The role medical and non-medical drawings, photography, and film have played in establishing diagnostic categories and reinforcing stereotypes about mental illness has been treated by scholars in a variety of fields who analyze how images function to delineate often hazy boundaries between the so-called “normal” and “pathological” individual.

In France, the first psychiatric textbook to include photographs of psychiatric patients was Henri Dagonet’s (1823-1902) Nouveau traité élémentaire et pratique des maladies mentales (1876). A proponent of physiognomic diagnosis, which associated physical and facial morphology to personal characteristics (Pichel 2019), Dagonet strategically used visuals to make his textual arguments more convincing. Dagonet hired photographer J. Valette to create “portrait-style” photographs of a number of his alienated patients at the Sainte-Anne asylum in Paris. In the subsequent 1894 edition of his work, Traité des maladies mentales, held in the collection of the Osler Library of the History of Medicine at McGill University, Dagonet and his collaborators continued to deploy the use of photographic plates. See, for example, Figure 1 “Excitation maniaque,” which is featured in the chapter on mania.

Dagonet and his co-authors (1894) point to the diagnostic potential of the photograph by declaring (Figure 1):

*the physiognomy of the maniac reveals, at first glance, the disorder of their thoughts, the incoherence of their ideas, and the agitation of their emotions*
Valette’s photographs provide an apt example of how visual technology has been used by mental health practitioners to construct and define particular illness concepts and categories. At the same time, these images show how visual representation in psychiatry can blur the lines between “the disease” and “the individual,” with captions that equate patients’ identities and experiences to diagnostic labels including melancholy, megalomania, impulsive insanity, general paresis, and idiocy.

Perhaps the most notorious images of mental illness’ apparent visibility are to be found in the French nineteenth-century medical journals *Iconographie photographique de la Salpêtrière* (1876-1880) and its successor *Nouvelle iconographie de la Salpêtrière* (1888-1918), acquired by the Osler Library in 2013. Published under the auspices of French neurologist Jean-Martin Charcot (1825-1893), who contributed to the development of the anatomo-clinical method, *Iconographie* and *Nouvelle iconographie* contain now legendary photographs of eroticized women diagnosed with hysteria, and in particular, young female patients often pictured at least partially nude or in vulnerable positions (Figure 2).

Figure 2. “Attitude Passionnelles. État extatique” from *Iconographie de la Salpêtrière* vol. 2 (1878), Planche XXXVII. Image courtesy of the Osler Library of the History of Medicine, McGill University.
For scholars, these images of “hysterical” women have long been highly recognizable examples of how certain illnesses—psychiatric, neurologic, or otherwise—are inextricable from our cultural and societal ideas about the visibility of gender and sexuality, mental pathology, and physical normativity (Didi-Huberman 1982; Gilman 1993; Hunter 2016).

In my dissertation, *Time to Cure: Psychiatry, Psychology, and Speed in Modern France, c. 1880s-1930s*, I approach the use of images in French psychiatric practice from a different vantage point. Rather than focusing on the creation of a visual language of mental illness and corporeal “stigmata,” I investigate how psychiatrists and neurologists used photographic and cinematographic technologies to depict and support their conceptualizations of “cure.” I ask: how did these practitioners use images to represent individuals “cured” of mental illness?

Visual sources produced during World War I allow me to begin answering this question because during this period, for the first time in a long time, widespread swaths of the French mental healthcare community (composed of psychiatrists, neurologists, and some psychologists) began arguing in favor of the curability of mental illness. Pressured by the constraints of war and the need to keep soldiers on the front lines, French neuropsychiatrists (as mobilized practitioners were often called) aggressively promoted the idea that wartime mental illness—like “battlefield depression,” “emotional syndrome,” and “pitiatism”—were, in fact, easily, rapidly, and readily curable. This broadly accepted tenet endorsed during the war marks a general shift in the attitude toward the status of mental illness, as for much of the late nineteenth century, most asylum doctors (as well as the general public), in the wake of Morel’s vastly popular “degeneration theory” (Morel 1857), considered “insanity” to be durable and incurable.

In order to support these claims of curability, wartime psychiatrists and neurologists working in militarized mental health institutions known as neuropsychiatric centers were keen to differentiate between mental “alienation” and mental “accidents.” They used the former term to refer to “insanity proper” and the latter to denote short-term psychiatric “episodes.” Mental insanity (*aliénation*) was the purview of aliens or asylum doctors, and should be treated within the asylum system and away from the front lines. Wartime mental “accidents,” on the other hand, susceptible to cure, could and should be treated in the military institutions designed specifically for that purpose.

My research shows that these wartime practitioners began to deploy photography and cinematography in a new way. In addition to using these technologies to create images of illness and physical disability, they departed from this longstanding use of visuals to enlist photography, moving pictures, and film stills in constructing medical evidence for “curability.” By advertising “cured” soldiers in the pages of their publications and on the reels of their specialized medical films, not only were neuropsychiatrists fostering the idea of psychiatric curability writ large, but they were also using these technologies to bolster their own professional reputations and therapeutic techniques. As historian Gregory M. Thomas has argued, psychiatrists used World War I as an opportunity to advance their professional status in the wider medical community and within public opinion by demonstrating their value to the national war effort (Thomas 2009).

In addition to working with archived films at the L’Établissement de communication et de production audiovisuelle de la Défense (ECPAD) in France, I also used a number of textbooks, periodicals, and medical manuals to analyze how various French practitioners used images to depict soldiers “cured” of mental illness.

One of these practitioners was a doctor named Gustave Roussy (1874-1948). Roussy, though a specialist in neuroanatomy, was—like many during this period—drawn to the study of wartime mental health problems of a psychological origin, also known as “functional problems” (Walusinski, Tatu, and Bogousslavsky 2016). These mental disturbances were mainly identified through manifestations of the body—physical tics, sudden-onset mutism, inexplicable paralysis, and uncontrollable trembling. In *Les Psychonévroses de guerre* (1917), also part of the Osler Library’s collection, Roussy and his co-author, neurologist and psychiatrist Jean Lhermitte (1877-1959), did not limit their application of photography and film to the depiction of symptomology. Instead, Roussy and Lhermitte used visuals to portray their vision of bodies and minds remedied by electrotherapeutic cure.

As has been well studied, electric currents were used by the French military health services during World War I. Following the example of the more famous French neurologist Clovis Vincent (1879-1947), whose violent treatments were dubbed “torpillage” by one of his own patients, Roussy was a vocal proponent of these methods of medical intervention for both “functional” and what he called “hystero-organic” problems. But rather than using photography and film stills in his publication as an opportunity to show other practitioners how to actually perform treatments, he and his colleagues used these technologies as a means to capture and depict the “cured” patient-solider.

To do this, Roussy and Lhermitte borrowed a technique pioneered in the field of surgery and with a few precedents in psychiatry: before-and-after photography (Rogers 1991; Sidlauskas 2017). In Figure 3, for example, images A-I depict a naked soldier diagnosed with “psychoneurosis,” established by the visual demonstration of his “pathological gait.” His curved spine, bent forward in an awkward and uncomfortable angle, was most likely characterized by his doctors as a sign of camptocormia, a term coined by French neurologists Alexandre Achille Souques and Inna Rosanoff-Saloff to describe an often-assumed psychogenetic disorder characterized by abnormal flexion in the back.

But in addition to photographing the patient’s pathology, Roussy and Lhermitte included images K, L, and M. In the
accompanying caption, this series of three images is described as depicting “the same patient, cured, after one psycho-electric treatment.”

In another manual dedicated more specifically to treatment, *Traitement des psychonévroses de guerre* (1918), Roussy, Jules Boisseau (1871-1961) and Michel d’Oelsnitz (1877-1946) deploy the same techniques. In Figure 4, we see twenty film stills of a soldier’s hands. The text explains that Figures 1-10 (those in the two left hand columns) are cinematographic proofs taken before a session of electrotherapy and Figures I-X show the same patient’s hands after the treatment.

