When Sir William Osler died in December 1919, he was the most famous physician in the English-speaking world, and he was famous in many ways. Osler was admired as an excellent researcher, a virtuoso diagnostician, a model clinician, the author of an extremely influential textbook, *The Principles and Practice of Medicine*, and an eloquent spokesman for both the old humanities and the new science in their relations to medicine. But in the long view of history, his most important contribution to his profession was without doubt the changes he wrought in medical education. When Osler went from McGill to the United States in 1884, most American medical schools were proprietary colleges, with no hospital connections, no laboratories, and no academic admission requirements. When Osler left for England in 1905, he and the universities with which he had been associated — McGill, Pennsylvania and Johns Hopkins — had ignited an educational revolution. This revolution saw the replacement of proprietary schools with modern university medical faculties, offering a graded curriculum of up-to-date scientific education, and clinical teaching within a hospital setting. Osler was in no small measure responsible for the success of this revolution.

These institutional and curricular innovations have been amply documented elsewhere. In this essay, I wish to focus instead on the more personal dimensions of Osler’s teaching style and educational ethos. Even in the context of the progressive institutions in which he taught, Osler was a highly creative and unconventional teacher. He disliked didactic lectures, preferring in both basic science and clinical teaching to have his students learn by doing, with their teacher at their elbow. In laboratory, in dissecting room and at the bedside, Osler taught by putting himself in the position of the student, even using his own diagnostic mistakes as instructional material. In Montreal, Philadelphia, Baltimore and Oxford, student reaction to this new approach was, after some initial shock, wildly enthusiastic. But there is more to this than personal charisma. Osler taught the way he did because he had distinct ideas about what it meant to be a student. He believed that the student was not the raw material of medical education, but its final product — that becoming a student for life was what medical education was all about. The hardest conviction to get into the mind of the beginner is that the education upon which he is engaged is not a college course, not a medical course, but a life course, for which the work of a few years under teachers is but a preparation. (1)

For Osler, the term “student” did not connote a cognitive blank screen on which the “teacher” inscribed facts and truths. On the contrary, becoming a student was an active, purposeful process with specific requirements and stages. In Osler’s lexicon, a “student” is essentially a human being who cannot help asking questions, and who won’t be content until he really knows the answer. His salient characteristics are “an absorbing desire to know the truth, [and] an unswerving steadfastness in its pursuit.” (2) The purpose of medical education is to awaken and

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The initial letter on this page is reproduced from Carol Belanger Grafton *Treasury of Art Nouveau Design & Ornement*, plate 437 Dover Publications, 1980.
The grind of a busy practice leaves no time or relish for asking questions and investigating problems; the grind of a heavy teaching load produces the same results.

This kind of education can only be carried by teachers who are themselves perpetual students. Good practitioners and good teachers alike must cultivate what Zen masters call "beginner's mind", and learn to resist the deadly enemy of "beginner's mind", routine. The grind of a busy practice leaves no time or relish for asking questions and investigating problems; the grind of a heavy teaching load produces the same results. And the most sinister thing about routine, is that the practitioner or teacher who falls victim to its spell may not even be aware of his intellectual slovenliness, for he will seem in his own eyes and those of others to be very successful at what he does. Here are two Oslerian character-sketches, the first of the practitioner-routinist, the second of the professor-routinist.

Last year I was called [as a consultant] to a town in Pennsylvania and having to wait until late in the evening for a return train, I insisted, as is my wont, that the medical man should carry on his daily work and allow me to help him if possible. An afternoon round among patients chiefly of the mechanic class shewed me a cheery man who in twenty years had gained the confidence and esteem of his patients. Kindly, hopeful words, very sensible directions about diet, and some half-dozen drugs, seemed the essential in his practice..... He never used a stethoscope; he had no microscope or instruments of precision other than the thermometer.... This was a man of parts, a graduate from a good school, but early in his career he had become very busy, and gaining the confidence of the people and having much confidence in himself, he had unconsciously got into a rut, out of which at forty only one thing could lift him — a prolonged course of additional study. This is by no means an exaggerated picture of a routinist in general practice.... Men of this stamp get a certain measure of experience, and if of a practical turn may become experts in mechanical procedures, but to experience in the true sense of the word they never attain. In reality they suffer from the all-pervading vice of intellectual idleness. It is so much easier to do a penny-in-the-slot sort of practice.... Much depends on a man's mental constitution, but much more on the sort of training he has had. If when a student good methods are not acquired it is very hard to get into proper habits of work in practice.({4})

But if the medical student's teachers are routinists themselves, it is not difficult to imagine why they turn into routinist practitioners.

