible?—It would be desirable that as good an education as possible should be maintained, but I imagine that in medical education, as in other things, you cannot have things uniform. In Scotland the course of education differs very much from ours, and so again in Ireland; but the education should be in regard to length of time and the subjects taught as nearly equal as possible, and as far as possible an equally good education.

1892. You say that the system in your college is as perfect as possible?—I think it answers all the purposes very well indeed.

1893. You think that it provides that the public shall have practitioners who are competent to discharge the duty entrusted to them?—Yes.

1894. Do you think that any really unqualified men obtain the diploma?—Medicine and surgery are practical arts, and before a person has begun to practise he cannot be thoroughly qualified, it requiring great experience to give a person complete skill in medicine or surgery; therefore when you ask whether a person is qualified when he obtains his diploma, I do not mean to say that the diploma of the College of Physicians or Surgeons will be a guarantee that that individual is at once as competent to undertake the care of diseases or accidents as parties who have had larger experience.

1895. Do you in your opinion take sufficient steps to obtain full information with regard to persons applying?—Yes.

1896. Has not a curious instance occurred lately in which a tradesman obtained a diploma, who had been studying medicine for about 12 months?—No, that is not a true statement of the case.

1897. What is the correct statement of the case?—The correct statement of the case would be to this extent, that a party presented false certificates to the college, containing incorrect representations on certain points, and the college was to a certain extent imposed upon, as to the character or previous position of

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that party; but by those certificates he had been studying the profession more than 11 months.

1898. Thirteen?—It was more than 13; if you wish to have an explanation of the exact state of the case, I can give it you.

1899. Will you do so?—In the first place, this was not a young man coming for his examination at the conclusion of his education, at the age of 21 years, but he was a person 40 years of age; he presented himself for examination at the college as a person who had been some years engaged in practice.

1900. Sir *R. H. Inglis.*] As the party has been described as a tradesman, will you be good enough to state in what trade he was?—He was a pastrycook and confectioner. Heretofore it was not the practice of surgeons in the country to furnish themselves with the diploma of the Royal College of Surgeons of England; in fact, the majority, 40 years ago, did not take out the diploma. It was not legally necessary; indeed it is not legally necessary to enable parties to practise now, and it then was not the custom; the diploma did not stand in the same estimation that it does now. The consequence is, that there have been many highly respectable practitioners in the country practising as surgeons who did not possess the diploma, and there are many now who do not possess the diploma of the College of Surgeons. The senior surgeon of the largest hospital in a large city in England at this moment is not a member of the College of Surgeons, and the late principal surgeon to the Infirmary in another county town was not, and is not at this moment a member of the College of Surgeons, although a gentleman in large practice, and enjoying the confidence of the country, and no doubt there are others similarly circumstanced. In process of time the estimation of the diploma has so increased, that no man goes into practice without possessing it, and the party who has gone into practice previously now finds himself placed at a disadvantage; he is pointed at by his competitors as a party not having a diploma. Then again, there is a recent order of the Poor-law Commissioners, requiring the diploma of the college as a qualification for the appointment of surgeon to any union, and many surgeons were in danger of losing their situations by not having that qualification, and they came to the college, and said, "We want to be examined for the diploma." The college then said, "You have not received an education according to our regulations." They said, "It is very hard upon us; these regulations did not exist when we were educated; we have been practising as surgeon to this or surgeon to that institution, and now we cannot be re-appointed, for it is an annual appointment, without your diploma." The council of the College of Surgeons thereupon decided, in the first place, with respect to students, for there had been considerable alterations in the curriculum, that students should be examined under the curriculum in force at the time they began their education; and secondly, that gentlemen who had been engaged some years in practice should be admitted to examination on such evidence of education as the court of examiners might think fit, the council considering that there was great hardship in those cases, many of those persons being kept out of situations which they had held for some time, and who ought therefore to have an opportunity of presenting themselves and getting the diploma of the college. The court of examiners have, therefore, admitted under that description several persons who came up as practitioners without exacting of them evidence of having gone though the existing curriculum, but they required evidence of a certain amount of education. The gentleman in question came up with evidence of 15 months' study, and an extra certificate of diligence, and I believe that he had worked extremely hard, and made the very best use of his time, and he produced the certificates of a physician in large practice in Somersetshire, of another gentleman, physician to a lunatic asylum, and of a surgeon to the navy, that he had been in the study and practice of the profession 10 or more years. Of course the college could not know whether this person, coming out of the country was a practitioner or not. Here was a man of 40 years of age, and he sent in his statement that his family were dependent upon his professional exertions, and supported by those certificates, (and there was also a certificate from a near relation of one of the highest men in this kingdom, who had been under his care and his family, and other evidences of the same kind,) the court of examiners saw no difficulty in admitting him to examination; he underwent an examination, and received a diploma. Now the charter has of course contemplated this case, because it provides that if any person has received a diploma in consequence of any fraud, false statement, or imposition, the diploma

diploma shall be recalled; the consequence of which is, that the council having inquired into the matter, having ascertained the incorrectness of these statements, and having heard the individual, has recalled his diploma.

1901. Mr. *Bannerman.*] Has he given it up?—He has not given it up, and we cannot extract it from him, but his name will be omitted from the printed list. The diploma has been recalled, and the council have tendered him back the money that he paid upon receiving the diploma. The possibility of such a case has been anticipated by the charter.

1902. Mr. *Wakley.*] His name will be struck out of the list of the college?—Yes.

1903. How happened it that you neglected the observance of your own regulation with reference to study on this occasion?—I have mentioned already that a discretionary power had been entrusted to the court of examiners, of admitting to examination for the diploma gentlemen who had been for some years engaged in practice, although they might not have passed through the course of education prescribed in the regulations. The council considered the case of these gentlemen hard in the circumstance of the diploma being suddenly required in cases where it had not previously been necessary, and they adopted the course I have mentioned as a remedy for the hardship.

1904. Sir *R. H. Inglis.*] Have you or have you not regarded persons in the situation of the individual with respect to whom you have just given evidence in the same light as persons practising before the 1st of August 1815 would be regarded, in the case of the Apothecaries' Society?—Exactly, that is the whole case, and a great many have been examined and received diplomas in consequence of that circumstance. When the regulation of the Poor-law Commissioners first came out, there were many applications to the college, and there were several individuals who would have been hardly dealt with if they had not been considered and treated in that way.

1905. Mr. *Wakley.*] In the case of the pastrycook, you had no evidence that he had been a practitioner?—We had the certificates that I have mentioned to you, of a gentleman who had been physician to the King of Hanover, of the physician to a county lunatic asylum, of a surgeon in the royal navy, and of some very respectable persons who employed him.

1906. Did any one of them state that he had been a practitioner in surgery?—Whether in surgery or not I will not say, but that he had been practising in the profession for 10 years. The truth is, that this gentleman is in considerable practice, and has the confidence of the people in the district where he lives, and I believe more so in consequence of the college having withdrawn the diploma.

1907. Sir *J. Graham.*] That fact rather confirms your general remark, that mankind are not the best judges of the real attainments of medical practitioners?—Yes.

1908. Mr. *Wakley.*] Do you know in what department of the medical profession he is practising?—As a general practitioner, but I believe he is more particularly devoted to homœopathy.

1909. Was that gentleman examined in the usual way?—He was, and he passed through a very fair examination. I believe he had been studying anatomy, that he had been fond of chemistry and of making experiments, that he had read medical books, and had not devoted much time to his business, which was conducted by his wife and assistants.

1910. Do your regulations with regard to the examination of candidates specify that you make exceptions in such cases?—I can read something which the Council published in reference to that matter: "The Court of Examiners having found that erroneous statements have lately been published respecting the mode in which gentlemen engaged in the practice of surgery may obtain the diploma of the College, and that other candidates for the diploma have experienced difficulty and inconvenience from inattention to the regulations, by which the required course of study has been from time to time augmented, or from inability to comply with those regulations, have resolved that gentlemen who were practising surgery prior to 1835, be admitted to examination on producing proofs of such anatomical and surgical education as may be deemed sufficient by the Court of Examiners." That gave a discretion which enabled the court to let in practitioners who had been unpleasantly and injuriously affected by the new regulations, especially in reference to the Poor-law Unions: "That other candidates be admitted to examination upon the production of the several certificates required

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by the regulations in force, when they began their professional education by apprenticeship or by attendance on lectures or hospital practice."

1911. It was under the dispensing power of that resolution that this party was examined?—Yes, that resolution has been applied to those who have been several years in practice.

1912. It operated in the case of this individual?—Yes.

1913. What is the date of that?—November 1842; it was about the time that the Poor-law Commissioners published their resolution requiring the diploma; there were cases of great hardship brought before the Court of Examiners at that time.

1914. You quite disapprove of the apprenticeship required under the Apothecaries' Act?—Yes, compulsory apprenticeship I quite disapprove of.

1915. You said that you thought the Bill would qualify a man to practise as a physician of St. Bartholomew's Hospital who was a surgeon or apothecary?—I understand that certain parties are entitled to be put upon the register, and that thereupon they receive a certificate, and that no other legal qualification except that certificate is required to hold all kinds of public appointments in the profession.

1916. At the present moment, if the governors of that hospital chose to elect the pastrycook, who lately successfully underwent your examination, is there anything to prevent their electing him as a medical officer of that institution?—No, nothing by the law, but this Bill would give him a legal qualification to hold such office.

1917. Is he legally disqualified now?—I do not know that he is; it seems a strange thing to say that a man, who is in practice as an apothecary, and who receives a certificate under this Bill, shall be capable of holding every kind of medical appointment, from the highest to the lowest.

1918. You know that it is so at this moment, and that it is only prevented by the good sense of the managers of those institutions?—Yes; it is prevented by the good sense of the managers of the particular institutions.

1918*. You say that the colleges might register with very little additional trouble, by making additions to their own list?—I think that they might blend their lists into one, and would do so if Parliament desired it.

1919. Have the heads of the college been consulted upon the subject?—They have not. It is a considerable trouble to keep a list of the members of the College, but it would not give much more trouble to blend that with the two other London lists every year.

1920. Would you prefer publishing it in classes?—The register might be alphabetical, specifying the qualifications under each name: "A. B. licensed by the Society of Apothecaries;" "C. D. diploma of the College of Surgeons," and so on.

1921. If a man held three qualifications what would you do?—Put them all in; you may have an alphabetical register of the whole, expressing the particular qualifications of each individual.

1922. Is not that the registration adopted in this Bill?—One part of it is.

1923. You see no objection to physicians and surgeons and general practitioners being registered alphabetically, provided their qualifications are stated as in this Bill?—None at all.

1924. If a man has undergone his examination and received his licence in Edinburgh or Ireland, and he desires to practise in England, you do not consider it necessary that he should undergo a further examination?—Not if proper regulations are made to insure equal education and equal examination.

1925. If that point is secured, you would wish him to be admitted as a member of the college here without examination?—Yes.

1926. And without the payment of a fee?—I do not say that; there are various matters connected with the payment of fees that are of some consequence; if he comes for his advantage, I do not know why he should not pay a fee.

1927. A practitioner going to Scotland ought to pay a fee?—Yes; I do not think Scotland will get many fees in that way.

1928. Mr. *Acland*.] It would not necessarily be the same fee?—No. It might or it might not be right to make them pay the fees; fees are applicable to a variety of purposes. Take the case of the College of Surgeons of London; the fees afford the means of sustaining and increasing what may be called the great

great national museum of anatomy, physiology, and pathology, a collection which does honour to the country, for nothing similar to it exists anywhere else. The council have collected the most extensive medical library in the kingdom. The fees received by the College afford the means of accomplishing these and other important public purposes.

1929. Sir *J. Graham.*] You continue annually adding to your library and extending your museum?—Yes, constantly; both museum and library receive large additions every year.

1930. Since John Hunter's time has not that museum been doubled?—Yes, considerably more than doubled.

1931. And that has been at the expense of the College of Surgeons?—Entirely.

1932. Does it appear to you that if persons coming from Scotland or Ireland to practise in London, are admitted to equality of privilege here, if they enjoy the benefit of the museum and its library, they should contribute, upon entrance to the college, in the shape of a fee?—They would purchase the privileges very cheaply by paying the fee.

1933. Free access to that museum and to that library is cheaply purchased by the payment of the fee?—Yes; and the college has in its service the very first talent in the kingdom, for managing, displaying, and illustrating the museum.

1934. Something has been said about pure surgery; the shades between the practice of the physician and the surgeon run into each other, and can hardly be distinguished?—They cannot be distinguished accurately.

1935. Though pure surgeons exist in London, there is no etiquette in the profession which prevents a pure surgeon being called in by a patient suffering from an internal disease not requiring surgical aid, to prescribe and treat the malady?—None at all; the surgeons and physicians meet in consultation reciprocally on medical and surgical cases.

1936. And there is no etiquette of the profession preventing or restraining surgeons and physicians being consulted reciprocally in medical cases?—None at all.

1937. The public therefore enjoy the benefit of consultation of men of eminence in their separate departments, without any hesitation as to their aiding each other, in ministering to the wants of the patient?—Exactly.

1938. On the other hand, you have formed the opinion that subdivision, as a general rule, leads to excellence in each department?—I am sure it does, whenever the science of medicine is cultivated to a great extent, and carried to the highest point, those divisions have been found necessary, as being conducive to the full promotion of science.

1939. But the distinction is not in practice carried so far as to cut off the patient from the free exercise of his choice in consulting medical men?—No.

1940. Mr. *Wakley.*] You have stated that there is but one pure surgeon in Scotland, and that the surgeons belonging to the College of Surgeons in Edinburgh correspond in some respects to the members of the Society of Apothecaries in this country?—They are general practitioners, as I am given to understand.

1941. Have you had occasion, at any time, to examine the fellows or licentiates of the College of Surgeons of Edinburgh?—Yes.

1942. Have you found them a deficient body in any respect?—No, I have not found them deficient as a body; of course individually there are some good and some bad, like those from other places.

1943. Do not you consider the College of Surgeons of Edinburgh an institution of very considerable repute?—It may be, I do not know much of its repute.

1944. Mr. *Acland.*] Will you state what is the objection to the practice of midwifery being allowed by members of your body, seeing that it is practised by members of the College of Physicians?—There is no reason against surgeons practising midwifery; you allude to the disqualification as to fellowship; I do not approve of that disqualification.

1945. Sir *R. H. Inglis.*] You have expressed a strong opinion against the present Bill; have you, or have any of the first medical men in any branch of the profession, any personal interest that could be affected by the success of such a Bill?—I am not aware of any.

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1946. Your objection is founded more upon a view that it would injure the profession in future than that it would injure the leading men of the day?—That is the view I take of it.

1947. Mr. *Acland.*] You stated that you wished the surgeons received as good an education as the physicians, and you also stated that after the year 1850, you would require them to produce evidence of an education equal to the master of arts' degree; is it your opinion and expectation, that by that time surgeons will be found to go to the university for their preliminary education?—We should hope so, but I cannot say individually that I expect it. I think that taking the expense and the time occupied, the profession does not hold out a sufficient prospect of remuneration to induce them to do it.

1948. If it were possible for the universities to close their general education at two years instead of three, and then they could commence their professional education, such a result would be desirable?—If the degree were conferred under circumstances requiring a less amount of residence, that would facilitate the matter.

1949. Mr. *Bannerman.*] You stated that the Secretary of State had the power to revise your bye-laws?—The Secretary of State has not the power of revising all the bye-laws, but a new bye-law must be presented to the Secretary of State for his sanction.

1950. Has he ever exercised the right of veto?—I think that every law that we have presented has been approved by the Secretary of State.

1951. With regard to the pastrycook, you stated that you had recalled the diploma and tendered him back the money that he had paid; have you any power to insist upon the diploma being given up?—The language of the charter is, that the council shall recall the diploma, and the way in which they recall the diploma is, to write to the individual, calling upon him to give it back again, but we have not any power to make him give it back.

1952. Mr. *Wakley.*] Had you any answer from him?—No.

1953. Mr. *Bannerman.*] He appeared with certificates which would justify you in examining any gentleman, but these certificates were false?—They were; it was proved to our satisfaction, for the charter requires that the party shall be heard; that is, he is to be informed that a meeting will be called, at which he may attend and give an explanation, and he did attend; the party therefore is heard before his diploma is recalled.

1954. But you have no power of punishing a party who gives a false certificate?—No.

1955. Mr. *Wakley.*] Would you object to confer upon the members of the college generally the right of electing the council?—That would be, in my opinion, a hazardous experiment. I do not know what the result of it might be. I think the right of election is much safer where it now is.

1956. What evil consequences do you apprehend from conferring on the members generally such a power?—I do not like universal suffrage in any way.

1957. That would not be universal suffrage, but merely conferring the right upon those who were members of the college, and whom you have admitted by examination as qualified to practise surgery?—They are, in my opinion, too numerous a body for election.

1958. Is that the only objection you have?—I cannot tell what would be the result. I see that the institution goes on well as it is, and my wish in all cases is to maintain arrangements that answer their purpose well.

1959. Sir *J. Graham.*] Supposing a single faculty were admitted, and that the effect of the establishment of a single faculty were to raise the standard of medical education generally, provided you left the business of chemists and druggists unregulated as it now is, and without any check, would you not see great danger in a great extension of empirical practice of chemists and druggists?—That kind of practice would of necessity be greatly increased on such a supposition.

1960. Are you satisfied with the present position of chemists and druggists?—I think that they ought to be regulated by law; they have delicate and important duties; at present their knowledge is not in any way tested.

1961. Is not their practising over the counter attended with danger?—Yes.

1962. Mr. *Acland.*] Do you consider it possible to prevent that?—I doubt it. Poor people cannot afford to employ a well qualified practitioner. For one-

sixth

sixth of the expense, or even much less, they get what seems to them to answer the purpose equally well from the chemist and druggist.

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1963. You have stated that there is not sufficient remuneration to encourage medical men to undergo a very extended education; is not that one reason why we should not attempt to raise the education of medical practitioners to too high a point?—Yes; I think it has been carried as far as it can be safely.

Veneris, 25° *die Junii*, 1847.

MEMBERS PRESENT.

Mr. Acland.	Mr. Hamilton.
Mr. Aldam.	Right Hon. T. B. Macaulay.
Mr. Bannerman.	Mr. Wakley.
Mr. Dennistoun.	Colonel T. Wood.
Sir James Graham.	

THE RIGHT HON. T. B. MACAULAY, IN THE CHAIR.

Sir *Benjamin Collins Brodie*, Bart., F. R. S., Examined.

1964. Sir *J. Graham.*] YOU are a Member of the Council of the College of Surgeons?—I am.

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1965. How long have you been a member of the college?—About 40 years.

1966. And once President?—Yes.

1967. Mr. *Wakley.*] How many years have you been a member of the council?—About 15.

1968. Sir *J. Graham.*] You have taken an active part in instructing young men about to enter the surgical profession?—I have.

1969. How long experience have you had in such instruction?—In some way or another from the time when I first became a member of the college, I have taken a part in the medical education of young men, and older men too.

1970. Have you observed a progressive improvement, or otherwise, in the attainments of young men studying surgery?—I think the science is much improved, and that the best-educated young men are better educated than they were then; I am not aware that there is much improvement in the education of the great mass of the students.

1971. But the most accomplished of the year now, are more accomplished than those who had made the greatest proficiency when you first began instructing?—Certainly. Perhaps I had better explain what I mean rather more at length. With respect to the qualifications of the great mass of the young men in the medical profession, the constituted authorities require of them more knowledge than formerly; but they are in the habit, before the examination, at the Apothecaries' Hall especially, to resort to persons to cram them, with a view to enable them to pass their examinations; in this manner a great deal of time is wasted, and, therefore, I very much doubt whether the great mass of the medical students are, in consequence, really better educated than they were when I was young myself.

1972. Is that system of cramming for examinations confined to the Apothecaries' Hall, or is it extended also to the examination before the College of Surgeons?—To a certain extent it has extended to the examinations of the College of Surgeons. I suppose there can be no examination of any kind instituted anywhere, for which a certain number of young men will not be crammed; but it is so general as to the preparation for examination at Apothecaries' Hall, that a well-informed young man scarcely ventures to go up there to get a licence without having been first crammed.

1973. Is not cramming mainly confined to book-learning; and is it possible to prepare a student in that superficial manner for an examination in actual anatomy?—It merely teaches words, a sort of *memoria technica* being used for that purpose.

1974. But if actual dissection upon the dead body be the test, cramming is not available for such instruction?—No.

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1975. Has the examination before the College of Surgeons, since you first became a member, been improved, and been rendered more really a test of attainment?—I think when I ceased to be examiner two years or a year and a half ago, the examination was very much better than it was at the time I first became an examiner in the year 1834.

1976. You were first an examiner in the year 1834; for how long a time did you continue to be an examiner?—Till about a year and a half ago.

1977. During the whole of that period, from 1834 to 1845, you were an examiner?—Yes; I was an examiner in virtue of my office as serjeant surgeon, and by the Queen's permission I resigned the office about a year and a half ago.

1978. You have ceased to be an examiner?—Yes.

1979. When was the new charter granted to the College of Surgeons?—I believe it was in 1843 or in 1844.

1980. The president of the college has explained to us, in detail, the alterations made in the new charter as contrasted with the old; I will not trouble you, therefore, by asking you questions as regards those details; but will you state to the Committee whether, on the whole, you are of opinion that the new charter is a practical improvement on the old charter?—I think that the new charter is a very great improvement on the old charter; that it is more liberal in its spirit, and tends to the establishment of a superior order of practitioners. At the same time, I think that the new charter has not yet produced all the good that it is calculated to produce, because the system of election of the council by the fellows hitherto exists only in a very partial degree, in consequence of the original members of the council who existed at the time of the charter being allowed to retain their office for life.

1981. The governing body of the council under the old charter were self-elected; prospectively it will no longer be so?—Just so.

1982. The examiners were virtually for life under the old charter, were they not?—They were for life, and I doubt very much whether the council had the power of getting rid of them; at any rate the power was never exercised.

1983. When they became old, and their skill had diminished, or from any other cause it became desirable to remove them, was there the power of removal?—I do not believe that there was any power of removal; if there was, the council never ventured to exercise it.

1984. How is an examiner appointed under the new charter; is the appointment confined to members of the council, or does it extend to the whole body of fellows?—The whole body of fellows are eligible; none however have yet been elected to the council except the members of the council.

1985. There is a power to appoint examiners from the whole body of fellows, consisting of 600?—Yes.

1986. And the tenure of the office of examiner is, under the new charter, no longer for life?—No; during the pleasure of the council.

1987. Under the new charter, is a higher standard of qualification by examination instituted for the fellowship than for the membership under the old charter?—There is a higher and more difficult examination; but the still more important matter is this, that they are required to produce testimonials of previous general education, and they are required to spend five or six years in professional study in hospitals and schools.

1988. There is a limit in point of age?—Yes, 25 instead of 21.

1989. No young man can stand for a fellowship till he is 25 years of age?—No.

1990. Actual dissection in the presence of the examiners forms part of the examination for the fellowship, does it not?—It does.

1991. When was that test introduced for the first time into the examination?—In the examination of members we used to refer to preparations, the skeleton especially.

1992. But actual dissection did not form part of the examination of a member?—No, it did not when I was examiner, and I believe it does not now.

1993. Do you approve of actual dissection as a real test of knowledge and of sounder acquirements?—I approve of it very much; but I am afraid it would be difficult under existing circumstances to make it general for the members, on account of the difficulty of procuring subjects.

1994. But

1994. But for fellowships it is the invariable test?—Yes, there is no difficulty there.

1995. You would wish it to remain a portion of the examination for the fellowship?—Certainly.

1996. Has the examination for membership, as contradistinguished from that for the fellowship, been more strict and more searching of late years than it was when you were first examiner?—I think very much more so; the examination for membership has been much more strict of late years than it was when I was first examiner.

1997. Then taking the two examinations as they now exist together, the examination for fellowship and the examination for membership, do you say that the standard of surgical knowledge and acquirements, as fixed by the College of Surgeons, has been elevated or otherwise?—Elevated, considerably. I think the examination is as good as examinations can be, all such human institutions being liable to imperfections: at the same time I am of opinion that no examination is a perfect test either of knowledge or talent.

1998. But with your long experience in the art of instructing students in surgery, and your knowledge of the imperfection of any system of examination however well conducted, should you say that all has been done that suggests itself to your mind as possible or desirable to be done, with the view of raising as highly as possible the test of acquirement in the College of Surgeons?—I do not think the examinations of the college can admit of much improvement, unless we could introduce an examination by dissection for the members, which would indeed be a great improvement; but which, as I said before, I fear is impracticable.

1999. From the difficulty of obtaining subjects?—Yes.

2000. Is the experience, though short, of the operation of the new charter, as exciting emulation among young surgeons for the fellowship, favourable or unfavourable?—It does great good among the higher class of young men.

2001. Have you seen emulation among the young men to acquire fame by undergoing superior examination for the fellowship?—Yes, in many cases.

2002. Have you attended any of the examinations for fellowships?—Several: there were four or five examinations before I resigned the examinership.

2003. Have you been gratified with the proofs of high attainments on the part of young men in the examination for the fellowship?—I think the examinations have been very strict, and the requirements very considerable, but notwithstanding that, many young men have passed them with the greatest credit.

2004. Have you reason to know that young men are now training and studying with a view of standing out for the fellowship?—I believe a great many, and even young men who are already engaged in practice; for the charter allows any member, though he has not had an extended term of education in the first instance, to present himself, after so many years of practice, for examination for the fellowship.

2005. On the whole, under the new charter, is the College of Surgeons constituted as you would consider most conducive for the public good, and for the advancement of surgical science?—Indeed I think the College of Surgeons is so constituted as to do great good to the public, and to advance the science of surgery.

2006. Your attention from time to time has been directed to the several legislative measures which have been introduced, though not passed, for the purpose of improving the law with respect to the practice of medicine and surgery in England?—It has.

2007. Has your attention been called to a Bill which is now under the consideration of the House of Commons?—Yes, it has; I have read it.

2008. The College of Surgeons has petitioned against that Bill?—Yes, it has.

2009. Have you seen that petition, or are you aware of its substance?—I know the substance of it generally; I do not recollect that I have actually seen it; I was not present when it was read to the council.

2010. There are many objections in that petition set forth against that Bill, and it is alleged that the tendency of that Bill indirectly, if not directly, is to introduce a single faculty?—It appeared to me to be so when I read that Bill; the meaning is rather obscure in some places; but it certainly appeared to me that the tendency was to confound all grades of the profession together.

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2011. Would such an amalgamation of the whole profession into one mass be a prudent measure, in your opinion?—I think it is not at all desirable. It appears to me that there are two objects to be kept in view in medical legislation; first, to supply the public with a sufficient number of well-informed practitioners for ordinary purposes; and secondly, to induce a certain number of persons of a superior education to enter the profession who are not compelled to look for a livelihood in very early life, and who will have time to study the profession as a science, and to promote the advancement of it as a science; and I do not think that the single faculty system would operate well in the latter way.

2012. The first object it is possible that a single faculty might attain, or even promote?—Certainly.

2013. But in your opinion, if that object were attained, and even if the standard generally of medical practitioners throughout the kingdom should be in some slight degree elevated by the introduction of a single faculty, would that good be counterbalanced by the evil of the loss of the latter object, to which you attach so much importance, viz. by classification insuring higher attainments in the branches of the profession, as now subdivided?—I think the evil would more than counterbalance the good. But, in fact, the two things are quite compatible; you may very well attain at the same time the two objects of supplying the public with good practitioners for ordinary purposes, and those who will pursue the profession as a science.

2014. If your view be correct that since 1834 the examinations, both for membership and for fellowship at the College of Surgeons, have been progressively higher under the existing institution, is that conjoint object, which you think so desirable, secured to the public if you leave the college undisturbed?—Yes, it is. Allow me to say, in explanation, if you had a single faculty of very high attainments, as far as science is concerned, that single faculty might do very well, but that would not do for the public, and the result would be that it would force uneducated persons into practice. This was the mischief that occurred in former times, when the physicians assumed to be the only medical practitioners, and required of their body very high qualifications; persons who were to practise among the poor could not go to the expense of obtaining those qualifications, and that forced the apothecaries, who were then chemists, into practice; and if you were to bring up the whole of the profession to the highest standard, the inevitable result would be the forcing of chemists and druggists into practice, just in the same way as the chemists, who were then called apothecaries, were forced into practice formerly, and I apprehend that no legislation could prevent it.

2015. The effect of raising the general standard beyond a certain point would be to encourage empiricism and ignorance?—It would.

2016. Throughout England generally, and more especially in the rural districts, the poverty of the body of the people prevents the payment of more than a very small modicum of reward for medical skill?—It does; I think that for the mass of the profession the requirements as to education have been carried already to the highest standard.

2017. As high as the rewards of even successful practice can compensate in consideration of the time occupied and expense incurred in acquiring knowledge and skill?—Quite as high.

2018. Therefore, in your opinion, even if the introduction of a single faculty had the effect of raising the profession generally above that which is at present the lowest point, you would sacrifice the advantage of attaining that higher class of practitioners which at present exists?—Yes.

2019. And you think that there would be a danger of forcing upon the people more ignorant practitioners than now generally practise in medicine throughout the country?—Certainly; there is one matter, however, in which the whole body of practitioners might be very safely improved without any additional labour, or without any additional expense in their education, and I see that that is provided for in the Bill you alluded to just now; namely, by getting rid of the apothecaries' apprenticeship. The apothecaries' apprenticeship is a very great evil, preventing the greater part of the young men educated as general practitioners having anything like a literary education.

2020. The Act of 1815, commonly called the Apothecaries' Act, you would desire

desire to see repealed?—That part certainly; and if a good deal more were repealed, it would be a good thing.

2021. Have you a strong opinion that it is desirable to postpone the commencement of practice on the part of surgeons to as late an age as is consistent with the natural wish of young men to realise some profit from their studies?—I think that it would be unsafe to postpone the period of commencing practice for the great mass of practitioners; it would make the education more expensive, and in that way prevent the public being sufficiently supplied; but I think that for those who aspire to be hospital physicians and hospital surgeons, it is very desirable that the period of examination and of beginning practice should be postponed; and that is the effect of the new charter of the College of Surgeons.

2022. You approve of the period fixed for the fellowship, the age of 25?—Yes; and in fact, I imagine that very few young men who wish to be in the higher walks of surgery in London ever begin practice sooner than that.

2023. Few surgeons have been members of the English universities?—Not many.

2024. Have you, from your own long experience, an opinion that, considering the peculiar duties of surgeons with reference to the feelings of young practitioners, it is desirable that they should begin hospital practice at an early age?—I think that they should begin attending the hospitals rather early in life, but not at such a period as to prevent a good general education.

2025. It would be difficult to combine such early attendance upon the hospitals with a university education?—There would be more difficulty than in the case of physicians.

2026. The case, therefore, of surgeons and physicians, with respect to education, is somewhat different?—There is a little difference; the surgeon requires more anatomical study, and I find that young men who do not begin to study anatomy till they are three or four and twenty, for the most part, hardly study it at all; and I think in operative surgery there is something to be overcome which is better overcome at 20 than at 23.

2027. Though there are difficulties, even among those who aspire to honours in the profession of surgery, in encouraging university education, you have, by your examination, as now fixed by the College of Surgeons, secured some test of literary attainment as well as professional attainment?—When the new bye-laws were made as to the examination of fellows, we required, for the first five years, that they should bring testimonials of a good general education; and we allow those who have a degree at an English university to come up upon five years' professional study, instead of six, which we require of others, that being correspondent with the rule which is observed at the inns of court with respect to barristers; but after the year 1850, that is after the first five years, they will be required to bring up some more actual proof of a good general education than they are required to bring at present: I forget exactly what the terms are.

2028. Mr. Lawrence told us that after the year 1850 the college contemplated general examination in mathematics as well as literature?—Yes, I think it is so; it was contemplated to have a Board for the purpose of examination in general literature and mathematics.

2029. And a certain knowledge of the dead languages?—Yes.

2030. Mr. *Acland.*] Do you understand that this is the regulation as stated by Mr. Lawrence: that the candidates are to produce a degree of master of arts from the university, or evidence of education equivalent to that which would be required for that degree?—Those are the terms, I dare say.

2031. Sir *J. Graham.*] Do you think that a system of registration of all medical practitioners throughout England and Wales might be introduced with advantage?—I think it would be a very good thing; it would be popular with the profession, and rather useful for the public.

2032. Have you looked at the scheme of registration contemplated by the Bill of this Session?—Yes, I have.

2033. Do you see any objection to that form of registration?—I do not think that any proper registration of the existing practitioners under that Bill could be carried into effect. Under what is there proposed, persons would be registered who ought not to be registered, and persons would not be registered who ought to be registered. Thus it allows any persons to be registered who have degrees or licences from any constituted bodies. I believe that most persons in the profession think that a person who has a licence from the Faculty of Physicians

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and Surgeons in Glasgow ought not to be registered as qualified to practise over the whole kingdom. Then, again, the University of St. Andrew's, even now, and the University of Aberdeen till very lately, have been in the habit of granting degrees upon mere examination; nay, within a very short space of time they were sold, without the candidates even appearing at the university. Many of those degrees have been granted to persons quite unqualified to practise. Dr. ———, a quack doctor, had a degree from St. Andrew's or Aberdeen; and I have no doubt that even now there are many persons having those degrees in this country, and who would be registered under this Bill, but who would not be at all fit to be registered. On the other hand, some of the best surgeons in the country, practising in the provinces, are not members of the College of Surgeons. There are two gentlemen in the Bristol Hospital; they are consulted by everybody, and they are very eminent surgeons, but they would be left out from this register. There are also a great many persons practising as surgeon-apothecaries, and who are eminent practitioners, in different parts of the country; I have met with many such myself, who have not a licence from Apothecaries' Hall; who, from some technical difficulty, cannot get that licence, but who are adopted by the public, and are popular in the respective districts in which they reside, and well qualified to practise; those gentlemen would be left out. The Apothecaries' Company do not venture to prosecute them, but still they would be left out of the register. It appears to me that no system of registration can be at all just or proper in the first instance, unless those to whom the registration is confided have certain discretionary powers granted to them. In considering the medical Bills introduced by the Secretary of State three or four years ago, this difficulty presented itself, and there it was intended to confide the registration to the Council of Health, composed of several persons, some in the profession and some out of it; but under the present Bill, if there be any discretion at all, it must be given to a single person in each country, and it would be too great a power to give to any individual. It would have involved the Council of Health in a good deal of trouble, for they would have been accused inevitably of partiality and prejudice on many occasions, however just they might have been; but the clamour against individuals to whom such a power was confided, would be such that no individual could stand against it.

2034. To a register, including the different classes of the profession as now subdivided, and also embracing an alphabetical list, with the grade in the profession appended to each name, in addition to the residence; to some such register, under competent responsible authority, you would have no objection?—I think it would be very useful.

2035. The register contemplated in this Bill is in conjunction with a licensing power in different parts of the United Kingdom, controlled by the Secretary of State, with inspectors under his authority in each part of the United Kingdom; does that arrangement appear, in your opinion, to be sufficient to secure equality of attainments as actually tested by the different licensing bodies?—I think no Secretary of State could be competent to undertake such a duty; he must be assisted by other persons.

2036. The schemes of education of the different licensing bodies are to be submitted to the Queen in Council; would that appear to you to give a better security for a wisely-chosen curriculum than if it were submitted to the Secretary of State?—The difference is only in words; it would, I imagine, be, in fact, submitted to the Secretary of State.

2037. To the Secretary of State, or the President of the Council; but taking the President of the Council and the Secretary of State together, if they alone are to be the controlling authority, would that appear to you to be satisfactory?—No; I think it would be impossible for any but medical men, and those acquainted with the details of medical education, to form a correct judgment on the subject.

