William Henderson (1810–72) and homeopathy in Edinburgh

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ABSTRACT  William Henderson was appointed professor of general pathology at Edinburgh University and physician-in-ordinary to the ERI. He produced several papers on clinical and pathological aspects of aortic and heart disease and contributed to the differentiation of typhus and typhoid fevers. He continued his medical studies in Paris, Berlin and Vienna, and on his return to Edinburgh in the 1840s. This involved the Faculty of Medicine, the RCPE and medical societies as well as medical personalities, prominent among whom were Professor Sir James Y Simpson, Professor Sir Robert Christison and Professor James Syme. Many Scottish medical graduates were involved in the introduction of homeopathy to the British Isles. Glasgow is one of only four UK cities still to have a homeopathic hospital.

KEYWORDS  Christison, Henderson, homeopathy, pathology, Simpson, Syme, typhus/typhoid fever

LIST OF ABBREVIATIONS  Dictionary of National Biography (DNB), Edinburgh Medical and Surgical Journal (EMSJ), Edinburgh Medico-Chirurgical Society (EMCS), Edinburgh Royal Infirmary (ERI), Licentiate of the Royal College of Surgeons of Edinburgh (LRCSEd), Royal College of Physicians of Edinburgh (RCPE), Royal College of Surgeons of Edinburgh (RCSEd), Royal Medical Society (RMS)

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INTRODUCTION

Actions by professors in the medical faculty of the University of Edinburgh have seldom brought strong criticism from their peers. But in the mid-nineteenth century, a step by one incumbent of a chair induced the following comment:

‘The consternation manifested by the Medical Faculty in the University and by the College of Physicians was such as might be exhibited in ecclesiastical circles if the Professor of Divinity were to announce that he had become a Mohammedan.’

The person who had caused such dismay was the Professor of General Pathology, William Henderson, and his offence was his support for, and practice of, homeopathy. Homeopathy as a system of therapeutics was introduced into Edinburgh in the early 1840s. It attracted many adherents, of whom Henderson was probably the most prominent, and generated bitter opposition from medical personalities and institutions in Edinburgh. The controversy and the controversialists are the subject of this paper.

WILLIAM HENDERSON: THE MAN

Henderson (see Figure 1) was born in Thurso, Caithness, the fourth son and seventh child of Sheriff William Henderson of Scotscalder, and Ann Brodie. Presumably he had his early education in his home county, and later was a pupil at the Royal High School of Edinburgh, whence he entered the medical school at Edinburgh University. He graduated MD in 1831 with a thesis entitled De Emphysemate cum Pneumothorace. He continued his medical studies in Paris, Berlin and Vienna, and, on his return to

FIGURE 1  Professor William Henderson (1810–72).
Edinburgh, was appointed physician to the Fever Hospital situated in the old Surgeons’ Square. He was appointed pathologist to the ERI, assistant physician to the same institution in 1838, and physician-in-ordinary in 1840. In 1838, he had been elected a Fellow of the Royal College of Physicians of Edinburgh. By this time, Henderson had married Williamina Henderson (unrelated), a union which produced six children. His two sons did not follow him into medicine; one became a lawyer and the other, an officer in the 77th Regiment of Foot, served in Bengal.

All the portents suggested an assured professional future and for several years this was so. He became a very successful extra-mural teacher of the practice of physic; he was appointed physician-in-ordinary to the ERI against strong opposition and received the thanks of the managers of that hospital for his diligence. His work resulted in a series of important papers between 1835 and 1839. His pathological work included the use of the microscope in studies of pneumonia and molluscum contagiosum. His clinical acumen resulted in a series of papers on diseases of the heart and larger blood vessels, making original observations on the signs and symptoms of substernal aneurysms and aortic regurgition.

**The typhus/typhoid problem**

It was another clinical and pathological study which claimed the particular attention of his obituarists and others. In 1839, the EMSJ published *A Report on the Epidemic Fever of Edinburgh*. This was in two parts — *An Account of the Symptoms and Treatment* by Henderson and *Analysis and Details of Forty-Seven Inspections after Death* by John Reid.

