

Sir William Osler

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A brief account of an influential teacher of medicine from Victorian times.

Few individuals in recent times have made as great an impression on the principles and practice of medicine as Osler. Clinician, teacher, historian and writer, he was professor of medicine successively at four major universities. The surgeon Geoffrey Keynes, as a student, was befriended and encouraged by Osler, and many years later he wrote of him as follows:

Osler was as great a humanist as he was a doctor. The sweep of his mind and interests embraced every phase of human activity and his example of how to live can inspire the lives of many others besides the younger members of his own profession... He achieved many honours and many dignities, but the proudest of all was his unwritten title, 'The Young Man's Friend'.

His principles and teaching came to be known as the 'Osler Tradition', which is still a matter of interest and discussion today. But so much has changed since his day that one may well ask what is the relevance of the man and his tradition now.

William Osler was born in Ontario in 1849 and studied medicine at McGill University, qualifying in 1872. He travelled widely in Europe for two years, where his imagination was fired by the history and philosophy of medicine and in particular by Sir Thomas Browne's *Religio Medici*. At the same time he was stimulated by the newly evolving science of pathology under Virchow and Rokitansky. On returning to McGill as Lecturer and subsequently Professor he was able to bring the insights of pathology and morbid anatomy into the practice of clinical medicine. He began to teach his students in a new way, at the bedside, in the clinic and in the pathology department, and not merely in theory in the lecture room. When he moved on to become Professor of Medicine at Philadelphia his new, more vital, approach to teaching was received as a breath of fresh air. In this way he laid the foundations not only of his own knowledge and experience but also of the accepted discipline of medical training which continues today: attentive history taking, careful physical examination, further investigation as necessary, and then diagnosis. Only then could a logical regime of treatment be planned.

He moved on again in 1889 when he was invited to become Professor of Medicine in the newly formed medical school at the Johns Hopkins Hospital, Baltimore. As his main duties did not begin immediately he used his time in writing his textbook of medicine. The breadth of knowledge and industry which went into this work were phenomenal and when his thousand page book was published it was an immediate success. In the years that followed he single handedly produced six further editions before having to ask Macrae to join him as co-author. The new medical school flourished under a distinguished staff, among whom Osler had a prominent place. His combination of courtesy, good humour and experience led to his opinion being widely sought, locally and nationally. He finally came to be regarded, with affection, as 'family doctor to the world' and 'the doctor's doctor'. His stated view of the Hippocratic ideal was for the physician to express 'the love of humanity associated with the love of his craft philosophia and philotechnia'.

At one time he confessed to feeling that a man's best work was achieved before he was 40, and that a man was little use after 60; he should then retire or even be 'put down'. The press

seized on this remark and invented the term 'oslerizing' for the pretended threat of euthanasia. His name is remembered, more seriously, by the medical student of today in the term 'Osler's nodes' for the tender lesions sometimes found in the fingers of patients with bacterial endocarditis a disease still referred to in France as *la maladie oslerienne* .

Concern for his health under his relentless workload led to his leaving Hopkins at the age of 55 and accepting the invitation to become Regius Professor of Medicine at Oxford He was drawn to Oxford as a classical scholar and by his passion for books and libraries. He and his wife were such hospitable people that their home became known as 'the open arms' Through his many friends he became the catalyst for the formation of a number of medical societies, and he is remembered still in the Osler Societies of London, Oxford and Baltimore, also in the founding of the British Association of Physicians which continues today as an active academic medical society. He was made a baronet in 1911.

The stresses of the war years and the loss of his son in France in 1917 undermined his health and he died in 1919. His tomb and memorial are in the quiet village church in Ewelme, Oxfordshire where in his final years he was the honorary master of the ancient almshouses.

My own, indirect, contact with Osler came through a 6 months postgraduate attachment to the Johns Hopkins Hospital in 1954. Although it was fifty years since Osler's departure, his name, portrait and influence were everywhere. Most evocative for me was the occasion when, at the weekly teaching conference, the professor of pathology produced from the archives the case history of a patient seen by Osler. Our professor of medicine, discussing the case purely on the information that was available to Osler, was able to reach the correct diagnosis, (amoebic liver abscess) which Osler had missed. Paradoxically, this made him seem more human: even this medical paragon, like the rest of us, couldn't always produce the right answer.

How do we see Osler and his achievements today? Certainly some of his writings, laden with classical allusions, make heavy going. But he was speaking and writing in the idiom of his day, and he was an acknowledged authority on the classics. The more limited medical knowledge of his day made it possible for one man to cover the whole field of internal medicine in his practice and in his textbook, whereas today such a book has to be compiled by a panel of experts. Perhaps because of this it was easier for him to practise in a fully holistic sense.

We know that he was eager to protect patients and public from exploitation by quacks, of whom there were many, peddling unproven nostrums for a quick buck. But he went further, often cancelling medical treatments prescribed by other doctors on the grounds that they were unsound and possibly harmful. It was better to do nothing, or simply to encourage nature, he felt, ignoring charges that this was therapeutic nihilism. As for complementary therapies, the only one of note in his day was homoeopathy, which was widely accepted. We have no direct knowledge of his attitude to homoeopathy, but he was likely to have been critical of it as a system which paid little attention to the physical signs of disease (as distinct from the symptoms) or to the lessons of pathology.

However, his ethical principles are just as valid now as then. He would surely be critical of many aspects of the medical scene today, of its commercial pressures, of the dangers of over-prescribing and of over-specialization. His *Æquanimitas* would be sorely tested in the stresses between managers and hospital staff. He would surely welcome the scientific

advances that have been made in medicine and surgery and the diagnostic insights given by non-invasive techniques as long as they do not obscure the fundamental requirement in medicine, for the doctor always to give priority to service to the individual patient. Perhaps, in the Oslerian tradition, one could paraphrase the late Alexander Dubcek's pursuit of 'Socialism with a human face' as the pursuit, in modern medicine, of 'Science with a human face'.

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