

LES NEIGES D'ANTAN

A TWO-PART STORY

Recollections of a Medical Student,
The Queen's University of BELFAST, 1924-30

And of a Houseman,
The Royal Victoria Hospital, Belfast, 1930-31

R.W.M. STRAIN

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PART I

Student Days

Seldom did my old friend Dixon Boyd write to me from the exalted heights of his Cambridge Chair of Anatomy and his Clare Fellowship without a yearning for the Neiges d'Antan. No don's delight in the life of a university city and a college senior combination room had dulled his affection for his student days at Queen's. His memories were as real and precious to him as to the rest of us whose talents had not taken us so far or into such rarified atmospheres.

What were those years really like? When a student looks at his senior teachers, does he realise, I wonder, that behind those ageing faces and inside those skulls with their thinning grey thatch, there are computers motivated by some strange involuntary mechanism which ensures that from time to time odd memories pop up like slices from an electric toaster, like bubbles from a morass, like corks from champagne bottles: not scientific facts, not statistics, not even the names of so-called remedies long abandoned to the slag heap of therapeutic rubbish, but simple and apparently irrelevant things: the happy incident, the passing joke, the imponderables that, did he but know it, bring his teacher into a close and warm fellowship with him. This he will not understand until, with the passage of time, he too will be reminded of those snows of yesteryear, and say to himself, and to others, "I remember ..." The clinical room cup of tea, the hospital canteen, the recognition of an old friend at a medical meeting or in the street: these are the times when such memories are triggered off. Sooner or later he or the other chap will say, "I wish someone would write these things down before they are all forgotten." And so I have tried to do just that. It goes without saying that it is a labour of love. There is no other objective to be attained than my own pleasure in recalling happy days, and the possibility that this pleasure may be extended in some measure to others. Perhaps it is too frivolous, perhaps even too bawdy at times. Perhaps there is not enough "DE MORTUIS ..." I hope there is no malice. Even Winston Churchill's greatness did not suffer from his being shown up as a human being. It is in this light, as human beings, that I see our old teachers. Official biographies, however short, already exist for most of them, but those accounts often miss the details that show up personality and the relationship, however transient, between teacher and taught. The story naturally includes memories of my own contemporaries.

Have I been able to manage this? How far have I been able to dredge up from the depths of so many years ago memories long dormant? For, to quote old Sir Thomas Browne, "The iniquity of oblivion blindly scattereth her poppy."

1924-25

A UNIVERSITY FRESHMAN

School was over. Instead of a journey daily into town to Inst. I had now only to cross the road to Queen's, from the grounds of which I had so often in the past been ignominiously expelled by University porters, or had triumphantly evaded them on my bike. I was now there by right: by the examinations I had passed and the fees my father had paid. School books and their strap were cast aside. Instead, for immediate needs, there was a loose leaf notebook with a series of binder covers. The school cap which generations of Inst. boys had worn with the peak screwed deliberately over the right ear was no longer appropriate, and went to the dust bin, though not before I had removed the silver prefect's badge that for the previous year had been the pride of my life. Instead, my old friend Joe Gray and I purchased rather woolly felt hats, and we knew that school days were gone. The partnership that had begun in the science labs at Inst. was now to continue for another two years at Queen's.

A letter from Messrs. Longmans Green addressed to "Mr.", and pointing out the desirability of purchasing certain books, confirmed my new status, and was the first of such letters. I am sure I set it aside with great care. Little did I realise then how it was the first of a gentle stream that was to become a river, a torrent, and finally a flood that would fill a dust bin a week for a professional lifetime.

Learning disciplines were now to change. Lessons and homework of a set kind had to be replaced by attendance at lectures and by as much study as inclination or dire necessity dictated. The technique of learning from lectures was, of course, new. You could listen or you could write down, the latter being the process from which so few doctors' handwriting has survived. If you had good university teachers you could do both. You could leave the lecture theatre having learnt something, and have some good notes as well. I have known a lecture to be an hour or even two hours of virtually solid dictation.

Our student days, though clouded by the usual preoccupation with examinations, were happy days. Were you to ask me why I could give no brief or immediate answer. I suppose we were free from financial worries, pocket money went a long way in those days, and tastes were less sophisticated than in modern times. There were friendships to be made, and kept, sometimes for a lifetime. There was a much more intimate life in Queen's then than now. You knew a far greater proportion of the entire student population. You knew the whole academic staff at least by sight, and many personally. It may have been Victorian redbrick, but it was a university in the best sense in that there was a family feeling about it: that students in different faculties had much in common, and saw each other far more frequently than today in the intimacy of a small Students' Union, in societies like the old Literific, and in the casual contacts in the quadrangle between lectures. The whole scale was smaller. Is there some point, I wonder, at which a University must cease to provide universality for the student body, and break up into a number of components based on separate disciplines, each having little but its own intrinsic loyalties?

And so the academic year 1924–25 saw me, a freshman, facing the problems of Physics, Chemistry, Botany and Zoology, and the various University Chairs of that first year, with the men who held them. Why is a University Chair held, never sat in? It can just possibly be occupied. Only the seats of learning seem to fulfil any really sedentary needs.

PHYSICS

The Professor of Physics was William Blair Morton, a Cambridge graduate, and a close friend of our family. My uncle, William Magill, who died while a medical student at Queen's, had been W.B.'s best friend at the Royal Belfast Academy, and I was his namesake. He was one of the good lecturers. His class was huge, for it contained both the first year medicals and the scientists. There was never any inattention for he was never dull. Though Cambridge had seen to his accent, he was a good Queensman. He was one of the founders of the University Association, and could be seen year after year "footin' the floor" with the best at the annual reception. Each evening he was to be observed leaving the University with Miss Beck, one of his assistants, and he always insisted on carrying her attache case. His Lecturer in our time was one John Wylie, an elderly man whose rather lugubrious appearance belied his skill and enthusiasm as a yachtsman. I remember that in one of the practical classes there was an experiment to demonstrate the loops and nodes on a vibrating wire which depended for its tension on a weight hanging down over the side of the bench. The conduct of the nodes and loops proved somewhat erratic, for some bad boy had his foot on the weight.

You never know at what level, social or academic, the really bright lads are to be found, and certainly the basement of the Physics Department hid such a one. As T.H. Milroy, of whom more anon, would have said, "You will go to Buick, and you will say, 'I want you to make me such-and-such' and he will say, 'Well, I can't make you such-and-such, but what I can make you is the following' ". And the following might well turn out to be an electrocardiograph for example, and certainly did include what I think was probably the third electroencephalograph in the United Kingdom. He had been an extremely skilled maker and repairer of navigational instruments with Messrs. Sharman Neill in Belfast before he became so useful, not only to the Physics Department, but to the whole University in those days when much scientific apparatus had to be shared by several departments.

One of Professor Morton's Demonstrators was Florence Chambers, daughter of one of the Belfast Motor Engineering pioneers. Later, when Emeleus came to the department as Lecturer, they got married, and as he succeeded Morton as Professor, her interest in Physics could be said to continue in the particular if not in the general.

CHEMISTRY

The Professor of Chemistry was W.J. Stewart. I remember from some public lectures how excellent he could be, but he took little interest in first year medicals. He was by our time extremely deaf, and this may have been the reason why he devoted most of his university time to his senior students. His great claim to fame was his skill at writing best-selling whodunits under the pen name of J.J. Connington. The unhappy lot of dealing with the medicals thus fell to Dr. Hugh Graham. I knew him quite well in my later years at Queen's as an extremely nice, friendly, gentle soul, but nice gentle souls are no match for medical students, not even when allowance is made for the fact that first year medicals have not really got down to all the tricks of taking the Mickey out of university teachers. Bottles of the aromatic esters were always arrayed along the front of his lecture bench, Heaven knows why, for no one ever paid any attention to them except to knock them down one by one as a sort of coconut shy during his lectures. John Carroll, the chief technician, was a retired policeman, a big handsome chap with a great presence, but again, presence was not enough. Absence would have been safer.

The chemists, staff and students alike, were a nice lot. They had quite a social life of their own centred round a body known somewhat grandiloquently as the Chemical Society of Ulster, with strange titles for its office-bearers such as Chief Scribe and Keeper of Monies.

ZOOLOGY

Physics and chemistry were inanimate. Zoology and botany were at least dealing with things that were alive, or at any rate had recently been alive.

Zoology was taught with enormous enthusiasm by Professor Gregg Wilson, everything he did was marked by enthusiasm. An earlier generation had known him as Commanding Officer of the Officers' Training Corps at Queen's.

We are Gregg Wilson's Army.

We are the C.T.C.

We cannot march. We cannot shoot.

What bloody use are we?

His appearance was striking: tall, extremely straight backed, pince-nez perched rather lopsidedly on his nose and protected from the disasters of gravity by a black cord. He had a loud resonant voice with a strong Edinburgh accent. Indeed, many of the stories told about him concern this voice. For example, there was the day when, emerging from his department at the North West corner of the quadrangle, he espied a colleague at the extreme South East. The grass was, in those days, covered with the reclining forms of students enjoying the summer sun, for it had not yet been assumed as traditional that the lawn was sacrosanct, and they were delighted to hear him raise his voice to a positive screech to declare, "Hummel, there's something I want to tell you in the very strictest confidence". He taught us practical zoology in a shed with a corrugated iron roof where the library stack now stands. On one occasion it started to hail. He had to admit defeat. With a final yell he stopped. "It is useless to fight against the elements". His OBITER DICTA have passed into Queen's history. "This morning we will take a quick run through the alimentary canal". The most famous is probably the one arising from the dissection of frogs. "Where is the young lady with the enormous testis?" A classic has been told over the generations. It concerned his difficulty in pronunciation between "t" and the hard "c". "Year after year skudents make the same mistake. They will write down 'kuba worm', when I say distinctly in my lectures 'kuba worm'". He was the soul of transparent honesty and simplicity. He was universally popular, and it was a delight to go to the parties he so often gave for students at his home. In his earlier days he had done a considerable amount of research on the marsupials, and was, I think, the first person to discover the nesting habits of platypus, if that is the right word.

His demonstrator in our time was Susan Finnegan, daughter of old Tom Finnegan, the Secretary of the University. She was very lovely, and we all had a soft spot for her.

BOTANY

Botany was a subject taken in the summer term of the first year. The Professor was one James Small, a rotund complacent Scot. He was primarily a pharmaceutical botanist. The enmity between him and

medical students was by our time traditional, but it is not clear why or how the hostility started. Certainly during the course of his first lecture to us we were invaded by the second year medicals straight from the dissecting room and armed with lumps of liver, lung and fascia. This was a process that we were to repeat in a year's time. On that occasion we escaped from the back of Jimmy Small's theatre, crossed the landing to the French theatre, and, much to the consternation of Professor D.L. Savory and his class, escaped through his own private door into the quadrangle before any of them realised what was happening. Such conduct towards any other member of the academic staff was unthinkable, and was unique because based on positive dislike on both sides. Those who afterwards suffered at our hands never fell into this category. They were simply people who laid themselves open to various forms of assault by reason of chinks in their protective mechanisms.

It was after our time that one inventive maiden excelled the men in simple ingenuity. She tipped up a box full of old golf balls at the back row of seats, and left Sir Isaac Newton's invention to do the rest. It is further reported that she took a carbon copy of her professional examination answers in case of repercussions.

How small the World is! While I was working on this paper I happened to call on Steve Campbell, who is in practice at St. Just-in-Penwith, near Land's End, probably the most westerly practice on the English mainland. He had a brother in my own year, and he himself had been among those to whom I had demonstrated physiology. The story he reminded me about was one of the Small classics, but I did not know that he himself was the hero of it. At one time Jimmy used to invite questions on postcards, and he can hardly have been prepared for Steve's simple query. "Why is Jimmy Small?" "If the young man who asked this will come to me after the lecture I will tell him, otherwise I will remember his handwriting."

Of what should have been an interesting subject I recall little. You had to buy his book, and woe betide you if he discovered that your copy was second hand. All misdemeanours were met with the dire threat, "I'll see you in October". He is said to have begun a lecture, "Ladies and Gentlemen and Medical students ..." I have myself heard him say at the blackboard, "This is a row of epithelial cells as drawn by a first year medical student." Another such pearl was, "Medical students will have no difficulty in remembering the three great types of micro-organism. First, there is the coccus or billiard ball type, then there is the bacillus or cigarette type, and finally there is the spirillum or corkscrew type". All that most of us remember is that "a seed is a ripened integumented megasporangium", whatever that means.

I am glad to recall that I knew him in later days as a much nicer man when not presented with medical students in bulk. Perhaps it is as well to remember the words of the Apocrypha, "Honour a physician with the honour due unto him for the uses which ye may have of him", and this should wisely be extended to the embryo physician too.

ANATOMY

In our time medical students attended the dissecting room in the Easter and summer terms of the first year. You soon forget that this is perhaps the first trial by ordeal. Can I stick it? Will I be sick? Will I faint? I don't think any of us did disgrace ourselves in this way, but it was good to have the baptism over. It is quite a landmark. When you buy Gray's Anatomy you are fairly lunched on the great medical textbooks. When you go into the dissecting room with its unforgettable odours of formalin and strong carbolic soap you start a study that sets you apart from all the other Faculties. You get over the shock of the bodies. You meet on fresh terms those second year men who are so much further on than you are, and, still more, you meet the demonstrators, those people who were students so long ago, and who are now to teach you. You don't appreciate then that they only qualified themselves a year or two previously, and that in a few years you will think of them, and they will think of you, as contemporaries. They are the first people you come across who are recognisable as doctors, though soon to be followed by their opposite numbers in the Physiology Department. This relationship is, I feel, unique in the curriculum, and I speak in this matter from both sides of the counter. I was not to know, for example, how long this early friendship with Ian Fraser or James Loughridge was to last in my own case.

At first we saw the Professor as rather remote, and we had little to do with him, but he was to be a dominant figure in our lives for almost three years.

STUDENT MATTERS

Two unusual things happened to me in my first term.

The Vice-Chancellor, the Rev. Thomas Hamilton, died, and, because we were personal friends of his grandson, Raymond Gregg Wilson, then a first year scientist, Brian Brennan and I formed with him a special group of students. I suppose the President of S.R.C. and the President of the Students' Union were there somewhere, but we were immediately next to the hearse, which was as well, for Brian's bubbling sense of humour never matched the solemnity of the occasion. It was the only time when we ever sported mortar boards, but we did not wear them because none could be found big enough to fit Brian's head. One other student was certainly there: little Joseph Thomas – his Indian name was unpronounceable – and his four feet ten inches or so was specially decked out in a borrowed silk topper and frock coat, both far too big for him. His seniors had warned him that his chances of ever becoming a graduate would be remote should he insult the University by deliberately absenting himself from such a function.

The second event seemed on the face of it even less likely. I was plucked out of Medicine to join Arts in Moliere's "Les Precieuses Ridicules" in the original French. Professor Savory heard my execrable accent only at the dress rehearsal, and by then it was too late to do anything about it.

