

Introductory Address, ON MILITARY SURGERY,

DELIVERED AT THE

ROYAL COLLEGE OF SURGEONS IN IRELAND

On Monday, November 19th, 1855,

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MY LORDS AND GENTLEMEN,—The great drama now enacting at the seat of war is perhaps the noblest sight this world has ever yet exhibited. Great combinations have from time to time taken place for the purposes of conquest; but a combination for purposes so honourable has never before been seen. The armies of two great people, who had learnt face to face on the battle-field to view each other with respect, now fight side by side; and thus intimately ascertaining the good qualities of each other, this feeling of respect has been converted into enthusiastic admiration.

England and France now form one single army, and French and English soldiers tread the same path to glory. These two great nations have cast into the shade of oblivion all former jealousies, rivalships, and animosities, and have united for purposes generous and disinterested. Looking for no temporary profit or gain, or territorial enlargement, but seeking simply to establish the liberty of the world upon a solid and permanent foundation, each nation is making sacrifices of blood and treasure upon sound political considerations. This union for freedom has not, however, been left to England and France alone; for gallant Sardinia has come forward, and, in the words of her noble monarch, “united her arms to those of powers who are struggling in the cause of justice, in behalf of civilization, and for the independence of nations.” The alliance between France and England is not a mere compact made between the two reigning Sovereigns, but a *bonâ fide* union of the people. The two nations have become united (and I trust *inseparably united*) by their soldiers’ blood. The rancour and ill-will of ages has been washed away by those libations which have been poured out on the battle-fields of the Crimea; whilst in the presence of the whole world, at Paris, this alliance has been pledged by England’s Queen; there, surrounded by the Royal Family of England, and holding by the hand its future King, she breathed the same in solemn silence to Napoleon’s ashes. This was no simple deed of homage to the dead, but a noble act, attesting that past rivalry was indeed forgotten, and the union of the two people consummated.

An alliance of this nature must be fraught with high and holy consequences. Henceforth their objects will be in common merged in one. Examples of freedom, liberty, and power, France and Great Britain have constituted themselves a tribunal for the government of Europe. Europe has now a high court of appeal, an arbitral power of becoming weight, an authority to which it may look up in the adjustment of all international questions. It has been said that this view is not the correct one, and that the quarrel in which we are engaged is strictly England’s own; that her Indian possessions are at stake, and that the shedding of the blood of her best and bravest sons is in her own defence. Granted that it is so, a war of self-defence must still be looked on in a hallowed light. The antecedent history of Russia tells but of conquest, with visions of universal supremacy filling the minds of all its monarchs; and surely the great mass of stores, the vast armament of war found aggregated in Sebastopol, would point significantly to aggression. The avowed object of Russia, I say, hitherto has been conquest; and what would have been the result of her triumph in the present case of Turkey? Why, it would have converted the future history of Europe into a dreary record of sanguinary struggles, followed by the silent slavery of each subjugated province similar to that of Poland. The

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hostilities in which we are engaged have been reluctant ones; they were staved off until the very last, until endurance could endure no longer. War was *forced* on us, and not until necessitated to it did England exchange peace for war. War she well knew was but in one word “misery.” We cannot gild it, but may alleviate its horrors, and with this view and for this purpose are we met here to-day.

With the advent of war, the importance of the course of instruction which I have the honour to represent came to be duly recognised, and teaching, which includes the duties of the camp, the bivouac, and the field, at once acquired its proper estimate. The importance of military surgery as a preliminary course of instruction for those educating for the public services of the country, now claimed the attention of the Government. The subject was brought before Parliament, and funds for the endowment of two chairs of Military Surgery in London and Dublin, similar to that which has long existed in Edinburgh, were voted by the House of Commons. Thus was this chair instituted; but the merit of the foundation, the origin of the measure, is due to Sir George Ballingall, and I feel I should be doing an injustice to him were I to omit, on this occasion, the opportunity of connecting his name with the institution of this chair. For years he strenuously contended for it wherever he could make his voice heard—for years he steadily used every effort to procure for London and Dublin the establishment of a Regius Professorship—to put these two schools on a level with Edinburgh, and to give to them the same advantages that his own University possessed. To place, I say, in each rival school what existed previously as an attraction to the student only in his own, shows a degree of liberality which deserves general commendation. The exertions of Sir George Ballingall for the English and Irish Colleges have not, I think, hitherto been as fully appreciated as they deserve; and he has, I consider, not received that meed of praise which I feel assured every member of this College will join in commending on him, who reflects on the absence of self and the disinterested motives that have characterized his actions throughout.

But before speaking further on the subject of the foundation of the Chair of Military Surgery in Ireland, I ought, perhaps, briefly to allude to the original institution of this chair in Scotland, since some whom I have the honour of addressing may not know the circumstances under which it was first established there, nor be aware to whose suggestions its primary institution belonged. It owes its origin to a spirited memoir which was addressed to the Government, after the battle of Camperdown, by the late John Bell, and it is to his admirable suggestions that Edinburgh is indebted for the Professorship she has so long held.

This office, upon its foundation, was first filled by Dr. Thompson (the author of the work on *Inflammation*), a man of the utmost talent and learning, but, raised by political influence from civil life to this appointment, he was totally unacquainted with the habits of the soldier. The professorship in his hands made no impression on the public, as a specific branch of education; he connected it with his course of lectures on general surgery, and so conducted it in conjunction with them during the Peninsular Campaign.

