

THE HISTORY OF POSTGRADUATE MEDICAL EDUCATION AT THE WEST LONDON HOSPITAL

by

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FOR the writing of a general history of postgraduate medical education, the staff of the West London Hospital very kindly made available the original records of the West London Postgraduate College. These records proved to be complete, in the form of Minute and Account Books and a collection of various papers. The Minutes, although kept in books marked 'Medical Staff Committee' and 'College Committee', tend, fortunately for the convenience of research, to have been kept in order of time rather than by nature of Committee, so that Minutes which are apparently muddled together, in fact read as a continuous record. For this reason, what would have been an irksome mass of references can be avoided: anyone wishing to go over the ground need only have before him the few books covering the same period, and date alone gives all the information needed. So the dates given in brackets below can be ignored for reading purposes, but used for references. The books concerned are deposited in the Library of the Royal College of Physicians.

What emerged from reading the records was that the West London's activities were much the most important attempt at postgraduate education in the nineteenth century, and although the outline of this story has already been given, it is worthwhile to put the further details on record.

The basic fact about postgraduate education in the nineteenth century is this: after the first half of the century, that wonderful era in which medicine finally escaped from Galen and all the vital discoveries leading to modern medicine except one were made, medicine achieved a new stability, as the system of making diagnoses of named diseases on the basis of the discovery of the state of organs by physical examination, combined with progressive improvement in the instrumental methods of diagnosis. This made it almost possible to impart to a medical student, by the time he was qualified, a body of knowledge which would serve him for the rest of his clinical career. Almost—so nearly so that we are still suffering from, or were until very recently, the now mistaken idea that there is an adequate corpus of knowledge which every doctor must know, and that no more education is necessary after that has been acquired. There never was, in fact, a time at which this was strictly true: during the latter half of the nineteenth century it was all too nearly so. But modern medicine was beginning to develop, so that at the same time, gradually, the feeling grew amongst the more conscientious members of the profession that they needed something more, and by 1898, the year in which a number of postgraduate organizations were started, the concept was definitely established. The nearest approach to a definite date for the start of the postgraduate idea in England would be the (in many ways) *annus mirabilis* 1893, in the heart of that period of rapid adaptation to changing circumstances which the ultra-conservative, who could not bear the idea of change, referred to as 'the Decadence', which is exactly what it was not.

The staff of the West London Hospital were conscious of coming change some time before this. The hospital was founded in 1856, although it was not incorporated until 1894, but its medical staff did not meet as a body until 1872. At its very first meeting (4 June 1872) it started its postgraduate educational activities. Only five persons were present; Mr. Teevan, Mr. Cooper, Mr. Bloxham, Mr. Vernon, and Dr. Thorowgood. They were an interesting group.

William Frederick Teevan (1834–1887), the son of a surgeon, was educated at University College. He was demonstrator in anatomy first at University College Hospital, and then at the Middlesex Hospital, served in the Civil Hospital in Odessa during the Crimean War, and took both M.R.C.S. and F.R.C.S. in 1858. He joined the West London's staff on his return from the War. He was a leading figure in the Medical Society of London, where he was Orator and Lettsomian Lecturer, and did admirable work as a urological surgeon, being especially skilful with Bigelow's evacuator, both at the West London and at St. Peter's. Keetley recorded of him that he once said 'The Irish do not like you [the English], and you may do or say what you like to them, they never will'. He married the ward of Mr. Bird, the redoubtable co-founder, Surgeon and Chairman of the West London Hospital. Teevan became blind in 1882, and his mind gave way before his death.

Alfred Cooper (1838–1905), was educated at the Norfolk and Norwich Hospital and at St. Bartholomew's. He qualified in 1861 and took the F.R.C.S. in 1870. He was on the staffs of the West London and St. Mark's from 1867–1884. He was a handsome well-dressed man, 'the chosen doctor of dukes' and medical attendant to the Prince of Wales on his visit to the Tzar at St. Petersburg for the marriage of the Duke of Edinburgh. He was knighted at the Coronation in 1902. He was the father of the Sir Alfred Duff-Cooper of our time.

John Astley Bloxham (1843–1926), another St. Bartholomew's man, qualified in 1864 and took the Fellowship in 1873. After being Assistant to Sir James Paget, he was Surgeon to Charing Cross Hospital from 1873–1903, where he was also Curator of the Museum. He was Surgeon to the Lock Hospital. He had also been Surgeon to the Horse Guards Blue. He was more interested in the treatment of venereal diseases than in general surgery and was one of the originators of modern plastic surgery, with an operation to replace syphilitic noses with a graft made from a finger.

Bowater John Vernon (1837–1901), also from St. Bartholomew's, qualified in 1862 and took the F.R.C.S. in 1864. He was also surgeon to the Royal London Ophthalmic Hospital, was one of the earliest experts with Helmholtz's new ophthalmoscope, and was a most beautiful operator, although, like Professor Grey Turner, his hands were distorted with rheumatoid arthritis. He was also an ideal teacher, with a very strong sense of humour, though he could be caustically satirical to the discomfiture of the clever.

J. C. Thorowgood (1833–1913) qualified from University College in 1855 and was for a time a general practitioner in Kettering. He came back to London and took up consulting practice, and was appointed to the staff of the City of London Hospital for Diseases of the Chest in 1863, and to the West London in 1873 (until 1885). He wrote on asthma, on which he gave the Lettsomian Lectures at the Medical Society of London in 1869. He was made a F.R.C.P. in 1874. Keetley said of him 'Gently

Postgraduate Medical Education at the West London Hospital

comes the world to those who are cast in gentle mould'. He retired early, and lived many years in Bognor.

The first Minute simply says 'The proposed form of Invitation Card to be issued to the General Practitioners of the Neighbourhood on the opening of the Board Room as a Reading Room was submitted and approved'. A copy of the card is pasted into the Minute Book, but there is nothing about how it came into being. We may read between the lines that there had been unofficial discussions beforehand, that a proof had been prepared, and that this was the reason for calling not only the meeting, but of calling the corporate staff into being. The card conveys the information that 'The [hospital] Committee has placed the Board Room at their [the medical staff's] disposal for the use of Medical Practitioners of the Neighbourhood. The Room will, therefore, be open as a Reading Room on Tuesdays and Saturdays, between the hours of 3 and 6 p.m. . . . The various medical journals and periodicals will be provided'. The staff agreed that selected medical men residing in twenty-one districts around Hammersmith should be invited to use it. So that a beginning of postgraduate education was made from the beginning of corporate medical life at the hospital. It was later (22 July 1872) reported that only one doctor (Dr. Meryon) had sent a letter of thanks for the invitation: it looks as though the efforts at education at the West London were bedevilled by lack of recipient enthusiasm from the beginning. Incidentally, Dr. Meryon must have been none other than the famous Dr. Charles L. Meryon, who was physician to Lady Hester Stanhope in Lebanon from 1810–1835, and was at this time living in North End, aged 91.

In January 1873, the Executive Committee of the Hospital was thanked for allowing the use of the Board Room, and at the same meeting it was agreed that it would be a good thing to found a medical society, to meet regularly at the Hospital, and to enquire how many local doctors would support such a move. This proved difficult, and the plan was repeatedly deferred, but it was the original conception of what became the West London Medico-Chirurgical Society.

