

The Royal College of Surgeons in Ireland: A Bicentennial Tribute

EWIN O'BRIEN,

The Charitable Infirmary, Jervis Street, Dublin 1.

The Charter of 1784

The first medical corporation to be established by Royal decree in Britain and Ireland was in 1446 when the Art of Barbers, or Guild of St. Mary Magdalene of the City of Dublin was constituted for the promotion and practice of the art of chirurgery. The barbers pole originating from the practice of blood-letting was the emblem of the barber-surgeons, and is carried on ceremonial occasions by the two most junior members of the Council of the College to this day. A further charter granted by Elizabeth I in 1557 compelled all surgeons to join the guild, and in 1687 James II in another charter broadened membership of the guild to include not only the barbers and surgeons, but also the apothecaries and periwig makers. The apothecaries withdrew in 1745 when they were incorporated separately in the Guild of St. Luke, but the surgeons were destined to remain in the unseemly company of the barbers and periwig makers for another half century. In 1765 a Limerick born surgeon Sylvester O'Halloran (*Fig 1*) who had studied at Leyden and Paris, published proposals for "The Advancement of Surgery in Ireland." When Samuel Croker, (later Croker King) a surgeon to Dr. Steevens' Hospital was unsuccessful in petitioning parliament for a charter on two occasions, the Dublin Society of Surgeons was formed by the eminent surgeons of the city. At a meeting of this society on 15th June 1780 it was resolved:

"That it is the opinion of this Committee that a Royal Charter, dissolving the preposterous and disgraceful union of the surgeons of Dublin with the barbers, and incorporating them separately and distinctly, upon liberal and scientific principles, would highly contribute, not only to their own emolument and the advancement of the profession in Ireland, but to the good of society in general by cultivating and diffusing surgical knowledge."

The charter was granted by George III on 11th February 1784 permitting the founding of a college to regulate the practice of surgery, and to make provision

for surgical education. The first body politic of the Royal College of Surgeons in Ireland consisted of Henry Morris, Gustavus Hume (*Fig 2*) and George Daunt (*Fig 3*) surgeons to Mercers' Hospital, William Ruxton, the Surgeon General, John Whiteway, and Samuel Croker King (*Fig 4*) surgeons to Dr. Steevens' Hospital, Philip Woodroffe, surgeon to the Blue Coat School, William Dease (*Fig 5*) surgeon to the Meath Hospital, James Henthorne (*Fig 7*) surgeon to the House of Industry Hospitals, and Henry Lyster, Robert Bowes and John Neale, surgeons to the Charitable Infirmary. The first Council meeting of the new college took place in the Board Room of the Rotunda Hospital under its first President Samuel Croker King on Tuesday, March 1, 1784, and to commemorate this historic occasion the Council will sit with the President, Eoin O'Malley in the Rotunda on March 6th 1984.

The Medical School

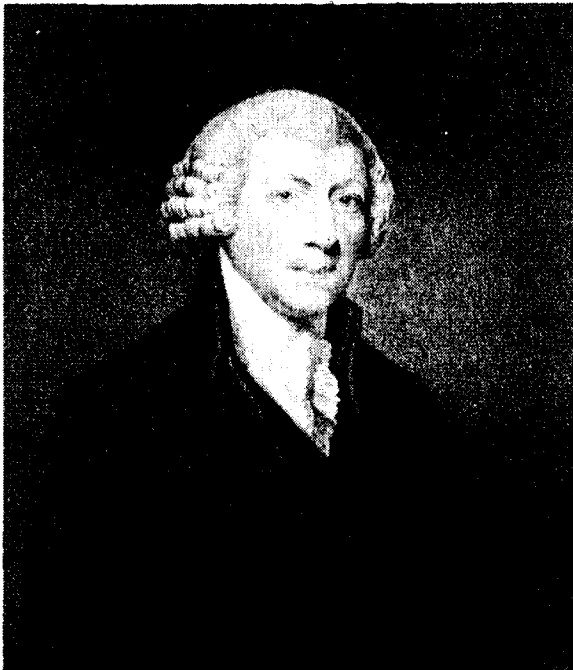
The founding surgeons now possessed a charter, but they had neither funds nor premises, and the professors had at first to teach in their own homes. In 1789 humble premises adjoining Mercer's Hospital were acquired, and here the "Schools of the College" flourished, success being in no small measure due to the demand for army and navy surgeons for the Napoleonic wars. The need for larger premises was soon apparent, and George Renny, (*Fig 8*) who as Director-General of the Army Medical Department in Ireland had considerable influence with the Government, obtained grants for the building of a new college on the site of the old Quaker Burial Plot in Stephen's Green. The new college opened in 1810 and its continued success was due not only to the facilities it offered — a lecture theatre, dissecting room, museum, and splendid board room and entrance hall — but to its good fortune in having among its staff some figures of exemplary talent and energy, of whom space permits but mention of a few. Abraham Colles (*Fig 6*) needs no introduction to doctors across the globe. As professor of Anatomy and Physiology, and of Surgery



