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The tradition of the gold-headed cane

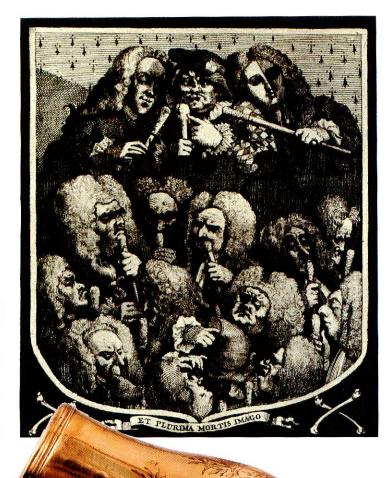


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Mark E. Silverman, MD, FRCP

The author (A Ω A, Emory University, 1983) is emeritus professor of Medicine (Cardiology) at Emory University School of Medicine, and chief of Cardiology at the Fuqua Heart Center at Piedmont Hospital in Atlanta.

"The Company of Undertakers" by William Hogarth, 1736. Caricature of twelve physicians consulting on the contents of a urinal. The handles of their canes contain a vinaigrette for neutralizing foul odors. The motto reads: "And many an image of death."

Courtesy of the author.

I had passed through so many erudite hands, and had been present at so many grave consultations, that the language of the oration was familiar to me... it was not till after the acquisition of my head that I became conscious of existence, and capable of observation.

William Macmichael, The Gold-Headed Cane 1pp2,4

he passing on of a gold-headed cane from an older to a younger physician as a sign of high regard and affection became a common practice in the eighteenth century.^{2,3} This tradition was imaginatively captured in *The Gold-Headed Cane*, written in 1827 by William Macmichael.^{1,4} Through nine editions, the book has acquired an elevated status in medicine, and the presentation of a gold-headed cane by a number of schools and societies has become a symbol of honor.⁵

The origin of the custom of a physician using a cane is uncertain, perhaps tracing back to the mythical healing staff of Asclepius. In earlier times, a physician's cane also served a functional purpose. Its head was hollow and perforated at the top, and contained an aromatic or vinaigrette preparation to be sniffed by the physician while visiting the sick as protection from contagion and for neutralizing foul odors.^{2,3,6,7}

On entering, the physician might strike the cane upon the floor before applying the knob to his nostrils, a dramatic entrance that impressed his audience. A favorite preparation was "the vinegar of the four thieves," originally concocted in Marseilles in 1720 and 1721 by the plunderers of dead bodies to protect them from the plague. The perfume of the civet cat and the pomander (amber) were also favored.^{2,8}

During the flowering of medical knowledge in the

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Enlightenment in the late seventeenth and early eighteenth centuries, physicians in London enjoyed a life of prosperity and influence as elite members of society. A cane, topped by a flashy knob of gold, or sometimes silver or ivory, served as the profession's badge and was an essential dress accessory, much as the stethoscope is today. The gentleman's fashion of the time also decreed a velvet or satin coat, large wig, three-cornered hat, buckskin breeches, lace ruffles, stockings, buckled shoes, gloves, and a fancy carriage drawn by from two to six horses. A fur muff was worn in winter to maintain a warm, delicate touch when feeling the pulse. Contemporary portraits of the time by Thomas Gainsborough and John Opie, and the caricatures made by William Hogarth and Thomas Rowlandson display the cane as a way of identifying or ridiculing physicians and quacks. 3,8,10

William Macmichael's The Gold-Headed Cane

In Macmichael's quaint book, the cane itself recounts its observations as it journeys from the hand of one eminent physician to the next, until it is permanently deposited in the closet of the Royal College of Physicians. At the beginning of the book, the cane laments:

When I was deposited in a corner closet of the Library, on the 24th of June, 1825 ... with the observation that I was no longer to be carried about, but to be kept amongst the reliques of that learned body, it was impossible to avoid secretly lamenting the obscurity which was henceforth to be my lot. Formerly the entrée of palaces had been open to me; I had been freely admitted into the houses of the great and the rich; but now I was doomed to darkness, and condemned to occupy the corner of a library. $^{\rm 1pp1-2}$

