Professor Faith Wallis has been a major force in one of the biggest days in the life of the library and the Faculty of Medicine. Osler Day sees a number of events that celebrate Sir William’s varied interests. The day begins with the finalists of the Pam and Rolando Del Maestro William Osler Medical Students Essay Contest presenting their work. This is followed by the Annual Meeting of the Osler Library’s Board of Curators and the Osler Lecture, in which an eminent individual in the field of medicine and health delivers a thought-provoking talk. The day ends with the Osler Banquet, where medical students and some faculty and Curators come together to celebrate the day and Osler’s memory in general.

Professor Wallis has been a dominant figure in many of these events, both in the public eye and behind the scenes. As Osler Librarian for several years, she played a major role in organising the Curators meetings, as well as the lecture and banquet. Such as her dedication that even after she left the library for the professoriate, she continued to select the speakers for the lecture, and lead the students in organising the banquet. Perhaps her most memorable role occurred at the banquet, where after the dinner she would present a selection of Osler’s silverware and explain the rituals of toasting Osler in a medieval fashion. Although details cannot be revealed here, for many this is the highlight of the evening.

Professor Wallis’ decision to step back from the lecture a few years ago, and the banquet this year, was met with a mixture of understanding and sorrow at losing such an enthusiastic participant of the days’ events. The Osler Library, the students’ Osler Society, the Social Studies of Medicine department, and the Dean of Medicine felt that her years of service must be recognised, so one of her favourite medieval manuscripts in the library is being restored in her honour. This is *Bibliotheca Osleriana* 7579, *Tractatus varii de rebus medicis*, a Latin manuscript of three medical texts.

A plaque was presented to her at the Board of Curators meeting. Ms Steph Pang, Osler Society Co-President, praised her efforts on behalf of the Society in a manner which fittingly and movingly summed up all our feelings:

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A Rearguard Action Against Lobotomy? :
A Mary Louise Nickerson Fellowship in Neuro History Report

Yvan Prkachin

In May of 1940 Wilder Penfield and his occasional collaborator, the McGill psychologist Donald Olding Hebb, were in the midst of putting the finishing touches on a paper they were preparing for the *Archives of Neurology and Psychiatry*, entitled “Human Behavior After Extensive Bilateral Removal From The Frontal Lobes.” The paper, a report on the case of a 27-year-old sawmill worker who went by the initials K.M., was bound to be controversial. Penfield and Hebb had reported that, following a radical operation to remove a large portion of epileptogenic scar tissue from the patient’s frontal lobes, K.M. not only did not show any of the classic signs of frontal lobe extirpation, but remarkably, showed post-operative IQ scores that were actually higher than his pre-operative scores - a puzzling conclusion that was sure to draw fire from many neurologists and psychologists.

Tucked away in the archival folder related to this paper is a rather remarkable series of letters between Penfield, Hebb, and the twentieth-century’s most vocal proponent of lobotomy, Walter Freeman. Freeman had learned of their forthcoming publication, and had requested access to the galley proofs and images from the article in order to ‘liven up’ his own forthcoming book Psychosurgery (1942). Penfield was hesitant, and confided to Hebb that “I am not very keen about Freeman claiming too much about our paper and I should hate to see him use any of our illustrations. On the other hand, we do not want to insult him, but if you could find it possible not to have any spare copies of the illustrations, or something of that sort, I should do so.” [Fig. 1]. Two days later, Hebb dispatched a letter to Freeman containing the agreed-upon excuse, adding in a note to Penfield that “I think it sounds enough like innocent ignorance that he can’t take offense.”

The above anecdote would seem, on the surface, to support the popular understanding that Wilder Penfield was vehemently opposed to the mid-century practice of lobotomy, even going so far as to stage a sort-of ‘rearguard action’ against Freeman and his supporters by keeping his own research findings away from the American psychiatrist. The truth, however, is more complex, and reveals more about the troubled relationship between the emerging neurosciences and psychiatry in the twentieth century. The late Dr. William Feindel hoped that the remarkable archival collections of the Osler Library and McGill University could be tied together to help unravel the complex history of neuroscience. With the help of the Mary Louise Nickerson Fellowship for Neurohistory, I hope to make a contribution to such a project by untangling the untold story of Penfield’s brief involvement with psychosurgery - a story which is scattered through a number of archival collections, and touches upon topics ranging from the nature of intelligence to the CIA’s MK-Ultra mind control program.

Penfield’s curiosity about the frontal lobes preceded the growing fascination of the neurological community with the so-called ‘silent lobes’ – a fascination created in no small part by the practice of lobotomy. Indeed, Penfield may have performed the first ever full ‘lobectomy’ as part of an early surgery for epilepsy during his time at New York’s Presbyterian Hospital. However, the experience of removing a brain tumor from his sister in 1928 (recounted in his autobiography) provided Penfield with the opportunity for close observation of such a radical operation. Although his failure to remove all of the tumor from his sister’s frontal lobe was heartbreaking, Penfield refused to let the opportunity for close observation of such a radical excision go to waste. Over a period of approximately two years, Penfield kept close track of his sister, noting changes in her ability to organize her household and engage in daily tasks. Penfield ultimately published the results of this operation and others in a 1935 paper entitled “The Frontal Lobe in Man: A Clinical Study of Maximum Removals,” noting that “the close bond of sympathy that had existed between us for many years makes it possible for me to evaluate the effect of the loss of the frontal lobe upon her personality and her mental capacity.” The data that he gathered from these studies led Penfield to conclude that interference with the frontal lobes created a deficit in the capacity for ‘planned action,’ a research finding which has largely stood the test of time [Fig. 2].

