

PAST AND PRESIDENT

Surgeons' News talks to **Iain Macintyre** about his new role as president of the British Society for the History of Medicine and its first president, Douglas Guthrie

SN: Tell us about the British Society for the History of Medicine (BSHM).

IM: BSHM is an umbrella organisation for a number of medical history societies throughout the UK. It was founded with four member societies and this has now grown to 18. The society holds its congress every other year in centres around the UK, with the prestigious Poynter Lecture taking place on alternate years in London.

SN: What part did Douglas Guthrie play in its foundation?

IM: Douglas Guthrie was an Edinburgh ENT surgeon turned medical historian who played a leading role in founding the society. After retiring from surgery, he became a full-time medical historian and gained an international reputation. He was the driving force in establishing the Scottish Society of the History of Medicine, which held its first meeting in the RCSEd in 1948, when he was elected its first president. He was also elected the first president of the BSHM, which was founded in 1965 when the Scottish Society joined with three other societies: the Section of the History of Medicine of the Royal Society of Medicine, the Osler Club of London and

Iain Macintyre,
President BSHM

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the Faculty of History and Philosophy of Medicine and Pharmacy of the Worshipful Society of Apothecaries of London.

SN: To what extent does the society attract members from outside the medical world?

IM: Although most members of the Scottish and British Society are from the medical world, there are members who are, or who have been, pharmacists, dentists, nurses and librarians. Professional medical historians tend to join their own societies.

SN: What do you enjoy about being a part of the society?

IM: The congresses. Keeping up to date and hearing new ideas presented at conferences was an enjoyable part of surgical practice, but on retiring they don't hold the same relevance.

In history of medicine conferences, you can continue to participate, and you can present papers if you are researching a topic, as most BSHM members seem to be. It's refreshing to hear papers presented by speakers ranging from students to the occasional octogenarian.

SN: How did your own interest in medical history develop?

IM: It was stimulated by an inspiring history teacher at school. Then, working in Edinburgh, surrounded by so much medical history, it became a hobby, which has developed in retirement.

SN: When is the next Poynter Lecture?

IM: On 12 October next year at the Wellcome Building Conference Centre and the lecturer will be Sam Alberti, director of museums and archives at the RCSEd. Sam knows our own museum collection well and is currently advising on the move of the Edinburgh University Anatomical Museum across to Hill Square – a very exciting development, which should happen in 2018.

SN: What makes Edinburgh and the College a suitable host city/venue for the 2017 congress?

IM: Edinburgh is always attractive for visitors. The College is an ideal conference venue, with modern facilities yet steeped in history. Of course, the magnificent refurbished museum will be a powerful draw for all those interested in the history of medicine. The Douglas Guthrie connection was an important factor for me – and the Guthrie Lecture will be a highlight of the congress.

DOUGLAS GUTHRIE AND HIS LEGACY

Iain Macintyre remembers Douglas Guthrie, the surgeon, teacher and author who left legacies as a benefactor and a founder of two medical history societies

Originally from Dysart in Fife, Douglas Guthrie (1885–1975) graduated MB ChB with Honours from Edinburgh University in 1907. A travelling scholarship enabled him to pursue postgraduate studies in European centres, which was followed by six years in general practice. He became a Fellow of the RCSEd in 1914, then served with the Royal Army Medical Corps in the First World War. His career as ENT surgeon to the Royal Hospital for Sick Children and the Edinburgh Extra-Mural School was marked by his election as president of the Section of Otolaryngology of the Royal Society of Medicine.

