



LETTER FROM THE UK

Clandestine Fellowship

Dear Aunt Ethel

We landed at Heathrow at 6.30 a.m. My wife went ahead to greet her sister when our luggage came out last. Two big suitcases perturbed Customs: somehow the biltong evaded the painstaking search of the courteous young woman. Brother-in-law sped us to their Surrey home for a welcome cuppa and dumping of baggage: by 11 a.m. we were on the train to London Victoria. There began Pat's mystery tour.

She knew that the night was to be spent in London, but where or why, if our offspring weren't involved? The taxi was a luxury, as the Circle Line would have got us right there: but it was fine cruising past Hyde Park Corner, Berkely Square *sans* nightingale, and Madame Tussaud's, before alighting alongside Regent's Park and an elegant Nash terrace in St Andrew's Place. Pat spotted 'Royal College of Physicians', presumed correctly that our smart accommodation at no. 10 belonged to it, but assumed that a West End show was the occasion.

The tables were turned (she'd sprung a surprise 25th wedding anniversary party on me). Now everyone except my wife knew that we would be attending a ceremony for new Fellows of the Royal College of Physicians of London. I had tackled so many application forms that she didn't know whether I was registered for the Irish Sweep or performing in the Fellowship of the Ring.

One becomes a Member of the College by passing the requisite specialist examination, 26 years ago in my case. One can be made a Fellow if proposed by an existing Fellow, provided one has contributed to medicine or its literature. This usually occurs after at least 5 years as a consultant; longer if one is overseas (a nice colonial reminder).

There was time to relax and watch a Wimbledon ladies' semi-final before a look round the College, photographs and tea, which for overseas new Fellows was served in a room boasting collections of silver and of macabre medical instruments — obsolete, thank goodness. There we met the President of the College. Any fear my wife may have had about the surprise's being a tedious old-boys reunion was dispelled at top level. Elegant, energetic Carol Black welcomed us individually with warmth and genuine interest. Her presidential commitment is huge, so that she lives in an

'Doc' has been in specialist physician practice in Pietermaritzburg for almost a quarter-century. As Robert-Ian Caldwell he performs musical revues and writes an 'Aunt Ethel' column for the local SAMA newsletter. He and his wife (doctorate in plant pathology) and three children are all past UCT students.



apartment within the College precinct, but she still does clinical work at the Royal Free Hospital.

The College has been in existence since the 16th century — by decree of Henry VIII — but on its present site since 1964. The external architecture is no great shakes, especially juxtaposed with stately Regency buildings, but the interior is another matter: spacious, grand but functional, with a fine auditorium, galleries for permanent art collections and exhibitions, a library full of ancient medical texts where the ceremony is held, and a capacious dining hall. (The College has an excellent website — <http://www.rcplondon.ac.uk>, with plenty of history and illustrations.)

The ceremony was long enough for meaningful speeches and citations, but always laced with humour and goodwill, so never ponderous. It is clear that the College exists through its Fellows, and sets high academic and ethical standards for itself. The graduation-feel of the occasion had a marriage-ceremony touch to it when we all said 'I will' when asked to safeguard those ideals (and pay our annual subscriptions, of course!). Council members obviously enjoy and take pride in the induction, so there were many formal handshakes after Carol



Black presented enormous Latin-inscribed scrolls and wished us 'all happiness'. A coated and bemedalled Bedell with a mace led the procession of councillors.

For once, especially at a medical occasion, I knew not a soul other than Pat. The new Fellows came from eight countries, and we were proud to applaud the only other South African, Dr Breminand Maharaj of Natal University and the Nelson Mandela Medical School, who received one of the special Fellowships reserved for high achievement, and a glowing citation.

The weather had cleared for the evening, so the drinks gathering flowed out into the lovely College gardens, and the champagne was excellent and appropriate. Dinner in the splendidly appointed Osler Room followed: an exquisite meal, served with precision. The white wine was a South African chardonnay — just right. An eminent cardiologist poured his heart out to my wife: he and three colleagues were celebrating a younger doctor's Fellowship. A genial Welsh professor who had worked in South Africa kept us amused. Carol Black's speech was now far more light-hearted, pointing out unusual hobbies of new Fellows: one played the Japanese bamboo flute; another's wife judged the Miss Thailand beauty pageant. I cracked a mention as a warbling calligrapher.

How convenient it was to amble across to our residence. My wife needed her bed; and I, time to contemplate. Regent's Park was still unlocked: in the moonlight marigolds displayed their daytime colour. Next morning Pat and I walked the breadth of

the Park, past the zoo and up Primrose Hill, with great views over London. Then we settled our account (inexpensive but only by London standards!) with the pleasantly chaotic housekeeper in her cluttered hallway, and wheeled our luggage down the road to the Great Portland St Underground.

Yours affectionately

Robert-Ian

The next installment . . .

Dear Aunt E

Very smart of you — spotting the inadvertent pun about the cardiologist pouring his heart out to my wife and suggesting it was just as well she wasn't sitting next to a urologist. Mind you, he could have been one of those still-waters-run-deep types; like the pulmonologist opposite him, keeping things close to the chest. This has no effect on galloping alcohol consumption, however, whilst a dermatologist has also had a skinful, annoying a gastroenterologist who has bust a gut to be there.

Then there is the ophthalmologist with an eye for the ladies, particularly the earnest rural doctor who is commenting on the evolution of the missionary position in post-modern society. In a radiologist's view, keep it simple: supine and erect: no enhancement, just wait for developments. Remember chemoprophylaxis, murmurs the infectious diseases expert guardedly. An orthopod brandishes his newfangled prosthesis gleefully: a venereologist is battling to hold his own.

This has a surgeon in stitches and a neurologist convulsing. A psychiatrist has hysterics as he notices that her Freudian slip is showing. A pathologist reaches for another tissue. The cardiologist has at least kept his finger on the pulse, whereas the proctologist has one in every pie, and is discussing with an ENT specialist the merits of paying through the nose versus *per anum*. An anaesthetist passes the port, with decorum to the left, and gas, discreetly under the table. Of course, the gynaecologist has his hand up long before question time.

The paediatrician feels this is premature and all rather childish. 'Bloody chronic!' mutters a geriatrician in agreement, demolishing his rack of lamb clinically. A hepatologist has the last word as he pronounces the *paté de foie gras* excellent.

Yours interdisciplinarily

Robert-Ian