It was also a research finding that did not escape the notice of Freeman, who wrote to Penfield in 1936 about a presentation of the frontal lobe paper: “I remember listening to the presentation which was the high light to me of the Association meeting that year, and the idea that such extensive removal of the frontal lobe could be accomplished without serious intellectual deficit must have sunk in because when the report of [Egas] Moniz’s work on leucotomy, a precursor to lobotomy] came to me it seemed that there must be something to it.” It seems that Penfield and Freemen, then, took different lessons from this dramatic family affair. Penfield became increasingly skeptical...
about the prospects of lobotomy, noting to a colleague in 1940 that he had initially been “filled with astonishment” regarding the initial reports of the Freeman and Watts operations, he had been unwilling to undertake the procedure himself, adding sarcastically that “perhaps many of us would be better off if we were converted into nitwits by some such procedure.” Freeman, for his part, continued to make reference in private correspondence to Penfield’s operation on his sister; in 1941, following the initial request to Hebb and Penfield, Freeman sent an additional request to make reference to the study in the same forthcoming Psychosurgery, adding that:

I can still remember the thrill of sympathy that went through me when you mentioned the fact that this first patient was your sister, and I think that it touches off one of the most beautiful stories in modern medicine, the confidence between a brother and sister, the sister relying upon the skill of the brother to save and prolong a pleasant existence.6

While Freeman continued to correspond with Penfield for much of the 1940s and 1950s, another character entered the story that would provide for an even more dramatic second act. Hired in 1943 after consultation with Adolph Meyer, Ewen Cameron represented Penfield’s boldest step towards integrating neuropsychiatry and neurology. In many ways, the hiring of Cameron grew out of a longer tradition in North American science and medicine that aimed to apply the power of laboratory research to the pressing problems of mental health. This program for ‘psychobiology’, advocated by the likes of Meyer and Alan Gregg of the Rockefeller Foundation, was one of the primary reasons for the founding of the Montreal Neurological Institute in the first place (Gregg’s Rockefeller Foundation had provided much of the funding). It must have come as something of a disappointment to Penfield, then, that his new hire appeared content to ‘go it alone’. After their first meeting in 1944, Penfield dispatched a letter in which he announced his disappointment that Cameron did not see fit to collaborate more thoroughly with the MNI. Apparently during the meeting Cameron had used an embryological metaphor to explain the situation, implying that the two developing twins might devour each other or compete with each other for resources. Penfield replied that this need not be the case, that the developing twins could in fact support each other, and offered resources and assistance, should Cameron change his mind. “I am personally disappointed. I can assure you, however, that any time in the future we will gladly establish the cooperation you consider unwise now.” Reflecting on the incident over a quarter-century later, Penfield recalled that “I looked forward...[to] having a constructive inter-relationship with Psychiatry so that [Cameron’s] cold and calculating interview, which took place in the Neurological Institute in my office here on the sixth floor, filled me with dismay,” and added that his previous correspondence with Cameron out to be filled under the heading “A gesture that failed.”9

Penfield’s views were reflected by others in the growing Montreal neuroscience scene at the time. D.O. Hebb, with whom Penfield had initially collaborated on the frontal lobe paper that had attracted Freeman, noted privately to McGill Principal F. Cyril James that Cameron had shunned collaboration with his own research psychologists, and complained that Cameron had gone behind his back to alter certain funding arrangements.10 However, by 1944, Cameron and Penfield had reached an agreement to collaborate on a small number of psychosurgery operations, known as gyrectomies. These operations constituted an effort on the part of more orthodox neurosurgeons to find ways to ‘improve’ or ‘rationalize’ the so-called trans-orbital or pre-frontal lobotomy (performed by inserting an icepick through the eye socket and passing it back and forth to sever neural connections). Penfield would perform the procedures, which consisted of a re-sectioning of the frontal lobes under full anaesthesia, and Cameron would conduct the pre- and post-operative evaluations; in effect, Cameron would select the patients, Penfield would do the surgeries, and together they would evaluate the results. Despite their differences, Penfield and Cameron came to similar, but subtly different, conclusions about the failure of the operations. Penfield noted that “gyrectomy is a difficult, long, and somewhat dangerous procedure...This operation is not proposed as an acceptable substitute for...frontal lobotomy,”11 while Cameron stated more ominously that “this operation clearly is one which has no greater value than the lobotomy...However, we may just as clearly state that it is reasonable to explore this new field of surgery and psychiatry through further modifications of this and other operations.”12 Privately, Penfield confided to John Fulton that he was having difficulty writing up the results, stating that “I couldn’t seem to send [the paper] off because of the feeling of responsibility for the interpretation of the results....The cases have made me do a certain amount of thinking, and in my case thinking takes time!”13 By this point, communication between the pair of doctors, separated a mere seven-minute walk, had become strained, with Penfield asking of Cameron in the fall of 1947, “When shall we get together to put our cards on the table in regard to gyrectomies?”14

Despite Penfield’s misgivings, Cameron persisted. In 1948, Cameron wrote to Penfield about conducting further lobotomies, asking “Could you let me know when you wish to start?”15 As late as 1952, Cameron wrote to Penfield describing his attempts to circumvent the need for lobotomy by a procedure that would create temporary hypoxia in depressive patients, adding “I am convinced that there is gold in this particular hill, but how to come at it is quite a question.”16 For his part, by 1954 Penfield had “given up such procedures altogether,” adding

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“Dr. Cameron…and I have decided not to do any lobotomies or gyrectomies for the time being. Other members of my staff carry out the procedure…when requested to do so, on chronic patients in psychiatric hospitals, but the number of such operations is comparatively small.”

It would seem, on the surface then, that after a few abortive efforts to experiment with a risky procedure, Penfield and Cameron came to the conclusion that the operation was without merit - thankfully for Penfield, and more reluctantly for Cameron. However, the story does not end there, and those readers who know of the disturbing history of psychiatric experimentation at the Allan Memorial Institute may have anticipated the next act. In 1955, perhaps not coincidentally following the breakdown of his collaboration with Penfield, Cameron began experimenting with a new technique for treating schizophrenia that he called ‘psychic driving.’ The technique, described in both John Marks’ book *The Search for the Manchurian Candidate*, and in the scholarship of Rebecca Lemov, involved among things, confinement in so-called ‘sleep rooms’ where patients were strapped to their beds and forced to listen to looped recordings of their own voices, often accompanied by a steady regimen of drugs including lysergic acid diethylamide (LSD), as well as electro convulsive therapy. When it was revealed in the 1970s that much of Cameron’s work had been funded by the Central Intelligence Agency’s MK-Ultra mind control program, many were quick to distance themselves from the fallout of such a profound medical scandal. Yet the story of Cameron and Penfield’s abortive attempt to collaborate suggests that the ties between psychiatry and neuroscience in mid-century Montreal were more complex, and worthy of historical investigation. With the help of the Mary Louise Nickerson Fellowship in Neurohistory, I hope to untangle much of this complex history.

Yvan Prkachin is a PhD Candidate in the History of Science Department at Harvard University. His dissertation research examines the role of Wilder Penfield and his associates in creating modern ideas of interdisciplinary ‘neuroscience.’

