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A REGIUS PROFESSOR'S LAY SERMONS.

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A REGIUS PROFESSOR'S LAY SERMONS.

THE title of "lay sermons," given by Huxley to some of his addresses, may more appropriately be applied to the collection of homilies of one kind or another to students, nurses, and practitioners which Professor Osler has now republished in permanent form.¹ It would be well for individual men and for society in general if all the sermons preached from the pulpits in Christendom showed the lofty feeling for all that is good and true, the genial wisdom and the energizing quality of these discourses. The appearance of the book is especially opportune, for it will reveal to those to whom the new Regius Professor in the University of Oxford is as yet little more than a name the secret of the vast influence which he has long exercised on the minds of his professional brethren over the whole length and breadth of the American Continent. Professor Osler is far more than a teacher of the things of the understanding; he is a moral force. Wherever he has worked he has gathered disciples about him eager to bear the torch which he has handed to them, and it surely is not vain to hope that his attractive and inspiring power will display itself at Oxford as brilliantly as it did at Montreal, Philadelphia, and Baltimore.

The addresses have, as is inevitable, a certain sameness, as they are for the most part variations on the eternal theme, Be virtuous and you will be happy. Each, however, has distinctive features and all are rich in counsels of the ripest wisdom conveyed in a style that can scarcely fail to captivate a reader of any intelligence who allows himself to be lured within range of its magnetic charm. The subject of the address which gives its title to the book is imperturbability, a quality of body and of mind most necessary in a medical practitioner, for the lack of it makes knowledge and skill of little use. Antoninus Pius, when he was dying, summed up his philosophy of life in the word *Aequanimitas*. It is, says Professor Osler, indissolubly associated with wide experience and an intimate knowledge of the varied aspects of disease. If a practitioner teaches himself not to expect too much from the people among whom his lot is cast, his equanimity will not easily be ruffled by the folly of patients or the wiles of false brethren.

About teachers and students Professor Osler naturally has much to say. He tells us that "thoroughly equipped laboratories, in charge of men thoroughly equipped as teachers and investigators, is the most pressing want to-day in the medical schools" of America; may not the same be said of our own country? He dwells in a strain which a more recent deliverance has made familiar to the world on "the disadvantages to a school of having too many men of mature, not to say riper, years." His

¹*Aequanimitas*, with other Addresses to Medical Students, Nurses, and Practitioners of Medicine. By William Osler, M.D., F.R.S., Professor of Medicine, Johns Hopkins University, Baltimore. London: H. K. Lewis, 1904, pp. 338.

own method of clinical teaching is individual and in the best sense practical. We gather that this cannot be said of the teaching in most American schools, as he says that the radical reform needed there is the introduction of the system of clinical clerks and surgical dressers.

He utters words of warning which may well be taken to heart by those who estimate the value of scientific research by its immediate returns, when he insists that the true test of a nation's life is not its material prosperity, but its intellectual and moral standards. "The value of a nation to the world is neither the bushel nor the barrel, but *mind*"; hence, "there is no more potent antidote to the corroding influence of Mammon than the presence in a community of a body of men devoted to science, living for investigation, and caring nothing for the lust of the eyes or the pride of life." Speaking to students, he urges upon them the virtue of method and system in their work, by which they will escape the dire necessity of cramming; he insists also on the need of thoroughness, whereby they may avoid the sloughs of charlatanism. As ignorance in lay folk breeds belief in quackery, so half knowledge engenders charlatanism in the practitioner.

Professor Osler dwells much on the advantages of seeing the cities and manners of men. We are reminded of Johnson, who was overheard by the Master of his College saying to himself that he would go and see what was being done in universities abroad, "for an Athenian blockhead is the worst of blockheads." This means, we take it, that the more famous the school a man has been trained in, the greater is the danger of his looking upon all others with that complacent superiority which is the true note of provincialism. Professor Osler has the dislike of the large-minded man for the narrowness of Chauvinism. For this a wider outlook on the world than is to be got from the windows of one's own college or hospital is the surest corrective; but if the full benefit of this experience is to be obtained, the mind must be prepared. Half-educated young men will gain as little that is worth having by running about from one foreign university to another as the pilgrims referred to by Thomas à Kempis, who, moved by nothing better than curiosity, went to divers places to visit the relics of the Saints.

One of Professor Osler's precepts to the student is to "take no thought for the morrow." In other words, let him not trouble himself with morbid apprehensions about the future, the dread of examinations, and the doubt of ultimate success. Practitioners, too, he advises to throw away all ambition beyond that of doing the day's work well. "Live neither in the past nor in the future, but let each day's work absorb your entire energies and satisfy your lives and ambitions." This advice should be engraved on every doctor's mind. It is the teaching of Carlyle: "Our duty is not to *see* what lies dimly at a distance but to *do* what lies clearly at hand," and there is no doubt that it contains the secret not only of successful achievement but of happiness.

Professor Osler recommends students "to start with no higher ambition than to join the noble band of general practitioners." It is they, he says, who "form the very sinews of the profession—generous-hearted men, with well-balanced, cool heads, not scientific always, but learned in the wisdom not of the laboratories, but of the sick room." He insists, however, that the general practitioner must keep himself posted in all new things by reading, and, if possible, by attendance at the meetings of medical societies. But he points out that there are grounds in the history of

the profession for believing that isolation fosters originality. As illustrations he points to Jenner, who worked out his discovery in a village; to McDowell, the first ovariectomist; Clarence Long, for whom some claim the discovery of anaesthesia; and Marion Sims, all of whom were country doctors; and to Robert Koch, who was a district officer of health.

