

An Oration

ON

THE MEDICAL SOCIETY OF LONDON IN THE EIGHTEENTH CENTURY.

Delivered before the Society on May 17th, 1897,

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MR. PRESIDENT AND GENTLEMEN,—On Wednesday next, May 19th, the Medical Society of London will be entering upon the 125th year of its existence. The first meeting was held on Wednesday, May 19th, 1773. Our illustrious Lettsom attended it, his name appearing second upon the list of those who had the honour of being present at its birth. At that first meeting the rules of the society were read and considered. Happy the nation, we are told, that has no history. Happy the society, I would rejoin, that has no rules. If the rules of our society have in subsequent times kept us from dangers and extricated us from difficulties, they were in the eighteenth century the cause of much bitterness and unhappiness, and very nearly brought about the wreckage of the Institution whose interests they were intended to protect. The name that stands in the minute-book of the society in front of Lettsom's is that of Dr. Hulme, who, at the next meeting of the society, which was held on the following Wednesday, May 26th, was elected librarian, Edward Ford being appointed secretary. It was, moreover, then arranged that Lettsom should take the chair at the ensuing meeting.

You will think it proper, I am sure, that I should say something in passing about the man whose name is found in our minute books in front of that of Lettsom—the man who was picked out to watch over the establishment of the Library, which, as was always intended, should constitute a very important element in our Society. Nathaniel Hulme was a Yorkshireman, who, at the age of twenty-three years, entered the Royal Navy as a surgeon's mate. Eventually, he took his degree in Medicine at the University of Edinburgh, sending in as his thesis an account of a disease which, unfortunately, he must have had ample opportunities of studying—scurvy. In connexion with this, he showed the benefits of lime-juice in long sea voyages. When he retired from the navy, Lord Sandhurst, who was then the First Lord of the Admiralty, secured for him the appointment of Physician to the Charter House. He went to live, therefore, in Charter House-square, where he enjoyed an extensive and an honourable practice. Unfortunately, in March 1807, an equinoctial gale blew over, or, as I suppose, he, in nautical language would have expressed it, "carried away" one of his chimney pots. It was nothing phenomenal as a gale, nothing like one of those gales to which he had been accustomed when afloat, and I can find no mention of it in the meteorological records of the time in the *Gentleman's Magazine*, but the illustrious physician and Fellow of the Royal Society thought it necessary to go aloft to see exactly what damage had been done. Getting up to the roof, he lost his balance and fell, receiving such serious injuries that he survived his fall only a few days. He had served the Medical Society well, as he had served his country; and we read in a contemporary biographical notice of him that he did "valuable work." He proved himself worthy of the place which he holds in our records, but from his calamitous fall we may, I think, enforce this obvious precept—that a physician should content himself with his proper sphere of practice.

A Society with a chairman, a librarian, and a secretary must needs find a home, and with this important business Lettsom was intrusted. The meeting-room was to be "as nearly central to the respective members as possible," so the Queen's Arms Tavern in Newgate-street was suggested. A good many members of our profession at the present day make their start in active life anxious, because they hamper themselves with a needlessly heavy house-rent. There was to be no mistake of that sort with our budding Society. Lettsom was to hire a room for a sum "not exceeding ten guineas a year." The "Queen's Arms"

business fell through, for at the next meeting, Hulme and Lettsom were authorised to try to secure a vacant room in Wardrobe-court; and because a good many new men were joining the Society, the amount to be allowed for the annual rent went up with a bound to £15. With so much money at stake they thought it expedient to appoint a treasurer. And in choosing Lettsom for this office our founders made—as doubtless they knew they were making—an excellent selection. For the "Accompts book" and the minute books show that his purse as well as his hearty and efficient services were always at the disposal of the society.

From May 31st the Members did not come together again until nearly the middle of July, probably because they had not acquired a place for meeting in; but when they then met we find their minds exercised by the same three questions—the acquisition of a room, the formation of a library, and the drawing up of the rules. The Society was not two months old when Lettsom, the treasurer, laid the foundation of our library by giving "Percivall's Medical Observations" and the "Medicinal Education of Children." The title of the latter book is equivocal. Probably the "medicinal education" of children referred to the fact that, as people in those days had to swallow an enormous amount of filthy physic, they could not expect to survive unless their medicinal education were begun in very early life. I have not seen the book, for had I asked Mr. Hall to look it up for me, I might have been deprived of the opportunity of speculating as to the real meaning of its title. At this same July meeting twenty-nine new members were elected, amongst whom were Dr. James Sims, who a short time afterwards began his reign of twenty-two years in the presidential chair, and Dr. John Millar, who, at the next meeting of the Society was elected its first President. This selection, however, did not prove a happy one. Lettsom was not appointed the first President for, I think, two reasons—first, because he did not want to have himself thrust forwards in the society which he had done so much to establish, and secondly, because he already held the very important post of treasurer.

On Aug. 10th the sixth meeting of the society took place, and as Millar's name is at the top of the list of those present he doubtless occupied for the first time our presidential chair. Lettsom at once reported that he had set to work buying books for the library, for which the society thanked him and ordered his re-imbursement. The "Accompts book" shows that he had already spent £16 14s. in books. At this time the primary cleavage of the society into three parts was established by the appointment of three standing committees of reference—one of three physicians, one of three surgeons, and one of three apothecaries. And by way of further emphasis, as applications for membership were coming in at a great pace, the society resolved that for the present the number of its members should be limited to thirty physicians, thirty surgeons, and thirty general practitioners or, in the language of the time, apothecaries. It can scarcely be altogether a matter of surprise, though it may be of regret, if with the vast increase of learning which has taken place in our profession—without, I suppose, a proportionate increase of mental vigour and power of endurance—secondary and tertiary cleavages have since appeared in our midst. Thus, every region, organ, and tissue in the body has in turn been "specialised," from epiblast to hypoblast, and back again. But this process has surely now gone far enough—some would think too far. For it frequently happens that the practitioner who is cultivating his little allotment of epiblast, for instance, deems himself unable or unwise to look through a mere basement membrane to see what morbid changes may by chance be taking place in the adjacent, but not less important, plot, which his neighbour is cultivating in the mesoblast. So it has come about that one practitioner has been daily and diligently dealing with a tuberculous patch in a larynx, and refusing all the while to recognise the fact that his trusting and hopeful patient was dying of pulmonary consumption. And that another practitioner has been lumbering up the weak back of a growing girl with what he was pleased to call a "spinal support," when all that she needed was sunlight, fresh air, exercise, and freedom. Everybody here must feel that I am not erring upon the side of exaggeration in making these remarks. And if such things have happened in the past, what is going to happen in the future? A large proportion of special practitioners of the present time are fortunately under the inhibitory influence of broad principles which they have acquired in the useful preliminary work of general

