curriculum, but only recently have there been signs that all medical schools are hearing and responding to what it says. It is a sobering observation that the General Medical Council, which can scarcely be described as a Rabelaisian body, has been trying to effect these very same destultifying alterations for decades. It would be reassuring to know that a Rabelaisian oversight of these developments was permanently in place; as Hugh Dudley recently observed in *Proceedings*, 'groups of academics tend to fall out if their own personal patch is threatened, and to react by self-protection, even although this is not in the interests of the organisation in which they work'. Rabelais, as his readers will appreciate, would have none of this.

The principal reason for a medical man to read Rabelais is for entertainment The sheer joy of the work confirms the Rabelaisian contention that laughter is the best medicine. Humour and creativity, as Koestler observed, go hand in hand and Rabelais is no exception. By his fantastical and humorous creations and commentaries, his farces, his mockeries, his parodies and his satires, Rabelais not only entertains, he also educates us. The educational experience is captured in a display of verbal fireworks which added 600 new words to the French language of the time. And what words; who can ever forget such a word as philogrobolising? The power of such words to entertain, to entrance and at the same time inform must be the secret of Rabelais's success. Laugh, as you will, for you must laugh with Rabelais, but think, as he surely intended you to think, at the same time. Drink of his words, for drinking is Rabelais's communion, or coming together of mankind. The stories of Gargantua and Pantagruel have surely, not only a particular historical, but also a universal significance. They are a 16th century French Monty Python's Flying Circus with the pictures and meanings projected in words. Read, laugh and learn!

MEMORIES OF A SURGEON-LIEUTENANCY EDINBURGH 1941–43: PART IV

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WATCH ASHORE

What stranger's feet may find the meadow And trespass there and go

A. E. Housman

On a quiet moonlit night in winter, I walked across the Meadows in the wartime blackout, on my way back on foot to Granton after supper with a naval colleague and his family who lived in a rented house in Marchmont. My wife with our son was visiting her parents in Paisley. I was glad to have our friends' company, and their hospitality, on an unscheduled and rare day off duty, a 'watch ashore', duty free. I had to be back at the Royal Naval Sick Quarters, by midnight, a good four miles walk across the city. There was more than enough light to see the way, the full moon, low toward the west, throwing shadows far across the paths and grass, the trees bare and black against the blue-grey sky. The stillness of the Meadows was peaceful and relaxing, and there was no great need to be fearful of misadventure when walking there in those days.

North across the Meadows the light from a single un-blacked-out window high in the Medical School sparkled on the frost below. The yellow square of the window seemed to hover low in the sky, like a bright machine, not quite stationary, its brilliance obscuring the silhouette of the building. A white-coated figure moved in the room, to and fro past the window, and for a while stood looking at the world outside, oblivious that he was inviting any air raid warden or policeman or other citizen to perform a public duty and see to so evident a breach in the generally well-kept blackout of the city. Might not the Luftwaffe on a quick reconnaissance from Norway or Schleswig-Holstein find such a beacon useful? A fifth-columnist at work? But it was no spy, just an absent-minded academic catching up with his post-mortem reports. How do I know that? I knew whose room it was.

I walked on, nearer the lighted room as I made my way along Middle Meadow Walk toward the gate facing Forrest Road. It was the brightness from that uncurtained window which showed me the black shape that suddenly I came upon, on the grass by the path. And just as I saw it lying there the light from the window wavered and went out, a steel-hatted figure drawing the shades and leaving the school building illumined only by the moon. What of that black shape, now less clearly seen in the restored norm of the night's natural light? Instinctively, I slowed my step and, careful before caring, moved out of the proximity of this foreign shadow, so obviously no usual feature of the parkland. I did not know then how foreign it was and how near to becoming just a shade. Its size and shape immediately suggested a human body, roughly covered. A drunk, potentially violent? Shelterless lovers? A villain, lying in wait for any

¹ Dudley HAF. I believe... Proc R Coll Physicians Edinb 1996; 26: 265-71.

