

Obituary.

William Edward Fothergill.

M.A., B.Sc., M.D., C.M. (Edin.).

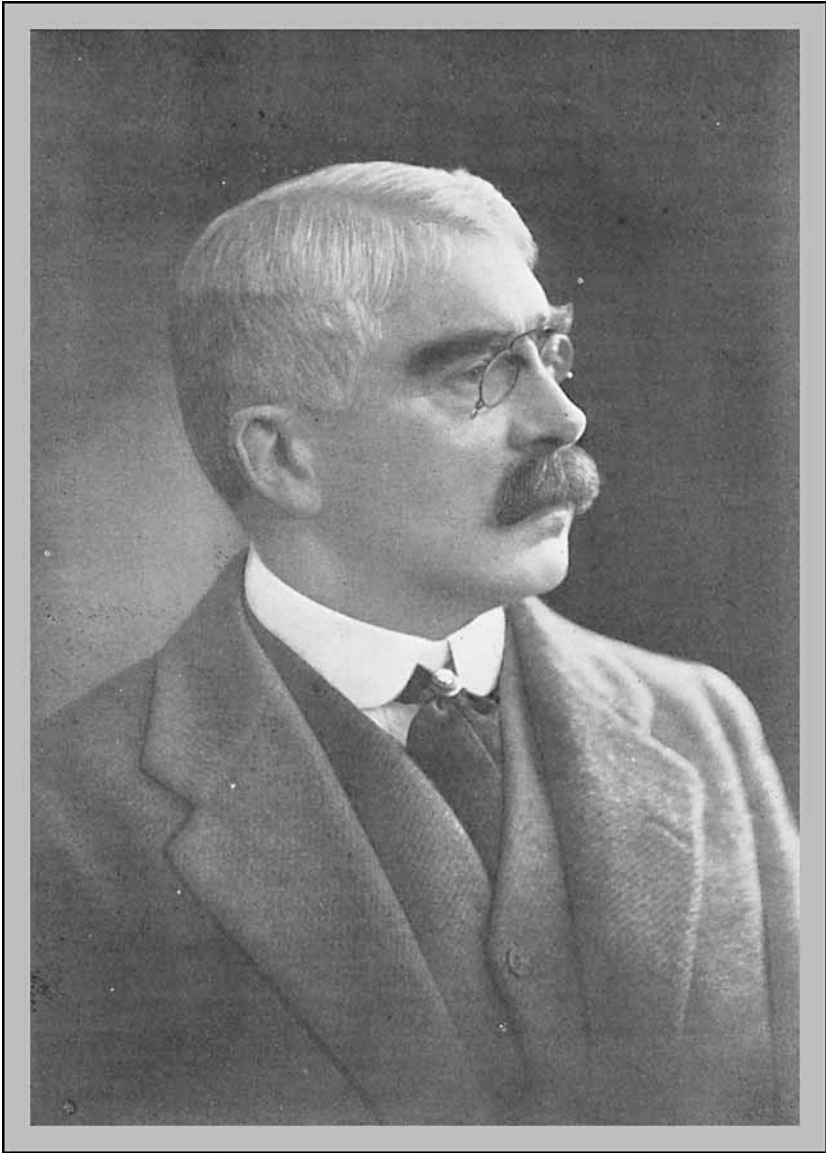
Professor of Clinical Obstetrics and Gynæcology, University of Manchester; Senior Surgeon, St. Mary's Hospitals, Manchester.

The sudden death of "Fothergill of Manchester" on November 4th, 1926, caused widespread grief and regret and a deep feeling of personal loss among all who knew him and his work. He was a man we could ill spare, for he had rare force of character and the power of making his influence felt, and it is no exaggeration to say that there is not another of his day and generation who did more to mould gynæcological opinion in this country.

William Edward Fothergill came of a fine old yeoman stock from the dales and fells of Northern England, and from a family that produced many influential members of the Society of Friends, including the eminent physician and naturalist of the eighteenth century, Dr. John Fothergill, F.R.S., whose life was written by Lettsom, the founder of the Medical Society of London, by Hartley Coleridge in his "Lives of Northern Worthies," and by Kingston Fox in "Dr. Fothergill and his friends."

William Edward was born on October 4th, 1865 in Southampton and brought up in Darlington, where his ancestor, John Fothergill, a grandson of the elder brother of Dr. John Fothergill, had settled and practised as a surgeon. He was educated at the University of Edinburgh, taking, as was then the custom more than is now, degrees in Arts (M.A. 1886) and Science (B.Sc. 1888) before proceeding to graduate in Medicine (M.B., C.M. 1st class Honours 1893). Among the many medals and prizes which fell to him during a distinguished University career, were the Buchanan Scholarship in Midwifery and Gynæcology and one given by the Edinburgh University Club of London for an Essay on "The Relation of Literature, Science and Philosophy in University Education."

