

## Miscellaneous

### "FASHIONS AND FADS IN MEDICINE"\*

Fashions in medicine we have, and shall continue to have. But it requires a lens tinted with humour to recognize them and examine them with the proper degree of detachment. Dr. Robert Hutchison's recent address on this subject is so good that it deserves a much fuller reproduction than our space permits.

He begins with a remark made by a friend of his, who after gazing down at an assemblage of doctors at a British Medical Association meeting, turned to him and whispered, "The medical profession in bulk is indeed a saddening spectacle!"

Such a spectacle, Dr. Hutchison points out, is not any more obviously saddening than that presented by any other group of human beings. The cause for melancholy lies rather in the fact that as a whole the profession is far too easily swayed by fashions, a characteristic which was long ago commented on by a certain Dr. Harris, who said: "For some different modes and customs, sometimes perhaps better, sometimes worse, come into Fashion and go out again, in Physick as well as Dress; and the common herd of Physicians too easily give credit to the promises of new leaders, till that faithful Mistress Experience at last shows them safer ways to Truth."

But what is a "fashion," Dr. Hutchison asks. "It is not always easy to say, but I think one may regard transientness as being fashion's essential characteristic. Take, for instance, the matter of hats and hearts. It would not be correct to say that it is the fashion for women to wear hats in England, for I suppose women have worn hats here ever since the Stone Age. On the other hand, it would be quite exact to speak of its being now the fashion to wear what I believe are called *cloche* hats. So in the case of hearts. It would not be accurate to say that it is the fashion to treat heart disease with digitalis, for that remedy has now been in use for close upon a century and a half. But it would be true, or perhaps it would have been true before the war, to say that it is the fashion to send cases of heart disease to Nauheim. Time, therefore, is the essence of the matter."

Their origin is still another question, and a more difficult one to answer. In some cases, however, they may arise out of fads, and the difference between the two is that "a fad is essentially an individual thing; a crotchet or favourite idea held, often independently of evidence, by a single person or by a small group of persons. But sometimes the bees in the bonnets swarm, and then we get a fashion. A fashion, then, may be regarded as an epidemic fad. But in order that a faddist may infect others and make his fad epidemic he must be a person of some importance. You or I might wear any bizarre kind of waistcoat we pleased and no one would take any notice, but if the Prince of Wales, for instance, appears in America in an unusual garment the fashion spreads like wildfire throughout the States. It is very probable, I think, that Bishop Berkeley's tar water caught on as it did largely because he was a bishop; had he been a mere curate he would have been left to drink it alone.

It would be easy, though indiscreet, to mention contemporary examples of eminent fad-carriers who have infected large sections of the profession, and so produced fashions, but everyone will be able to think of such instances for himself.

Fads themselves may be congenital or acquired. "To parody a familiar quotation, some are born faddy, some achieve faddery, whilst some have it thrust upon them. The congenital faddist... is born with a kink in the brain—an optimist rather than a pessimist, credulous rather than sceptical, lacking in humour, judgment, and common sense. To quote the late Dr. Mercier, 'the faddist is constitutionally incapable of weighing evidence, of suspending his judgment, or of entertaining doubts,' and as Macaulay said, 'he is utterly lacking in the faculty by which a demonstrated truth is distinguished from a plausible supposition.'

"Others achieve faddery, and there are several ways in which this may be done: through specialism is one. The man whose attention is confined to one disease is very apt to become faddy about it and to see it everywhere. . . . Tuberculosis officers, for example, are prone to find every lung 'suspicious'."

"Finally, some have faddery thrust upon them by their teachers. Those of us who have the

\* Robert Hutchison, M.D., *Brit. Med. Jour.*, May 30, 1925.

duty of training the rising generation of doctors have a great responsibility in this respect. We must not insemminate the virgin minds of the young with the tares of our own fads. . . . It is always well, before handing the cup of knowledge to the young, to wait until the froth has settled."