By 1875 the medical staff meetings were usually attended by about ten members instead of three or four. They met irregularly, and then only because they were experiencing extreme difficulty over the appointment of house surgeons. There was a pause in educational activity. On 8 December 1877 it was resolved 'that the Medical Board be replaced by a Medical Council consisting of the Honorary Medical Staff only.' Mr. Bloxham was the only person who ceased to attend. The object is said to have been to exclude medical members of the Hospital Committee who were not on the medical staff. The body was, in fact, referred to in February 1878 as the 'Medical Council', and was minuted as 'legally constituted' by the Executive Committee of the Hospital, although it was not until June that the House Committee of the Hospital 'acknowledged the existence of the medical committee'. The Council proceeded to lay down a series of Rules, including the principles of quarterly meetings, a quorum of five, the transmission of recommendations in writing, that the senior member of the Council present should act as Chairman, and that the Secretary should be a member of the Medical Staff. On 23 February 1878 it was decided that the Senior Member present at the hour of the meeting should act as Chairman, and strict rules were laid down about the duties of the Secretary.

In July 1883 the medical council approved a suggestion by Dr. Hood that the staff should give a short course of clinical lectures. In October 1883, under the heading 'Preparatory School of Medicine', Mr. Bruce Clarke said that he had written to the Headmaster of St. Paul's School asking for information about the science classes held at that School.

W. Bruce Clarke (1850–1914), who qualified in 1877 from Oxford and St. Bartholomew's, joined the West London Staff in 1881 and St. Peter's and St. Bartholomew's in 1883. He was a good teacher, and would have been a good operator of the old school if he had been five years younger, or a pioneer of antisepsis if he had been five years older. He was a remarkable athlete and often walked from Oxford to London in a day. He was also a good boxer—he broke the arm of a rough who molested him, and then admitted him to hospital and cured him.

Mr. Bruce Clarke had received no answer from the Headmaster of St. Paul's. Mr. Swinford Edwards said that he had enquired into the question of lecturers and found there would be no difficulty in arranging for appropriate courses on the subjects essential to the carrying out of the scheme, and that accommodation could be provided for at least twelve students. Mr. Keetley urged affiliation to South Kensington (that is, Imperial College) and its proposed School of Medical Science. He had been encouraged in this by Mr. Buckmaster.¹ It was agreed to start a Preparatory School of Medicine as soon as possible, to draw up a syllabus, to include teaching in natural science, and to associate with South Kensington. A medical school committee was appointed which met on 15 October with Mr. Vernon, Mr. Ballance, Mr. Boyce Barrow, Mr. Bruce Clarke, Mr. Edwards, Dr. Herringham, Dr. Hood, Mr. Keetley, and Mr. Venn present. A letter was read from Dr. Walker of St. Paul's School stating that he could not decide about combined science classes: they were a matter for the Governors of the School. A long discussion was held as to whether instruction should, or should not, be carried to the level of the Preliminary Scientific Examination of London University, which hinged really on the question of whether the staff of the West London were to control the science school: a high level of instruction would have required teachers from outside, and they would have had to have had a hand in control. Mr. Keetley, who added a commentary to the minutes in his own handwriting, thought and believed that the Staff as a whole would have supported the infusion of new blood from the University into the proposed school. It was Dr. Herringham who was the principal opponent of the idea. The controversy was left unsettled. On 24 October the sub-committee decided on the name 'The West London Preparatory School of Medicine and School of Natural Science', and Mr. Keetley gave the names of members of the University who had offered to teach in it. He also said that the Vicar of Fulham; Mr. F. Lawrence, F.R.C.S., a member of the Hospital Committee, who was also a member of the South Kensington Branch School of Art; Mr. Alderson; Mr. Scern, and Mr. Potter, were willing to join the committee of the

¹ He was the father of Lord Buckmaster. His initials were J. C., and he was 'a remarkable man, who, beginning life as an agricultural labourer, became successively a joiner, a well-known platform speaker in the cause of free trade, and, under the patronage of the Prince Consort, whom he had advised and helped in the matter of the Great Exhibition of 1851, an inspector in the Department of Science and Art at South Kensington, which has since developed into the Imperial College . . . ' (*Dictionary of National Biography*, 40, p. 119.)

Postgraduate Medical Education at the West London Hospital

science school, and the sub-committee then got down to the discussion of unhatched chickens in the form of a division of the profits of the school.

At the meeting of the medical staff on 27 November 1885, resolutions were passed that all active members of the staff should form the Management Committee of the School, and that Mr. Keetley be secretary. A whole series of rules for the secretary and treasurer were drawn up, and the sub-committee ceased to exist without having solved the real problem, that of control. Presumably that omission was fatal, because nothing more was heard of the stillborn school, and all reference to its other parent, the University of London, disappeared. The attempt had not, however, been a complete failure, because it had aroused the enthusiasm of one person, who was to be for some years the champion of education at the West London, Mr. C. R. B. Keetley.

Charles Robert Bell Keetley was an interesting character. He was born in 1848, the son of a shipbuilder in Grimsby. He was educated at Hull Infirmary, where he made a particular study of botany (like Sir James Paget), and at St. Bartholomew's Hospital. He qualified in 1873 and was for a time a general practitioner in Bungay, but came back to London in 1876 and demonstrated anatomy at St. Bartholomew's. His career really started with his appointment to the West London in 1878 and was founded on his devotion to the hospital. He was one of the first followers of Lister, and made the West London a place of resort for intending antiseptic surgeons. Stephen Paget thought that this made the reputation of the West London Hospital. Like Lister, he preferred to do everything himself and disliked having any of his work done for him. He started the Ladies' Association, founded the West London Medico-Chirurgical Society, and was its president in 1887, and he started, and brought to success the first lasting organized postgraduate education at the West London (and in London). He had a splendid physique and was a good football player, oarsman and boxer. He was the originator of the Army Civilian Medical Reserve, R.A.M.C. He was a remarkable draughtsman—in fact his caricatures and his habit of impromptu rhyming won him enemies. It was said that if he had not been deaf, he would have been a physician, but he seems to have been happier as a surgeon. He was pleasant looking, entertaining, very untidy and unpunctual, with an ungovernable temper, but he liked people and they liked him. He was naturally a popular member of the Savage Club at its zenith. Paget wrote of him that he was a man of honourable, indomitable mind, serious, warm-hearted, an excellent surgeon and an excellent friend.

F. Swinford Edwards (1853–1939), another faithful surgeon to the West London, qualified in 1875 from St. Bartholomew's Hospital, was appointed to the staff of the West London in 1880, of St. Peter's in 1881 and of St. Mark's in 1884. He was the first person to treat piles by injection. He was a keen Freemason and rose to high honours in the Fraternity. Like most surgeons of his time he had a beard like King Edward VII, and he wrote a splendid handwriting. He died in 1939.

Wilmot Herringham (1855–1936), a good rather than a great man, was a fine physician of the old school. He qualified in 1881 from St. Bartholomew's, the staff of which he joined in 1895. He had meanwhile joined the West London in 1883, and took charge of the Medical Electricity Department. He was a great administrator; worked later for the University of London, was Vice-Chancellor from 1912–1915,

and was knighted in 1914. He was the Commanding Officer of the University O.T.C., and rose to the rank of Major General in the 1914/18 War. He was one of the principal founders of the Association of Physicians in 1907. He declined to succeed Osler at Oxford. His interests were the classics and the theatre (he was a Governor of the Old Vic). His sovereign qualities were idealism, integrity and straightforwardness: he had a complete disregard for publicity and inessentials, and it was his virtue which sometimes stood in the way of success. He could not bear the idea of one qualified doctor setting up to teach another: all doctors were equal and omniscient, and the post-graduate education of general practitioners was to him synonymous with advertising. He was a 'thorn in the side' of Keetley and Bidwell, and later of Horder at St. Bartholomew's for other reasons.

