THE PROPOSED NEW MEDICAL BUILDINGS AT CAMBRIDGE.

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MANY indeed are the changes which a Cambridge man of my age has seen at the old University, most of them we may gladly allow for the better, though there are some over which an old fellow may be excused for entertaining more than a little doubt. But no one who knew anything of the medical school of Cambridge more than half a century ago could possibly doubt that in all essentials that school has progressed not more in numbers than in efficiency. As to numbers we are told that "there are now over 450 medical students in the University, about 140 matriculating each year." And as to efficiency, I believe it to be universally admitted that nowhere are the sciences on which the art of medicine is founded more efficiently and thoroughly taught than at Cambridge, so far, at least, as the "environment" permits. But it is there that at present the chief difficulty lies in carrying on this rising and famous school. When I was a student the only building in the University specially devoted to medical purposes besides the hospital was the old Anatomical Museum (irreverently called the Round House) in Downing Street. This building gave sufficient, though not very satisfactory, accommodation for the scanty crew of the medical students of that day. There we heard our lectures, studied the bones and other parts from preparations, had occasional opportunities for dissection,¹ and could make some acquaintance with pathology. Botany and chemistry being studies pursued for other purposes besides those of medicine, were taught elsewhere. Where the lectures on medicine and surgery were given I forget, and I left the University before I began regularly to attend them. Anyhow, in spite of admitted imperfections, the old school did good work. But in proportion as, under the vigorous leadership of Sir George Paget and Sir G. M. Humphry, the school began to increase and multiply, the old accommodation became utterly insufficient. Fortunately, in the adjacent College of Downing, through the benevolence of its distinguished Master, Dr. Hill, and of the Downing Professor of Medicine, room has been found to carry on teaching and research in pharmacology but the arrangement is only temporary (for the rooms are wanted by the College), and the accommodation becomes daily

more and more inadequate. The study of anatomy is carried on in a separate building near at hand, though here also complaints of restricted space are beginning to be heard; but there is urgent need for providing proper buildings for the teaching of medicine and surgery, pharmacology, pathology, and public health, and also for the rebuilding of the present anatomical museum, now in almost a ruinous condition, and for adapting it for the modern requirements of teaching. All this is too plain to be contested by anyone, and the University fully recognises its duty to provide the necessary accommodation for the medical school by which it is so greatly strengthened and benefited. A syndicate has accordingly been formed to obtain plans for suitable buildings, a site having been granted by the University on land facing on one side into Downing Street, and running at an angle down Corn Exchange Street towards the building of the Department of Physiology. Plans have been obtained from Mr. E. S. Prior which are approved by a majority of the syndicate, and have been submitted to the Senate² with a detailed report. The Editor of the BRITISH MEDICAL JOURNAL has asked me to write an explanatory note about them, and I willingly do so, but more for the purpose of bringing the subject before the numerous medical graduates of my old University than with any hope of making intelligible to the ordinary reader the details of a complicated building which could only be followed by the help of plans. Suffice it to say that the financial position of the University compels it to appeal to the liberality of its members for aid, though the University chest will contribute to the very utmost of its power. This consideration has precluded any idea of erecting a magnificent or even an ambitious building—nor, perhaps, would any such building be in keeping with its objects—so that if any reader should be inclined to say that the building of which we reproduce the elevation is not in all respects "a thing of beauty," he may reflect that use, not beauty, is what was sought after. At any rate, the syndicate state in their report that they believe that the buildings "will, when complete, be worthy of the University, and that they will provide sufficient accommodation for the present and prospective requirements of the important departments for which they are intended." They consist of three portions (1) the block facing Downing Street, which is estimated to cost £16,000; (2) the Humphry Museum which is to replace the old Anatomical Museum, and to cost £8,000; and (3) the Corn Exchange block which will cost £11,200. Thus the total expense, when completed and furnished, will not be much, if at all, below £40,000. The University, however, is in no condition to provide this large sum out of hand; but a committee of graduates was formed, and met at the rooms of the Royal Medical and Chirurgical Society under the auspices of Dr. Dickinson, then President of that Society, and a subscription has been made, and promised, extending over five years from the date of the

The Humphry Museum, Cambridge: suggested front elevation.

¹ These opportunities were infrequent. The anatomical authorities had too recent remembrance of the great riot which had occurred a few years previously to risk a repetition of it. In that riot the populace attacked the Anatomical Museum, and would have wrecked it had not Dr. Whewell, who was Proctor that year, turned out all the men of Trinity, and I believe other Colleges, and given battle to the mob. As it was, the building was with difficulty saved. The cause of the riot was the well-founded belief that the body of a man who had died in the town was there under dissection.

