

A family tradition of Scottish medicine

P de Vos Meiring

Private Geriatric Medical Practitioner, Calgary, Canada, formerly Professor of Geriatric Medicine, University of Cape Town, South Africa

ABSTRACT In the late nineteenth and early twentieth centuries, Edinburgh was among the most popular of all destinations for South Africans seeking a medical education. Scotland was thus the fountainhead of much of the knowledge and skill that subsequently led to the development of a high standard of medical education in South Africa. This article describes how four members of a South African family received their medical education at the University and Royal Colleges of Physicians and Surgeons of Edinburgh and a fifth family member obtained the Membership of the Royal College of Physicians and was later elected to Fellowship. This is the story of a relationship spanning three generations between a family in which medicine had almost become a hereditary trait and the best of Scottish medical education

Published online August 2007

*Correspondence to PDV Meiring,
5916 Lockinvar Road SW, Calgary,
AB T3E 5X5, Canada*

e-mail pameiring@shaw.ca

KEYWORDS Edinburgh, medical education, Meiring Beck, Meiring, Scotland, South Africa

LIST OF ABBREVIATIONS German artillery piece, named to denote its calibre (5.9s), King's Own Scottish Borderers (KOSB), machine gun (M gun), Royal Engineer (RE), trench mortar (TM), University of Cape Town (UCT)

DECLARATION OF INTERESTS No conflict of interests declared

Mention of Scotland brings to mind the word 'export': export of technically proficient people and export of education. This is particularly true of medical education, and in the late nineteenth and early twentieth centuries in South Africa, Scotland was the fountainhead of much of the knowledge and skill that led to the high standard of medical education that became the hallmark of South African medicine.

Until South Africa developed its own medical schools, the University and the Royal Colleges of Edinburgh were among the most popular of destinations for South African students seeking a medical education. Edinburgh has featured in the resumés of five of my family members: a maternal great uncle, his younger brother (who was my grandfather), a maternal uncle, my father and, finally, me. (see Figure 1).

SIR JOHANNES HENDRIKUS MEIRING BECK^{1,2}

Johannes Hendrikus Meiring Beck was born at Worcester in the Cape Colony on 28 November 1855, the third child of a family of 14. His father, Cornelius Beck, married Johanna Elizabeth Meiring of French Huguenot descent and they took the name Meiring Beck to record the union of the two families. As time went by, however, the family became known simply as Beck. The founder of the Beck family in South Africa was Andreas Wilhelm Beck from Thuringen in Germany, who came to South Africa in the latter part of the eighteenth century as an official of the Dutch East India Company. Johannes, known later as John,

received his school education in the Cape Colony. In 1874, he sailed on the *SS Athena* for England, on his way to Scotland to enrol as a medical student at the University of Edinburgh. He graduated MB BCh, on 29 November 1879 with a gold medal, his academic achievement earning him the soubriquet 'The Star of South Africa'.² His records in Edinburgh give his middle name as Hendrikus; later in South Africa, that was usually written as Henricus, by which he became known by the family and in contemporary accounts. After graduation, Dr Beck held posts as house surgeon and house physician at the Royal Infirmary of Edinburgh and then proceeded to Vienna and Berlin for more postgraduate study and experience before returning to South Africa.

Dr Beck started practice on the diamond diggings at Kimberley, but contracted malaria, from which he nearly died. The diamond diggings were a collection of claims being worked by a large influx of prospectors who had begun staking claims after the discovery of diamonds in the region in 1866. Eventually an opening occurred at Rondebosch, a suburb of Cape Town, and he succeeded to this high-class urban practice in 1886, where he remained for the next seventeen years. He was soon elected to the Council of the University of the Cape of Good Hope and he later (1892–1903) served on the Colonial Medical Council, the colonial equivalent in its day of the General Medical Council of Britain. He became the first secretary of the Medical Association of South Africa, serving in 1894 and 1895 as President of the Cape of Good Hope Branch. Dr Beck was elected to the Cape Parliament in 1898 as

the member for Worcester and he retired from medical practice in 1903. His younger brother, Dr Lodewijk Andries Willem Beck, had joined him in practice in 1890 and he now took over the whole practice.

In 1908, Dr John Beck, as he was now known, was a Cape delegate to the National Convention that drew up the Act of Union, and in 1910, the British Government conferred dominion status on the country which became the Union of South Africa.