Dogmatic to a greater or less degree all successful teaching must be, but year by year, unless watchful, this very dogmatism may react upon the teacher who finds it so much easier to say today what he said last year.... These unrefreshed, unregenerate teachers are often powerful instruments of harm and time and again have spread the blight of a blind conservatism in the profession. Safely enthroned in assured positions, men of strong and ardent convictions, with faithful friends and still more faithful students, too often they come within the scathing condemnation of the blind leaders of the blind.({5})

Both these specimens — the routinist practitioner and the routinist professor — have forgotten what it means to be students, if indeed they even knew. To immunize against routine, Osler commended four intellectual and moral habits:

1. "The Art of Detachment", by which Osler meant the self-discipline required to resist the insidious drift into routine.

2. "The Virtue of Method", a mixture of know-how and ingrained habit that would enable the busy physician to seize on important questions as they arise in his practice, and work in a systematic and scientific way towards solving them.

3. "The Quality of Thoroughness", or commitment to the exact and exhaustive principles and method of science. Thoroughness is the two-edged sword by which one can distinguish truth from untruth, and more important perhaps, from half-truth. The opposite of thoroughness is charlatanism, by which Osler means not blatant quackery, but rather that gradual accommodation to an indifference to truth which can so easily co-exist with a superficial impression of competence, experience and success.

4. "The Grace of Humility" — humility to recognize that the truth is hard to attain, that mistakes must be acknowledged, regretted and above all, learned from.({6})

The whole purpose of medical education was to inculcate these habits, which defined for Osler what it meant to be "a student". To ensure their survival after medical school, he prescribed three things: a notebook, a library, and a "quinquennial brain-dusting" (i.e. a study break or sabbatical every five years). The notebook is the reminder to observe and ask questions; the library is the means for keeping current with the latest developments; and the brain-dusting is an antidote to provincialism and complacency. The aim of all three is to keep the science in medicine, and the student in the practitioner.
Oslor practiced what he preached, remaining a self-confessed perpetual student throughout his life. Notebook in his vest-pocket, he devoured books and journals, and regularly traveled abroad; the result was a steady stream of publications that spoke eloquently of his scientific method, thoroughness, and discipline. But if students are made, not born, how did Oslor become a student — indeed, the model lifetime student?

There is no question that Oslor was not born a student. Quite the contrary, his academic career could not have begun less auspiciously. Not to put too fine an edge upon it, young William Oslor was a juvenile delinquent. He was expelled from his first school in Dundas, Ontario, after a series of pranks which included locking a flock of geese into the school-room over night, unscrewing all the benches and desks and hiding them in the attic, and shouting disparaging remarks about the headmaster through the keyhole of the classroom. The latter episode made the local newspaper. Thereafter, Oslor was packed off to boarding school in Barrie, where he proceeded to organize a trio of trouble-makers who were baptized “Barrie’s Bad Boys”. Some of the more harmless shenanigans of the Bad Boys included stealing fruit, stoning local livestock (Oslor personally was responsible for killing a pig) and dressing up as girls to hoodwink an American farmer who had placed an ad for a bride in a Toronto newspaper. Oslor’s parents pulled him out of the Barrie School, and probably just in the nick of time. Their third attempt at schooling Willie was to send him to Trinity College School in Weston, Ontario, under the direction of its founder, an Anglican clergyman of marked High Church sympathies named W. A. Johnson. The attraction of Trinity College School, so the legend goes, was that Fr. Johnson advertised that boarding students would be given extra lessons in drawing, music and dancing, which the Oslor parents, whether naively or desperately, hoped would civilize their brat. At first, the new environment seems to have effected no improvement. Willie and some accomplices wound up spending two nights in a Toronto jail on charges of assault after they almost asphyxiated the unpopular school matron. The boys filled the schoolroom stove with a mixture of molasses, mustard and pepper, so that the fumes rose to the matron’s room above through the stovepipe hole. W hen the matron tried to stuff the hole with clothes, the boys unstuffed it with classroom pointers. The desperate lady then sat on the register and screamed for help, while the little savages in the schoolroom below used their pointers with vicious effect upon such parts of her person as they could reach. Willie Oslor and his friends were sprung from jail by his older brother, the lawyer Featherston Oslor, who contrived to get them off with a reprimand and a fine.(7)

