

ADDRESS TO THE INAUGURAL MEETING OF THE DALHOUSIE MEDICAL ALUMNI ASSOCIATION, June 19, 1958

The inaugural meeting of the Dalhousie Medical Alumni Association was held June 19, 1958. Present at that Alumni reunion were the President of Dalhousie University, representatives of the affiliated Teaching Hospitals, and Government representatives. The executive of the Canadian Medical Association had met in Charlottetown earlier in the same week, and the annual meeting of the CMA took place in Halifax after. In addition to alumni, the President of the CMA was also in attendance, having been installed earlier that day. Dean C.B. Stewart presided at that reunion, and the following is the text of his address to that gathering.

Dean Stewart:

It gives me a tremendous thrill to preside at this impressive gathering of the Dalhousie clan. After this evening, I hope, there will be a Dalhousie Medical Alumni Association. On future occasions such as this it will then be the duty of the President of that organization to officiate. For the opportunity to preside on this occasion, I most sincerely thank the Committee in charge. They are the ones who have had all of the labour in connection with the arrangements for this Reunion and to them should go the honour. However, I assure you that it is with very great pleasure that I act on their behalf to extend a warm welcome to all of our graduates who have returned for this Reunion, to their wives, and in a few instances to their husbands, and to all of our distinguished guests.

Because of the fact that there are other social events tonight, I should like to introduce the guests at our head table while you are having your coffee. I might add, as the President of the Canadian Medical Association suggested to the Council of that organization a few nights ago, the admonition, quietly I hope. We have at this table, and it is my very pleasant duty to welcome all of them, a galaxy of stars who I am sure are well known to most of you.

I have an advisor whom I often consult about all sorts of matters and whose judgement I trust and value exceedingly. When I told this advisor that I was expected to preside tonight at this Alumni Reunion, I was given what I am sure was very good counsel, as few speeches as possible and those to be short. Everyone will want to talk to their classmates and friends and get off to renew their youth, or pretend to do so, dancing to Dan Messer and His Islanders. Good advice, I am sure, as my wife always gives, but of course I do not always take her advice. That is why I make mistakes. All of the ladies here will, I am sure, understand that.

It would take much too long a time to review with you the developments and changes which have taken place, which are taking place, or which will take place in the Medical School and its affiliated hospitals. Even with the very best of intentions I am afraid I could not avoid making a speech which would perhaps be boring to many, even though all of you are such good friends or alumni of Dalhousie. I do wish, however, to take one or two moments to make reference to three individuals or groups who are primarily responsible for whatever developments or progress may have taken place here. I think I would be derelict in my duty if I did not make these few brief comments to our alumni.

First, I want to single out President A.E. Kerr. And I wish to state in the clearest and most unmistakable terms that he is the best friend that the Medical School has. I realize very clearly that suspicions always arise when a man pats his boss on the back and calls him a good fellow. There are various terms which have been applied to this sort of manoeuvre, none of them very complimentary. There is another danger that President Kerr himself might suspect that I had pulled another boner while he was away last week, and that I was just proffering an olive branch before he would discover what had happened. In spite of the danger of these unjust suspicions, I think it only right that I should tell the Medical Alumni as I have that

our President, who has many responsibilities in connection with all the Faculties, has a very special interest in the Medical School. I do not know whether you realize that medical schools have a reputation among University Presidents of being rather thorny problems. Any President who is unfortunate enough to have this faculty on his campus usually has on some occasions or other expressed himself rather strongly on the subject. One famous Dalhousian who is president of a Canadian university, feelingly described the Faculty of Medicine as "That insatiable demanding, impatient faculty of which we are so extremely proud". I do not know whether the psychiatrists here present would describe that as indicating a schizoid reaction. During the past four years that it has been my privilege to serve Dalhousie in my present position, I received nothing but generous, warm-hearted support from President Kerr for any reasonable or sensible proposal which I put forward on behalf of the Faculty of Medicine. And I must also admit that on the more feeble progeny of my brain-waves, and as I look back I am quite sure some of them were very feeble, he has performed such a gentle decapitation that the process was almost painless to both of us. One index of the support which he has given, or by his efforts has obtained for us, is the fact that the budget of the Medical School has been more than doubled in the last four years.