This was clearly a co-operative study by two doctors that distinguished between two patterns of disease and which we now know as the distinct diseases, typhoid fever and typhus fever. It is surprising therefore that the DNB states that Henderson was the first to show that typhus and relapsing fevers were distinct, without mention of Reid. This omission is repeated in Henderson’s obituary in the *Edinburgh Medical Journal*, in *A History of the Department of Pathology of the University*, and in reminiscences by Sir Byrom Bramwell. Kaufmann, on the other hand, mentions Reid as the person believed to have been the first to distinguish between typhus and typhoid fevers, without reference to Henderson. Comrie in his *History of Scottish Medicine* claims that both Henderson and Reid were each one of the first to differentiate between typhus and typhoid fevers.

John Reid (1809–49) was a contemporary of Henderson. He graduated MD at Edinburgh University in 1830, was elected FRCPE in 1836, lectured in physiology and was pathologist and assistant physician to the ERI. His fine personal qualities and his professional standing were responsible for his appointment to the Chandos chair of anatomy and medicine in the University of St Andrews. His entry in the DNB does not make reference to his work on the epidemic fevers. But in 1848, he published, as a book, a series of papers entitled *Physiological, Anatomical and Pathological Researches*. One of these was the paper on epidemic fevers originally published in the EMSJ of 1839, in which his own and Henderson’s contributions are stated clearly. Reid died of cancer of the tongue at the early age of forty.

AB Christie acknowledges that different authorities give different authors the credit for first distinguishing the two diseases, but considers that it was Sir William Jenner (1815–98), professor of pathology at University College Hospital in London, in his book published in 1850, who settled the question. But the credit may have to be accorded to the Americans: Gerhard’s paper in the *American Journal of Medical Sciences* of 1837 appears to distinguish, clinically and pathologically, the two diseases.

**The chair of pathology**

In light of his professional career in the 1830s, it is not perhaps surprising that Henderson was appointed, in 1842, to the chair of general pathology at Edinburgh. The chair itself had been created in 1831 by a Royal Commission of King William IV and was also a chair of clinical medicine with the incumbent entitled to have charge of beds in the ERI. This was controversial, and the Senatus Academicus took all possible steps to block its original introduction. There were several objections; the commission gave the right to the incumbent to be an examiner and a member of the Senatus without having served an ‘apprenticeship’ with a voluntary class to which he had to attract students; it also gave him the right to

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*FIGURE 2 Professor James Syme (1799–1870).*
teach the practice of physic, already the province of Professor Home; and finally, the Senatus objected to being dictated to by the Town Council and the Commission. The objections were to no avail.11

However, when the first incumbent, John Thomson (1765–1846) became ill in 1837 he tendered his resignation and the medical faculty offered to give lectures in pathology so that the chair could be suppressed. The professor of surgery, James Syme, (see Figure 2) strongly supported this, saying dismissively that a professor of general pathology:

‘need not be a practical man. He may be merely a man of respectable talents and application, well supplied with modern French books and coloured delineations of morbid appearances, with the assistance of which he may not only appear to others but even persuade himself that he is truly acquainted with the subject of his study.’12

The Town Council also entered the fray, doubting the value of the chair, and writing to the then Home Secretary, Lord John Russell, asking that the chair be abolished on the grounds that it was costing Edinburgh £10,000 per annum. Moreover, it was claimed that the necessity of studying pathology was dissuading students from coming to Edinburgh. John Thomson showed this was not so, particularly as regards costs, and the Council was told in no uncertain terms by the Home Secretary that the chair would remain.

The result of this was that John Thomson withdrew his resignation and his lectures were given by Dr William Thomson (1802–52), his son, and by Dr JY Simpson (1811–70), both assistants in the department. When William Thomson became professor of the practice of physic at Glasgow, and Simpson was appointed professor of midwifery at Edinburgh, (see Figure 3), John Thomson finally retired in 1842. Henderson was appointed very much on his merits despite two other strong candidates, Dr PD Handyside (1808–81) and Dr David Craigie (1793–1866). At that time, there was no hint that Henderson was dallying with homeopathy and he was still regarded highly. The following year, he was appointed examiner of foreign students by the RCPE.13

**Personal qualities**

Many who knew Henderson noted his warm personal qualities. Sir Byrom Bramwell, who had been a student of Henderson’s, wrote that he was an able man with a keen sense of humour. He recounts the following anecdote:

‘His class, which was held at 4-o-clock in the afternoon, when we were all tired and perhaps somewhat irritable after a long day’s work, commencing with Christison’s lectures at 9 am, was apt to get a little out of hand. One day Henderson was lecturing on the sounds of the heart and the method of their production. He stated that many animals had been used in the investigation of the sounds of the heart, amongst others the donkey (loud applause). To this, he replied in his strong nasal voice, “The donkey, gentlemen, has been a most valuable animal in the progress of science.” (renewed and uproarious applause). Henderson’s eyes sparkled; he looked up and down the benches until he had covered with his eye every individual student, then he said, “Gentlemen, there is hope for you all yet.”’14

Another of his former students, Colonel Kenneth MacLeod, remembered him as a ‘fine looking man, with a strong face and racy Sutherlandshire accent, attired very correctly in black with a white tie’.15 He remembered his lectures, however, as ‘dry’ but also admitted that at no time did he attempt to promote homeopathy in his lectures.16 The Scotsman obituarist summed up his character thus: ‘A man of great natural shrewdness with a fine sense of humour and was possessed of a power of jocularity’. Furthermore, he was awarded by his students the accolade of a nickname, but why ‘Boiler’ was chosen is unexplained.17

More significantly, he did not show any meanness of spirit, as he might have done, to those who had censured him. In 1868, the Curatorial Board of the University met to elect a new Principal, one of the candidates being Sir JY Simpson. During the discussion, a curator revealed that he...
William Cullen (1710–90), first led to Hahnemann’s beliefs.21 Therapy. It is possible that the work of a Scottish physician, that the patient had a robust constitution to withstand his prescriptions, and pharmacopoeias that still contained much regimes included bleeding, blistering, purging, ‘blunderbuss’ prescriptions, and pharmacopoeias that still contained much that was nauseous and loathsome. These often required that ‘likes are cured by likes’ — *similia similibus curantur.* He further argued that the dose of any drug should be so small as to act only on the disease, but he carried this concept to what are regarded by non-homeopathists as absurd lengths.

Nevertheless, when Hahnemann published his chief work *Organon der Rationellen Heilkunde (Organon of Rational Medicine)* in 1810, his ideas were rapidly taken up, especially on the Continent, and it is easy to accept that homeopathic medicines did the patient less harm than many of the orthodox treatments of the time. Nevertheless, the apothecaries were hostile and he was forced to leave Leipzig and settle in Paris where, it has to be said, he was a popular practitioner until his death.

A Treatise of the Materia Medica Edinburgh University, and a president of RCPE, had written to Professor Henderson asking whether he would have any objection to Sir James Simpson being elected to the office of Principal, and I beg to reply that, although Sir James and I have encountered each other in somewhat bitter controversy, I think I would heartily despise myself if I felt any objection on that account to act under him as Principal. On any other ground, I am equally free from any objection to his appointment.”28

His other strong belief was his Christian faith. His last work was a book, which must have been many years in preparation, published in 1869, only three years before his death. *His Dictionary and Concordance of the Names of Persons and Places of the Old and New Testaments*29 was an immense undertaking of 690 pages and demonstrated his dedication and great scholarship in Greek and Hebrew. His rather moving epilogue to the book includes the following:

‘I desire to record my thankfulness to God of All Graces for the measure of health which He has mercifully vouchsafed to me while engaged in this compilation and for the continued and increasing interest with which He has enabled me to prosecute the work; and to express my earnest wish that, by His Blessing, it may lend to the advancement of His Glory by being of some service to the students of His Holy Word.’

His death, ironically, was due to aortic aneurysm, a condition he had studied extensively during his life and on which much of his good reputation was based.