These photographs and film stills were meant to have a powerful and persuasive effect. Separating the “before” of illness from the “after” of cure, these figures reflect the idea that the “functional” body was taken as a sign of an at least partially stable mind. The depicted bodies and limbs in torsions and twists appear, with the help of these images, as suddenly reformed and realigned. Indeed, the temporal work of these visual technologies served to promote and enhance what I have called the tenet of “rapid curability” (Woolner 2020), where the time required to cure psychological traumas was promoted as short.

**Citations**


Memories of Joseph William Lella
(1936 – 2020)

By Matthew Lella

My dad died Oct 28th at Jessica’s House Hospice in Exeter, Ontario. He was diagnosed with cancer 18 months earlier, but it is likely that it had been growing slowly for much longer than that.

He was comfortable in his last months, all things considered, and I am grateful for the care he received at this small country hospice given the obvious challenges we are all living with now. Having grown up with him (and the many colleagues and students from McGill that were often with us in our house), our family were sensitised to the personal challenges that face healthcare workers. And to their tremendous dedication to helping others. As you likely already know, Joe devoted a large part of his professional life to the goal of humanising medicine and healthcare in general. William Osler was his hero.

My strongest memories of life with him are in and around Montreal. Many of his strongest memories are of course located in and around New York, where he grew up. During his long descent, he talked a lot about life in NY and Montreal (and London England, where we lived for only 16 months, but which he loved forever). What surprised me in these last conversations is how much he felt at home in Southern Ontario - it seems so far from his Montreal, NY or London. I would never have thought that the agricultural fields and small townships in and around Stratford, Goderich, London and Bayfield would have inspired so much in his mind.

Here’s the thing.

Over and over again in his last months, he talked about Sir William Osler, about the Osler Library, the Osler Society and about all the people who have admired and been influenced by Osler’s work. And that moment, in Vancouver, walking along the sea-wall, when a longtime friend and colleague suggested that he meld his love of theatre with his research on Osler (et voilà, Willie: A Dream was born). Osler, Osler, Osler - he was ever present for Joe.

The lesson that I absorbed from all of this is that the line that separates your personal life from your work life is a myth... There is no line, there isn’t a division - no separation between who you are and what you do. You do as you are.

Was this Joe’s lesson? Or Osler’s? Well, I believe that creativity mostly builds on the ideas of others.

Anyway, in the end, the agricultural landscapes around Exeter, not so far from those that inspired Osler, that shaped his worldviews, led him to believe that medicine and science should treat people not diseases, that education should be generous, well-rounded and fulfilling... these same Southern Ontario landscapes are now part of Joe.

So much that this is where he will spend forever. It seems far from New York or Montreal, or his and Osler’s London, but it’s not from who he is. He will be forever surrounded by thoughtful artistic and caring people, by good food growing everywhere, by the cool water and long views on Lake Huron, by the unimaginably beautiful late afternoon light there... in short Pa, as we have come to call him, has found a place that represents all the things in humanity that he lived for and loves most.
y mother always said that Joe was a “real Renaissance man” and I agreed wholeheartedly with her – until I learned the word “polymath.” Nothing wrong with being a Renaissance man, a well-educated, well-rounded, just-about-everything-interesting sort of person, well-traveled, well-read, well-liked. There aren’t too many Renaissance men or women around and we consider ourselves lucky if we happen to meet one, or, even better, to know one. To have had one in the family for upwards of half a century was more than just a pleasure, it was a bestowed privilege.

But “polymath,” I think, fits Joe even more closely. And the reason is the definition I found for polymaths: they are persons with a level of expertise who are able to put “a significant amount of time and effort into their avocations and find ways to use their multiple interests to inform their vocations.” Joe would have liked that definition. With his academic background, he would have started by explaining *Voces*, from the Latin “I call,” from which we get “vocation,” a call to a profession or job or life work. Joe was called to be a teacher, his vocation, his life’s work. But the call to entertain, the clarion calls of the theater and the musical world, were almost equally as strong. He gave in to both, embraced both, with the same joy of learning. Joe informed his vocation with his avocation. He became a song and dance man with a PhD.

Once, at my parents’ house before Elisabeth and Joe were married, my father cornered me in the kitchen and asked in a worried sort of way if “that guy” – meaning that guy at the piano who had spent the evening entertaining us with a Gilbert and Sullivan song fest, interspersed with the Beatles, ’60s civil rights anthems, and most of the music from *The Music Man* – if that guy was “serious.” I assured my father that he was. A serious student. Serious about life – as long it contained a serious vocation, his life’s work. But the call to entertain, the clarion calls of the theater and the musical world, were almost equally as strong. He gave in to both, embraced both, with the same joy of learning. Joe informed his vocation with his avocation. He became a song and dance man with a PhD.

I had already known Joe for a year. We were living in Chapel Hill, North Carolina – Chappo Heel, as the Tar Heels said it – that magical place where we were all in our twenties, all broke, and bursting with books and ideas and ideals. I’m not sure how we had originally met Joe but he was suddenly in our lives, in our living room, at our piano, singing “Bye, Bye Birdie.” Ellen was living with us, and Elisabeth and Alexandra drove down from New York for a visit. A few visits more and it was all over for Joe. He was smitten.

In a way, in those years, he was smitten by life. Or maybe smitten in life, or with life. He would get carried away with enthusiasms. “I’m going to carve Sean out of Carrara marble,” he would enthuse about my baby son, cooing over his sweet pinchable arms and legs, and it didn’t occur to me that Joe didn’t have access to Carrara marble and didn’t know how to carve marble anyway. Or maybe he did. He seemed capable of anything. Everything. He wanted to go everywhere, see everything, sing everything. He would show up at a party, ukulele in hand, and strum a few chords. I think he only knew a few chords, but it never stopped him from starting and before you knew it he’d have the room divided into sopranos, altos, tenors and basses.

Is “performing” the right word here? Does it imply that he took over the party, that he was showing off, that he thought he was Lenny Bernstein and Pete Seeger rolled into one? But “performances” were what he gave later in his life, the dramas and musicals in which he starred and for which he rehearsed for weeks at a stretch. In his twenties he was still only finding his “pitch,” so to speak, expanding the comic routines he’d stored up since adolescence, establishing the right vibes. “It’s all in the timing,” a professional entertainer once explained to me, and Joe intuited this. He would strike those first tentative chords on the ukulele as a conversational bridge or perhaps a way to vivify a dull party, but little by little his need to scratch the entertainer’s itch would take over, and plinkety plinkety would sound on the ukulele and soon someone would call out, “Joe, do that thing from *The Music Man*,” or “Joe, how ’bout a little Ray Charles?” And with no hesitation at all, he would oblige. And so the myth was born: Joe Lella, Life of the Party.

Was he helped along by native talent? No getting away from that. Languages came easily to him and so, of course, did imitations. Chapel Hill boasted its own planetarium and once when it had put together a show featuring the American moon landing, Joe was asked to “do” President Kennedy’s voice. “Ask not what your country can do for you,” a Massachusetts voice intoned, “but what you can do for your country.” I made a trip to the planetarium to check it out and couldn’t tell whether it was Joe or the president speaking. Joe could make the epiglottal sounds with his tongue along with Miriam Makeba when she sang the “Click song” while the rest of us struggled
just to get out anemic sounding clucks. “How do you do it?” I would pester him to explain, to show me. “Where do you place your tongue?” He would fish around in his mouth for a few seconds, finally say, “I don’t know, I just do it.” He played piano by ear, using pretty much the same formula. He didn’t speak Italian but he knew all the repeated family expressions and the vulgar neighborhood ones. When Ellen and I tried to learn them, he would say patiently, “You still sound American. You have to roll your R’s. Like this.” Striking a dramatic pose, wine glass aloft – “I feel like my grandfather now” – he would declaim, and we would repeat, “Una cena senza vino e como un giorno senza sole.” But even if we got the words right we didn’t get the accent to his liking. “You’re too uptight. When you speaka the Italiano – ” here waving his hands around like an impassioned paesano – “you have to let yourself go.”

