JUDGMENT IN MEDICINE

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In delivering the introductory address at the beginning of the winter session it has, I think, been the usual custom of the President of this section to choose for his subject some specific topic of medicine or general pathology, more or less stereotyped, and to discourse upon it in a recapitulatory fashion, with the addition, perhaps, of such original observations as his own special knowledge of the matter may enable him to offer. This evening I propose to follow a somewhat different line and to put before you for your consideration some ideas of a more speculative and philosophical character, the bearing of which upon those questions with which our section deals is none the less real and important because it is indirect.

When you did me the honour to elect me as your President, I became deeply conscious of the great responsibility which you laid upon me, and no less anxious as to how I could best and most usefully discharge the duties owing to the premier section of the Royal Society of Medicine, for so indeed I regard it. It seemed to me that, apart altogether from any direct scientific or clinical contributions that he might be in a position to offer, the primary function of a President should be the exercise of a certain leadership, the guidance of his section into appropriate channels, and that in the performance of this function he should scrupulously observe that impartiality of outlook and absence of personal bias that distinguish genuine guidance from self-opinionated control, the desire to give wise direction from the ambitious urge to drive those whom it is his privilege to advise and to support. In short his attitude should be that of a Judge upon the Bench, with all that is implied by that great office. It was this conception that led me to think of the title of this address, "Judgment in Medicine," and to speculate upon the development of this theme in such a manner as might be of interest and of real contributory value.

I am reminded at this point of the short preface to the *Meditatio Medici* by my late friend and colleague, Dr. Cecil Bosanquet, whose approach to medicine in all its aspects was characterised by that judicial spirit, at once gentle and critical, which is essential to a full understanding of its problems and which gives a hint of the message

which I am anxious, however imperfectly, to convey to you at the beginning of our session for the coming year:

"A smattering of several sciences, followed by a prolonged study of the human animal in health and disease—such is the education of a doctor; and on a man's education depends his outlook on life. Now, just as it has been said that every man is a fool or a physician at forty, so he must be his own philosopher; and he need not worry unduly if his theory is unorthodox, for it is notorious that the professional philosophers do not agree with one another more unanimously than doctors are reputed to do. To the individual the object of thinking out a philosophy of things must be, on the one hand, an attempt to satisfy his curiosity in regard to the world around him and his own relations to it; and on the other, the wish to guide or justify his own mode of life. As intelligent beings we must try to base our own conclusions on reasonable grounds, avoiding, so far as it is possible, the mirage of tradition and the bias of sentiment, and taking into account all that we know or believe as to the material surroundings of Man and his development in past ages."

To appreciate the logic and to grasp the sense of the principles enunciated in this admirable preface demands no little exercise of judgment; now what exactly do we mean by judgment, for it is important that we should properly define our terms. In the smaller *Oxford Dictionary* it is explained as "criticism; opinion; estimate; critical faculty; discernment; good sense." All these definitions are fair enough, yet none of them quite suited to my purpose: in an old and much prized etymological English dictionary by the Rev. James Stormonth I found the following—"Judgment:—that faculty of the mind which enables a man to ascertain truth by comparing facts and ideas."

Here, I think, we have the essence of the matter, and with this premise I propose to discuss the place of judgment in human affairs, to consider how as a faculty of the mind it is supreme in the right and successful conduct of men's business, and to insist that in the Science and Art of Medicine no less than in any other branch of human activity it must be regarded as of paramount importance,

the first indeed of all the virtues. I should like to quote to you, as an appropriate text to this address, one of the finest passages in English literature with which I am acquainted; it is taken from an essay by Charles Morgan on "unrelated knowledge." He is speaking of the lack of synthesis of our knowledge as a cause of that sense of disappointment experienced by so many today and of their consciousness of the difficulty of life and the concomitant despair of finding a way out of the tangle presented by modern civilisation. Men, he says, are dimly aware that something is wrong, that they are in a mess; but because they cannot clearly distinguish in what they are entangled, they cannot understand the innumerable remedies suggested by the many self-appointed experts, and so they are left with a deadening sense of disillusionment and a feeling that human endeavour has, as he expresses it, "become divided against itself and life disharmonized." I would commend to your notice the following trenchant passage:—

"In a desire to grasp at something, men have specialised more and more. Where great minds, which in the sixteenth century might have aspired to universal knowledge, have specialised, there has been produced in them that humility, that humane and indeed holy gentleness, which, when we encounter it in men of science, we love, as being perhaps the first gleam of re-enlightenment, the radiance beyond the dark wood. But specialisation can be also an ambushade of charlatans and faithless men who cling to the wood for the importance that the darkness lends to their little torches, and a part of the human problem is the difficulty of distinguishing, where we are not specialists, between those who are.

