

distinction by the special facilities for research in a narrow field; when experience is not too thinly spread there are great possibilities for men of average calibre making important contributions to surgical science. Seen from this angle the surgical specialist is in no way an inferior grade of consultant; he is doing something which an ordinary consultant is not so competent to do, and on these grounds his responsibility and his salary should be the same.

As standards of living rise more surgeons and more nurses of quality are needed in proportion to the population than were needed in the past. Nevertheless, the proportion of persons in the population who are nurses and doctors by vocation is presumably constant and not capable of being artificially increased. There is only one solution, and that is to break down responsibility into narrow fields to suit the temperaments or educational levels of a broader spectrum of available persons. When the scope of a subject is narrowed, length of experience leads to penetration in depth, and this brings technical skill and efficiency.

This is not mere theory; it has been proved in practice and is well demonstrated in the nursing and ancillary staff at Wrightington, where, as elsewhere, nurses of State-registration level are always in short supply. But because the spectrum of conditions to be treated is narrow ancillaries are enabled to master their duties and, instead of being haunted all day by uncertainty and fear of reproof, they become confident and happy and develop pride and self-respect as part of a successful team.

The influence of this principle is seen particularly strikingly in the operating-room. This high standard is one of the reasons why new surgical residents immediately turn out first-class surgery, because they are supported by a professional team which is not subject to continuous change. Our first experiment with auxiliaries was to help our physiotherapists by using female orderlies in the non-technical aspects of their work. When elderly patients merely need somebody to walk by their side in the later stages of reha-

bilitation these ancillaries release physiotherapists to concentrate on other patients in the early stages of rehabilitation.

Interdisciplinary Contacts and the Future

Much of the future of medical science waits on the bridging of gaps between different disciplines. Orthopaedic surgery, with its probes towards mechanical engineering, with corresponding probes of engineering science towards surgery, is a notable example. In our centre we have established communications with the obvious related disciplines—engineering and plastics chemistry. Projects in these fields are available for residents inclined in those directions. Other research problems are those relating to thromboembolic phenomena (which are now emerging as the most common and serious complications of modern surgery) and to wound infection, both of which have a constant practical bearing on routine surgery in this field.

Efforts are now being made for our resident appointments to be held for periods of six months by senior registrars based on teaching units throughout the country, but this involves administrative problems and depends on achieving goodwill and collaboration. It must be emphasized that, though the declared purpose of this unit is to teach the technology of total hip replacement, the attitude of mind towards any surgical operation involving engineering principles is the same in many other fields of surgery. Hence time spent here should not be taken to imply that a postgraduate is necessarily considering a permanent commitment to hip surgery. In the same way, but in reverse, we are ready to make contact with non-conforming minds, since this helps us to see our established techniques through non-committed eyes.

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MEDICAL HISTORY

Mark Akenside, 1721-70

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A modern doctor transported by his informed imagination to the wards of an eighteenth-century hospital finds himself in strange surroundings. He sees curious medicaments and barbaric procedures, smells the total lack of hygiene, hears the groans of the disfigured survivors of bloody operations, and in the centre of this extraordinary scene he finds the eighteenth-century physician.

"One leg of Doctor Akenside was considerably shorter than the other, which was in some measure remedied by the aid of a false heel. He had a pale strumous countenance, but was always very neat and elegant in his dress. He wore a large white wig and carried a long sword. I never knew him to spit, nor would he suffer any pupil to spit in his presence."¹

Mark Akenside was born at Newcastle upon Tyne on 9 November, 1721. His father, also Mark, and his mother were devout Presbyterian dissenters, so that after early schooling at the Free School of Newcastle young Mark was sent to the

private academy of a dissenting minister. It was while he was at this academy that Akenside showed the first promise of unusual talent by composing a poem which was published in *The Gentleman's Magazine*. The poem was "The Virtuoso," written "in imitation of Spenser's style and stanza," and its publication in 1737 was followed by the appearance of other poems by Akenside in the same journal.

The Poet

The brightness of the young poet's mind had not escaped the notice of the Presbyterians of Newcastle, and when he went to Edinburgh in 1739 to study for the ministry he was given financial assistance by the Dissenters Society. Akenside studied theology for one winter only, then changed to the study of medicine. There is no record of why he decided not to be a minister of religion, but even at the age of 19 Akenside had a sceptical turn of thought. In 1739, in his poem "Hymn to Science,"² he wrote:

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But first with thy resistless light,
Disperse those phantoms from my sight,
Those mimic shades of thee:
The scholiast's learning, sophist's cant,
The visionary bigot's rant,
The monk's philosophy.

