Getting up this shute was certainly one of the challenges of our journey (fig 4). We had been going for day after day and already we were feeling the pressure of this constant travel, not knowing what we would see around the next corner or what difficult rapid would next have to be overcome. There was always this sense of danger, of fear, and, even though all of us could swim perfectly adequately and had life jackets on, there was always the risk of drowning if one was thrown out into these rapids.

Finally, we came to the end of the line, a waterfall 10 or 12 feet high that even our jet boats couldn’t surmount, and we were still about 100 miles from our final destination—the snowfields of the Himalayas from which the river originally comes. So we carried on on foot and travelled up the narrow winding roads to a base camp at 15 000 feet, from which we planned to climb to the snowfields and then to surmount a smaller mountain, in Himalayan terms, of about 19 200 feet.

I reached our final camp at 18 000 feet feeling extremely exhausted, though I’d carried only about 50 lb, compared with the 80-lb load that some of the others had shouldered. In this beautiful spot I duly passed out from pulmonary oedema. I’d managed to survive about 30 years of Himalayan climbing without having pulmonary oedema and to my disgust I finally succumbed to it on this occasion and had to be lowered down the mountain and finally evacuated. But the other members of the party, including my son Peter, carried on to reach the summit of the beautiful mountain and there to fly the temple flag given to us at Badrinath.

In many ways we felt that this was the culmination of our journey from the ocean to the sky. We had started where the Ganges meets the sea: had travelled all the way up the river and seen perhaps millions of people and had had a tremendous warmth of welcome: had battled against a series of difficult rapids; and then finally members had stood on the summit of the world from which the Ganges draws its water. And for us it was a tremendous experience—for me perhaps the most interesting experience that I’ve ever undertaken. Not only had there been adventure but there had been this close relationship with the people of that great country, India.

These three journeys are perhaps a little different from what most people take. In each of them, however, there were the same factors: determination; good planning; and enthusiasm. On many occasions we suffered from physical discomfort or maladies such as dysentery but these did not detract from the fact that we were meeting interesting challenges, that we were overcoming them, and that we confidently hoped that we would meet with success at our destination.

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**Harvard Requiem**

Who killed Harvard Robin?

I said Vancouver
With my fell manoeuvre
I killed Harvard Robin.

Who saw him die?
Well, of course, said the author,
With my little eye
I saw him die. In fact, I said
To the chap sitting next to me
In the library, he’s not going
To last the night. Look at
Those contraction, that wasting away of the words.
Rigor Verbis has set in. Yes,
With my little eye
I saw him die.

Who sutured the shroud?
I said the librarian, out of a duster,
One semi-colon, and two info. clusters.
I sutured the shroud.

Who dug his grave?
I said King Computer
With my nitpicking ways.
Didn’t Freud describe
The cut of my spade?
I dug his gr.

Who was the parson?
Said Index Medicus, look,
With my little book (Hallelujah)
I was the parson.

Who was chief mourner?
I said a reader
It was I shed a tear
For the names who’re not here,
And hated the numbers
That pointed ahead
But gave nothing at all
On the page as it read,
And sighed for the date
That told an idea was
Early or late.

It was growth that I missed,
Time passing I kissed,
I was the dove
Who mourned for my love.
I was chief mourner.

Who carried the coffin?
We said the journals,
With our subbing maternal
We carried the coffin.

Who tolled the bell?
We said the mourners,
Though we’ve no pull,
We tolled the bell.

All the birds of the air
Fell a-sighing and a-sobbing
When they heard the bell toll
For Harvard Robin.

Toll (1979)
The bell was tolled.1-8
Requiescat

—GRACE WILLIAMS (London).
Materia Non Medica

Misericordiae medicinae

Our word “hospital” is derived from “hospice,” which was a house of rest for travellers, usually kept by a religious order. The word “misericord” comes from old French, which in turn is derived from Latin meaning “compassion.” The Concise Oxford Dictionary gives three meanings for misericord: an apartment in a monastery in which some indulgences were permitted; a dagger for giving the coup de grâce; and a shelving projection on the underside of a hinged seat in a choir stall, serving when the seat was turned up to support the person standing. My interest lies with the third definition.