Father Johnson was the Warden, or Director of the School, but all the formal teaching was done by a humourless martinet of a headmaster, whose unimaginative methods of drilling Greek and Latin into his pupils, not to mention his devotion to caning, killed much of their joy in learning. Johnson, however, took over on the weekends, and that was when the fun began. A keen amateur naturalist, he took the boys out on specimen hunting field trips, and in the evening, read the classics of English literature to them before the fire. The impact of Johnson’s unconventional and informal style on Oslor was electric. What Johnson was doing was not supposed to be teaching at all, but it was Oslor’s first exposure to what he later came to define as “real” teaching — teaching about the real world, teaching by doing, teaching by example rather than coercion.

Imagine the delight of a boy of an inquisitive nature to meet a man who cared nothing about words, but who knew about things — who knew the stars in their courses and who could tell us their names, who delighted in the woods in springtime, and who told us about the frogspawn and the caddis worms, and who read us in the evenings Gilbert White and Kingsley’s ‘Glaucus’, who showed us with the microscope the marvels in a drop of dirty pond water, and who on Saturday excursions up the river could talk of the Trilobites and the Orthoceratites and explain the formation of the earth’s crust. No more dry husks for me after such a diet...(8)

Though Oslor ended up doing very well in all his formal subjects, it was what he learned on the side from Fr. Johnson that determined his life’s course. He became Johnson’s unofficial scientific assistant, helping him collect and prepare specimens for microscopic study, and sharing his vast enthusiasm for all the branches of biology. He also made the acquaintance of one of Johnson’s naturalist friends, an equally eccentric physician and professor of Natural Theology at Trinity College, Toronto, named James Bovell. When Oslor went to Trinity College as a divinity student, he spent most of his time hanging around Bovell’s house, and helping him with his scientific collections. The official courses meant little to Oslor, though as usual, he did well at them. It was at this time that Oslor picked up his lifelong habit of doodling Bovell’s name whenever he was bored in a class or meeting, and the notebooks for those freshman courses in catechism and Greek are filled with “James Bovells”. At the beginning of his second year, Oslor switched to medicine.

Classmates of Oslor’s at the Toronto Medical School remarked that he was an extraordinarily hard-working and conscientious student, but typically, it was not the lecture-hall that attracted him. Instead, Oslor spent endless hours in the dissecting room, or with Bovell’s microscope. He drank in all the medicine he could, but most of it was absorbed through self-teaching, learning by doing. Part of the doing involved serving as Bovell’s unofficial assistant on his house-calls and consultations, and exploring his huge library. He also attended Bovell’s lectures, which were unusual, to say the least. Bovell paid scant attention to the published syllabus of classes, and lectured on whatever interested him at the moment — and at the moment when Oslor was a student, it was the controversy over Darwinism. Oslor later confessed that deeply as he admired and loved Bovell, he could...
...Bovell's off-beat style was a reflection of his openness to what was new and exciting in the scientific world...it imprinted on Osler's young mind an exemplar of what it meant to be a "student" for life.

In my early days I came under the influence of an ideal student-teacher, the late Palmer Howard of Montreal.... With him the study and the teaching of medicine were an absorbing passion, the ardour of which neither the incessant and ever-increasing demands upon his time nor the growing years could quench. When I first, as a senior student, came into contact with him in the summer of 1871, the problem of tuberculosis was under discussion.... Every lung lesion at the Montreal General Hospital had to be shown to him, and I got my first-hand introduction to Laennec, to Graves, and to Stokes, and became familiar with their works. No matter what the hour, and it was usually after 10 p.m., I was welcome with my bag, and if Wilks and Moxon, Virchow or Rokitanski gave us no help, there were the Transactions of the Pathological Society and the big Dictionnaire of Dechambre. An ideal teacher because a student, ever alert to the new problems, an indomitable energy enabled him in the midst of an exacting practice to maintain an ardent enthusiasm, still to keep bright the fires he had lighted in his youth. Since those days I have seen many teachers, and have had many colleagues, but I have never known one in whom was more happily combined a stern sense of duty with the mental freshness of youth. (9)

