

SOME NOTES ON THE CARDIAC CLUB

BY

JOHN COWAN AND OTHERS

*“The Sun of our body, the King and sole Commander of it.” —
“Anatomy of Melancholy.”*

It is difficult to convey to the Georgian a proper impression of the attitude of the late Victorians to heart disease. Laennec's discovery of auscultation dominated the succeeding fifty years, and towards the end of the century the characteristic sounds of the various valvular lesions had been fully elucidated. For a time medicine stagnated. Those of us who were Residents in medical wards viewed the outlook with dismay, for the progress of surgery at that time, under the influence of Lister's work, was phenomenal. But better times were at hand.

The physiological laboratories were at work under Gaskell and others. The bacteriologists were turning their attention to medical subjects; the tubercle bacillus was discovered by Koch. X-rays showed the contents of the thorax. The sphygmomanometer was adapted for clinical use, and the polygraph and later the electrocardiograph added their quota to the general store.

But, although new methods of investigation became available, a personal influence was needed to speed up the work, and James Mackenzie became the centre of the picture. He had many facets. A tall, burly man, with all the directness of the North, he seemed at first sight rather dictatorial and overbearing; but his transparent goodwill, his unselfishness, and his humility soon made manifest that it was merely his intolerance of sham, and his search for truth. His intensive study of the Shorter Catechism had inculcated a downright mode of expression! He took a kindly interest in all his neighbours, especially the younger members of his profession; and he was always receptive of opinions based upon material which was outwith his own opportunities. Before long he had attracted to himself many men who were interested in the problems of heart disease; and had himself suggested to some of our members that a small club should be formed for meetings and discussions. The Cardiac Club was conceived in Burnley.

Another European war came, and our profession was scattered over the world. It was not a great war, for it altered little save garden fences, but it left a terrible swathe behind it. Many men had died, and many more were suffering in health, from wounds or sickness, for whom provision was required. During the war the Pension Service was necessarily a makeshift; the staff was insufficient and inexperienced, and their decisions needed revision and co-ordination. Many of the cases were cardiac, at least in name, so, in April 1920, the Ministry appointed Consultants to aid the Regional Directors in the assess-

ment and treatment of the cardiac patients. The majority of those appointed had been associated with James Mackenzie before the war.

In 1921 a conference of the Consultants was held in London, and others subsequently. They were mainly concerned with the technical and administrative difficulties of the Ministry, but several interesting discussions upon purely medical subjects took place, and some valuable statistical data were collected. The influence of war service as a cause of subacute bacterial endocarditis; the effects of malaria upon the myocardium; the incidence of syphilitic disease of the heart; the causes of death in chronic valvular disease; the value of quinidine in auricular fibrillation, etc., were considered.

The conferences were appreciated by those concerned (Carey Coombs, T. F. Cotton, John Cowan, Ivor Davies, Wardrop Griffith, John Hay, W. E. Hume, Thomas Lewis, J. E. MacIlwaine, W. T. Ritchie, Robert Sevestre, H. J. Starling), who felt that they had been of service to themselves and perhaps to cardiac science, and that it was desirable that they should be continued under different auspices. On February 21, 1922, Hume wrote to Cowan (apparently considering him to be the most senior of the group, though Wardrop Griffith was in reality the doyen) suggesting that the men interested in heart disease should be called together at the next meeting of the Association of Physicians. Accordingly a meeting took place at Oxford, with A. G. Gibson in the chair, and on April 22, 1922, the Cardiac Club was born. The official accoucheurs were Carey Coombs, T. F. Cotton, John Cowan and W. E. Hume. The first active meeting of the Club took place in London later that year. A list of the original members and of those elected subsequently follows, with the dates of election of the extra-ordinary members.

THE CARDIAC CLUB

HONORARY MEMBER

James Mackenzie, F.R.S., Kt., 1915

ORIGINAL MEMBERS

Extra-Ordinary
Member

1922	Carey F. Coombs	-1932	
	T. F. Cotton		
	John Cowan (<i>Secretary</i> , 1922-25)		1930
	J. G. Emanuel		1933
	A. G. Gibson (<i>Secretary</i> , 1925-28)		
	T. Wardrop Griffith, C.M.G.		1928
	John Hay		1935
	Thomas J. Horder, K.C.V.O., Kt. 1918, Bt. 1923, Baron 1933		1933
	W. E. Hume, C.M.G.		
	Thomas Lewis, C.B.E., F.R.S., Kt. 1921.		1927
	J. E. MacIlwaine,	-1930	
	John Parkinson		
	W. T. Ritchie, O.B.E. (<i>Treasurer</i> , 1922-31)		1932
	H. J. Starling		
	K. D. Wilkinson, O.B.E.		