The book continues through five short chapters as the cane reminisces about its six "well-heeled and well-wheeled" owners: John Radcliffe, Richard Mead, Anthony Askew, William Pitcairn, David Pitcairn, and Matthew Baillie. Although rich in historical detail about eighteenth-century society and the virtues and personalities of the six physicians and their illustrious friends, the cane's perspective is naturally a narrow one. The book fails to provide any consistent insight into the practice of medicine at a time when illness was attributed to a combination of poor habits of diet, bowels, exercise, sex, and alcohol, and various bodily imbalances treated by purging, bleeding, and medication.9

The owners of the gold-headed cane

The original owner of the cane, **John Radcliffe** (1652–1714), was also the most colorful. Though unpublished, he quickly rose to the top of the profession because of his wit, skills of observation, and judgment. Radcliffe could be uncouth

and abusive, even to patients, and was generally overbearing and insolent to other physicians. Despite his rude manners, he was much sought after because his treatment was often successful; he emphasized fresh air, personal hygiene, and common sense, although these were not always in accord with popular teaching. His talent for prognosis inspired confidence. It was said that he was feared as a man, trusted as a doctor. A heavy drinker, as was then the mode, he was sometimes unwilling to leave taverns when summoned. On one occasion, a soldier had to deliver Radcliffe by force to the soldier's sick colonel. Because of his intemperate comments and irregular responses, Radcliffe was in and out of favor with royalty. In 1694, he was blamed for the death of Queen Mary, but was later exonerated when it was found that he was called in only when she was close to death from smallpox. King William III summoned him in 1699 because of swollen ankles. He asked Radcliffe: "Doctor, what think you of these?" Radcliffe tartly replied, "I would not have your Majesty's two legs for your three kingdoms." 11p133 He refused to see Queen Anne, whose ailments he commented were due to nothing but the vapors. Later, when she was seriously ill, Radcliffe refused to attend, saying he had just taken a physic. He was single and extraordinarily prosperous, and at his death left considerable sums to Oxford University—resulting in the Radcliffe Infirmary, Observatory, and Library-as well as to other charities that have perpetuated his name. Sir William Osler commented about Radcliffe: "One lesson learned from his life is that if you do not write, make money; and, after you finish, leave it to the Johns Hopkins Trust." 13p725

Richard Mead (1673-1754), the second owner of the cane, was a favorite of Radcliffe, inheriting his practice and moving into his house. 1,12 His character was the opposite to that of his mentor; he was kind, always available for consultation, generous to the poor, and a conspicuous patron to young artists and students. Mead was schooled in the classics and philosophy and had studied under Hermann Boerhaave, as well as at Padua. A scholarly man of consummate taste. Mead was a fervent collector and bibliomaniac whose mansion became an open museum of rare books, coins, statues, and objects of antiquity. He published several important articles, including "Mechanical Account of Poisons," was a member of the Royal Society, and gave the Harveian Oration of the Royal College of Physicians in 1723. Mead was physician to George I and George II and consulted at the time of the fatal illness of Queen Anne; he alone had the tact and courage to tell her of her fatal prognosis. In 1719, his advice was sought by the government about the control of plague. His "A Short Discourse Concerning Pestilential Contagion and the Methods to be Used to Prevent It" recognized that plague was a "contagious distemper" and recommended isolation of the sick and inoculation, early public health measures. Mead was regarded as noble and princely by his colleagues and was widely admired. His friends included Isaac Newton, Hans Sloane, Alexander

Pope, and other literary lions of the day. It was said that Mead enjoyed "the most brilliant career of professional and literary reputation, of personal honour, of wealth, and of notoriety, which ever fell in combination to the lot of any medical man in any age or country." 12p162 A monument in his honor stands in Westminister Abbey.

Anthony Askew (1722–1774) next held the cane. I.14 After schooling in Cambridge, Leyden, and Paris, he settled in London, where he soon became a protégé of Richard Mead and an ardent bibliophile in his own right. Askew was well-versed in Greek and Latin and was considered to be a scholar of refined taste; he enjoyed the companionship of the literary elite of the time. His book collection became so extensive that it threatened to overflow from his house into Queen's Square. He exhibited his rare books with great delight, although he did not allow others to touch his treasures. Askew was the Harveian orator and was active in the Royal Society and the Royal College of Physicians. Comments

and the Royal College of Physicians. Commer about Askew by the cane are notably brief. Instead, the chapter is mostly devoted to the cane's observations of William Heberden, a friend of Askew best known for his original description of angina pectoris.