medicine, general surgery, or general practice. But henceforth, it seems, the youthful practitioner is to embark in the cultivation of some speciality before the ink on his diploma is actually dry—at any rate, before blue ink has had time to turn black. We hear it urged that the public like this sort of thing. I must not stay to discuss that statement, or even to deny its truth. But supposing that the public do like it, is that a reason why we should stand quietly by whilst our profession, as practised by Hulme and Lettsom, is brought down to the level of persons who try to nourish their children upon patent foods and themselves upon quack medicines?

As I have said, our society was originally designed to secure the collective experience of the three primary divisions of the profession. As a result of this arrangement it would be impossible, I think, to name any other society in which the discussions and debates are more generally instructive; and I make no empty boast when I say that though our society is well advanced in its second century, its work is still abreast with the times. Though it occupies itself with micro-organisms of all sorts it is not consumed by them, and though it investigates antiseptics it does not smell of them. It discusses drugs without exciting nausea, and it enters into pathological problems without becoming morbid. It is scientific without overbearance, and it is never dull. At least, not often. Our founders wished us to be cheerful; and so we are, without effort.

JOHN FOTHERGILL.

Though John Fothergill is one of the Patron Saints of the Medical Society of London, he was never one of its Fellows. He was not, as has been erroneously stated, "one of our founders." The veneration in which he is held by us is chiefly due to the fact that he was the dear friend of our Lettsom, and, during the first ten years of his professional life in London, his guardian angel. Lettsom said of him: "My medical creation was his, and my success in life the result." We esteem him also because he was "one of the first physicians of the age." This was Lettsom's estimate of his professional position, and, looking through contemporary medical literature, it seemed to be a just one. He was, moreover, a man of immense learning and information. He apparently knew all that was known at that time in the natural sciences. His botanical garden at Upton, near Stratford, was celebrated throughout Europe and America. He had fifteen men constantly at work in it and there were other persons employed in making drawings for him of its trees, plants, flowers, and fruits. He was a Fellow of the Linnean Society, and was reckoned to be one of the chief authorities of the day upon shells and corals. He was a considerable chemist, and he was a judge in matters of Art, and it is not unlikely that his young friend Lettsom acquired from him the insatiable thirst for collecting. John Fothergill was a member of the Medical Society of Edinburgh, and in 1776, when a medical society was being founded in Paris by the King of France, he was one of a select number of foreign physicians whom the society thought proper to honour with their diploma. Feeling as we do towards Fothergill, we cannot but regret, as we look back, that he was not a Fellow of our Society. But Fothergill was not a man to do things by halves, and probably Lettsom deemed it unkind to attempt to enlist his help at the foundation of the society, busy man that he was. It must be remembered that as at that time, 1773, Fothergill was in his sixty-second year and overburdened with private practice, that as he had a mansion as well as that enormous garden at Upton and a country seat near Warrington, and that as his hands were full of, and running over with, philanthropic schemes of all sorts, he could hardly have had any time to devote to launching a medical society. As a matter of fact, he could rarely steal away to his house and grounds at Upton, and often, when he did get there, it was so late at night that the only way which he could obtain enjoyment and profit out of the garden was with the help of a lantern. Lettsom, however, was at that time under thirty years of age. He was full of energy, and he had, it is to be surmised, sufficient leisure.

Doubtless Lettsom told his friend of all that was going on in connexion with the beginnings of our society, seeking and obtaining his advice and, I think, acting upon it. There was no better man to go to for advice in the matter than Fothergill, as he had great practical experience in the working of a society of physicians of which he and William Hunter were the leading spirits. (Of this society

I shall have a good deal to say shortly.) But here Fothergill's interest in the Medical Society of London must have ended. In the "Cash-Accompts Book" of the society from its foundation to the beginning of the nineteenth century, in which are found the names of all those paying their entrance fees and subscriptions, the name of John Fothergill is conspicuously absent. The circumstantial evidence which this book supplies in support of my statement that he was never a Fellow of our society is incapable of refutation. For the unearthing of this valuable book, as for much else in the preparation of this Oration, I am indebted to Mr. Hall, the Registrar of our society. In the early minute books of the society and of the council the name of John Fothergill does not appear as a Fellow, nor can I find that he ever attended as a visitor. Fothergill had an enlarged prostate, to which, as I learn from the pages of the *Gentleman's Magazine*, he gave neither attention nor consideration. But nature is jealous; and in the year 1772, when he was only sixty-one years old, he began to break up. He had just lost his younger brother, Samuel, the celebrated preacher, and he said, in his bodily distress and in his sorrow, "Our health is no more at our command than length of days. Mine seems drawing fast to a conclusion. Though painful my nights and wearisome my days, yet I am preserved in patience and resignation." Next year—the year of the foundation of our society—he was "much oppressed"; but he said that he hoped to follow in the steps of his dear brother through what he called "the remains of this life." It would not, therefore, have been a friendly act had Lettsom tried to induce him even to lend his name to the new society.

There is another matter in connexion with Fothergill to which I wish to refer. Some of his biographers state that he died from "suppression of urine." Lettsom himself says it, but the statement is incorrect. Alluding to the fatal illness of December, 1780, he says: "He was again seized with a suppression of urine, which no art could remove." But in that he speaks of his being on that occasion "as serene as in perfect health," he obviously could not have meant that Fothergill was the subject of what we understand by "suppression of urine." Alluding to a similar attack which the patient had undergone just two years previously, Lettsom wrote that on waking out of a short sleep his illustrious friend was attacked with a forcible inclination to make water, but without the power. "At length," he writes, "a total suppression came on that required manual assistance for two weeks, which was sometimes accompanied with excruciating pain. In the height of his distress I visited him and found him calm and collected." Without doubt someone (not Lettsom) was trying to relieve him from time to time with a catheter, and with greater vigour than success. There was some "suppression" in connexion with Fothergill's fatal illness—not of urine, but of an important clinical detail. Somehow or other Lettsom omitted to say in his memoir that after death two quarts of urine were found in the poor physician's bladder. This interesting piece of information I discovered in the *Gentleman's Magazine* for 1781.