He knew how to do that: let himself go. He could inhabit the voice and the persona. Many years later, after he had strutted back and forth across a real stage as Professor Harold Hill, the big-talking, lovable con man mauling his way through “The Music Man,” after the success of “Little Me,” after his foray into Gilbert and Sullivan operettas, in which he had leading roles, he took on the dramatically demanding role of Roy Cohn in “Angels in America.” Cohn wasn’t a singing role, had none of the charlatan’s charm of Harold Hill – probably his favorite role – or the comic hilarity of a G&S production. Cohn was a vicious, back-stabbing bully, obscene in thought, word and action – and yet at the end of the play, the audience is profoundly moved by the complexity and ultimate sadness of his character. The applause meter indicated that Joe had succeeded in putting this combination together and pulling it off. It goes without saying that he had huge reservoirs of self-confidence. And EGO spelled in capital letters. He could sometimes be boastful but I didn’t think of it as bragging so much as a fullness of self spilling out.

He had a talent for drawing (mostly clever cartoons) and another for painting (mostly small watercolor landscapes). These were for his own amusement, except for one notable Christmas card he made and showed around. It was the year when the outcry to “Put Christ back in Christmas” had become a full-fledged battle cry. Stalwarts on the right claimed that writing “Merry Xmas” was an affront to Christianity, while those on the left insisted it was merely an abbreviation. Easing into the fray, Joe explained to anyone who would listen that the X in Xmas was actually a Christian symbol dating back to Constantine the Great. Thanks to a vision that the emperor claimed came straight from God, he had had chi rho, the first two letters of the Greek word for “Kristos,” inscribed on his soldiers’ swords. The following day he led them into victorious battle.

So that’s the background of a Joe story that began this way: Ellen and I were in the house making Christmas cards when Joe came in. He sat at the table where we were working, watched us for a while, took a piece of paper, and started making his own card. When he was done, the cover featured a small reindeer lying on its back in a straw-filled manger, sucking a baby bottle. Its shiny red nose appeared at the top of the manger, two tiny hooves at the bottom. Santa was standing nearby, shaking his finger admonishingly, saying, “Rudolph, if I’ve told you once, I’ve told you a thousand times to stay out of that manger.” Inside, the message read: “Put Christ back in Christmas.”

Sometimes Joe’s talents could be tough on Elisabeth. Because if Joe was the star of every show, Elisabeth was of necessity the rehearser of the star. Night after night she fed him his lines. And as show time drew nearer, she was also the vacuumer of the house and polisher of the silver, the clean linen supplier of the guest beds for all the relatives and friends coming to clap for Joe’s performance, the cooker and cleaner-upper of all those meals that had to be prepared, and finally the planner and executor of the parties given sometimes for cast members and sometimes for the members of the choral groups he had joined.

These were the times that tried the limits of her uxorial patience. With eye-rolling ire, she would repeat to her real sisters the story of the biblical sisters Martha and Mary: of Mary who sat at Jesus’s feet and soaked up his words, and of her sister Martha who was too busy scurrying around taking care of household business to listen to his teachings. But by the end of the day, Martha had had enough. She complained loudly to Jesus about the unfairness of the situation. “Lord, don’t you care that my sister has left me to do all the work by myself? Tell her to help me.” And what did Jesus respond? “Martha, Martha, you are worried and upset about many things, but only one thing is needed. Mary has chosen the better part and it will not be taken away from her.”

Elisabeth would recount this parable with mounting indignation: “Worried and upset about many things, indeed! Good thing he didn’t come here and tell me my sister had chosen the better part! What I would have said is ‘The one thing that is needed around here, Lord, is a little HELP!’ ”

It wasn’t as if Joe didn’t appreciate all her work. He did, and he was known to help out around the house when needed. He was a good cook and he could push an occasional vacuum cleaner. But being a Star is a time consuming business – and often consumes the Star. Plus, it can’t be forgotten that, in his family, Joe had been a star since childhood. And not just a Star but a Bronx Italian-American Prince. He sang and clowned his way through family gatherings from childhood on, polishing his routines, and always to the tune of applause.

But concerning his serious side, the side I was trying to convince my father of: out of high school, Joe entered Dunwoodie seminary, preparing to study for the priesthood. I never talked with him about the reasons he considered being a priest, nor about the reasons he stopped wanting to become a priest, but he left the seminary when he graduated from college at Dunwoodie. However, his years there were not wasted as far as honing his talents. He used to talk with great affection about the musical shows the young seminarians wrote and put on. One song I remember, which he once sat at the piano and played to the tune of “There Is a Tavern in the Town,” was
“There Is a Thaumaturge in Town.” We laughed at the thought that only a bunch of wiseacre seminarians studying theology would even know what a thaumaturge was.

“There’s nothing the matter with Catholicism that a few years of psychotherapy won’t cure,” he occasionally joked – usually on our way home from Mass. In church, Ellen played the organ, I sang in the choir, and at one late Saturday night party we had dragooned Joe into coming with us the next morning. From then on he came every Sunday, and often with other like-minded friends who were teetering on the fence between belief and skepticism, we would go back to our house for a breakfast of conversation. Thomas Merton, Teilhard de Chardin, Philip Roth, John Updike, Odetta, John Cage – all grist for our Sunday morning eggs and bacon free-wheeling free-for-alls. Roth, John Updike, Odetta, John Cage – all grist for our Sunday morning eggs and bacon free-wheeling free-for-alls.

Joe remained Catholic all his life, a serious student of the faith, a serious student of its history, a serious critic of it and a serious lover. “What I feel most about the church,” he once told me, “is a serious student of its history, a serious critic of it and a serious student of psychotherapy won’t cure,” he occasionally joked – usually on our way home from Mass. In church, Ellen played the organ, I sang in the choir, and at one late Saturday night party we had dragooned Joe into coming with us the next morning. From then on he came every Sunday, and often with other like-minded friends who were teetering on the fence between belief and skepticism, we would go back to our house for a breakfast of conversation. Thomas Merton, Teilhard de Chardin, Philip Roth, John Updike, Odetta, John Cage – all grist for our Sunday morning eggs and bacon free-wheeling free-for-alls.

Joe remained Catholic all his life, a serious student of the faith, a serious student of its history, a serious critic of it and a serious lover. “What I feel most about the church,” he once told me, “is my affinity for it. I’m comfortable in it. With it. It’s part of my heritage, my culture.” That didn’t seem to me a good enough reason to be a member of or not a member of a church, but we never resolved such conversations, we just had them and moved on to others. And one nice thing about conversations with him is that they never turned into sparring matches. They remained discussions, sometimes heated but never – as Joe would say in his best imitation seminarian manner – ad hominem.

Joe should have written a book about those seminary years. The training might have been arduous, the theological requirements rigorous and the young men steered away from normal adolescent life, but they had their own outlets. Story: a certain Monsignore with a strong penchant for sentimentality used to officiate at a nighttime church service referred to, not irreverently, as Putting Jesus to Bed. The Host is taken from the tabernacle and placed in a gold monstrance for the adoration of the parishioners. Hymns are sung, a little homily is given, the priest walks slowly up and down the aisle swinging the thurible in slow arcs, fragrant incense fills the church. The priest returns to the altar, the church lights are dimmed and one by one the candles snuffed. It is now time to Put Jesus to Bed. The priest opens the tabernacle door, the organist sounds the first notes, and the priest and faithful begin the lullaby. “Good night, sweet Jesus, Good night sweet Sayayyvor.” It is all very saccharine and soul-satisfying.

Unless two seminarians, one of them Joe Lella by name, have crept behind the altar and waited there for just this moment. And it is just at this moment, as the Monsignore is crooning “Good night, Gu-uh-uh-uhd-night” and, as from the front of the tabernacle he replaces the Host, the two seminarians at the open back of the tabernacle reply softly, “Good night, Monsignore.”

