

Edinburgh and its role in the foundation of Sydney Medical School

J Walker Smith

Emeritus Professor of Paediatric Gastroenterology, Wellcome Trust Centre for History of Medicine at University College London, London, England

ABSTRACT In 1882, Thomas Anderson Stuart (1856–1920) was appointed as Foundation Professor of Physiology and Anatomy at the University of Sydney. At the time he was Assistant-Professor of Physiology in the University of Edinburgh. He initiated the building of the Sydney Medical School in Scottish Tudor Gothic style. He attracted notable figures to Sydney Medical School, such as Dr Robert Scot Skirving.

The original medical school (now the Anderson Stuart Building) continues today as the pre-clinical medical school of the University of Sydney. Its stained glass windows and many busts of distinguished figures in the history of medicine are a constant reminder of the history of medicine. The building with its gothic architecture and echoes of northern Britain has given generations of Sydney medical students a powerful message, that they were part of an ancient and noble profession.

The recruitment of Edinburgh academics to Sydney ended with Professor CG Lambie who retired in 1956. The 1950s were a watershed between the Edinburgh heritage and the Australian future.

KEYWORDS Anderson Stuart, Medical Education, Prince Alfred, Scot Skirving, Sydney Medical School, University of Edinburgh

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SCOT SKIRVING'S BIRTHDAY

In 1955, a unique occasion occurred at The Royal Prince Alfred Hospital in Sydney to honour the 72 years of service by Dr Robert Scot Skirving. He had been on the honorary medical staff of the hospital since its foundation. The occasion was the celebration of his 96th birthday.

As a second year medical student I had the great privilege of attending this event. Remarkably, the occasion provided a direct living link with the foundation of the University of Sydney Medical School, some 72 years earlier. The school dates its foundation from 1 October 1882. Thomas Peter Anderson Stuart of the University of Edinburgh was appointed as the Foundation Professor of Physiology and Anatomy at the University of Sydney in that year.

The mid-1950s were a kind of watershed between the Edinburgh heritage in the past and the Australian future which lay ahead. It was a time when Sydney Medical School had not only come of age but had reached its maturity.

Dr Robert Scot Skirving was an assistant demonstrator in anatomy in the University of Edinburgh when he was recruited by Anderson Stuart in 1883 for the new school in Sydney. Scot Skirving had been a fellow undergraduate with him in Edinburgh. Yet his memoirs,¹ which were published post-humously, reveal that on occasion, he was

a harsh critic of Anderson Stuart. He later became the second superintendent of the principal teaching hospital of the University of Sydney, the Royal Prince Alfred Hospital from 1883–1884.

Although this occasion recalled the Edinburgh origins of Sydney Medical School, by the 1950s, the continuing Edinburgh influence upon the medical school was coming to an end. Scot Skirving was to die before his 97th birthday.

On 1 January 1957, Ruthven Blackburn was appointed Professor of Medicine in Sydney in succession to the last University of Edinburgh Professor, CG Lambie. This occurred two years after the above occasion.

Times were changing. Australian initiatives were increasingly being imprinted upon the medical school. American academic and postgraduate influence was beginning. Yet even today, the Scottish origins of the medical school are very clear for all to see in the architecture of the Old Medical School, conceived by Anderson Stuart in the 1880s. Since 1960, this building has been known as the Anderson Stuart Building. This Edinburgh influence is also very clear in the way undergraduate education was organised. Sydney chose to have a University, rather than a college-based, system of education. It used an Edinburgh model rather than a London hospital-based, or an Oxbridge collegiate model.

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Correspondence to J Walker-Smith,
Emeritus Professor of Paediatric
Gastroenterology, The Wellcome
Trust Centre for History of Medicine
at UCL, 210 Euston Road, London
NW1 2BE

tel. +44 (0)208 505 7756

fax. +44 (0)208 505 4643

e-mail
johnwalker_smith@hotmail.com

FOUNDATIONS

The University Act of Incorporation was passed by the Legislative Council of the Colony of New South Wales in October 1850.² It was the first institution for tertiary education in the Australian Colonies. It enacted that the University Senate should have the power after examination to confer amongst others, the degrees of Bachelor of Medicine and Doctor of Medicine and to examine for Medical Degrees in the four branches of Medicine, Surgery, Midwifery and Pharmacy.

On 13 June 1856, the Faculty of Medicine of the University of Sydney came into being. It celebrates its 150th anniversary this year. It is the oldest Faculty of Medicine in Australia and New Zealand.