Akenside returned to Edinburgh to study medicine, and in December 1740 was elected a member of the Edinburgh Medical Society. He spoke eloquently at the meetings of the society, proceeded with his medical studies, and continued to write verse.

In 1741 he returned to Newcastle where he may have practised as a surgeon, and was engaged in the composition of the poem "The Pleasures of Imagination," a task that must have taken up a great deal of his time. The poem was finished in 1743, and Akenside carried it to the London publisher Dodsley. Dr. Samuel Johnson³ relates the story of the sale of the poem:

"I have heard Dodsley, by whom it was published, relate, that when the copy was offered him, the price demanded for it, which was an hundred and twenty pounds, being such as he was not inclined to give precipitately, he carried the work to Pope, who having looked into it, advised him not to make a niggardly offer; for this was no every day writer."

The sum of £120 was obtained by Akenside for the poem; that this was an enormous sum for those days is shown by the following comparisons. In 1737 Samuel Johnson sold his own poem "London" to Dodsley for £10, and 20 years later Goldsmith received only £60 from the same publisher for the manuscript of *The Vicar of Wakefield*.



Mark Akenside, M.D., 1721-70.

After the sale of the poem, but before its publication, Akenside went to the University of Leyden to complete his medical studies. He stayed there for a few months and obtained the degree of Doctor of Physic by writing a thesis entitled "Origin and Growth of the Human Fetus." Akenside apparently found Leyden a dull place, for before he left early in 1744 he wrote the poem "On Leaving Holland,"⁴ the first stanza of which is:

Farewell to Leyden's lonely bound,
The Belgian Muse's sober seat;
Where, dealing frugal gifts around
To all the favourites at her feet,
She trains the bodies bulky frame
For passive persevering toils;
And lest, from any prouder aim,
The daring mind should scorn her homely spoils,
She breathes maternal fogs to damp its restless flame.

The publication of "The Pleasures of Imagination"⁵ made it clear that Akenside did not think that the poet's work was "in passive persevering toils"

... For fruitless is the attempt,
By dull obedience and by creeping toil
Obscure to conquer the severe ascent
Of high Parnassus. Nature's kindling breath
Must fire the chosen genius . . .

The poem was an immediate success. Samuel Johnson⁶ later paid tribute to Akenside's achievement: "Akenside was one of those poets who have felt very early the motions of genius."

Entry into Medicine

At the age of 23 the poet had made his name in literary circles, but the physician had still to establish himself. Success did not come so easily in medicine as it had in literature; the reason for this can be found in Akenside's nature. At Edinburgh he had been noted for his fiery speeches in the debates of the medical society. His thesis at Leyden opposed the prevalent views, and as the time came for him to settle in practice his temper did not improve. Throughout the remainder of his life, though he was able to form a few lasting friendships, Akenside was generally noted by those who have left any record of him as aloof and irascible.

When he returned to Britain in 1744 he set up in practice in Northampton, but failed to establish himself there, and in 1745 he moved to Hampstead. He did not stay long at Hampstead, moving to Bloomsbury Square in 1747, partly supported by the charity of his friend Jeremiah Dyson. Akenside had met Dyson, a lawyer, in Edinburgh and the two had travelled to Leyden together. They formed a close and lasting friendship, and it was Dyson's generosity in allowing Akenside £300 a year that enabled him to set up his plate in London. From 1747 Akenside's medical career progressed steadily, though he was not popular with many of his professional colleagues. His prickly nature made enemies for him, one of whom was Dr. Tobias Smollett. When Smollett's *The Adventures of Peregrine Pickle*⁷ was published in 1751 it was widely known that the ridiculous physician that the hero met and dined with in Paris was meant to represent Akenside. "One of them was a young man, in whose air and countenance appeared all the uncouth gravity and supercilious self-conceit of a physician piping hot from his studies."

In 1753 Akenside was made Doctor of Medicine of the University of Cambridge. This was an important step, because at that time it was necessary to have a doctorate from one of the English universities before one could be elected Fellow of the Royal College of Physicians. In the same year he was elected Fellow of the Royal Society and in 1754 Fellow of the Royal College of Physicians. In September 1755 he was elected fourth censor of the College of Physicians and read the Goulstonian lectures in anatomy. The next year he was chosen to read the Croonian lectures, choosing for his lecture the "History of the Revival of Letters," a subject dear to Akenside's heart, but not so dear to other Fellows of the college, with the result that this series of lectures was not completed.

Akenside was still writing poems and pamphlets for publication, including the poem "Hymn to the Naiads," which Dodsley published in 1758. At this time he started to rewrite completely "The Pleasures of Imagination," and as his practice was increasing he had less and less time for fresh poetical composition. In 1759 he was appointed physician to St. Thomas's Hospital and shortly afterwards to Christ's Hospital.