Seymour Taylor (1851–1931), was another physician. He qualified in 1872 and was elected to the West London in 1886. His *Index of Medicine*, 1894, ran into three editions. He was an expert on life insurance medicine, a strong rugged personality, with an interest in fishing, golf and country life, and he also was at times a difficult colleague.

Donald William Charles Hood (1847–1924), was the son of Sir Charles Hood, F.R.C.P., the first Medical Superintendent of Colney Hatch. He qualified from Guy's in 1869, and became a general practitioner in Bletchingly, but after ten years he returned to London, was put on the staff of the West London in 1879 and became an attendant on Royalty. His main interests were the then important diseases, rheumatic and typhoid fevers.

Sir Charles Alfred Ballance (1856–1936), was another of the great men who started at the West London. He qualified from St. Thomas's in 1879 and had just joined the staff of the West London at the time of this meeting of the Medical Committee. He subsequently concentrated on aural and neuro-surgery, in which he exercised great influence. He was said to have been the first surgeon since Hunter to apply experimental method to surgery. He was a slow but beautiful operator both experimentally and in practice, and a very highly educated man. He was unfortunately extremely pompous and omniscient and was known in St. Thomas's as 'Pooh Bah'.

Albert Boyce Barrow (1847–1939), was a King's College Hospital man, who qualified in 1873, and was for a short time at the West London, because the place he would have taken at King's was filled by Watson Cheyne, who was brought by Lister to London. He became surgeon at King's, however, in 1886. His interests in life were his patients and his race-horses; he was scandalously erratic in his attendance at hospital, never attended committees or society meetings, but was immensely popular and long-remembered. He was killed at the age of 91 while asleep in a friend's car which was involved in an accident.

Albert John Venn (c 1856–1919), qualified from St. Bartholomew's and Aberdeen in 1875, and was physician for diseases of women at the West London, obstetrician to the Metropolitan Hospital and physician to the Victoria Hospital for Children. He wrote on Spas and was a Member (1875), though not a Fellow, of the Royal College of Physicians.

When the medical staff met again on 27 April 1888, nearly three years later, Keetley, Edwards, Bruce Clarke, Herringham and Seymour Taylor considered the 'clinical

Postgraduate Medical Education at the West London Hospital

afternoons', and resolved that they should be held weekly, advertised by postcards to interested gentlemen, financed by a five-shilling subscription from each member of the staff, with rules which were then drawn up for the conduct of the meetings. These included a reference to meeting 'in the school buildings' though there had been no previous reference to any school buildings, what they were, or where they were or by whom they had been built. Dr. Maurice Shaw suggested that the school buildings were rooms in the last house but one at the east end of the row of houses facing on to Hammersmith Road, next to the corner of Wolverton Gardens, a row of houses later swept away to make room for the new hospital building on that site. Ten persons paid not five, but six shillings, and the project was started by a circular to the doctors in the sixteen local districts. Five doctors asked to be sent notices. At the next meeting (2 July 1889), Herringham seized the opportunity of Keetley's absence to have it resolved that the clinical afternoons be discontinued until further notice. Audiences were certainly small, and it had not yet been appreciated that the first rule in starting postgraduate education is to hold the classes, however small the attendance. But at any rate, the clinical afternoons were resumed and they apparently did a little better than the preparatory school, the clinical lectures, or the reading room. The staff then met only once (in 1891) until 1893, when, again infused with an urge to do something about education, a large meeting was held, including, as usual, Mr. Keetley. He was certainly the protagonist of educational activity. The meeting appointed Mr. Bidwell secretary in place of Dr. Herringham who was absent.

Leonard Arthur Bidwell (1862–1912), qualified from St. Thomas's in 1887, and after postgraduate training in Paris, was appointed to the West London Staff in 1891. He, without doubt, made the West London Postgraduate College, and his work for it was recognized by his appointment, within three years, as Dean of the College. He held this post until his death. Plarr records that in the first three years there were fifty students, and in the last three years six hundred and seventy-one; and that during Mr. Bidwell's term of office there were over two thousand five hundred. He was an abdominal surgeon, and one of the pioneers in the development of that field, and although Plarr does not mention it, was a dermatologist: in fact, he was for some time dermatologist to the West London. He was a surgical technician and a teacher of first-rank, always apparently happy and never out of temper.

Mr. Keetley took the chair at this meeting and the others present were Drs. Drewitt, Ball, S. Taylor, Garrod and Turner; and Messrs. Swinford Edwards, Lenthal Cheatle, Macadam Eccles, and Dunn.

Dr. Frederick George Dawtrey Drewitt (1847–1942), qualified from Christchurch and St. George's in 1876 and was house physician at the Belgrave Hospital for Children and on the staff of the Victoria Hospital for Children, and at the West London from 1882–1902. He retired early to take up his favourite studies of flowers and birds, and appropriately to his botanical interests represented for years the Royal College of Physicians at the Chelsea Physic Garden, and appropriately to his ornithological interests married the daughter of the great Lord Lilford who made the aviary near Oundle and was responsible for the introduction of the little owl. Dr. Drewitt was also a good etcher, and exhibited at the Academy.

Dr. James Barry Ball (1849–1926), an Irishman, qualified from University College

in 1870. He was a general practitioner in Brixton, and was not appointed to the staff of the West London until 1885, so what he was doing on the Medical Committee in 1883 is a mystery. He was physician in charge of diseases of the nose and throat, and later of the ear also. He did much to raise the status of his speciality in that formative period, and was made a Fellow of the Royal College of Physicians in 1907.

Sir Archibald Garrod (1857–1936), was also present for some obscure reason: he qualified only in 1884 at St. Bartholomew's, and was then in Vienna for a short time and house physician at St. Bartholomew's where he subsequently became physician. The West London had a genius for spotting winners at a very early age, and they never picked better than the subsequent Regius Professor at Oxford who made the astonishing discovery that there were physiological as well as anatomical congenital anomalies, one of the turning-points of medical science.

Dr. William Aldren Turner (1864–1945), was the son of the great Sir William Turner of Edinburgh. He qualified from Edinburgh in 1887, and after postgraduate studies in Berlin and at St. Bartholomew's, he was appointed in 1892 assistant to Sir David Ferrier at King's College, and in 1899 physician to King's College Hospital, where he was at first a general physician, but later confined himself to neurology. He was also on the staff of the National Hospital, Queen Square. He was not, scientifically, a genius, and was rather despised by his juniors at Queen Square, where the rest of the staff at that time were outstanding. This may have been partly the result of Turner's honesty; he said one day to his house physician at Queen Square 'My book on epilepsy is coming out, would you send me a message next time a patient has a fit, I have never actually seen one'. He was a very conscientious, careful doctor, and was notably kind to his patients. He was a born chairman of committees, and a lucid and popular teacher of undergraduates, to whom he could successfully demonstrate a spastic paraplegic as a case of tabes without turning a hair.

Sir George Lenthal Cheatele (1865–1951), was a descendant of the great Speaker Lenthal and came, like him, from Burford. He qualified in 1887, and was house surgeon to Lister, for whom he had a lasting admiration, and from whom he derived a slight sigh before answering a question. He developed into a great surgeon and a lifelong research worker, doing his own pathological investigation of the tumours he removed, with the aid of a giant microtome which he invented. He also developed a strong personality, with his meticulous clothes, his tailor-made hospital white coats, and his whimsical originality. No surgeon inspired more personal devotion in his assistants.