It is worth pausing for a moment to reflect on a few details of this portrait. Howard was "an ideal student-teacher", "an ideal teacher because a student", a man for whom "study and teaching" were two sides of the same coin, a man at once mature and youthful. Since those days I have seen many teachers, and I have never known one in whom was more happily combined a stern sense of duty with the mental freshness of youth. (9)

Osler's method was to select three or four of his class to perform the autopsies during the week in the Montreal General Hospital; from these autopsies a certain number of specimens were selected for the Saturday clinic. Before the class met, the specimens were all arranged on separate trays and carefully labelled. Each specimen in turn was carefully discussed and all the important points clearly indicated. At the close of each case, questions were asked for and answered, the whole being most informal and conversational. The facts elicited in the autopsies were carefully correlated with the clinical histories and notes of the cases as taken in the wards. In order that his teaching should be of the greatest value to those in attendance he furnished each one with a written description of each specimen, and with an
...he rapidly began to attract a large and enthusiastic group of students for whom this informal, practical teaching style was a breath — or maybe a tornado — of fresh air.

I have most distinct recollections of the Sundays when he came early in the morning and spent the whole day in making necropsies, which we saved for him so far as it was possible to do so. I have known him to begin at 8:00 in the morning and continue at this work until evening. He would hunt for hours to find the small artery concerned in a pulmonary haemorrhage or the still smaller one whose rupture produced a hemiplegia. If he found something especially interesting he would send out the runner to get all the boys and show what a wonderful thing he had found and how beautiful and instructive it was. Once in the ward class there was a big coloured man whom he demonstrated as showing all the classical symptoms of croupous pneumonia. The man came to autopsy later. He had no pneumonia but a chest full of fluid. Dr. Osler seemed delighted, sent especially for all those in his ward classes, showed them what a mistake he had made, how it might have been avoided and how careful they should be not to repeat it. In thirty years of practice since that time, whenever I have been called upon to decide between these two conditions I remember
Teacher and student together conducted the physical examination, and discussed the various diagnostic options.

Later, at Johns Hopkins, Osler inaugurated what he called “observation clinics”, held three times each week. The clinics took place in an unpretentious room near the dispensary, furnished with a table and a half-dozen simple chairs. A few patients were selected by the assistants from the morning’s ambulatory clinic and brought into the room. Not only had the students never seen these patients before, but neither had Osler. Teacher and student together conducted the physical examination, and discussed the various diagnostic options. Students were dispatched to the library to look up articles of relevance; others were detailed to report on their researches at the next clinic.

One cannot help but contrast this transparent honesty with the style of Pepper, who was known to lecture brilliantly on Addison’s disease “using a patient with ordinary jaundice for the purpose of the clinic, knowing full well that it was a deception.”

One of the most heart-warming ways in which Osler identified with students was in his dislike of formal examinations. He was convinced that examinations were about the worst possible method one could contrive to persuade students to learn anything, and while he never achieved his goal of abolishing them, he did all he could to lighten their gloom. His Oxford students, accustomed to the formal style of British professors, recall with awe how Osler would circulate amongst the candidates as they wrote up their clinical reports and pass a few comments on the case, as if from colleague to colleague. For a moment, the student forget that he was writing an examination, and thought instead about what he was doing.

What Osler hoped to inculcate by these methods were life-time habits of observation, strategic reading, and intellectual curiosity and honesty — the scaffolding of good science and good practice. But he understood that in order for these qualities to be truly internalized, there had to be some emotional factor that engaged the student, something like loyalty and love. It was the teacher’s dual character as instructor and fellow-student that kindled these emotions, and furnished the motive force behind the intellectual virtues.

When a simple, earnest spirit animates a college, there is no appreciable interval between the teacher and the taught — both are in the same class, the one a little more advanced than the other. So animated, the student feels that he has joined a family whose honour is his honour, whose welfare is his own, and whose interests should be his first consideration.

This year, we celebrate the 150th anniversary of the birth of this remarkable physician and educator. The celebrations at McGill, fittingly, will focus largely on medical education itself, through symposia, addresses, and a special exhibition on medical student life in the 19th century. In this way, we hope not only to keep Osler’s memory fresh, but to dedicate ourselves anew to the intellectual, medical, and educational values he embodied, and to commemorate Osler’s own conviction that in a truly great medical school, everyone is a student, especially the teacher.