End of story. I don’t know about repercussions – if or whatever they were, although I have the feeling there must have been a few. I also have the feeling that the prank has come down in story through the decades at the seminary. And this is the end of my story about my dear brother-in-law Joe. A more innately good-tempered man was never born, combined in the same skin with a man who could match wits and cerebral achievements with the pick of any crop. As a professor, as an academic, he was admired and respected. He himself was a great admirer of the Canadian physician Sir William Osler. Born a century before Joe, Osler was in many ways a mentor to Joe. He was a thoroughgoing Victorian scholar and gentleman, an avowed Christian, a humanist, a humanitarian. Dubbed the “Father of Modern Medicine,” he was also famous for being an irrepressible prankster. All this was right up Joe’s alley. Joe spent many years reading and writing about Osler and was president one term of the American Osler Society; in 2019 he was presented with their Lifetime Achievement Award. Best and most lasting, he wrote a fine, perceptive play about Osler – Willie: A Dream – which, by the way, he not only wrote but performed to great acclaim.

I’d like to close with a quote from Osler himself. In 1889, he gave a valedictory address at the University of Pennsylvania, which he titled “Aequanimitas.” In it he cited Antonius Pius, a Roman emperor who summed up his philosophy of life in the watchword Aequanimitas. As Joe would have known, this precept meant having an “even mind,” also translated as calmness, patience, kindness, impartiality. The root words suggest that one’s anima or life principle is in balance. “Be calm and strong and patient,” Sir William had counseled so long ago, which advice Joe spent his lifetime doing his best to live. “Meet failure and disappointment with courage. Rise superior to the trials of life, and never give in to hopelessness or despair. In danger, in adversity, cling to your principles and ideals. Aequanimitas!”

Prof. Joe Lella’s Perspective on the Development of SSoM, 1973-1985

With Cynthia Tang

“Joe” Lella taught at McGill University from 1973-85. On 28 July 2017, McGill University PhD student Cynthia Tang sat down with Prof Joseph Lella at his home in Stratford, Ontario, to talk about his memories of the early days of the Department of Social Studies of Medicine, founded in 1966. This interview was one of three undertaken to celebrate the department’s 50th anniversary in 2016. The text below is excerpted from the transcription by Tang, lightly edited by Annmarie Adams for clarity and length. [Editor’s note: This interview is re-published from the Social Studies of Medicine website and is available here: https://www.mcgill.ca/ssom/joseph-lella]
THE VISION

Don [Bates] had a vision in his mind the whole time. And it was to have an interdisciplinary department, with medical sociology, medical anthropology, and history of medicine. He was concerned to get a certain legitimacy and an anchoring in the Faculty of Medicine. So he got to know me. And we really hit it off very well. Don [Bates] was a wonderful guy and we exchanged a lot of ideas. We talked a lot about medical education and the role of medical history and these disciplines in the medical curriculum. He thought, and I think he was right, that we needed to have support in the Faculty; that the Faculty needed to recognize us as contributing something to it, integrally. Meanwhile, back at the farm, the behavioural sciences in medical education and in medical thinking were evolving. And part of it came out of psychiatry, and to a certain extent out of the clinical medical disciplines as well. People realized that illness was embedded in society and in psychological process and that doctors needed to know something about this. There was a base of [such thinking], in psychiatry and in family medicine, and internal medicine especially, but even in other disciplines, geriatrics was evolving, et cetera. People thought that medical students needed to have some exposure to this stuff, and some training in things related to it, like medical interviewing. Also, an awareness of the role of medicine in society and how that was evolving. And it was evolving fast, especially in Quebec.

THE CONTEXT

The Liberals brought in Claude Castonguay Commission [this is the Castonguay-Nepveu Report published in 1967], which re-organized the structure of relationships in health care and social services, and established community clinics, and established regions, and said that hospitals and social services had to be integrated within these regions, so that people were aware that they needed to know about this, in order to function well. And so were we. One of the things that we did was develop a course in social aspects of medicine that was focused around the structure of medical care as it was evolving and the role of the physician and the medical services, plus the awareness of social aspects of medicine in the clinical encounter and in the evolution of disease and in occurrence of disease. That had been handled by epidemiology, but the psychiatrists were interested in that too. One of the things that happened out of all of this, especially in relationship to the patient and illness in the patient, was what became the “behaviour course”.

That started in the late ’60s, early ’70s. Psychiatry was involved in that, committees were founded to develop that course in the best way possible. I got involved in it, Don [Bates] got involved in it, and we ultimately all got involved in that course. The chunk that I had been teaching ultimately got incorporated into the behaviour course.

We certainly focused more on the doctor and on the structure in which the doctor was involved from a sociological and ultimately when Margaret [Lock] came, an anthropological point of view. Meanwhile Don [Bates] developed the history of medicine course. I think it was a first year medical course. And George [Weisz] took that over later on.

THE CHALLENGE

I had discovered, a couple of things, in the first few years of my teaching. One was, I couldn’t teach straight sociology to medical students. Straight sociology as I taught it and as it was taught to me was highly critical of the medical profession. The medical profession – the paradigm within which we viewed the profession was semi-Marxist and structural-functional sociology. And that doesn’t credit the underlying, I would say, “mission” of the physician and of medicine, and that is, to take care of people. So, if you’re coming from that point of view, and always talking about it, and especially coming out of sociology at that time with a kind of a Marxist tilt, I think I came across as sort of a wise-ass sociologist, it bounced off them [students]. In my discussions with Don [Bates] and everybody else, we decided that we had to give these guys some credit for doing something, aside from serving their own self-interest, which we didn’t deny. We developed a course in medicine and society. But it was focused not on a theoretical approach to the function of medicine and society, but a kind of a socio-historical approach to the evolution of structures, based on fieldwork and participant observation--there was a lot of that going on too. I have one of the early curricula in [my files]. We developed readings, and had small groups, and all of that. The evolution had to do with the behaviour course and the role of psychiatry and us in relationship to one another in it.

THE EVOLUTION

As you can imagine, interviewing behaviour was part of [psychiatry’s] point of view, and I saw it as a part of a sociological problem. What kind of context does the patient come out of, how does that influence their approach to what’s happening to them, how they define it, how they define the interaction with the physician, and all of that, and they should give up that when they walk into the room to interview patients. One of the things I developed at that point was the faculty counselling program, and I was the head of that. That was a way to form small groups among the first and second year physicians. They had small groups and one of the tasks of the people in those small groups was to go out and observe in clinics and come back and talk to one another and develop reports. Social aspects in medicine. We were in it with both feet. In the clinic, in the faculty teaching, in programs that were valued by a certain group of segments of the Faculty. We had a presence and a legitimacy, ultimately, over the course of that ten or twelve years after Don [Bates] and I got together into the mid-70s or so.

Then Margaret [Lock] was hired and George [Weisz] was hired. The emphasis gradually evolved into studies of medicine with an emphasis on graduate education. We always thought that we had to have one foot in the profession and the Medical Faculty, but also in our home departments in the rest of the
Dr. Granville Nickerson, (1922-2020): A Personal Recollection

By Pamela Miller

Dr. Granville Nickerson, beloved paediatrician and long-time supporter of the Osler Library, died in November in Toronto at the age of 98. A member of the graduating class of McGill Medicine 1945, the class counted among its members Dr. William Feindel, Dr. Marian Francis Kelen (daughter of W.W. Francis, the first Osler Librarian) and Dr. Victor Goldbloom. In 1996, the class presented the Faculty of Medicine with the Class of Medicine '45 50th Anniversary Fund, an endowment to assist with the cataloguing and study of the Wilder Penfield Archives held by the Osler Library.

