

(Unsigned)

CUS417/111.51 '12

From Dr. Doyne to W. O.

Script.

50, Cavendish Square,  
W.

Apr. 29. '11.

Dear Osler,

I tried to catch the train down to Oxford but missed it. Thank you for your letter, I shall be glad to have a chat with you when convenient. I don't suppose that any animos. was ~~shown~~ displayed, the pill was no doubt gilded, while the staff, of the Infirmary passed resolutions about my office which obviously implied <sup>?</sup> ~~that~~ <sup>?</sup>, for if anyone should have expressed the opinion that there was need of an assistant, it was the one who was responsible for the work, and it is impossible to disassociate with a resolution from recent occurrences.. In the first place I maintain there is no need for such a resolution; for by the agreement by which the work is carried on, that eye patients of the Infirmary, are transferred to the Eye Hospital, and for these patients the Infirmary is entitled to the reviews, not myself only but of the whole staff of the Eye Hospital. It is only for such patients as are bedridden and who therefore have to be seen in bed in the Infirmary that they

are entitled to any particular review and I maintain that one day a week is fully sufficient for such rare emergencies. My Infirmary appointment was only made as a link between the institutions.

In the second place, such a resolution is in direct opposition to the understanding that was come to when the eye work of the two Institutions was blended. I suppose it would be now near fifteen years ago, after Morgan's death that negotiations were actively carried on, receiving my full support up to a certain point, when the Radcliffe Infirmary proposed that an Asst. Oph. surgeon to Radcliffe should be appointed. This was directly contrary to all my ideas and rather than upset the negotiations I definitely resigned the Eye Hospital and accepted the offer that was immediately made me to stand for the Royal Eye Hospital to which I was elected. Upon this Sir J. Conroy who was chair man of the Infirmary at that time agreed to accept all my suggestions if I would withdraw my resignation, which I agreed to do on the advice and appeal of the present Bishop of Oxford. I tried then to get out of the R. E. H. appointment but very strong protests were made against my doing so and against my <sup>?</sup> I had to carry on both. All this time I was willing during my term of office that an assistant Surgeon should be appointed to the Eye Hospital supernumerary, on the distinct understanding that the appointment only lasted during my tenure of office and ceased with my resignation and death; and under these conditions Ogilvy was appointed and later, on under the same conditions Adams, who with my resignation or death will cease to hold his present appointment and will to be reelected.

Some years after Ogilvie's appointment, Arthur Momson truly I believe writing to please Ogilvie and myself, placed a motion for a monthly meeting at the Radcliffe Infirmary, that Ogilvie should be appointed assistant Oph. Surgeon to the Radcliffe, he had not communicated with me and the first I saw of it was on the Agenda Paper. I told Ogilvie I should have to oppose it but I was willing myself to resign the Radcliffe appointment and leave it open to him; he would not however, agree to do so and the motion consequently dropped.

I must now give you as briefly as I can my reasons for my actions and views and must point out that none can charge me with selfishness for I was always willing to have a second surgeon during my time of office.

I was anxious after having practically made this position in Oxford, that it should always in years to come attract a surgeon of the 1st. rank. The Clinique is not a large one and is not more than is sufficient to give full clinical experience to one man, nor is Oxford large enough from a private practice point of view to support two men. Supposing an Assistant surgeon were appointed he would divide up the clinical material and would be unlikely unless

he has good private means to support himself, by eye work, he would have to potboil to make a living just when he ought to be devoting his energies to eye work, and even if his appointment did not give him the senior appt. when it became vacant; would it be likely that good man from London or elsewhere would be likely to put in for a post in opposition to a local man who was well known and who would be sure to get a great deal of the private practice? These arguments are quite sound I know, and in years to come the post would be filled by second or third rate men and not command the attention of the best men. There is room for one good man and no more; competition is valuable but London is near enough as regards competition.

You know my views as to the way I feel I have been treated by the staff lately, and the resolution backed as I suppose it has been by those of the Staff who I have regarded as personal friends, has wounded my very deeply. I cannot assure myself of ever having been profoundly disloyal to any of my medical confreres in Oxford, by they friends, acquaintances or active rivals, and naturally feel very sore that there apparently has not been one to stand up and protest against the treatment I am receiving.

Of course I shall have to "eat my words" and resign the Radcliffe Infirmary but I am only hesitating whether I had not better cut myself adrift from Oxford and leave my work unfinished. But I feel I must not be hasty about this; it is difficult to be level headed with so much depending on me as there is just now, work, responsibilities and with very worrying anxieties in a matter of trusteeship that is haunting me.

Yours sincerely,

Robert Doynne.