² *Cambridge University Reporter*, MARCH 15th, 1900.

meeting, which will, I believe, about pay the expense of the Humphry Museum. This movement, however, was stopped just as it was on the point of succeeding, in order not to interfere with the larger scheme for the endowment of the University. Now it is of urgent importance that the Humphry Museum should be built tolerably soon, for the condition of the old building is such as to render it very expensive to keep it from falling into ruin; while there must be some place in which to store the preparations and conduct the work done in the old museum while it is being pulled down and its successor erected. So the syndicate proposes that the three portions of the building shall be taken in hand in the order in which they stand in the report, and it is hoped that with the sanction of the Senate the work may be begun at once.

Perhaps I may be allowed to extract from the report a short summary of the arrangements of the proposed building.

The block is of an irregular L-shape, and may be divided for convenience of description into three parts: (1) the Downing Street wing, (2) the museum, and (3) the Corn Exchange Street wing.

The Downing Street wing (commencing at the museum), in which will be accommodated pharmacology, surgery, medicine, and midwifery, morbid histology, and experimental pathology, is 178 feet long by 38 feet broad. The distance between the end of this wing and the chemical laboratory is 100 feet.

The museum is 62 feet long and 38 feet broad; it is placed obliquely to the other wings, and extends in height up to the second floor of these wings.

The Corn Exchange Street wing, in which the greater part of the pathological and public health departments will be housed, measures 42 feet across near the physiological department, but broadens out to 72 feet at the museum end. The length of this wing is 124 feet.

The ground area covered by the whole building is about 16,000 square feet. The accommodation provided is briefly as follows:

A large lecture theatre to accommodate about 200 is situated in the two lower storeys, and between the two limbs of the L. Above this is a room 46 feet by 33 feet adapted for use as a library and examination room. In each wing is a small lecture theatre to accommodate from 50 to 60 students.

In the basement are workshops, space for heating and boiler apparatus, stores, coals, sterilising and washing apparatus, etc.

On the ground floor a number of work rooms and laboratories are provided for comparative and chemical pathology, and preparation and balance rooms for the pathological department; experimental and research rooms and library for pharmacology; demonstration, preparation, and work rooms for surgery; and private rooms for the Regius Professor of Physic, the Professor (or Reader) of Surgery, and the lecturers in medicine, surgery, midwifery, and medical jurisprudence.

On the first floor are a number of workrooms for pathology, public health, and medical jurisprudence; a small chemical laboratory, materia medica museum, and Downing Professor's private room, and rooms for classes in medicine and surgery.

On the second floor are the class room for morbid histology, preparation room, rooms for experimental and clinical pathological work, and rooms for preventive medicine and for the Professor of Pathology. On this floor also are the rooms for chemical physiology, to be arranged as required by the physiological department.

Above this latter department on a third floor is a large bacteriology class room, with small preparation rooms.

In so deep a block as that facing Corn Exchange Street it would be difficult to obtain adequate window lighting for the whole of the rooms. In order to get over this difficulty the large and one of the smaller lecture theatres are placed in the interior of the building, and will be lighted entirely by artificial light. Special attention will be paid to their ventilation.

I hope the above account may not weary your readers. I thought it might interest some of the many medical graduates of Cambridge, and perhaps stimulate them to come forward to the assistance of one of the most useful departments of the University. Since writing the above I have seen the report in the *Cambridge University Reporter*, March 21st, of the debate in the Senate, March 15th, on the disposition of the Benefaction Fund. The upshot of this seems to be that the claims of the Faculty of Botany will probably be those first satisfied. But this disposition of the University funds has the sanction of Dr. Woodhead, the Professor of Pathology, as being necessary and in no way prejudicial to the prospects of the Medical School. The same debate only proves still more clearly the urgent need of the Faculty of Medicine and the desirability of a large contribution from those interested in that faculty towards the buildings which are essential to its working in the present and its enlargement in the future.

ANTIRABIC INOCULATIONS IN PRUSSIA.—In 1899 the number of persons bitten by rabid animals in Prussia was 287, of whom 201 belonged to the male and 86 to the female sex. The bites were inflicted in 193 cases by dogs, in 11 by cats, in 4 by cows, and 1 by a pig. In 231 cases inoculations by Pasteur's method were carried out; in 1 case in the Cracow Institute and in the other 230 at the Berlin Institute for Infectious Diseases. There were 2 deaths, being a percentage of 0.70.