Our social lives were developing. There were meetings of the Belfast Medical Students' Association to be attended. We did our share of speaking at the Literific. At 11 o'clock and in the afternoons we drank tea in the Union, a mighty forum for all sorts of discussions between the sexes and the faculties, when, as has been said, "The students begin to educate each other." Every Faculty gave a dance. Medicine ran not only to one of the B.M.S.A., but one for most years as well. We soon realised our obligations. We had no funds to back us, and no experience to guide us. Someone called a meeting at the Bear. This was not a pub, but a real, though stuffed, creature in the big zoology museum. We took it all terribly seriously. There were tickets and programmes to be printed: someone had a cousin in a printing firm. There were paper hats and streamers to be got: someone else had a friend. A band: someone actually played in one. There were to be paper fans for all the ladies. There were the Matrons. These poor ladies were the wives of the relevant professors. They, with their menfolk, and armed with a large box of chocolates, were destined to play bridge in a corner and give an air of respectability to the proceedings. It proved a great success. We cleared over £20, a phenomenal sum in those days, and it kept us secure for the rest of our student enterprises. Perhaps, most of all, we got to know each other better, what would be called these days, I suppose, integrating our personalities.

The examinations for physics and chemistry were held at Easter, and for botany and zoology at the end of the summer term. We were now ready to take our places as the senior students in the dissecting room. We knew that we were no longer freshmen, and that we could afford to look with a kindly eye on those youngsters who had just arrived raw from school.

1925-26

SECOND M.B.

The opening of the second academic year, 1925–26, and which was to be devoted entirely to anatomy and physiology, was the point where we were finally separated from the other faculties as far as work was concerned, but the close relationship was still retained with other students in the general life of the University. It was also the year when we all realised that we were up against a very serious challenge, for anatomy and physiology were far the most difficult subjects to master up to that time, possibly even more so than those of the final examination. It was a year for hard work or failure, perhaps both.

ANATOMY

We had already made a start on the dissection of the arm and leg in our first year. Now the rest of the body, including the brain, had to be mastered. It was from now on that we got to know Thomas Walmsley, the Professor. Another Scot, he was as different from James Small or Gregg Wilson as could be well imagined. A rather solitary bachelor, he lived in digs in the fastnesses of Ulsterville Avenue. I

had for long been familiar with his rather swarthy appearance, his dark overcoat and his white muffler as he came through the front gates of the University each morning, never failing to raise his bowler hat as he passed the 1914–18 War Memorial. His shyness I long mistook for unapproachability and coldness, yet he could open up when with only a few students at a time. His popular lecture called “A Basket of Bones” was a delightful description of the monks of the monastery at Mahee on Strangford Lough and their Danish persecutors, unpromising as the subject might have seemed.

While he tended to bury himself in his private room, giving what I feel was a quite false image of austerity, it was far otherwise with his lecturer. Dickie Hunter was as ebullient as Tommy was reticent. Small, bald headed, neatly dressed in black jacket and striped trousers with a bow tie, he rushed round the department at high speed radiating energy and enthusiasm. He had had a chequered career. He was born of sugar-planting parents in British Guiana, and had come home to Ulster to be reared by relatives. He had been apprenticed, with much distaste to himself, to the drapery business, but had made his escape to become an Art student in Paris. He used to delight us with tales of his time there: with how to choose a good restaurant – the kitchen should be small, almost non-existent. It should be dirty and untidy. No English should be heard. In the evenings from his Montmartre rooms he could hear the couriers coming round with batches of tourists and saying, “This is the artists’ quarter. It is dangerous to come here at night”. He afterwards qualified in medicine at Queen’s, thus following in the footsteps of an uncle, and was now the Lecturer in Embryology. His training as an artist had stood him in good stead, and his theses and articles were always beautifully illustrated by his own line drawings. Though a true son of Ulster, he had the gestures of a Continental, and when he was discussing embryological changes his hands and fingers wove in and out like a combination of knitting needles and serpents. More of him later.

Again, we must descend to the basement. Here presided James Hamilton, once a medical student according to rumour, but who now tended the bodies and specimens. He always looked as though his spiritual home was the nether regions, and that he was merely surfacing for air. He wore a long blue coat of the type favoured by warehousemen, and it was always redolent of the mortuary. He looked on life with a decidedly jaundiced eye and he seldom shaved. Inside this unprepossessing exterior was a mind that knew its topographical anatomy as well as the professor, though without the trimmings. He was, in fact, an excellent teacher, and few students ever expected to pass the second M.B. without taking his grind. He seldom failed to tell us the views of Professor Fawcett of Bristol on special points. I will never forget the day he stopped and spoke to me. “Mr. Strain, I see you are a candidate for the Symington Medal examination”. He said no more. A stream of sputum directed with uncanny skill into the corner of the room summed up his opinion, and with accuracy too. Hamilton’s great contribution to the department was his beautiful series of preparations of developing bone. He had evolved a special technique which converted cartilage into a hard substance as clear as amber and which would stand the test of time. Most of these specimens were lost in a fire in the anatomy museum, and although he published particulars of his method, no one was able to reproduce his results.

He was not without his understudy, Jack Skillen, whose reminiscences centred largely round his experiences with the Camel Corps during the 1914–18 war.

For students, work in the dissecting room was long and tedious. It was fitted into odd times before, between and after lectures, yet in some ways it was a strange comradeship, with perhaps as many as twelve people likely to meet round any particular body from time to time to talk about more than anatomy. A change took place about this time. The older students were still wearing filthy aprons which might or might not have been washed once a term. Now the white coat was coming into its own. This did its own shouting when cleansing was necessary, and the place began to look more like a scientific department and less like a morgue. It was still possible to find the odd student who could be sent in to the Professor to borrow his left-handed hammer.

Tommy Walmsley’s lectures were, as I realise now, far better than we deserved. I can still hear rousing renderings of “All the little Angels” and “Rolling Home” as we waited for him to begin. He would come into the lecture theatre, punctual to the second, and place his gun-metal watch on the desk in front of him. Order was usually absolute, but an alarm clock could still be hoisted to the ceiling in the pelvis of the skeleton to go off in mid-lecture. At any such interruption Tommy would stop and look up

at us over his steel framed glasses. "Such a disturbance", he would say, "would not be tolerated in any GREAT university."

PHYSIOLOGY

Two more Scots presided over the Physiology Department which at that time included bio-chemistry. Again, they were quite different from the others. The Milroys came, I think, from the Borders, and they were Edinburgh graduates. Both had also studied for some years in Germany, and their fluency in that language may have accounted in part for their English. "One would like to introduce one to one's brother John". T.H. was the Professor of Physiology, and his younger brother, always known as Doctor John, was Lecturer in Bio-chemistry. Even when he attained the newly- created J.C. White Chair he was still called Doctor John. They lived with a third brother and two sisters in Queen's Elms. Their house was the last in the terrace, so that the front door was actually in Elmwood Avenue. It was strange to hear them in the mornings when, in the middle of some highly technical conversation, they would suddenly bid each other good morning. Perhaps there was strict silence at the Milroy breakfast table. T.H. had odd ways of expressing himself, and had infinite powers of circumlocution. Some years after the events now being described took place I was working in the basement of the department when he came in looking for his lab man and, with a friendly prod on my shoulder, announced, "Oh Millar, it's not you!" Again he once stopped me to say, "Oh, by the by, Doctor Strain, if you were Doctor Gillespie, what I would advise you do, if I were you, would be the following". Certainly his most disconcerting comment, when informed of the result of some experiment, would be, "If what you say is true, it's very interesting". These remarks perhaps give the impression that he was a bit hard on his juniors. This was far from the case. Both Milroys were invariably kind and considerate, and every year saw student parties in their home.

As second year students we saw little of Doctor John. If T.H. was brisk and bustling, Doctor John was quiet and retiring. His sad brown eyes reminded you of some patient dog, and he was much handicapped by an artificial leg and by some degree of bronchitis.

Their senior technician was Harry Millar, a Cockney who had worked for Sharpey-Shafer, and Harry's son bore this uncompromising Christian name as the result. He used to live in the Hamilton Tower, where the War Memorial Gates now stand. He was usually much better dressed than either of the Milroys, who were generally sensibly attired in good Border tweeds, and he was often mistaken for the Professor by visitors. Jack Skillen would look out from the Anatomy Department. "There goes Harry Millar in his clawhammer coat!"

They had another henchman deserving of mention. This was John Pennington Irvine who spent his entire day washing test tubes and flasks at the window of the former physiology laboratory facing the former Students' Union. But while he was so occupied he was composing poetry which he would afterwards write down, so that he had several books of short poems to his credit, including one published posthumously on the early Saints of the Irish Celtic Church. He eventually became a University Library assistant.

Physiology was to me more interesting than anatomy. It dealt with the normal processes of things that were alive. Even frogs' legs and smoked drums showed things at work. Ironically enough, it was a more strictly anatomical subject that gave me the greatest pleasure in the Physiology Department: histology. The extraordinary beauty of the microscopic appearance of the various tissues fascinated me. I was reminded of the great brass plate in the art room at Inst., with its inscription containing every letter of the alphabet. "The exquisite beauty of Jehovah's work declares amazing power".

STUDENT AFFAIRS

Though there was plenty of social life, and we took the running of a dance in our strides after our earlier experience, I have little recollection of anything but hard work in that second year. There are no short cuts to the amount of information to be gleaned and retained in the study of these two vast subjects. As summer approached, with its prospect of long professional examinations in mid-June, the pressures became harder. I never was one of those people who could get up early to read, but I could go on into the small hours. I used to go out for a breath of fresh air at perhaps 1 or 2 in the morning

before trying to get some sleep. It was not at all unusual for me to find some of my contemporaries on the same ploy under the chestnuts and limes along the front of Queen's. In those days all the student lodgings were in the immediate precincts of the University. The only official accommodation was that provided for women students in Riddel Hall.

The testing time came at last. There was the scuttle round the dissecting room for the anatomy spots. I never hear one of those little bells that you strike on top without thinking of it. I still remember going into Tommy Walmsley's room for my oral. "Go over to Professor Patton", he said, "and he will scold you for having done his half of the paper so badly". It did not sound an auspicious start. When the extern examiner handed me an innominate bone, and asked me about the muscular attachments, it was some comfort to see that they were all clearly written on it.

Anatomy and physiology had both to be passed at the same time or it meant a resit the following Christmas. It was all over at last. Most of us were through, but some good friends had not been so fortunate.

1926-27

BACHELORS OF SCIENCE

It was not as common in those days as it is now for a student to stop his medical studies at the end of his second year, and read for an honours B.Sc. in embryology or physiology. Our friends Bill Hamilton and J.S. Baxter had both done this the previous year. Both were to end up with Chairs of Anatomy. Five of us were allowed to stop that year, 1926-27: Amelie Loewenthal, Dixon Boyd, Reynolds Morton, Norman Townsley and myself. I was sorry to lose Joe Gray, my old partner of Inst, and the dissecting room.

We five were to have a wonderful year which none of us would ever forget. Officially Reynolds Morton and I went to the Milroys, and the others to anatomy, all with subsidiary inroads into vertebrate zoology. It would be far truer to say that the five of us migrated, lock, stock and barrel, up the steep stairs to Dickie Hunter's lab., an adapted attic under the rafters of the old medical building, with its commanding view over the quadrangle. It was a wonderful place. It was rarely clean, much less tidy. An old iron gas stove roared in the middle of the room, and in front of it was an enamel basin full of filthy water and old cigarette butts, for, though Dickie did not smoke, nearly every one else did. In addition to microscopes and microtomes the benches were littered with every kind of specimen: hydrocephalic and anencephalic foetuses, dead monkeys and chimpanzees, sometimes with the unmentionable stench of things macerating, though these were generally relegated to the roof. There was at one time a dead hedgehog. It had not been dead long, and had earlier caused dreadful havoc by climbing up the sleeve of my white coat while the sleeve was still occupied. At one end of the lab. there was a spot set aside like a miniature kitchen where Davie Mehaffy poured wax plates in an inferno of smoke and smell, but with little enthusiasm, when he was not as usual in the small photographic dark room or absent on some pretext or other. Another very dusty slice of the room was curtained off for microscopic projection. In spite of all this Dickie always seemed able to find anything he wanted. On the walls beautiful large photographs of Primates from the London Zoo vied with more lurid anatomical caricatures from Dickie's Paris days.

This lab, was a focal point, THE focal point, for much medical activity. Exiles like the V.C., Jack Sinton, returning from abroad, were attracted to it like bees to honey. All the news, all the gossip, and it was extraordinary how little of it was malicious, seemed to get here sooner rather than later. Early on we thus met lots of people on a familiar and personal level who were to be our clinical teachers later. Here was organised the rag to celebrate Tommy Houston's knighthood. I remember that we got a suit of armour for him, and when trying it on I was almost carried bodily down the stairs and into the dissecting room. We togged ourselves out in enormous bags of butter muslin covered with red and blue spots and large irregular blobs, so that eventually Tommy, who enjoyed the whole thing thoroughly, said, "Ho! Look at the polymorphs." A large dragon with fiercesome movable jaws had been constructed in the basement of the Students' Union to hold about a dozen lads inside, and this he eventually slew with a syringe at the front of the City Hall.

The work was interesting. It was more what would be called today "in depth" than anything any of us had undertaken before. Each of us took on some extra task on the anatomy side. Mine was the reconstruction in serial wax plates of the heart of an embryo turtle. On the bio-chemical side I remember the jeers of our embryological colleagues when Reynolds Morton and I, after many hours of hydrolysis and purification, produced a few milligrams of cystine from about a bucketful of human hair sweepings.

Like his brother, T.H., Doctor John was a canny Scot who could hedge his bets. Once, in the course of what he used to call "a little theory", which meant a two hour stretch of almost pure dictation, he propounded some doctrine long since forgotten, and ended up, "The recorded facts are so much at variance, and the experimental evidence so conflicting, that one hesitates to formulate a hypothesis which must inevitably prove to be incorrect." And then, as if he had been over-rash, he added, "Of course, these views may subsequently be found not to be incompatible."

And so it goes without saying that the two brothers were most scrupulous in their work. T.H. was a world authority on the bio-chemistry of muscular contraction, and Doctor John had a special interest in the pentoses. It was during this period that we really got to know Flo Beattie. She had stopped medicine to take the B.Sc., and had stayed on in the Bio-chemistry Department as demonstrator. She was a distant cousin of mine, and a very nice one too. None of us knew that she was to become Mrs. Reynolds Morton, or that Amelie Loewenthal was to become Mrs. Dixon Boyd.

The Bio-chemistry Department introduced us to another set of students. These were the graduates who were taking the B.Sc. in pathology and bacteriology. I don't know where the expression "post-graduate" comes from. You are either an under-graduate or a graduate. A post-graduate must be either dead or struck off the register for some form of malpraxis.

There were the usual diversions. We had a splendid Christmas party in Dickie's lab. complete with tree: a left-over from the Chemical Society. There was an inter-university debate in the Great Hall interrupted frequently by a somewhat alcoholic Artsman who, on at least two occasions, stopped the proceedings with a hesitant but clearly well justified declaration. "Unlike my friend Mr. Hanna, I am not gifted with the powers of forensic discourse." There was the rag in which Winston Churchill was taken through the streets of Belfast on a jaunting car pulled by students in Paddy hats. There was the debate in town in which vivisectionists and anti-vivisectionists found themselves in bitter wordy warfare, not only with each other, which was bad enough, but with the British Israelites, before it was discovered that both meetings had been booked for the same room at the same hour.

