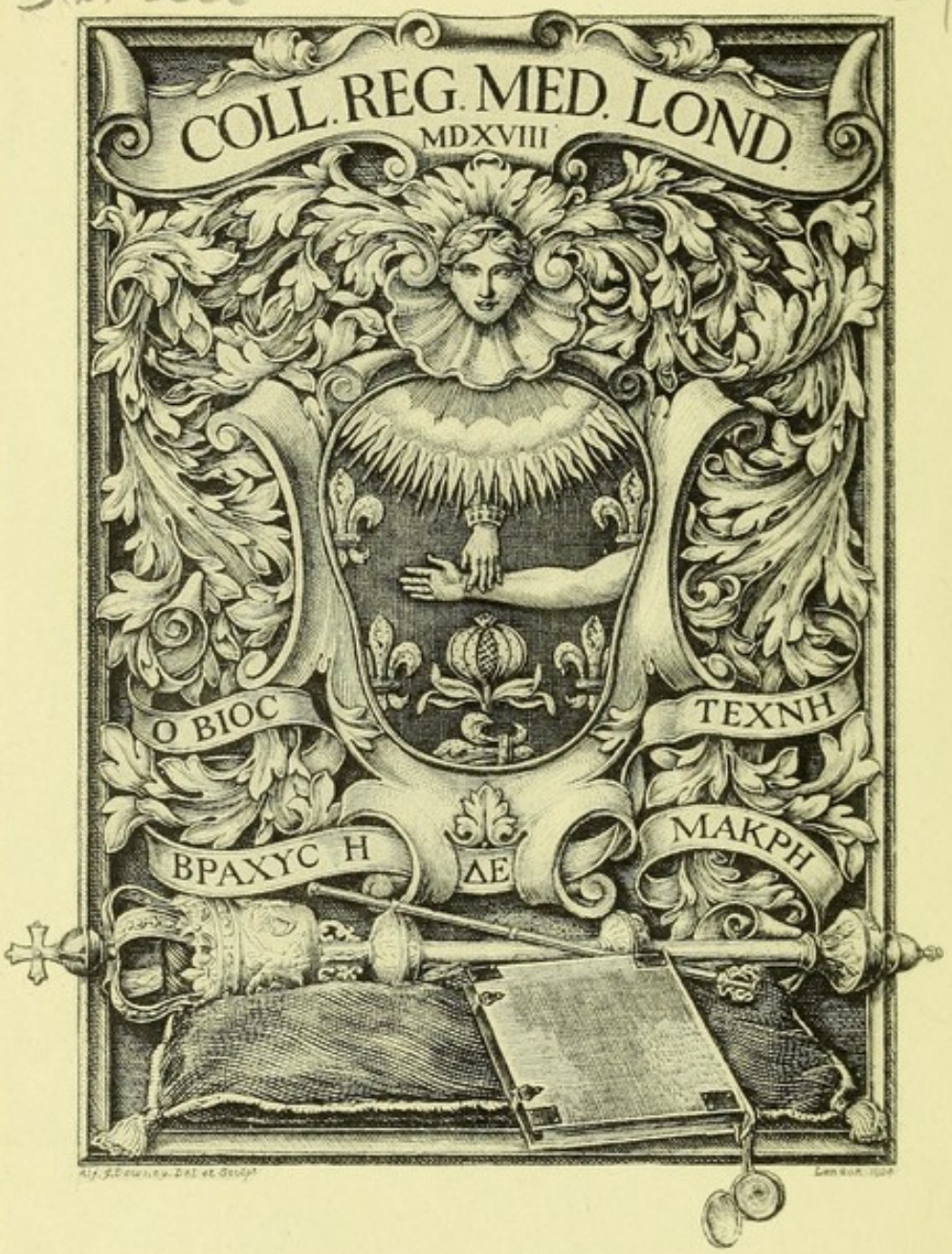
The annual address delivered to the Royal College of Physicians [1911-5].



THE ANNUAL ADDRESS

DELIVERED TO THE

ROYAL COLLEGE OF PHYSICIANS

On APRIL 10th, 1911

BY

THE PRESIDENT

SIR THOMAS BARLOW, BT., K.C.V.O., M.D., F.R.S.

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PRESIDENTIAL ADDRESS.

AT the close of my term of office I beg to report to you the salient facts of the history of the College during the past twelve months.

There are now upon the College Roll 346 Fellows, 490 Members, 2 Extra Licentiates, and 11,706 Licentiates.

During the year 1910, 5 Fellows, 7 Members and 86 Licentiates have died; 12 Members were elected to be Fellows; 20 Licentiates were elected to be Members; 2 Licentiates were deprived of their licences, and 1 Licentiate who had been deprived of his licence had it restored to him.

With respect to royal honours and distinctions, I have to record that Sir B. W. Foster was created a Baron under the title of Lord Ilkeston, that Dr. Francis Champneys was created a Baronet, and that Dr. David Ferrier, Dr. H. Bryan Donkin, Dr. James Kingston Fowler, and Dr. Robert Simon were knighted. Of these latter Dr. James Kingston Fowler was made a Knight Commander of the Victorian Order. Dr. George Ogilvie has recently received permission to accept and wear the insignia of a Knight of the Royal Order of our Lady of the Conceiçao, de Villa Viçosa conferred upon him by the King of Portugal.

In regard to Court appointments, Sir R. Douglas Powell, Sir James Reid, and Sir Francis Laking have been appointed Physicians in Ordinary to the King. Your President, Sir William Allchin, and Dr. Bertrand Dawson have been appointed Physicians Extraordinary to the King. Dr. Finlay has been appointed Honorary Physician in

Ordinary in Scotland to His Majesty, and Sir Robert Burnet Physician to the King's household.

The Charles Murchison Scholarship in Medicine was awarded to William Whitman Carlton Topley, L.R.C.P., of St. Thomas's Hospital; the Gilbert Blane Medals were awarded to Fleet-Surgeon George Trevor Collingwood, M.V.O., and Fleet-Surgeon Arthur Reginald Bankart, M.V.O.

The Harveian oration was delivered on St. Luke's Day by Sir Bryan Donkin, who chose for his chief theme "Certain Aspects of Heredity." Sir Bryan Donkin gave an eloquent, luminous, and sane exposition on this subject considered especially from the medical side.

The College has been favoured during the past year with a remarkable series of lectures which I will not separately characterize, but I can truthfully state that every one has given abundant material for reflection, and that valuable results of independent investigations in different departments of medicine have been communicated to this College. It has often been affirmed of late that the age of lectures was past. No candid person who attended the interesting series given to us during the past year could, for one moment, maintain such a proposition.

The Oliver Sharpey Lectures for 1910 were given by Dr. Mott, on "The Cerebro-spinal Fluid."

The Croonian Lectures were given by Dr. Andrewes, on "The Behaviour of the Leucocytes in Infection and Immunity."

The Bradshaw Lecture was given by Dr. Pitt, on "Bronchial Obstruction."

The Fitzpatrick Lectures were given by Sir Clifford Allbutt, on "Greek Medicine in Rome."

The Horace Dobell Lecture was given by Dr. William Bulloch, on "The Problems of Pulmonary Tuberculosis considered from the Standpoint of Infection."

The Milroy Lectures were given by Dr. Boycott, on "Ankylostoma Infection."

The Goulstonian Lectures were given by Dr. Hertz, on "The Sensibility of the Alimentary Canal in Health and Disease."

The Lumleian Lectures were given by Dr. Mitchell Bruce, on "A Clinical Study of Cardio-vascular Degeneration."

The Oliver Sharpey lectures for 1911 were given by Dr. James Mackenzie, on "Heart Failure."

Gifts to the College.—Numerous books have been presented to the Library. We specially acknowledge some valuable manuscripts and books left to us by the will of Dr. Payne. A portrait of Dr. Payne in crayon, by Mr. Sargent, has been presented to the College by Fellows of the Library Committee. The Staff of Guy's Hospital have presented a portrait in oils of Sir Samuel Wilks, by Mr. George Sephton, copied from one that was painted about the time that he was President of this College. Sir James Sawyer has presented a coloured shield representing the arms of Harvey and empaling the arms of the College.

COLLEGE APPOINTMENTS.

On the resignation by Dr. Payne of the post of Harveian Librarian, Dr. Norman Moore was unanimously elected to succeed him, and Dr. Payne was also unanimously elected Emeritus Harveian Librarian.

Sir William Allchin was elected on May 26th, 1910, representative of this College, on the Committee of Management of the Chelsea Physic Garden, under the new constitution of this body, which provides that both the College and the Society of Apothecaries shall be represented at the same time instead of being represented alternately. It is right to state that this improvement in the scheme of representation was largely due to Sir William Allchin's exertions.

Dr. Tirard was nominated on January 26th to represent this College upon a Committee constituted by the Board of Trade to revise the scale of medicines and medical stores issued to merchant ships.

Dr. Lewis Jones represented this College at the Third International Congress of Physiotherapy, held in Paris, April, 1910.

Dr. Amand Routh represented this College at the International Congress of Obstetrics and Gynæcology held at St. Petersburg in September, 1910.

In consequence of the death of his late Majesty King Edward VII., the College Meeting called for May 12th was deferred till May 26th. After a brief commemorative address had been given on the services rendered by the late King to the science and art of medicine, the College resolved that an address should be submitted to His Majesty King George V., expressing profound sorrow at the loss sustained by His Majesty and the Royal family, and at the same time tendering the loyalty and devotion of the College. The King was graciously pleased to receive this address at St. James's Palace from a deputation appointed by the College, and a gracious reply was returned.

An address of condolence was also transmitted to Queen Alexandra through the Home Office, and a gracious reply was received by the College.

CAIUS CELEBRATION.

On October 6th, 1910, at the invitation of the Master and Fellows of Gonville and Caius College, the President, with the College Officers and many of the Fellows, attended the celebration of the four hundredth anniversary of the birth of John Caius. There was a service in the College Chapel and a dinner in the Hall, at which many distinguished guests were present and interesting speeches

were made. Dr. Venn, the Vice-President, presented each guest with a copy of his life of Caius.

At the Harveian dinner, on October 18th, the Master and several of the Fellows of Gonville and Caius College were the guests of this College.

As a permanent memorial of these mutual expressions of goodwill, the College has presented to the Master and Fellows of Gonville and Caius College, a copy of the portrait of Glisson, the original of which hangs in our reading-room.

The Harveian Librarian and Sir W. Allchin, at my request, conveyed this picture to Gonville and Caius College, and have reported to us the grateful thanks of the Master and Fellows.

In the edition of Caius' works, which is to be brought out by the two Colleges jointly, will appear the first book of the annals of our College, written by John Caius. The original of these annals in Caius' own handwriting is in our possession.

FINANCE.

Conjoint Finance for 1910, and building of new Hall.

Receipts show a decrease, as compared with 1909, of £1,659 11s. 8d., mainly due to postponed diploma fees from, and rejections of, university candidates; but due also, in less measure, to a reduction in number of university candidates.

The number of candidates entering for the conjoint examinations is fairly well maintained.

In *Expenditure* there is a decrease, as compared with 1909, of £2,225 16s. in spite of an extra expenditure of £186 13s. 7d., in connection with the site of the new Examination Hall.

The amount divisible between the two Colleges, therefore, shows an increase (as compared with 1909) of £566 4s. 4d.

A tender for the erection of the new Examination Hall, from Messrs. Holland and Hanken, for the sum of £27,644, was accepted by the College on October 27th, on the recommendation of the Special Building Committee. The Cancer Research Fund having offered to pay a sum which will cover the cost of the extra accommodation to be provided for them, the net cost of the building will be reduced, approximately, to the sum originally authorized by the College, viz., £23,000.

The site of the new Examination Hall, on the west side of Queen Square, has been cleared; and building operations are progressing under the supervision of the architect, Mr. Prentice.

As frequent payments to the builders may now be expected, the College gave to the Treasurer, on January 26th, a general permission to transfer stocks standing in the Examination Hall account, for the purposes of such payments, and permission to the President to seal such transfers, as such business cannot always wait till the College meets.

The audited accounts of the College (as submitted upon October 27th) show a balance on September 29th, 1910, of £1,459 19s. 10d.

In the quarterly reports of the Finance Committee a few points may be mentioned.

In July, a donation of 15 guineas to the funds of the church of St. Martin's-in-the-Fields was made.

In October, an increase of £20 each was made in the salaries of the bedell (Mr. Fleming) and the assistant librarian (Mr. Barlow).

In January, a subscription of 10 guineas was made to the King Edward Memorial Fund; an expenditure of £32 10s. was authorized at Ashlyne's farm; and the Treasurer mentioned the probability that the house belonging to the College in Knightrider Street may be purchased by the City in connection with the scheme for a new bridge over the Thames.

PROPOSED CHARTER OF THE BRITISH MEDICAL ASSOCIATION.

The College, and other bodies, lodged petitions against this charter: and a letter from the Clerk of the Privy Council, dated June 1st, was read to the College on July 28th, announcing that the Privy Council did not recommend His Majesty to grant the charter.

CENSORS' BOARD: ALTERATIONS IN THE BYELAWS RELATING TO THE FELLOWSHIP.

On April 28th, 1910, Dr. Hale White proposed that a committee be appointed to consider what, if any, alterations should be made in the regulations for admission to the *Membership*.

Inasmuch as the proposed alterations concerned the functions of the Censors as the examiners for the Membership, it was resolved to refer the question to the Censors' Board rather than to a special committee.

The question was considered by the President and Censors at six meetings of the Censors' Board, at which meetings they also heard the opinions of several Fellows. Their report was circulated to the Fellows generally, and received by the College on July 28th, and discussed and adopted on October 27th. The alterations in the byelaws which were necessary to give effect to the report were passed for the first time on December 1st, and for the second time on January 26th.

The effect of these alterations in the byelaws and regulations is as follows.

(*a*) No change is made in the Membership examination, nor in the other conditions of admission to the Membership.

(*b*) The College takes power to elect to the Fellow-

ship registered medical practitioners who are not Members of the College, who have distinguished themselves in any branch of the science or practice of medicine, and who have been nominated by the Council as specially eligible.

(*c*) Not more than three such persons are to be elected in any one year.

(*d*) The mode of their nomination and election is the same as in the case of Members ; but the recommendation of such persons for nomination by the Council is to be made only by Members of Council, and not by the Fellows at large.

(*e*) Their duties, privileges, and the fees to be paid by them will be the same as for other Fellows. On the College List they will be placed in alphabetical order, *after* those who have been elected in the same year from the ranks of the Members : with the words "Elected under Byelaw XL *b*" placed after each of their names.

I sincerely trust that this change in our constitution, which has been made with great deliberation and jealously invested with many safeguards, may prove very advantageous to our College, especially in the direction of strengthening our Fellowship, as opportunity serves, with men of distinction, whom it is most desirable, in the interests of medical learning and of the public weal to include within our corporation.

UNIVERSITY OF LONDON QUESTION.

Just before the conclusion of the last presidential year, the report of the committee of delegates of the two Colleges, appointed to consider this question, was received. The report was not adopted, but was referred for consideration to a large committee of this College.

Six meetings of this committee were held, and their

report was presented to the College on December 1st last, but, owing to press of business, was not considered till January 28th. The committee held it to be inadvisable to proceed further with the scheme of conjoint examinations with the University of London (which had been the principal recommendation in the first report). Further clauses of the report set forth :—

(1) The disadvantages under which the London medical student labours in respect of obtaining an M.D. degree.

(2) The recommendation that the medical degrees of the London University should be given only to those students who have received their clinical education in London, and that the direction of the teaching and examinations for such degrees should be in the hands of the recognized teachers of the University.

A memorandum embodying the last two clauses of the report was sent to the commissioners on February 18th, with the intimation that the College would send witnesses in support of them should the commissioners so desire.

This very difficult and important subject ought, I think, to still engage the anxious consideration of every Fellow of this College. I trust that all who are actively engaged in the Medical Schools of London will throw the weight of their influence in favour of inducing men who are about to enter the London Medical Schools, and who are not already graduates of other Universities, to pass the matriculation examination of the London University or one of its numerous equivalents. Such new students would *ipso facto* become undergraduates of the University of London, and there would probably be no great difficulty in inducing a fair proportion of them to go steadily through the whole curriculum. With regard to those who from considerations of inadequate time or inadequate pecuniary means might be unable to complete their

M.B. examinations in the ordinary period of studentship there would be a chance of taking up the later examinations at a subsequent stage, without the heart-breaking compulsion of having to go back once more to preliminary studies, which now so frequently faces very able and competent men whose parents or guardians have allowed them to enter a London school of medicine on some less stringent entrance examination without having considered the future disabilities of such a step.

I devoutly trust that the less stringent entrance examinations may not only be discouraged but ultimately be disallowed. If the simple measure to which I have referred were widely adopted in the London Schools, and if the two vital recommendations of our committee which really support the contentions of the faculty of medicine of the University of London were carried through, a great part of the difficulty of the medical degree for the London student would be ultimately met, and we should not have the humiliating fact that only one-third of the total number of men finishing their medical training in London leave with a degree. But I venture to submit that this College ought to consider the subject of diplomas and university medical degrees on a broader and more fundamental basis than the claims of the London medical students alone, whilst frankly acknowledging their special grievance.

It is true that this Corporation is designated the Royal College of Physicians of London, but whatever its scope in early times, we cannot forget that virtually it is the Royal College of Physicians of England just as our sister college is the Royal College of Surgeons of England. I maintain that our final conjoint examination is the most equitable, most searching, most satisfactory pass examination in these subjects given by any examining body whether university or corporation in this country.

It is right to remind all persons concerned with medical education that our board of examiners as regards extent of choice from the different schools, of men in

the zenith of their teaching powers and the remarkable guarantees which we have for checking of results give a soundness and effectiveness to this examination which is really remarkable.

I advance then to this proposition :—that in the public interest it is desirable that in future every English practitioner should pass our final conjoint examination.

If this be conceded it appears to me that it ought not to pass the wit of man to bring about the acceptance of this examination by every English university as an instalment for its M.B. to be added to by each university by way of case commentary, or any other additional clinical test that may be considered desirable.

I submit that within the limits of the final conjoint examination, candidates might very properly be spared a repetition of tests that are entirely adequate as far as they go.

Now if this consummation could be achieved, we should have gone a long way towards a virtual accomplishment of the one portal system.

I will ask the fellows of this College whether such a mode of procedure conserving as it would the dignity and autonomy of both universities and corporations would not be a far better method than for the State to entrust the construction of the one portal to the General Medical Council.

I venture to commend to your serious consideration this line of thought on this serious problem, which we may have to face shortly in one form or other.

COMMITTEE OF MANAGEMENT— DIPLOMA IN TROPICAL MEDICINE AND HYGIENE.

On the recommendation of the committee of management the Colleges have raised the fees for each part of the diploma of Public Health from 6 guineas up to

10 guineas, excepting for those who already hold a diploma from one of the Colleges.

The Senior Censor, Dr. Frederick Taylor, was the visitor sent, on behalf of the Conjoint Board, to inspect the examinations at the Egyptian School of Medicine last winter. His report is satisfactory.

Various communications from the General Medical Council and other bodies have been referred to the committee of management for consideration and report. The most important of these was one received by the College on December 1st, referring to the registration of *diplomas in Tropical Medicine*. In this communication the General Medical Council informed the College that the Council had received a petition to make diplomas in Tropical Medicine registrable as additional diplomas. It was proposed to make this possible by an amendment to the medical act of 1886, which should put a diploma in Tropical Medicine on the same footing as a diploma in Public Health. This proposition was communicated by the General Medical Council to all the licensing bodies concerned, and their opinion was asked thereon.

Hitherto the College has not issued a diploma in Tropical Medicine, though proposals to do so have been already made; it was resolved that it is desirable for the College, conjointly with the College of Surgeons, to issue such a diploma, and the committee of management were requested to draw up suitable regulations and a scheme of examination. This the Committee have done, and their report thereon has been approved by both Colleges (College of Physicians, January 26th; College of Surgeons, February 9th).

There remains, however, a certain difficulty. While the Colleges are in favour of making this new diploma registrable, they are not in favour of assimilating it as regards its regulations to the diploma of Public Health.

The General Medical Council exercises the power of laying down the courses of study and examination which

are necessary for obtaining a diploma in Public Health. The Colleges contend that this ought not to be so, but that the licensing body which issues the diploma should lay down the regulations concerning it, the Medical Council retaining, of course, the power of inspection and criticism conferred on them by the act. This is the existing position with respect to our own licence, and all other primary qualifications.

This subject, which may have important results in other directions, is still under the consideration of a special committee of both Colleges; and it is probable that a joint deputation from the two Colleges will request leave to present this view to the Privy Council.

The Committee appointed to consider the question of conferring a diploma in Psychological Medicine is still sitting, and it is hoped that a scheme may be soon presented for the deliberation of the College.

PATHOLOGY AT THE EXAMINATION FOR THE LICENCE.

The Committee appointed on January 27th, 1910, "to consider and report upon the teaching, regulations and examinations in pathology for the conjoint diploma," presented to the College a report (dated October 4th, 1910) recommending that no addition should be made to the examination, but that certain additions should be made to the number of lectures and practical classes. Their report was adopted and referred to the committee of management, who, after consideration, recommend both Colleges to adopt it subject to a slight reduction in the number of extra classes proposed.

STANDING COMMITTEE ON PLAGUE.

This committee—which had not met since December 17th, 1907—recommenced its meetings on November 10th last, in view of the rat plague present in East Anglia.

It was found necessary to appoint new members, and the Committee now consists of:—

The President.
Dr. Norman Moore.
The Registrar.
Dr. F. W. Andrewes.
Sir Patrick Manson.
Dr. Rose Bradford.
Dr. W. J. R. Simpson (*Hon. Sec.*).
Dr. Tanner Hewlett.
Dr. Andrew Duncan.

A Report drawn up by the Secretary, Dr. Simpson, was received by the College on December 1st, and it was resolved that the President of the Local Government Board should be asked to receive a deputation from the College, which should express the willingness of the College to be of any service, their sense of the prudence of the measures already taken, and their feeling of the gravity of the conditions present in East Anglia.

The President and the Registrar were received at the Local Government Board on December 29th last; and Mr. Burns told them of the measures which were being taken. Further reports on the subject have since been promised by the Local Government Board.

OBITUARY NOTICES.

WALTER BUTLER CHEADLE.

Walter Butler Cheadle, M.A., M.D.Cantab., F.R.C.P.Lond, F.R.G.S., was born in 1836, being the son of the Rev. James Cheadle, Vicar of Bingley. He was educated at the Bingley Grammar School, and obtained a scholarship at Gonville and Caius College, Cambridge. From Cambridge, Cheadle went to St. Mary's

Hospital and took his M.B. in 1861. Then occurred the great event of his early life. In June, 1862, he started with Lord Milton in his travels over the Rockies and through the western parts of Northern America. It is no secret that the book entitled "The North West Passage by Land," which gave an account of this *then* adventurous journey, was virtually written by Cheadle. It was a very entertaining book and of definite scientific value, and it passed through several editions. On Cheadle's return he resumed his purely medical work. He took his M.D. in 1865, and the membership of this College in the same year. In 1866 he was appointed assistant physician to St. Mary's Hospital. In 1869 he was likewise appointed assistant physician to the Hospital for Sick Children in Great Ormond Street. These two institutions absorbed a great part of his life work, but it must not be forgotten that he was one of the early lecturers at the London School of Medicine for Women, and that he took active interest in the training and education of nurses especially in connection with the Metropolitan Nursing Institute in Bloomsbury Square. He was elected a Fellow of this College in 1870, was examiner, councillor, and censor, and in 1900 delivered the Lumleian lectures on some cirrhoses of the liver.

Cheadle's devotion to St. Mary's Hospital and School was indefatigable. He had the highest sense of duty both with respect to medical out-patients, skin department, and ward work. He was a thorough and sympathetic teacher, especially in clinical medicine, for which subject before his retirement he endowed a valuable prize. He had the greatest dislike for specialism, but by the chances of life his reputation was mainly associated with children's diseases. It can, however, truly be said that if he had not been a first-rate general physician he would never have been the distinguished and skilful physician for children that he proved to be. His papers and lectures on the artificial feeding of infants and on the phases of rheu-

matism in early life showed laborious investigation and original independent judgment.

I wish especially to draw attention to his original paper published in 1877 on Infantile Scurvy. The clinical notes of this disease were laid down by Cheadle with great accuracy and acumen, and although he was unaware of what its anatomical substratum was, he arrived, by clinical reasoning, at its true interpretation and at its proper treatment. About the same time, unaware of his observations, I was working at the same subject from the pathological side, and shortly afterwards I was able to show what was the anatomical basis of the disease. In consequence of this chance my own name has become more frequently associated than Cheadle's with this affection, although, as I have repeatedly stated, he was the real pioneer of knowledge on the clinical side of the subject.

We were closely associated at Great Ormond Street for many years, and I can speak of him with knowledge. He was a reserved and retiring man, who never cared to push his claims to precedence or power, but on any question of principle he was absolutely dependable and straightforward. Quiet and unassuming though he was, he had a great deal of moral courage in upholding what he believed to be right, and was quite ready to stand by an unpopular cause with true Yorkshire tenacity.

He had a frank, open bearing, redolent of country life, and was always devoted to athletics; as a young man he was a great cricketer and a great oarsman; when I knew him he was an enthusiastic fisherman, but from first to last I could never think of him as other than a true, sincere, high-minded English gentleman.

He bore his long illness with remarkable courage, though he was very lonely, his second wife having passed away before him. He had the skill and devoted attention for many months of two of his old pupils, Dr. Poynton and Mr. Low, and he was the best of patients, though

he suffered much. Though Cheadle was so much respected he was not intimately known to many of the Fellows of this College. When delegated to any duty he accepted it and performed it with conscientiousness and fidelity, and in his private practice as well as by his colleagues and students he was appreciated and beloved.

Dr. JOHN ANDERSON.

Dr. JOHN ANDERSON was born in 1840, and received his professional education at the Manchester School of Medicine. Having taken the M.R.C.S. and L.S.A., he became first house surgeon and afterwards house physician at the Royal Infirmary, and in 1864 he entered the Army Medical Service. For several years he served in the Royal Artillery in India. He was always proud of having belonged to the Chestnut Troop of Horse Artillery.

On his return for home service, during the time he was stationed at Edinburgh, he availed himself of the opportunities of doing some work at the University, and his abilities and experience were so well recognized that he was chosen by the late Marquis of Ripon for his personal staff when he became Viceroy of India. Anderson was greatly esteemed, made many friends and gained a large and varied experience. He received the distinction of Companion of the Indian Empire, which was a proof of the high position which he had earned.

He retired from the army in 1885, and having graduated in medicine at the University of St. Andrews, and taken the membership of the Royal College of Physicians, he began practice in London. For a time he was one of the physicians to the Dreadnought Hospital and lecturer on tropical diseases at St. Mary's Hospital. His eastern experiences led to his being consulted largely on tropical diseases, but he was also a general physician, and he rapidly acquired a good practice.

In 1896 he was made a Fellow of this College.

Suddenly in the midst of a very active and useful life, he was stricken with right hemiplegia, and this ended his life work. In August there came another disaster in the death of his wife, to whom he had been devotedly attached, and on October 10th, mercifully the end came.

Anderson was a remarkably alert man, and very young for his years. He was quick, bright and active in his movements up to the time when hemiplegia suddenly overtook him. There were few men in practice in London who were more keen and alive than he was. He was devoted to his patients and spared himself no pains in devising means for their recovery. He was very sensitive and maintained the highest standard of professional conduct in all his dealings.

SYDNEY RINGER, M.D., F.R.C.P., F.R.S.

Sydney Ringer, M.D., F.R.C.P., F.R.S., was the second son of a Norwich tradesman who died when his children were young. His parents were strong nonconformists, and Ringer often referred in his mature years to the enormous debt that he owed to his inheritance, to the example shown to him, and to his mother's guidance.

Mrs. Ringer was a woman of high character and strong personality, and Sydney Ringer was said to closely resemble her in feature and manner. The other two brothers became very successful Colonial merchants.

Ringer entered the medical department of University College, London, in 1854 and became M.B. in 1860. Of all his teachers, Parkes, to whom he was house physician, and Jenner were most influential. After holding junior appointments at University College Hospital, Great Ormond Street, and at Brompton he became resident medical officer at University College Hospital, and in that position proved himself so keen and capable that he was elected assistant physician in 1863, having just taken his M.D. He had been assistant physician to Great Ormond Street,

but he relinquished this when appointed on the staff of University College, and henceforth gave the main energies of his life to the hospital and college.

A momentous change for him was when he was appointed to the lectureship on materia medica and therapeutics. It sounds rather parodoxical to say it, but I have sometimes thought that that appointment was a disadvantage rather than otherwise. Of course, the materia medica part of it, as far as descriptions of drugs and the like, became a negligible quantity, and much of his energy was directed towards the scientific side of pharmacology. His book on therapeutics, which passed through thirteen editions, and spread his name far and wide, contained the results of very valuable investigations, but also an enormous mass of material on more or less empirical methods of treatment, which have been more or less useful in tentative ways. But this book, encyclopædic as it is, gives a very inadequate idea of Ringer at his best. He was one of the best clinical teachers I have ever known. He carried on Jenner's great tradition, but with a difference—it was the difference between the sledge-hammer and the rapier.

It will be within the memory of the Fellows of this College that years ago occasionally travelling post-graduates found their way to our hospitals with notebook in hand, diligently collating "tips for treatment" from all the medical teachers that they could meet. I can imagine the dismay and astonishment of such a man coming to learn what he could in Ringer's out-patient room. Danton's famous phrase might easily have been parodied into "Diagnosis, diagnosis, always diagnosis"; he would have found Ringer standing by the fireside, first discussing without any preliminary information the facies and aspect and manner of the patient and endeavouring to lay down the absolute limitations of the possible information derivable from such indications. When he had utilized these observations, he obtained the main points of the history, and then proceeded to an exhaustive

physical examination. The speculative element was reduced to the vanishing point, but all the physical findings were made to yield their full quota of information, so that the very maximum was got out of a case that was possible. Nobody could be more severe against jumping to conclusions than Ringer was.