Professor Osler gives proof of his courage by venturing to give advice to the trained nurse. Setting out with the question, "Is she an added blessing or an added horror in our beginning civilization?" he replies that she is a blessing, "with, of course, certain limitations." One of these is the want of what Sir Thomas Browne calls "the virtue of taciturnity"; it is only fair to say, however, that in this she is held to be little worse than the doctor who, both among his fellows and among lay folk, is said to be much too fond of "talking shop." In another direction the limitations of the nurse are more serious. "With the fullest kind of training," Dr. Osler says to nurses, "you cannot escape from the perils of half-knowledge, of pseudo-science—that most fatal and common of mental states." The nurse in her daily work involuntarily catches the accents and learns the language of science often without a clear conception of its meaning. Of the result of this he gives an amusing example. "I turned incidentally one day to a very fine example of the nurse learned and asked in a humble tone what the surgeon, whom I had failed to meet, had thought of the case, and she promptly replied that 'he thought there were features suggestive of an intracanalicular myxoma'; and when I looked anxious and queried, 'had she happened to hear if he thought it had an epiblastic or mesoblastic origin?' this daughter of Eve never flinched; 'mesoblastic, I believe,' was her answer. She would have handed sponges—I mean gauze—with the same *sang froid* at a Waterloo."

Professor Osler strongly advises all practitioners of medicine to have a pastime or a "hobby" which will divert their minds from professional worries and anxieties and prevent them from becoming mere drudges dead to everything outside the groove of routine. His own hobby, it is plain to see, is literature. He has bettered the instruction of the ancient counsellor, and has read *multa* as well as *multum*. His multifarious reading is reflected in his style, which is almost as allusive as that of Carlyle. It were to be wished that all members of the profession would, within the measure of their opportunities, follow his example, for, as he points out, in whatever sphere a practitioner's lot is cast, culture always tells. He recommends every one to read for half an hour before going to sleep, and in the morning to have a book open on the dressing table. He gives a list of books of which "close friends may be made"; these are the Bible, Shakespeare, Montaigne, Plutarch's *Lives*, Marcus Aurelius, Epictetus, Browne's *Religio Medici*, *Don Quixote*, Emerson, and Oliver Wendell Holmes. It is interesting to compare this list with one suggested by the famous French surgeon, Malgaigne, which is given by his son-in-law, M. Pilastre, in a recently-published work. This list comprises first of all the Gospels; then come Homer, Plutarch, Virgil, Dante, Corneille, Racine, Boileau, Molière, Shakespeare, Schiller, Lamartine's *Meditations*, and Guizot's *Civilization in Europe*. Malgaigne's list, it is true, was drawn up for a young girl, but doubtless it may be taken to represent his idea of the best literature. It will be noted that Professor Osler's taste is somewhat more austere than that of Malgaigne,

but it is interesting to find them in agreement as to the greatest literature of all, the Scriptures and Shakespeare.

Want of space will not allow us to do more than skim the surface of a book which is a deep mine of golden counsel. It should be read by every one who thinks of taking up medicine as a profession, by every medical student, and by every practitioner. The young will get from it inspiration and encouragement, and their elders will find much sound advice that will help them to meet with an unruffled brow the manifold difficulties, annoyances, and trials of practice.

TUBERCULIN AS A CURATIVE AGENT.

TUBERCULOUS disease is so prevalent that there is practically no department of practice in which the physician or surgeon is not periodically brought face to face with the problem of its amenability to treatment. Unfortunately it has to be admitted, as the outcome of general experience, that though a delay or even arrest of the tuberculous process is frequently achieved, there is still lacking a reliable method of directly attacking the bacillus in the tissues. While it cannot be doubted that the hygienic principles embodied in what is commonly called the open-air method must always form an essential feature in any successful treatment of tuberculosis, it must yet be admitted that the discovery of a specific medication might be expected very largely to increase the percentage of cases in which restoration to health is so complete as to justify the result being designated a cure.

As a direct antidote, the tuberculin introduced by Koch some fourteen years ago came nearer solving the problem of cure than any other before or since. In their eagerness and faith many all over the world prematurely arrived at conclusions concerning it which the test of time showed to be, in greater or less degree, fallacious. The extravagant optimism which welcomed the birth of tuberculin was followed by scepticism, ending in a general feeling of disappointment and perhaps unfair depreciation of its actual intrinsic merit.

Since Koch introduced what is now known as his "old" tuberculin, several other tuberculins have been elaborated, either from the secretions or from the bodies of tubercle bacilli, and extended observations, carried out carefully and accurately, go to prove that tuberculins possess distinct value as a specific means of treatment. Wright has demonstrated that by one of them it is possible to increase the defensive properties—the opsonic power—of the blood-serum against the bacillus. He has also shown how to gauge the degree of improvement, or the reverse, which is taking place in the patient's condition under the influence of tuberculin medication. Many antituberculous serums have likewise been produced, but though those of Maragliano, Marmorek, and others have attracted some attention, the results so far achieved have been inconclusive and for the most part disappointing.

The discredit which became attached to the original tuberculin of Koch led to its being very generally discarded as dangerous, but some observers who trusted in its efficacy and by prolonged observation acquired skill and discrimination in its administration, have preserved their belief in its virtues. Among these, Professor McCall Anderson, of Glasgow University, who has employed it continuously since its discovery¹ is confirmed in his opinion