

Society Reports

CAMBRIDGE UNIVERSITY HISTORY OF MEDICINE SOCIETY

The Officers for the Session 1956–57 are:

<i>President:</i>	Dr. Lawrence Martin
<i>Vice-President:</i>	Dr. A. R. Hall
<i>Hon. Treasurer:</i>	Dr. D. H. M. Woollam, 17 Cavendish Avenue, Cambridge
<i>Hon. Secretary:</i>	Dr. A. J. Rook, 3 Grange Road, Cambridge
<i>Hon. Vice-Presidents:</i>	Dr. H. B. Roderick
<i>Other Members of Council:</i>	Prof. J. D. Boyd Dr. R. Williamson Dr. M. Potts President of the Cambridge University Medical Society (<i>ex officio</i>).

At a meeting of the Society held in the Department of Radiotherapeutics on 6 November at 8.30 p.m., with the President Dr. Lawrence Martin in the chair, Dr. Douglas Guthrie read a paper on 'The Evolution of Medical Ethics'.

Dr. Guthrie felt that the technical advances of medical science threaten to overwhelm the art of medicine; there was never greater need for attention to the Hippocratic ideals. He considered briefly the codes of Hammurabi, Susruta and Maimonides, and then gave an account of the history of the Hippocratic Oath, and of the more important editions and translations. He analysed the Oath and contrasted it with the Christian version of the Urbinas manuscript in the Vatican Library.

The modern concept of medical ethics began to take shape in the eighteenth century. John Gregory's *The Duties and Qualifications of the Physician* (1772) was mainly concerned with medical etiquette, the duties of the physician towards his colleagues. Thomas Percival's *Medical Ethics* (1803) exerted great influence on professional conduct in general in this country and in the U.S.A. Dr. Guthrie then mentioned later English works on ethics, which have played their part in forming contemporary attitudes. Until the establishment of such courts as the General Medical Council in 1858 an appeal to conscience was the only means of elevating the moral tone of the medical profession. The regulation of medical conduct by law does not render superfluous the administration of the Oath. Dr. Guthrie traced the history of the administration of the Oath to medical students, and presented a summary of the findings to an inquiry he has

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recently made to determine where and in what form the Oath is administered in modern medical schools. He suggested that it would be well if the practice were to be adopted or resumed in the English universities, in most of which it has fallen into abeyance or never been employed. The procedure employed in the Scottish universities was described.

The large attendance and the vigour of the discussion clearly demonstrated the interest that Dr. Guthrie's lecture had aroused. Dr. P. A. G. Munro proposed a vote of thanks.

THE NORWEGIAN SOCIETY FOR THE HISTORY OF MEDICINE

(Norsk Medisinsk-Historisk Forening)

A CONSTITUENT meeting was held on 13 June 1956. The Chairman of the Executive Committee, Professor Axel Strøm, led the meeting and presented a proposal for rules as laid down by the committee. The proposed rules were all accepted.

In Norway, the history of medicine has been a much neglected subject despite a not inconsiderable contribution in this field by a few experts of international reputation, such as Bendix Ebell (translator of Papyrus Ebers and Papyrus Edwin Smith) and I. Reichborn-Kjennerud (author of numerous publications on ancient medicine and witchcraft in Norway.)

Repeated attempts have previously been made to form a society for the history of medicine, but without success.

The history of medicine is not being taught in Norwegian universities. During the last decades prior to World War II a lectureship actually existed, but was withdrawn on the death of the holder and has not been revived. During recent years, however, the history of medicine has received increasing attention and many physicians have expressed a desire for a more extended knowledge of the subject.

Historical knowledge is of great importance to progress in various fields of medicine. Few physicians, however, take much interest in history until they have established themselves in some specialty. The history of medicine is therefore generally considered a subject for post-graduate study.

It is gratifying that the steps now taken to start a society for the history of medicine have been received with such stimulating enthusiasm. It is hoped that the activities of the Society may contribute to the acceptance of the history of medicine as a separate subject, to be taught in our universities like other medical disciplines. Although qualified teachers may not be