Everybody who followed Ringer's teaching must have become firmly convinced that for variety of cases, for the opportunities of provisional quick diagnosis, for the study of the beginnings of disease, and for the separation of trivial complaints from serious illness, there is nothing to compare with the out-patient room. Certainly Ringer relinquished it with great reluctance, and always maintained its enormous value both for the physician and for the senior student.

In the wards, besides his clinics, which amplified methods to which I have already referred, he had always some kind of continuous investigation either in physical signs or in the action of drugs, carried on by his house-physician with himself, and at 9 o'clock in the morning he was always in the wards working at something, and every house-physician worth his salt, whether he had had his breakfast or not, was always there to meet him. He was admirable in suggesting lines of joint inquiry, and always did justice to his fellow-workers.

Ringer was as enthusiastic in the *post-mortem* theatre as in the out-patient room, and was a master of what might be called clinical morbid anatomy. As a systematic lecturer, though he was clear, incisive, and helpful, he was not nearly so happy or effective as in his clinical teaching.

His private practice, as the years went on, became considerable ; but he never allowed it to interfere unduly with his clinical and experimental work. His experimental work was by no means confined to the action of drugs. Some of the most far-reaching and important investigations which he made in the physiological laboratory

related to the influence of the inorganic salts upon the circulation, especially on the beat of the heart. His great discovery was in determining the action of minute quantities of calcium salts in restoring contractility to the ventricular muscle, and in prolonging the systole; and he further showed that this was antagonized by potassium salts. He carried out allied investigations on the action of small quantities of inorganic salts on other vital processes, such as the contraction of voluntary muscle, the nutrition of fishes and tadpoles, the coagulation of the blood, and the curdling of milk. It must be remembered that these investigations were not made in the early part of Ringer's career, but when he was at the full zenith of his powers as a clinical physician, and the mere enumeration of his papers in the *Journal of the Physiological Society* shows, not only how industrious he was, but what an active and fertile mind he possessed. Indeed, it is remarkable how full his days were of varied activities. He was simple and retiring in his private life, and cared little for social functions, and not at all for display, but was fond of music. He was very shrewd in his estimates of men. His favourite simile was to compare a man's mental capacity either to a spring or a reservoir, and if his house physician had wits and energy, they were warm friends at once, and he treated him like a younger brother. He was extremely happy in his marriage. Mrs. Ringer belonged to an old Yorkshire family; she had worked in the hospital, and was devoted to acts of benevolence; she was gentle, refined, and high-minded. No house physician ever left their table without being roused to his best endeavours, and realizing the unconsciously beneficent influence of a good woman.

They spent their holidays at their country home on the Yorkshire moors, near the old abbey church of Lastingham; and it was here, somewhat sad and lonely after the death of his wife and sister-in-law, that he passed the evening of his long and fruitful life. He was grateful

for the recognitions of his work. He was fond of his farm. His mind was alert, he read much, and reverently pondered over the deeper problems of philosophy. The end came after two cerebral seizures, the first slight, and the second mercifully fatal.

Dr. JOSEPH FRANK PAYNE.

Dr. Joseph Frank Payne was born in Camberwell in January, 1840. He may be said to have been cradled and reared in the atmosphere of education, for his father was a very able and original teacher, a pioneer in new methods, and the first professor of education at the College of Preceptors.

After leaving his father's school at Leatherhead, Payne began his collegiate education at University College, London, whence he gained a demyship at Magdalen College, Oxford. He obtained a first class in natural science in 1862, and in 1863 he became Burdett Coutts scholar in geology, and in 1865 Ratcliffe travelling Fellow in medicine. In 1866 he became a Bachelor of Science of the University of London. He was elected a Fellow of his own College, and in 1867, being then a student at St. George's Hospital, London, he took his M.B. at Oxford.

He subsequently studied in Paris, Berlin, and Vienna, and in 1868 became a member of our College.

His first medical appointments were assistant physician to the Hospital for Sick Children in Great Ormond Street, demonstrator of morbid anatomy, and curator at the Museum of St. Mary's Hospital. In 1871, Payne migrated from St. Mary's to St. Thomas's, and he gave nearly thirty years of his life to activities connected with the hospital and school. He was likewise a member of the staff of the Hospital for skin diseases, Blackfriars.

Dr. Payne was elected a Fellow of this College in 1873, and was appointed Goulstonian Lecturer. He chose for his subject "The Origin and Relation of New Growths,"

This was the first of his many and valuable contributions to the College of Physicians. He reverted to the same subject in 1901, when he delivered the Lumleian Lectures. He gave the Harveian Oration in 1896 on Harvey and Galen, and the first FitzPatrick Lectures in 1903 on English Medicine in the Anglo-Saxon Period, and in 1904 on English Medicine in the Anglo-Norman Period. He also edited for the College the reproduction of Linacre's translation of Galen's "De Temperamentis," and wrote an invaluable introduction to it giving an account of Linacre's life and work.

Not the least characteristic of his smaller contributions to this College were the historical notes which he wrote to accompany the facsimile of Harvey's diploma at Padua.

It would be difficult even to enumerate the many services which Payne rendered in various committees to the College of Physicians. One of the most important of these was his work in connection with the nomenclature of diseases. He was secretary of the committee, and editor of the volume which was the result of his labours. He was examiner, councillor and censor, but above all he was Harveian Librarian from January 1899 till a few months before his death. His devoted assistant librarian Mr. Horace Mallinson Barlow has written a charming appreciation of his work in this important office and a general estimation of his contributions to medical history and bibliography. And to that account I specially refer the Fellows of the College for some indication of the enormous debt which medical learning in general and this College in particular owe to Dr. Payne. When, on account of failing health, Payne felt obliged to resign his office, the College appointed him Emeritus Harveian Librarian, and his friends on the library committee presented to the College his portrait in black-and-white by the eminent academician Mr. Sargent.

I can only briefly allude to the most important of Payne's medical works. First must be mentioned his

Manual of General Pathology, which was published in 1888. This was the first modern book, so far as I know, of the kind in which the attempt was made to discuss fully pathological processes as distinguished from morbid anatomy. It embodied the findings of the new bacteriology, and when it is read at the present time it is astonishing how little of it needs to be re-written. It is very terse and very lucid, and the important lacunæ both as to the evidence and arguments of the various theories of etiology are very explicity set forth. But this excellent book had rather too broad and philosophical a basis to appeal to medical students, and was more suited to the needs of the well-informed physician who might desire to re-consider his experiences and make a fresh synthesis of his medical doctrines. I lay stress upon this book for the sake of emphasizing that Payne was pre-eminently a pathologist, and not, as some might have supposed, a mere medical *littérateur*. His article in Allbutt's "System of Medicine," on plague, is an admirable summary of the knowledge of this disease up to the early nineties, and it is right to recall that Payne had been sent out as a British commissioner to investigate the epidemic of plague on the Volga in 1879, and that he had published his report of that epidemic in the transactions of the Epidemiological Society.

His elaborate descriptions of rare skin diseases, and his contributions to the Pathological Society, of which he was at different times secretary and president, ought also to be remembered in this connection.

Nevertheless, it is as a medical historian and biographer that Payne will chiefly be remembered.

The Harveian oration in 1896 on Harvey and Galen is a typical example of Payne's method, which was to bring out the evolutionary side and the interdependence of all the great original thinkers and discoverers. In this discourse he showed that Linacre, Caius, and Harvey were the respective representatives of three succeeding stages

of development, starting with the renaissance of learning and ending with the experimental method in medicine. And he showed that Linacre's exact and conscientious scholarship made the works of Galen more widely valuable, and helped to carry back his own contemporaries through the obscurity and confusion of the middle ages to the school of Hippocrates, who was the real pioneer of clinical medicine. In his introductory memoir of Linacre he elaborated the same thesis. He also showed what remarkable insight Linacre had concerning the needs of medicine in London in his time when he founded this College, and how Linacre's action led to the liberation of medicine and the medical profession from clerical control. Payne suggested that in the Grammarian's Funeral, Browning had Linacre in his mind as the model of the devoted scholar. I sometimes wonder whether unconsciously Payne was painting his own portrait in his characterization of Linacre, though he would have stoutly denied it. Listen to one brief and charming sentence. "We see, then, pretty clearly what was the ideal that Linacre had before him; the grave and learned person, well read in Galen, respecting, but not bowing down to the prestige of the Universities, claiming for his own science a dignity apart from, but not conflicting with that of theology; looking upon surgeons and apothecaries with charity, but not without a sense of his own superiority."

In the FitzPatrick lectures on Anglo-Saxon Medicine, Payne rebukes the tendency to merely look for quaint things, and exhorts us to put ourselves by all means into the point of view of the ancients. But certainly, out of the most unpromising material, descriptions of simples, and their constituents, herbal medicine in fact, he brings forth treasures new and old; and once more harks back to the school of Hippocrates revived by Galen as the foundation of medical observation, and lays stress on its comparative freedom from superstitious practices.

It is to be hoped that Payne's second course of

FitzPatrick lectures on Anglo-Norman Medicine which he was revising during his last illness may soon be reprinted, and it is also desirable that his article in the tenth edition of the "Encyclopædia Britannica" on the history of medicine should be permanently available. Of Payne's many biographical contributions, the most important was his life of Sydenham. He does full justice to our first English teacher of clinical medicine, the bedside observer of diseases and the master of reasonable empiricism. He is quite as sympathetic with the robust piety and sturdy independence of the Puritan physician as with our great scholar and our great pioneer of scientific experiment in medicine.

Besides his labours for St. Thomas's Hospital and this College, it must be remembered that Payne gave valuable services to the University of London as an examiner and as a convocation member of the Senate, and that he took a considerable part in improving the medical curriculum and examinations, especially in the direction of pathology.

Let me gather up these disjointed threads and endeavour briefly to summarize the characteristics of our many-sided colleague. He was first and foremost, as I have already said, a philosophical pathologist. He was gracefully and truthfully characterized by the last Harveian orator as our scholar physician. He had, not only an extensive working knowledge of the biological sciences, but his acquaintance with the history of medicine was both comprehensive and profound. Although an enthusiastic bibliophile, he was far removed from either a dilettante or a dryasdust. He was laborious, accurate and untiring in detailed research, but the relativity of knowledge was always before him. The evolution of medical doctrine, the debt which every great teacher owes to his forerunners and his contemporaries, and the heritage which he passes on to his followers; all these things to Payne were veritably an open book.

Thus it came to be that his scholarship was so illumin-

ating, and medicine became, in his hands, one of the great humanities, illustrated, explained and justified by the contemporary life of the times of which he wrote.

But the charm and the paradox of Payne's character was, that he looked forward as well as backward ; he never played the part of *laudator temporis acti*, he was too thoroughgoing an evolutionist for that. He possessed, in a high degree, courage and independence of thought and conviction.

I do not know what side he took in party politics, but the temper of his mind was fundamentally liberal. He had real enthusiasm for opening wide the gates of intellectual freedom, and in this College he threw his influence on the side of progress and advance. Nevertheless, his wide and open mind had its own limitations. In practical politics he was often disappointing. It seemed as if his mind were too disengaged, and his outlook too wide for him to focus his views on the pressing things of the moment. And, although he was listened to with the respect that was due to his learning and high character, he was not always as effective as he ought to have been. Nevertheless, he was a sound, practical, general physician, and perhaps it was his natural history training that drew him especially to the subject of skin diseases.

Payne was one of the most modest of men. He was indeed somewhat reserved, and had a quiet dignity of his own, but he was generous and ungrudging in unfolding his wealth of knowledge to any inquirer. He never flattered, but his estimates of others were scrupulously just. He was a staunch friend, and, in a small circle, a delightful companion. Whether he fulfilled his ambitions, who can tell ? But he had great joy in the whole of his life work, in his family and his home, in his beloved books, and in many precious and beautiful things which he possessed.

> Nature he loved, and next to Nature Art ;
> He warmed both hands before the fire of Life.

And I am sure he knew that he was greatly honoured by the Fellows of this College, which he had loved so long and served so well.

JAMES EDWARD POLLOCK.

JAMES EDWARD POLLOCK, Doctor of Medicine of the University of Aberdeen, Fellow of this College, and Licentiate of the Royal College of Surgeons of Ireland, was born in 1819, and received his medical education in Dublin, where he qualified in 1840. Two years afterwards he began practice in Rome, where he gained the warm esteem of his Italian brethren and the confidence of all English travellers in Italy who consulted him. In 1850 he took his M.D. and settled in London. He was appointed Physician to the Western General Dispensary, and subsequently to the Brompton Hospital for Diseases of the Chest. At that hospital he gained a great reputation for his sound, well-balanced knowledge of medicine and his sane judgment in all details of treatment. His work there resulted in the publication of his book on the elements of prognosis in consumption, which was a model of careful individual analysis of the large body of clinical material which had come under the writer's observation.

Dr. Pollock also interested himself in the subject of life insurance, and in 1889 published a very useful medical handbook to this subject, founded, as his former work had been, on data derived from long personal experience.

In 1864 Dr. Pollock was elected a Fellow of this College. He was censor in 1884 and in 1903, when senior censor, he acted as pro-president after the death of Sir Andrew Clark, until the succeeding presidential election.

He delivered the Croonian lectures on modern theories and treatment of phthisis in 1883, and in 1889 the Harveian oration. In 1895 he was appointed physician extraordinary to Queen Victoria.

Dr. Pollock was greatly esteemed in this College. He

was a wise physician, an eloquent man, and a loyal friend. He had a fine presence, natural dignity and a genial courtesy which attracted both young and old. He was indeed the Colonel Newcome of this College, and when he passed away full of years and of honour we felt that we had lost a link with the great tradition.

Before I relinquish this chair, I wish to express my warm sense of the courtesy and real help of the Registrar, the Treasurer, the Emeritus Registrar, the Harveian Librarian and of my brethren of the Censors' Board, and I desire to thank the Fellows of this College for their unfailing consideration shown to me throughout my year of office.

John Bale, Sons & Danielsson Ltd., 83-91, Great Titchfield Street, London, W.

THE ANNUAL ADDRESS

DELIVERED TO THE

ROYAL COLLEGE OF PHYSICIANS

On April 1st, 1912

BY

THE PRESIDENT

SIR THOMAS BARLOW, BT., K.C.V.O., M.D., F.R.S.

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PRESIDENTIAL ADDRESS.

ONCE more it becomes our duty on this day, which was Harvey's birthday, to review some of the chief features of the past College year. We have now upon our roll 345 fellows, 497 members, two extra licentiates, and 11,940 licentiates. It is noteworthy that of these 234 represents the additions during the past year to the list of licentiates, seven the additions to the list of members, and that our fellows are one less than last year.

During 1911 there died eleven fellows, twelve members, and ninety-eight licentiates. Eight members were elected fellows and two non-members, on account of their distinction in medicine, were by the new rule elected to be fellows with the same obligations and privileges as other fellows. Sixteen licentiates were elected members, three members resigned their fellowship, one licence was withdrawn.

During the past presidential year, at the time of the Coronation, Dr. Goodhart and Dr. Osler each received a baronetcy, Dr. Whitelegge was made a K.C.B., Dr. J. Rose Bradford a K.C.M.G., Dr. Bertrand Dawson a K.C.V.O. The following licentiates also received Coronation honours :—W. A. May, R. W. Bassett-Smith, G. W. Robinson and H. E. R. James the C.B., and Milsom Rees and Mayo Robson the C.V.O.

At the Durbar two of our fellows received honours, namely, Dr. G. F. A. Harris was made C.S.I., and Dr. L. Rogers was made C.I.E. At the new year Dr. G. H. Savage received the honour of knighthood, and Dr. Newsholme was made a C.B.

The Baly medal was awarded to Dr. W. D. Halliburton, F.R.C.P., F.R.S., and the Bisset Hawkins medal was awarded to Dr. Clement Dukes, F.R.C.P. The Murchison Memorial Scholarship was awarded by the University of Edinburgh on this occasion to Walter Quarry Wood. The Jenks Memorial Scholarship was awarded by the president and censors to Arthur Lloyd Davies. The Harveian oration was given by Dr. Theodore Williams, who after the delivery of the fitting commemorative portion of his discourse addressed himself to a review of old and new views on the treatment of consumption. The fellows were deeply interested in the judicial survey of a lifelong experience of the various therapeutic methods which have been successively employed for this disease.

The Fitzpatrick lectures, by Dr. Raymond Crawfurd, the Croonian by Dr. Head, the Bradshaw by Dr. Graham Steel, the Milroy by Dr. Bainbridge, and the Goulstonian by Dr. Adamson, were excellent in both treatment and illustration, and the College is deeply indebted to these fellows for the wealth of historical learning and original clinical and pathological investigation which were devoted to their several expositions.

The Lumleian lectures for 1912 have been deferred, owing to the illness of the lecturer.

The Oliver Sharpey lectures for 1912 will be given at the end of April.

BEQUESTS AND GIFTS.

The late Sir Samuel Wilks bequeathed to the College a portrait of himself and a gold cup.

The late Dr. Hughlings Jackson bequeathed to the College a portrait of himself.

The late Sir W. Allchin has bequeathed a silver bowl to the College.

Mr. Frank Glover presented to the College a gold pencil case which formerly belonged to Sir Henry Halford.

Dr. Raymond Crawfurd presented a "touch-piece."

Dr. Donald Hood presented a set of "instruments of restraint" (manacles, &c.), formerly in use at Bethlem Hospital.

LIBRARY.

Many books and periodicals have been presented, for which see the Library Committee's report of last year (dated July 10, 1911).

At the January College, 1912, the Harveian Librarian mentioned that he had written to several past lecturers at the College asking that they would send a copy of their lectures to the Library so that a complete series might be obtained, and numerous lectures not previously in the library had been sent in response to his appeal.

APPOINTMENTS.

Dr. Sharkey has been appointed representative of the College on the Senate of the University of London, Sir William Allchin having resigned that office.

By the death of Sir William Allchin the College loses its representative on the committee of the Chelsea Physic Garden, and the vacancy will have to be filled.

Dr. West has been appointed representative of the College on the governing body of the University of Birmingham in the place of Dr. Theodore Williams, who did not wish to be re-elected.

CORONATION AND OTHER FUNCTIONS.

The organization for supplying medical aid during the Coronation Service in the Abbey was arranged under the sanction of the Duke of Norfolk, and at my request by Sir William Allchin, and was universally acknowledged to have been very complete and satisfactory. The Abbey was divided into sections, each of which was under the charge of a doctor and a nurse provided with such things

as were necessary for simple and immediate treatment. In the cloisters and elsewhere outside the building were ambulances, where any serious case could be received, and thence conveyed, if necessary, to Westminster Hospital. Several fellows of the College served on this occasion. No serious case of illness occurred.

For viewing the Royal progress from the College on the day following the Coronation, preparations were made by a committee appointed for the purpose, and except for an unfortunate breakdown on the part of the caterers, the arrangements gave satisfaction. From the sale of 443 seats, with some additional accommodation of the roof, the sum of £711 7s. 6d. was received; the expenses came to £730 7s. There was thus only a slight deficit.

At the celebration of the 500th Anniversary of the foundation of the University of St. Andrews, the President, supported by the Treasurer and several of the Fellows, represented the College, and presented an address to the University; and he reported the proceedings to the College on October 26, 1911.

On October 26, 1911, Dr. StClair Thomson presented a report to the College on the third international congress of laryngology and rhinology, held in Berlin, at which he had represented the College.

FINANCE.

College Finance Committee.—A new lease of Ashlyn's Farm, Essex, at a rental of £310 per annum, has been made out and sealed.

One of the rent-charges under the Lumley Trust, viz., that paid by Mr. Macdonald on land in Billingshurst, Sussex, has been redeemed; but redemption of the other rent-charges under this trust cannot, so far, be arranged.

The Treasurer has heard from the Income Tax Commissioners that the College will not be expected to pay

income tax on its receipts from fees paid by fellows, members, licentiates, and examinees.

Conjoint Finance Committee.—The report shows a decrease in total receipts—£495 2s. 11d., but a larger decrease in total expenditure (as compared with last year), viz., £891 12s.; however, there is a somewhat larger balance for the two Colleges, viz., £396 9s. 1d.

There has been a falling-off in new conjoint candidates, but an increase in university students at the final examinations.

RELATIONS OF THE UNIVERSITY OF LONDON WITH THE COLLEGE OF PHYSICIANS.

On June 16, 1911, your president, Sir Henry Butlin and Mr. Hallett gave evidence in their individual capacities at the request of the University of London Commission on the desirability of making the examinations of the Conjoint Board of the two Colleges a single portal for medical qualification in England and Wales, and further as to the possible methods of co-operation between the Conjoint Board and the Universities in examinations qualifying for degrees in medicine. The members of the University Commission were favourably impressed with the desirability of these objects, and from their point of view raised no important objections to them.

At a later date, namely, on December 1, 1911, the University Commission invited our College to send representatives to support the resolutions submitted by the College with respect to the medical faculty and medical examinations of the University of London. Your president, Dr. Norman Moore, Dr. Frederick Taylor and Dr. Sharkey attended for this purpose.

The members of the Commission further elicited the

attitude of our College (*a*) with respect to its resolutions on the relatively small number of students who, having entered the London medical schools, take the London medical degrees; (*b*) on the desirability of constituting the teachers of the medical faculty of London the real effective and initiating body in the medical side of the University, and (*c*) on the desirability of insisting on three years at least of the later medical studies being taken in London by all persons desiring to obtain the London M.B. Your representatives were questioned further concerning previous evidence which had been given by distinguished foreigners with respect to the advantages of the German method of appointing special whole-time professors of clinical medicine and clinical surgery with a complete and separate staff of assistants, laboratories, &c. They gave reasons for preferring the methods now generally employed in the English medical schools.

In January last a request was made to the Conjoint Board by the American Medical Association, meeting at Chicago, that our secretary, Mr. Hallett, might go over and expound to that association our methods of conducting our qualifying examinations. The two presidents and the committee of management acceded to this request. Mr. Hallett has furnished me with a report of his visit, and I make no apology for reading it.

"It will be remembered that the object of my visit to the United States was to give an exposition of the methods in vogue at the Conjoint Board of the Royal Colleges for conducting practical examinations.

"Within an hour of my arrival in New York it was apparent to me that this subject was arousing great interest, for I was entertained at lunch by the Carnegie Foundation, when I was asked to describe our examinations to those who were present—all of them, officials of Universities or State Boards, engaged in education and examination problems. From the discussion which took place after my exposition, I learnt how desirous the

leaders of the profession are to improve the standard of the licence to practice. I visited Philadelphia, Baltimore, Boston, Buffalo, and Ann Arbor (University of Michigan) on my way to Chicago; in most of which places I was asked to explain our system and organization. At Chicago the conference on medical education under the auspices of the American Medical Association was held. At this conference the letter you were good enough to send to the president (Dr. Bevan) was read and it was evident that the meeting cordially appreciated the interest taken by yourself and the president of the Royal College of Surgeons in the endeavour being made to improve medical education and examination in the United States. My address, illustrated with numerous diagrams, was delivered before a large audience and, from the remarks made by various subsequent speakers, I have reason to believe, created not only considerable interest but some bewilderment. To explain this remark it must be said that there is no such thing as a practical examination, as we understand it, either for a degree in medicine or for a licence to practise in the States, and consequently the elaborate details of the organization and system of the examinations of the Royal Colleges seemed to them at first almost beyond comprehension. By means of constant interviews with small parties of the members of the conference, I hope I was able to emphasize the important points to be aimed at in the initiation of such a system. One point that seems to have attracted great attention is that the Royal Colleges should be able to secure the services for so many days and hours of distinguished physicians and surgeons as examiners, whilst the precautions taken to avoid teachers examining their own students, the arrangements by which such large numbers were examined with precision and impartiality and generally the complete arrangements of the Conjoint Board certainly impressed the conference.

"It is clear that the reformers in the United States are faced with great difficulties owing to the independence

of the individual States in regard to legislation. For instance, in more than one State the law requires that the examiner shall not be a teacher; in others the law prescribes that the examination shall be by written questions only, whilst in not a few the added difficulty of the equal treatment of homœopathic, osteopathic, and eclectic practitioners has led the Legislature to provide for the appointment of an examiner in each of these lines of practice.

"It must be recognized, however, that during the last five years great progress has been made by the united efforts of the American Medical Association and the Carnegie Fund, in eliminating the low-grade medical schools and generally in educating public and professional opinion to the necessity of a higher standard of medical education, and these efforts are deserving of the warmest admiration.

"Some of the State boards and a considerable number of the medical colleges are now insisting on at least one year of science work after the high school course has been completed, and before the medical curriculum is entered upon, whilst there is a strong movement now going on to enforce an additional clinical year at the conclusion of the regular curriculum. Whereas, therefore, the curriculum has hitherto extended over four years only, it appears that before long the other extreme of a six years' course will be required in some States.

"If to this extended curriculum a proper system of examination, both for the degree of doctor and for the State licence, is added, the standing of the medical profession in the United States will undoubtedly be materially raised.

"From conversations before leaving America, and letters received since my return, I am confident that the assistance given by the Royal Colleges in sending their officer to explain their practical methods of examination will act as a great impetus in bringing about this improved standard.

"As the official of the Conjoint Board of the Royal Colleges I was everywhere received with the greatest cordiality and hospitality, and I must be allowed to express the great honour I have enjoyed in being permitted to represent the Examining Board at the Conference.

"FREDERICK G. HALLETT."

(*Copy.*)

"TO THE DIRECTORS OF THE CONJOINT BOARD OF THE ROYAL COLLEGES OF PHYSICIANS AND SURGEONS, LONDON.

"GENTLEMEN,—The Council on Medical Education of the American Medical Association desires to thank you for permitting your Secretary, Mr. Frederick G. Hallett, to come to us to address our meeting. Furthermore, the Council wishes to express its high appreciation of the excellence of the address given by Mr. Hallett. His clear presentation of the excellent methods of examination adopted by the Conjoint Board was made in a manner to reflect great credit upon himself and honour to you, and will be productive of much good to this country.

"After he had given his address it was moved that a committee of three be appointed to express to you the appreciation of the medical educators at the conference of the great value of Mr. Hallett's address. It gives us great pleasure to comply with this resolution, and in addition we wish to state that we feel that Mr. Hallett's visit is an added link to the chain which is every year binding more closely together the medical men in the United States with those of the mother country. Again thanking you for the courtesy so kindly extended to us, we are,

"Very truly yours,

"(Signed) ARTHUR DEAN BEVAN.

"V. C. VAUGHAN.

"N. P. COLWELL."

COMMITTEE OF MANAGEMENT

GENERAL MEDICAL COUNCIL.

Various schools have been visited and approved by the Committee of Management.

The visitor sent to inspect the examinations at the Egyptian School of Medicine last winter was Dr. Norman Moore.

The first diploma in tropical medicine issued by the College conjointly with the College of Surgeons was given at the quarterly January College to Dr. James Bruce-Bays.

The difficulty about the registration of these new diplomas, mentioned in last year's presidential address, still remains.

The public health committee of the General Medical Council having proposed a revision of the requirements for a diploma in public health, the Council sent their propositions to the College (and other bodies issuing a diploma of public health) to learn their opinion thereon.

The matter was referred to the Committee of Management, who did not dissent from some of the proposals, but deprecated those involving a reduction of the time of study.

The resolutions and rules subsequently issued by the General Medical Council are now under consideration of the Committee of Management, and will be duly reported to the College.

GENERAL MEDICAL COUNCIL.

In his last two reports, the representative of the College upon the Council, Dr. Norman Moore, draws attention to a fact which ought to give the College just gratification. For the conjoint diploma, the Colleges recognize instruction given at schools in physics, chemistry and biology, provided always that the schools, the scientific teachers, and the laboratories are approved by the

Committee of Management, after personal inspection of the laboratories by one of the members of the Committee. The General Medical Council has always dissented from this view, and has refused to recognize instruction given in these subjects at secondary schools. Our representative has for more than ten years advocated at the Council the position taken by the Colleges. The Council this year has resolved that secondary schools may, after approval by the registration committee, be placed on the list of approved institutions in which medical study may be commenced; and since then eleven schools, which had been previously recognized by the Colleges, have been placed on this list.

A long controversy (to adopt the words of the report) seems thus satisfactorily closed by the adoption of the views and practices of the College, by the General Medical Council.

EXAMINATION HALL.

This is approaching completion, and will be ready, it is hoped, for the July examination. The financial arrangements with the Imperial Cancer Research Fund were detailed in a report from the building committee, January 8, and the lease is now under consideration by our lawyers.

COMMUNICATIONS WITH GOVERNMENT DEPARTMENTS, &c.

In reply to a communication from the *Home Office* concerning the labelling of patent medicines, the College, after consulting the Censors' Board, expressed the opinion (May 25, 1911) that the vendors of such medicines should be compelled to print on the labels the exact composition of them, but should be forbidden to print the names of the diseases and symptoms which the patent medicine purports to cure. It will be interesting to learn whether this recommendation is carried out or not.

Dr. Tirard reported to the College (July 27, 1911) on the work of a committee, on which he represented the College, appointed by the *Board of Trade* to revise the medical scales, &c., for merchant ships. The committee had held fifteen meetings, examined numerous witnesses, and considered many recommendations.

The *Registrar General* submitted to the College (May 11, 1911) a revised copy of "Suggestions to medical practitioners respecting certificates of causes of death." This was referred to a small committee (Dr. Ormerod and Dr. Rolleston), who, after obtaining the opinions of several other fellows, submitted a report to the College (July 27), which, with one addition (made by Dr. Seaton), was adopted. In his copy, as finally issued, the Registrar General adopted several of the suggestions made by the College.

The following communication was made (April 27, 1911) to the *London County Council*, on the motion of Dr. F. E. Batten: "That in view of the infectivity of acute poliomyelitis and polioencephalitis, its annual occurrence in London, and the crippling effect of the disease upon children and others, the College do recommend to the L.C.C. that acute polio-myelitis and polioencephalitis be included among the notifiable diseases, in order to diminish, and if possible eliminate, its incidence on the population."

SUGGESTED DIPLOMA IN PSYCHOLOGICAL MEDICINE.

The Committee appointed to consider this subject has reported to the College; and the report has been adopted (Quarterly College of July last).