1. Sylvester O'Halloran (1728-1807). An engraving in the Royal Victoria Eye and Ear Hospital.



3. George Daunt by Alexander Pope by permission of the Royal Dublin Society.



2. Gustavus Hume (1730-1812). An engraving by John Comerford in RCSI.



4. Samuel Croker King (1728-1817). An unsigned portrait in RCSI.



5. William Dease (1752-1798) by Thomas Farrell in RCSI.



6. Abraham Colles (1773-1843) by Martin Cregan in RCSI.



7. James Henthorn (1744-1832) by Martin Cregan in RCSI.



8. George Renny (1757-1848) by William Cuming in RCSI.

Charitable Infirmary in 1865; Francis Rynd who introduced the hypodermic syringe in 1845, and Robert Adams, three times President of the College of Surgeons, whose commemoration in the joint eponym with Stokes is a testimony to his considerable prowess at auscultation.

An event of considerable importance which does not always receive due recognition took place in 1832 when the professors of the College subscribed £1,100 for the purchase of three houses in Upper Baggot Street, which they converted into the *City of Dublin Hospital* comprising 52 beds. This institute was founded as a College hospital to facilitate the clinical teaching of surgery. A similar achievement had been accomplished by Robert Perceval in 1792 when Sir Patrick Dun's Hospital was founded as a medical teaching hospital for the School of Physic at Trinity College. Perceval's far seeing plan, was however frustrated by his colleagues on many occasions, most notably by Edward Hill, and he had to resort eventually to parliament for the realisation of his ambition. (It was the last act of the Irish Parliament). The founding Surgeons of the City of Dublin Hospital were Arthur Jacob, (Fig 11), Robert Harrison, James Apjohn, Thomas Beatty, Charles Benson and John Houston. Their hospital flourished as a teaching hospital of the College for twenty years during which it educated 1,840 students most of whom attended the College. After this period, it seems the College representation on its staff ended. Students thereafter attended the hospitals of their choosing, a practice that continued until comparatively recently when formal agreements with the Boards of the Charitable Infirmary and St. Laurence's (Richmond) Hospital established these institutes as the main teaching hospitals of the College.

Towards a Compleat Doctor

The Guild of Barber-Surgeons had had the audacity to approach the College of Physicians seeking a conjoint examination in the early eighteenth century, and predictably were rebuffed. The College of Physicians, in fact, forbade its fellows and licentiates on oath to meet a surgeon in consultation. The surgeons lost no time therefore, after founding their college, in incorporating chairs not only of surgery, anatomy and physiology, but also of botany, midwifery, surgical pharmacy, chemistry and physics and medicine, thus enabling their graduates to practise either surgery or medicine. Arthur Jacob, a renowned ophthalmic surgeon who did much to influence medical teaching and practice, declared proudly to the students of the College of Surgeons "in fact, this is a College of Medicine and Surgery, and the Diploma you receive from it is universally accepted as evidence of your fitness to practise every branch of the healing art."

In 1849 a Chair of Surgery was created at Trinity College and nine years later the University instituted the degree of master in surgery, much to the annoyance of the College of Surgeons who regarded this as their prerogative. With the passing of the Medical Act of 1858, the College of Physicians made proposals to the College of Surgeons for co-operation in conducting their examinations. It was now the surgeons turn to be high-handed and they declined the offer believing that because their curriculum included medicine and the allied subjects, an alliance with the physicians would not be to their advantage. An amendment to the Medical Act in 1886, however, made it imperative for all seeking admission to the medical Register to have qualifications

in medicine, surgery and midwifery and the conjoint licentiate, conferred by both the Royal College of Physicians of Ireland and the Royal College of Surgeons in Ireland, came into being and exists to this day.