2038. You have referred to the Bills which I had the honour of introducing in 1845, in all of which a council of health was contemplated; would the institution of such a body appear to you to be a wise policy on the part of the State?—I think it would be very useful in various ways.

2039. How should that council be composed, according to your view?—I think it should be composed of a certain number of persons in different branches of the profession, and certain other persons not belonging to the profession, persons

sons of influence in the world; and I think the whole of them should be appointed by the Crown.

2040. If so composed, do you think that the supreme control over the curricula of the different licensing bodies, by means of assessors, with a view to ascertain that the standard was strictly and equally observed by all, might be entrusted to that body?—I think it might be entrusted; and I think it would be desirable that it should be entrusted to such a body.

2041. In addition to those high functions, might not the Council of Health be consulted, being at the seat of Government, upon sanitary questions, and matters affecting the health of the public?—I think that that would be very useful; and it would ensure certain persons paying great attention to questions which now very much interest the public.

2042. Does the absence of any such institution from the provisions of this Bill, and the substitution in lieu of it of the supreme power of the Secretary of State, and the Queen in Council, appear to you to be a defect in the measure?—I think the establishment of a single registrar for each kingdom is a very great defect; and that the establishment of the Council of Health for the whole kingdom would be an excellent measure.

2043. Could you contemplate without alarm the equality of right to practise in every part of the United Kingdom, as admitted by this Bill, under the safeguards provided by the Bill, with respect to equality of attainment in the different parts of the United Kingdom?—I am not quite certain that in this respect I rightly understand the Bill, but it appears to me that the person who has passed his examination at Apothecaries' Hall is capable of filling any situation whatever, either of apothecary, physician, or surgeon; so it seems to me, but it may not be so intended.

2044. It has been said to be an absurdity that there should be a jealousy on the part of the Legislature with respect to practice in England, without legislative care being equally extended to Scotland; does that absurdity strike you forcibly?—I think care should be taken in this way, that those educated in Scotland should be as well educated as those educated in England; and that those educated in England should be as well educated as those educated in Scotland; and that then the practice in the two countries should be common to both.

2045. Would that be an argument for raising the standard in Scotland rather than that you should admit into England an imperfectly educated practitioner?—I think the Scotch education in general is fully equal to that of the great mass of practitioners here; I think the education of physicians is not quite equal to that of the physicians here, for this reason especially, that they require no preliminary education.

2046. You have referred to three bodies in Scotland, the Faculty of Physicians and Surgeons in Glasgow, who have the power of licensing for four counties in Scotland, the University of St. Andrew's, without a hospital or medical school, and the University of Aberdeen, with comparatively small institutions of that kind; without care would it be safe to entrust to those bodies the power of licensing for all parts of the United Kingdom?—With respect to Aberdeen I believe that they have a good hospital and a pretty good school. There is no licence for surgeons at Aberdeen; I think all those bodies might license for the whole kingdom, under a proper supervision of the Council of Health, and that they should have power to do it.

2047. It would require the exercise of a stringent supervision and inspection?—I think all the bodies here and there too would require a little looking after.

2048. Would not supervision in all cases be necessary?—Yes, I think so.

2049. Would not the tendency be general if an equal standard were fixed, practically to examine parties below that standard with a view of attracting?—Their interest would lead them to do so; but that will, I hope, be counteracted by higher motives.

2050. If it were their interest, unchecked by control, would it not be their practice?—It would with some I have no doubt, as at this very moment in St. Andrew's they give degrees upon examination without any particular course of study.

2051. With respect to the College of Physicians, are you aware that they have applied for a new charter?—Yes, I am.

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2052. Does it appear to you that under the existing charter, there are imperfections in the constitution of the College of Physicians which might be remedied with advantage?—I think their present charter a most absurd one, especially with respect to the election of the president.

2053. And the body of elects?—Yes.

2054. You obtained, under your new charter, a more summary power of expulsion from your body for *mala praxis*?—Yes, there is more power now than there was formerly.

2055. Is that salutary, in your opinion?—Yes, it is salutary; I do not believe we have yet had an opportunity of acting upon it, and it will be often very difficult to act upon it, for it will be difficult to get evidence of *mala praxis*.

2056. It is said, that by the law as it now exists there are no operative checks upon the practice of persons coming from Scotland, or coming from Ireland, whose attainments are not sufficiently tested, or upon persons practising in England without being members either of the College of Surgeons or the Society of Apothecaries; does it appear to you that though such persons may now practise contrary to law, it would yet be quite another thing to enable them to practise without those sufficient acquirements or tests, in conformity with the law?—My own opinion is against any restrictions as to private practice, but that is not the feeling of the profession, who generally differ from me upon the subject. My own opinion is, that the profession would do better if no one could be prosecuted merely for engaging in private practice, and that the only restriction should be that persons who had not licences should not be eligible for public institutions or public appointments.

2057. You would endeavour to effect the great object to be secured for the public, of obtaining the best acquirements, not by penalties for the want of them, but by encouraging the possession of them?—Yes; I think that in the same way as individuals are always better from having to depend upon their own conduct and character, and not being propped up by others, so the profession would be better from having to depend upon its own character, and not being protected by penalties.

2058. Do you remember the Bills of 1845?—Yes.

2059. Did they not proceed upon that principle of holding out inducements, and not inflicting penalties?—Yes, and I entirely approved of them.

2060. In that respect those Bills effected what you conceive to be politic?—Yes, they appeared to me to do so, and many of the profession think the same; but the great mass differ from me in opinion.

2061. They would desire the infliction of severe penalties for practising without due legal authority?—Yes, they would.

2062. You would not recommend that course?—I would not.

2063. The legal penalties are pretty severe now, are they not, under the Apothecaries' Act, for practising without a licence of the Apothecaries' Society?—The apothecaries have a very strict monopoly; that is, their Act of Parliament gives them a very strict monopoly, but they cannot act upon the Act of Parliament; they prosecute a few persons, but the great number of persons who practise without their license are not prosecuted.

2064. Therefore so far as the experience under the Apothecaries' Act goes, proceeding by penalties is not effectual?—I may say that it does not interfere with the practice of quacks or really uneducated persons at all.

2065. Do you think that the strong tendency on the part of mankind to employ quacks is general?—There will always be a tendency to employ quacks, because all must die in their turn. The medical profession can never do all that is required of them to do, and those who cannot be relieved by the regular craft will of course naturally look to others.

2066. While the demand for empirical practice is so general, the proceeding by penalty to check it will be ineffectual?—I suspect that it will be found ineffectual; it is very desirable to stop it, if possible, but I do not think it can be done.

2067. Looking to the state of the profession generally, under the law as it now exists, and considering the Bill for the alteration of the law as proposed in the present Session, would you rather leave matters undisturbed, or that the present Bill should pass into a law?—I would rather leave the profession as it is.

2068. At the same time you are not of opinion that the law regulating the medical profession is not susceptible of improvement in this country?—I think it is very susceptible of improvement in some respects. I think it a very great hardship that no one should be admitted to general practice here who has not been authorized by the Apothecaries' Society; I think it a hardship that those who are educated in Scotland or Ireland, who, from some technicality, cannot be examined at Apothecaries' Hall, should not be permitted to practise in England; but I think that the object may be attained by some other and better means than by that Bill.

2069. Any man may practise as a surgeon in England without subjecting himself to a penalty?—He may; and I do not think surgery has at all suffered from that cause. I think surgery has more advanced than any other part of the profession, though there is no legal penalty upon parties practising as surgeons without a licence.

2070. Then, reasoning by analogy, would you say that you would throw the profession open, and that inasmuch as surgery has not suffered, the whole profession would not suffer from penalties being withdrawn?—I think that the profession might, without much harm, be thrown open in the same manner as surgery is; but the view which I take is this: when a person gets an opinion about his own case, he has a right to consult anybody, and anybody should have a right to attend him; but where one person has to appoint another to attend a third person, he should be required to appoint somebody who has a regular licence to practise.

2071. Therein consists the difference between the appointment by public bodies and the Government, and the choice of an individual, with respect to his own medical attendant?—Yes; and that would extend even to schools and workhouses and ships.

2072. Wherever third parties appoint medical advisers, there you think the law should step in and obtain some security with respect to the competency of the party so to be appointed?—Yes, I do.

2073. That is the line that you would draw?—It is.

2074. Each individual should, according to law, exercise his own free choice, but public bodies should be compelled by law to employ only persons whose skill had been tested by some public authority?—Yes, I think that would be a very good system. I do not say that it would be practicable to introduce it with the present feelings of the profession, but I very much suspect that if you wait 20 years the profession generally will be of the same opinion with myself.

2075. The Bill now under consideration, if you are of opinion that it will establish a single faculty, is in direct violation of the principle for which you would contend?—Yes, it is in direct violation of it.

2076. Has the College of Surgeons expended, within your memory, large sums in increasing its museum, and adding to its library?—Yes, the college has done very much in increasing the museum and library.

2077. It has, in your memory, nearly doubled the museum?—Yes, the museum is more than doubled.

2078. And the library is a superior library?—Yes, I suppose it is the best medical and scientific library in the kingdom. At the same time, it is no more than the college were bound to do, and undertook to do; they were placed at the head of the profession; they had funds for the purpose, and they have performed this duty very honestly, but it was no more than they ought to have done.

2079. With respect to practitioners from Ireland or Scotland, who come to practise surgery in England, would it be wise or, in your opinion, necessary to compel them to become members of the College of Surgeons in England upon payment of a fee, or might it be safely left to the credit which now attaches to your body, and the privileges of free access to the museum and library?—I think that in the event of their having the same qualification in one part of the kingdom as in another, if they removed from one part to another it would be well that they should be admitted *ad eundem* to the college in the part of the kingdom in which they resided.

2080. And it would not be just to admit them *ad eundem* without some contribution on their part to the fund which maintains this valuable library and museum?—No; but a moderate contribution would be sufficient.

2081. What would you say to compelling them to be members of your body,

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as a condition of practice?—I think it would be better that they should be admitted with the view of registration into our college. It would be convenient for registration at all events; but I would not compel them to be examined if they had been previously examined.

2082. How could you compel without a penalty; and would not the infliction of a penalty be at variance with your principle?—No; if they were not admitted it would not affect their private practice; it would be only necessary to qualify them to hold public situations; and upon persons holding public situations without a licence I would inflict a penalty.

2083. You would not say that a surgeon duly licensed, at Edinburgh, for instance, should, if he came to practise here, be eligible to fill a public situation, say the surgeon of a hospital in England, unless he were a member of the College of Surgeons in England?—I have not considered that particular point a great deal, but it appears to me that it would be, on the whole, desirable that if he came to practise in England he should become a member of the College of Surgeons, on the payment of a small contribution.

2084. Which would be only a fair contribution, considering the privileges to which he would be entitled on becoming a member?—Yes.

2085. Mr. *Acland.*] I understood you to say that you thought a single registrar for each kingdom would be a great evil, but did you state why you so thought?—I believe that I endeavoured to point out that you could not have a fair system of registration in the first instance without giving a good deal of discretion to those to whom the registration was confided, such an amount of discretionary power as you could not venture to give to an individual; that even if it was a large body, they would be liable to charges of prejudice and partiality; but that if it were an individual, he could not stand against the clamour that would be raised.

2086. That objection applies to the entrusting the discretion to a single person; but do you mean to say that a registrar for England, and a registrar for Scotland, and a registrar for Ireland would be an evil?—Yes, that is what I meant, because each would act separately.

2087. You think it necessary that the registration should be on a uniform principle, under some central authority?—Yes.

2088. Have you seen the form of registration put in by Dr. Hawkins, the registrar of the College of Physicians; it is formed on the model of the naval list (*the same was shown to the Witness*)?—I think that would be very good; some names would be found in two lists.

2089. Do you think it would be practicable to make a useful register of the profession in its present state, without establishing by law some central authority?—Of those who are qualified by a licence to practise you may make a register without any difficulty, because the College of Physicians print their list, and the College of Surgeons print their list, and the Society of Apothecaries print their list, so that you have only to send these three lists to the printer and have it published in two days; but that would not include all who ought to be included, because there are a great many Edinburgh physicians, and physicians with foreign degrees practising in the country, who are not properly and legally physicians, but who are very good physicians, accepted by the country as physicians, and who ought not to have the power of practising taken away from them, but they would not be included in the list of the College of Physicians; so again there are several good surgeons not belonging to the College of Surgeons who would not be included in their list.

2090. Do you consider it desirable to pass a general measure for the registration of medical men for the whole country?—No, I do not think it is desirable.

2091. Do you think it undesirable that surgeons should be educated at English universities if they could enter upon the study of their profession at the age of 20?—No; their being educated at the universities is, in my opinion, very desirable. Dr. Buckland, the dean of Westminster, sent his son by my express advice to the university; but all that I really mean is, that it is desirable that they should get a good education.

2092. Dr. Buckland's son intends to enter the profession as a surgeon?—Yes.

2093. And he has taken his degree at Oxford?—He is about to do it; all I mean to say is, that it is desirable that they should obtain a good education; where they obtain it I do not care; they may obtain a very good education though they are not sent to the universities.

2094. Is it your opinion that the supervision of medical education and of sanitary regulations might be entrusted to one body?—Yes, I think it might.

2095. How can you secure the attendance of the higher eminent medical men from Ireland and Scotland in one central body in London?—They would have to be in London only occasionally. My notion is, that there would be Scotch and Irish Committees; that they would act separately in Ireland and Scotland, the concurrence of the whole of the three bodies, however, being required for some purposes.

2096. Then in that way you think that you could secure local action and a united body?—Yes, I think you might; the matter was very well considered formerly, and the Scotch and Irish saw no difficulty in it.

2097. If the tendency of the present improved medical education is to secure to the whole country a class of men whose education has been expensive, and if the effect of that is to drive the poor man to the chemist's shop for advice as well as for medicine, have you a decided opinion that it is not desirable to put any legislative check upon that?—I have already stated that I am against those checks.

2098. Would you think it desirable to require from the chemist a knowledge of drugs and also a medical knowledge?—I think it desirable that chemists should be required to prove that they understand pharmacy; but if you were to require of chemists a medical education, you would institute another order of practitioners.

2099. Do you think that it is an evil that must be left to cure itself?—Yes, I think legislation cannot reach it; but I repeat that these are not the opinions of the profession.

2100. Mr. *Dennistoun*.] You stated that you conceived that the persons who had received the diplomas of the Faculty of Physicians and Surgeons of Glasgow were not properly qualified?—That is the general opinion of the profession.

2101. Do you know anything of it yourself?—I know nothing of it of my own knowledge, but I speak the general opinion of the profession.

2102. Do you know anything of the constitution of that body?—I did know it.

2103. Or the curriculum enforced there?—I did some years ago know something about it. I only mentioned it by way of illustration.

2104. But you have no personal knowledge of it?—No, I have not.

2105. Are you aware whether there is a hospital attached to the Medical School at Glasgow?—Yes, there is a hospital.

2106. And a museum?—Yes. Medical students at Glasgow have very good means of studying. The museum belongs not to the Faculty of Physicians and Surgeons of Glasgow, but to the college.

2107. What test is required by the English universities of Oxford and Cambridge?—Very little. The fact is that Oxford and Cambridge men are all educated in London; London is their medical school.

2108. They have no medical school at the universities?—They have a medical school, but I do not believe that any students trust altogether to those medical schools.

2109. Do not they grant degrees?—Yes.

2110. Do you consider that a proper proceeding?—Yes, I think it is quite proper, for the degree is a proof of a good general education, and at the same time of their having acquired some knowledge of their profession; but the principal advantage of the Cambridge and Oxford degree is, that it is a proof of their having had a good education.

2111. Is it not natural to suppose that in a place like Glasgow, where they have not only a good general education, but the addition of a museum and a library, they would be highly qualified to grant degrees?—I think it is quite right that they should grant degrees; and I think it is also right that they should require the same attainment as is required of a physician here. I believe they have a very good school; still I do not think the schools are to be compared with the London schools, on account of the greater number of hospitals, which are also here of larger size, and the greater competition.

2112. Mr. *Acland*.] The degrees of Oxford and Cambridge are granted now upon medical examination?—Yes, I believe they are; but I do not know the details.

2113. Do you know whether the examiners are competent examiners?—I do not

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not know enough to be able to speak about them; I very likely might be incorrect.

2114. You have seen the diplomas and the degrees granted at Oxford and Cambridge; were the names of the examiners known to the profession?—The medical professors there are all known.

2115. And they are parties competent to examine upon medical subjects?—I do not doubt it.

2116. Have you seen the diplomas of the Faculty of Physicians and Surgeons in Glasgow?—No, I have not; they give a licence to practise only in four counties.

2117. Are the names of the examiners who grant those licences known to the profession generally?—No; the names that I saw formerly were not known to the profession generally.

2118. In connexion with the supply of the wants of the poor in country districts, if the effect of improving the medical education should be to make it more difficult for the poor to obtain it from the highly educated class, do you think it would be practicable to connect with the unions something of a small dispensary by which access to medical advice should be cheaply rendered to the poor man?—I must say that, I think, on the whole, they get very good medical advice in the country. I go very often into the country to see patients, and I am very much struck with the general good sense and knowledge of the country practitioners; they are thrown very much upon their own resources, and are compelled to use their wits, and for the most part know a good deal upon the subjects in which they are engaged.

2119. Colonel *T. Wood.*] Will you have the goodness to explain how it is that the practice of fellows of the College of Surgeons is delayed until the age of 25, because I apprehend that the members of the body can practise?—Those who are members first may practise as members, and many who have become members become fellows afterwards.

2120. During that interval their practice goes on?—Yes, they may practise if they please; but the greater part of the best educated men, at no time begin practice before the age of 25.

2121. Am I right in supposing that in your view of the profession you would only require licences from the medical officers of public institutions?—I would not put a penalty on private practice; but I would put a penalty on public practice without a licence.

2122. Is there not more difficulty in an individual selecting a competent medical man than in members of a public institution doing so?—Yes, but if the Government publish a list of qualified persons, and any person says, "I will not take a person out of this list, but I will go to somebody else," it is his own concern, and I do not think that you should interfere with it.

2123. Why should not the same rule hold with respect to public institutions?—In the first place I think that it is unjust to prevent my consulting anybody I please.

2124. Is it not equally unjust to prevent a public institution doing so?—No. I may go and fling my own money into the streets, but I must not fling the money of a public institution into the streets.

2125. Is not an individual notoriously a bad judge of his own case?—He is very often a bad judge in this matter, as he is in a great many others.

2126. Is not a surgeon himself incapable of prescribing for his own case?—Very often he prescribes very badly for himself.

2127. Must not an individual be in a great measure an imperfect judge of the capacity of his own medical adviser?—Yes, but then he may take the Government list and look for a proper person, if there be a register.

2128. Is it not the duty of the State to guard the public from imposition?—I think it is not the duty of the State to think for individuals on all occasions. I may employ a bad architect, and may be very foolish for doing so, but the State does not come and say, "You shall employ only my architect." I think that the medical profession ought to be left to depend on its own character.

2129. How do you draw a distinction between an individual and a public institution?—I think I have a right to do what I like with my own person, but if I have any power of appointing a person to attend you, I do not think I have a right to send my quack doctor for that purpose.

2130. Sir *J. Graham.*] You would think it unfair to restrain me in my own person from consulting a homœopathist?—Yes.

2131. What would you think of me if I were colonel of a regiment of guards, and by force introduced a homœopathist into the hospital of that regiment of guards?—I think that you would deserve to be transported.

2132. *Chairman.*] Supposing we were so unfortunate as to have a dispute upon matters of property, it would be unjust to prevent our agreeing upon an arbitrator who might not be a barrister to settle the matter between us?—Yes.

2133. But there is no objection to the Legislature saying that persons appointed as judges to the local courts shall be barristers of a certain number of years' standing?—No.

2134. Mr. *Wakley.*] Have you the power of choosing any person that you please to act as solicitor?—Yes, to act as solicitor for certain purposes. The case of the solicitor is confirmatory of my view of the matter; anybody may act as a solicitor in many respects, but he cannot go into a public court as a solicitor. Any person may draw your lease, but in a court of justice you must have a regular solicitor to act for you.

2135. *Chairman.*] A person is not suffered to go into court, or to prepare a public document for you, without being a regular lawyer?—No.

2136. But in private you are at liberty, upon legal points, to consult whom you please?—Yes.

2137. Sir *J. Graham.*] I may call in my tailor to draw my will for me?—Yes.

2138. I must take the consequence of doing so, but the law does not prevent it?—No; and many bad wills have been drawn in consequence.

2139. *Chairman.*] If you had a lawsuit, you might send out your servants to examine the witnesses?—Yes.

2140. But no person who has not undergone a regular examination is permitted to come into court, and act there as your solicitor?—No; and that confirms what I say, that the cases are parallel.

2141. Mr. *Wakley.*] You say that you think the science of medicine has much improved of late years?—I believe I said the science of surgery; I think that the science of medicine has improved very much too, but I there spoke of the improvement in the science of surgery.

2142. You said that you were not aware that the education of the great mass of practitioners had been much improved; if that be so, whose fault has it been?—I think the great mischief at present is the cramming for the examination at Apothecaries' Hall, and the fault, if there be any, is with the Legislature, I suppose.

2143. Were you confining your remarks to surgeons and apothecaries?—To general practitioners especially.

2144. To those who are generally members of the college, and licentiates of Apothecaries' Hall?—What I meant to say, and what I believe I did say, was, that what is required of general practitioners is much greater than formerly; but I do not think that the improvement has gone on in the same degree, on account of the circumstances with which I am sure you must be acquainted, which make it necessary for the candidates to be crammed for the examination at Apothecaries' Hall. I was a teacher in anatomy for some few years before the Apothecaries' Act was passed, and I must say that I never saw a more industrious set of young men, or young men who were more disposed to perfect themselves, than the students then were; and though not so much was required of them, yet I think they acquired as much useful knowledge.

2145. Does not your examination refer to matters which the college consider to be the most useful in the exercise of the professional functions of a surgeon?—I think it does.

2146. If you have made greater requirements of the candidates, can you entertain any doubt that the candidates are better educated now than they were 40 years ago?—I think that a vast deal of their time is lost in their being crammed. The whole of those who are admitted to practise now are required to come up to a higher scale of examination; but I think that those who did study formerly improved themselves quite as much as the students improve themselves now. A great many, however, practised without any study; there is, therefore, an improvement in that respect.

2147. Is the cramming system a modern system?—I suppose that it has always

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always existed all over the world, more or less; but I think that to the extent it now prevails it is quite modern.

2148. Do you believe that it applies to the College of Surgeons as well as Apothecaries' Hall?—To a certain extent, but not to as great an extent.

2149. But when you say much time is lost in cramming, are you aware that it occupies a very short time?—No, I am not aware of it; I believe it occupies a considerable time. Mr. Harrison, the treasurer of Guy's Hospital, who has studied the subject very much, tells me that it takes away the best men in their third year; that is, when he has a young man whom he wants to raise in the school, he is taken away to be crammed in the third year.

2150. To whom is he taken?—He takes himself to a crammer.

2151. Are you not aware that they scarcely ever enter themselves for more than three months to a crammer, and that six months is a rare period to be entered to a crammer?—Six months is almost the whole period of study in a session.

2152. That would be one session?—It is one winter session.

2153. Do not you believe that the evil lies in this: that in consequence of a young man knowing that he can be crammed in three months, he neglects the education which would otherwise be necessary for the examination that he has to undergo?—That is what I mean to say; that partly by the cramming, and partly by the neglect of study connected with the cramming, he loses his time. I do not mean to say that all the time is lost in the process of cramming, but partly in the neglect of study before the cramming.

2154. The neglect of study arises from his knowing that within a short period he can render himself capable, by cramming, of undergoing his examination?—He knows that he cannot pass his examination at Apothecaries' Hall without being crammed; the best student cannot pass his examination without being crammed; and a young man says, "If I am to be crammed, there is no occasion for my working so hard previously."

2155. Mr. *Acland*.] Do you think it important that the examinations should be conducted by persons who either are or have been public teachers?—I do not conceive that, as a general rule, any other persons can be competent.

2156. Mr. *Wakley*.] You strongly approve of the new charter that was granted to the College of Surgeons in 1843?—Yes.

2157. You consider that it has worked well?—I think it works well.

2158. Are there any amendments which you would propose in that charter?—I think that the mode of electing members of the council is awkward.

2159. Will you describe that mode?—The fellows may be nominated in succession according to seniority; and if a fellow be nominated and not elected on one election he may be proposed at a subsequent election, but if he be not then elected he is ineligible altogether.

2160. If he be not elected on the second nomination he is ineligible for ever?—Yes.

2161. Whatever may have been his discoveries or his reputation he is for ever excluded from the council?—Yes, I think it would be better if there were no restrictions of that kind upon the election.

2162. Do you consider that that restriction is an exceedingly important and objectionable one?—I do not think that in practice it does any great harm, but I think it is not good in principle.

2163. Would it be well for the reputation of the college that a man of great distinction and acquirements should not be elected as a member of the council?—Certainly not; but I think that the period at which an individual would be proposed according to seniority is so late that his talents must be known. Any person adapted to take a prominent position in his profession will have shown his ability before he is 40 years of age.

2164. Do you approve of the principle of seniority in the election of members of the council?—Yes, I think on the whole it is better that they should be seniors: that it keeps up the character of the college.

2165. If you think it better that individuals should be allowed to employ their own practitioners, do you not think that those who elect the council of the college should have the free choice of electing either young or old?—I think it would be better to elect the seniors.

2166. Was the system of seniority in operation under the old charter?—They were not compelled to elect seniors; they might elect anybody.

2167. Was

2167. Was John Hunter elected to the council before his death?—I do not know.

2168. Was Sir Astley Cooper till a late period?—No; the rule of seniority was attended to; but I think, in general, persons come into the council soon enough.

2169. You say that the requirements from candidates now are of a higher order than formerly; what constitutes the essential difference between the examination of fellows and of members?—The fellows are examined in minute anatomy, and in physiology, and in scientific pathology, besides being examined in practice; the examination for the fellowship is a very extensive one, and all in writing.

2170. Do you consider that if you adopted the same examination, or required the same qualification from the members, it could not be complied with by those who are seeking for the diploma of the college?—Not at the age of 21.

2171. Or at the age of 22?—No; it would supersede practical study, which, after all, is of more importance to them than anything else. The fellows are required to have such a knowledge as persons ought to have who are to be teachers.

2172. Have many been examined since the charter has been in operation?—In the first two examinations, in December 1844 and April 1845, there were 39 examined; what number have been examined since I do not know, but a great many; but for the young men the time is hardly come yet, because many are waiting till they attain 25.

2173. Do you consider that it operates well for the members of the college generally, that the public should be informed that there is a body of men belonging to the same college who have undergone a higher examination than themselves?—I do not think that practically it injures the reputation of the members, and I do not believe the members generally trouble their heads about it. When I was president, and had to admit a young man as a member, I said to him, "In addition to such privileges as you now have as member, you have this privilege: if you will continue to improve yourself while you are in practice, you may come up at the end of so many years without any further professional study in the schools, and may be admitted to the fellowship;" and I am led to believe that that has induced many young men to aspire to the higher distinction.

2174. Was there any bar to young men who were studying midwifery?—A bar to their being elected to the council, unless they discontinue it.

2175. They must discontinue the practice of midwifery or pharmacy before they can be admitted to the council?—Yes.

2176. Do you approve of that arrangement?—I do not know that I approve of it with regard to midwifery, but with regard to pharmacy I do.

2177. Do you attach great importance to this arrangement?—I think it important that persons should leave off practising pharmacy before they can be appointed to the council; and I do not think that they would be elected. I think it of advantage to surgery that it should be kept to a certain extent a distinct profession.

2178. How can you possibly keep it a distinct profession?—To a certain extent it may be kept distinct.

2179. A man may continue to call himself a surgeon, and yet not dispense medicines, but is not almost every surgeon who is in extensive practice occasionally consulted in what may be called medical cases?—I should say not to a great extent. If persons come to me in strictly medical cases I send them away. If a person comes with a complaint in his lungs, I say, "You had better go to Dr. A. or Dr. B., or some other physician."

2180. You believe that that does not belong to you?—I consider that the range of knowledge is so extensive that no individual can master the whole; and that if you are to do any good you must have a general knowledge of the whole; but cultivate one branch in particular.

2181. You believe that the education should as nearly as possible be the same for all classes of practitioners, but that there should be a division of labour after they have commenced practice?—I do not say that the education should be the same, but that each person should in his education obtain a general knowledge of the whole. I do not think it is necessary for a physician to study all the minute parts of anatomy, and I do not think it is necessary for a surgeon to study

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physic as minutely as a physician ought to do, but I think that each should have a general knowledge of both branches.

2182. The education, as regards all the elementary branches, should be the same in both cases?—Yes.

2183. You stated that you feared that if the profession were to consist of only one faculty, the higher departments of science would be neglected; what has induced you to form that opinion?—If the whole profession be one faculty, the qualification must be the very minimum; and I think a young man, who begins practising at the age of 21, and who looks to obtaining a livelihood at that age, is not so likely to advance the science of the profession as one who is able to continue his studies three or four years longer, and is not called upon, from any necessity, to obtain his immediate livelihood. But there are exceptions to all rules; I do not speak of those men of superior talents and industry who get over those and greater difficulties.

2184. In the College of Surgeons have you not a superior and inferior qualification, and do you find that all are content with the inferior qualification?—No; many come up for the higher qualification.

2185. Then would not that be the case if a single faculty were established, that there would be ambitious able men who would always desire to obtain higher titles?—Yes, you would have able men of that kind; but at the same time I think it would prevent a good many highly educated men going into the profession.

2186. The College of Surgeons might at this moment in England constitute a single faculty, and there is no necessity for an individual passing the College of Physicians or Society of Apothecaries; but even if that single faculty were established, would you not have the emulating principle which you have described operating upon candidates for the profession?—We should not be without emulation, certainly.

2187. Do you consider that there ought to be any great difference in the examination of fellows and members, when you consider the situation in which the members are placed in remote parts of the country, and that they are thrown constantly in their practice upon their own resources?—I think the examination for the fellows should be such as to prove, that if they are called upon so to do, they are qualified to act as teachers; every hospital surgeon is a teacher; but a man may be an excellent practitioner without having that qualification.

2188. Might there not be many qualified men who might be incapable of teaching, from their want of power to explain themselves perfectly?—Yes; but they may prove their acquirements by coming up for the fellowship, if they please, at any period of their lives.

2189. Is it your endeavour in your examination of the members to secure to the public a competent body of practitioners as surgeons in all the ordinary duties which belong to the profession?—Yes; I think that that is kept in view in our examinations.

2190. Do you test the capabilities of the candidates in any way with regard to operations?—No, we do not, for the reason I mentioned just now, that there is a difficulty in obtaining subjects; but it is very desirable.

2191. Do you require candidates to show that they have been subject to examination at the bedside of the sick?—No.

2192. Would not that be very desirable?—No; I do not think anything would come of it; I have read that part of the Bill, and I do not believe that it would be practicable.

2193. Can you conceive any more severe check to the system of cramming that could be imposed?—No; but it could not be carried into practice. I cross-examined my own students at the bedside; but in the hospitals they would not allow me, by virtue of my office as an examiner, to come and examine the students at the bedside.

2194. If the law enforced it they would be compelled to submit?—No; a hospital belongs to the governors; the management is vested in the governors; that is, in the subscribers to it.

2195. By another Act we might alter the arrangement?—If you took the hospital out of the hands of the governors they would feel no interest in it, and it would not be properly conducted; besides which, I think the best examination is but an imperfect test of knowledge; and the great benefit of a curriculum is, that

that it requires a certain time to be employed in study. I do not think that a single examination at the bedsides of patients would be much of a test.

2196. You are aware that though the curriculum requires the devotion of a certain portion of time to study, in many cases that time is not in fact applied to study, but the candidates make themselves competent to undergo the examination by cramming; what check would you impose upon that?—A check can only be imposed by having a very good examination.

2197. In what way would you improve the examinations which take place at Apothecaries' Hall and at your own institution?—I would improve those at Apothecaries' Hall by requiring that a certain number of those who have been accustomed to teach in the medical schools should be amongst the examiners.

2198. Are there not objections to that arrangement, inasmuch as those examiners are often accused of partiality at the examinations?—I do not believe that there is any partiality; I do not recollect any at our college.

2199. You are aware that objections have been raised?—Yes; there will be on all occasions of that kind objections raised; but at the College of Surgeons great care is taken to prevent partiality.

2200. The examiners sometimes examine those persons who have been their own pupils in the various hospitals and schools?—Never at the College of Surgeons.

2201. It was formerly the practice; has it been abandoned?—Never in my time. Even after I had resigned my office of surgeon at St. George's Hospital, I never examined St. George's pupils.

2202. Having considered the subject of medical education so maturely, are there any suggestions that you could make to the Committee, with a view of rendering it more effectual by legislation?—That is a wide question; I am not prepared to answer it without consideration. I will give the Committee an answer at a future day if they wish it.

2203. With reference to the Bill before The House, you have stated that you do not consider the mode of registration there suggested could be carried into effect?—Not as to existing practitioners.

2204. You stated that some persons ought to be registered who under that Bill would not be registered, and that some would be registered who ought not to be registered?—Yes.

2205. Will you be kind enough to refer to Schedule (C.) in the Bill, and state whether you consider that the objection which you have offered applies to the plan there set forth?—It would apply if it was said, "A. B. degree granted by St. Andrew's University;" at least it might apply there or it might not. It would apply if there were a gentleman practising here with a Berlin degree; he might be a very well-qualified practitioner, and he might have an extensive practice in the country, but he would not be included in this register.

2206. You mean that if he had no other qualification than that Berlin degree, he would not be included?—No; and yet he might be a great deal better qualified than a St. Andrew's graduate.

2207. But hitherto that individual has been practising illegally?—All the Edinburgh practitioners who have not obtained a licence here in some sense practise illegally. According to the law, no man is a licensed physician in England who has not an Oxford or Cambridge degree, or a licence of the College of Physicians; those physicians to whom I allude have not that qualification, therefore strictly they are not legally qualified; but your Bill would render those persons qualified, because you allow any man who has an Edinburgh degree to practise.

2208. The provision of the Bill is, that any person who is legally qualified to practise in any part of Her Majesty's dominions shall be registered; was not that the provision in the Bill of which you approved?—Yes, and it is quite proper that it should be so; but what I meant to say is, that there should be a discretionary power given to those to whom the registration is confided, and that discretionary power would be too much for any individual to have.

2209. You consider that any person holding a foreign diploma, who is not now entitled by law to practise in any part of the United Kingdom of Great Britain and Ireland, ought to be registered; or that at least there ought to be a discretionary power in the Council of Health to register him?—I think if a gentleman has got a degree from Paris, and he is resident in any part of the country as a physician, and conducts himself respectably there as a physician,

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and is consulted by the people of the neighbourhood, it ought to be out of the question to tell him, "You must go away, you must not practise," when he is allowed now to do so.

2210. Do you apply that to surgeons?—If an individual is practising surgery, though not a member of the College of Surgeons, I consider it would be very unjust to send him away and not allow him to practise; in fact he is a legal practitioner already.

2211. If he held a diploma in surgery from the University of Paris, and he had been practising in England for a considerable time, and had obtained repute and respectability in the neighbourhood, it would be hard to exclude him from the system of registration?—I said more than that, that if he had not a diploma of any kind, but had been received by the public as a practitioner in surgery, you should not turn him away, and say, "You shall not practise." Some of our best country surgeons are in that position.