It was not thought advisable to issue a separate diploma in this subject; but it has been arranged that any person, who had been admitted to the membership, may ask to undergo a further examination in psychological medicine. This examination will consist of papers, and of *viva-voce* and of a clinical examination.

The dates for the examination and the appointment of examiners are left in the hands of the censors' board. The fees will be settled after a consultation between the censors' board and the finance committee. No special diploma will be issued, but the "Letters Testimonial" of the member will be endorsed so as to declare that he has passed a special examination in psychological medicine.

MINUTES OF THE COLLEGE.

By-law No. vi, which required that the minutes of every College meeting should be read aloud at the next succeeding meeting, has been repealed, and a new by-law enacted in its place. The form of this new by-law is somewhat complicated, but its effect will be as follows :—

"The full minutes will be kept as heretofore, but it will be possible, should the College so desire, that they may be taken as read, and signed by the president. In order to ensure the accuracy, it will be the duty of the president and senior censor to read and approve them before the College meets. Moreover, if at the College meeting any fellow desires to hear any part of the minutes of the previous meeting, he can call for it to be read."

It is also necessary that, prior to the meeting, an abstract of the minutes of the previous meeting shall have been circulated to the fellows. The preparation of this abstract is left in the hands of the Registrar ; but neither those proceedings which have been declared "secreta collegii" nor the minutes of the censors' board may appear in the abstract. The minutes of the censors' board will be read aloud at the College in the same way as heretofore.

It is hoped that, by these alternatives, the time of the College will be saved, and on the other hand the fellows will be kept informed of the College proceedings by means of the abstract.

INSURANCE ACT.

On May 25, 1911, the College held an official meeting to consider the Insurance Bill ; the President addressed the College on the subject ; a long discussion followed, and resolutions were passed :—

(1) Expressing an earnest hope that no further progress should be made with the provisions of the Bill relating to medical benefits until the bodies representing the medical profession had had ample opportunity of considering the Bill and officially representing their views.

(2) Requesting the President to convey to the Chancellor of the Exchequer the opinion of the College that adequate time should be afforded for consideration of such portions of the Bill.

(3) Requesting the President to appoint a committee to consider the clauses of the Bill which might affect the licentiates of the College and the medical profession generally, and the establishment or administration of hospitals or sanatoria for tuberculosis.

A large committee was nominated, which held its first meeting on May 25, and then divided itself into two portions, one of which, under the chairmanship of Sir William Church, considered the general medical aspects of the Bill ; the other, under the chairmanship of Sir Richard Douglas Powell, considered particularly the sanatorium questions.

Many meetings were held, the Bill was most carefully gone through, and the report of the committee was presented at a special College on July 13.

(It should also be mentioned that to many licentiates of this College was sent a list of questions, from which, it was hoped, the financial difference which the Bill was likely to make to them might be estimated, but the answers received were not sufficiently precise for the purpose).

After another long discussion, the College approved, with sundry slight alterations, the report of the com-

mittee, and in the form of "Resolutions and Recommendations" they were forwarded to the Chancellor of the Exchequer and to every member of the House of Commons. The first of these expressed the apprehension entertained by the College that all practice under the Bill would be based on the contract system, and of the evils which would result therefrom. The remainder were addressed mainly to points in the Bill where such important questions as medical representation, administration of benefit, limitation of income, sanatorium benefit, &c., &c., were raised; and the paper concluded with an appendix suggesting definite amendments to the Bill.

It is difficult to see under the circumstances what more the College could have done; and rather extraordinary that we should be asked when the Act was passed "Why has the College of Physicians done nothing?"

After the Act was passed, the attention both of the medical profession and of the public became still more directed to its provisions, and at the Quarterly January College (January 25 and January 30) another long discussion took place on the subject. This centred partly round some resolutions which fellows had placed on the agenda, and still more round a letter received shortly before the meeting from the Insurance Commissioners.

This letter invited (at very short notice) the College and several other bodies to send representatives to give recommendation to the commissioners upon the specific appointment of the advisory committee and on other questions necessary to actually carry out the Act. The College came to the conclusion that the Act as drafted was inadequate to secure its objects and likely to prove detrimental to the medical profession and to the public; and declined to attend the conference. At the same time we expressed our willingness, if an amending Act were decided upon, to give our best aid to help in framing such an Act if desired. The College of Surgeons arrived at almost identically the same conclusions and likewise declined to attend the conference. Subsequently the two Colleges

were made the subject of bitter comment by the Chancellor of the Exchequer, and the Presidents of the two Colleges wrote a joint letter to the *Times* explaining how the matter really stood and the various steps which had been taken. At the Quarterly January College a second committee was appointed to watch the interests of the licentiates of the College under the provisions of the Insurance Act with power to confer with any other body established for similar purposes should the committee see fit to do so. This committee has held several meetings and has also conferred with a committee of the Royal College of Surgeons and with representatives of the Society of Apothecaries and with representatives of the medical faculties of the English and Welsh Universities. It will ask to-day the sanction of this College for the joint conferences which have been held to be constituted a standing committee for the purpose of watching the negotiations concerning the Act and if it should seem feasible to suggest other alternative methods of carrying out the objects of the medical portion of the Act.

I venture to submit that the College has throughout this controversy not been unmindful of the interests of its licentiates and of the needs of the public. The College has endeavoured to support in a loyal but judicial way the demands of the medical profession, but we have not felt justified in issuing any detailed pronouncement on the question of remuneration because of our strong convictions that it was a wiser plan to leave the great body of general practitioners of this country to formulate their demands on this question, which they were obviously much better qualified to do than the fellows of this College.

OBITUARY NOTICES.

SAMUEL JONES GEE.

SAMUEL JONES GEE was born in 1839. He was delicate as a boy, and was never robust. He was sent to a school at Enfield, and from 1852 to 1854 was at University college school. He matriculated in the

University of London in 1857, and was bracketed with Hilton Fagge, University scholar in medicine, when he took his final M.B. He was house surgeon at University college hospital, where he was one of Jenner's favourite pupils, and he afterwards held the post, first of house surgeon, and subsequently that of registrar of the Children's Hospital, Great Ormond Street. It may be safely asserted that his work at Great Ormond Street as registrar, assistant physician, and physician, gave him the great opportunity of his life; it was there that he laid the foundations of his knowledge of children's diseases, which was singularly accurate, well-ordered, and extensive. And his work there was so sound, thorough, and dependable, that it gained for him, almost unasked, his appointment on the staff of St. Bartholomew's Hospital in 1868.

At St. Bartholomew's hospital and school he held, in turn, the posts of physician to the skin department, demonstrator of morbid anatomy, lecturer on pathological anatomy, physician and joint lecturer on medicine. He retired in 1904, and was appointed consulting physician.

Dr. Gee became a member of this College in 1865; he was elected a fellow in 1870, and next year delivered the Goulstonian lectures on the heat of the body. He was Censor from 1893 to 1897, gave the Bradshaw lecture in 1892 on the signs of acute peritoneal diseases, and the Lumleian lectures in 1899 on bronchitis, emphysema, and asthma.

His voice was not very often heard in the medical societies, but he gave yeoman service for twelve years as librarian to the Royal Medical and Chirurgical Society, and senior trustee for the debenture holders. In 1901 he was appointed physician to H.R.H. the Prince of Wales.

Gee's most important work was his book on auscultation and percussion and other methods of physical examination of the chest. This book was immediately recognized as a masterpiece. It has gone through six

editions. It may, I think, be asserted without fear of contradiction that in no previous work on the subject had the signs of chest disease been more accurately and clearly stated. It was remarkably concise, every word was weighed, and every sentence balanced; and without any undue compression, a given subject was set forth within the limits of a paragraph, which, in many other books of this kind, would have taken a whole chapter. The book, in fact, suggested in many ways the propositions of Euclid. It was very characteristic of Gee's learning and his methods. He was much influenced by the study of the old physicians, and he had a rare selective power in choosing from their writings the sound and essential notes of disease: mere speculative doctrine and especially problems which, in our present state of knowledge, are insoluble, Gee simply passed by, but where a sound rationale could be arrived at he gave it.

The style, though somewhat formal, was not really pedantic. These characteristics were quite as striking in Gee's second book, of which the most interesting portion is the collection of clinical aphorisms carefully collated by Dr. Horder from Gee's bedside teaching at St. Bartholomew's hospital. I think these aphorisms are quite worthy of being placed side by side with Heberden's.

Amongst the lectures and papers included in this volume, I wish particularly to refer to the one entitled "Enlargement of the Spleen in Hereditary Syphilis, and in some other diseases of Children." I do so because Gee's important share in observations on the splenic cachexia of children has not been adequately recognized. In 1867 Gee submitted a most important paper to the Royal Medical and Chirurgical Society on this subject; it was read, but, in conformity with the somewhat erratic methods of the referees of that learned body, it was not passed for publication in the *Transactions*. Gee showed that in about 25 per cent. of cases of hereditary syphilis,

during the exanthem stage, the spleen was definitely but not excessively enlarged ; sometimes enlargements of the liver and lymphatic glands accompanied the splenic enlargement. He followed these cases and showed that generally the splenic enlargement subsided with the subsidence of the other symptoms, but that in some cases the enlargement remained when other signs had entirely passed away. There was a good bit of misconception about this subject, partly due to the non-publication in its complete form of Gee's paper, and I did my best, at the Pathological Society's discussion on Visceral Syphilis, to re-state Gee's conclusions with a number of facts supporting them. It was actually supposed, at one time, that the splenic enlargement in these cases was lardaceous, but I satisfied myself that in the later stages there was only a certain amount of fibrous hyperplasia of the capsule, and to some degree around the malpighian bodies. In Gee's summary of his original paper, in the book of lectures and aphorisms, he has very carefully pointed out that although hereditary syphilis is *one* cause of splenic cachexia in children, it is by no means the only one, for he explicitly states that cases arise in children in whom both syphilis and ague can be excluded.

Gee's articles in "Reynolds's System of Medicine" on chicken-pox and scarlet fever are excellent, but the one on tubercular meningitis is a model description of the natural history of a disease.

On the contributions to the St. Bartholomew's Hospital Reports, of which a considerable number referred to diseases of children, and were based upon the Great Ormond Street experience, I have not time to dilate ; though I had the privilege of many instructive conversations with Gee when he was preparing many of these papers, and can testify to his infinite care and thoroughness. May I, however, refer to one which has never received the attention which it deserved ; namely, that in the volume for 1888 on the cœliac affection ? This is an excellent example of Gee's natural history description of

a hitherto undescribed symptom complex. He gives it a clinical designation which encourages further investigation, and avoids premature theory. The cases described by Gee are not very common ; they start in infancy and continue into the first few years of life and produce a certain amount of cachexia, and often stunting of development. There is a great distension, especially of the large bowel, and some atrophy of the intestinal wall, and for long periods there is the evacuation of very copious sprue-like fæces. The disease is rather intractable, but not necessarily fatal.

In summing up Gee's life work I do not think it is exaggeration to say that there was no more influential clinical teacher of his time in London. He was, I think, in a marked degree a follower of Jenner, but he showed a combination of qualities entirely his own. In the teaching of physical signs he was remarkably exact and non-imaginative. He was a very keen observer, but one of his most useful qualities was his terseness ; when he had heard the history and finished his examination he often summed up in a very few words the essentials of the case on the medicine card, and one of the best things he taught his students was the avoidance of diffuseness. I have already referred to his excellent selective power in dealing with medical literature, and his formal old-world way of talking gave a piquancy to his teaching which was invaluable. It is needless to add that he belonged to the group of great Victorian physicians who held firmly the inseparable link between Morbid Anatomy and Clinical Medicine.

Gee had a considerable consulting practice. He loved his work and his books and his own fireside. He was devoted to his wife and to his two children, and though somewhat self-contained he was staunch in his friendships. He was very punctual, and when he undertook any duty outside his immediate work he discharged it in the most business-like fashion, and if it were difficult and disagreeable he showed a tenacity which nothing could

overcome. He told me once that in his young days he was believed to be a member of the Society of Friends; and it is certain that he had some of the qualities that belong to the old Quaker type. It is interesting to note that he married a lady who was a member of that Society. He was greatly attracted to the Roman Stoics, and loved his "Marcus Aurelius" and "Epictetus." But he had something of the Puritan in him likewise, and Sydenham was to him always the greatest physician.

I do not think it unfitting that I should mention that silent and reserved as he was, he expressed his deep and abiding faith in personal immortality. I wish his latter days had not been so solitary, but it is pleasant to think that the end came in the beautiful lake country, whither he had gone for a holiday with his surviving daughter, and that the anginal seizure from which he died was of short duration.

GEORGE FIELDING BLANDFORD.

GEORGE FIELDING BLANDFORD was born in 1829, at Hindon, Wiltshire, his father being a medical man. He was educated first at Tonbridge School, then at Rugby, and thence he proceeded to Wadham College, Oxford, where he took his B.A. in 1852. He then entered St. George's hospital and in 1857 took his M.B. at Oxford. His choice of insanity as his life work seems to have come about quite accidentally; having taken a resident post at St. Luke's hospital, in 1857, and gained considerable experience there, he was chosen in 1859 and 1860 to take charge of Blacklands House, Chelsea, a private asylum for gentlemen, owned by Dr. Sutherland. This resident post he relinquished in 1863, and began private consulting work in Clarges Street in that year. But he became visiting physician to Blacklands House, and subsequently to some other private asylums until his retirement from practice in 1909.

Blandford became a member of our College in 1860, and was made a fellow in 1869. He was lecturer on mental diseases at St. George's hospital from 1866 to 1902. In 1871 he published a manual of insanity and its treatment, and in 1895 gave the Lumleian lectures at this College on the prognosis and prophylaxis of insanity.

Now it may seem that Blandford's career was a somewhat narrow and uneventful one, but it is worth notice that he had a very decided individuality of his own in the department of practice which he chose; he seemed to bring to it the characteristic qualities of an English gentleman; he was extremely straightforward, had a certain old-world courtesy, sound common-sense, entire absence of pomposity or assumption of special expert knowledge, and gave the impression of singular fair-mindedness and of a judgment based on extensive experience. There is no wonder then that he had a large consulting practice, and that he was very much trusted. Blandford was married, and left two sons and two daughters. He was a lover of art, a collector of old books and prints, was given to cricketing and volunteering in his younger days, and found his relaxation in sketching in riper years. He retired in 1909 at the ripe age of 80, and died on August 18, honoured by everybody who knew him.

FREDERICK WILLIAM PAVY.

FREDERICK WILLIAM PAVY was born at Wroughton, in Wiltshire, in 1829. He was educated at Merchant Taylors' school, and at Guy's hospital, where he started his medical education in 1847. He took his M.B. London, in 1852, obtaining honours in all subjects and the medal in medicine; and his M.D. in 1853. After the period of his studentship at Guy's, during which he held the coveted post of "full dresser" to Hilton, Pavy went to Paris, where he studied especially under Claude Bernard, and this association had an important influence in deter-

mining the subject to which he gave a great deal of his life work. In 1854 he became lecturer on anatomy at his own school, and in 1856 he took the chair of comparative anatomy, physiology and microscopic anatomy. The physiology post he held till 1877. In 1859 he was appointed assistant physician to Guy's hospital. In 1860 he was elected a fellow of our College. His first paper on diabetes appeared in the Guy's Hospital Reports in 1853, in which he records his repetition of Bernard's experiment of puncturing the fourth ventricle of the rabbit and of the dog. He gave the Goulstonian lectures on assimilation and the influence of its defects on the urine in 1862 and 1863, and made his first communication to the Royal Society on sugar formation in the urine in 1861. He received the fellowship of the Royal Society in 1863.

Dr. Pavy was Croonian lecturer in 1878, and again in 1894; and Harveian orator in 1886. He was examiner, councillor, censor and senior censor of our College and in 1901 he received the Baly medal for distinction in the science of physiology.

He held the posts, at different periods, of president of the Royal Medical and Chirurgical Society, the Pathological Society, the Association for the Advancement of Medicine by Research, and the National Committee for Great Britain and Ireland of the International Medical Congress. At the time of his death he was likewise president of the International Bureau of the last-named organization. In 1908 he gave his final lectures to this College on the pathology and treatment of diabetes, viewed by the light of present day knowledge.

Pavy's merits were recognized by his foreign confrères. He was a corresponding member of the Société d'Anatomie of Paris, and of the Verein für Innere Medizine of Berlin, he was also a fellow of the Pathological Society of Montreal, of the Philadelphia Medical Society, of the Academy of Medicine of Belgium and of the Paris Medical Society. In 1909 he became a laureate of

the Academy of Medicine of Paris, and he received the Godard prize. But the honour which pleased him most of all was the recognition by the Physiological Society of his great services to physiology, when a silver bowl was presented to him by the members in token of their admiration on his eightieth birthday.

Pavy's scientific and clinical work was chiefly connected with the study of diabetes in its many relationships, and he carried on his laboratory researches till the very end of his life. He had a large private practice, especially made up of cases of diabetes. But he was one of the earliest to draw attention to cyclic albuminuria, and other urinary disorders came well within the scope of his activities. It may be truthfully said that he never grew old in learning, and verifying and broadening his point of view. It would take too long even to enumerate his books and papers, which dealt not only with diabetes in all its relations, but with food and dietetics. His reputation in connection with his special study was so great that one is apt to ignore his public spirit and unselfish devotion to the various institutions with which in his long life he was so intimately connected. His colleague, Dr. Frederick Taylor, has drawn attention to his clear and incisive teaching in physiology. His lectures were illustrated with occasional living demonstrations, and he was a wonderfully neat operator. He was a good all-round clinical teacher and remarkably business-like in everything concerned with the hospital and medical school. It is nice to record that Pavy gave and maintained a gymnasium for the use of the Guy's hospital students.

Pavy was an excellent chairman, and a most genial host. He was married to Julia, daughter of Mr. W. Oliver, and had two daughters. Mercifully his last illness was brief, and as it occurred in September many of those who would have wished to show respect for his memory were away from London, but we all look back with admiration and humility on his public spirit, his indefatigable industry, his keen intellect, his undying

enthusiam for the scientific as well as the practical advancement of his own branch of medicine, and on his long and honourable record.

JOHN HUGHLINGS JACKSON.

JOHN HUGHLINGS JACKSON was born at Green Hammerton, in Yorkshire. His mother was Welsh, but his father was a Yorkshire man, and Jackson was always proud of the north country. He was educated at a boarding school in the neighbourhood of his home, where he acquired a good knowledge of French and Latin. He and his friend, Hutchinson, in later life, discussed the question whether it would have been better for both of them to have had a University education. But Jackson strongly maintained that the teaching which he had received as a boy left his mind free and capable of self-development, and that he would not have desired that it should be otherwise.

He was apprenticed to Dr. Anderson, one of the lecturers of the York Hospital Medical School. He attended the lectures of that school, but in 1855 he entered St. Bartholomew's and came especially under Paget's influence. After six weeks at St. Bartholomew's he took his M.R.C.S. and L.S.A., and then went back to York, where he was house surgeon for two years at the York dispensary. Here he came under the influence of Dr. Thomas Laycock, who was subsequently the suggestive, brilliant but erratic professor of medicine at Edinburgh.

Sir David Ferrier, who was afterwards one of Laycock's pupils, speaks of Jackson and Laycock having many points in common; though in accuracy of clinical observation Jackson far surpassed Laycock, "but like many other of his pupils, Jackson always freely acknowledged his great indebtedness to Laycock's brilliant and stimulating speculations."

Jackson came to London again in 1859; he had an introduction to Jonathan Hutchinson, who, like Jackson,

had commenced his studies in York ; but they were not contemporaries there, for Hutchinson was seven years his senior. This was, however, the beginning of a long and fruitful friendship. The two young Yorkshiremen had much in common ; they were both splendid observers. They visited the hospitals together, and collated clinical cases for the Mirror of Hospital Practice of the *Medical Times and Gazette*. That period of their joint lives contributed, in no mean degree, to the great store of clinical cases which gave such a wealth of illustration to each of them in their subsequent teaching. But, strange to say, in or about this period, Jackson was half inclined to desert medicine and turn his energies in the direction of philosophical studies. It was his friend Hutchinson's strong influence that kept Jackson in the right path ; and it was not very long afterwards that Brown-Séquard pointed out to him that neurology was his proper sphere of work.

I cannot tell when exactly it was that Jackson first came to know Herbert Spencer, but it is certain that they became great friends. Jackson owed a great deal to Spencer in his general scheme of philosophy, and Spencer probably owed a great deal to Jackson on the biological side.

Through Hutchinson's unfailing friendship and prevailing influence, Jackson obtained first a post on the staff of the Metropolitan Free Hospital, and subsequently in 1863 his appointments as assistant physician to the London Hospital and lecturer on physiology to the school. He was on the active staff of the London Hospital till 1894, when he was made consulting physician.

It ought to be mentioned that in 1862 Jackson had been appointed assistant physician to the Epileptic hospital, Queen's Square. He was physician at that hospital from 1867 until 1906, and his clinical life work radiated round these two great institutions.

Jackson became a member of this College in 1861 ; was elected a fellow in 1868 ; was Censor in 1888 and 1889,

and delivered the Goulstonian, the Croonian, and the Lumleian lectures. He was made a fellow of the Royal Society in 1878. In 1885 he was the first president of the newly constituted Neurological Society, and when in 1897 the Hughlings Jackson lecture was founded, Jackson was himself appointed the first lecturer.

Jackson published no book, but his articles, lectures and smaller contributions were very numerous. The most complete bibliography yet published was by Dr. Shorstein in 1894, when Jackson retired from the London hospital. He had the greatest reluctance to any systematic collection of his papers, and the fact was that of set purpose he very frequently repeated the statement of his doctrines with fresh illustration as occasion served. This was a great advantage to those who strove to understand the scope of his teaching; and thanks to his repeated expositions, Jackson's doctrine and even his terminology acquired a firm hold in the medicine of our time. Some of his earliest papers referred to the use of the ophthalmoscope as a matter of routine in clinical medicine. I remember well at the first of his clinics that I attended, his showing us a careful drawing of a fundus oculi in which there was definite optic neuritis, and yet vision was $\frac{20}{20}$. This co-existence he often emphasized. He was fond of pointing out that in observing the fundus oculi we were observing changes actually in progress in one of the organs of the nervous system. No doubt his great achievement was the clinical forecast of cortical localization; his early observations were concerned with disorders of speech, and in 1864 he had collected a large number of cases illustrating the association of speech defect with right hemiplegia; this was two years after Broca's discovery of the speech centre in the third left frontal convolution. But Jackson's observations were made quite independently, and about this time he pointed out confirmatory clinical data with respect to what he designated discharging lesions, as well as lesions in which

there was actual destruction of tissue; thus he showed that in epileptiform attacks predominantly affecting the right side of the body, there was greater mental defect and greater speech loss, although these were temporary, than when the left side was predominantly affected. In like manner in chorea, affecting the right side only, the mental and speech defects were found more marked than when the left side was affected. Jackson made the important suggestion that in the right-sided epileptiform seizures there was temporary spasm of the branches of the left middle cerebral artery. More than any previous observer, Jackson made the subject of convulsions his own. It is quite true, as pointed out by Wilks, Richard Bright had grasped the importance of one-sided convulsion without loss of consciousness, as an indication of local disease of one hemisphere; but Jackson's merit was in watching the march of the convulsion, especially of limited convulsion, beginning in the most specialized part of a limb and gradually extending to the less specialized parts; and he suggested, from his observations of limited convulsion, that there must be motor centres within the areas of distribution of the middle cerebral artery for various face and limb movements. Jackson always contended that movements, rather than muscles, were represented in the convolutions. These forecasts of his were confirmed by the experimental researches in 1870, of Fritsch and Hitzig, and still more completely in 1875, by Ferrier's experiments. The term "Jacksonian epilepsy" has rightly been allotted to those unilateral convulsions, beginning as above described and gradually extending, with either complete absence of affection of consciousness, or very late affection of consciousness.

Jackson's most interesting discourses on convulsions are given in his study on this subject in the *Transactions of the St. Andrews Medical Graduates' Association*, 1870, and likewise in his article on the same subject in "Reynolds's System of Medicine."

He passed on, in his lectures given at this College, to the general subject of evolution and dissolution of the nervous system, setting forth what he regarded as the hierarchy of the nervous centres, and he gave abundant illustrations of how the inhibition of the highest centres allowed the lower strata to come into play. Some of his most interesting speculations referred to the function of the cerebellum. He thought the cerebellum regulated the muscular contractions necessary to our attitudes in space, whilst the cerebrum regulated the contractions necessary to effect all changes of attitude which are made in response to successive impressions occurring in time. The cerebellum, in fact, he considered as a regulator of continuous or tonic muscular contractions. He was accustomed to speak of rigidity and contracture as being due to unantagonized cerebellar influx owing to cessation or diminution of cerebral influence.

Jackson was a great neurologist, but he was an accomplished general physician, and he was never tired of pointing out how largely the damage of the nervous system was due to extrinsic causes. He utilized, in many different applications, Broadbent's doctrine of compensation, and of the representation of both sides of the body in each hemisphere, each side, however, being dominantly represented in its proper hemisphere.

He was painfully conscientious in giving credit to other workers for their contributions to knowledge. He was exceedingly careful also in his various expositions to mention exceptions or qualifications to his general statements. As a teacher he was not only inspiring to the senior men by giving a speculative basis which could sometimes be tested experimentally or *post-mortem*, and which was capable of suggesting lines of fruitful inquiry, but he was also himself a model of accurate and minute observation. Often his diagnoses and forecasts were strikingly verified. I shall never forget his prescience with respect to a case of double hemiplegia due to symmetrical cortical lesions which I brought to his notice,

and in which his forecast was absolutely confirmed. He was accustomed to make his students record symptoms, as far as possible, in the actual words and order given by the common people, and nothing annoyed him more than the retranslation in the history of the patient's words into technical terms.

His friend Hutchinson, in the charming appreciation which he has written of him, speaks of Jackson as a great lover of knowledge rather than a lover of books. He was accustomed to say, "I did not want the book, but only the information that was in it." He was fond of novels, and had a keen sense of humour. He did not care much for general society, and as deafness crept on with age, he liked his armchair and his fireside.

He married his first cousin; they had been close friends from childhood. He owed a great deal to her. They had no children. It is doubtful whether he ever recovered from her loss, although he survived her thirty years. He was somewhat lonely in his last years, and his face seemed clouded over with a gentle melancholy, though with all his old friends he was delightful, and always remembered their children, to whom he was greatly attached. He had a charming little way of sending to a friend a copy of some book which had been the subject of their conversation. Behind his reserve there was a great background of tenderness, humanity, and invincible love of truth and honesty of purpose. Jackson's fame rests on a sure basis; he was a great clinical observer and a splendid deductive physician, and he was an inspirer of thought, observation, and experiment. Undoubtedly his place in Victorian medicine is that of the founder of the new neurology.

WILLIAM RICHARD HUGGARD.

WILLIAM RICHARD HUGGARD was an Irishman, and was educated at Queen's College, Galway, and Belfast, and at University College, London; he also studied

in Geneva and Vienna. He took his M.D. in 1875, his B.A. in 1876, his M.A. in 1879, became a member of this College in 1880, and was made a fellow in 1898.

He was a man of versatile talent, and his professional work was, in the early part of his career, directed towards insanity and nervous diseases. He was for a time physician to the St. Pancras and Northern dispensary. He subsequently turned his attention to the climatic treatment of consumption, took his medical diploma at Geneva, and in 1885 settled at Davos. During his twenty-five years' residence there he gained a thorough and discriminating knowledge of its potentialities, and it may truly be said that his knowledge on this subject was a tower of strength to patients as well as to medical men in this country. He was appointed His Britannic Majesty's Consul at Davos. In 1909 his own University conferred upon him the honorary degree of LL.D.

In addition to his early contributions on insanity, he wrote some useful papers on the selection of climate, and the use of drugs in phthisis, and a handbook of climatic treatment. He had a great fund of Irish humour, and was exceedingly helpful to his patients, for whose welfare he never spared himself in time and thought. Moreover, he maintained, by his example and influence, a high standard of scientific investigation of the diseases for which Davos is specially utilized. It will be a long time before Huggard's placed is filled.

JOHN A. COUTTS.

JOHN A. COUTTS was born in 1851. He was privately educated on account of its being thought that his heart was weak. He subsequently entered Emmanuel College, Cambridge. He had a good reputation at his college, but an attack of illness prevented his taking as good a place in the mathematical tripos as he deserved. He was an excellent coxswain in his college boat. He entered

St. George's hospital in 1875, and took his M.R.C.S. in 1881, and his M.B. at Cambridge in 1882. In 1884 he became a member of this College, and was made a fellow in 1897.

Whilst at St. George's hospital he stood aside from competitions, and I am confident that he was not esteemed at his proper worth. In 1885 he was appointed assistant physician to the East London Children's hospital, and in 1896 Hunterian lecturer at the Royal College of Surgeons.

I shall never forget the first time I saw Coutts, many years ago. He was very short-sighted, stooped a little, was by no means stylishly dressed, was rather shy and reserved, and was very far from being an effective-looking person ; he was a candidate for the medical registrarship at the Children's hospital, Great Ormond Street, and I very soon found that he was an enthusiastic worker at children's diseases. I convinced myself that he was very genuine, and that he would go a long way on the path of study that he had chosen, and I did my best to get him appointed. But he had held no resident posts at his own hospital, and did not receive the backing of his teachers, and it was little wonder that he failed. But he soon found a congenial home at the East London Children's hospital. And he proved himself to be an exceptional observer, and as time went on it became manifest that he had the most tenacious grasp of his clinical experiences; so that he never forgot a case that he had seen, and he could marshal his personal knowledge in a very effective and convincing way. He seldom spoke in public, but in consultations with his colleagues, and in conversations with his friends, he was strenuous, enthusiastic, and, I always thought, most attractive. He was unmarried, and lived a very simple life, and was absolutely free from any mercenary side. His death came as a great shock to all of us. I am told by his friend and cousin, Dr. Gossage, that his heart had failed badly after a severe attack of influenza, and this was the virtual cause of his death. He did really good work in

his life, and found joy in it, and his memory will always be green, especially to those of us who knew and esteemed his sterling worth.

SAMUEL WILKS.