Born on Cape Sable Island at the southeastern tip of Nova Scotia, Dr. Nickerson excelled in the classroom and sports at school and at Acadia University where, in addition to his studies, he participated in music and theatre. Following graduation in 1942 he entered McGill's Faculty of Medicine where, along with his courses, he continued his extracurricular activities including the Osler Society, the Scarlet Key, and the Students' Executive Council. In 1945 he obtained his MDCM, in 1950 a Diploma in Paediatrics, and shortly after, his FRCPC. During these years, he was a member of the army and naval reserves. His research led to the successful treatment of children with tubercular meningitis. He served as Pediatrician in Chief at the Royal Victoria Hospital, a role that included research, publishing, and teaching at McGill. Active in the community, he became a Councillor and part-time medical officer for the Town of Mount Royal, and an elder and choir member of Mount Royal United Church.

A compassionate physician, Dr. Nick (as he liked to be called) was recommended to me as a nervous mother of a newborn. “Don't worry”, he assured me, “I was terrified when we brought home our first child.” His availability every morning of the week by telephone from 8 to 8:45 a.m. was tremendously reassuring and so considerate of worried parents who could then plan their day around a visit or simply follow good advice. Dr. Nick was a highly sympathetic man but a person of firm opinion on everything including feeding, adhering to strict schedules and behaviour. For example:

Continued from page 9
“Wake that baby up every 3 hours and feed him. You are starving him.”

“That child has to have an Oh Henry Bar every day at 11. I will send a note to the school.”

“I have just told those parents that I cannot do anything more for their child until they give up smoking.”

Or, following the visit of parents and their severely disabled young patient, “The way those parents look after their child, they deserve an Order of Canada.”

Often, long after his young patients reached adulthood, their parents continued to communicate with Dr. Nick, who, when asked, was delighted to offer advice regarding their grandchildren.

On retirement, Dr. Nickerson and Mary Louise moved to Bridgewater, Nova Scotia and enjoyed travel that included, starting in 1988, four trips to China with the Evangelical Medical Aid Society of Canada. When they returned to McGill for the Class of ‘45 reunions that always included a visit and a reception at the Osler Library, they were the life of the party. In 2011 Dr. Nickerson established the Mary Louise Nickerson Travel Grant in memory of his vivacious and talented wife, a grant that has allowed accomplished and upcoming scholars interested in every aspect of medical history to conduct research in the rich collections of the Osler Library. Their support and legacy of commitment will live on through his generous travel grant that will allow scholars to appreciate the treasures of Osler’s Library. Thank you, Dr. Nick.
As I compose this annual appeal message for 2020, I am relieved to be able to do so with a bit more optimism than was available when the annual appeal letter went out nearly two months ago. Though the pandemic continues with a frightful momentum, promising results from multiple vaccine trials offer hope; indeed, as I type there are reports that the first vaccinations will be rolled out in the coming days and weeks. Nonetheless, there is no skirting around the obvious: these are difficult times.

Though 2020 has been overshadowed by the pandemic, we cannot lose sight of the “before times.” The 2019-2020 academic year was notable for the many outreach activities that highlighted our commitment to breaking down the barriers that can make special collections environments seem intimidating and exclusionary. At the Library, we embrace the challenge of protecting our treasures for future generations while encouraging active engagement. This is a call that we take directly from the inclusivity that Sir William Osler promoted when he outlined his vision for his bequest to McGill: “The Library is for the use of the members of the medical profession, including of course, medical students, and I particularly wish my colleagues of Laval and my French Canadian brothers to take advantage of the many important works of the old masters in their native land, in the collection of which I have had them specially in mind.” (1)

We entered 2020 with tremendous momentum and eager anticipation. One year ago, we were abuzz with activity. The reconstruction of our space in the McIntyre Medical Building had just drawn to a close, so we could start dreaming about what our return might look like once the construction of interactive classrooms in the surrounding area was complete. Those dreams were made more realistic by our many community outreach events, which served as exciting reminders of how much the Osler Library has to give, culturally and intellectually. Those are dreams that, one year on, we intend to transform into a student-centred history of medicine event to honour the memory of Oslerian and Professor Joseph Lella – that is, once we are back in our space and can safely organize in-person gatherings.

While Osler’s frame of reference was the medical profession, a century after his death we take his message as supporting our argument that health is fundamental to the human experience, and thus the history of medicine and the health sciences is relevant to all. Inspired by this commitment to a universal welcome, we have striven via educational outreach to touch the minds of those within and beyond McGill. Moreover, much of our work is in collaboration with our Rare Books and/or Archives colleagues, further acting upon Osler’s vision of drawing communities together.

The momentum we had going into 2020 came from educational events we held in the final months of 2019:

- French language outreach session for Information Studies students from the Université de Montréal, featuring talks by staff from the Osler Library, McGill University Archives, and Rare Books and Special Collections.

Continues on page 13
With Lauren Williams, STARS (Scientists Talk About Research for Staff) lunch session featuring works from the Blacker Wood Collection (RBSC), and the Osler Library.

Science pour tous: two French-language sessions drawing in Montreal residents interested in science, highlighting relevant works from the Black Wood Collection (RBSC), McGill University Archives, and the Osler Library.

With Ann Marie Holland, hosted Stephen Yeager's class from Concordia University, featuring manuscripts from RBSC and Osler collections.

“The human zoo: medicine and showbusiness,” curated to complement Alberto Manguel’s public conversation with Susan Swan, held as part of a wider speaker series featuring Alberto Manguel and collections from ROAAr (Rare Books and Special Collections, Osler, Art, Archives) units.

Still continuing apace, on 13 February we invited in Dr. Rachel Levine’s “Medieval Knowledge” class from Marianopolis College in the afternoon – speaking of momentum – within an hour of that class leaving, the Osler team was setting up a different display to complement poet physician Shane Neilson’s talk as part of the Poetry Matters series. Though we were concerned about the pandemic at that time, little did we know that we would close one month later, and that we would continue to work primarily from home even to this day.

While the events outlined above relate to our own creative and intellectual work with classes other groups, we cannot close without a word about what is arguably our core function: working with researchers of all levels, from students to well-established scholars. Every year, we derive a tremendous amount of energy from the Pam and Rolando Del Maestro Family William Osler Medical Student Essay Awards. In the spring we invite proposals from students and work with those who need help identifying sources and narrowing the focus of their research. Where needed, we also play an active role in bringing together students with prospective mentors. The range of topics explored is vast, as we invite inquiry into any topic in the humanities and social sciences. One year ago, we had just congratulated Brendan Ross, Athena Ko, and Leïla Rached-d’Astous on their papers:

- First place: Brendan Ross, “Illustrating the Unimaginable: Dissection Scrolls of Edo-era Japan.”
Continued from page 13


In 2020, the papers were just as diverse and predictably created a dilemma for a panel of judges who had to choose winners from essays that each seemed to star in its own basket:

First place: Saman Arfaie, “Exploring the Relationship Between Robert Schumann’s Bipolar Disorder and His Creative Musical Genius.”


Third place: Cassandra Poirier, “The Path of the Wounded Healer: Revisiting the Study of Shamanism Through a Phenomenological Approach.”

Though we missed being able to meet and celebrate with the essayists in person, one advantage of pandemic life is that we could take the time to allow presentations by more than just the three finalists (the Osler Day schedule is typically too tight to accommodate additional speakers) and the talks were and can still be enjoyed from around the world via YouTube: https://youtu.be/62SM8BFDAiQ.

As we entered 2020, we were excited at the possibility of further engagement with medical student research using Osler Library resources. Thanks to the support of Dr. J. Mario Molina, we initiated the Molina Foundation Osler Library Medical Student Research Awards to fund two McGill medical students undertaking summer research projects. We had chosen the recipients in late February and swiftly had to reassess and work with those individuals to see what would be possible when the initial shutdown signaled a prolonged period of uncertainty.