The cane then passed to William Pitcairn (1711-1791), who had also studied under Hermann Boerhaave in Leyden.^{1,15} Pitcairn became a physician at St. Bartholomew's Hospital, where he was best known for advocating the use of opium in large doses for the treatment of fevers. He was an accomplished botanist whose five acres of gardens were much admired. A genus of bromeliads, Pitcairnia, is named after him. Though he did not publish, he was of great service to the Royal College of Physicians and served as its president for ten years, the only possessor of the cane who became president.

David Pitcairn (1749–1809) was the nephew of William Pitcairn, and the cane was bequeathed to him by his uncle. 1.16 He was a gentle, handsome, and dignified physician who gave great service to his patients. It was said that "No medical man, indeed, of his eminence in London, perhaps, ever exercised his profession to such a degree gratuitously." 16p354 He was highly regarded

for his original observations, and he was probably the first to associate rheumatism with heart disease although he did not publish this observation. He was sought after for advice on difficult illnesses and his candid opinions. Pitcairn recognized the limitations of medications saying,

The last thing a physician learns, in the course of his experience, is to know when to do nothing, but quietly to wait and allow nature and time to have fair play in checking the progress of disease and gradually restoring the strength and health of the patient. ^{16p354}

He passed on the cane to **Matthew Baillie**, his close friend and physician. Baillie (1761–1823) was the last to own the gold-headed cane and is the one best known for his academic contributions. John and William Hunter, pioneers in surgery and obstetrics, were his uncles, and Baillie assisted

William Hunter in his popular anatomy school. In 1793, he published *The Morbid Anatomy of Some of the Most Important Parts of the Human Body*, the first English contribution to correlate clinical observations with pathology. He noted

It is very seldom that diseases are found pure and unmixed ... there is almost an endless variety of constitutions. The treatment must be adapted to this mixture and variety, in order to be as successful as circumstances will permit; and this allows of a very wide field for the exercise of good common sense on the part of the physician. 12p244

This book established his reputation and enlarged his practice. Baillie was well-known for his clarity of explanation, whether to an anatomy class or to a patient, and his willingness to listen carefully. He advocated the practice of conveying fuller explanations of disease to patients. He understood the limitations of his treatment saving, "I know better, perhaps, than another man, from my knowledge of anatomy, how to discover a disease, but when I have done so, I do not know better how to cure it." 12p242 Baillie was a generous man about whom it was said that "His purse and his personal services were always at the command of those who could prefer a proper claim to them." 12p247 His practice was extremely lucrative and all consuming, and he was physician to King

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George III and other royalty. In addition to giving the major lectures, he bequeathed his anatomical collections and considerable funds to the Royal College of Physicians. A bust in his honor can be found at Westminister Abbey.

The destiny of the gold-headed cane

At the conclusion of *The Gold-Headed Cane*, the cane is finally deposited at the Royal College of Physicians after 134 years in service from 1689 to 1823. In 1825, Baillie's widow gave it to the president of the Royal College, Sir Henry Halford, and it became a treasured possession of the Royal College, where it is now proudly on display in a glass case—no longer forgotten or hidden in the closet.

Its gold handle is unusual—crutch-shaped, rather than rounded, and measuring four inches across.^{3,10} The arms of Radcliffe, Mead, Askew, Pitcairn, and Baillie are inscribed on its top and sides. The stick is a gold brown rattan, known as malacca, and the cane is forty inches long.⁵

William Osler and the gold-headed cane

The honoring of a historic cane is not limited to the Royal College. The College of Physicians in Pennsylvania has a collection of seven gold-headed and six silver-headed canes, one of which belonged to Benjamin Rush (1749–1813) and one that was given by William Osler (an active member of the College of Physicians).³

