

Fairbairn-Thomson letters. 1904.

From Prof. Arthur Thomson to Dr. John S. Fairbairn.

(Script)

Oxford,
January 13, 1904.

My dear John,

I was indeed glad to hear from you because it not only gave me an opportunity of explaining my position but enables me to realise your own attitude.

Let me say first of all that I am wishful to give everyone credit for having at heart the interest of the old place. Our only difference I sincerely trust is the standpoint from which we view the situation.

best I can perhaps/discuss your views by expressing my own and noting the points wherein they differ.

(1) As to the Board of the Faculty of Medicine. - In my opinion there are undoubted advantages in having representatives of the preliminary subjects on our Board, the reason being that it gives us a direct control over these subjects so far as they are related to medicine. This would not be so were these representatives independent or relegated to the Board of the Faculty of Natural Science.

It is in respect of these subjects that a University education mainly differs from a license to practise. Anyone who is familiar with the trend of medical education knows that these are the subjects around which most of the fight is raging at present, and my experience of the past 18 years has proved that our direct control over these subjects has been of the greatest benefit to the school in enabling us to keep them within proper limits. As regards the subjects of the 1st M.B. I think there is no difference of opinion.

When we come to the subjects of the Final, I may point out to you that there are nine members of the Board who may be said to represent the subjects of the Final. As you say, there are the two Litchfield Lecturers, local G.P.'s you call them, I trust in no sarcastic sense, for let me say that I hold the G.P. has as much right of representation as the teacher or the consultant, but further let me add that it is this representation of the Litchfield Lecturers which enables us to conduct the final examinations within the precincts of the University for without this entente between the University and the Radcliffe it would be impossible for us to do so. In addition we have Sir W. Church - Dr. Payne - Dr. West - and Dr. Schorstein representing the London teachers whilst Parker is surely

From Prof. Arthur Thomson to Dr. John. Baird.

Oxford,
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a sound enough representative of surgery, Ormerod represents public health and Ramsden is sufficiently fresh from the London schools to help us in matters of detail. It may be true that special subjects are not represented at present, but they have been in the past. Champneys at one time was a member and Pridgen Teale may have been said to represent the eye. I don't know who your throat man would be but it would be questionable policy I think to specialise too much. However let me say that the matter rests in your own hands. The bulk of their representatives are elected members and I was severely snubbed for venturing to make suggestions. All that you have to do is to represent your views to the electors (of whom I am not one) and it should be their business to see that there is a proper representation.

It has always been my wish to see the younger men represented and Schorstein one of our most valued members owes his position on the Board to my motion to co-opt him. Our powers of co-option are limited, but that is the only way in which we the official representatives can infuse new blood into the Board. Vernon by the way is not on the Board.

Now what happens in actual practice? The representations of preliminary science seldom turn up except when matters affecting their subjects are under discussion, and it cannot be said that their vote is ever employed to carry a matter relating to the strictly professional subjects. The London members, with the exception of Schorstein, are poor attenders and not infrequently appear to block the path of progress. I sincerely long for the time when we can have more enlightened or let me rather say more progressive members, and for those I seek among the ranks of the younger generation, but as I have pointed out already, the remedy lies in your own hands.

(2) As to the type of man wanted for the R.P.M. Permit me to refer briefly to the history of the Professorship. Acland was R.P.M., President of the Medical Council, Medical School and Senior Examiner & all rolled into one. That was before the time of the new medical statute. Was it surprising that he arrogated to himself powers and privileges with which he was not invested by statute? - But things are altered now. The Board is the responsible body, and whilst granting that it is always an advantage to have a man of eminence and position in the office, his influence on the direction of affairs does not differ from that of any other member of the Board but must depend upon the weight of his arguments and his power to constitute himself a leader (as opposed to the view that this office empowers him so to act).

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Such being the case we (I use this rather in the editorial sense) looked about for such a man within the ranks of Oxford Graduates. Church for whose integrity and sound judgment I have the highest regard, was we understood inaccessible. Payne, another possibility, was to my mind (I am speaking for myself) not likely to add strength to our ranks, except from an academic standpoint. Then arose the question who among the Oxford men would fulfil the conditions and entertain in proposae. There are many men of high scientific attainments, broad culture and wide clinical experience amongst men, but which of them would forego the financial rewards to which their abilities entitle them for a paltry pittance of £400 a year with a position to keep up an a high sounding title. I confess that I was unable to single out the man and apparently experience has proved that the Oxford graduates who are teachers in London have found themselves in the same quandary.

This impasse naturally led to a revision of the situation. Seeing that most of the duties of the R.P.M. of the past are now exercised by the Board, we had to consider what his statutable duties were. Amongst others the University imposes on him the delivery of certain lectures. This he must do. Let me digress for a moment. You and those who think with you lay stress on the fact that the ideal R.P.M. should be a man 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". Now let me point out that the possession of wide clinical experience does not necessarily involve a knowledge of the various aspects of medical education and politics - indeed many who are brilliant teachers in the wards have never concerned themselves with the details and annoyances of the medical curriculum. But grant that your ideal R.P.M. is to be such a person, on what subject is he to lecture? His strong subject you suggest is his clinical experience, and on this aspect of medicine he would presumably lecture. Do we want such instruction? Most assuredly not, and in this I assume we have the support of the seniors, for if such a course were adopted, it would be considered as the thin edge of the wedge leading to the introduction of the teaching of his final subjects in Oxford. Apart from the fact that he would have few or possibly no pupils, it would be considered as an attempt to bolster up a system which has proved a failure at Cambridge.

His influence then as a clinician would be only that of any other member of the Board with equal experience and for this reason I have been led to think that the appointment of anyone with those qualifications alone would not be advisable apart from the fact that he of all others would possibly be the most disappointed of men when he had gained some experience of the Chair.

But let us turn now to the actual situation in Oxford. We here have undertaken to give instruction on certain subjects which we think can with advantage be studied within the University. After much fighting and in face of much opposition we have succeeded in securing our up-to-date Pathological Lab. but unfortunately the resources of the University are at present insufficient to remunerate adequately the teacher we have appointed. It is easy to talk glibly of getting a sufficient endowment for the Chair. But have you tried?

Have the Oxford graduates helped us in this respect? We have, and the most we have got and the most we are likely to get for some time to come is that which now forms the stipend of the Reader. With these facts before us can you wonder that we decided to perfect what we have already undertaken? The University cannot afford to pay for luxuries however acceptable they may be to the outside world. Its function is to teach well that which it has undertaken, and with this intention we ventured to suggest the utilisation of the endowments of the R.P.M. to the teaching of Pathology. This by no means implies any neglect of the subjects of the final examination. If only the members of the Board did their duty, these subjects would be efficiently represented and controlled. I grant there is room for improvement in this respect, but you can see the invidious position in which we are put when we endeavour to give effect to our views with respect to the constitution of the Board.

If only the Oxford graduates would bestir themselves and possibly insist on what you might call direct representation apart from Oxford elections, say in Medicine, Surgery and Midwifery, all the difficulties would be overcome.

I have written at great length because I feel that the subject merits the fullest discussion. I have been frank because I feel that I owe it to my old pupils - and as it is to you and such as you that I address this letter, you have my full permission to communicate its contents to those who have equal claims with you to my confidence.

In no other sense are you to regard it as an open letter though I am prepared perhaps with less candour to stick to my guns until I see more cogent reasons to alter my opinions.

(Unsigned)

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