William Macadam Eccles (1867–1946), was a descendant of Macadam the road-builder, and father of the David Eccles of our time, who became Lord Eccles and incidentally married Lord Dawson's daughter. William Eccles qualified in 1890 from St. Bartholomew's. He was house surgeon at the West London, and on the staff from 1892–1903. He went subsequently to St. Bartholomew's (1907) but kept up a lifelong interest in the West London and its Medico-Chirurgical Society. He was an enthusiastic teetotaller and very puritanical, but compensated for this by his sociability and was personally very popular.

Hugh Percy Dunn (1854–1931), qualified from St. Bartholomew's in 1875, was house surgeon at the Belgrave Hospital for Children, and pathologist to the West

Postgraduate Medical Education at the West London Hospital

London in 1885, combining this unexpectedly with the post of ophthalmic surgeon, which he held until 1914. He was an able journalist, and helped Bidwell loyally with the Medical College.

This meeting in 1893 took the question of Postgraduate Education into serious and detailed consideration. The following scheme for a course of postgraduate lectures was discussed paragraph by paragraph and agreed *nem. con.*

- (1) That a course of twelve clinical lectures and demonstrations be given by the staff weekly during the months of February, March and April, 1894.
- (2) That the lectures be given in the operating theatre, if possible on Wednesdays at 5.00 p.m.
- (3) That each lecture, part of which should take the form of a demonstration, be given by a single member of the staff.
- (4) That if less than twelve men take part in the course, the senior member shall have the option of giving a second lecture.
- (5) That if more than twelve of the staff wish to join in the lectures, the first course shall be given by the twelve senior men, the remainder of the staff taking part in the second course of lectures.
- (6) That the member of the staff must consider the lecture as a very serious engagement, which is not lightly to be set aside.
- (7) That the subject of each lecture and the date on which it is to be delivered be arranged before the commencement of the course.
- (8) That the lectures be advertised in the following ways:
 - (a) by advertisement in the *Lancet*, *British Medical Journal* and *Medical Press* (carried by six to two).
 - (b) by postcards sent to all local members of the West London Medico-Chirurgical Society and to practitioners near the hospital.
That both the postcard and the advertisement should contain the name of the lecturer for each day with his subject.
- (9) That all the staff assist each lecturer as far as possible and in every way with material, etc.
- (10) That it is desirable that the lecture be prepared in a form fit for publication.
- (11) That a fee of one guinea be charged for the course.
- (12) That each lecturer may invite friends to his own lecture.
- (13) That the lecture be free to present and past students of the hospital.
- (14) That as many of the staff as possible should make a point of being present at the lectures of their colleagues.
- (15) That the members of the staff taking part in the first course form themselves into a sub-committee to settle details.
- (16) That the expenses of advertising, etc. of each course be borne by the lecturers only and and that each lecturer guarantee 10s. 6d.

It is worthwhile giving these rules in detail, partly because this was the first fruitful effort at postgraduate education on the part of the West London Hospital, and partly because it is a good example of the very curious habit of the staff of the West London, throughout the ages, to form themselves, like preparatory schoolboys, into societies

with very elaborate sets of rules before there was any justification for supposing that any of the rules would be wanted at all.

On 25 April 1894, it was reported that the first postgraduate course had been held with some 200 attendances, and an average of 16.6 persons attending each lecture. £9 9s. 0d. had been received and £13 5s. 0d. spent, mainly on sherry, necessitating a call of 6s. 6d. from each lecturer. It was decided to hold another half course at the end of May, 1894. No note was made about this course, or of the date for its successor, but on 13 December 1894 Mr. Bidwell presented the report and accounts of the third postgraduate course. Average attendance at the lectures had been 8.8 persons, and 9 practitioners had joined the course. Receipts, £9 9s. 10d., the expenses were £8 1s. 0d. for sherry, a balance of £1 8s. 10d. Agreed that another course should start on Wednesday, 21 January 1895, and that demonstrations were more acceptable than lectures. The authorities had evidently learned already the second rule about postgraduate education: always to have a patient present to convert a dead lecture into a live demonstration. The lectures and demonstrations were held in Annie Zunz Ward, until it was opened for patients in 1902, when the College put up a hut with a corrugated iron roof, on the site of the present Out-Patient Department, where it remained until the building of the latter in 1920.

The staff at once resumed its interest in the profits of their educational activities, and although they were minute, they were at least no longer imaginary, and at the meeting on 19 February 1895, a letter was received from Mr. Gilbert, the Secretary Superintendent, to Mr. Bidwell, informing him that the House Committee had approved the arrangements of the medical staff for dealing with the profits from the postgraduate fees, reserving power to make alterations when they considered the proper time had arrived. This was a demonstration of the ultimate power of the hospital over the College Committee.

The reputation of the demonstrations at the West London Hospital was certainly spreading, because on 2 January 1895 the staff received a letter from the British Medical Association about an exhibition, in relation to the British Medical Association Meeting in London, of cases at the West London on three consecutive days, and asking for a special demonstration in the neighbourhood of Exeter Hall. It was suggested that the demonstration might be given in the Gaiety Theatre, but King's College was ultimately chosen (16 July). Dr. Drewitt, Dr. Aldren Turner and Mr. Lloyd Williams showed one case each, Mr. Keetley showed twenty-two, Mr. Bidwell two, Mr. Macadam Eccles three, and Dr. Phineas Abraham eleven. After this (16 August) Mr. Bidwell arranged a new postgraduate course to start on 9 October. The courses produced a balance of £44 19s. 1d. on the year's working, and on 19 February 1897, as a result of the complaints of postgraduates, it was resolved to put up a special notice board, to provide a book in which postgraduates could enter their names, to put up the names of staff near the door as they entered the hospital, to ask the residents to take the postgraduates round the wards in the morning, and to charge only one guinea to those attending only one department. They also decided to consider obtaining 'the school building' for the use of the staff and of the West London Medico-Chirurgical Society.

By 1898 postgraduate courses had accumulated over £100, and £25 yearly from it

Postgraduate Medical Education at the West London Hospital

was devoted to the use of the Pathological Department, which was not satisfactory. The Pathologist complained that the work was intolerable: no less than 500 examinations had been requested in one year! In April a sub-committee reported on the starting of a proper pathological laboratory, the expense of which was calculated as £52 salary for a competent laboratory man, and £20 per annum for working expenses, if the hospital continued to provide chemicals. It seems incredible now that a hospital laboratory could be run for £72 a year! In the same year the Medical Committee, at its January meeting, contemplated strong action against the government of the Hospital by deciding that 'the Chairman of the Hospital was a great obstacle to the progress of the Institution', and drew up a most ingeniously-worded letter asking that 'that officer should be changed from time to time, as it involved too much of the time, energy and means of any holder for a lengthy period'. This was signed by those present and by three others, but not by Mr. Paget, Dr. Drewitt or Dr. S. Taylor, although Mr. Keetley annotated the minute book in his own handwriting that Dr. Drewitt had not refused to sign when the matter was explained to him. He had, nevertheless, not signed the paper, and at the next meeting (28 February) it was decided, for this reason, to take no further action; the round robin was gummed into the minute book.