Examination time came round at last. About a fortnight before it was due to begin I went down with influenza, and I sat the exam, "contrary to medical advice". I got a second while the others all got firsts. I expect I was only good for a second anyhow. It seems unimportant now, but it nearly broke my heart at the time. In the less trying atmosphere of the graduation ceremony, followed by the garden party with its traditional strawberries and cream, I soon recovered. We were received by the Chancellor, Lord Londonderry, accompanied by Lady Mairi Stewart, then a little girl with bare knees and short socks, who was deputising for her mother with enormous dignity. There could be no more delays in setting out on our clinical years.

It is at this point that I would like to see a change made in the manner in which the Hippocratic Oath is taken. At Queen's this has recently been administered in a mutilated form to medical graduands, together with an oath of allegiance to the University, which is not taken by the rest of the assembly. I feel that there should be a Hippocratic Ceremony, possibly conducted by the Dean of the Faculty, before a student enters on his clinical work. It is at this stage that he may unconsciously make mistakes of confidentiality which he is much less likely to make by the time he qualifies as a doctor. By that time he should be dyed in the wool, or no Hippocratic admonitions will reform him. It could also be taken with propriety by any other para-medical workers to whom its ethics, if not its details, apply.

1928-28 saw us back in the Faculty of Medicine. We five had lost our place in the order of things, and were now of those who had been our juniors in the dissecting room. It was not all bad. True, we had lost touch to some extent, indeed had done so a year previously, with those who would otherwise have been our exact contemporaries, but some of our friends who had failed their 2nd M.Bs. had now caught up with us again, and the new friends we were to make were of the stuff to provide Belfast and beyond with an extraordinary and disproportionate number of consultants. They were a year that worked and were not ashamed of it. "Swotters" were rather frowned on by much of the student corpus in those days. Our status as graduates was rather odd at times. Sometimes our embryology would be better than that of our teachers. Sometimes our bio-chemical methods were more modern. It was almost embarrassing at times to know that some of our seniors were being cautious in their dealings with us. Socially, too, we had some advantages. We were never to lose our base in Dickie's lab., and we were thus in touch with much that went on in the Faculty unknown to the others. It was about this time, too, that plans were afoot to launch the Queen's University Association. The prime movers were Dickie Hunter, W.B. Morton and George Thompson. It was to start off with a dinner. It was, of course, my first experience of university dinners. The High Table was on the platform of the Great Hall, and the place was well decked out with flowers and potted plants. The chief guest, if that is the right word for the Chancellor of the University, was the Duke of Abercorn, referred to on the Latin menu prepared by R.M. Henry, Professor of Latin, as "DUX ABERCORNENSIS." I have only once been called ducks myself, and that was during the war by an irate woman porter on the platform of Euston station. It was a very splendid event well stage-managed by Dickie, and replete with a magnificently uniformed toast master. It was amusing to see some of the senior members of staff following the ancient advice of Horace: "DULCE EST DESIPERE IN LOCO", of which I suppose a free translation might be "To Hell with restraint". It was a successful launch, and the Association is now, of course, a well established part of graduate life at Queen's.

The year ahead of us seemed likely to prove easier than either of the two previous ones. There was time to socialise a bit more. There was the Dramatic Society. Amelie was by now the leading light from the medical side. I was never on stage again after the Moliere fiasco, but I could help on the sidelines with the erection of stage scenery and with ushering when the big nights came. There was the night at the B.M.S.A. when a certain Queen's graduate, who had made a name for himself in London, came over and gave us a lecture on muscular contraction. In the course of the subsequent discussion, and in reply to a question from Tommy Milroy, he told him he could not be aware of recent work on the subject. He has been known to ask why he was never invited back. There are a lot of people who could tell him. There were the debates in the Literific. There were the revived Queen's Jesters, of which our friend Dickie Hunter had been an earlier member, but here again the best I could do was "ush". There was the occasional lecture to be missed while we went roller skating at the Plaza. "Three Sessions Daily" was what they advertised, as "Punch" duly noted, and it was often all too painfully true.

From this time onwards our mornings were to be devoted to clinical medicine. Daily Aileen Kennedy, my next door neighbour, and I would set out from University Square. We were then met by Amelie Loewenthal and soon by others, and by shortcuts through back streets and alley ways made our way to the Royal Victoria Hospital. There at first we attended fixed classes. Some of us had already done our dressings during the summer recess. To a large extent this was a case of the blind leading the blind. We dealt with cuts and bruises and all the ragtag and bobtail of the extern virtually without guidance. Huge varicose ulcers were considered neglected if they were not dressed daily. At that stage, whatever our subsequent history, we must have been a raw lot. After that it was what lay people call "Walking the wards". I have heard medical people use this expression. Our teachers were many. If those through whose hands we passed at various special hospitals were added to the staff of the R.V.H. it would be a total beyond my endurance to record or anyone else's to heed. I tried to make a start with some very important names, but found there was no point at which in fairness I could stop. That is why I have tried to make the strictly University aspect a dividing line. If you mention A, then you must mention B. If you mention B, then ... Well then you are soon lost.

But while we were attending our first hospital year at the Royal, we were still daily at the University for lectures and the student life that went with that close contact. The first hurdle to be crossed was what was commonly called “the two wee ones”. These were hygiene and public health together with medical jurisprudence and toxicology.

HYGIENE AND PUBLIC HEALTH

William James Wilson was the part-time Professor of Hygiene and Public Health. He was also responsible for much work for the City, and the Municipal laboratory was thus on the top floor of the old Medical Building. This very quiet and modest little man had an international reputation for his work on the laboratory diagnosis of typhus fever and for the Wilson and Blair medium for the culture of typhoid organisms. Perhaps not unnaturally, he took a poor view of his subject being called a wee one. It was quite interesting to visit the entrails of a big city and see how it all worked. Kitchens of various establishments had their own contributions to make, some for their extreme cleanliness, some for their notorious lack of it. There was, too, the tale of Italian Para-typhoid Mary, who kept her old-fashioned ice cream freezer under her bed. His lectures were given in the late morning. Stormont was under construction at that time, and the Northern Ireland Parliament met in the Assembly's College. We reduced Billy James to a state of exasperation by standing up each time the national anthem was played at the opening of a session when the Governor was present. I think there were four performances each time: when he entered and left the grounds, and when he entered and left the chamber. W.J. became so infuriated with us that at last he complained, “If you must stand up, for goodness sake stand up straight” a difficult feat in a lecture theatre.

MEDICAL JURISPRUDENCE AND TOXICOLOGY

The teaching of Medical Jurisprudence and Toxicology was in the hands of Sir Thomas Houston who held the lectureship. He was a wonderful little man. Simple and unassuming, he would always go out of his way to be helpful, as many of us can recall from the days when we were housemen in the Royal, usually late at night when he would come down from his lab. to the wards to see a difficult case. He was a personal friend of the great Sir Almroth Wright, and was a pioneer of haematology and clinical pathology. In spite of his great popularity, there were many who were not prepared to endure his lectures. The early afternoon was his time. He was a chain smoker, and I remember him making the most of a last inch outside the door of the medical building. “Look, Strain”, he said. “There a very funny thing, d'ye see”. This was a string of lads jumping from a nearby first floor window. It was the vanguard of his own class who had signed in and were making their escape to the Union. He lectured in the old Midwifery Theatre. This was constructed with some ten rows of seats at the front and on the level, while those at the back were tiered. One afternoon, while we were all seated in the back part, with the front entirely empty, Jock Lord and Dixon Boyd raced each other from the back row to the front and back again, sometimes over and sometimes under the benches. Not even when they were sitting right under Tommy's nose did he notice them.

PATHOLOGY

Pathology presented us with another ordeal to be faced. Like the first day in the dissecting room, there was the first post mortem. Once again, would you be sick? Would you faint? I remember old Brennan, the P.M. room attendant. It was generally understood that he was a disappointed man, having failed to get the job of public hangman. At one of the very first P.Ms. we attended he scooped up a lot of stuff from an open and steaming abdomen, and held the stinking enamel mug under the professor's nose. “Pus, Sir”, was all he said. It was more than some of us could take.

In Professor William St. Clair Symmers we were to meet yet another sort of Scot: a man born in the Carolinas and sent home to be educated in Aberdeen where he graduated. Tall, dignified and erect, with steel grey hair, his eyes hidden behind blue tinted glasses, he was well known to every student in the University. His approach was often heralded by the aroma of a good cigar. His lectures were short. He rarely exceeded 40 minutes, but they were beautifully delivered, and often lightened by reminiscences of his experiences in Egypt. I never knew of any disturbance, yet it is he who is credited with the famous remark, “Gentlemen, I have still a few more pearls to cast”. Though his manners were almost of

an old world courtliness, he always addressed his class as "Gentlemen". Once in a practical class someone dropped a culture of anthrax. He turned to his lab. man. "Steeven, my hat". He was not seen in the department for weeks. He was due to retire at the end of our year. With the connivance of Steeven, we stole one of his pipes and had a case of them specially made. They had a curved stem and the bowl was flat so that he could put them down or pick them up from a lab. bench without touching them with his hands. The presentation was made at the end of his last class by Aileen Kennedy. "Gentlemen", he said, "I appreciate very much the shape of these pipes", and he turned on his heel and left the room. None of us could look his neighbour in the face. He was the Dean, but above all he was a much loved man who could be approached by anyone in a real difficulty with the assurance of understanding and help. In the event, his tenure was extended for another year, though none of us, himself included, knew this at the time.

Bacteriology was a sort of subsidiary subject tacked on to pathology. Norman Graham was the lecturer. Why he was always called "Hyphae" I have no idea. Once, I am sure by a slip of the tongue, he referred to "cattle, rabbits and other bovine animals", and for some strange reason this was remembered when his Military Cross was forgotten.

MATERIA MEDICA AND PHARMACOLOGY

Materia Medica with Pharmacology, to which was added dispensing, was a strange mixed bag over which the shadow of the great Sir William Whitla still seemed to brood though he had long ago retired.

It must have been about this time that my father asked me to return a book to the old man. I had known him since childhood, and the butler showed me to his bedroom. By then he was a truly patriarchal figure as he sat wrapped in a dark dressing gown in an armchair before the fire. That night he was a study for a Rembrandt, the light falling on his bearded face, the great bible on the table across his knees, a table littered with all the paraphernalia of the smoker: cigarette tins full of pipe cleaners, gadgets for trimming cigars, a little pipe that would have held nothing bigger than a cigarette butt, and maybe did. "Put it down somewhere" was all he said when I had introduced myself and had produced the book. "Now, my boy", he said, and gave the bible a great slap, "I'm reading about the Gadarene swine". There was a long pause. "Now, you know the Jews didn't eat pork. What were the swine doing there?" Another long pause, this time by a rather bewildered medical student who had never given the Gadarene swine a thought except to consider that their lot in this world had been a sorry one. "They were there for the Roman Soldiers".

Sir William's writings had made a world-wide reputation for Queen's, and it was perhaps natural that in the Department of Pharmacology and emphasis should still be on materia medica. The result was that there was a part time chair in that subject held by a clinical consultant physician, while the full time lecturer in pharmacology was an academic. This latter was Bryce Mayrs. He was addicted to fast cars, and as he had only one arm it is perhaps as well that roads were not as congested then as they are today. In spite of this, he could make isolated frog's heart preparations with one hand that most of us could not do with two, not even with an assistant. He bore the nickname "Physo" for physostigmine, though why this particular substance had the honour is obscure. He had a peculiar inspiratory tick while lecturing, "Caffeine", he would say, with a sharp in-drawing of breath, "causes mental confusion, due to the too rapid flow of ideas." I am afraid that his were the lectures that suffered most from those skating afternoons at the Plaza. Should you have reason to enter his room, you would find his table littered with sheets of foolscap covered with the most abstruse mathematics.

The part-time Professor of Materia Medica and Therapeutics was John MacIlwaine. He was a tall stooped man with a deep voice and a venerable bald head that belied the fact that he cannot then have been more than in his late fifties at the most. He had done everything. Coming from a Belfast ship-building family, he had sailed before the mast. He had lumberjacked in Canada. He had played Rugby for Ireland. He had been a pioneer of electrocardiography with the R.A.M.C. in France. He was now very much the fashionable medical consultant with his own wards in the Royal, and his University duties were a status symbol rather than any serious source of income. I think the major part-time clinical Chairs at that time carried a salary of about £400 in those days, and his share was probably half that. He took us slowly through the whole pharmacopoeia. Many were the strange concoctions of

which all he said was, "An elegant preparation, and is used", I had the good luck to be his last resident pupil in the Royal. He was a most tolerant, patient and helpful boss. Blindness overtook him, and his life was to end tragically.

The light relief in the department, and indeed in the whole Faculty, was beyond all question provided by Doctor Victor George Leopold Fielden. He had been a pharmaceutical chemist before taking up medicine, so it was to him that was allotted the task of teaching dispensing: the bottles, the frilly caps for corks, the sealing wax, the red string, the white paper. That he was a popular man did nothing to prevent the full exploitation of the fact that he could no more keep order in a class than he could fly in the air. I can still see his tall upright figure, his neat Naval beard, his bright blue eyes, his gold rimmed glasses, standing in the middle of the room waving his arms. "Someone has hit me on the head with a suppository". Someone else was busy powdering his back with the shaker used for dusting pills. "Pills! Pills! Them's not pills, them's horse balls". I recently saw one of the old pill machines in an antique shop. There was, too, the day when we brought a partially dismembered wheelbarrow full of grass cuttings into the room and then reassembled it before he came in. "If this thing came in it can go out", he declared, but such was not the case as subsequent events all too clearly demonstrated. After many of these episodes he would give up in despair and exasperation. His last word was usually the same. "You're making a common cod of me!" He suffered in other ways too, with much, but fortunately brief, loss of temper. One day at the R.V.H. he parked his car against a telegraph post. Someone simply strapped the two together. Another time two jacks were put under his back axle. Once when he parked his car in the old parade ground at Queen's someone discovered that the roof of the car was just about an inch higher than the eaves of the bicycle shed under the medical building. It was considered well worth the effort to let down the tyres, push the car into the bicycle shed and blow them up again. Of his teaching, all I can remember is that "A good dispenser is a quick dispenser, but it does not necessarily follow that a quick dispenser is a good dispenser." He afterwards tried to teach us anaesthesia at the R.V.H. with results that I can only call parallel chaos.

There were too, some memorable words of practical advice.

Rhubarb, ginger and light magnesia Makes the baby purge to please you.

When you want a regular starter Give jalap, ginger and cream of tartar.

When you want to stop the flow Give opium, catechu and kino.

The specimens in their glass jars from the pathology department, the bottles with oak galls, quassia chips, the scale preparations of iron and all the rest of it from pharmacology, the fly blister to fit behind the right ear that had so shocked poor Victor when it was found to be for the left ear: all these must have been taped somewhere among the ganglia and the neurones, so that now, having been long forgotten, they pop up again with the associations that go with them.

I think we nearly all escaped the examination net into the more practical world of clinical medicine.