After graduation, Fothergill was House Physician and Clinical Assistant to Professor Alexander R. Simpson, first in the Gynæcological Wards of the Royal Infirmary, and later at the Maternity Hospital (1893—95). He obtained his Doctorate in 1897 (with gold medal) by a thesis on "The Ultimate Fate of Placental Tissue retained *in Utero*," and the Milner-Fothergill medal for investigations upon "The Use of the Senecios in Disorders of



Menstruation." Having determined to devote himself to Obstetrics and Gynæcology and finding the prospects of advancement and of establishing a purely consultative practice in Edinburgh were unfavourable, he looked round for some other large centre with a medical school, and received sufficient encouragement to decide to take up special work in Manchester. He settled there in 1895 and, in spite of lack of influence or claims other than those of his own ability, industry and strong personality, quickly made a place for himself, and in a few years became one of the recognized and outstanding representatives of Manchester Gynæcology.

In 1896 he published his "Manual of Midwifery" which proved a popular text-book in Manchester, Edinburgh and elsewhere, reaching its fifth edition in 1922. In 1899 he obtained his first hospital appointments, being elected to the staff of the Northern Hospital for Women and Children, and in the same year being chosen as the first Director of the Clinical Laboratory at the Royal Infirmary for the equipment and organization of which he was responsible. During the six years of this service, a large amount of material passed through his hands and he thereby laid a sound foundation of general pathological knowledge on which to build his clinical experience. During this time he was also responsible for the introduction of radiological work in the Royal Infirmary. Appointed to the staff of the Southern Hospital in 1904, he became, as the result of its amalgamation, one of the staff of the St Mary's Hospitals for Women, where most of his gynæcological work was done. Three years later he was also appointed Assistant Gynæcological Surgeon to the Royal Infirmary, becoming full Surgeon in 1919. In the University he became Lecturer in Obstetrics and Gynæcology in 1901; in 1920, Professor of Systematic and in 1925, Professor of Clinical, Obstetrics and Gynæcology.

Of Fothergill's work for Manchester it is impossible for one without local knowledge to speak at first hand, though the list of hospital and university appointments he held, and the expressions of regret called forth by his death from academic bodies and professional societies, and from the social and athletic clubs of the University bear witness to his many-sided and public-spirited activities. He was an original and successful teacher, and a good friend to the student, not of the medical side alone, but of all faculties, for he threw himself whole-heartedly into the undergraduate life in the University. He served for several years as President of the Athletic Union, the Football and other clubs, and was a constant attendant at football matches and social gatherings. Familiarly, he was "Bill Fothergill," and at the service of any student that sought his help.

Fothergill's influence on British Gynæcology was a very

decided one because he held strong views and had the power of expressing them emphatically. In the first place, he did more than anyone else in this country to drive home the essential unity of Obstetrics and Gynæcology. The general surgeon who was a successful operator on the female pelvic viscera but ignorant and untrained in midwifery, and often even disdained acquaintance with it, he refused to acknowledge as anything but an amateur and unworthy of admittance to the guild and profession of gynæcologist. A thorough drill in the practice of midwifery was to him the only gateway into gynæcology* and those who tried other modes of entry did but creep and intrude and climb into the fold.

In the next place, his insistence on a pathological classification of the diseases of the female reproductive tract has been of inestimable service in improving the presentation of the subject to the student. His advocacy was largely responsible for getting rid of the old anatomical arrangement with its contracted field of vision and needless repetitions. The missionary work he did in these two directions alone, is enough to make Fothergill's influence on the conception and teaching of his subject, a remarkable one.

In his *Manual of Diseases of Women*, published in 1910, the diseases were considered in six sections, namely, (1) Errors of Development, (2) Circulatory Changes, (3) Mechanical Conditions and Injuries, (4) Infection; (5) Progressive and (6) Retrogressive Conditions. The book itself was notable both because of its arrangement and of its breadth of view, and was a highly original addition to the textbooks on the subject. It was, however, too much in advance of its time to be a great success, only one revised edition being published, and that not until 1922. It is a curious contrast and an instance of the hazards of leaving the beaten track, that this book of his maturer years should have been less successful than his *Midwifery*, which was written in his first year in Manchester and with little more experience behind it than that gained during his service in the Edinburgh Royal Maternity Hospital.