On 19 April 1898, Mr. Paget moved that the recent conference on hospital reform had failed to accomplish any good end: this was actually seconded by one of the signatories, G. Lenthal Cheatle (very characteristic of him) but after a speech by Mr. Keetley the motion was withdrawn. Stephen Paget, although in many ways a very great man, was so scrupulous that, like Herringham, he appeared to be a 'wet blanket' at the West London on every attempt at education on the part of other members of the staff. The attack on the Chairman of the Hospital presumably had some educational implications because the £3 1s. 8d., which had been expended on sending out notices of the conference, was paid from the postgraduate fund.

Some minor improvements in the postgraduate course were agreed on 18 July 1898, the course which ensued was attended by thirty-three doctors, and after paying £24 expenses, £40 for the pathological laboratory and £13 8s. 6d. rent for the 'top ward' (this was taken on lease by the West London Medico-Chirurgical Society on 10 December 1900), a net profit of £30 5s. 0d. was left for the year. The same meeting agreed that the annual past and present members' dinner should be related to the Cavendish Lecture and that Professor Osler should be invited as the guest. This, and the complimentary dinner to Professor Erb of Heidelberg in 1902 are indicative of the status achieved by the West London School. Professor Osler was one of the greatest figures in contemporary medicine: he was invited to give clinical lectures in 1906.

A special meeting on 6 February, 1899 passed unanimously a motion put forward by Mr. Macadam Eccles and seconded by Mr. Keetley that no further ladies be accepted as postgraduate students unless a separate class can be formed. Mr. Bidwell then reported that at the request of some of his colleagues he had attended the first meeting of the governors of the Polyclinic on 30 January, and had suggested that two representatives of the West London Postgraduate College ought to be appointed to these governors. This had been carried, but no official communication had fol-

lowed; the Polyclinic then appointed Dr. Seymour Taylor as the only representative of the West London School. The West London staff unanimously resolved to ask the Polyclinic to stand by its own resolution and to add Mr. Bidwell, the Dean, to their governors. On 17 March, a reply was received from the Polyclinic saying that they had decided to appoint one representative only, Dr. Seymour Taylor. Dr. Seymour Taylor appears to have been remarkably complacent about supplanting Mr. Bidwell, who had the interests of education at the West London very much more at heart than Dr. Taylor ever showed any sign of having.

At an informal meeting of the staff after a staff dinner on 25 October, with no note of names, it was resolved that a College Committee should be founded consisting of Mr. Keetley, Dr. Ball, Dr. Seymour Taylor and Mr. Eccles. But however informal or even illegal it may have been, its minutes were confirmed at the next Staff Meeting on 29 January 1900, when the accounts for the last four postgraduate courses were presented. The Dean, Mr. Bidwell, reported that after investing £100 in Consols a balance of £46 remained at the end of 1899 and it was agreed that in the event of the profits exceeding £100, a distribution in twentieths should be made, one twentieth to go to the Dean. As it was noted that shares were allocated to those taking part in the first and second winter courses of lectures and in the summer course, we know how often the regular courses were held. The year 1900 showed a profit of £245 12s. 11d but no notice was taken of the detailed scheme of division by twentieths which had been approved at the beginning of the year.

On 16 July 1901, it was resolved to appoint definite lecturers to the postgraduate courses, whose names should be printed in the prospectus. The lectures dealt with the subjects of clinical medicine and surgery; therapeutics; physical diagnosis and morbid anatomy; surgical diagnosis and surgical anatomy; minor surgery; diseases of the throat and ears; diseases of the eyes; diseases of the skin, bacteriology; diseases of women; and anaesthetics. It was also agreed that the Dean might spend up to £15 a year on the services of a shorthand writer and typewriter (a person, not a machine). This was increased to £20 in 1901, and £15 was voted to the Dean in recognition of his services. The fees of students, which had been raised on 16 July 1901, were reconsidered for a further rise on 20 February 1902, but the increase was considerably reduced at the meeting on 7 April 1902 as being excessive. The fees decided were: 1 week, £1 1s. 0d.; one month, £2 2s. 0d.; six months, £6 6s. 0d.; a year, £9 9s. 0d.; and life £21 0s. 0d. Four lectures on public health were added to the course. Post-graduates were being trained by the holding of posts as clinical assistants: the question of their signing prescriptions led to this being specifically mentioned in the College Minutes (20 February 1902).

In April 1902, the College Committee were in trouble with a Miss Cadell, from whom they wished to buy the life ticket which she held. She, however, refused to give it up. In October 1902, she wrote complaining that she was not being sent prospectuses, and the Committee felt bound to agree that she should receive them. However anti-feminist the College Committee was, it was at any rate just.

The Committee raised the possibility of recognition by the University of London and on 21 April recorded some interesting details of the constitution of other schools in London, and decided to draw up Rules and Articles of Association, but not to

Postgraduate Medical Education at the West London Hospital

incorporate the College at present, nor to ask the hospital to include the College in its charter. It was agreed to try to get the hospital recognized by the War Office in connection with the Army Medical Staff College.

By 16 October 1902 the balance had risen to £252, even after making up the reserve to £100, and a course of lectures on mental diseases at Claybury was added to the curriculum. Dr. Saunders, the Pathologist, resigned, and the College Committee agreed that the post should be a paid one and that £200 per annum would be needed, £50 of which should be contributed by the hospital and £150 by the College. They also asked the hospital for 'the old school buildings', in which to accommodate the pathologist.

By December 1902, there was a balance in hand of £377 which it was decided to distribute among the staff, putting only £35, rather than the whole amount, to reserve. Mr. Keetley was retired from the Committee. The postgraduates were again complaining of the unpunctuality of the staff, and every member of the staff was instructed, in the event of impending delay, to send a telegram or telephone message for communication to the postgraduates.

On 3 February 1903, a class in bacteriology for naval men was arranged. There was further trouble about a lecturer who had failed to turn up. Special arrangements were made about yearly fees for local general practitioners, to encourage them to become members of the College. The hospital, on 20 February 1903, agreed to build a pathological department, and the College offered to give them for ten years £100 per annum in lieu of rent, £150 per annum towards the salary of the pathologist, and £150 towards the purchase of apparatus. The hospital agreed to accept this arrangement for five years.

By 14 November 1903, the College showed a profit of £700. This marked the zenith of the fortunes of the West London Postgraduate teaching. Detailed rules were drawn up for the conduct of special courses, and it was reported that the Royal College of Surgeons had recognized the West London Hospital as one providing the advised additional year of practice for the candidates for the diploma of Fellow.

In 1904 the membership of the Postgraduate College was 229, 173 being fresh members, and the balance stood at £400. The question of the ownership of the College arose. As so often happens, prosperity is first noticed and action first taken about it, just at the moment when it is starting to decline. Discussions were started about the ownership of the College with Mr. Watson, the Hospital solicitor. The Hospital itself had been founded in 1857, but it was only in 1892 that it was incorporated, by Charter. The postgraduate courses were officially held under the sanction of the Hospital, and the Hospital appointed the Dean. All this interest in the ownership of the College was due to the success of the institution; it had started with plenty of rules and no official status, now that it was succeeding, and becoming a large source of income, the question of who owned it had become significant. The Dean presented the first draft of a new constitution for the College.

On 6 April 1903, a letter was received from the University of London turning down the application for recognition as a School of the University, but saying that when the Pathological Department was completed, the University would consider accepting certificates of attendance for the M.D. and M.S. examinations. Dr. Dudgeon of

St. Thomas's was appointed Demonstrator in Bacteriology, two attendances a week for three months at a fee of eighteen guineas for the twenty-four demonstrations. Practical retinoscopy and ophthalmoscopy were added to the course on eye diseases. On 12 June 1903, there was trouble because Dr. Seymour Taylor decided not to give his lectures, though he was lecturing at the Polyclinic. After some trouble, he resigned his lectureship in favour of Dr. Beddard, afterwards a famous physician at Guy's Hospital. To unify the College and Hospital it had been recommended by the Hospital solicitor that Lord Glensesk be asked to become President of the College.

