

## PAPERS AND ORIGINALS

**The Satchel and the Shining Morning Face\***

RONALD GIBSON

*British Medical Journal*, 1971, 2, 549-552

Let me first give you four quotations.

Firstly: "Our youth loves luxury, has bad manners, disregards authority and has no respect whatsoever for age; our today's children are tyrants; they do not get up when an elderly man enters the room—they talk back to their parents—they are just very bad."

Secondly: "I have no longer any hope for the future of our country if today's youth should ever become the leaders of tomorrow, because this youth is unbearable, reckless—just terrible."

Thirdly: "Our world has reached a critical stage; children no longer listen to their parents; the end of the world cannot be far away."

Finally: "This youth is rotten from the very bottom of their hearts; the young people are malicious and lazy; they will never be as youth happened to be before; our today's youth will not be able to maintain our culture."

The first came from Socrates, 470-399 B.C.; the second from Hesiod, circa 720 B.C.; the third from an Egyptian priest about 2,000 years B.C.; and the last was discovered recently on clay pots in the ruins of Old Babylon, and these were more than 3,000 years old.

Faced with these criticisms one could say that neither youth itself nor the world in general has done too badly in managing to maintain any worth-while existence at all over the past 3,000 years. One would have thought that by now civilization would have deteriorated to the point at which it was no longer endurable. Yet such is far from the case.

The second point to make is that any writer might be advised to think twice before adumbrating too fiercely on the evil doings and odd behaviour of today's youth. And the third lesson we might learn is that these criticisms came from the parents of those days—and time has proved them to be as foolish and as inaccurate as some of their mid-twentieth century successors.

If I wished to bring these criticisms up to date I would not speak of adolescents in particular but would quote General Omar Bradley on the age in which we live. "With the monstrous

weapon man already has, humanity is in danger of being trapped in this world by its *moral* adolescence. Our knowledge of science has clearly outstripped our capacity to control it. We have too many men of science; too few men of God. We have grasped the mystery of the atom and rejected the Sermon on the Mount. Man is stumbling through a spiritual darkness while toying with the secrets of life and death. The world has achieved brilliance without wisdom, power without conscience. Ours is a world of nuclear giants and ethical infants. We know more about war than we know about peace, more about killing than we know about living. This is our twentieth century's claim to distinction and to progress."

Harsh though this stricture may be, it is into this sort of world that today's adolescents are born, and it is against this background that we must think about their problems and their reactions.

**Health Strains in Adolescence**

I have had it said to me more than once that medically all adolescents need is an orthopaedic surgeon and a psychiatrist. Up to a point I agree—adding, of course, the otorhinolaryngologist, even though perhaps today he is called on much less frequently than of old. I have no time to enlarge on this section of my subject but I must make two comments before passing on. The first is that adolescents are bad history-givers. This is not deliberate. Aches and pains have no place in their lives—they are not used to being unfit or of interpreting or even remembering the signs and symptoms of a disability. They have, too, a particularly strong objection to and, I believe, a subconscious fear of anything mysterious and unfamiliar. They like to think they are in control of their own destinies, though unwillingly they recognize the authority of the schoolmaster. In illness control passes to the doctor. He is merely another type of authority—equally, if not more, to be avoided. As a result the doctor may fall into traps if he does not conduct a complete examination, no matter how unnecessary it may seem to be. Medical traps can be set in any age group, but in adolescents they can be more dramatic and more dangerous.

Similarly, a wise school doctor knows that most menstrual irregularities can be ignored (provided anxious parents allow them to be ignored). Girls do not like talking about their periods even to their best friends or their house matrons. The vital point here is to *know* an irregularity exists, to judge the occasional one which needs investigating, to follow up others unobtrusively,

\*An address given to a combined meeting of the Portsmouth Division, B.M.A., and the Portsmouth Medical Society.

**Winchester, Hampshire**

RONALD GIBSON, C.B.E., F.R.C.S., F.R.C.G.P., General Practitioner, a medical officer to Winchester College and St. Swithun's School, Winchester

and to leave the rest alone. Even so, some cases will escape notice simply because neither the parents nor the school know about them. It is not unknown for a doctor asked by a parent to see a girl because she seems "run down" to find that her menstrual cycle is 14 days and the loss particularly heavy in the first two days. It may seem surprising that the girl will not mention this unless pressed to talk about it.

