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978-1-107-69788-1 - English Medicine and the Cambridge School:  
An Inaugural Lecture  
W. Langdon Brown  
Excerpt  
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## ENGLISH MEDICINE & THE CAMBRIDGE SCHOOL



IT is just forty years since I listened to an Inaugural Lecture by the Regius Professor of Physic. On that occasion Sir Clifford Allbutt presented a survey of medicine which made a profound impression upon me; its breadth of vision gave me a new conception of what medicine might be.

During his tenure of this Chair, Sir Clifford added both lustre and dignity to it. It was indeed fortunate that during a time of such rapid development of the Medical School of this University, the Chair was occupied by a man of such outstanding distinction, high character and personal charm. His profound learning did not lead him to despise the practical details of his profession. The introduction of the short clinical thermometer in common use, and to a large extent, the hypodermic syringe, we owe

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to Sir Clifford Allbutt. His successor, Sir Humphry Rolleston, who is endeared to me by innumerable acts of kindness, is fortunately still among us. His scientific and professional attainments are known to all and I do not hesitate to say that there is no man more looked up to and beloved in the medical profession to-day. I imagine that he is the only Regius Professor of Physic who has been an Admiral. He is certainly only the second Regius Professor of Physic to have been also President of the Royal College of Physicians, Glisson having been elected to that office in 1667. Cambridge may well congratulate herself that the finest System of Medicine published in English bears the two names of Allbutt and Rolleston as joint Editors. Among other debts, we owe Sir Humphry gratitude for his recent biographical history of the Cambridge Medical School. My indebtedness to this book will be obvious in the brief résumé I shall presently give of the earlier history of medicine in Cambridge.

But before embarking on that history, I

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should like to remind you that it illustrates the curiously spasmodic character of medical progress. Only a day or two after I knew that I was to have the honour of occupying this Chair, I was reading the Inaugural Lecture prepared by Mr Lowes Dickinson, now, alas, no longer with us. His lecture specially attracted me because it illuminated one aspect of my subject. Dickinson posed this question—Greece was the birthplace of Natural Science, and, I might interpolate, of scientific as opposed to magical medicine. Why was it extinguished so early and so completely? Why did it not develop continuously? His own answer was as follows—science is concerned not with goodness or badness but with facts and their interpretation. The change from the study of things to the study of values began before science had established its authority by showing its practical utility. Although it was in Greece that Natural Science was born, Greece became instead the mother of famous systems of ethics. If science had even begun to

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show its utility, the Romans, who were a practical people, would have fostered such studies, instead of interesting themselves in Epicureanism and Stoicism. But science appeared to them futile. “For this they paid the penalty; for their civilisation perished by a kind of atrophy, and there descended upon the Western world an age of darkness in which nothing remained of the Greek spirit but a gradually ossifying literature and so much of the Graeco-Roman tradition as was embodied in the amalgam of Christian theology. Almost everything that had been discovered and known was forgotten for a thousand years, and what was more, the spirit itself was extinguished.”

The modern application of science to life on a tremendous scale is a thing quite new in history. Man’s brain cannot adapt itself quickly enough to the material changes of the last 100 years. Our environment is changing faster than ourselves. Lowes Dickinson realised that we too are faced with the dilemma of Graeco-Roman society. To quote him again: “How

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are we to deal with science? Shall we allow it to destroy us, or shall we destroy it to save ourselves? Neither way seems a good one; but is there not another alternative? There is, clearly, if we would but take it. Our science, we saw, is the product of the Greek spirit; but so is our ethics. In the Graeco-Roman crisis these two movements fought one another, till ethics, in the end, destroyed science. What we have to do is to reconcile the antagonists—to apply ethics to science and science to ethics. That movement, I think, has already begun; and on its success depends the future of civilisation”.

To a medical man this point of view is of great interest, for not only does medicine attempt to combine science with ethics in its relief of suffering, but in these latter days is becoming increasingly psychological in its approach to disease while developing its scientific armament as much as possible. Medical science in its broadest aspects, therefore, may well be a pioneer in this reconciling process from which Dickinson hoped for so much.