Men instructed by him took with them to the field no knowledge calculated for the prevention, they went there fitted only for the cure, of disease, and such was the system of study when, upon Dr. Thompson’s resignation in 1822, Sir George Ballingall succeeded to the chair. He found the course of previous teaching had created in the minds of the profession and the public the most erroneous ideas relating to the real objects of the course. He found it regarded only as an enlarged and extended system of teaching of the treatment of gun-shot wounds—subjects already embraced in the lectures upon surgery in common.

Prejudice and misconception met him upon every side. He received no support whatever. The first year that he commenced his lectures, he delivered them to a class of four, and only four, students, but his other auditors compensated for this deficiency. They were medical officers of the public services, men who could appreciate the merits of the course, and they numbered thirty-three. It was, indeed, the countenance of those gentlemen that induced Sir George Ballingall to continue in office; and had it not been for their encouragement he would not have recommenced the succeeding year, such total apathy and indifference surrounded him on all sides. He, however, did re-commence the course, and pupils and professors one by one dropped in from curiosity. They heard matters discussed and brought before them of which they were in *total ignorance* before; interest began to be excited, and prejudice correspondingly to decline. In four years from the

date of Sir George Ballingall's succeeding to the chair sentiments favourable to the course began to be generally expressed, and two years subsequently, when the regulations of the Royal College of Surgeons in Edinburgh came to be revised, and two courses of surgery to be required, it was unanimously voted that those students who wished to do so might take a course of military surgery in lieu of one. Sir James M'Grigor, the late Director-General of the Army Medical Department, and Sir Wm. Burnett, the Director-General of the Navy, now wrote expressing their regret that similar establishments did not exist in the other schools of the United Kingdom, and soon Sir George Ballingall had the satisfaction of seeing his class amount to no less than eighty-four; such was the change effected by his good teaching and steady perseverance.

Now here a selfish, or less single-minded person, would have let matters rest; Sir George did not. He next addressed a letter to Sir Robert Peel, who was then in office, urging the endowment of London and Dublin as well as Edinburgh. Having visited the Continent and the schools of instruction for army surgeons there, he well contrasted the liberal expenditure of the governments of Austria, Prussia, France, and Belgium, in providing for the public service with that of England. He showed the remarkable differences which exist in the duties which devolve upon the surgeons of the continental armies, and of our own; one set of men being engaged in treating the affections of their own climate, the other in combating disease throughout the world. His letter was well received, and attracted attention for the time; the seed was sown, but the then seeming security of peace prevented it from germinating; and from the year 1834 to the year 1846 no change took place, Edinburgh remaining the sole source from whence the student educating for the public services could derive any preliminary knowledge of the duties to devolve upon him. In this year, however, with the sanction of the late zealous and excellent head of the Army Medical Department, Sir James M'Grigor, I undertook the task of introducing into the School of Surgery in Ireland this as a separate and special branch of medical education. The succeeding year the Directors-General of the Navy and Ordnance Medical Departments joined in recognising the course as equivalent to six months' surgery in the professional qualifications of candidates for admission into each respective service, and in the year 1852 the honourable the India Board joined in giving it their unsolicited support.

Thus far the matter was entirely divested of Government interference, strictly so speaking. Now, however, the attention of Sir De Lacy Evans was attracted to the subject. As a soldier who had seen much service under trying circumstances, he was perfectly aware of its importance. He knew the onerous and varying duties that devolve upon the military surgeon in the field. He, I say, had seen service, and he knew the value of the knowledge sought to be diffused. He broached the subject in Parliament in 1853; his speech was well received by the House of Commons, and attentively listened to by the then Secretary-at-War, who immediately instituted an investigation into the working of this measure on the Continent, and the opinions entertained of it at home. The strongest medical evidence was given in its favour, and military testimony spoke equally of its merits. Lord Cathcart, Commander of the Forces in North Britain, expressed his full concurrence with Sir De Lacy Evans, in the view he had taken, and stated it as his full conviction that extending to the other capitals of the United Kingdom the advantages enjoyed by Edinburgh would be beneficial to the interests of the country, both in regard to economy and, what was of more value, human life. Sir Howard Douglas, Sir Thomas Brisbane, Sir James Russell, and General Wetherall, all advocated the same view. This disinterested evidence was conclusive. War with Russia was declared, and the Government at once proposed a vote of £400 per annum for the endowment of additional Chairs of Military Surgery in London and Dublin, which passed the House of Commons without a dissentient voice. Such, gentlemen, has been the gradual progress of the subject we are met this day to consider: it originated with private individuals; it has terminated in the patronage of the crown.

The object sought by this branch of instruction is, to fit you, gentlemen, for the special duties which, as naval and military surgeons, you will be called upon to perform; for the object in instituting a medical establishment for an army or fleet is not merely to provide for the cure of disease, but it is also, and I may say principally, for the preservation of health, for the maintaining undiminished the vigour of our soldiers and seamen, under favourable and adverse circumstances, in time of peace as well as in the time of war.