SAMUEL WILKS came of a family that had been long connected with the India Office. He was born in 1824, in Camberwell, and after passing through a dame's school and then a boy's school at Camberwell Green he became a pupil at Dr. Spyer's, first at Wallop and afterwards at Aldenham grammar school. He also spent one year at University college school, Gower Street.

In 1840 he was apprenticed to Mr. R. Pryor, a family doctor in Newington. Next year he began the study of anatomy at Guy's hospital, and fairly entered as a student in 1842. He had originally intended to be content with the membership of the College of Surgeons, and this he actually took in 1847, but he had not long embarked on his Guy's career before he determined to retrace his steps and acquire the M.B. of the University of London. It necessitated his passing the matriculation examination, but this he accomplished with little trouble, owing to the excellent grounding he had received in his school education. He took his M.B. in 1848. But in 1847 he had gained some useful experience of general practice in consequence of the death of his chief. He kept the practice together and was able to sell it for the advantage of the family. Wilks took his M.D. in 1850, became a member of this College in 1851, and was fairly launched on his clinical consultant career in 1853, when he became physician to the Surrey dispensary. In 1856 he was made a fellow of this College and was appointed assistant physician to Guy's hospital. He was on the active staff of that hospital till 1885, and during that time was one of the most indefatigable teachers in the *post-mortem* room, the museum, the lecture theatre, and the wards. He may be said to have started the systematic

and practical teaching of morbid anatomy. The regular *post-mortem* examinations date from his time, and they became regular, largely owing to his enthusiasm and tenacity. But it is equally important to recall that the systematic clinical note-taking for which Guy's hospital has justly held so high a place was largely initiated by Wilks under the fostering care of Benjamin Harrison, the enlightened but despotic treasurer of those days. We may say that for nearly thirty years Wilks represented and embodied at Guy's hospital the important combination of a great morbid anatomist and a great clinical physician and teacher.

With respect to his other activities it may be mentioned that he lived first in the Borough, then at Grosvenor Street till 1901, the time of his retirement from practice.

Wilks had married, in 1854, Mrs. Pryor, the widow of his old chief. He had no children. He was one of the pillars of the Pathological Society, of which he was president 1881 to 1883, and to the *Transactions* of which he contributed very largely.

He was also president of the Neurological Society, and to *Brain* he made several contributions. He was a member of the Senate of the University of London for some years before its reconstruction, and he was a member of the General Medical Council in 1887.

He was made a fellow of the Royal Society in 1870. In 1879 he delivered the Harveian oration to this College, and in the same year was appointed physician to the Duke and Duchess of Connaught.

In 1897 he received the honour of a baronetcy and was appointed physician extraordinary to Queen Victoria. In the same year he was Moxon medallist for clinical medicine. What he himself described as the crowning honour of his life was the presidency of this College, to which he was appointed in 1896, and which he held till 1899.

Let us briefly review Wilks's contributions to medical

literature. His lectures on Pathological Anatomy were first published in book form in 1859, and it is of the work in its original form that many of us have the most vivid recollection. We can never forget how the author plunged at once *in medias res* and brought us, so far as it was possible for any book to do so, into direct contact with the concrete findings of morbid anatomy. Who can forget the delight of escaping from transcendental and speculative discussions and wearisome bibliographical details to the simple terse descriptions of what could be seen and handled? This book was the outcome of the *post-mortem* room, the museum and the wards, and, let us add, of the meetings and the *Transactions of the Pathological Society*. There is the personal note of verification or judicial statement in every line of the book. The second edition, in which Moxon collaborated, was considerably altered by the interesting but more speculative additions of Wilks's colleague. But in the third edition, which appeared in 1889, three years after Moxon's death, Wilks revised and re-wrote several of the chapters, and restored the book to its original concrete type, and it will have an abiding place in medical literature as an embodiment of sound observation and wise reflection.

The lectures on diseases of the nervous system, of which the second edition appeared in 1883, do not make such an outstanding book as the "Pathological Anatomy"; nevertheless they constitute a most useful survey of this branch of medicine from the point of view of the all-round general physician, and the short intercalated clinical illustrations make the volume both interesting and practical.

The annals of Guy's hospital, in which he collaborated with G. T. Bettany, is a most interesting piece of hospital and medical biography. The accounts of the great physicians and surgeons of Guy's hospital in the nineteenth century, written by Wilks, are very valuable. But this book is not nearly so important as the auto-

biographical reminiscences which were actually passed through the press during his last illness, when Wilks was lying on his bed with paraplegia, and for the careful collation of which this College is indebted to the pious care of Sir Bryan Donkin.

In these reminiscences Wilks goes systematically through those volumes of the Guy's Hospital Reports with which, from near the outset, he was connected, and brings up the record of his own intellectual activity till nearly the close of his life. It is a splendid *apologia pro vitâ suâ*, a great justification for the place which morbid anatomy holds in the study of medicine and a dispassionate eulogy of the scientific achievements of his alma mater of which he was himself one of the greatest ornaments.

With singular justice, lucidity and proper iteration he brings into relief the discoveries and important observations made by his great predecessors, contemporaries and juniors. The essential note of the immortal work of Bright, Addison, and Hodgkin have never been set forth with greater discrimination. But it is very instructive to see how Wilks himself expounded and then broadened and added to the discoveries of his great masters. The work of Hilaro Barlow, Hughes, Babbington, Pavy, and Hilton is justly estimated, and the important investigations in which Gull anticipated some of the later pathological researches of the French School on diseases of the spinal cord are recorded.

His characteristic appreciation of good work done by his younger brethren is also well illustrated in these reminiscences.

Time would fail to enumerate even a tithe of Wilks's papers, including a very large number of contributions to the *Transactions of the Pathological Society*. But I should like to mention that a very valuable bibliography of his published writings has been compiled by Mr. William Wale, the Librarian of Guy's hospital to which I will refer you. And now let us ask what important

additions were made by Wilks to the sum of medical knowledge ?

First and most important was his identification of the visceral lesions of syphilis. His earliest paper on the subject appeared in the ninth volume of the Guy's Hospital Reports in 1863. This paper Wilks considered the most important one he ever published. Although exposed to a certain amount of criticism and incredulity he followed up the subject in successive volumes of *Transactions of the Pathological Society* and it was mainly for this work that he received in 1870 the fellowship of the Royal Society. Wilks established specific changes not only in the viscera but in the aorta, culminating in some cases, especially young adults, in aneurysm, and also in the middle-sized arteries. In Clifford Allbutt's important paper in 1868, specially dealing with syphilitic changes in the cerebral arteries, Wilks's observations were quoted. Wilks had been greatly impressed by Bright's brief but pregnant observations on epileptoid seizures with limited convulsion and absence of loss of consciousness, suggesting localized disease of the brain, and he published examples of localized syphilitic disease of the cerebral membranes and the contiguous surface of the brain in further amplification of Bright's suggestion.

As I have already stated, Wilks made important additions to our knowledge of Bright's disease, Addison's disease, Hodgkin's disease and lardaceous disease. He drew attention to the fatty degeneration of the heart in pernicious anæmia ; he also first described the painful paresis of the limbs which sometimes occurs in alcoholic subjects, and he made the all-important clinical observation that this was capable of complete recovery if the alcohol habit was entirely stopped. Moreover his paper on arterial pyæmia formed an important link in the chain of knowledge which has been gradually constructed of the natural history of ulcerative endocarditis ; for before this paper was published the cardiac lesion

was often ignored, and these cases were sometimes misinterpreted as malaria.

Wilks also made some very interesting observations on children's diseases. He was one of the earliest teachers to carefully discriminate between the different forms of meningitis. He assisted Hilton in his investigations of the special group of cases of meningitis affecting the posterior base and leading to closure of the cerebrospinal foramen and he traced cases of chronic hydrocephalus arising therefrom and showed clinically how latent some of these cases became, and how liable they were to sudden death from very slight causes.

Now it was sometimes said that Wilks was too much of a sceptic as to treatment to be a successful physician. But this is an unfair charge. He was, it is true, somewhat contemptuous of theoretical lines of treatment for which there was no adequate basis, but he was of the school of what I may call rational empirics, who frankly accepted and fully utilized definite therapeutic sequences. It is important to recall that his discoveries of visceral syphilis led to the intelligent employment of iodide of potassium in many such cases with brilliant results. The use of bromide of potassium for hysterical seizures was, it is true, first introduced by Locock, but Wilks made a series of observations on its employment for idiopathic epilepsy and showed that it was definitely superior to the iodide.

It is not true to say that Wilks's bias towards morbid anatomy interfered with his therapeutic resource. He knew his morbid anatomy so well that he knew its limitations, and he recognized that the *post-mortem* findings were not the disease itself but residua of the disease. He resented the tendency to describe diseases by pathological names. His view about nomenclature was that it ought in no way to unduly limit the conceptions of disease and still less to block new lines of investigation. He indeed preferred clinical descriptive terms which had no finality as the designations of

disease, and he quite recognized the advantage even of giving a "personal name" to any well-marked group of symptoms as a provisional designation at all events. As an example of Wilks's caution in respect of the right sort of nomenclature might be mentioned his protest against the use of the term myxœdema, which he insisted only connoted one feature of the malady in question and that by no means an essential or important one.

His pupil and colleague, Dr. Frederick Taylor, has given a very discriminating account of Wilks's characteristics as a clinical teacher, from which I venture to quote. He showed remarkably quick insight into the nature of a case, and gave a rapid demonstration of its salient features. He took a broad view of it, and was content to leave the details of the physical signs to be worked out in further elucidation by the medical registrar. He drew upon a large experience, both in private practice and in hospital, and was specially interesting in setting forth the pathological affinities of any given disease. Wilks was not a catechist but was par excellence a teacher for senior students. As president of the Pupils' Physical Society he kept himself in touch especially with the senior men, long after he had ceased to be physician at the hospital, and he was delighted to see and talk with Guy's men, young and old, to the very last.

He was somewhat discursive as a speaker, and gave little thought to rhetorical arts. And although he was not the least academic he was always suggestive, shrewd and piquant, and his yearly addresses when president of this College will never be forgotten for their just and racy appreciations. He always gave warm and generous recognition to the work of his younger brethren, especially on the pathological side. And he was always young himself in his readiness to investigate whatever lay next to him or crossed his path. He was grateful for all that life had brought to him. It has been said that he had the genius of observation and I think he had also the

genius of friendship, for he was idolized by his students, beloved by his disciples not only of Guy's but of every school in London, and implicitly trusted by the fellows of this College. Why was he trusted? Because the dominant features of his character were his simple love of truth and his transparency and candour, and although so generous in recognizing real merit he would never flatter and would never descend to the arts of finesse.

He was a staunch liberal in religion in politics and in medical politics, but he saw too many sides to every question to be a partisan.

When full of years and of honour, he resigned the presidency of this College, relinquished his professional work and retired to Hampstead; he still remained a keen observer and still maintained his friendships and all his interests, especially in his beloved Guy's.

During the last six years he suffered a great deal, and underwent two capital operations from which he made good recoveries. He had the devoted attention of his old colleagues. It is quite characteristic that after his second operation, when he was desperately ill, he said he must really try to get well or it would be such a bitter disappointment to Mr. Symonds.

During the last ten months of his life he was paraplegic, and during the last six months confined to his bed, when he had the unremitting care of his friend, Mr. Jessop. His life closed on November 8, 1911, with apoplexy and unconsciousness. He had been brave and cheerful and unselfish to the end, and as we gathered round his grave in the Hampstead cemetery it was hard to realize that never again should we see that fine form and noble head and silvery hair; but we all knew "that a prince and a great man had fallen this day in Israel."

EDMOND FAURIEL TREVELYAN.

EDMOND FAURIEL TREVELYAN was born at Warwick in 1859. He was educated at St. Bartholomew's hospital, took his B.Sc. of the University of London in 1885, his

membership of the College of Surgeons in the same year, his M.B. in 1886 with honours, and his M.D. in 1887. He studied in both Vienna and Berlin; was house physician at the Seamen's hospital, Greenwich; settled in practice in Leeds; became a member of our College in 1893, and was elected to the fellowship in 1901. He held for several years the post of professor of pathology at the Leeds Medical School, the duties of which he discharged with great energy and effectiveness. Dr. Trevelyan was keenly interested in tuberculosis, especially of the nervous system; and on that subject he gave the Bradshaw lecture at this College in 1903. During his work as a hospital physician he devoted himself heart and soul to the antituberculosis campaign. He was a patriotic citizen, and besides being a city magistrate he helped forward the medical side of the Territorial movement. It was indeed while so engaged at Aldershot that the illness from which he died became manifest, and when he passed away on December 11 at the early age of 52 all his fellow-townsmen, as well as his colleagues, realized that they had lost a man of great public spirit and varied activities, as well as an able and thoughtful physician.

CECIL YATES BISS.

CECIL YATES BISS spent some of his early life in New Zealand. He was educated at Downing college, Cambridge; and after taking a first class in the Natural Science Tripos, he entered at St. Bartholomew's hospital; he took his membership of the College of Surgeons, and his M.B. in 1880; he became doctor of medicine in 1884; and was elected to our fellowship in 1889. He was physician to the Brompton Consumption hospital, and physician for out-patients to the Middlesex hospital, and he held the post of lecturer on pharmacology and therapeutics at the medical school. He wrote some interesting papers on the treatment of basic cavities of

the lung, and other subjects. He was keenly interested in the Home for the Dying. He was a man of high character and deep religious sympathies. His professional activities were brought to a sudden close by the onset of paralysis agitans twelve years ago. His wife predeceased him, and one son, who was a most promising young doctor, was also snatched away from him by sudden internal hemorrhage, but Biss was patient and courageous to the last and showed real christian fortitude in spite of his bodily weakness and many trials.

WILLIAM HENRY ALLCHIN.

WILLIAM HENRY ALLCHIN was the son of a doctor, and belonged to an old Kentish family from which many doctors had sprung. He was born in Paris in 1846, but most of his life was spent in London. He entered the medical school of University College in 1865, and took the M.R.C.S. and L.S.A. in 1869, and the M.B. of the University of London in 1871, obtaining the University scholarship in medicine. He did not take his M.D. till 1892.

He never held any resident post in the hospital, and I suspect that that was partly due to his health, which even in those days, was far from robust.

His sympathies seemed to lie, for a time at all events, in the direction of comparative anatomy; and he was a successful junior lecturer on this subject for a few years at University College, and also assisted Dr. Michael Foster in the class of practical physiology. He also became medical officer and subsequently advisor to the "Great Eastern," which was at that time engaged in Atlantic cable work.

These experiences gave Allchin an interesting link with the United States, and indirectly led to his happy marriage in 1880 to Margaret, the daughter of Mr. Alexander Holland, of New York.

His activities, both at this period and indeed always, were considerable, for in 1872 he began his connection with Westminster hospital by taking the post of medical registrar with which was associated the duty of making *post-mortem* examinations. He was also demonstrator of practical physiology. In 1873 he became assistant physician, in 1874 sub-dean, in 1877 physician, in 1878 dean, and in 1890 again dean. During this time, at different periods he had lectured on pathology, on physiology and on medicine. He became also a very successful clinical teacher of the deductive type, and his logical method and clear incisive exposition gained for him the warm appreciation of several generations of students. He was devoted to the interests of the hospital and the school, and when consulting physician he was still ungrudging in service to both those institutions, and proved himself always a wise and reliable councillor. He also retained a warm affection for his old school, and greatly prized the honour of being made a fellow of University College.

Allchin was elected a fellow of the College of Physicians in 1878; he was Bradshaw lecturer in 1891; Harveian orator in 1903; Lumleian lecturer in 1905; examiner, councillor, censor and finally senior censor in 1904. But he also filled the somewhat arduous post of assistant registrar from 1883 to 1886, during which period he relieved Sir Henry Pitman of a great deal of the brunt of the work concerned with the conjoint system of examination, which was started in this building. The period of Allchin's assistant registrarship was a stirring time. The disabilities of London medical students were first prominently brought before this College by Dr. Wilson Fox and others; and as the result of conferences between the two Colleges there was a strong movement created to support an application to be made to the Crown by the College of Physicians and the College of Surgeons acting together, for authority to confer a medical and surgical degree. Sir William Jenner, then president,

and a large majority of the fellows of the College gave in their adhesion to this proposed scheme. Allchin, though warmly in favour of co-operation between the University and the Colleges, was opposed to this somewhat revolutionary step, and he resigned his office in order to gain absolute freedom in maintaining his opinion. His self-sacrifice and his foresight were thoroughly justified, for in spite of the strong representations made in support of the petition, it was dismissed on account of its subsequent condemnation by Lord Selborne's University Commission.

But from this time forward Allchin gave unremitting attention to the subject of the reconstitution of the University of London. He became the secretary of the University committee appointed by this College, and when, at length, the University was reconstituted, his devoted labours were acknowledged by a vote of our College and a handsome honorarium.

He and Dr. Pye-Smith were the first representatives of our College on the new Senate. He always strove for the association of the University with the Colleges in examinations for medical degrees ; and, although the provisional suggestions for a joint pass degree in Medicine, of which he was the mouthpiece, proved not to be acceptable, either to the University or to this College, yet his advocacy of the general question was always weighty and effective ; and, I am confident, will in the long run bring forth good fruit when the enormous difficulties of vested interests can be overcome. It is right to mention that Allchin published a valuable historical digest of the somewhat complicated evolution of the University of London, and that at the special request of the present University Commission he brought this work up to date.

Allchin was a member of the Medical Consultative Board to the Admiralty, and for a considerable time was an examiner for the Medical Department of the Navy and Army, and likewise the Indian Medical Service. It was largely in consideration of his valuable public work

that he received the honour of knighthood in 1907; when his present Majesty came to the throne, Sir William Allchin was appointed physician extraordinary.

Allchin's literary output included several papers and addresses in the Westminster Hospital Reports, and articles on abdominal disease to Quain's Dictionary and to Allbutt's "System of Medicine," and he edited a very useful manual of medicine, in which he called to his aid many of the younger physicians. It is wonderful that he should have done so much when we recall his indefatigable industry in so many departments of work. His intimate association, in the early part of his career, with physiological teaching gave a strong bias to his medical writings and lectures, especially those connected with digestive processes and nutrition generally. He expressed himself in a clear and incisive way and wrote excellent English. He was always listened to with the greatest respect in this College, because he was a man of strong convictions who never fought for his own hand, and who cherished the high traditions of the College and lofty ideals of medical education and medical policy. He was sensitive and reserved, and felt keenly any setback to the causes for which he strove. He lived a full life, and fought a good fight with a heavy handicap of poor health, but he carried this with rare courage and quiet dignity.

He enjoyed his country home in Kent, where his forbears had lived for many generations, and thither he retreated during his last illness. He passed away after a serious operation, and, as was singularly fitting, a funeral service was held in the chapel of Westminster hospital, for which he had given so large a share of the best energies of his life.

He was buried at East Malling in Kent, in the churchyard where lay many of his old kinsfolk.

And now it only remains for me to acknowledge the unvarying courtesy and invaluable help of my brethren

of the Censors' Board, the Registrar, the Emeritus Registrar, the Treasurer and the Harveian Librarian.

And I have to thank the fellows of the College for the care and thoroughness with which they have addressed themselves to the perplexing questions which have occupied our attention during the last year.

John Bale, Sons and Danielsson, Ltd., 83-91, Great Titchfield Street, W

THE ANNUAL ADDRESS

DELIVERED TO THE

ROYAL COLLEGE OF PHYSICIANS

On March 17th, 1913

BY

THE PRESIDENT

SIR THOMAS BARLOW, BT., K.C.V.O., M.D., F.R.S.

London

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OXFORD HOUSE

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PRESIDENTIAL ADDRESS.

ON the College List there are at present 334 fellows as compared with 345 a year ago, 506 members as compared with 497, two extra licentiates and 12,220 licentiates as compared with 11,940.

During the year 1912 eighteen fellows, seven members and ninety licentiates have died. Seven members were elected fellows and one non-member was elected—in all eight new fellows ; fifteen licentiates were elected to the membership ; two members resigned their membership ; three gentlemen who had for personal reasons resigned their membership had at their request the membership restored to them ; one licence was withdrawn.

The King's birthday honours for 1912 were conferred as follows :—Dr. StClair Thomson, fellow of this College, received the honour of knighthood ; Dr. Horton Smith Hartley received the honour of C.V.O. ; Dr. Alexander F. Bradshaw, member of this College, received the honour of K.C.B. ; J. Bland Sutton, licentiate of this College, received the honour of knighthood ; W. N. Barron and C. H. James, licentiates of this College, received respectively the honour of M.V.O. and C.I.E.

At the New Year, 1913, George Turner, M.B., licentiate of this College, received the honour of knighthood in acknowledgment of his great services to public health in South Africa, and in particular on account of his self-denying work in the treatment of leprosy. The Moxon gold medal for distinction in clinical medicine was awarded to Sir David Ferrier, M.D., F.R.S. The Weber-Parkes medal was awarded to J. A. D. Radcliffe, M.D.

The Murchison Memorial Scholarship was awarded by our College to W. Rees Thomas, M.D., Philip Hamill and E. D. Schlesinger being honourably mentioned. The Jenks Medical Scholarship was awarded by the College of Surgeons to Graham S. Wilson.

The Harveian oration was delivered on St. Luke's Day by Sir James F. Goodhart, Bart. The subject was the "Passing of Morbid Anatomy," and the orator showed how the outlook of pathology and medicine was becoming gradually transferred from disease of structure to faults of function.

The lectures delivered to the College have been, in chronological order :—The Oliver Sharpey lectures on some recent researches on malaria, by Sir Ronald Ross ; the Lumleian lectures on some moot points in the pathology and clinical history of pneumonia, by Dr. Percy Kidd ; the Croonian lectures on the pathology of immunity in relation to aggressins, by Leonard Dudgeon, F.R.C.P. ; the Bradshaw lecture on the diagnosis and treatment of incipient pulmonary tuberculosis, by Dr. David Bridge Lees ; the Fitzpatrick lectures on "Echoes of Pestilence in Literature and Art," by Dr. Raymond Crawfurd ; the Horace Dobell lecture on the insect porters of bacterial infection, by Dr. C. J. Martin ; the Milroy lectures on the etiology of endemic goitre, by Major McCarrison, M.R.C.P.; the Goulstonian lectures on death by lightning and electric currents, by Dr. A. Jex Blake ; the Lumleian lectures on intrathoracic aneurysm, by Dr. de Havilland Hall.

The president represented the College at the celebration of the 250th anniversary of the Royal Society, and presented a congratulatory address from the College.

The president and treasurer represented the College at the bicentenary festival of the medical school of the University of Dublin (Trinity College) and presented an address. The honorary M.D. was conferred on the president. The Sc.D. was conferred upon Sir William Osler, Dr. Starling and Professor Adami. The president,

the senior censor (Dr. Mitchell Bruce), Dr. Norman Moore, Dr. Saundby and Dr. James Mackenzie were made honorary fellows of the Royal College of Physicians of Ireland, and Sir George Savage was made a member of the Royal Academy of Medicine of Ireland. The only fresh appointment made has been that of Sir George Savage as representative of the College on the Committee of the Chelsea Physic Garden, in place of the late Sir William Allchin.

GIFTS TO THE COLLEGE.

Lady Allchin has presented to the College a silver bowl, and an M.D. gown which belonged to the late Sir William Allchin.

The president of the College of Surgeons (Sir J. Rickman Godlee, Bart.) two clinical thermometers which belonged to the late Lord Lister.

The Lady Davey and the Hon. Mrs. Pember, two engravings representing resuscitation from drowning, in which the late Dr. Hawes and Dr. Lettsom are figured.

The president has presented to the library a collection of eleven autograph letters of Harvey, for which gift the College returned thanks to him in a short Latin address, engraved on vellum, and sealed with the College seal. (*See* Annals 186, 189, 190, vol. xlvii.)

At the request of Dr. Mansel Sympson (of Lincoln), and on the recommendation of our Museum Committee, the College has given to the museum of the city of Lincoln a collection of ancient pottery presented to the College in 1885 by the late Dr. O'Neill of that city.

LIBRARY.

The Library Committee reported to us on July 9, 1912, that the works of John Caius have at length been issued at the joint expense of this College and Gonville and Caius College, Cambridge. Also the new printed catalogue of

our library has been published and can now be obtained by the fellows.

CENSORS' BOARD.

The attention of the College was called to the unsatisfactory working of the by-law 179 which forbade the assumption of the title of doctor by any diplomate of the College not possessing a university degree of M.D. This matter was specifically referred to the Censors' Board for report. It was then recommended to the College to alter the by-law in such a form that whilst it still forbids non-graduates to use letters or title indicating a university degree, it no longer forbids them to use the courtesy title of doctor. This recommendation was accepted and the alteration of the by-law was duly carried at two separate Colleges. I sincerely trust that the removal of this grievance will prove satisfactory to our licentiates. The alteration made in the by-law is precisely that which was proposed by the Council in 1905, but was not accepted at that time by the College.

The name of a licentiate of the College has been removed from the medical register in consequence of a conviction for felony. The Board expect to report to the College on this case in April next.

COMMITTEE OF MANAGEMENT AND GENERAL MEDICAL COUNCIL.

Certain new rules laid down by the General Medical Council with reference to the diploma of public health were referred by the College to the Committee of Management. The committee recommended their adoption with one important exception, viz., that the period of six months' laboratory instruction required by this College should still be maintained and not reduced to three months.

Sir Henry Morris was appointed to visit the examinations of the Egyptian School of Medicine last winter.

A member of this College being desirous of taking the membership of the College of Surgeons asked whether he could do this after passing in surgery and midwifery without passing the examination in medicine for the licence.

The College, considering the agreement made between the College of Physicians and the College of Surgeons, according to which neither the M.R.C.S. nor the L.R.C.P. can be granted independently of the other, decided that the request of the above member could not be granted, and resolved that the diploma of membership of this College cannot be used as an equivalent for any part of the examination of the Conjoint Board; that examination being regulated by a definite agreement between this College and the College of Surgeons of England.

EXAMINATION HALL BUILDINGS.

The examination hall has been in use since May last and has proved satisfactory. We have been obliged to pay heavy compensation for damages to the neighbouring buildings, viz., £563 11s. 6d. to St. John's House, and £510 to No. 7, Queen Square, and we have had some trouble with leakage of water into our sub-basement.

CONJOINT FINANCE.

The total receipts show an increase over those of the previous year of £2,443 8s. The total expenditure shows a decrease of £146 19s. 8d., giving a nett increase of the sum divisible between the two Colleges of £2,590 7s. 8d.

COLLEGE FINANCE COMMITTEE.

The details have been submitted to the College, and it is only necessary at present to refer to the following items :—

The salary of the assistant librarian has been raised and now stands at £160 1s. per annum.

A subscription of 5 guineas a year has been given to the Chelsea Physic Garden.

A donation of 20 guineas has been given to the Lister Memorial Fund.

NOMENCLATURE OF DISEASES.

Preparations have been commenced for the issue of a new edition of this book due in 1916. A general committee for the revision of the work was appointed at the July meeting of the College. This committee met and appointed revisors of the various sections, and a sub-committee on classification with executive powers, of which Dr. Frederick Taylor is chairman and Dr. Leonard Guthrie secretary. This committee has already held several meetings.

NATIONAL HEALTH INSURANCE ACT OF 1911.

Even at the risk of wearying the College it is my duty to recapitulate the steps taken by this College with regard to the Insurance Act. And I must first recall that after the resolutions passed by the committee appointed to consider the Bill were accepted by the College, they were sent to every member of Parliament, and that, subsequently, our committee having done its work, ceased to exist. After the Bill had become an Act we were requested by the Commissioners to assist as a corporate body in the formation of the Advisory Board. This we found ourselves unable to do, but we offered to give our help if the Government should see fit to pass an amending Act. No doubt our action may have seemed nugatory, but I think it is by no means certain that it was, and, at all events, it made our position clear.

In January, 1912, we appointed another committee to watch the interests of our licentiates under the provisions of the Insurance Act, with power to confer with any other body established for similar purposes should the committee see fit to do so. This committee conferred with representatives of the College of Surgeons, of the Society of Apothecaries, and of the English Universities. The conference recommended to the various constituent bodies that they should sanction the formation of a joint committee for watching the interests of the medical profession in regard to the Insurance Act, and for considering alternative methods of attaining the objects of the medical portion of the Act. This sanction was given. In the course of its deliberations the joint committee decided to invite the members of the medical and surgical staffs of the London hospitals to deliberate and vote on a pledge tendered by the British Medical Association which would commit those who signed it to certain lines of action with regard to the treatment of assured persons, such action to come into operation when determined by local committees of the British Medical Association. The pledge was adopted by a very large majority. The decision was reported to the College, but, I am thankful to say, the acceptance of the pledge was never urged upon the licentiates by the College.

It is not my place to dwell upon the disastrous results of the widespread adoption of the pledge, for, as I have said, we had no kind of responsibility for it as a corporate body.

In the gradual emergence of a *modus vivendi* on this difficult measure, we may, I think, be thankful for two results :—

(1) That for the sake of the public and for the sake of the medical profession, it has not been found necessary to establish a state medical service ; and

(2) That the attempts to graft trades union methods on the medical profession of this country were proved to be by no means *encouraging*.

In October, 1912, certain provisional regulations were issued by the Commissioners which appeared to us unsatisfactory. We drew attention to the impropriety of publishing detailed reports of the ailments of insured persons and the danger of damaging the reputation of medical men in adjudicating on their professional conduct in mixed tribunals. These regulations were subsequently improved.

Complaints by certain licentiates in respect to interference with their power of dispensing to insured patients have been brought before the College, and these complaints have been carefully considered both by the College and the joint committee. We have been obliged to reply that the College is powerless in the matter, though it made certain recommendations on this subject in the early consideration of the Bill. It is inevitable that if licentiates voluntarily accept service under the Act, they must be prepared to forego their right to dispense for insured patients except as provided for by the Act. The joint committee has been recently urged by the College to reconsider its last formal resolutions, and to see how far they can be driven home. At present the joint committee is endeavouring to ascertain how far the present methods of administration of the Act are satisfactory, whether the clerical work can be still further diminished, and whether the regulations are sufficiently elastic to be capable of adjustment without fresh legislative enactment. We have further considered in the College some of the conditions of the tuberculosis benefit in relation to medical education. Dr. Tyson brought before the College the great importance of associating the treatment of tuberculosis in all its phases with already existing school hospitals, in order that medical students might have free access to the study of the disease and of its treatment. He pointed out the real risk that under the Insurance Act tuberculosis cases might be so far withdrawn from general hospitals that medical education might greatly suffer. An important

debate followed, and we re-appointed our College Insurance Bill Committee with the addition of Dr. Tyson, and with Dr. Habershon as secretary. This Committee had several meetings, and submitted the following resolutions :—

(1) That the general hospitals with medical schools be advised each to establish a department for tuberculosis, such department to form part of the general service of the hospital.