The postgraduates complained that the residents did not encourage them to go round the wards, but snubbed them if they attempted to do so. And on 5 June 1905, the students complained of some irregularities in Mr. Lloyd's class in anaesthetics. There were a great many complaints about lecturers. At the next meeting, 17 July 1905, it was agreed that Mr. Lloyd should be appointed sole lecturer in anaesthetics, but that Dr. Shuter should conduct all the classes; and to counter the complaints of postgraduates about the interference with physical examination of patients, arrangements were made to mark patients who were unfit for examination by a blue cross.

The London County Council notified in 1904 that they intended not to renew the College licence because of the danger of fire in the covered way leading from one building to another. On 30 March 1904, the College Committee actually minuted the decision to ask for an estimate for taking down the covered way before the inspectors' visit and re-erecting it afterwards (the estimate was, as a matter of fact, £14 10s. 0d.). But it was decided, on the advice of Mr. Watson the solicitor, to take no such action. Postgraduate fees were slightly raised on 8 November 1904. On 15 February 1905, the draft scheme for an independent school was amended and sent to the Hospital solicitor.

It was found that no bodies could be provided for operative surgery teaching; in those days schools had to make their own arrangements with the Boards of Guardians for the provision of anatomical bodies, but the Anatomy Committee itself gave the School a body in September 1905. Arrangements were made with three Boards of Guardians for the supply of unclaimed bodies. This compared poorly with the fifteen bodies a year which had been used previously. The pathological laboratory was reported to be unsuitable for advanced pathological teaching on 4 October 1905, and the Postgraduate Committee suggested that the staff as a whole should be asked to make a larger contribution to the Hospital, to build a new department. At the end of 1905 the surplus available for distribution was £436. The number of postgraduates remained the same in spite of the increase in fees, and a skeleton, a microscope, and four ophthalmoscopes had been bought. Next month, 19 February 1906, Dr. G. C. Low agreed to start lectures on tropical medicine. By 17 December receipts for the year amounted to £1,899, leaving £350 for distribution. The honorarium of the Dean and Treasurer rose to £50 and £25 respectively. The building of a temporary lecture room and class room was mooted. A new application to the University of London for recognition had been made on 19 July 1905; in May 1906 a request for an answer was sent.

One of the School's most continuous troubles was Mr. Rank, the Secretary. He was everlastingly in financial difficulties. These came to a head on 24 September 1906, when it appeared that he was again in debt. The Committee agreed to pay off his

Postgraduate Medical Education at the West London Hospital

debts, £11 15s. 0d., but on 26 November 1906, Mr. Rank asked for an increase in salary, and the Committee raised it to £130 per annum. The balance in hand at the end of the year 1906 was £350 (December 1906), of which £350 was divided. The College also appointed a porter to help with the post mortems, etc., on condition that the Hospital agreed to forego the £20 contribution to the salary of the Pathological Attendant. Complaints were received from the Admiralty about the teaching in the Eye and X-ray Departments. It was agreed to appoint an assistant eye surgeon, and the enlargement of the College building was again recommended. This, however, proved impossible (20 January 1907).

On 20 February 1907, the College opened its own banking account. A scheme for the constitution of the College was received from Mr. Watson, but the staff were at first unwilling to proceed with it, and suggested a reversion to one that they had themselves put forward in 1905, if that were legal. Mr. Watson had noted in his letter certain things of considerable interest, namely that at present the College was managed by a Dean appointed by the Hospital Board; the medical staff appointed the College Committee and the Treasurer; the reserve fund of £380 (this was as a matter of fact an error, it was £800) was invested in the names of the Treasurer and the Dean; about £700 had been spent on building and equipment of the College buildings; and that a resolution of the Hospital Board would be necessary to constitute a College Committee and appoint its first members. After a good deal of negotiation and discussion, the scheme for letting the Hospital start the independent College was agreed to, and the first Ordinary General Meeting of the Postgraduate College Society was held at 43, Green Street on 10 January 1907.

So ended the original activities of teaching at the West London Hospital, and the new Postgraduate Medical College Society came into being. It was still only partly incorporated from the legal point of view, but in order to give itself confidence it drew up a very remarkable document, which is still in existence. This takes the general form of a Royal Charter; drawn out on a large sheet of thin and not very good vellum, and setting forth the complete constitution and rules of the society. The main variation from the original rules was the provision for a single deposit of £50 by each Member of the Society, on joining, repayable on retirement, in virtue of which he was entitled to his share of the profits. It was signed by the original members, and was supposed to be signed by every member of the Society, who subsequently joined it, that is to say by all members of the Staff of the West London Hospital on their appointment. As a matter of fact the majority of them did sign it, and it has become for that reason an additionally interesting historical document.

The Postgraduate Medical College Society, between its foundation and the outbreak of the Kaiser's War, had a not very adventurous but fairly flourishing history. There was a slight fall-off in the numbers of students in the first year, but this improved in 1908. From then on we have valuable information in Bidwell's evidence to the Haldane Commission (Minutes of Evidence 25 January 1912, page 226): there were 239 students in 1909, 220 in 1910, and 202 in 1911. About half attended for a whole year and the other half for under a month. Bidwell stressed that a postgraduate school should not be carried on at an undergraduate hospital, because qualified doctors disliked working with students. Most of those attending the West London were not working for

examinations, but were 'brushing up' their knowledge: 'a doctor who had been ten or fifteen years in practice knows nothing about modern methods in medicine and surgery' he said. The College cost about £600 per annum with £20 also to each lecturer.

It appears from the Minutes that the profits varied from time to time and a division of funds was frequently made among the lecturers, sometimes when the organization was less prosperous, with a certain percentage reduction all round in the amount paid, and at other times the amount was paid in full. There were throughout this period continual records of complaints of one sort or another, by the postgraduate students, usually the result of the teachers having commitments elsewhere. There was also the constant demand for more accommodation. Both the grand originals died during this period: Mr. Keetley in 1909, and Mr. Bidwell in 1912.

Schemes were put forward for the course for the Diploma in Public Health, but the Conjoint Board refused to accept the College as a suitable place for study. The Universities of Oxford and Aberdeen, however, were prepared to accept it. There was trouble with the teaching in the X-ray Department, which was due to complete chaos in the holiday arrangements, these were shortly afterwards rectified but were typical of the kind of difficulty which was constantly experienced in a school where teaching was only a secondary consideration. In 1911 further application was made to the University of London for recognition, this time as a medical school, and the University actually inspected the School, though they issued no report. They subsequently refused to accept it pending the result of the Royal Commission, that is to say the Haldane Commission, which was sitting from 1910 to 1913.

In 1911 the College tried to get a grant from the Board of Education, but found that this would be possible only if the governing body of the College had representation other than medical on it, and if the College was accepted by the University of London. Teaching in bacterial therapy was started in 1912, an episode strongly reminiscent of Bernard Shaw's *Doctor's Dilemma*, in that there was considerable difficulty about organizing a vaccine department in which the pathologists should make the vaccines but under no circumstances administer them.

