Sir Andrew Macphail: physician, philosopher, founding editor of CMAJ

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Sir Andrew Macphail, described shortly after his death in 1938 as "the most eminent Canadian literary figure of his generation" has been relegated to undeserved obscurity by contemporary Canada. More surprising still is his neglect by the medical profession. In the years separating the fame of Osler from that of Banting and Best, Macphail, as founding editor of the Canadian Medical Association Journal, was surely one of Canada's most widely known physicians. His books and essays were commented upon in newspapers and periodicals not only in Canada, but in Great Britain and the United States as well. He was in many respects a 20th century renaissance man, having been at various times a schoolteacher, journalist, physician, playwright, editor, soldier, author and professor. Such a remarkable career did not pass unnoticed by his contemporaries. In recognition of his wartime service he was knighted in 1918, while his intellectual achievements were rewarded by membership in the Royal Society of Canada, an honorary doctorate from McGill, the Quebec government prize for literature in 1928 and the prestigious Lorne Pierce medal of the Royal Society of Canada for outstanding contributions to literature in 1930. In view of these accomplishments, the following essay briefly reviews Macphail's career and his contributions to both Canadian literature and the medical profession.

John Andrew Macphail was born at Orwell, Prince Edward Island in 1864. It was here on the family farm that many of his later ideas — a preference for rural rather than urban life, a respect for thrift and manual labour and an absolute insistence on the responsibility of the individual for his own welfare — took root. Here, too, his fascination with the Bible was encouraged at the local Church of Scotland and he began his first explorations into literature with the works of Swift, Macaulay and Shakespeare. Despite his later affection for Orwell, however, he soon realised that "the school was the open door of escape" and in 1880 accepted a scholarship to Prince of Wales College.

Macphail spent 2 years at the college studying languages, mathematics and infantry foot-drill before accepting a teaching appointment at the Fanning Grammar School in Malpeque. He seems to have viewed the teacher primarily as a disciplinarian whose role was to ensure that natural aptitude advanced while those with less ability abandoned futile academic pursuits. Two years of such work left him thoroughly bored but with sufficient savings to continue his education. It was in the fall of 1885 that Macphail began his lifelong association with McGill University.

Danger of reading

During his undergraduate years, formal studies were often neglected in favour of voracious reading. Arnold, Ruskin, Bagehot and Pater were among his favourites, and Macphail soon discovered that "the danger of reading is that it engenders the desire to write." He wrote frequent reviews and articles for the Montreal Gazette and became the accredited Chicago Times correspondent. Though this compulsion to write consigned him to "the large middle average" of his class, he received a Bachelor of Arts in 1888 and 3 years later — despite the fact that, as he phrased it, "even my professional studies were perfiquity" — a medical degree.

Armed with $1200 saved from his journalistic efforts and a reporting contract from an American newspaper syndicate, Macphail embarked on a trip around the world. Late in 1891 he arrived in England to work at the London Hospital. A year later, "a lean and broken wretch", he received the membership of the Royal College of Surgeons and the Licentiate of the Royal College of Physicians. Returning to Montreal he was appointed professor of the diseases of children at Bishop's Medical College in 1893 and in 1895 became a consulting pathologist at the Western and Verdun hospitals. These appointments, combined with private practice, attracted Macphail's full attention for almost a decade.

While at Malpeque, Macphail had resolved, despite his strong interest in philosophy, to become a physician rather than a minister. In his own mind the alternatives were less distinct than might appear for as he later wrote "religion and medicine have arisen out of the same protoplasm." Indeed, medicine was a profession devoted entirely to the selfless service of man the reward for which he believed was personal salvation. Throughout his professional life Macphail never ceased to emphasize this moral dimension to the physician's career.

If the practitioner held a spiritual trust, his practice, medicine, was itself essentially a spiritual discipline. According to Macphail, the "controversy about evolution was the principal event of the 19th century." Science had confronted religion with postulates incompatible with traditional belief; it was only after the appearance of Hegel and a new school of German idealism that evolution and natural selection were reconciled with the concept of an intelligent creator. The key belief for Macphail was the notion that all men and, indeed, all natural phenomena contain "world-stuff" and are therefore
The success of an individual or a species depended on the degree to which they acted in harmony with the "world spirit", that is, with nature, which was itself a reflection of the divine.

It followed from this Hegelian viewpoint that the success of a physician depended in large measure on the degree to which he permitted nature to take its course. In fact, in most cases, patients "will recover if they are left alone." The modern emphasis on specialization and research was, therefore, at odds with the essence of medicine. This trend was particularly regrettable in the medical schools where:

in these days, when a student must be converted into a physiologist, a physicist, a chemist, a biologist, a pharmacologist and an electrician, there is no time to make a physician of him. That consumption can only come after he has gone into the world of sickness and suffering, unless his mind is so bemused, his instincts so dulled, his sympathy so blunted by the long process of education in those sciences, that he is forever excluded from the art of medicine.