The instructions with which I have been honoured by the Right Honourable the Minister for War, in connexion with the duties of this Chair, bear also directly on this point. They say—"You will treat, in your lectures, upon all such subjects as will directly meet the requirements of the army; you will explain the qualifications required in recruits; the various means of maintaining the health of soldiers, in barracks and cantonments, in camp and in the field. You will particularly explain the peculiarities which manifest themselves in the diseases and injuries to which soldiers and seamen are more particularly liable, and the best means of treating them. The diseases of foreign stations—the peculiarities these disease present in these stations, and the most approved methods of treatment: the specialities of medicine: the arrangements necessary to be made previous to a march and to an action, and the specialities of surgery: the defects which unfit a soldier to serve, and warrant his being invalided: these, and all other matters which are not ordinarily taught in the medical schools of the United Kingdom. And no candidate for the Army Medical service will in future be admitted who has not satisfactorily passed through a course of such instruction by the Regius Professor of London, Edinburgh, Dublin." It is the wish and desire of the Government that the education of those destined for the public medical services of the country should not only be as perfect as the resources of the country have hitherto permitted, but that due provision should be made by the State for the deficiencies which existed before. The intention of the Chair of Military Surgery, therefore, is not only to teach you how to treat the soldiers when wounded or sick, but also to bring before you the full and careful consideration of those measures which are best calculated for the prevention of illness and the maintenance of health. For, you are ever to bear in mind, that it is not the direct weapons of war—shot, shell, and musketry, that really thin our ranks, but that it is disease. This fact has been long ascertained: the experience of every campaign has proved it, and the present but too sadly bears it out, ten times the number of our gallant soldiers having sunk under disease than have fallen on the battle-field,—but too truly verifying the words of the Czar after the battle of Inkermann—"that although our troops might baffle his generals that day, they would not be able to resist Generals January, February, and March."

The history of war, too, both by sea and land, shows further that more battles have been lost, more great enterprises failed, through sickness than through the skill or valour of the enemy. Our fleets and our armies are sent forth to maintain the honour of the British arms; sickness and disease may in a brief period paralyse their efforts, and these are not to be prevented by medicine or remedial agents. Medicine, as applied to war, consists in the preserving of the health of the community; the discovery of the causes of endemic and epidemic diseases; the dieting and the clothing of the soldiers. These will be amongst some of the first subjects we shall have to consider—subjects totally apart from your general professional education, but subjects which will be henceforth taught in this College by the Military Surgery Chair.

Her Majesty's Government have decided on placing this chair in the Royal College of Surgeons in Ireland because the position of this College as the national school of surgery of the country constitutes it the legitimate recipient of a royal and national appointment. The charter of the Royal College of Surgeons expressly states that this institution was founded in order—"that it might provide a sufficient number of properly-qualified surgeons, as well for the service of the public as for our army and navy;" and the money with which the edifice was built, within whose walls we are assembled to-day, was granted by Government for this purpose.

And here I must be permitted for one moment to digress, for I feel that I should be slighting the memory of a great and good man were I to omit to tell you through whom this money was obtained. It was obtained by the late Dr. Renny, when Director-General of the Army Medical Department in Ireland, whose portrait, in grateful recollection of services rendered to the body, hangs in the board-room of this College, and a monument to his memory has been erected in Christ Church.

But to return. The College of Surgeons in Ireland is of a very different character from the College of Surgeons in England. The College of Surgeons of this country is its great medico-chirurgical school; the College of Surgeons in England stands in relation to the body simply as a council-hall or guild. The examination of candidates for the diploma is held within its walls, but beyond this, and fixing the curriculum of study, it in no way assists in the education of its members. From the school of this College, on the contrary, issue the majority

of those who have the honour of its diploma; and the student who gains it, believe me, carries with him into the world a title acknowledged and respected wherever civilization extends. For these reasons, then, the College of Surgeons has been selected as the most fitting locality for this chair. The Council, whilst accepting it as a graceful recognition of the high sense entertained by the Government for the worth of the institution, have not, on their part, failed to reciprocate by co-operating to the utmost of their power. No sooner was it intimated by the Minister-at-War that it was desirable that the Regius Professor should have the fullest means of illustrating his lectures, than the Council at once placed a museum at his disposal. Lord Panmure further expressed it as being the wish of the Government that full accommodation should be provided for the medical officers of the public services who might desire to prosecute anatomy whilst quartered at or stopping in Dublin. A private dissecting-room was immediately ordered to be built, and is at this moment in progress of construction. The Government, it is true, have on their part come forward and granted money for the fitting up of the dissecting-room and museum, but the College alone has charged itself with the cost of erection. These two, when fully furnished and completed, I do not hesitate to say, for their respective purposes, will not be surpassed in the United Kingdom; and I feel that I may here, on the part of the medical officers of each service, express their best thanks and acknowledgments to the Royal College of Surgeons. All will, on entering its portals, now feel that, no matter whether Scotch or English surgeons, they are here as wholly welcome and at home as in the Colleges from whence they have taken their degrees. They will look upon it as a professional home—a common ground of re-union for all; and when quitting it for service abroad, the deficiencies in its museum will not, I feel assured, be forgotten, but through their kindness will these deficiencies, year after year, be made less. Here (in connexion with a museum specially allocated to this chair) it may be said that I am speaking mainly with a view to self. I acknowledge, gentlemen, that I am; but believe me, in doing so, it is equally for you. Illustration is the key-stone of teaching. The ear may appreciate and retain, but it never can equal the eye. It would be invidious for me, on an occasion like the present, to particularize the names of some of the donors who have already contributed, when, from the very number, I cannot name all; therefore I can only say that I must beg most gratefully to express my thanks to all who have already aided in the formation of this museum, and especially for the kind and liberal manner in which they have come forward to do so.

My duty, then, in connexion with this chair, will be, to bring before you the full and careful consideration of those subjects which it is necessary that you should be acquainted with, in order to fit you for the charge of large bodies of men; and the experience of the present war has, I think, sufficiently shown the necessity of such being a branch of the education of every military surgeon—indeed, I might almost add, of every military officer; for if it were inculcated that the object to be attained in war was not only fighting and destroying the enemy, also preserving our own troops in efficiency as to health, a vast deal of the loss of life in armies would be avoided.