How has it come about, in spite of the absence of any evidence in that direction, that John Fothergill has so generally been considered to have been one of the fathers of our society? If we turn to the "Memoirs of Fothergill," by Lettsom, we find a heading to the effect that they were "read before the Medical Society of London, July 17th, and October 23rd, 1782." Why, it might well be asked, should Lettsom have read those Memoirs before our society if Fothergill had no connexion with it? The answer is that though Lettsom read the well-known Memoirs "before the Medical Society of London," he did not read them before *our society*, which was then meeting on the first Tuesday of every month, as recommended in February, 1781. In 1782 our society met on July 2nd and Oct. 1st. July 17th and Oct. 23rd, the days when Lettsom read the Memoirs, were Wednesdays. About the middle of the eighteenth century some physicians in London agreed to meet together for their mutual improvement in the practice of their profession. They were either such as had the care of hospitals, or, to quote their own words, "were otherwise in some degree of repute in their profession." When these meetings had continued a considerable time, some of the members (Fothergill amongst them) decided to publish their proceedings. So, "with some other physicians," they formed themselves into a society for collecting and publishing "Medical Observations and Inquiries." They regarded it as a reflection on the Faculty that no attempts of that kind had hitherto been

made in London. The first volume appeared in 1757.¹ These eighteenth century physicians were not only persons "in some degree of repute," but also of prosaic common sense, for they said in their preface that they did not want papers the chief tendency of which was "to show the parts and erudition of the writer." They also said that they did not intend to publish all the papers which might be sent in to them, but that useful observations, described with clearness and candour, would be "thankfully received." They particularly asked for notes of unsuccessful cases, and for "accounts of errors in the cure of diseases." Concerning the question of "errors in the cure of diseases" I will not venture to make any remarks, my practice being confined entirely to surgery; but I cannot refrain from expressing my strong approval of their desire to have notes of unsuccessful cases. A hundred years hence, or in less time than that, when the practitioner in the few diseases which are left for him to treat takes down from their dusty shelves the volumes containing the reports of our societies, and the records of our treatment, he will say, "These men at the end of the nineteenth century were not void of dishonesty. They wrote and talked as if all their patients got well, but we know that they did not. They seem to have carved the records of their successful cases upon the rocks, but if ever they thought of their failures, the utmost that they did was to scratch them upon the sands of the sea at low-water mark." Would it not be a good thing if our society set apart one or two evenings in each session for the discussion of unsuccessful cases and of those which have ended in disaster? They should be called "confessional evenings," and I am sure that they would be well attended. There should be no reporters present, and I believe that a good many of our Fellows would take part in the debates, even though their remarks would not appear in the forthcoming number of THE LANCET. What pleasant evenings could be spent in discussing the hideous mistakes of other people! If anyone asks if I would contribute to such "confessional evenings," I would venture to remind the society that a few years ago I thought it my duty to bring forward the report of a case in which, to my extreme sorrow, a misadventure on my part brought a simple operation to a fatal conclusion. I am speaking, therefore, from sad experience when I say that such a course is right and proper. And I will also say this, that there is no society in London where the candid confession of practical error would be more faithfully or sympathetically received. The venerable age of the Medical Society of London has happily brought with it a kindly and paternal spirit which has come down as a precious heritage from Lettsom, and through him from Fothergill, so that we, its children, are able to look up to it not only with respect but affection. I cannot but think that it would be well for the aggressive spirit of modern methods to wrap itself in a sheet from time to time, to acknowledge that it is not yet infallible, and here to be shriven. That our founders intended to have authority amongst the Fellows and to exercise it, sometimes with severity and sometimes with gentleness, but always with impartiality, is evident to any one who reads the records of their early doings. And it is not without significance that *the very first disbursement* which they made on behalf of the society, on May 27th, 1773, was a sum of five shillings for a hammer.

Let me now return to the Society of Hospital Physicians—of physicians in some degree of repute, and of "others," who were to receive, consider, and possibly publish the medical observations which might be sent in to them. They worked diligently and, happily, without ostentation—two excellent qualifications for solidity and success. It was on behalf of this society that Fothergill burdened himself with collective investigation concerning the epidemic of influenza as it appeared in various parts of the country towards the end of the year 1775. This labour was duly acknowledged in the sixth volume of their "Observations," which they published in 1784. They say that from the materials collected by Fothergill from the faculty at large, and from his own sketch, he had intended to form a complete history of the disease, but that that which his sudden decease in 1780 prevented him performing the society "endeavoured to accomplish." "Indeed," continues the preface, "considering the not unfrequent return of this epidemic, how troublesome it was to most, how it affected many with lasting

debility, and, though not dangerous in itself, how it accelerated the fatality of dangerous distempers, it deservedly becomes an object of serious inquiry to the faculty." Within two years of Fothergill's death—namely, in 1782—this pestilence was again upon them with unabated vigour; and as it concerned "the Medical Society of London in the eighteenth century" I shall have occasion to refer to it later. Just now, however, I am, or ought to be, explaining how it is that Fothergill has so generally been considered a Fellow of our society.

Fothergill had sent printed circulars to medical men in town and country with the view of working out a better understanding of the disease, and the replies to it, which are published in the volume, show that in many respects it closely resembled the influenza of the present time. I personally have had a greater experience of influenza than most medical men. But lest I might be considered by this statement to have wandered out of the narrow paths of surgical practice, and even into the realms of boastfulness and arrogance, I hasten to explain that what I mean is that I have been attacked by the disease far more often than I desired, and I think, speaking at any rate from an actuarial point of view, than I deserved. Justice was, indeed, blind in wasting upon me, a surgeon, a personal experience in influenza which might have been useful in the establishment of a physician. However, my experience of the disease has rendered my study of it in these old volumes of more than an antiquarian interest. The replies which Fothergill received gave a graphic description of the suddenness of the onset of the disease; of the pains in the head, back and limbs; of the foul tongue, the loss of taste, and of appetite and of sleep; of the soreness of the wind-pipe; of the dejection of spirits, and of the terrible debility. The well-known Dr. Cuming said that in Dorsetshire, in many gentlemen's families, not one servant was free from the disorder. Horses and dogs, moreover, were affected by it. Worse than all, the horrors of the influenza of the eighteenth century must have been actually increased by treatment, for physicians and patients seemed alike under the influence of a blind faith in venesection and nauseating drugs.