In that year, a Board of Examiners was appointed. Its only professorial member was John Smith, Professor of Chemistry and Experimental Physics. He was a Doctor of Medicine from Aberdeen, but opposed the establishment of a Medical School. A colleague described him as 'the driest old fossil extant'. Smith preferred development of the elitist Faculty of Arts. He surprisingly showed some hostility to the medical profession.

In fact, the whole question of establishing a medical school had become mired in politics, both university and government, and also in warring personalities, with public financing of the medical school a key issue of division and controversy.

AN ASSASSINATION ATTEMPT

This issue dragged on until a dramatic event changed the whole scene. In 1868, HRH Prince Alfred, later Duke of Edinburgh, Queen Victoria's second son then aged 22, undertook the first ever Royal visit to the Australian Colonies.

There was an assassination attempt by an Irish terrorist.³ This was one of the very few terrorist attacks ever to occur in Australia. On 12 March 1868, whilst the Prince was picnicking at Clontarf beach, on Sydney Harbour, an Irish Fenian, James O'Farrell, attempted to assassinate him. Prince Alfred was severely injured, though luckily the bullet struck him in his ribs deflecting it from any vital organ,³ and he fully recovered.

The probe used in the operation was presented by Mrs Macarthur Onslow (a member of one of Australia's most elite families) and is on display to this day in the Board Room at Royal Prince Alfred Hospital. Wealthy citizens of Sydney, outraged by this attack, wished to demonstrate their loyalty to the crown by making substantial donations as a thanksgiving fund for the Prince's recovery. Plans were made, based on this large fund, to build a hospital on land provided by the University of Sydney (ie a University Hospital).

The Royal Prince Alfred Hospital was finally completed in 1883. It was architecturally modelled upon St Thomas's Hospital, London. This University Hospital project dramatically boosted the proposal for a Sydney Medical School despite the ongoing opposition of Professor Smith.

FOUNDATION PROFESSOR

So at last in October 1882, the Senate of the University advertised the position of Foundation Professor of Physiology and Anatomy. They sought nominations specifically from the University of Edinburgh, the Royal Colleges of Surgeons and Physicians of Edinburgh and the Faculty of Physicians and Surgeons of Glasgow, indicating the high standing of these Scottish institutions in the British Empire at that time.

The unanimous recommendation was Thomas Peter Anderson Stuart. His testimonials⁴ came from many great names and included Professor (later Lord) Lister FRS, Professor William Turner FRS, Professor of Anatomy at the University of Edinburgh, and Professor DJ Cunningham (author of *Cunningham's Textbook of Anatomy*), Professor of Anatomy at the Royal College of Surgeons in Ireland.

Lord Lister, then Professor of Clinical Surgery, King's College, after describing Anderson Stuart as a student of 'unusual brilliancy' concluded:

'It will thus be seen that Mr Anderson Stuart has given evidence of remarkable ability, and that he has undergone *con amore* a most thorough training, theoretical and practical, in Anatomy and Physiology, while he has also had considerable experience as a teacher; and I believe it would be difficult to find any candidate more eminently qualified for the Chair in Sydney University, which he now seeks.'

ANDERSON STUART

So Anderson Stuart was appointed at the astonishingly young age of 26 years and given the awesome task at this tender age of creating a new medical school. He had a formidable record concerning his teaching abilities. He was seen as a remarkable man of great promise by colleagues in Edinburgh both young and old.

This account of Anderson Stuart is based upon several sources. William Epps,⁴ in his biography of Anderson Stuart published in 1922, printed the full text of a number of letters written by Anderson Stuart as well as extracts of some of his talks *et cetera*. Anderson Stuart published a number of original papers himself. Scot Skirving's memoirs, edited by his daughter Ann Macintosh,¹ are a valuable source, as well as the official histories of the Medical School² and obituaries in the *Lancet*⁵ and *British Medical Journal*.⁶ Finally, the great Australian bibliophile and historian of medicine, Sir Edward Ford, Professor of Public Health, gave me several books and

papers from the library of Anderson Stuart, during my student days. I also have a personal memory of stories my father told me about Anderson Stuart.

Thomas Anderson Stuart was born in the lowland town of Dumfries on 20 June, 1856.⁴ Dumfries is, of course, forever associated with the name of the poet Robert Burns, and Anderson Stuart had a real love for the bard's works. Continuing on a literary note, when Robert Louis Stevenson visited Sydney, Anderson Stuart met him frequently. He even took him to see the building works of the new medical school.