Another point I wish to emphasize is that stress and strain can affect adolescents as much if not more than other age groups. Because the patients may be unaware of this themselves there is a danger that the descent from being mentally fit and well to a point verging on collapse may go unnoticed. Again, I cannot enlarge on this beyond mentioning the need for parents and school authorities to give early warning of any changes in adolescent behaviour such as withdrawal, insomnia, lack of appetite, irritability, or falling off in standards of work.

Fortunately, schools, which are almost bound nowadays to drive their pupils towards higher and higher standards, are aware of the problem and are usually sympathetic to the boy or girl who finds it increasingly difficult to cope. Parents, too, urge their young to work hard. This is understandable, yet I feel desperately sympathetic to a particular boy or girl who is being peddled round from school to school or university to university to gain a scholarship or even a place. I am convinced that schools should employ a consulting psychiatrist—by means of a retaining fee when possible—who can be available at any moment to join the school doctor or general practitioner in the case of an adolescent. The present N.H.S. machinery is inadequate and even inappropriate. This is not the psychiatrists' fault—there are too few of them and too few resources available to them.

I commend what I call the "bolt-hole" bed. All schools and universities should have one or two of these into which an adolescent can retreat for 24 to 48 hours without shame or fear of recrimination. Adolescents should know that these beds exist and that they can be used at any time and without previous notice or reporting "sick." The occupant will be fed and kept warm but otherwise left alone. Only if the bed is still occupied after 48 hours need the doctor be told. These beds are a wonderful safety valve and I am pleased that more schools and university medical centres are providing them.

### Today's Parents

Now, I think, we must turn to the parents of today, for they are the first of the adolescent's problems. Most parents are good in their intentions if not in experience and training. They are loving, kind, ready and willing, and they try hard to understand the most un-understandable phenomenon of any age—their adolescent offspring. With or without experience and training or knowledge of what they are doing they are solving most of the problems merely by being loving and being where they are, and being *together* where they are. By "loving" I do not mean over-indulgence. "Caring for" can be enough in itself. By "being together" I do not mean only at times or when it is thought necessary but always. I believe from my experience as a parent and as a school doctor that the foundation on which adolescent behaviour is built is the home from which the adolescent emerges. Or to put it another way and in terms which gained the saying of the week in the *Sunday Telegraph*, "adolescence does not create an image, it mirrors it."

And what is the mirrored image today as we see it reflected from the columns of newspapers and the screens of television sets? It must surely be one based on "don't do as I do, just do as I say." If not, how can adults who marry and divorce, or indulge in uninhibited sexual experiences, criticize their young when they choose not to come home or are equally promiscuous? The indignity of sex today is primarily a product of adult not adolescent abuse. If that is what today's civilization wants, that is what it has got; similarly, with alcohol, smoking, and

drug taking. Who are we to stand over our young and criticize them? There is a beam the size of an oak tree in the adult eye. Beware, therefore, of too concentrated an attack on the youthful mote.

Understanding is part of "caring for." It does not show understanding when parents write to a housemaster and ask him to tell Jimmy that they are separating. Apart from the usurpation of responsibility, this shows a failure to understand how this sort of thing—even carefully presented—can tear apart a young boy or girl. Both parents are loved; how can the home and the treasured belongings be divided? Where is he or she to be sent next holidays? Who is he or she to turn to for help and advice? What is to be faced or what forced on them in the future? This is probably the most unhappy and potentially dangerous adult image. Yet it is increasingly common, and with the increasing divorce rate more young people are deprived of the comfort and security of united parents. And I must emphatically remind you that a united family unit can meet and conquer the worst of adolescent crises, while a divided family may be unaware a crisis exists.

I know there are many parents who stay together for the sake of their children, others who find it impossible to remain under the same roof, and a third group—probably the smallest—who show such a lack of discipline and such self-indulgence that it is probably better for their children that they should separate. Yet in every case inevitably there is trauma to the children, who neither asked for it nor expected it—they were, one might say, born into it.

Looking at some other causes for the much-advertised behaviour of today's adolescents one might first ask if there is much in "home" for some of them. There is one sitting room with one television; father wants one programme, the children another; mother cannot stand pop music, so out the children go to wander aimlessly in the streets. Similarly, the young have few belongings of their own. The home and furniture, for example, belong to their parents. Adolescents therefore have little sense of property.