Also thrown into uncertainty were the recipients of our three research travel awards: the Dr. Edward H. Bensley Osler Library Research Travel Grant, the Mary Louise Nickerson Travel Grant, and the Dimitrije Pivnicki Award in Neuro and Psychiatric History. The nine recipients now waiting to come to the Osler Library to complete their research come from Canada, Ireland, Italy, the United Kingdom, and the United States. Their research topics include hospital architecture, the writings of Sir Thomas Browne, mediaeval medicine, early modern alchemical texts, modern mental health approaches, and German neuroscientists in North America.

We support research at the Osler not only by illuminating our existing collections, but also by acquiring new ones. Our central focus builds upon Sir William Osler’s emphasis upon the formation of Western medicine. Osler himself realized that Western medicine was founded on much more than European thought. He wrote, “The true student is a citizen of the world, the allegiance of whose soul, at any rate, is too precious to be restricted to a single country. The great minds, the great works transcend all limitations of time, of language, and of race, and the scholar can never feel initiated into the company of the elect until he can approach all of life’s problems from the cosmopolitan viewpoint. I care not in what subject he may work, the full knowledge cannot be reached without drawing on supplies from other lands than his own—French, English, German, American, Japanese, Russian, Italian—there must be no discrimination by the loyal student, who should willingly draw from any and every source with an open mind and a stern resolve to render all unto their duties.” (2)

Developing the collections further, we strive to think creatively about how to represent histories of medicine that might otherwise be lost, stories that may not appear in textbooks, medical journals, or more traditional sources of information about medical knowledge and practice. For our own acquisitions tendencies this means a few things: collecting Canadian material with a special focus on Quebec and Montreal, but also collecting non-Western material that nonetheless encourages critical examination of the acquisition of medical knowledge. Among the important local purchases

Continues on page 15
made this year was a collection of over 800 prescriptions from 1909 and 50 photographs from the Pharmacie Montréal Pharmacy, dating from 1923-1985. Other additions were collections of Canadian public health pamphlets, some English and some French, mainly aimed at parents of infants and young children.

We enter 2021 with hope, but we will need your help to realize our ambitious dreams. As we plan our return to the McIntyre Medical Building we are paying close attention to collections preservation and conservation. Already, we rely each year upon funds earmarked for conservation, provided by the Beverly Millar and Diana Catherine Muirhead Fund. This year, Dr. Fraser Muirhead has generously supplemented this fund with an additional donation that we hope will be matched by others committed to helping us maintain important medical historical works for future generations. Our books have had to adjust to an emergency relocation, as well as to variations in climate tendencies, even within environments that are closely controlled. The result is that we need to allocate additional funds to conservation work so as to avoid damage as we repack for next summer’s move.

We appreciate that there are many organizations worthy of support and we are deeply grateful for the confidence you show in our work when you choose to donate to the Osler Library. Just as Sir William Osler seems to have had wise words about every aspect of life, he shared with a hint of humour words of guidance about giving: “...be sure to foster those generous impulses, which are apt to be intense in direct proportion to the emptiness of your purse.” (3) For the sake of our efforts to move forward with Osler’s vision of outreach and making his library accessible to individuals of all backgrounds and interests, we hope that Osler was wrong on this one point: that is, we hope that your generous impulses are in proportion to the fullness of your purse.

Thank you, stay safe, stay well.

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1. Typescript, 24 March 1919, “Bibliotheca Osleriana (Memoranda relating to),” Osler Library Archives, P100, Box 11.
2. William Osler, “The Student Life,” Aequanimitas, 401 (See also: The Quotable Osler 519).
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On the Edge of Literature: Osler’s Marginalia

Sometimes the notes are ferocious, skirmishes against the author raging along the borders of every page . . .

From Marginalia by Billy Collins

By W. Clyde Partin, Jr., MD

MARGINALIA: AN INTRODUCTION

The brief notes, drawings, and musings with which readers populate the edges of a text have a name — marginalia and is the namesake subject of Billy Collins’s poem, Marginalia. (1) The genesis of marginalia dates to the time of the Greek alphabet. Mary Norris, in her New Yorker article, To The Letter: The Pleasures of the Greek Alphabet, advises that the “character ‘X’ has a non-alphabetical use that is common to both languages” — that is Greek & English. The Library of Alexandria scholars placed the Greek X, or Chi, in the margin, “which notated a point of textual interest.” (2) Literature teems with pithy observations and witty remarks on the rich and historical intricacies of marginalia. For example, Mark O’Connell’s piece, The Marginal Obsession of Marginalia, unleashes a number of marginalia facts residing within this ancillary literary world. O’Connell notes another New Yorker writer, Ian Frazier, had seen in a New York Public Library display of famous writers’ marginalia, a book once belonging to some local public library but never returned by the borrower, Jack Kerouac. In that purloined book, Kerouac had underlined a sentence and placed “a small, neat check mark beside it.” The sentence, from Walden’s book, A Week on the Concord and the Merrimack Rivers, was: “The traveler must be born again on the road.” (3)

In an 1846 essay called Marginalia, Edgar Allan Poe eloquently begins:

In getting my books, I have been always solicitous of an ample margin; this not so much through any love of the thing in itself, however agreeable, as for the facility it affords me of pencilling suggested thoughts, agreements and differences of opinion, or brief critical comments in general. Where what I have to note is too much to be included within the narrow limits of a margin, I commit it to a slip of paper, and deposit it between the leaves. (4)

Marginalia can strictly refer only to comments readers place in the margins or can move along a definition continuum from simple marks and underlining to a more broad definition that might include notes made elsewhere such as the back of the book, the author’s signature, personal inscriptions from the author to the reader, and last, extraneous items placed between the pages. Excavating these objects from old books turns the reading into a more anthropologically oriented experience.

In the age of information technology, post-millennials struggle with emarginalia. One blog laments:

This sentiment leaves the issue of marginalia in a virtual no man’s land in the era of electronic books. In the world of ebooks, the future of marginalia and reading looks different. With electronic reading devices, the ease of inserting these thought fragments has diminished. (5)

The emarginalia on a Kindle lacks soul, personal touch, and a tangible meaningful presence.

OSLER AND THE FIRESIDE ENCYCLOPEDIA OF POETRY

The expanding marginalia connection between book and reader and author and former book owner is one of co-mingled intimacy. The reader flirts with the author and becomes co-author. The book, O’Connell writes, is “like an item of clothing once worn by a person now passed away, it retains something of its former owner’s presence.” (3) This sentiment resonated when, in 2016, Susan Kelen, granddaughter of W.W. Francis, Osler’s bibliographer and the first head of the Osler Library, introduced me to her copy of The Fireside Encyclopedia of Poetry, compiled and edited by Henry T. Coates. (Photo 1) Thoroughly acquainted with the book, which had come into her possession from her grandfather, she had given Osler’s copy to the Osler Library in 2015. George William Childs, a book publisher and owner of the Philadelphia Public Ledger newspaper, had given Grace Osler that copy of The Fireside. The book received a new cover (the fourth) around 1970 at the request of Kelen’s mother. (Personal communication, email from S. Kelen, 20 Aug 2019)

When the Fireside was evaluated for donation to the Osler Library, the appraiser observed: “An extremely important piece of Osleriana. In addition to being book owned by Osler, this is a very important item for its insights into Osler’s literary tastes and love of books; his reading habits and his sense of humour.” (Personal communication, email, S. Kelen, 29 Aug 2019)

Continue on page 17
Lamenting the absence of her inherited copy of *Fireside*, she procured a replacement. What made her particular copy still ethereal was that it belonged to Sir William Osler, once removed. Though not exactly the book Osler had held, nonetheless an essence of the former owner’s presence, separated by just one degree, was now part of my astral bookish self.