There has, unfortunately for the welfare of the English army, been from time immemorial, a general dislike to receive medical advice. I do not mean to say that exceptions have not existed to this rule; but it is (as expressed by the Scutari Commissioners, in their report) “notorious that the most valuable suggestions of the medical officers were but too frequently termed ‘Doctors’ crotchets,’ and utterly disregarded. Everywhere it was the same; neither at Scutari nor the Crimea, had the principal medical officer the power to secure from other quarters the co-operation and assistance indispensable, whilst the weight of responsibility was left entirely upon him. More power must be placed in the hands of the Medical Staff; the decision of Medical Boards held by experienced men in all matters relating to the physical condition of the troops, must be vested with something like authority, and the medical officer should be amongst the very first, instead of amongst the very last, to be consulted in all the great operations of war. At present the English army medical officer has no power in matters where he should be all-powerful. Look at the consequences. Why was there a deficiency of field supplies at Alma? Because the transmission of those supplies was not permitted to that authority who alone could conduct it. Was there a deficiency of stores provided? No. The medical authorities did their part in selecting all that was required. It was in the stowing and

transporting of these stores that the lamentable failure was; and in the stowage and transmission the medical department had neither hand, act, nor part.

I say, gentlemen, that the *Army Medical Department* has not been fairly used. The undue suffering of our gallant army through that long and dreary winter has been attempted to be attributed to the failure of the Medical Department. I tell you that grosser injustice was never perpetrated. I will do more, I will prove it to be the fact.

The causes of the wretchedness and misery of our soldiers were beyond the medical officers’ control; they had no power of regulating their own affairs; they could not increase the number of their staff; they could not order the conveyance of the ambulance from Varna to the Crimea; they could not provide carriages for the wounded from the field of Alma to the shore, nor yet transport them across the Black Sea to the Bosphorus; but what human hands and hearts could effect, they did. I have the honour of knowing personally many of these maligned men, and I tell you that they are inferior to none, either in professional acquirements, or in those qualities that characterise the British soldier and the gentleman.

The position of the Medical Department in connexion with the present campaign cannot, I consider, ever be more legitimately discussed, or publicly brought forward, than upon the present occasion. Will you, then, allow me for a brief period, to trespass on your time, and to state what were the real causes of the miseries of the Crimea.

The first and principal cause was neglecting to follow the suggestions of the medical department. This I will now prove. I will make no general statement; I will come to facts.

War with Russia was declared on the 8th of March, 1854, and on the 4th of April, the Director-General, Dr. Smith, wrote officially in these words:—

“If the means of averting disease be not rigorously observed, the British troops will suffer seriously from the moment they land upon the Turkish shores. The clothing which the soldier has at present is not suited to the climate in which he is to serve, nor the duty in which he is to be engaged; and if the necessary adaptation be not effected, sickness, and undue sickness, will be the result.

“The British forces will be exposed to great heat and an extreme of cold. I feel, therefore, constrained to recommend that an inquiry should be instituted, to ascertain if the dress of the soldier cannot be made to contribute to his comfort and efficiency more than it does now; for, as at present constituted, the shako is cumbersome and heavy, the leathern stock unfitted for the field, whilst the coatee, tightly buttoned to the body, restrains the limbs, and oppresses the man with heat. He should have loose and easy-fitting garments for the hot weather, and be placed (at the expense of the nation) in possession of flannel shirts, woollen drawers, and worsted stockings, to enable him to stand the winter cold.

“There is reason, too, to fear, that from the absence of, or badness of, the roads, wheeled vehicles will not be able to convey the sick and wounded. More simple means of carriage must be adopted, and I propose, therefore, that a body of 800 able men, natives of the country, be raised at once, ‘as a Hospital Conveyance Corps,’ and if duly organized, and properly managed under military discipline, they will prove most effective for the purpose required, and greatly advance the cause of humanity.

“The welfare of the sufferers and of the army will require that those disabled by wounds or sickness should be removed from the vicinity of the conflicting forces. Ships, therefore, should be liberally provided, some for the purpose of carrying to England, or elsewhere, men not likely to be soon available for further service; others in use in harbour, as floating hospitals. The ships for the above-mentioned purposes should be commodious steamers, high between decks, thoroughly ventilated, and having fixed berths.”

Gentlemen, I beg you to note that these letters were written and sent on the 4th of April, the 13th of April, and the 10th of May. The battle of the Alma was fought on the 20th of September, after five months had passed away. Where was the hospital corps to carry the wounded to the shore? Where were the fitted transports to convey them to Scutari or the Bosphorus? But to look further: our army took its stand before Sebastopol. Six weeks more passed over, and what was done to aid that army? Nothing. A while longer, and the days declined. Autumn gave place to winter, aye, and such a winter, and our gallant troops stood in the tattered remnants of their summer clothing to face the Crimean cold. The keen blast, cutting with its icy edge, thrilled through the soldier as he kept his watch on Balaklava’s heights. The damp mist

chilled him, and the cold rain drenched him, as he toiled amidst the darkness of night in the mud-soaked trench. Where were the warm flannels now?—the woollen drawers?—the worsted stockings? *Were they wanted? Aye, and wanting.* Sadly and silently the flower of England perished. The flower perished, but not the stem from whence the flower sprung. England herself remains, and soon will be a stronger-rooted tree than ever. Decision has been called for by the nation; he has come, and found the tree shaken. What has he done to prop the tree? Not placed around it one or two dry sticks, that however goodly-looking in the sunshine, would snap and break away if borne on by a foreign blast. No; he has called upon society to join hands to hold it for awhile—to bear with any little temporary shaking till it recover from the last winter's shock. He knows the ground around it is the source of permanent support—the source from whence the tendrils are to find the sap to fill the head. He has broke up the ground, and opened new channels for intelligence to flow towards the roots; he has loosed the iron band of routine, which, propped on patronage, encircled the trunk, and gave it false support; he has loosed this band, and thus allowed intelligence and understanding to pass slowly up. Oh! that he would burst that band, and let this sap run through the country's trunk to every spray.