He was now an established and busy medical man. Not unnaturally as the number of his lectures and medical writings increased there was less time for poetry. In 1759 he

delivered the Harveian oration before the Royal College of Physicians and by their order it was published. In 1761 he rose higher in medical affairs by being appointed physician to the Queen. This honour he obtained by Dyson's influence, his acceptance of it causing the supporters of the Whig party to call him a turncoat. Indeed the only evidence of any political leanings in Akenside's works is the poem "A British Philippic," written in 1738, which would tend to suggest that he was a tory.

He was not well liked in the hospitals at which he had appointments. His treatment of the patients was thought by some to be cruel, even in those unenlightened times, and it is noted that one of the governors of the hospital, Richard Chester, rebuked Akenside for his treatment of the patients.

During the next few years Akenside's poetical work was limited to the remodelling of "The Pleasures," but his output of medical essays continued. Especially notable was the edition of the works of Harvey, for which he received the thanks of the Royal College of Physicians in 1766. In 1770 Akenside contracted a putrid fever, from the effects of which he died on 23 June at the age of 49.

The main stream of English poetry is narrative and descriptive; Akenside's was didactic—that is to say, it was meant to instruct the reader and not to amuse him. We are conditioned to expect poetry to appeal to our emotions, to arouse our sense of beauty; Akenside's poems are aimed un-

equivocally at our reason, and this accounts for their strangeness. Dr. Johnson praised Akenside's major works in *Lives of the English Poets*, but admitted in private to Boswell, "Sir, I could not read it through."⁸

Akenside was very much a man of his times, which accounts for his popularity during his lifetime and the almost total lack of interest in his work since his death. He constantly championed the emergence of thought from the darkness of mediaeval times, whether in literature or in medicine. Though the fiery little physician in a large wig and with the long sword is separated from us by an age, his pale strumous countenance always looked in our direction.

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ONE HUNDRED YEARS AGO

News and Notes from the British Medical Journal, 11 June 1870

CHOLERA IN MADRAS

WE learn by telegram, dated June 9th, that the cholera at Madras is assuming an epidemic form. A few Europeans have been attacked, but have recovered. The effluvium from the river is very offensive.

INSPECTORSHIP OF VACCINATION

WE understand that one of the appointments as Government Inspector of Vaccination is now vacant. The appointment is in the gift of the Privy Council.

WESTMINSTER HOSPITAL

AT length the Committee have agreed to remunerate the Medical and Surgical Registrars, who have hitherto done the duties of these appointments gratuitously. The sum of eighty pounds has accordingly been voted for the purpose, but only for the ensuing year.

OBSTETRICAL SOCIETY OF LONDON

A SPECIAL general meeting of the Obstetrical Society will be held at the Royal Medical and Chirurgical Society's Rooms on Wednesday next, at 8 p.m., to consider the scheme of amalgamation of the Medical Societies. It is expected that there will be much opposition to the scheme.

UNIVERSITY COLLEGE HOSPITAL

WE are glad to hear that the authorities of this hospital have, after continued delay, appointed a Surgical Registrar. Mr.

Marcus Beck, a distinguished graduate of the University of London, and an old pupil of the hospital, has received the appointment. We hope that they will not stop here, and that the Medical Committee will see fit to recommend a similar appointment to be made on the medical side.

THE OPHTHALMIC DEPARTMENT AT
ST. BARTHOLOMEW'S HOSPITAL

WE understand that the appointments to the ophthalmic department are all but decided upon, and that Mr. Henry Power and Mr. Vernon will receive the support of the authorities of the hospital. Mr. Power is an old pupil of St. Bartholomew's, and we are glad to observe that his alma mater is becoming alive to merits which the rest of the profession has long recognised.

POOR-LAW MEDICAL OFFICERS' ASSOCIATION

THE Council some time since directed an appeal to be made to the Poor-law Medical Officers, through the medical press, for information of cases of poverty amongst their number, promising that the facts only brought to their knowledge should be used, and no clue given to the names or residences of the writers. Many letters were received, and we have just obtained extracts taken from some of them. No one, we think, can read without a feeling of sympathy these confessions of poverty and distress; and it is earnestly hoped that those who have it in their power to assist the unfortunate gentlemen whose sad condition is thus brought to light will not be deterred by any minor considerations from supporting Dr. Brady, and thereby extending to medical officers the boon of superannuation, which is already enjoyed by every other class of officers engaged in the administration of the Poor-laws in England and Wales; and by all, not excepting the medical officers themselves, in Ireland.