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Samaritan, late on the Meadows, who might be relieved of valuables? Unlikely, this last possibility, but only unlikely. Ashamed by my reluctance, I went to the shadowy mass and gently laid a hand on it, and at once became aware that this was indeed a person, and in trouble. A fading moan, unmistakably human, and harrowing, answered my touch, confirming that this was indeed a fellow being, a man suffering. Then he spoke, almost inaudibly. I thought at first that it was his name he was saying. It sounded like 'Will McByston'. Then, still so faintly, but this time quite clearly identifiable words, 'Salve me, fons pietatis!', but spoken in a way of pronouncing Latin that was not any British way. I realized that he had not named himself but had said, mumbled rather, 'I' will mei' Beichte nun ... ': he wanted to make his confession, for he sensed himself to be near to his death. I said something to him, in German, wishing my words and the manner of them might be reassuring, sympathetic, then added, as I put my naval greatcoat over him, 'Ich komme gleich zurück, mit Hilfe' ['I'll be back at once, with help']. 'Lass' mich nicht allein, allein zu sterben' ['Don't leave me alone, to die alone']—he spoke clearly and more strongly, pleading with his eyes yet with a trace of a smile when I pressed his hand and got up to go for help. That impression of recovering strength was a sort of reassurance to me that it was not wrong to leave him. But what could I do but leave him? I could not have lifted him. There was no one about, nor likely to be, there at that time.

It was a shortish run to the Royal Infirmary, up Centre Meadow Walk and in by the East Gate and so to the SOPD (surgical out-patient department). A medical student was in charge of the department that night (a medical student in charge? There was a war on, to use the then contemporary explanation for anything out of the ordinary). She could not authorize the loan of a trolley or the services of a helper. A taciturn old porter led me outside, not as I thought to get me off the premises but to grab a trolley, blankets, a passing acquaintance and, miraculously, two hot hot-water bottles. We ran to the patient and found him, scarcely five minutes since I had left him, almost unrousable. The student in SOPD responded immediately and capably with first aid, and then admitted the man to the wards. Only then did she show her distress at her earlier response; needlessly, she apologized.

The patient was a German, a prisoner-of-war. He had not given his parole that he would not try to escape from the farm camp in Aberdeenshire where he had been sent to work. One day he walked away from the farm and tramped southward. It took him five weeks to reach Edinburgh's Meadows (about 175 miles by his route). He had hoped to get to a seaport where he might find a neutral ship and escape back to Germany. Aberdeen and Dundee proved to be too well guarded for his purpose and the ports on the Kincardine coast had no foreign ships calling. So, he continued his walk, heading for the Forth harbours and eventually for Leith. He had found the country people in Aberdeenshire, Kincardine and Perthshire hospitable and helpful: they took him for what he was, a foreign worker, but with the assumption that he was a refugee from mainland Europe, of whom there were many on the land in those years. It did not occur to them that he might be a refugee from a prisoner-of-war camp. Food and overnight shelter were freely given him. Often he was able to get a lift by cart or car (once from a country doctor on his round). There were opportunities when he could have stolen a bicycle or a horse, but he was not a thief and never gave in to the temptation. Travel by rail was impossible because he needed to

conserve his small amount of British money. Occasional bus rides proved to be too fraught with hazard, for the other passengers were a cheery, friendly lot and sometimes questioned him too personally. The farther south he came the more reserved and even openly suspicious he found the people along his route. He had to forage for food, drink from streams and find lonely shelter. When he reached the Forth, well to the west of Edinburgh, he knew that his strength was almost exhausted, his clothes and boots far gone in wear and his appearance unkempt, even wild, and attracting too much curiosity. Yet it seems that no one seriously questioned his passage or mentioned it to any authority. In the end, walking only at night to be less conspicuous, he reached Edinburgh, and collapsed by the path where he was found.

In the Infirmary his hypothermia was quickly corrected. When fit enough he was transferred to a military hospital, where his health was soon fully restored. He spent the rest of the war in a succession of prisoner-of-war camps, working in their medical units because he was interested in Medicine and showed aptitude for caring for the sick. On returning to Germany after the war he became a medical student. He graduated with honours and had a good academic career in which he was known particularly for his humanity as well as for his skills as a physician. For years we exchanged Christmas letters. It was not possible to meet again. Requiescat.

After spending a few hours at the patient's bedside in the Infirmary I resumed my walk to Granton, where the officer of the watch duly confined me to quarters for returning from shore leave seven hours and 37 minutes adrift and thereby failing by the same length of time to relieve the medical officer on duty. The latter was not at all put out by the delay; he was also confined to quarters, for arguing with the officer of the watch. Next day, I was put in front of the base commander (the commander of the Naval Base; the opposite of base). He referred the matter to the Naval Officer in Charge, who, after the formalities were over, shook my hand and ordered me to take weekend leave at the Peebles Hydro when my family got home from Paisley. That is another story (*Proceedings* 1996; 26: 164–6).