THE OPENING OF THE INSTITUTE OF OPHTHALMOLOGY, LONDON

On November 4th an event occurred which it is hoped will be of some significance in the development of British Ophthalmology — the formal opening of the Institute of Ophthalmology, a unit of the British Post-graduate Federation of the University of London.

London, of course, has been a centre of ophthalmological teaching for many years — indeed, since the founding of the School at Moorfields in 1810. For over a century it remained the principal focus of ophthalmological inspiration for the English-speaking world. As research grew more complicated, however, and demanded for its satisfaction not merely the routine of the clinic and the simple facilities of a pathological laboratory where the opthalmoscope and the microscope were sufficient equipment, but, in addition, a host of specialists — physical, physiological, biochemical and immunological — each with his elaborate equipment and all working as a team, it became apparent that if London were to, maintain its position as a centre of advancement and progress, a more co-ordinated and systematized organisation was necessary.

Some twenty years ago a move was made, largely under the inspiration of Sir John Parsons, to remedy this defect, but financial support was not forthcoming and loyalties and traditions acted as a break to radical changes. At the same time, in the years before the second World War, the development of the British Post-graduate Medical School was a harbinger of future events and it maintained a close interest with the Medical School at Moorfields.

After the war, the British Post-graduate Medical Federation was formed within the University of London and the Medical School at Moorfields was invited to join the Federation as an Institute of Ophthalmology. With a view to co-ordinating all that was best in London, Moorfields, the Central London Ophthalmic Hospital and, later, the Royal Westminster Ophthalmic Hospital, became amalgamated by an Act of Parliament. Such a combination gave scope for wide planning within the three units and it was decided that the building of the Central London Ophthalmic Hospital should be converted — not a very extensive reconstruction — into a research and teaching Institute, and that the other two hospitals should act as associated clinical units. The result, it is true, is not entirely satisfactory, for the partial divorce of lecture rooms, library, museum, routine and research laboratories from the clinical departments, is a considerable handicap. It is a handicap, however, that it is hoped to overcome as soon as the economic conditions of the country allow new medical buildings to be constructed on a large scale. In the meantime, in the spring of 1947 the practice of the Central London...
Ophthalmic Hospital began to be transferred, reconstruction work was pushed ahead and by November 4th, 1948 sufficient of the building was ready to allow a formal inauguration ceremony to be held.

The new Institute comprises a building of six floors of which the basement is given over to a cafeteria, kitchen, students' sitting rooms and cloakrooms, technicians' rooms, workshops and store-rooms. On the ground floor are the administrative offices and a department for clinical teaching and research clinics. A small orthoptic department has been retained for research purposes. The first floor houses a large department for medical illustration, equipped and staffed for photography in all branches, including fundus photography, cinematography and fundus drawing, and also contains a suite of rooms for the more elaborate types of clinical research. On the floor above are the library and museum, built up from the material available from the three parent hospitals, offices for the British Journal of Ophthalmology and Ophthalmic Literature, and a lecture hall to hold 100. Laboratories for morbid histology, bacteriology and allergy occupy the major part of the third floor. The remainder of the building is occupied by twenty-three laboratories fitted up for research in physiological optics, physiology, electro-physiology, biochemistry and radiography, with appropriate technicians' rooms, operating theatre, five animal rooms and appropriate accessories. During the present session there are 126 post-graduate students from many countries of the world, and at the time of its opening the Institute has on its staff 15 full-time research workers.

The opening ceremony was held on the afternoon of November 4th under the Chairmanship of the Earl of Rothes—Chairman of the Committee of Management of the Institute—before an audience of representatives of the University and the British Postgraduate Medical Federation, the provincial and Scottish Universities, together with many of the past and present staff of the three hospitals and the Institute. Lord Rothes briefly outlined the history of the development of the Institute and suitably welcomed the three guest speakers Sir John Parsons, Professor Alan Woods and Professor Weve—representing British, American and European ophthalmology who also gave inaugural addresses.