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Professor Faith Wallis Honoured

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“On behalf of all the Osler Society generations who have had the pleasure of working with you, we would like to thank you for your long-standing commitment to the Osler Banquet.

As the Society worked on organizing the 2016 banquet, many students who had attended in previous years told us that your energetic personality, exuberant sense of humour and engaging ability to recount stories and facts were highlights of the event. We would like you to know that we medical students have immensely appreciated your presence throughout these years, as you would never fail to bring your unique spirit of fun and Oslerian knowledge to the evening’s festivities.

Beyond the memorable rituals you led, we are also grateful for your key role in the development of the banquet planning process. Throughout our organizational work this year, we were struck by the intricate web of details we needed to attend to, and we greatly appreciated the well-established planning protocol that guided us. We can only imagine how much careful refining you must have contributed to it, so that the banquet could blossom into today’s tremendously popular annual celebration.

To express our gratitude for the many years of dedication you have given to the banquet, we will be contributing $200 towards the restoration of Bibliotheca Osleriana #7579.

Thank you again for developing the Osler Banquet into the immensely successful and much anticipated event it is today. We wish you the very best in your future endeavors, and we will continue working hard to carry on your legacy of humorous charm and organizational excellence for the many banquets to come.

With much gratitude, The McGill Osler Society 2016-17

Thank you, Professor Wallis!”
The Social and Cultural History of Postpartum Depression in Twentieth-Century Canada:
A Dr. Edward H. Bensley Osler Library Research Travel Grant Report

Heather Stanley

In June of 2016 I was able to trade the still-chilly weather of St. John’s, Newfoundland for the sun of Montreal for an intensive one-week research trip to the Osler Library. Over the span of that week I examined and photographed over fifty works pertaining to childbirth, women’s health, and mental health as part of a three-year project studying the contours of postpartum depression and maternal mental health in twentieth century Canada. Maternal mental illnesses both during and after pregnancy have become increasingly prominent in Western society, yet have only superficially been examined in the current academic literature, leaving both historians and clinicians largely in the dark about its past and its ongoing creation as a distinct illness. With a few exceptions – I was very excited to be able to examine one of the original self-published copies of Our Bodies Our Selves [Fig. 1] – I confined this trip to examining documents and published sources from the pre-World War II era as the Osler holds many such works not available anywhere else.

In order to answer the question of how maternal mental illness has been medically understood and constructed over time I began my week by examining the Osler’s extensive collection of midwifery and obstetrical-gynecological textbooks. Though medical views on the source of maternal mental illness changed over time – earlier works seated maternal mental illness in the pregnancy itself while later writers tended to see it as evidence of weak nerves overall – doctors’ understanding of the treatment seems to have been remarkably static in the first half of the twentieth century. Interestingly, this was in direct contrast to sources created by and for nurses (both professional and voluntary) during the same time period. In works such as the Victorian Order of Nurses (VONs) Newsletters [Fig. 2] it became clear that nurses were more likely to construct maternal mental illness as being in part due to the social conditions in which mothers found themselves, often blurring the lines between mental illness and the exhaustion caused by continuous confinements, poverty, and overwork. Being able to compare these two professions’ documents side-by-side suggested a new class element to my research which I am currently following up on. In the last part of my time at the Osler I turned my attention to popular health works on motherhood from both Canada and the United States. These works, though they rarely addressed maternal mental illness directly during this time period, are filled with the nuances of what separated “good” mothers from “bad” mothers and how struggling with a mental illness might complicate these ideals [Fig. 3].

I am grateful to the awards committee for their support, which did a great deal to offset the costs of travelling to, and staying in, Montreal to complete this research. The majority of this research will be used to complete a monograph-length study of how women’s experiences of maternal mental illness has changed over time in Canada and how social factors influence the understanding of mental illness. The project, which will include extensive oral history interviews, is expected to be completed by the end of 2019 when it will be submitted to McGill-Queen’s University Press for consideration for inclusion as part of their Medicine, Health and Society series.

Dr. Heather Stanley is an Assistant Professor at the Memorial University of Newfoundland. Her research focuses on the intersections of gender, sexuality and medicine.
Surface Tension: Skin, Disease, and Visuality in Third Republic France:
A Dr. Edward H. Bensley Osler Library Research Travel Grant Report

Kathleen Pierce

Over the course of the nineteenth century, French physicians and dermatologists increasingly emphasized the important role skin played as the indicator of the body’s overall health. Skin, after all, served as the body's main external, visibly legible surface. Concomitantly with this heightened observational attention paid to the skin was a greater emphasis placed on visual acuity in medical and dermatological education, and, subsequently, the proliferation of illustrated dermatological atlases, photographs, and wax-cast models, or moulages, that facilitated this rigorous optical training. As the century progressed, syphilis emerged as one of the primary concerns of French dermatologists. Not only was it considered one of the three major social diseases (alongside alcoholism and tuberculosis), but more than this, it disrupted many of the epistemological certainties that underpinned dermatological education: syphilis could remain latent, invisible to the diagnostic eye; conversely, when it did erupt, it often confounded physicians by manifesting on the skin’s surface with visual symptoms that mimicked other illnesses.

Around the turn of the century, new visual and medical technologies further complicated the diagnosis of syphilis. While serological testing allowed physicians to identify latent or invisible syphilis, false positives proved to be a major problem through the first decades of the twentieth century. Simultaneously, discourses surrounding evolution, civilization, race, and disease challenged physicians to consider who or what kinds of bodies could experience syphilis. Physicians working in France and colonial North Africa alike began to interrogate how race factored into the expression of syphilitic infection, once again parsing questions about the relationship between skin—this time, skin color—and syphilis, the body’s surface and internal infection.

In August 2016, I spent two and a half weeks studying material related to syphilis, dermatological education, and public health at McGill’s Osler Library thanks to the Osler’s generous Edward H. Bensley Osler Library Research Travel Grant. The research supports my dissertation, titled “Surface Tension: Skin, Disease, and Visuality in Third Republic France,” conducted at Rutgers University. The project considers a broad range of objects—from dermatological illustrations and moulages, to public health posters and vanguard painting—to understand relationships between the surface of the modern body and the surface in modern painting in fin-de-siècle France and its North African colonies. Given syphilis’ status as a major social concern and its particularly complex interactions with the body’s surface, it comprises a major theme of the study. Similarly, the Hôpital Saint-Louis—the center of dermatological and syphiligraphic research in late nineteenth century Paris—constitutes one of the project’s geographic centers.