2212. If he had a foreign diploma in surgery, you consider that that objection would still more apply?—Yes.

2213. If an individual presented himself at your college, and produced no other testimonial than his character of respectability in the neighbourhood where he practised, and the diploma of a foreign university, would you admit him to an examination?—I believe we should admit him upon a foreign diploma for examination; but I will not be certain. There is a discretion left to the Court of Examiners.

2214. Are you aware of a single instance in which a person holding only such a diploma has been admitted to examination for the diploma of the College of Surgeons?—I think there have been instances, but I will not say positively.

2215. No such case has fallen under your consideration?—I cannot be positive.

2216. Do you consider that persons who have been practising only as apothecaries, and who have been knowingly violating the laws for a long series of years, ought to be registered?—Yes; many of those are very proper persons to practise, as merely from some technicality they have not been able to be examined by the Company of Apothecaries.

2217. I am not applying the question to persons who have been educated medically, and have obtained a licence to practise in any department of practice, but to persons who have not been medically educated at all?—They ought not to be allowed to practise, and ought not to be included in the register; but if an Edinburgh physician has been practising here as an apothecary, and the Company of Apothecaries have never taken any measure to stop him, and the public have received him as an apothecary, it would be very hard upon the practitioner himself, and his patients, to send him away.

2218. You consider that he ought to be registered?—Yes.

2219. All such persons should be registered?—Yes.

2220. Persons who have received a good medical education, and who have hitherto been allowed to practise, ought not to be excluded from the register?—No.

2221. They ought to be included in any system of registration that was adopted?—Yes.

2222. Would you object to make the registration compulsory?—No, if you had registration at all it should be compulsory.

2223. Will you be kind enough to refer to Schedule (C.), and state whether there are any other objections that you have to the system of registration which is there adopted?—It appears to me that it would be much better to register them according to their classes; those who have degrees as physicians, diplomas as surgeons, and licences from Apothecaries' Hall; and those who belong to two classes might be put in both classes. A man may meet with an accident in some country place, and he may look at this list and send for a gentleman who may merely practise as an apothecary, or he may send for a physician, neither of whom could answer his purpose.

2224. The alphabetical list which he would have would enable him to refer to the names of all the qualified practitioners in the town, and he would then have an opportunity of referring to the other part of the schedule, and he would see at once the qualification which all the practitioners possessed; do you see any objection to that arrangement?—I think it is a matter of very little consequence either way; I think the other would be better.

2225. Would

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2225. Would it not be much more invidious to arrange the profession in classes?—I do not think it; a man need not be ashamed of the class he belongs to; it is a very good and honourable profession in all its parts.

2226. In what position would you place the operative surgeon?—The members of the college ought all to be classed as surgeons; I have no objection to every one being put down as a surgeon.

2227. Would you place physicians before surgeons?—The physicians are the older profession, and they are quite welcome to the precedence so far as I am concerned.

2228. Does not the mode of registration here introduced accomplish all that is or can be desirable without creating any unpleasant feeling on the part of any branch of the profession?—I do not think that it would create any unpleasant feeling if they were arranged in classes, and that it would be convenient to them all.

2229. Can you conceive that any fairer mode can be adopted than that which gives the name of the individual, and then states precisely what is his qualification, and where he obtained it, and what is the date of it?—As I said before, I think it matters very little; I do not attach much importance to the form of the register.

Joseph Henry Green, Esq. F.R.S.; called in, and Examined.

J. H. Green, Esq. F.R.S.

2230. Sir *J. Graham.*] YOU are a Member of the College of Surgeons?—I am.

2231. Are you one of the council?—Yes.

2232. How long have you been one of the council?—For 10 years.

2233. How long have you been a member of the college?—About 30 years.

2234. You have ceased to practise generally, have you not?—Yes; I still continue to be surgeon of St. Thomas's Hospital, but I have given up private practice.

2235. How long have you been connected with St. Thomas's Hospital?—I have been one of the surgeons about 25 years.

2236. Has your connexion with St. Thomas's Hospital enabled you to watch the progress of students in general in the acquirement of the knowledge of their profession?—Yes, I apprehend it has, for I have been occupied in teaching during the whole of that time, and indeed longer, for upwards of 30 years; I began to be a teacher before I was member of the college.

2237. You have been engaged, therefore, instructing the surgical youth for about 30 years?—Yes; upwards of 30 years.

2238. Are you connected also with King's College?—I am now one of the council of King's College; I was professor of surgery there.

2239. Your connexion with those two institutions has given you opportunities of observing the progress, or otherwise, generally made by youths studying surgery within the last 30 years?—Yes.

2240. Should you say that their proficiency has been progressive as a body, or stationary?—I should fear that it has been rather retrograde in respect of those particular branches which I have taught, anatomy and surgery.

2241. Are not those two branches the cardinal points in the science of surgery?—They are, certainly.

2242. To what would you ascribe this retrograde movement which you think you have observed?—To a greater demand being made upon the time of the young men by the system of instruction, which requires attendance upon a greater number of lectures, and attention to be given to a greater number of subjects than formerly.

2243. A great many of the young men are destined for general practice in the country, I presume?—Yes.

2244. And for that general practice, according to law, it is necessary that they should obtain a licence from the Apothecaries' Company?—Yes.

2245. Therefore, in preparing themselves for general practice, they not only study anatomy and surgery under you, but they study those subjects which it is necessary that they should learn, with a view to preparing themselves for examination before the Society of Apothecaries?—Yes.

2246. The examination before the Society of Apothecaries enters into other subjects than anatomy and surgery?—Yes.

2247. What are the subjects upon which it is necessary that the young men

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should prepare themselves for examination, which are inconsistent with the devotion of their time to the study of surgery and anatomy?—The practice of medicine, materia medica, medical jurisprudence, botany, chemistry, and midwifery.

2248. Are those the various subjects into which the examiners of the Society of Apothecaries enter?—Yes, I believe so.

2249. Does the preparation for the examination before the Society of Apothecaries interfere with the study of anatomy and surgery, the most important part of the curriculum of surgery?—It does not prevent the students attending the lectures which are prescribed by the college; but I apprehend it interferes with their time for dissection, and for attending the practice of hospitals.

2250. Your observation would lead you to infer, that this preparation for examination before the Society of Apothecaries interferes materially with their study of surgery, and the acquirement of superior attainments in that science?—Yes; the effect which we find (I think I may say "we," as one of the examiners of the College of Surgeons) is, that those young men are obliged to qualify themselves by means of what is commonly called grinding, getting their information by rote instead of acquiring it by inspection of the dead body, and by attending the cases in the hospitals.

2251. Does that preparation by grinding apply equally to the examination before the College of Surgeons as to the examination before the Society of Apothecaries?—Yes; my observation was directed to that; I apprehend that they could not get up the information that is required by the Society of Apothecaries without grinding, the information required being so various and extensive.

2252. Do you think that the subjects are more various than it is really necessary for general practitioners to study?—There is great difficulty in answering that question; but I am afraid that if the public, as they do, require practitioners who can only be paid at a moderate rate, they must content themselves with something lower in the scale of education. A knowledge of all those subjects is no doubt required for a full knowledge of the medical profession; but formerly many of those subjects were left for the students to acquire a knowledge of during their apprenticeship, or as they might acquire a knowledge of them afterwards in practice. I dare say they were not very scientifically informed upon those subjects; but with respect to the ordinary cases, generally met with in the practice of medicine, they were probably competent enough. Formerly, when the young men came to London they devoted themselves especially to anatomy and surgery. When I first taught at St. Thomas's Hospital a great number of the students did not attend to the practice of medicine at the hospital at all; and many of them did not even attend the lectures upon the practice of medicine, and kindred subjects.

2253. Their exclusive attention to anatomy and surgery being now interrupted by the preparation for that extensive examination before the Society of Apothecaries, in your opinion, has the acquirement of surgical knowledge on the part of young students been materially diminished?—Yes.

2254. You have mentioned grinding as preparatory to the examination before the College of Surgeons; have you been an examiner of the College of Surgeons?—Yes, I am now an examiner.

2255. Can you not by examination detect grinding, and imperfect knowledge based upon grinding?—To a very considerable extent, certainly we can.

2256. Do you consider it your duty to check that system by the course of examination in the College of Surgeons?—Yes, we do.

2257. Are you aware whether the examiners on the part of the Society of Apothecaries are public teachers?—I do not know, but I believe that they are limited in their selection of examiners, and that therefore they are not capable of choosing those who may be best fitted for the office.

2258. Have not examiners who have themselves been accustomed to teach, greater facilities in detecting unsound knowledge from grinding, than those who have not been public teachers?—I apprehend that no other persons than those accustomed to teach have the power of doing so. It is part of the business of a teacher to be constantly examining, with the cases of disease, the dead body, or whatever the subject may be, before him.

2259. Do you, in examining for admission to membership of the College of Surgeons, test surgical skill by actual dissection?—No, we do not; the only practical part of the examination is that of having the bones before us, but which assist very much in examining as to the knowledge of anatomy.

2260. In

2260. In regard to your examination for membership, within your memory has it become more searching or strict than it was when you first became acquainted with it?—I have been examiner only about 12 months.

2261. But is the examination as now conducted by yourself and your colleagues stricter than it was when you were admitted a member, and underwent examination?—Yes.

2262. Considerably so?—Yes.

2263. Therefore unless it were for this interruption of the study of surgery and anatomy which you have described, from the interference with it by the preparation necessary for the examination before the Society of Apothecaries, so far as it depends upon the College of Surgeons the standard has been rather raised than lowered; is that so?—Yes, I think so; the students too are impressed with that opinion, that the examinations are much stricter than they were formerly.

2264. The examination for membership?—Yes.

2265. Mr. *Wakley*.] And that is the fact, that the examinations are more strict?—Yes. I cannot speak from my own experience, but only from the information I have obtained among the students; but I believe the examinations are now more strict and searching than they have ever been.

2266. Sir *J. Graham*.] Passing from the examination for membership to the examination for fellowship, is that examination a stringent and efficient one?—Yes.

2267. There dissection is introduced into the examination, is it not?—Yes, and operations.

2268. Can grinding prepare for that examination?—No, not for that practical part of it.

2269. Is not that part of it connected with the highest branches of science?—I think one must concede to physiology the rank of being the highest, but anatomy is the foundation of medical science.

2270. The examination extends even beyond physiology, it branches into general literature and general acquirements?—That has not been hitherto applied as a test at the College of Surgeons; it will be in the year 1850.

2271. But notice has been given that after the year 1850, mathematics, the demonstrative sciences, and general literature, and those acquirements which are necessary for the bachelor's degree at the universities, will form part of the examination for the fellowship?—Yes.

2272. You examine for fellowship as well as for membership?—Yes.

2273. Have you been satisfied with the emulation among the young men producing the fruit of great skill and general acquirement, as tested by the examination for the fellowship?—The institution has been somewhat recent, but I think, taking it on the whole, that as many have come up already as might have been expected; and it has not only excited emulation amongst the young, but likewise among the older men; we have had many members of long standing who have come up for examination for the fellowship.

2274. From what passes under your own eye among the young men at St. Thomas's, have you reason to believe that they look forward to standing out, when they attain the age of 25, for the fellowship; and that at an early period of study they look forward to preparing themselves for that honour?—I think I can hardly say generally that they do; but I have met with many instances of men who have so determined.

2275. On the whole, should you say that the institution of the fellowship has acted and will act as a stimulus to the acquirement of greater surgical skill?—Yes, I can venture to say that quite affirmatively.

2276. I need not ask you if you approve of the amended charter of the College of Surgeons?—I do approve of it.

2277. You think it an improvement upon the old one?—Yes, a very great improvement, in respect of the institution of fellows especially. I did not entertain the general opinion with respect to the mischief of what has been, mistakenly, called self-election; I had no objection to that; but I think that the establishment of a higher grade is an unmitigated good; that it is calculated to be of great benefit to the profession and the public.

2278. You mean the distinction between fellows and members?—Yes.

2279. You do not think it invidious, but useful, as far as the members of the profession are concerned?—Yes.

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2280. Then, I presume, if that be your opinion with respect to the members of the college, that classes are not invidious but useful, you are not favourable to a single faculty in the whole profession?—Certainly not.

2281. And you would not approve of any system of registration which had a tendency to favour or produce a single faculty?—I should think it would be a great misfortune to the profession and the public.

2282. Have you seen the Bill which has been introduced this Session into the House of Commons for the amendment of the law regulating the practice of medicine and surgery in England?—I have.

2283. Have you formed an opinion whether the tendency of that Bill be or be not to produce a single faculty?—That was my understanding of that Bill; that that was its object.

2284. Looking at it calmly and dispassionately, should you say that, taking it with its various clauses and provisions, such is its tendency?—Yes.

2285. Are you aware that the College of Surgeons have petitioned against that Bill?—Yes.

2286. Have you seen that petition?—Yes.

2287. You know the objections which are urged in detail against the Bill?—Yes; it was a petition, I believe, of the president and vice-presidents, but afterwards read to us, and approved of in the council.

2288. Was it read in your presence?—Yes.

2289. May we conclude that, generally, you adopt the objections to the Bill stated in the petition?—Yes, entirely.

2290. We have had the president here, and he has stated those objections in detail; the petition has been read in your presence, and adopted by the council; may we infer that, upon the whole, you concur in those objections?—Yes, entirely so.

2291. Was it read at a meeting of the council?—Yes.

2292. Were there any dissentients from that petition?—I think not; there were some dissentients as to the form; there were some objections made upon the ground that the president had not called together the council sufficiently early after he had presented the petition, in order to approve of what he had done; but I do not think that there was anybody who disapproved of the substance of the petition. I recollect one observation that was made, and that was that something ought to have been stated in the petition with respect to the approval of the principle of registration, and that was entirely concurred in.

2293. Do you yourself approve of registration, properly framed and under competent authority?—Yes.

2294. Do you think that the registration under this Bill is a registration such as ought to be the standard registration for England?—No, certainly not, because it does not sufficiently inform the public what the qualifications of the persons registered are.

2295. Have you seen the register?—Yes.

2296. Would you think any register a correct statement of fact in which there was not a statement in classes of the different members of the profession, in the first instance, even though there should be added to that an alphabetical list of the profession, setting forth their grades and also their residences?—That is my opinion, that there should be a register setting forth in classes the qualifications of the persons registered.

2297. You have said that you do not think that amongst surgeons in your college the distinction of fellows and members is invidious, but that you consider it useful. Extending that view to the whole profession, do you think the subdivision into classes of physicians, surgeons, and apothecaries, or general practitioners, as they may be termed, would be invidious, or do you think that it would not only not be invidious, but useful, as in the case of surgeons?—With respect to the term "invidious," I suppose there are many persons who would dislike the distinction, because there are certainly many people who are now exclaiming against any distinctions; they wish for only one faculty; therefore I suppose to those it would be invidious; but I do not apprehend it could be properly considered invidious, or that they could make any real objection to it. I cannot think that what is only stated as a ground of complaint, without sufficient reason, can be called essentially and properly invidious; therefore I use the expression with this reservation. And with respect to that question, I should say such a classification as you speak of would not be invidious, but useful to the whole profession.

2298. A counsellor with a stuff gown may rather regret that he has not a silk gown, or a solicitor may regret that he is not a barrister, but yet such subdivision may be very useful both for the profession and the public?—Yes.

2299. Do you see any analogy of that kind in the case of your profession?—Yes, and especially useful, as provision is made for every one rising into the upper ranks if he so pleases, and exerts himself for that purpose.

2300. Do you see any advantage in the postponement until the age of 25 of the qualification for the fellowship?—Yes, I do.

2301. What good effect does it produce?—It gives an opportunity for a more extended education, and this not only with respect to what is strictly professional, but likewise with respect to what I believe is equally necessary as the groundwork, a preliminary liberal education.

2302. If classification have the effect of promoting emulation in the profession, and emulation lead to distinction tested by excellence, is not that an advantage both to the dignity and honours of the profession, and also to the safety of the public?—Certainly.

2303. You think that the Bill which is now before us has a tendency to the introduction of a single faculty?—Yes, so it appears to me; but more than that, it appears to me very likely to diminish very seriously, and very dangerously to the public, the education of medical men.

2304. Will you point out, shortly, why you think it would have the effect probably of lowering the education of medical men generally?—As no benefit would be derived from a higher qualification on the register, they would naturally seek the cheapest schools, and it is very likely to produce a rivalry among the schools for affording medical education at the cheapest rate and in the shortest time, and that must necessarily induce a lower professional standard of education.

2305. Is there any law now to prevent any man practising surgery in England?—There are certain reservations with respect to poor-law unions and prisons, but otherwise there is no restriction; any man may practise surgery; submitting to examination for the membership and fellowship of the college is a perfectly voluntary act on the part of those who seek them.

2306. Is it your opinion that it would be desirable, by penalty, to check practice without qualification, or that it would be more expedient to induce, by encouragement, the possession of qualification?—It is a very difficult question, but I am disposed very much, if it be possible, to make some legal penalty against unqualified persons practising.

2307. The Apothecaries' Act is founded upon that principle?—Yes.

2308. And also the exclusive right of the College of Physicians?—Yes.

2309. Has that principle been found effectual under either of those acts?—No.

2310. Does not that rather lead you to doubt the efficacy of the principle of penalties?—There is a difficulty in applying it, but still the fact of a person doing an illegal act affixes to him a certain stigma, and the College of Physicians and the Society of Apothecaries have, I think, been deterred, from other causes than from the want of power, from putting the law into execution; the College of Physicians, I think, found that no juries would convict.

2311. Does not that indicate that public opinion is rather opposed to proceeding by penalty in those cases?—Yes, that is very true.

2312. Is it not one thing so to act in violation of the law, and another to pass a law which shall legalize practice without such qualification?—Certainly, they are two very different things.

2313. What is your opinion of this Bill which we are now considering; would it legalize or not general practice without adequate qualification?—It would legalize general practice without any adequate qualification.

2314. Have you looked at the securities which this Bill affords for the test of adequate qualification, as contained in clauses which make the curricula of the licensing bodies subject to the sanction of the Secretary of State or the Queen in Council, and examinations under those curricula to be tested by inspectors in different parts of the United Kingdom?—Yes.

2315. Do those provisions appear to you adequate to afford security against imperfect curricula, and imperfect examination under those curricula?—They appear to me to be not only not adequate, but not calculated in the least to answer their purpose. The examining bodies have been appointed as those best qualified

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fied for their office, and the inspectors, if appointed by the Queen in Council or the Secretary of State for the Home Department, may or may not be persons qualified, and they may not know anything about the subject which they are to inspect.

2316. You have no great faith in the medical knowledge of Secretaries of State or Presidents of the Council?—No; and as they would have to choose the inspectors, I presume that I can have as little confidence in those inspectors.

2317. Would not the pressure be very great upon those inspectors, in Scotland or Ireland, to favour particular licensing bodies, or to act with greater severity towards others; or, at all events, would not the suspicion of favour be very great?—I have not considered that.

2318. If you are not satisfied with the provision respecting the exclusive power vested in the Secretary of State or the Queen in Council, as the case may be, as proposed by this Bill, has any other central authority ever occurred to you as advisable, to which control of the whole scheme of registration might be entrusted, such as a Council of Health?—Yes.

2319. Would you view such an institution with favour or otherwise?—With favour, certainly.

2320. If it were composed partly of medical men from different parts of the United Kingdom, and partly of laymen of distinction, would that mixed composition meet your view of the necessity of the case?—Yes, generally.

2321. Would that body, in your opinion, be a useful body for other purposes besides the direction of medical education, and ascertaining that the standard then fixed was duly observed by examination?—Certainly.

2322. Does the want of such a body appear to you to be a defect in our civil polity?—It does, very much so.

2323. Do you think that a Council of Health sitting in the Metropolis might perform both functions; that it might control the medical education required by the different licensing bodies, and that it might also aid the Government by its advice upon great emergencies affecting the health of the people?—Yes, I do.

2324. You think the combined operation might be entrusted to such a body?—Yes.

2325. Would you prefer creating such a body, for the purposes of this Bill, to the control proposed by this Bill to be vested in the Queen in Council or the Secretary of State?—Certainly I would prefer the Council of Health.

2326. If this Bill passed, with the provisions, such as they are, with regard to the standard of education, and the examinations under that standard as controlled by inspectors, what would be the effect, in your opinion, of admitting to an equality of practice in England and Wales, Scotch and Irish practitioners?—I suppose that it would be very detrimental, in the first place, to the interests of general practitioners, and I had always supposed that that was the cause of the main cry for medical reform; and I apprehend that very badly qualified persons may come from some of the schools there.

2327. So far from equality of privilege, so granted with restraints only such as are proposed to be provided under this Bill, giving security to public health by having well-qualified medical advisers, your fears would be the other way?—Yes.

2328. Are there any imperfections in the charter of the College of Surgeons which have occurred to you under its amended form; or, if not disturbed by any legislation, do you think that it will work well?—I think, if undisturbed, it will work well. The only mistake, I think, that was made was the nomination of too large a number of fellows in the first instance.

2329. That was done once for all, and not to be repeated?—Exactly; it cannot occur again.

2330. That defect will in lapse of time disappear?—Yes, necessarily.

2331. You do not object to an unlimited number of fellows admissible by examination?—No, not at all.

2332. Are you friendly to the Apothecaries' Act as it now exists with regard to the five years' apprenticeship?—Apprenticeship I do not see the advantage of; on the contrary, I see many disadvantages as regards the education of professional men; if you could always secure a master who could teach, and who would teach, it might have its advantages; but the facts are so notoriously opposed to that, that one cannot but wish to see the apprenticeship clause done away with.

2333. Is not the dedication of five precious years taken from the time of study to the compounding of drugs an unreasonable period?—Certainly; but even then they do not seem to learn pharmacy, at least they do not acquire an adequate knowledge of the materia medica; they may know how to make up a draught, but they do not obtain a scientific knowledge of pharmacy.

2334. As regards learning pharmacy, you think the five years are thrown away?—Yes.

2335. You have expressed an opinion that practically the examination by the Apothecaries' Company interferes very seriously with the study of surgery?—Yes.

2336. And in that sense you would not approve of the Apothecaries' Act?—No, certainly not; but if you will allow me to refer to the constitution of the examining court, there seems to be no adequate provision for examination by those best qualified for the office. The examination on medicine would best devolve on those who have made its science their especial object, and the examinations in chemistry and pharmacy should be conducted by those persons who have made the science of chemistry and pharmacy their study. Now, a general practitioner, merely as such, cannot be supposed to have made chemistry and pharmacy the objects of special and scientific study; he, for the most part, and especially a member of the Apothecaries' Company, buys his compounds already prepared.

2337. Colonel *T. Wood.*] Is there any penalty for assuming the designation of a member of the College of Surgeons?—Not that I am aware of.

2338. Do you propose that the College of Physicians should examine the general practitioners in medicine?—Yes.

2339. And that the examination of the Society of Apothecaries should be confined to pharmacy and chemistry?—No; I do not think that they are persons fitted to examine in pharmacy and chemistry.

2340. You would propose another body?—Yes; they are not by profession what the French call *pharmaciens*, or pharmaceutical chemists.

2341. What is the nature of the body that you would propose should examine upon those subjects?—It must be a Board composed of persons who have especially made those subjects their study; we have no such body in the profession that I know of; but I did not wish at all to convey the idea that the Society of Apothecaries had not been of very considerable benefit to the profession.

2342. Must not care be taken not to render the education of general practitioners too expensive?—Certainly.

2343. You propose that the College of Physicians should examine them in medicine, some other body in pharmacy and chemistry, and the College of Surgeons in surgery?—Yes; and it would be very essential likewise that another body should examine them in midwifery, that body being composed of professed accoucheurs.

2344. Could not that branch be brought within the province of the College of Surgeons?—No, it does not belong properly or entirely to surgery; but you have here in London a much better opportunity of forming such a body by taking physicians and surgeons who practise in midwifery.

2345. That would make four examinations?—It would.

2346. Mr. *Acland.*] The council of the College of Surgeons are elected entirely by the fellows; is it not the case that there is a feeling in the profession that the council ought to be elected by the whole body of members; have you heard such an opinion expressed?—I should hardly say that there is a feeling among the profession; there is among the general practitioners.

2347. Can you state what objection there would be to that arrangement?—The election then would be with persons who do not make surgery their exclusive study; and other interests would become involved in the election than those which are essential to the promotion of the science of surgery.

2348. If any one was to compare the whole body of members of the College of Surgeons to the masters of arts of the two Universities of Oxford and Cambridge, as proper constituents to govern and control the bodies, what distinction should you draw between the two?—I do not know exactly the extent of the functions of masters of arts in respect to their elective powers. I have answered the question in one respect, that you would have then electors who were not properly qualified, by reason of their not making surgery their exclusive study; and then the next objection is, that the election by the whole body of

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members is really almost impossible; they could not come up to London for the purpose.

2349. If your council were elected by the whole body of general practitioners, into what hands do you think the management of the council would be likely to fall?—I have considerable faith in the good sense of the profession, and I do not know therefore that the result would be very different.

2350. It is not your impression that the more sensible of the general practitioners who are members of your college are dissatisfied with the present arrangement?—The complaints have been very loud, and indeed there has been an association for promoting medical reform; but the objections that have arisen seem to me to have originated in a mistaken view, that scientific bodies were to be guided by exactly the same principles as governments, and that it was to be a representative body, to whom the interests of science were to be confided. Now that does not apply at all. The principle of popular election and representation may be rightly applied to municipal corporations and commercial companies; but the peculiar character of colleges of learning and science is the selection of those who are best fitted to promote learning and science.

2351. Do you think it desirable that surgeons, or a certain number of the most eminent surgeons, should receive their education together with the more eminent members of the law and the church, and the gentry of the country, at the universities?—Yes, I do.

2352. Do you think that there is anything in the nature of the occupations of a surgeon which would make a university education a bad preparation for his professional avocations?—No; on the contrary, I should think it would be of great service to him, in disciplining his mind even for his professional studies, without any ulterior views; without considering the man, only considering the surgeon.

2353. Can you point out any distinction between the mode in which a man who is aiming at the higher and more scientific position in his profession pursues his studies, and that in which a man who is only seeking for general practice pursues them?—No; I should think the principle to which they must both advert would be the same; but it is the misfortune of a person who cannot aim at the higher rank in his profession, that he cannot have his mind so opened, invigorated, and disciplined by preliminary education as to obtain the advantages which the other obtains; but still the profession, I take it, must be studied upon the same principle, and with the same views. But I think I can answer your question better by giving such an example as this: if you take, as it has been frequently my lot to see, a young man who has come from an apprenticeship of five years, and compare him with one who has been at the university, who has merely taken his first degree in medicine, both of them young men and nearly of the same age, you will find that it is with the greatest difficulty that the one who has been apprenticed in the ordinary way to a country practitioner acquires information; he has no power of observing and generalizing; in many instances he cannot spell, and cannot put down his thoughts in writing; in short, he evidences in every way great imperfection of mental developement, whilst the young man who has come from the university gains more perhaps in a couple of years than the other would if he were at the hospital for 10 years.

2354. Are not the students for general practice obliged to study too many subjects at once under the present system of examination?—Yes; they come unprepared in point of mind, and the whole of the information has to be poured in at once.

2355. Are they not over-lectured?—Yes.

2356. Is there any other suggestion that you would wish to make for the improvement of medical education?—There is nothing more that occurs to me at the present moment. The answer requires much consideration.

2357. Mr. *Aldam.*] Is it not of importance that a surgeon should have a rather extensive medical knowledge?—Certainly.

2358. Are persons previous to receiving the diploma of the Royal College of Surgeons examined on medical subjects?—No, they are examined on surgery; but there is a regulation by which they must produce a testimonial or certificate of having attended a course of lectures on the practice of medicine and the practice of an hospital.

2359. Would it not be desirable that no person should be allowed to practise as a surgeon till he had acquired a certain amount of medical information?—I think

I think so; I think that would be an improvement in the education of the surgeon.

2360. In fact the observation might be extended, that no person ought to be allowed to practise in the profession until he had obtained a considerable acquaintance with all the principal branches of it?—Yes, I am quite ready to admit that.

2361. Is there any probability of the College of Surgeons adding that medical examination to their present examination?—No, we have no means of doing it, unless we sent the candidates to the College of Physicians, which I should be perfectly willing to do.

2362. Colonel *T. Wood.*] And the College of Physicians might send their pupils or students to you?—Yes; it would be very useful.

2363. Mr. *Acland.*] It is the practice of many diligent students who become physicians to take the post of dressers to surgeons?—Yes.

2364. You have expressed in print a very strong opinion that the medical profession should be as far as possible removed from anything that should give it the character of a trade?—I have.

2365. Can you state how far you think it desirable to carry that; would you recommend carrying it so far as to make it a regulation that general practitioners should not sell drugs?—I doubt whether it would be possible to do that; it may be left to their good feeling and to the improvement which may be hoped for by raising the standard of education; but in the country it would be quite impossible for them not to keep their own drugs; and I take it that their patients derive advantage from it, by getting better drugs than they would get from the small chemists and druggists' shops.

2366. Are you not apprehensive that the tendency of elevating the education of general practitioners may be to introduce a lower class of practitioners in the chemists and druggists?—Yes.

2367. Does it occur to you to make any suggestion to remedy that?—No; I think that the Legislature must always require a certain amount of information, such an amount as will qualify persons to practise with safety to the public; and if you find that chemists and druggists are rising into practitioners, you must require of them the same; therefore it is, though I cannot very well say how it is to be done, that I stated to Sir James Graham that it was desirable that there should be something like illegality or penalty affixed to unqualified practice.

2368. I gather from the answers which you have just given, that you trust a good deal to the high standard of professional and gentlemanly feeling for correcting some of the evils which the law cannot prevent?—Yes. I would endeavour by a system, whatever it was, to produce the highest qualification that you could produce; and to give hope to all, even in the lowest grade, that they might rise to the highest if they would give the time and study requisite for its attainment.

2369. You attach the greatest importance, do you not, to keeping up a high tone of gentlemanly feeling in your profession?—I do.

2370. On that ground, do you think it important to encourage the high grades in your profession going to the universities, as tending to connect the heads of your profession with the highest persons in the land?—I do; but I would add to that, that I think it essential to the interests of even the lower ranks of professional men; for I think that the one-faculty plan would soon be found to have a very serious effect upon the pocket of the general practitioner.

2371. Is it not the fact that that gentlemanlike feeling is now to a great extent spreading through the profession, and tending to elevate persons who before were in the lower scale of society?—Yes, there has been that change taking place.

2372. Mr. *Wakley.*] What would be the serious effect upon the pocket of the general practitioner to which you referred?—If the standard of payment were not regulated by high fees you would have a reduction of fees; you would have a run for cheap practice, as you have in other trades.

2373. Would you then regulate the fees of the medical practitioner by law?—No; the fees of the physician are not regulated by law, and I am very sorry that the fees of surgeons are regulated by law; it ought to be an honorarium.

2374. Will you explain in what way you consider the adoption of a single faculty in medicine would have a serious effect on the pocket of the general practitioner?

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practitioner?—In this way: if you have one faculty that faculty must all be brought to the level of the lowest; there would be no grades, no distinctions, nothing elevated in it; and if you brought all to the level of the lowest, it would be a run for cheapness; you would have it degraded into a trade; they would be cheaply educated, and they would compete with regard to the cheapness with which they could attend patients.

2375. Do you object to cheap medical education?—I do not object to cheap medical education if that medical education be good, but you cannot have good medical education except at considerable expense.

2376. Are you aware of the system in France?—I do not know it very well, but I have some general notion with respect to it; but I take it that that is not exactly the one we should imitate; the medical profession in France does not seem to hold a very high grade of respectability.

2377. Are there many of greater distinction in medicine than France has produced?—You may have men of science, and men of science are very highly esteemed; and so it is in Germany, you have many as professors very highly esteemed; but I speak with respect to practitioners who are employed by people in general; they have cheap doctors on the Continent, and, as far as I have seen, they are not much regarded.

2378. The Officiers de Santé?—No, I mean the physicians.

2379. Are you aware that there is a proposition now before the French Chambers for getting rid of the Officiers de Santé?—Yes.

2380. And for requiring that they should all take out degrees in medicine or surgery before they are licensed to practise?—Yes.

2381. Do you see any objection to such a plan?—No, I do not; the Officiers de Santé were very badly educated. You must have a certain amount of qualifications, in order that the public may be treated with safety.

2382. You say that by the single-faculty system the education of all would be reduced to the lowest?—Yes.

2383. The College of Surgeons was originally on one system, was it not?—Yes.

2384. Had you any more than one rank or one class of practitioners; were not all, in fact, members of the college?—Yes.

2385. Under that system did not men attain as high distinction and as high repute as it was possible for them to reach in the surgical profession?—Yes.

2386. But that was the one-faculty system with regard to surgery?—Not exactly; practically there was a great distinction. You will recollect that only those who had been hospital apprentices were elected to be surgeons of hospitals, and only hospital surgeons were elected into the council.

2387. That was not under the operation of the charter?—No; I say practically.

2388. In the charter there was no provision of that kind, but it was merely an arrangement which was adopted by the council?—Yes.

2389. The council being at that time chiefly themselves hospital surgeons?—Yes.

2390. Was Sir Astley Cooper ever higher in rank than member of the college?—No.

2391. Was Mr. Abernethy?—No.

2392. Was John Hunter?—No; but when I say that the one-faculty system would lower the profession, I mean that it tends to lower it; but you will always have individuals who, from natural capacity, genius, and particular opportunities, will distinguish themselves.

2393. You say that all would fall to the lowest standard; do not you find that a totally different effect from that is produced in the college by the creation of the fellowship; you yourself state that it has produced emulation, and that many are seeking to attain that distinction?—Yes.

2394. It is not true, then, that all are anxious to keep at the lowest level?—By no means. I am speaking here of the tendency of a system; I am not speaking of individuals. Perhaps I should better explain my meaning if I were to state, that in my opinion, even if you were to do away with all laws upon the subject, things would remain precisely as they are; that is, the grades and distinctions in the profession would remain practically the same.

2395. You mean that if all the Acts of Parliament on the subject were repealed, and all the charters abrogated, things would remain precisely as they are?—Yes; the needs of society and individual exertion would supply their place.

2396. Mr. *Acland*.] You do not mean that apprenticeship would go on, if the

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Apothecaries' Act were abolished?—No; if there were no legislative interference, practically you would find the profession very much in the same state as it is; you would find persons devoting themselves to physic, others devoting themselves to surgery, and you would have general practitioners and apothecaries, druggists, and so on.

2397. Mr. *Wakley.*] Do you, therefore, object to legislation on the subject of the practice of medicine?—I do not object to legislation on the subject of the practice of medicine; I believe that many evils may be corrected, but that you would have very much the same results if there were no legislation whatever.

2398. The present state of the medical law you deem in many respects to be defective?—Yes; we have to correct evils that legislation has introduced, and to organize a system, which cannot work harmoniously without legislative interference.

2399. I must again refer you to your answer respecting the effect of this Bill, which you say has a tendency to create a single faculty; you apprehend, as I judge, from what you have stated, that it would lower the status of the profession, and that it would have the effect of lowering medical education to the qualification of the general practitioner?—Yes.

2400. But does not the experience which you have had in your own college, where there is one standard of education adopted for members and another standard of education adopted for fellows, convince you that some practitioners of ambitious minds and considerable acquirements would not be content with the lowest position in the profession?—Certainly.

2401. If the Bill which has been introduced into Parliament in the present Session were to be enacted into a law, do you consider that the present arrangements of the College of Surgeons would be disturbed by its operation; and if so, will you explain in what manner?—I conceive that their arrangements would not be disturbed except it were thought necessary to send the inspector to us. I do not know of any other interference that there would be with our arrangements.