Social pressures have changed. Once upon a time what might be called "respectability" was the pattern, particularly in smaller communities. To an increasing extent this is now going. Nor can it be denied, I think, that with the higher education of today it is inevitable that some parents should feel inadequate or inferior. Conversely, it is easy for children to take advantage of or even to be ashamed or worried about their intellectual superiority. We cannot wonder that in relation to this alone misunderstanding and frustration build up and their impact is greater on the young, though the overt bitterness in the middle-aged may be the more dangerous. So "being proud of" is part of "caring for."

### Things Spiritual

Then, to my mind, there is an unfortunate denigration of things spiritual which must have added to adolescent insecurity, and it has deprived the young of one of the moorings to which they could anchor their emotions. I accept here what Dr. Doris Odium describes as the "changing face of fear." We no longer believe in hell and punishment for sin, but the sanction from the spiritual side could be something better than this. It could, for example, work for a sense of community and individual responsibility.

I once collected together about a dozen adolescents of all sorts. There were some who were "digging" round the Cathedral, some members of youth clubs, and some just curious. We talked for hours about many things. On the whole they did not smoke or drink alcohol. This was not necessarily because they could not afford it but more probably because adults do both, which gave them an immediate disinclination for either.

They all accepted that man had a spiritual, supersensory, other-worldly side and that this had to be catered for. They all,

to my surprise, believed in a God—or, at all events, a supreme being of some sort. None of them was a Christian but they were not intolerant of Christianity and they accepted Christ as a good chap with sensible ideas. They also accepted Mohammed, Buddha, and Brahma (to mention only a few). The one thing about which they were certain (and I was not surprised) was that they themselves would search out and find their individual answer without any help from me. They were at pains to explain that I in my day accepted Christianity passively because I had had it rammed down my throat from birth until I reached my university, when, for the first time, I was allowed to think for myself; that I loved my neighbour because I was told to do so; that I failed to commit adultery (so far as they knew) because the 5th chapter of the Gospel of St. Matthew warned me against it. Yet their thesis, and what they were trying to tell me, was that they were prepared to accept all these restrictions and to abide by all that was said in the Sermon on the Mount, provided that they were allowed to make their own decisions, based on their own experience and learning, on what was right and what was wrong, what was good and what was bad, what was to be preserved and what ignored.

It is difficult not to admire this thesis and not to accept it, even though one could easily argue against it. Superficially it is rational and it should be durable and lasting. And I have seen it in action. Winchester Cathedral is always full of adolescents. Most of them are not Christians. They are searching. They are judging. And, I would add, many of my elderly, solitary patients are visited weekly by young boys and girls who voluntarily spend their spare time giving companionship and excitement to their "neighbours."

I can remember with what relief I greeted my university and the sudden release from the awful bind of involuntary attendance at school chapel and choir practice and a worship of a Trinity which I could not then understand and in which I could not believe. Am I, or is anyone, to condemn the young today because they will not tolerate this inexcusable hypocrisy? They believe in a God and the spirit of man. We should leave them alone to learn how best and when to love their neighbours and how many of our ten imposed commandments should be observed. Guiding them unobtrusively and trusting them is part of "caring for."

Arnold Toynbee, in *The Times* of 5 April 1969, concluded an article on "Christianity's chance to triumph over Technology" with this paragraph:

"We are now moving into an age in which the range of choice will be wider and the exercise of the freedom to choose will become more frequent. We can look forward to a coming stage in mankind's religious history at which a person's religion will normally be not the one he has inherited, but the religion he has chosen for himself when he has come of age—a religion which may or may not be the one in which he has been born and brought up. This is a spiritual gain for future generations of mankind that has already been brought within sight by the change of heart which has overtaken the adherents of the diverse historic religions in our time."