There is probably only one assurance that I can give President Kerr in the presence of our Alumni tonight. That is there are lots more things which we still want to do and that he will have ample opportunity to do something really big for the Medical School, as I am sure he devoutly hopes. Other players of this team who are working so effectively to make this City a great centre of medical teaching, research and clinical services, are also represented at this table, the Governments of the four Atlantic Provinces. We are delighted to have with us the Honourable Mr. Donohoe of Nova Scotia, the Honourable Dr. MacInerney from New Brunswick and Honourable Dr. Lorne Bonnell from Prince Edward Island, and I am only sorry that our quadruple representation does not include our very good friends from Newfoundland, either Dr. Len Miller, the Deputy Minister, or the Honourable Dr. James McGrath, the Minister of Health. Without the assistance of the four Provincial Governments it would have been impossible for the Medical School to continue its operations. This is a rather blunt statement, but it is absolutely true. Leaving out all of the costs of medical research and concentrating only on undergraduate medical education, it cost more than \$2600.00 per student per year to operate this Medical School. Since the student pays only \$500.00 per year in tuition, it is perfectly obvious that additional funds have to be obtained. Since 1947 all four of the Atlantic Provinces have been assisting the Medical School. In 1954 very substantial increases in the grants were made, almost doubling the total. Consideration is now being given by the Premiers of the four provinces to working out a system on which the costs of the Medical and Dental Faculties may be shared according to some previously agreed upon system. The Provinces of Nova Scotia and Newfoundland have indicated their willingness to assist the Medical School by the method which we proposed. Further study is being given to the matter by the Governments of the other provinces, and we sincerely hope that the outcome will be favourable. In any event, we are most grateful to the Governments of the four Atlantic Provinces who so generously assist us, and whom we in turn serve. As you know, we give priority in selecting students to those who are residents of these four provinces.

I need hardly mention to our alumni that the other group most vital to the progress of our Medical School is the affiliated hospitals. Dalhousie Medical School is in a position which is almost unique among North American universities in the amount of clinical material available for teaching purposes in such a relatively small city. This has come about partly by accident, but partly also by design, because of the historic development of the Victoria General Hospital, and later some of the other hospitals of this city, as provincial referral centres. Without the Victoria General Hospital, Dalhousie Medical School could not exist, and without the close co-operation and pleasant association which is made possible by the attitude of Dr. C.M. Bethune, the Medical Superintendent, very few of the advances that have been made in this medical centre would have been possible. The association with Camp Hill Hospital, the Children's Hospital, the Grace Maternity Hospital, the Halifax Infirmary, and now the Rehabilitation Centre, which is located in the Tuberculosis Hospital, and the Tuberculosis Hospital itself have all been most helpful and pleasant.

I have purposely left to the last the most important group to the success of any medical school programme, the Alumni, the graduates. Our reputation is, as it always has been, in your hands and it is you who have made that reputation what it is. As President Kerr has stated, you have also shown your support in very concrete form when the Dalhousie Campaign was undertaken four years ago. We have not had an Alumni Association of the medical students alone, although many of our alumni of course have belonged to the University Alumni Association. Four years ago, however, when the Dalhousie Campaign for additional funds was being organized, one of our most distinguished younger alumni and one of the most vigorous and active workers in anything for the good of Dalhousie, of the Victoria General Hospital and of the community, volunteered to undertake the campaign on behalf of the Medical School. He is well known to all of you, Dr. Clarence Gosse. Dr. Gosse, with the assistance of a number of alumni in various parts of the four Atlantic Provinces, did a most outstanding job. As a result of his efforts and those of his associates, many of the changes which you have seen in the Medical School buildings have been made possible, the modernization of the teaching laboratories in the Medical Sciences Building, the construction which is now going on in the Forrest Building, and the furnishing and equipping of new teaching and research laboratories which we hope will be undertaken shortly in the Pathology Institute. I wish to take this opportunity to extend on behalf of the Medical School our most sincere thanks to all of the alumni who contributed so generously to this campaign, and I hope no-one will think it improper if I make special reference to Dr. Gordon MacDonald who directed the campaign in Cape Breton Island, Dr. Robert Ross who did so in the Truro-Colchester area, and Dr. Gordon Lea of Prince Edward Island. I do not know what methods of persuasion they employed, but I can only say that I wish I had half their gifts. For the work which Dr. Gosse and his associates did on behalf of the Alumni Association, may I ask that the alumni here present extend their thanks by applause?