Dr Beck was elected to the Senate of the First Union Parliament and served as a cabinet minister in Louis Botha's government. It is interesting to recall that Louis Botha was the Boer general who inflicted stinging defeats on the British Army on the Tugela River in 1899 and 1900, at Colenso and at Spion Kop. For his services to his country, a knighthood was conferred on Dr Beck in 1911 and he became Sir Johannes Henricus Meiring Beck.

During the great influenza epidemic of 1918 and 1919, he attended patients in Pretoria in addition to his parliamentary duties, and he died of pneumonia in 1919. Sir JHM Beck had provided a shining role model and became an icon for his descendents.

LODEWIJK ANDRIES WILLEM BECK

Dr Lodewijk Andries Willem Beck, known as Louis, was my maternal grandfather. He was born on 25 January 1864. He died in 1918, 11 years before I was born. My grandmother told us many interesting stories about his life and times but unfortunately very little was recorded. He graduated MB ChM from the University of Edinburgh in 1888. Two years later, he joined his elder brother in practice in Rondebosch, and when Dr JHM Beck retired from medical practice in 1903 to enter political life full time, Louis took over the practice. He too was a successful practitioner and succeeded his brother at Rondebosch Hospital. When in 1990 I visited the large and busy establishment that has succeeded the original hospital, I found a photograph of him hanging in the boardroom.

Louis died in the great influenza epidemic in 1918 leaving my grandmother to complete the upbringing of five children on her own. One of her sons, Johannes Henricus Meiring Beck, named after his illustrious uncle, but always known in the family as John, undertook medical studies at Edinburgh, part of his expenses being paid by a fund set up for the purpose by a number of his father's grateful patients.

Life proceeded at a leisurely pace in those days. One of the Beck family's favourite holidays was a camping trip to Cape Point, now a nature and game reserve. This was about a two day ox wagon trek from Rondebosch, a journey that now takes just an hour or two by car.

In those days, doctors submitted their accounts twice a year. One rather troublesome family had called Louis many times but had paid nothing for over eighteen months, despite living in what appeared to be affluent circumstances. The father of the family appeared one morning demanding that Dr Beck come 'at once'. My grandmother, who answered the door, said: 'I'll ask Dr Beck to come at once, but only if you give me an at once fee'.

A few patients have always been notorious for their lack of consideration for their doctors and the woman who appeared one morning shortly after my grandfather's death, demanding an urgent call was no exception. The fact that my grandmother was dressed in black seemed to have escaped her notice. My grandmother said: 'I'm afraid the doctor died last week, hadn't you heard?' The only reply she got was, 'Well now what do you expect me to do?'

JOHN (JOHANNES HENRICUS MEIRING) BECK

John studied at the Royal Colleges of Physicians and Surgeons of Edinburgh and information received from Edinburgh indicates that he obtained what was usually termed the Triple Qualification from the Royal College of Physicians, the Royal College of Surgeons of Edinburgh and the Royal College of Physicians and Surgeons of Glasgow, his diplomas being therefore LRCP Edin, LRCS Edin & LRCP Glas.

John Beck was born on 5 April 1902, he started his working life in a bank in Cape Town but soon was able to proceed to Edinburgh to study medicine. He returned to South Africa, and in the early 1930s, he joined my father (Dr Jacob de Vos Meiring) in Johannesburg. The two partners established a large and successful practice on the Witwatersrand and he remained in that practice for a decade after my father retired from general practice in 1952 to take up a public health post. At the outbreak of war in 1939, John joined the South African Medical Corps. He took part in the Abyssinian campaign as a regimental medical officer and was then transferred to Egypt and posted to a South African field hospital at Wadi Haifa where the experience in anaesthetics he gained in general practice was put to good use.

In 1942, John developed a testicular tumour and was sent back to South Africa for an orchidectomy and radiotherapy for what turned out to be a seminoma and he was boarded out of the army on medical grounds. However he rejoined my father in general practice and remained in excellent health for the next twenty years. John married Mavis Courtenay in 1929 and they had two children, Valerie, who became an accomplished horsewoman, and John, who became a paediatric surgeon in Leeds. He is now retired and living in Yorkshire. The Beck family lived half a block from us and our contact with them was constant. When my father retired from general practice, John stayed on for about ten years, but the strain