Rather than esoteric specialization, the true physician relied on a sound knowledge of anatomy and an open, honest spirit. Inevitably, intellect and reason would fail where instinct alone would prevail for, in the final analysis, "medicine is less a science than an art."

It is clear, then, that Macphail's view of medicine had two important philosophical foundations. First, in a religious sense, he believed that the practice of medicine provided a means to personal salvation. Second, in broader terms, the physician's primary role was to assist nature — a reflection of the doctrine — in healing the infirm. These views were neither simplistic nor homeopathic; rather, they grew from a profound philosophical commitment to the principles of Hegelian idealism.

**Year of change**

Macphail continued his medical practice in Montreal for a dozen years in relative tranquility. But the year 1907 proved to be one of change. The first major event was his appointment to the chair of the history of medicine at McGill. This position allowed him to combine a career in medicine with the reading of philosophy and history he found so essential. Though he remained in this position until 1938, it appears that in later years his lectures were not always well attended and he himself wrote, as early as 1920, that "the business of being a professor has failed sadly." Nevertheless, the post was ideally suited to his temperament and interests.

The second significant event of 1907 was Macphail's installation as editor of the newly founded *University Magazine*, a quarterly journal of politics and literature sponsored by Dalhousie, McGill and Toronto universities. Its contributors included Rudyard Kipling, several cabinet ministers, many Canadian academics and literary figures such as Stephen Leacock and Marjorie Pickthall. Macphail believed the journal existed to give advice to government and the reading public for, while academics "merely stand and watch", it "is only a bystander who can direct a game." Macphail's own frequent articles and his strong editorial hand seldom left doubt as to the magazine's viewpoint. Unfortunately, subscriptions never exceeded the 1912 level of 5300, financial problems (despite Macphail's own generous contributions) were always present and the publisher was never entirely satisfactory. The journal stopped publication in 1919 and Macphail himself had ceased to edit 5 years earlier. Yet, as Governor General Lord Grey noted, during its time it was "the best periodical published in Canada." And while its circulation was limited in numbers, its contents were frequently quoted and reviewed in London, England, Boston, Montreal and Toronto. Though it was followed by publications such as the *Dalhousie Review* and the *Canadian Forum*, the quality of the *University Magazine* under Macphail's editorship has seldom been surpassed.

The year 1907 was important to Macphail for yet another reason: the campaign to found a journal by the Canadian Medical Association at last neared success. At the annual meeting in Montreal, Macphail argued that without a journal to express its views and record its proceedings the association would have little impact. Despite opposing views, the newly adopted constitution included a clause urging the publication of a journal. At the 1910 annual meeting the report of the executive council suggesting immediate steps to found a journal was adopted and Andrew Macphail was appointed the first editor. The *Montreal Medical Journal*, of which Macphail had been editor since 1903, was acquired by the association and the *Maritime Medical News* agreed to terminate its 22 years of publication so as to allow the new CMA publication a wider scope. With a strong editor and the elimination of some competing periodicals the journal set out to establish itself as "a medium for the expression of all that is best in Canadian medicine."

**Journal appears in 1911**

The journal appeared in 1911 but the preceding year had seen extensive effort by Macphail and other interested physicians. George Morang and Company was chosen as the publisher (possibly because he already published Macphail's *University Magazine*), the terms of acquiring the Montreal Medical Journal Co. were finalized and 900 initial subscribers were secured. Throughout 1911 Macphail gave freely of his own time and held clerical expenditures to a mere $125 monthly. Yet problems soon appeared. Most damaging was the delay in publishing the first five issues in 1912. Though Morang attempted to blame Macphail, the real difficulty arose from the publisher's poor credit and the resulting necessity of paying printing costs in advance. Legal proceedings resulted in a CMA victory but the firm's precarious finances continued to cause the journal problems. The publisher apparently appropriated subscription fees to which he was not entitled and refused to issue reprints as the expense was not mentioned in the contract. More serious was the publisher's irresponsible control of advertising. Though the contract prohibited the inclusion of advertisements which would not be appropriate for "a high class medical journal" such as the *British Medical Journal* or the *Journal of the American Medical Association*, Morang exercised an arbitrary selection. He "refused to withdraw a full-page advertisement of an alleged remedy for diabetes . . . manufactured . . . in Winnipeg, and widely advertised in the lay press." The AMA had investigated the compound and advised the CMA it was simply an aqueous solution of plant extractives.
with a small amount of sodium salicylate and sodium chloride." Apparently, because the product was advertised in the Lancet, the CMA was unable to force its exclusion.