At the Osler, I began by studying several dermatological atlases published by Hôpital Saint-Louis faculty, including: Ernest Besnier’s La Pratique dermatologique, Elie Chatelain’s Précis iconographique des maladies de la peau, and Alfred Fournier’s Le Musée de l’Hôpital Saint Louis: iconographie des maladies cutanées et syphilitiques. These richly illustrated texts benefited from chromolithographic prints, tipped in photographs, and photographic watercolors, among other representational devices. Chatelain, for example, boasts that his text includes fifty color plates hand finished by Félix Méheux. Méheux—a professional photographer-cum-in-house image maker for the Hôpital Saint-Louis—became well-known for his highly-detailed photographic watercolors. He painted directly on his own photographic prints, building up layers of translucent pigment that simultaneously allowed the artist to manipulate color and texture, reproducing the dermatological condition as faithfully as possible, while still allowing traces of the original, mechanically-produced image to show through [Fig. 1]. Like Chatelain, many of the physicians authoring these atlases repeatedly chose to illustrate their arguments with chromolithographic prints, hand-colored photographs, or even reproductions after moulages—all media altered by the artists’ hand—complicating arguments made by historians of science about the reign of mechanical objectivity in the early twentieth century [Fig. 2].
While the illustrated atlases reveal how physicians chose to represent the surface of the modern body to medical students, the Osler’s many volumes on prophylaxis and public health highlight how hygienists and physicians transformed medical knowledge for consumption by the general public. Many of these texts come from the Osler’s vast Paris Medical Theses Collection, while others, including shorter tracts and models of sexual health conferences, seem to have been collected and bound in several thematic volumes before entering the library’s collection. One of these volumes contains, for example, the text of a conference given by Dr. Paul Salmon to Parisian university students in 1906. Echoing medical theses and atlases employed by physicians and medical students, Salmon sought to sharpen student’s observational skills by describing the visual signs of syphilis they could seek out on various parts of women’s bodies, such as a neck-encircling rash often termed Venus’ necklace. He frames the successful identification of these dermatological irritations as a self-preserving tactic, although he is quick to remind students that they are not, in fact, doctors, and therefore might be misled by syphilis’ inconsistent expression.

In addition to these visual cues, Salmon offers hygienic advice, including: washing with antiseptic solutions, using condoms, or applying mercurial ointments after sexual contact. Notably, each of the hygienic solutions requires men to sterilize the surface of their bodies or seal off the skin, either with a protective layer of calomel or the second skin of the condom. A healthy body, then, is a sheathed body, a sanitized body, a smooth, sealed off, surface; in the case of its unhealthy inverse, disease compromises the skin’s role as barrier and manifests on the body’s surface. The study of several of the Osler’s iconographic holdings, including the chromolithographically-printed Concours d’Affiches du Bi-Borax Oriental, further situates this relationship between hygiene and the skin, while additionally figuring in the role of race [Fig. 3]. In 1898, Bi-Borax Oriental held a concours d’affiches, or poster contest, soliciting new designs to sell its trademark antiseptic borax product; it reprinted the competition’s finalists for public voting in L’Illustré Soleil du Dimanche.

The product’s function as a sanitizing soap that “cleans, purifies, and decontaminates” resonates with Salmon’s hygienic advice. Design H, reproduced in the lower right corner of the print, visualizes Bi-Borax Oriental’s disease-fighting potential. A fresh-faced woman proffering a box of the borax fends off death, who is seen emerging from one of the city’s polluted and polluting factories. Design F, conversely, imagines Bi-Borax Oriental’s interaction with the body. A chimney sweep squats before a solution of Bi-Borax Oriental to wash her hands. The soot coating her arms and face doubles to indicate skin color; the artist’s treatment of her lips and nose in the vein of racial caricatures ensures that audiences understand her to be African. She raises her arms to reveal Caucasian hands, soot and pigment dripping with the cleaning solution towards her elbows. This visualization of cleaning the body as metaphor for whitening the body reifies associations between race and disease, between civilization and health. The inclusion of “purify” in the product’s slogan reinforces conceptions of racial purity and whiteness as healthy and hygienic. And once again, the artist attends to the skin’s surface—its contamination, followed by its cleansing—in his depiction of a body moving from sickness to health.

The research conducted during my two weeks at the Osler will significantly contribute to several chapters of my dissertation. I benefited immensely from my time working with the collections at the Library, and I thank the library staff for their assistance, their insight, their generosity, and for the opportunity to work so closely with their texts and objects.

Kathleen Pierce is a PhD candidate in Art History at Rutgers University. Her dissertation analyzes the imbrication of disease, the family, and empire in the visual culture of France and its colonies at the turn of the twentieth century. This grant will allow her to complete a chapter, wherein she plans to deconstruct the iconography of prophylactic poster campaigns against syphilis.
Christopher Lyons, Head Librarian

Since the advent of online digital resources, libraries have been struggling to define their role in a rapidly changing environment. Fewer people need to go to a library to get access to information. The McGill University Library has been very active in acquiring books, journals and other material online, which allows for instant access 24 hours a day from anywhere in the world. Students like me who tended to work best late at night (and often close to the deadline) can now do all that research that they put off all day at 3 AM. What a Godsend! Historical research has further benefitted from the vast amounts of primary material that’s been digitised, including books, archival records and images. I think Osler would have been very excited to know that so many wonderful things once only available to those fortunate enough to have access to a great library would now be available to anyone with a computer. This is the dream of the great public library realised to a degree unimaginable by even the most idealistic thinker of one hundred or even fifty years ago.

Libraries, like other organisms, have reacted in different ways. Sadly, some have closed, or to use an evolutionary term, grown extinct. Others have struggled along, rolling with the punches in an attempt to keep open. The third way has been for libraries to take advantage of this transitory time and find opportunities to adapt and even reinvent themselves. I feel that the Osler Library provides a good example of an institution responding to the challenges presented by our era by keeping the best of its traditions alive while also adapting itself not only to remain relevant, but even increase its impact on the McGill community and beyond. This has been possible thanks to your ongoing support.

OPENING OUR DOORS TO THE COMMUNITY

One means is by engaging a wide and diverse audience in a number of ways. Here are several examples of this from the past year.