1928-30

THE FINAL YEARS

While clinical work began with the 3rd year course, it was only in the final year that students ceased to have any teaching at the University, though we remained as closely as time permitted with social affairs at Queen's. There were no examinations to be taken in the fourth year, and so we had a reprieve for a space. The main mark the year was to leave on student life was the publication of the first edition of "Pro Tanto Quid". It started as a really funny production, and did not take on its abysmal fall in taste for some time. I think its real founder was Terence Montgomery of our own year, but it was an all-faculty business. Its object was to supplement the funds raised for charitable purposes by the annual student day rags. Many of us had time to take a more active part than formerly in the affairs of student societies. Amelie Loewenthal was President of the Women's Students' Hall. James Smiley was President of the Literific. Reynolds Morton was deeply involved in the Swimming Club. Conrad Stevens was Captain of the Athletic Club. I was Secretary of the B.M.S.A. and Medical Secretary of S.R.C.

As secretary of the B.M.S.A., one of my duties was to organise the annual smoking concert. This had a notorious reputation for the telling of stories by members of the clinical staff, stories whose hygiene,

morals and ethics were, to say the least of it, well below the umbilicus. I remember that practical joker, Fred Jefferson, getting to his feet and announcing that, thanks to the generosity of Sir Thomas Houston, there were twenty cigarettes for everyone, and that Billy Strain had them at the door. I was nearly killed in the stampede that followed. But there was worse to come. To our horror, Sir Richard Livingstone, the Vice-Chancellor, and a very much better one than the students of the day either appreciated or deserved, accepted an invitation to attend. He sat huddled up in his overcoat, and as the tobacco smoke and the stories thickened he slipped lower and lower into his muffler. I was sent for the next morning.

These were the years of resident pupilships. This was compulsory for midwifery. The attractions of the Rotunda in Dublin had to be foregone for all but the bravest. It was as much as your final was worth not to take out your cases in Belfast. Six of us spent a month in the old maternity hospital in Townsend Street, or, rather, in the little house opposite it which was the university residence. We all were to have happy memories of the housekeeper, Mrs. Moorehead, who hid oranges for us in our wardrobes, and smothered us generally with many small kindnesses. My own room was so small that I could turn out the light by applying my foot to the switch in the opposite corner without getting out of bed.

District midwifery by students in the small working class houses round the Townsend Street area was an experience in itself. Two students attended each case, but could send in for help if there were unforeseen complications, when a house surgeon would come out and take charge. Before we had done any cases ourselves we had all been told of how you might have to be in bed with the patient if you had to give her an anaesthetic. I don't think we really believed this. I know that when I was reminiscing to students on this point myself I was not believed either. Now I was to see it proved. The modern student, the modern mother, is more fortunate. Those were the days of the rag and bottle: ether and chloroform dropped on a wire mask covered with many layers of gauze. Bedrooms were tiny, and when a doctor had laid out his obstetric kit among the basins of hot water and heaps of newspapers that already littered the place, the only room left was on the bed beside the patient. There you sat, cross-legged like a tailor, with your anaesthetic things beside you. It worked, but why nothing caught fire goodness knows, for the room was generally like a furnace in preparation for the great event.

I remember the Saturday night when the six of us were fed up with waiting for cases that never seemed to turn up. Why we decided that what was needed was a good feed of fish and chips I don't know, but we each subscribed sixpence, and the lot fell on me to make the necessary purchase on the Shankill Road. Three shillings bought an immense quantity of this homely repast. We ate and ate without seriously diminishing the vast heap of chips. Finally we hit on a plan for disposal. First we planted a spy in the labour ward. Then we made up a parcel, a nice oval parcel about 18 inches long and 5 or 6 inches thick. This we set up against the front door of the hospital, rang the bell, and withdrew to the coign of vantage of our own dining room window. A junior nurse opened the door, picked up the still warm parcel, dropped it like a hot brick and shut the door on it. The spy duly reported that she had told the labour ward sister, who had scolded her for daring not to bring the parcel in and sent her back to fetch it. This time it was carried up gently to the labour ward, placed on one of the couches and opened with the utmost care. Our spy ran out of words to describe the subsequent scene.

Pupilship in the Royal Victoria was a different sort of apprenticeship. We were much more intimately involved in the work of the wards to which we were attached. We did test meals, we did bloodcounts, we gave anaesthetics for the night emergencies, we did all sorts of things now done by housemen or in laboratories. We willingly worked long hours and were seldom abed before one or two in the morning. This was the opportunity to see patients on admission, and to examine them in acute states not possible on an ordinary ward round with the chiefs. We saw all the work that went on at night whether in our own wards or not. It was a perfectly splendid fellowship. It was not compulsory in those days. It lasted for three months, and as there was not room for all, there was great competition to get a place. In surgery I had the good fortune to be pup to Professor Fullerton with Bill Hamilton as houseman, while in medicine I was Jack MacIlwaine's last pup and Boyd Campbell's first with James Baxter as houseman. Recently in some ward I asked a white-coated youth if he was the pup. With a perfectly straight face he said, "You mean the resident pupil, Sir?"

How memories can flood back when the deliberate attempt is made to recall those days! I suddenly see the distressed face of poor Kate, the maid who looked after us with such care in the East Wing mess when she found that her favourite aspidistra had been well dosed with H.P. sauce. After having forgotten it for years, I now recall the bitter indignity of Dixon Boyd and myself having our bedclothes ripped off by the extern surgeon to expedite our arrival at casualty if there were no non-resident students available at the time.

One of the great treats, generally reserved for the housemen, but sometimes enjoyed by the odd pup, was supper with Tommy Houston. The great Sir Thomas would come down from his lab. in the King Edward Building about midnight for sandwiches and tea to a little room beside the original front door of the hospital. He would tell us stories of his own student days in the old Frederick Street hospital. There is really nothing new under the sun, and it was easy to understand his attitude to our own juvenile follies. He would put his sandwich down on his knee as he spoke, taking care to cover the knee with the tail of his white coat. This he also reserved for removing what may be euphemistically described as foreign material from microscopic slides. It seems a pity to leave out some other tales of the much loved Tommy. It was a sight to see him arrive in his lab. He would place his bag precariously across the very corner of a bench. Then he would take off his coat and replace it with a white one. Next he lighted a cigarette if one were not already IN SITU. Then he would go to an incubator and remove something, meanwhile putting down the cigarette. Then he would light another cigarette. The next task would involve parking that cigarette. He might have three or four going at once beside microscopes, incubators, distilled water containers and so on. Only later would he remember that he was still wearing his hat. On one occasion he was sent a dead rabbit. It is recorded that he and his sister enjoyed it very much as a stew. A few days later he got a note from a country doctor to ask what it had died of. The classic tale is unhygienic in the extreme. One night, when about to go home, Pommy noticed a strange smell in his car, and found that someone had used the back seat as a public convenience. "Look at that", he said to Hugo Hall, who was passing. "What would you do about that?" "Well", said Hugo. "The law is that if it's not claimed in a fortnight it's yours". This is one of the stories about which it has often been said "Why does no one write it down", so I've done it at last.

Professor Symmers, Johnny Rankin and Tommy were once attending a Pathology congress in Paris. On a free afternoon they visited the Louvre. Suddenly Symmers and Johnny realised that Tommy was no longer with them. They retraced their steps and found him standing in a sort of daze in front of the Mona Lisa. They watched him for a few moments, and then asked him what his thoughts were. "I was just thinking", he said, "that if we'd used that enterococcus vaccine half the strength we'd have got better results."

Resident pupilship was a very special period, but otherwise in our first two clinical years there were regular hospital classes to be attended. Each teacher was free to talk about whatever he liked. To "clinique" was the word used. It often led to much duplication. In the final year you were much more free to go where you liked to fill in the gaps. There were the special hospitals too. We could mobilise enough family cars to transport the whole year to Purdysburn Fever and Purdysburn Mental Hospitals. Why, after so many years, do I suddenly remember a poor old soul who was brought into the class? He spent his time writing hundreds of letters to unknown people about "Sir William Pirrie's steamship Tictanic and a plate of humes and a hidden destroyer wrought with lectrician." There were the classes in the old Maternity in Townsend Street, where we sat on the stairs, on the first floor landing and even in the lift because there was no room for clinical lectures anywhere in the building.

If this tale is not to become of intolerable length and of little interest to any but the DRAMATIS PERSONNAE of our own years, I must moderate my transports, and, as I have earlier said, try to draw a line between University and non-University staff. Yet one of the delights of getting this story on paper is that you are under no restraint, and can wander off as you like even after you have laid down your own guide lines. We can wander off, as we used to do on a summer afternoon to Greymount, to watch Harry Malcolm use plaster of Paris. It was a joy to see him do this. He could put on long limb plasters without making a single splash on himself or on the floor, and we all agreed that he could have done the job in white tie and tails if necessary, like some of those cooks you see on T.V.

Should Sam Armstrong be in or out? He gave three lectures on vaccination at the Union Infirmary, now the City Hospital. You had to attend two consecutive ones or sit the course again, and a certificate of attendance was necessary before you could sit the final examination.

I have not mentioned the senior surgeon or the senior physician at the R.V.H. As I said before, where do you stop? I suppose you might end up with old Mrs. Bradley who, like the men who paint the Forth Bridge, had the never ending task of washing the main corridor. Not even the senior surgeon was immune from a swipe of her floor cloth if he got in her way.

As the months passed, life became more and more serious. Student activities were gradually cast aside, and preparation for the final examination became a grim obsession. The subjects were those associated with the Chairs of Medicine, Surgery, Midwifery and Gynaecology. Ophthalmology and Oto-Rhino-Laryngology were combined in one lectureship, for this was regarded as a single speciality at that time. It also meant a separate examination as part of the final.

So now back from the hospitals to the University: from the then universal smells of ether, chloroform and iodoform which even penetrated our ordinary clothes and identified us willy-nilly as medical students, to the old medical block, now demolished, where the aroma of formalin and strong carbolic soap from the dissecting room still reigned supreme.

MEDICINE

The Department of Medicine was in a rather unhappy state. William Willis Dalzell Thomson was the Professor, but he had for some years suffered from severe ulcerative colitis, and by our time was still only convalescent. I had known him since childhood. Tall, white-haired with bushy black eyebrows, he was a striking figure in the formal morning clothes then passing from the scene as the requisites of the fashionable consultant. He was very much in the background in our student days, and we had only one lecture from him. This was on small pox. I remember him saying to us in his characteristic slow drawl, "Better to diagnose a case of lumbago as small pox than to diagnose a case of small pox as lumbago". It was only after we had qualified that he returned to his full duties and rose to the position of doyen of the medical consultants that he was to retain for the rest of his life.

Our recollections of him are mainly of our Houseman days, and so strictly outside the first part of the narrative, but an official biographer often passes over the minor gems. A famous ward round provided a short but sparkling dialogue to some extent lost as the printed word misses both the W.D. accent and that of the Belfast working man.

"Tell me, John, do you ever suffer from breathlessness when you run for a tram?"

"No. There's lots of trams. There's only one of me."

"Well, John, do you ever suffer from breathlessness when you go up to your bedroom at night?"

"No. I sleep on the ground floor."

"Gentlemen, John's a philosopher."

The best known story about him is one he told himself, and again it loses much when not in his own unspoilt Annahilt voice. "One day a country doctor rang me up to say he wanted me to see an old lady who had not spoken for three months. She duly appeared in my consulting rooms accompanied by her still older aunt. I asked her her history, but she never answered, so I got it from the aunt. Right enough, she had not spoken a word for three months. Finally I had to examine her physically, so I said, 'Pull up your skirt till I do your knee jerks', but she never answered, never pretended she had heard. So I asked her again, Still no sign. The third time I got fed up, so I pulled up her skirt, crossed her knees and hit her with the hammer. Then, for the first time, the silence was broken. 'Sowl', said she, 'You're a boy!'" A less well known story is another told by himself. He was examining in Cork, and the candidate before him was not there for the first time. "Tell me," W.D. asked, "how do you treat gonorrhoea?" There was no answer. "Come on, how do you treat gonorrhoea in Cork? You know, the clap." There were glimmers of interest. "How do we treat the clap in Cork? We treat it with contempt."

To fill the gap made by the absence of the professor, Sir Thomas Houston had the task of arranging for a course of lectures to be given by the other clinical teachers. Looking back on that now, it seems to me that it would have made little difference if we had had no university medicine lectures. It was from the hospital teaching that we really got the best value. Here our instructors were at their best, and

indeed their bedside and clinical room demonstrations, where there was freedom for a two-way traffic in question and answer, could stand out in startling brilliance compared with their performances in the lecture theatres of the University. Many years later, Dixon Boyd, coming over from Cambridge to deliver the Robert Campbell Oration to the Ulster Medical Society, reminded me, and the assembled audience, of one of the occasions when even this channel of communications broke down. Jack MacIlwaine had shown us a case of cardiac failure. "Now then, Strain", he said, "What is the picture"? I was even slower than usual in the uptake, and I had no answer forthcoming. After a long pause he spoke again. "Well now, I'll put it another way. What is the other side of the picture?"

Why are we able to recall things like that, when we can't remember the things we should, or do the important things cease to be sparkling details to become instead a mere undifferentiated mass of clinical knowledge?

Among the lectures that were farmed out, the paediatric ones went to Rowland Hill. None of us are likely to forget the results. I remember how, after dining in luxury many years later in the official residence of Maurice Adams, by then Surgeon Rear Admiral, Malta, we both lay back in our chairs and recalled every single detail of that famous episode with roars of delight. I think our wives thought we had gone mad. Now Rowland Hill was not a man who was disliked. It was merely that he was one of those people who laid himself open for what happened. We had been a bit restive in his first lecture, and so he started the second one with the announcement that for each piece of paper that was thrown at him he would stop lecturing for two minutes, and would continue for two minutes more at the end of the hour. That was as far as he got for two minutes. By the next two minutes the forces had gathered strength. He got a chair and sat down. That went on for quite a while. In the meantime he was trying to eject those he considered to be the ringleaders, generally the wrong ones. Finally we caught him at a singularly happy point. He was talking about infant feeding, and mentioned cocoa. He was stopped at this exact moment. For some twenty minutes he said "Cocoa" at regular intervals until the clock in the quadrangle struck its routine five, when, by a pre-arranged round-robin we departed, and left him sitting there. The unfortunate Tommy Houston had to send for those reported to him. His scolding was short and to the point. "I know Rowland Hill can be very annoying, but you'll just have to thole for W.D.'s sake. Now, go." Rowland Hill can have borne no animus. He left his entire and considerable fortune for student welfare at Queen's. He could be a charming host in his own house, as his former housemen testify.

SURGERY

Andrew Fullerton was the Professor of Surgery. Though of great personality, he was a small man with a sniff. He had served as a consultant surgeon in France in the 1914-18 War and come home with a C.B. and a C.M.G. It was in my school days that he had attained the Chair, and from an upstairs window from our home next door I had been able to watch the proceedings as he was ragged by students in white gowns and masks. They formed a processional arch from the footpath to his front door, and once under the arch Andy was trapped. It was then lowered until he had to enter his own house quite literally on his hands and knees.