(2) That the hospitals with medical schools should consider the advisability of applying for provisional approval as regards sanatorium benefit.

(3) That in localities where it is possible the services of hospital physicians and surgeons should be utilized for consultation in cases of tuberculosis under the Insurance Act.

The College adopted the report, and resolved that it should be sent (1) to the general hospitals which have medical schools attached to them ; (2) to the Insurance Commissioners and to the Local Government Board.

The Committee also recommended that its members should be appointed as a watching committee to consider any future insurance regulations on the subject of tuberculosis in their relation to medical education.

It is satisfactory to note that the school hospitals in London and the special chest hospitals have bestirred themselves on this subject, and that already some progress has been made in the directions indicated by the above resolutions.

OBITUARY NOTICES.

JOHN DIXON MANN.

JOHN DIXON MANN died on April 6, 1912, aged 72. I am indebted to Dr. Brockbank of Manchester for his very careful and conscientious account of Dr. Mann's life and work, published in the *Medical Chronicle*.

Dixon Mann was born at Kendal and received his early education at the Friends' School in that town, which had been originally founded by the celebrated chemist, John Dalton, and his brother. It is pretty certain that Dixon Mann's school education gave a useful bias to his scientific mind and that it had great influence upon his professional career. He was apprenticed to a doctor in Kendal and entered the old School of Medicine in Pine Street, Manchester, from which institution he took the M.R.C.S. and L.S.A. in 1862. He became assistant to a medical man in Portland Street, Manchester, and ultimately bought his practice, which he worked for twenty years, until his appointment as honorary physician to the Salford Royal hospital.

During the time of his general practice he was working at chemical and physical experimentation as well as modern languages, and he was specially interested in the demonstration of acoustic phenomena and in the elaboration of practical electrical methods. He took his M.D. at St. Andrews in 1880, and became a member of our College in the same year, and in 1890 was made a fellow of the College.

From 1882 till his death Dixon Mann was physician to the Salford Royal hospital, a post which he filled with the greatest devotion and enthusiasm. During this time he not only performed the duties of a clinical physician and a busy consultant, but he worked with considerable success at chemical methods in diagnosis, and also at the practical recognition of poisons. He became, in 1885, lecturer on forensic medicine in the medical school of Owens College, and was very successful with his laboratory demonstrations, introducing many original practical methods of his own.

Dixon Mann was appointed examiner in forensic medicine in succession at the Universities of London, Oxford, and Sheffield, and he wrote two books, one a manual of toxicology which went through four editions, and another on the physiology and pathology of the

urine. But he so cordially disliked the court work of a medico legal expert that, in spite of his eminence on the practical side of forensic medicine, his name did not often appear in the papers. His most important contribution to toxicology was an experimental research on the mode and therapeutics of the elimination of lead in chronic lead poisoning. He showed that the daily elimination by the fæces was from five to ten times that by the urine, and that when once deposited in the tissues, lead exists in stable compounds over which drugs have little, if any power; to baths, general massage, fresh air and good food he attributed the chief improvement. Iodide of potassium in the chronic cases, he maintained, did not promote the elimination of lead.

Dixon Mann made some very interesting additions to knowledge during the epidemic of arsenical beer poisoning at Manchester, by his discovery that in these cases there was great affinity of arsenic for the keratin tissues in which the posion could be identified long after its administration by the mouth had been stopped.

Dixon Mann was an industrious member of the Senate of the Victoria University and represented that University on the General Medical Council. He was a man of such sound judgment, scientific method and high character that he was always regarded as a tower of strength among his professional brethren. He was a very able musician, both a composer and performer of church music and an authority on organ building.

We had appointed him Croonian lecturer at this College for 1914 and he had begun, with great enthusiasm, to prepare his course of lectures, the subject of which was "Altered Metabolism," but it was not to be.

Dixon Mann was married to the daughter of the Rev. Richard Bassnett of Gorton, near Manchester, but his wife and only child predeceased him.

It is in accordance with the whole tenure of his life that he left considerable benefactions to the University of Manchester and to various medical and charitable

purposes, but the residue of his property was given to the Salford Royal hospital of which he had been a devoted physician for thirty years.

WILLIAM OGLE.

WILLIAM OGLE died at his home at 10, Gordon Street, on April 12, 1912, aged 85. He was the fourth son of Dr. J. A. Ogle, Regius Professor of Medicine in the University of Oxford.

He was educated at Rugby and Corpus Christi, Oxford, of which college he was a scholar and fellow. In order to hold his fellowship it was necessary that he should be ordained, but he soon relinquished orders and began the study of medicine. He subsequently entered St. George's hospital, became a member of our College in 1859, M.D. in 1861, and was elected to our fellowship in 1866.

He was appointed lecturer in physiology to the St. George's Medical School, and in 1869 assistant physician to the hospital. He had only embarked for three years on what promised to be a brilliant career as a teacher and a physician when he was obliged to relinquish his work because of ill-health. He became medical officer of health for South Herts, and an examiner in natural science at Oxford.

In 1880 Sir George Buchanan, having been struck by the evidence of Ogle's ability and breadth of view, obtained for him the succession to the post which had been created and held by Dr. Farr of the General Register Office. And with this date began Ogle's career as a great health statistician.

Besides elaborate census reports, he completed a new expectation of life table and a great many valuable articles on the age and sex incidence and the geographical distribution of various diseases. He contributed valuable data on the subjects of vaccination, the health of school children, and on the apparent increase of malignant disease. He was one of the pioneers of the measure

for destroying stray dogs as a preventive against hydrophobia. He served on the Royal Commission on Metropolitan Water Supply, and made successful efforts to secure greater detail in death certificates. Apart from his official obligations he was most zealous in integrating the conclusions obtained in his great department which might prove helpful in the advance of public health.

Ogle was a ripe and accurate scholar from first to last, and in everything that he touched. In 1882 he published a translation of Aristotle on the "Parts of Animals" with an elaborate introduction and commentary, and fifteen years afterwards he returned to his beloved author and published translations of the treatises on respiration, youth, and age, and on life and death.

Ogle was also an able botanist and translated Kerner's "Flowers and their Unbidden Guests."

He was a man of dignified presence and commanding figure, a powerful and trenchant talker and endowed with a great capacity for friendship. He had strong links in common with some of the exponents of the positivist school of philosophy.

He was married to Miss Block of Highgate; they had no children, and his wife died before him. In his later years he was a martyr to osteo-arthritis, but he bore his afflictions with fortitude, and the love of learning was his to the end.

Though his work was done we could ill spare from our ranks so rare and rich a scholar.

DR. AUGUSTUS DRAKE.

Dr. Augustus Drake, formerly of Exeter, who died on May 9, 1912, aged 91, was, in point of age, the oldest fellow on our roll. He was born at Norwich, and received his early education there and at Oxford; but he subsequently entered at Caius College, Cambridge, and studied medicine at St. Bartholomew's hospital, London, and at the Norfolk and Norwich hospital.

For thirty-five years he lived at Exeter, where he held an honoured position in the west of England as one of the leading consultants. He relinquished practice thirty years ago and thenceforth resided in Exmouth.

Dr. Drake was married to a lady of his own name and left two sons and two daughters.

THOMAS HOUGHTON WATERS.

THOMAS HOUGHTON WATERS died at Liverpool, June 8, 1912, aged 86 years. He was born at Northampton in 1826, and after studying at Mr. Lane's school of anatomy and at St. George's hospital, in 1852 took his membership of the College of Surgeons and became house surgeon to the Liverpool Royal infirmary, where he laid a broad foundation for his subsequent clinical experience. In addition to his practical work in medicine, he was, throughout his career, devoted to physiological and anatomical investigation, and in 1859 he obtained the Fothergill gold medal of the Medical Society of London for his essay on the structure of the human lung. This probably determined his chief life work on the diseases of the chest. In 1859 he became M.R.C.P. In 1861 he took his M.D. at St. Andrews, and in 1867 he was elected a fellow of our College. He became physician to the Northern hospital at Liverpool, and subsequently physician to the Royal Infirmary, and he was for a considerable time professor of medicine at the University of Liverpool, of which indeed he was one of the active founders. He was closely connected with the British Medical Association, and was held in very high regard by all his colleagues and by the public of Liverpool, not only for his professional skill, but for his high code of honour and for his devotion to the advancement of education.

Dr. Waters leaves a widow but no family. Our colleague Dr. Caton speaks of him as the very type of a high-principled and cultured physician of the older

school, and the treasurer, who knew Dr. Waters many years ago at the Liverpool Infirmary school, refers to the remarkable feature, in those days, of his devotion to original work alongside of his hospital practice.

WILLIAM MURRELL.

WILLIAM MURRELL died June 28, 1912, aged 59. He was born in 1853, the son of a barrister, and was educated at Wimbledon, at University college, and University College hospital, London. He took the M.R.C.S. and L.R.C.P. in 1875, the M.R.C.P. in 1877, and the M.D. of Brussels in 1879, and was elected a fellow of this College in 1883.

I remember Murrell very well when he was obstetric assistant at University College hospital; he was closely associated at that period with Dr. Ringer, who found him a ready and enthusiastic helper in some of his pharmacological investigations. For a time he was Sharpey physiological scholar, and after he had held the post of clinical assistant at Brompton he was appointed, in 1877, medical registrar at Westminster hospital, and in 1883 was made assistant physician, and in 1898 full physician. He also served for a time on the staff of the Paddington Green Hospital for Children. He took his full share of teaching at the medical school of his hospital, and at the time of his death was lecturer on medicine; and he held, at different times, examinerships in materia medica at Edinburgh, Glasgow, Aberdeen, and at our own College.

Murrell, who was a most industrious worker, wrote a manual of pharmacology and therapeutics, one on forensic medicine and toxicology, and one on massage as a mode of treatment; the latter was translated into several languages. But he gained his greatest literary success by a small book called "What to do in Cases of Poisoning," which ran through ten editions.

Throughout his professional life he was devoted to pharmacology, and his most important service was the

introduction of nitro-glycerine as a remedy for angina pectoris. He was elected a laureate of the Academy of Medicine of Paris, and an honorary fellow of the Medico-Chirurgical College of Philadelphia on account of his pharmacological work.

Murrell was, from his student days onwards, somewhat shy and reserved, and had comparatively few friends among his own brethren. He was never married. He was keenly interested in his hospital work, and when his heart began to fail he still kept to his wards, and even after his breakdown with dropsy he hurried back to work when there was a slight improvement. His death occurred only after a week's confinement to bed, and it cannot be denied that his life was shortened by his devotion to duty.

REGINALD EDWARD THOMPSON.

Reginald Edward Thompson died September 10, 1912, aged 78. He was born in 1834 in London, and educated at Brighton College, Trinity College, Cambridge, and St. George's hospital. In 1860 he took his M.B. at Cambridge, and in 1861 accompanied Lord Milton on a shooting expedition in north-west Canada. This is of interest because it preceded the more important journey subsequently undertaken by Lord Milton and Dr. Cheadle, in which they crossed the Rockies, and were, in a sense, the pioneers of the great Canadian Pacific Railway.

In 1862, Thompson returned to St. George's hospital, took his M.R.C.P., and in the year afterwards his M.D., and served as medical registrar; he had there opportunities of studying an epidemic of typhus, concerning which he wrote a very careful paper in the *St. George's Hospital Reports*, and he wrote subsequent papers on typhoid and on paralysis of the extensors.

He was elected a fellow of this College in 1868, and in 1869 became assistant physician to the Brompton hos-

pital, and physician from 1880 to 1894. For two years he was also on the staff of the Seamen's hospital, Greenwich. He was secretary to the Royal Medical and Chirurgical Society in 1880, and vice-president in 1883.

Thompson's life work was practically associated with Brompton. He was a diligent, morbid anatomist and a careful draughtsman. He wrote on the causes and results of pulmonary hæmorrhage, and was inclined to attribute to hæmorrhage in the lung quâ hæmorrhage a larger share in the production of disease than subsequent investigations have substantiated. His most useful work was on family phthisis.

Thompson relinquished practice in 1894, and lived a somewhat retired life in his later years. He was married to a daughter of Professor de Morgan, and she predeceased him. He was a very cultivated man, fond of music and painting, and a very staunch friend, and keenly alive to the honour of the profession of which he was an ornament.

JOHN EBENEZER RANKING.

JOHN EBENEZER RANKING died, aged 62, at Bexhill, on September 11, 1912, a few hours after a severe motor car accident. He was educated at Aldenham school, then at Hertford College, Oxford, and at St. Bartholomew's hospital. After taking his qualifying examinations in 1874 and his M.D. at Oxford in 1879, he obtained the membership of this College in 1881 and was made a fellow in 1892.

He was married to the eldest daughter of Dr. Duncan, and leaves two sons and three daughters. His professional life was spent at Tunbridge Wells. He was appointed on the staff of the Tunbridge Wells hospital in 1880 and was senior physician there at his untimely death. He had a good family and consultant practice in the Tunbridge Wells district, and gained the warm esteem, not only of his fellow practitioners but of the public who, after his

death, started a memorial to commemorate his life work for the district.

Ranking belonged to the strong type of vigorous, masterful practitioner with no doubts about his diagnosis and lines of treatment. He threw his whole being into his work, and inspired and deserved the trust and devotion of rich and poor alike who came under his care and influence.

ANDREW DUNCAN.

ANDREW DUNCAN died October 17, 1912, aged 62. He was born in 1850, the son of Dr. James Duncan, a very shrewd family practitioner who lived in Henrietta Street, Covent Garden. Duncan was educated at Cholmeley School, Highgate, and entered King's College in 1868, where he had a very distinguished career. He took his M.B. at the University of London in 1874 and his M.D. in 1875; he also took the B.S. in 1876 and the fellowship of the College of Surgeons in 1877; and besides several hospital scholarships, obtained gold medals both at his M.B. and B.S. examinations. There were few of his compeers who held more hospital appointments, for he was house surgeon at King's College hospital under Sir William Fergusson, house physician at the Seamen's hospital, and successively medical registrar at Charing Cross, surgical registrar at King's, and afterwards medical tutor and pathologist at St. Mary's.

In spite of this brilliant hospital school record in London, he determined to devote himself to the Indian medical service. He obtained the Parkes medal at Netley, and in India he very soon obtained distinction while serving in the Afghan War of 1878-1880. In that war he was severely wounded in the back and chest at the battle of Charasiab, and it is more than likely that that grave injury materially damaged his health and was the indirect means of shortening his life. But Duncan was a courageous man who never spared himself, and he served in the Black Mountain Campaign in 1891, and ultimately arrived

at the rank of Lieut.-Colonel after he had been in the service for twenty-one years. Strange to say, in spite of his brilliant attainments and his unflagging devotion, he never received the usual reward in the shape of an important Indian civic appointment, and it is practically certain that this was due to the fact that very early in his Indian career he wrote a somewhat trenchant paper on the "Unsanitary Tendencies of State Sanitation"; and this was never forgiven.

In 1886, however, he embodied the substance of this paper in competition for the Parkes Memorial prize essay. The title of the essay, namely, "Prevention of Disease in Tropical Campaigns," was somewhat less provocative than that of the original contribution. Duncan received the prize in London for this essay.

In 1899 he came home to London, took the membership of our College, and devoted himself to practice in tropical diseases. He was very soon appointed on the staff of the Albert Dock branch of the Seamen's hospital, and he became lecturer at the School of Tropical Medicine and at the Westminster hospital medical School, and an examiner in this subject at the University of London. He was made a fellow of our College in 1907.

Besides the Parkes essay to which I have referred, Duncan wrote "A Guide to Nursing in the Tropics," joined in the authorship of "The Practitioners' Guide to Disease in the Tropics," and wrote several articles in Quain's Dictionary on cognate subjects.

Duncan died at a nursing home on October 17, after a long illness. He will be remembered with deep regret as a man of great courage, versatile powers and remarkable promise, who suffered under considerable physical disabilities and was always, in my experience, remarkably modest in setting forth his proper claims.

FRANK MONTAGUE POPE.

FRANK MONTAGUE POPE died October 26, 1912, aged 56. He was born at Bletchingley, in Surrey, was

educated at the Leeds grammar school, studied for a time at the Sussex county hospital, Brighton, and then went to Cambridge, where he took his B.A. in natural science in 1877. He completed his medical studies at St. Bartholomew's, and in 1879 took the membership of the College of Surgeons, and in 1881 his M.B. of Cambridge. After holding some resident appointments he started work in Leicester, first in partnership, but afterwards as a consultant. He became a member of our College in 1886, took his M.D. in 1901 and was made a fellow in 1902. He was physician to the Leicester Infirmary from 1902 to 1912 and then became consultant physician.

He took a warm interest in nursing affairs, in the county lunatic asylum, in the care of the feeble-minded, and in the development of ambulance work, and he was a loyal supporter of the British Medical Association.

Pope was an energetic, hard-working and effective member of our profession; he had considerable influence and was able to carry things through by his strength of character and his kindly genial disposition.

FREDERIC BAGSHAWE.

FREDERIC BAGSHAWE died November 2, 1912, aged 78. He was the son of the Rev. E. B. Bagshawe, the rector of Eyam, in Derbyshire, and was educated at Rossall and Uppingham Schools, St. John's College, Cambridge, and St. George's hospital. He took his M.A. in 1861, M.B. in 1863, M.D. in 1865, became a member of this College in 1864, and was elected to the fellowship in 1879.

For a short time he practised as a physician in Connaught Square, but his health compelled him to pass several winters in the south of France, and he practised partly on the Riviera and partly in St. Leonards. In 1870 he settled permanently in St. Leonards, and was soon appointed assistant physician to the hospital there, with which his active connection lasted till 1907, when he became consulting physician.

He was devoted to his hospital duties, and enlightened in his support of educational and other developments of the town in which he lived ; he filled with distinction the posts of alderman and mayor ; was president of the South Eastern Branch of the British Medical Association, and for a time president of the Society of Balneology. He was a genuine and very often a generous friend to his patients, and maintained a high standard of honour in his profession.

Dr. Bagshawe was twice married, first in 1859 to Miss Frances Boss, and in 1870 to Miss Emily Dickinson, the sister of Dr. Howship Dickinson.

He will be affectionately remembered by all of us who knew him as a generous and courteous gentleman and as an honourable physician.

EDWARD ALFRED BIRCH.

Edward Alfred Birch, Brigade Surgeon, died November 27, at the age of 72. Hs was born at Roscrea, Tipperary, and received his medical education at the City of Dublin hospital and at the medical school of the Royal College of Surgeons in Ireland, of which he became a licentiate in 1861.

Besides other diplomas he took the M.D. of Brussels in 1879, became a member of this College in 1886 and was elected to the fellowship in 1892.

Appointed an assistant surgeon in the Royal Navy in 1861 he served in the China War, but four years afterwards resigned his commission and entered the Indian medical service. He was chiefly engaged in civil practice and ultimately became principal of the Medical College, Calcutta, and for a short time inspector general of civil hospitals in Bengal.

His book on the " Management of Children in India," which was an amplification of an earlier work by Dr. Goodeve, gained a wide circulation and was of great service.

Eleven years ago, having been compelled to retire by the state of his health, he settled in Okehampton. He was much esteemed for his high personal character and public spirit.

Dr. Birch was married to Miss Massy of Stagdale, county Limerick, and she survives him with two daughters and two sons.

CHARLES THEODORE WILLIAMS.

CHARLES THEODORE WILLIAMS died on December 15, 1912, aged 74. He was the son of a very distinguished father, Dr. C. J. B. Williams. Educated first at Brighton and then at Harrow, he was only there for a year owing to a severe attack of rheumatic fever which was, no doubt, the origin of the mitral lesion which lasted through his life. Under private tuition great improvement in his health enabled him to enter Pembroke College, Oxford, where he graduated in natural science. His father kept him under careful observation, and finding some signs of chest delicacy, sent him for two winters to the south of France with the best results. He was then able to enter upon his medical studies at St. George's, and subsequently he studied at Paris. On his return to London, he was for a time demonstrator of anatomy and physiology at his old school; he took his M.B. in 1864, M.D. in 1869. In 1867 he was appointed assistant physician to the Brompton Hospital for Consumption and Diseases of the Chest. There the chief work of his life was done; he was appointed physician in 1871 and consulting physician in 1894.

Theodore Williams was greatly indebted to his father, not only for guidance in regard to his health and education, but for the inestimable advantage of working side by side in the collation of much of his father's extensive material on diseases of the chest. One of the most important statistical works which he compiled was on the average duration of life in pulmonary consumption, and

he also joined his father in the preparation of his work on "Pulmonary Consumption, its Nature, Varieties and Treatment," and this book he subsequently rewrote with considerable additions.

It is little to be wondered at, considering his own personal experience, that much of Theodore Williams's inquiries turned on the therapeutics of climate. Following Sir Hermann Weber, he gave a great impetus to the utilization of high altitudes in the treatment of consumption. He gave the Lettsomian lectures on the influence of climate on consumption, and returned to this subject when appointed Lumleian lecturer to this College.

Theodore Williams's activities in regard to the treatment of diseases of the chest in their widest sense were considerable and unremitting throughout his life. He had a very extensive practice amongst well-to-do consumptives, and his efforts on behalf of the Brompton hospital continued long after he had ceased to be on the regular staff.

He was a zealous member of the National Association for the Prevention of Consumption and other forms of tuberculosis, and was, without doubt, the most energetic of all those concerned in the foundation and completion of the King Edward VII Sanatorium at Midhurst.

He took a prominent part likewise in the International Congresses on Tuberculosis held at Washington, Berlin, and London. At Washington he was the English president. He succeeded Sir William Broadbent as vice-president for England of the International Tuberculosis Association. He was an indefatigable member, president, and treasurer of the Royal Meteorological Society, was president of the Medical Society of London, and of the Medical Graduates' College and Polyclinic, and he held responsible offices in the Royal Society of Medicine.

He travelled widely and always with a purpose, increasing his knowledge and practical experience concerning climatic conditions.

Williams became a member of our College in 1865,

and was elected to the fellowship in 1871. He was both councillor and censor, and was Lumleian lecturer in 1893, and Harveian orator in 1911.

Besides his literary works to which I have referred, Williams wrote several papers in the *Transactions of the Royal Medical and Chirurgical Society* and in Quain's "Dictionary of Medicine"; perhaps the most important of these was the one which embodied his long and laborious investigations on temperatures in phthisis.

Theodore Williams married, in 1868, Mary, the second daughter of Mr. Gwyn Jeffreys, the distinguished zoologist. It is not unfitting to say here that no union could have been happier or more fraught with solid advantage to Williams's life work, for his wife was a true comrade in all his undertakings, and an enlightened helper in all his benevolent efforts.

It only remains to mention that he was a very generous and discriminating benefactor, especially in regard to the advancement of medicine. At Oxford he founded one Pembroke College scholarship, and four university scholarships in anatomy, physiology, and pathology. He was instrumental in founding the Bissett Hawkins' medal in this College, and he gave £1,000 to our endowment fund. He had left instructions in his will that should his wife predecease him, among other benefactions, the sum of £5,000 was to be given to our College to be devoted to "hospitality and the maintenance of the dignity of the College." I am authorized by Mrs. Williams to state that it will be her privilege to carry out her husband's desire. Mrs. Williams has also presented to the College a small but important collection of stethoscopes, including one made by Laennec himself, and presented by him to his favourite pupil, Dr. C. J. B. Williams.

The lessons of Williams's life are writ large. In spite of a fundamentally delicate physique, his life was full of activity and prolonged beyond the average span. It is an example of what can be done by devotion to a given subject pursued in all its ramifications. He found his

joy in his work, and to the last never relaxed his efforts for the public good. His tenacity and courage, in spite of great physical weakness, at the time when he gave his Harveian oration and summarized his life-long experience on the treatment of consumption, will not be forgotten by us. The last speech he made in the College on the importance of associating the teaching and the treatment of phthisis in our hospitals, the grafting of domiciliary treatment on hospital centres, and the avoidance of undue specialism was a worthy final message and an important utterance.

He was in and out amongst us for many years in London medical society; always the same — genial, youthful in his sympathies, ready to help the man who was down or an unpopular cause, and we feel that we have lost a close personal friend as well as an experienced physician and an honoured fellow of this College.

JAMES LEWIS SIORDET.

JAMES LEWIS SIORDET died at Mentone, December 22, 1912, aged 83. He was educated at University College, London, was physician's assistant at University College hospital, and after taking his M.B. in 1855, became a member of this College in 1857, and was elected a fellow in 1881. For a time he practised as a consultant in Queen Anne Street, and was physician to the Blenheim dispensary and physician to the St. George's and St. James's dispensary. He was compelled to relinquish London practice on account of his health.

I am indebted to his friend, Dr. Stanley Rendle, of Mentone, for the following notes concerning him :—

"With the death of Dr. James Lewis Siordet, almost the last link connecting the present Mentone with its early history as a health resort has passed away, and his 'passing' has left a blank that is felt by many. Dr. Siordet, by his unvarying kindness, had endeared to himself many friends in all classes from the peasant

upwards. Doyen of the medical profession in this town, and member of the Medical Society since its inception, he, though no longer an active participant, retained his old interest in its proceedings, and was looked up to as a friend and adviser of all his former associates.

"When his health broke down in 1859, compelling him to relinquish his practice in London, he went to Egypt where he spent that winter ; in the following year he was sent to Mentone by Dr. Walsh, whose attention had been drawn to it as a favourable spot for pulmonary cases by Dr. Henry Bennett. Dr. Walsh's verdict was, that by going abroad Dr. Siordet's life would be prolonged for one or possibly even two years. With this object the first two years of his residence in Mentone passed without any idea of again taking up work, but as his health steadily improved, he took up his professional life again, and, at the time the writer first made his acquaintance, he was in active practice, largely consulting, though by no means entirely so. He took a keen interest in the progress of the town and its development as a health resort. He was a valued member of the committee of the Medical Society whose advice was sought by the municipal council as to drainage, water supply, and other sanitary questions.

"Up to the last he gave freely of his time and financial help to any scheme of public utility ; he was a leading member of the committee which built Christ Church and St. John's, and was largely instrumental in building and maintaining St. John's Convalescent Home for clergy and professional men.

"The estimation in which Dr. Siordet was generally held was strikingly shown at the funeral, where representatives of all the public bodies and a large number of the resident French and English colonies were present.

"The original two years which it was hoped he might obtain by relinquishing his work at home and emigrating to Mentone, extended into fifty-two years, forty of which were spent in active practice, and all of which were,

to within a few days of his death, busy with helpful care of others. The memory of Dr. Siordet will long remain in Mentone, and his active help in running the various charitable institutions with which he was connected will be greatly missed."

JAMES BARCLAY MONTGOMERY.

JAMES BARCLAY MONTGOMERY died at Penzance on Christmas Day, 1912, aged 84. He was a native of Glasgow and took his M.D. at the Glasgow University. For fifty years he practised at Penzance, where he was physician to the West Cornwall dispensary and infirmary, and greatly esteemed by his fellow townsmen. He became a member of our College in 1859, and was elected to the fellowship in 1875.

He was married to Miss Boyle in 1863. His widow survives him.

BALTHASAR WALTER FOSTER.

BALTHASAR WALTER FOSTER, first Lord Ilkeston, died December 31, 1912, aged 72. He was born at Cambridge, but removed with his family to Ireland when eight years old, and received his early education at the Drogheda grammar school. He began the study of medicine at Trinity College, Dublin, and the School of the Royal College of Surgeons, Dublin, and in the minimum of time he obtained the licences of the Colleges of Physicians and Surgeons of Ireland. As early as 1860 he applied for the post of medical tutor at Queen's College, Birmingham, and, to his surprise, he obtained the appointment, and was at the same time made assistant physician to the Queen's hospital. He was very successful in the teaching of anatomy, and in 1864 was appointed professor of that subject to the Queen's College. In this year he obtained the M.D. of the University of Erlangen ;

in 1865 he became a member of our College, and in 1873 was elected to the fellowship.

Foster helped to amalgamate Queen's College and the Sydenham College and this, in its turn, led to the foundation of the medical side of the University of Birmingham.

In 1868 he became physician to the General hospital, with which he was connected for twenty-two years, and in 1869 he became joint professor of medicine.

Besides being a keen and popular teacher he gained a large private consulting practice in the Midlands. He gave great attention to diseases of the heart, and was one of the pioneers in the study of the sphygmograph. He wrote papers on etherized cod liver oil and on various problems of diabetes, and his principal essays and lectures were collected into a very attractive volume on clinical medicine.

At this time he helped also to found the Birmingham Midland Institute, and in his busy life found time even for some medical journalism.

From very early in his medical career he had taken great interest in the British Medical Association and he held many important official positions in it, including that of chairman of council. He gave a very important address on the political powerlessness of the medical profession, and it was mainly due to his efforts that the freehold of the important offices of the Association in the Strand was secured.

Foster's long and arduous efforts on behalf of the Association were recognized by the conferment upon him, in 1897, of a gold medal for distinguished merit.

Through the early part of his career Foster was likewise an enthusiastic citizen; he served on the Birmingham corporation and took the greatest interest in both sanitary and other improvements. In 1885 he was elected Member of Parliament for Chester in the Liberal interest, a seat which he only held for a session, but in 1887 he was elected for the Ilkeston division of Derbyshire,

which he held by very large majorities and with the enthusiastic devotion especially of the mining population, until 1910 when he was raised to the peerage. In Parliament he did excellent service on various branches of state medicine; he helped to carry through the amended Medical Act in 1886 which gave direct representation to medical men in the General Medical Council; and he took great interest in the Midwives Bill and in preventive medicine generally.

