

Editorial Comment

DEPARTMENT OF THE HISTORY OF MEDICINE

"Perhaps it is a sign of exhilarating progress to have so much to do and think about in the present and the future that effort in attending to the past, or even preserving the present for the future, is grudged."

R. V. Jones

Nature, 1975, 254, 216.

The Inauguration of the Department of the History of Medicine of the Royal College of Surgeons in Ireland took place on February 28th 1975 (a full report appears on page 175). At a meeting which followed a dinner to celebrate the occasion, papers were read by Dr. J. B. Lyons, Librarian to the Royal College of Surgeons, Professor P. Froggatt, President of the History of Medicine section of the Royal Academy of Medicine in Ireland and the Rev. F. X. Martin, Professor of Mediaeval History, University College, Dublin and the occasion was suitably honoured by the admission of Professor J. D. H. Widdess to the Honorary Fellowship of the Royal College of Surgeons in Ireland. The inauguration of a Department of History of Medicine in the College is a significant development and one which merits comment.

The new department is unique in being the only one of its kind in this country or in Great Britain. Personal honorary chairs of Medical History have been created from time to time but actual departments devoted to the study and propagation of the subject have not been part of medical schools in these islands. This situation contrasts with some of the Continental universities, notably those in Germany, in which there exist a number of chairs with

departments of Medical History. However, with the exception of Germany, few medical schools in Europe include actual teaching of the History of Medicine in the undergraduate curriculum. Where instruction in the subjects is given it is usually as a subsidiary part of the teaching of other subjects. It is not usually referred to in the curricula of the medical schools in these islands and moreover, the Todd Report of 1968 which has influenced the content of medical instruction in Great Britain does not list the History of Medicine among the subjects recommended for undergraduate teaching.

This is not to say that there is a lack of interest in medical history. Few involved in the teaching of medicine would deny the value of the historical aspects of the subject and many would admit to a desire for greater knowledge in this area but at the same time medical teachers are reluctant to give support for the teaching of the subject. It is not easy to gauge student feeling on the matter but a minority would certainly support the inclusion of the subject in the medical curriculum on an elective basis and few could object to this.

Where then, it might be asked, is the justification for the founding of a Department to teach a subject which the philistine might say

has little relevance to present day medicine. It is the paradox in the foregoing sentence which offers the answer to the query. What occurs today in medicine is relevant to the future, in the same way as today's discoveries cannot be independent of the past. Study of the History of Medicine offers many lessons for the present and may even influence the future in ways as yet unstudied.

To a great extent the problem with medical history is that to those unaware of its appeal there is the impression that the subject is reserved for eccentric albeit scholarly gentlemen in retirement whose motivation for writing on the subject is a mixture of romanticism and nostalgia. It would be untrue to deny this image, just as it would be wrong to attempt to suppress this aspect of the subject but it has to be realised that there is in addition the research element to medical history — research which may often call for scholarly industry and skill in presentation equal to and sometimes greater than the purely scientific study.

Consideration has to be given to the possible advantages of teaching medical history at undergraduate level. Every medical student realises the usefulness of an occasional peg on which to hang pieces of knowledge from the

vast influx of detail, the assimilation of which modern medicine demands; the medical student knows just how often medical history has served in this way. There are then the cultural aspects of the subject — medical history knows few boundaries and bridges the world of science and art. With few, if any, cultural interludes in the present medical curriculum, surely a subject which offers this as well as being of practical relevance should be welcomed. Pride in one's ancestry is natural and laudable but it is indeed tragic that Dublin's medical graduates leave their city often totally unaware of a medical heritage which has bestowed an eponymous immortality on their eminent forefathers such as Jacob, Adams, Corrigan, Todd and Stokes.

The College, aware of the importance of the History of Medicine in the teaching of medical students, has created its Department of the History of Medicine under the directorship of Dr. J. B. Lyons. This Department will endeavour to provide instruction to students of the College on an elective basis, to act as a link between general history and the history of science and to further research and provide facilities for research into the subject of medical history.

STUDENT PAPERS

A paper by a student is published on page 164 of this issue and it is the editor's hope that the *Student Contribution* will become a regular feature. No doubt a number of students and teachers will regard this as a further encumbrance to the already overburdened student. However, as any editor will testify the standard of medical writing is at times only deplorable and few would deny the importance of publication for those graduates opting for an academic career.

Although desirable, it is probably not practical at present to teach medical writing to undergraduates, but unfortunately the opportunity to do so at postgraduate level rarely occurs. It is to be hoped therefore that students — possibly working in small groups under the guidance of their teachers — will avail of the opportunity to submit papers for publication. But a word of caution may be necessary. Whereas a student may not achieve the

scientific finesse of his postgraduate colleagues, his paper must be of equal standing in all other respects — the English must be good and the layout and presentation that which the Journal demands.

There are some excellent guides¹⁻⁵ to writing medical papers and the student (and indeed the postgraduate) would be well advised to study one of these.

References

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2. THORNE, C. (1970). *Better Medical Writing*. London, Pitman Medical.
3. BARABAS, A. and CALNAN, J. (1973). *Writing Medical Papers: A Practical Guide*. London, Heinemann Medical Books.
4. O'CONNOR, M. and WOODFORD, F. P. (1975). *Writing Scientific Papers in English*. Associated Scientific Publishers, Amsterdam.
5. Editorial. (1975). *British Medical Journal*, 2, 56.