**HOMEOPATHY: THE THERAPEUTIC SYSTEM**

It is not difficult to understand some of the grounds for the introduction of homeopathy. When Christian Frederick Samuel Hahnemann (1755–1843) studied medicine in Leipzig and Vienna,20 the generally accepted treatment regimes included bleeding, blistering, purging, ‘blunderbuss’ prescriptions, and pharmacopoeias that still contained much that was nauseous and loathsome. These often required that the patient had a robust constitution to withstand his therapy. It is possible that the patient had a work of a Scottish physician, William Cullen (1710–90), first led to Hahnemann’s beliefs.21 Cullen, a professor of the Institutes of Medicine at Edinburgh University, and a president of RCPE, had written *A Treatise of the Materia Medica* (1789) which was translated into German by Hahnemann who was struck by the fact that quinine could apparently produce, in the healthy body, symptoms like those produced by the diseases which quinine was used to treat. This was the basis of his assertion that ‘likes are cured by likes’ — *similia similibus curantur.* He further argued that the dose of any drug should be so small as to act only on the disease, but he carried this concept to what are regarded by non-homeopathists as absurd lengths. The opponents of homeopathy cannot accept that the extreme dilutions of homeopathic preparations can have any pharmacological effect; nor can they understand the special methods of preparation of these, ‘potentized remedies’. Failure, for the most part, to observe the benchmark of modern therapeutics, the double-blind clinical trial, has also contributed to its failure to achieve widespread acceptance.

Nevertheless, when Hahnemann published his chief work *Organon der Rationellen Heilkunde (Organon of Rational Medicine)* in 1810, his ideas were rapidly taken up, especially on the Continent, and it is easy to accept that homeopathic medicines did the patient less harm than many of the orthodox treatments of the time. Nevertheless, the apothecaries were hostile and he was forced to leave Leipzig and settle in Paris where, it has to be said, he was a popular practitioner until his death.

**The advent of homeopathy in Edinburgh**

Homeopathy first became established on the Continent, mainly in the German-speaking states and France, and came to the UK in the 1830s. Its introduction into the UK is ascribed to an Edinburgh MD of 1820, Dr FHF Quin (1799–1878). He was of aristocratic birth and widely regarded as the lovechild of Lady Elizabeth Cavendish, Duchess of Devonshire, and Sir Valentine Quin, 1st Earl of Dunraven. He became the Duchess’s family physician, travelled widely in Europe, met Hahnemann and espoused homeopathy. His aristocratic connections ensured his clientele was similarly aristocratic and, indeed, royal.22

Quin edited a homeopathic pharmacopoeia, written in Latin, that was published in 1834 and dedicated to Leopold 1, King of the Belgians. In this is included a list of almost two hundred names and loci of doctors and surgeons who practised homeopathy. The vast majority were in continental Europe; two were located in London and one in Dublin but none in Scotland.23

In Scotland, the system tended to be centred mainly in Glasgow but Edinburgh had its early adherents. A Homeopathic Dispensary existed in Edinburgh in 1841, housed originally in Brunswick Street and then in St James Square but it appears to have closed by the 1860s. Homeopathy still flourished however with at least two homeopathic pharmacies in prime situations on Princes Street and Hanover Street. An increasing number of practitioners embraced the new system.

**Early Edinburgh homeopathists**

The first house-surgeon of the Dispensary was Dr GE Stewart, an Edinburgh graduate, who was later to lock verbal horns with that scourge of the unorthodox, Professor Robert Christison (see Figure 4). Reflecting
perhaps the Continental origins of homeopathy, the first two physicians to the Dispensary were Polish. Dioysius Wielobycki was a PhD of Berlin of 1837, and a member of the Cracow Astronomical Institute. He graduated MD at Edinburgh in 1843 and worked also at the Edinburgh Maternity Hospital. His compatriot, Adam Lyschinsky, became a LRCSEd and graduated at the University in 1837; he had worked as an army surgeon before practising in Edinburgh. It is impossible to be certain of the number of homeopathists in Edinburgh at that time; some obviously kept a low profile and are unrecorded. Many, apart from the above, had graduated in the 1830s and 1840s, mainly in Edinburgh and St Andrews. Some had studied subsequently in Vienna.

Charles Ransford graduated at Edinburgh in 1833. He became FRCPE in 1835 and in that institution was appointed treasurer and an examiner. His career continued for some time to be orthodox and conventional; he was a president of the RMS, secretary of the Obstetrical Society of Edinburgh, and he published papers on allopathic medicine in the EMSJ. Later, he became physician at St Cross Hospital in Winchester, embraced homeopathy enthusiastically and defended it vigorously.