The Society of Physicians met every month, and Elliott tells us that Fothergill was rarely absent from the meetings. As I have already said, John Fothergill and William Hunter were prominent members of this mutual improvement society, to which in 1756, in the ordinary course of business, Fothergill read a paper which, in the table of contents which followed the preface to this volume, is described as being "communicated to the Medical Society." This Society of Physicians was, of course, a medical society but it was not The Medical Society of London. No, Fothergill's medical society was twenty years older than Lettsom's. Lettsom was a member of Fothergill's society; but Fothergill was not a Fellow of Lettsom's society.

Fothergill was president of his society at the time of his death, 1780, and the members naturally called upon his intimate friend and their fellow-member, Lettsom, for a memoir of him. It will be noticed in the bold heading of this memoir that though Fothergill's society is called the Medical Society of London, the words "the" and "of" are not spelt with capital letters as they should have been if they had referred to The Medical Society of London, which obviously they did not do.

There is a verse in the First Book of Kings which might almost have been written of Fothergill: "And he spake of trees, from the cedar tree that is in Lebanon even to the hyssop that springeth out of the wall. He also spake of beasts, and of fowl, and of creeping things, and of fishes." But Fothergill did not regard the vegetable and animal kingdom merely from the point of view of the biologist. Though his interest in them was certainly scientific it was also strongly utilitarian—and particularly with reference to *materia medica* and foods. Thus, in 1767 he spent a considerable sum of money in connexion with a scheme which should enable the poor and the middle ranks of housekeepers to purchase fish at a low rate in London. In the same manner he set to work to have potatoes which had been bought cheap in Lancashire brought up to town by water. It would take a stronger man than the gentle Fothergill, I fear, to break up the "fish ring." We are told—I know not with what truth—that at the present time wholesale dealers would at times rather destroy fish at the seaside than send it to the great cities where it could be sold at a cheap rate. Such a monstrous act would

¹ Medical Observations and Inquiries, by a Society of Physicians in London, 1757.

be to rob the poor; and the day may not be far distant when it will be punished as a crime.

I suppose that one great cause of the spread of the erroneous belief that Fothergill was a Fellow of our society, is due to a sentence which occurs in Pettigrew's "Life of Lettsom"—a work to which anyone would naturally refer who was specially interested in the early doings of this society. On pages 86 and 87 of the first volume he writes: "Dr. Fothergill was, at the time of his decease, the President of the Medical Society of London, at whose meetings papers and other communications on medical subjects were read or made. Many of these were furnished by Dr. Fothergill, and the members felt desirous of having some account of his life submitted to them. Accordingly, Dr. Lettsom was requested to draw up the memoir." I cannot understand how Pettigrew came to make such a slip. It seems the more inexcusable in him as he was not only a Fellow, but also the Registrar of our old society. Although he was writing a life of Lettsom, and not of Fothergill, his mention of Fothergill ought to have been made with accuracy. And though the date of his writing was in the thirty-seventh year after Fothergill's death, it would have been quite easy for him to verify the truth of his statement. Probably he had been misled by the wording which appeared at the head of Lettsom's memoir. But if we cannot hold Pettigrew excused for the error of making John Fothergill a Fellow of our society, what is to be said when Dr. Munk, a Fellow of the Royal College of Physicians and the illustrious medical biographer, falls into it? In his account of the life of William Hunter, in the "Roll of the Royal College of Physicians," he says: "On the death of Dr. Fothergill, Dr. Hunter was unanimously elected president of the Medical Society of London." Dr. Munk also failed to distinguish the Society of Physicians, of which John Fothergill and William Hunter were the leading spirits, from the Medical Society of London.

DR. LETTSOM.

For every Fellow of this society the name of Lettsom has a charm, and although he may not be acquainted with the details of the private and professional life of this gentle Quaker practitioner he cannot be much within these walls without becoming influenced—he may not know exactly how or why—by unconscious memory of him.

"The evil that men do lives after them;
The good is oft interred with their bones."

But so was it not with Lettsom. The more closely his history is studied the stronger does the feeling grow that he was a man to be revered. He certainly has left no evil influences behind him, and it was not possible that all the good he did could be interred with his hallowed bones. It is no empty phrase to say that the world is all the better for the fact of Lettsom having lived. Certain is it, moreover, that our profession has benefited by his life and example. And as for the Medical Society of London, if it is not wholly indebted to him for its conception and creation, it is at least greatly indebted to him for its preservation and for much of the success and respect which has attended it throughout its long and eventful life. There was no self-seeking about Lettsom—no vaulting ambition; his chief thought was for the happiness of others, and wherever he went he was doing good. Pettigrew truly said of him that to detail his useful career is to pronounce his highest eulogy.

John Coakley Lettsom was born in the West Indies in 1774. He was one of twin boys, and, previous to his birth, his mother had six times had twin boys. He was educated in Lancashire, and soon after his sixteenth birthday he was sent as an apprentice to Abraham Sutcliffe, a surgeon apothecary at Settle, a dull little town at the top of Ribblesdale. About the second year of his apprenticeship Lettsom began to visit patients. Pettigrew says, with a sigh as it were, that he doubts if he was then quite fitted for that particular work, as he had never attended a lecture or seen any anatomical figure except a skeleton. The old apprenticeship system encouraged this sort of thing, and it proved the ruin of many a would-be medical man, casting him adrift with a thin veneer of practical information upon a foundation of solid ignorance. But it did not spoil young Lettsom, who kept on steadily working at natural science and languages as well as at his profession. At the end of his five years' apprenticeship he came to London, where he did not know a soul. But he brought letters to Fothergill, who was then fifty-four years old, Lettsom being his junior by thirty-two years. It is well to keep in mind the fact that

Fothergill was thirty-two years older than Lettsom, for as the acquaintance between these men ripens into deepest friendship, and we see them side by side, this is practically the only difference that we find between them.