I can recall nothing of his university lectures except his frequent references to missiles of war: he too was at his best by the bedside or in the theatre. His experiences in France had brought him into touch with many distinguished surgeons, and they were often his guests to give us special lectures.

The stories told of him are legion. I remember myself the awful moment when he was teaching at a bedside and found Dixon Boyd looking at his watch, and the even more terrible time when after an unusually loud sniff Jock Lord offered him a clean handkerchief. He was well aware of his own importance, though I think he often spoke of it with his tongue in his cheek. "Less of Andy and more of the Colonel". When he was President of the Royal College of Surgeons in Ireland he was teaching as usual in the Royal. "This fracture was first described by Colles, the famous Dublin surgeon. I'm not sure if he was actually President of the Royal College of Surgeons, but at least he was well in the running for the Presidency so that he must have been a very great man." One day a hospital patient was trying to keep on the right side of him. "They've got a queer good word of you in Whitehead". "Yes", said Andy, "Yes. They've heard of me in Whitehead. Any day now they'll hear of me in Larne." Another time Andy

had his usual huge class round him in the ward. A little probationer nurse tiptoed in and whispered to the sister who in turn whispered to Andy. "Excuse me, Gentlemen," said Andy, "I'm wanted on the outside phone." He trotted off to the surgeon's room, for in those days there were no Post Office telephones in the wards. No doubt he had visions of a nice fat fee in the country. He was back in a few minutes with a very red face. "Yes! Yes! Is there a man called Smith in the class?" The unfortunate lad, whose name was not really Smith, stepped forward. "Yes! Yes! Your mother says you're not to go home without the fish for the tea." Other versions say it was a bottle of medicine, but fish seems the one that has best stood the test of time. All aspects of urology fascinated Andy. His discovery of diuresis on the affected side in unilateral kidney disease proved itself of great value before the days of more sophisticated techniques. One day he was doing an internal urethrotomy with only local anaesthesia. There was a sound like tearing canvas. "You saw that? You saw that? No? Watch! I'll do it again." There was another rending sound. Prostatectomies were done against the stop watch. "Give me my stool of repentance", for he had not the inches of his assistant. "Give me my curved scissors. We don't mind a little bleeding in these cases." All this does not alter the fact that this great little man did much to promote the name of the Queen's medical school, and I am very proud of having been both his pup and his houseman.

MIDWIFERY

Charles Gibson Lowry, who was the Professor of Midwifery, had come up through the hard school of general practice with its attendant domestic obstetrics. He was a thorough and dogmatic teacher, but he left many of us in dread of the subject, so great and so many were the hazards and complications that he warned us stood in the path of the unwary. "Always keep your head well flexed like the foetus in utero", he would say, "for if you don't, someone will flex it for you." When a student made some wild therapeutic suggestion in reply to a question he used to say, "Would you? Well if you did, she would go to Dr. Brown instead, and she would be right." He might even add, "I did that once myself. I go quickly past the end of that street to this day." He had some practical advice when the domestic situation became troublesome. "Give the woman's mother a quarter of morphia, and, if necessary a quarter to the mother-in-law too." Then there was his famous remark to Hilton Stewart. "Hilton, its my experience that when a man of sixty or more marries a woman of twenty or less, in six months he's dead." I remember the morning when he showed us the temperature chart of a woman on whom he had operated a few days previously. It showed a reading of 103^{oF}. He asked us what the cause might be. One stalwart with more courage than tact suggested that he might have introduced sepsis. "What", shouted the indignant C.G., "Me introduce sepsis!"

In these days there were still such things as musical evenings, especially in houses like the Lowry's, for Grace Lowry was a Crymble of the well known musical family. C.G. had just sung "Adieu, Marguerite". "C.G.," said P.T. Crymble, "Doesn't that just mean 'Goodbye, Maggie'?"

C.G. Lowry was one of the undoubted characters of the school. With his chauffeur, his nurse, his cases of instruments and his drums of dressings, he was one of the sights of University Square.

GYNAECOLOGY

Queen's was at that time unique in having separate Chairs of Midwifery and Gynaecology. The Professor of Gynaecology was Robert James Johnstone. He was my uncle by marriage, his wife and my mother being sisters. I never remember the time when he was not a familiar figure, so much so that when I became a student I was not prepared for the discovery of what an important person he was, or how much he was esteemed among his colleagues. By the time Sir John Byers retired from the chair of Midwifery and Gynaecology and R. J. was offered the post I think it is very likely that he had had his fill of night work and that was why he would only accept the gynaecological part. He had an unusually wise head. His opinion was much sought and respected not only in his own speciality, but in wider academic fields, in education and in politics. He was one of the first Members of Parliament to represent Queen's at Stormont. As a surgeon he was quick and dexterous. The great point to look for when you watched him was to see how many, or rather how few, instruments he would use. He had an ancient needle holder the colour of a bar of chocolate, and of artery forceps he often used only one. The weight that

kept his speculum in position lies on my desk. I can remember nothing of his lectures. He had an unusually deep basso-profundo voice that many said lulled them to sleep. I never knew him to lose his temper or even raise his voice when faced with a difficult situation. His great influence was among his colleagues rather than in clinical teaching, yet he was in constant demand among student organisations.

My aunt told me a story that is too good to lose. One night the unfortunate R.J. had already been out of bed for emergencies twice when the telephone rang again, and she answered. She said R.J. was out on a case. "Then," said the voice, "who is that I can hear snoring?" So poor R.J. was out again.

OPHTHALMOLOGY WITH OTO-RHINO-LARYNGOLOGY

As a university lecturer, James Craig was responsible for ophthalmology with oto-rhino-laryngology. It is worth note that at that time there were only the clinical Professorships of medicine, surgery, midwifery, gynaecology and pharmacology, each held by a senior consultant on a part-time basis. The smaller subjects were represented by Lectureships in the hands of equally senior men. Tommy Houston, for example, was very much the grand old man of the school. James Craig was in a similar leading position. Faculty had simply not the money to spend. I doubt whether these combined salaries exceeded £2,000 a year. There were other consultants who could have, and willingly would have, taken on these jobs simply for the status value. To mention names would open a flood gate. They shared in the hospital teaching, and got a nominal reward in student fees, but their only University connection was a numerically scant representation on Faculty.

Even as a lecturer, then, James Craig held a very senior place in the teaching hierarchy even if he had not the cachet of professorial status. In a narrative such as this his fame must rest not only on the sharpness of his keratome but of his tongue. While I never knew him to be anything but highly civilised, he could arouse feelings of dread in his patients, private and hospital alike. A lady crossed her arms over her bosom when about to have her eyes examined. "Madam", said James, "there is no need for the attitude of prayer." Professor Fullerton once said to him, "James, would you like to play golf with me this afternoon?" "Well", said James, "Since you put it that way, Andy, I would not." He was once fetched out to the country to see the wife of a noble lord who had got a foreign body in her eye. It was subsequently denied that he had never attended her. Some time later the butler of the aforesaid nobleman was brought by his lordship to the R.V.H. where James kept them both waiting until all the other patients had been seen. Tradition has it that he then went out to the pair and asked, "which of you is the patient?" Many years later I asked James if this was true. The first part was, but, he admitted with regret, not the second. Then there was the story of the man from the shipyards. "How long has your eyesight been failing," asked James. "Aw, Doctor, ever since the first day I went into the Queen's Island". "Of course, my friend. I remember the morning perfectly." Finally there is the tale of a student that could only have come from James himself. This candidate in the final was asked to draw a disc, and was making a very poor attempt at it. "Ah!" said James. "A Cubist I see." "No Sir. A Presbyterian like yourself." I remember that James promised you 10% as a starter in the final examination if you could spell accommodation.

THE FINAL EXAMINATION

The final examination was approached with fear and trembling. Medicine, surgery, midwifery, gynaecology and ophthalmology had all to be passed at the one time, and then, as now, the ordeal stretched out over many days. It is quite impossible for students to grasp that it is the business of a good examiner to find out what they know, not what they don't know; perhaps above all to find out if they have any ordinary common sense. During those last months and finally weeks and days there was the attempt to cram into the pint pot the quart represented by irrelevant clinical minutiae of every kind. Yet in many ways the final is the fairest examination of the lot. The real killer is the sheer physical exhaustion it causes. Four subjects, four papers, four orals, four clinical examinations involving long waits and perhaps several cases in each subject: all this was, and must remain, a severe test for anyone. It is, naturally, what all the previous years have been leading up to. We had become accustomed to dealing with patients, especially during those happy and carefree pup days. The great dread was the

thought of the extern examiners. Our ideas of these ogres, for so they appeared to us, was inevitably warped from the outset. There was only one source of what appeared to be reliable information about them: the opinions of students immediately senior to us who had already failed. Those who had passed had a different opinion about them, no doubt, but they were no longer interested in passing on such vital information. We had, for instance, heard terrible tales of F.J. Browne of Ante-natal and Post-natal Care fame. He was known to us as the tape worm, for he was about 6' 5" and extremely thin. In the event he could not have been nicer. The great Morley Fletcher from Barts was as unformidable as could be well imagined and a very great gentleman. All along we were our own worst enemies. A fortnight's continuous examinations in a hot June is an experience of which no one really cares to be reminded.

At last it was over. Queen's has always been mercifully quick with medical results. Within a few hours of the last lap we were pressing envelopes with our names on them against the window of the clerk to the University secretary. Sometimes we got an answer, sometimes not. It was only a few more minutes till the whole thing was official. We were graduands.

We were very tired graduands. For long we had planned what we would do when the great liberation came. We would paint the town red, vivid red There would be bright lights, not midnight oil. We would sup. We might even breakfast. In the event, most of us crawled off wearily to bed.

M.B., B.Ch., B.A.O.

This is not the moment to record the sad truth that for various reasons, sickness included, not everyone qualified that June. There was to be another chance in December. There is a sound Ulster expression to meet such contingencies: "To Hell with castin' up." But by the end of 1930 fifty-three of us could say that we had achieved the degrees of M.B., B.Ch., and B.A.O. The roll includes some who had failed earlier than June, 1930, and it excludes a few who were still to qualify at Queen's or to take a Conjoint examination at the Royal Colleges.

But none of this provides the statistician with any evidence either to refute or support the age-old contention that all work and no play makes Jack a dull boy.

Perhaps this somewhat flippant account of the experiences of the cohort of which I was a member gives the impression of little application to work, but I have never ceased to be grateful for belonging to an industrious year in spite of all the appearances to the contrary that the adventures of our early days suggest.

What in fact happened?

Academic qualifications are easy to tabulate.

M.B.	First Class Honours	3	}		F.R.C.S.	9
	Second " "	11	}	53	M.R.C.P.	7
	Pass	39	}		F.R.C.P.	4
					F.R.C.O.G. Hon.	1
M.D.	Gold Medal	6	}		F.R.C.Psych.	1
	Commendation	2	}	14	F.R.C.G.P.	2
	Pass	6	}		Various Diplomas	20
M.Ch.		2				
B.Sc.		7				
M.Sc.		1				
D.Sc. Hon. Causa		1				
Ph.D.		1				

Twenty people became consultants of whom five were also University Lecturers. There was one Reader in Embryology. The highest academic rung was the Chair of Anatomy in Cambridge. The Services were provided with one Surgeon Rear Admiral and one Major General.

In this summary I mention only one person by name. Alan Parke went to the Mission field in China, and in 1937 contracted a fatal attack of typhus when he carried a sick boy half a mile on his back to get him to hospital, knowing that he had the disease.

Who, I wonder, first used the expression ALMA MATER? How my thoughts recall that lovely front range of buildings of mellow liver coloured brick and sadly weathering soft cream sandstone, the chestnut trees in candle, the quadrangle on a Sunday morning when you might sit alone by the cloisters with the papers listening to the rather timid little note of the clock striking the hour from the small gate lodge of the Botanic Gardens, Thomas Andrews' rheumaticky old laburnum propped up on its crutches, the Great Hall with its memories of both scholastic trials and student gaiety: dances, debates and drama. The place fills with human ghosts, happy human ghosts going about the daily round and common task. Academic dignity hobnobs with youth. Knowledge and experience mingle with the enthusiasm of the young, as yet untarnished by the realities if not the disillusionments of the outside world.

Six years of hard work.

Six years of much friendship.

Six years' preparation for what is still, in spite of its worries and anxieties, one of the most rewarding forms of human activity.

APPENDIX to PART I

This consolidated list of those who attained the degrees of M.B., B.Ch., and B.A.O. at Queen's in June and December, 1930, has been prepared from names kindly provided by George R. Cowie, Esq., M.A., LL.B., J.P., Secretary of the University.

Adams, Maurice H.	Hutchinson, Martha E.
Adams, Vera E.M.	Kennedy, Aileen M.
Bell, Hamilton	Loewenthal, Amelie
Bell, John J.	Lord, John G.
Bisessar, Jairam	McCollum, William K.
Boyd, James D.	McCormac, James S.
Brennan, William B.F.	McCracken, William L.
Buchanan, Marian E.	McGill, James G.
Carson, James	McLean, Mary H.
Calderwood, William D.	McMath, Robert A.N.
Campbell, Samuel J.	McVickers, John A.
Clarke, Maude P.S.	Manwell, William
Collins, Herbert B.	Montgomery, Terence H.L.
Corkey, Joseph A.	Morrison, Daniel McV.
Crawford, John C.C.	Morton, William R.M.
Dawson, Donald J.C.	Parke, Alexander P.
Deeny, Sheelagh K.M.	Rippey, John J.
Devlin, James G.	Smiley, James A.
Dornan, Alford	Smyth, Robert P.
Fisher, Joseph A.	Stevens, Conrad E.E.
Gillespie, James H.	Strain, Robert W.M.
Goldring, Hyman J.	Sutherland, Jane
Governor, Smyth	Townsley, Norman J.
Greenhalgh, Arthur	Turnbull, William M.
Hardy, William I.	Wallace, Samuel
Henry, Harold S.A.	Withers, Robert J.W.
Hunter, Kennedy	

PART II

Houseman Days

When I started out to write my light-hearted account of my student days I did not know what my memory was letting me in for. Details came flooding in from what hidden recesses of the past I have no idea, and still continue to do so, so that where to stop is now the problem, not where to begin. This was one of the difficulties I had to face in the earlier part, and to some degree I solved it by limiting myself to the full time University Staff, and to the clinical people with University appointments. Others knocking at the door to come in could not be indefinitely denied, and so it occurred to me that to describe my houseman year would be as good an excuse as any to say something about them within the rather elastic framework of that wonderful time.

Between seriousness and deadly dullness the borderline can be very narrow. My deviations from the serious will therefore tend to the cheerful rather than the tedious aspects of hospital life. On the whole you will look in vain for the minutiae of clinical or academic merit, but you may find here reminders of great men you once knew, or you may be introduced to doctors who have hitherto been merely names to you, or who may appear as total strangers.

I am now very much older than any of our former teachers at the time they taught us. How do they appear in retrospect? Was X, who seemed to so many to be little short of a genius, after all nothing but a pompous ass? Did the quiet, gentle Y get as much credit as he deserved? Had Z a temper like the wrath of God? Read elsewhere then of the solid achievements of these, our old teachers, for it is all there in obituary and other notices, and is indeed, a record of which any hospital must be proud. Learn too of the days when the honorary staff were unpaid, and when those clinicians who also held University appointments did their extra work for a pittance.