Osler’s copy of *Fireside* came with Osler’s version of marginalia. On the front cover, Osler wrote, or marginaliated (imagine in the nearby margin a comment reporting this as a novel verb coined by the author) on 23 December 1915:

*This, our breakfast table book of poetry came back today with a new, its third dress (rebound). It was given to Grace by Geo. W. Childs. We used it constantly in Baltimore where it was my custom at breakfast, often, at lunch, sometimes after dinner to read from it to Billie Francis & Revere. It was badly scorched in the fire which took place in the dining room 1915. W. Osler.* (Photo 2)

This parody of Keats’s poem had to do with one of Osler’s few forays into political controversy. Osler was unhappy with Baltimore’s civic leadership and their lack of attention to public health and sanitation. In 1895, the Marsh Market affair occurred and had to do with “poll watchers, including Johns Hopkins faculty members injured while trying to curb ‘repeater’ voting.” (7)(8) Osler’s colleague, Howard Kelly, led a reform party, populated by Hopkins men, who policed the polls and tried to stymie the repeat voters. Kelly and his team placed themselves at the Marsh Market poll and predictably
thugs appeared, and physical fights ensued. Osler, maybe embarrassed on behalf of his colleagues or the university, paraphrased Keats in an effort to soothe the situation and sent a letter to the University President:

Dear Dr. Gilman, The Dean has been distributing these & has had the audacity to use my nom-de-plume, E. Y. D., which is copyrighted. Yours Sincerely, Wm Osler.

The Marsh Market
Nov. 5th.

(With apologies to the late Mr. Keats)

Much have I travelled in the realms of toughs,
And many dirty towns and precincts seen;
Round many a ward industrious have I been,
Which bears in fealty to the bosses hold.
Oft of one wide expanse had I been told
That wide-os’d Gorman ruled as his desmesne;
Yet did I never breathe its pure serene
’Till I heard Abel speak out loud and bold;
Then felt I like some watcher of the polls
When a repeater swims into his ken,
Or like stout Kelly when with eagle eyes
He stared at the Marsh Market - and all his men
Looked at each other with a wild surmise
And said - Let us, too, vote again!

E. Y. D.

Joseph Lella, in his article regarding the Fireside, notes that Dr. Francis put his own touch of marginalia in the poetry book: “In the index of authors, pp. xxv-xxxix, I have marked thus W.O.’s favourites, and + thus his prime favourites, as far as I remember them after 50 years. Billie Francis July, 1953.” (9)

OTHER MARGINALIA

Osler’s son Revere had a marginalia moment. In a book by the physician Martin Lluelyn, Men-Miracles, and Other Poemes, published in 1656, and purchased by Revere in April 1917, Osler notes “the marks in the book are his (Revere’s)” (10) In the editor’s Preface to the Bibliotheca Osleriana, the editor mentioned that: “Sir William Osler was in the habit of writing his bio-bibliographical notes either in the books themselves or on catalogue cards.” (11)

Some would consider this April 1900 vignette the ultimate in Oslerian marginalia. On a whimsical excursion, Osler travelled to Old Point Comfort, Virginia with his younger medical colleagues TB Futcher and HB Jacobs. Their destination was the Dismal Swamp, featured in Tom Moore’s poem, ‘The Lake of the Dismal Swamp.’ Futcher had written in a letter that Osler “had always been fascinated” by this poem. Getting to the mystical lake was quite an ordeal. Futcher reported further that: “On our way back, and while we were eating our frugal lunch, the Chief wrote a most imaginative account of our experiences for Revere on the blank pages in the back of Burton’s ‘Anatomy of Melancholy’ which he had brought along with him.” Despite Futcher and Jacobs’s encouragement, Osler never published “this amusing tale.” That copy of Burton’s work, adorned by Osler’s addition, found its way into the collection at Christ Church and later became a part of the Osler Library. The story behind the “added contents” of Osler’s tale for Revere, scribbled in the blank pages, had been quite a philological mystery until Futcher’s letter provided an explanation. (10)

And if you have managed to graduate from college without ever having written “Man vs. Nature” in a margin, perhaps now is the time to take one step forward.

from Marginalia by Billy Collins
Continued from page 18

**MY COPY OF FIRESIDE**

My first edition copy of the *Fireside Encyclopedia*, cost forty dollars and sported a green cover, tenuously attached. (12) (Photo 5) In the course of working on this article, the cover became completely disassociated from the pages. Osler had warned me. A bookplate quoted Tupper: “A good book is the best of friends the same today and forever.” Opposite were fourteen lines of barely readable comments, in fading pencil, listing text and page numbers from various poems. On a blank page that precedes the title page, hand-written is the name ‘Mrs. C.B. Stephens, Dec 25th, 1878, San Diego, Cal’. The next page includes my contribution to the book’s marginalia: Descendants of Osler present at the Montreal gathering of the American Osler Society in 2019 kindly signed my copy. (Photo 5) Perusal of 997 pages failed to locate any other marginalia.

What could be considered exogenous marginalia are those items placed amongst the pages. Kelen described a poem, ‘Nocturna Inugemicientis Animas Meditatio’ by Pope Leo XIII that had been clipped from a newspaper and in 1903, laid to rest in Osler’s copy of *Fireside*. On the cutout poem, Osler had written: “Keep this, W.O... July 13, 1903” and discovered by Kelen a hundred-and-ten years later. (13) (Photo 6) Thus we have an example of *Fireside* exogenous marginalia adorned with handwritten marginalia from Osler’s pen.

Opposite page 32 in my book was a poem taken from a newspaper, carefully taped together at the point it had advanced to the next column. The poem, ‘Sleep On!’ by Henry Wilson Patterson, a messenger in the Navy Department, and issued February 21, 1942, was a tribute to the men who died at Pearl Harbor. Pressed between pages 54 and 55 was a botanical specimen, which my naturalist wife identified as a daffodil. The poem that starts on page 55, ‘The Schoolmistress’ by William Shenstone, lingers for five pages, with a handful of references to gardens and herbs and flowering lavender but without mention of daffodils. Among other items, four lines from Tennyson, on a scrap of ripped from a newspaper, found a home between pages 910 and 911. (See photos 7-10 on p. 20) How to tie together these bits of exogenous marginalia excavated from the book is not possible other than to know someone once put them there with a purpose and a tender feeling known only to them.

Clyde Partin

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**Photo 5:** The author’s copy of *The Fireside*, a First Edition, the cover tenuously attached. Lella reported Osler’s copy held 1165 poems, the product of 397 poets, over 1034 pages. Osler’s had 222 poems marked as favourites, authored by 81 of the poets. (Inset) The author’s added marginalia: Signatures from Osler family members who attended the AOS meeting in Montreal May 2019. Credit for both photos: Jack Kearse/Emory University.

**Photo 6:** Poem by Pope Leo XIII clipped from a newspaper with Osler’s added marginalia from Osler’s copy.
References


acquired the six volumes of Osler’s *Modern Medicine* from the medical library in the basement of the Riverside Hospital of Ottawa. It was called the Donald Scobie Memorial Library in honour of the first chief-of-surgery at the Riverside. The books were considered surplus when the library closed with the amalgamation of the Riverside, Grace, Civic and General Hospitals into the Ottawa Hospital in 1998. I guess I spent more time than most people in the Scobie library because when I walked in at the end, the librarian’s eyes lit up and she left her desk to point out the boxes of books that were scheduled for the recycle bin. I lugged out an armful including these treasures. They sit on a shelf above my desk at home. (Photo 1) My ten year old grandson wants to read them.

Last summer I noticed the bindings were disintegrating and I had them redone, not to make the books look new but to preserve them. It is interesting to read what modern medicine was in 1907 when the books were published. Last April I looked in the Osler books to learn what was known about pandemics in those days. The only reference to viruses was as a cause of rabies but a lot was known about influenza pandemics:

“Thus the great mass of evidence is in favor of the direct transfer of the disease from person to person.”