This may be imagery, but this is truth. The picture I have painted, and yet will paint, is but the faithful portraiture of last year's scene. What were the causes that carried off our brave soldiers to inglorious graves? Hardship, drenching rain and pinching cold, short rations, insufficient clothing, nightly labour. These were the seeds; and scurvy, dysentery, diarrhoea, cholera, and fever, its fruits. Wholly to prevent these ravages might be impossible; still, to mitigate them was within the range of human foresight, and had the right means suggested by the Medical Department been used at the right time, last year's campaign would have been greatly shorn of its horrors. Neglecting these the British Army suffered. Death held his reign. Brave soldiers perished in misery and filth, their decomposing bodies sending noisome vapours up into the nostrils of the rest, blighting and destroying all that breathed that tainted air.

At one period our army lost, from these causes, over one hundred men per day. Of our comparatively small force in the Crimea, 4000 were ill in camp, and more than double that amount of men sick in hospital at Scutari and elsewhere. Some regiments were extinct, or nearly so. A fine regiment had at one time seven men only, and another corps but thirty soldiers fit for duty. Our picked and chosen guards, who sailed from England nearly 2000 strong, could muster little more than 200 on parade. Of the fine army England sent away in all the pride and pageantry of war, how few remained to celebrate the anniversary of their landing on the Crimea!

And who was it that through that dread time of pestilence and death struggled by day and night to stay the plague? *The Medical Department*—the staff and regimental surgeons—these men, I do maintain, individually and collectively, so discharged their duties as to call forth the nation's gratitude. I have inquired from numbers that have returned, sick and wounded, officers and men, what was the treatment they received from the surgeons under whose care they came? I have had but one reply—viz., that *anxious care, unceasing kindness and attention, with the most skilful treatment*, met them from the moment they fell wounded on the battle-field, or struck down by sickness, till they reached England's shore. This, it may be said, is private statement. If their conduct in camp and field be such as I here say it is, *why does not public record tell the same?* Why are their names held back in each despatch if they are worthy of being placed upon the pages of the *Nation's Register*? Why? Because, routine has, as it were, fixed a scale of names that are to appear on each occasion, and of those that are not. And yet, in spite of this injustice, (for it is no less), the deeds of some have forced the unwilling pen to write their names. And thus I read of Wilson, Phelps, and Greer—of Brady, Taylor, Wrench, of Jeeves, O'Callaghan, and noble Thompson—what shall be said of him? what of a man who, exhausted by fatigue in tending on his wounded foes, sunk a martyr to humanity? Why, that in chivalry there is not aught that can surpass his noble conduct towards the wounded Russians; and he, I say, is but a sample of his class.

Who, then, was the cause of all the misery our troops endured? Who to blame? The Medical Department? No! it was not; it was the nation; it was you, I, and all who suffered miserable starveling creatures, trading hucksters, to awe and govern in the House of Commons, and to sacrifice to their own interests the country's character, the prestige of the British

arms. What, but the pluck and courage of the officers and men of the Crimean army, has saved England? Had they succumbed—Had they not, despite of cold and hunger, overwhelming numbers, and disease, held a bull-dog gripe of Russia, *where would England now be in the scale of nations?* This is the point for deep consideration. Let us, then, ponder on it. Let us profit by the sad experience of the past. Let the words uttered by the Duke of Cambridge, in the Town-hall of Liverpool, be re-echoed by the country. His Royal Highness said—"The lesson learnt from these events, he trusted would not be forgotten; and that lesson was, not to starve our establishments in time of peace, or to maintain them in such a low state of efficiency as if we thought another war impossible. The defects from which we suffered were not so much the faults of individuals as of our system, and still more, of the state to which our war establishments had been reduced by forty years of peace."

His Royal Highness here spoke from experience. In doing so he but confirmed what had been said by Mr. Herbert, who, speaking in the House of Commons in his place as Secretary-at-War, spoke the truth, and those who know the Hon. Sidney Herbert know he can speak no other. He said England commenced this war without an army. She had troops, and chosen troops; but what were their numbers? Why, commensurate with the magnitude of our possessions, scarcely to be considered more than military police. I will go further: I will say (for it is useless to conceal the fact) that England at the commencement of this war had a false notion of its own position. It looked upon itself with satisfaction as a power whose military system was perfection. Brief experience showed the fallacy of this opinion; it revealed our whole military system (beyond the regimental) as defective in the field; its arms had to be changed, the Minié rifle to be substituted for the musket, and our artillery made of double weight; our soldiers' clothing changed; the shako he discharged himself, the stock after a struggle was taken from his neck, and the tight coat changed for an easy frock. The Commissariat service was found totally unequal to all the arduous duties it was called on to perform, and a Land Transport Corps had to be embodied to carry the supplies. The Medical Department was defective in everything but the character and talents of its officers. It is needless, however, to prolong this catalogue, or to particularize; for, in one word, our system throughout was bad. Shall it remain so? No; the nation has the wish to repair every defect, and Government the power, and not alone the power, but the will. From the War Minister's own lips have I received the assurance that it is his and the Government's intention, in relation to the Medical Department of the army, to make this service as perfect as means can make it, so that it shall be a credit to the country, and an object of desire for the whole medical profession.