Thomas Anderson Stuart was very much a Scot. Like so many Scots, he was proud of his origins, culture and ancestry. Yet it is a mistake to anachronistically see him in any way as a Scottish nationalist. Indeed it is interesting to observe that he appeared to see his move from Edinburgh to Sydney as a move from one part of the British Community, Scotland, to another part, New South Wales, albeit on the other side of the world. None of his testimonials indicate anything particular about going to Australia. It was in no sense seen as a foreign move, albeit an exciting opportunity on the other side of the world but still within the British world.

Anderson Stuart was a solitary only child. His mother Jane 'dominantly transmitted to her son her characteristics and shaped the life of the future man'.⁴ He was educated locally at Dumfries Academy. It is noteworthy that he was not educated at an elite public school. He left school at fourteen, and sought a career in pharmacy, working as a chemist's apprentice 'I also had the opportunity of actually making with my own hands the official preparations of the pharmacopoeia'. He passed the preliminary examination of the Pharmaceutical Society, but was too impatient to wait until the statutory age of 21 years when he could sit the major examination. So, at the age of sixteen years, young Thomas decided to make the change from a career in pharmacy to one in medicine, stimulated by the experience of a friend who was apprentice of another chemist.

He was a medical undergraduate at the University of Edinburgh from 1874 to 1880. He had a distinguished undergraduate career, winning an astonishing number of medals during the course. Remarkably, after he had sat in London for the MRCS examination, he was told by Sir William Turner, on returning to Edinburgh, that he had done so well that if he cared to return to London for the FRCS examination in the same subjects, he was sure to get through. He immediately returned and took the examination. He obtained the highest marks ever won up to that time. Later on, it became a matter of regret for him that because of his move to Sydney he never completed the later examinations for the FRCS. An interesting memory of the exams concerns his habit of keeping bones in the pocket to familiarise himself with their texture and shape.

His letters to his parents show natural jubilation at this time. He wrote 'such heavy scoring has never yet been made in London' but he wrote, '[y]ou must not breathe this to anyone'.

However, it is clear he was delighted by his quite brilliant academic success as a student. His student contemporary, Scot Skirving,¹ in his somewhat racy memoirs, described Anderson Stuart as a 'very unpopular student... did nothing but swot and was very conceited'. Scot Skirving recalled that 'Coracoid' was a nickname given to him because of the fancied resemblance of his nose to the bone of that name, rather like a raven's beak.

At that time, the choice of a medical career on graduation was between general practice, medicine, surgery and gynaecology with obstetrics, or an academic teaching career. It was hardly surprising that he chose the latter. His teacher, Professor Rutherford of Physiology, offered him a job as his Chief Demonstrator in Anatomy.

In a personal account of this time, he wrote:

'Before I graduated, both Professor Turner and Professor Rutherford had noticed that I gave promise of being a good teacher; and they were right. I possessed the gift of orderly thinking in the presence of others, so that I had the essentials of a good teacher born in me'.

He was not a modest man. Yet he did prove to be a remarkable teacher.

'In preparation for this career I studied at Strasburg physiology and chemistry under Hoppe-Seyler, experimental physiology under Goltz, and experimental pharmacology under Schmeideberg. I used to go round the wards with Kussmal. In Schmeideberg's laboratory I investigated the physiological properties of the salts of nickel and cobalt, and on the results wrote a thesis for my MD (obtained in 1882) for which I was awarded a gold medal.'

He worked in Strasburg for one year and then began his duties as Rutherford's demonstrator. He was in charge of the practical classes in minute anatomy and physiology.

Then came the invitation for Sydney, and later, the offer and his acceptance. When he arrived in Sydney he found only the most basic facilities.

SYDNEY MEDICAL SCHOOL

The medical school building was small and shared with another professor. He brought his laboratory technician, John Shewan, with him from Edinburgh. An early responsibility was to establish a dissecting room and to find bodies for dissection. Anderson Stuart was rather coy in his account of how he actually did this.



FIGURE 1 'The dream that came true' autographed by Anderson Stuart.

He had to fight to get public finance for a new and substantial medical school.