Maybe I have failed in all this. Maybe I have only been prompted by the feeling that if I don't make the attempt, no one else will.

THE VOLUNTARY DAYS

The Royal Victoria was, of course, a purely voluntary hospital in those days. It was opened in 1903 because the need for a far larger hospital than the former one in Frederick Street was the result of the enormous expansion of the Belfast population, and Mr. W.J. Pirrie was particularly anxious that there should be increased facilities for the huge work force at the shipyards. Many of the employees of the larger industrial concerns made a voluntary deduction weekly from their pay packets. They were represented by a Working Men's Committee which was in turn represented on the Board of Management. Woe betide the houseman who got on the wrong side of such characters as Bedpan Willie, who kept a sharp eye on every complaint.

Though most cases were referred to hospital by their own doctors this was not necessary, and patients could come directly off the street. The sorting of these cases was as often as not left to the porter in the gate lodge, but the story is probably apocryphal of the lady who said she had seen nothing for three months and was sent to Ophthalmics. When the size of the administrative staff today is counted up it might well be asked how the place ran at all. There was the Medical Superintendent, invariably a retired Colonel from the Army Medical Services, and there was the Secretary, who had, I think, two clerks. That was the lot. The unpaid Honorary Medical Staff had their own secretary, the fluttery but kind and competent Miss Lutton, but that was a private arrangement and paid for by them out of students' fees.

The Senior Physicians and Surgeons had each a male and a female ward, while the Juniors had charge of Out-patients though each had a special attachment to one of the seniors and could act as his deputy. There was then a long tail of registrars and clinical assistants with no security of tenure, the so-called Auxiliary Staff. The full staff members got a nominal sum for their teaching duties and derived entirely from students' fees. As far as I can remember a registrar got £20 per annum. The clinical assistants got nothing at all. The entire staff, full and auxiliary were very much part-time and had their

livings to make elsewhere. Election to the full staff was an invidious business. It was necessary to produce elaborate folders of testimonials with lists of publications and experience all bound up with ribbon or fancy cord, and one had to be sent to each member of the Board of Management, whom it was also advisable to visit. Canvassing was not only not frowned on, it was practically compulsory. Failure to do this was regarded either as rude or showing a fundamental lack of interest. As my father was on the Board I had thus been made aware from my early student days of the exact standing of many of my seniors and betters. Consultants often served long years before full staff appointment, and between members of the Auxiliary Staff and the Honorary Junior Staff there might be little to choose on grounds of age, skill or experience. The senior staff had a clear option on their own beds for the admission of cases they had seen in consultation, and there was much jockeying for spare beds among the others. Of this side of hospital life, what might be called the domestic politics, we had seen little when we were resident pupils. But it was as housemen that we came between the upper and nether millstones in trying to sort out the available beds after the admission of the ordinary emergencies and cases on the waiting list.

If a note had to be sent back to an outside doctor it was written by hand by a member of the honorary staff or by a houseman, whether from the wards or out-patients, yet there was no outcry about failures of communication. It is, too, hard to credit that there were no Post Office extension telephones to the wards or clinical departments, though there was one in the surgeons' changing room. The modern administrator would think all this a headlong course for calamity, but that was not the case.

TALES OF THE EAST WING

To be a houseman in the Royal – that was the great ambition after qualification. To be resident in your own teaching hospital is the aim of every fresh medical graduate everywhere. On a minor scale it was as bad as election to the full staff, and influence could raise its ugly head. For me the result was to be allowed to live, work and learn among tried good friends, though some of them were not elected until some months later. As always, most of the year had to find their first jobs elsewhere.

How good it is to look back on those happy yet useful days! Discrimination was not a dirty word. It was clear who were already great among our chiefs. It was becoming clear who were going to be the brilliant among our contemporaries. We were no more equal than all horses or greyhounds are equal. We had had, by and large, equal opportunities. Some were clearly more equal than others. Some had already failed examinations, never to rise again. Some, as one extern examiner used to say, had failed “but would be very good in six months' time.” Some had done better in examinations than others. At the end of that year we knew who were the good doctors.

There was no such office among the housemen as Casualty Officer. This has always seemed to me to be the humblest rank in Junior hospital staff in England. In the R.V.H. the Extern Surgeon, as he was called, was in fact regarded as the senior of the residents, and it was he who presided at the head of the long table in the East Wing mess. He was not really the senior, the resident pathologist and resident bio-chemist had already been living in for a year at least, but the extern surgeon was, like Uriah the Hittite, the man in the forefront of the battle, or, rather, at the front door. Like the breadserver or the milkman, it was he who made the first medical contact with many of the public and who could, during his period of office, and to a degree far beyond his personal importance, make or mar the image of the whole great organisation. He had no immediate chief, and his responsibilities were very great for a man in his first post. From breakfast until afternoon every casualty was his immediate care, and the man who could hold out to this for six months without making a mistake was destined for great things. Such a one in our time was Robert James Wilson Withers. By the late afternoon four residents were left on duty: the relief on extern, the men on medical and surgical take-in, and the “third duty” who might be anaesthetist, who was responsible for the rest of the hospital, or could take on any other job required of him if the others got too busy. For the remainder the rule was simple though never laid down: you worked till the work was done. You just might be finished at lunch time. Far more likely it was late at night especially on the surgical side on the day following a big take-in.

Richard Gordon's "Doctor in the House", no matter what can be said of his subsequent books, is almost second-hand reading for anyone who has been a houseman. Days and nights of serious and conscientious work are forgotten. Only a struggle of memory brings back the fact that our pay was raised from £40 a year to £52 because we no longer got the "pool" from the shilling sick lines signed by our immediate predecessors. The remaining "perks" were the occasional solicitor's fee, coroner's court fees and fees from some statutory notifications. But we were back in the East wing or its female equivalent where we had lived happily as pups, and now we had our own pups to order about and boss generally. If I make the special effort clinical details can be dragged back from the depths: interesting ones, tragic ones, happy ones, even amusing ones. "Looked for gas escape with lighted candle. Found it." But above all the cheerful good fellowship refuses to be forgotten, and needs no prompting to bubble up untarnished.

Perhaps my mind is particularly naive and childish so that when triumphs of surgery have been forgotten, I can remember as yesterday the night when the East Wing was made hideous with a free-for-all fight, the missiles being sample tins of Bisodol, or the night when an objectionable porter escaped from us and hid under the dispensary counter only to be dragged forth and trussed up on a milk trolley in the nurses' home. Vengeance came down on our heads in the form of the matron in her dressing gown stamping her foot at us in thin bedroom slippers on the terrazzo floor, a form of expression which must have been far from painless. I remember afresh my own indignation when I was reported to the medical staff for having thrown a roast of beef out of the window when I was not in fact even in the hospital, and when I bearded the Colonel generally known, and not for nothing, as the Bull, in his den. The same Colonel Forrest once had us all on the mat for some communal misdemeanour, and with his usual hesitant speech told A.B. Mitchell, by then Chairman of the Board of Management that "Individually, Sir, they are charming and com. . com. . competent young gentlemen, but collectively they are nothing b. . b. . but a p. . p. . pack of young hooligans." A.B. then shook each of us warmly by the hand, and, no doubt remembering that he had once been young himself, closed the business by saying quite simply. "Well, boys, I'm sure it won't happen again." There was the unpopular pup who was forcibly given an enema and then locked in his room, whence he escaped by breaking the panel over the door and crawling out over the broken glass. There was the night when, after the usual rough house in the East Wing, the houseman's sitting room was in such a shambles that the night superintendent, the great Diana, Sister Dines, M.B.E., who had been night sister before the senior surgeon had been a houseman, came and locked the door. There was a sortie by the window sill from the pups' sitting room and a thorough spring clean ending up with the stove and light full on, and a glass of milk and some very proper reading matter on the table. It was a splendid moment the following morning when the matron threw open the door to expose the dreadful scene to the Colonel.

There were those boring Sunday evenings when several of us would be on duty with little to do. Supper could then be a sorry trial. One man ate a Madeira cake with nothing to drink for a bet. My own contribution was a dozen boiled eggs. Two of them were musty. The news spread to my wards where I was compelled to drink a hefty dose of black draught by my sister. Later that night when I had gone to bed the door was flung open and in marched J.B. Young with his drawn sword. He had been adjutant of a battalion of the North Irish Horse, and had returned with a Military Cross. The other housemen followed, I was spreadeagled on the bed, stripped, and rings of Bonney's blue paint, mercurochrome and brilliant green were painted round my umbilicus. I had achieved the Order of the Blue Ring, only once previously bestowed, but for what feat history does not relate, though I think it was a jerry-throwing competition.

There was the Houseman's Christmas concert at which we had a special chorus, the words being provided by James Gilliespie as a Gilbertian parody.

When a patient's not engaged in his employment
Of distemp'ring or driving vans,
His genius for deriving fresh enjoyment
Is greater far than any healthy man's.
When the riveter has had his kali water
He loves to watch his gantry overhead,

Complaining that the houseman as he ought'er,
Will not order shock absorbers for the bed.
Ho! when the daily round of duty's to be done
A houseman's lot is not a happy one.
When the surgeon has exploited an abdomen
And found a long appendix or a kink,
However overpowering his cognomen
The patient will at length awake and think.
When the sickness and bronchitis are forgotten
Then the houseman must endeavour to explain
That the stasis made the bowel contents rotten,
But the operation may not cure the pain.
When the female waiting list is over eighty:
When you couldn't even estimate the males;
Then the Working-men's committee's wrath is weighty
And even Dr. Rowdy Blithers pales,
Then the take-in day is sure to bring a dozen
Query nerves or query ulcerated lids,
And subscribers tell their mate's wife second cousin
Just to keep the weekly tuppence for the kids.
When the doctors send three patients in as urgent
Just because they call them up at 3 a.m.
Then the patient feels his vilest thoughts insurgent
If he can't treat houseman like he's treated them.
So we sadly dream of diabetic comas,
Ruptured tendons, livers, prostates, bones and lungs.
And the Red Rag and the Bull are not misnomers
For the topics that engage the Housemen's tongues.

On a more serious side we published the only two copies of the Royal Victoria Hospital Magazine, with some clinical articles and a lot of local house gossip. It was a good idea, and I am not at all sure that it did not influence the production of the Ulster Medical Journal which appeared for the first time shortly afterwards.

One of our happiest undertakings was the purchase by seven of us for £49 of an old converted Morecambe Bay shrimper. "Surprise" was really a very good name for this old-fashioned, safe and extremely reliable craft. Belfast Lough and Strangford were our main cruising grounds, but we had one marvellous weekend going over to Portpatrick with two reefs in. There was another occasion when Reynolds Morton put in the fastest sprint I ever knew him do when we spotted a huge basking shark just alongside and he himself was about 50 yards astern.

All this leads up to the central purpose of the second part of this paper. It is the chance to record something of those who helped us on our way, not only that year, but in our student days, and who had been previously left out. These were the members of the staff who were not also members of the Faculty of Medicine at the University. It is the "Why-does-nobody-write-it-down" things that I want to record, the things that, like the skeletons of Amos, clothe the dry bones.

The Royal Victoria wards are arranged in one long corridor, or were in those days, and to travel from one end to the other is as convenient a way as any of reviewing our old teachers and friends. Old Mrs. Bradley did this journey daily with her floor cloth, and Roy McConnell once did it with a golf ball. I must do it in memory.

UP AND DOWN THE CORRIDOR

I & II

By the time we were housemen Wards I and II were in the care of W.W.D. Thomson who had just returned to duty after prolonged illness. His career has already been recorded by Gallagher, and I have already said something about him. But in our student days John Smith Morrow, O.B.E., was the senior physician. He had graduated from general practice, and was the personal physician of Lord Pirrie, Chairman of Messrs. Harland and Wolff, and also medical officer to the Company. Johnny was a very shrewd judge of men, and was in great demand in medico-legal affairs. I well remember my first hospital encounter with him. I had known him since childhood, but he did not remember me. I was sitting in the back row of his class waiting for him to come in and talking to Amelie Loewenthal when I failed to notice his arrival. "What's your name, Sir?" he asked. "Strain, Sir". "Well, Mr. Strain, will you have the great goodness and condescension to hold your bloody tongue", and his voice changed in the course of a single sentence from unctuous politeness to utter rage. After that we got on extremely well, and he was always a very good friend.

Ward rounds could be enlivened by caustic wit. "Good morning, Moses. Gentlemen, Moses means beloved of the Lord, but unfortunately Moses harbours the spirochaete." On another occasion he had an epileptic in the ward. "I'm afraid there's nothing to show you. I wish to God she'd have a fit", whereupon she started to convulse. "Gentlemen", said Johnny, "The prayer of a righteous man availeth much." One day he saw Colonel Forrest walking up the corridor. "There", he said, "goes John Vincent Forrest, the darling of all the ladies, and the man with the finest post-nasal catarrh in Europe. It's a pity that the Lord has seen fit to deprive him not only of coherent thought but of articulate utterance."

According to Ian Fraser he once had a clinical clerk who was so perfect that it got on his nerves. Determined to catch him out, he picked to put before the class one of that student's cases who had only been admitted an hour or two earlier. He did not know that the clerk had beaten him to it. Johnny read out the notes. "Complained of headaches, disliked the light, vomited two or three times", and so on. The notes were complete in every detail. Johnny went over them once again. "'Vomited two or three times'. Damn it, Allison, did she vomit twice or did she vomit three times?"

He was astute to a degree. There was once a patient who had been in all the medical wards till he ended up in Ward II whence, after a few days, he departed. The other physicians wanted to know how he had got rid of him. Johnny hummed and hawed for a long time, but at last he came clean. "Well, one day I was going round with the class, and I got half a dozen horney-handed sons of toil from Cullybackey to examine his rectum."

Once in Court a barrister complained to the judge that Doctor Morrow was talking and interrupting. "By Christ", cried the indignant Johnny. "Cannot John Smith Morrow commune with himself?"

He had a stiff middle finger. It was the result of some old sepsis, and had killed his former hopes of becoming a surgeon. I remember it was the right one, for I can still recall it pointing forward when he hit a golf ball. The sight of Johnny pulling the stiff finger at times of stress is one not soon forgotten.

One day he found some of the ex-service students of the 1914-18 War smoking at the students' entrance to the corridor, and he ticked them off. Later he thought he had perhaps been too hard on them, and he went up to them again and said he hoped they had not minded having been spoken to, but he felt strongly about it, and would not do it himself. No. They didn't mind. "Not mind! Not mind when I speak to you." Then they really caught it.

Such was Johnny Morrow, irascible, astute, amusing, kindly.

The great sorrow of his life was the death of his daughter who was drowned during the 1939-45 War when the car she was in drove into the Pollock Basin in the Belfast harbour when she was returning home from canteen work in the black-out.

He was succeeded by W.W.D. Thomson.