Unfortunately in mediaeval times both Church and Medicine were subjected to a great deal of criticism as there were many charlatans in both professions. The woodcarvers of the day occasionally saw what they thought of these professions by caricaturing them on the misericords which supported the bottoms of the priests “standing” in the choir stalls.

On the Continent there are several well-known “medical” illustrations on misericords but very few are to be found in England. The doctor was often shown symbolically as an ape. Locally, in Beverley, we have three examples. In Beverley Minster, one sixteenth century misericord shows as the supporters on either side of a mythical beast an ape with a baby in swaddling clothes and an ape studying a urine flask. (Uroscopy—the inspection of urine—was a common diagnostic tool in the Middle Ages. In addition to an ape, a urine flask in mediaeval iconography is the badge of the doctor/physician.)

The other two examples are in St Mary’s, Beverley, and are fifteenth century. The first shows an injured fox which has been shot through by an arrow offering a large purse of money to an ape who holds a flask. The second shows an ape holding a flask of urine and offering his services to a wealthy man holding a large coin while turning his back on an obviously poor man holding a small coin.

In Worcester Cathedral two of the fourteenth century misericords have a medical connection. The first shows Solomon in his first famous judgment. The dead child mentioned in that judgment could be the earliest recorded case either of “overlaying” or of a “cot death.” The second depicts Moses reading the Ten Commandments to the people. Moses can be regarded as the first medical officer of health, and many of the hygiene rules laid down by the Mosaic Code in Leviticus and Numbers are still applicable today.

In Manchester Cathedral, an early sixteenth century misericord shows a band of apes robbing a pedlar. This is thought to be based on a mediaeval tale called “The Shifts of Reynardine.” The incident depicted refers to the ape Zani, who recommends Reynardine to turn doctor and promises to supply him with all the necessary articles (razors, lancets, scissors, etc) which he and his companions have obtained by robbing a pedlar.

In the Church of All Saints in York there is a fifteenth century misericord of a pelican in her piety. There are also two similar carvings in Beverley Minster, but the example in St Mary’s, Beverley, is a modern copy of the traditional carving. According to mediaeval bestiaries the male pelican would kill the young and then bewail their death for three days. The female would then wound her own breast with her beak and let her blood flow over the offspring to resurrect them. Some pelican species have a red-tipped bill, and the mother pelican, before feeding her young with regurgitated food, presses her beak against her breast, which may have given rise to the tale that she feeds her brood with her own blood. Today a pelican “in her piety” is often used as a badge by blood-donor organisations. Indeed, the headquarters of the blood transfusion service in Dublin were (and possibly still are) called Pelican House and all blood donors were given a badge with a pelican on it.

Ape parodying a doctor in St Mary’s, Beverley.

Pelican in her piety at All Saints, York. (Photographs supplied by Chapman Misericord Library.)

Coming from Fife, I am often teased with the saying that “It takes a long spoon to sup with a Fifer.” The original saying: “He who sups with the Devil needs a long spoon” is portrayed on a misericord in the stalls of St George’s Chapel, Windsor. The carving shows a man eating with an extremely long spoon and seated at the same table as the Devil.

My interest in this subject was stimulated by an exhibition by a local man—Mr Ben Chapman—who probably has the most comprehensive collection of misericord literature in private hands. He has drawn my attention to many of the above examples and has kindly lent the photographs.—JAMES DUNLOP (community physician, Hull).

WORDS STAR Despite the fact that the stars at night present point sources of light, the word “star” has been extended to describe a geometrical figure of radiating points or a number of rays diverging from a central area. Indeed the term “star-shaped” is used to describe such a geometrical figure (rather than the sphere we know it to be). Hence the stellate ganglion and the DIATER in mitosis. Presumably this extension of meaning arose because bright stars at night are not seen as points. Small refractive errors, due to the distribution of fibres in the lens, cause them to appear with small spiky projections. Two or three such projections in the image perceived by each eye would yield up to six rays. I offer this explanation as the Oxford English Dictionary is silent on this derived usage.

Patrick Trevor-Roper, writing in World Medicine about cataract (14 July 1979, p 20) refers to starry-eyed oculists. As “Star” is German for cataract, would Patrick please say whether this was a chance juxtaposition or a deliberate EEC pun?