References
2. Ibid. 416
5. Ibid.
7. These episodes are recorded in Cushing, chs. 1-2.
8. Q quoted by Cushing, p. 34.
11. Q quoted by Cushing, p. 176.
12. Q quoted in Cushing, 229.
15. Cushing, p. 205.
17. For an typical example, see Cushing, p. 781.

OSLER SOCIETIES
MEET AT MCGILL

Walking Tour of Osler’s Montreal

by William Feind, O. C., M.D., C.M., F.R.C.S., Honorary Osler Librarian

In celebration of the Sesquicentennial of the birth of William Osler, a joint meeting of the American Osler Society with the Osler Club of London and the Japan Osler Society was held in Osler territory at McGill and Montreal from May 4-8. The main arrangements were planned by Dr. Lawrence Longo, Secretary-Treasurer of the AOS and the meeting was presided over by the President, Dr. Richard Kahn. Local support was provided by Dr. Richard Cressw, Chair of the McGill Osler Sesquicentennial Committee; Dean Abe Fuks, Chair of the Board of Curators of the Osler Library; David Crawford, Health Sciences Librarian; Pamela Miller, Acting Head, Osler Library, working with the staff of the

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2. Ibid. 416
5. Ibid.
7. These episodes are recorded in Cushing, chs. 1-2.
8. Q quoted by Cushing, p. 34.
11. Q quoted by Cushing, p. 176.
12. Q quoted in Cushing, 229.
15. Cushing, p. 205.
17. For an typical example, see Cushing, p. 781.
Library, Wayne LeBel, Mary Simon, Lily Szczygiel, and student researchers Caroline Cholette, Steve Watt and Steven Prescott and Stephanie Ratté, as well as by two members of the AO S, Dr. Charles Roland of McMaster University and Dr. William Feindel, Honorary Osler Librarian.

The meeting included more than 35 papers and was marked by three special evening events; the performance by Joseph Lella of his monologue, “Willie: A Dream”, the presentation of five excellent historical papers by medical students, and the banquet held at the University Club with a record attendance of 170. The Saturday morning tour of Osler’s Montreal, followed by a view of the exhibit of “Osler’s McGill Medical Education from 1870-1885” in the Redpath Museum, completed the sessions of this celebratory meeting.

The setting in the McIntyre Medical Sciences Building proved convenient with the presentations being held in the Charles Martin Amphitheatre, refreshment breaks on the 6th floor lobby or in the cafeteria, with easy access for organized tours of the Osler Library arranged by Pamela Miller and her staff.

At the meeting of the Board of Governors on 4th May, Dr. Longo invited me to speak about the two books planned to reactivate the series of Osler Library Studies in the History of Medicine. The first of these, “The Works of Egerton Yorrick Davis, M.D., Sir William Osler’s Alter Ego”, by Richard Golden, is almost ready for publication, having had the benefit of Charles Roland’s expert editorial scrutiny. The second manuscript, based on “Willie: A Dream” is in the stage of final preparation by Joseph Lella. The Board generously voted $6000 to support the publication of each of these two books for a total of $12,000. In addition, the Governors approved a gift of $1000 for The Friends of the Osler Library to finance special library activities. Later that evening, the members and guests of the Osler societies were invited to attend a concert in Christ Church Cathedral of I Medici di McGill orchestra, made up of members of the Faculty of Medicine. McGill’s Rhodes Scholar-elect for 1999, a brilliant mathematical student and former World Junior Champion Whistler, Marco Gualtieri, performed a whistling solo from a Gluck opera, entitled “D ance of the Blessed Spirits” (fortuitously providing an apt allusion to the generous Governors of the Board of the AO S). The main feature of the concert was a splendid performance of Mozart’s Concerto for piano in D Minor by Michael Rasminsky from our McGill neurological group. Dvorak’s “New World Symphony” with its blending of folk tunes from the southern states made an appropriate final rendition for our American visitors.

After the first day of papers on Wednesday, an evening session was devoted to Joseph Lella’s dramatic monologue “Willie: A Dream”, presented in the Assembly Room at the Strathcona Medical Building that provided a fitting ambiance, with its portraits of Osler and his contemporaries, Archibald, Bell, Campbell, Craik, Adami, Shepherd, Maud Abbott, Charles Martin, Roddick, and a white marble bust of Lord Strathcona, Osler’s friend and McGill’s great benefactor. Steve Prescott, President of McGill’s O sler Society, who singlehandedly managed the audiovisual support for all the sessions, played a convincing role of the sleeping medical student, as a counterfoil to Lella’s Osler.