After the death of Mr. Bidwell, Mr. Donald Armour was made Dean, and Mr. Bishop Harman Vice-Dean. In 1912 an attempt was again made to persuade the University of London to recognize the College as a postgraduate school, and steps were taken towards starting a course in pathology for the M.R.C.P. examination. In 1913 the University of London reported that its Postgraduate Committee was going to hold no further meetings until the report of the Haldane Commission. There were further troubles in 1913 on 'unpopularities and difficulties' in the Anaesthetics Department. The setting-up of courses for the F.R.C.S. and M.R.C.P. was also mooted in 1913 and it was realized that for this purpose a proper museum would be necessary. The College as usual started by drawing up elaborate rules for the conduct of the museum when it started, and in a remarkably short time it was reported that there was 'a fine set of specimens in it'. By this time the war had started.

During the war the Postgraduate College Society met with great regularity and kept the most admirable minutes, under the influence of a new Dean, Dr. Saunders. The postgraduate teaching must have gone on, though there is no record of it throughout these admirable minutes. The minutes are concerned purely with formal items

Postgraduate Medical Education at the West London Hospital

such as approving annual reports and passing accounts for payment, without any details, no annual reports are included, and no mention is made either of the number of students or of the amount received in fees. But the evidence that teaching went on may be derived not only from the fact that the Society met regularly, but also because there were a good many bills passed for payment, which obviously must have been for educational purposes, and there was also an interminable controversy about the loss of fees due to the establishment of the Venereal Diseases Department. This arose because the West London Hospital, under the exigencies of war, agreed to start a Venereal Disease Clinic, and it was arranged with the Government that local doctors should be enabled to attend this Clinic for instructional purposes without fee. This was held to be an infringement of the Postgraduate College's collection of fee money, and compensation was demanded. In 1918 there is the specific statement that 42 students attending the College paid no fees because of this arrangement.

There are a good many references from November 1918 onwards of the relationship between the West London Hospital and Sir William Osler's scheme for postgraduate medical education in London. The Postgraduate College had a great fear that the new venture, the Fellowship of Medicine, would limit the work of the College, but in December 1918 they persuaded Sir William Osler to come down to the West London Hospital and explain the scheme to them, after which they approved it in principle and agreed to participate if the existing schools were left unfettered. The West London Hospital actually participated in the 'Reconstruction Course' which the Fellowship of Medicine ran from February to April 1919, and in relation to this the College Committee allowed its Dean to collaborate with the Fellowship of Medicine. Next month the Vice-Dean was made a member of Sir William Osler's Committee, so that collaboration appears to have been considerable. For all that, the activity of the College was declining. In 1923 it was agreed, because of the fall in income, that lecturers should forego payment. The school was undoubtedly in an unadventurous phase because in the same year it was decided that it was inadvisable to take part in a Combined Hospital Postgraduate Scheme, which was mooted in 1922. An attempt was made to restore numbers by instituting a course for the Final F.R.C.S. Examination, and a programme was published for a course starting in September 1923 in anticipation of the November examination. Not a single candidate entered for the course.

In 1924 Dr. Simson was made Dean and Mr. Neil Sinclair was made Vice-Dean and Secretary. It was decided, as there was a small balance in hand, that lecturers should be paid, but in 1925 this was revoked, and although the members of the Society were given £5 each as interest on their deposits, no other payment was to be made. The College must in the meanwhile have fallen out with the Fellowship of Medicine, because it was decided that it should rejoin, presumably in an effort to restore its activity. In 1926 Sir Humphrey Rolleston agreed to be President of the College, but by now there was a considerable falling off in the number of postgraduate students. The College took to advertisement by way of remedying the situation and also appointed a sub-committee to consider it. The position was a little better after the advertisements had appeared, and it was decided to run the courses in definite sessions, to have a special opening ceremony, and to restart pathological teaching.

C. Newman

In 1927 Dr. Frederick Menzies, the Chief Medical Officer to the London County Council, foreseeing the effects of the Local Government Act, which was to come into force two years later, with the taking-over of municipal hospitals by the London County Council, put forward a superb and imaginative suggestion to the West London Hospital. It consisted of what was virtually no less than the creation of a West London Hospital Region, unifying all the hospitals in the area under the West London Hospital's control. This would have included eight special hospitals, four general hospitals (Fulham, Hammersmith, St. Mary Abbott's and St. Charles's), and five dispensaries, providing over 2,000 beds for postgraduate education. This scheme was accepted by the staff of the West London in principle at once. Some time previously, in 1921, the Hospital had given evidence to the Earl of Athlone's Committee. This Committee had been set up to look into the question of postgraduate medical education in London, and had decided that there should be a school of the University of London attached to a hospital devoted solely to postgraduate medical education. A second committee was then set up, presided over by Sir Neville Chamberlain, to look into possible practical schemes. After trying in vain to persuade one of the undergraduate, voluntary hospitals to turn to postgraduate activities, the Committee decided on the West London, and Sir Neville Chamberlain wrote on 7 March 1927, to the West London Hospital as follows:

As you are doubtless aware, I appointed last year a committee of representative medical men to consider the best means of providing for postgraduate medical education in London on the lines recommended in Lord Athlone's report of 1921, of which I enclose a copy. I myself presided over the Committee and we have considered the possibility of adapting a suitable London hospital for the purpose. In the course of our survey of the London hospitals and of our subsequent deliberations we have come to the unanimous opinion that the West London Hospital is, on the whole, the most appropriate hospital to become a centre of postgraduate study.

There has been some informal communication between a sub-committee of my committee and members of the medical staff of your hospital which encourages me in the belief that so far as the medical staff are concerned, there would be no insuperable difficulty. As regards the fabric of the hospital, such preliminary examination as we have been able to make suggests that some additions and the reconstruction of part of the existing buildings might be required before the buildings could be regarded as adequate for a postgraduate school on the national scale contemplated, but the reconstruction might be carried out gradually and without undue interruption of the normal work of the hospital.

Perhaps at this stage it would be enough to say that the Committee have been so impressed by the practicability of the scheme that they unanimously resolved that a point had now been reached when I should communicate with you, as Chairman of the Board of Management, with a view to further exploration of the proposal.

If, as I trust will be the case, your Board are prepared favourably to consider the proposal, I would suggest that the next step should be a conference between representatives of the Board and of my Committee. For this purpose my Committee have appointed a sub-committee to represent them, consisting of Sir Robert Bolam, Dr. H. L. Eason, Sir Thomas Horder, Sir George Newman, and Sir Arthur Robinson [the Secretary of the Ministry], with Mr. L. G. Block, the Secretary of the Committee. If the suggestion is acceptable to your Board, a date for the first meeting—preferably at the West London Hospital—will be arranged to suit the convenience of all concerned.

May I add at this stage that until negotiations have progressed further, it would be desirable that the matter should be treated as confidential, at least to the extent of avoiding any public reference to it in the press or otherwise.

Yours faithfully,
N. Chamberlain.

Postgraduate Medical Education at the West London Hospital

After this nothing further was heard, and the West London Hospital in June asked what was happening. A letter was received from the Ministry of Health saying that the matter was under consideration but that the demands of Parliamentary Session had been exceptionally heavy, which had prevented a meeting being called, but that the whole situation was going to be discussed again before the end of July.