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During those thousand years of darkness of which he speaks, only the Arabs kept a flickering candle alight. Then with the Renaissance came our first opportunity of establishing a school of medicine here. I can never pass through Queens' College without looking up, with a feeling akin to reverence, at Erasmus' tower. There was indeed a beacon. If the Reformation had had Erasmus instead of Luther for its leader what a different story it would have been. But the scholar is no match for the demagogue in an appeal to the herd. However, that is a digression. Where Erasmus comes into my story is that he was accompanied by John Siberch, who began the history of Cambridge printing by establishing a press here in 1521. Eight complete specimens of his printing survive, and as far as we know, the fourth book published by his press in that year was a discourse on Galen by Thomas Linacre. Now Linacre was the founder of English academic medicine. In 1518 he persuaded Henry VIII to constitute the Royal College of

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Physicians, and six years later, just eight days before his death, founded lectureships both at Oxford and Cambridge. But while his London enterprise flourished his University gifts were sadly mismanaged for centuries. In 1540 Henry VIII established five Regius Professorships here, that of Physic being one. Sir Humphry Rolleston remarks that although this should have ensured a living school of medicine at Cambridge, the results were most disappointing, for while cultivating the intellectual needs, the University atmosphere was conservatively hostile to those of the body. Here again, is an instance of that antagonism of which Dickinson spoke. Medical students who wished to get real teaching were obliged to seek it elsewhere, as Harvey, Caius and others did at Padua, and none of them, when they came back to England, founded a school at Cambridge. Harvey, for instance, expounded his immortal discovery of the circulation of the blood not in Cambridge, but as Lumleian Lecturer at the College of Physicians.

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The treatment meted out to Caius in spite of his munificent benefactions makes painful reading. Glisson, whose name is permanently inscribed for every medical student on the structure of the liver, was the outstanding Regius Professor in the seventeenth century. He held office for 41 years, yet he was largely an absentee. Medical teaching, such as it was, from the birth of the University until the nineteenth century consisted in the reading and expounding of Hippocrates, Galen and Aretaeus, and was devoid of the experimental method in which Harvey could have led the way. And that in spite of the fact that in 1705 Richard Bentley, the turbulent Master of Trinity, over-rode his senior fellows and established a physiological laboratory there, in which Stephen Hales, a member of Corpus Christi (the College to which I now have the honour to belong), and the discoverer of blood pressure, carried out experiments, after a sound training in Newtonian physics. But little else stirred the general stagnation. It is astonishing



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to learn that even as late as 1870 only two M.D. and seven M.B. degrees were conferred, while in 1877 the four examiners passed five candidates.

Sociologists tell us that the renaissance of a nation is always heralded by the outbreak of an “heroic age”. It is generally assumed that it was the advent of George Murray Humphry to Cambridge which led to the rebirth of its medical school, and he certainly was an heroic figure. But Sir Humphry Rolleston points out that the foundations had been quietly laid by John Haviland who was Regius Professor from 1817 to 1851, ably seconded by Sir George Paget who became Regius in 1872. I just remember seeing Sir George Paget in his old age, a frail but distinguished figure. This school owes much to his prophetic vision and untiring effort, just as my other school, St Bartholomew’s, is greatly indebted to Sir James Paget. The effect of these two brothers on medical education has been profound and far-reaching. They have been compared with

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another great pair of brothers, also surgeon and physician respectively, John and William Hunter. It was on the advice of the Paget brothers that George Murray Humphry was brought to Cambridge. A Suffolk man, he was apprenticed at the early age of 16 to the well-known surgeon John Green Crosse at Norwich, and subsequently entered St Bartholomew's Hospital, where he came under the influence of the famous Peter Mere Latham, whose emphatic style of teaching he adopted. On October 31st, 1842, when only 22 years of age, he was elected surgeon to Addenbrooke's, a post he held for 52 years. In less than two months he had obtained permission to deliver clinical lectures there. From 1848 he was responsible for the teaching of anatomy, becoming Professor in 1866. His energy was terrific. In addition to teaching surgery and anatomy, he found time from the demands of a busy practice to pour out a constant stream of papers on anatomical, pathological and surgical subjects, which secured his election as