After another full day of papers on Thursday, a reception and banquet with 170 members and guests was held in the billiard room and adjacent library and reception room of the University Club. The menu of the 1905 farewell dinner to Osler in New York at the Waldorf Astoria was recreated by Chef Monod with Larry Longo planning this down to the last detail. The three pieces of Oslerian silver, traditionally displayed at the annual banquet of the McGill Osler Society, figured in the proceedings. These included the handsome water-jug presented to Osler, when he was departing from Montreal in 1884, by the Montreal Veterinary College. The magnificent cigar box was given by Osler during his visit to the McGill unit, #3 Canadian General Hospital in France in 1915. Engraved on the outside of the lids are the arms of McGill and Osler and on the inside, the names of officers of the unit that include his son, Revere, as well as John M cC rae (of “In Flanders Fields”), two deans of Medicine at McGill, Herbert Stanley Birkett and Charles Martin, Campbell Palmer H oward, who was Osler’s godson, William Francis, later to become Osler’s bibliographer and librarian, and other McGill luminaries.

The toast to Osler was drunk by all members and guests in rotation (“a ceremony”, Dr. Francis used to comment, “that antedated antisepsis”) from the handsome loving cup originally presented in 1900 to Osler by the staff of the Troy Hospital, N Y, later bequeathed by Lady Osler to
Agi Blitz in which he examined medical humanism and the two cultures (1910-1979).

During the Friday sessions, two special features included the gift by McGill. Lord Walton responded to the Oslerian toast with witty and pertinent comments. After an amusing international Oslerian Triologue by Messrs Bliss, Fye and McIntyre, Richard Kahn presented

Dr. Richard Kahn, president of the American Osler Society at the banquet in the University Club.

Mrs. Kimei Moriyama presenting a volume of the writings of Confucius to Dr. William Fendel.

(From left to right) Tour of Osler's Montreal, Dr. John Golden, Mrs. Caroline Cholette and Dr. Richard Golden.

his presidential address on the intriguing story of the Hospital Ship “Maine” developed for medical aid during the Boer War, a project in which Winston Churchill’s American mother played a prominent role.

During the first paper of the meeting on Wednesday, Richard Caplan donated to the Osler Library R. Palmer H. Futter’s transcriptions of the first hundred of Osler’s autopsies performed at the Montreal General Hospital, an invaluable record for scholars. Michael Bliss gave an excerpt from his new biography, “William Osler: A Life in Medicine” and offered a tantalizing sampler handout of this forthcoming book. In the annual Mc Govern Lecture, John Stobobo grappled valiantly with the complex problems of health care in the next millennium and proposed a paradigm of Community Center Health Care System. Two William Bean AOS Student Research Lectures included Monica McGrann’s discussion of the emergence of human form in renaissance art by an erudite comparison of two interpretations of “The Expulsion of Adam and Eve” by Masaccio (the emotional version) and by Michelangelo (the anatomical version), and a fascinating paper by Reginald Fitz to the Osler Library of Aequanimitas, 2nd edition, 1906, by Lewis of London, which had been inscribed by Grace Osler. A rare volume of the writings of Confucius was presented to the Osler Library on behalf of the Japan Osler Society by Mrs. Kimei Moriyama. Dr. Palmer H. Futter kindly turned over to the Library correspondence between his parents during World War I, when his father, Lt. Col. T.B. Futter, was with the No. 16 Canadian General Hospital overseas.

Saturday morning was taken up by the tour of Osler’s Montreal by two busloads of members and guests. Caroline Cholette and Wayne LeBel had produced a fine brochure illustrating the Oslerian sites, spotted on both an Osler contemporary map of 1870s and a current map of Montreal City. The tour ended at the Redpath Museum where the exhibit “Osler’s McGill: Medical Education from 1870-1885” also organized by a team headed by Pamela Miller, displayed a comprehensive sampling of Osler’s time at McGill; this was sponsored by Richard Cruess and the Osler Sesquicentennial Committee and by Heritage Canada. Another exhibit, “Hospital Architecture: Treasures from McGill Collections”,

exhibit of Osler memorabilia and some of the fine 15th and 16th century holdings of the Osler Library from the famed Venetian printers, the House of Aldus.