Despite these initial difficulties, as well as a dispute with the Toronto Academy of Medicine concerning the use of Macphail's editorials which criticized their membership policies, CMAJ rapidly established itself. In 1913, for the first time, the journal showed a profit ($214.97) sufficient to liquidate the previous deficit. Subscriptions increased by 60% over the 1911 level and were now purchased by about 1/3 of Canada's 7500 physicians. Finally, Macphail was in the enviable position of having to refuse many contributions due to lack of space — a situation that suggested to the optimistic executive council that "a fortnightly or weekly" journal was indicated. Unfortunately, with the outbreak of World War I, Macphail's forceful and aggressive editorship came to an end. Yet in the first half-decade of its existence he had guided the journal through a variety of difficulties to which a less experienced editor might have succumbed.

In addition to his extensive commitment to editing and teaching, Macphail's volume of publication before 1914 was prolific and varied. He was throughout his career essentially an essayist, a literary role to which his strong personality was ideally suited. One critic noted that his "prose glittered like the bayonets of an army on the march", while his close friend Stephen Leacock described his style by noting that Macphail "loved an epigram." His reputation was established by the three volumes of essays he published between 1905 and 1910. They dealt with contemporary religion, politics and social thought, and while many of the pieces had originally appeared in the University Magazine, as collections they were acclaimed in both Britain and America. In this period as well, Macphail tried his hand at fiction. In 1906 he published a sweeping historical romance set in Cromwellian England, more notable for its morality than its literary merit. Eight years later a play, set on the eve of the Great War, appeared and was quite deservedly ignored. Of greater merit was "The Book of Sorrows", a collection of melancholy pieces including poems by Macphail and John McCrae assembled slowly after the death of his wife in 1902.

Macphail spent the war years in Europe with the Sixth Field Ambulance and served with distinction at a number of battles including Vimy Ridge. When he returned in 1918 at the age of 54, it was to a world with which he no longer seemed at ease. On occasion he was still very capable of marshalling his polemical literary talent. For example, his history of the Canadian Medical Services during the war appeared in 1925 and, as a result of its critical view of both the minister of militia and the surgeon general, caused a major controversy in political and military circles. Similarly, his harsh appraisal of several leading figures from the war, including Lawrence of Arabia, was a sensation on both sides of the Atlantic. Indeed, the London Mercury labelled the book "the most devastating review published in the last hundred years.

With the important exception of these two works, however, on his return from France Macphail's days as outspoken essayist and editor were over. In 1931 he published an historical account of religion in Scotland and in 1939, a year after his death, his valuable autobiography, "The Master's Wife", was privately printed in Montreal. Except for a well-publicized trip to Russia in 1935, his time after the war was largely spent in Montreal teaching medical history or in Orwell writing and musing.

Much of his musings seem to have focussed on the decline of western civilization after the Great War. "The world does seem different," he complained to a friend in 1926. "A great epoch has as usual ended in disaster." Universities were becoming Americanized and technical; literary standards declined; the British Empire — an institution dear to Macphail — was "crashing into the abyss of chaos"; economic liberalism was in disrepute, and democracy, as he had always predicted, had proved itself unable to deal with modern political complexities.

With his values obsolete and his society apparently decaying, he concluded: "The social fabric is falling. The old are left in gloomy isolation." Yet Macphail is more fortunate than many of his generation. For his contributions to Canadian literature and to the medical profession, history will save him from the isolation he so disliked.

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North West River, Happy Valley and later, at Churchill Falls. Major nursing stations were established at Nain, Hopedale, Makkovik, Cartwright, Mary's Harbour, Forteau, Flower's Cove, Port Saunders, Roddickton, Conche and Harbour Deep. During 1967, a new regional hospital was completed at St. Anthony with facilities for carrying out most required procedures with the exception of open-heart surgery, organ transplants and isotope scans. The hospital was departmentalized with a qualified specialist at the head of each department. At the same time, the secondary centres at Happy Valley and North West River developed so that Happy Valley became the community hospital for the Goose Bay air base and North West River the subregional centre for northern Labrador.

It is quite obvious that one of the greatest problems in this area was one of logistics because of the lack of roads and communications. Therefore it became mandatory that we establish our own system of communications and transportation. This was done by placing radio-telephones in each of our stations, with master units at St. Anthony and North West River, and developing a system of air ambulances for transporting patients to and from hospital as well as staff to their posts and staff to outlying areas for clinics. An integrated system for providing health care was thus established, which is unique and, I believe, second to none in remote areas of the world.

The first aircraft was provided for us on a full time basis in 1955. It was a de Havilland Beaver, on floats in the summer and on wheels and skis in the winter. We are fortunate in having so many ponds and harbours suitable for the landing of bush-type aircraft available in all locations where people are living. We later changed our aircraft to Turbo Beavers and we now have one stationed at St. Anthony and one at North West River in Labrador, supplemented by a twin-engined IFR machine located at the airstrip at St. Anthony and operating between the airports mainly at Churchill Falls, Goose Bay, St. Anthony, Deer Lake, Gander and St. John's. We have now built up thousands of flying hours of experience on various types of aircraft and feel that our unique combination of the use of aircraft for emergency ambulance service with air transport of hospital personnel to and from their stations is ideal.

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