- Music lovers came to the library to attend a concert by Vincent Lauzer, who performed solo works for recorder as part of the 14th Annual Montréal Baroque Music Festival held during the summer. It was a sold out audience, and the acoustics in the library were praised [Fig. 1].
- In late September, sixteen members of the prestigious New York-based Grolier Club had a field trip to Montreal that we organised. In addition to enjoying the food and sites of the city, Grolier Club members, who are bibliophiles with substantial private collections, very much enjoyed seeing the richness of the Osler Library’s collection, as well as material held in Rare Books and Special Collections, the McGill University Archives and the Visual Arts Collection [Fig. 2].
- Our inaugural Michele Larose-Osler Artist-in-Residence, Dr. Lucy Lyons from London, England, was here in October and November. Dr Lyons’ work explores drawing as a participatory experiential activity that involves slow looking. She was a Postdoc Fellow at the Medical Museion University of Copenhagen, artist-in-residence at Barts Pathology Museum, and artist-in-residence at Ipswich Museum Suffolk. She lectures in drawing research at City & Guilds of London Art School and is a member of the Medical Artists’ Association of Great Britain. While she was here Lucy made drawings from illustrations, archival material and pathological specimens in the Osler Library and Maude Abbott Medical Museum. Lucy also held workshops with faculty and students to help them do so experience as well. An exhibition of this work is being planned for the near future. The artist-in-residence programme is generously supported by Dr. Michele Larose, an artist and paediatric neuropsychiatrist who trained in psychiatry and child psychiatry at McGill and in visual arts at Curtin University in Australia [Figs. 3, 4].
- We have also welcomed a number of other groups throughout the year. In October the History and Heritage Advisory Committee of the Royal College of Physicians and Surgeons of Canada held their annual meeting at the library. It was also an opportunity to show them some of our holdings and give them a tour of the original Osler Room. That same month, the library became a book laboratory for two classes from Marianopolis College, a pre-university college or CEGEP. Students not only learnt about medical history, but had to analyse books for clues...
of ownerhsip and usage [Fig. 5]

BRANCHING OUT

The Osler Library has also been reaching out to larger audiences beyond the university. One means has been through mounting exhibitions at various events. In September, the library co-curated an exhibition with the Bibliothèque et Archives nationales du Québec and the McCord Museum on Canadian-Chinese relations mounted in honour of the visit of Chinese Premier Li Keqiang to Montreal. We featured material from our rich archival holdings by and about Dr. Norman Bethune (1890-1939), the renowned Canadian thoracic surgeon and political activist who joined the Republican forces during the Spanish Civil War and the Chinese Red Army as a medic during the Long March in the late 1930s, where he died from blood poisoning caused by operating without gloves under primitive conditions. He was eulogised by Mao in an essay and is still revered in China today. This exhibition was viewed by Premier Li and Quebec Premier Philippe Couillard. Being a neurosurgeon, Dr Couillard enjoyed demonstrating how some of Norman Bethune’s surgical instruments were used [Fig. 6].

We also mounted an exhibition at the Canadian Cardiovascular Conference held at the Palais des congrès de Montréal in October. The exhibition, entitled “200 Years of the Stethoscope,” was a chance to display our collection of historic stethoscopes, plus works by Dr. René-Théophile-Hyacinthe Laennec and other pioneers.

The library has also been engaging students, scholars and visitors through its in-house exhibitions. Our current one, Rural Medicine in 20th Century Quebec: Stories and Devices is based on the life of Dr. Georges Lefebvre, who graduated from McGill in 1944 (MDCM) and practiced in Huntingdon, Quebec, for over 40 years. Organised by Dr Richard Fraser, medical student Laura Sang, Joan O’Malley, Marc Provost, Jerry Xie, Meriem Bounnab, and Lucy Luo, it includes a number of medical instruments used or collected by Dr Lefebvre during his career, which he donated to the Maude Abbott Medical Museum, as well as a number of books from the library related to medical practice in a rural setting. Dr Lefebvre exemplifies Osler’s respect for country-based family practices. In his speech to the graduating medical school classes of McGill and Philadelphia, published in 1905 as The Student Life, Osler stated that “there are country practitioners among my friends with whom I would rather change places than with any in our ranks, men whose stability of character and devotion to duty make one proud of the profession.” The vernissage saw an impressive turnout, including Dr. Lefebvre and his family. There will be a series of fascinating exhibitions in 2017. The library’s exhibition programme is generously supported by Dr Gail Beck and Mr. Andrew Fenus.

Your generosity has supported a number of other significant endeavours. Thanks to Mrs Pam and Dr. Rolando Del Maestro, the Osler Library held its fourth annual Pam and Rolando Del Maestro William Osler Medical Students Essay
Osler Library 2015-2016 Annual Appeal (continued)

Contest. The essay contest gives undergraduate medical students the opportunity to explore any theme of interest to them in the history, social studies, sociology, ethics, and humanities of the health sciences. It also provides them with the chance to be mentored by an expert in their topic drawn from the Library’s Board of Curators or elsewhere to complete their project, and to use the rich resources of the Osler Library and other libraries at McGill. One former winner of the contest, David Benrimoh, MDCM 2016, said that:

“It was the most rewarding academic experience I have had a McGill. I loved working with the excellent librarians to find relevant texts, sorting through rows of old books and picking out relevant titles, and thumbing my way though a good 23 books as well as many online resources. Nothing was more satisfying than the trek up the hill with the books I had used, returning them after weeks of scouring them for every drop of knowledge in them. Libraries are still magical places--and librarians are, more than ever, true wizards--as long as we learn to use them and are challenged to do so.”

The essays of this years’ three winners and the other contestants, plus the finalists from previous years, are available on the Osler Library website [Fig. 7].

The strength of the library’s collection can be seen in the amount of research that is carried out using it, especially by scholars who travel here from all over Canada, the United States and Europe. Our three endowed awards – the Bensley Travel Grant, the Mary Louise Nickerson Award in Neuro History, and the Dimitrije Pivnicki Award in Neuro and Psychiatric History, have supported a number of researchers and resulted in the production of a number of dissertations, scholarly articles and books. Each issue of the Osler Library Newsletter contains reports of this work. What also happens as a result of these research trips is that it allows researchers to make contact with McGill professors and students. This is a mutually beneficial by-product of the awards. Kathleen Pierce from Rutgers University, one of recent winners of a Bensley Travel Grant, expressed this nicely:

“I just wanted to thank you for having me up at the Osler for the past three weeks. It was an incredibly productive time for me, not only in the resources I was able to consult, but also regarding the McGill faculty and graduate students I was able to meet. In the end, I not only saw Annmarie Adams [Chair of Social Studies of Medicine] and Mary Hunter [Professor, Art History], but was also able to meet Mary’s graduate students.”

