Although it has been more than 150 years since the birth of Sir William Osler and 85 years since his death, his teachings still hold great interest and show ongoing relevance in the practice of medicine. Osler has been called the “father of modern medicine.” Among his accomplishments are the creation of more than 1600 published pieces, including his landmark 1892 *The Principles and Practice of Medicine*,¹ which remained a standard textbook in medical schools for decades. This lengthy and “weighty” publication record has contributed to the perseverance of his work, but it does not entirely explain Osler’s enduring influence.

A closer examination of Osler’s life suggests that his most lasting and memorable contributions stem from his paramedical writings, most of which were composed late in his life. It is in these writings and speeches that Osler espoused principles of humanism that are arguably as relevant to practitioners of medicine today as when they were written.

As we enter the second century of the post-Oslerian era, it would seem timely to examine the continued appeal and applicability of Osler’s wisdom and knowledge. In particular, this paper addresses the far-reaching influence of Oslerian thought within the practice of osteopathic medicine, from its beginnings through present-day practice—and the opportunity it may offer individual practitioners for self-evaluation and midcourse correction.

Oser: His Life in Brief

William Osler was born to an Anglican minister and his wife on July 12, 1849, in Bond Head, Canada West (now Ontario). His early life was not distinguished in terms of academic accomplishments. Initially, Osler entered Trinity College School in Port Hope, Ontario, to join the clergy. Osler was soon drawn to a career in science, however, and—encouraged by early mentors—entered McGill University in Montreal, Quebec, to earn his doctorate in medicine.

After graduation, the young physician departed for Europe where he pursued additional training in anatomy, pathology, physiology, neurology, dermatology, and general medicine at some of the most prestigious institutions around the globe, from Leipzig and Berlin to Paris. Dr Osler then returned to McGill and was often referred to as the “baby professor,” as he was—with all of his experience and expertise—still younger than many of his students.²

Dr Osler’s early career established him as a hard worker, a fine clinician, and an enthusiastic and effective teacher. He performed more than 1000 autopsies from 1874 to 1884, often traveling great distances to pursue necropsy for interesting cases.²

In 1884, Dr Osler was offered a position as a professor of medicine at the University of Pennsylvania in Philadelphia. He was one of the few hired faculty members who were not a product of the “Penn” system. In his new role, Dr Osler’s reputation as a clinician and educator grew.

A short five years later, Dr Osler was offered the chairmanship of the department of medicine at the new Johns Hopkins Hospital and Medical School in Baltimore, Md. In this opportunity, which Dr Osler eagerly accepted, he saw a chance to establish a medical school in the European tradition in the new world: excellent laboratories and a well-organized housestaff that served as compliments to an active and vibrant research community.

In his first few years at Johns Hopkins, when the labs and clinics were newly established but before any students were enrolled, Dr Osler wrote the landmark first edition of *The Principles and Practice of Medicine*, which remained a standard textbook in medical schools for decades. This lengthy and “weighty” publication record has contributed to the perseverance of his work, but it does not entirely explain Osler’s enduring influence.

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From the Cleveland Clinic Lerner College of Medicine of Case Western Reserve University, Ohio University College of Osteopathic Medicine, and the Department of Rheumatic and Immunologic Diseases of the Cleveland Clinic Foundation.

This paper was adapted from a commencement address Dr Calabrese delivered on June 5, 2004, at the Ohio University College of Osteopathic Medicine in Athens.

Address correspondence to Leonard H. Calabrese, DO, Department of Rheumatic and Immunologic Diseases, Cleveland Clinic Foundation, 9500 Euclid Ave, Cleveland, OH 44195-0001.

E-mail: calabr1@ccf.org

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SPECIAL COMMUNICATION

Sir William Osler Then and Now: Thoughts for the Osteopathic Profession

Leonard H. Calabrese, DO
It was also during this time that Dr Osler married Grace Revere Gross, a descendant of Paul Revere and the widow of a prominent Philadelphia surgeon.

During the next 15 years at Johns Hopkins, Dr Osler achieved worldwide fame as a brilliant clinician, attracting an international referral practice. He also achieved fame for his innovations in medical education, including methods of bedside instruction that are now long-established, standard practice within the medical profession.

By 1905, however, with increasing demands on virtually every aspect of his professional life, Dr Osler was approaching what some have described as “near burnout.” It was at that time—the very peak of his fame—that Dr Osler was offered, by royal appointment, the Regius Professorship of Medicine at Oxford University in England. Dr Osler accepted this position—long considered mainly an honorific appointment—at the request of his wife.

On his arrival at Oxford University, however—and in keeping with his personal style of hard work and creativity—Dr Osler became fully engaged in his professorship, continuing to innovate even when it was not expected of him.

In addition, Dr Osler quickly gained a reputation for hospitality; his home at Oxford was referred to as “Open Arms” because he was so welcoming and generous in sharing his time and insights with traveling physicians, medical researchers, and students.