"The difficulty may appear to be insuperable. How, it may be asked, shall a man choose between two advisers whose science is unknown to him? Can he do more than have regard for the repute and visible qualification of each, and blindly accept the counsel of him who has, or seems to have, the greater authority? And yet to do this is to abdicate, to hand over civilisation to superstition and the rule of oracles. Nor is it necessary. A great Judge does not wring his hands and put off his robes and step down from the bench in the presence of expert witnesses; even a Parliamentary committee, when a private Bill is before it assumes that it has the right and the power to discern the public interest amid a conflict of technical evidence; and civilisation, if it is to survive, must become, and prove itself to be, capable of no less. Civilisation has to learn to be judicial, and democracy, if democracy is to continue, how to endure that responsibility of judgment which kings have accepted.

"If we consider what a great Judge is and by what principles he is sustained, the nature of civilisation's problem in attempting to apply those principles to itself may be made clearer. A Judge submits his human prejudice to the guidance of a rule—that of the law, which, though not immutable, is continuous from the past into the future, and at the time of his giving judgment, is absolute upon him. Though he is not trained in the science of chemistry, or engineering, or electricity, he is trained in the science of relating these and all other subjects to the law. Thus he is safeguarded from the little vanity, to which the rest of us are subject, of putting his money on this expert or that, and from the weakness of being flattered by a glimmer of technical understanding into considering himself a technician; for he knows that it is not his business to decide whether one chemist is better than another, but only how the conflicting chemical evidence is related to his overriding absolute—the law. In brief, though a man, he has put up about himself, as a priest does in the confessional,—a wall against certain human frailties and passions, and has learned how to live within it.

The truth of this picture and its relation to the problems of today, and especially to the task of forging some sort of intelligible and useful shape out of the molten mass of conflicting theories which surrounds us, will be familiar to all of you. I have taken this text on which to build my own address because I want to emphasize judgment in the sense in which I have defined it as a keynote of medicine, a fundamental precursor of sound medical thought and practice; I believe that in the story of medicine examples of it are always to be found among the truly great in our profession, running, like Benson's Thread of Gold, throughout the dark and difficult paths of the doctor's life and activity; and it is this invaluable quality of the mind that we need above all else to cultivate, for Medicine today is standing at the cross-roads. Like other human activities it is being stultified by unrelated knowledge and, like our entangled civilisation as a whole, it is losing to some extent the power of judgment, the virtue of discernment, the faculty of ascertaining truth by comparison of facts and ideas. This then is the message of which our profession is in need at the present day—that we recover the art of judgment, and, in our own studies no less than in our teaching, give more attention to the importance of relative values; for without a proper appreciation of these our knowledge tends to become sterile, and those who should with confidence appeal to our arbitration may be left at the mercy of conflicting theories, the relation of which to some guiding principle they are unable to determine.

Let us dip briefly into some of the pages of

medical history and see how this problem has made its appearance from time to time; how the genuine desire for truth has become subordinate to the instinctive lust for power; and how, nevertheless, the spirit of discernment, which is true judgment, has re-asserted itself and brought these conflicting views into relation with that innate common sense which is and must always be the guiding principle of life.

It is well known that since the inculcation by Hippocrates of the true spirit of enquiry in Medicine his insistence on the importance of careful observation, and his emphasis on the fundamental relation between cause and effect, the quest of knowledge proceeded upon sound philosophic lines until medical opinion became more or less crystallised in the works of Galen, who collated the teaching of his time into a body of authoritative doctrine which remained for centuries the standard of truth accepted by all,—and few indeed there were who dared to dispute it or even to hint of its fallibility. Of his skill and patience as an anatomist, though his observations were confined to animals and could not be conducted upon the human body, there seems to be little doubt, though his physiology did not attain to the same level of scientific excellence. Something of the force of character and strength of purpose which must have inspired his work and teaching can be inferred from the position which the Galenical doctrine continued, up to the end of the fifteenth century and beyond it, to hold as the unchallenged criterion of medical thought and practice. It is hardly conceivable that a teacher who could become the author and founder of such a tradition was not the possessor of some measure of genuine truth, and endowed with intellectual faculties above those of the majority of his contemporaries; and yet I would venture to suggest that with all his gifts he may, like many of his counterparts in modern times, have been lacking in judgment—and thereby responsible for the perpetuation of errors of unrelated knowledge and for centuries of delay in medical progress and enlightenment.

