Robert Bridges OM is the only medical graduate (he was elected to the Fellowship of the Royal College of Physicians of London in 1900) to have held the office of Poet Laureate. Educated at Corpus Christi College, Oxford and St Bartholomew’s Hospital he practised as a casualty physician at his teaching hospital (where he made a series of highly critical remarks of the Victorian medical establishment) and subsequently as a full physician to the Great [later Royal] Northern Hospital. He was also a physician to the Hospital for Sick Children. It had for long been his intention to retire from the medical profession at the early age of 40! In 1913, Bridges was appointed Poet Laureate by King George V, and following a disappointingly sparse output of “official” work, published his greatest literary contribution—The Testament of Beauty—on his 85th birthday.

Robert Bridges (1844–1930) (fig 1) is the sole medical graduate (to date) to have attained the Poet Laureateship—the first holder of that office was John Dryden (1631–1700) who was appointed by King Charles II (1630–85) in 1668; Bridges was the 14th, and the present holder of the title (Andrew Motion; 1952–) the 19th. Bridges was described by one obituarist as “one of the most remarkable figures of his time”. It was his wish that no biography of him should be written, “and [this] will be respected by all who enjoyed his friendship”; so said a close personal friend—writing a biography in 1944—that is, 14 years after his death.

BIOGRAPHICAL NOTES

Robert Seymour Bridges was born at Walmer, Kent (“in a house with grounds overlooking the Channel”) on 23 October 1844; he was the fourth son and eighth child in a family of nine. His antecedents had been “Kentish yeomen” (settled at Harbledown) since the early 16th century. One ancestor was the Reverend John Bridges (or Brydges), who died in 1590, and was rector of Harbledown for 10 years from 1579. His father was John Thomas Bridges, of St Nicholas Court, Isle of Thanet, and his mother Harriet Elizabeth, the third daughter of the Reverend Sir Robert Ailbeck, Bt (who had succeeded to the baronetcy from his cousin in 1833), vicar of Silkstone, Yorkshire. Bridges lived his childhood years in his father’s house Roselands, Walmer; when in his 10th year, however, his father died (at the age of 47 years), and one year later, his mother married the Reverend Dr John Edward Nassau Molesworth; she then moved to Rochdale, Lancashire (where her husband was vicar). In September 1854, still only 9 years old, Robert was sent to Eton, where he was (according to one biographer) extremely happy; in his final year he was in the Oppidans’ wall and field elevens. He proved to be a good cricketer (chiefly as an aggressive batsman, although he did occasionally bowl) and oarsman. While there, he enjoyed the “river, trees, and meadows, St George’s chapel [Windsor] and the companionship of eager, high-souled youth”. He also formed a close friendship with a boy four years his junior, Digby Mackworth Dolben (who accidentally drowned in 1867) who had entered Eton in January 1862; Bridges shared with him a common great grandmother. With Dolben and several other friends, he formed “an ardent little High-Church set”; with them he held “Puseyite views”.

In October 1863, Bridges went up to Corpus Christi College, Oxford; he graduated BA with a second class degree in “Greats”. While there he met Gerard Manley Hopkins (1844–89). In 1867, he stroked the Corpus boat, which “held the second place on the river”; at the Paris Regatta, however, they lost by half a length to the Old Etonians! In 1874, he toured Egypt, Syria and Germany, and later visited France, Holland and Italy. In London, Bridges lived first at 50 Maddox

Figure 1 Robert Bridges (1844–1930): photograph as a young man [date unknown].
ST BARTHOLOMEW’S HOSPITAL

While at Oxford, Bridges’ younger brother Edward died (in 1866); this event (and possibly Dolben’s death also) possibly underlay his resolve to practise medicine. An outline of his medical training (1869–74) has been provided by Phillips, who has stressed the fact that at that time medical education was in the process of moving from the “Christian gentleman [image] with a broad training in the humanities”, to the modern scientific discipline. Also the “controversy between Biblical and scientific explanation of creation” was, in the light of Darwin’s Origin (1859), at its height. At the same time, anti-septic (Listerian) practice was being introduced into surgery.