Famously, he used all the initial funds to build the foundations! A fine building, built in Scottish Tudor Gothic style was completed in 1889. It had large lecture theatres, far too large for the small number of students who enrolled for medicine in the 1880s. In 1884, there were twelve students, including my maternal grandfather Richard Trindall, enrolled in Medicine II, (including two repeats). At the time there were almost as many medical staff as students. When he gave his last lecture on Physiology to second year medicine in 1919, there were 241 students in the year. So he was to live to see his vision fulfilled. Indeed, he was a man of remarkable vision. This was recognised at the time as illustrated in this 1916 drawing (see Figure 1).

His building (the Anderson Stuart Building) remains, as it has from the beginning, the pre-clinical medical school of the University of Sydney. Anatomy, physiology with embryology, histology etc.⁷ are taught there. Within its massive stone walls, this building always seems to be cold even on the hottest Sydney days. The architect was James Barnett, Colonial Architect. His brief was to design a building in harmony architecturally with the main university buildings of Edmund Blackett. It was not directly modelled on Edinburgh Medical School. However, it was influenced by the Athens of the North in the classical form

of the lecture theatres modelled upon the theatre of Polykleitos in Epidavros and the Aesculapian themes. The statue of Asklepios or Aesculapius is at the apex of the front façade. A curious raven may be glimpsed below it.

The stained glass windows are remarkably beautiful, with coats of arms of distinguished doctors, including Lord Lister and James Paget of St Bartholomew's Hospital, and other great names from medical history including John Hunter and René Laennec. Also, most notably, the three great names from antiquity Galen, Hippocrates and Aretaeus the Cappadocian. These stained glass windows, dazzlingly illuminated by the Australian sun, had a powerful impact upon me as a young 18-year-old medical student. All were manufactured in England, a cause of some dispute by local stained glass manufacturers at the time.

Its long corridors were lined with busts of famous figures in the history of medicine from Hippocrates BC 460–377 to William Harvey 1578–1657. Scottish notables were also a feature such as Alexander Monro Secundus (1733–1817) and Sir Charles Bell, the Scottish surgeon–anatomist (of Bell's palsy fame). There were also eponymously named lecture theatres, Vesalian, Hunterian and Anderson Stuart.

It is like a Temple of Medical History. I have written:⁸

'All these architectural features were redolent of the distant past and northern climes. The gothic building with its echoes of northern Britain stood in complete contrast to the hot southern environment where the building actually stood. Yet it did give us students a powerful message that we were engaged in an ancient and indeed noble profession.'

This building gave me a life-time interest in the history of medicine.

MEDICAL EDUCATION

Perhaps the greatest achievement of Edinburgh University in the nineteenth century was its role as a pioneer of formal university medical courses, and especially practical clinical teaching. In 1825, the medical course had been increased from three to four years. In 1833, English replaced Latin as the language of examination. In the same year, the degree course was divided into two stages: the first stage was a general course of study with examinations in chemistry, botany, anatomy and zoology. Then there was the second stage which concentrated on medical subjects with examinations in the practice of medicine, material medica, pathology, surgery, midwifery and medical jurisprudence. This approach was to be the basis of the Sydney medical curriculum.

A new Edinburgh medical school was built in 1885. Most dramatic of all in relation to the teaching of undergraduates was the remarkable new Royal Infirmary,



EARLY GRADUATES OF THE MEDICAL SCHOOL
Back row: A. E. Mills, J. W. Hester, Keena J. McDowell, Professor Anderson Stuart, P. J. Kelly.
Front row: Arthur Henry, R. B. Trindall, H. V. C. Hinder.

FIGURE 2 Early Graduates of Sydney Medical School with Anderson Stuart. With permission from Epps⁴ 1922.

re-built in 1879. All this expansion and re-development of Edinburgh as a great centre for medical education was a powerful inspiration and example for Anderson Stuart, when he came to plan the creation of the new Sydney Medical School.

Apart from education, during the nineteenth century, Edinburgh Medical School played an important role in revolutions both in surgery and public health, but its role in research was beginning to be eclipsed by other international centres. Yet, in that century, it attracted some of the best doctors in the world and exported some of the finest. Indeed, the very triumphs of the Edinburgh Medical School inevitably altered its position in the world of medicine as the years advanced.

In undergraduate education, other universities established excellent medical schools often on the Edinburgh model, as did Sydney. In Australia, the traditional link whereby wealthier Australians sent their sons 'home' to Scotland to study medicine ceased with the great success of the medical schools of Sydney and Melbourne.

