

# A PHYSICIAN'S REMINISCENCES\*

SIR WALTER LANGDON-BROWN

THAT you should have conferred upon me this great honour, and have welcomed me so warmly, fills me with pride and humility. I am not so conceited as to think your welcome is merely to me personally; I take it also as a compliment to British medicine, of which I have had the good fortune to be an official representative, however inadequate.

Lord Macmillan told us yesterday of Mr. de Valera's mixed ancestry. Now, officially, I can trace a double line of descent from that much-married man, Henry VIII. For in 1518 Henry VIII was induced by Linacre to found the Royal College of Physicians, which was to be administered by a President and four Censors. In course of time I became Senior Censor, and our chief task was to guard the door of admission to membership of the ancient College. But I am glad that one of our former duties is no longer imposed upon us,—that of inspecting the goods of the chemists of the City of London, and finding whether or no they are up to sample!

Then, in 1540, Henry VIII founded the Regius Professorships at Oxford and Cambridge, and I had the good fortune to be the twentieth Regius Professor of Physic at Cambridge. Good fortune indeed, but a heavy responsibility, to follow such men as Glisson, George Paget, Clifford Allbutt and Humphry Rolleston. In 1590 Queen Elizabeth granted a Coat of Arms to the Regius Professor of Physic; the only instance, I believe, of a Professor having a Coat of Arms by virtue of his office. My second encounter with the College of Heralds was not amusing. When King George V signified his gracious intention of conferring a knighthood upon me, I had to call at the College of Heralds to sign the Roll of Knights. On my asking the probable date of the investiture at Buckingham Palace—there was some uncertainty as to this, owing to the state of His Majesty's health at the time—the clerk very obligingly said he would ring up the Home Office and try to find out from a friend of his. I then heard one side of the conversation, in the course of which the man at my end said: "Yes, I agree with you, they are a dull lot this time." Pride had a fall!

It would ill befit me in this Dominion to omit a reference to a great Canadian who occupied the Regius Chair at Oxford,

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to the lasting benefit of British medicine—I refer, of course, to Sir William Osler.

I shall not readily forget my first meeting with him, so magnetic was the effect. I knew he was a great physician; but when I met him, I knew I was in the presence also of a great man. He has been described as one of those men of light and leading who, like the Pied Piper of Hamelin, pipe a tune others cannot but follow. Human sympathy and unselfishness are their chief weapons. Many are the stories told of him, grave and gay. Like St. Martin, he once gave his cloak to a beggar, who in turn bequeathed “to my good friend William Osler” his liver hobnailed by drink! To children he was indeed the Pied Piper; and when he piped to them, they needs must follow, dancing. To turn up at a nursery tea was one of his favourite relaxations, usually in character—sometimes tiger, sometimes bear—of graphic realism.

All this was well; but when he carried these methods beyond the nursery into ordinary life, misunderstandings were bound to arise, and they did.

Probably to quite a number of people Osler is known only as the person who said that a man was too old at forty and ought to be peacefully chloroformed at sixty. He was, as a matter of fact, quoting Anthony Trollope, and he did it to tease a colleague, aged seventy-three, who was sitting on the platform with him at the time. They exchanged friendly smiles at the jest, but it was given headline publicity. Osler disliked any reference to this incident, but it pursued him for the rest of his life. Some eight years later an evening paper announced that he was to give the unfortunately named *Silliman Lectures*: it was added that he was the man who had made this pronouncement, and that he was now sixty-three! The paragraph was headed “An appropriate appointment.”

That the Oslers’ house at Oxford was known as “the Open Arms” speaks for itself, and I expect there are many of you who found welcome and refreshment of body and spirit there during the years of the war. Great as was Osler’s work, the man was greater still. I am thankful to have had the privilege of knowing him. His sanity and courage, his sympathy, and not least his gaiety which bubbled up spontaneously from spiritual depths, were among his many gifts to us. There are many to whom just his presence brought comfort and healing.

And now may I indulge in a few retrospective musings of my own? A little girl once defined a lecture as “a man talking

to himself before a lot of people"; and that, by your kind insistence, is what I am about to do. A consulting physician to a hospital has a position of great dignity but of no importance. When I was on the active staff, I always tried to be particularly polite to members of the consulting staff on their occasional visits. Then came the "abhorred shears" and cut me off. Somewhat to my surprise, I felt that nevertheless I was still alive; indeed in some respects more so. I had come to regard the life of the hospital, in which more than half my days had been spent, as the very hub of existence. Although there was still not much time to "stand and stare", there was more opportunity of gaining wider impressions of life as a whole. It is one of the many compensations of growing older that in middle age one can watch with increasing interest the spacing out of one's contemporaries at school and college in the race of life. Now I could lean over the rails and look at the race from outside, all passion spent as far as competition goes. Moreover, it was a pleasing thought that as no one would gain advantage by my death, presumably no one would wish for it.