Well, Ladies and Gentlemen, I hope this has not been too boring to you, but I did want to introduce the team so to speak, the University administration, Government, affiliated hospitals and Alumni and to say quite frankly that with a team such as this there is no reason at all, none whatsoever, why Dalhousie Medical School should not be the top institution of medical education in the country. I should like before concluding to throw out a problem for your consideration. I do not intend to dwell on it in any depth. This is not the occasion for a serious address. I merely want to say that we at Dalhousie Medical School like other centres of medical education, are interested and indeed we must be interested in the future of medical education. May I suggest that you as alumni might also give thought to this problem and consider ways and means in which you might advise us. I think the crux of the problem is this. Military experts have often been accused of preparing to fight the last war rather than the next. In the Medical School we all have a tendency to think of medical education as the sort of programme which we ourselves took when we were students. If the alumni of even ten years ago could go though Dalhousie Medical School for a week or two they would realize the programme was vitally different from that even of a few years ago. The big question is "what should we be teaching?" and how should we be teaching it in order to prepare the practitioner of the future rather than the practitioner of the past. There is no question that we have to and should keep the best of the past, but with the tremendous developments in medical science and medical practice how can we educate medical scientists and practitioners who can keep abreast of the developments which we cannot possibly foresee. I think it is very revealing that an International Congress on Medical Education is to be held next year in Chicago, and has chosen the title "Medicine, a Life-Long Study". We sometimes hear criticisms of recent graduates from older practitioners, that the young man is not fully confident or not technically skilled when he leaves the Medical School. I think such a critic often has forgotten how insecure and unskilled he himself probably was in the first few weeks of his own practice. Judgement and skill come, to a large extent, with experience. Nevertheless, we must teach certain basic skills at least to a minimum level. But these techniques and skills change with the changing developments of Medicine and no doctor who graduates in 1958 can hope to practice to 1968 without continuing his medical education, let alone to 1998. Someone has rather facetiously suggested that medical schools should give a five-year diploma and re-admission at the end of that period. I think this is

based on the false premise that the only place one can learn medicine is in a medical school. Obviously this is not true.

Our problem in a nutshell is how do we select people for Medicine and how do we encourage them during the years in the Medical School so that we can be certain that they will have trained themselves to be perpetual students for a lifetime? We have done a good deal to organize post graduate programmes for the continuing medical education the doctors who are already in medical practice and this is a function which our medical school has accepted and is discharging very effectively, but our major problem is, and no doubt for some time will continue to be the stimulation of the curiosity and the development of study habits which will force a man to keep his medical knowledge of the times even when he is working almost beyond the limits his endurance in the day to day problems of medical practice. One project on which the medical alumni of this medical School can assist is in the recruitment of good students who are well qualified to become doctors. We value the advice of practicing physicians very seriously when we consider an applicant. I hope no-one of you will write a letter of recommendation lightly on behalf of a student about whose ability or interest you have any doubt. At the same time, I hope that every alumnus of this Medical School would make it his responsibility at some time in the next few years to try to interest one outstanding man to enter the medical profession. You saw in our newspaper only recently the report that universities are concerned about student recruitment.

All of us have a tendency to over-emphasize the hard work, the long hours, the long years of study and the other disadvantages of Medicine. I would suggest that there are very few men in this room who would change their profession if they had their lives to live over again, and I suggest that we reduce our negative criticisms of the profession and take the more active role in helping the universities to recruit good men. Ladies and Gentlemen, your attendance at this Reunion has been a great inspiration to all of us within the Medical School. Our sincere thanks to you one and all.