

Elders in hierdie uitgawe van ons *Tydskrif* (in die briewe-rubriek) plaas ons 'n brief wat geskryf is deur 'n aantal geneeshere wat almal intieme vriende van wyle dr. J. S. du Toit was. Hulle doen aan die hand dat 'n trustfonds gestig word, wat bekend sal wees as die J. S. du Toit-gedenk-fonds, met die vooropgestelde doel om 'n blywende fonds in die lewe te roep waaruit behoeftige seuns en dogters van gestorwe mediese kollegas gehelp sou kon word om hul mediese studies voort te sit.

Die gedagte agter hierdie brief spruit enersyds uit 'n lank gevoelde behoefte aan so 'n fonds; ook spruit dit uit die begeerte om hierdie fonds te koppel aan die naam van dr. du Toit omdat hy so veel van sy kragte geskenk het aan die saak van die medisyne, aan die Mediese Vereniging en aan die beoefenaars van die mediese praktyk self.

Dit is nie hier die plek om dr. du Toit se bydraes tot die medisyne in die algemeen op te som nie. Dit is reeds al gedoen toe van sy vriende sy loopbaan in waarderende herinnering geroep het. Maar, wat tog ter sake is, sou wees om te wys op 'n soortgelyke hulpfonds—die Liefdadigheidsfonds van die Mediese Vereniging, waarvan dr. du Toit die vader en skepper was.

Die Liefdadigheidsfonds van die Vereniging is in die vroeë

dae van die Vereniging in die lewe geroep op aandrang van dr. du Toit, met die doel om 'n trustfonds daar te stel waaruit behoeftige afhanklikes van gestorwe dokters gehelp sou kon word. Die fonds is opgebou uit oorspronklike donasies, uit bydraes wat lede van die Vereniging gestuur het en nog stuur aan die fonds, in plaas van om kranse te koop, en uit be-makings. Hierdie fonds is vandag oor die £40,000 sterk en talle weduwees en ander afhanklikes van dokters wat oorlede is, kry bystand uit die fonds. Omdat hierdie fonds 'n spesifieke doel en omvang het, sou hulp vir mediese studies nie inpas by die funksie daarvan nie.

Om hierdie rede het die gevoel nou ontstaan om 'n spesiale opvoedingsfonds in die lewe te roep sodat mediese studente wat hul ouers verloor het, in staat gestel sal kan word om voort te gaan met hul mediese studies—soos hulle sou kon gedoen het indien hul ouers hulle nie ontval het nie.

Afgesien van die groot behoefte aan so 'n fonds, kan ons skaars dink aan 'n waardiger huldeblyk aan 'n groot wel-doener van die Mediese Vereniging en van die bewoners van hierdie land, as om ter gedagtenis aan hom 'n opvoedingsfonds van hierdie aard te stig as gedenkfonds en as blywende monu-ment aan sy nagedagtenis.

BIGOTRY IN MEDICINE

Training in medicine and the pressure of work in medical practice after graduation, takes up many years in a man's lifetime and imposes such a discipline on the doctor that it is only one with an unusual character who is able to abstract himself from his traditional way of thought, and who can look upon medicine from the outside.

The genealogical tree of European medicine is a long and honourable one. It follows very closely, although a little behind, general scientific progress. Our medicine was originally Greek; traditionally given from the gods, it was received by Aesculapius, himself half divine, who established famous cults at Cos and Cnidos, and it was Hippocrates, the great teacher of Cos, who codified this knowledge and founded Greek medical science. It has always been believed that Hippocrates was considerably influenced by the teaching of the medicine of Egypt and, as there was a fairly brisk trade between Greece and Egypt, this is undoubtedly possible. If we are looking for true ancestors, the ancient Egyptian physician-priests, deriving as they did many of their teachings from the Sumarians, may be considered the true fathers of our medical way of thought.

From Greece the genealogical tree is clear. Finally codified by Galen, the science passed to the Romans who, more occupied with military than with medical matters, side-tracked much medical development by their extraordinary predilection for inspecting the viscera of animals. Inspection of the viscera

of a sacrifice was an ancient custom which they had learned, among many other things, from the Etruscans.

After Galen none in Christendom dared comment critically on medical matters for nearly a thousand years, but Greek medicine was kept alive during the dark ages by the Arabian schools who, when the thousand years were past were to return to the Europe of the Renaissance some of the information they had cherished. From that time on the story of medicine is well known and, while we may well take pride in our ancient lineage, medical thought today seems to be so hidebound that deviation from the accepted way of thinking is considered almost as great a crime as deviation from religious thought was in Reformation times, and as political deviation is in the twentieth century. There must be a reason for this curious medical bigotry.

Various reasons may be put forward to account for this curious involution of our critical faculty. Very few doctors have time to think deeply over the basic principles of medical knowledge, and the personality of our teachers is vested with such extreme authority that their opinions are accepted unconditionally by all of us when students, and the habit persists. Only rarely do we find somebody who has the opportunity of contemplation, and the ability to study what relation medicine, as we practice it, bears to other possible ways of healing.

Western medicine is being practised among barely a quarter

of mankind. China and India contain almost three-quarters of the human race, and they have provided their own medical education and developed their own medical systems from time immemorial. It would be impertinent for an ordinary Western doctor, ignorant as he usually is of what these countries have to offer in the way of medicine, to say that it has no value.

We do know that in India the Ayurvedic system of medicine produces cures which we in the West are unable to explain on a scientific basis; and the study of man and his mind has for many years been a preoccupation of Chinese physicians. On rare occasions a drug from their ancient pharmacopoeia becomes available to us whose action is explainable and whose benefits we appreciate. This is sometimes hailed as a new discovery. Recent examples are the derivatives of *Rauwolfia serpentina*, which has been used for many hundreds of years in India for the control of excitable states and hyper-

tension in the form of extracts of the crude root. In the last decade various alkaloids isolated from it have become available to Western medicine. This is only the latest of a notable line. Quinine furnishes another example. The treatment of malaria by extracts of cinchona bark was known for many years to the people of South America, and the story of its cultivation, extraction and introduction to Europe by the Jesuit missionaries earned it the name of Jesuits' bark.

From the ranks of medical men occasional thinkers do emerge who have the intelligence, courage and energy to flaunt the inhibiting conventions and strike out in a new direction. These are the undaunted pioneers who press towards new developments and are not afraid to meet the challenge of inquiry and research. It is thus of the utmost importance that the aim of medical training should never become rigid and narrow, but should always be directed to developing independent thought.

'THE HISTORY OF MEDICINE IN SOUTH AFRICA'

The first consignment of the *History of Medicine in South Africa*, written by Dr. Edmund Burrows, has arrived in the country. Members will recall that the Medical Association undertook the production of this book as a service to its members and to the country.

All members of the Medical Association of South Africa are entitled to one copy of the work in special de luxe binding at the preferential price of 25s. (The book, bound in cloth, will be available to the general public at 63s.). With the approval of the Medical Association (and in conformity with the practice of learned societies who publish works of importance to give their members an opportunity of receiving preference in obtaining copies), the publisher will send one copy

to every member unless the offer has already been turned down. All who do not wish to keep it will have the opportunity to return it after inspection and within a limited time; we hope that this will not be necessary.

This book is the first comprehensive account of the historical development of medical practice in South Africa and traces the fascinating story of the struggle against disease and ill-health in this country from its beginnings to the end of the nineteenth century.

Sponsored by the Medical Association of South Africa, this work can be regarded as the official history of medicine in South Africa. The Association confidently expects that every member will wish to retain such a valuable piece of Africana.