### Other Factors

Other factors must be considered in relation to today's adolescent behaviour. Puberty, and therefore emotional stress, is earlier. In contrast, the school-leaving age is later and the young find it difficult to reconcile the monastic existence of school life—particularly of boarding schools—with the permissiveness of the society in which they live outside school. It is essential that school authorities should recognize this situation and take steps to meet it. Similarly, parents and society in general must accept it. I believe that sex education should start early and be a continuing process. I think it should be as much a part of the school's normal teaching programme as mathematics or history. If the pill and termination of pregnancy are to be regarded as "norms" outside school then it is rational to reach inside school,

as early as is feasible, a clear understanding of how males and females are made and what they may make. The biggest causes of the gap between one generation and the next today and of the lack of understanding between them are these questions of sex knowledge and sex behaviour. There is as much need for sex education of parents as of children. Teachers and family doctors have a tremendous responsibility in this field.

Youngsters leaving school can earn high wages for unskilled work and they may have more money in their pockets than their parents. They can afford to try out all sorts of attitudes and behaviour. Add to this the fact that those who have saleable goods to advertise are well aware of the money in children's pockets and consider it fair game to persuade them to part with it. There is thus an urgent need for schools to teach what money is and how it may be spent in other ways than in an unproductive market. Television may have made gogglers and addicts of us—it has made slaves of some adolescents who model their clothes and their moral attitudes and behaviour on what they see. Another social factor bearing on adolescent behaviour is increasing urbanization and industrialization and the separation of a working mother from her children.

### Experiment and Adventure

Finally, in every generation it seems to have been impossible for the middle-aged to remember that adolescence is essentially an age of experiment and adventure, and we express distaste at the changing face of the adolescent world. This is not the first time that young people—or even their parents—have had long hair and "peculiar" clothes. In any event, nothing can be duller than the appearance of the male sex today—one hardly dare wear any coloured suiting other than black without a furtive glance lest we be attracting adverse comment. If one makes any slight modification of the rigid and damnably uninteresting normal one may be judged as schizophrenic, homosexual, or extreme left wing politically. All this, of course, is part of today's civilization: conform or bust.

In some cases the adolescent's long hair, his dirty neck, and his unusual clothes are hiding or compensating for some much more worrying and potentially dangerous a social manifestation within himself. To cut his hair, wash his neck, or change his clothing too soon might be all that was necessary to release his hitherto controlled frustrations to everyone's disadvantage and regret, including his own. Leave him alone for long enough and, with inner victory achieved, he will one day appear as a good-looking, highly respectable, and rigidly conforming member of the commuter society. Toleration is part of "caring for."

Mr. J. D. R. McConnell, in his book *Eton—How it Works*, quotes a housemaster's letter to the mother of a boy on his fifteenth birthday. He wrote:

"... The real purpose of this letter is to try to prepare you for an imminent change in the relationship between yourself and your son. The affectionate small boy who has quite justifiably been your pride and joy is about to undergo such a transformation that you may well begin to wonder whether you have mothered a monster—perhaps you have already started to wonder where you have gone wrong and what you have done amiss to deserve his new-found anger.

"Do not despair. Ride out the storm. Be firm but affectionate. At this moment when he seems to need you least he in fact needs you most. Make a stand about the principles you regard as fundamental. Give him rope about the less important things. Do not worry too much about his wearing apparel or the length of his hair. Comfort yourself with the knowledge that his present moods are transitory.

"If you do this and stand firm as a rock in the midst of his tempestuous life the small boy whom you thought you had lost will return to you as a charming young man—well groomed in appearance and with delightful manners. He will have been worth waiting for.

"Meanwhile we are both of us in for one hell of a time."  
(Yours sincerely).

Again, in time of war adolescents were given machine guns and told to shoot a man dressed up as an enemy. This was exciting and infinitely rewarding. It had an end product. Today, with no such opportunities, adolescents provide themselves with long poles and attach large cards to them supporting or denigrating whatever happens to be the current or available good or bad cause. There is little excitement in this. One could never suggest creating a war to make today's adolescents happy. But one must draw the inevitable conclusion that there is little for our eager adolescents today to find but mischief of their own making, and we should not too eagerly curse them for the drab society which we have created and in which we expect them to live.

### Help from Understanding

What, then, should we do to help? Firstly, I believe that young people themselves are looking round for security and leadership. Finding no astronauts, no moon rockets, no Nelsons nor Churchills, and few sportsmen or explorers on whom they can expend their emotions they are creating their own standards, forming their own societies, and throwing up their own heroes. These may not fit in with our ideas of what a hero should be, but at least we must accept that they are trying to fill a gap we have opened. Next, we should accept the credit for the fact that there now exist the basic conditions on which we would wish a new society to be built—well fed, well clothed, and well housed. Then I think we must recognize that these are *our* young and it is primarily up to us—particularly those of us who are teachers and doctors—to understand and to help them.