Between the pages of one of the volumes was an anaesthetist’s bill of 1908 from Dr. Neil MacLeod. His address was 36 Charles St. in New Edinburgh, Ottawa. (Photo 2)

I communicated with Dr. Alan Bowker, who annually on Remembrance Day, honors war veterans who were members of MacKay United Church in New Edinburgh and he sent the following information about Dr. MacLeod:

*Dr. Neil Duncan MacLeod (b. 1877) was a Physician and Surgeon in New Edinburgh at 36 Charles Street in 1908 when he issued the receipt. His extended family had emigrated from Scotland and were farmers in the Maxwell area (during World War I Dr. MacLeod won a measure of notoriety when the British press reported that he spoke to wounded Scottish Cameron Highlanders in Gaelic, even though he was born in Canada and had never set foot in Scotland). The family was staunchly Presbyterian.*

*Neil MacLeod studied medicine at the University of Toronto and came to Ottawa in 1907 as a resident at St. Luke’s Hospital, and in 1908 began his practice in New Edinburgh. He was also a member of the No. 2 Field Ambulance in the Canadian militia. When war broke out in August 1914 he signed up with the First Contingent going overseas.*

*In England, MacLeod was transferred to the British Army medical services as a Captain and thus went to France before the Canadians did, in February 1915. He then transferred to the Canadian service and as a Field Ambulance doctor he was often under fire treating wounded soldiers. In early 1916 he was assigned to stationary and general hospitals but also served as the medical officer for the 15th battalion for a month and was serving as Medical Officer to the 7th Battalion in June 1916 when the stress of war finally caught up with him.*

*He had contracted severe bronchitis and emphysema in February 1916 and by June he was suffering from difficulty breathing, difficulty sleeping, extreme nervousness and severe debility. Doctors recognized his condition as “shell-shock” or battle fatigue. After a month in hospital in England he was clearly unfit to return to the front. In June in England a medical board recommended “long rest” and a “change of air to Canada”. He was “granted leave” to Canada in September, which was later “extended” to January 31, 1917. He came back to Ottawa for medical treatment and home duty and once again lived at 36 Charles Street. He served the remainder of the war as a senior medical officer in Ottawa and Kingston and was discharged in 1919 with a pensionable disability. During the Second World War he served on numerous medical boards and later with the Department of Veterans’ Affairs. He then returned to private practice until 1948 when he was forced to retire due to ill health. He died in 1958 at the age of 81 and is buried in Beechwood Cemetery, Ottawa.*

It is interesting to ponder the pathway of Osler’s *Modern Medicine* books from 36 Charles Street in New Edinburgh to the Donald Scobie Memorial Library at the Riverside Hospital of Ottawa.

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Photo 1: Six volumes of Osler’s *Modern Medicine* have found a new home above my desk. Photo 2 left: A bill from Dr. Neil MacLeod for the administration of anaesthesia, dated 1908, found tucked between the pages of one of the volumes of Osler’s work.
century after his death, Sir William Osler remains an iconic figure in the history of modern medicine. The Osler Encyclopedia joins the cannon of essential material for anyone interested in the life and writings of Sir William Osler. Along with the standard biographies by Harvey Cushing (1925) and Michael Bliss (1999), it joins the Sir William Osler Memorial Number edited by Maude Abbott (1926), the Bibliotheca Osleriana edited by W.W. Francis and others (1929), and Sir William Osler: An Annotated Bibliography with Illustrations by Richard Golden and Charles G. Roland (1988) as one of the most important books about Osler.

The volume was published in April 2020 by the American Osler Society in concert with Norman Publishing of Novato, California. It consists of 967 pages plus 22 pages of front matter; contains 1,145 articles by 138 authors representing 29 US states, five Canadian provinces, England, Scotland, Wales, Japan, Australia and India; and features 623 images including a two-sided color frontispiece with a beautiful original portrait of Osler by South Carolina artist Tarleton Blackwell. It is a beautiful and well-made book.

The editor, Charles S. Bryan, explained to me how the book came about. In 2015 he was approached by Joseph B. Vander Veer, then first vice-president of the American Osler Society, about writing a book for medical students and residents summarizing Osler’s lessons. Bryan spent about six months reviewing the secondary literature on Osler and organizing the entries into topics. He spent most of the next four years soliciting articles from members of the American Osler Society and others and working on the book; much of it was written by him.

The overarching purpose was to provide a definitive reference work on Osler, addressing nearly every topic that had previously drawn attention, and some that had been overlooked. Although it is a compendium of information about Osler it seeks to answer four questions: What was Osler really like, and what did he do? What did he write, and who influenced his thinking? How has he been assessed during the century after his death, and how is he likely to be assessed in the future? And finally, does he still matter today?

To address what Osler was really like, Bryan and his co-authors summarized 205 reminiscences of Osler by his contemporaries. Most of them were from the upper echelons of medicine, but others were from various other walks of life. A surprising number of women physicians sang Osler’s praises despite his often-cited lukewarm opinion about medicine as a career for women.

The book analyzes Osler’s character strengths, using a classification system developed by the Values in Action Classification Project by members of the American Psychological Association. Bryan asserts that Osler’s top character strengths—as perceived by those who knew him—were vitality and kindness.

To address what Osler wrote, Bryan and his co-authors summarized and analyzed Osler’s non-technical writings. Today, Osler is remembered for his essays written for physicians and medical students that emphasize character and the unity of the medical profession during the periods of his life in Philadelphia and Baltimore, but his interests shifted after moving to Oxford. He became more interested in historical and philosophical issues. Bryan is especially impressed by Osler’s last address, “The Old Humanities and the New Science,” in which Osler made the prescient remark, “There must be a very different civilization, or there will be no civilization at all.”

Osler encouraged people and made them feel better about themselves. These traits explain in part his reputation as his generation’s most-beloved physician.

To address how Osler has been judged since his death, Bryan predicts in the foreword that Osler’s reputation is likely to be challenged during the second century following his death, often through the unforgiving lens of “presentism.” Anticipating such criticism, he lists more than 30 criticisms and potential criticisms of Osler, many of them through a consciously twenty-first-century perspective. He suggests that readers can use this information to decide for themselves whether Osler was “too good to be true,” as some have asserted. He has not backed away from serious charges, including the paternity of W.W. Francis (which has been denied by Bliss).

Since the Osler Encyclopedia was published, Osler has been criticized in two Canadian newspapers and in the Canadian Medical Association Journal for a statement he made in 1914 that Canada should remain “a white man’s country.” Bryan told me that he has written a soon to be published article responding to this criticism.

Finally, concerning whether Osler still matters, Bryan looks at his last address, “The Old Science and the New Humanities.”

Continues on page 23
Osler felt that the profession of medicine may represent humankind’s best hope for survival and flourishing. In his parting valedictory address, Osler asserted that through love of humankind and love of science and technology we may yet find the necessary wisdom to refrain from destroying ourselves. (7)

In the age of global pandemics and the threat of nuclear war, Osler’s words seem to me to be more relevant than ever.

Jock Murray, Professor Emeritus and former Dean of Medicine, Dalhousie University had this to say of the book:

“This encyclopedia is more than just another book about Osler. It is a compendium of the important people and events at a time that saw the birth of modern medicine. It is a wonderful reference book, with items and research not found elsewhere. It is a terrific book to browse with interesting items on every page—a treasure to own.” (8)

Christopher Gardner-Thorpe, Consultant Neurologist and President, Faculty of the History and Philosophy of Medicine and Pharmacy, Worshipful Society of Apothecaries, UK, wrote in the *Journal of Medical Biography*:

“Is this a book that will increase our knowledge of William Osler? Or is it a good bedtime read? Or is it a multi-author work of such magnitude that it will be difficult to learn all that is inside? The answer is yes to all three questions and therefore this tribute to the work of Dr. Charley Bryan highlights a compelling case for this work to be added to the bookshelf beside other popular and famed works of and about Osler.... The volume can be recommended with great enthusiasm.” (9)

Charles Bryan is Heyward Gibbes distinguished professor emeritus of internal medicine at the University of South Carolina School of Medicine and past president of the American Osler Society.

References

The library gratefully acknowledges the support it has received from the Friends who responded to our last Annual Appeal for funds for the 2019-2020 academic year.

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The 2020-2021 Annual Appeal can be found on pp. 12-15 of this issue of the Osler Library Newsletter.

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