John Rutherford Russell, practised in Edinburgh after his graduation there in 1839, was a member of the RMS, and published papers on auscultation and percussion in the EMSJ. He was also a physician to the Edinburgh Homeopathic Dispensary but left that city and subsequently practised from 3 Harley Street in London. Francis Black was an MD of Edinburgh of 1840, but moved soon afterwards to Bristol. He was the first co-editor of the British Journal of Homeopathy. Robert Ellis Dudgeon spent most of his professional life in London after graduating MD in Edinburgh in 1841. He became a homeopathist soon after qualifying and attending the Vienna medical school. He was a translator of Hanemann's works into English. William Macleod was a St Andrews graduate of 1843 and became FRCPE the same year. He was a lecturer in the institutes of medicine at the Extra-academical School in Argyll Square, Edinburgh and a physician to the Royal Public Dispensary. Later he practised in Yorkshire, and as a homeopathist crossed swords with Professor JY Simpson during the controversies of the 1850s. Samuel Cockburn, an LRCSEd and MD of St Andrews of 1848, practised as a homeopathist in Glasgow.

Thomas Skinner qualified MD later than those mentioned above, in 1853 at Edinburgh, and worked for many years in Liverpool as a conventional allopath. He was not converted to homeopathy until 1875. In Edinburgh, Skinner was taught by Professor Simpson, one of the most vociferous opponents of homeopathy, and was regarded by him as a star pupil. Skinner was the inventor of a special mask to administer chloroform in childbirth, a procedure pioneered by Simpson at that time.

The mid-nineteenth century was a time when many medical men in Edinburgh embraced homeopathy. It was also the time that saw vigorous opposition to it and it became a very contentious issue.

THE CONTROVERSY

It seems likely that Henderson was first made aware of the tenets of homeopathy as a young postgraduate student at the Continental medical schools of Vienna, Berlin and Paris in the early 1830s. When he began to practise the system is less certain (all treatments mentioned in his published papers between 1835 and 1837 are orthodox) but it is probable he did so some years before his publication of An Inquiry into the Homeopathic Practice of Medicine in 1845 (see Figure 5). If he were a homeopathist by the early 1840s, then he did not reveal the fact. In 1842, he was present at a quarterly meeting of the RCPE when a ballot was taken as to the admission to the Fellowship of Dr Black who was known to practise homeopathy; he was not admitted but without apparent opposition by Henderson. In the same year, Henderson was appointed to the chair of pathology with its entitlement to charge of beds in the ERI. He wrote to the managers of that institution offering his resignation as an ordinary physician, explaining that he had delayed doing so until he could be more sure of a permanent appointment in the Clinical Department of the University. This I think is now pretty certain. Obviously he saw no approaching storm clouds.
Alexander Wood (1816–84) a Fellow and Secretary of RCPE, undertook a full examination of homeopathy and published, in 1844, a treatise entitled *Homeopathy Unmasked* and presented it to the College. He received praise from many colleagues, one of whom wrote 'I trust it will have much effect in putting down that miserable humbug.' In the same year, James Syme (1799–1870), Professor of Clinical Surgery at Edinburgh, became Dean of the Faculty of Medicine and one of Henderson's most bitter opponents. Even Syme's biographer described him as a controversialist with whom 'few could venture to combat' and two chapters of his biography are devoted to his disputes with colleagues and one-time friends including Professors Liston and Miller, and Sir James Simpson. One of his first acts as Dean was to write to Henderson demanding to know whether he practised homeopathy while carrying out his duties as physician to the ERI. Henderson replied candidly that he did, mentioning perhaps provocatively some of the cases he had treated successfully using this system. The reaction was swift and the Dean was empowered to write:

> ‘The Medical Faculty feel it their duty to put a stop to the prosecution of this principle another year in the Clinical Wards of the hospital – a practice so trying to the patients, dangerous to the students and calculated to destroy public confidence in the Royal Infirmary of Edinburgh.’

The Managers of the Infirmary were also concerned that Henderson was administering medicines not entered in the hospital prescription books and they appointed a committee headed by Lord Medwyn, a Scottish Law Lord, to interview Henderson and report to them. The committee's report stated that Henderson had promised that as the practice did not seem to be approved of he would 'discontinue it from henceforth'. This did not satisfy the Dean or Faculty and their will prevailed. Henderson was removed from clinical teaching and patient care in the Infirmary.