Osler wrote the preface to the 1915 fourth edition of The Gold-Headed Cane, and gave a symposium about its holders to the students at Johns Hopkins. 13,17 Harvey Cushing comments in The Life of Sir William Osler, that "Osler himself in his make-up was a sort of twentieth century edition of these six men rolled into one-though with less of Radcliffe perhaps than of the others; and of Richard Mead more." 13pp725-26 Though biased by exposure to an unrepresentative elite sample, the cane does provide a composite accounting of many of the ideal characteristics of a physician: scholarliness, precision and accuracy of thought, skillful interrogation of the patient, sound judgment, confidence in prognosis, a soothing presence, willingness to listen and explain, felicity of expression, a candid opinion, generosity, compassion, sympathy, a cheerful disposition, discretion, tolerance, humor, practical and wide-ranging knowledge, a taste for fine arts and travel, bibliomania, a talent for encouraging others to do their best, a zeal for the profession, charity toward colleagues, interesting conversation, motivation to help humanity, integrity, and high

That these sterling virtues are not necessarily inherited or passed down was also observed by the cane. In an 1884 addition to *The Gold-Headed Cane* by William Munk, the cane comments:

On emerging from my seclusion in the corner of the library, I was bewildered with the changes that had taken place in

men and manners . . . The conventional dress of the physician with which I was so familiar, was no longer to be seen; and I missed much of that staidness of demeanor, calm self-possession and scrupulously polite bearing to which I had been so long accustomed. I know not whether the change that has been wrought is to be approved or deplored; but I have been long convinced that change and improvement are not synonymous terms . . . But I must not forget that my subject is not the physician of the present day, but the physician of the past—of a race and type of men rapidly disappearing from amongst us, . . . what in my judgment constitutes the nearest approach to perfection of the medical character that the world has yet witnessed. 2pp88–89,10

Because of the charming and enduring appeal of the book, its unreserved admiration for the highest qualities of a physician, and the hoary tradition that it represents, the practice of the presentation of a gold-headed cane as a distinguished award given to an outstanding student or physician (as well as others) endures in North America. Surprisingly, there is no gold-headed cane award in Great Britain.

Medical organizations that present a gold-headed cane	Nonmedical organizations that present a gold-headed cane
American Society for Investigative Pathology Dalhousie University Faculty of Medicine, Nova Scotia (medical humanities) University of California, San Francisco, School of Medicine (to a senior medical student) University of Colorado School of Medicine (to a senior student and occasional faculty member) Taylor-Jones-Haskell County (Texas) Medical Society Tarrant County (Texas) Medical Society	Montreal Port Authority Boston Post newspaper (to the oldest resident of Falmouth, Maine)

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The author's address is:

1968 Peachtree Road, NW Atlanta, Georgia 30309

E-mail: marksil@comcast.net

"Cartoonists Take Up Smoking"

"Cartoonists Take Up Smoking," an exhibition curated by Alan Blum, MD (A Ω A, Emory University, 1985) for the National Museum of Health and Medicine in Washington, DC (www.nmhm.washingtondcmuseum/news/cartoon.html), has been extended through March 2007. The exhibition retraces the modern era of anti-smoking advocacy as seen through the eyes of the nation's newspaper editorial cartoonists. More than sixty original acerbic artworks are on view, supplemented by over

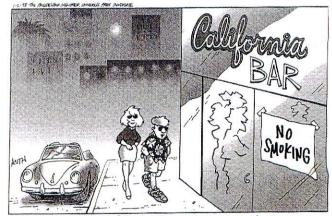
one hundred items, from medical journals with cigarette advertisements to front-page headlines that inspired the cartoons.

A traveling version of the exhibition has been developed for display in medical schools, museums, and libraries. Dr. Blum (ablum@cchs.ua.edu), professor and endowed chair in Family Medicine at the University of Alabama, Tuscaloosa, founded and directs the university's Center for the Study of Tobacco and Society.



"I CAN'T SAY THIS STRONGLY ENOUGH, MR. MORSON... IF YOUR CLEARETS ARE MADE BY ANYBODY OTHER THAN PHILIP MORRIS OR REYNOLDS INDUSTRIES YOU'VE GOT TO STOP SMOKING!"

Cartoon by Wayne Stayskal from the *Chicago Tribune* of 1981, in response to the AMA House of Delegates having voted against a resolution proposed by the residents' section to divest tobacco stocks from its retirement plan. Used by permission of Wayne Stayskal.



"LET'S GO INSIDE AND GET A BREATH OF FRESH AIR ..."

Cartoon by Tony Auth originally published in the *Philadelphia Inquirer*, January 2, 1998, in reaction to the landmark California measure to ban smoking in all bars and restaurants. Used by permission of Tony Auth.