In November 1869 (however, he probably did not begin his medical studies until 1871), Bridges entered St Bartholomew’s Hospital (figs 2 and 3) as a medical student; his intention was apparently to practise medicine until he was 40! He failed the written papers in December 1873, but graduated BM on 17 December 1874. While a house physician, he made the acquaintance of Samuel Gee FRCP (1839–1911) later to become a physician at Great Ormond Street (where in 1888 he wrote an important paper “On the Celiac Affection”—gluten-induced enteropathy) and physician to George, Prince of Wales in 1901; Bridges in fact acted as his “best man”! His first “chief” (to whom he was house physician 1875–76) was Dr Patrick Black FRCP (1813–79), senior physician at Bart’s. A physician of the “old school”, he was apparently admired by Bridges. In 1876, he passed the MRCP (by examination). On 8 June, however, he resigned as house physician to Black, and in December sent him a (humorous, Latin) farewell poem Carmen Elegiacum. (see below). Bridges then served as casualty physician for the years 1877–79 and vividly recorded his experience(s) (see below).

The St Bartholomew’s Journal records the following (at a meeting of the St Bartholomew’s House-Committee held on Tuesday 9 March 1875): “The following gentlemen were appointed House Physicians for the year commencing 1st April next, viz: Mr Robert Bridges M.B.Oxon., M.R.C.S. [sic] upon the recommendation of Dr Black. . . . Some two years later (on Tuesday 17 July 1877) the same committee . . . proceeded to the election of two Casualty Physicians . . . it was Resolved That Dr Bridges [M.B. Oxon., MRCP] together with Dr Champneys be appointed Casualty Physicians. And their charge was read to them”. On 14 November 1878, the House-Committee was “summoned to receive the applications and testimonials of Candidates for the office of Assistant Physician the same were submitted from the following, viz: Robert Bridges, M.B. Oxon., M.R.C.P. . . . Resolved that Dr Bridges [together with Dr Legg, Dr Moore, Dr Ormerod and Dr West] be admitted Candidates for the vacant office of Assistant Physician”. But, at a General Court held on 27 November 1878: “. . . the Treasurer reported that. . . four of the gentlemen admitted candidates by the House-Committee had since retired from their candidature . . . the Court by a shew of hands unanimously elected [John Wickham Legg (1843–1921) M.D. Lond. F.R.C.P] to be the Junior Assistant Physician to this Hospital. The Treasurer thereupon declared the said Dr Legg duly elected . . .”. In 1878 Bridges became assistant physician (and later a full physician) to the Hospital for Sick Children, Great Ormond Street.

Bridges began his term as physician to the St Bart’s Hospital Casualty Ward in late 1876. A statistical précis of his experience(s) in these years is recorded in an Account of the Casualty Department. He was in effect the “joint ‘filtrator’ of outpatients from 9 o’clock to 12 noon”! Out of >151 000 patients “relieved” at the hospital in 1877–78, he personally saw 30 940 (more than two thirds were new cases) of them.
(that is, 148 daily, an average of 1.28 min per case), and ordered >200,000 doses of medicine containing iron. An anonymous writer in the *British Medical Journal* considered, in the light of this article, that he held “strong views decidedly unfavourable to indiscriminate out-patients and casualty relief, most of which he felt would be more properly and more efficiently given by general practitioners than by hospital physicians . . .”. In summary, Bridges considered that it was totally impossible to combine the diagnosis of this large number of patients, with efficiency. The prevailing system was in fact virtually inoperable! People were also ignoring good country doctors (GPs) and, instead, making pilgrimages to St Bartholomew’s. A further criticism was directed to extraneous noise, which precluded adequate auscultatory diagnosis:

“the rattle of carts in the street, the hum of voices inside, the slamming of doors, the noise of people walking about, the coughings of all kinds, the crying of babies, the scraping of impatient feet, the stamping of cold ones, the chinking of the bottles and zinc tickets, and, after eleven o’clock, the hammering, sawing, and tinkering of the carpenters and blacksmiths who came not unfrequently at that hour to set things generally to rights”.

His outspoken condemnation of the system would probably have precluded a further appointment at Bart’s even if he had applied! (Even today the medical hierarchy ["establishment"] hates criticism and suggestions for improvement.)