But James Syme's enmity did not end there. He wrote a long personal memorial to the Patrons of the University, saying in effect that even such a branch of medicine as pathology ought not to be entrusted to a man of homeopathic tendencies and demanded that Henderson be removed from his chair; however, in this he did not succeed.

Perhaps goaded by the actions and attitudes of the Infirmary, the University and many of his colleagues, Henderson made public his views in 1845 in his treatise *An Inquiry into the Homeopathic Practice of Medicine*. In this he claimed:

> ‘that homeopathic treatment can often palliate the sufferings that incurable organic diseases occasion, I entertain no doubt but I suspect that palliations and temporary suspensions of such sufferings have not been always duly distinguished from actual cures.’

He continued in this apparently objective vein by admitting that errors could be made:

> ‘by anyone who is practically ignorant of the methods of physical diagnosis and little acquainted with the natural course of disease and that this, is not unusual among homeopathists.’

He provided details of his own experience of 122 cases as diverse as tonsillitis, gastritis, dysentery, acute rheumatism, amenorrhoea and 'general disorders of the health' to support his advocacy of the system. He added an appendix to provide further evidence in the form of statistics (of a rather dubious nature) from another publication; for example, pneumonia treated allopathically was given a mortality of 23.3%, and treated homeopathically, 6.7%; peritonitis treated allopathically at the ERI was given a mortality of 27.6% while treated homeopathically in Dr Fleichmann's homeopathic unit in...
Vienna it was 4.7%. Perhaps the raised eyebrows of the unbelievers were justified.

The conflict intensifies

For some reason the debate seemed to subside and then return with increased passion, locally and nationally in the 1850s. At first it was RCPE and several of its Fellows as individuals who led the assault. In 1851, the College came to the realisation that not only a Fellow but a former Treasurer (Charles Ransford) 'had professed himself a homeopathist' and settled in an English city. With Professor Simpson, as President, in the chair a resolution was presented by Professor Christison which included the following:

'The College expresses severe regret that a Fellow should have been led to take a step so fatal to his reputation in the College and to his character as a scientific physician and instructs the Secretary to transmit to him a copy of the resolution trusting that this may lead him to withdraw from the College.'

Letters were sent to both Ransford and Henderson. Henderson, clearly angered by this, replied at length and in unrestrained language:

'Some parts of these resolutions are so intemperate and insulting as to be discreditable to the body from which they emanate; and though you take pains to inform me that the resolutions, as they stand, were unanimously adopted by the College, I shall do some of the Fellows the justice to believe that they have so much good sense and gentlemanly feeling as to be incapable of impugning the honour of anyone because he differs from them in the choice or dose of a drug.'

Neither Ransford nor Henderson withdrew from the College, which took no further action and their names remain on the College List of Fellows to this day.

Another Edinburgh medical institution then entered the fray, but with an unsurprisingly familiar *dramatis personae*. The Edinburgh Medico-Chirurgical Society was addressed by Professor Simpson, the text being published subsequently in the monthly *Journal of Medical Science* and as a pamphlet. In this he castigated homeopathy as a 'system of consummate charlatanry'. He bracketed it with Mormonism as a form of heresy; the Christian community was justified in expelling Mormons and the medical community was similarly justified in expelling homeopathists. Later, the EMCS approved a motion (proposed by Professor Syme and seconded by Professor Simpson) 'that Dr Henderson's name be deleted from the list of members'. At the same meeting, in a night of the long knives, Dr MacDonald, Dr MacLeod and Dr Ransford were also expelled.

During the 1850s, the debate rumbled on, involving local and national institutions. The correspondence columns of the *Scotsman* and *Edinburgh Advertiser* resounded to claims and counterclaims; the RCSEd and the Royal Faculty of Physicians and Surgeons of Glasgow, the Provincial Medical and Surgical Association, the Medical Association of London and the BMA all condemned homeopathy. Pamphlets penned by the protagonists flew like shrapnel around the academic, medical and lay worlds.