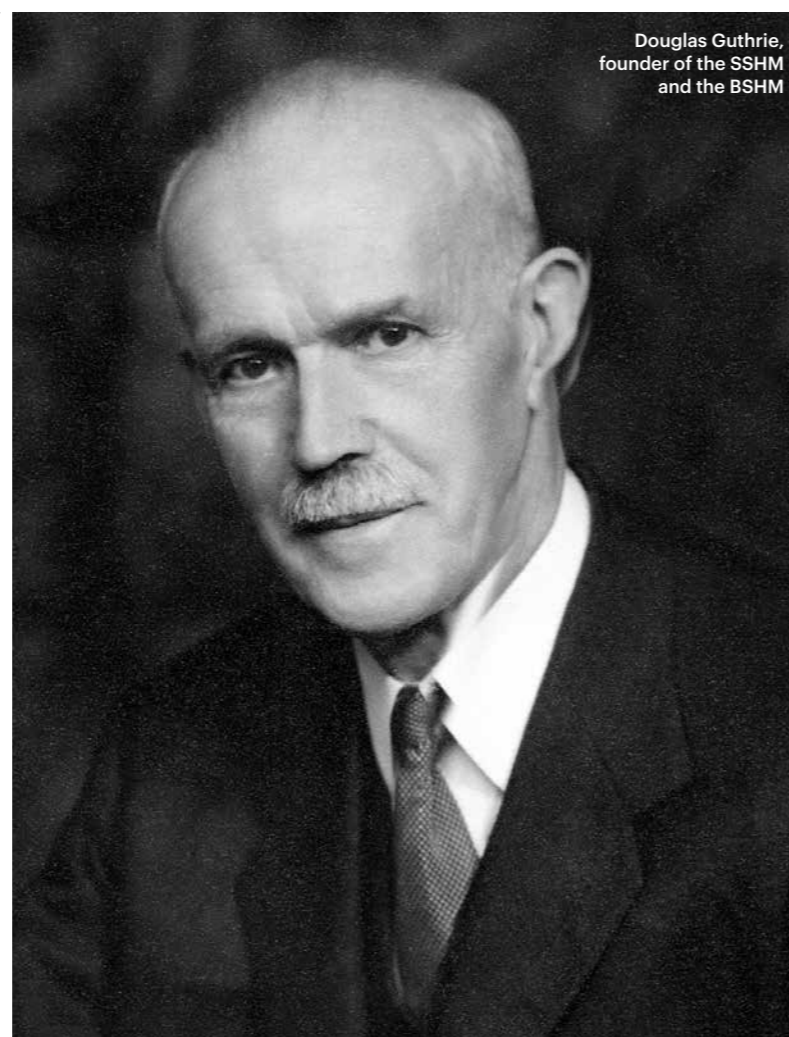
Retirement from clinical practice at the age of 60 enabled him to pursue a second, even more successful, career. From 1945 to 1956, he was lecturer in the history of medicine at Edinburgh University, succeeding his friend John Comrie, author of what remains the standard work on the history of medicine in Scotland, *History of Scottish Medicine to 1860*. Guthrie's lecture courses were open and

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free of charge to university staff, students and graduates, and were always well attended. His reputation was such that he was invited to give lecture tours in the USA, South America, Australasia and Europe.

STYLE, AUTHORITY AND INTEGRITY

Guthrie's magnum opus, *A History of Medicine*, was published in 1945. This was reviewed in *The Observer* by George Bernard Shaw, who pronounced it “learnedly and readably done... unique and well worth its price”. It went on to multiple reprints, and German, Spanish, Italian and American editions, and remains popular to this day. It has since been described as “the most readable, literary and witty history of the profession ever written”. Guthrie's gift was to write with an easy style while retaining authority and academic integrity.



Douglas Guthrie, founder of the SSHM and the BSHM

FURTHER INFORMATION

The British Society for the History of Medicine will hold its next congress in the College on 13-16 September 2017. www.bshh.org.uk

The Douglas Guthrie fund is administered by the Scottish Society of the History of Medicine. For further details about the fund and how to apply, see the society's website: sshm.ac.uk

His book *Janus in the Doorway* (a reference to the Roman god depicted as having two faces, one looking back, the other forward) was an eclectic collection of his many papers and lectures.

Other published works include a biography of Lister, *Lord Lister, His Life and Doctrine*, and histories of the Royal Hospital for Sick Children and of Extramural Medical Education in Edinburgh.