Probably the chief object of Lettsom's journey southwards was that he might advance his professional knowledge by practical work in the wards of a hospital, for London was then, as it still is, the finest field for clinical work in the British Isles. Then, as now, however, by some absurd miscarriage, the well-skilled practitioner who desired to obtain a degree in medicine had to go elsewhere for it. Lettsom went to Leyden for his. Had he lived at the present day he might possibly have gone to another friendly kingdom and secured for himself a Doctorate with dispatch and "with distinction." I do not mean by this that the medical man who has been educated in London acts unwisely in going abroad for a degree in medicine. On the contrary, I commend his prudence, for a degree in medicine—no matter whence it comes—is of real practical value. What I wish to emphasise is the strange anomaly that in this vast metropolis, second to none in clinical wealth and educational advantages, there should not be a degree in medicine obtainable by the general run of students. The result is that London as a teaching centre is being deserted and its clinical advantages ignored, in order that students may undergo their medical training in other cities, and in towns, where they are able to secure the title of M.D. as a fitting reward for diligent work.

Young Lettsom saw a great deal of Fothergill, whose professional position and success fired him with the ambition to establish himself in London. But he had no money. In twelve months the small store that he had brought was exhausted, so he packed his ambition in his trunk and set sail for Tortola in order to take possession of the little property left him by his father. This consisted of a small portion of land and about fifty slaves. At that time, says his friend Pettigrew, he was not possessed of £50 in the world; but he at once set his slaves free, and by so doing became a voluntary pauper at the age of twenty-three years. He did not take this step because he was so advised or because it seemed "advisable," but because he could not tolerate the idea of trafficking in human blood and because, as Pettigrew says, he thought it right to do unto others as we would wish they should do unto us. This, in brief, was Lettsom's religion, as also it was the sum and substance of the teaching of the Great Physician in whose step he humbly tried to walk.

Gentlemen, at the present moment we have urgent need of another Lettsom to set free slaves; and I say with sorrow that these slaves are members of our profession—medical brethren who, unable or unwilling to engage successfully in its honourable practice, have sold their birthright, their art, and their independence to trading clubs, called medical aid societies. It is not for me to enter with ungenerous detail into the actions of brethren thus enslaved. Possibly, indeed, had I been placed in similar circumstances I might have entered into the same servitude. But of this I am certain, that, had I done so, I should long to be released from it! And so, surely, do they. The question is, How is their freedom to be secured at the earliest possible moment? Many years ago there lived in Mantua a family medical attendant who found it difficult to make both ends meet. What his name and qualifications were we have not been told; he is simply called "an apothecary," which, as I just now remarked, was in former days the title of the general practitioner. Nor does it transpire why he had proved a failure in practice; but from representations which we have had of him upon the stage I think that he must have been lacking in that essential for success in family work, "a good bedside manner." A broken-hearted lover wanted to buy some poison from him, but he had qualms about selling it. Qualms are conscientious objections which yield to opportunism, so, without needless waste of time, the apothecary handed over the poison, remarking, as he did so, that his poverty but not his will consented. I suppose that the medical men who have entered into the slavery of the trading medical associations would make the same unctuous remark. At least, I understand that when one of them is asked by a brother practitioner, whom by the acts of his association he is helping to ruin, if he approves of such acts, he rejoins, in shame and degradation, "What am I to do?" And at the same time he shrugs his shoulders, as if to imply that, though a slave, he has not lost all sense of honour—that at least his will did not consent. All the same, he is in the pay of those who are sending round male and female touts—agents they are called—whose business it is

to undermine the practice and steal the patients of his brother practitioner. If, when doing this, they smirch his reputation and reduce to the level of paupers those who had hitherto been able and willing to pay him adequately for professional services, what is that to them? Let the galled jade wince, their withers are unwrung.

These trading medical associations are sometimes also life-insurance companies, which endeavour to attract insurers by offering the collateral advantage of gratuitous medical attendance by the practitioners whom they are "sweating." Probably the directors of these companies have already found that plan to give good results in their daily work, when, as pushing grocers, they throw in a present of sugar to each purchaser of a pound of tea.

Note how skilfully the immortal playwright managed that scene in *Mantua*. He has got rid of Balthasar, who had brought the love-stricken Romeo the news of the supposed death of the lady, as his presence might possibly have interfered with the conclusion of the nefarious bargain by the apothecary. Certainly if Friar Laurence, or any other strong man, had been about, the lover would never have dared to make the tempting proposal to the pliable practitioner. It would not have been necessary to say to the apothecary that such an act would be unworthy "in a professional sense"; a mere shake of the head would have been enough to stop it altogether. Anything more discreditable to the honour of our profession than this commercial compact with medical associations it would, I should think, be difficult to imagine. It is disgraceful in a professional sense, and should have been stopped long since. A mere gesture of disapproval on the part of the head of our profession would have checked its inception. And where, it is asked, is our stern though paternal Friar Laurence, the guardian of the registered practitioner and the keeper of our professional honour? Where, all this time, is the General Medical Council? It may be that though individual members of that Council have possibly heard rumours of the existence of the discreditable alliance between Art and trade, their attention has never been officially called to it, or their powerful and much needed aid invoked. Here, therefore, from the chair of the Orator of the Medical Society of London, a chair which Lettsom the Liberator occupied on no less than three occasions, I beg leave to proclaim to the General Medical Council the existence of the abuse and to appeal to them to "come over and help us."

The West Indies must have been more prosperous one hundred and thirty years ago than they are to-day, for, starting in practice in the small island of Tortola, Lettsom made nearly £2000 in five months. Half of this he gave to his mother; the rest he placed with his ambition and came back to London with the view of following in the wake of Fothergill. Even at the present time a young man who is fired with an ambition to practise as a consultant in London might do worse than follow the example of Lettsom with respect to a certain delicate matter. He had probably thought it well out, for Pettigrew says: "He determined upon forming a matrimonial connexion with an amiable young lady, the daughter of a wealthy tin-plate worker." The union turned out an extremely happy one, so that we may assume that though the gentle Quaker happened to marry where money was he did not marry for money. Such an act, indeed, would have been entirely foreign to his nature.