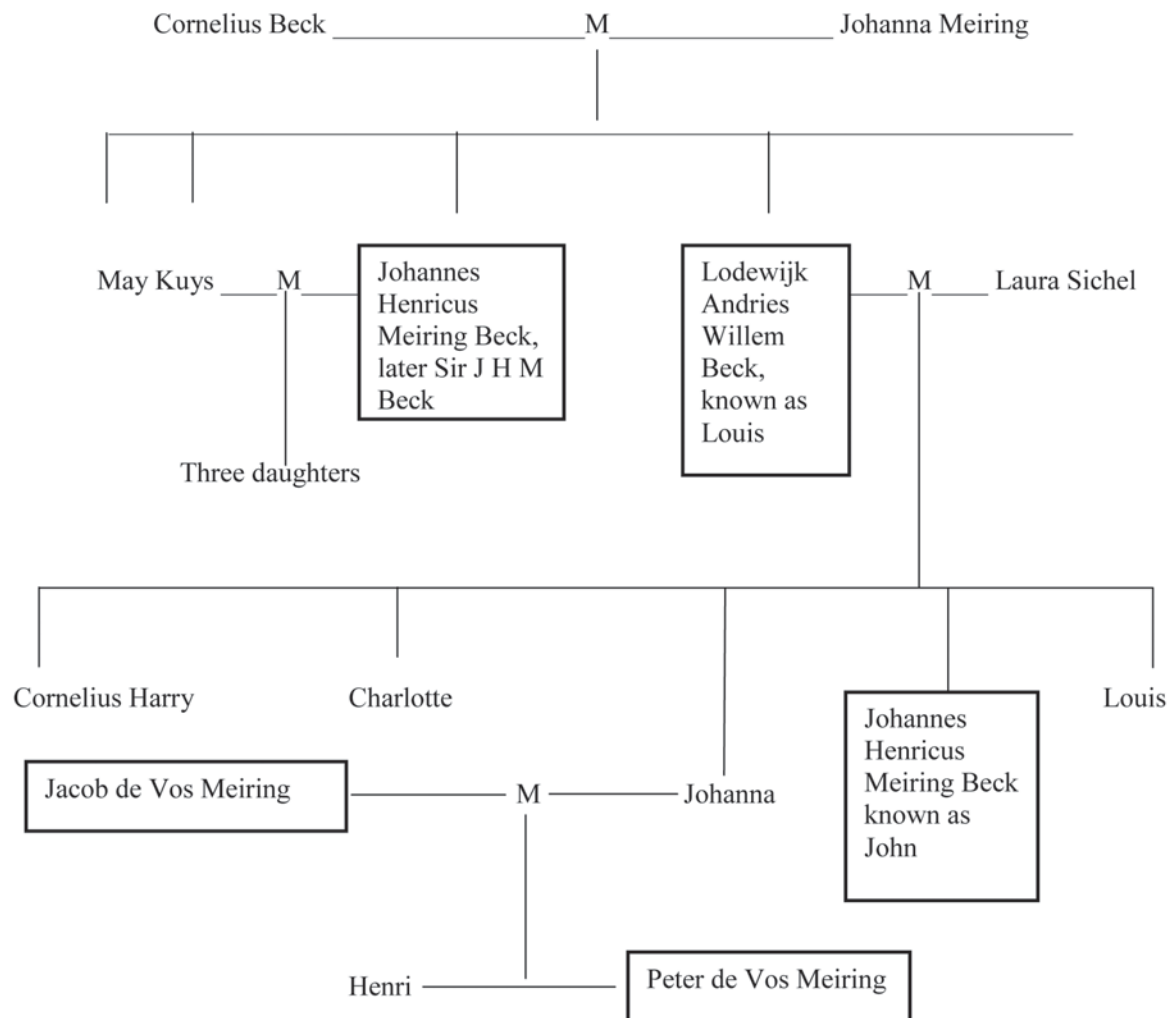


FIGURE 1 Family connections of the Meiring Becks and Meirings. Family members with Edinburgh connections are outlined.

of a busy single-handed general practice began to affect his health and he took a post as an industrial medical officer and later a medical inspector of schools, in which post he remained until his death in 1976.