2402. You would still examine for members, and still examine for fellows, and the two parties would hold their respective ranks?—Yes.

2403. Whatever emulation now exists with reference to obtaining a higher position would not be disturbed or lessened in any degree by the operation of this Bill?—That I do not know. I should say that the tendency of this Bill is to destroy the desire to become members, still more to become fellows; but it would not prevent persons if they chose to come, and if they thought it an advantage they would come; they are not forced to come now.

2404. It is voluntary at the present time?—Yes.

2405. But they apply for the diploma of the college in consequence of the high distinction which it confers upon them?—Yes.

2406. Should you think, from anything which you have read in that Bill, that that inducement would be in the slightest degree lessened or weakened?—Yes, I should think it would.

2407. Will you be kind enough to explain in what manner?—I conceive that no one would seek a distinction which is expensive or troublesome, when he can obtain the same advantages without it. Now, the principle of this Bill is to effect a registration, and a party can be put upon that register without any such means of distinction, and he gets that distinction which his diploma would otherwise give him in a cheaper and easier way; another thing is, that by the law at present certain persons are obliged to come to the college, who mean to be surgeons of unions or of prisons, but the Bill repeals all previous Acts of Parliament.

2408. The registered practitioner is qualified, under this Bill, to practise in any department of his profession; do you object to that arrangement?—I do; and my objection lies not in the registry, but in the want of any provision for insuring an adequate qualification in those licensed to practise. I approve entirely of the principle of registration, as being most beneficial to the public.

2409. You are aware that the Bill provides that all the curricula of education of candidates shall be submitted to one authority, and that none of them shall have any force in any institutions until they have been approved by that authority. Do you consider that there ought to be a central control of that kind with reference to medical institutions, those especially which are empowered to grant medical degrees and licences?—Yes, I think it would be highly beneficial.

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2410. But with regard to the provision in the Bill, you object that that authority should be the Queen in Council or the Secretary of State?—Yes.

2411. You approve of the power being bestowed on a Council of Health, consisting partly of medical persons and partly of non-medical persons?—Yes.

2412. Upon whom would you confer the power of appointing such a council?—Upon the Queen in Council and the Secretary of State.

2413. But did you not state before that the inspectors under this Bill would not be proper persons, inasmuch as they would be appointed by the Secretary of State?—I did.

2414. Did you see the last Bill which was introduced by Sir James Graham, in July 1845?—Yes; I read the Bills over at the time, and considered them at the time, but I did not know that I was to be examined on this point, and therefore I have not read them since.

Jovis, 15° die Julii, 1847.

MEMBERS PRESENT.

Mr. Acland.	Mr. Hamilton.
Mr. Aldam.	T. B. Macaulay.
Mr. Bannerman.	Mr. Wakley.
Sir James Graham.	Colonel Thomas Wood.
Sir R. H. Inglis.	

THE RIGHT HONOURABLE T. B. MACAULAY, IN THE CHAIR.

Joseph Henry Green, Esq. F. R. S., called in; and further Examined.

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2415. Mr. *Wakley*.] WHEN you were examined on a former occasion, you stated in reply to the last question which was put to you, that you had read over the Bills which had been introduced into Parliament at the time when they were introduced, but that not knowing that you would be examined on the subjects of them, you had not read them lately; have you read them since you were examined?—I have.

2416. Have you referred particularly to the Bill of July 1845?—Yes.

2417. Have you a copy of that Bill with you?—I have.

2418. Refer, if you please, to clauses 2 and 3, page 3. Do you find in those clauses that a Council of Health was to be constituted, consisting of 13 persons?—Yes.

2419. One of them being one of the Principal Secretaries of State, and 12 to be appointed by Her Majesty, with the advice of Her Privy Council?—Yes.

2420. Do you remember whether the Bill containing that proposal was before the council of the College of Surgeons?—Yes, I do.

2421. Was it approved by the college?—Not altogether. Those clauses were approved of, to the best of my recollection.

2422. Do you recollect whether there was any discussion on the proposition for giving to the Crown the entire appointment of the Council of Health, there being no person in that council chosen by any of the colleges?—Previously there had been much discussion. In the previous Bill, or in the one before it, the constitution of the Council of Health had been different.

2423. There were *ex-officio* members from different universities and colleges?—Yes.

2424. And that arrangement in the last Bill was altered?—It was.

2425. Do you recollect whether the change met with the approval or the dissent of the council of the College of Surgeons?—To the best of my recollection it was entirely approved of.

2426. Leaving the appointment entirely with the Crown?—Yes.

2427. And there being no provision whatever in those clauses for there being an *ex-officio* member from any medical body, or any elected member from any medical body, but the whole being entirely with the Crown?—Yes.

2428. Was there any discussion with regard to the safety of leaving the college, as it were, under a lay government, as provided in those two clauses?—Previously

—Previously there had been discussions upon the subject, but I do not recollect, when this Bill was read before the council, and gone over clause by clause, that any discussion arose upon the subject at that time.

2429. But in the Bill which was introduced into Parliament in the last Session, the supervision of the colleges with regard to the curricula was to be confided to the Queen in Council, and you objected to that arrangement?—Yes.

2430. Do you now see that there is some incongruity in your answers to the questions on those points?—Certainly, an apparent incongruity, but the principle seems to be different. In the first place, that is to say in the Bill of July 1845, persons were appointed who would be known to the country, and for the appointment of whom the Secretary of State would be at once responsible in his place in the House of Commons; whereas, under the provisions of the last Medical Registration Bill nobody would know who was to be sent as an inspector. The Secretary of State might send his family medical attendant, or somebody who was not at all known or responsible, and might immediately, from the account and report of an unknown person, adopt measures which would be perhaps very disagreeable to the Council, and perhaps not very just.

2431. But supposing the Secretary of State, under the operation of the Bill of 1845, were to receive reports from his inspectors, he would then refer those reports entirely to a Board of his own choosing, and there is no provision in the Bill, is there, for any portion of that Board consisting of medical men?—No, there is no provision, certainly, for the appointment of any medical men, but at the same time one cannot suppose that where the names of the persons are known to the whole country, the Secretary of State could appoint persons who were unfit for the trust.

2432. Would you have any security for knowing the names until they were appointed?—No; but being appointed they would be known, and, therefore, any objections to them might be stated as to their unfitness.

2433. What you fear then is, if I correctly understand your meaning, that under the operation of the last Bill which was introduced into the House, the Secretary of State on receiving the reports of the visitors might be influenced by private advice insidiously, and sometimes with a sinister object?—Yes.

2434. And that you would have no security that the advice received by the Secretary of State, he not being himself acquainted with medical subjects, would refer to persons of competent authority and judgment on such occasions?—Yes.

2435. Then you prefer for such arrangements the constitution of a Council of Health?—Yes.

2436. But do not you think it advisable that security should be taken in any measure that might be introduced into Parliament for providing that that Council of Health should consist of competent medical men?—Yes, I think it would be very desirable, but the difficulty is to know how to appoint by any other mode than by nomination by the Secretary of State, or by the Crown, persons who would be fit, without involving great difficulties, as was seen in the appointment of *ex-officio* members.

2437. Would you not rather that they should be elected by the different medical authorities of the universities and the colleges?—That was considered, but there is very great difficulty in the way of it, as I think you will see when you come to consider it. In London you have a College of Physicians and a College of Surgeons. Then there was proposed by the Bill, what I did not at all approve of, a College of General Practitioners. Then there are the Universities of Oxford and Cambridge, the colleges in Edinburgh, and the colleges in Dublin, which already make up a very considerable number, without mentioning other parties, who would claim a share in the election.

2438. Your objection, probably, was chiefly directed against the *ex-officio* members, because, probably, you will admit that a man might be a very good regius professor of medicine, but he might be very incompetent to act in the Council of Health as one of a government for medical education?—Certainly; but there are difficulties likewise with respect to the election of others.

2439. But supposing a law were to be enacted, empowering the different colleges and universities to select a person whom they deemed to be competent to represent them in such a council, you, not looking to other institutions, surely could satisfactorily conduct such an election or choice in your own institution?—

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stitution?—Yes; it is very true; but I am afraid in order to satisfy all parties you would have a very unwieldy Board. My answer would depend very much upon the number that you propose for the constitution of the Council of Health.

2440. You think it would be difficult to balance the powers with regard to the conflicting interests?—Yes.

2441. Have you had any suggestions made in the council with reference to the possibility of reconciling those conflicting interests in the governing bodies of the profession?—I cannot say that there has not been some discussion, but I do not recollect anything like a resolution, or any opinion that was given by a majority; anything that I could state to be the opinion of the council.

2442. Do you consider yourself that those conflicting interests have their foundation in reason or in prejudice, or to what cause do you refer them?—That is a difficult question; I do not exactly see the drift and bearing of the question, but if I were to answer as I take the meaning of the question to be, I should say in prejudice.

2443. Do you consider that there should be very striking distinctions in the mode of educating medical practitioners?—No, not very striking distinctions.

2444. In all the elementary branches you would make no distinction?—No.

2445. At what point should, in your mind, the distinction arise with reference to persons, for example, who are to practise as physicians, others who are to practise as surgeons, and the great body who are to practise as general practitioners?—The point at which the distinction must be made, I do not say should be made, is that at which the needs of the candidates and of society point out that you must have a class of practitioners who possess only the minimum qualification which is required for their being safe practitioners, and at which it is desirable for the interests of the profession and of the public, that motives should be held out for evolving the highest attainments that you can.

2446. You think that, having secured to the public a competent number of qualified men, other inducements should be offered to push the mental acquirements of a certain class to the highest possible point?—Yes.

2447. But are you aware that the education of the general practitioner is more costly than the education of the last physicians?—No, I was not aware of that.

2448. Have you ever estimated the expense?—No.

2449. Have you never felt it to be your duty in framing your own curricula to refer to what the expenditure might be for the great body of the members of the college?—It is not a subject to which I have turned my attention; but I apprehend that it would be found that the chief expense of medical education is in the time that it occupies, not in the expense for the actual teaching. I suppose that the whole of the education of a general practitioner in respect to the payment of fees for lectures and attendance at the hospitals would not amount to 100 *l.*

2450. You are aware that your own regulations require now a three years' residence in London?—Yes.

2451. You are also aware that the Apprenticeship Clause of the Apothecaries' Act requires that a period of five years should be passed as an apprentice?—Yes.

2452. And that in order to be bound an apprentice the individual often pays a very high premium?—Yes.

2453. And thus that, according to the Act of Parliament and to the regulations which are founded upon that Act, at least eight years are expended by the general practitioner before he can pass the Apothecaries' Hall?—Yes.

2454. And then he also has to comply with your regulations with reference to becoming a member of the College of Surgeons, that is, if he is to hold the joint qualification?—Yes.

2455. Are you aware of any expenditure equal to what must be incurred by the occupation of such a period of time in medical study which is incurred by the mass of physicians who are graduates of medicine in universities generally?—No, I have not entered into any calculation of that kind, therefore my evidence would be, I apprehend, of very little value upon the point.

2456. When you stated in a previous answer that the arrangements must be regulated by the needs of the practitioners and the wants of society, you were chiefly

chiefly pointing, I presume, to the pecuniary means of persons who were engaged in medical studies?—Yes.

2457. Your mind now having been directed to that subject, do you consider that the expenditure incurred by the great body of the graduates of medicine exceeds that which is incurred by the great body of those who become general practitioners?—I really have not given my mind to the point so as to be able to give you a clear answer to that question, but certainly you have surprised me by what you have stated.

2458. In framing your own regulations at the College of Surgeons, are you in the habit of having before you the regulations of the other institutions, so as to make yours dovetail with them, or suit or accord with them?—There is at the present time a negotiation between the Apothecaries' Society and the College of Surgeons, for the purpose of dovetailing the curriculum, and rendering it easier to the students, but I do not think that that was attended to formerly.

2459. It has never been done, has it?—No, but I apprehend that our regulations had been framed when the general practitioners adopted theirs.

2460. You mean the Apothecaries' Society?—The Apothecaries' Society; and the Apothecaries' Society did not consult with us upon the subject of our regulations. There have been some alterations since then, I believe. I do not think that any consultation was adopted.

2461. To what extent now do you require attendance on branches of medicine which you do not call strictly surgical?—I have the regulations here.

2462. Be kind enough to read merely that portion, or those portions?—"Of having been engaged in the acquirement of professional knowledge for not less than four years, during which period they must have studied practical pharmacy for six months, and have attended one year on the practice of physic."

2463. On the practice of medicine?—One year on the practice of physic.

2464. But not attendance on lectures?—It appears afterwards.

2465. Hospital practice?—Yes. There is another regulation as to lectures. There is practical pharmacy for six months; one year on the practice of physic; that is to say, attendance on the practical parts at the hospital or a similar institution; "one course of lectures on the practice of physic, one on chemistry, one on materia medica, and one on midwifery, with practical instruction."

2466. Medical jurisprudence?—No.

2467. Botany?—No.

2468. With the exception of medical jurisprudence and botany, do not you include all the subjects of examination or of required attendance at the Apothecaries' Hall?—I believe so.

2469. Do you institute any examination upon those subjects which you have now read?—No.

2470. Not any?—Not any.

2471. Do you consider that your charter empowers you to require attendance on the practice of medicine, and upon pharmacy, and upon midwifery?—I have not read it with that view, but I presume so.

2472. Then if you have the power to require certificates of attendance on such subjects, have you not also the power to examine on such subjects?—Yes, I suppose so.

2473. Do you consider that there would be any valid objection to your instituting such examinations?—No, except that it would be making it an examination for general practitioners instead of for surgeons.

2474. You say you object to the formation of a college of general practitioners?—Yes.

2475. And if you have the power to examine on all those subjects and require attendance on them, whence the objection to your actually instituting such examinations?—The objection to my mind consists in the great importance that there is in the prosecution of surgery as a science, and that if you combine it with examinations and with other means of including the general practitioners as such in that institution, making it in fact a college in some way of general practitioners, you will in proportion deteriorate the institution as one for the promotion of scientific surgery.

2476. But is it not now a college of general practitioners?—No, of surgeons.

2477. Have you not more than 12,000 members in your college who are practising generally?—Certainly; but they are only members of our college in as far as they are surgeons.

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2478. You say "only members." Inasmuch as they have challenged examination before you, if they are incompetent, whose fault is it. If they are not scientific men; if they are men not competent as surgeons, with whom lies the fault?—With us, if they are not.

2479. It is to be hoped that they are not, and I believe that they are not, but do you consider that it would detract from the reputation of such men if it were known that they had been examined before you on other subjects than that of surgery?—No.

2480. Inasmuch as by such an examination they might exhibit extensive knowledge, and by your examination and your regulations you might compel them to do so, would it not rather enhance their reputation than otherwise?—No, I do not know that it would. It is most essential I conceive that the character of the College of Surgeons should be kept as strictly as possible an institution for the promotion of surgery.

2481. Then why do you require attendance upon the practice of medicine, chemistry, and the other subjects which you have named?—Because we think that it is very proper that they should be acquainted with those as subsidiary branches of surgical science.

2482. Would not the propriety be more strongly exhibited if you were to carry it to a still greater extent, and at once examine the candidates on those subjects, and prove their competency?—That is very true, and I should see no objection to appointing examiners for that purpose; but we had it fully before our eyes that those wants were already provided for, and we should as little think of examining them upon those subjects as we should upon theology, though we should think it very desirable that they should be acquainted with that subject too.

2483. Then the reason of your not examining them has been that you think that that work has been performed elsewhere?—Yes.

2484. Then if that be the case why do you require attendance upon the subjects which you have named, but on which subjects you do not examine?—To show that we do not admit persons without the knowledge in question. You will recollect too that there may be persons who come up for a surgeon's diploma who are not intended for general practice.

2485. Then supposing that a person brings his licence from the Apothecaries' Hall, and proves that he has undergone an examination there, would you still require that he should produce certificates of attendance on the lectures which you have named?—It would be according to our regulations; but certainly I very readily admit that it would be then unnecessary, in consequence of the examination of the Society of Apothecaries.

2486. When you say that you wish in a great measure to confine the College of Surgeons to the promotion of surgery as a science, do you admit that your members are not a body of scientific men?—No, I consider them scientific men.

2487. And you consider that they are qualified to practise as surgeons?—Certainly.

2488. In your mind, the capacity for so doing is not withdrawn by the simple circumstance of a man's proving that he is competent to do something more?—No.

2489. You are aware that the duties which often devolve upon the general practitioner, occupy a very wide range, and extend, in fact, over the whole field of medical and surgical practice; is not that so?—Yes; but I presume that if you wanted an operation performed, you would be more likely to select a hospital surgeon than you would a general practitioner or an apothecary from a village.

2490. Without doubt, I should refer to one who had been accustomed to operate, but considering that the practitioners living in remote districts are entirely relying upon their own resources, do not you think that it is of the utmost importance to the public that they should, as far as you can possibly make them so, be rendered competent, not only for what are called the ordinary exigencies of the profession, but also any accidents or emergencies which might arise?—Yes, I would very gladly see a Sir Benjamin Brodie in every village in England.

2491. You are quite aware that whatever the education may be, if you start upon a perfect equality with regard to their examination or education, some, in consequence

consequence of greater energy, greater industry, and greater ability, will necessarily take the first place?—Yes.

2492. Still you do think it desirable that in the minimum qualification security should be had that the public are protected in having a competent body of medical practitioners?—Yes; and I will add to that, that I think it would be very desirable that every one entering the profession should have a qualification in all the branches; that that should be provided for; I think the State has a right to require that, that for every one entering the profession, there should be, as it has been called, one portal. That, I apprehend, will relieve you of some trouble in examining me.

2493. Sir *R. H. Inglis.*] You say that you think it desirable that there should be one portal, by which all parties might enter the profession of medicine; will you explain to the Committee what you understand and desire them to understand by the term, "one portal"?—That all on entering the profession should be subjected to one and the same examination on anatomy, medicine, surgery, midwifery and pharmacy.

2494. You have stated that it is your wish that there should be a Sir Benjamin Brodie in every village in the country; do you conceive it to be possible that the course of education and the experience which have enabled Sir Benjamin Brodie to be what he is, could be realized in the case of each of the 13,000 or 14,000 gentlemen who compose at this moment the body of your own college, or of an equal number, who are licensed under the Apothecaries' Act?—No, quite impossible.

2495. If it then be impossible that you should produce in every village in the country, such an experienced practitioner as Sir Benjamin Brodie, does it not follow, as a matter of course, that a large number, an enormous proportion of those who practise medicine in its different branches, must cease their course of education at a lower point than that at which Sir Benjamin Brodie ceased his course of education?—Yes.

2496. How then do you recommend this Committee to entertain the proposition that there should be one system of education which is to be carried out, and how do you reconcile the practical conclusion to which you come, with your requirement that there should be one system of education, seeing that by your own statement you hardly expect that more than 1 in 13,000 should become a Sir Benjamin Brodie?—I think I have been misunderstood if that inference has been drawn from what I have said, because the whole tenor of my examination has been favourable to the establishment of distinctions in the profession, and though I would let them go in at one gate, yet at the same time having entered they must take different directions, and some proceed much farther than others. My object in using the term "one portal" was, because it has been made a sort of technical term. It has been objected to I know by some who have given their opinions upon this subject, but I think that those who have objected to it have not considered that by adopting one initial examination for all it would remove very much the invidious character of those distinctions, which the opposite party repudiate. Clearly we must be all of one profession, if we have begun alike: but at the same time I think it essential to the welfare of the profession that motives should be held out for higher attainments, and that those who aim at higher distinctions should undergo other examinations which should give assurance of their competency, and of their having proceeded further in their studies.

2497. Then in point of fact you would wish the Committee to understand, that while on the one hand you would desire that there should be one general and preliminary examination for all the members of your common profession, there should be a subsequent examination of the class of medical practitioners, called physicians, another for the class called surgeons, and possibly another for the class called apothecaries or general practitioners?—I should see no reason for the last; that I think would be included in the first examination.

2498. Then you would think it sufficient to subject the general practitioner to the trial of the first examination?—Yes.

2499. But you require a second examination for the class of practitioners to be called physicians, and another distinct examination for those who are to be called surgeons?—Yes.

2500. In your previous examination, in question 2242, referring to what you describe as the system of instruction pursued in reference to the Apothecaries'

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Act of 1815, you state that "the retrograde movement" which you have observed is owing to that "system which requires attendance upon a greater number of lectures, and attention to be given to a greater number of subjects than formerly." Will you state to the Committee whether in point of fact the teacher whom the young man is expected and required to attend, exercises his function in any case catechetically, or whether he be not content to deliver his lecture whether the young man may or may not give his mind to it?—In a great many instances the teacher examines orally, certainly.

2501. Does he require *viva voce* answers at the close of each examination?—Yes, in a great many instances.

2502. Is not that quite sufficient then, if it be diligently applied, to exclude all necessity for what is technically termed "cramming," in reference to the examination either before the Apothecaries' Society or before the Royal College of Surgeons?—Yes.

2503. Wherever therefore that system of catechetical instruction in the subjects of the professor's teaching be carried out, the practice to which you have adverted with just reprobation in your former examination necessarily ceases?—Yes.

2504. You have stated in answer to question 2247, that the young men shall prepare themselves for examination in the practice of medicine, materia medica, medical jurisprudence, botany, chemistry, and midwifery, and you have said that these are inconsistent with the devotion of their time to the study of surgery and anatomy; assuming that this must necessarily be the case, which of those studies would you think it desirable that the young man should omit in order to qualify him by a complete and generous education for the discharge of his duties to the poor as well as to the rich of his country?—I do not see how it could be possible to omit any one.

2505. Then as a matter of necessity young men intended for general practice must pursue some subjects which are inconsistent with the devotion of their time to the study of surgery and anatomy?—I would not affirm that. I perceive that it is a very fair inference from what I have said. But much might be expected from improved methods of preparation, improved methods of instruction, and especially if the apprenticeship system were got rid of, from the devotion of time to study which otherwise I am afraid is often spent in idleness.

2506. In your last answer you repeat in substance the observation which you made in answer 2332 in reference to the apprenticeship system; will you state to this Committee whether all the leading surgeons of the present day, and all the leading surgeons of the generation before, were or were not introduced originally into medical life under that system of apprenticeship?—The apprenticeships of surgeons at hospitals are very different apprenticeships to those which are adopted by general practitioners. The hospital apprentice is apprenticed at and to the hospital, and the whole of his time is occupied in education at the hospital.

2507. Do you not consider that there is some advantage at least in young men first introduced into such a metropolis as this, or even into the great county towns, having the restraint of a home, which they acquire by the system of apprenticeship, rather than being let loose upon the world without any such control as that which the domestic sanction of their masters may exercise?—I am afraid that, as apprenticeships are generally conducted, the young men have not the advantages that one would desire in a home; but certainly if apprenticeships were not in force, it would be most desirable that you should have collegiate institutions which should supply by their discipline the place of a home.

2508. Do you wish the Committee to understand that upon the whole the apprenticeship system does or does not give a certain degree of moral control in the case of young men admitted under it to practice?—I think one must admit that it does.

2509. So far therefore its effect is beneficial?—Yes, in so far.

2510. Is it not also beneficial as introducing the young man to a knowledge of the preparation of medicines, without which he could very imperfectly exercise his future functions as a general practitioner?—Yes, in that, as in other things, if the full intention of the apprenticeship were carried out, it would be a very beneficial provision.

2511. Is not the great objection to the apprenticeship system rested upon the length

length of time, namely, five years, absorbed from the general education of the young man?—Yes.

2512. But, in point of fact, are the five years usually so absorbed from his general education. Is it, or is it not, the fact in St. Thomas's Hospital, with which you have been so long and honourably connected, that the young men who attend your lectures and the courses of lectures in that hospital, are in the large majority of cases young men who are nominally apprentices?—I believe it is so.

2513. In point of fact, therefore, the apprenticeship system may, if rightly carried out by honest men on the one side, and diligent young men on the other, be a beneficial control to the young men, while on the other hand it does not necessarily interfere with their reputation in the higher branches of the profession, irrespective of the art of compounding medicines?—Yes; but I suppose it would be right to observe, that the complaint is very general that no apprentice can be procured now, that it is a thing which seems to have been tacitly very much given up. Apprenticeships are in a great measure nominal now, I believe.

2514. In your answer to question 2353 you assume that the apprenticeship is not nominal, but you take a young man who has come from an apprenticeship of five years, and you compare him with one who has been at the University?—Yes.

2515. And you compare their respective qualifications and preferments. Will you be pleased to state whether the education of the young man at the University does not necessarily involve an expenditure of at least double that which the apprenticeship system would involve in the case of the other young man, and whether, therefore, you could expect that an equal number of young men should go to the University, as go through the apprenticeship system, considering merely the relative expenses of the two?—Certainly not; it cannot be expected.

2516. Mr. *Wakley*.] Do you mean that apprentices cannot be procured by surgeons or by general practitioners?—I believe by both.

2517. There is a difficulty in hospital surgeons procuring apprentices, is there not?—Yes, but I understand it is the same with respect to general practitioners in the country, that they do not get apprentices as they used to do.

2518. But are you not aware that it is peremptory with regard to the Act of 1815, and that the young man cannot legally undergo his examination at the Apothecaries' Hall unless he has passed an apprenticeship of five years?—Yes; but I am led to understand that the apprenticeship is in many instances a nominal business.

2519. Have you reason for believing that the Society of Apothecaries have evaded the law?—No, I really know so little about it that I would not undertake to say that. I am very willing that it should be put down as my impression that an apprenticeship is little more than nominal; but what the Society of Apothecaries have done I must leave them to explain.

2520. Mr. *Acland*.] Supposing it to be true that very eminent men have by their own great powers risen to the top of their profession, who yet commenced it by apprenticeship, does that in the slightest degree alter your opinion as to the waste of time which is now caused by the apprenticeship system?—We are talking of different things, I apprehend. With respect to an apprentice to a surgeon of a hospital, or to a hospital, for they are registered in our hospital, and are recognized really as belonging to the hospital, though apprenticed to a particular surgeon; a young man of that kind has every opportunity, if he have diligence, of studying his profession from the beginning of his apprenticeship to the end.

2521. Mr. *Wakley*.] Of studying pharmacy?—He has the opportunity.

2522. He has the run of the dispensary, has he not?—He must pay for it.

2523. Mr. *Acland*.] Supposing that a few very great men by their own powers may have risen to the top of their profession, even if they were apprentices to apothecaries, would that shake your conviction that an early education is what the mass of the general practitioners now requires?—No; but I do not wish to mislead the Committee by giving such very short answers. The defect in the apprenticeship, as I have had occasion to observe, of the general practitioners is, that they have left school very early, at 14 or 15 it may be; that they have spent the next five or six years (I forget now exactly the time) with

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with a country apothecary or general practitioner, and that as far as I have had occasion to make out, that period which they have spent with the general practitioner has been in very many instances without profit; that they have had no opportunity of continuing their studies, which have been very short at school, and that they have learned nothing fresh.

2524. It has been stated to me by a very eminent teacher in the London University, that the large number of students who attend his lectures have a most imperfect knowledge of language; does your experience bear out that opinion?—Yes, it does.

2525. And do you not think that a real education in the principles of language is of the utmost importance to enable a man to apprehend scientific truth in lectures?—Quite essential.

2526. Would you be good enough to state the results of your own experience upon that subject?—In many instances I have found young men incapable of spelling, and therefore very ignorant of their own language; and as for classical languages, I believe they know little or nothing of them.

2527. I wish to have your opinion on their power of apprehending and digesting the teaching which is given to them, in the present state of education, of the ordinary students who have been apprentices?—I believe that under the circumstances which I have mentioned, their ignorance of language, they would be incapable of comprehending a considerable part of the lectures which were delivered to them.

2528. Have you found it to be so in fact?—Yes, to a great extent.

2529. Mr. *Wakley*.] Is the Committee to understand, from the answers which you have given on this subject, that you attach very great importance to a good preliminary education for medical practitioners?—I do.

2530. And you believe that preliminary education to be the best foundation for establishing in their minds a perfect knowledge of scientific facts?—Certainly.

2531. Mr. *Acland*.] Have you considered whether it would be desirable for the education of surgeons in the higher branches of their profession, that they should receive their preliminary education at the English universities?—I think it would be very desirable indeed.

2532. And are there any practical impediments to their doing so now, which you think might be removed?—No, I apprehend that there are no essential difficulties. During the discussion of the question in the council of the College of Surgeons as to the preliminary education required for fellows, I wrote to some gentlemen connected with both universities, and found that by a little management it would be very possible for the students to take the degree of bachelor of arts at either Oxford or Cambridge consistently with the completion of their education as surgeons.

2533. Are you acquainted with the ordinary requisites for a Bachelor of Arts' degree at Oxford or Cambridge now?—Yes.

2534. Is it your opinion that arrangements might be made by the universities, so far as you are acquainted with them, which would enable medical men to devote a portion of the time which they spend at the university to scientific pursuits, having a bearing on the formation of their minds, and at the same time having a direct tendency to prepare them for their profession?—Yes.

2535. Could you state what those branches would be, and what arrangements might be made?—I have not thoroughly considered the subject; but it is very obvious what those branches would be. I take it, chemistry and what relates to natural science—botany, and so on; physics.

2536. Are you of opinion that if a young surgeon were to devote his third year at the university to the deep study of chemistry, it would combine the double object of scientific university education and preparation for his profession?—Yes.

2537. Consistently with both objects?—Consistently with both objects.

2538. *Chairman*.] Are you acquainted well with the system of the universities?—I am not very well acquainted with it myself; but during the discussion which we had with regard to the education of fellows, I wrote to several gentlemen connected with both universities, Dr. Whewell and Professor Sedgwick, at Cambridge, and two or three others, and at Oxford, Dr. Kidd, and one or two more; and as I understood them, it was quite possible to combine with the education for a fellowship, that is to say, for a fellowship of the College of Surgeons, the accomplishment of a degree as Bachelor of Arts.

2539. But

2539. But did any of those gentlemen say that they conceived it to be possible for a person who gave the third year of his college residence to the profound study of chemistry, botany, and other things connected with medical science, to make a distinguished figure in either university?—This relates to something very different.

2540. Chemistry and botany are not subjects, you are aware, of examination for a degree of arts?—No.

2541. Did you ever hear of any instance of any young man whatever who, commencing his professional education, either medical or legal, while he was at the university, made a distinguished figure in the competitions at the university?—I cannot answer that question.

2542. Mr. *Acland.*] Are you aware that at the present moment, if a young man chooses to take up the subject of chemistry for examination in *disciplinis Mathematicis et Physicis*, he is at perfect liberty to do so at Oxford, and that the examiners must examine him in it if he does?—No, I am not aware of that.

2543. Mr. *Wakley.*] You stated that you were anxious that all the members of the profession should enter at one portal?—Yes.

2544. And you subsequently said, that what you meant was, that they should enter at one gate, and should proceed in different roads afterwards?—Yes.

2545. And that there should be, you thought, different examinations for physicians and surgeons, and those who were to be engaged in general practice?—Not exactly.

2546. That you thought that the preliminary examination might be sufficient for the general practitioner, and that there should be distinct examinations subsequently for those who were to practise as surgeons and those who were to practise as physicians?—Yes.

2547. Will you be kind enough to point out what you consider should be the essential distinctions in those examinations; will you state what you consider should be the subjects of examination of the general practitioner, and the course of education which he should pursue?—The subjects would be anatomy and physiology, surgery, medicine.

2548. The theory and practice of medicine?—Yes, you may put it so; you may say the principles and practice of surgery, pharmacy, materia medica.

2549. Chemistry?—Chemistry.

2550. Midwifery?—And midwifery.

2551. Medical jurisprudence?—I should scarcely consider it necessary to make that a distinct head. I think the courses on chemistry, and pharmacy, and so on, should form parts of it, certainly, and likewise botany. I want to get rid of as many lectures as I can, and get them to a more practical education.

2552. You consider, in fact, that the students are over-lectured?—Yes.

2553. That they have to pay for more than they can possibly attend to?—Exactly.

2554. Then you consider that they should be subjected to an examination on the subjects which you have now named?—Yes.

2555. And that the examination should be not less searching than the one which is now instituted at the College of Surgeons?—At the College of Surgeons for members, and, I suppose, at the Society of Apothecaries, but that I know nothing about. You would require, probably, four examinations; I think that would include all and the different subjects.

2556. The examination which you have now described is one which you would have all the members of the profession undergo?—Yes, all; I have no reserve about it; you may take me quite at your own meaning, so far.

2557. Having undergone that examination, you consider that the individual should then have a right to practise generally?—Yes.

2558. But not to practise as a physician?—He would practise in necessary course, but he would not have the title, distinctions, or other privileges which may be connected with the grade of a physician.

2559. But as regards surgeons in general practice, you consider that the public would be safe if there were such a class of practitioners as had undergone successfully the examination which you have now described?—Yes.

2560. Then, subsequently, if a man wished to take a higher position, or one which you consider would be characterized by more scientific attainment, and wished to practise exclusively as a surgeon, what would you add to the

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examination which you have now described?—He would come for our fellowship.

2561. And then on what subjects would he be examined which you have not now named?—He would be examined upon the same subjects, that is to say, anatomy, physiology, and surgery; he would only be examined upon those, and, in addition, proof of a preliminary education would be required.

2562. How much further would the examination be carried in the last case than in the first?—I would carry it as far as possible, as far as the limits of science would permit. Whatever was the highest state of science would be the requisite standard to which a fellow of the College of Surgeons should come up.

2563. You mean probably as far as the boundary of facts would admit?—Yes.

2564. You do not examine in speculative theories?—No, excepting so far as they may be involved in facts.

2565. Do you consider that that second examination would afford to the public a better security for having a competent practitioner than the first?—I am sure of it.

2566. A better practitioner?—Yes, a better practitioner.

2567. Do you always find that the man of the highest scientific attainment is the best practitioner?—No; not at all.

2568. Then the security would not be a general one?—No; but the first examination, which I should conceive ought to be tantamount to that of what is now called a member of the college, is not required to be so searching or so extensive an examination; you could not apply it; the first examination, which I should consider would the same as that for a member of the college, could not be so searching or so extensive as that of a fellowship.

2569. And would not be?—It could not be; you could not expect persons at the period of the first examination to be as highly qualified as they would be likely to be afterwards.

2570. Do you consider that we have a right at law to do more than secure to the public a competent class of medical practitioners?—You cannot secure what may be called absolutely competent practitioners; they could not be in all respects competent.

2571. Not competent for what?—Not competent, for instance, to perform all the operations of surgery.

2572. Do you mean the great body of the members?—The great body of the members; it must require experience afterwards, and extension of knowledge beyond that which we can require of them.

2573. Would any system of education that you could adopt secure to the public that all medical practitioners should be good operators?—No; there are some men who from want of the physical requisites will never make good operators.

2574. Have you not yourself known young men of the highest attainments, and most industrious in their hospital studies, who, when they have been called upon to perform the duties of hospital surgeons, have altogether failed?—Certainly.

2575. And that can never be clearly foreseen by any system of examination which you could adopt?—No.

2576. I wish to refer you to question No. 2294. In your last examination you were asked, "Do you think that the registration under this Bill," that is, the Bill of the present Session, "is a registration such as ought to be the standard registration for England?" and your answer was, "No, certainly not, because it does not inform the public what the qualifications of the persons registered are." At that time had you examined the Schedule of the Bill, in which the mode of registration is described?—Yes.