Another area where the ongoing support of our friends has had a profound impact is in collection development. We have been able to add wonderful material to our collection, from obscure ephemera that illustrates the more popular side of medicine, to breathtaking rare items which no one else has. An impressive example of the latter is an illustrated Japanese manuscript scroll depicting the dissection of a 37-year old women, a convicted felon. Known as the Kansei fujin kaibo-zu [trans.: Atlas of Female Anatomy in the Era of Kansei] the scroll dates from ca 1800. It is over 9 meters (30 feet) long and has 46 colour illustrations. According to Jonathan Hill, the dealer from whom this was purchased, dissection was frowned upon in Japan, whose system of medicine closely followed Chinese practices and did not regard anatomy as relevant to therapy. The first authorized dissection of a human only took place in 1754.

The scroll we acquired is one of very few copies of an important dissection performed in 1800 by three renowned physicians. As dissections were forbidden except with governmental permission, which was rarely granted, results of dissections almost always circulated covertly in manuscript form. There are only two other scrolls of this dissection known, both of which are held in Japanese institutions.

The scroll depicts various organs, and a skeleton prepared by boiling off the flesh. The final part reveals that the woman was carrying twins. Every illustration contains descriptive notes. The scroll also contains the first known demonstration of the filtering action of the kidney. Ink made from indigo leaves is shown being injected into the renal artery, which is then sutured or tied off. By compressing the renal artery by hand, one sees clear urine in the ureter and bladder. The kidney is then cut open, revealing particles of ink in the peripheral part (cortex), which led the physicians to conclude that the kidney behaved like a filter. This discovery predates that of Sir William Paget Bowman who is usually regarded as the first to describe the filtering action of the kidney in 1842. This is an important acquisition to our rich anatomical collection [Figs. 8, 9].

A second acquisition is ideally timed to the upcoming
bicentennial of the granting of a royal charter to McGill University in 1821. For several years the university existed in name only, until the Montreal Medical Institution (MMI), a free-standing medical school, was merged with McGill to become its first, and for many years only, faculty. Emulating the medical schools of Europe, particularly the Scottish ones that had trained the MMI’s founders, medical students were required to write a graduating thesis. The first graduating class of 1833 consisted of one student, William Logie. His thesis, entitled *Medical Inaugural Dissertation on Cynanche Trachealis*, was printed by A. H. Armour of Montreal. Copies of the thesis were distributed by the university [Fig. 10].

Ironically, McGill has not owned a copy of the Logie thesis for a very long time. Recent investigations revealed that there were three recorded copies, all in the United Kingdom: The University of Edinburgh, the Royal Collection of Physicians in London, and the Wellcome Library. The Wellcome Library’s copy was interesting in that it was originally given to the Medical Society of Edinburgh. Inscribed in it is the note: “September 1833, Presented to the Medical Society of Edinburgh - By order of the Principal, Governors & Medical Faculty - John Stephenson, Sec. Med. Fac., a quondam resident of the Medical Faculty”.

The *Medical Society* subsequently sold off its library in three sales at Sotheby’s in 1969. Logie’s dissertation appears in the Sotheby’s catalogue for the February 10-11 sale as lot 293. It was sold for ten pounds to an antiquarian book dealer, and then resold to the Wellcome Library on May 21, 1969. Wellcome’s accession records note that the library paid 11 pounds for it. In a profoundly generous gesture, this copy of the thesis was recently given to the Osler Library in time for the university’s bicentennial. The rather plain cardboard binding was removed, and was rebound in a deluxe McGill scarlet leather one, and it is hoped that the thesis will be much on display during the celebrations.

One final note must be made about the collection, and that is the restoration of another of the library’s treasures, namely the first printed copy of the *Bibliotheca Osleriana*. Lady Osler requested that the first hundred copies of the catalogue be distributed to people whom she chose. Dr W.W. Francis, the first Osler Librarian and the catalogue’s primary author, received the first advanced copy on May 15, 1929. This became his personal copy [Fig. 11]. Inscriptions in the book show that it went to his widow, and then his daughter, Dr Marian Kelen, who practiced medicine with her husband in Ormstown, Quebec. Perhaps out of a fierce sense of filial pride in her father’s accomplishment, Marian wrote on the inside cover “to go eventually to Osler Library - in 3000 AD or so. M.K.. Thankfully, the family didn’t wait that long, and Marian’s children gave it to us as part of a generous gift of material they had inherited. This tome was a well-loved treasure, showing not only the effects of much usage, but also many surgical interventions with masking tape and staples. Despite these efforts, the front cover was detached from the binding [Fig. 12]. Thanks to the endowed restoration fund created by Dr Fraser Muirhead in the memory of his wife Beverly Millar Muirhead and daughter Diana Catherine Muirhead, we had the means to properly restore the catalogue. Our conservator, Ms Terry Rutherford, proved once again that her skills are second-to-none and was able to repair much of the damage and even remove the adhesive stuck to the boards. The catalogue is now protected in a clamshell box and sits in the Osler Room near Dr. Francis’ ashes, surrounded by the many books he catalogued.

I thank you deeply for your ongoing support, which has allowed us to serve scholarship, medicine and the Oslerian tradition in old and new ways. For those of you who haven’t yet contributed, I invite you to join us as we journey together into the future.
The Bran Tub Approach to Writing Medical History

The length, strengths, and weak-nesses of new histories of the Montreal General Hospital and the Montreal Neurological Institute

Michael Bliss

The most critical reviews of Harvey Cushing’s two-volume, 1371-page *The Life of Sir William Osler*, published in 1925, emphasized its excessive length. One reviewer pointed out that it was twice as long as a recent life of Jesus. Another compared it to one of the old bran tubs that you paid a few pence to dip into at country fairs in the hope of finding treasures. With a presumably straight face, Cushing defended his book as having been written by a mere “humble surgeon” and containing the detail necessary to support a shorter, better biography in the future.

The bran tub approach to writing medical history is on full display in the two new hefty institutional histories Montreal has given the world this year. The 632-page history of the first fifty years of the Montreal Neurological Institute, by William Feindel and Richard Leblanc, and the 731-page history of the Montreal General Hospital, edited by Joseph Hanaway and John H. Burgess, weigh in on my bathroom scale at a total of 3.25 kilograms. Both books are overly long and excessively detailed. Each, in the bran tub tradition, contains a few treasures. Both books are written by physicians and surgeons. Both institutions will someday be served by shorter and better histories.