III & IV

Foster Coates was the physician in III and IV. A very kindly little man who abounded in common sense, I was his houseman and we never had a wrong word. One embarrassing feature of his ward rounds was that he never seemed to realise that the patient in the bed could hear what he said to the class. He was an enthusiastic percussor, and could never understand why others could not appreciate what he described as "walnut areas of dullness". He never used a local anaesthetic to tap a chest, and I never heard a patient complain. As Robert Marshall wrote of him in his history of the hospital, "His gift for friendship, his tact and his modesty made him well beloved among us."

That was my own experience of "Fossy".

V & VI

In our student days Wards V and VI belonged to Professor Thomson, but because of his illness he was an absentee landlord. Robert Marshall was in temporary command as well as having his special responsibilities in outpatients. By the time we were housemen he had succeeded to V and VI in his own right as a full as distinct from an assistant physician.

He was very much the successful consultant, with a wide city and country practice. Suave and debonair, he was equally at ease by the bedside of the local aristocracy or a workman from the shipyards. His teaching and clinical instruction were always carefully prepared. He did his homework.

When he retired from the staff his former assistants, registrars, housemen and other associates, gave him a farewell dinner, and to me fell the lot of proposing his health. As this is on the whole a light-hearted account, perhaps to quote what I said on that occasion may be forgiven.

Ladies and Gentlemen,

We are

Assembled here from near and far

To bid to one with whom we're pally

An AVE SED NON ATQUE VALE.

To me there fell the happy lot

Of being put upon the spot,

And undertaking the creation

Of the most suitable oration

To say to Robert, now retiring,

The kind of things he is inspiring.

This "Enterprise of Martial kind"

Has greatly exercised my mind.

I set myself without evasion

To do my best for the occasion.

I said "I can't perform or sing,

I cannot do this bloody thing,

And yet there must, without a doubt,

Be vouchsafed to me some way out"

And so one day, while drinking tea

The notion just occurred to me

That maybe words would sound less terse

If they could be expressed in verse.

It is perhaps an innovation

Thus to abuse your invitation,

But the adventures shouldn't boria

Of Robert and the Royal Victoria.

(Apologies to Cyril Fletcher.

I didn't ask. He mightn't letcher.)

I want to tell you briefly here

Something about his past career.

He started his pursuit of knowledge
By being enrolled at the Methodist College.
And so one day the little chap
Set off for school with bag and cap.
He proved to be a clever lad,
But I regret to say it's sad
That at the end of several years,
Faced with the choice of two careers,
Whether to end up sitting pretty
As something important in the City,
Or join the medical profession
In Aesculapian succession,
His hash was settled by a toss
Won by Hippocrates of Cos.
Now Robert goes to school again
With other old Collegians men,
His duty to attend restored
As the Vice-Chairman of the Board.
And when he went to the University,
By one of those tricks of Fate's perversity,
'Twas not foreseen by his progenitor
That he was destined to be a Senator.
I won't remind you what it means
To Robert to have been at Queens.
No better Queensman ever wore
The blue and black and green of yore.
This was proved by his elevation
To President of the Association.
M.B., B.Ch., B.A.O.,
With Honours meant that he would go
To Jimmy Lindsay, a position
Counting as Senior House Physician.
Now "Axioms and Aphorisms" can
Become the curse of any man,
Yet there he learnt by rote incessant,
"Rough, rumbling and ingravescent",
And it was there he made a start
On the diseases of the heart.
His Belfast house job once completed,
For London ones he next competed.
Not Thomas's or Guy's or Barts.
But in the Hospital for Hearts
A House Physician's job he got,
Yet not content with just that lot
Of special circulatory lore
Decided he would have some more.
Diseases of the nervous system
Were quite unable to resist him.
When that was done, Alas! Alack!
He found a harder nut to crack,
For Kaiser Wilhelm in his palace
Said "Deutschland must be uber alles."

Our Robert didn't waste a day,
But plunged ahead and joined the fray,
Metamorphosed at once to be
Lieutenant M., R.A.M.C.
It's necessary here to say
That before he upped and sailed away
He took the best step of his life
And made the lady May his wife,
Finding in her personified
All the virtues of the distaff side.
And you all know as well as I
(Let no man dare to give the lie.)
How evenly she makes her way
Through darkest hour and gayest day.
She's still the same as years go by,
The very apple of his eye.
Booted and spurred and no pedestrian,
He started out, a real equestrian,
To tend the wounded and the sick
In Northern France through thin and thick,
And honourably gained, not pilfered,
The right to wear Pip, Squeak and Wilfred,
Until he ended the monotony
By needing an urgent laparotomy.
Then he returned to civil life,
And to the bosom of his wife.
The road that then he had to run
Has since become a familiar one:
M.D. and M.R.C.P.I.,
A D.P.H. and by the bye,
A registrar in Robert's day
Got only £20 of pay
Per annum, so he had to earn
His living while he strove to learn.
Not like the young lads of today,
When nice fat incomes pave the way,
And ease the stress and pay the fees
Of those who work for higher degrees.
But Robert missed these modern trends,
And did their locums for his friends,
Seeking to supplement the kitty
Around the perlieus of the city.
By dint of work, hard and persistent,
As part-time Clinical Assistant,
At last he got a Staff position
As Assistant Honorary Physician.
Not that it added to the revenue
Being on the Staff at Templemore Avenue.
He served the "Ulster" for many years.
He soothed the nerves and dried the tears
Of babes and infants and became
The friend of all the halt and lame.

Rheumatic children from the start
Engaged his care because the heart,
First damaged then by this condition,
Is often seen by the physician.
Of all his foes, the greatest bane,
The teacher lashing with the cane,
Incurred his wrath upon the phone,
Yet not content with that alone,
He wrote a paper pointing out
What all this whipping was about.
It was received with acclamation
By the Paediatric Association:
A masterpiece of good research
On the psychology of the birch.
Robert has left the "Ulster" now.
We carry on, I'm not sure how.
We dined him well to celebrate
Thirty years' service up to date
Upon the staff, and then, poor blighter,
He only got a petrol lighter.
He still kept working late and early,
In all the general hurley-burley,
Keeping the pot upon the boil,
Until at last he got the "Royal",
With the inevitable resultant,
He was the Simon-pure consultant,
Completely armed with E.C.G.
And P and QRS and T.
He worked for many years in Extern,
Patiently waiting for the next turn,
And when it came it was to fix
His destinies in V and VI
There he remained until the Law,
Embracing all within its maw,
Decreed that it would be intrepid
To keep on someone so decrepit,
And that is why, just yesterday,
They had the wreckage cleared away.
Looking at him here tonight,
Even in artificial light,
He seems to me to be quite hearty,
Hale, and not at all a party
Either to be obese or soon
The "Lean and slippered Pantaloon".
How slim and elegant he appears,
Not plethoric or full of fears
That any day from now the mind
Will shut down like a window blind,
Or that the segment called R-T
Will show the changes of Pardee.
And so the best that we can say
Is, "As you are may you long stay".

Tonight the chance must not be missed
Of going quickly through the list
Of all the things that he has written,
And, furthermore, the biter bitten,
The Honours that have been conferred
On him deserve a passing word.
His early papers are a part
Of his research upon the heart:
Rheumatics and the ailing child,
And all the signs, severe and mild.
It happened that in later years
He followed up the little dears.
“Recent Advances” have a reference
Giving to Robert Marshall preference.
His paper is pronounced as good
And, read and inwardly digested, should
Instruct the medical fraternity
On mitral stenosis in maternity.
His other works I won’t detail.
On reading them you cannot fail
To wonder how the one small head
Could think of all the things he’s said:
The B.M.A. “Book of Belfast”,
His first whole volume, and the last
His recent history of the “Royal”
Since it was built upon the soil
Of Springfield and the Grosvenor Road,
Leaving it’s Frederick Street abode.
The strangest paper that he gave
Was not intended to be grave
By those who asked that he would speak
On any quaint or funny freak
Among the doctors of the past
Who worked in or around Belfast.
He turned the tables on his guests,
And stayed his hand from making jests.
Jokes at the Dead? He’d not condone ’em.
DE MORTUIS NIL NISI BONUM.
“Doctor Henry MacCormac” was his text,
For Belfast people said “What Next?”,
And talked about MacCormac’s folly
In smashing windows with his broolly.
For this he did each time he found
His patients’ windows shuttered sound,
Since he believed that such devices
Did not permit the cure of phthisis.
“The Open Window” staked his claim
To immortality and fame.
MacCormac’s views have proved the strongest,
And he who laughs the last laughs longest.
The list is long. The evening presses.
There are a score or more addresses

Given as President or in the Chair,
North, South, East, West and everywhere:
Discourses of his own creation
To the British Medical Association,
Communications of propriety
To the Ulster Medical Society,
Short but revealing depositions
To the Association of Physicians,
Topics of a wide diversity
To Societies in the University.
The list is still not yet complete
Without the few words, neat, discrete,
In rounding off a Royal Address,
Or the brief phrases to express
His real prognosis of the fates
Of each new batch of graduates.
His oratory also reaches
To lively after-dinner speeches.
The patients who have lived to tell
That Robert Marshall made them well,
And sent them home as good as new,
If stretched out in a human queue
Would reach, and, mind you, I'm no cynic,
From College Gardens to the Clinic.
Now that, with all his published stuff,
Would be for most men quite enough.
But we must note another feature:
His outstanding genius as a teacher.
For there has been a roll maintained
Of all the doctors he has trained.
They've served in various stages up
To registrar from being pup,
With housemen and the non-existent
Extinct clinical assistant.
The products of this erudition
Fill every sort of good position
Starting with University Professors,
The Corps d'Elite, the proud possessors
Of Chairs in places so renowned
That they are known the whole World round,
Cambridge and London for a start,
But some in every art and part,
Consultants, too, not here and there,
But positively everywhere,
University Lecturers by the score,
Trick Cyclists, ten or twelve or more,
And then, at the bottom of the tree,
Ordinary simple folk like me.
I cannot find among the pack
A single charlatan or quack,
No cheiropractor, no abortionist,
No unprofessional extortionist.

No murderer's name is there so far,
But then you never know who are.
In short, the blots do not show much on
The Marshall clinical escutcheon.
So for the medical position
Of Robert Marshall, the physician.
Of Robert, just the friend of man,
I'll try to tell you what I can.
There never was a chance like this.
It really is too good to miss.
It isn't any idle boast
To say I know him as well as most,
Could I but find the means and ways
To expose him to the public gaze.
I've known him to rant and rate
And work himself into a state.
I've seen him blast his ball and caddy
And get into a frightful paddy.
He's often said to me, "You Mutt,
I love you like a brother but ..."
I've often heard him damn and curse,
And say things that got worse and worse.
I've known him to shout and swear,
And pull at his remaining hair.
It never lasts for long, you know,
It's quickly come and quickly go.
When all is done and all is ended,
Let's say "The least said soonest mended",
Just like a tempest in a cup.
To Hell with all this castin' up.
But if you're in a spot of bother
With brother, sister, father, mother,
You'll very soon have cause to bless
Robert for clearing up the mess.
And if you find your own jaw locked or
You go mad and need a doctor
Then he will go to any length,
A veritable tower of strength.
I know that no one can be kinder.
I see May blush, but never mind her.
She knows quite well without being told
Her Robert has a heart of gold.
Next, Robert has a pretty wit.
It does you good to see him sit
Among his colleagues at a meeting,
When, after the usual greeting,
In England, Ireland, Scotland, Wales,
They all say, "Come on Marshall, Tales!"
And then the Saxon's wreathed in smiles
At hearing of Sam's crocodiles,
While every doctor laughs his fill
When told of the illicit still.

Samuel Ireland Turkington was a bachelor. He once declared that matrimony was the insane desire of some young man to provide some young woman with free board and lodging for the rest of her life. He was a voracious reader and bridge player, and something of a gourmet. He was much followed in the out-patient department and on Sunday mornings in the wards as a sound teacher of the fundamentals, and most of us remember him for his mnemonic of the "Unlucky 13" for the diagnosis of pulmonary tuberculosis even if we no longer remember what all those famous thirteen Ps stood for.

He was a most meticulous percussor. Every stroke was delivered with measured precision, and his hands, though of perfectly normal proportions, retained an infant-like perfection of skin and nail texture. It was quite impossible to imagine such hands being put to any menial purpose like opening the bonnet of a car or pulling up a weed. To play a round of golf was unthinkable as it would have meant not being available on the telephone. On the other hand, unlike some of his colleagues, he invariably paid you if you did any of his clinical pathology.

He was, of course, known to every one as "Turkey" or "The Turk". His students were always invited to "check things" in the out-patients department. One devoted lady follower of some chronicity repeatedly failed her final in surgery. As H.G. Calwell put it,

T is for Turk with his army of checkers.

The Chief Checker thinks that the surgeons are wreckers.

He once had a bad attack of influenza. Sir Thomas Houston was called in and examined him with his usual care. Then he posted himself at the foot of the bed to deliver judgement. "Turkey", he said, "A fortnight ago I saw a man exactly like you and in forty-eight hours he was dead."

Joseph Teggart Lewis was Ted to everyone. His interest in clinical medicine was equalled by his skill as a clinical pathologist and especially as a haematologist. From the time when I first knew him as assistant to the Professor of Medicine until his final catastrophic cerebral vascular accident with its terrible personality changes my outstanding recollection is of the ease with which he broke into quiet chuckles. He was taken prisoner of war at Tobruk, and suffered a lot of pain and privation at the hands of the Italians at that time, for he had contracted renal lithiasis, and was denied any morphia when the stones were passing. He thought rather more of the ruthless efficiency of the Nazis than of the simple incompetence of the Italians. Not even these harrowing experiences materially dimmed my memories of a truly sunny personality.

Richard Sydney Allison was appointed to the staff during our period in residence. He had never been one of our clinical teachers, because prior to his election he had been for some years Assistant Physician to Sir Edmund Spriggs at Ruthen Castle in North Wales. This was a purely private hospital for the investigation of organic disease. Allison had never worked at the Royal Victoria since his own houseman days. In his early years at the Royal he was especially interested in gastro-enterology, but he was also on the staff of the Hospital for Nervous Diseases in Claremont Street. He served during the war as a medical consultant with the Navy, and it was on his return from war service that he devoted himself entirely to neurology and neuropsychiatry. It was during these post-war years that he and Cecil Calvert found time to edit an entirely new edition of Whittl's Dictionary of Treatment. It was an association that was to last. It was under Calvert that the surgical treatment of neurology was to evolve, Allison being responsible for the medical aspects. He later became a noted local medical historian, and archivist to the hospital. In our houseman days he was an untried newcomer who took two drops of milk in his tea. His great days lay ahead.

The Surgical wards were from No. IX to No. XX, and there was in addition the Ophthalmic and E.N.T. unit, for these were then considered a single speciality. There were also small septic and isolation units. The only other available beds were those at the disposal of the casualty department where patients could be detained overnight for observation.

IX & X

Wards IX and X were presided over by Thomas Sinclair Kirk: "Surgeon Kirk" according to his brass plate, but "Pa" to the medical world. With his quiet deep voice, his brown eyes and his gentle manner, he was a great gentleman yet a definite character. He had some highly unorthodox ideas. It was wonderful to

see the effect of filling a dirty wound with urea crystals and leaving it overnight under oiled silk, but he would pour a whole jampot full of urea into any open abdomen. He would inject great blebs of oxygen into subcutaneous spaces "to combat acidosis." He was a great believer in the powers of oral antibodies, and many will recall with horror the period when all who came near his ward kitchen were fed on sandwiches of dried serum from old cows, the older the cow the more likely it would be to contain the antibodies. But if his views were unusual he was held in deep affection. He drove a very ancient two-seater car, so old that my own recollection of it is that it resembled more than anything else a mechanised Sedan chair.