It was also during this phase of his life that Dr Osler delivered his most famous speeches. His public addresses during this period are the basis of current interest in Osler’s humanistic approach to medicine.

Tragically, in 1917, the Oslers lost their only son, Revere, in World War I—a blow from which Dr Osler never completely recovered emotionally.

Sir William Osler died of bronchopneumonia in 1919 at the age of 70.

Osler and Osteopathy: The Early Years

It is noteworthy that Dr Osler achieved his fame at approximately the same time that Andrew Taylor Still, MD, DO was developing his theories of osteopathy that would ultimately evolve into the practice osteopathic medicine.

The comparison between the two men has been drawn at least once before in the pages of THE JOURNAL, in fact. In that article, Suter noted that both men were sons of “men of the cloth”; both men shared an interest in preventive medicine; both men were suspicious of prescribed medications. Furthermore, both men studied medicine before there was sufficient evidence to prove or disprove virtually all drug therapies. In retrospect, both men were clearly correct to eschew the prevailing practice of using multiple unproven remedies for most conditions.

There is no record that Drs Still and Osler met. There is no record that Dr Osler ever discussed osteopathic principles of therapy. Early osteopathic literature frequently referred to Osler’s work, however, using his public statements to support the use of “drugless” therapies and arguing that they were a rational treatment choice. Some modern commentators have followed the same approach.

In 1937, Ralph P. Baker, DO, reviewed Harvey Williams Cushing’s Life of Sir William Osler—a book that won the Pulitzer prize in 1926—and described Dr Osler as “the greatest physician of whom I have read.” He was not only impressed by Dr Osler’s many accomplishments, Baker found in Osler a reaffirmation of the faith he placed in osteopathic medicine after learning that Osler was of the same mind as most osteopathic physicians of the day in that Osler and the “osteopaths” were strong advocates of preventive medicine and fearless critics of “promiscuous and unscientific drug administration.”

Osler and Osteopathic Medicine Today

Since the days of Drs Osler and Still, the field of medicine has undergone dramatic changes, mainly in the great shift from empiric treatments to evidence-based therapeutics established from advances in the pathophysiologic understanding of disease. Although this shift has been transforming in the practice of subspecialty medicine within the allopathic profession, it has
been even more transforming for the osteopathic profession, which not only embraces such evidence but incorporates it into osteopathic principles and practice (OPP).

Although this melding of philosophies has led to some questioning of current distinctions among osteopathic and allopathic practitioners, the field of osteopathic medicine remains distinct from allopathic practice on several grounds. In particular, osteopathic medicine’s emphasis on musculoskeletal medicine is still evident within the curricula of osteopathic schools of medicine.

Strong evidence in favor of the use of osteopathic manipulative treatment is supported by research published in a scientific, peer-reviewed publication. This is a far cry from the dearth of evidence available for most therapeutics in the days of Drs Osler and Still.

Although manipulative medicine applies to only a small portion of all patients receiving medical care from osteopathic physicians, the profession places an emphasis on care of the whole person, a cornerstone of contemporary OPP.

Data in support of osteopathic principles are limited, but objective data is available on the fundamental differences of approach to health and disease between the practitioners of osteopathy and allopathy. Namely, osteopathic practitioners have been shown to display strategies that may reflect a greater emphasis on humanistic ideals.

Thus, we turn to ask: Do the teachings and wisdom of Sir William Osler have similar or perhaps even greater relevance for new and existing osteopathic clinicians? I would suggest that, if anything, Osler’s influence should be most strongly felt among osteopathic physicians.

Some evidence of the merit of Oslerian influence to OPP follows. This material is based on the corpus of Oslerian thought expressed in his writings and teachings and in the published impressions of those who knew him. The influence of Dr Osler has been divided into three areas: medical education, patient care, and the concept of professionalism within the field of medicine.

**Osler on Medical Education**

A lasting legacy of Sir William Osler to students of medicine throughout the United States is his influence on the high standards of medical education. Before Osler, it was common for medical students to graduate from medical school without ever examining a patient or witnessing childbirth. Osler abhorred this approach to medical education and devoted himself to a system that taught students at the bedside in the hospital and clinic. In fact, Osler suggested that his epitaph be: “He taught medicine in the wards.” All students of medicine are indebted to Osler for his insistence on teaching through direct patient contact.

Osler was also famous for teaching rounds. His style of teaching was inspiring and motivating, always including cheerful greetings for patients and always adding insightful criticisms for students—but never in a mean-spirited fashion.

Osler’s emphasis was always on treating patients and not just diseases—a sentiment that reverberates with osteopathic medicine’s claim to “treat patients, not just symptoms.” In fact, Osler is quoted as saying, “To study the phenomenon of disease without books is to sail an uncharted sea, while to study books without patients is not to go to sea at all.”

In addition to his role in making bedside teaching standard practice for medical education, Osler continually emphasized that medical school was not the end of education but merely the beginning. Osler is reported to have advised students and practicing clinicians of the importance of continuing their educational development throughout their careers. Osler fully realized that continuing medical education required sacrifice, but he emphasized that the benefits were well worth the effort. In 1905, Osler told the graduates of McGill that their training thus far was “... not a college course, not a medical course but a life course...”