A few words about the death of Lettsom shall close this short notice of him. The manner of his death should act as a warning to us; it was as follows. For some time he had been attending a gentleman whose case proved fatal and he was desirous that the body should be examined. The necropsy was chiefly made by himself on Oct. 22nd, 1815. He remained in the cold room for two hours, and on the next day he felt chilly and unwell. Then strong rigors came on, with fever and with severe pains in the arms. He suffered intensely and, becoming delirious, sank exhausted on Nov. 1st. Making a post-mortem examination in a private house is usually a depressing and chilling business. The window is partly open and there is no fire in the grate. And when on a late October day a man seventy-one years of age, probably with his coat off, spends two hours in the cold room, what wonder if he contracts a "chill"? He probably absorbed a large dose of septic material. Lettsom diagnosed his fatal illness as "rheumatic." Septic diseases were not as well understood then as they are now, and even at the present time they are not infrequently regarded as "rheumatic." Probably the

patient whose body the earnest physician was examining had died from some obscure septic disease. That Lettsom was not clear as to its nature is evident, I think, from his spending so much time at the necropsy.

A LOYAL ADDRESS.

A Resolution of the Council of the Medical Society of April 3rd, 1789, is especially interesting to us to-day in that it expressed the desire of presenting an Address to His Majesty on his happy recovery. For carrying out this resolution special meetings of the Council and the society were held, the Address was duly sent up, and at a subsequent meeting it was resolved that Lord Sydney's reply on behalf of His Majesty be inserted on the minutes. To say that this summer of rejoicing, 1897, finds the Medical Society of London still loyal is feebly to express the feeling of its Fellows, for "that fierce light" which has beat upon the Throne throughout the last sixty years has been reflected straight into the hearts of Her Majesty's subjects, turning *loyalty* into *love*.

THE MEDALS.

John Fothergill died when the Medical Society of London was seven years old, he being then in his sixty-ninth year. Lettsom as we know, felt his loss very keenly, and four years after his death he wrote to the society as follows:—

"GENTLEMEN,—To preserve the memory of illustrious characters by some permanent memorial is not only grateful to the friends of the deceased, but excites in the living that commendable emulation which leads to great and virtuous actions. Such were those which will render dear to distant posterity the name of Dr. John Fothergill, in memory of whom I have ordered a medal to be struck, under the patronage and at the disposal of the Medical Society of London, held in Crane Court, Fleet Street. It will be in gold, of ten guineas' value, to be called the Fothergillian Medal, and to be given annually on the 8th day of March to the author of the best Essay upon a Prize-Question proposed by the Society," &c., &c.

"JOHN COAKLEY LETTSOM."

The date of the letter, May 25th, 1784, is interesting from the fact that on that very day Lettsom had been reading to the society a clinical report of the case of Dr. Fothergill, for which he had received the usual thanks. The preparation, or the reading of this paper, or the reception which it got at the society, had doubtless filled his heart with recollections of his dear friend, and with a burning desire that time should not be allowed to completely efface the fading memory of so good a man. The letter was read at a general meeting on Thursday, June 4th, 1784 (although Tuesday was the proper meeting day), and a vote of thanks was unanimously passed to Lettsom for his generous offer. In the following week the society again met, and a committee was appointed to consider the design, and a plan for the distribution of the medal.

Within a fortnight the committee brought in their report; they proposed that the obverse of the medal should contain the head of Dr. Fothergill with this legend: "Fothergillius, Medicus, Amicus, Homo," together with the date of his birth and death, and that the reverse should exhibit Hygieia, holding in her right hand a wreath to crown the successful candidate, who is presented by Esculapius, together with certain letters which briefly indicated that the medal was the gift of the Medical Society of London, which was instituted in 1773. This design seems somewhat ambitious; and I think that when it was shown to Louis Pingo, the artist who was to engrave the die, he must have told the committee that the order was rather too extensive for satisfactory execution. I should think that even Benvenuto Cellini himself would have stood aghast at the proposal. It is to be noticed that Lettsom said nothing in his letter about investing a sum of money to defray the annual expense of the medal, and the society raised no question upon that point. He simply said: "I have ordered a medal to be struck." But inasmuch as the details were subsequently to be arranged by a committee, he could not then have actually given the order for the striking of the medal. Indeed, the design which he and the other members of the medal committee proposed was not in the end adopted. The medal, as eventually struck, is thus described by Mr. Grueber from the specimen in the British Museum:—Obverse: Bust of Fothergill to right, in wig and close-buttoned coat. Legend,

Johannes Fothergill, Medicus Egregius, Amicis Carus, Omnium Amicus. Reverse: Within laurel leaves, in which are entwined two serpents, *Medicina et Scientia Naturalis incremento.* Above, *Don. Soc. Med. An. Salut. 1773. Instit.*

Thus the design proposed by the committee had been considerably tamed down and, I think, improved, before the die was engraved. I have the pleasure of showing a replica of the original John Fothergill medal. Mr. Grueber's description omits to state that the dates of the birth and of the death of Fothergill are given upon the rim of the medal. So far as I can ascertain, only seven examples of this medal were ever struck in gold, one of which was presented to King George the Third as a specimen; this is now in the British Museum. One was awarded in 1787 to Dr. Falconer of Bath, and three years later one to Dr. Willan, the dermatologist. In 1791 Lettsom himself had the pleasure of receiving one for his prize dissertation. Mason Good and Bouttatz received medals in 1795 and 1801 respectively, and in 1803 Edward Jenner was awarded the seventh and last.

It is the custom, I believe, in certain societies (not medical) for each individual to break into a thousand pieces the glass out of which some toast has been drunk which is specially dear to the hearts of those present, so that by no possibility can the glass which has been thus honoured be submitted to desecration. Extravagant as the custom may seem, there is a beautiful sentiment underlying it. As we look back it is with considerable satisfaction that we learn that our illustrious colleague, Edward Jenner, was the last recipient of Lettsom's Fothergillian gold medal—Jenner the greatest benefactor of the human race that ever lived. After this it is well that we hear nothing of medals subsequently struck from that die. By honouring Jenner it had fully honoured the society, and had brought its work to a splendid close. But, gentlemen, if that die were yet in existence we could show upon our roll of Fellows the name of one for whom it might still be struck upon purest gold—of one who, second only to Jenner, has been a benefactor of the human race. Need I say that I refer to Joseph Lister?