XI & XII

When A.B. Mitchell retired from the staff, vacating Wards XIX and XX, Professor Fullerton moved there because those wards had more beds, and had better theatre and anaesthetic room accommodation. Percival Templeton Crymble was then promoted to XI and XII after a long servitude in outpatients. He had a dry but acute sense of humour, and could keep a dead pan face even in the most hilarious circumstances. He was a most dexterous surgeon in spite of the fact that he had a quite frightening tremor. It was a terrifying sight to watch him operate on a thyroid and to see the gland hung round with literally dozens of artery forceps each of which had been applied with sudden accuracy to the wonder of all. He succeeded Andrew Fullerton in the Chair of Surgery, but both before he became professor and after his official retirement he continued to teach radiological anatomy at the University, and, indeed, continued to do so almost until his death at over 90.

XIII & XIV

Howard Stevenson was the surgeon in charge of Wards XIII and XIV. Tall, handsome and always beautifully tailored, he looked film star stuff. With the possible exception of Barney Purce he had one of the biggest pairs of hands I have ever seen, yet his dexterity and speed, though with completely gentle handling of tissues, made it a joy to watch him operate. It was well known that he seldom needed more than twelve minutes to remove a gall bladder. Regularly he and his houseman would disappear to the fastnesses of the Throne Hospital. While this unit out at Whitewell was meant essentially for convalescent patients, Howard Stevenson would give up otherwise profitable afternoons to do a long list of hernia repairs, and so reduce the waiting list for the ordinary surgical wards of the main hospital. After his retirement he represented the University at Stormont, but failing vision became a serious handicap, and contributed eventually to a fatal accident when he was struck by a passing vehicle when crossing the road near his home.

XV & XVI

Much has already been said of Samuel Thompson Irwin, who directed the destinies of XV and XVI. At one end of the story there was an Irish International Rugby cap, at the other Membership of Parliament at Stormont for the University, a C.B.E. and a knighthood. Between stretched a long record of successful general surgery, with a special leaning for orthopaedic. For Belfast he was really the second founder of that speciality, though he never devoted himself full-time to it. He himself would have yielded pride of place to A.B. Mitchell, and he also always asserted that he owed his own life to A.B.'s skill as an abdominal surgeon. Even tempered, never rattled, he was the very embodiment of common sense. That is perhaps an odd thing to say, because sense, as it was displayed by S.T. is far from common. Perhaps the infinite capacity for taking pains is nearer the mark. Genius is not a word that would occur to me, but none will dispute his never-failing soundness.

XVII & XVIII

XVII and XVIII, the Gynaecological wards, were the property of the Professors of Midwifery and Gynaecology, though no obstetrical work was done in either except perhaps the emergency ruptured ectopic gestation. Something of the lives of both Sir Robert Johnstone and C.G. Lowry has already been recorded.

The Assistant Gynaecologist was Henry Little Hardy Greer. In spite of one of his names Hardy was a great big chap with a prognathic jaw and all that went with it. Of him and his chiefs it was easy to see afterwards in outpatients who had operated on whom. One used Bonney's Blue Paint, one used brilliant green and one used picric acid, all of which withstood the ravages of time well.

XIX & XX

XIX and XX in our student days had been the site of a considerable power struggle among the surgeons on the Auxiliary Staff, all of whom were jockeying for position, for A.B. Mitchell had had to abandon his theatre work because of increasing crippling deformity of his hands. But by the time we were housemen Professor Fullerton was in complete command. I was his houseman for six months. If he was a taskmaster, no one in the unit worked harder than he did, and it was an honour to have had such an opportunity. Much has been recorded about him, especially in Sir Ian Fraser's recent paper.

OPHTHALMICS

The Ophthalmic wards, on the opposite side of the corridor from the ordinary ones, included the E.N.T. beds. The surgeons were James Craig and Henry Hanna about both of whom comment has been made elsewhere.

Their Assistant Surgeon was Frederick Jefferson, known to everyone as "Fred". Like many of his generation he had no Fellowship, but had, like them, seen as much acute surgery in France in a few years as many with Fellowships see in a lifetime. He will be remembered by my generation for the "grind" he gave in the King Edward Building every Saturday morning, when his remarks would be punctuated by such OBITER DICTA as "There goes John Campbell on his way to the lab. You could set your watch by him every morning". He was a kindly soul and a tremendous practical joker. I remember once being on holiday with him in Donegal when he would address the natives in French or German or with a stammer or with cleft palate speech. He would also line up the children in order of size and make them run races for coins.

As with the Assistant Physicians or Physicians in Charge of Out-patients there were three surgeons similarly placed:—

R.J. McConnell

H.P. Malcolm

G.R.B. Purce

Robert John McConnell was a blunt rugged character known to all as Bobby John. His great shaggy ginger brown eyebrows were excelled in magnificence only by the even more splendid black ones of W.W.D. Thomson. His many years in extern meant that to my generation he is remembered in connection with varicose veins, haemorrhoids, minor foot deformities and the other irritations to which the flesh is heir, but he was closely associated with S.T. Irwin in his Orthopaedic work. He was a keen yachtsman and an enthusiastic bibliophile, and if you would know something of the essential Bobby John get, if you can, his anonymous account of the "Air Raids on Belfast", and how they affected the Ulster Hospital. Here is a wonderful blend of hilarity, humanity and courage in which, all unconsciously, he depicts himself.

Henry Price Malcolm lived a happy bachelor existence in University Square. He had had a stormy war, coming out with an M.C. His stories of life in dug-outs under barrage were dreadful reminders of trench warfare. Yet it was in the R.A.M.C. that he came under the influence of Meurice Sinclair, and became the master he was in the use of the Thomas's splint and plaster of Paris. He was a great craftsman to watch, whether in the reduction and immobilisation of fractures or at the blackboard in his university surgical anatomy lectures where his skill was equally evident. But there was one flaw in the character of this likeable man. As H.G. Calwell put it,

M is for Malcolm, the elegant Harry,

So easily tired and so willing to tarry.

One day he was exploring an abdomen when one of the other surgeons who had sent the case in as an emergency came into the theatre. "Well," he asked. "Was it an appendix?" "Oh! You sent it in, did you", said Harry. "Well, you can damned well do it yourself," and he ripped off his gloves.

George Raphael Buick Purce was a very great man, and, as is often the case with great men, had no idea of the fact. He was a magnificent technical surgeon, but it was not always to the liking of his medical colleagues that he was said to be the best physician in the North of Ireland. Certainly these two components make a combination hard to beat. He was an enthusiastic collector of instruments. I remember one morning seeing him come into the main hospital corridor by the Boardroom entrance with a small case under his arm, and saying to someone beside me, "Barney's travelling light this morning". Then the door swung open again, and in came one of the hospital porters dragging a luggage truck covered with cases and bags. He was a tireless worker. After an evening spent doing emergencies in the Royal, he would think nothing of starting off to drive to Limavady or Londonderry to operate again. His tirelessness was his undoing. Not even his great frame could stand the pace, and he literally wore himself out before his time. In the theatre he could scold and mutter and swear like a trooper, but there were no volts to this, and he never upset his staff. It was remarkable what careful and minute surgery could be carried out with such huge hands.

It was in our houseman days that he started his work on neuro-surgery, aided by Cecil Calvert, then only a Clinical Assistant. They would begin operating on a Sunday afternoon, and work on the same case perhaps into the small hours, while relays of anaesthetists sat on pillows under the table. It was Calvert who was to carry on this work. Purce's other great interest was thoracic surgery, and it was here that he made his greatest contribution to the reputation of the hospital.

Everything he took up he followed through to the end. He was equally authoritative on woodworms or fly fishing. One day Robert Marshall was in Sharman Neill's when Barney went past. "I suppose you know Mr. Purce", asked the assistant. "He knows more about navigation instruments than anyone else in Belfast".

Like Harry Malcolm, he was a holder of the M.C.

The words of Mr. Valiant-for-truth are on the wall of his old ward.

"My sword I give to him that shall
succeed me in my pilgrimage, and my
courage and skill to him that can get it."

THE BEDLESS CONSULTANTS

"There goes Sir Thomas", said Johnny Morrow once, "to sort out the ultimate insoluble residue of the extern". This was not one of Sir Thomas Houston's official duties, but it was characteristic of him that he was always willing to come down from his laboratory to help with a difficult case. A pioneer of clinical pathology, he was for years the doyen of the staff. Even after his official retirement each day usually saw him in his accustomed corner. He was a great and lovable character without an enemy in the world. I have referred to him often in the account of my student days. He must have pride of place among those who are difficult to classify neatly simply because they did not have any beds, and so do not fit tidily into the topography of the main corridor. Indeed, I think that he held the highest place in the esteem of all his colleagues. On his retirement he was presented by the staff with his portrait, a wonderful likeness now hanging in the hospital. W.W.D. Thomson made the presentation, and said, in words not perhaps strictly applicable to a Gentile, "When I hear read this passage from the Gospel of St. John I always think of Tom Houston. 'Jesus saw Nathanael coming to Him and saith of him – Behold an Israelite indeed, in whom is no guile'".

The biochemical side of clinical pathology did not interest Sir Thomas, but became the almost exclusive province of John Andrew Smyth. The two things that everyone knew about him were that he had lost a kidney and that he had been a Corporal in the Royal Engineers in the 1914–18 War. Jack Smyth will be long remembered for his lifelong interest in that unique society, the Queen's University Services Club.

Anaesthetists were plentiful. In the days when most dopes were simply a question of the rag and bottle whoever was available put his hand to the pump. Thus it might well happen, indeed usually did happen, that the anaesthetic for the patient most at risk, the night casualty with an acute abdominal

complaint, might be given by the pup, while the houseman assisted a registrar or a clinical assistant to operate. It almost seemed that the less risky the case the more likely was the anaesthetist to be drawn from the ranks of the seniors who were becoming skilled in the more advanced techniques. In spite of their numbers, only one anaesthetist was on the staff. The physicians and surgeons were terrified that if those clinically entitled to the positions were elected to the staff they would outvote the rest. They need have had no such fears. In my experience, anaesthetists on medical staff committees have proved to be just as wise or as foolish as any other sort of medical man. The result was that Victor Fielden was the only one of these people to have full staff recognition. The stories about Victor would fill a book, and one of his favourite sayings was "An anaesthetist is a person who gives an anaesthetic, but it does not necessarily follow that a person who gives an anaesthetic is an anaesthetist."

While the staff may have considered unwelcome the formal appointment of large numbers of anaesthetists, the person on whom they should really have been keeping a close eye was the radiologist, even in those days. While there may be squabbles about whether a ward should have one sphygmomanometer or two, the size of such a problem is within the grasp of ordinary doctors. This is where the radiologist has his colleagues trapped. He says he must have something costing some astronomical sum. There is really no one who can deny his claim, and so he gets off with it. Nowadays, when the unit of currency, the penny as it were, is about £1000 it is difficult to grasp the efforts that were necessary in the voluntary days to provide things then considered dear at perhaps £20. Get and read D.C. Porter's opening address the R.V.H. in 1962 on "The New Photography". Here you will learn of the early days of radiology in the Royal, and of the work initiated by Doctor John Campbell Rankin.

I had known Johnny as a friend all my life, but by the time I met him as a clinician he had become dreadfully deaf. He bore this shortcoming with wonderful philosophy. One day at the front of the R.V.H. he backed his car into another one. The other driver blew his top and kept on blowing it for some time. When he had done Johnny handed him a slate and a slate pencil. While he had pioneered diagnostic radiology with considerable brilliance, he was by our time devoting himself to therapeutic radiation, mainly of skin lesions, and to venereology, so that few remember him for the great work of his earlier days. It is interesting to note that his first appointment to the staff was as Electrician. His kindness, his entertaining personality and his general greatness were never really appreciated by a later generation to whom this brilliant man had simply become "Deaf Johnny", nor was it quite fair comment when his friend James Craig declared that he was possessed of "an inexhaustible supply of unreliable information on every subject under the sun."

Diagnostic radiology and the relatively new radium therapy became the speciality of Robert Maitland Beath. A big man in every way, quiet, gentle, not given to much talk unless he had something important to say, he did much to increase the value of his department. His assistant, and eventually his successor was Frank Percivale Montgomery, another member of the staff who had been an Irish Rugby International and an M.C. He was afterwards the first Chairman of the Northern Ireland Hospitals Authority, and was knighted for his services.

Housemen had few contacts with the radiologists except the social ones of morning hospital life, for these unfortunates had no kitchen of their own to provide the morning tea. They were thus to be found scrounging their elevenses as welcome guests in the wards of their friends up and down the corridor.

The real clinical contacts with the department were with the senior radiographer, Ralph Leman. He had been brought home from the R.A.M.C. by Andrew Fullerton, and was soon to prove his worth. Like many pioneers in various walks of life he had no formal training or qualifications because for the starters there can be none. On the other hand his prints were exhibited in many parts of Europe and America, and he held the Rodman Medal of the Royal Photographic Society. His X-ray pictures of flowers were particularly beautiful. He was the chap to keep in with when you had special screenings to do or needed the department to be available for the exact timings necessary for intravenous or cystoscopic pyelography. He has written about his own experience in a most interesting article in "Radiography", 1967.

EPILOGUE

So I have walked once more the length of that well known corridor. It is a long journey both in actual distance and in the passage of time, but every step has its memories.

A clinical generation is not a long one. An account of this sort could be written once in every 25 years or so. I am not saying that it should: only that it could. Another pen could be plied to record a succeeding group of clinical teachers. Names like Woodside, Macafee, Fraser, Loughridge, Calvert, McCaw, Crozier and others belonged only to the temporary auxiliary staff of my time in residence. How far I have managed to set down some memories of the men who taught my generation and guided our early steps on qualification is for others to judge. For my own part the effort has brought to mind the happy recollection of much that had for long been buried in the mists of many years ago.

Time like an ever rolling stream Bears all its sons away.

They fly forgotten as a dream Dies at the opening day.

History itself is the proof that this is untrue. May we long remember these men with gratitude and pleasure, and may our pleasure be not unmixed with laughter.

I think they would wish it so.

“Ou sont les neiges d’antan?” They are in our hearts and minds to be recollected in tranquillity.

APPENDIX to PART II

The Resident Staff, 1930—31:—

In Post, January, 1930 until February, 1930

D.R. Cairn
J.V. Hurford
Wilson Johnston
J.B. Young, M.C.

Appointed September, 1930

J.D. Boyd
J.A. Corkey
J.A. Fisher
J.H. Gillespie
Aileen M. Kennedy
Amelie Loewenthal
R.W.M. Strain
R.J.W. Withers

Appointed March, 1930

James Carson
Kennedy Hunter
W.R.M. Morton
A.P. Parke

Resident Bio-Chemist

G.P. M'Cullagh

Resident Pathologist

T.B.H. Haslett