Before writing the “casualty paper”, Bridges had contributed an article (also to the *St Bartholomew’s Hospital Reports*) on a case of rheumatic fever which was treated with splints (in 1876). This was his first medical paper—a single case report of a patient suffering from severe rheumatic fever and extreme joint pain. It is well written and displays his already accomplished literary style:

“This method of treatment [that is, ‘masterly inactivity’, together with morphine, before salicylates were known to be effective], if treatment it may be called, has found support in the tendency of a therapeutic fashion, that by the watchword of expectancy has not only taught prudence, but has often excited indolence and spared judgement; so that it is not a matter of wonder to the student to see some patients waiting for their pain to pass off as others do for their fever, while the knowledge that inflammation of the heart is more serious than that of the knee is sufficient erudition to divert their attention and defer their efforts. Such considerations, coupled with the common agreement of surgeons concerning the treatment of inflamed joints, led me to ask leave to publish [an] account of a case of rheumatic fever of unusual severity treated by splints . . . since during five years at our Hospital I had never seen [the method] put in practice, nor even heard it mentioned, so it was not till I became responsible for the treatment of a patient who seemed to be dying of sheer pain, that being myself compelled to seek some such resource, I had an opportunity of witnessing its effects”.

Thus although at Bart’s for seven years, he had contributed only three medical publications.

**GREAT NORTHERN HOSPITAL (1876–85)**

From St Bartholomew’s, Bridges went to the Great (later Royal) Northern Hospital, then situated in Caledonian Road (fig 4). This hospital had been founded in York Road, Kings Cross by Sherard Freeman Statham (1826–58) in 1856; funding for this unendowed charity, which did not require an attendance fee, or a “letter of recommendation” was an ongoing problem; figs 5 and 6 show posters for appeals for funding for the hospital. During Bridges’ time several went out for this ailing charity. The aim of the hospital was to care for the sick poor, amounting to half a million inhabitants in a large district (which included factories and several railway termini) of London, north of Pentonville and Euston Roads; shortly after Bridges’ resignation (see below) it was amalgamated with the Central Hospital for North London to become the Great Northern Central Hospital.

Bridges’ successful application for the position of physician to the outpatient department at the Great Northern Hospital was minuted at a Medical Committee meeting held at 5 Henrietta Street on 13 April 1876: [Figure 4](#)

**Figure 4** The Great Northern Hospital when situated in the Caledonian Road (1864–88).
A letter was read from the Secretary of the Executive requesting the Medical Committee to examine and report upon the applications of Dr W. Squire, and Dr Bridges for the vacant office of Physician to the out-patients department, and after due consideration it was proposed, seconded, and carried ‘that the Medical Committee having examined the applications, with testimonials, for the vacant office of Physician to the out-patients department, recommend Dr Bridges for the appointment’. This appointment was ratified at a meeting of the House Visitors (held in the Hospital’s Board Room) on 26 April, 1876 and at one of the Executive Committee held on 5 May 1876: “The appointment of Dr Robert Bridges by House Visitors on 26 April confirmed”. At his first attendance at a meeting of the Medical Committee held at 91 Harley Street, Cavendish Square on 11 May, the Chairman (Mr Thomas Carr Jackson FRCS, 1823–78) duly welcomed him “in a few appropriate words to which Dr Bridges replied”. Incidentally on some occasions, his name is misspelt (in the minute books) as Brydges.

Shortly after his arrival at the Great Northern Hospital, Bridges is credited with the prevention of a serious smallpox outbreak there (in September 1876), a by no means uncommon problem during that decade. His strategy was as follows: he immediately moved all patients who were sick enough to be hospitalised to Homerton Hospital; the remainder were vaccinated, bathed, provided with clean clothing, and sent home. All of the staff were vaccinated, all bedding disinfected and washed, the wards fumigated with sulphur, and every surface washed down with carbolic acid. The House Visitors and Executive Committee expressed their great satisfaction that the emergency had been so excellently handled. In 1879, Bridges was made a full physician to the Great Northern Hospital.