Once they get started, however, one can see how they keep going. The chief factor is the herd instinct, the desire to be in the swim, to be "up to date." Further, the public demand for a treatment that has become fashionable, helps to keep it alive. "There is no doubt, for example, that the public, or at least the more educated part of it, often demands from the doctor such methods of treatment as vaccines or psycho-analysis or whatever may be the *dernier cri*, whether his better judgment approves them or no. Fashions are also maintained by the cures which they effect at the outset of their career, for there can be no doubt that every fashion does effect some cures. It does so, we know, through the power of faith and suggestion, which is the meaning of Trousseau's well known advice to a patient, 'Take this *while it is still curing*.' But by and by when the novelty has worn off, the cures cease."

It would be a mistake to take these things too seriously, however. The history of medicine is full of the growth and decline of fashions, "and as individuals we rise on stepping-stones of our dead fads to higher things; fashions and fads do not do much harm to the health of patients, whatever they may do to their pockets, for few of them are really dangerous. . . . It may even be maintained that the existence of faddists is the price we pay for individual enterprise, and that as a matter of fact, many pioneers in medicine—Jenner, Semmelweiss and Lister, for example, to mention no others—have been denounced by their contemporaries as cranks." Faddism may be regarded as a rough way of ascertaining the truth by the method of trial and error, and on the whole there is "something in" most fashions. Still, the profession may suffer to a certain extent from the pursuing of fashions. "It is bad enough that the saying 'doctors differ' should have become a proverb. But it is worse still that we should exhibit such a collective variability in our views and practice from year to year; . . . that to-day we should seek to cure all manner of disease by excising the ovaries; to-morrow, by removing the appendix or the teeth; one year by the injection of sea-water, another by the administration of sour milk, or by the application of violet rays. . . ."

Fortunately for medicine there are many with a natural immunity to fashions. Such men are sceptical rather than dogmatic, "pessimists rather than optimists, with a sense of humour and a natural instinct for truth. And the same is true of nationalities. The Scots, for instance, are, on the whole, being a humorous nation, singularly free from fads except in the sphere of religion, though a Scotch faddist, when you meet him, is, like Barrie's Scotchman "on the make," "a fearsome spectacle." America, on the other hand, is I suppose the most fad-and-fashion ridden country on the civilized globe. . . . It is interesting in this connection to speculate upon the possible effect on our liability to suffer from fashions of the admission of women in large numbers to our profession. Will the woman who has not the courage to wear last year's hat have the courage to prescribe last year's drug?

But even this spirit must not be exaggerated. On the whole, perhaps Pope's advice is best—

"Be not the last by whom the new is tried,  
Nor yet the last to lay the old aside."

"Finally," Dr. Hutchison remarks, "just as there are fashions in treatments, so there are fashions in doctors. I confess, gentlemen, that I have always been puzzled to explain what makes for success in our profession. It certainly does not seem to be a question of knowledge, nor yet of manners, nor even of character or morals. But if it is difficult to account for ordinary success, it is still more difficult to explain what makes a doctor the 'fashion' in his town or district. . . . We meet the same problem, of course, in other spheres. Why, for instance, of a thousand novels, all alike *jejune* does one become a 'best seller?' Or why does such a song as (let us say) 'Yes, we have no bananas' sweep a continent, when a hundred others with equally foolish words and no less catchy an air, drop still-born from the lips of the music-hall comedian? 'Sir,' said Dr. Johnson, 'it is in vain to try to explain the inscrutable.'

" . . . One should not envy the fashionable doctor, rather should one wonder at him. He leads a life of slavery, even though, as a wag said, it is slavery on the guinea coast; and, circumstanced as he is, good and thorough work becomes impossible. His position, too, on a pinnacle is always precarious. He has, it is true, his little day, but he is apt to wake up one morning to find that his worshippers have stampeded *en masse* overnight to some newer shrine of the fickle goddess Fashion."