I would not labour this point unduly, but I think that those of you whose interest in the future of Medicine and medical education is fortified by an historical background may recognise not a few Galens, even among those in high places, in our profession today.

What was the fate of the Galenical tradition, and by what manner of men was its authority questioned and attacked? One of the leaders of revolt against its stereotyped and uncritical mode of thought was Andreas Vesalius, one of the pioneers in the then dangerous task of championing private judgment in a revolt against the voice of authority. The development of his career, and his

success and fame as founder of the new anatomical school, are among the outstanding features of medical history. What I chiefly desire to note, as an example of judgment, is the way in which his own instinctive sense of the appropriate emerged gradually from the more orthodox mood in which he began his official work as a teacher in the University of Padua. In deference to tradition he read the works of Galen, even as his predecessors had done, though his dissections were carried out by his own hand. The gradual realisation of the discrepancy between the evidence of his own work and the teaching of the master to whose memory he may well have felt some respect was due, may perhaps have cost him some painful heart-searching; his ultimate choice of open revolt arose from that sense of discernment which was fundamental and which he could not but obey.

The same critical faculty is seen in the workings of the mind of Harvey in the days preceeding his final demonstration of the circulation of the blood. As with many other great discoverers, his ultimate success was to some extent a superstructure based upon the observations of his forerunners who, although they dimly sensed those truths which it was destined for him in the end to show, lacked the degree of judgment necessary to enable them to rid their minds of that lingering bias of Galenism which enshrouded them and clouded that vision of the final truth which it was reserved for Harvey to reveal. "The greatness of all great men," says Michael Foster, "is partly built on the worth of those who have gone before. In science no man's results are wholly his own; like other living things, they come from something which has lived before." May we say, then, that Harvey's greatness lay mainly in his superior power of judgment, his faculty of distinguishing in the work of his predecessors—and indeed, in the substance of all that in his own time passed for knowledge—between that which was ephemeral and that which was fundamental?

I think it is important to recognise this supremacy of judgment in the development of Medicine no less in its academic than in its practical aspects, and it is for this reason that I have chosen first of all examples of its exercise in the experimental sciences rather than in clinical research at the bedside. It is, however, in the latter that we see the faculty of discrimination in its most obvious and striking form, and it is to a large extent because of the fear that in the practice of medicine today we are losing this faculty that I have been moved to give this particular address in that spirit of guidance and leadership which is essential to my office.

This leads me further to a consideration of the much discussed topic of Science and Art in Medicine

and of the divergence between the outlook of those engaged mainly in the pursuit of experimental medicine and that of those whose work is confined to purely clinical observation. I should like to think that this divergence was more apparent than real, but of this I am not sure; at times it has seemed to me that it amounted almost to frank hostility, and then I have wondered whether, perhaps, this was only the *ex parte* view of a pure clinician, conceived to excuse his own comparative lack of training in the experimental sciences. On the whole I suppose the real truth of the matter is that medicine being, as Wilfred Trotter described it, a composite subject embodying both experimental science and practical art, must inevitably include among its votaries men of different types of mind who, though they are all aiming at a common goal, can reach it only through varied paths, the choice of which must be determined by the instinct and habit of mind of the individual. All these paths lead ultimately in the same direction, but the rules of the road may differ in them according to the nature of the ground, the breadth of the track, the character of the obstacles likely to be encountered on the way. So different are the rules in the respective tracks of experimental and clinical medicine that it seldom if ever happens that a man fitted by natural inclination and training to walk or drive upon the one is able with equal facility to travel upon the other. In either case, judgment as well as rule is necessary for safe and satisfactory transit.