Although RCPE had voiced its antipathy to homeopathy, it was taken to task at a meeting of the BMA in 1859 by what appeared to be an English-based section of it, for its apparent laxity in this matter. A member accused the College of awarding its licence to a known homeopathist who had been recommended by two others of the same persuasion. He went further by suggesting that becoming a LRCPE was a matter of 'a sale of licences to everybody who would apply'. A resolution was put forward:

'That in the opinion of the members of this Association, the admission of homeopathists as licenciates by the Edinburgh College of Physicians is highly reprehensible; and that the College is bound to make inquiries as to the character and standing of a man not known to any of its members.'

A note of caution was introduced by another member who warned that such a resolution 'would necessarily censure the London College of Physicians'. All resolutions and motions in this vein were then withdrawn. What made this BMA meeting even more unfortunate was that a private letter from an eminent and senior Fellow of the Edinburgh College had been read out. This condemned recent proceedings in the College. The Fellow involved was none other than Christison who was asked for an explanation by the College President of the day. Christison replied assuring him of his 'sorrow and surprise' that his letter had been so used and explaining that it had been written 'for no other purpose than to satisfy his [the BMA member's] own mind as to enquiries addressed by him to me'. This was not an entirely satisfactory explanation and there is no doubt he had been indiscreet. But there was another unexpected twist to the matter involving the Faculty of Medicine at Edinburgh.

The medical student's role

Professors Syme, Simpson and Christison, three of the most influential members of the Faculty, continued to oppose homeopathy through this body. After Syme's attempt to oust Henderson in the 1840s he tried again, in a lengthy memorial in 1851, to get the support of the Patrons of the University to remove Henderson from his chair (and indeed abolish it). One of his main arguments was the perceived effect of a homeopathic professor on medical teaching, the students themselves and the reputation of the medical school. This he said:
'must constitute a serious obstacle to medical graduation in Edinburgh, and, excite distrust in the public mind as to the general soundness of instruction in the University of Edinburgh, with the effect, as it can be proved, of preventing students from being sent here for their education and of throwing discredit on all the medical professors.'

But there was evidence that the contagion had already reached the student body. In 1851, only forty-eight medical students graduated in the University; of these, eight were said to be homeopathists. Christison said he could not believe this and that they 'must have concealed their sentiments from their examiners'. One student, Alfred Pope, who did not conceal his interest, must have rued his candour. He claimed that he had been failed in his final MD examination by Christison and Syme because he wished to practise homeopathy. Pope was a matriculated student from 1847 to 1851 and appeared to do well; in 1850, he was appointed to Professor Miller's wards in the ERI as a dresser on the basis of recommendations from his teachers. His version of the events was that to a direct question from his examiners he replied 'I am not now a homeopathist; but after graduation I mean to enquire into the truth of it.' The Faculty's version is in the examiners' report in the Faculty Minutes:

'In consequence of information having reached them that Mr AC Pope, a candidate for graduation this year, entertained the intention of practising as a homeopathist, they put the question to him at his examination yesterday whether such was the case; and receiving an unsatisfactory answer they have suspended their decision upon his examination.'

The burden of final decision was passed to the Faculty as a whole. It decided there were serious doubts as to the soundness of Mr Pope's principles of practice and that his examination was defective on some branches (not a matter mentioned by the examiners). Pope was remitted for further examination at a later date when the Faculty considered he would have had ample opportunity to inquire into the truth of homeopathy. There is no record that Pope ever submitted himself for examination again and certainly he did not graduate MD from Edinburgh. In 1856, he became a Member of the Royal College of Surgeons of England and practised in England but whether as a homeopathist is not known.

THE AFTERMATH

Sir James Simpson's biographer, writing in 1897, concluded that 'homeopathy was thoroughly crushed in Edinburgh'. This was not wholly true. It still had, and has, its adherents in the city, elsewhere in the UK and internationally. Homeopathic hospitals still function in Glasgow, London, Bristol and Tunbridge Wells, and the system takes its place with an array of alternative and complementary medicine practices which are now accepted more than in the past.

But by the end of the nineteenth century, its old antagonists had not relented. Sir Robert Christison in his autobiography gives a salutary account of a patient who:

'by ill-luck came under the medical charge of Dr —— who treated him with drops of nothingness, powder of nonentity and extractum nihil.'

It is unlikely that present day attitudes would generate the intensity of debate within medical institutions if one of its members practised homeopathy. The Royal College of Physicians of Edinburgh, for example, has no formal and published position on this system. It is known that a few Fellows and Members have stated their interest in complementary medicine but action would only be taken against them if they acted in a way that required reporting to the General Medical Council.