JACOB DE VOS MEIRING

Jacob de Vos Meiring, my father, was born on a sheep farm in the Sutherland district of the Cape Colony in 1890. He matriculated at Worcester Boys High School in 1911, and in 1912, with two other students, he started attending lectures at the very beginning of the University of Cape Town Medical school.³ As no further facilities had yet been established, he proceeded to Edinburgh the next year. He graduated with the MB BCH degree in 1916. He joined the Royal Army Medical Corps and was soon posted to France as a regimental medical officer to a battalion of the KOSB, and later transferred to the 3rd Regiment, South African Brigade. Known to his brother officers as Japes or Jimpsie, he saw service in the hated Ypres Salient and on the

Somme in some of the bloodiest battles of the war. The South African Brigade was attached to the famous Scottish 9th Division, in which the KOSB also served.

Elements of the 9th Division, including the South Africans, reached Grandrieu and Solre Le Chateau by 11 November 1918 and John Buchan⁴ wrote: 'It represented the easternmost point reached by any troops of the British Armies in France'. Two extracts from the diaries my father kept in Flanders and France give a moving insight into his experiences in this terrible conflict. The first describes his participation in the Battle of Arras:

'9th April 1917

Taken with very funny feelings before going over but when our barrage opened the whole affair was magnificent and felt much inspired and confident.

4 am. Woke up and had tea and a piece of biscuit.
5.30. ZERO. Wounded and prisoners started coming back by 6 am.



FIGURE 2 Lieut Colonel J de Vos Meiring, OC 1 Field Ambulance, South African Medical Corps, taken in 1932, the year in which he retired from the Active Citizen Force (reserve) of the South African Army, or Union Defence Force as it was known in those days and during the Second World War.

6.45 am. Word that Battn HQ was shifting. Laurence and self with staff set out for new objective. Much shelling and very unpleasant time crossing old front line. No shelter.

All dugouts destroyed. Stopped in shellhole behind Black Line. M. guns active against us and whizzbangs in great numbers. Held dressing stations in various shellholes and stopped there for several hours until wounded cleared by bearers and prisoners, and gained touch with Battn HQ at 2 pm.

10th. Spent day and tonight at Blue Line.

11th. In morning had shower and pm. left for Brown Line. Spent night there. Saw first Fritz aeroplane since 9th. Main objective 9th Division, Greenland Hill. First objective chemical works, still in Hun hands. No shelter. Found mouth of command dugout. TM started working Hun position. Fritz retaliated by blowing my shelter to Heaven just after I had shifted 50 yards forward.

12th. 3 pm. Left Brown Line for fresh offensive beyond green Line. Fampoux.

Had awful night under very intense and heavy artillery fire.

13th. Attack over and failed. Field cleared of wounded. Returned 200 yards west of Fampoux to Pike Trench. Awful night of 13th.

13th–16th. Left in Pike Trench. Gas attack.. Poor old Harris gassed. Relieved at midnight. Left trenches under very heavy shelling. Whizzbangs and 5.9s. Most anxious time.

16th April. Came out to Arras. Indulged that night in well-earned rest after very trying week.

The other entry chosen describes the last two days of the war:

'10 November 1918. 7.30 am. 1st and 2nd with a battery of guns and some REs and cyclists went forward as a mobile column with a cavalry patrol. They encountered Fritz at Grandrieu and had a thin time of it. Many casualties. Had a scrap and pushed on a few thousand yards. Fritz shelled the roads down as far as Solre le Chateau.

11.11.18. At 9 am we got the rumour that from 11 am all fighting would cease. At 10 am we got the order from Major Brown who had just come from Division, that an armistice starts at 11 am.

After 11 am, not a sound heard on the whole front. Wonderful experience, but no one seems elated enough.'

My father stayed part-time in the Active Citizen Force, South Africa's equivalent to the Territorial Army, rising to the rank of Lieutenant-Colonel and Commanding Officer of the 1st Field Ambulance, South African Medical Corps. He retired from the Army in 1932 and was appointed Honorary Colonel to the Regiment, a position which he occupied until the end of the Second World War. Jimpsie married Johanna Beck a distant cousin and daughter of Dr LAW Beck (Louis) of Cape Town in 1922 and they had two sons, Henri in 1925 and Peter in 1929. He settled in general practice in Johannesburg in 1922 and was a founder member of the John Saner Club for Continuing Medical Education, then called postgraduate education. He served as the lecturer in medical ethics at the University of the Witwatersrand for many years and retired to a part-time post in Public Health in Pietermaritzburg in Natal where he died in 1964.