The meeting had an international atmosphere throughout. Lord Walton from the Osler Club of London offered a celebratory Osler ode, Dr. Charles Roland described the formative years of the American Osler Society, Dr. Shigeaki Hinohara recounted the history and activities of the thriving Japan Osler Society, and Anne Andermann, McGill medical student and Rhodes scholar Dr. Shigeaki Hinohara at Osler’s desk.
now reading for a DPhil at Oxford, gave the history of the oldest Osler Society, started by the medical students at McGill in the early 1920s. As the quotation from Osler on the meeting program reminded us, "The great republic of medicine knows and has known no national boundaries".

The wide range of scholarly papers, the special events, the high enthusiasm of the members and guests, the historical banquet, with the Osler Library as the centerpiece of the week's "pilgrimage", all added up to a memorable celebration to mark Osler's Sesquicentennial.

References
1. Where the official dedication of the Osler Library took place on May 29, 1929 in the presence of the Prime Minister of Canada, the Chancellor and the Principal of the University and Professor W.S. Thayer representing Johns Hopkins University.

A H O L M E S  G O L D M E D A L
by Pamela Miller

In 1998, the Osler Library was presented with the first Holmes Gold Medal to be won by a woman. The medal is familiar to all McGill medical students. Named after one of the four renowned founders of McGill's Faculty of Medicine, the versatile Andrew Fernando Holmes, the prize is awarded to the student in his final year who has accumulated the highest marks throughout his medical studies.

The award was instituted in 1865 and some of the earlier recipients included Osler's friend and colleague George Ross as well as Thomas Roddick, who first firmly established Lister's principles at McGill and H.S. Birkett, Dean of Medicine from 1914 to 1921 and organizer of the N o. 3 Canadian General (McGill) Hospital.

Less well known is Katherine Henderson Dawson, the first woman to win the medal upon graduation in 1931. Modest, ("Another girl won it a couple of years later," K) Kay Dawson was born and educated in Montreal, the daughter of Annie Le Rossignol, herself a McGill student from 1890 to 1892 before her marriage to A.O. Dawson, a Montreal businessman. Five of their seven children lived to adulthood. Two died of tuberculosis at an early age. The loss of a brother and sister may have prompted Kay and her brother Howard Dawson (1896-1979) to enter medicine. Howard graduated in 1921, studied in Paris and on his return trained under Dr. Edward Archibald in surgery at the Royal Victoria Hospital. As a young man Howard too had contracted tuberculosis and spent time recuperating at the Trudeau Sanatorium in Saranac Lake.

Kay did not escape childhood unscathed, contracting polio, which left her with a severe limp. Hard working and demanding of herself, Kay entered medicine after two unhappy years of teaching. She became the first female resident at the Montreal General Hospital and was offered a fellowship in pediatrics at Johns Hopkins University. She turned down this opportunity in order to marry Davidson Ketchum of Toronto whom she had met while active in the Student Christian Movement. (She and Dave were both good friends of Dr. Wendell MacLeod who had won the medal the previous year and who was active in the SCM.) John Davidson Ketchum had been a music student in Germany at the outbreak of the First World War. His experiences in Ruhleben, the prisoner of war camp outside Berlin, prompted him to leave music and to go into psychology, ultimately becoming a professor at the University of Toronto. His book, Ruhleben, a Prison Camp Society, a study of the experiences of those interned in the camp, was published posthumously in 1965, with an introduction by Donald Hobb.

Pediatrics was Kay's first love. With two children, however, Kay practised medicine part-time, and was an active member of the medical staff of Women's College Hospital, Toronto, from 1934 to 1969, where she devoted herself to the diabetes clinics. Her generous support for medical research was directed to her alma mater, McGill University. We are grateful to Margaret Catto of Toronto for the donation of the medal, photos and diplomas relating to her mother.

Osler Sesquicentennial Symposium

S I R  W I L L I A M  O S L E R :  T H E  M A N  A N D  H I S  B O O K S

On Friday, September 24, the James McGill Society sponsored an Osler Sesquicentennial Symposium on 'Sir William Osler: the man and his books'. The event was co-sponsored by the Osler Society and Friends of the Osler Library and supported by a grant from Glaxo Wellcome. The symposium, held in the Redpath Museum, consisted of slide-shows and presentations. The moderator was Dr. William Feindel, President of the James McGill Society and honorary Osler Librarian. The guests and speakers were welcomed in turn by Principal Bernard Shapiro, Dean of Medicine Dr. Abraham Fuks, and McGill Library Director Frances Groen.