THE CARDIAC CLUB—*continued*

MEMBERS ELECTED SUBSEQUENTLY

- 1923 J. Crighton Bramwell (*Secretary*, 1928–32)
Francis R. Fraser
- 1924 A. N. Drury, F.R.S.
C. E. K. Herapath, M.C.
- 1925 A. M. Kennedy
S. Wentworth Patterson
- 1926 George A. Allan
Maurice A. Cassidy, C.B., K.C.V.O., Kt. 1934
- 1927 S. B. Boyd Campbell, M.C.
Arnold W. Stott
- 1928 H. Wallace Jones
D. Evan Bedford (*Secretary*, 1932–36)
- 1930 E. P. Poulton
- 1931 J. Maurice Campbell, O.B.E. (*Secretary*, 1936–37)
- 1933 R. T. Grant, F.R.S.
A. R. Gilchrist
- 1934 Leonard Abrahamson
C. W. Curtis Bain, M.C.
- 1936 C. Bruce Perry

Of these original members, three have died : Carey Coombs in his full vigour in 1932, MacIlwaine of Belfast in 1930, and James Mackenzie in 1925. At their next meeting the Club put on record this expression of appreciation of their only Honorary Member ; and short notes of the dates and appointments of these three members follow.

Minute of the Cardiac Club, May 28, 1925

“ The Cardiac Club laments the death, on January 26, 1925, of its Honorary Member, Sir James Mackenzie. By the power of his genius and the wealth of his achievements he exercised a vast influence upon the branch of Medicine with which his name is indissolubly associated ; and his pre-eminence, transcending the limitations of race and clime, was universally acknowledged. So long as the Science of Medicine endures so long will the name of Sir James Mackenzie be honoured.

“ This tribute is rendered to the memory of him whom all Members of the Cardiac Club revered as their Master ; and the Club respectfully offers its sincere sympathy to Lady Mackenzie and Miss Mackenzie in the great loss which they have sustained.”

JAMES MACKENZIE, 1853–1925

M.B., 1878 ; M.D., 1882 ; F.R.C.P., London, 1913. F.R.S., 1915. LL.D., Aberdeen, 1910 ; Edinburgh, 1911. Knight, 1915. Hon. Physician to H.M. the King in Scotland, 1920.

Physician, Victoria Hospital, Burnley ; 1880–1907. Physician, Mount Vernon Hospital for Diseases of the Chest ; 1910–18. Physician to the Cardiac Department, London Hospital, 1911–18. Director of the St. Andrew's Institute of Clinical Research, 1918–25. Schorstein Lecturer, 1911. Oliver Sharpey Lecturer, 1911. George A. Gibson Lecturer, 1914.

CAREY FRANKLIN COOMBS, 1879–1932

M.B., 1901. M.D., 1903. F.R.C.P., 1917.

Physician, Bristol General Hospital, 1920. Director, Bristol University Centre of Cardiac Research, 1927.

Major, R.A.M.C., T.F. Served in England, Egypt, Mesopotamia and France, 1914–19. Long Fox Memorial Lecturer, 1925. Chadwick Lecturer, 1927. Lumleian Lecturer, 1930.

JOHN ELDER MACILWAINE, 1874–1930

B.Sc. (Engineering) 1894. M.B., 1901 ; M.D., 1904 ; D.P.H., 1907.

Physician, Royal Victoria Hospital, Belfast, 1910–29. Professor of Materia Medica and Therapeutics, Queen's University, Belfast, 1921–28.

Irish Rugby International, 1897–99.

Dresser, Irish Hospital, South Africa, 1899–1900. Physician, St. John's Ambulance Brigade Hospital, France, 1915–17.

The First Annual Meeting of the Cardiac Club was held at University College Hospital, London, under the chairmanship of Sir Thomas Lewis on November 22, 1922 and, subsequent meetings have been held on the day previous to the annual meetings of the Association of Physicians, wherever the Association happened to meet.

Many subjects have been discussed by the Club: the heart in the acute infections ; hyperpiesis ; angina pectoris ; infarct of the heart ; heart block ; the heart in pregnancy ; cardiac asthma ; vaso-vagal attacks ; the treatment of œdema ; etc. In addition to the set subjects many short discussions upon case records, electrocardiograms, pathological specimens, etc., have also taken place, to the obvious pleasure of the members. On several occasions demonstrations have been given to the Club by those working in the laboratories. A list of the main subjects discussed at each meeting follows with the names of those who introduced the discussion.