At a meeting of the Medical Committee held on 14 July 1881, “Dr Bridges [who was absent] was reported ill”. News of Bridges resignation, however, did not come until a meeting of the Medical Committee held at 5 Henrietta Street W on 30 June 1885: “A letter from the Secretary to the Hospital was then read, announcing the resignation of Dr Robert Bridges [this had already been reported to a meeting of the Committee of Management held on 2 June]: ‘A letter was read from Dr Robert Bridges tendering his resignation as Physician to the Hospital which was accepted with regret . . .’ and enclosing applications with testimonials from two candidates for the office of Physician, thus rendered vacant . . . Dr C. E. Beevor FRCP [1854–1908] of 33 Harley Street, W was recommended to the Committee of Management’.

Bridges thus retired from medicine in 1885 and “gave himself up wholly to literature”. His medical career was therefore to end (at the age of 37 years) sooner than he had planned; in June 1881 he had suffered from a severe attack of pneumonia (complicated by empyema), and in November look of absence from the Great Northern Hospital in order to tour Italy and Sicily (with a view to recovering his strength). In 1890, Bridges was nominated for the FRCP; he declined this honour (fig 7) for reasons which remain unclear. However, he was elected in 1900!

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Figure 5 Notice of two charity sermons in 1861 when the Great Northern Hospital was situated at King’s Cross, that is before its removal to the Caledonian Road in 1864. (Reproduced with permission, the London Metropolitan Archives.)

Figure 6 Advertisement for voluntary contributions, in 1861, before the removal to the Caledonian Road site in 1864. (Reproduced with permission, the London Metropolitan Archives.)

Figure 7 Letter written by Bridges to the Registrar (Edward Liveing, 1832–1919) of the (Royal) College of Physicians declining the nomination by Council for election to the FRCP. (Reproduced with permission, Harveian Librarian, Royal College of Physicians of London.) He was subsequently elected FRCP in 1900.
The sole example of a poem written completely from Bridges' medical experience is On a Dead Child:

“Perfect little body, without fault or stain on thee,
With promise of strength and manhood full and fair!
Though cold and stark and bare.
The bloom and the charm of life doth awhile remain on thee . . .
So quiet! doth the change content thee?—Death, whither
hath he taken thee?
To a world, do I think, that rights the disaster of this?
The vision of which I miss,
Who weep for the body, and wish but to warm thee and
awaken thee?
Ah! Little at best can all our hopes avail us
To lift this sorrow, or cheer us, when in the dark,
Unwillingly, all we embark,
And the things we have seen and have known and have
heard of, fail us”.

LIFE AFTER MEDICINE
After marriage, Bridges settled down in Yattendon in the Berkshire Downs, within easy reach of Oxford. He lived in a “... pleasant old red-brick house with [a] rook-haunted gar-
den” which had “just the combination of beauty, simplicity and remoteness suitable to a poet of his Miltonic order”. Here, he was to spend the first 20 years of his married life.

In 1895, Bridges was invited (by a strong list of supporters) to stand for election to the Chair of Poetry at Oxford; this he declined to do.

In 1904, his wife suffered from ill health, and they both spent nine months in Switzerland; following this, they did not return to Yattendon, but settled at Boar’s Hill, near Oxford. He subsequently built Chilswell House.

Bridges' poetical reputation was made by his “Shorter Poems” which were published in 1873, 1879, and 1880; these books contain frequent references to “the sea, sky, cliffs, birds and flowers of the south coast”, that is, where he spent his early years. For details of his subsequent poetical works, see Newbolt. His theory of “stressed verse” was derived in part from his friend (Father) Gerard Manley Hopkins. This was apparently not to everyone's taste and partly gave rise to “the legend of Our Dumb Laureate”, largely because of his output of “official” poems was exceedingly limited.