I have already given you what I believe to be appropriate examples of this judgment in the case of two outstanding personalities in medical history whose work lay mainly in the experimental field; it remains to say something of that form of it that is sometimes referred to as clinical instinct, the possession of which has characterised the life and work of our greatest physicians, the decay of which in the last generation has always appeared to me to be one of the main faults of the practice of our profession today, a fault against which it behoves us to contend if British Medicine is to maintain that prestige which it has enjoyed in the past and that reputation for efficiency for which it has been justly held in repute. I should like in this connection to remind you of a passage from Wilfred Trotter's Lloyd Roberts Lecture, delivered before the Royal Society of Medicine on September 30, 1935:—

"If we have grasped correctly the nature of the practical arts we shall be able to specify to some extent the attitude of mind and the kind of thinking necessary for the satisfactory practise of them. It is commonly said that one of the chief objects of medical education should be to make the student think scientifically. The saying is, perhaps, as

good an example as could be found of the need in which medicine stands for the exercise of the critical mind. To think scientifically may be supposed to mean one of two things. First, it may signify the adoption of a general habit of thought induced in, and characteristic of, those who practise experimental science. Unfortunately, however, it is not possible to show that the scientific worker outside his job displays more wisdom, insight, and practical judgment than any one else of the same general capacity. Secondly, to think scientifically may mean to use the kind of mental process necessary for the satisfactory pursuit of experimental science. The scientific worker among other qualities must have an especially severe standard of evidence and proof; he must draw no conclusion that is not strictly justified by the evidence, and he must be content to leave in suspense any decision for which the materials are not quite complete. Now the last thing a doctor is free to do is to exercise the scientific suspense of judgment, and he scarcely ever makes a decision that is justifiable on strictly scientific grounds. The advice to think scientifically would seem, therefore, to risk paralysing the judgment rather than activating it—the truth appears to be that what the user of a practical art needs is less the strict and limited instrument of scientific method than what may be called a soundly cultivated judgment. This requirement is more difficult to specify and much more difficult to secure. Apart from inborn capacity, it seems to depend on familiarity with the material of the art, otherwise experience, and on a broad and sound general culture which, while including a proper awareness of science, is by no means limited to it. The ancient and honourable art of medicine is being increasingly and inevitably pressed on by applied science, and suffers as well from misunderstanding and loss of prestige. It remains, however, the backbone of medical practice and indispensable to mankind. There is, therefore, an especial need today that its characteristic mode of activity should be understood, and should not be confused with those of the other elements that make up the complex of medicine."

On the nature of the so-called "clinical instinct" which is almost synonymous with "judgment" in the sense in which I have been using the word, there has been no little argument; many have contended that it signifies no more than an infinite capacity for taking pains, combined, perhaps, with a naturally retentive memory. I have never been able to persuade myself that there is not something more than this; that it is not an inherent quality of the individual which, however much it may be strengthened and developed by education, is primarily a gift of the gods possessed in varying

degrees, by some in conspicuous measure, by others hardly at all. One cannot read an account of the life and work of any of our great physicians, nor peruse the masterly clinical descriptions which they have left us as a legacy without recognising a peculiar quality of mind, not wholly the result of education or environment, which distinguished them from the majority of their contemporaries. It was this quality which enabled them so to use the data which were at their disposal as to discover and realise those truths that seem to have been withheld from their colleagues. Many have access to the same facts and ideas, but relatively few possess the faculty of associating them in such apt fashion that they arrive at their essential message.

It would be impossible to recount the innumerable examples among the medical profession of the exercise of this gift, and it might seem invidious to select particular instances, and yet I would briefly refer to two, men of very different type, who seem to me to illustrate this power of judgment that distinguishes the physician in the fullest sense of the word from the mere technician who, accurate though he may be, lacks insight into the realities and has little power of synthesis. The original descriptions of Richard Bright, published in the *Guy's Hospital Reports* in 1836, are a masterpiece of description and seem to convey to the mind of the intelligent observer and student of today a wealth of essential fact to which all the subsequent research of a century has added little that is really material. As Professor Robert Platt has said in a postscript to his excellent practical monograph on *Nephritis and allied Diseases*:—"A hundred years of clinical experience and laboratory investigation have indeed amplified and confirmed Bright's observations; and theories as to the cause of this or that manifestation of nephritis have come and gone, each adding a little to our knowledge of the disease. But in the realm of fact, one almost looks in vain for any observation or discovery of modern medicine which that great clinician could not have foretold."

