

1904.
CUS417/100.32

Letter from Dr. John S. Fairbairn to Prof. Arthur Thomson.

(script)

(Present address
42, Wimpole St.)

60, Wimpole Street,
London, W. 1.

January 10, 1904.

Private.

Dear Prof. Thomson,

I feel in the mood to write to you about this difference of opinion which has arisen about the Regius Professor of Medicine and split the Oxford School. I am sure many on both sides think that their views are the only ones for the best of the School, but others may be influenced by selfish motives and so on, but I would like to explain to you the hesitation of some of your own pupils, - the men of about my standing - as represented by Bosanquet, James, Stainer, myself and others. It is possible we may be setting up a bogey in order to knock it down, but so far as we see it at present, it seems to be pretty real, and I certainly feel very strongly on the question. While most of us in London are joining in this agitation, I am sure many do it from different motives. Personally I am very disgusted with the attitude of many of those who are engineering the thing, - especially some of the Bart's crowd - who seem to think of Bart's first and Oxford second, - or perhaps of Bart's only.

I can quite understand the feelings of many of you in Oxford about them for I know that much of the excellent work done in Oxford by you and Gotch and Ritchie and Burdon Sanderson himself has been done in spite of a certain lot in London, who are deeply in this affair. That, however, does not influence me. I formed my ideas on it quite independent of them, and I can say too for many of the others of the younger men. May I then just put our position before you, for the fact that this has been sprung on us without any combined discussion makes the understanding of one another's position difficult.

The whole question, I take it, is the old struggle which goes on in all Medical schools, at the colleges in London, at London University, at Cambridge, and elsewhere, as well as at Oxford, i.e. the question of the proportionate distribution of work in the 5 years' curriculum between the preliminary sciences (I mean up to end of 1st B.M.) and the final subjects. That I take it is the bedrock of the difference of opinion. Now at Oxford this is accentuated by the way the final subjects are left out of any decent representation in the Faculty of Medicine. I have long felt this and frequently spoken of it. I don't know the exact constitution of the Faculty, but I know it is largely composed of Museum teachers, Botanists, Chemists, druggists, physicists, morphologists and such like, with the Anatomy, Physiology and Pathology teachers, a couple of local G.P.'s who happen to be Litchfield Lecturers and 3 or 4 men from London with the Regius in the Chair. I have always looked on it as a most incongruous and heterogeneous lot. Where do I come in?

Letter from Dr. John S. Baird to Prof. Arthur Thomson.

(script)

60, Wimpole Street,
London, W. 1.

(Present address)
42, Wimpole St.

January 10, 1904.

I don't believe there has been a representative of Midwifery and Gynaecology on within the memory of man, and yet that is a subject of infinitely more moment to your practitioners in their work than any amount of Botany or Embryology or Organic Chemistry. Is there a Surgeon (bar the local authority) on the Faculty at all? Is there a representative of the Special Departments, - eye, throat, etc. or has there ever been? I hear of Ramsden, Vernon and other junior demonstrators of about my time serving on it, but that there is any adequate representation of the final subjects I have never discovered. However, in Oxford that is to a certain extent natural, for these are the men on the spot. The man who ought to be the mouthpiece in Oxford of all the clinical subjects is the Regius, and the man I want to see there is someone who can be that. The ideal man is one who has been a Clinical Teacher in a big Medical School, who knows medical education and methods and examinations in the widest sense, - in fact a man who is rather a clinician than a scientific man. The late Regius scarcely conformed to this to my mind, - he had been too long out of the practical and clinical work. Ritchie is just as bad, with the additional disadvantage that he is so young that he may be there for 40 years yet. I care not whether the new Professor comes from London or from what hospital he comes, or from the Provinces or Scotland, nor if he came from outside these islands, provided he is clinical with a wide knowledge of the requirements and equipment of the best class of student medical student, and is abreast of the work of the medical schools in the final examinations, and will keep the final M.B. up to mark. The 1st M.B. and pathology can look after themselves and so can all the preliminaries, there are all the Professors and Museum teachers, and a crowd of junior demonstrators to see to it, but how about the practical final work if the Regius is a mere pathologist?

These are the reasons why I feel so strongly against sinking the Regius into a Prof. of Pathology, which is practically what the Oxford scheme amounts to.

I should be delighted to see Ritchie Prof. of Pathology, with a salary which would make him independent of practice. I look on Pathology as a subject which nowadays requires a man's entire attention, and that it ought to be quite separate from clinical work, - the practising Pathologist is just as dead as the Surgeon Anatomist or the Physician physiologist. So I look forward to a time when an endowment can be realised for a Prof. of Path. who shall not practise but teach pathology and be a Pathologist. I hope Oxford will do so, for it is a subject which Oxford can teach. But when you propose to sacrifice the Reg. of Med. for this object I am up in arms. To make Ritchie Regius then, either means that this is to be done or that Ritchie is to be appointed as a Physician and a Clinician and as a man with special knowledge of medical education in its widest sense and especially of the final subjects. I am sure he would be the first to disclaim any such qualities. If Cambridge proposed to put

1904 .

Sims Woodhead into the Regius Chair I am sure there would be the same hullabaloo. Were I a Cambridge man I would certainly take the same attitude, though Sims Woodhead is a man who has seen much more of the medical world and has a wider general knowledge of London work and might perhaps be more easily defended. Still the bedrock objection is the same.

The difficulty here is to find the man and that is where I have got so disgusted with the attitude of some of the older men, and especially of the Bart's crew. Some of the younger of us talked it over, and the best man we could think of was Rose Bradford, not an Oxford man, - nor a Bart's man - but a distinguished man, scientific and clinic Professor of Medicine at Univ. Coll. and in every way excellent. We approached him to know whether we might bring his name forward and he took some days to think the matter over but decided unfortunately it was impossible - (to great indignation among S. West, Church, Champneys & Co. I fancy, at our presumption). I think he would have come if he had had some beds and if there had been a little consulting practice to increase the income, but we had to paint things not too rosy so as to avoid any deception. We've not done yet and we are asking one or two possibles yet, quite independent of the old people, for it can do no harm and if we get a good name, he ought to have as good a chance with the Prime Minister as any other nominee. Bradford was almost ideal to my mind, for no one in London is a better business man in medical education, - he is a great power at Univ. Coll. and in the London University etc., but of course one felt there was little chance of getting him.

There has been no real effort to get hold of the right kind of man, and very likely he won't be got, but no harm can be done, so we'll hope for the best. I hear from Walker that the Oxford people think of holding a meeting in town and I sincerely hope they will do so. I only wish some such combined meeting had been held in the first instance so that things might have been discussed by both parties.

Excuse this lengthy epistle, but if you have time to read it, - I hope you will understand that (1) that I have some weighty reasons (2) that I have formed them on my own (3) that I am not drawn in by the Anti-teach-what-you-can-in-Oxford school in London. I don't want our men overloaded in the scientific subjects to go out to practice underweighted with clinical experience, and this proposal I look on as a step in that direction, instead of which I want a big jump in the opposite. Am I plain? Perhaps one is making a great cry about nothing. Kind regards to all Oxford friends.

Yours ever,

JOHN S. FAIRBAIRN.