In postgraduate education and medical research, by the end of the nineteenth century, Edinburgh was beginning to lose its international leadership. By the early twentieth century, the focus of medical research in Britain tended to shift to London, especially with the development of the Medical Research Council. In addition, Edinburgh had to increasingly compete with major American medical schools where there was a vast amount of private investment. No British school could compete with these massive private endowments.

A major task for Anderson Stuart in Sydney was to recruit students for his new school and to encourage families to stop sending their sons back to the 'old country' for their medical education. This could only be achieved by producing graduates of high quality in Sydney, equal to, or even better than, those educated in the old country. The practice of sending Australians to the UK finally died in the 1920s.



FIGURE 3 Student rag day in Sydney in 1922.

Anderson Stuart posed (see Figure 2) with some early graduates, including my maternal grandfather Richard Barzillai Trindall, a third generation Australian who later had a career in general practice in Newtown, Sydney. He graduated in the second year of the new Medical School in 1889. My Scottish paternal grandfather, John Walker-Smith, was also a general practitioner. He had been a student of Glasgow but had taken the Licentiate of RCPE as his qualification. He had been a student in Lister's last year at Glasgow University, i.e. one of Lister's cohort of 1,288, nearly 7% of whom settled in Australasia.⁹ These two general practitioners represent the dual background (British and Australian) at the turn of the century, of medical graduates in Sydney.

Student life in Sydney was very similar to that found in Edinburgh. This was true in Anderson Stuart's time and beyond. In my father's time (see Figure 3) there was an annual fundraising student rag day.

Another similarity was the dissecting room. When I came to the dissecting room in 1955, it was still remarkably unchanged from Anderson Stuart's time:

'In fact our grim dissecting room provided a rather horrifying scenario. My stomach heaved when we first entered the vast gothic room with its sickly sweet smell of formaldehyde emanating from row upon row of bodies in various stages of dissection. An unforgettable and indeed quite unpleasant memory of the extraordinary gothic environment with little groups of white clad students gathered in tight groups around cadavers, pouring over their Cunningham's Anatomy texts covered by protective plastic covers in a vast room. Yet in another way the dissecting room seemed sometimes like a temple of arcane mysteries.'¹⁸

It was the first time I had seen a dead body. It was a rite of passage.



FIGURE 4 Anderson Stuart on the Koch treatment, from *The Bulletin*. With permission from the publishers.

EDINBURGH RECRUITS

It was natural for Anderson Stuart to recruit Edinburgh men for Sydney. However, he was accused by some of bias in favour of his fellow Edinburgh graduates; e.g. the anatomist JT Wilson was appointed Professor of Anatomy. DA Welsh was later appointed as Professor of Pathology, so the first three chairs were filled by Edinburgh graduates.

However, most notable among these recruits was his contemporary, Dr Scot Skirving. He was in the same undergraduate year as Arthur Conan Doyle. In fact, he was also a dresser for Dr Joseph Bell, the inspiration for Conan Doyle's creation of Sherlock Holmes.

In Sydney, he had the distinction of becoming senior physician at Prince Alfred Hospital and senior surgeon at St Vincent's Hospital. He volunteered for both the Boer War and the First World War. In the latter, at the age of 63 years, he was helped by Sir Frederick Treves to get a surgical posting at Millbank Hospital for Officers.¹⁰ He included forequarter amputations in his repertoire. He was a man of many parts.

ANDERSON STUART AND KOCH

Anderson Stuart himself was recruited as a physician at the Children's Hospital, and a cartoon from the *The Bulletin* (see Figure 4) satirises this role. As was typical of the time, Anderson Stuart was appointed as physician to the Children's Hospital despite a lack of any training or even experience of the care of children. The cartoon does refer to the most important publication of his career. This concerned the Koch Method of Treating Tuberculosis, (injections with tuberculin). Whilst on a visit to London, he was commissioned by Sir Henry Parkes on behalf of

New South Wales government to proceed to Berlin and to report on Dr Koch's method of curing consumption. Anderson Stuart's own account¹¹ is as follows:

'In November 1890, I interviewed Koch in Berlin on the general subject of tuberculosis. My mission is described and the results published, in a voluminous report...'