True to the high value he placed on continuing education, Osler always addressed medical students as “fellow students.” He also believed that physicians needed to be well rounded and suggested that all physicians dedicate at least 30 minutes of evening reading to the classics.

Osler’s enthusiasm for education was lifelong and infectious. Such sentiments clearly are as valuable today as they were 100 years ago; in fact, they are probably even more important today, given the proliferation and rate of change in the medical knowledge base.

**Osler on Patient Care**

In the arena of patient care, I believe that Osler’s sentiments are of particular poignancy to the osteopathic profession given its continued emphasis on treating the individual as a whole and the importance of cultivating a close and personal relationship between physician and patient.

Osler recognized that each patient was different and urged physicians to “care more particularly for the individual patient than for the special features of the disease.” He always urged other physicians to live by the “golden rule” and exercise the practice of medicine with both the heart and the head.

Osler was known to treat all patients equally regardless of whether they be “duchess or cook.” Examples of Osler’s compassion abound, but they may best be summarized by...
my favorite Oslerian maxim: “As physicians, we should strive to cure a few, help most, but comfort all.”

Osteopathic physicians should take heart that although Osler was a “doctor’s doctor” and worked in the world’s greatest clinics, he always valued the role of the family physician. He said, “The family doctor, the private in our great army, the essential factor in the battle, should be nurtured by the schools and carefully guarded by the public.” Osler urged many graduating physicians to become:

“...the cultivated general practitioner. May this be the destiny of a large majority of you.... You can not reach any better position in a community; the family doctor is the man behind the gun who does our effective work.”

The osteopathic profession’s expressed emphasis and value placed on family practice medicine should remain no less enthusiastic than it was when voiced by Osler.

As physicians, we should strive to cure a few, help most, but comfort all.

—Sir William Osler

Although the techniques Osler developed and promoted for patient diagnosis and treatment have evolved, his four compasses—inspection, palpation, auscultation, and contemplation—are still of value at the bedside.

There is no doubt that Osler would have embraced current technology and exploited it in the service of his patients. It is particularly arguable that Osler would have carried a handheld electronic device to record his clinical findings, as Osler admonished his students to “carry a small notebook which will fit into your waistcoat pocket and never ask a new patient a question” without it.

One could make a good case that Osler would be in support of the use of the electronic medical record, which allows physicians to track and record findings with relative ease.

Osler on Hard Work, Idealism, and the Concept of Professionalism

Osler, like all truly great men, was humble. He believed that all the good fortune that came to him in terms of professorships, his leadership role in numerous societies, and his worldwide recognition was the result of “just a habit, a way of life, an outcome of the day’s work.” This habit of humility was evident throughout his published work and in his public addresses.

Osler did not believe in worrying about yesterday or planning so much for tomorrow—he worked for today. He referred to his life plan as working in “day tight compartments” by blocking out the past and future to focus on excellence in a day’s work. It seems to be less common today for physicians to express a willingness to endure a difficult schedule or case with the humble—yet attainable—goal of finding comfort and satisfaction in a good day’s work.

Osler’s philosophy can be said to reflect the Eastern concept of “living in the now.” He believed that when the “days activities are properly divided and rightly balanced, work is not work but pleasure.”

Most of all, Osler believed fervently that medicine is a noble profession. I believe that he would be shocked at the self-doubt engaged in by many members of the medical community who struggle with an ever-changing environment. Osler was clearly an idealist—but one who was willing to work unceasingly to achieve what he believed were the worthiest of goals.

Strong ideals are still needed among physicians today. Although the demands of today’s medical environment are dramatically different from those in Osler’s day—and the sacrifices that students make, financially and otherwise, are real—medical professionals should remain mindful of the purpose of the profession, which Osler effectively captured in the following statement: “You are in this profession as a calling not a business; as a calling which exacts from you at every turn self-sacrifice, devotion, love and tenderness to your fellow men.”

As far as professionalism is concerned, Osler was a strong advocate for collegiality, never speaking ill of fellow physicians. Believing that all physicians share a universal calling, he urged engagement and active participation in medical societies. Osler believed that professional memberships could be instrumental in preventing “staleness of the mind.” Osler also valued highly the role of nurses in the care of the sick and spoke extensively of their importance at a time when their service was not yet considered a professional calling.

Conclusion

The life of Sir William Osler stands out today—more than 150 years after his birth—as a continuing source of inspiration for the universal family of medicine. Although many medical specialties would claim him as their own, Osler’s words clearly had no such boundaries.
The early and embattled osteopathic profession took great solace in the clear thinking of Osler and had great respect for him. Today’s osteopathic physicians, although needing no validation of their profession, should study and strive to emulate Osler’s humanitarian goals. Osler’s sentiments of care and compassion—and his conviction that the practice of medicine is a higher calling—will serve well for individual osteopathic physicians, the profession as a whole, and humanity.

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