The authors of official, commissioned histories feel they have to throw everything into the tub. The “bran” consists of potted biographies of staffers of each of the institutions, outlines of their contributions, and credits for the first use of this or that procedure. Very long on internal detail, written by insiders, the books tend to skimp on context, failing to place their institution’s evolution in comparative perspective, and are sometimes factually unreliable (*The General* contains a number of minor errors on Osler’s work in Montreal). Much thought is given to illustrations, especially portraits of department heads and directors. Indexes are almost manic in their thoroughness.

The books are priced ($100 for the MNI, $65 for the MGH) well beyond the budget of the average reader—they certainly are not written for medical students—and probably have their primary distribution as gifts to staffers and required purchases by captive medical librarians. There are no e-versions. It can almost be taken for granted that bran tub prose utterly lacks literary merit and no one ever gropes all the way through the tub. After the first season of enthusiasm it is left to sit in forlorn storage, possibly never to be hauled out or dipped in to again.

What about the treasures? We certainly learn an immense amount from the books under consideration about the MGH and the MNI, the former institution having served Montreal as its...
principal English hospital for almost two hundred years, the latter a product mainly of the energies of Wilder Penfield and his associates in bringing modern neurosurgery to Quebec in the 1930s.

Writing *The Wounded Brain Healed: The Golden Age of the Montreal Neurological Institute, 1934-1984*, was for many years the retirement project of William Feindel, the MNI’s third director. He actually wrote very little, and most of the volume was written after his death by a former associate, Richard Leblanc. The strength of the book is the sense it conveys of the MNI as having been a creative home for all of the neurosciences - not just neurosurgery - as a centre for interdisciplinary and bench to bedside research, and as a school for the training of generations of talented neuroscientists who came to staff other institutions in Canada and around the world.

Editors Hanaway and Burgess put together *The General: A History of the Montreal General Hospital* as a collection of chapters written by a wide variety of authors, mostly retired department heads, specialists in their subject, some of them totally inexperienced at writing history, others now deceased, most of them managing to convey a commendable enthusiasm for and pride in the flourishing of their disciplines at the historic hospital. It happens that the very best chapters are near the bottom of this tub, i.e. near the back of the book. Michael P. Laplante’s history of the urology at the MGH is a model of its kind (Phil Gold on the department of medicine gets the silver medal), and the nurse-written chapters on the history of the nursing services are generally superior to the doctor-written chapters about medicine and surgery.

Perhaps treasures, perhaps lumps of coal, many chapters in *The General* necessarily refer to the huge difficulties the MGH has experienced in the last fifty years under pressure from a Quebec government particularly sensitive to the interests of the province’s francophone majority. There are many references to the horrendous bed shortages created after the advent of hospital insurance in the early 1960s, the terrible personnel problems caused by waves of anglophone emigration from Montreal during the separatist threats of the 1970s and afterwards, turf wars with the Royal Vic and other hospitals, and, at the end of the history, the very troubled, yet-to-be-written story of the McGill University Health Centre, of which the MGH is now one unit. While *The General* contains within itself a triumphant account of growth and professionalism in delivering world-class health care in often adverse circumstances, Dr. Hanaway’s conclusion to the book, on page seven hundred, is remarkably pessimistic. As it looks to the future, the hospital’s circumstances seem even more adverse.

In the May 2016 issue of The Literary Review of Canada, I published a stand-alone review of *The Wounded Brain Healed* in which I argued that this book’s serious shortcoming is its failure to be properly judgmental about the surgical methods and results obtained during the first half-century of the MNI’s history. The book does not really tell us how often the MNI actually did heal the wounded brain; it is weak in surgical context and evaluation; and it pays too much attention to Penfield, too little to what may be the much greater contributions to neurological science generated by such neglected associates as the neuropsychologist and superwoman Brenda Milner.

I concluded that review by predicting that the way is now clear for a new generation of professional scholars and writers to tell the truly important stories underlying the work of Penfield and the MNI, with *The Wounded Brain Healed* as a useful work of reference. The same is surely true for the MGH: Now that we have a history of every tree that makes up a modern general hospital, let’s put together a modern overview of the forest, particularly in the years when it was confined, menaced, and then lost its identity. Such books could almost certainly be much shorter than the compendia under review. They would not necessarily tell feel-good stories.

Of course in the broadest sense it is almost impossible not to feel good about health care as it has evolved in our societies in the last hundred years. Most of our medical and surgical bran tubs are full of treasure upon treasure, and for that reason can properly be given prominence at our literary fairs and feasts. In the 1990s I came along and wrote the shorter, more polished biography of Osler that Cushing had anticipated (and then went on to do the same for Cushing), only to find that many fans of the great physician preferred to keep on trying their luck by dipping into that good old big bran tub.


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Dr. Richard Golden – A True Oslerian

Sanjay A Pai

Over the years, I have informed friends and colleagues about news and other snippets that I believe would interest them and that they may not have been aware of. As this undoubtably contributes to everyone’s information overload, I have tried to keep it to a minimum, or so I like to think! A significant part of these snippets concern history of medicine and, of course, a large part of this deals with Sir William Osler.

On June 17, 2016, while scouring the net for something, I chanced upon something that fascinated me – a 1904 issue of the Indian Medical Gazette, with a reference, on page 386, to Osler’s appointment at Oxford! I immediately dashed off a mail about this, along with the URL, (https://ia800206.us.archive.org/12/items/indianmedicalga00unkngoog/indianmedicalga00unkngoog.pdf) to five Oslerians that I have been in touch with for the past 15 years. (Though I have been an Osler buff for 30 years, regular communication of this type has been possible only this century, thanks to the internet and email). For perhaps the first time ever, there was no response from Dr. Golden. I attributed it to it having slipped below his radar and thus, it came as a sad surprise to me when I received my issue of the Osler Library Newsletter about a month ago and learnt of his demise earlier this year.¹