MEDICAL OFFICERS OF THE HIGHLANDS AND ISLANDS OF SCOTLAND.

WE are informed that the following memorial has been presented to the Local Government Board of Scotland. It has been signed by forty officers concerned, who collectively represent every outlying parish in the north-west Highlands and Islands of Scotland. The following is the text of the memorial:

UNTO THE HONOURABLE
THE LOCAL GOVERNMENT BOARD OF SCOTLAND, THE MEMORIAL
OF MEDICAL OFFICERS OF THE MORE REMOTE PARISHES
OF THE HIGHLANDS AND ISLANDS OF SCOTLAND.

HUMBLY SHEWETH:

I.—That the Medical Officers of the more remote parishes of the Highlands and Islands of Scotland are required to perform their duties by night as well as by day, and on Sundays as well as week days, and in all states of the weather.

II.—That the areas of practice of many of these Medical Officers are of great extent, so that it is no uncommon occurrence for the Medical Officer to have to travel from 10 to 30 miles to see a pauper patient; that consequently his travelling expenses are heavy, and that, moreover, he is sometimes unable to return home the same night.

III.—That the work is very trying to the health of the Medical Officer, especially in winter time; yet, as matters stand, he may not leave his parish for a holiday rest unless he provides at his own expense a duly qualified and registered medical practitioner as his substitute.

IV.—That the salaries of the Medical Officers are small, and that the population of the districts is scattered and very poor, so that few Medical Officers can earn more than from £20 to £50 a year beyond their official parochial salary; and that consequently the expense of providing a qualified medical substitute during a reasonable holiday is out of all proportion to the emoluments attached to the office.

V.—That all other Parish Officers may have the privilege of an annual holiday without having to place a substitute in their place at their own expense; the Parish Medical Officer alone being compelled to provide such a substitute at his own expense.

VI.—That many of these Medical Officers are compelled to reside far from railway or other convenient communication with the South, so that, in most cases, two or three days are necessary to travel to Edinburgh or other centres of population, and that the expenses of living in such isolated districts are great and the social amenities few.

VII.—That the Local Government Board of Ireland requires that a Board of Guardians shall give its Medical Officer an annual holiday and pay a reasonable fee to a qualified substitute, and that most of these Boards have cheerfully acquiesced in this requirement.

VIII.—We, the undersigned Medical Officers, submit that, as is the rule in similar districts and under similar circumstances in Ireland, we also should be granted the privilege of an annual holiday, and that the Parish Council should pay a reasonable fee to a substitute; that if one month were allowed—deducting a week for going and returning—the Medical Officer would have a clear three weeks' holiday, and that the expense to the ratepayers would be trifling.

IX.—And the undersigned Parish Medical Officers earnestly pray that the Local Government Board of Scotland will be pleased to look into the difficulties and disadvantages, in the respects herein set out, under which their Medical Officers in the outlying districts at present labour, and will take the whole position of facts mentioned in this Memorial into consideration, and grant the prayer thereof.

And your Memorialists will ever pray.

A further memorial by members of Parliament and others, expressing their sympathy with the above memorial, has been signed by Lord Lister, by 27 members of Parliament (including many representing Scottish constituencies), by Dr. Bruce (Direct Representative for Scotland on the General Medical Council), by the Presidents of the Royal College of Physicians of Edinburgh, the Royal College of Surgeons of Edinburgh, and the Faculty of Physicians and Surgeons, Glasgow, by Professor McCall Anderson, Dean of the Medical Faculty of the University of Glasgow, by seven Professors of the Faculty of Medicine in the University of Edinburgh, by Professor R. W. Reid, Dean of the Medical Faculty of the University of Aberdeen, and by Professor Waymouth Reid, Dean of the Medical Faculty of the University of St. Andrews.

The memorial sets out in the plainest terms reasons why medical officers of these remote districts should be granted an annual holiday, and we do not think that anything we could say could add to the force of this plain statement of fact. The memorialists, we are sure, will have the sympathy of every member of the medical profession wherever his lot may be cast. The remuneration paid by the parishes is always small, and the opportunities for adding to the income by ordinary practice must obviously be few. The work is hard and responsible, and we think it is eminently desirable in the public interest, and as an act of simple justice, that steps should be taken without delay to grant the prayer of the memorial. The appeal which it makes is all the more forcible owing to the moderation of its tone.