From 1892 to 1895 he was Parliamentary Secretary to the Local Government Board. It was a period of great anxiety, and it was largely due to Foster's care and precautions that effective measures were carried to defend this country from the invasion of cholera. He rendered invaluable help to his chief in carrying through the Parish Councils Bill, and he was also greatly concerned in the extension of small holdings.

Foster was one of the three direct representatives of the profession in the General Medical Council. He held this position for ten years and was a very useful member.

In 1906 he was made a member of His Majesty's Privy Council, and in 1910 he was raised to the peerage. Lord Ilkeston, as he then became, had thus a very interesting and full life. From the position of one of the most successful consultants in the Midlands he suddenly stepped into the hurly-burly of politics, and at a time, too, when political feeling ran high. He had a good presence, a fine voice, and was an effective debater. He was good tempered, genial, conciliatory and tactful, he took a broad and humane view of life, and was really admirable in carrying through difficult schemes concerning which there was divergence of opinion.

His affection for his old profession remained unabated to the end, and he greatly valued his connection with this College. During the comparative leisure of his later years he looked forward to reviving his medical service. We had the advantage of his help on the committee of this College which considered the Insurance Bill, and he

was a member of our Council at the time of his death. But more than a year ago he was stricken down with insidious malignant disease, and this put an end to all his aspirations. He accepted his fate with courage and equanimity and was cheery to the end, grateful to his medical brethren, and always delighted to talk over old struggles and triumphs both in medicine and politics.

Lord Ilkeston was married to the daughter of the late Mr. Sargant of Birmingham. Lady Ilkeston survives him, and he has left three daughters and one son, the Hon. B. S. Foster, stipendiary magistrate of Birmingham, who succeeds to the title.

At the memorial service, held at St. Margaret's, Westminster, the officers and other fellows of the College joined Lord Ilkeston's political friends in the last tribute of respect to one who had filled an honourable and distinguished position alike in medicine and in the service of the State.

WILLIAM HOWSHIP DICKINSON.

WILLIAM HOWSHIP DICKINSON died January 9, 1913, at his home in Tintagel, aged 81. He was born at Brighton in 1832, received his early education at a private school and at King's College, London. He began the study of medicine at St. George's hospital, and subsequently entered Gonville and Caius College, Cambridge. He took the M.R.C.P. in 1858, M.B. in 1859, and M.D. in 1862. He was appointed assistant physician to the Hospital for Sick Children, Great Ormond Street, in 1861, and in 1865 assistant physician at St. George's, and in that year was elected a fellow of our College. Thenceforward his life work oscillated between St. George's hospital and school, Great Ormond Street, the College of Physicians, and consulting practice. He was accustomed to attribute his greatest opportunities to the work which radiated round his post of curator of the Museum at St. George's, and found its further illus-

tration in the hospital wards; and it may be truly said that most of his contributions to medicine had their basis in and constant relation to morbid anatomy.

His earliest paper was concerned with some experimental and pathological inquiries into the functions of the cerebellum; and his attention was also directed, quite early in his career, to changes in the nervous system following amputation of the limbs.

Great Ormond Street furnished him with valuable material on the morbid anatomy of chorea, the visceral changes in rickets, cirrhosis of the liver in children, and his magnum opus on albuminuria, especially in relation to lardaceous disease. With respect to chorea, he powerfully contended for the inadequacy of the embolic doctrine, and his views attributed the symptomatology to periarterial extravasations in various tracts of the brain and cord. In the study of Bright's disease, Dickinson was, no doubt, one of the pioneers of the middle period, who, following Bright's discoveries, separated the forms of nephritis into acute and chronic, and discriminated the primarily tubal and the primarily intertubal forms. Dickinson also showed how the chronic forms of tubal disease were associated with secondary nuclear intertubal proliferation, so that this type of nephritis might even ultimately give rise to one form of granular kidney.

He laid down with great exactness the vascular origin of the lardaceous kidney; indeed, on the subject of lardaceous disease generally he bestowed much labour, and especially in the way of chemical analysis. To him belongs the theory that the lardaceous material was allied to, if not identical with, de-alkalized fibrine, and that the chief chemical defect, as compared with albumin or fibrine, was in the diminution of the potash content.

Dickinson took rather an intermediate position between Johnson on the one side and Gull and Sutton on the other in regard to the vascular changes associated with granular kidney. He regarded the alteration in the middle coat of the arteries as partly fibroid and partly

muscular, but he held that the resistance was in the capillary zone, and that the hypertrophy of the left ventricle and of the middle coat of the smaller arteries were co-operating, and not antagonistic factors. In his pathological investigations on Bright's disease, Dickinson was, I think, the first to draw attention to the not infrequent occurrence of hæmorrhagic ulcers in the alimentary canal of those suffering from chronic renal disease. He emphasized the importance, and gave remarkable examples of heredity as a factor in granular kidney; and on the therapeutic side he showed the desirability in acute nephritis of favouring a free liquid flow down the blocked tubes instead of throwing the burden of watery elimination entirely upon the skin and alimentary canal.

In his work on diabetes, Dickinson again showed his bias in expounding his views of disease on the basis of morbid anatomy. He strongly contended for the significance of softening and absorption of periarterial hæmorrhage and exudation, giving rise ultimately to a cribriform condition of the cerebral and spinal tissue. This pathological association he maintained was causative in the production of saccharine diabetes. His views at first secured some degree of acceptance, but ultimately failed to become established, and pathologists were obliged to relinquish proof of uniform conclusive histological alterations pathognomonic of this disease. Dickinson's work on diseases of the kidney and urinary derangements was ultimately embodied in three portly volumes; in the last volume, on the miscellaneous affections of the kidney, amongst other subjects, he gave a detailed account of intermittent hæmoglobinuria, in the study of which he was one of the early investigators. Amongst other works, his Lumleian lectures on the tongue as an indication in disease contained an interesting series of histological and clinical investigations. Dickinson also collected into one volume a series of his occasional papers ranging from 1855 to 1896. He republished his trenchant attack

on the alleged therapeutics of blisters, and stuck to his guns with respect to his individual contention on the interpretation of the presystolic murmur. In this volume of essays will also be found his elaborate statistics on the morbid effects of alcohol as shown in persons who trade in liquor. He was able to modify some of the imperfect generalizations which had been made on this subject; he showed, for example, that excessive alcoholism actually promoted tubercle instead of being antagonistic to that product as formerly taught. He considered that the effect of alcohol in promoting diseases of the kidneys was by no means commensurate with the damage produced on the liver, for example. Nevertheless, it is noteworthy that his statistics show that in his ultra alcoholic group the alterations in the arterial walls, accompanied by cardiac hypertrophy and cerebral hæmorrhage, were very largely in excess as compared with the other group.

Dickinson was a man with the very highest sense of honour and obligation. I shall never forget the withering scorn which he poured upon an unfortunate individual who mildly suggested to him that he should come away in the middle of his hospital clinic to see a private patient. The poor man, woman, or child who lay in a hospital bed was to him his first and highest care; he never, so far as my experience of him went, hurried either over his diagnosis or his prescription in regard to a hospital patient. He appreciated industrious clinical work wherever he found it, and was ready to give credit wherever credit was due, but he was very severe in his criticism of careless or slovenly statements, and he was ruthless in demolishing pretence of every kind.

He was a very interesting teacher, for he was very well read in general literature as well as in medicine, and he always seemed to approach a case and to expound it in a way entirely his own, and conventionality of thought or of method was the last thing that could be said of him. He was indeed very independent and very downright,

and there was a piquancy about his characterization and a seasoning of salt about all his reflections which rendered his clinics always fresh and stimulating. If he had a fault it was that he was somewhat dogmatic, and he was certainly very strenuous and uncompromising in all his utterances. I used to think that he must have been somewhat like Samuel Johnson. He had a certain brusquerie, and he was not free in his epigrammatic utterances from a slight degree of intolerance, but he had a powerful, vigorous intellect, unswerving fidelity to what he thought was honest and true, and behind it all a kind and generous heart.

Dickinson, like the first Lord Dudley, had an interesting infirmity of thinking aloud, and used to tell amusing stories of himself and of the consternation with which some of his audible reflections were greeted by those who heard them. He once told me about going to see the child of a publican who singularly resembled the father. Dickinson found himself saying aloud, addressing the child: "You are an ugly little beast, you are a regular little publican," but when he realized that the circle of relations had heard every word he had said, he made no reference to it but proceeded with the examination as though nothing had happened.

At this College he held most of the official positions; he was examiner, councillor, censor, senior censor, and he delivered both Croonian and Lumleian lectures and likewise the Harveian oration. He was a most just and painstaking examiner at several universities. At the Pathological Society of London he was in turn secretary, vice-president and president, and he was in addition president of the Royal Medical and Chirurgical Society. He gave long and ungrudging service to the sea bathing infirmary at Margate.

Dickinson was married to a daughter of Dr. James Arthur Wilson, but his wife predeceased him. He had four daughters and two sons, one of whom became a clergyman, and the other, his eldest son, Dr. Lee

Dickinson, followed in his father's footsteps; he was a young physician of great promise and had already gained for himself an honoured place on the staff of St. George's and on that of the Children's Hospital. He developed signs of tubercle, but after a sea voyage and partial repair he clung to his career, and in 1904 was snatched away by sudden fatal hæmoptysis. The shock caused by the death of his son was the beginning of Dr. Dickinson's long and weary illness.

Years before this, attracted by the beautiful coast scenery, he had made for himself a home in a house which he bought at Tintagel, and thither he retired in the evening of his life; he found much interest in meteorological and climatic observations, and in analysing the local legends of King Arthur. He was a great walker and two days before his son's death had taken his last long walk to Boscastle. He suddenly began to fail after his terrible bereavement, and within a month or two became paralysed and gradually helpless and bedridden, though his mind continued clear to the last.

In the later 'sixties and the 'seventies there was a fine group of men on the surgical as well as the medical side who stood forth as representing the medical school of St. George's hospital. Each one impressed his personality on his students as a powerful teacher and a fine English gentleman, and they influenced their contemporaries in a notable degree by their sound judgment and their high professional standard.

The last of this fine group was William Howship Dickinson, and I think that we may say of him what Mark Antony said of Brutus—

> "This was the noblest Roman of them all.
>
> His life was gentle and the elements
> So mixed in him that Nature might stand up
> And say to all the world, 'This was a man.'"

WILLIAM CARTER.

WILLIAM CARTER died on February 2, 1913, aged 77. He was the son of a doctor, born in Newbury and educated at the grammar school there, and subsequently at the Charing Cross hospital and St. Thomas's hospital. He took several medals at his medical school and high honours in his degree examinations. He was both Bachelor of Science and Bachelor of Laws at the University of London, and took his M.B. at that university in 1864 and M.D. in 1879. He was made a fellow of this College in 1885. He began practice in Dublin, but in 1867 removed to Liverpool, where he rapidly obtained a very honourable position. For thirty-six years he was physician to the Royal Southern hospital, Liverpool, and held many teaching appointments in connection with the medical school both before and after it expanded into the university. He was professor of materia medica, but had previously lectured on chemistry, natural philosophy and botany. He gained the warm attachment of his pupils and the sincere respect of his colleagues and patients, for he was not only a scientific and practical physician, but an ardent social reformer. He was one of the founders of the Liverpool School of Tropical Medicine, and it is worthy of note that for his unremitting labours in connection with that institution the King of the Belgians proposed to decorate him, but Carter's intense reprobation of the cruelties of the Congo, which were condoned by the King of the Belgians, compelled him to refuse this decoration.

Carter was an advocate of total abstinence and an earnest opponent of the Contagious Diseases Act. He was a great authority on all sanitary questions. He wrote several papers on clinical subjects, especially on renal diseases, and he gave the Bradshaw lecture at this College on "Uræmia," in which, I remember, he laid great emphasis on intestinal toxæmia as a factor of the uræmic state.

Carter was married to Miss Sarah Humphrys who predeceased him, and he left two daughters.

In 1908 he relinquished his Liverpool practice and retired to North Wales.

No notice would be complete without a reference to his charming personality. I did not know him well, but was much struck with his modest and gentle disposition. Mr. Robert Jones has written a striking appreciation of his work and character. Despite his indefatigable energy in fighting social evils, he was extremely anxious to avoid anything uncharitable or unfair in his advocacy, and Mr. Jones says, "There are many who have been touched by the pain he appeared to suffer when he feared he had adopted too resolute an attitude; there are men to-day who treasure letters written to soften words that had caused no rancour, to defend with gentle apology an expression that from his lips could have offended no reasonable person. Oppression and injustice roused him to white heat, but he was simple-minded and gentle as a child. He was, above all, a fighter, one could see that in his strong face, his deep-set, steady eyes, his indomitable personality. And yet no man ever accused him of unfairness in argument, he was a fighter, but the soul of chivalry."

That is a testimony to a fellow of our College of which we, his fellows, may well be proud.

ALFRED BAYNARD DUFFIN.

ALFRED BAYNARD DUFFIN died at Wallington on February 10, 1913, aged 79.

He was the son of a London doctor, and received his medical education at King's College, London, and at the universities of Edinburgh and Berlin. At Berlin he studied under Virchow and this gave a permanent bias to his work and teaching.

He took his M.D. at Edinburgh in 1857, became a fellow of our sister College in 1859 and was elected to our

fellowship in 1873. He was a house physician in the old King's College hospital under Budd, Todd and Johnson, and in 1860 he was elected assistant physician. He served for many years in the out-patient and the skin departments, and in 1874 was elected on the full staff. Duffin also lectured successively on pathological anatomy and on the principles and practice of medicine, and on his retirement from the hospital was made consulting physician and emeritus professor. He was also an honorary fellow of King's College. He was a member of our Council and examiner in medicine and likewise examiner in medicine at the University of Edinburgh.

Duffin's mind was wonderfully stored with the facts of medicine and he was both ready and lucid in imparting his knowledge alike to his students and at the medical societies. Although he published no books he wrote several papers in *Medical Transactions*, and in the *King's College Hospital Reports*.

He was very modest and retiring and had few ambitions, though he was always ready to help by his counsel whenever it was solicited, and he gained the warm regard of his colleagues, students, and patients by his devotion to duty and goodness of heart.

John Bale, Sons & Danielsson, Ltd., 83-91, Great Titchfield Street, W.

THE ANNUAL ADDRESS

DELIVERED TO THE

ROYAL COLLEGE OF PHYSICIANS

On April 6, 1914

BY

THE PRESIDENT

SIR THOMAS BARLOW, BT., K.C.V.O., M.D., F.R.S.

London

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PRESIDENTIAL ADDRESS.

In the List for 1914, there appear 345 fellows as compared with 334 in 1913, 505 members as compared with 506 in 1913, 12,472 licentiates as compared with 12,220 in 1913.

During the year 1913 there died six fellows, ten members, one hundred and twenty licentiates. Seventeen new fellows were elected, of whom sixteen were members and one was not a member; fourteen licentiates were admitted to the membership; one member resigned, and one diploma of membership which had been relinquished was restored by sanction of the College on the desire of the member to resume his membership; two licentiates were removed from the College List.

Birthday Honours, 1913:—Oliver, Charles Pye, M.D., L.R.C.P. (Hon. Physician to the King); Jones, John Arnallt, M.D., L.R.C.P. (Hon. Surgeon to the King); Worthington, Edward Scott, M.D., L.R.C.P. (a knighthood); Spurrier, Alfred Henry, L.R.C.P. (C.M.G.); Giffurd, Gerald Godfrey, Lieutenant-Colonel I.M.S., M.R.C.P. (C.S.I.).

New Year Honours, 1914:—May, Arthur William, C.B., L.R.C.P., Director-General R. Nav. Med. Service (Hon. Physician to the King).

The Harveian oration was delivered on St. Luke's Day by Dr. Mitchell Bruce, the subject being "The Influence of Harvey's work in the Development of the Doctrine of Infection and Immunity."

Lectures (in chronological order): The Oliver Sharpey lectures for 1913 were delivered by Professor A. D.

Waller, on "The Electrical Action of the Human Heart"; the Croonian lectures by Professor Sherrington, on "Inhibition as an Element in Co-ordination"; the Bradshaw lecture, by Dr. T. R. Glynn, on "Hysteria in some of its Aspects"; the Fitzpatrick lectures for 1913, by Dr. C. A. Mercier, on "Astrology in Medicine"; the Milroy lectures, 1914, by Dr. F. Shufflebotham, on "The Hygienic Aspect of the Coal-mining Industry in the United Kingdom"; the Goulstonian lectures by Dr. M. A. Cassidy, "Rheumatoid Arthritis"; the Lumleian lectures, by Dr. J. A. Ormerod, on "Some Modern Theories concerning Hysteria"; the Oliver Sharpey lectures for 1914, by Dr. F. Gowland Hopkins, on "Some Effects which follow upon Disturbances in the Chemical Reaction of the Blood."

The College is grateful to the Harveian orator for his discourse, which was full of philosophical reflections on the evolution of doctrine and practice as regards infectious diseases since Harvey's time, and is also grateful to its lecturers who have given admirable reviews of the most recent additions to our medical knowledge.

With the consent of Dr. George Oliver certain alterations have been made in the regulations concerning the Oliver Sharpey lectures, the principal of which is that it is now no longer required that they should be delivered in this College in the month of April, a time which owing to press of other College business has sometimes proved inconvenient.

CONGRESSES.

The International Congress of Medicine was held in London in August, 1913. The President of this College was the President of the Congress, and one of the most successful sections, viz., that of the history of medicine, was held in our large library under the chairmanship of Dr. Norman Moore. Prior to the assembling of the Congress the meetings of the officers and of the Executive and Reception Committees were all held beneath our

roof, and the College gave £50 towards the expenses of the Congress.

The fourth International Congress on Physio-Therapeutics was held in Berlin. Dr. Garrod attended as delegate of the College and of H.M. Government, and presented a report to the College on April 12.

The third International Congress on Neurology and Psychiatry was held in Ghent. Dr. Aldren Turner attended in similar capacities, and presented a report to the College on October 30.

SCHOLARSHIPS AND MEDALS.

The Baly medal for distinction in physiology was awarded to Dr. John Scott Haldane, F.R.S.; the Swiney prize was awarded by this College in conjunction with the Society of Arts (on this occasion for a work on general jurisprudence) to Mr. J. W. Salmond; the Murchison Memorial Scholarship was awarded (on this occasion by the University of Edinburgh) to Alan W. Sichel, B.A., M.B. The Jenks scholarship was awarded by the president and censors to Mr. Frank Caldecott.

CENSORS' BOARD.

The Board have recommended certain minor alterations in relation to the membership examination, which have been accepted by the College. These are:—

(1) That when a candidate has been referred, he may present himself again for examination after an interval of six months, instead of twelve months, as formerly was the case.

(2) That the duration of the two written examinations be reduced from four hours to three.

A member (Dr. William Rees Thomas) having presented himself for examination in psychological medicine, Dr. Percy Smith and Dr. Craig were asked by the Board to undertake the examination. The candidate passed to their satisfaction, and was granted the certificate.

A letter was read to the College on March 17, 1913, asking whether in the opinion of the College, membership of a (medical) trades union would, *ipso facto*, be considered derogatory to the dignity of the profession.

This was referred to the Censors' Board, who after obtaining the opinion of the College solicitors upon the legal position of trades unions and upon other points connected therewith, interviewed two gentlemen specially connected with the newly founded National Medical Guild. The Censors' Board, after full consideration, reported to the College, that in their opinion, "there is much both in the constitution and in the methods of trades unions, which as applied to medicine could not fail to be derogatory to the medical profession."

This opinion was endorsed by the College, July 3, 1913.

A question was brought before the Board concerning the position of infirmary medical officers in relation to the notification of abortion. Sir Arthur Downes and Mr. Lithiby, of the Local Government Board (to which a Board of Guardians had applied for assistance and information), appeared before the President and Censors. The Local Government Board desired to know in detail the legal opinion given to the College in relation to the case of Kitson *versus* Playfair, but were unable to obtain this opinion since it was declared at the time to be "*Secreta Collegii.*" The Board advised the College to communicate to the Local Government Board this opinion, which was embodied in the report of a Committee presented to the College on April 30, 1896. The College did so. No further communication has yet been received from the Local Government Board as to their views of the duty of notifying abortions in infirmary practice.

Sundry other matters which have occupied the attention of the Board will be found under other headings (*vide infra*).

On the advice of the Committee of Management the

examination for the diploma in diseases and hygiene of the Tropics has been divided into two parts. The first part is concerned with laboratory work and the second with clinical subjects. The candidate must now satisfy the examiners in the first part before being allowed to take the second part. The examinations will henceforth be held in the months of April and July, instead of April and October. The abbreviated title for the diploma is now D.T.M. and H. England, instead of D.T.M.

The examinations of the Egyptian School of Medicine at Cairo, held during the winter 1912-13, were visited by Sir H. Morris on behalf of the two Colleges, and the thanks of the College were given to him for his valuable report. Sir Watson Cheyne was the visitor last winter.

GENERAL MEDICAL COUNCIL.

In the relations of the College and the General Medical Council, there has been nothing of importance to note.

GOVERNMENT DEPARTMENTS.

The Home Office has on several occasions asked the opinion of the College on the status of certain hospitals, with reference to a request from their respective governing bodies for permission to use the title "Royal." The College has given its advice, either for or against, in most instances; but the last two letters have been referred to the Censors' Board for further consideration.

The Privy Council forwarded to the College a long letter from Dr. E. W. G. Masterman concerning the International Health Bureau at Jerusalem. Dr. Masterman urged that Great Britain should send out a biologist or protozoologist to take charge of a department in this Bureau. The letter, after being read to the College, was printed and circulated with an invitation to fellows to write their opinion to the Censors' Board. The Censors' Board, after considering these opinions, drew up an answer

(which was adopted by the College), approving in general terms of the project, but pointing out that an adequate stipend should be provided for any such scientific director.

The Royal Commission on Venereal Diseases asked from the College suggestions as to suitable witnesses to be called before them, especially on the indirect effects of syphilis in producing organic disease, and on the subject of remedial measures.

Dr. Mott was chosen as a representative of the College, and it was left to the President to appoint other representatives if desirable.

Those who eventually gave evidence on behalf of the College were the President, Dr. Risien Russell, Dr. Amand Routh, and Sir Clifford Allbutt.

NATIONAL HEALTH INSURANCE.

The Commissioners asked (October, 1914) whether the College would desire to give evidence before a Departmental Committee appointed to report upon alleged excessive claims in respect of sickness. The committee appointed under the title of the Sickness Benefit Claims Committee, in repeating this invitation, sent a sketch of the headings into which such evidence would properly fall (December 22). This was circulated to the fellows and considered (June 29, 1914). It appeared that most of the information was such as could only be given first hand by those working under the Act, but that on one or two points the evidence of fellows might be useful; it was, therefore, decided that the College could not in its corporate capacity give evidence, but that the President be authorized to ask certain fellows to give their individual opinion and experience on some of the points raised.

The fellows thus nominated by the President were Dr. F. J. Smith, Dr. Michell Clarke and Dr. Amand Routh.

A correspondence took place in April and May last

year between the Censors' Board and the Commissioners as to how far unqualified practitioners could be employed under the Act. It was made perfectly clear that such persons could not in any case be placed upon the panel, but that when an insured person made his own arrangements he could with certain restrictions employ unqualified practitioners. How far these unqualified persons were to be recognized under the Act, *e.g.*, in the way of certificates signed by them and in the payment of their bills, could not be ascertained from the Commissioners' replies.

The correspondence was renewed in February, 1914, and the Board having ascertained that in the newly issued regulations such unqualified persons are recognized will submit their report thereon to the present Comitia.[1]

SPECIAL COMMITTEES.

The Committee for Revising the "Nomenclature of Diseases."

The work is in progress, and the Sub-committee of Classification has held regular meetings at the College.

Committee upon Infectivity of Tuberculosis.

This committee, appointed July 3, 1913, in view of the exaggerated fears entertained by the public of infection by tuberculosis has held several meetings, and will to-day present a report to the College.[2]

FINANCE.

A report from the Building Committee (December 3, 1913) stated that the accounts for the new Examination Hall were finally settled. The site, building, and extra

[1] *Vide* Appendix I.

[2] *Vide* Appendix II.

expenses had cost the Colleges £54,405 19s. 2d. (after deducting the amount, viz., £5,622 6s. 2d., paid by the Imperial Cancer Research Fund). The amount received for sale of the old Examination Hall (less commission and expenses) was £49,024 4s. 10d. The cost to the Colleges has therefore been, roughly, £5,400.

Turning to the report of the Conjoint Finance Committee, December 18, 1913, it will be seen that the amount paid over in 1913 to the two Colleges exceeds that paid over in the last year of occupation of the old hall by more than £3,000; it appears therefore that the new hall is more than paying for itself.

In the reports of the College Finance Committee, the principal item of interest is the recommendation (December 3, 1913) adopted by the College, that a claim should be submitted to the Corporation of the City of London for £9,820 in view of the compulsory sale of the College property, No. 48, Knightrider Street, which it appears will be bought by the Corporation to make the approaches towards the new bridge which is contemplated.

On the recommendation of the Finance Committee (March 17, 1913) carpets have been laid down (for the first time !) in the large library, at a cost of £80; it has also been resolved to renovate the lecture theatre, and to procure a lecture lantern and an epidiascope.

GIFTS.

Mrs. Theodore Williams presented to the College a collection of early forms of stethoscope, including one made and used by Laennec. The collection had been the property of the late Dr. Theodore Williams.

Dr. W. H. Dickinson left to the College a gold snuff-box which had been in the possession of Dr. Richard Warren, Dr. Pelham Warren, Dr. James Arthur Wilson, and Dr. W. H. Dickinson.

Dr. W. S. Greenfield presented to the College an autograph letter from Cullen to William Hunter; and Mrs.

F. T. Bond presented an autograph letter from Jenner to Dr. Baron (his biographer).

The reversion of a portrait of Dr. James Hope has been promised to the College by his son, Sir Theodore Hope.

To the Library, Lady Allchin presented a selection of books from the library of the late Sir William Allchin.

Finally I have the pleasure to announce that a lady, who for the present desires that her name should not be mentioned, has made provision in her will that the bulk of her fortune shall ultimately come into the possession of this College. The terms of the will, which I have seen, are that the money is "to be used by the College for scientific purposes, simply and solely with a view to the discovery of means conducing to the alleviation of human suffering and to the prevention and cure of disease . . . . whether such use shall take the form of studentships, scholarships, grants in aid of special research or otherwise as shall be determined by the said College."

In an interview with this lady I have ascertained that, should the College so determine, the establishment and endowment of a laboratory for research would meet with her entire approval.

It is proper that I should state that we in this College are indebted to Dr. T. B. Scott, of Bournemouth, for the enlightened direction given to our benefactress's generosity by his friendly and public-spirited advice.

OBITUARIES.

PHILIP FRANK.

PHILIP FRANK died March 17, 1913, at Elvaston Place, Kensington, in his 83rd year. He was born in 1830, the son of a Manchester merchant who migrated from Hanover to England in his nineteenth year, was naturalized and became a member of the German community that did so much for the general culture and civic

advancement of their adopted city. His mother was a Lancashire lady whose maiden name was Miss Maria Jackson.

Frank began his education at a school of much repute kept by a Mr. Merz. He spent one year in Hamburg and then returned to his Manchester school till he was 13, and subsequently became a pupil at the Gymnasium at Salzwedel in the Altmark, whence, after passing his school leaving examination, he entered at the University of Berlin, and graduated as M.D. in 1853.

During the last fourteen months of his University curriculum he enjoyed the privilege of acting as amanuensis to Professor von Langenbeck. This carried with it a post in the operating theatre, and during the same period he served as clinical clerk and dresser to A. Wagner in one of the divisions of Langenbeck's hospital and polyclinic. He likewise served under Gurlt, who was subsequently professor of surgery in Berlin, and under Busch who was subsequently professor of surgery in Bonn; and his intimate relationships with these distinguished men continued throughout their life-time.

After he had taken his M.D. he went as a post-graduate to the general hospital of Vienna and studied under Rokitansky, Hebra, Oppolzer and others; thence, at the request of his friend and former chief, Wagner, who had been placed at the head of the hospital at Danzig, Frank went to take charge of the cholera wards there. After the subsidence of the epidemic he remained for a time as one of the four resident officers of the hospital. Then he returned to England, passed the examination of the Army Medical Board and was sent to the general hospital at Fort Pitt, whence he was ordered to Malta; there he had much hard work attending the wounded soldiers who had been drafted over from the Crimean field hospitals.

He then served in succession at the Piræus, Aldershot, Berwick-on-Tweed, Cape Town, Natal,

Cawnpore and Lucknow. In December, 1859, he was invalided on account of dysentery, but it is characteristic of him that during five months of his leave he obtained permission to study at Berlin, and in July, 1860, he began two of the most fruitful years of his life, during which he was attached to the hospital at Fort Pitt, Chatham. This was at that time the head-quarters of the Army Medical School, and Frank was appointed assistant to Sir Thomas Longmore, the professor of surgery. Besides his ward duties he took part in pathological work under Aitken and in the operation courses of Longmore, and was appointed instructor in eye diseases and especially in the new method of ophthalmoscopy. Here, too, he worked in the laboratory under Edmund Parkes. Sir Thomas Longmore bore enthusiastic testimony, not only to Frank's knowledge but to his inspiration as a teacher, his excellence as a scientific surgeon and pathologist, and to the charm and attractiveness of his personal example with the young men who were brought within his influence.

There was no doubt a great future before him, but his own dysentery experience and his somewhat delicate frame made him afraid of being inefficient in the rough and tumble of military life, and his innate modesty (a life-long quality) made him shrink from an appointment in the Director-General's office in London for which he was already designated. And so, to the grief of his chiefs, in the autumn of 1862 Frank resigned his military position. Personal attachment and friendship always filled a larger place in Frank's horizon than ambition, and for nearly five years at the earnest request of the second Earl Brownlow, he became his resident physician; this was no sinecure, for during three of the winters which he spent with his patient at Madeira, Frank did some consulting work, performed all the post-mortems at the hospital, gave demonstrations in pathology and taught operative surgery to the students, and actually established a clinic of eye diseases. During the summer

he worked at Brompton and Moorfields and at the Samaritan Hospital under his old friend Spencer Wells.