2577. Will you be kind enough to take it in your hand and refer to it again?—My answer certainly wants a little explanation. I see that, and saw it when I read it. In the first place, with respect to the registration in Schedule (C.) there are two lists. Now, really I am not sure that I understand the use of the two lists, but I presumed in my answer that that second list, in which the qualification is not mentioned, would be the one which was generally distributed to the public.

2578-9. You were not aware that it is designed that both should be in one volume.

volume. That one is an alphabetical registration of the places where the parties reside, and that the other is an alphabetical arrangement of the names with the description of the qualifications attached?—I did not understand that they were both to be in one register, because that would certainly obviate part of the objection which I entertained when I made the answer which I did.

2580. You observe in the schedule that they are registered in columns?—Yes.

2581. Do you not now discover that the first column exhibits the name?—Yes.

2582. The second column the qualification, with its date, and whence it was derived?—Yes.

2583. Showing whether the individual is a member of any College of Surgeons in England, Ireland, or Scotland, or a fellow in the College of Surgeons, or a fellow in the College of Physicians?—Yes.

2584. In fact, do you consider that any more fair arrangement could be adopted?—Yes, I conceive that a classified registration would be preferable.

2585. You consider that a classified registration would be more fair?—Yes.

2586. That is, registering physicians exclusively under their title?—Yes.

2587. And surgeons under their title?—Yes.

2588. What would you do with those who held four or five qualifications?—They would be registered several times.

2589. Do not you conceive that that would be a very complex arrangement?—No, I think not. We could very easily give such a registration from our College of Surgeons; the physicians could give theirs, and the general practitioners likewise would give theirs.

2590. Looking really without prejudice at that arrangement, can you discover anything unfair in principle in it?—No; I would not say unfair, but at the same time I think if you have one list simply with the names and the places, without the qualifications, there is a tendency to remove the evidence of what they really are.

2591. If the qualification were set down in the topographical arrangement as well as in the other, would your objection be removed?—The main objection. I think a classified registration would be better, but I might say that my objection would be removed; but in saying that, still it will be observed that by this Medical Registration Bill a person who is only qualified as a general practitioner is considered to be legally qualified for holding the office of a surgeon.

2592. How is he to get it?—All the former Acts of Parliament are done away with, and if, as I understand this Bill, you are upon the registry, you are then qualified to obtain a legal appointment as surgeon; you may be surgeon to a union, you may be surgeon to a prison, you may be surgeon to St. Bartholomew's Hospital, and in fact obtain a surgical appointment however high, or however important.

2593. Is there any law at the present moment to prevent a linendraper from being appointed surgeon to St. Thomas's Hospital?—No.

2594. No statute law of the realm?—No.

2595. But such an occurrence is prevented by the good sense of the governors, and by the private and internal regulations of the hospital?—Yes, but by this Act he would acquire a legal qualification.

2596. He has got it now at common law if he be elected; there is no statute law to prevent it?—No, there is no statute law to prevent it, but still he is not recognized as a legal practitioner. But with respect to unions and prisons, there is a legal qualification required, and that you do away with.

2597. They must be members of the college?—They must be members of the college.

2598. You are quite aware that that is only dealing with the materials which we possess at the present moment?—Yes.

2599. If you were to register the profession in classes, under which class would you register the members of the College of Surgeons who are practising as general practitioners?—As surgeons, but they would likewise be registered of course as licentiates of the Apothecaries' Company; they would appear twice.

2600. In the discussions of the council relative to the Medical Registration Bill, did the council express any desire that any members of the council should be examined before this Committee?—No.

2601. And they named no members for that purpose?—No.

Sir *Benjamin Collins Brodie*, Bart., F.R.S., called in; and further Examined.

Sir *B. C. Brodie*, Bart. F.R.S.

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2602. Mr. *Wakley.*] IN your former examination you were asked, in question 2202, whether, having maturely considered the subject of medical education, there were any suggestions which you had to make to the Committee, with a view to rendering it more effectual by legislation, and your answer was, that it was a wide question; that you were not prepared to answer it without consideration, and you said that you would give the Committee an answer at a future day, if they wished it; have you considered the subject since your former examination?—I think there is one great improvement which might be made, that is, that the examination should be divided into two parts; that the students should come up for their anatomical and physiological examination at the end of one period, and for their practical examination in pathology and surgery at the end of another more distant period. I have no doubt that this would be a very great improvement indeed.

2603. Do you mean the students who were attending the schools in London, or who were articled in different parts of the country?—I do not recognize any as students but those attending the schools.

2604. And those who are registered at the college?—Yes.

2605. At what period would you make them come up for the first examination?—I have not made up my mind whether at the end of a year or a year and a half; at the end of two seasons, probably. This change would go a great way towards preventing the sin of "cramming."

2606. And that practice you regard as a very great evil?—Certainly.

2607. Have you endeavoured to prevent it?—I think so far as our college can do so, they have endeavoured to prevent it. The examination is very practical.

2608. And the more of a practical character it assumes, the stronger is the check against the system of "cramming"?—Yes.

2609. Do you compel the students to attend certain schools, or do you allow them to make their own choice, and go where they please?—We allow them to go where they please, the schools having proved that they have the fit apparatus for teaching. We do not admit an anatomical school which does not prove that it has a proper museum, and we do not admit an hospital unless it has a certain number of beds; we may be misled in those matters sometimes; I dare say we are so.

2610. If you allow the public to go where they please for medical advice, why do not you allow the students to go where they like for surgical knowledge?—Because under the name of schools there would be a great many places which were not schools at all, but mere places for "cramming."

2611. And you consider that the student might be defrauded by representations in such places and by such persons?—Yes.

2612. Do not you think that the public might be defrauded in the same way by the pretensions of an unqualified practitioner?—Yes, the public may be defrauded, but if the Government give them a list of qualified persons, it is their own fault if they are defrauded. They need not be defrauded if they do not like to be so.

2613. Might not the same arrangement be made with regard to the schools, thus leaving the teaching of medicine completely free?—I have not much considered that question, but as far as I see at present I should answer in the negative. It appears to me desirable that there should be the proof of a school having the means of teaching.

2614. But in hospital practice are there not hospitals of particular size that you recognize, and others of less size that you do not?—We recognise no hospital with less than 100 beds, which is in fact a small number.

2615. Might there not be much more competent and industrious men in hospitals containing only 50 beds?—They would not have the means of knowledge; they would not have a sufficient quantity of facts.

2616. In a hospital containing 100 beds there might be three surgeons, and in an hospital containing 50 there might be only one, and if the surgeon of such an hospital had only a few students to attend to, and applied his mind vigorously to their instruction, might he not render them much more competent to undergo an examination than in other institutions where there were more surgeons, and the students were more crowded?—That would be the case if surgery were a science

science in which there was merely a given number of established principles for our guidance, but the greater part of the knowledge that the surgeon requires consists of a detail of facts, which cannot be obtained, I apprehend, in sufficient quantity and sufficient variety in a very small hospital.

2617. The best surgeons whom you have known have been those who have attended chiefly to hospital practice?—Certainly; very few can have sufficient surgical experience except in the wards of an hospital, to make what I would call accomplished surgeons.

2618. The hospital is the great theatre chiefly in which operations are performed?—Yes, it is; but it is chiefly for other reasons. Large hospitals are better than small ones.

2619. Are the students examined with regard to the practical information which they acquire in the hospital during their attendance; are there periodical examinations instituted?—I do not know what there is at other hospitals. At St. George's Hospital, as long as I was surgeon to it, there were no periodical examinations, but there was that which is a great deal better, a constant communication of the surgeons with the pupils at the patients' bedsides.

2620. Without an examination how do you know that the student has derived any advantage from his observation?—I used very frequently to ask them questions, and they used to ask me questions, and I thus learned what kind of knowledge they had.

2621. Then they were questioned, but not in a formal way?—There was a great deal of conversation, which must include questions. That is a great deal better than regular examinations, in which, after all, even in an hospital, there may be a certain amount of "cramming."

2622. You think that the system of "cramming" may creep in even there?—It may to a certain extent, because an industrious pupil may be good natured, and tell an idle pupil what answers to give.

2623. Mr. Green has been asked what you require in the College of Surgeons with respect to medical education (that portion not strictly surgical), and he states that attendance is demanded on the practice of medicine, chemistry, materia medica, and midwifery?—It is so.

2624. But that you institute no examination upon those subjects?—We institute no regular medical examination. Of course, all surgical examination must include a certain quantity of medical examination, because a great part of the surgical diseases require medical treatment.

2625. You consider that, by your previous charter and your existing charter, the charter of 1843, you have the power to enforce a compliance with such regulations from your candidates?—Such regulations as we have now made?

2626. Yes.—We suppose so.

2627. Attendance, for example, on medical subjects?—I will not say how far we have legally the power. I believe we had an opinion upon that point, and it was rather doubtful how far we had legally the power; but public opinion is entirely with us, and I think public opinion is as good as the law upon such a subject.

2628. The plan is approved of generally?—I believe so.

2629. Did you take any opinion of counsel as to whether you have power to institute an examination on medical subjects; such, for example, as the theory and practice of medicine, materia medica, and pharmacy?—I am not aware that we ever took any opinion upon it.

2630. Would there be any difficulty in extending your examinations upon those subjects?—I think there would be this difficulty, that in order to have a perfect examination upon such subjects we ought to have some of the most accomplished physicians in London, whom we have not got.

2631. Might not you have some present with you as assessors; would not you be empowered by your charter to make such an arrangement?—We certainly might do so if the system of the college were entirely altered, and it were made a College for all purposes, but not under our present charter.

2632. You would object to such an arrangement?—I do not think it would be so much to the advantage of the public as our present system.

2633. Then do you consider that it is for the good of the profession and of the public, that the three examining bodies now in existence in the metropolis should continue, or four rather, there being the University of London as well?—I think that the subjects which medical practitioners are required to understand are so extensive that it is very well that the examination should be

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divided. But it would be a great deal better if the different examining bodies were all under one authority, so that they might act harmoniously with each other. It has been a very serious evil to the profession that there was no one body to harmonize the curricula of the Apothecaries' Company and of our college.

2634. When you say that they should harmonise, do you mean that the arrangements should be various, and working one into another, or that the demand upon all should be the same?—I mean that the arrangements should so correspond that the studies of one kind might not interfere with the studies of another kind.

2635. So that at the College of Surgeons it should be strictly confined to surgery and anatomy, the foundation of surgery?—I think it better that it should be so.

2636. But you are aware that there is a demand for a new incorporation?—Yes.

2637. And that that demand has to a certain extent met with the sanction of the Government?—I do not know how far it has met with the sanction of the Government. The Government best know that themselves.

2638. And you saw the Bills that were introduced in relation to it?—Yes, the former Bills.

2639. Which referred to and recognized that arrangement, namely, the incorporation of a college of general practitioners?—Yes.

2640. You are aware that it was intended there that all should be submitted to a general examination in medicine, surgery, and midwifery?—What do you mean by "all"?

2641. All the candidates.—Of all kinds, do you mean?

2642. That all the candidates who should present themselves at that college should undergo an examination on all the subjects in connexion with medicine?—I forget what were the terms as to their examination; but I remember that the surgical examination was to be held at the College of Surgeons.

2643. Was that demand complied with; I believe you insisted that the integrity of your college should be maintained, and that there should be no examination in surgery at the new institution; was not that the case?—I forget those particulars; but I certainly considered that that new corporation would rather have taken the place of the examination of the Apothecaries' Company, and that the examination of the College of Surgeons in surgery would have been continued as before.

2644. Did not the council formally object to that portion of the title which included surgery?—I rather think they did; but, indeed, I am not quite certain.

2645. When the charter of 1843 was granted, do you remember whether any new arrangement was made, or whether any arrangement was contemplated with reference to the introduction into your college of a medical examination?—I do not recollect any.

2646. Do you remember who prepared the draft of that charter?—It was done by the legal advisers of the college, with the legal advisers of the Secretary of State.

2647. Do you know whether an application was made by the council to the Secretary of State, in the first instance, for the grant of a new charter?—Application to the Secretary of State was made by the council.

2648. In the first instance?—It was on the suggestion of the Secretary of State that the application was made by the council.

2649. The Secretary of State, in the first instance, suggested to the council that the council should make an application and memorialize the Crown?—If I remember rightly, the Secretary of State informed the council of the college that he proposed to introduce a Bill to make certain changes in the profession, and suggested this as a part of that measure.

2650. And that was before any Bill was introduced into Parliament?—Yes.

2651. Do you remember whether that proposition came upon the council by surprise?—It did come upon many of the council by surprise certainly, but they had plenty of time to consider it. Of course whatever you hear for the first time may be said to come upon you by surprise.

2652. But the intimation came from the Secretary of State before any of the council made any application upon the subject?—Yes, the intimation as to his proposed measure, of which that was a part.

2653. Was anything stated at that time respecting persons who were to be introduced

introduced as fellows in the first instance; do you remember whether any suggestion was made by the Secretary of State to the council as to the persons who should be nominated fellows in the first instance?—No.

2654. No suggestion was made?—It was left to the college.

2655. The number was merely stated in the charter, without any qualification being specified?—Yes. You mean the nomination of fellows, with a view to immediate constituency?

2656. Yes.—If I remember rightly, the number was mentioned in the charter, but the nomination was left to the college.

2657. Have you reason to believe that the selection has caused a good deal of heart-burning amongst the members of the college?—I believe that all selections make what you call heart-burnings.

2658. Are you aware that many men of great respectability in the country, and in the profession, were excluded from that nomination?—I dare say some were, but I believe that the selection was made upon very sound principles, and that it was a very good selection. It was not a selection made hap-hazard; it was made on a system; and upon the whole, considering the difficulty of the task, looking back at it now, I think it was a very good selection.

2659. The chief ground of guidance consisted in persons holding public appointments in the country, did it not?—I will give you the analysis; there is an account of the whole, which I had made out at the time (*producing the same*). I was president at the time.

2660. In 1844?—Yes, I can read it briefly, if you please. There were 226 surgeons to public hospitals in various parts of England. There were 45 lecturers on some branches of medical science, recognized as such by the council; 10 were admitted on account of their contributions to the sciences connected with surgery; Mr. Owen, for example, and others: 126 surgeons in the army and navy, and East India Company's service, selected by the heads of their respective departments. Whether that was a right selection or not I do not know; they are responsible for it. There were four Senators of the University of London; there were 41 surgeons in London not engaged in practising pharmacy or midwifery, who were therefore eligible to the council, under the old charter and bye laws, and would have been disfranchised if they had not been nominated as fellows; many of these were surgeons of dispensaries or ophthalmic infirmaries, or held other public appointments. Then there were 59 who were not admitted upon those general grounds, under these circumstances; 59 provincial surgeons, not holding hospital appointments, but regarded as consulting surgeons in their respective vicinities; the majority were recommended by other practitioners, and some of them held public appointments. There was no one in this last list whose diploma was dated since the year 1825.

2661. *Chairman.*] What was the whole number?—511.

2662. And of those 59 only were admitted except upon some principle?—Yes, there were only 59 about whom there was any difficulty, and as to those 59 we did the best we could to get the opinions of practitioners in the country. One gentleman sent up a memorial from 20 general practitioners in the neighbourhood, desiring that the college would appoint him; and he was appointed as a matter of course. Others were recommended by two, three, or four persons in whom we believed we might put confidence. These were the only cases in which there could be any sort of prejudice or favour, and I will venture to say that on the whole it was done with as great a desire to make it correct as possible. But of course whether you make fellows of the College of Surgeons, or give away Orders of the Bath, you will always have a certain amount of dissatisfaction, and it would be very difficult to make the selection exactly just.

2663. Did you omit any surgeon falling under those different descriptions?—Yes, there was one surgeon omitted.

2664. A teacher in a school?—Yes, and I think it was a pity that he was omitted. I do not know whether the profession disapproved of the omission or not.

2665. Is that the single instance of the omission of any person falling under the heads described?—That is the only instance that I am acquainted with.

2666. Mr. *Wakley.*] Before you made the selection, did you make any general communication to the profession upon the subject?—No, we did not; but it was generally known; that is, the charter was known.

2667. There was no announcement made to the members of the college?—

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The members of the college generally knew that there was to be a nomination of fellows, and that they were to be limited in number.

2668. Were the senior members of the college informed that if junior practitioners residing in their neighbourhood would send memorials on their behalf requesting their nomination, they would be appointed?—No, we gave no notice of that kind.

2669. If the constitution of the charter were going to be changed or altered in any respects, what suggestions would you make in regard to improvements; are there any?—No, I think it a great deal better to keep our charter as it is. It is working exceedingly well, and will in process of time do a great deal of good.

2670. Do you prefer the election by seniority?—I think that the mode of election into the council might be improved; but that, practically, it does not lead to much inconvenience.

2671. You consider that the charter has laid the foundation for a representative council?—Yes.

2672. Are the meetings of the council open to the fellows or members of the college?—No, they are not.

2673. How is the constituent body to know how their representatives act if the proceedings of the council are conducted in secret?—They know by the results; but in fact the council have very few proceedings. The principal matters that the council have to attend to, and which occupy a good deal of time, are the management of the museum and of the library; the council have little else to attend to, the system of education being determined.

2674. The constituent body might know the general results, but they would be incapable of ascertaining how a particular member of the council had acted; is not that a defect in your constitution?—I think they know always pretty much how particular members act.

2675. That is by private representation or private rumour; they have no means of publicly knowing?—No. They know the conclusions at which the council come, which are, after all, on very few points.

2676. Do you consider that it would be objectionable for a portion of the fellows or members of the college to be present at the meetings of the council when questions were discussed relating to the government of the college?—I do not think that there would be any good in it. On the contrary, I think there would be harm in making the meetings public. The members know all that is worth knowing, and when you come to arrange the details of the museum or of the library, and to say how this is to be done, or that is to be done, I think the council can manage those things better among themselves.

2677. Suppose the council of the college were to hold frequent meetings, and to discuss very important questions in relation to the government of the college, there might be many resolutions and amendments proposed, some of which might be adopted and some not adopted, and there might be some member of the council of the college who might pursue what might be deemed an unjust course; what means have the members of the college of knowing how their representatives act?—You use the expression "important questions" for the council to consider; now there are no important questions except those relating to the management of the museum and the management of the library, and the education of the students. If there is a government of the college it is a government where there is nothing to govern except what I have just mentioned.

2678. I am putting it upon the supposition that there might be important questions affecting the government of the college; acting upon that supposition, if any members of the council were to pursue what the profession deemed an unjust course of conduct, how would the constituent or elective portion of the college have the means of knowing what their conduct had been?—Supposing that there were any unjust regulation as to teachers, if that regulation were not immediately known it would be no regulation at all, and therefore there would be no difficulty on that score.

2679. You will perceive that that is not an answer to the question; what the Committee wish to know is how the electing portion of the council would become acquainted with what had been the conduct of particular members of the council?—They would not become acquainted with the conduct of particular members, except so far as they learned it from themselves or from other members.

2680. They would only know what was the result?—Exactly so.

2681. They

2681. They would not ascertain who constituted the majorities and minorities?—No.

2682. Do you think that a defect in the management of the college or the constitution of the council?—It would be a defect if there were questions concerning the interests of individual members of the college, but there being no such questions, I do not think it matters.

2683. You mean to say that the council have no important public duties to perform?—No; I think it is an important public duty to see that the museum is taken care of and also the library; that does not belong to the council of the college but to the trustees. The trustees know all about it, and the library is not a matter in which other people can be interested except so far as that the library should be accessible and useful. And with respect to drawing up plans of education, I conceive that not even the profession generally are competent judges. The only competent judges on that subject are those who have been accustomed to teach; and, therefore, I do not see the good that is to arise from the admission of members generally to the meetings of the council. I see one great evil that would result, and that is, that it would interfere with doing the business; and the difficulty with us in regard to that, as is the case with other public bodies, is to get the business done.

2684. I did not mean that the members were to be present and take part in the conduct of the business; all I meant to imply by my question was, that they should be there as spectators, for the purpose of knowing how their representatives discharge their duty?—I think they always know how they discharge their duty; and that the having other people present at the meetings would interfere with the business.

2685. You are aware that the public are admitted for the purpose of ascertaining how the business of Parliament is transacted?—Yes; but my belief also is that in the present case the profession generally have too much good sense to care about it.

2686. You think that they would have no desire to be present?—No.

2687. Are you not aware that a desire has been very strongly expressed that the meetings of the council should be open?—I dare say all sorts of desires have been expressed.

2688. Do not you think that the profession would express generally a desire to know how the council discharged its duties rather than be ignorant of the transactions and conduct of such an important body?—I do not believe that what I call the profession would care at all about it.

2689. What do you mean by the profession?—I mean, that the men of good sense and experience do not care anything about it.

2690. How many do you class as men of good sense and experience?—A large proportion.

2691. Is not that a very considerable body of persons?—A large proportion I suppose means a considerable body of persons.

2692. But you are aware that complaints have been made of the secret manner in which the proceedings of the council have been conducted?—I dare say there have, and I think that there might have been some ground formerly, because the council elected themselves for life, and there was no check upon them at all; but now the members of the council remain upon the council for a certain number of years, and then go out of it.

2693. Do the members of the council, who were in the council at the time the new charter was granted, remain for life?—Yes; but that is wearing out. I said in my former examination that we had not yet got all the good of the new charter, because the system of election is only gradually coming into operation.

2694. But it is the case that if meetings of the council are held in private or in secret, the electing body will be incapable, except by the results, of knowing how their representatives have acted upon particular occasions?—Yes; but the results tell them all they wish to know.

2695. Might they not be desirous to know who had been the means of bringing about the result?—It is in my opinion a great deal better that the council should, in the discharge of their duty, be independent.

2696. You think that they ought to act independently of the feeling of the professional body generally?—No, I do not say that.

2697. To what extent would your answer go. Do you mean to imply that they ought to act altogether independently of external influences?—What I mean is, that there is nothing done by the council the results of which are

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not immediately known. If the meetings of the council were made open and public, the experienced and well-informed and sensible members of the college would not attend them. If any persons came, it would be those who had not been able to find any better occupation for themselves, and that would interfere with the doing the business.

2698. Do not you think it would be well that they should have the opportunity of attending, and that though they might fail to attend, from the conviction that the council were doing right, yet if the council were doing wrong they might, by their presence, show their anxiety and their feeling on the subject?—I do not see that any good would arise from it; I think that only harm would arise. Every act which the council does is known, and must be known immediately, if it is to have any effect; then, in the next place, they can make no bye-laws or ordinances without the approbation of the Secretary of State; they must be submitted to him, and he may consult anybody he pleases; and in the third place, every member of the council, except the original members, knows that he will another day be sent back to his constituents. I think that that is quite a sufficient check, and that anything more than that would interfere with the business being done without any correspondent good.

2699. Is not the constitution of the Council of Health an important question provided that council is to perform the duties which were specified in the Bills of Sir James Graham?—Certainly.

2700. Do you approve of the council being appointed by the Crown?—On the whole I do.

2701. The colleges not electing any members?—I do not say that that is the opinion of my brother councillors, or at least of all of them, but on the whole it is my own opinion that it would be better if they were appointed by the Crown.

2702. Would you make no provision as to the description of persons of whom that council should be composed?—Yes, I think they should be persons from each part of the profession, and also some persons not belonging to the profession.

2703. Do you consider that such a council would be useful in many respects?—I think it would in many respects.

2704. Useful to the Government?—Useful to the Government.

2705. And also useful to the profession?—Yes, and especially useful in making the curricula of the different institutions harmonise.

2706. If London had such a council, do not you consider that Edinburgh and Dublin would be entitled to have a Council of Health?—I think they should all belong to the same council, and that no difficulty would be experienced by the Edinburgh and Dublin practitioners.

2707. If a Council of Health were useful here, would not such a body be useful in Edinburgh and Dublin as well for other purposes as for medical purposes?—Yes; and there would be councils there, but they would be branches of the London council.

2708. You objected in your last examination to the power which, under the Bill of 1847, would be given to one registrar, and you stated that you thought that it would be best under a Council of Health?—Yes.

2709. Do you consider that for the business of registering practitioners 18 councillors would sit together as a Board, or do you not rather consider that if such a council were appointed, they would delegate their powers in that respect to a clerk or secretary?—Yes, but the council would look to it to see that it was properly done.

2710. If the members of the council were dispersed in Oxford, in Cambridge, in Edinburgh, and in Dublin, could they possibly attend to the registering of practitioners?—In the first instance, the council would meet in London. The great difficulty would be in starting. The council must meet first in London.

2711. But the registering of qualified parties would be going on throughout the year as young men underwent their examinations, and do not you think that the Council of Health would be a clumsy body to do that?—If a person gave proof of having passed his examination, he would of course have a register; but the difficulty would be in the first instance, for a certain degree of discretion must be given to those having the register under their charge.

2712. You are aware that in the Bill of Sir James Graham it was provided that all persons should be entitled to be registered who are now qualified to practise in any department of the profession, in any part of Her Majesty's dominions?—

dominions?—Yes; but I know that Sir James Graham also contemplated that there should be a certain degree of discretion given to the Council of Health, and that he was aware of the difficulty which I have mentioned.

2713. But the Bill gave no discretion to admit persons who were not entitled to practise in any departments of practice in some parts of Her Majesty's dominions?—They would have to admit certain persons; for example, certain physicians and certain surgeons, who have not any licence to practise in this country. Under your Bill they would not be admitted, but under Sir James Graham's Bill provision would have been made for their admission.

2714. You mean persons holding foreign diplomas?—I mean that at the present moment two very eminent surgeons of the hospital at Bristol, who are consulted extensively by persons in that part of the country, and others in the same situation, would not be registered under this Bill. The words of the Bill in Clause 3 are, who "shall produce his diploma, certificate, or licence, or other proof of his having obtained a diploma, certificate, or licence to practise as a physician, surgeon, or apothecary, dated prior to the passing of this Act;" those whom I refer have no licence.

2715. Are you aware that though the surgeons of Bristol, to whom you referred on the former occasion, could not be registered as surgeons, they might still be registered under the provisions of the Bill of 1847?—I am not aware that they could be registered as surgeons.

2716. Do you perceive that they might be registered as legally qualified medical practitioners, and opposite to their names their qualifications would be shown?—That would be one way of getting out of the difficulty, but they would not be registered as surgeons.

2717. If the public considered that they ought to attach no importance to their names, on account of their not being members of the College of Surgeons, the public would have the means of ascertaining the fact?—Yes; but that is of little consequence; what I mean to say is, that under this Bill there must be a discretionary power given to the registrar, in the same way as there would have been a discretionary power given to the Council of Health under Sir James Graham's Bill; but in my opinion a single person should not be entrusted with that discretionary power.

2718. Do you consider it desirable that a discretionary power should be given to the Council of Health?—In the first instance it cannot be helped, and it is to be observed that that power was to be given to a council, and not to a single individual.

2719. And you think they should have the power to admit persons who have no medical qualification?—No, they ought not to admit persons who have no medical qualification; but the kind of qualification is a question upon which they must exercise their discretion.

2720. With regard to the registration, would you not rather make the council an executive than a deliberative body?—With regard to registration, they would be merely an executive body after the first, but I should say (and whoever will consider the subject will I know find that I am right) that in the first instance they must have a certain amount of discretion; Sir James Graham knew that, and would have provided for it by some alteration of the Bill in Committee.

2721. Will you describe what you consider that discretion should have particular reference to?—At present no physician is legally qualified to practise as a physician who has not an Oxford or Cambridge degree, or a licence from the London College; if that line were strictly observed some of the best physicians in the provinces would be excluded.

2722. Mr. *Acland.*] Would you give the Council of Health a discretion to register those two gentlemen of whom you spoke as surgeons?—Certainly; but there are many other instances that I might give; I believe I did give others in my last examination.

2723. Sir *R. Inglis.*] All that you meant to say was, that under the provisions of the Bill of 1847 those gentlemen practising at Bristol as surgeons would appear to be registered as apothecaries?—Just so.

2724. In your former examination, in answer to the questions from No. 2007 to 2011, you expressed a general disapprobation of the existing Bill; have you any personal interest in any measures which that Bill might introduce?—No; I have no personal interest of any sort or kind.

2725. And no person approaching your station in the profession has any interest

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terest in opposing that Bill?—I am not aware that any person approaching my station in the profession has any interest in the matter.

2726. Does the opposition of yourself and of others approaching your position in the profession, as far as you know the opinions of the council of the College of Surgeons profess petitioning against the Bill, rest upon public grounds exclusively, and with reference to the injury to the profession generally, which the passing of such a Bill as that now on the table of the House would produce?—I believe it is entirely on public grounds that the opposition proceeds.

2727. All the leading men of the profession, as far as you are aware of their opinions, speaking of the council of the Royal College of Surgeons, concur in their opposition to the Bill now on the table of the House?—I cannot say that I have conversed with all the leading men upon the subject, but I have conversed with many who hold the same opinion.

2728. Do you know of any exception?—I do not know whether Mr. Guthrie objects to the Bill or not.

2729. You do not know that he is in favour of the Bill?—No, I do not.

2730. All those, in point of fact, with whom you have conversed, including the whole body of the council of the College of Surgeons, irrespective of any personal interest whatever in the matter, are opposed to the Bill?—Yes.

2731. Is there any portion of the Bill with respect to which the petition of the president and vice-presidents of the Royal College of Surgeons has expressed a favourable opinion?—I am not aware that the petition expresses a favourable opinion as to any parts of the Bill; there are some parts of it of which I have a favourable opinion, for instance, the getting rid of the apothecaries' apprenticeship; and I think registration a good thing.

2732. You have stated that you have attended at the bedside of patients in the hospital of which you were the senior surgeon, with your pupils, and that much information has been conveyed in conversation from you to them, and in reply to questions from them to you; and you were asked on your former examination whether, if the law which now gives to the governors of Guy's Hospital an absolute discretion of admitting or rejecting parties to attend the bedside of patients were altered, and the governors were compelled to admit persons who were strangers, such a course would, in your opinion, be beneficial; do you consider that the compulsory attendance of young men listening to you and asking questions of you at the bedside of a poor patient labouring under any critical disease, could be tolerated in the state of feeling in England, whether that patient were in a hospital or in a private cottage?—I do not think it would be tolerated. I do not think that this sort of examination is worth anything except where there is a feeling of good will and kindness between the teacher and the pupils, and they converse familiarly with each other.

2733. You would reject with great repugnance the possibility of a law which should justify the intrusion of a young pupil at the bed-side of a patient, there to hear an examination into the state of the patient's disease?—Yes, if it were compulsory.

2734. Mr. *Wakley*.] Do you know who wrote the petition against the Bill?—No, I do not think I was present when the petition was read.

2735. Were you consulted about it?—No; it was left to the president and vice-presidents.

2736. Mr. Lawrence, Mr. Travers, and Mr. Stanley?—Yes.

2737. Sir *R. Inglis*.] The petition which has been presented to the House of Commons, and has been by the House of Commons referred to this Committee, is not described as the petition of the whole body of the College of Surgeons, but as it is, in fact, the petition of the president and vice-presidents; under those circumstances was it necessary that you should be consulted?—As to the substance of the petition, the council was consulted, but it was, in fact, the petition of the president and vice-presidents, adopted by the Council at a meeting at which I was not present.

2738. But if you had not been consulted, it would not have been irregular, inasmuch as it did not purport to express your opinion?—No.

2739. But subsequently to its presentation, it has met with your approbation?—Yes; it has met with the approbation of the council.

APPENDIX.

APPENDIX.

Appendix, No. 1.

LIST of PERSONS Legally Qualified to Practise as PHYSICIANS in *England* and *Wales*.

(Referred to in Dr. *Hawkins*'s Evidence; p. 104.)

NAMES.	DIPLOMAS AND THEIR DATES.	PUBLIC APPOINTMENTS.
Addison, Thomas - -	- - M. D., Edinburgh, 1815; Licentiate of the Royal College of Physicians, 1820; Fellow of the Royal College of Physicians, 1838.	Physician to Guy's Hospital.
Bennet, J. Henry - -	- - M.D., Paris, 1843; Licentiate of the Royal College of Physicians, 1844.	- - Physician Accoucheur to the Western General Dispensary.
Brown, Alexander R. -	M.D., Cantab. 1841 - -	- - Physician to the Stamford Infirmary.
Greenhill, Wm. Alexander	M.D., Oxon. 1841 - -	- - Physician to the Radcliffe Infirmary, Oxford.
Miller, Patrick - -	- - M.D., Edinburgh; Extra-licentiate of the Royal College ofPhysicians, 1807.	- - Physician to the Exeter Hospital.

LIST of PERSONS Legally Qualified to Practise as SURGEONS in *England* and *Wales*.

NAMES.	DIPLOMAS AND THEIR DATES.	PUBLIC APPOINTMENTS.
Alexander, Henry -	M.R.C.S., 1805; F.R.C.S., 1844	- - Oculist to Her Majesty the Queen.
Bacot, John - - -	M.R.C.S., 1801; F.R.C.S., 1844	Inspector of Anatomy.
Brodie, Sir Benjamin Collins, Bart. - - -	M.R.C.S., 18—; F.R.C.S., 1844	- - Member of the Council of the Royal College of Surgeons; Serjeant-Surgeon to the Queen.
Lawrence, William - -	M.R.C.S., 18—; F.R.C.S., 1844	- - President of the Royal College of Surgeons; Surgeon to St. Bartholomew's Hospital.
Russell, Edward - -	M.R.C.S., 1841 - - -	- - Surgeon to the West Bromwich Union.

LIST of PERSONS Legally Qualified to Practise as APOTHECARIES in *England* and *Wales*.

NAMES.	LICENCES AND THEIR DATES.	PUBLIC APPOINTMENTS.
Bacot, John - - -	M.S.A., 18— - - -	- - Assistant of the Society of Apothecaries.
Nussey, John - - -	M.S.A., 1818 - - -	- - Assistant of the Society of Apothecaries; Apothecary to the Queen.
Rusher, William - -	- - In practice prior to the Act of 1815.	- - Medical Officer to the Headington Union and Workhouse.
Russell, Edward - -	Licentiate, S.A., 1843.	

Appendix, No. 1.

General Alphabetical List.

NAMES.	REFERENCE TO SPECIAL LIST ON PRECEDING PAGE.	RESIDENCES.
Addison, Thomas	Physician	24, New-street, Spring-garden, London.
Alexander, Henry	Surgeon	6, Cork-street, London.
Bacot, John	Surgeon and Apothecary	4, Portugal-street, London.
Bennet, J. Henry	Physician	9, Cambridge-square, London.
Brodie, Sir Benjamin C., bart.	Surgeon	14, Saville-row, London.
Brown, Alexander R.	Physician	Stamford.
Greenhill, Wm. Alexander	Physician	Oxford.
Lawrence, William	Surgeon	18, Whitehall-place, London.
Miller, Patrick	Physician	Exeter.
Nussey, John	Apothecary	4, Cleveland-row, London.
Rusher, William	Apothecary	Oxford.
Russell, Edward	Surgeon and Apothecary	Wednesbury, Staffordshire.

Appendix, No. 2.

Appendix, No. 2.

Memorial from the College of Physicians.

COPY of a Memorial from the College of Physicians to the Secretary of State, in August 1846.

The President and Fellows of the Royal College of Physicians are induced respectfully to address Sir George Grey, as Her Majesty's Secretary of State for the Home Department, because they are unable without the aid of the Legislature, to complete certain changes in their constitution, which appear to be called for by the state of the profession and of society, and which they have long contemplated and desired to carry into effect.

The college is bound by its charter of incorporation, granted by Henry 8, and subsequently confirmed by Act of Parliament, to examine and to license, if found competent, all persons who desire to practise as physicians in London, and within seven miles round. But the examination and licensing of those who wish to practise beyond seven miles from London was given by the Act which confirmed the charter, not to the college at large, but to a small body composed of eight of its members, termed Elects. The elects not having been chosen even at first by the members at large, are endowed with separate functions, which they exercise independently of the college, the constitution of their body being such that all vacancies occurring in it are required to be filled up by the survivors.