The speakers, specialists in their fields, dealt with medieval manuscripts (Dr. Faith Wallis), Islamic manuscripts in the Osler Library (Mr. Adam Gacek); Osler as book collector and bibliographer...
The Friends of the Osler Library: A Report and an Appeal

The invitation, pictured here, seems appropriate as we launch our appeal for 1999, the 150th anniversary of the birth of Sir William Osler, which we are celebrating this year. In 1876 he helped launch the Graduates' Society of McGill University, acting as its secretary. The organization has mushroomed since that day, providing much needed funding for a wide range of projects. Our Friends, founded in 1969, reflecting Osler's lifelong campaign to build library collections, provide essential funds for our book and journal purchases. Our new books are displayed to the right of the entrance to the Osler Library as you walk in. Histories, biographies, translations and reference works line the shelves. They are difficult shelves to pass, and next to the books, if a volume proves irresistible. The preface to Stephen B. Karch's A Brief History of Cocaine, (CRC Press, 1998), provides an excellent justification for a library such as ours. After publishing a paper on stress hormone-related changes present in cocaine user's hearts, the author explains his dismay at finding an earlier work on the subject in Stanford's Lane Library, Der Kokainismus by Hans M aier, published in Germany in 1926 (which is also owned by McGill's Health Sciences Library). Perturbed that someone might think that he had claimed an earlier work as his own, Karch began to write a letter to the journal intending to acknowledge earlier research. "It did not take a great deal of research to find that not only had the pathology of cocaine-related heart disease been studied, but cocaine-related heart attacks and strokes had been reported in large numbers, long before the turn of the century." This short, illustrated history of drug abuse is only one of several new works on medicines and medicinal plants, from "the pill" to medicinal plants of South Africa. Our comprehensive and attractive production, Florence Nightingale: Letters from the Crimea, 1854-1856, edited by Sue M. Goldie, (N.Y., 1997), brings us in direct contact with Nightingale's Crimean saga. A translation of Emmanuel Le Roy Ladurie's The Baggar and the Professor, (Le mendiant et le professeur) tells, in detail, the story of a Swiss medical family, the Platter family, who rose from poverty to prominence in the sixteenth century.

Over a dozen works in several languages have been added to our rich history of psychiatry section. The history of disease is expanded with works on the history of the Aids crisis, tuberculosis, plague, polio, leprosy, and even gout. And the 50th anniversary of the British National Health Service is marked in Health and the National Health Service, by John Carrier and Ian Kendall, (London, 1998), a study of its past and a fascinating assessment of its impact on health care in Britain. Several translations into English have appeared, of particular note: On the Fabric of the Human Body, books 1 & 2, a translation of Andreas Vesalius' De humani corporis fabrica ... translated by W. F. Richardson in collaboration with John B. Carman, (San Francisco, 1998). A Chinese ophthalmological text, Y in hai ching wei by Ssu-miao Sun (Berkeley, 1998), has been translated and annotated by Jurgen Kovacs and Paul U. Nschuld, and is entitled, Essential Substes on the Silver Sea: the Yin-hai jing-wei, (Berkeley, 1998).

Among our folio publications appears the extraordinary American Photographic Atlas of Civil War Injuries,
400 photographs of “interesting surgical operations or difficulties”. At the time, it was hoped that the photographs would document wounds but also help as a diagnostic tool. Its heartbreaking images are balanced somewhat by Nadéije Laney-Dagen’s L’Invention du Corps, la représentation de l’homme du Moyen Âge à la fin du XIXe siècle.

Finally, an invaluable reference work, Incunabula, the printing revolution in Europe 1455-1500, is a guide to the microfiche collection of incunabula around the world published by Research Publications International. It contains a comprehensive section on medical incunabula, an important part of Osler’s collection.

Most of your money has been used to purchase new and out of print works. But it has also been critical for staffing and special projects, especially in conjunction with this anniversary year. If you would like a detailed list of our new acquisitions, you may write to Mary Simon at the Osler Library or send her a note via e-mail at: simon@library.mcgill.ca

This brief overview perhaps answers a question/statement by a newly arrived student at McGill’s Faculty of Medicine. “Isn’t medical history just a bunch of doctors telling stories to each other?” He is partly right, and these stories are important. But medical history is more than that, and these stories are important.


The appeal for the 1999-00 academic year is made in this issue, No. 91-1999.

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