As quarantine difficulties with respect to Madeira had arisen, the next two winters they went to Mentone. After Lord Brownlow's death Frank settled at Mentone for a time, but in 1868 he transferred his residence to Cannes, which, with one important break, was his home until he retired from practice in 1898.

This important break in his life at Cannes was the period of his invaluable medical service in the Franco-Prussian War. In August, 1870, he joined the National Red Cross Society and proceeded to Paris as chief representative of the National Committee. He was appointed chief of the Anglo-American Ambulance, and his principal activities centred round Sedan. During the siege he was at the head of the ambulance at Balan; his operating room was exposed to fire, as it was on the road by which the French endeavoured to escape but were forced back to Sedan by the Bavarians.

An extract from the notes and recollections of Sir William MacCormac, who was one of Frank's comrades, is worth quoting: "May I be permitted after this retrospect to record the deep impression made upon all of us by Dr. Frank's noble behaviour, by his skill both as doctor and surgeon. By his energy, his courage, and above all, his unselfishness, he endeared himself to his colleagues no less than to his patients. He it was who brought the work of the divisions of Balan, work begun under conditions of such great difficulty, to a happy and successful close."

Frank returned in the spring to his practice in Cannes. During his long residence there of thirty years he became the virtual doyen of the English practitioners on the Riviera. He was the friend and trusted adviser of all his colleagues. His clientèle ranged from royal personages, great statesmen, distinguished men and women of all ranks of life to the poor people of the town and district, for he established an eye clinic of his own

at which the attendances amounted to two thousand in the season.

His thorough training, his wide experience of life and above all his intense humanity, made him the very *beau idéal* of the beloved physician; and it is little wonder that all sorts and conditions of men and women relied implicitly upon his advice.

When at length a sense of failing vigour led him to withdraw from practice, he chose London as his home. Then came fifteen years of what might be called his resting time. But in spite of his age and on-coming infirmities, which he kept at arm's length by his frugal and abstemious life, Frank was indefatigable in his attendances at the London hospitals. It was, indeed, this attraction which was the dominant consideration leading to his choosing London for his final home. But he always maintained that there was no city like London for healthiness during all the year round.

He regularly visited several clinics, medical and surgical, of the London school hospitals.

He kept himself thoroughly abreast with medical and surgical literature both at home and abroad, and I think he contributed more than he acquired in our hospital clinics by his discriminating recognition of any additions to knowledge or method, and by his invaluable hints drawn from a very varied experience and given with a rare modesty and tact. He was a favourite with students wherever he went. They made way for him, placed a chair for him within the inner circle of eager listeners round the beds, and on his part I can bear witness that he took a fatherly interest in them, especially those who were worthy but timid. In his quiet way he used to encourage them and sometimes asked them to come and have tea with him alone when he talked with them about their future plans. He was invaluable to us in interpreting to poor foreigners and in helping to persuade obstinate patients for whom operations were suggested. He made friends with the ward sisters, and gave help

by stealth to many a poor patient who was leaving the hospital and was in sore need. And how delightful was his personal conversation when one walked away with him after the hospital visit was over. He was over sensitive, retiring, unassuming, but when at his ease he poured forth treasures new and old; reminiscences of great doctors, of men of affairs and of statesmen, like Gladstone and Lord Acton, and of honourable women like Lady Marian Alford, and he was always proud of his early links with Lancashire and liked to talk of the fine integrity of the Manchester merchant which was always exemplified to him by the memory of his father. He was never ashamed of his Jewish blood, he encouraged his daughter to make translations from the Yiddish about the sufferings and the aspirations of the poor Russian Jewish peasants. The works of Goethe and Schiller were household words to him and with many of the French authors he was equally conversant, especially with the great French essayists. He read and re-read, along with his daughter, his books of philosophy, but his great rejoicing, to the end of his days, was in the advance of all physical knowledge and in the conquest of Nature for the good of mankind. Meanwhile, although he rigidly avoided any new responsibility, he was always ready to give of his best to his old patients. When anything arose concerning their welfare all his wide and generous thoughtfulness was unfolded like an open book and he was timid and retiring no longer. He recognized good qualities in people when others were repelled by angularities of manner and of speech. I never heard him say an uncharitable word of anybody, and when disparaging criticisms were made about mutual acquaintances, if he did not contradict, he became silent. That expression of charitable spirit which seems fitting to a thoughtful medical man, which is embodied in Renan's dictum "To know all is to forgive all," was especially characteristic of Frank.

With respect to his relation to this College, Frank took

the membership in 1859, was elected a fellow in 1871 and served on the Council from 1900 to 1902.

There remains to be said a very few words about his home life. He was married in 1871 to Lady Agnes, the daughter of the second Marquis of Westminster and the widow of Sir A. Islay Campbell. Their union was one of unfailing devotion on the one side and chivalrous attachment on the other. They had one daughter who entered into their intellectual and beneficent pursuits with the greatest keenness and enlightenment. Lady Agnes, though she lived to old age, was very frail and needed constant care; when she died Frank said to me "I have wished all these years to keep myself abreast with medicine in order that I might be esteemed worthy to minister to her needs." Could anything be more beautiful as an expression of the highest devotion? After Lady Agnes's death it seemed to me that if anything Frank was more solicitous than ever to do good in a quiet way to poor hospital folk, and Miss Frank's good work in this and other ways was to him the greatest solace.

The end came very quietly; after a fall on his door-step and an apparently slight injury to the face he had a mild cerebral seizure and in a few days passed peacefully away.

Frank's life was a very interesting one, it was full of activity from first to last; he will be remembered as a personality and not by any published works, especially for his high standard of general culture, his wide knowledge of medicine, and his keen sense of obligation to help those who had been placed under his care. And I think that of him it may well be said "Blessed are the peacemakers, for they shall inherit the Kingdom of Heaven."

ALFRED LEWIS GALABIN.

ALFRED LEWIS GALABIN died on March 25, 1913, aged 70. He was born at Camberwell in 1843, and was descended from an old Huguenot family on the father's side, whilst on the mother's side he was of Quaker extraction. It may not be entirely fanciful to associate his reserved and dignified bearing and his careful, measured speech with this fine double ancestry.

Galabin owed his early education first to a private school in Camberwell and then to Marlborough. From Marlborough he obtained a minor scholarship at Trinity College, Cambridge, and he obtained a double first in 1866, and was made a fellow of his college in 1868.

He began his medical studies at Cambridge, and in 1869 entered Guy's Hospital. He took his M.R.C.S. in 1872, and his M.B. at Cambridge in the same year. He was house physician and obstetric assistant at his own hospital, and it was during this period that he devoted himself especially to the problems of the circulation and amassed the material for his very important thesis for his M.D. degree. This was published in 1873, under the title of "The Connection of Bright's Disease with the Changes in the Vascular System," with illustrations from the sphygmograph. He published other papers in the *Medical-Chirurgical Transactions*, in the *Journal of Anatomy and Physiology*, and in the *Guy's Hospital Reports*, illustrating the teaching of the sphygmograph in relation to circulatory problems, and he invented a simplified cardiograph.

With his appointment as assistant physician to the Children's Hospital, Great Ormond Street, and in view of his valuable contributions to circulatory problems, it seemed that Galabin had laid the foundations for a fine career in general medicine, but the death of Dr. J. J. Phillips, at Guy's Hospital, gave the opportunity for his selection as assistant obstetric physician.

Henceforth he gradually relinquished the subjects of

his early investigations and devoted himself heart and soul to midwifery and gynæcology. In 1874 he had become a member of our College, and in 1878 he was elected a fellow. In 1882 he became full obstetric physician at Guy's, and thenceforth had a busy period of twenty-five years in teaching and practice. He worked hard for the Obstetrical Society in all its responsible posts, and was examiner in his own department at Oxford, London and Cambridge, as well as at the conjoint board. His book on "Midwifery" was at once recognized as an accurate and scholarly work, being specially strong on the mechanical side. It passed through no less than seven editions, in the last of which he was assisted by Dr. George Blacker. It is now a standard English text-book. Galabin also wrote a student's hand-book to diseases of women, and this, greatly expanded, reached a sixth edition in 1903. His work at Guy's Hospital is notable because he soon claimed that the performance of abdominal operations on the pelvic viscera of women was the proper sphere of work for the gynæcologist and his claim was granted. He became a skilful and successful operator, and his opinion as a consultant was widely and deservedly trusted.

His health was not very good, and in 1903 he retired from the staff of the hospital. He maintained his consulting practice until 1909 when he retired to Bishop's Teignton, to a home that had belonged to his grandfather. Here it was his great delight to cultivate his love of botany and horticulture. He died rather suddenly from an attack of acute pneumonia of only five days' duration.

Galabin was married in 1874 to Miss Baily, who survives him; and he had one daughter.

By the obstetric branch of our profession Galabin will be long remembered as one who brought a many-sided culture, especially strong on the mathematical side, an interesting personality, and a real attainment in scientific medicine to his special department. And besides his excellent work in midwifery, he must be remembered in

the history of hospital policy as a pioneer in the allocation to the obstetric officer of surgical operations in women's diseases.

JOHN CHARLES THOROWGOOD.

JOHN CHARLES THOROWGOOD died at Bognor on April 25, 1913, aged 80. He was educated at his father's school at Totteridge, and then entered on the arts side at University College, London, where he distinguished himself in classics. After joining the medical side at the same college he took an honourable place both in surgery and clinical medicine, and took gold medals at his M.B. examinations at the University of London. In 1857 he took his M.D. and after some experience in general practice as assistant to a relative and a rather lengthened charge of a patient in the south of France, he started practice in London as a consultant.

He was appointed physician to the Royal General Dispensary in Bartholomew Close, and subsequently assistant physician to the City of London Hospital for Diseases of the Chest; it was at this hospital and at the West London Hospital, to which he was also attached, that most of Thorowgood's life-work was done.

In 1872 he was appointed lecturer on materia medica and therapeutics of the medical school of the Middlesex Hospital, and I am told that he was an effective and interesting teacher.

Thorowgood also did good work as an examiner for some years at the Society of Apothecaries, and he was consulting physician to the Royal National Hospital for Consumption. He became a fellow of our College in 1874 and served on our council.

He gave long and zealous service to the Medical Society of London, of which he was one of the secretaries for several years, and to which he delivered the Lettsomian lectures on bronchial asthma; these lectures were published and went through two editions, and they form an

excellent brief résumé of the subject; he also published a student's book on Materia Medica, and in his short work on the climatic treatment of consumption, the first edition of which appeared so far back as 1864, and the third in 1868, he showed both independence and foresight. He may indeed be justly regarded as one of the pioneers of cold bracing stations, high altitudes, carefully graduated exercise, and paramount attention to the digestion in the treatment of this disease.

He was married in 1863; his wife and four daughters survive him. Twelve years ago he retired from practice and settled at Bognor. He will be remembered as a good physician and a friendly, genial, and honourable fellow of this College.

FRANK BUSZARD.

FRANK BUSZARD died on September 14 at Dallington, Northampton, aged 74. He was born at Lutterworth, in Leicestershire, being the son of a medical man; was educated at Guy's Hospital and took his M.R.C.S. in 1860. In 1861 he took his M.B. of London, and his M.D. in 1865. He obtained the fellowship of the Royal College of Surgeons in 1864 and in 1877 became a member of our College and was elected a fellow in 1887.

Buszard's earliest attachment was to the surgical side of our profession, for after holding the post of house surgeon at Guy's hospital he became house surgeon to the general hospital at Northampton. In due time he was elected to the surgical staff, but subsequently transferred himself to the medical side. He was connected with the hospital for fifty years, and lived to see great improvements, largely brought about by his own intelligence and zeal.

Dr. Buszard held a leading position as consultant in Northampton and the surrounding district for many years, and he held an honoured place in civic affairs and on the magistrate's bench. He left a widow, one son and two daughters.

ROBERT LEAMON BOWLES.

ROBERT LEAMON BOWLES died on November 15, 1913, aged 79. He was born in Gloucestershire, and his father was a veterinary surgeon and an experienced and thoughtful practitioner. Bowles was devoted to his memory, and has told me how much he owed to his example and teaching.

He was a student of St. George's Hospital and took his M.R.C.S. and L.S.A. in 1856, and became a licentiate of this College in 1864. He settled at Folkestone where he gradually attained the premier position. He was physician to the hospital and likewise to the St. Andrew's Home. He became a member of our College in 1875, took the M.D. degree of the University of St. Andrew's in 1882, and was elected a fellow of this College in the same year.

Bowles had the great merit of having simplified the interpretation of stertor, and of having pointed out the practical value of change of posture in the stertor of apoplexy. His article on the subject in Quain's Dictionary is excellent. He gave very considerable attention also to the methods of artificial respiration in the treatment of the apparently drowned.

He was an enthusiastic Alpine tourist, and wrote an interesting paper on sunburn, in which he maintained that, so far as the Swiss cases were concerned, it was caused by the reflexion from the snow.

In later years Bowles relinquished his Folkestone practice and removed to London, where he had many friends and old clients. He practised for some years in Upper Brook Street, and in 1905 retired to a small property at Prior's Mesne, near Lydney, in his native county, where he was devoted to his garden.

Bowles was married early and had a very happy home life. He had three daughters and one son who, with his wife, survive him. Bowles had a bright and genial

personality, he was keen, alert, and enthusiastic in his work, devoted to the practical problems of medicine and a successful therapeutist. He remained young to the very end.

GEORGE ERNEST HERMAN.

GEORGE ERNEST HERMAN, aged 65, died at his country home in Gloucestershire on March 11, 1914. He was born at Kilwarlin in Ireland, was educated at a private school, and then entered on the study of medicine at the London Hospital.

He held the posts of resident accoucheur, medical registrar, and junior resident medical officer and was appointed assistant obstetric physician to the hospital in 1876.

Like so many of his contemporaries he had been greatly influenced by the bracing teaching of Dr. Sutton, and as he had obtained the fellowship of the Royal College of Surgeons, as well as the M.B. of the University of London he had taken pains to make the foundations of his specialty broad and sound.

I knew Herman well in the early part of his hospital career for I was a colleague of his for two years, and he impressed me as a very accurate observer and as being pre-eminently careful in the sifting of evidence. He was very much influenced by Dr. Matthews Duncan and I am informed that some of his papers in the 'eighties on uterine displacements were models in the way of careful laborious reports and searching criticism. These papers were important because at that time mechanical doctrines in his department were on their trial. One of his confrères has told me that Herman deserves to be described as one of the pioneers of common-sense gynæcology. His student's book on midwifery and his later works on difficult labour and on the diseases of women are, I am told, exceedingly practical and convincing; they passed through several editions and are

characterized by the clear terse style which was marked in everything he spoke and wrote.

Herman was a man of few words and reserved character; he never courted popularity and was singularly candid and careful in all his utterances; he was an able teacher and a successful operator, very averse to undue surgical interference. It is characteristic of him that he was admired and beloved most of all by his resident assistants who knew him best. He was held in high regard at the obstetrical society, of which he was a very active fellow and ultimately president. Besides his post at the London Hospital he was for a considerable time physician to the Royal Maternity Charity and to the Lying-in Hospital at Lambeth.

He was elected a fellow of our College in 1885, and he served on our Council and examined in midwifery at our Conjoint Board and at several Universities.

Herman was married in 1884 to Miss Emily Gibbings, of Chichester; he leaves one daughter and four sons, one of whom is a medical man.

About twelve months ago he retired to his country home at Cam in Gloucestershire, where he had a happy and peaceful time, ended all too soon by a sudden attack of acute bronchitis with heart failure.

In him this College has lost a good physician, and a man of strong, sterling character who had done able and faithful service for his generation.

APPENDIX.

I.—REPORT FROM THE CENSORS' BOARD CONCERNING THE EMPLOYMENT OF NON-QUALIFIED PERSONS UNDER THE INSURANCE ACT.

In the course of last year communications passed between the Censors' Board and the Insurance Commissioners on the subject of the employment of non-qualified persons under the Insurance Act. The contention of the Commissioners appeared to be that, while none but registered medical practitioners are admissible to the panels, yet there was nothing in the Act of 1911 to prevent insured persons who are allowed or required to make their own arrangements for medical benefit, from making such arrangements with persons who are not legally qualified medical practitioners.

More recently the Commissioners "for the purpose of removing doubts and for the convenience of Insurance Committees" have altered the Regulations in this respect, and in their new Regulations [National Health Insurance (Medical Benefit) Regulations, 1913, Section 44 (2)], and in a "Memorandum with regard to persons making their own arrangements under Section 15 (3) of the National Insurance Act, 1911," the possibility of treatment by unqualified persons under this Section of the Act is specifically recognized, and provisions are made with respect to it.

The president and censors consider that to give to unqualified persons any status whatever under an Act of Parliament is an innovation which should not pass unnoticed by the College.

They therefore submit the following resolution for the consideration of the College:—

National Health Insurance Medical Benefit Regulations, 1913.

The College observes with regret that in Section 44 (2) of the National Health Insurance (Medical Benefit) Regulations,

1913, and in the memorandum issued in connection therewith, provision is made whereby insured persons who make their own arrangements for medical benefit under Section 15 (3) of the National Insurance Act may obtain treatment from non-qualified persons.

Hitherto none but duly qualified medical practitioners have been employed, as such, in any public capacity, and the College deplores that now, for the first time, under an Act professing to promote the health of the nation, recognition should be given and public money paid to a class of persons who have not obtained a legal qualification to practise medicine and concerning whose medical knowledge there exists no sort of guarantee.

This report was accepted and approved by the College.

II.—STATEMENT ISSUED BY THE ROYAL COLLEGE OF PHYSICIANS OF LONDON ON THE INFECTIVITY OF TUBERCULOSIS.

(1) Tuberculosis is an acquired disease, but certain constitutional types may be inherited which render the patient specially susceptible to infection, and there is reason to think that such susceptibility is an inherited character.

(2) The infective agent is the tubercle bacillus. This may be contained in the various discharges and excreta of the patient, and especially in the sputum of those suffering from pulmonary tuberculosis. No discharge is infective as regards tubercle unless it contains the tubercle bacillus.

(3) Cases of tuberculosis of bones, glands, and internal organs from which there is no discharge or which do not furnish any excretion, and cases of arrested pulmonary tuberculosis, have never been proved to be infectious.

(By arrest is here meant that all the symptoms and physical signs of activity have disappeared, and the sputum has either ceased or no longer contains tubercle bacilli.)

(4) The means by which tubercle bacilli may enter the body are:—

(*a*) *By Inoculation* through a wound or abrasion of the skin. This has occasionally occurred to workers in laboratories, *post-mortem* attendants and others dealing with tuberculous

material, and is presumably the way in which lupus is acquired.

(*b*) *By Inhalation.*—Susceptible animals are readily infected by the inhalation of air containing tubercle bacilli, whether in droplets or suspended as fine dust, but in the spread of the disease among human beings the latter appears to be the more important means of infection. The sputum or other discharges, whether on soiled handkerchiefs, linen, garments, or elsewhere, when dried, may become pulverized, and in this condition may be readily dispersed in the air of a room. That droplets of sputum are less important agents of infection is suggested by the fact that the incidence of consumption upon the staff, nurses, and others engaged in hospitals for the treatment of tuberculous disease, where all discharges are carefully disposed of, is not above the average in the general population.

(*c*) *By Swallowing.*—Dust infected by the tubercle bacillus may be conveyed to food and so enter the alimentary canal; or infection may occur more directly in the act of kissing, or by consumptive and healthy persons using the same food utensils. As about 10 per cent. of the milk supplied to large cities contains tubercle bacilli derived from infected cows, this avenue of infection is particularly important in the case of children. The bovine tubercle bacillus is more commonly responsible for tuberculosis in young children than in adults, but the proportion of cases due to it varies very much in different localities.

There is no evidence that tuberculosis can be conveyed to others either by the breath alone, or by emanations from patients, or by their garments, unless soiled by dry sputum or discharges.

(5) The spread of tuberculosis is favoured by uncleanliness, overcrowding, and imperfect ventilation, and is hindered by the opposite conditions. Experience in hospitals and other institutions where the following precautionary measures have been thoroughly carried out indicates that by such measures the risk of infection is reduced to a minimum, namely—

(*a*) The careful disposal and disinfection of the sputum and other discharges.

(*b*) The disinfection or destruction of soiled handkerchiefs, clothes and linen.

(*c*) The removal of dust by frequent moist cleansing of the floors, walls, &c., of the rooms.

(*d*) The supply of abundant air space, and free ventilation, with fresh air.

No risk is incurred by living in the immediate neighbourhood of institutions for the treatment of tuberculosis which are properly conducted.

April 6, 1914.

John Bale, Sons & Danielsson, Ltd., 83-91, Great Titchfield Street, W.

THE ANNUAL ADDRESS

DELIVERED TO THE

ROYAL COLLEGE OF PHYSICIANS

On March 29, 1915

BY

THE PRESIDENT

SIR THOMAS BARLOW, BT., K.C.V.O., M.D., F.R.S.

London

JOHN BALE, SONS & DANIELSSON, LTD.

OXFORD HOUSE

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PRESIDENTIAL ADDRESS.

In the College List for 1915, the numbers as compared with 1914 are as follows :—

	1914	1915	Increase of
Fellows ...	345 ...	352 ...	7
Members ...	505 ...	520 ...	15
Licentiates ...	12,472 ...	12,816 ...	344
Extra Licentiates	2 ...	2 ...	0

During the collegiate year 1914, the losses by death were : Of fellows, 6 ; members, 9 ; licentiates, 129. One licence was withdrawn. One diploma of membership was restored.

Since the last presidential address, the following honours have been bestowed :—

King's Birthday Honours : Dr. S. J. Sharkey, Dr. W. P. Herringham, and Dr. Leonard Rogers (Knighthood) ; Sir A. W. May, L.R.C.P. (K.C.B.) ; W. Molesworth, M.B., L.R.C.P. (C.I.E.) ; H. R. D. Spitta, M.D., L.R.C.P. (M.V.O.).

New Year Honours : G. W. P. Dennys, Colonel I.M.S., L.R.C.P. (C.I.E.).

Honours in February, 1915 : Arthur Martin-Leake, L.R.C.P. (V.C. with clasps) ; Sir J. Rose Bradford, F.R.C.P., K.C.M.G. (C.B.).

HARVEIAN ORATION ; LECTURES.

The Harveian Oration was delivered by Sir Richard Douglas Powell, the subject being " Advances in Knowledge regarding the Circulation and Attributes of the

Blood since the time of Harvey." The Croonian Lectures were delivered by Dr. Edwin Goodall, the subject being "Modern Aspects of Certain Problems in the Pathology of Mental Diseases." The Bradshaw Lecture, by Dr. Tirard, the subject: "Some Clinical Contributions to the Study of Glycosuria." The Fitzpatrick Lectures, by Dr. Mercier, the subject: "Leper Houses and Mediæval Hospitals." The Milroy Lectures, by Dr. E. L. Collis, the subject: "Industrial Pneumoconioses, with Special Reference to Dust Phthisis." Lumleian Lectures, by Dr. Sidney Martin, the subject: "Non-ulcerative Infections of the Colon."

The Goulstonian Lectures, which should have been delivered this spring by Dr. Gordon Holmes, have been postponed till the autumn, as the lecturer has undertaken medical work with our army abroad.

Similarly the Horace Dobell Lecture, which should have been delivered last autumn by Sir W. B. Leishman, has been postponed till next autumn, in consequence of the military duties of the lecturer.

GIFTS.

Dr. Frank Shufflebotham (late Milroy lecturer) presented to the College a china tea-service; Sir R. Douglas Powell, a photograph of Mr. Yeames's picture of Harvey at the Battle of Edgehill; Dr. Squire, some clinical thermometers of an early type. Valuable presentations have been made to the Library.

PERSONAL.

Mr. Mark Lemon Romer, K.C., has been elected Senior Standing Counsel to the College *vice* Lord Parmoor.

In July, the College learnt with regret of the death of Mr. H. E. Roscoe, a member of the firm of Field, Roscoe and Co., the College Solicitors.

SCHOLARSHIPS, PRIZES, ETC.

The Bisset Hawkins Medal, for work done in promoting Public Health, has been awarded to Sir Ronald Ross, K.C.B. The Murchison Scholarship, on the recommendation of the examiners, Dr. de Havilland Hall and Dr. Rolleston, was awarded to Dr. C. J. Marshall, of Charing Cross Hospital. The award of the Weber Parkes Prize will be made this year for the last time under the original regulations, which require that essays be sent in on some set question connected with Pulmonary Tuberculosis. Difficulties have so frequently arisen in connection with the essay, that after careful consideration and with the consent of Sir Herman Weber, the founder of the prize, it has been determined to give the prize for the best work already done in connection with Tuberculosis, and no longer to require an essay. The Jenks Scholarship has been awarded by the Council of the Royal College of Surgeons to Mr. J. D. M. Cardell.

CENSORS' BOARD.

Sir Wilmot Herringham, who had been elected censor in July, was appointed consulting physician to the forces abroad in October. The rules concerning the attendance of censors at the board being very strict, it was deemed impossible to appoint a vicarius for any length of time, and consequently Sir Wilmot Herringham's resignation was accepted with regret. On the nomination of the council Dr. Newton Pitt was elected censor (December 3, 1914).

In accordance with an understanding arrived at with the College (January 29, 1914), the censors' board have considered and replied to letters from the Home Office asking the advice of the College as to whether the title "royal" could fitly be bestowed on certain Hospitals. The advice thus given has been followed.

A letter was received by the College in May from an

interdepartmental committee of the Foreign Office asking an opinion on some restrictions in the sale of certain narcotics, which it was proposed to impose with the object of giving effect to the provisions of the International Opium Convention held at the Hague in 1912. This was referred to the censors' board. The questions being intricate, the board referred them to a committee composed of Dr. Hale White, Dr. Acland, and Dr. Willcox. The report, after being twice discussed at the College, was adopted and forwarded to the Foreign Office, who have expressed their thanks to the College for the advice.

In the last presidential address attention was drawn to the fact that the Local Government Board, as represented by Sir Arthur Downes and Mr. Lithiby, had interviewed the Censors' Board concerning the position of infirmary medical officers in relation to the notification of abortion; and that the College, on the advice of the Board, had forwarded to the Local Government Board a report on this subject, containing the opinion of eminent counsel, presented by a committee of the College in 1896. The question, in a more general form, has been put to the Board again this year. As the College has quite recently considered it (March 4, 1915), a very short summary may suffice now.

At the Birmingham Assizes in December last, Mr. Justice Avory commented unfavourably on the conduct of certain medical men, because they had not notified to the police a case where death resulted from an illegal operation to procure abortion. The public prosecutor sent the learned Judge's observations to the president and censors, and asked whether they concurred with them. The Board declined to express an opinion on the Judge's observations in this particular case, as they believed, from other letters submitted to them, that he did not know that the patient's death was unexpected; but feeling that the general question as to the duties of medical men in such cases should be discussed by the

College, they submitted a report to the College in which were embodied the views both of the public prosecutor and of the Censors' Board.

This report was carefully discussed by the College and ultimately referred back for further report to the College by the Censors' Board. I can only earnestly express the hope that the College may eventually suggest some way of helping in the prevention of crime whilst safeguarding the confidence to be maintained between doctor and patient.

FINANCE.

The Conjoint Finance Committee, at a meeting held on December 16 last, reported a balance larger by about £3,600 than last year, being the largest balance since 1890. Though this was largely due to the extra or "war" examination held in September, yet the entries preceding the declaration of war had been very satisfactory. Probably, however, there will be fewer candidates in the immediate future, many medical students having taken service abroad, and thus there will be diminution in income. The total balance divisible between the two Colleges was £13,221 16s. 9d.

At the quarterly meetings of the College Finance Committee satisfactory credit balances have been reported to the College. Indeed, it has been found possible to invest £1,000 out of current account; although there have been certain extra items of expenditure as follows:—the silver tazza bought at the Ashburnham sale, £256 4s. 3d.; the epidiascope for lecture purposes, and repairs, &c., to the lecture room, £105; contribution to repair of the tomb of Farmer Jesty (a pioneer of vaccination), £10; donation to the Prince of Wales's National Relief Fund, 200 guineas; donation to the fund for the relief of Belgian doctors and pharmacists, 50 guineas.

The negotiations with the Corporation of London for the (compulsory) sale of 48, Knightrider Street, have

been brought to a conclusion ; the payment agreed upon is £6,500. This sum, it is understood, will be handed over to the Charity Commissioners, who will thus become the administrators of the Sadleir Trust, paying to the College four-fifths of the interest, and to the Royal Society one-fifth, for the maintenance of their Croonian Lectures.

In October last, when the possibilities of a zeppelin raid on London were much discussed, the College insured against risk from such aerial attacks. Since, as was justly remarked, many of the College possessions are irreplaceable, the librarian and the registrar were directed to consult the Admiralty as to the feasibility of protecting the roof by sand bags. The Admiralty did not appear to regard this measure as desirable. A compromise has been made by removing into the strong room downstairs such valuables as it will hold.

COMMITTEE OF MANAGEMENT.

This Committee met on August 14, and decided, with the approval of the two presidents, to hold an additional final examination, so as to enable candidates to qualify before the end of October, since the services of medical men were much required both at home and abroad. Conditions were attached which were intended to facilitate the entry to this examination without interference with the regular curriculum of study. There was a large entry of candidates, and the College at a special meeting held on September 24 granted the licence to 122 candidates.

On October 13 the Committee recommended a modification in the regulation relating to the admission to the final examination of students of colonial, Indian, and foreign universities recognized by the Board. Under the original regulation a student of such a university who intended to take our diploma could not avail himself of the exemption from our first and second examinations till after he had taken his degree. Under the new regula-

tion he can avail himself of this exemption and proceed to our third (final) examination before qualifying at his university. This puts him on the same footing as members of the universities of this country as regards entry to our final examination. The College approved this recommendation.

In consequence of the disturbed state of foreign affairs, the annual inspection of the examinations of the Egyptian school of medicine has not been made this last winter.

GENERAL MEDICAL COUNCIL.

There have been no transactions of importance between the Council and the College.

NATIONAL HEALTH INSURANCE.