I am not troubled by that painful feeling: "If only I had my time over again", and that not because of smug self-satisfaction. Of course I should have preferred to have done many things differently, but should I, given a second chance? Barrie showed us otherwise in *Dear Brutus*. But quite apart from this, do I want to repeat the flea-bitten experience of an extern midwifery clerk?—which, by the way, gave me a valuable insight into the lives of the very poor. Do I want again to attend to Saturday night "drunks" in the Casualty Department? The answer is not in doubt. A distinguished professor told me that he often had nightmares of missing his First-Class Honours for twelve years afterwards. That tells its own tale. Do *you* really want to go back? Some do; Sir Clifford Allbutt, one of my distinguished predecessors, wrote to me when nearly ninety years of age: "I know, rather than feel, that I must be nearing the end of a long life. . . . With all this new knowledge coming up on the horizon, what a joy it would be to begin it all over again."

Wordsworth "grew old in an age he condemned", and it has been suggested that we are gently prepared for our exit from this world by the inevitable changes which gradually make us feel less at home in it. I think there is something in this when one finds modern music a choice between discordant cacophony and epileptic negroid croonings, modern sculpture meaningless dis-

tortion, modern pictures hideous in colour and design, and modern poetry an unintelligible cross-word puzzle. I don't feel at home with stark modern furniture, and I don't like its dreary coverings of zig-zags in drab shades of brown. One is still allowed to admire Mozart and Chippendale, however, even if one must read Tennyson only in secret!

When I contrast the magnificent outburst of art in Periclean Athens after the Persian War with the vapourings of modern art since the Great War, I am tempted to speculate on the underlying psychological factors. The Greeks were filled with optimism, the present age is sick with apprehension. This may be largely due to that increased awareness which is the note of the twentieth century. Readers of Jane Austen and her contemporaries have often commented on how little their books are tinged with the wars and rumors of war amid which they were produced. How much is one part of to-day's awareness, that of outside perils, maintained through the hour-by-hour information poured out by the press from all over the world!

To-day the sword is not being beaten into a ploughshare—rather do hangars arise where once corn grew. Each nation fears another: many individuals fear shut-in places, while others fear open spaces. Many try to find escape by speed; but what is the good of crossing the Atlantic at record speed, if you are equally unhappy in New York and in London? No speed will enable us to escape from ourselves.

The effect of all this on the younger generation is sometimes quite serious. C. P. Snow in his novel *The Search* describes this effect on the lives of a group of research workers. He makes one of them say

Your father and mother had not the certainty more or less that civilization was going to crash in their lifetime. We have. . . . For you and me, for almost everyone, life is fuller and richer than it has ever been. With one qualification. There is no hope. . . . Simple freedoms, but very precious. . . . my sort of man has only had for an infinitesimally short time. They'll have gone from all over Europe except France and England and Scandinavia in ten years. From England in twenty. And for a very long time they will not come back.

You may think this picture is too black. I think so myself. The important thing is that it represents a not uncommon belief to-day, and it is one which must tend to paralyse endeavour.

Amid the disquiet and clamour of the day I turn with relief to the advance of medicine. Despite some disagreeable

eddies and unsavoury backwaters, its main stream runs clear and sweeps onward with a gathering impetus. It is, I think, helpful to look at life in general from the special point of view provided by a medical training; helpful also to the community, if thereby some of the symptoms of the "general malaise" so prevalent to-day can be interpreted. I distrust all quasi-medical slogans, whether "Herbs are Nature's remedy", "Like cures like", "Pain is a false claim" or "The osteopathic lesion". Incidentally, they are mutually exclusive. To me they indicate a pathetic craving for certainty in this uncertain world. It is not without significance that such cults have increased just when science has become less dogmatic. I have been comparing Carl Snyder's *New Conceptions in Science*, published in 1903, with J. W. Sullivan's *Limitations of Science*, published in 1933. The cocksure materialism of the earlier work is completely lacking in the later one. It is curious that with the evaporation of this from scientific thought, there should be in the world of affairs such a renewed belief in the fallacy of force. Violence is preferred to reason. In the early days of this century, woman, who is traditionally accredited with superior intuition, perceived this change was coming and realised that the suffrage which had been denied to reason would be granted to violence. Professor Houston has given an interesting medical illustration of the "need for violent action when in distress." He says "The pride of personality is so strong that many patients would prefer to submit to a dozen surgical operations rather than concede that their troubles are due to a deformity of personality." Every medical man knows how difficult it is for patients to accept the idea that their ill-health is due to a conflict between their own self-feeling and their environment. Somehow or other, belief in a slogan which proclaims a panacea pleases and comforts the disgruntled ego.

It has been truly said of a distinguished physician who recently passed away that "Beneath his interest in the foibles and weakness of his fellows there lay, not a feeling of superiority or scorn, but a kindly pitying tolerance and a great humour." Indeed if our profession does not teach us tolerance and humour, we have practised it in vain. The recognition of the close co-relation between the psychological and physical aspects of disease has, I think, encouraged an earlier development of insight into the mental distresses which produce physical symptoms. But indeed we can see evidence of the advance of medicine in every direction, an advance which is so rapid as to leave some

of us seniors rather breathless in the attempt to keep pace with it. I am cheered, however, by the reflection that if it was the youthful Samuel who had the vision, the old man Eli was needed to interpret it. I once heard Bishop Paget say of his father's attitude towards Listerian antisepsis that, like Moses on Mount Pisgah, he saw the Promised Land, but knew that he could not enter therein. That was finely said; it is sometimes well to realize, as life goes on, that we must leave things to younger men to accomplish. We may see a new truth, but be too set in our ways to ensue it. It is well to be able to say, "The life to which I belong uses me and will pass beyond me, and I am content."