It may be that some of them want to go it alone. It may be that they seem not to want to meet us or to understand our point of view. Unless we are very close to them we shall never know, for they will be the last to tell us. It is probable that we shall have to be prepared to go a long way out of our way to help against a seemingly impenetrable wall of ingratitude, obstinacy, and resentment. I am sure that we shall often be hurt—but we shall all suffer less if we remember that we once existed inside this adolescent and that in a few years we shall be plain for him to see in himself. For that is how life goes on, and thus patience is part of "caring for."

Today's adolescent still carries the satchel, now heavy with books. The weight of it hanging from the left shoulder creates a scoliosis or exaggerates an appalling posture. The adolescent has a shinier morning face than ever we knew, for the majority enjoy school and run willingly towards it. The adolescent is

discerning and inquisitive and remarkably conservative when one considers his superficial liberal outlook towards most of the incidents in his daily round and common task. He is still shy and sensitive to criticism of himself. He may kick a boy when he's down if someone happens to be with him at the time. But if he is alone and confident that no one is looking he will stoop down and pull the victim to his feet.

The boy wishes to be a man and the girl a woman. There is nothing strange in this. We were the same, and so were Socrates and the unknown writer on the Babylonian jars. All they ask is that we do not mock at them on their journey and that if we are there to help them at least we will let them appear to be helping themselves, and so make diplomacy a part of caring for. It is all terribly difficult and complicated. Sometimes the end product is one of great sorrow but more often, I submit, of enormous pride.

I know that my thesis on adolescents may shock many people, particularly, I think, psychiatrists and teachers. I would say by way of excuse that I have lived for two decades surrounded by hundreds of other people's children. I am infinitely grateful to them that they have kept me young, at least in heart. I owe it to them in return that I should attempt, even if in a philosophic and unscientific way, to explain them to their parents and to suggest that they have made and are making the most out of this present civilization of ours—in spite of us.

Kahlil Gibran in *The Prophet* said:

Your children are not your children.

They are the sons and daughters of Life's longing for itself. They came through you but not from you.

And though they are with you yet they belong not to you.

You may give them your love but not your thoughts,

For they have their own thoughts.

You may have their bodies, but not their souls,

For their souls dwell in the house of tomorrow, which you cannot visit, not even in your dreams.

You may strive to be like them, but seek not to make them like you.

For life goes not backward nor tarries with yesterday.

In conclusion, can I leave you with two thoughts? G. K. Chesterton said; "The only man who understood me was my tailor, who measured me afresh each time we met." When dealing with adolescents may I suggest that you measure them afresh each time you meet them—whether they be pupils or patients, sons or daughters, and no matter how short the interval between the meetings. And then, perhaps, we can take some consolation from Oscar Wilde, who said; "Children begin by loving their parents; as they grow older they judge them; sometimes they forgive them."

## Red Cell Sodium in Hyperthyroidism

A. W. G. GOOLDEN, DIANA BATEMAN, SUSAN TORR

*British Medical Journal*, 1971, 2, 552-554

### Summary

A simple method of measuring red cell sodium has shown that about 90% of thyrotoxic patients have values above the upper limit of the normal range. Patients taking 0.3 mg of L-thyroxine daily were found to have a signifi-

cantly higher mean value for red cell sodium than that of the normal controls. It is suggested that patients taking this amount of thyroxine may be hypermetabolic. The determination of red cell sodium may prove useful as a measure of the peripheral action of thyroid hormone.

### Introduction

The human red cell maintains relative to the serum a high concentration of potassium and a low concentration of sodium. The diffusion of sodium into the cell and of potassium out of the cell is balanced by the active transport of these cations

Department of Radiotherapy and Medical Research Council Cyclotron Unit, Hammersmith Hospital, London W12 0HS

A. W. G. GOOLDEN, M.B., D.M.R.T., Consultant Radiotherapist  
DIANA BATEMAN, Technician  
SUSAN TORR, B.Sc., Technician