Meanwhile the Conservative Government had fallen and Mr. Arthur Greenwood had become Minister of Health. In September a letter was received from Mr. W. A. Robinson to Sir William Wells, the Chairman of the West London Hospital. He said:

Dear Sir William Wells,

In reply to your letter of 19 September I appreciate most fully the desire of yourself and of your Board to receive definite information on the proposed postgraduate college. I am afraid, however, that I am not yet in a position to furnish you with a definite reply, which you quite naturally and properly desire. As you know, the whole of this question stands referred to the Minister's Postgraduate Committee. It is not an ordinary office matter which can be decided by the Minister, but only by the decisions of that Committee.

I may say for your information that the Committee met on 30 July last with the new Minister, Mr. Greenwood, in the Chair. They had before them various alternative proposals which have been under their consideration for some months and the Minister's general conclusion was that the Committee were not in a position to determine which of these proposals afforded the best basis for a practicable scheme.

In regard to the proposal as it affects the West London Hospital, Mr. Greenwood reminded the Committee of your letter of 30 April and the particulars of your interview with Mr. Chamberlain on 22 February. He also placed before them Mr. Chamberlain's letter to you of 10th May and a minute in respect of these matters which the late Minister had left for the new Minister. After careful consideration of this material, Mr. Greenwood and the Committee were of the opinion that the Committee remained free to arrive at a decision on the merits between the alternative proposals before them, but they recognised that it was necessary to defer a decision till the Committee met again in the autumn.

I anticipate an early meeting of the Committee and, indeed, its sub-committee has met within the last few days. I cannot, however, conceal from myself or from you that the discussions and negotiations entailed in this problem cannot be other than of a protracted nature, and in the circumstances I am afraid I can only say that it is for your hospital in the words of Mr. Chamberlain's letter of 10 May, to consider whether they can prudently continue to await a decision which cannot be given for at least some months, or whether they must take action on the basis that so far as they are concerned this scheme must be abandoned.

Believe me,

Yours faithfully,

W. A. Robinson.

The West London presumably, as anyone else would, took the letter to mean in four words 'the egg is addled'. They replied, however, that they would wait and see what happened, which was probably the wisest thing for them to do. The final letter calling the whole thing off, must have been received by the West London in May, because the Dean, Sir Henry Simpson, sent out a private and confidential letter presumably to all the staff which said: 'Notwithstanding the fact that the Ministry of Health have decided to start a special postgraduate hospital at Ducane Road, the Postgraduate College Sub-Committee are of the opinion that the postgraduate work at the West London Hospital has still a great future before it'. The College Committee agreed that a great future opened out before it for the refresher courses for Insurance Practitioners in the next three or four years, and they agreed to seize this opportunity. Even this opportunity was in a way snatched from them by the absorption of official refresher courses for general practitioners by the British Postgraduate Medical

School, and from that time on the West London Hospital concentrated more on the idea of undergraduate medical education than of postgraduate, although the postgraduate classes continued. The history of this phase of the College's activities is being written by Dr. Maurice Shaw, so there is no need to say more about it now. It was in any case a disastrous story and not a very pleasant one to write.

It may be said in general that the educational activities of the West London Hospital were for a time most successful, and that it was Leonard Bidwell who was responsible. Around the turn of the century, it was doing very well, but after 1903 it went steadily downhill: the figures for annual income prove that, although the numbers of students are not recorded. Dr. Shuter, who was a member of the College Society from its very early days, told the author that, as a matter of fact, there was never a decent audience unless the staff turned up in numbers to constitute one. By 1926, Dr. W. S. C. Copeman says that the classes consisted of between ten and twenty. Dr. J. Burnford, who joined later than Dr. Shuter (in 1909) writes that in that year 'it was a most flourishing College under the guiding hand of Leonard Bidwell F.R.C.S. A great Dean and a great organiser. He attracted men from the Navy and the Colonial Services who were posted to the College for three-monthly courses—some hundreds in number. Each session, the numbers were too many for practical classes [Dr. Burnford was a pathologist], and I had to repeat each class three or four times—a terrible bore, but Bidwell was a hard task-master and we had to follow him. About 1910/12 Bidwell announced the inauguration of the wider Postgraduate College, which he said was to be based on the West London Hospital. Indeed, if memory serves me well, I think he said it had been stated in Westminster and he was thrilled. Then shortly afterwards he diagnosed himself as having a cancer of the abdomen and insisted on Sargent operating on him in St. Thomas's—a normal appendix was removed but he died of peritonitis. The guiding spirit—powerful indeed, was gone and successive Deans failed to keep the College progressing. No more was heard of the larger Postgraduate scheme and later the Service men were withdrawn and teaching stopped . . .'

The decline had started before Bidwell's death: five years before; but that event may well have had a profound effect. The larger scheme in 1910/12 was either a premature attempt by Lord Haldane and his Committee, or Neville Chamberlain's scheme misdated.

What was the original cause of the College's failure? It is a difficult question to answer, not because of reluctance to hurt people's feelings, but because the reason is obscure. The College was directed to the continued education of general practitioners and their like, not to the more abstruse forms of postgraduate education, and the need for refresher courses for general practitioners became even more obvious after the Kaiser's War than it was before it. One would have thought that the kind of course provided by the College was eminently suitable for the purpose. But experience shows that the general practitioners did not think it was. The teaching was done by a part-time staff which very evidently found it difficult to keep strict regular time, and busy practitioners do not like to be kept waiting. If teachers put the claims of their private patients before their duties as teachers, a school goes downhill. Such teachers are likely also to find it difficult to prepare their discourses carefully beforehand, and adult pupils like to feel that their instructors have taken trouble, apart from the

Postgraduate Medical Education at the West London Hospital

obvious truth that a thought-out session is much better than an impromptu one: that is why general practitioners are so intolerant of a 'ward-round' (which is theoretically the best way of showing them the mixed clinical situations which they meet in practice), but prefer the demonstration of two or three related cases. But complaints about teachers were at least as common in the era of success as of failure, so that the bad habits of teachers cannot have been the principal cause of failure. It is also true that a school must have an adequate number of good teachers. Some of the staff of the West London were certainly a little reluctant, but that is not the same thing; we have all known men who disliked teaching who were, nevertheless, very impressive teachers. In a way, the West London was fortunate in that many of its staff were men in their first youth, who later moved to other schools: young consultants tend to be enthusiastic and inspiring. There may not have been enough first-class men; this does seem to have coincided more clearly with periods of decline.

But the factor most likely to have been vital is the attitude of adult learners to first- and second-hand instruction, the difference between the teacher who is actively pushing forward the boundaries of knowledge, and the teacher who is relying on what he learned as a student and has acquired from other peoples' work. The kind of teacher who inspires is the research-worker who is working on something of interest. H. G. Wells described this very well in *Ann Veronica*, Chapter 8, Section 2. There is something in first-hand, live information which stimulates emotionally. Certainly it is this type of teacher who draws the largest class of general practitioners, the class which continues the longest, the class which is continuously refreshed by new adherents. And that in spite of the fact that doctors resist new ideas, gird against revolutionary theories, and clamour for simple, practical instruction. Medicine has always been changing: today is it changing fundamentally and fast. The best, to the last generation, is not good enough for the next, and at the bottom of their minds doctors feel this, and respond to the better. In the 1880s the medicine of the next generation was still fundamentally the same as the medicine of the last, or at least there was as yet nothing to put in its place: by the early years of this century modern medicine was on its way, the medicine of the 1930s was going to be profoundly different, and it was the young men who were going to change it who were being offered the best of the past generation by the West London College, and they unconsciously turned elsewhere. They invented the new postgraduate medical education.

But there is no doubt that the West London Hospital and its staff played an original and enormously important part in the development of postgraduate education in this country, and for this they deserve permanent recognition.

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