'It was a very interesting moment in the history of medical science. In the dead of winter, with snow deep on the ground, groups of men like myself hastened to Berlin; the hospitals and hotels were full of them, all intent on the same mission. This was owing to the somewhat dramatic manner in which the discovery was announced to the world, and while there was something in it, there was not that in it which had been claimed for it. Tuberculin is a fact, and treatment by tuberculin is still practised in proper cases. It was hoped that tuberculin would be the universal cure for all cases of tuberculosis; but that now, of course, is a thing of the past.'¹⁴

The *Edinburgh Medical Review* commented when reviewing this report⁴ 'This is one of the very best and ablest reports to Government we have ever read'. Key facts were his 'extraordinary table' which shows that 62 observers have detailed 1,790 cases, which resulted in 11 cases successfully treated with tuberculin and 54 deaths.

The year 1890 was the pinnacle of Anderson Stuart's fame. Returning to London after his Berlin trip, he was given a dinner by Sir Andrew Clark, President of the Royal College of Physicians. Amongst those present were Sir Joseph Lister and Sir James Paget then President of the Royal College of Surgeons. He was knighted in 1914.

FINAL ASSESSMENT

Perhaps his career was crowned by the appointment of AE Mills, an Australian, and one of his own graduates, as the first Professor of Medicine, albeit part-time, in 1920. This was the first clinical chair at Sydney Medical School.

Anderson Stuart died from cancer of the stomach in 1920 at the early age of 62. He was cared for in his terminal illness by Scot Skirving and Charles Bickerton Blackburn.

Concerning Anderson Stuart the man, Epps⁴ stated, 'He was in no sense effusive or demonstrative. On the contrary, he sometimes seemed to lack cordiality'. He was aware of this himself and wrote:

'I have always regretted that the custom of the Lowland Scotch were so little demonstrative. For instance it is not the habit to say "good morning" or "good evening"; as for relations kissing each other, it used to be – and I suppose still is – considered a sign of effeminacy, and held to mark something of the

English character. Yet I have lived to see that "good morning" and "good night" are very good things, and that kissing is not so bad (between relations, of course) as we used to think. This undemonstrative character of the Lowland Scotch is apt to make people boorish in society, and is a distinct drawback, as I have found again and again.'

Perhaps he was a man with insights, but Scot Skirving in his opinionated memoirs stated, 'Stuart was always doing or saying something wrong. He made enemies galore.' He later stated in a snobbish way, if Anderson Stuart 'had lived to be a hundred, could never have acted wholly like a gentleman, and I mean gentleman in its best sense.' Yet he felt 'Stuart had in him much to admire.'

My own father recalled Anderson Stuart as a man with a rather droll sense of humour. On the day that his first son was born, he walked over to the window of the lecture theatre, and as he opened it he remarked to the students in a very dry manner 'A little sun (son) and air (heir) gentlemen!' His ironic humour also was displayed in the curious raven with a long beak on the front façade. This was self mockery on Anderson Stuart's part. It recalled his nickname of 'Coracoid'. This was only rediscovered in the 1960s by John Young.²

Whatever else may be said of the man in personal terms, he had drive and vision. However, his greatest legacy was as a teacher who could inspire medical students. At the end of an address in 1898 to the Medical Students' Society of Melbourne University on 'Medicine as a Career',¹² he said:

'Your success in practice is to carry with it, and to carry in it, the welfare of your patients, that they may be spared pain, may be shielded from disease, may enjoy increased comfort and happiness, and their days and your days may be longer upon the land.'

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AFTER ANDERSON STUART

After his death, the tradition of recruitment of Edinburgh graduates continued for a time. Most notable were Professor Stump in Histology and Embryology and Professor CG Lambie. The latter established academic medicine in Australia. A graduate of Edinburgh University, Lambie became a scholar–Professor who was also a physician. He retired at the end of 1956. He was referred to by students as 'the wee mon', for, like most Scottish people long settled in Australia, he never lost his Scottish accent. He always insisted on the students standing when he entered the lecture room. When Professor Ruthven Blackburn at the beginning of first lecture in 1957 told us that he wished to abandon that tradition, we knew that the ancient regime of Edinburgh had passed and a home-grown Australian regime was now in charge.

CONCLUSIONS

In 1957, Sydney, the daughter school of Edinburgh, was now mature. Her graduates like Ruthven Blackburn had come to believe that she, in several ways, had now equalled, and even outstripped, her Edinburgh mother, just as her founder Sir Thomas Anderson Stuart had planned and hoped.

The continuing debt of the University of Sydney Medical School to Edinburgh Medical School is great. It is still alive and vivid when one walks in the steps of Anderson Stuart in his building. Yet this building is now alive with the new science of the twenty-first century. It is a worthy legacy of a shared inheritance between Australia and Britain.

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