Gentlemen, there are grievances under which its members labour; but this state of things soon will cease. Already has the sister service been relieved of one of its greatest drawbacks; I mean the denial to the assistant-surgeon of a cabin. This necessary accommodation has been granted without qualification or reserve. The withholding of this privilege was an unwise act; for, to my own knowledge, within the last few years many men of prime, ability, and most desirable for the public service, have refused to undergo the annoyances of the cockpit of a man-of-war, and have taken to the mercantile marine, talents which should have adorned the Medical Department of the navy. Grievances, gentlemen, I know are always a theme of popular discourse; but it is not of them that I have to deal to-day. The subject on which I feel impelled to speak is the position of our country in connexion with the present war, and the influence which our profession may exercise for good or evil. Directly or indirectly we have all had more or less occasion to regret this war; and yet, on principle, I do believe that we ought to regard its advent as a blessing. I believe that Russia at this moment acts the true friend of England; and that we are deeply indebted to her for forcing on this war. And, why? Because she has stripped the handkerchief off England's eyes, and shown her that she slept on sinking ground; roused her to exertion before she had sunk too deep, and whilst she yet could save herself. The struggle to effect this has been intense; but she has done it. It has taught us where we were deficient. It has led us to comprehend in what our weakness lay, and to correct it. We have admired the splendid camps and field arrangements of our brave ally, France, and have compared them with our own. We have seen the difference; but have we reflected where the difference lay? France began to form her army on the 19th of June, 1815; England hers not until the 9th of March, 1854. If

England would be on the same footing, she must, like France, keep up a war establishment in time of peace. She will then be equally prepared for time of war.

Our own immediate province in connexion with this subject is not, however, to go into military detail, but to inquire in what, pertaining to the hospital and field equipments, France has shown her superiority to England. It is not in the medical officers themselves, but in the system under which they serve. The French have had a staff of carefully-trained men, of every grade needed in an hospital; the English have had nothing of the kind. The French attendants have been made perfect in their duties before quitting home; the English have been taught literally nothing. Fifers and flute-players to-day, they are turned into hospital orderlies to-morrow. The British Army Medical Department has had no position commensurate with its importance. The Director-General has well expressed its actual state, by saying that hitherto it has been a parasite department hanging on others for support. Gentlemen, this state of things must cease. The Army Medical Department is a department, believe me, of paramount importance to the State. It has been kept down; but why has it been kept down? *Because of the want of independence upon the part of its members.* Discipline is one thing, but abject subserviency is another. Do your duty honestly, honourably, and faithfully, but having done it, *maintain your own position.* If you not do so individually, you will collectively be in times future, as in times past, a parasite department. The British army surgeon hitherto has had in his own person to combine the functions of physician, surgeon, and apothecary, purveyor, nurse, and dresser. In the French army, on the contrary, there is a division of labour which exerts a beneficial influence over the whole hospital arrangements, and its effect is striking, by the good order consequently produced. And whence came this superiority of system? *From one master-mind, left to work unfettered by routine.* It came from Baron Larrey, not Baron when he formed this system, but made Baron for so doing. His career so well illustrates the influence the surgeon can exercise over the well-being of an army that I must adduce it here. When M. Larrey joined first, the French hospital arrangements were as defective as he left them perfect. There was no field hospital whatever. The wounded soldier's sufferings suggested to him the necessity for organizing such, in the immediate vicinity of the field of action—a present help in the very hour of battle. Restrained by no rules or regulations forbidding him from carrying out his ideas, he formed at once that ambulance volante, which we have seen so admirably worked in the present war. Previously to this, the victims of the conflict had to lie for hours and hours on the battle-field, after all was over, before receiving help, many meanwhile perishing for want of aid. Larrey soon showed the perfection of his system by going into action, and taking his wounded out; and beautifully does he describe the feelings of internal pleasure he experienced when contemplating (as he bore the first sufferer to the rear) the benefits he had conferred upon his countrymen.

His ambulance corps he adapted to the country in which he served. He had two-wheeled carts and four-wheeled wagons for plains, and where the country afforded roads; for mountainous districts, and places difficult of access, mules with chairs and litters, (such as now in use;) whilst over the soft sands of Egypt he bore his sick and wounded, slung in baskets upon camels' backs. Thus far for the field. Active service being suspended for awhile, and the French army in cantonments, sickness came, virulent disease and pestilence appeared. Larrey stood forth to meet it. At once he extended the cantonments, built huts, separated the sick and healthy, and relieved all over-crowding. He scoured the country, brought in vegetables, vinegar, and beer, improved the soldiers' bread, and thus the plague was stayed. Larrey looked not to physic nor yet to France for aid. Peace followed. What did Larrey now? He formed at once a School of Military Surgery, lectured, experimented, and in every form studied disease; collected and tried all sorts of instruments, and invented others to supply the wants of war. Larrey's resources were interminable. He was also cook as well as surgeon. His potages placed beside those of his good, kind-hearted countryman, Soyer, might not perhaps have pleased the palate equally, but they did more, for they saved life. Reverses had attended the French arms; there was a total absence of all commissariat supply; death from starvation seemed imminent. Larrey was summoned in extremity. He saw no difficulty in the case. He took the best horses from the troopers, killed them on the spot, cut up the flesh, and made soup for all, flavouring it with powder taken from the cartridge-boxes.