As might be expected, inconveniences have arisen from this divided jurisdiction. And it is worthy of observation, that amongst all the grievances complained of in the petitions for medical reform, which were presented at one time in great number to Parliament, none were complained of more than the existence of local and exclusive jurisdictions, and the exercise by numerous independent bodies of the power of examining and licensing medical practitioners: the latter circumstance, it was alleged, had caused a want of uniformity in the education and qualifications of practitioners passing under the same denomination; and from the former circumstance it has resulted, that licences valid in one part of the country are invalid in another; a restriction which proves most detrimental to the good of the profession, and even leads frequently to an infringement of the laws.

Of late years it has happened that the demand by physicians for licences to practise in the country (termed extra licences), which was formerly small, has been greatly increased; hence the evils and inconvenience of the licences emanating from the college being divided into

into two kinds, and of their being granted by separate bodies, have become strikingly manifest, and have given rise to complaints, and caused disputes and dissensions in various parts of the country.

Moreover, the Act of Parliament already referred to has also given to the elects the function of choosing annually one of themselves to be the president of the college. It has been thought that this part of the constitution of the college is susceptible of improvement; for that the choice of the president ought not to be deputed to so small a body, which is neither elected by the fellows at large nor under their control.

For the reasons which have been stated, the college is desirous that a short Act of Parliament should be passed, enabling it to accept a charter modifying its former charter as regards the elects, and transferring their functions to the general corporation. An Act for this purpose was in fact prepared, with the sanction and co-operation of the late Government, and laid before Parliament; but it proceeded no farther, because it was introduced in conjunction with other measures affecting the profession more widely, which were subsequently abandoned.

There are other improvements, lying more within its own power, to which the college has of late years directed its earnest attention.

In particular, it has extended and greatly improved the examinations of those whom it licenses to practise as physicians.

With respect to those who are admitted as fellows or members of the corporation, during very nearly two centuries they were required by the bye-laws of the college, almost exclusively, to have been educated at the English universities; so that, by long prescription, the graduates of Oxford and Cambridge were admitted nearly as a matter of course into the order of fellows; and, beside them, few indeed either were or could be elected.

The object of this regulation was to ensure in the fellows of the college the best and highest education; and it had confessedly the effect of raising highly the character of the college, and through its influence that of all orders of the profession in this country.

Nevertheless, the exclusiveness of the rule excited jealousy and discontent, and became a cause of frequent litigation, until by repeated decisions of the courts of law the right of the college to be the sole judge of the qualifications of those whom it would elect as fellows had been established beyond dispute.

In the present century a high standard of education being adopted more generally, the restriction in favour of the Universities of Oxford and Cambridge, which had been enforced so long by the college, became proportionately less requisite and proper.

Wherefore the college, although still retaining a conviction of the superior advantages to be derived from an education in those universities with which it had been so long connected, has nevertheless rescinded its exclusive bye-laws.

For several years the fellows have been selected out of the order of licentiates, solely from regard to their character and attainments, and without distinction as to the place of their education.

To a considerable extent this plan has proved satisfactory to the profession. Yet a system of selection is attended always with some invidiousness; therefore the college has resolved to adopt another principle in the admission of fellows, not liable to the foregoing objections, which will be perfectly equitable in its operation, and most honourable to those who avail themselves of it; viz. that the ordinary mode of admission to the fellowship shall be through an examination, high in character, comprehensive in extent, and open to all licentiates who may submit themselves voluntarily to it; whilst at the same time a limited power shall be reserved to the college of admitting as fellows, without examination, those persons who may have greatly distinguished themselves by scientific pursuits and discoveries, who, not having enjoyed the advantage of the best early education, may have made up for this deficiency by superior talents and energy, but whose age may be such, as well as their known attainments, that they ought to be exempted from the examination intended for younger men.

As far as the college is concerned, the changes and improvements which have been mentioned might have been effected earlier, had they not been retarded by circumstances over which the college could have no control. An outline of the reforms contemplated by the college was submitted to the Marquis of Normanby, when Secretary of State, and was favourably entertained by his Lordship. A change, however, in the Government followed soon afterwards, and delayed further progress.

The subject of these reforms was repeatedly brought under the consideration of Sir James Graham, and they met with his approval; but it seemed to him expedient that they should be brought forward simultaneously with the general measures which he contemplated for the regulation of the whole medical profession.

In consequence of the desire then expressed by the Government, the college proceeded, with the assistance of its own legal advisers and those of the Crown, and with considerable pains and expense, to prepare the draft of a new charter, modifying its former charter in the way which has been already explained.

The title of the College of Physicians of London, was to be changed by the new charter to that of the "Royal College of Physicians of England;" and, by one of its clauses, the college offered, for one year after its acceptance, to admit as members, without examination, all graduates of British universities of a certain standing, now practising throughout England and Wales.

A conciliatory measure of this kind appears to be much required in the present state of the medical profession; for there are many physicians practising in England, not being

Appendix, No. 2.

Memorial from the College of Physicians.

graduates of Oxford and Cambridge, who yet are not, as legally they ought to be, possessed of a licence from the College of Physicians of London.

Therefore the college proposed this measure as the commencement of a more regular and effective system, and in order that it might, more perfectly than is possible at present, represent and regulate the interests of all physicians in this country.

The college will be ready to abide by the offer and concession which it then thought right to make, provided means can be devised whereby all physicians practising in England and Wales shall henceforward (reserving the rights of the Universities of Oxford and Cambridge) be required to submit their pretensions to the Censors' Board (to which the college deputes the examination of those whom it licenses), in order that their competency may be properly tested, and that they may be enrolled as members of the college.

By another clause in the new charter, power was given to the college, in certain specified cases, to expel unworthy members. As circumstances sometimes arise requiring the exercise of such a power, the college believes that it would be expedient that it should possess it. A similar power has recently been given by charter to the College of Surgeons.

It was also provided by the new charter that persons who, having exceeded the age of 40 years, and having been duly examined by the college, are found competent to practise as physicians, shall be entitled to use the designation of doctor of medicine, although not graduates of any university. Whereas for all candidates who present themselves for the licence under the age of 40, it is made an indispensable requisite that they should have obtained the degree of doctor of medicine in some recognized university, before they can be admitted to examination by the college.

The reason of this distinction is, that in a practical profession like that of medicine, it is always right that those who, by superior talents and industry, have raised themselves in public estimation, should have the power of rising from a lower, even to the highest rank in the profession. It seems reasonable that the college to which such persons must apply for legal authority to practise as physicians, should be empowered to confer the title which, through common usage, is necessary to render the licence intelligible by the public, and useful therefore to the possessor of it. In this way, a want which is occasionally felt in the profession might be supplied, without detriment to the universities, and without material infringement of the rule, which ought to be upheld, that those who intend to be physicians should resort to the universities for preliminary and general education.

Such being the objects and principal enactments of the new charter which has been prepared for the college, the salutary changes which it would effect are calculated, in the opinion of the college, to render it an institution more generally acceptable to the physicians of this country, and more useful to the profession and the public.

Therefore the college respectfully but earnestly requests the assistance of Government, in order that a short Act of Parliament may be passed enabling the Crown to grant this charter, on the petition of the college; and in order that the Crown may be advised to grant it.

College of Physicians,
8 August 1846.

(signed) *Francis Hawkins*,
Registrar.

Appendix, No. 3.

Appendix, No. 3.

Letter from the College of Surgeons; &c.

COPY of a LETTER from the President of the College of Surgeons of *England* to the Secretary of State, written in March 1846; and of the ANSWER of the Secretary of State to such Letter.

Royal College of Surgeons of England,
16 March 1846.

Sir,

I HAVE the honour to transmit to you a copy of resolutions passed by the council of this college on the 11th instant, and confirmed on the 14th, relating to an application to Her Majesty for a supplemental charter.

The council will feel obliged if you will favour them, at as early a period as convenient to you, with your opinion on the propositions, in order that the draft of a charter may be prepared in conformity therewith, should they meet with your approbation.

I am, &c.
(signed) *Samuel Cooper*,
President.

The Right Hon. Sir James Graham, Bart.
&c. &c. &c.

COPY of RESOLUTIONS of the Council of the Royal College of Surgeons of *England*, on the 11th of March 1846.

THAT a petition be presented to Her Majesty, praying for a short supplementary charter, enabling this council, in the first instance, to arrange the two lists of members elected and appointed to the fellowship (under the authority of the charter) on the 11th of December 1843,

1843, and the 26th of August 1844; so as to place them in the order of seniority according to the dates of their respective diplomas as members. And further, to give authority to this council to admit, by ballot, from time to time, to the rank of fellow, without examination, all members of the college of 20 years' standing, on producing to this council certificates from seven members of the college, three of whom, at least, shall be fellows, that, on their own personal knowledge, the members to whom the said certificates are granted, are men of strict moral integrity and of high professional acquirements as practical surgeons; and that this manner of admission to the fellowship be limited to those who were members of the college on the 14th of September 1843, the date of the late charter.

That all who were members of the college on the 14th of September 1843 (the date of the late charter), and who have been, or may be admitted fellows, shall take precedence on the chronological list of fellows, according to the date of their diplomas as members.

That those members who shall be admitted to the fellowship without examination, in the manner directed in the proposed supplemental charter, shall pay the same fee as is required by the bye-law (sect. 3, para. 4) to be paid by members when admitted to the fellowship upon examination.

(signed) *Samuel Cooper*,
President.

Sir, Whitehall, 23 March 1846.

I HAVE taken into consideration the resolution of the council of the Royal College of Surgeons of England, relating to an application to Her Majesty for a supplemental charter.

When the great change was made in the constitution of the college, rendering the council elective by the fellows, it became necessary to constitute forthwith a body of electors, in aid of the gradual process of the introduction of fellows after examination. It appeared to Her Majesty's advisers that the privilege of selecting members for this purpose might properly be given to the council, who were accordingly empowered at once to enrol as fellows a list of 300 members, who might appear to them most deserving of that distinction. And to obviate the consequences of any accidental omissions from this first list, this power was continued for 12 months after the date of the charter; which time seemed long enough to allow of the detection and rectification of any such omissions.

The charter provides that, with the exception of those who should be so admitted within the year, no person should be admitted a fellow until he should have passed a special examination and complied with the other requisites of the charter.

I have heard with great satisfaction that the beneficial effects which were anticipated from holding forth to young men the honour of the fellowships, to be gained by superior attainments, are in a fair way of being realized; and that a great encouragement has been given to those who aim at a high standard of professional education.

It has of course not escaped the consideration of the council that there is room for apprehension lest the consequences of acceding to their present application should have a contrary tendency, and that the value of the fellowship may be proportionally impaired, as the number is increased of those who have been admitted to it without giving open proofs of their superior qualifications.

I am not uninformed of the jealousies to which the distinction of classes among the members of the college has given rise, and I feel myself bound to suppose that the council, having more ample means of information on the subject than I can command, have come to the conclusion that the probability of allaying these feelings by the alteration now suggested by them, is worth the risk of the inconvenience to which I have alluded.

Relying therefore, as I have hitherto found myself fully warranted in doing, on the enlightened zeal of the council to promote the best interests of the college, I shall not be indisposed to advise Her Majesty to sanction the introduction among the fellows of those members contemplated by the resolution of the council.

The other parts of the resolution refer to the future order of rank among the fellows.

If this were a mere question of ceremonial precedence, it would be of very secondary importance; but it assumes a very different aspect when viewed in connexion with the manner of election into the council.

It will not be forgotten by the council that I from the first disapproved of the principle on which that mode of admission was formerly founded. In consequence of my representations, the council agreed that it should be in some degree modified and rendered less objectionable in the recent charter, by affording a second opportunity for nominating a fellow for election to the council who had been once passed over; but the council at that time were unwilling to abandon altogether the principle of nomination in the order of seniority, and I acquiesced in their final resolution rather than be deprived of the advantage of their concurrence in the other important changes effected by that charter.

The inconvenience which I then anticipated will be greatly increased if I should advise Her Majesty to sanction your proposal of ranking each fellow, upon his admission, according to the date of his membership, without making any change in the manner of election to the council. The consequences would be that for the next 17 years none of the young fellows could calculate with any certainty on his chance of election to the council; and the unlimited introduction of the certificated fellows, which will probably be viewed with jealousy by those who come in upon examination, will become a more palpable grievance, and will be more deeply resented. I understand that the settlement of this question is considered essential for producing the harmony which the council hope to restore by the new measure; but, upon the most mature consideration I can give to the subject, I cannot recommend any

Appendix, No. 3.

Letter from the College of Surgeons; &

alteration of the order of precedence among the fellows, unless it be accompanied by a change in the manner of election into the council.

I do not think it desirable that every fellow should be indiscriminately eligible to that honour, nor do I wish to prescribe the exact conditions of eligibility; but it would appear to me a reasonable proposition that the members of the council should be chosen exclusively from those who had been fellows for at least 10 years, or fellows and members for at least 25 years. On this question I shall wish to learn the opinion of the council, when they shall have reconsidered this matter, after being made aware that I look on an alteration of this kind as an indispensable preliminary to a new arrangement of the order of precedence among the fellows.

I have, &c.
(signed) *J. R. G. Graham.*

The President of the
Royal College of Surgeons of England, &c.

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I. *Of the Royal College of Physicians:*
1. Expediency of an alteration in the present Charter.
2. Steps taken by the College to obtain a revision of their Charter; leading features of the proposed Charter.

II. *Of the Royal College of Surgeons:*
1. Circumstances under which the new Charter was obtained.
2. Detail of its leading Features.
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1. *As respects Physicians:*

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COMMENCEMENT OF PRACTICE—continued.

2. *As respects General Practitioners:*

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1. *Plan for the Establishment of a Council of Health contained in the Physic and Surgery Bill of Session* 1845; *Approval thereof:*

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Council of Health—continued.

1. *Plan for the Establishment of a Council of Health, &c.*—continued.

cation; but would, if rightly constituted, command public confidence, and not be disapproved of by the profession, *Lawrence* 1634-1636. 1660-1662. 1887-1890——Various respects in which a council of health would be useful, *Sir B. Brodie*, 2038——The establishment of a council of health for the whole kingdom would be an excellent measure, *ib.* 2042——Favour with which a council of health, if properly constituted as respects medical men, is to be regarded; utility of such a body for other purposes besides the direction of medical education; the want of it a very great defect in our civil polity, *Green* 2318-2322. 2411, 2412——Utility of such a council both to the Government and to the profession, *Sir B. Brodie* 2703-2705.

2. *Details of that Measure; Appointment of Members; Functions and Powers of the Council:*

The clause in the amended draft of the Bill of 1845 as to the appointment of the members of the council meets witness's view of the necessity and policy of the case, *Burrows* 434, 435——Language of the Bill of July 1845 as to the constitution of the council; how far it provides, by implication or otherwise, for the appointment of medical men as members; clauses 2, 6, 9, 10, 17, and 21 quoted, *ib.* 665-681. 692-695——Great consideration given by the College of Physicians to the subject of the mode in which the council of health was to be constituted; conclusion arrived at that it would be advantageous to leave the responsibility of appointing the members solely to the Crown; it was understood that a proportion would be medical men; division of opinion as to the number of professional men that ought to have seats, *Hawkins* 1028-1032——Suggestions as to the constitution of the council, *Sir B. Brodie* 2039——By whom the members of the council should be appointed, *Green* 2412. 2436-2442——The constitution of the council an important question; approval of appointment by the Crown, *Sir B. Brodie* 2699-2701——Provision necessary as to the description of persons to be on the council, *ib.*

Functions of the council of health projected in the Bill of 1845, as respected the supervision of examinations, *Burrows* 578-580——How far advisable to invest the council with a supreme control over medical education; large portion of its attention that would be engaged with purely sanitary matters; arrangements contemplated by Sir James Graham commented upon, *Seymour* 1234-1236. 1434——Whether this council should be entrusted with the supervision of medical education in addition to that of public sanitary measures, considered; connexion herewith of the question as to who should be members of the council, and by whom they should be appointed or elected, *Holland* 1491-1495. 1499-1509——The council might combine the functions of control over medical education, with that of supervision of matters affecting the public health, *Sir B. Brodie* 2040, 2041. 2094; *Green* 2323, 2324——Probable working of the council of health in regard to registering practitioners; discretion that must necessarily be given to those having the register under their charge, with respect to admitting persons holding foreign diplomas and otherwise not legally licensed, *Sir B. Brodie* 2708-2723.

Means by which the attendance of the higher medical men from Ireland and Scotland in one central body in London could be secured; Scotch and Irish committees acting independently to a certain extent, contemplated by witness, *Sir B. Brodie* 2094-2096——Edinburgh and Dublin should have councils of health; but they would be branches of the London Council, *ib.* 2706, 2707.

3. *Comparative Merits of the Scheme for a Council of Health, and that of the Bill of the present Session* (1847), *as to the Secretary of State and Queen in Council:*

Amount of confidence to be reposed in a council of health, as proposed by the Bill of 1845, and in the provision as to the Secretary of State and the Queen in Council in the Bill of the present Session (1847) respectively, *Burrows* 795-813——Preference to be given to the plan for a council of health; merits of each plan considered, *Hawkins* 1026-1028; *Seymour* 1262-1264. 1395-1431. 1434; *Holland* 1496-1498; *Green* 2325——A central control with reference to medical institutions would be highly beneficial; this should be vested in a council of health, and not in the Queen in Council or Secretary of State, *Green* 2409-2411.

Purport of clause 19 of the Bill of 1845, as to bye-laws receiving the approval of the council of health; how far there is any restrictive provision with regard to the internal government of the College of Physicians in the Bill now before The House (1847); effect of clause 16 of the latter, for the expulsion of registered practitioners for disgraceful conduct, *Burrows* 696-711. 717-721——Evidence as to whether the College of Physicians, in the first instance, objected to the power conferred by the Bill of August 1844 upon the council of health, of revising the bye-laws of the colleges, *ib.* 729-735——Purport of clause 16, in the Bill of February 1845, as to who shall be entitled to register

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Council of Health—continued.

3. *Comparative Merits of this Scheme, &c.*—continued.

register and practise as physicians, *Burrows* 736–742——Effect of clauses 21 and 24 in the same Bill, providing that the curricula shall be presented from the different universities and colleges to the council of health, and be of no force until approved of by it, *ib.* 743–745——Whether such a provision would interfere with the powers of the College of Physicians more than anything in the Bill now before The House; respects in which the latter may be conceived to interfere; further allusion to the system of registration laid down by it, *ib.* 746–754——Clause 19 of the Bill of July 1845, enacting that all the bye-laws should be approved by the council of health, read; no such power exists in the Bill of the present Session; the reasons influencing the college in assenting to the former provision are not operative in the case of the present Bill, as by the latter the college would be annihilated, *Hawkins* 1111–1114.

See also *Registration of Medical Practitioners, Scotland. Secretary of State.*

"*Cramming.*" See "*Grinding.*"

D.

Dentists. Are at present unknown to the law, *Burrows* 516 *et seq.*

Diplomas (College of Surgeons). There is no law to compel persons to become members of the College of Surgeons, and yet many thousands flock to it for diplomas; reasons for this assigned, *Burrows* 766–770——The only surgical qualification is the diploma of the College of Surgeons; a medical qualification may be either a licence of the Society of Apothecaries or a medical degree conferred by any British university, *ib.* 768——How far the diploma of the College of Surgeons is a guarantee of competency; recent instance of a pastrycook obtaining a diploma by means of false certificates; actual particulars of this case; revocation of the diploma, *Lawrence* 1894–1918. 1951–1954——Practice formerly in the country for surgeons not to take out the diploma of the college; circumstances that have arisen tending to induce such practitioners to apply for that qualification; steps taken by the council to meet their peculiar cases, *ib.* 1900. 1903, 1904. 1910. 1913——Want of power in the council effectually to recall a diploma; hearing that is afforded an individual before taking that step, *ib.* 1951–1953.

See also *Foreign Degrees and Diplomas. France. Poor Law. Surgeons.*

Dissection. Actual dissection in the presence of examiners forms part of the examination for the fellowship of the College of Surgeons; not for that of the members; preparations and the skeleton are referred to in the latter case, *Sir B. Brodie* 1749, 1750. 1990–1995; *Green* 2259.

Dressers. Practice of many diligent students who become physicians to take the post of dressers to surgeons, *Green* 2363.

Druggists. See *Chemists and Druggists.*

Drugs. Importance of instituting an inquiry into the adulteration and sale of drugs, *Seymour* 1443.

See also *Apothecaries' Shops. Chemists and Druggists. Pharmacy.*

E.

Edinburgh. High standard of medical education in Edinburgh formerly; witness cannot speak to its present state, *Paris* 167, 168——High state of the Edinburgh school of medicine, *Lawrence* 1732.

See also *Royal College of Surgeons* (Edinburgh). *Scotland.*

Education, Medical:

1. *Outline of the Course of Education pursued by Physicians.*
2. *Details as to the Course of Education pursued by General Practitioners.*
3. *Distinction between the Education of Physicians and of General Practitioners at the present day; whether desirable to maintain such Distinction.*
4. *Increase effected of late Years in the Standard of Medical Education.*
5. *Advantages of Extended Preliminary Education.*
6. *Probable Operation of the Bill of the present Session* (1847) *in regard to Medical Education.*

1. *Outline of the Course of Education pursued by Physicians:*

Details as to the course of education required to be gone through by the student intending to practise as a physician; its varied and extensive character; number of years over which spread, *Burrows* 615; *Seymour* 1204–1211.

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EDUCATION, MEDICAL—*continued.*

2. *Details as to the Course of Education pursued by General Practitioners:*

Medical education of the general practitioner, *Burrows* 615——Course of education undergone by hospital surgeons, *Seymour* 1325.

Improvement of late years in the attainments of the best educated young men doubts whether there is any advance in this direction amongst the great mass of the students, *Sir B. Brodie* 1970, 1971. 2141, 2142——Result of witness's experience as a teacher, that in anatomy and surgery the movement has been retrograde; cause thereof, *Green* 2236–2242. 2500, 2501 —— Large share of attention formerly given by students to anatomy and surgery, to the exclusion of the practice of medicine and kindred subjects, *ib.* 2252——Result of the present system in a material diminution of surgical knowledge on the part of students, *ib.* 2253.

Impossibility of young men going through the necessary course of study, owing to the extent of the lectures, in the case of the apothecary; increased possibility of coping with the large variety of subjects where the education is spread over a larger number of years, *Burrows* 616–619——Extensive preparation requisite for the examination before the Society of Apothecaries; considerable extent to which these studies interfere with the time of the students for dissection and hospital practice and the acquirement of superior attainments in the science of surgery; impossibility nevertheless of omitting any one of these branches of study, *Green* 2243–2250. 2335. 2504, 2505——Negotiation pending between the Apothecaries' Society and the College of Surgeons for the purpose of dovetailing the curriculum and rendering it easier to the students, *ib.* 2458–2460——Restriction at present placed upon the students as to the schools and hospitals they attend; objection to allowing the student to go where he pleases, leaving the teaching of medicine completely free, *Sir B. Brodie* 2609–2618.

Belief that the education of medical practitioners has been carried as far as it can be with safety, *Lawrence* 1963——The effect of raising the general standard beyond a certain point would be to encourage empiricism and ignorance; for the mass of the profession the requirements as to education have been carried already to the highest point, *Sir B. Brodie* 2014–2019——Impracticability of any system of education securing to the public practitioners absolutely competent in all respects, and more particularly as good operators, *Green* 2570–2575.

3. *Distinction between the Education of Physicians and of General Practitioners at the present day; whether desirable to maintain such Distinction:*

Detailed explanation of the course of education pursued by physicians and by general practitioners; practical difference between the studies of each; in what the medical education of each branch of the profession should consist or differ, *Burrows* 614, 615. 814–829. 865–874. 911–917. 932–946; *Hawkins* 1081–1090. 1137–1145; *Lawrence* 1826, 1827——Physicians generally have been educated at Oxford and Cambridge; they are more learned and receive a better education than surgeons, *Lawrence* 1829, 1830—— Points of difference between the education of physicians and surgeons, *Sir B. Brodie* 2026——The general education of all classes of practitioners should be equally extensive; the cultivation of separate branches is nevertheless indispensable; surgeons in however extensive practice are not consulted in medical cases to a great extent, *ib.* 2179–2182.

Grounds for the opinion that the medical education of the apothecary is inferior to that of the physician; the amount of medical information possessed by each should be alike, *Paris* 247–258——No striking distinctions in the mode of educating medical men should exist; no distinctions should be made in the elementary branches, *Green* 2443, 2444—— Point at which the distinction must arise with reference to those who are to practise as physicians, surgeons, and general practitioners respectively, *ib.* 2445, 2446. 2456—— Expenditure of time and money involved in the education of a general practitioner; comparatively small amount of the fees for lectures and hospital attendance; whether the education of the general practitioner is more expensive than that of the physician, inquired into, *ib.* 2447–2457.

4. *Increase effected of late Years in the Standard of Education:*

High standard of education adopted by all the licensing bodies in England, *Burrows* 918—— Increase effected in the standard of education in England of late years; requiring a larger expenditure of time and money on the part of the student; diminution in the number of students; whether drawn away by the provincial schools, *ib.* 918–922——To what the increase in the standard of medical education may be traced; period within which this has taken place, *Lawrence* 1739, 1740.

5. *Advantages of Extended Preliminary Education:*

Superior preliminary education of the physician over that of the general practitioner; probability of a certain portion of the latter always endeavouring to attain that liberal education,

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EDUCATION, MEDICAL—*continued.*

5. *Advantages of Extended Preliminary Education*—continued.

education, *Paris* 134–137, 325–329——Obvious advantages of an extended education preparatory to entering upon medical practice, *Burrows*, 407, 408——High character of the education of members of the universities of Oxford and Cambridge in preliminary studies, *Hawkins* 1070——Any alteration of the law acting as a discouragement to preliminary studies would be injurious, *Holland* 1456–1459——High importance of preliminary and academical education with reference to the subsequent science and practice of the medical man, *ib.* 1527. 1563, 1564——Advantage, with limitations, of a young man following a complete range of academical study before determining what line he shall hereafter pursue, *ib.* 1563, 1564.

Improvement in the preliminary education of country practitioners desirable; considerable increase in the amount of knowledge of the profession generally of late years, *Lawrence*, 1700–1702——Ignorance of a large number of medical students of their own language, and more so of classical languages; their incapability hence of apprehending scientific truth in lectures, *Green* 2524–2528——Great importance therefore attaching to a good preliminary education for medical practitioners, *ib.* 2529, 2530.

6. *Probable Operation of the Bill of the present Session* (1847) *in regard to Medical Education:*

Highly unsatisfactory nature of the system proposed by the Bill for establishing a uniform system of education; probable uncertainty of its operation, *Burrows* 427—— Reasons assigned for the opinion that if the Bill become law, medical men would not carry their education as far before they enter their profession as lawyers, when they have the means, and that in country villages and many parts of the metropolis scientific information would be a bar to success, *ib.* 540–545. 960–967.

See also *Apothecaries. Apothecaries*, Society of. *Apprenticeship. Classical Languages. Clinical Instruction. Collegiate Institutions. Edinburgh. Equality of Education. Examinations. Foreign Travel. Lectures. Physicians. Scotland. Secretary of State. Single Faculty*, 1. *Universities.*

Elects (College of Physicians). Number, office, qualification, and mode of appointment of the body of elects, *Paris* 180; *Ev. p.* 34; *Burrows* 887–890; *Hawkins* 994–998——Distinction between the functions of the elects and of the censors, *Burrows* 503——Inconvenience of the divided jurisdiction of the elects and the College, *Hawkins* 991—— Approval of the alteration in the system of elects and in the mode of electing the president contemplated by the Bill of 1844, *Seymour* 1227.

EQUALITY OF EDUCATION

I. *As regards the three Divisions of the United Kingdom under the present System.*

II. *As respects Equality of Attainments under a Single Faculty:*

1. Whether the Bill of the present Session (1847) would effect such Equality.
2. Whether practicable or politic to effect such Equality.

I. *As regards the three Divisions of the United Kingdom under the present System:*

Desire of the College of Physicians to establish the English standard of education in the sister countries; their willingness to waive their peculiar privileges if this were effected, *Burrows* 421——Difficulty, but possibility, of establishing a uniformity of education; arrangements nearly concluded some years since between the universities of Scotland and the College, *ib.* 527–529. 551–554. 563–570——The interests of the profession render some course necessary to be taken for a uniform system of education throughout the United Kingdom, rather than to have the present agitation continued, *ib.* 551–554. 577 ——Reciprocity of education with Scotland and Ireland is perfectly proper, provided the standard of education be equalized, *Seymour* 1227——The course of medical education in Scotland different from that in England; it should be as equal as possible, *Lawrence* 1891.

II. *As respects Equality of Attainments under a Single Faculty:*

1. Whether the Bill of the present Session (1847) would effect such Equality:

Probable effect of the present Bill to equalize the attainments of the profession, *Hawkins* 1106——There is no security for equality of attainments under the present Bill, *Seymour* 1253–1257——Tendency of the present Bill to reduce the education of medical men to the lowest scale; opinion that, notwithstanding, all the grades and distinctions would practically remain the same, *Green* 2382–2400.

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Equality of Education—continued.

II. *As respects Equality of Attainments under a Single Faculty*—continued.

2. Whether practicable or politic to effect such Equality:

The effect of doing away with the class of physicians would tend to all men being educated very much alike; but a greatly inferior education would suffice, *Paris* 343-347——Total estimated number of physicians and medical practitioners in England and Wales; impossibility of raising the general practitioners to as high a standard of attainments as the class of physicians, *Burrows* 926–931——Taking a lower standard for the single faculty would degrade the profession and be injurious to the public, *Seymour* 1240——Doubts as to the possibility of insuring equality of attainments, *Lawrence* 1638. 1891——Impossibility of producing equality (and that at a higher standard) by the establishment of a single faculty; little encouragement in the medical profession to induce men of superior talent to enter it; comparison with the law and the church, *ib.* 1650–1652. 1694, 1695. 1890.

Impossibility of any provision of the State attaining for every village as able medical practitioners as in London; it is sufficient to require education to be carried to that point only that will insure the safety of the public, *Burrows* 852–855——The requirements of the poorer orders in society demand that persons should be admitted to practise with lower qualifications than are required of licentiates and extra-licentiates of the College of Physicians, *Hawkins* 1079, 1080. 1087. 1097——Conclusion to be drawn, that a high and uniform standard of education, strictly enforced by law, under the responsibility of the Executive Government, would leave the poorer districts unprovided, or throw the support of the medical men of such districts on the State, *Seymour* 1238, 1239.

Extreme importance, with a view to securing equality of attainment, of vesting the superintendence of the standards of acquirement in a responsible authority known to the State, and provided by the law; mode in which this is to be attained and acted upon; limits within which it should be restricted, *Seymour* 1316-1323——Expediency of confining the College of Surgeons essentially to the promotion of surgery as a science; desirableness, nevertheless, of every member having a qualification in all the branches of medicine; witness's views as to there being but "one portal," by which all parties might enter the profession, *Green* 2480. 2486–2499. 2543–2546——Further evidence as to the expediency of all members of the profession entering at "one portal," and proceeding in different roads afterwards; witness's idea as to the preliminary examination sufficient for the general practitioner, and as to there being distinct examinations subsequently for those intending to practise as physicians and those as surgeons, *ib.* 2543–2575.

See also *Government Aid.* *Kidd*, Dr. *Secretary of State.* *Single Faculty.*

Equality of Privilege:

I. *As respects Reciprocity of Privilege between Practitioners educated in England, Scotland, and Ireland respectively, under the present System.*

II. *As regards all Branches of the Medical Profession being placed on one and the same Footing:*

1. Policy of throwing the Profession entirely Open considered.
2. Effect of the Bill of the present Session (1847) to produce such Equality.

I. *As respects Reciprocity of Privilege between Practitioners educated in England, Scotland, and Ireland respectively, under the present System:*

Conviction that throughout the United Kingdom sufficient care is not taken to ensure an equal standard of qualification to justify an equality of privilege, *Paris* 76, 77——Endeavour made about thirty years ago to obtain an Act by which those who had graduated or been licensed in Scotland were to have equal privileges of practice with those qualifying in England, *ib.* 152——If the right to practise in England and Wales be extended to Edinburgh or Glasgow, a similar right should be extended to practitioners with English diplomas; such is not the case at present, *ib.* 156–158——No objection exists to a reciprocity between England, Scotland, and Ireland, provided uniformity of education be secured, *ib.* 164——With a sufficient security of education and qualification, no objection would exist to physicians and surgeons belonging to Irish and Scotch colleges practising in London without belonging to the institutions here, *Seymour* 1435, 1436——No objection exists to opening the practice of England (including the metropolis and the seven miles' circuit) to medical men from all parts of the United Kingdom, precautions being taken to secure equality of attainments, *Holland* 1484–1486——Difficulty of giving that security to the public without a central controlling power, *ib.* 1487.

Great consideration necessary to the subject of the admission to equal privileges of practice of all members of the profession throughout the United Kingdom, *Lawrence* 1637——

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EQUALITY OF PRIVILEGE—continued.

I. *As respects a Reciprocity of Privilege between Practitioners, &c.*—continued.

1637——Examination into the advantages accruing from the retention of the system of local jurisdictions, within which persons may not practise without becoming members of the corporation or examining body thereof, particularly with reference to the Scotch and English schools practising mutually in their respective divisions of the kingdom, *ib.* 1663–1681. 1715–1720. 1725–1731——Dissatisfaction caused by persons who have received the diploma of the University of Edinburgh being obliged to undergo an examination by the Apothecaries' Society before practising as apothecaries in England, *ib.* 1668——Advantage of a constant interchange of men educated in different countries; possibility of combining this advantage with perfect security for equal education in each branch of the United Kingdom, *ib.* 1716–1720——With proper regulations to insure equal education and examination, it is not necessary that a person educated in Edinburgh or in Ireland should undergo further examination, *ib.* 1924, 1925——Whether this privilege should be accorded without payment of a fee, *ib.* 1926–1933.

Expediency of measures being taken for making the practice in England and Scotland common to both; the Scotch education in general is fully equal to that of the great mass of practitioners here; that of the physician rather inferior, *Sir B. Brodie*, 2044, 2045——The medical bodies of Scotland, under supervision of the proposed Council of Health, might license for the whole kingdom, *ib.* 2046——The tendency, if an equal standard were fixed, of practically examining parties below that standard with a view to attracting pupils would be counteracted by higher motives, *ib.* 2048, 2049——Practitioners from Ireland or Scotland coming to practise in England should be admitted to the College of Surgeons *ad eundem*, for the purpose of registration, without further examination; they should make a moderate contribution to the library and museum; how this should be enforced, *ib.* 2079–2084.

Caution to be exercised in respect to admitting Scotch practitioners generally, without any other test than the present Bill provides, to metropolitan practice, *Lawrence* 1640–1643——Detrimental effect, if the Bill passed, of admitting Scotch and Irish practitioners to an equality of practice in England, *Green* 2326, 2327.

II. *As regards all Branches of the Medical Profession being placed on one and the same Footing:*

1. Policy of throwing the Profession entirely Open considered:

Effect of granting the same professional privileges to medical practitioners of the lowest qualification as are now granted to men of the highest, in lowering the general standard of the profession, both literary and professional, *Paris* 61–71——Policy of throwing the profession entirely open, as is the case at present with respect to surgery, for practising which without a licence there is no legal penalty; reservation in regard to public bodies, who alone should be compelled by law to employ those persons only whose skill had been tested by a public authority, *Sir B. Brodie* 2069–2075. 2121–2140.