PETER DE VOS MEIRING

I was born in Johannesburg in 1929. I graduated MB BCH at the University of the Witwatersrand in 1951 and after two years as a house physician and surgeon in the main clinical disciplines in the teaching hospital group, I became

a government medical officer in Southern Rhodesia (now Zimbabwe) where I had much general experience on remote bush stations. I then worked in industrial medicine and general practice for the Anglo-American Corporation on the Copperbelt of Northern Rhodesia (now Zambia) for six years.

Then after a resident post at the Royal Hospital in Richmond, Surrey, and a term at the Royal Postgraduate School at Hammersmith Hospital, I passed the MRCP London and the MRCP Edinburgh in 1962. After further registrar training I became a specialist physician and head of the Department of Medicine at Grey's Hospital in Pietermaritzburg in Natal for 16 years, during which I acted as external examiner to the University of Natal on several occasions and served for a year as president of the Natal Inland Branch of the Medical Association of South Africa. I then had 10 years (1981–1991) as the professor of geriatric medicine at the University of Cape Town, after which I was a professor in the Department of Medicine at the University of Calgary for five years. Four years' work as a geriatrician and general physician in New Zealand gave me and my wife an opportunity to see our daughter who had emigrated from South Africa, and finally I returned to Canada in 2002 to establish a private practice as a geriatrician, for the last five years.

Towards the end of my sojourn in Natal, I was honoured to be elected to Fellowship of the Royal College of Physicians of Edinburgh. My contact with Edinburgh is therefore much less than that of my ancestors who studied there as undergraduates. I have nevertheless felt proud to have achieved the qualification I have with the Royal College as it adds in its own way to the strong Scottish tradition carried by my very medical family.

During my time at the University of Cape Town, there was much civil strife and unrest as the days of apartheid drew to their inevitable end. Some noted opponents to the regime had come from the academic ranks of UCT, one of the best-known being Raymond (Bill) Hoffenberg, later Sir Raymond, an endocrinologist who was forced to leave the country in 1968 after being served with a government banning order. Dr Hoffenberg went on to a brilliant career in Britain including a knighthood and a term as President of the Royal College of Physicians of London from 1983 to 1989.

When I came to Cape Town in 1981, the unrest in the townships surrounding Cape Town sometimes made my

REFERENCES

- 1 Burrows EH. *A History of Medicine in South Africa*. Cape Town & Amsterdam: AA Balkema; 1958; 355.
- 2 Scully WC. *Sir JH Meiring Beck, a memoir*. Cape Town: Maskew

efforts to establish an academic presence for geriatric medicine in the health facilities for the elderly in these townships an anxious process, but I was the first appointee to a newly endowed chair, and I felt that the whole future of geriatric medicine at UCT demanded my best efforts to lay a proper foundation.

At the same time, I had to develop a clinical presence, research activities and resident and undergraduate programmes in the hospitals in Cape Town.

With pressure mounting on all sides, the State President, Mr FW de Klerk was forced to unban the ANC and the South African Communist party, release Mr Nelson Mandela and start negotiations for a free and fair election for the introduction of a non-racial democracy. However, the benefits of democracy have yet to filter down to those most in need, with high unemployment and endemic poverty. Crime remains a serious national problem. An African headmaster I met at the time of Mr Mandela's release said to me: 'They've left it too late'.

Two of our four daughters and their families had already emigrated, along with many thousands of other people from South Africa, and the other two were making arrangements to follow. My wife and I had little interest in being left in our old age, like so many of my patients, with no close family support and when a suitable post became available in Canada, I decided to take it.

CONCLUSION

This is the story of a relationship between a family for which medicine had become almost a hereditary trait and the best of Scottish medical education. My father shared many stories with me about his undergraduate studies in Edinburgh, and when I arrived at university, much of the teaching was still clearly influenced by the Scottish system. Postgraduate training was characterised by hard work, long hours of relentless experience and a practical apprenticeship in which hard clinical facts were drummed into doctors in training by dedicated teachers and role models, many of whom were 'characters' and individualists hardly encouraged in today's medicine. It obviously had its drawbacks, but it is true to say that clinical doctors were still firmly in control of clinical medicine.

Scottish medical education had an impact which was felt far beyond the shores of Scotland and our family clearly owes Scotland a debt of gratitude to this day.

Miller; 1921.

- 3 L Galloway. *Seventy Five Years of Medicine. A history of the University of Cape Town Medical School*. Cape Town: the Argus; 1987; 13.
- 4 Buchan J. *The History of the South African forces in France*. Cape town: Maskew Miller; 1921; 256.