IMPRESSIONS OF A SHORT TOUR IN SOUTH AFRICA

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I came to South Africa at the invitation of the South African Medical Association to attend the Medical Congress in Durban and to show something of the type of display to be found at the Wellcome Museum of Medical Science in London.

A few words on the organization behind the Museum may not be out of place here, for the story is an unusual one. It began in 1880, when two young Americans set up in England a manufacturing pharmaceutical firm under the style of Burroughs Wellcome & Co. This venture quickly prospered and, on the early death of Burroughs, became the sole property of the surviving partner, Henry Wellcome. From the start Wellcome devoted a part of the profits earned by his business to research and he soon showed a remarkable flair for picking for this work men of the highest calibre. Among the many workers in the Wellcome Research Laboratories who have made outstanding contributions to medical problems the names of Henry Dale, Wenyon, and Hoare, are known and respected internationally.

As his affairs prospered and became established, Wellcome developed his personal interest in the history of medicine and pharmacy and archaeology. He succeeded in collecting a library of books and medical incunabula which is unrivalled, and material illustrating medical and pharmacological practice throughout the ages, which also is unique. Eventually he combined the manufacturing firm of Burroughs Wellcome with its subsidiaries and the Museums, Library and Tropical Medicine Laboratory referred to above, into one organization, the Wellcome Foundation Ltd. On his death all the shares in the Foundation devolved on a Trust, and when the Foundation has met the costs of the pharmaceutical manufacturing firms and the costs of maintaining the Museums, the Library and the Tropical Medicine Laboratory, all the money that remains is paid to the Trust. That body distributes what it gets in the way of dividends as gifts to further research into medical and allied problems in accordance with the terms of Wellcome's will.

The Wellcome Museum of Medical Science has been in existence for 44 years. It presents written accounts of diseases at postgraduate level and supplements the script with visual aids such as photographs, photomicrographs, X-rays and charts as well as pathological and entomological specimens. Many thousands of doctors and medical auxilliaries visit the Museum annually.

The particular display chosen for the Medical Congress was a duplicate of the section on Bilharziasis. This collection was

9 November 1957

selected for a variety of reasons. The condition is important in the Union, as well as other parts of Africa, South America, the Middle East and the Far East, affecting a total of some 120 million of the world's population. Notable contributions towards the problems of aetiology, epidemiology and control have been made and are still being made by workers in the Union and the Rhodesias. While the broad principles that underlie the successful control of this infestation are well known, the practical difficulties in their application are such that bilharziasis remains one of the major unsolved health problems of the areas in which it is rife. It was with interest that I heard both at the Congress and afterwards the views of those who are dealing with this problem in the Union Health Department, and of workers in laboratories under the control of the South African Institute for Medical Research. the Council for Scientific and Industrial Research, and the various South African medical schools. Later I was able to visit a field control experiment at Nelspruit, and saw some of the practical difficulties that arise in an experimental control area where work has been in progress for some time.

That 'doctors differ' is an oft quoted truism, and during my stay in the Union I heard many different views on this particular problem. This in itself is, of course, as immaterial as it is, perhaps, inevitable. What is most material and most evident, was the enthusiasm and drive I found in all I met and their refusal to be put off by difficulties and temporary failure. I should like to say here that it is this spirit of enthusiasm that has struck me so forcibly in the many and varied medical activities that I have been privileged to see during my visit to South Africa.

In an article like this it is not possible to comment on all I saw during my 6 weeks' stay; the attempt would probably only be boring to the reader. I would like, however, to refer briefly to a few of the activities I have seen which have been of particular personal interest to me. First among these are the arrangements for medical education in the five medical schools in South Africa. The Natal University Medical Faculty is concerned at present with the training of Native and Coloured students. Here the curriculum followed presents certain unusual features that make this experiment one of considerable interest. The thought and care and spirit of high endeavour with which the staff at the Durban Medical School have approached their task are all immediately apparent to the visitor. The standards of the first graduates from this school will be observed by many with great interest, for it is possible that the medical faculty of Natal University have pioneered an approach to medical education that other schools in other countries will want to copy. Two of the remaining schools admit both Europeans and Natives, and two are restricted to Europeans only. While these are on orthodox lines, in all of them the visitor meets with the same spirit of energy and drive already referred to. To be a medical student in South Africa must be a most stimulating and, perhaps, exhausting experience!

The Union health authorities face a formidable task in providing for the large Native population efficient medical services for which the direct financial contribution paid by the Native is negligible. I had two interesting and informative visits to a large Native hospital just outside Johannesburg. This must be a model for work of this kind. Cleanliness, order and efficiency were everywhere apparent and this, in a hospital that trains its own Native nursing staff, reaches a degree that in a wide experience of hospitals of this type I have never seen equalled. There is here a wealth of clinical material which makes one envy the staff and the students who attend as housemen from the near-by Witwatersrand medical school.

At Westford I saw in operation a scheme for the control of leprosy. South Africa employs a technique that is, I think, unique inasmuch as leprosy is a compulsory notifiable disease. I was assured that, contrary to what is held elsewhere, this actually works and, in practice, the number of 'hidden cases' is believed to be small. I felt that a possible contributory factor to this is the success that attends the scheme of treatment the Superintendent employs for his early cases. He is achieving results that compare most favourably with those I have seen in other regions.

Through the courtesy of the Director and the Deputy Director I was able to see something of the wide scope of the work carried out by the staff of the South African Institute for Medical Research. Here valuable contributions are being made towards the solution of problems of nutrition, of cancer incidence and of cardiac and circulatory failure, to mention only those subjects in which I happen myself to be specially interested.

Until one actually sees this country it is hard to appreciate the vast spaces of the Union. The problem of bringing hygiene and reasonable curative services to the scattered European farmers and the African population in the kraals and reserves poses many difficulties. The need for many trained European and Native medical auxiliaries supported by a scheme of health education by radio, cinema and school services soon becomes apparent. Such may be already in existence or planned for the near future; if so, and if tackled with the same 'vim' that is apparent in the large urban centres in which perforce I spent most of my time, success would seem to be assured.

I leave South Africa hoping that I shall be able to meet in London at the Wellcome Museum of Medical Science some of those who have shown me so much kindness and consideration during my visit to this energetic and stimulating country.