Sir John Parsons spoke of the two functions of the Institute. So far as teaching was concerned, the reputation of the three associated hospitals was already high, and with the greater facilities now available, it should become still higher in the future. So far as research was concerned the Institute was indeed fortunate for it had on its staff the type of men who were able and willing to do research and it also had the support of the Medical Research Council. It was quite illusory to imagine that the procurement of a building and the provision of finance could of themselves produce
original work of value: the success of research depended on the work of men with a flair for it. At the same time, an Institute of this type should only be looked upon as the first step in the right direction: co-ordination with general medicine and surgery as well as with the fundamental physical sciences was a necessity and that means an intimacy with a general hospital and university laboratories which must be topographical as well as spiritual.

Professor Alan Woods expressed his pleasure in participating in the inaugural exercises which he thought marked a new epoch in the advance of British ophthalmology. He brought with him the good wishes of American ophthalmology and particularly the congratulations of the Johns Hopkins University School of Medicine. He spoke of the great part played by Great Britain in the development of ophthalmology, and pointed out that, while the problems of clinical diagnosis and therapy were ably dealt with in the past by the large independent or semi-independent eye hospitals of Europe and America, a new type of Institute such as the present was now necessary wherein to tackle the problems of the future. The obvious clinical problems had been dealt with; the advances of the future must be solved by the co-operation of specially trained ophthalmologists with fellow scientists in a host of other fields, ophthalmic research must be co-ordinated with modern medical investigation and must be an integral part of the life of a University carried out in fellowship with colleagues in other branches of medicine and science. In extending his good wishes for the future of the Institute, the construction of which at this time of stress and reconstruction was typical of British courage, he said that anything his own School of Medicine could do to assist would be only a small acknowledgement of the debt owed by America to British ophthalmology.

Professor Weve traced the history of the development of ophthalmology in Europe, how it started two centuries ago with the surgical renaissance in France under the inspiration of Daviel, migrated after the French Revolution to Austria, revived under the stimulus of Helmholtz and v. Graefe in Germany and Donders and Snellen in Holland, and later, particularly in its optical aspects, in Scandinavia. Throughout all this time the place of England was high. In the earlier days the genius of Newton and Young was continued in clinical ophthalmology by such men as Bowman and Mackenzie, and the torch has been carried down to our own day by such men as Parsons. The two wars which have devastated Europe have not been without their influence in this development, but it was a great day not only for British ophthalmology but for world ophthalmology, that despite the ravages of war, sufficient enterprise and courage had been at hand to start an Institute of this type.
After tea and a tour of the Institute, the Lecture Hall was filled for a delightful inaugural address by Professor Woods on "Experimental Studies on the Pathogenesis and Therapy of Ocular Tuberculosis"; this will be published in a future issue of this journal. In the evening an enjoyable dinner was held at Claridge's Hotel, at which Professors Weve and Woods proposed the toast of the Institute, and Sir Stewart Duke-Elder replied.

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**CORRESPONDENCE**

**APOLOGIA PRO VITA MEA**

*To the Editorial Committee of The British Journal of Ophthalmology*

*Dear Sirs,*—On giving up the post of senior editor I wish to thank all my colleagues on the Editorial Board for their forbearance and the great kindness shown to me for so many years. And I should also like to thank those subscribers who have from time to time written me appreciative letters. To know that I had the good will of the fraternity has been a great help. It might be thought that an editor's life comes within Mr. Mantalini's definition "one demd horrid grind," but I have not found this to be the case and my journal years have been very happy ones indeed.

Sir William Osler once wrote something to the effect that it was wonderful how a bad boy may fool his fellows if he once gets to work. I believe my only editorial assets have been two in number: first, writing has always come easily to me, and in saying this I hope that I have not been unmindful of the dictum of Edward Fitzgerald, that "easy writing often makes for difficult reading"; secondly, I was early in life introduced to good English literature. In connexion with my first point I recall one of my prep. school reports in which my essays in divinity were commended, the master adding "he has a good fund of English on which to draw." Perhaps any facilities I may have shown in the concoction of annotations may be traced to this early source. With regard to my second point, the same master who praised my English essays (the less said about my efforts in Latin the better) was wont to read aloud to those of us who cared to listen, and in this way introduced me to Pickwick and The Rose and the Ring. My father also used to read out to us in the holidays and he took me through most of the Waverley Novels. Scott, Dickens and Thackeray are good foundations in English literature. And a parson's son who has to attend church twice a