The first gold medal, then, was obtained by Dr. Falconer in 1787, and at the society's meeting on April 9th of that year a letter was read from him saying that he would be up in London in the following June in order to receive it. Thereupon, "Dr. Lettsom was appointed to deliver him the Fothergillian Medal in form." On Friday, June 1st, there was a small meeting of the society, at which Falconer took his seat as a corresponding member, but the only business recorded is the decision that the presentation of the medal should be postponed for eight days—namely, until Saturday, the 9th. There was a very good reason for delaying the presentation of the medal—the society had not yet received it from the unbusiness-like artist. On Monday evening, June 4th, a meeting of the society was held in the ordinary way, and a good deal of business was done at it. Falconer, who was present, must have been impressed with the energy and prosperity of the society. But he and everyone else must have felt sympathy with Lettsom in that the Fothergillian business was hanging fire. Here is an extract from the minutes for that night:—

"Dr. Lettsom informed the society that as, through the neglect of Pingo, who was entrusted with the execution of the Fothergillian medal, and has had it in his hands for upwards of a twelvemonth, there can be no probability of getting the medal out of his hands so soon as might be expected, so that it could be presented to Doctor Falconer on Saturday night, and Dr. Falconer having signified that his staying in town would be attended with inconvenience, it was proposed that Wednesday evening should be fixed on for the delivery of a model of the Fothergillian medal to Doctor Falconer, which proposal, being moved and seconded, was agreed to *nem. con.*, and the messenger was ordered to summon the members for Wednesday evening at the usual hour."

I make no apology for going into detail in connexion with the delivery, or rather the non-delivery of the first Fothergillian medal, for the account cannot fail to be of interest to every Fellow of this society. In accordance with the resolution just read, an extraordinary meeting was held on Wednesday, June 6th, 1787, one of the last meetings held at the society's house in Crane-court. There was a large attendance of members, and the meeting was honoured by the presence of upwards of fifty visitors. Dr. Sims duly stated from the chair the business for which the society was convened for that evening, and although it was an extraordinary meeting

the minutes of the last meeting were read and confirmed, and also various other minutes which had reference to the institution of, and to regulations concerning, the Fothergillian medal. After signing the minutes the president left the chair in favour of Lettsom, who delivered an elaborate address, which at the beginning was metaphysical, and then, turning into a eulogium of Fothergill, ended with the apotheosis of Falconer. After this "he delivered publicly a model of the Fothergillian medal." Falconer replied, and then Sims resumed the presidential chair and moved a vote of thanks to Lettsom, not only for his address of that evening, but for the great interest, liberality, and assistance which he had always extended to the society. Falconer must have had plenty to think about as the stage-coach was taking him and his dummy medal down to Bath.

On March 12th, 1787, Dr. Sims moved a resolution to the effect that a silver medal bearing the same device with the Fothergillian medal "should be given annually by the Medical Society to the author of the best dissertation on any other medical subject." This was unanimously agreed to, "with a proviso that the ordinary members of this society shall not be allowed to be candidates for the said silver medal." Lettsom was at this meeting; doubtless he and Sims had talked it over beforehand. But I suppose that the members of the society objected to being cut out from all possibility of acquiring the silver medal; so we are informed in the preface to the second volume of the *Memoirs*, published in 1789, that there should be two silver medals adjudged annually, one to the author of the best essay read before the society within the year, written by a Fellow; the second for the best essay by any other person. A Fellow, I might remark, was any member of the society who resided within seven miles of London. Thus at the end of the eighteenth century our society was prepared to present annually one gold medal and two silver medals in the interests of the advancement of medical science.

THE MEMOIRS.

The volumes of memoirs which our society published in the eighteenth century are a mine of wealth, and many of the articles are written in a forcible and picturesque style which greatly adds to the pleasure of perusing them. Towards the end of the second volume, for instance, there is a long letter from Dr. Hamilton to Lettsom on the influenza which occurred in 1782. Here is a small piece of it. "Few diseases ever produced loss of strength more suddenly. The crew of the *Fly*, sloop-of-war, was an instance of this. The captain affirmed that forty of his men fell ill in less than eight hours, several of whom dropped down at the wheel as they steered the vessel. This circumstance obliged him to put back and stand again for the Yarmouth Roads, which he had left only a few hours before (with all hands apparently well), merely for want of hands to navigate her." In that terrible epidemic, as at the present day, influenza knocked down medical men with as little discrimination as it did their patients. Hamilton himself took it severely, dropping down at the "wheel, as it were." "But," said he, "the nature of my situation and the number I was obliged to visit prevented me from taking that care of myself which I recommended to others." There was no chance for him of "putting the ship back"; he was compelled to stand at the wheel even if he had to be lashed to it. And so it is with many a practitioner to-day. From no sordid motive, but from a sheer sense of duty, he goes his daily rounds attending people, many of whom are not feeling half as ill and miserable as he is himself. "It happened frequently in that epidemic," continues Hamilton, "that patients insisted on being bled; 'many were bled by my young man,' says a surgeon, without advice." The young man was, of course, the unqualified assistant of that day. In the advertisements of more recent times he called himself "a gentleman of experience, *sine diploma*"—as if that were actually a qualification for practice. He usually considered himself perfectly competent to treat a case of heart disease, though he might never have seen a mitral valve; to deal with an obscure injury to an elbow, though he had never dissected a joint; or to look after a man with Bright's disease, though he had never handled a test-tube or looked down a microscope. He plumed himself all the while on the fact that he was a "practical" man, and, strange to say, there were many patients who shared with him the good opinion which he had of himself. There was apparently only one professional act which he could not do, and that was to sign the death

certificates which considerable practice and familiarity enabled him to fill up with speculative precision. Fortunately, he is now a thing of the past, the General Council of Medical Education having sent him on a mission to minister to the necessities of the dodo and the great auk.