Perhaps the last word should be given to Dr J Allan Gray, FRCPE. Dr Gray was a medical officer to Leith Hospital and the Burgh of Leith's first part-time Medical Officer of Health. He also taught at Dr Sophia Jex-Blake's Edinburgh School of Medicine for Women which conducted its clinical teaching at Leith Hospital. He gave an inaugural address to the students in 1888 that entitled Medicine and Quackery. Conceding that 'the absurdities of homeopathy have led to the revival of the sadly neglected study of dietetics' he went on to set forth a remarkably balanced view. Mankind, he argued, had a tendency to self deception which could account for cures by faith:

'But upon this principle of the imagination almost persuading the sick man to be well depends on the success of the coloured water and bread pills of pharmacy, and of the globules of homeopathy when honestly prescribed. I say honestly prescribed. For we find at times a reputed homeopath giving doses, which as to their quantity would gladden the heart of a hardy allopath of the old heroic school. So also upon this effect of imagination depend the medical results of many quack medicines. I should be slow to regard as fraudulent all the written testimony in favour of these nostrums. ... Is the improvement which follows the taking of any drug always the result of the drug's action? I trow not.'

Who can gainsay or improve on this?
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REFERENCES

5 Relapsing fever was formerly a label for various diseases including typhus fever, typhoid fever and malaria. Later it was the name given to the diseases caused by Borrelia species. (See Skinner HA. The Origin of Medical Terms. 2nd ed. Baltimore: Williams & Wilkin 1961; 352.) Henderson and Reid referred to ‘epidemic fever’ and from their descriptions of clinical presentations and pathology it is likely they were differentiating between the Ricketsial disease typhus fever and the Salmonellal disease typhoid or enteric fever.
10 Gerhard WW. American Journal of the Medical Sciences. 1837; 33:289.
12 Ibid. 4.
13 Royal College of Physicians of Edinburgh. Minutes of Quarterly Meeting. 30/11/1843.
15 Henderson came from Caithness which has a distinct accent from that of Sutherland. It is surprising that McLeod, a Highlander, made this mistake.
18 Ibid. 204.
24 The word allopathy was introduced about 1850 by Hahnemann with reference to a method of cure other than his own method of homoeopathy. Later it was applied to the rational practice of medicine by graduates of orthodox medical schools. The term is now virtually obsolete. (See Skinner HA. The Origin of Medical Terms. 2nd ed. Baltimore: Williams & Wilkin 1961: 18.)
27 Royal College of Physicians of Edinburgh. Minutes of Quarterly Meeting. 1/2/1842.
28 Royal Infirmary of Edinburgh. Minutes. 9/10/1843.
31 Royal Infirmary of Edinburgh. Minutes. 15/7/1844.
32 At that time appointments to chairs in the University of Edinburgh were in the hands of the Patrons of the University. These were chosen from the Senatus Academicus and the Edinburgh Town Council.
34 Royal Infirmary of Edinburgh. Minutes. 9/5/1851.
35 MDs Abroad. Warning to the public: the alarming state of the medical profession. London: John Walker; 1851.
37 Edinburgh Medico-Chirurgical Society. Minutes. 3/12/1851.
38 Following the Medical Act of 1858 the LRCPE was conferred on graduates and non-graduates alike by examination only. Early in 1859 the College introduced the Licence without examination ‘in exceptional circumstances’ intended for a large body of men of mature age who had begun life as surgeons or apothecaries but who were well established as good practitioners; these admissions were subject to careful scrutiny and a two-thirds majority at a ballot. These were the proceedings (lasting only a year) that Christison had objected to. (See Craig WS. History of the RCPE. Edinburgh: Blackwells; 1976. And The RCPE, History and Laws. Edinburgh: RCPE 1925.)
41 Paterson R. op. cit. ref 28:231.
42 Grant A. op. cit. ref 1:451.
44 Faculty of Medicine, University of Edinburgh. Minutes. 17/6/1851.
46 Laing G. Sir James Simpson. London: Fisher Unwin; 1897; 149.
49 Gray JA. Medicine and Quackery Edinburgh Medical Journal 1888; 34:393.