In May, the College was informed that certain extensions of the Insurance Act were contemplated, embracing particularly the provision of referees and consultants and of clinical laboratories. A small watching committee was appointed, but apparently nothing has happened to necessitate their meeting.

GOVERNMENT DEPARTMENTS AND OTHER PUBLIC BODIES.

The communications from the Home Office relating to certain hospitals and the title "royal," and from the Foreign Office relating to proposed restrictions on the sale of narcotic drugs, have been mentioned in reviewing the work of the Censors' Board.

The Privy Council has forwarded to the College a statement from the Consul in Rio de Janeiro of the conditions under which persons holding foreign diplomas will be allowed to practise in that State.

The Charity Commissioners intimated to the College (in April) that a new institution was to be formed by the

amalgamation of two existing charities, viz., the British Lying-in Hospital, Endell Street, and the Home for Mothers and Babies, Woolwich. On the committee of this new institution, which will be called the "Maternity Hospital and School for the higher training of midwives," it was proposed to place two members, representing the Royal Colleges of Physicians and Surgeons respectively. The College was asked whether it would exercise the power of nominating a member, and replied in the affirmative, and has nominated Dr. Herbert Spencer.

The Marine Department of the Board of Trade sent to the College a report concerning an outbreak of beri-beri on a merchant vessel, asking for comments. The report was lengthy and detailed, and could not be communicated to the College till July 30. The President, having carefully studied the report and also the comments which Dr. Sandwith in an official capacity had made, obtained leave from the College to associate himself with Dr. Sandwith's comments.

The Board of Control (March 25) asked for suggestions for the use of a grant of money towards research into the causes and treatment of mental diseases and defects. The subject was referred to a committee of the College, whose report was adopted after some discussion (May 14). By this the Board of Control was recommended, *inter alia*, to give the grants to a few thoroughly trained observers, who should be selected by a small committee appointed by the Board. The Board appointed such a committee, and asked the President to nominate two members of it. He nominated Dr. Percy Smith and Dr. Mott.

Sir Arthur Downes, as chairman of a Committee concerning district nursing in London, asked the College to nominate a representative upon a Central Council of persons engaged in or interested in district nursing. Sir Dyce Duckworth was nominated.

OTHER COMMITTEES OF THE COLLEGE.

The revision of the "Nomenclature of Disease" is proceeding: frequent meetings of the subcommittee of classification are being held, and it is hoped that the new edition will be ready next year.

In May last a committee was appointed to report to the College on the new anatomical nomenclature. The report of this committee is nearing completion.

In July last the College received a letter from Prof. Cushny, retiring examiner in practical pharmacy, in which he expressed his dissatisfaction with certain parts of that examination. The subject of his letter was referred to a committee. Since the schedule of drugs formed part of the question, the meeting of the committee was delayed till the new edition of the British Pharmacopœia had appeared. The committee is now at work.

The report of a committee on the infectivity of tuberculosis was printed as an appendix to last year's presidential address. A large number of applications for this document have been received, so that it may be inferred that it supplied a public need.

This College, through many of its fellows, has held itself at the Government's disposal in the present war. Several fellows are acting as consulting physicians to the expeditionary force; one as consulting physician to the Naval Hospital at Netley; two are engaged in important hospital work in Servia; several, who some years ago entered the territorial reserve as members of their respective hospital staffs, have been called upon to give their services at the various base hospitals established in London. This number included three censors of the College.

The President has had conferences with the Medical Director-General of the Navy and the Director-General of the Army Medical Service on various points connected with their respective services, and has assured them of the readiness of the College to assist in every way possible.

OBITUARY NOTICES.

I.—SAMUEL HERBERT HABERSHON.

SAMUEL HERBERT HABERSHON died February 26, 1915, aged 57. He was born in London, the son of a distinguished fellow of this College, who in his time was senior physician to Guy's Hospital. Habershon was educated at University College School, and then for a time, on account of his health, at Eastbourne. He entered in due course at Trinity College, Cambridge, where he took his natural science tripos, and began the study of medicine, and subsequently became a student at St. Bartholomew's, where he had a distinguished career. He gained both the Kirkes and the Lawrence medals, and held in succession the posts of house surgeon, house physician and casualty physician, and then studied for a time in Vienna. In 1887 he took his M.D., and was elected a fellow of this College in 1891. After holding some intermediate appointments Habershon was elected on the staff of the Brompton Hospital for Consumption and Diseases of the Chest in 1893, and to this Hospital his principal life work was given. He was not only an accomplished and conscientious physician, but he never spared himself in the various duties of hospital management to which he was summoned from time to time. Amongst other important tasks he was indefatigable in his endeavours to co-ordinate tuberculosis dispensary and out-patient work, and the different forms of in-patient hospital and sanatorium relief in this Metropolis. He was always ready to give of his best in the investigation and preparation of reports concerning the hygiene of tubercle and the medical side of insurance benefit which in recent years engaged the attention of this College.

Moreover, he gave a great deal of time and thought to the effective organization of convalescent homes. I have reason to know that he was most unselfish and thorough in many of his efforts in this direction, and he was quite

willing to face opposition in order to get such homes administered on sound lines.

Habershon wrote some interesting papers on hereditary optic atrophy and observations on iodophile leucocytes in current blood, and he published in 1909 a concise and scholarly manual on diseases of the Stomach, very fully and accurately illustrated. The pathological and therapeutic portions of this book were prefaced by valuable preliminary chapters which gave the data of modern physiological investigations bearing on the subject, in clear and practical form.

Although he had given much time to the study of chest diseases he never embodied his experience in any large work on the subject, but a recent paper of his on the secondary infections of pulmonary tuberculosis and their treatment by vaccines, to which he had given much attention, seemed to me to deserve both thought and thorough trial.

Habershon was married to Miss Davies, of Anglesey, who survives him, and he left three sons who are all serving their King and country in the present war.

It is interesting to remember that in the closing years of Mr. Gladstone's life Habershon was his devoted and valued medical attendant.

He was a refined and sensitive man, and in his prime had a beautiful voice. For some years he suffered severely from asthma, but he had wonderful courage and tenacity, and saw patients till within a few days of his end.

He was an honourable, high-minded and public-spirited fellow of this College, and we mourn his premature death.

II.—EDWARD COX SEATON.

Edward Cox Seaton died February 20, 1915, aged 68. He was born in Chelsea in 1847, and was cradled. if we may say so, in the department of public health.

His father was Dr. Edward Cator Seaton, who was Medical Officer to the Privy Council, and the friend and successor of Sir John Simon at the Local Government Board, and was largely responsible for drafting the Compulsory Vaccination Act.

Seaton was educated at Tonbridge School, and then entered on the study of medicine at St. Thomas's Hospital.

He took his M.D. at the University of London in 1871, and in 1872 he was appointed medical officer of health to the town of Nottingham, with charge of the cases of acute infectious disease. He was also physician to the Nottingham General Hospital. These posts he held for twelve years, and then was appointed medical officer of health and public analyst for Chelsea.

In 1871 he was created the first medical officer of health for the administrative county of Surrey, and this important office he held till 1910.

For ten years he was lecturer on public health at the medical school of his old hospital. He examined in this subject at several of the universities and at the conjoint board, and he edited the masterly reports of his friend and teacher, Sir John Simon.

He was elected a fellow of this College in 1886 and in 1896 was appointed our Milroy lecturer, and took as his subject the "*Raison d'être* of Isolation Hospitals."

In 1910, in the Chadwick lectures, delivered before the University of London and subsequently published, he discussed the whole subject of the preventive treatment of infectious diseases. Seaton's whole life was devoted to the advancement of public health, and his knowledge and experience were so sound and ripe that his utterances, as well as his writings, were always received with great respect in this College.

During his later years he had very poor health. He was devotedly nursed by his second wife, who was the daughter of the late John Marshall, the eminent surgeon and anatomist. She and their one daughter survive him.

III.—ISAAC BURNEY YEO.

Isaac Burney Yeo died November 20, 1914, aged 79. He was born at Stonehouse in Devon, and began the study of medicine in the old-fashioned way as an apprentice to Dr. James Sheppard of that town. He attributed, perhaps rightly, much of his success as a practitioner to that early training, but it is fair to recognize that he had exactly the personality to profit by that particular type of introduction to practical medicine. He entered the medical department of King's College, London, in 1858, when he was 23, and very soon proved his capacity by taking in succession the prizes and scholarships which were open to him. He qualified for the gold medal at the London M.D., and from 1865 to 1871 held the post of resident medical tutor at King's College. In 1869 he was appointed assistant physician to King's College Hospital, and shortly afterwards elected on the staff of the Brompton Consumption Hospital. The latter appointment gave a considerable bias to his professional work, but he only held it for ten years. At King's College and King's College Hospital, however, he remained in active work till 1899, being ultimately in turn physician, professor of clinical therapeutics and professor of systematic medicine.

Burney Yeo's vocation was undoubtedly that of a teacher of therapeutics and of a practitioner of medicine. If he could have held a large post-graduate teachership that would have been his true *metier*.

Pathology, I think, did not greatly attract him, nor the special elucidation of the physical signs of disease for the sake of his clinical clerks, but everything concerned with the treatment of the symptoms of disease, in its wide sense, was of supreme interest to him. He had no special acquaintance with the pharmacology of drugs as studied in the laboratory, but in the practical application of medicine no detail to him was unimportant, and every prescription for every patient was carefully studied.

This is noteworthy, for Yeo belonged to a generation in which, partly owing to the gradual evolution of more accurate estimation of evidence and partly owing to the influence of two or three great intellects in our profession, there was a certain wave of scepticism, nay even of nihilism in regard to treatment by drugs. Of that wave Yeo never scrupled to express his dislike, if not even his contempt.

It is not ungracious nor unjust to him to say that his success as a private consultant was more brilliant than as a hospital teacher. He was a keen man of the world and studied the personality and point of view of his patients with considerable insight.

Although he had a real belief in drugs, and in his own methods of combining and administering them, there is little wonder that his attention should have been turned quite early in his professional career towards climatic experiences. He had considerable facility in incisive expression, and some effective magazine articles on sea-side and mountain, on various food problems, and on the relations of doctor and patients attracted considerable attention amongst that part of the reading public which is always keenly interested in the border land of practical medicine.

Yeo took pains to make himself acquainted with the high hill stations, and he had a considerable share in their popularization for the treatment of chest diseases. He also made a thorough visitation of the chief sea-side resorts at home and abroad, and of the main therapeutic mineral springs. His portly book on the subject is a mine of useful information. I do not think that one can say it is a big book in the sense that it gets down to the bedrock principles of the subject, and some of its pathology is somewhat perfunctory, but there is the personal touch, the evidence of common sense, and now and then a characteristic cynicism about undue claims which gives cause for wholesome reflection.

The "Manual of Medical Treatment," in two volumes,

the first edition of which was published in 1893, was a thorough and systematic work, and has gained a well-merited place in the library alike of the senior student and of the practitioner. The basis is a concise and fairly ample clinical account of recognized diseases, and treatment is fully discussed in the light of symptoms as they are unfolded, with their immediate causation. This book has the merit of covering the area of the modern practice of medicine with considerable discrimination and in a critical spirit. There are many instances in which the writer is bound to mention methods concerning which he is compelled to suspend judgment. But the student is really indebted for the many quiet piquant suggestions of the need of caution, and of further verification. Burney Yeo's personal contributions to practical therapeutics as expounded in this manual were many of them excellent. His contention for the routine treatment of typhoid fever by administration of dilute chlorine water is, I consider, well maintained, and his naso-oral respirator and his claim for the use of continued antiseptic inhalations has been lately revived with considerable effectiveness by Dr. David Lees. These are only two simple examples of Burney Yeo's definite and practical bias towards useful therapeutics. This book is now in its fifth edition, modern advances in diseases of the nervous system having been collated and rewritten by Dr. Farquhar Buzzard, and in other branches of medicine by Dr. Raymond Crawford. It ought to maintain an assured place in English medicine.

Burney Yeo became a fellow of our College in 1876. He and I examined together in the practice of medicine. He had the reputation of being a sensitive and irritable examiner, but I can bear witness to his being very generous in his estimates. He was married late in life to Miss Spyers, who survives him. He was in poor health for several years, and was seldom seen amongst us. I fear that he felt lonely and isolated. His old King's contemporaries were mostly gone. His pupil and

successor, Dr. Raymond Crawford, has written a charming appreciation of his personality and of his work. We shall not forget his clear incisive speech and his considerable gift in therapeutics. His most generous benefactions to his old hospital and to our two great charitable funds remain as evidence of his abiding affection for medicine and for all who practise our art.

IV.—EUSTACE SMITH.

EUSTACE SMITH died on November 14, 1914, in his 80th year. His father was the Vicar of Milverton, in Warwickshire, and Eustace Smith's early education was at Leamington College. Thence he proceeded to University College, London, where he pursued the greater part of his medical studies. In the Hospital he worked especially under Walshe and Jenner, to both of whom he owed a great deal in thorough and exact methods of physical examination. He studied in Paris also for a time, and besides taking the M.D. of the University of London he became a fellow of the Royal College of Surgeons, and was always keenly interested in the surgical aspects of his cases. Through Sir William Jenner's influence he became physician to the late King of the Belgians, with whom he travelled for a considerable time in the East.

After settling in London and taking the membership of our College, Eustace Smith joined the staff of the Victoria Park Hospital for diseases of the chest, where he gave long and faithful service as assistant physician and ultimately as senior physician. But his outstanding life-work was in connection with another institution. In 1870 he became one of the staff of the recently founded East London Children's Hospital, Shadwell, and his devoted service there of forty-four years, lasting till the

very end of his life, was by general testimony remarkable in many ways.

He was a zealous clinician, euthusiastic in the personal investigation of his cases, and accurate in the estimation and interpretation of his physical signs. He was not dominated by the ultimate problems of medicine or by recondite pathological inquiry ; but the essential diagnostic and therapeutic aspects of a case were always in his mind, and no practical detail of regimen was insignificant to him. If it were hinted in the gentlest way that he was unnecessarily dogmatic and restrictive in some of his dietetic instructions he never admitted the impeachment.

Eustace Smith was ungrudging in the time and effort he gave to all the activities of the Hospital, and his dominant personality counted for a great deal in its success. He was senior physician in name and in fact to the very end, and his colleagues would never hear of his resigning, but he was like the elder brother of every member of the staff. It was delightful to hear him speak with genuine appreciation of his younger colleagues. He was not a flatterer nor a time server, but he was both just and generous, and anxious to recognize good service and good scientific work.

Eustace Smith made some solid contributions to the literature of children's diseases. Of these the most important was his book on the wasting diseases of infants and children, which went through six editions and gained an established place as both a practitioner's and a student's guide. But he wrote a practical treatise on children's diseases in general, which reached a third edition, besides a number of clinical studies and essays. He wrote in an easy, lucid style, and all his work, in spite of pathological limitations, had the homely practical quality of which I have already spoken. His clinical chapter on mucous disease, though it may not have established his claim for a separate morbid entity, constituted a helpful description of a noteworthy

symptom complex, and his observations on the diagnosis of bronchial gland enlargements were ingenious and original.

Eustace Smith was married in 1875 to Miss Katherine Place, who survives him. He left one son and one daughter.

He became a fellow of our College in 1874, and was a member of council 1896-98. His voice was not often heard in our comitia or indeed in the medical societies of London, for he was singularly shy and reticent in any public meeting. I was determined on account of his unquestioned distinction in the study of children's diseases and his seniority amongst us, that he should preside over the section for that subject in the International Medical Congress of 1913, and after infinite persuasion he consented to it. He was an excellent president, and at the close of the session spoke of his presidency as the crown of his career. Although he was so shy in public, in private gatherings of friends, both professional and otherwise, he was genial and hearty and ready to bring forth treasures new and old. He was a good painter in water colours, and devoted to the English poets, but he was as modest about his accomplishments as he was about his serious life-work. It is hard to realize that as a boy he had been patted on the head by Wordsworth. At 80 years old he was still erect, and his sight and hearing were good, and he still enjoyed his hospital work. It was doubtless this gift of perennial youth which made him so appreciative of his younger brethren, and so ready to welcome new knowledge whencesoever it came.

V.—JOHN ABERCROMBIE.

JOHN ABERCROMBIE died, aged 63, on April 30, 1914, at his home, Angill Castle, Brough, Westmorland.

He came of an Aberdonian stock. One of the most

remarkable of his collateral forebears was John Abercrombie, the well-known Scotch physician, and author of one of the early treatises on nervous diseases and of the "Inquiries on the Intellectual Powers," a book which had a considerable vogue in the early part of last century. John Abercrombie's grandfather was an army surgeon. His father was a fellow of our College, and was a physician of considerable repute in Cheltenham.

Abercrombie was educated for eighteen months at Eton, and was then transferred to Cheltenham, and in due time he entered, as his father had entered before him, Gonville and Caius College, Cambridge. Dr. Guillemard, in the charming little memoir which he has written of his friend, mentions that at the period when he entered Caius, Dr. George Paget, who in those days dominated the medical school, dissuaded men destined for physic from taking a tripos because they would need all their time after taking a pass degree for work at elementary medicine.

Abercrombie was keen at sports. Like his father he rowed in his College boat, was a good cricketer, a remarkable walker, and an enthusiastic volunteer. He shot at Bisley for the University in the winning team of 1873.

When he left Cambridge he entered St. Bartholomew's. In his hospital career he owed a great deal to his cousin, Dr. Patrick Black. He was Black's clinical clerk when Robert Bridges was his house physician, and subsequently Abercrombie became Black's house physician. Black—Dr. Norman Moore tells us—was somewhat of a sceptic in therapeutics, but his thorough methods of examination and his originality and independence of view seem to have had a striking influence on the best of his pupils. Abercrombie, like others, could never speak too warmly of the debt he owed him.

Subsequently Abercrombie was appointed to the post of Medical Registrar at the Hospital for Sick Children, Great Ormond Street, and there I saw a great deal of

him during several years. He was one of the best clinical note takers I ever knew—thorough, systematic and accurate. His notes reminded me of those of Dr. Gee, to whose terse laconic style and invaluable teaching I am convinced that he owed a great deal.

He read two very good contributions to the International Medical Congress in 1881, on albuminuria in diphtheria and on diphtheritic paralysis, but the most important paper, as I believe, which he ever wrote was a clinical monograph on tetany in children, which was admirable and of permanent value. I took a sort of elder brother interest in this monograph because I urged him to take up the subject for his M.D. thesis and especially to follow up a curious symptom in this curious disease, viz., the irritability of the facial nerve elicited by simple percussion over the parotid region which gives rise to sudden contraction of the muscles like that produced by faradic stimulation.

In 1884 Abercrombie was appointed assistant physician to the Children's Hospital, Great Ormond Street, and he held this post for nine years. In 1882 he had already been elected on the staff of Charing Cross Hospital, becoming successively assistant physician, physician and lecturer, first on forensic medicine and afterwards on systematic and clinical medicine. His unfailing interest in children's diseases led him also to accept the appointment in 1890 of physician to the Foundling Hospital. He was an excellent teacher. His "Student's Guide to Forensic Medicine" is an embodiment of his lectures giving the essentials of the subject in concise and lucid form. His clinical teaching was exceedingly good—quiet, conscientious, measured, not given to rhetorical display. He was very judicial, and always ready to substantiate his conclusions by well ordered compact experience. His sound judgment was recognized and valued by his colleagues, and his complete and exhaustive examination of a patient was a model to his students of what a physician's method ought to be.

During his earlier professional life Abercrombie did a certain amount of medical journalism for the *Medical Times and Gazette*, but he was glad to be quit of it, and found more congenial occupation in some of the medical societies. His voice was not often heard in medical discussions, for he was a modest and indeed retiring man, who was never concerned to push his views or air his knowledge, but he took immense pains in the performance of official duties and in the advancement of any society of which he became either secretary or treasurer. His services to the Ophthalmological Society, and still more to the Society of Medical Officers of Schools, of which he was one of the founders, will never be forgotten by his contemporaries. He gave generous guidance to the students' society at Charing Cross, and he was one of the founders of the Chère Reine Lodge of Freemasons. Abercrombie was elected a fellow of our College in 1886. He filled the posts successively of examiner in medicine, councillor and curator of the museum.

In 1905 he astonished his friends by announcing to them that he meant to relinquish his London life and make his home in Westmorland. In spite of the first-rate position which he had gained amongst his compeers and the keen enjoyment which the pursuit of medicine had yielded him, he had reckoned up the gifts that life could bring, and had carefully estimated their relative value. He had married Miss Tobin, a lady who had been a Sister in Charing Cross Hospital; they had a son and daughter and a refined and happy home, with many resources beyond those of his profession. He was a good musician, and had an intimate knowledge of some other branches of art. Thus he had already collected several fine pictures of the Italian Renaissance, which were a great joy to him. He had travelled once to Greece in company with Mr. Penrose, the distinguished architect and archæologist. He had also visited Egypt and Spain and Russia, caring for their precious art treasures and antiquities even more than for their scenery.

Thus it arose that in surrendering his London life he was looking forward to further enjoyment of the rich culture which he had acquired in the past. In one of the Westmorland dales near the town of Brough he and his wife made their country home. They strove not only for their own happiness, but to enrich and brighten the lives of their poorer neighbours. Abercrombie discharged also as occasion required the duties of a county magistrate. Nothing could be more delightful than the six short years which passed in this happy home, and then like a bolt from the blue came a sudden attack of pain which he at once recognized as angina. During the next two years this recurred, and became slowly aggravated. Then he faced his fate, and arranged his plans for his family with the fortitude not only of a stoic but of a Christian.

Never a word of complaint or of repining escaped from his lips, and steadily advancing heart failure found him ready and waiting for the end.

Abercrombie's family motto was strangely apposite to his character and his career—*vive ut vivas.* But although his life was rich and full in its output of self-culture, it was rich likewise in its output of self-sacrifice.

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VI.—PHILIP HENRY PYE-SMITH.

PHILIP HENRY PYE-SMITH died on May 23, 1914, aged 75. He had long and honourable family links with the town of Sheffield through many generations of stalwart nonconformity. His grandfather, the Rev. Dr. Pye-Smith, was an eminent divine, a fellow of the Royal Society, and no mean geologist.

Pye-Smith's father was a very able medical practitioner, living at Hackney. Beneath his roof no less than four Guy's physicians received their first lessons in medicine.

Pye-Smith was born at Hackney, and began his education at Mill Hill Grammar School. Thence he

proceeded to University College, London, and took his B.A. in the London University in 1858 with honours in classics. He then began his medical studies in his father's old school of Guy's Hospital. Following close on the steps of his friend Fagge, he took almost every medal and honour that was open to him, finishing his course with the gold medal in medicine at the London University M.D.

Pye-Smith's chief practical hospital work was done under Birkett, Bryant and Gull, and he also held the post of resident obstetric officer. After he had passed his M.D. he took a long course of post-graduate study. He went to Edinburgh and studied for a time in the medical wards of the Royal Infirmary. Our Treasurer, who was then house physician to Hughes Bennett, recalls many friendly colloquies with Pye-Smith on clinical cases; even in those days he was ready to take up cudgels against the doctrine of diatheses. Then he successively studied at Paris under Trousseau, at Berlin under Virchow, and at Vienna under Hebra. He lived under Hebra's roof for a time, and it was probably Hebra's teaching that was one cause of the life-long attraction for Pye-Smith of the study of skin diseases. At a subsequent period he translated the middle portion of Hebra's work for publication by the New Sydenham Society.

In 1865 he returned to Guy's and became lecturer on comparative anatomy, a post which he held for ten years. During this period he reorganized the museum of comparative anatomy, and wrote a catalogue of the specimens. His class teaching in comparative anatomy was very thorough; some of the specimens which he demonstrated were of his own dredging. At this period he was closely associated with Huxley and Michael Foster and other biologists, and it seemed possible that he might have devoted his life to the biological threshold of medical science. In 1866 he became one of the demonstrators of anatomy, and in 1870, as I believe, not

only to his own advantage but to the ultimate advancement of knowledge in our profession he was appointed medical registrar, and in 1871 assistant physician. Soon afterwards he became teacher of practical physiology, which at that time, as some of us remember, was really summed up in practical histology. In 1873 he was associated with Dr. Pavy as lecturer in physiology, and in 1877 he took the whole of these lectures and held the chair until 1884.

In 1877 he took charge of the skin department, and became a very successful teacher. There is no doubt this subject had peculiar attractions for Pye-Smith, on account of the scope which it gave for his striking gifts of classification and his remarkable acumen in all questions of rational nomenclature and definition.

It may truly be said that in his oral teaching, in his systematic lectures, and in his writings he made the study of skin diseases an invaluable opportunity for students in the method of investigation as well as of naked eye observation. His contemporaries as well as his pupils will remember his forcible, not to say drastic treatment of the French doctrines regarding the dartrous diathesis, and the animation with which he rushed to the fray of demolishing the arthritic relationships of eczema.

Of Pye-Smith's class teaching in general it may be said that, considering his fine presence, his outspoken utterance, his rich vocabulary, good memory and good draughtsmanship, it is no wonder that he had an abiding influence on the students of his generation.

In 1883, after Fagge's death, Pye-Smith became one of the senior staff. He was lecturer on medicine, and became in due course senior physician, and on his retirement at the age limit, consulting physician. Here it may fitly be said that Pye-Smith's keen sense of duty made him a tower of strength in hospital management.

Concerning his other public activities, it should first be mentioned that he was ever a devoted alumnus of the University of London. He was one of the best speakers

in convocation, was a member of both the old and the new senates of the university, and took the deepest interest in the development of the internal side both before and after the reconstitution.

He filled the position of vice-chancellor from 1903 to 1905. During his tenure of office he presented our King and Queen (at that time Prince and Princess of Wales) for honorary degrees on the solitary occasion when such degrees were conferred. Nobody then present can forget the felicity and charm of the speeches with which he introduced these distinguished honorary graduates to the chancellor. Pye-Smith was a hard-working member of the General Medical Council, and for a time he was treasurer of that body. In his early hospital career when he lived at Finsbury Square, he took an active share in the Hunterian Society, and he was a staunch supporter of the Pathological Society, to the *Transactions* of which he contributed several papers. In 1886 he was elected a fellow of the Royal Society. To no public body was Pye-Smith more devoted than to our College. He was elected to the fellowship in 1870, and was in turn examiner, councillor and censor. He delivered the Lumleian lectures on "The Etiology of Disease," and the Harveian oration on "Pathology as the Basis of Rational Medicine." They were typical examples of Pye-Smith's style—terse, trenchant and virile—and adorned with knowledge of general literature and of historical medicine, which was not only thorough and discriminating, but singularly apt in the felicity with which it was summoned to give point and illustration to any given statement or contention. He was a capital debater, ready, clear and forcible. He aimed at the establishment of first principles and the simplification of issues. Medical education presented to him unfailing interest and almost sacred importance. He had no wish to overburden the medical curriculum, but he always insisted on the vital importance, as a basis, of sound physiological training. He gave the College of his best. His after-dinner speeches were elegantly expressed and pitched on a fine note.

Of Pye-Smith's contributions to medical literature the most important in every way was the "Text-book of Medicine," in two volumes, which went through four editions. The original work was written in part by Fagge. When it was first issued after Fagge's death, Pye-Smith wrote the chapters on skin diseases, and edited the rest of the book in conjunction with Wilks and Carrington. In the successive editions the book was recast and re-edited, and in the fourth edition issued in 1901, it was almost entirely rewritten by Pye-Smith. It is eminently characteristic of him in method, style and individuality. The quotations from classical authors which preface each chapter give a flavour of scholarship to the book, and the historical paragraphs which elucidate the stages by which knowledge of diseases has been gradually evolved, are both terse and accurate.

But the most interesting and valuable features are the very able introductory chapters which illustrate the power of accurate definition, of generalized statement and of logical presentment of medicine which Pye-Smith possessed in so eminent a degree.

It is, I venture to think, in the didactic handling of the facts and doctrines of our art science that Pye-Smith's excellence as a teacher and a writer was recognized and will be long remembered. He was not, I think, a remarkable original observer, and could not be placed amongst what may be called the great field naturalists of pathology and clinical medicine, but he was a first-class critic in the high sense, constructive, that is elucidatory, as well as destructive.

I used to think his mind was a little hard and crystalline, he had no use for what was vague and nebulous, and he was perhaps sometimes a shade dogmatic. His moral qualities were closely allied to his intellectual ones —perhaps they insensibly faded one into another. He bore fools badly. Mean and mercenary views of life and of medical policy and medical practice evoked in him a fine glow of indignation, I might even say of scorn.

He had great courage, and all through his life he held strongly the faith of the Gospel. He had the virtues of the high-minded and intellectual puritan, and perhaps some of the limitations. He was proud of his great medical school, of its great traditions, and of his great predecessors, and he was the most loyal of colleagues. He was generous in appreciation of all good work and especially of the work of younger men.

He made staunch and life-long friendships, and was a delightful comrade. He was devoted to his library and to his old books, and he rejoiced in the best literature and strove his utmost to make others rejoice in it. He would beg young doctors to read Sydenham and Heberden and put aside ephemeral things.

Pye-Smith was married to Miss Foulger, who survives him. He had one son who is now serving his King and country.

Years ago Pye-Smith's fine presence, his personal dignity, his reverence for the high traditions of this College and for English medicine had led many fellows to look forward to the time when he should adorn this chair. But, alas, it was not to be. Six years ago he became the subject of insidious and progressive cerebro-spinal degeneration.

He passed away from our midst into the quiet and seclusion of his home. There he was devotedly tended by his wife, and his doctors watched him with sedulous care. The five weary years passed away, and he was gathered to his rest, "and we sorrowed most of all that we should see his face no more."

And now for the last time I desire to thank my brethren of the Censors' Board for their wise and zealous co-operation. I have also to record my indebtedness to the Registrar, the Treasurer, the Harveian Librarian, and the Emeritus Registrar, for their invaluable advice and their constant support. Finally, I desire to acknowledge the unfailing courtesy of the fellows of the College during the

five years that I have had the honour of presiding over their deliberations.

May I express my sincere desire for, and confident belief in, the continued prosperity of the College, and my fervent hope that it may still maintain the ancient paths —and that it may go forward.

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