My first contact with Dr. Golden was in 2002. I had emailed him about a project that I had begun, along with a friend, Roop Gurshahani – to compile a revised Osler’s Bedside Library for the twenty-first century. We were seeking opinions from physicians around the world (both Oslerians as well as others). After a reminder mail, Dr. Golden sent me his list; it consisted of Aequanimitas, A Way of Life, Harvey Cushing’s The Life of Sir William Osler, Oliver Wendell Holmes’ Breakfast Table series, Religio Medici by Thomas Browne, Walden by Henry D. Thoreau, Arrowsmith by Sinclair Lewis, The Double Helix by James D. Watson, The Lives of a Cell by Lewis Thomas and William Shakespeare’s works. Our final list was published in the BMJ in 2005.²

In March 2003, I read a review of The Quotable Osler in CMAJ – and in my youthful exuberance, emailed him and “informed” him about this addition to Osleriana. To my surprise – and mild embarrassment - he replied, stating that he was indeed aware of this and that he had, in fact, written the foreword to the book. (Because my PC crashed shortly after, I lost some of my mails and hence cannot repeat the exact lines here). He added that he would send me a copy of the book, which he duly did. The inscribed book occupies pride of place in my library, along with another inscribed book, also gifted to me by a prominent Oslerian. This latter physician had sent me a book compiled by him, in response to my mail, in 2002, asking for his list of books.

On April 5, 2003, I emailed Dr. Golden and thanked him for the book which I had received that day. I added, “I was wondering if you had heard of Jim Corbett, the Britisher who lived in India from 1875 to 1944 [1947?] before leaving it. He (sic) died in 1955. He is a hero of mine and indeed, of many Indians and others who have heard of him. Would you be interested in reading about him? I would be happy to introduce you to the man in a biography, Carpet Sahib by Martin Booth. The reason I remembered him today was the reference to the statement in Quotable...about how Bliss was surprised to find no fault in Osler. Booth writes precisely this in his biography of Corbett.”

I was referring to the statement by Bliss, “Try as I might, I could not find a cause to justify the death of Osler’s reputation,” while Booth had written, that despite his fears that he would discover that Corbett was “…a charlatan or...too pietistic and sanctimonious for comfort,” he had found that, “If anything, I have lost a boyhood hero and found a rare, true man.”

He wrote back, “Dear Sanjay: I’ve read Carpet Sahib with much pleasure. Jim Corbett was a most admirable man, a pioneer ahead of his time in many ways, and a role model par excellence. Like Osler he had some of the faults of his Victorian-Edwardian era that makes his memory more three dimensional without really detracting from his virtues. I found some shared experiences in the book that allowed me to better relate to him. I am a hunter in a small way (duck and pheasant) and appreciate fine firearms. Although I have never visited India I have been on safari (camera) in Kenya and Tanzania....... Corbett’s last words, ‘Always be brave, and try, and make the world a happier place for others to live in’ seems similar in spirit to Osler’s ‘To have striven, to have made an effort, to have been true to certain principles – this alone is worth the struggle.”

The Corbett story does not end here. On October 17, 2011, I emailed him, saying, “I seem to remember having sent [the other Oslerian] a copy of Carpet Sahib, a biography of Jim Corbett, some years ago. Corbett was probably my first hero - and remains one, to this day. He was a hunter and a conservationist [two not contradictory terms, you will learn, if you read his books]. I just wondered - would you be interested in a copy of the book? If so, I shall be most happy to procure one and send it to you by snail mail. I am certain you will enjoy reading about this brave gentleman...”

His reply to me, two days later, was, “Thank you for your thoughtfulness, but you were kind enough to send me a copy of this enjoyable book in 2003. This, of course, makes you very Oslerian, since W.O. on several occasions absently-mindedly presented libraries with second copies of Vesalius!” (I seem to recall now that it was not Carpet Sahib, but Light of Asia by Sir Edwin Arnold that I had sent to the other Oslerian).

There were other exchanges, too. I am an editor associated...
with the *Indian Journal of Medical Ethics*; on my request, in late 2011, he wrote a commentary on the relevance of Osler and his ethical values in the twenty-first century. 3

Besides this, in 2013, I had sent him a PDF of a slightly Rabelaisian research paper of ours, in *The National Medical Journal of India*. 4 His response to me was, “I had no idea that you harbored this E.Y. Davis streak! Osler (in his alter ego persona) would surely approve (sic).” He also suggested some ways to improve the paper.

To my reply, “Yes, I had thought, too, that WO would have approved - but had forgotten the EYD connection! Doubtless WO would have found a connection to penis captivis as well! Would you want to consider writing ... a letter to the editor...? (You may even want to include the penis captivis part!). Among other things, it will introduce Indian doctors to WO. Not too many know of him.” He agreed, stating he had been thinking along those lines. Subsequently, he wrote a letter to the editor in support of such quixotic research while simultaneously educating readers about Oslerian principles – as well as some of his hoaxes. 5

Thanks to Dr. Golden, readers of two medical journals in India have been instructed how a nineteenth- / early twentieth-century physician’s philosophy and way of life are germane to the practice of medicine, almost one hundred years after his death. I also discovered that I had two similarities with WO - an absent mindedness and a ribald sense of humour!

Obviously, I never met Dr. Golden. But like Oslerians all over the world, I will miss him.

Finally, this coincidence: Adam Golden writes, towards the end of his eulogy, “The mark of a man is the legacy he leaves behind.” Not too dissimilar from what I wrote in an obituary on my physician father, in 2005 - I ended it with, “Perhaps the line that sums him up best is the one I came across in another of his favourite books, *Light from Many Lamps*, a few hours after his death: ‘A man’s true wealth is the good he does in this world.’ (Mohammed.) “

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**REFERENCES**


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**SPECIAL OSLER EDITION OF THE PAPERS OF THE BIBLIOGRAPHIC SOCIETY OF CANADA**

The latest issue of the *Papers of the Bibliographic Society of Canada*, guest edited by Osler Librarian Chris Lyons, features three articles based on the collections of the Osler Library. Entitled, “Medical Examinations: Book History at the Osler Library of the History of Medicine,” the articles highlight formal and informal networks on knowledge among Canadian medics serving in the First World War, anatomical atlases in the 19th century, and William Osler as a bibliophile and collector. Copies of this issue cost $20.00 apiece and they can be ordered through:

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The library gratefully acknowledges the support it has received from the many Friends who responded to our last Annual Appeal for funds and other requests for the 2015-2016 academic year. Just under 200 people contributed a total of $251,899, which allowed us to undertake a number of initiatives and make important acquisitions.

We heartily thank all our Friends who sustain the Osler Library. Below is a list of those who have given us permission to print their names.

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