Bridges' artistic and musical bent had long inclined him to an interest in English pronunciation and spelling, as well as prosody. An anonymous writer in the British Medical Journal recorded that “nearly half a century [after his active medical career was at an end] his pen turned again for a moment to a subject related to medical science... in a tract on the language of anatomy—a brilliant attempt to bring order out of the terminological chaos into which British anatomy had been plunged.” His objective was to “condemn the action of those [who were] moving to introduce a formal Latin international terminology into the British schools of anatomy, on the false notion that it will be of service to international science”. During his medical career, he wrote a Latin elegiac poem of 556 lines, in which he celebrated the history of the foundation of St Bartholomew's Hospital, and lightly treated of the members of the staff. This poem (Carmen elegiacum de Novecomia S. Bartolomei... which was dedicated to Black; see above) ends with a description of the author's examination for the MRCP.

In March 1924 he and his wife visited the USA, where they stayed at Ann Arbor for three months as guests of the University of Michigan. Five years later, he received the Order of Merit. He was also given the following academic honours: Hon Fellow of Corpus Christi College, Hon D Litt (Oxon), and Hon Ll D of St Andrews, Harvard, and Michigan.

THE POET LAUREATESHIP
Bridges succeeded Alfred Austin (1835–1913)—who had apparently reduced the office “to insignificance”—as Poet Laureate in 1913. Rudyard Kipling (1865–1936) would apparently have been a more popular choice. This appointment, recom-

The T estament of Beauty—his greatest achievement as Poet Laureate—on his 85th birthday. The Col-

A MEDICAL CAREER AS A TRAINING GROUND FOR A POET
It has been suggested that the profession of medicine is a good training ground for the aspiring poet. The author of this article quotes Sir Walter Langdon-Brown FRCP (1870–1946) as being of the opinion that Bridges “would have been unable” to write The Testament of Beauty without [his medical background]. His poem On a Dead Child (see above) published while he was actively employed at Great Ormond Street, expressed his emotion, and a “sense of grievous things”. Langdon-Brown wrote: “he wished his poetry to express the philosophy of life he acquired from natural science in general and from medicine in particular”. Sickness, together with death are sympathetically portrayed in Winter Nightfall.

EPILOGUE
Bridges' medical career lasted only 10 years, but during this period he had absorbed “the impressions of life and humanity”. This “ultimately found expression in... his last and greatest poem, The Testament of Beauty”. He was certainly not averse to criticising the medical establishment. Bridges saw through a lot of the “humbug that existed in Victorian medicine [and this is] amply shown in the 'casualty' account [see above]”. In fact, his comments in this account, the criti-

The Times in announcing Bridges' death “with much regret”, carried a leading article entitled “The Poet Laureate”; this praised The Testament of Beauty (which he had published at the age of 85 years). This tribute was followed by several notices of appreciation. Only two of these, however, acknowledged the fact that he was a member of the medical profession. Paget Toynbee commented on some words Bridges had written in 1920: “The ‘distinction’ that I set most store by is my Fellowship of the Royal College of Physicians, which dates 1900. I am also Hon. Fellow of the Royal Society of Medicine”.

And Sir John Rose Bradford Bt PRCP (1863–1935) conveyed a “vote of condolence to the family of the late Poet Laureate” at a meeting of the Royal College of Physicians held on 24 April 1930.

As an individual “Bridges [apparently] possessed a magn-
ificent physique, and in his later years was as handsome an old man as anyone could wish to see”. This writer in the St Bartholomew's Hospital Journal continued: “With his shock of white hair, piercing eyes, picturesque clothing and abrupt manners, he may have appeared to the casual visitor to have been 'playing-up' to the role of Laureate, but this was not the case”.
In conclusion, an anonymous contributor to the British Medical Journal wrote: "The medical profession may well feel proud that its only Poet Laureate ... was a great poet and a fine scholar, and that the youth spent in medicine were a vital contribution to [his] training for the life of letters".

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REFERENCES AND NOTES
14. John Wickham Legg, had been elected FRCP in 1876, having been Casualty Physician to St Bartholomew’s Hospital since 1870. In 1883 he delivered the Bradshaw lecture at the RCP. After two attacks of rheumatic fever in 1887, he abandoned medicine entirely, and devoted the rest of his life to the study of liturgiology. His “outlook was conservative in the extreme, and he attacked the proposed revision of the Prayer Book” He was accepted as the greatest living English authority on liturgiology.
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The medical career of Robert Seymour Bridges, FRCP (1844–1930): physician and Poet Laureate

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