In addition to the value the members have received from the meetings, the most important function of the Club has been the promotion of friendship between the members. All of us, from time to time, have received help from our confrères by advice or the supply of information or material. On two occasions the Club has been responsible for the mass collection of material from the members, from which important conclusions were drawn and made public at an earlier date than would have been possible if all the data had been dependent upon one observer. We refer to Hay's paper upon the value of quinidine in the treatment of auricular fibrillation and to Gibson's paper upon ischæmic necrosis of the heart. It seems desirable that this procedure should be repeated as occasion demands.

Webb's egg has grown and the stripling is thriving. Under the new constitution we anticipate a strong and healthy adult life.

JOHN COWAN AND OTHERS

GENERAL MEETINGS OF THE CARDIAC CLUB

1922.	April 22.	Oxford	Chairman, A. G. Gibson
		Decision to form the Cardiac Club	
1922.	November 22.	University College Hospital, London	
		First General Meeting	„ Sir Thomas Lewis
1923.	May 17.	Edinburgh	„ W. T. Ritchie
1924.	June 5.	Bristol	„ Carey Coombs
1925.	May 28	Royal Soc. of Medi- cine, London	„ T. F. Cotton
1926.	May 20.	Newcastle	„ W. E. Hume
1927.	June 2.	Belfast	„ J. E. MacIlwaine
1928.	May 24.	Liverpool	„ John Hay
1929.	April 4.	Cambridge	„ A. N. Drury
1930.	June 5.	The London Hospi- tal, London	„ John Parkinson
1931.	May 21.	Manchester	„ Crighton Bramwell
1932.	May 12	Liverpool	„ John Hay
1933.	April 6.	Glasgow	„ G. A. Allan
1934.	May 7.	Leeds	„ Wardrop Griffith
1935.	June 6.	St. Thomas Hospital, London	„ Sir Maurice Cassidy
1936.	May 28.	Manchester	„ Crighton Bramwell
		Fifteenth and last General Meeting of the Cardiac Club.	
1937.	January 8.	An Extra-Ordinary Meeting was held at Guy's Hospital, London (Chairman, Bramwell) at which it was decided that the Cardiac Club should be trans- formed into the Cardiac Society of Great Britain and Ireland.	

MAIN SUBJECTS OF DISCUSSION

1922.	Infective Endocarditis	Sir Thomas Horder
1923.	The Use of Quinidine	Hay and Parkinson
	Abnormal QRST Complexes	MacIlwaine
1924.	The Heart in Pneumonia	Wardrop Griffith
	Digitalis	Fraser and Andrus (introduced).
	The Effect of Adrenalin on the Heart	Hume and Fraser
	Heart Disease in Children	Cotton and Carey Coombs
1925.	Ænæmic Necrosis of the Heart	Gibson
	Simple Tachycardia	Parkinson
	Blood Pressure	Bramwell and Carey Coombs
	Cardiovascular Syphilis	Cotton
1926.	The Heart in Hyperpiesis	Wilkinson
	Angina Pectoris	Starling
1927.	Heart Block	Kennedy
	Treatment of Œdema	Patterson
1928.	Angina Pectoris	Ritchie
	Injection of the Coronary Arteries	John Campbell (introduced)
1929.	Cardiac Asthma	Fraser and Emmanuel
	Vaso-vagal Attacks	Starling
1930.	Mitral Stenosis	Cowan
	The Heart and Athletics	Bramwell
1931.	Ætiology of Heart Disease	Carey Coombs
1932.	The Heart in Diphtheria	Hume and Wilkinson
	The Heart in Influenza	Herapath
	The Influence of Tobacco	Maurice Campbell
	The Influence of Alcohol	Patterson
1933.	Abnormalities of the T wave	Cowan and Allan
	Right and Left Ventricular Complexes	Drury
1934.	Diseases of the Pulmonary Artery	Parkinson and Bedford
	Vaso-motor Angina	Cassidy and Patterson
1935.	Heart Symptoms and Gall Bladder Disease	Cotton and Hume
	Cardiac Disease of Unknown Ætiology	Stott and Maurice Campbell
1936.	Heart Disease and Pregnancy	Bramwell
	Heart Block	Gilchrist

THE CARDIAC SOCIETY

After the meeting of the Cardiac Club in 1935 it was suggested that, with the increasing numbers who were interested in Cardiology, the time might have come for expanding into a larger and more representative society and that the Executive should consider this possibility.