2. Effect of the Bill of the present Session (1847) to produce such Equality:

The Bill would open to the profession the right to practise in different parts of the United Kingdom, *Paris* 75. 163——Effect of the present Bill to give a legal sanction to the evil of an individual practising all branches of the profession, although qualified in one alone, a system existing at present only by sufferance, *Burrows* 923——Under the present Bill, a person having a legal qualification for any of the three departments can obtain a certificate, by virtue of which he could practise as physician, *Hawkins* 1016——False conclusion to which the system of registration proposed by the present Bill would lead; its effect to give a legal qualification to practise in any branch of the profession to a person with a licence from the Apothecaries' Company only; danger to the public safety, and public policy thereof, *Lawrence* 1577–1583. 1770–1786. 1800–1803——Effect of the Bill to legalize general practice without adequate qualification, *Green* 2313. 2591–2598——By the present Bill, a person qualified only as a general practitioner would be legally qualified to hold the office of a surgeon, *ib.* 2591–2598.

See also *Apothecaries. Grades of Practice. Scotland. Single Faculty*, 1. *Universities*, 1.

Ether. The discovery of the application of ether in surgical operations due to the American school, *Holland* 1559.

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EXAMINATIONS:

I. *Royal College of Physicians:*

1. Generally.
2. Scope of the Examination undergone by Licentiates.
3. Character of the Examination passed through by Extra-Licentiates.

II. *Royal College of Surgeons:*

1. Generally.
2. Details as to the Examination for the Fellowship.
3. Examination undergone by Candidates for Membership.
4. Expediency of instituting an Examination in Medicine considered.
5. Other Improvements suggested.

I. *Royal College of Physicians:*

1. Generally:

Want of means to exercise the legal power vested in the College for enforcing the compliance with their regulations as to examination, *Paris* 34. 37——Examinations are not conducted in secret; the admission or rejection of a candidate is determined by ballot, *Burrows* 897. 899——Branches of the inquiry now enforced with respect to licentiates and extra-licentiates which ought not to be enforced in the examination of candidates by the College of Surgeons or Apothecaries' Hall, *ib.* 908——Comparative length and severity of the examination in Latin at Apothecaries' Hall and at the College of Physicians, *ib.* 909, 910——Sessional examinations are not adopted, *Hawkins* 1091——The examinations are not conducted in public; are open to all the fellows of the college; reasons urged against making them public, *ib.* 1100–1105——Importance of requiring members of the universities to be examined by the College of Physicians before commencing practice in London as physicians, *Seymour* 1268.

2. Scope of the Examination undergone by Licentiates:

Description of the examination to which parties proposing to practise in London are called upon by the College to undergo, *Paris* 30–33——Subjects on which the licentiates are examined which are not included in the examinations at Apothecaries' Hall; extent of examinations relative to general literature and the dead languages, *Burrows* 875–882——Examination in anatomy; recent instance of the rejection of a candidate on account of want of knowledge of anatomy, *ib.* 883–892. 913——Candidates seldom rejected on account of want knowledge upon one subject, *ib.* 884——Examination as to surgery and pathology, and midwifery and botany, *ib.* 893, 894. 925——Examination in animal chemistry, *ib.* 895, 896——Testimonials and certificates required before admitting a candidate for examination; age candidates are required to have attained, *ib.* 900. 904——Severe character of the examination undergone; its general nature described; whether there is any branch in which candidates are examined in which general practitioners need not be examined, *Hawkins* 1092–1097. 1141, 1142——The examination is carried further than affords the public an adequate protection in regard to the competency of the practitioner; objects proposed to be answered by this; high importance of physicians having the character of being a learned and scientific body, *ib.* 1098, 1099. 1143–1145.

3. Character of the Examination passed through by Extra-Licentiates:

The examination of extra-licentiates is conducted by the elects, *Burrows* 875, 876——Testimonials required to be produced by extra-licentiates to entitle them to examination, *Hawkins* 1059.

Distinctions formerly in the examinations of fellows, licentiates, and extra-licentiates; none at present; an extra-licentiate may not, nevertheless, practise within seven miles of London, *Paris* 193–198. 229——Recent raising of the qualifications required by the elects; consequent decline in the number of applicants for examination, *Burrows* 605, 606——Outline of the examination undergone before the elects; present closer approximation between the examination of licentiates and extra-licentiates; there should be no distinction, *ib.* 607–609——Witness (the registrar) attends the examinations before the censors and also before the elects; relative difficulty of those examinations; increase gradually effected in the standard of that before the elects, *Hawkins* 1041, 1042——The examination of the elects is now precisely the same as that by the censors, *ib.* 1042——Period at which the qualifications of licentiates and extra-licentiates were placed on the same basis, *ib.* 1060–1066——Increased severity of the examination for the extra licence of late years; mode of conducting it as compared with that for the licence, *Seymour* 1432, 1433.

Additional examination to which an extra-licentiate desiring a licence to practise within the London circle is subjected; whether such examination could be enforced if he had held the extra licence several years, *Paris* 199–201——Recent instance of the refusal

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EXAMINATIONS—continued.

I. *Royal College of Physicians*—continued.

3. Character of the Examination passed through, &c.—*continued.*

refusal of such licence to an extra-licentiate, *Paris* 202–205; *Hawkins* 1043–1046——Gentlemen distinguished in the country as surgeons have become physicians under the examination of the elects; though deficient in the qualifications possessed by a physician from the beginning, they were entitled by their standing to take the title of physicians, *Burrows* 610, 611.

II. *Royal College of Surgeons:*

1. Generally:

Date of the resolution of the council of the College of Surgeons conferring a discretionary power on the court of examiners with regard to the examination of old practitioners for the diploma, *Lawrence* 1913——Improvement effected in the character of the examinations before the College of Surgeons since 1834, *Sir B. Brodie* 1975–1978——Considerable extent to which the standard of surgical knowledge and acquirements as fixed by the College of Surgeons has been elevated; doubts whether the examinations admit of much improvement, *ib.* 1997–1999. 2005——Care taken by the College, in its examination of members, to secure to the public a competent body of practitioners, *ib.* 2189.

2. Details as to the Examination for the Fellowship:

Means by which the fellowship is obtained under the present charter; evidence of classical attainments required; that of mathematical knowledge will be required after 1850, *Lawrence* 1617–1620——Stringent nature of the examination undergone for the fellowship; large degree of knowledge secured by the present arrangement, *ib.* 1621–1623——New bye-laws of the College, requiring testimonials of a good general education; after 1850, further proof will be required, *Sir B. Brodie* 2027——Dissection and operations introduced at the examination; "grinding" is unavailing for the practical part, *Green* 2266–2268——Extension of this examination to mathematics and demonstrative sciences, and general literature, after the year 1850, *ib.* 2269–2271——Subjects the examination of the general practitioner desiring to take a higher position, and practise exclusively as a surgeon, would comprehend; security the second examination would afford the public for having a better practitioner, *ib.* 2565–2570.

Difference between the examination for members and that for fellows explained; the examination of the former is sufficiently stringent, *Lawrence* 1744, 1745. 1749–1753; *Sir B. Brodie* 2169——The same qualifications could not be required from members at the age of 21 or at 22 years, *Sir B. Brodie* 2170, 2171——Reasons justifying the existing difference in the severity of the examinations of fellows and members, *ib.* 2187, 2188.

Stricter character of the examination of a fellow of the Surgeons' College than that of the Society of Apothecaries for a general practitioner, *Lawrence* 1647——Effect of that higher examination to stimulate the exertions of the great body of the profession usefully to the public, *ib.* 1648, 1649——Higher standard of qualification instituted for the fellowship under the new charter, than for membership under the old charter; limit in point of age; introduction of actual dissection in the presence of the examiners, *Sir B. Brodie* 1987–1996——Test of literary as well as of professional attainments secured by the examinations, as now fixed by the College; enlarged scope thereof after the year 1850, *ib.* 2027–2030——Effect of the examination for the fellowship to stimulate emulation among the young men, and likewise the older men, thereby leading to the acquirement of greater surgical skill, *Green* 2272–2275.

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Mode of examination of members, *Lawrence* 1744——None but examiners are present at the examination; twelve candidates are usually examined at each meeting of the Court, *ib.* 1751, 1752——No test of capability in regard to operations is used, nor as to whether candidates have been subject to clinical examination; doubts whether good would arise from enforcing the latter, *Sir B. Brodie* 2191–2196——Stricter character of the examination for membership of late years, *Green* 2260–2265——Persons receiving the diploma of the College are not examined on medical subjects; certificates of attendance on a course of lectures on the practice of medicine and the practice of an hospital are required, *ib.* 2357, 2358——Period during which the regulations of the College require candidates to have studied practical pharmacy, *ib.* 2462——Regulation as to attendance on the practice of physic, *ib.*——Also attendance on a course of lectures on midwifery, *ib.* 2465——Subjects the examination of the general practitioner would embrace; course of education he should pursue, *ib.* 2547–2556——The requirements of the College of Surgeons with respect to medical education not

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II. *Royal College of Surgeons*—continued.

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strictly surgical are limited to evidence of attendance on certain branches of medicine no examination is instituted, *Sir B. Brodie* 2623, 2624——Doubts whether the College has a legal power to enforce compliance with this regulation, *ib.* 2625-2628.

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Desirableness of examination in medicine; candidates should be sent to the College of Physicians for that purpose, *Green* 2338. 2359-2362——Regulations of the College regarding attendance on branches of medicine not strictly surgical; no examination is instituted into these subjects; objections to instituting such examination, *ib.* 2461-2485——Difficulty of instituting an examination on medical subjects; no advantage would result to the public, *Sir B. Brodie* 2629-2632——Witness does not recollect whether any arrangement was contemplated by the charter of 1843, with reference to the introduction into the College of a medical examination; parties with whom the application originated, *ib.* 2645-2652.

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See also *Censors.* *Elects.* *Examiners,* Court of (College of Surgeons). *Foreign Degrees and Diplomas.* *"Grinding."* *Legislative Interference.*

Examiners, Court of (College of Surgeons). Mode of appointment and tenure of office of examiners under the old and new charters, *Lawrence* 1607-1612; *Sir B. Brodie* 1982-1986——Number of examiners; functions of this body, *Lawrence* 1744——None but persons who are or have been public teachers are competent to conduct examinations, *Sir B. Brodie* 2155.

Extra-Licentiates (College of Physicians). Number of extra-licentiates of the College of Physicians, *Paris* 186——Greater demand of late for extra licences; reason thereof, *ib.* 201; *Hawkins* 992——Nature of the extra licence; under what power granted, *Hawkins* 1057; *Seymour* 1433——Privileges pertaining to the rank of extra-licentiate; "letters of testimonial" granted to them; no licence under the common seal of the College, *Hawkins* 1057, 1058——Urgent necessity for the immediate abolition of the extra licence; its absurdity, *Seymour* 1224, 1225. 1432, 1433.

Practice that grew up formerly of general practitioners coming from the country and receiving licences as physicians from the body called "The Elects of the College;" recent discontinuance thereof, *Burrows* 603, 604——Terms of the proposed charter of the College of Physicians under which extra licentiates would be admitted associates of the corporation, *Ev. p.* 84.——*See* also *Licentiates.*

F.

False Certificates. See *Certificates.*

Fees and Emoluments. Eventual effect of the Bill of the present Session (1847) to diminish the fees and emoluments of the profession; by what process explained, *Burrows* 546-550. 947-951——The pecuniary gain to result to the public from a diminution of the emoluments of the profession more than counterbalanced by the extinction of the grade of highly-qualified practitioners, *ib.* 560——Serious effect the one-faculty system would be found to have upon the pocket of the general practitioner, *Green* 2370. 2372. 2375.

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FELLOWSHIPS:

1. *Royal College of Physicians.*
2. *Royal College of Surgeons.*

1. *Royal College of Physicians:*

Number of fellows of the College of Physicians, *Paris* 184; *Hawkins* 1101——Rights of the fellows as distinguished from those of the licentiates and extra-licentiates, *Paris* 187, 188——Qualifications required of candidates for the fellowship; no examination, *ib.* 221. 228; *Ev. p.* 35——Terms of the proposed charter of the College of Physicians as to the election of fellows, &c., *Ev. p.* 83, 84.

2. *Royal College of Surgeons:*

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Power given in the new charter to nominate within a year a certain number of fellows; compliance therewith by the College; clause of the charter read; *Lawrence* 1845–1864——Rule observed in electing the fellows in the first instance, *ib.* 1848–1864——The power of nomination under the new charter could not be repeated after the expiration of twelve months; it ceased then; henceforth admission must be obtained by test of merit, *ib.* 1865–1870——Doubts whether any one surgeon of great eminence is left out of the list of fellows; none were excluded from any private feeling; circumstances connected with the exclusion of one individual on personal grounds, *ib.* 1872–1881——No suggestion was made by the Secretary of State as to the persons to be nominated fellows in the first instance; it was left to the College, *Sir B. Brodie* 2653–2656——Principles on which the selection was made; whole number admitted; fairness of the selection defended; impossibility of altogether averting dissatisfaction; explanation as to an individual omitted, *ib.* 2657–2668.——*See* also *Examinations*, II. 2.

Foreign Degrees and Diplomas. Traffic carried on in this country (in Tottenham Court-road) in diplomas obtained from Germany, *Burrows* 594. 629, 630; *Seymour* 1361——Stigma attaching to candidates, rejected by the College of Physicians, obtaining foreign degrees, *Hawkins* 1017.

Persons with diplomas or letters testimonial from a foreign university are admissible to examination at the College of Surgeons, *Lawrence* 1720——Discretion vested in the court of examiners of the College of Surgeons in this respect, *Sir B. Brodie* 2213–2215.

Objection to physicians and surgeons with foreign diplomas, and surgeons not members of the college being excluded from registration, *Sir B. Brodie*, 2209–2212.

Foreign Travel. Obvious advantages of foreign travel and visiting foreign schools of medicine in the education of the physician, *Burrows* 409——Visits paid by students intending to become physicians to foreign hospitals and schools, *ib.* 615——Opportunities of foreign travel witness (a physician) has had as part of his education, *Seymour* 1207–1211——Importance of foreign travel at the conclusion of medical studies; not essential; the introduction of a single faculty would lead to its being given up, *Holland* 1565–1567.

France. Police regulations of France as to diplomas, *Burrows* 476, 477——A chemist and druggist in France without a medical education is chargeable with a misdemeanor, *Seymour* 1292——Stringency of the regulation prohibiting unlicensed medical practice, *ib.* 1297——No fees are charged for attendance on the medical institutions and lectures of Paris; they are paid by government, *ib.* 1335–1340.

Little difference in the education of physicians and surgeons in France, *Burrows* 959——The physician and surgeon in France are totally distinct, *Seymour* 1345——State of the medical profession in France with respect to the blending of the practice of the physician and surgeon in the same person, *Holland* 1548–1552——A high grade of respectability not attached to the medical profession in France, *Green* 2376.

Measures in course of being taken at the present time in France for the amendment of the laws relating to public health; opposition made to the proposition for forming a medical education for the *officiers de santé*, *Seymour* 1236–1238. 1341–1343; *Holland* 1549; *Green* 2376–2381——Failure of the attempt to establish an inferior standard of education, *Seymour* 1238.

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Galen and Celsus. Reasons for the study of Galen and Celsus being required of physicians, *Burrows* 943.

Gaols. The diploma of the College required as a qualification for the office of gaol surgeon, *Lawrence* 1721.

General Practitioners. Functions of the general practitioner; union of medical and surgical duties, *Paris* 132, 133——Recent origin of the designation "general practitioner," *ib.* 312, 313——The term "general practitioner" not a legal term, *Lawrence* 1669——For general practice a licence from the Apothecaries' Company is necessary according to law, *Green* 2244.

In what the duties of general practitioner differ from those of the physician, *Burrows* 777–783——Larger range of experience possessed by the surgeon and apothecary than by the pure physician or pure surgeon; frequency with which the general practitioner must be thrown on his own resources, *Hawkins* 1133–1136——Highly meritorious character of the general practitioners of England; no class who, in proportion to their education and attainments, are so ill remunerated, *Holland* 1536.

See also *Commencement of Practice*, 2. *Education*, Medical, 2, 3. *Extra-Licentiates. Fees and Emoluments. Pharmacy. Physicians. Surgeons.*

General Practitioners, Royal College of. Proposition for a separate institute for "general practitioners;" disapproval of such an institution, *Paris* 314–324——Doubtful advantage of establishing a new medical college, *Hawkins* 1185——Qualified approval to be given to the proposed college of general practitioners, *Seymour* 1244——Disapproval of the proposed college, *Green* 2437. 2474——Demand made at present for a new incorporation of general practitioners; provisions of the Bills of 1845 in relation to it; objection made by the College of Surgeons to that portion of the title which included surgery, *Sir B. Brodie* 2636–2644.

Consideration given by the College of Physicians to clause 14 in the Bill of May 1845; the objections urged to it in the memorial addressed to the Secretary of State applied solely to the title assumed by the new incorporation of general practitioners; respects in which the Bill of 1847 is more conducive to the formation of a single faculty than such a provision as that contained in the before-mentioned clause (1847), *Burrows* 771–784——Light of degradation in which the College of Physicians regarded the proposal to enrol physicians in the new college, *ib.* 785–789——Nature of the objections entertained by the College of Physicians to the giving the new college of general practitioners the title first proposed; no other objection than that stated in the memorial was taken, *Hawkins* 1167–1174——Unlimited power given by clause 32 of the Bill of May 1845 to the members of the new college to hold any medical or surgical office in public or parochial institutions; disapproval thereof by the College of Physicians; that part of their memorial relating thereto read, *ib.* 1175–1179——Tenor of clause 26 (the corresponding clause) in the Bill of July 1845; provision contained in clause 32 of the former Bill omitted in clause 26 of the latter, *ib.* 1180–1183——The College of Physicians did not formally entertain the question of the title of the proposed new college as amended, *ib.* 1184.

George's, St., Hospital. Constant communication between the surgeons and their pupils at the patients' bedsides at this hospital, *Sir B. Brodie* 2619.

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Glasgow. Mixed faculty of physicians and surgeons with a limited jurisdiction existing at Glasgow, *Lawrence* 1733——Surgeons in Glasgow ought not to be registered as qualified to practise over the whole kingdom, *Sir B. Brodie* 2033——General opinion of the profession that persons who had received the diplomas of the faculty of physicians and surgeons in Glasgow were not properly qualified; students there have very good means of studying, *ib.* 2100–2106.——*See* also *Scotland.*

Government Aid. Medical men in the poorer districts must be supported by the State if the standard of education be raised, *Seymour* 1238.——*See* also *France.*

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Grades of Practice:

1. *Generally.*
2. *Expediency of maintaining the present Subdivisions of Medical Practice considered.*

1. *Generally:*

Gradations of rank in France and Germany, *Burrows* 959; *Seymour* 1345–1349——Policy of devising a mode of granting degrees to well educated persons qualified to become physicians without compelling them to go through all the routine; dispensing power of that kind formerly supposed to be vested in the president of the College of Physicians, *Seymour* 1313–1315——Tendency of the wants of mankind to divide medical practitioners into different classes, even where there are no laws establishing it, *Holland* 1518–1525——Priority of rank to be given to physicians over surgeons, *Holland* 1528–1530; *Lawrence* 1828–1830.

2. *Expediency of maintaining the present Subdivisions of Medical Practice considered:*

Great advantage to the public and to the profession itself of there being in large cities and towns consulting surgeons and physicians of more than ordinary eminence to give advice in cases of unusual difficulty; belief that the existence of the Colleges of Physicians and Surgeons in London gives security for the permanent continuance of such men, *Burrows* 856–862——The three orders of practitioners should be maintained, *Seymour* 1344, 1345——Benefit resulting from the present subdivision; greater skill in both physicians and surgeons to which it conduces; the facility of communication with the metropolis extends the benefit of consultation with that superior skill to the most distant parts of the country, *Holland* 1465–1467——Doubtful possibility or expediency of confining physicians and surgeons to the strict bounds of their respective professions; absence of any reasons for interference with the existing arrangements, which are found to answer their purpose, and are in accordance with the habits of the public, *Lawrence* 1805. 1821–1825. 1934–1939.

See also *Celsus. Continent,* The. *France. Herodotus. Physicians. Scotland. Single Faculty.*

Graham, Right Hon. Sir *J. R. G.* Letter addressed by Sir J. Graham to the president of the College of Physicians, dated 23 February 1842, relative to a Bill for enabling the college to surrender its charter and accept a new one from the Crown, *Hawkins* 1037——Copy of letter addressed by Secretary Sir James Graham to the registrar of the College of Physicians, dated 14 July 1845, relative to the memorial addressed to him by the college, bearing date 18 June 1845, *ib.* 1164——Answer given by the college thereto; no further communication took place between the Secretary of State and the college in reference to the Bill of 1845, *ib.* 1165, 1166——Letter from Sir James Graham to Samuel Cooper, president of the College of Surgeons, dated 23 March 1846, relative to the intended application of the college for a supplemental charter, *App. p.* 221.

See also *Medical Practice Bill. Physic and Surgery Bill. Registration of Medical Practitioners,* 4.

Green, Joseph Henry, F. R. S. (Analysis of his Evidence.)—Member of the College of Surgeons, and one of the council; has been a member for thirty years, one of the council ten years, 2230–2233——Has given up private practice, but continues to be surgeon of St. Thomas's Hospital, 2234, 2235——Enlarged opportunities of observing the progress of students in general witness's connexion as a teacher with St. Thomas's Hospital and King's College has afforded him, 2236–2239——Result of that experience that in anatomy and surgery the movement has been retrograde; cause thereof, 2240–2242.

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"one portal" and proceeding in different roads afterwards; witness's idea as to the preliminary examination sufficient for the general practitioner, and as to there being distinct examinations subsequently for those intending to practise as physicians, and those as surgeons, 2543–2575——Subjects the examination of the general practitioner would embrace; course of education he should pursue, 2547–2556——Subjects the examination of the general practitioner desiring to take a higher position and practise exclusively as a surgeon would comprehend; security the second examination would afford the public for having a better practitioner, 2565–2570——Impracticability of any system of education securing to the public practitioners absolutely competent in all respects, and more particularly as operators, 2570–2575.

Reference to Question 2294, in answer to which witness condemned the registration under the present Bill as being unfit to be the standard for England; qualification of that answer necessary, 2576–2583——Preference to be given to a classified registration; facility with which it might be carried out; absence of anything complex or invidious in such an arrangement, 2584–2591——Those holding four or five qualifications would be registered several times, 2588, 2589. 2599——Renewal of the objection before made that by the present Bill a person qualified only as a general practitioner would be legally qualified for holding the office of a surgeon, 2591–2598——In a registration in classes members of the College of Surgeons practising as general practitioners would appear twice, as surgeons and as licentiates of the Apothecaries' Company, 2599——In the discussions relative to the present Bill the council expressed no desire that any of its members should be examined before this Committee, 2600, 2601.

"*Grinding.*" The system of "cramming" one result of the present examination being carried to too great an extent, *Seymour* 1323——Extensive prevalence of the system of "cramming" for examinations; its causes and effects; it extends to the examinations before both the College of Surgeons and Apothecaries' Hall, *Sir B. Brodie* 1971–1974. 2142–2154——Difficulty of checking the system, *ib.* 2193. 2196——System of "grinding" necessarily induced by the extensive and various information required by the Apothecaries' Hall examination, *Green* 2250, 2251——Witness (an examiner of the College of Surgeons) by examination can detect "grinding" to a considerable extent; considers it his duty to check the system, *ib.* 2254–2256——None but those accustomed to teach can detect unsound knowledge from grinding, *ib.* 2257, 2258——Cessation of the necessity for cramming wherever a system of catechetical instruction by the teacher is carried out, *ib.* 2502, 2503——Tendency of the practical character of the examinations for surgeons to defeat cramming, *Sir B. Brodie* 2605–2608——Great way a division of the present examination into two parts would go in preventing the evil. *ib.*

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Harrison, Dr. His prosecution by the College of Physicians for practising without a licence, *Paris* 114–116.

Harrison, Mr. Testimony of Mr. Harrison, treasurer of Guy's Hospital, relative to the practice of "cramming," *Sir B. Brodie* 2149.

Harvey, Dr. Extensive and varied learning of Harvey, *Hawkins* 1075.

Hawkins, Francis, M. D. (Analysis of his Evidence.)—Registrar of the College of Physicians; has filled that situation between 17 and 18 years, 968, 969——Is aware of the several Bills for effecting medical reform brought into the House of Commons in the last two or three years, 970——Recollects Sir James Graham's Bill of 1844; manner in which that Bill was brought under the notice of the college; correspondence that thereupon took place between the Secretary of State and the college; period over which it extended prior and subsequent to the introduction of the Bill of May 1845; reference this had to an alteration of the charter; question that arose as to granting a charter of incorporation to general practitioners, 971–984. 986–990——Negotiation that has been carried on with the present Secretary of State (Sir George Grey), 985.

Evidence detailing the principles proposed to be carried out in the new charter, 991–1013——Alterations that were contemplated in the charter with respect to the elects and the president; the circumstances which led to the necessity of such alteration explained, 991–1006——Proposed charter of the Royal College of Physicians put in and read, 1006——Imperfect controlling power possessed by the college over its own members; power of expulsion similar to that given in the new charter of the College of Surgeons proposed to be given to the College of Physicians; approval thereof, 1007–1009——Other material alterations contemplated; and more particularly as respects the number of fellows, 1010——Arrangements for securing a uniform and a high standard of qualification; getting rid of the two distinct bodies of examiners in the college, as now constituted, 1011–1013.

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Hawkins, Francis, M. D. (Analysis of his Evidence)—*continued.*

Witness has directed his attention to the Bill now before the House; his view with respect to it generally agrees with the petition of the college against it; his experience as registrar leads him to object to the Bill in all the particulars set forth in that petition, 1014, 1015——Exertions made by the college, from its very foundation, to maintain a high standard of literary and scientific qualifications for physicians; if the Bill were passed into law, all these objects would be materially impaired, 1015——Reasons frequently influencing persons in seeking the rank of physician, 1015, 1016——Under the present Bill, a person having a legal qualification for any one of the three departments can obtain a certificate, by virtue of which he could practise as physician, 1016.

The college has no legal power to restrain individuals from practising, it has considerable moral influence; other causes coinciding, the Bill would destroy them, 1017–1021——Efficacy of the new charter taken in conjunction with the Bills of May and July 1845, as a restraint; the charter itself granted no new power of restraint, 1022–1024——Large part of the disorder now prevalent in the profession to be attributed to the number of licensing bodies; cure of this defect that would have been effected by Sir James Graham's Bill; the present Bill not only does not cure the defect, but increases the confusion, 1024——Clause in both the Bills of 1845, creating a Council of Health, with supreme control over the medical profession; approval thereof by the college and by witness, 1025——Preference to be given to that arrangement over the arrangement in the present Bill for leaving the whole power either to the Secretary of State or to Her Majesty in Council, 1026–1028.

Great consideration given by the college to the subject of the mode in which the Council of Health was to be constituted; conclusion arrived at that it would be advantageous to leave the responsibility of appointing the members solely to the Crown; it was understood that a proportion would be medical men; division of opinion as to the number of professional men that ought to have seats, 1028–1032——Injury to the profession the registration now proposed would effect; that enunciated in the Bill of 1845 highly approved of by the college; the latter was for registration in classes, 1033, 1034.

[Second Examination].—Produces letter, dated 23 February 1842, addressed by Sir James Graham to the president of the College of Physicians, relative to the measures to be taken for the surrender of the old and the grant of a new charter, 1035–1037——Nature of the correspondence that subsequently took place between the college and the Home Secretary, 1038–1040.

Witness attends the examinations before the censors, and also before the elects; relative difficulty of those examinations; increase gradually effected in the standard of that before the elects, 1041, 1042——Witness was present at the examination referred to in the answer to Question 202, 203 [of Evidence of Dr. Paris]; nature and character as to difficulty of that examination, 1043–1046——Meeting of the fellows convened, at which the draft of the charter agreed to by the college in 1842 was considered; full assent given thereto, 1047——The licentiates were not consulted, it not being usual, though measures are frequently taken by the college to ascertain their feelings upon particular subjects, 1048——Whether licentiates are to be considered "members of the college;" measures taken, upon complaint being made, to give them the privileges and name of members; power of the college to confer such privileges by its vote, 1049–1056——Privileges pertaining to the rank of extra licentiate; "letters of testimonial" granted to them; no licence under the common seal of the college, 1057, 1058——Testimonials required to be produced by extra licentiates, to entitle them to examination, 1059——Period at which the qualifications of licentiates and extra-licentiates were placed on the same basis, 1060–1066.

The interests of the profession, as well as those of the college, likely to be injured by the present Bill, 1067, 1068——The physicians belonging to the College of Physicians are the most highly educated order of physicians in the United Kingdom; grounds adduced in support of this assertion, 1069, 1070——Immense importance of members of the English universities being induced to enter the medical profession, and of maintaining the connexion between the College of Physicians and those universities, 1070——Sciences, an elementary knowledge of which, acquired at a university, may be considered the most necessary with respect to the practice of physicians, 1071–1078——The requirements of the poorer orders in society demand that persons should be admitted to practise with lower qualifications than are required of licentiates and extra licentiates of the College of Physicians; class referred to in the expression, "poorer orders," 1079, 1080. 1087. 1097.

Comparison instituted between the period of study gone through by the general practitioner and by the physician; the protracted period to which the examination of the latter is extended an important consideration; necessarily increased expenditure in the education of the physician, 1081–1090——Sessional examinations are not adopted at the College of Physicians, 1091——Severe character of the examination undergone; its

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general nature described; whether there is any branch in which candidates are examined, in which general practitioners need not to be examined, 1092–1097. 1141, 1142——The examination is carried further than affords the public an adequate protection in regard to the competency of the practitioner; objects proposed to be answered by this; high importance of physicians having the character of being a learned and scientific body, 1098, 1099. 1143–1145——The examinations are not conducted in public; are open to all the fellows of the college; reasons urged against making them public, 1100–1105.

Leading objections to be entertained to the Bill now before the House, the chief that it would throw all orders of the profession into one class, 1106, *et seq.*——Interference with the internal government of the College of Physicians; this also the case by the Bills of 1844 and 1845, approved of by the college, but not to the same extent, 1107–1110. 1152–1157——Clause 19 of the Bill of July 1845, enacting that all bye-laws should be approved by the Council of Health, read; no such power exists in the present Bill; the reasons influencing the college in assenting to the former provision are not operative in the case of the present Bill, as by the latter the college would be annihilated, 1111–1114.

Clauses of the Bill now before the House conferring, inferentially, the power to practise as physician when registered upon a lower qualification; terms of the Apothecaries' Act, 55 Geo. 3, in relation hereto; section 14 of that Act read, 1114–1127——Extent to which the practice of the apothecary and that of the physician assimilate at the present day; in what respects they practically differ, 1128–1132——Larger range of experience possessed by the surgeon and apothecary than by the pure physician or pure surgeon; frequency with which the general practitioner must be thrown upon his own resources, 1133–1136——In what the medical education of the general practitioner should consist; branches with which he need not be so familiar as the physician, 1137–1145.

Nothing short of a distinct registration, under the titles of the several grades, would remove objection to the present Bill, 1146–1151——Specific grounds for apprehending that the interests of the college would suffer from the passing of the Bill, 1152–1154. 1158, 1159——Objection to be entertained to the imposition of penalties in order to confine persons strictly to the class of practitioners to which they belong, 1160, 1161——Means proposed for maintaining the distinction between the classes of practitioners, 1162, 1163.

Copy of letter addressed by Secretary Sir James Graham to the registrar, dated 14 July 1845, relative to the memorial addressed to him by the college, bearing date 18 June 1845; 1164——Answer given by the college thereto; no further communication took place between the Secretary of State and the college in reference to the Bill of 1845; 1165, 1166——Nature of the objections entertained by the College of Physicians to the giving the new college of general practitioners the title first proposed; no other objection than that stated in the memorial was taken; the subject of its being advisable to establish the new college was never discussed, 1167–1174——Clause 32 of the Bill of May 1845 read, enacting that persons registered as general practitioners shall be entitled to fees for medical and surgical advice and attendance without other licence than such registry; unlimited power given thereby to the members of the new college to hold any medical or surgical office in public or parochial institutions; disapproval thereof by the College of Physicians; that part of their memorial relating thereto read, 1175–1179——Tenor of clause 26 (the corresponding clause) in the Bill of July 1845; provision contained in clause 32 of the former Bill omitted in clause 26 of the latter, 1180–1183.

The College of Physicians did not formally entertain the question as to the title of the proposed new college as amended, 1184——Doubtful advantage of establishing a new medical college, 1185——An improved system of registration certainly desirable; plan proposed; to be carried out by the existing corporate bodies, 1186–1188——To whom the chief supervision should be committed, 1189–1191, 1193——The list should include those licensed to practise by the two English universities, 1192——Some members of the College of Physicians are also members of the College of Surgeons; regulation formerly existing, requiring every such person before admission to be disfranchised from the College of Surgeons, or Society of Apothecaries, if a member of either of those bodies; approval of that regulation; reasons which led to its abrogation, 1194, 1195——Cases of persons being members of both colleges are exceptions, not the rule; undesirableness of such amalgamation generally as tending to destroy the distinctions now established, 1196–1201.

Hawkins, Dr. Form of registration proposed by Dr. Hawkins, and referred to in his evidence in Question 1187, 1188, *App. p.* 217, 218——Approval of this form, *Seymour* 1267; *Sir B. Brodie* 2088.

Herodotus. The Egyptians stated by him to have had a different medical man for almost every limb in every part of the body, *Holland* 1520.

Holland,

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Holland, Henry, M. D. (Analysis of his Evidence.)—Member of the College of Physicians; has been a member since 1816, and fellow since 1828; 1451–1453——Was not a member of either English university; pursued his studies in London and Edinburgh, 1454. 1455——Commenced practice at the age of 27; conceives any alteration of the law acting as a discouragement to prolonged preliminary studies to be injurious, 1456–1459——Has perused the Bill now before Parliament; considers it to have a tendency to introduce a single faculty; this world be pernicious, 1460–1462. 1481, 1482. 1517——Effect of the introduction of such single faculty to lower the standard of physicians and surgeons as contradistinguished from the general practitioners; injury thereby done to the public, 1463, 1464. 1517–1526. 1542–1547.

Benefit resulting from the present subdivisions; greater skill in both physicians and surgeons to which it conduces; the facility of communication with the metropolis extends the benefit of consultation with that superior skill to the most distant parts of the country, 1465–1467——Tendency of the high character and status of the metropolitan physicians and surgeons of eminence to raise the profession in the public estimation throughout the country, 1468–1471——Importance of maintaining the existing connexion between the London physicians and the English universities, 1472, 1473——Effect of the introduction of a single faculty to discourage literary studies at the universities as distinct from medical studies, and to lower the whole profession to an inferior standard, 1474–1476.

No objection is to be entertained to the registration of medical men; it should be more effective and authentic than at present, 1477, 1478——In any system a classification, combined with an alphabetical list setting forth the different grades, should be adopted, 1479, 1480——Advantages and disadvantages attending the present mode of payment; doubtful policy of giving a legal right to recover payment, 1483——No objection exists to opening the practice of England (including the metropolis and the seven miles circuit) to medical men from all parts of the United Kingdom, precautions being taken to secure equality of attainments, 1484–1486——Difficulty of giving that security to the public without a central controlling power, 1487.