In the practice of Gynæcology, Fothergill's name will chiefly be associated with his modification and advocacy of the plastic vaginal operations for the cure of prolapse as worked out in Manchester. Donald began but Fothergill developed these procedures—as for instance; by combining anterior colporrhaphy with amputation of the cervix in one operation—and more than any other representative of that school, deserves the credit of

*“: . . . no one who has not in one way or another become a good obstetrician can ever hope to comprehend the Diseases of Women”. (Introduction to his *Manual of Diseases of Women*)

having secured a wide acceptance of its methods.* He fought for it with tongue and pen in his own strenuous way and made it his own. Those who attended the meeting of the British Congress of Obstetrics and Gynæcology at Birmingham in 1921, when the figures of the after-results from Manchester were given and Fothergill poured the vials of his scorn on those who still practised abdominal fixation-operations on the uterus, may recollect a characteristic and effective retort he made. One speaker had pleaded for the retention of uterine fixation as a useful addition to the vaginal operations, on the insecure ground that "there were other ways of killing a dog than hanging it." Fothergill seized on the phrase, and turned it against his opponent. His reply was to the effect that it was not a case of other ways of killing a dog than hanging, but of first having killed the dog and then trying to inflict further punishment on it by hanging. It is impossible to recapture the atmosphere of that meeting, but the retort was so exactly to the point and so wittily expressed that it was noisily appreciated by every one present. He was clearly the dominating personality of that session.

He also led the Manchester brigade in an attack on vaginal plugging in the treatment of antepartum hæmorrhage, because of the danger of sepsis and the difficulty of plugging sufficiently firmly to be effective, especially in the ordinary conditions of midwifery practice. At the first Congress in London in 1920, there was a striking passage of arms on this question between the Dublin and Manchester Schools, with Tweedy and Fothergill as the protagonists on the two sides.

Reference may also be made to a characteristic paper, that on "Puerperal Pelvic Infection" in the *British Medical Journal*, for May 3rd 1924, as it illustrates his abhorrence of notifications and the methods of the local health bureaucracy and contains an indignant protest against puerperal fever being included with measles and small-pox as a "catching fever." "Not long ago a medical officer of health objected to the removal of a case of puerperal pelvic infection to a hospital in a cab, because the cab was a public conveyance!"—was his scornful interjection.

Fothergill's strongest weapon in discussion and exposition was his faculty of appreciating the crucial point and summing it up in a few words or by an apt simile. The first time I heard him speak was at the discussion on Teacher's paper on Chorion-epithelioma at the old Obstetrical Society in 1903 and some expressions of his have remained firmly in my mind to this day. They were made in reference to the similarity between the growths

**Trans. Obstet. Soc.*, London, 1903, xlv, 299.

arising from a pregnancy and those from an embryoma, and though as set down for publication they have lost something of their original raciness, they deserve quotation.*

“It was clear that a mother fatally invaded by the trophoblast of her own child would be a person of one generation killed by a tumour belonging to a person of the next generation—matricide, in fact. But a man slain by an embryoma in his testis would be a victim not of his own child, but of a potential brother or sister—a case of fratricide,—a very different matter, and one worthy of a different name. It was easy to say that an individual had a trophoblast, be he your child or your brother, but the statement would not be easy to prove. We were aware that a trophoblast was essential to the implantation *in utero* of certain mammalian ova, but who would say that chorion was essential in the development of a dermoid cyst?”

He took an active part in founding and maintained a deep interest in this Journal as almost every volume must bear witness, and was a frequent contributor to the medical press.

In private life he was a delightful host and a most welcome guest. He had a keen sense of humour and a fund of anecdote that made him good company at any gathering. He was much in request as an after-dinner speaker, and it was immediately following his speech at the dinner of the Glasgow University Club, that he was seized with his sudden and fatal illness.

Fothergill was married at the start of his work in Manchester, to Edith, daughter of the late J. Dillon Woon, of Chelsea, and had her aid and guidance throughout the early struggle of the difficult days before his position was established. She was an artist like himself, and of like tastes, and the two enjoyed many holidays tramping the country and sketching in the Lakes or Yorkshire Dales, especially in Teesdale where the High Force was a greatly favoured resort. The loss of her help and companionship, in 1920, was difficult to bear and saddened his later years. Her sister, Miss Mary Woon, was able to soften the blow, and to her the sympathy of us all is sincerely accorded.

JOHN S. FAIRBAIRN.

**British Medical Journal*, February 16, 1926.