At the 1936 meeting in Manchester a memorandum which had been drawn up by the Executive (Allan, Bedford, Drury and Wilkinson) provoked a long discussion. After general approval of the principle of expansion the following committee was appointed to draw up a scheme for submission to a special meeting of the club.

Members : Evan Bedford, Crighton Bramwell, F. R. Fraser, John Parkinson and Maurice Campbell (Secretary).

The committee held several meetings and drew up a draft constitution and rules for the Cardiac Society, and lists of names of those who should be invited to be Honorary, Extra-Ordinary, Ordinary and Associate members.

The last meeting of the Cardiac Club was a special one held in the Governor's Committee Room at Guy's Hospital on January 8, 1937. It was decided to accept these proposals for the formation of the new society, for its rules and constitution, and for the names of those who were invited to be the original members. The following were chosen as the first Council : Allan, Evan Bedford, Crighton Bramwell, Gilchrist (President 1937), Parkinson, Wilkinson and Maurice Campbell (Secretary and Treasurer).

At the First Annual Meeting of the Cardiac Society, held at Edinburgh on April 15, 1937, practically all the members attended, and in addition to the scientific business a committee was appointed to consider the possibility of starting a journal dealing with cardiology. *Members* : Gibson (Chairman), Evan Bedford, Maurice Campbell, Fraser and Wilkinson.

Several meetings were held, and in February 1938 the committee reported to the Council. They recommended that such a journal should be started and that the British Medical Association should be asked to publish it, as after various negotiations and meetings they thought that the British Medical Association were able and willing to publish a journal that would meet the needs of the Society. These recommendations were approved by the Council of the Cardiac Society, which appointed the Editors and the Editorial Board for the Journal. The title which has been chosen was suggested at an early stage, but many other titles have had their supporters. The action the Council had taken with reference to the Journal was approved by the Society at its Second Annual Meeting at Bristol on June 2, 1938.

MAURICE CAMPBELL,
Secretary of the Cardiac Society.

BRITISH HEART JOURNAL. EDITORIAL NOTE

For some time the need for a journal representative of British Cardiology has been apparent, and the Cardiac Society of Great Britain and Ireland, feeling assured of adequate support, has taken the initiative in starting the *British Heart Journal*. The Society's project has been facilitated by the generous co-operation of the British Medical Association, which has undertaken the responsibility of publishing and distributing the Journal.

To those who hold that specialization has already gone too far, the appearance of another journal devoted to a special branch of medicine may seem a step in the wrong direction. In Harvey's time medicine had no offspring, for the surgeon was no more than the servant of the physician. One by one, Anatomy, Physiology and Pathology began to develop independently of the parent science, and in the course of time further separation has occurred, to meet the exigencies of practice, teaching, and research.

But even traditional divisions in medicine are not inviolate, and already the barrier between Medicine and Surgery is yielding, for example in the fields of Neurology and of Diseases of the Lungs. Radiology has become a special branch of medicine on grounds of expedience alone, for it is no more than a method of examination, and incidentally one which is readily applicable to the heart. Cardio-vascular radiology has been and is being developed as a means of diagnosis by those interested in the heart, whether primarily physicians, radiologists, anatomists or physiologists. The special journal represents an attempt at reorientation; its proper function is to bridge the barriers separating existing divisions in medicine, and not to create new ones. By providing common ground on which physicians, anatomists, physiologists and pathologists may meet and pool their efforts in a particular direction, it enables those who treat the sick and those who work mainly in the laboratory to keep in contact with each others problems in the same field, to their mutual advantage.

The *British Heart Journal* will naturally reflect first and foremost the interests of members of the Cardiac Society, interests that are predominantly though not exclusively centred in the clinical aspects of cardio-vascular disease; but the policy of the Journal, and indeed of the Society, will be to serve all those interested in the Heart and Circulation, irrespective of their calling.

In starting the *British Heart Journal*, we are not unmindful of its predecessor, *Heart*, founded by Sir Thomas Lewis nearly thirty years ago. During the period when knowledge of electrocardiography was developing, *Heart* rendered invaluable service to Cardiology and maintained a standard and reputation second to none among the scientific journals of the world. In changing the title to *Clinical Science*, Sir Thomas Lewis has indicated his intention of widening its scope and thus increasing its field of usefulness to those engaged in research. The Cardiac Society are indebted to him for his generous co-operation, and we take this opportunity of thanking him for his support and for contributing a foreword.

D. EVAN BEDFORD.