Gentlemen, I think I need say no more of Larrey's value

to the army. I have told you what he did; I will tell you now how he did it. He effected it in the same way precisely that Todleben defended Sebastopol—by *absence of routine.* Confidence was placed in him by Napoleon. He had uncontrolled power over his own department; what he saw necessary to do he did, and did at once. *Buonaparte looked to him for suggestions, treated with respect each word he uttered, and listened attentively to all he said.* His presence and advice were so valued by that great chief that he made no move without him; and on his return from Elba, his first care was to secure Larrey's services for the grand army he led to Waterloo.

This was no fanaticism. It was no superstitious prestige that induced Napoleon to seek to have Larrey near his person. It was the knowledge of his value to the troops, his worth in the hour of need. No! Larrey's fame was universal; for no sooner had peace been finally secured to France, than foreign powers sought his aid. Free America invited him to the United States; autocrat Russia offered high emoluments and honours if he would join her ranks; and Brazil petitioned him to guide her army; but he declined them all, though suffering at the time almost penury from Bourbon spite. Larrey declined all offers. "I remain," said he, "for France. Her Sovereign is changed, but not her soldiers; they are the same, and my solicitude for them forbids my serving any else." What truly noble feeling is here expressed. Does it not rightly justify what Napoleon said of the great baron:—"A brave and honourable man is Larrey. If France ever raise a monument to gratitude, that monument should be to him."

The proudest day, however, in Larrey's life, was that on which he visited the lines of Chatham. Here, his old professional opponent, Sir James M'Grigor, the Governor, and all the Staff met him in full uniform, and conducted him over the hospital and fortress, and as he passed the outer gate he was saluted with military honours. Such was the feeling England entertained for honesty and worth.

What was it, gentlemen, that gained for Larrey this proud position? Not destroying life, but saving it. The military officer reaps fame (and justly so) by dealing death amid his country's foes; the surgeon by extending aid to friend and foe. Both are honourable, manly, fine professions; but is there not, (if closely analyzed,) a finer, holier feeling, in saving, than in destroying life? I well know that the wild excitement of the charge, and the clash of steel handled as a sword, is far, far different from what its employment is when set in ebony and handled as the surgeon's knife. I know that, in war, the soldier's is more attractive than the surgeon's life; but is it better? Does it conduce to greater happiness in early years, or peace in old?

To support this view, I shall quote a letter recently addressed by a staff-surgeon of the army to his son, a pupil of my own, who wished to change the scalpel for the sword. He says, "I shall not oppose you, if it is your wish to quit our profession for the army, for ours is a profession in which no man should be kept against his will. Take your choice. My every effort shall be to advance you in whichever you adopt (*so long as you advance yourself*), but, before leaving that in which you are engaged, let me contrast the two. Does the troop officer, whose profession obliges him to take life, when ordered, perform the duty of a Christian so well as the surgeon? The medical profession is, in the eye of God, (next to his own service,) the very noblest of all professions. The physician's life is spent in acts of love and charity—in relieving pain, in mitigating suffering and distress. It is a profession in which all the good and kindly feelings of our nature are called into existence, and when practised by a man of liberal and generous disposition, there is none that commands respect and esteem so much, or more frequently obtains for its members friendship, gratitude, and good-will."

That it does so let me, in conclusion, give a proof. Let me adduce one of recent date, humble in origin, it is true, but not on that account to be reckoned of less worth. It is not the record of a farewell piece of plate presented to a surgeon by his brother officers,—that cherished gift,—No, it is simply a notice from the columns of *The Times*, but a notice recording the spontaneous expression of the private soldiers' gratitude, and runs thus—

"We, the undersigned, one hundred and fifty-eight sick and wounded soldiers returning from the seat of war (on board the ship *Saldanha*), cannot separate without expressing publicly our heartfelt gratitude to Dr. Nyffe. During the long passage home, morning and evening, noon and night, he was at the bedside of the suffering man; and when it pleased the Lord to call the soldier to himself, then, in that last hour when

earthly aid could do no more, was he still there, fervently imparting spiritual assistance to the dying man.

"The names of many officers of lesser worth, we do not hesitate to say, have been brought to public notice by high official friends: but we will introduce into our humble cottages, with grateful recollection, for many years to come, the name of Dr. Johnston Fyffe."^{*}

And who is Dr. Johnston Fyffe? He was a short time since a student of this college; a short time since he sat where you sit now. May I, a short time hence, from off the present benches, draw like examples for future illustration!

Clinical Lecture

ON

SCARLATINA,

AND ITS

RELATIONS TO RHEUMATISM, CARDITIS,

AND

ALBUMINURIA.

By W. HUGHES WILLSHIRE, M.D.,

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GENTLEMEN,—For some months past we have had in London an epidemic of scarlet fever. It was lately on the decline,—at least so far as my own experience would testify,—and about the hospital measles appeared to come forward in its place. In some other parts of the metropolis, according to the Registrar-general's Reports, the disease is yet very prevalent. I cannot say that the malady, so far as I have seen it, has shown more than its ordinary characteristics. I do not know that it has been unusually malignant; that dropsy has been more frequently its sequence; or that any other intercurrent or secondary affection has been met with above the general average. Nevertheless, I should say it has certainly not been a mild epidemic. I have seen it twice fatal from diphtheritic cynanche and croup, twice from dropsy with effusion into the pleural and pericardial sacs, once from suppuration, ulceration, &c., with their attendant evils, of the sub-maxillary glands and the surrounding infiltrated and hardened cellular tissue, and once from the direct depressing poisonous operation of the virus in a malignant form, where gangrenous cynanche with ozæna happened. I take this opportunity, however, of referring to scarlet fever, for the purpose of drawing your attention to a particular complication of the disorder, a case of which is now in the hospital—viz., rheumatism. If I find that I have time, I shall also make a few observations on the case of Sculthorpe, who has just been discharged after suffering marked involvement of the kidneys and albuminuria, consequent upon scarlatina.