The pioneer work of Varrier-Jones in founding an institution which was one of the first great experiments in social medicine was the outcome of that essential genius, which may well be described as an example of judgment, and which showed itself at an early stage of his career when he was engaged in the ordinary routine duties of examining and prescribing for phthisical patients in the district around Cambridge where he was working as a junior tuberculosis officer, armed with no better weapons than were provided by the stock text-book teaching of the day, and still but a young and hesitating novice in the hard and unforgiving school of practice. He was sharply brought to earth in one of his clinics by the

trenchant comments of one of his patients, a working man old enough to be his father, who asked him bluntly though not uncivilly if he knew what he was talking about. The shock of discovery of the discrepancy between the well-intentioned but inappropriate advice he had given (advice beyond which the teaching of his day had not even begun to advance), and the obvious need of the patient in question, revealed to him in a sudden flash the meaning of social medicine, and it was from this moment that he began to plan the scheme which culminated in the famous colony which was built up by the power of his organising ability and with which his name is associated.

This same judgment, this instinct for essentials, is an outstanding feature in all great teachers in Medicine, especially in those whose work is mainly at the bedside and whose teaching is devoted to the clinical side of their subject. I have spoken of it as an inborn quality, but I do not mean by this to imply that it cannot in some measure be cultivated; indeed it should be one of the first duties of those responsible for medical education to strive, not only by precept but also by example, to inculcate its virtue and in the selection of men who are to occupy teaching posts to set upon it a far higher value than they are wont at the present time to do. I have spoken of Medicine as standing today at the cross-roads and of the stultification of our efforts and the over-clouding of what should be our clear path by the shadow of that unrelated knowledge which is, as I see the position, our chief handicap today not only in Medicine, but in all other activities of civilised man. I do not for one moment desire to descend from a Presidential Chair into a political arena, still less to make an introductory address of this kind an excuse for indulging in contentious propaganda; but I do feel most sincerely that the disharmony of which Morgan has spoken as besetting civilisation has entered into Medicine, and that we must bear our share of responsibility for the disintegrating effects of such a calamity. We need a Renaissance of Judgment, a return to an age and spirit of discrimination, a determination to cultivate in all questions that pertain to our profession a sober and critical mode of approach as the only antidote to that poisonous state of mind that is content to accept the facile slogan of the hour as a substitute for disciplined thinking. As the Judge submits his human prejudice to the law, so must we submit our theories to an abiding principle common to all men of reasonable intelligence, that of common sense and determination to develop to the utmost that appreciation of relative values which is a potential possession of the meanest among us, but which can surely be increased by cultivation. Failure on the part of those who are entrusted

with the organisation of our work and the guidance of our activities to realise the importance of this their primary function is inexcusable; to adopt a line of procedure for its confirmation to what is euphemistically called the trend of thought, the spirit of modern times, regardless of its relation to this principle, is an abrogation of duty and responsibility for which eventually the power and prestige of our profession will suffer, and with them the well-being of all those to whom we minister and on whose behalf we hold that power in trust.

This then is the message that I would give the Section of Medicine, that we ponder these things in our hearts and that in all our deliberations we strive for that comradeship between Science and Art which is the ideal to which many have paid tribute with their lips while they neglected it in their practical conduct. Such comradeship is but one example of that team-work in Medicine, preached by all and yet so difficult, it seems, to attain. It cannot be had without conscious effort, nor without some individual sacrifice, it may be of time, of convenience, of personal pre-conceptions even of what seems for the time being conviction. And remember, too, that in this team-work there must be co-operation between the young and the old, since both have a contribution to make. Judgment is said to be the prerogative of age; I do not say there is no truth in this statement, but I am willing to concede that it may be perhaps a little exaggerated, though it must be admitted, even by the youngest, that time must elapse before

the judgment of experience can come to maturity. "Knowledge comes, but wisdom lingers." I am perhaps, still young enough in spirit to feel much sympathy with those enthusiastic juniors whose eagerness is too often damped by their elders either from jealousy, or perhaps from the mere inability to grow old gracefully. And so in conclusion I would dismiss you with a double exhortation:—

To my own contemporaries, still more, perhaps to those who are companions of the sere, the yellowed leaf, I would give a hard reminder of the famous adage of the boxing ring—

"Youth will be served"

and to those who are my juniors I would say with Rabbi Ben Ezra:

"Grow old along with me:
The best is yet to be,
The last of life, for which the first was made:
Our times are in His hand
Who saith 'a whole I planned,
Youth shows but half; trust God: see all, nor be
afraid'."

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