Approval of the project of instituting a Council of Health; its advantages to the profession, 1488, 1489——And for carrying out improvements relative to sanitary matters affecting the public at large, 1490——Whether this council should be entrusted with the supervision of medical education in addition to that of public sanitary measures, considered; connexion herewith of the question as to who should be members of the council, and by whom they should be appointed or elected, 1491–1495. 1499–1509——This scheme for a Council of Health contrasted with that of the present Bill, relating to the Secretary of State and the Queen in Council, 1496–1498——With the establishment of a single faculty, the College of Physicians would virtually cease to exist, 1510——With reference to the college in its present state, this loss would be less felt than it might be were it improved in its efficiency by an amended charter and new regulations, 1511. 1516.

Applications that have been made by the college to several successive Secretaries of State for an amendment of the charter, 1512——Leading points for which the draft of the amended charter agreed to by Sir James Graham and the college provided; approval thereof, especially of those clauses providing for the abolition of the elects, and the removal of unworthy members, 1513–1516——Tendency of the wants of mankind to divide medical practitioners into different classes, even when there are no laws establishing them, 1518–1525——High importance of preliminary and academical education with reference to the subsequent science and practice of the medical man, 1527. 1563, 1564——Whether the rank occupied by physicians may be considered to be higher than that filled by surgeons of the first class; connexion of the former with the universities determining the difference in their favour, 1528–1530.

Belief that on the whole physical science during the last half century owes more to physicians than to surgeons, 1531, 1532——Degree to which the university education of English physicians operates upon the eminent surgeons of the metropolis, 1533, 1534——Probability before long of the higher description of surgeons going habitually to the universities for their education, 1535——Highly meritorious character of the general practitioners of England; no class who in proportion to their education and attainments are so ill remunerated, 1536——Strong inducements operating upon the student to press early into practice; different grades are necessary to counteract that inducement, 1536–1538——Analogy between the bar and the clergy and physicians, as respects receiving a university education, 1539–1541. 1544–1547.

State of the medical profession in France in regard to the blending of the physician and surgeon in one person, 1548–1552——Also in the United States; high character of the American medical school; discoveries which we owe to it; valuable works written by physicians of the United States, 1552–1562——Advantage, with limitations, of a young man following a complete range of academical study before determining upon the line he shall hereafter pursue, 1563, 1564——Importance of foreign travel at the conclusion of medical studies; not essential; the introduction of a single faculty would lead to its

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Holland, Henry, M. D. (Analysis of his Evidence)—*continued.*

being given up, 1565–1567——Large number of students from the United States in the medical schools of London and Paris; the fact of their not having any legal distinctions in the medical profession does not prevent them from coming over, 1569.

Homœopathy. None of the members of the College of Physicians practise homœopathy; their general refusal to adopt that system of quackery, notwithstanding the advantages that would result to them from so doing, *Seymour* 1305. 1363——Homœopathy considered by witness to be quackery, *ib.* 1375. 1380.

Honours and Rewards. Want of funds would prevent the medical colleges from creating inducements to individuals to seek higher attainments in the shape of rewards and honorary titles, *Burrows* 812——*See* also *Fellowships,* 2.

Hospitals. Size of hospitals recognised by the College of Surgeons, *Brodie* 2614.

See also *Public and Charitable Institutions.*

Hunter, John. His early education neglected, *Hawkins* 1076.

I.

Inspection and Supervision of Examinations. See *Secretary of State.*

Ireland. The course of medical education in Ireland different from that in England; it should be as equal as possible, *Lawrence* 1891.

See also *Equality of Education,* I. *Equality of Privilege,* I. *Universities,* 1.

J.

Jenner, Dr. His acquaintance with general literature; a general practitioner in the early part of his life, *Hawkins* 1077, 1078.

Juries. Members of the College of Surgeons exempted from serving on juries, *Lawrence* 1721——*See* also *Penalties.*

K.

Kidd, Dr. Number of licensing bodies enumerated by Dr. Kidd; to which he attributed the inequality in the education of medical men, *Hawkins* 1024.

L.

Languages. See *Classical Languages.*

Lawrence, William, F. R. S. (Analysis of his Evidence.)—President of the College of Surgeons; has been a member of that college for about forty years, 1570, 1571——Has seen the Bill of the present session; has formed an unfavourable opinion of it, 1572, 1573——Petition presented by the president and vice-presidents of the college against it; how far to be considered to represent the sentiments of the entire college, 1574, 1575——No objection to a registration of medical practitioners, setting forth the qualifications under which they practise, 1576, 1577——False conclusions to which the system of registration proposed by the present Bill would lead; its effect to give a legal qualification to practise in any branch of the profession and to hold any description of professional situation to a person with a licence from the Apothecaries' Company only; danger to the public safety, and public policy thereof, 1577–1583. 1800–1803. 1915–1918.

The certificate proposed to be granted, and fee annually exacted, are wholly unnecessary to persons now in possession of the diploma of the College of Surgeons, 1584——Deteriorating effect of the introduction of a single faculty upon the profession of surgeon; the character of the individual would be lost, 1585, 1586——Respects in which the new charter granted to the college encourages the prolongation of the period of study previous to the commencement of practice; benefits resulting therefrom, 1587, 1588——Admirable working of the new charter, 1589, 1590. 1831——Number constituting the council under the old and new charters; mode of election under each; period of service; number of fellows, 1591–1601. 1754. 1756——Supervision exercised over the bye-laws under the respective charters, 1602–1606. 1654–1657. 1949, 1950. ——Election of examiners formerly and at present, 1607–1612.

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Privileges possessed by members of the college, 1613-1616. 1721——Means by which the fellowship is obtained under the present charter; evidence of classical attainments required; that of mathematical knowledge will be required after 1850; 1617-1620——Stringent nature of the examination undergone for the fellowship; large degree of knowledge secured by the present arrangement, 1621-1623——Anticipated operation of the new charter in ensuring emulation in the profession and higher attainments, thereby advancing medical science, 1624, 1625——Strong opinion as to the probably injurious effect of the Bill of the present Session (1847) upon the College of Surgeons and therefore upon the public, 1626, 1627——Witness speaks both for himself and as the organ of the college; unanimity of the council against it, 1627-1629. 1762-1769——Impossibility of the Secretary of State competently fulfilling the duties assigned to him by the Bill; irresponsible power he would exercise, 1630-1633. 1639. 1658-1661.

Policy of establishing a Council of Health; unnecessary as far as regards the regulation of professional education; but would if rightly constituted command public confidence and not be disapproved of by the profession, 1634-1636. 1660-1662. 1887-1890 —— Great consideration necessary to the subject of the admission to equal privileges of practice of all members of the profession throughout the United Kingdom, 1637—— Doubts as to the possibility of insuring equality of attainments, 1638. 1882. 1891—— Caution to be exercised in respect to admitting Scotch practitioners generally, without any other test than the present Bill provides, to metropolitan practice, 1640-1643—— Belief that mankind are not judges of professional skill; opinion therefore against their being left to their own judgment in the selection of medical advisers, 1644, 1645. 1828, 1829. 1851-1862. 1907——Difference between the medical and legal professions in that respect, 1645. 1863, 1864.

Want of force in the argument in favour of a single faculty, that the poorest subject is entitled to the protection of the State as well as the highest and richest, 1646—— Stricter character of the examination of a fellow of the Surgeons' College than that of the Society of Apothecaries for a general practitioner, 1647——Effect of that higher examination to stimulate the exertions of the great body of the profession usefully to the public, 1648, 1649——Impossibility of producing equality (and that at a higher standard) by the establishment of a single faculty; little encouragement in the medical profession to induce men of superior talent to enter it; comparison with the law and the church, 1650-1652. 1694, 1695. 1890——Concluding paragraph of the petition of the college expressing the opinion that the proposed Bill would injure if not destroy the College of Surgeons, and therefore be deeply injurious to the public; entire concurrence therein, 1653.

Examination into the advantages accruing from the retention of the system of local jurisdictions within which persons may not practise without becoming members of the corporation or examining body thereof; particularly with reference to members of the Scotch and English schools practising mutually in their respective divisions of the kingdom, 1663-1681. 1715-1720. 1725-1731——Apprenticeship of five years required by the Apothecaries' Act; means by which the provision is rendered nugatory; objection to the period of five years; general approval of the system of apprenticeship, 1672-1675. 1678, 1679. 1682-1685. 1914.

Objection to allowing a person in possession of a degree from the University of St. Andrew's (without a medical school or hospital) to practise anywhere; the law should restrain this; under the present Bill a person with such a degree would have a legal qualification, 1686-1691——Great and direct benefits of which the higher education of the physician of a large county infirmary is productive, irrespective of its collateral benefit upon the village practitioner who may have occasion to refer to him; communication of such benefits to the poorer classes, in common with the rest of the community, 1692, 1693——A just opinion of the medical schools of Scotland, generally, not to be formed from the University of St. Andrew's, 1696——Apprenticeship should precede, not follow, the professional education; making it compulsory, and for the present term of five years, tends to curtail the general preliminary education, 1697-1699.

Improvement in the preliminary education of country practitioners desirable; considerable increase in the amount of knowledge of the profession generally of late years, 1700-1702—— Efficiency of the existing mode of registration; annual lists published by the Colleges of Surgeons and Physicians and the Society of Apothecaries of the persons examined by them, 1703-1705——A more extended system of registration is necessary and desirable to obviate the difficulties under which Boards of Guardians and other public bodies labour in ascertaining the qualifications of candidates licensed by other than the authorities in England, 1706-1709——Mode in which such registration might be carried out; whether efficiency could be secured without superintendence over the examining bodies, 1710-1714. 1918*-1923.

Grounds for the opinion that the regulation of the medical profession is better left in the hands of the present governing bodies, unless a reorganization of the profession

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be undertaken, 1711–1713. 1746–1748——Advantage of a constant interchange of men educated in different countries; possibility of combining this advantage with perfect security for equal education in each branch of the United Kingdom, 1716–1720——Evil which would result from giving all members of the college a power in regard to its management and control; hands into which the government would practically fall, 1722–1724——High state of the Edinburgh School of Medicine, 1732——Mixed faculty of physicians and surgeons existing at Glasgow, 1733——Comparative number of pure physicians and surgeons in Scotland and in London, 1734–1738. 1940.

To what the increase in the standard of medical education may be traced; period within which this has taken place, 1739, 1740——Difficulty of foretelling the result of legislative interference with the law requiring the examination of any college in any of the three countries, 1741–1743——Difference between the examination for members and that for fellows explained; the examination of the former is sufficiently stringent, 1744, 1745. 1749–1753——The number of fellows under the new charter is unlimited; slight practical limitations to the attainment of the honour; growing desire on the part of young men to secure it, 1754–1759——Opinion in favour of continuing the power of recovering fees, 1760, 1761——The law as it has hitherto existed has not operated to depreciate the profession of surgeon, 1761.

The petition presented by the college embraces the principal points of objection to the Bill now before The House; unanimous opposition of the council to it, 1762–1769——Explanation of former evidence as to the system of registration proposed by the present Bill being delusive and calculated to deceive the public; respects in which this opinion is borne out, 1770–1786——Specific objections to the list containing the residences (the latter half of Schedule C.), 1786–1792——Conveniences in a good mode of registration; the qualified practitioners are all registered under the present system; general objections thereto answered, 1793–1799.

Further general objections to the registration part of the Bill as being calculated to do away with the existing distinctions of physicians, surgeons, and general practitioners, and to confound them all in one common mass "qualified to practise medicine," 1800–1821——Inexpediency of all medical men undergoing the same kind of examination; the same qualifications are not required in all the departments of the profession; the general practitioners should receive an efficient medical as well as surgical education, 1804–1808——Doubtful possibility or expediency of confining physicians or surgeons to the strict bounds of their respective professions; absence of any reason for interference with existing arrangements which are found to answer their purpose, and are in accordance with the habits of the public, 1805. 1821–1825. 1934–1939——Departments of medical knowledge in which physicians and surgeons respectively ought and ought not to be educated, 1826, 1827——Priority of rank to be given to physicians over surgeons, 1828–1830.

Circumstances connected with the new charter of the College of Surgeons being obtained; by whom the initiative in the matter was taken; course pursued by the Secretary of State, 1832–1844——Power given in the charter to nominate within a year a certain number of fellows; compliance therewith by the college; clause of the charter read, 1845–1847——Rule observed in electing the fellows in the first instance, 1848–1864——The power of nomination under the new charter could not be repeated after the expiration of twelve months; it ceased then; henceforth admission must be obtained by test of merit, 1865–1870——Great increase in the efficiency of the college within the last twenty years, 1871——Doubts whether any one surgeon of great eminence is left out of the list of fellows; none were excluded from any private feeling; circumstances connected with the exclusion of one individual on personal grounds, 1872–1881.

The Council of the College not having been called upon, has not considered any plan for making the qualification equal throughout the United Kingdom, 1883–1886——Reliance to be placed on the college providing practitioners competent to discharge the duty entrusted to them, 1892, 1893——Whether any really unqualified men obtain the diploma; how far the diploma is a guarantee of competency; recent instance of a pastry-cook obtaining a diploma by means of false certificates; actual particulars of this case; revocation of the diploma, 1894–1918. 1951–1954——Practice formerly for surgeons in the country not to take out the diploma of the college; circumstances that have arisen tending to induce such practitioners to apply for that qualification; steps taken by the council to meet their peculiar cases, 1900. 1903, 1904. 1910. 1913.

With proper regulations to insure equal education and examination it is not necessary that a person educated in Edinburgh or in Ireland should undergo further examination when entering upon practice in England, 1924, 1925——Whether this privilege should be accorded without payment of a fee; importance of the system of fees to the College of Surgeons as affording the means of sustaining and increasing the valuable museum and library, 1926–1933——Character of the College of Surgeons of Edinburgh, 1940–1943——No reason exists against surgeons practising midwifery; witness disapproves of that being a disqualification for the fellowship, 1944——Disclaimer by witness of being personally interested against the present Bill; objection to it is founded upon a view of the future injury it would do to the profession, 1945, 1946.

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2. *Amendments suggested.*
3. *Preference to be given to the Measure introduced by Sir James Graham, Sess.* 1845.

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2. *Penal and Moral Powers possessed by the College; the former inoperative; Causes thereof; whether desirable to enlarge them:*

Other powers besides that of examination possessed by the college over physicians practising within the London circle; moral power independent of the power of withdrawing the licence; exercise of that power in modern times, *Paris* 38–43——Decided opinion that the power exercised by the college has conduced to sustain the literary attainments of he profession, and their honourable and moral conduct, *ib.* 51, 52—And that its abrogation would destroy the profession, *ib.* 53, 54——Witness is not aware of any complaint of abuse of power by the college, *ib.* 55, 56——Statements against the college have found their way into petitions to Parliament, *ib.* 57——The functions, duties, and privileges of the College of Physicians consist rather in maintaining a high standard of medical practice than in imposing penalties, *ib.* 159, 160——It is not the fact that the college in effect excludes the members of colleges having a higher curriculum as well as those having a lower standard than itself, *ib.* 334–337——Witness is not aware of any college having a higher curriculum than the College of Physicians, *ib.* 336.

Mode in which the college enforces its penal powers; recent instances; no prosecutions within the last 10 or 15 years, *Burrows* 491–496. 498–500——Difficulty and expense attendant upon the legal enforcement of these penalties, *ib.* 497. 504 *et seq.*——Present practical condition of the college; conclusion arrived at that the college being so deficient in legal power, its great moral influence is to be ascribed to its high respectability and importance, *ib.* 504–511——Extreme difficulty of sustaining the proof of a person having practised medicine during a whole calendar month necessary in any prosecution instituted by the college, *ib.* 573, 574——Inadequate powers at present possessed by the College of Physicians; any Bill giving additional power to the college so that they might exercise a greater moral control over their members, would be beneficial to the public, *ib.* 712–716——Period since which the legal power of the College of Physicians to prosecute has practically fallen into abeyance; its power is at present reduced to its moral influence and authority, *Seymour* 1298, 1299——The penalties have not been enforced; instances to the contrary, and result; the moral power of the college far greater than the limited legal power, *ib.* 1328–1333.

3. *Evidence demonstrating that the Bill of the present Session* (1847) *would abrogate the Functions, and eventually the Existence of the College; Steps taken by the College in reference to it:*

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Belief that the existence of the college is essential to the welfare of the profession, *Paris* 72–74——Witness represents the general feeling of the college and of his profession in expressing an opinion against the Bill, *ib.* 108–111——Circumstances demonstrating that the penalties to which clause 9 relates being virtually abrogated, no evil would result from their legal abolition; abandonment of the first ground stated in the petition of the college against that clause; the moral influence of the college would remain, *ib.* 112–127——The power of prosecution is not exercised by the college, from a want of funds; so far its legal powers are virtually abrogated; the general moral influence of the college, in contradistinction to its legal powers, is very considerable; with this the Bill interferes, *ib.* 285–305——The Bill does not interfere with the internal administration of the college, *ib.* 306——The mischief the Bill will do to the college is indirect; facts proving that the order of physicians will cease to exist, *ib.* 307–311.

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4. *Evidence demonstrating that the Bill of the present Session, &c.*—continued.

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See also *Apothecaries' Shops. Associates. Ballot. Censors. Charters*, I. "*Consiliarii*," The. *Council of Health*, 3. *Elects. Examinations*, I. *Extra Licentiates. Fellowships*, 1. *General Practitioners*, Royal College of. *Homœopathy. Licentiates. Mesmerism. Misconduct. Penalties. Pharmacopœia. Physic and Surgery Bill. Physicians. President of the Royal College of Physicians. Universities*, 2. *Unlicensed Practitioners.*

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Poor, The. Excellent medical advice obtained by the poor in this country; testimony to the general good sense and knowledge of country practitioners, *Sir B. Brodie* 2118.

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Poor Law. The diploma of the College of Surgeons is required as a qualification for poor-law union surgeons, *Burrows* 768; *Lawrence* 1721——Many diplomas were granted out of the ordinary course, when the regulation of the Poor-law Commissioners relative to the appointment of union surgeons was first issued, *Lawrence* 1904.

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President of the Royal College of Physicians. By whom the president of the College of Physicians is elected; qualifications necessary for that office, *Paris* 175–179; *Hawkins* 999–1006——Improvement of which the constitution of the college is susceptible in regard to the mode of electing the president, *Ev. p.* 35——Dispensing power formerly supposed to be vested in the president in respect to granting licences to those unable to obtain them in the ordinary mode, *Seymour* 1314——Terms of the proposed charter of the College of Physicians relative to the election of the president, *Ev. p.* 84.

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Public, The. Belief that mankind are not judges of professional skill; opinion, therefore, against their being left to their own judgment in the selection of medical advisers, *Lawrence* 1644, 1645. 1828, 1829. 1851–1862. 1907——Difference between the medical and legal professions in this respect, *Lawrence* 1645. 1863, 1864.

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Public Appointments. Medical men are not eligible for many public appointments, unless members of the College of Surgeons, *Burrows* 768; *Lawrence* 1721.

Public and Charitable Institutions. Attempts made by persons not holding the authorities of the Colleges of Physicians and Surgeons, or Apothecaries' Society, to introduce themselves into public institutions, *Paris* 151——Nothing under the Bill of the present Session (1847) would prevent a person qualified as an apothecary only from being

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Reciprocity of Privilege. See *Equality of Privilege.*

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Registrar (College of Physicians). Terms of the proposed charter of the College of Physicians, relative to the election of the registrar, *Ev. p.* 86.

Registration of Medical Practitioners:

1. *Expediency of a System of Registration being adopted.*
2. *Objections to the Plan laid down in the Bill of the present Session* (1847).
3. *Provisions of the Bill of Session* 1845 ; *Approval thereof.*
4. *Suggestions for carrying out a general System of Registration considered in detail.*

1. *Expediency of a System of Registration being adopted:*

Desire of the profession for a registration; benefits of an annual and complete registration, *Paris* 87, 88; *Burrows* 449; *Hawkins* 1186 —— No objection is to be entertained to the registration of medical men; it should be more effective and authentic than at present, *Holland* 1477, 1478 —— No objection exists to a registration of medical practitioners, setting forth the qualifications under which they practise, *Lawrence* 1576, 1577 —— Efficiency of the existing mode of registration; annual lists published by the Colleges of Surgeons and Apothecaries, and the Society of Apothecaries, of the persons examined by them, *ib.* 1703–1705 —— A more extended system of registration is necessary and desirable, to obviate the difficulties under which boards of guardians and other public bodies labour in ascertaining the qualifications of candidates licensed by other than the authorities in England, *ib.* 1706–1709 —— Conveniences of a good mode of registration; the qualified practitioners are all registered under the present system; general objections thereto answered, *ib.* 1793–1799 —— Advantage of introducing a general system of registration of medical practitioners throughout England and Wales; it would be popular with the profession, and useful to the public, *Sir B. Brodie* 2031 —— A general measure for the registration of medical men for the whole country is not expedient, *ib.* 2090 —— Approval of registration properly framed, and under competent authority, *Green* 2293.

2. *Objections to the Plan laid down in the Bill of the Present Session* (1847):

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2. *Objections to the Plan laid down in the Bill of the present Session*—continued.

Specific grounds of objection to the scheme of registration proposed in the present Bill, *Burrows* 417-420. 446-454——Admission that the mode of registration proposed by the Bill would specify distinctly whether persons were qualified in whole or in part, *ib.* 924——General objections to the registration part of the Bill, as being calculated to do away with the existing distinctions of physicians, surgeons, and general practitioners, and to confound them all in one common mass, "qualified to practise medicine," *Lawrence* 1800-1821——No proper registration could be carried into effect under the Bill; anomalies that would be found in its operation; legal sanction it would give to quackery, *Sir B. Brodie* 2032, 2033——The registration under the present Bill is not such as ought to be the standard registration for England, *Green* 2294, 2295. 2576-2583.

3. *Provisions of the Bill of Session* 1845; *Approval thereof:*

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4. *Suggestions for carrying out a general system of Registration, considered in detail:*

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Plan proposed by Dr. Hawkins.—Nothing short of a distinct registration under the titles of the several grades would remove objection to the present Bill, *Hawkins* 1146-1151——Plan of registration proposed; to be carried out by the existing corporate bodies; specimen of a register put in [*vide App. p.* 217], *ib.* 1186-1188——To whom the chief supervision should be committed, *ib.* 1189-1191. 1193——The list should include those licensed to practise by the two English universities, *ib.* 1192——Form of registration proposed by Dr. Hawkins, *App.* 217, 218.

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Suggestions of other Witnesses.—Approval of a form of registration which would give the different classes of the profession in their respective grades, accompanied by an alphabetical list; Dr. Hawkins' form of register [*vide App. p.* 217] commended, *Seymour* 1266-1273——System of registration to be pursued with respect to graduates of the

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4. *Suggestions for carrying out a general system of Registration, &c.*—continued.

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Scotland. State of the law 30 years ago, as respects gentlemen practising in Glasgow and Edinburgh respectively, *Paris* 152-155——Great confusion of grades in Scotland, *ib.* 170-172——Slight preliminary education required by the universities of Scotland, preparatory to a degree in medicine, *Burrows* 623. 627, 628——Abilities and literary productions of several Scottish physicians, *ib.* 858-861——Great height of perfection to which the practical teaching of medicine belonging to a general practitioner is carried in Scotland; the preliminary education previous to commencing the study of medicine is defective, *Seymour* 1311——Twenty-one years is the age at which the degree of doctor is conferred in Scotland; but at this age they only act as general practitioners, *ib.* 1324——Number and titles of the licensing bodies in Scotland, *Holland* 1485——Authority to practise in Edinburgh does not qualify for practice in Glasgow, and *vice versâ*, *Lawrence* 1663——Particulars as to the degrees granted by certain of the Scotch corporations, *Sir B. Brodie* 2033. 2100-2106——The medical bodies in Scotland might license for the whole kingdom under the supervision of the Council of Health, *ib.* 2046——All the licensing bodies here and in Scotland require supervision, *ib.* 2047, 2048.

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Secretary of State (Home Department). Opinion that clause 23 of the Bill of the present Session (1847), does not provide the security now required for equality of attainments; grounds for this opinion; probable working and effect of the clause; impossibility of the Secretary of State fulfilling the duties there assigned to him, *Paris* 78-86. 98-102. 140——Impossibility of uniformity of qualification being attained by regulations issued alone by the Secretary of State, or of that Minister being able to afford the same protection to the public as is now given by the licensing medical bodies, *ib.* 98-102——The provision as to the visitor to be appointed by the Secretary of State to be present at the college examinations is offensive; danger of entrusting such a power to the Secretary of State, *ib.* 265-268.

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Seymour, Edward James, M. D. (Analysis of his Evidence.)—Member of the College of Physicians; has been a fellow 21 years, 1202, 1203——Graduated at Cambridge; took his doctor's degree there at the age of 28; came to London to commence practice at the age of between 26 and 27; 1204–1206——Opportunities of foreign travel and practice witness has enjoyed, 1207–1211——Has had his attention particularly drawn to the Bill now before Parliament, 1212——Strong opinion as to its probably injurious effect upon the scientific part of the profession, and therefore upon the public, 1213. 1241–1243. 1350–1354——General concurrence in the prayer of the petition presented against it by the College of Physicians, 1214, 1215——Its tendency to lead to the establishment of a single faculty, and to deteriorate the character of the medical profession; grounds for this opinion stated, 1216, 1217. 1384–1394——Probable result in the diminution of the number of physicians; great discouragement to that branch of the profession, 1218.

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Strong objection to clause 28; that clause read; its effect to legalise the illegal system (at present extensively prevailing) of chemists and druggists practising over the counter, 1280, 1281. 1437–1441——The medical education of that class a better remedy than penalties; they will act as medical men, 1282–1285——Subjects this medical education should embrace, 1286, 1287. 1442–1444——How to be enforced without penalties; assimilation of the law to that of France in this respect desirable; stringency of the French law, 1288–1297——Period since which the legal power of the College of Physicians to prosecute has practically fallen into abeyance; its power is at present reduced to its moral influence and authority, 1298, 1299——Allusion to the fact of a fellow of the college being the principal of a mesmeric hospital, 1300–1304——None of the members of the college practise homœopathy; their general refusal to adopt that system of quackery, notwithstanding the advantages that would result to them from so doing, 1305. 1363—— Tendency of mankind to favour quackery; illustrations given; necessarily large amount of quackery in those complaints which surgeons treat entirely, 1306–1310.

Great height of perfection to which the practical teaching of medicine, belonging to a general practitioner, is carried in Scotland; the preliminary education previous to commencing the study of medicine is defective, 1311——Equal power to confer degrees possessed by the university of St. Andrew's in common with the university of Edinburgh; the security for medical skill in the former cannot be put upon the same level with the latter, 1312, 1313——Difficulty of distinguishing those degrees, and also those obtained in Germany, 1313——Policy of devising a mode of granting degrees to well-educated persons qualified to become physicians, without compelling them to go through all the routine; dispensing power of that kind formerly supposed to be vested in the president of the College of Physicians, 1313–1315.

Extreme importance, with a view to securing equality of attainment, of vesting the superintendence of the standards of acquirement in a responsible authority known to the State, and provided by the law; mode in which this is to be attained and acted upon; limits within which it should be restricted, 1316–1323——Facility with which, to a great degree, the present examination is evaded; system of "cramming" prevailing, 1323—— Expediency of postponing the commencement of general practice, as a security, considered; witness's idea of the age beyond which it could not be postponed, is that of 22 years, 1324——No objection to the postponement of the practice of a physician or of pure surgeons, it being conducive to ultimate excellence in the profession, 1325. 1334——This should be attained (as at present in London) by direct enactment, and not left to the discretion of the parties themselves, 1326, 1327——Usage obtaining with respect to permitting young men under 26 to practise as physicians before examination, if known that they intend to come up; penalty to which subject, 1327–1329——The penalty has not been enforced; instances to the contrary, and result; the moral power of the college far greater than its limited legal power, 1328–1333.

No fees are charged for attendance on the medical institutions and lectures of Paris; they are paid by Government, 1335–1340——Impossibility of establishing a single faculty with equal qualifications, 1341——The three orders of practitioners should be maintained, 1344, 1345——Gradations of rank in France and Germany, 1345–1349—— Extent to which persons are now practising as physicians in London without legal qualifications; homœopathic and chrono-thermal physicians practising as such in the metropolis; no steps have been taken by the college with respect to them; being powerless on account of the difficulties attending prosecutions, 1355–1394——Such persons could not be met by legally licensed physicians in consultation; bye-law of the college to that effect, 1371. 1378, 1379.

Further evidence on the subject of the control proposed by the present Bill to be vested in the Secretary of State and the Queen in Council, and on the plan of a Council of Health projected by Sir James Graham's Bills; respective merits of each; security given

Report, 1847—*continued.*

Seymour, Edward James, M. D. (Analysis of his Evidence)—*continued.*

given by the latter for the introduction of a certain number of medical practitioners, 1395–1431——Increased severity of the examination for the extra licence of late years; mode of conducting it; comparison with that for the licence, 1432, 1433——With sufficient security for equality of education and qualification, no objection would exist to physicians and surgeons belonging to Irish and Scotch colleges practising in London without belonging to the institutions here, 1435, 1436——Further evidence as to clause 28, relating to chemists and druggists; necessity for a legal regulation and examination of chemists, 1437–1444. 1447–1450——The charge of the pharmacopœia is vested in the College of Physicians by their charter; date of publication of the last edition; the college the first body in the world that published a pharmacopœia, 1445. 1446.

SINGLE FACULTY:

1. *Consequences of the Abolition of the present Classification of Medical Practitioners, and the Introduction of a Single Faculty in its room, considered.*

2. *Evidence proving the Effect of the Bill of the present Session* (1847) *to be to establish such Single Faculty.*

1. *Consequences of the Abolition of the present Classification of Medical Practitioners, and the Introduction of a Single Faculty in its room, considered:*

Impolicy of introducing a single faculty as opposed to a subdivision of the profession, *Burrows* 411——Respects in which the interests of the public and of science would be damnified by the abolition of the present classification of the profession, and the establishment of a single faculty, *ib.* 464–467——The existing institutions are susceptible of improvement; reducing the profession to one faculty not an improvement, *ib.* 474, 475——Want of force in the argument in favour of a single faculty, that the poorest subject is entitled to the protection of the State as well as the highest and richest, *Lawrence* 1646——A system of registration tending to produce a single faculty would be a great misfortune to the profession and to the public, *Green* 2280, 2281.

The establishment of a single faculty would diminish the motives for postponing entering upon practice, and change the nature of the education of medical men; reasons for that opinion stated, *Burrows,* 402–406——Probable result in the diminution of the number of physicians; great discouragement to that branch of the profession, *Seymour* 1218——Impossibility of establishing a single faculty with equal qualifications, *ib.* 1341——Effect of the introduction of a single faculty to lower the standard of physicians and surgeons as contradistinguished from the general practitioners; injury thereby done to the public, *Holland* 1463, 1464. 1517–1526. 1542–1547——Effect of the introduction of a single faculty to discourage literary studies at the universities as distinct from medical studies, and to lower the whole profession to an inferior standard, *ib.* 1474–1476——Deteriorating effect of the introduction of a single faculty upon the profession of surgeon; the character of the individual would be lost, *Lawrence* 1585–1586.

2. *Evidence proving the Effect of the Bill of the present Session* (1847) *to be to establish such Single Faculty:*

Circumstances justifying the belief that by clauses 3, 10, and 31 of the Bill, medical practitioners would be reduced to one grade, *Paris* 237 *et seq.*

Probable operation of clauses 10 and 31, together with Schedule B, in reducing all medical practitioners to one class, thereby enabling an apothecary to practise as a surgeon or physician, and *vice versâ,* without examination as to his knowledge of the higher branches of medicine, *Burrows* 371*, 372. 378–382. 558. 591–597——Wording of clause 10; its bearing as regards the establishment of a single faculty, *ib.* 448————The profession would gradually, but not instantly on the passing of the proposed Bill, be reduced to one class, *ib.* 512——Right to practise in all branches of the profession conferred by clause 3 of the Bill; medicine, surgery, and pharmacy, after having undergone examination in only one branch; case supposed of a person having a licence as apothecary, purchasing a doctor's degree in Tottenham-court-road, and setting up as doctor, surgeon, chemist, and veterinary surgeon at the same time, *ib.* 591–597. 629–651.

Leading objections to be entertained to the Bill; the chief, that it would throw all orders of the profession into one class, *Hawkins* 1106 *et seq.*——Clauses 3, 10, and 31, taken in conjunction with Schedule B. of the Bill, confer inferentially the power to practise as physician, when registered upon a lower qualification; terms of the Apothecaries Act, 55 Geo. 3, in relation hereto; section 14 of that Act read, *ib.* 1114–1127——All distinctions in the profession would in process of time be destroyed by the present Bill, *ib.* 1128.

Tendency of the Bill to lead to the establishment of a single faculty, and to deteriorate the character of the medical profession; grounds for this opinion stated, *Seymour* 1216.

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UNIVERSITIES (Oxford and Cambridge)—*continued.*

3. *Considerations involved in regard to the Education of Surgeons:*

Very small number of pure surgeons that have received a university education; the inducements to go to the universities should be increased; the effect of the Bill (of Sess. 1847) would be to diminish them, *Burrows* 620-622——Few surgeons have been educated at the universities, *ib.* 936; *Sir B. Brodie* 2023——Probability before long of the higher description of surgeons going habitually to the universities for their education, *Holland* 1535——Expectation that by the year 1850 surgeons will be found to go to the university for their preliminary education; reducing the length of residence there to two years for the degree would facilitate it, *Lawrence* 1947, 1948.

Advantage of commencing attendance at the hospitals early in life; difficulty of combining that with a university education, *Sir B. Brodie* 2024, 2025——High importance of surgeons going to the English universities; a good education is desirable wherever it can be obtained, *ib.* 2091–2093——Advantage of the most eminent surgeons receiving their education at the universities; effect of preliminary mental improvement to facilitate after-studies, *Green* 2351–2353. 2514, 2515. 2531.

Absence of any essential difficulties in the way of surgeons receiving their preliminary education at the English universities, *Green* 2532——Arrangements necessary to be made with the universities to enable students to take the degree of bachelor of arts, consistently with the completion of their education as surgeons; communication already had by witness with several gentlemen at Oxford and Cambridge on the subject, *ib.* 2532–2542.——*See* also *Bar*, The. *Clergy.*

Unlicensed Practitioners. Great number of physicians throughout England and Wales practising without a licence from the college or having graduated at the two universities, *Paris* 35–37——Public opinion has checked the practice of non-licensed physicians within the London circle, but not in the country, *ib.* 143–145——Undesirableness of further relaxing the existing restrictions on the practice of non-licensed physicians, *ib.* 146.

Beyond the seven-miles circle of London persons are practising as physicians without a qualification; want of power in the college to take notice of them, *Burrows* 501, 502. 504 *et seq.*—— The college has no legal power to restrain individuals from practising; it has considerable moral influence, other causes coinciding, *Burrows* 571, 572; *Hawkins* 1017–1021; *Seymour* 1371. 1378, 1379—— Extent to which persons are now practising as physicians without legal qualifications; homœopathic and chrono-thermal physicians practising as such in the metropolis; no steps have been taken by the college with respect to them; being powerless on account of the difficulties attending prosecutions, *Seymour* 1355–1394.

See also *France.* *Penalties.* *Physicians*, Royal College of, 2. *Quackery.* *Surgeons.* *Surgeons*, Royal College of, 1.

V.

Vice-Presidents (College of Physicians). Terms of the proposed charter of the College of Physicians as to the appointment of vice-presidents, *Ev. p.* 85.

COLLEGE OF PHYSICIANS