The following is a short history of the first case:—Clara M—, aged ten years, admitted the 29th of October. On the 22nd, the rash, sore-throat, and *malaise* of scarlet fever made their appearance. On the 23rd, she was brought as an out-patient to the hospital. For six days nothing more was heard of her, but on the 29th her mother returned to say her daughter was very unwell, and that the day previously her limbs and joints had become very painful and seemed swollen. The child was admitted into the wards the same afternoon. On admission, the right knee and ankle-joint were swollen, slightly reddened by a blush, and painful; the tongue was coated, the bowels rather costive, and she looked a little puffy about the face; urine said to be passed in sufficient quantity. She was ordered the nitrate of potash mixture and compound powder of jalap. The urine to be preserved for examination.

On the 30th, she complained very much of pain; the limbs were too painful to be moved, and she lay on her right side, with the knees up towards the chin; the respiration was accelerated, the heart's action increased in frequency, and a slight bruit was heard, diffused, as it appeared, over the precordial region. The bowels had been slightly operated on. No urine free from admixture could be obtained. Four leeches were

ordered to be applied over the heart, and the bleeding to be somewhat encouraged, the compound jalap powder to be repeated, and the wine of colchicum to be added to the nitrate of potash mixture. Alkaline fomentations to the affected joints.

On the 31st, the patient seemed much better; the heart's action lessened, but the bruit was plainly to be heard. The countenance was more cheerful, and the position in bed could be changed. To continue the medicines as before.

November 1st.—Still improving; the pain of joints nearly disappeared; and cuticle freely desquamating. Could lay on right or left side indifferently. Complaints of soreness of mouth. The tongue was red, with aphthæ upon it, and stomatitis was present; there was also a slight herpetic eruption about the lips. She was ordered the chlorate of potash mixture, and the application of the mucilage of biborate of soda to the mouth. Up to the 5th of November she went on improving, the skin freely desquamating, and the urine was found to be non-albuminous.

On the 5th, one of the wrist and ankle joints again became painful and swollen, the heart's action increased, and the countenance somewhat anxious. At the base of the heart a sort of reduplication of the first sound was plainly to be heard, and over the apex a distinct systolic sawing souffle. Ordered to return to the nitrate of potash and colchicum mixture; to have a blister on the right side of the chest.

On the 8th she felt again better, the bruit over the apex continuing. Ordered to have two grains of mercury with chalk, and three of soda, every four hours. She went on generally improving; complained of no pain over the heart; no difficulty of breathing, or of pain of the limbs; the countenance was full of vivacity, but a loud sawing souffle beneath the nipple, and a slight roughness with the first sound at the base continued.

9th.—Improves; apex sound as before, that at base less evident. Repeat the mixture.

10th.—Much better, but the pulse rather small; apex bruit as before, roughness at base less evident, but a reduplication as before heard of the first sound. To continue the mercury, but to take also cod-liver oil.

11th.—Improves; up and dressed; skin yet desquamating. To have a warm bath; and orders were given to the sister to have her skin well scrubbed.

12th.—Urine examined; not albuminous. To leave off the mercury, and to take cod-liver oil and quinine.

13th.—Was crying yesterday because not allowed to leave the hospital, being, she said, "quite well." Bruit at apex continues; skin still desquamates. To repeat the warm bath.

Now I know that you will be amply informed in your books about most of the complications of scarlet fever, but that you will not receive much information concerning this rheumatic or arthritic one. Hence I have selected it for to-day's clinical illustration. Although a complication I say, but cursorily alluded to by writers in general, yet it seems to be one that has been known for many years, since an author who is sometimes said to have first hinted at the necessary separation of scarlet fever from other exanthems, but wrongly so, (for he referred it to measles *ad morbillos*), takes notice of an affection of the joints accompanying this disorder. This writer was Sennertus, who wrote in 1619, and from whom a German writer makes the following quotation: "*In declinatione materiæ ad articulos extremorum transfertur ac dolorem et ruborem ut in arthriticis excitat.*" Döring is said also to have made mention of it; and, in modern times, Murray, Rush, Wood, Kreysig, Pidoux, Bird, Trousseau, and others, have not failed to remark upon it. In 1851, attention was very prominently drawn to the point before us by Betz, of Heilbronn, who went so far as to hint at an essential relation between, if not an identity of cause of, many cases of acute rheumatism in the child and scarlet fever. He implied, at least, that an arthritic affection in young children often could not be told from the exanthem in question. That he had seen albuminuria and desquamation of the skin in acute rheumatism in children who had shown no exanthematous eruption; and, on the other hand, that the eruption was not an *essential* symptom of scarlet fever, leaving it, therefore, a very difficult, if not impossible, case in which to arrive at a differential diagnosis. In 1853, M. Trousseau stated that he had very frequently met with the complication we are speaking of; that the arthritic disorder sometimes, though but rarely, became generalized, and attained a high degree of intensity, accompanied by delirium and other nervous symptoms, terminating in death. In 1854, I myself read a paper before the Medical Society of London on Rheumatism in Children, and in which I adverted to its union with scarlatina, (reported in THE LANCET, 1854, vol. i., p. 138;) and, a few months afterwards, Mr. Haydon, of Bovey Tracey, communicated some very interesting facts to THE LANCET, in

* Dr. Fyffe was at this time assistant-surgeon of the 30th Regiment.