It is interesting to learn that when Dr. Hamilton took the influenza he declined to be bled. The grounds on which he excused himself from submitting to so orthodox a measure are worthy of study. "Besides," says he, "I am apt to think our constitutions are considerably changed this last century in Great Britain. Luxury, and its enervating effects," and so on, and so on. We hear the same croak at the present day. "Our constitutions are changed," and of course for the worse. "Men are not what they were; it was just the same in Ancient Rome," and stuff of this sort. Before we need pay any heed to such rubbish we must forget what Britishers and Irishmen have done in recent years; how they were tried by, but triumphed over, the severities of Crimean cold; the scorching horrors of a mutinous India; the fatigues of forced marching in wild Afghanistan; and, yet later, the difficulties which nature herself had strewed in the pathless route that brought them to the glorious relief of Chitral.

Reading, or merely glancing through, the early records of this society one cannot but be struck with the earnest and practical nature of the communications, with the width of the range which they cover, and with the fact that they were made in almost equal share by the three classes of its Fellows. From the first this has been to the great and manifest advantage of our society, and may this arrangement long continue. During the time that, in various ways, I have been concerned in the affairs of the society I have noticed, I am glad to say, but little indication of a desire to leave the old and the good for the sake of the new, but not necessarily the better. I must confess, however, that it was lately a bitter grief to me to see our ancient presidential chair of mahogany replaced by a modern one of maple. But this our meeting-room has been rendered so increasingly attractive and comfortable by a somewhat rapid evolution that I am quite willing to admit that those who differed from me on that occasion were not irrational. Further than this, however, I will not go. But while I am upon the question of our furniture, I would like to ask how it is that our worthy president is not wearing the cocked hat, without which our early presidents did not consider themselves respectfully attired? The first "Accompts book" shows that for a "hat for the president" we paid £2 10s. Why, I would ask, is that hat not in evidence to-night? In Medley's great picture of a meeting of the society the old cocked hat is duly represented.

The shortness of the time allotted for an oration has prevented my touching upon many important incidents in the history of the Medical Society of London in the eighteenth century. I have not been able, for instance, to refer to the battles which took place over the drawing up of the rules or to the exciting occasion when the society found itself locked out of its own rooms. Nor to the gentleness and wisdom which Lettsom showed as he helped—to use the words in the minute book—to establish the society upon a basis of permanence and dignity. But all these things, and how Lettsom came into possession of a turtle and instead of regarding it as a subject for comparative anatomy presented it to the society, together with an invitation to each member requesting the favour of his company at the King's Head Tavern in the Poultry on a June afternoon in 1775, where they made merry, feasting on its fat and its fins; and the house in Bolt-court which he gave for their meetings, and the many kind acts which he did—are they not written in the books of the chronicles of the eighteenth century? These books are of priceless value to this society, though they have not always been treated with becoming respect. But this Oration—to which you have listened with so much patient indulgence—will not have been in vain if it have the effect of obtaining for those old volumes appropriate bindings and a secure custody in a fire-proof safe. They contain the Log of our *Mayflower*, and they are well worthy, not only of our occasional study, but of our continuous and reverential care.

THE DISPERSION OF LUNATICS.—As illustrating the difficulty of finding asylum accommodation, the report of the West Sussex County Asylum Committee shows that 356 county patients are distributed as follows: Salisbury, 211; Haywards Heath, 1; Berry Wood, Northampton, 6; Portsmouth, 18; Camberwell House, London, 30; Grove Hall, London, 44; Hatton, Warwick, 36; Isle of Wight, 10.

The Ingleby Lectures

ON

THE OPERATIVE TREATMENT OF CANCER OF THE BREAST.

Delivered at Mason College, Birmingham, on May 19th and 26th,

By BENNETT MAY, F.R.C.S. ENG.,

PROFESSOR OF SURGERY IN MASON COLLEGE, BIRMINGHAM.

LECTURE I.

GENTLEMEN,—When I accepted the invitation to give the Ingleby Lecture for this year I am afraid I did not sufficiently consider the difficulty I should find in selecting a suitable subject for the occasion, as the conditions of the Ingleby Trust and the objects of its generous founder necessarily limited me in my choice. It is true that all reasonable latitude is allowed by the council, to whom I have to express my sense of the honourable distinction conferred by their invitation. After some consideration I selected that of the Operative Treatment of Cancer of the Breast as being in a high degree germane to the benevolent purposes of the founder, as well as one on which I might claim to speak with some measure of observation and experience.

It may, however, be needful to say something in the way of an apology for its selection, as it has already been the subject of an Ingleby Lecture. The first of these lectures, given by Mr. Oliver Pemberton in 1884, was on the Treatment of Mammary Cancer. Since that period, however, much has happened in the surgical world; in particular, the great revolution in wound treatment, which set in about twenty years ago, has opened up quite a new and wider field for operative treatment. I believe I may say that practically it is only within the last fifteen years that any important advances have been made in our practice. It will be my chief purpose to review these advances and the results which have been obtained from them, and to endeavour to form an estimate of their value for future guidance. Mr. Pemberton's lecture was a very interesting and important one, and as he gave a very candid exposition of his experience it may be taken as representative of the best opinions of that date and of the surgical epoch over which his long and busy life extended. He quite endorsed the opinion prevailing among the profession, that no cases were less favourable for operation than these. The disease was regarded as practically incurable, and the most that was hoped for was a prolongation of the life and some amelioration of the sufferings of the patient. Most of us, indeed, remember the almost uniformly bad results; but for those whose memories do not go back so far reference to the surgical hand-books of the date is instructive and will serve as a basis of comparison with present-day results. Statistical tables *circa* 1878–80 authorise me in stating that in about 50 per cent., or one-half, the cases operated on, local or regional recurrence—that is, external visible re-appearance of the disease—took place within three months, and in 85 per cent. within twelve months of operation; 90 per cent. of all cases were dead within two years, and the average addition to the life was variously estimated at from eight months to two years, but about thirteen months seems to have been considered the average. These results greatly influenced the theory of the disease and almost authorised the current and accepted views of the pathology of cancer and its incurability. But we now know that these views were, to a considerable extent at least, deduced from operations quite inadequate for the complete removal of the disease. The operation was a most inefficient one, only a small ellipse of the skin with the tumour and part of the breast being removed, and the axilla rarely emptied of its infected contents. This theory of cancer has been considerably modified by our more recent operations. I am not competent to discuss it, but I believe pathologists consider that, whatever may be the inherited or predisposing condition, cancer of the breast is primarily local and limited in its origin and not part of a general cancerous infiltration. Moreover, the channels of infection have been more carefully investigated, and we may follow the disease from its origin