The College of Surgeons forged links with another institution that was to be of major significance in a later age. When the Medical School of the Catholic University founded by John Cardinal Newman opened in Cecilia Street in 1855, the College of Surgeons accepted immediately its curriculum and allowed its students to



11. Arthur Jacob (1790-1874) by Henry Mallin.

sit for the licentiate thus ensuring its survival. The nicety of historical reciprocity was achieved recently when the National University of Ireland (into which the Catholic University Medical School was incorporated at its foundation in 1909) responded to the College's desire to confer degree status on its graduates by giving recognition to the College, so that its graduates now receive both the conjoint licentiate of the Colleges of Surgeons and Physicians as well as the degree of the National University of Ireland.

Postgraduate and Academic Endeavour

The Charter of 1784 empowered the College not only to provide adequate education for those training to be surgeons; it also permitted the control of the practice of surgery. Understandably, the early years were preoccupied with the organisation of an adequate undergraduate curriculum, and not much attention was directed towards postgraduate development, though the College did at least acknowledge this role by electing members from among its licentiates. In 1844 a supplemental charter granted the College the right to confer the fellowship by examination, and this marked the beginning of the College's involvement in postgraduate education.

When Dominic Corrigan and William Stokes retired from active participation in clinical medicine in the 1860s, the short lived 'Dublin School' came to a close and Irish Medicine entered a century of stagnation. Both undergraduate and postgraduate development in the College came to a standstill during this period of academic torpor. Teaching in the medical school was conducted by part-time professors whose remit was to deliver a given number of lectures, and they lacked the academic vision of their counterparts in Britain and America where the professorial departments saw research as being at least as important as undergraduate teaching. The medical school of the College of Surgeons was content to confer with the College of Physicians, the conjoint licentiate, each body being concerned only with producing a competently trained doctor. Neither showed any particular concern for academic prowess. It is hardly surprising, therefore, that during this period almost all of the graduates of the College were destined for general practice. Indeed, they could scarcely do otherwise for the qualifying licentiate, lacking the academic status of a degree, effectively disqualified the graduates from advancement to higher academic qualifications.

The first faint signs of arousal were to be seen in the postgraduate sphere. In 1951 reciprocity in the Primary Fellowship Examination was established with the sister Colleges in London, Edinburgh and Glasgow and this was later extended to the Royal Australasian College, and the South African College of Physicians and Surgeons. In 1959 the Faculty of Anaesthetists was founded, in 1961 the Faculty of Radiologists, in 1963 the Faculty of Dentistry, and in 1974 the College established the Faculty of Nursing, the first of its kind in these islands. Recent years have seen the College embark on many successful post graduate activities, among which the Post Graduate Fellowship Training Programme has been a notable success.

If the sixties marked one of the lowest points in the College's long history, this decade also ushered in an able administrator, Dr. Harry O'Flanagan, whose talents, energy and diplomatic prowess were to sustain for nearly twenty years a resurgence of the College's confidence in itself. A succession of far-seeing presidents supported by the members of Council embarked on an ambitious building programme for a new Medical School which opened in 1976. Subse-

quently the College has erected the building linking the old College with the new, and a £1 million clinical sciences building is being financed by the College in the new hospital at Beaumont which will replace the Charitable Infirmary and St. Laurence's Hospital. These ventures, when taken together with the recent purchase of Mercer's Hospital, are evidence of a dramatic expansion over the last two decades. Bricks are no substitute, however, for intellectual achievement.

The College professors can no longer be content to produce competent doctors, essential though this role may be. The major departments must be developed so that active and academically productive personnel are attracted to an institute where their talents will be permitted to develop. The professors of the College must, therefore, be aware of the developments in academic institutes elsewhere, so that they can organise and structure the staffing of their departments to the best advantage; the College authorities for their part must be prepared to finance the development of these departments (an exercise that will cost considerably more than the building programme); they must, moreover, be prepared to ensure that academic standards are adhered to in these departments and that the departments are obliged to provide the only acceptable evidence of academic achievement — published work.

Buildings are a visible testament to investment; intellectual attainment is not so readily apparent, and can only be judged in the critical arena of international academic medicine. During its bicentennial the College will, with every justification, pride itself on its past, but it will also direct its thoughts to the future. Surely the challenge for that future rests in attracting the best talent, from wheresoever it may come; through research and the contact that intellectual endeavour brings with workers in centres abroad (a feature so valued by the luminaries of the 'Dublin School') not only will its academic development be assured, but the College of Surgeons in Ireland will once again hold pride of place in international medicine. From an analysis of two rich centuries of history, the College can learn that its lowest hour was when chauvinistic complacency permitted the acceptance of mediocrity, and its greatest moments of which there have been a few, were when it reached for excellence.