Books and writing were important in his life. He served as honorary librarian to the College for 19 years, and bequeathed his extensive library to the College.

SOCIETIES AND BEQUESTS

Douglas Guthrie founded the Scottish Society of the History of Medicine in 1948 and became its first president. He was also president of the Section of the History of Medicine of the Royal Society of Medicine and first president of the British Society for the History of Medicine, which he had helped to found.

His munificence as a benefactor is seen today in two eponymous trust funds, which he endowed. The Douglas Guthrie Trust Fund supports research into the history of medicine and assists toward the cost of publications on the subject. The Douglas Guthrie lecture is held on alternate years, organised in turn by the two Edinburgh Medical Royal Colleges. With characteristic generosity, Guthrie gifted to the BSHM the elegant presidential badge of office (pictured above right).

Guthrie's books and the societies he founded and supported were a major stimulus to the study of medical history for his and later generations.

MEDICAL HISTORY TODAY

The study of the history of medicine today is very different from that in Guthrie's day. The audience at the meeting that he called to propose the setting up of a Scottish society of the history of medicine was composed almost entirely of doctors. In the 1940s, the study of the history of medicine was the exclusive preserve of doctors and other healthcare professionals. Their approach to history was to study the ‘great men’ of medicine and medical discoveries to try to ‘learn the lessons from the past’. Guthrie's *A History of Medicine* exemplifies this style, making it all the more readable for doctors.

Doctors as medical historians tended to focus on disease, medical discoveries and medical ‘firsts’ from the perspective of contemporary practice. When academic historians tackled medicine, they did so with a rigorously critical approach, which also took account of the political and social background.

Doctors deal daily with facts and are schooled in precision, be it a drug dose or some anatomical minutiae. They are trained in gathering evidence and assessing it critically, qualities enough surely to enable the interested physician to research and write about history. However, while facts and precision are integral to the historian's discipline, the historian and the doctor assess evidence differently. Even medical facts and historical facts differ. There can be little doubting the gangrenous toe or the paralysed limb, but, dates and places excepted, historical facts are rarely pure – they are dependent on the accuracy of the observer or recorder, who may have placed their own interpretation on them. Historians



Above left: the BSHM president's badge, showing the insignia of the four founder clubs: The Scottish Society for the History of Medicine, the Osler Club of London, the Section of the History of Medicine of the Royal Society of Medicine, and the Faculty of History and Philosophy of Medicine and Pharmacy of the Worshipful Society of Apothecaries of London

Above right: The reverse side of the BSHM president's badge, recording that it was donated to the Society by Douglas Guthrie

have developed a science of robust criticism of sources. So, you could argue, have doctors, but historians must interpret these ‘facts’ in the light of the context in which they were recorded.

While medical history today is dominated by historians, increasingly doctors are taking up training in academic history departments or learning about historiography and its methodology. So the school of doctors as medical historians remains alive and well. The well-researched, detailed biography, or the account of a drug, a disease or a procedure, adds to our knowledge and can be woven into a larger tapestry by professional historians.

Doctors interested in this fascinating hobby would do well to become familiar with the techniques of evidence gathering used by historians. Writing a historical paper has surprises too. Having taken PubMed for granted over the years, it is a shock to find that there is no direct historical equivalent, but generic academic search engines usually find the information. Articles in history journals are long (up to 12,000 words for *Medical History*) and tend to have lengthy footnotes throughout, in addition to the reference list at the end. For those wishing to adhere to a more familiar style *The Journal of the Royal College of Physicians of Edinburgh*, *The Journal of Medical Biography* and *Vesalius* are good places to start.

Medical history may also offer the opportunity to supervise undergraduate SSC projects in the history of medicine. In addition, throughout the country there are clubs, groups and societies looking out for lecturers. And there is always the opportunity to present papers and posters at the SSHM and the BSHM. Douglas Guthrie's legacies live on and continue to flourish.

Iain Macintyre is President of the BSHM and past Vice-President of the RCSEd