

# Editorials

## THE HANDEDNESS OF KERRS

*But the Kerrs were aye the deadliest foes  
That e'er to Englishmen were known  
For they were all bred lefthanded men  
And 'fence against them there was none.*

Anon

**B**OTH interest and speculation have arisen from the suggestion that family surnames may be indicative, in some way, of the genetic constitution of the holder and were such a relationship more clearly established the patronymic might be good evidence to be considered in the process of diagnosis. There is some evidence that observable features may accompany surnames down the generations, apart from the Hapsburg nose, examples include fusion of metacarpals in the Talbot family and a bifid ear lobe possessed by males of one branch of the Atkinsons. If a physical characteristic can be inherited why not a resistance or a susceptibility to disease also? There seems no reason why not. First, however, it is necessary to assess the predictive value of the family name in relation to possibly inherited traits.

In a letter to *The Times* in September 1970 it was suggested that left-handedness was a characteristic associated with the families of Kerr and Carr, the latter being the anglicised spelling of the former. *The Oxford English Dictionary* derives the name from the Gaelic 'caerr' meaning 'awkward' and cites 'car-handed' as a derivative. This, with 'Ker-handed' and 'Carry-handed' is still in vernacular use to describe a left-handed person. The surname 'Kerr' is among the 40 most numerous surnames in Scotland, and Irish records include the name in the fourteenth century. The O'Caurs and Kerranes have been regarded as being of the same family.

Further folklore evidence comes from the observation that in Scottish castles built by the Kerrs some spiral staircases were built with treads turning to the left. Ferniehurst Castle, Jedburgh, is an example. A left-handed swordsman is at an advantage when defending such a stair. Further information is being sought from historians in Scotland, Wales and Ireland but there is already sufficient to enable us to pose a question and then take steps to answer it. Put at its simplest,—'Is the surname Kerr or Carr positively associated with left-handedness?'

Interested members of the College are asked to identify from their medical lists families, the male head of which is Kerr or Carr. They are then asked to list the members of these families and to select from their records a matching family bearing another surname. Families with the same distribution of sons and daughters should be chosen. The head of each family is then asked to indicate the 'handedness' of each member. A matched pair of families might be represented as follows:

James Carr	(L)	R	Charles Wheeler	L	(R)
Mrs Mary Carr	L	(R)	Mrs Grace Wheeler	L	(R)
John Carr	(L)	R	Edward Wheeler	L	(R)
Susan Carr	(L)	R	Marianne Wheeler	L	(R)
Brian Carr	L	(R)	Claude Wheeler	(L)	R

At the same time the head of the family might be asked for the number of twin births which he knows to have occurred in his own family and that of his parents.

This is a simple study but from evidence received in this form it might be possible to confirm an association which at present rests on no firmer foundation than popular belief and tradition. We would be glad to receive evidence in the above form from any member of the College who has families of Kerrs or Carrs on his list. May we also have the address of the reporting practice? In some places where there are many descendants of

the family there might be an increased opportunity for intermarriage and consequent reinforcement of any inherited characteristics.

The problem, and the opportunity it presents, does not end here. Elsewhere in this issue is a paper suggesting a possible relationship between handedness and the direction of spiral of the umbilical cord. Observations of this fact and of the fact of handedness in later years are seldom made by the same observer but there are no reasons why these two phenomena should not be related in a prospective study. We could begin with the Kerrs. Some of us attend confinements in their families where direction of cord rotation could be related to family history. Equally, interested practitioner obstetricians might repeat the observations of Malcolm and Pound, keeping records in such a way that they can follow up their cases at an age at which handedness can be unequivocally determined.

The exact manner in which these records are kept need not be laid down but we would like to know who is interested to collect information concerning both these matters. Those who would like to do so are asked to use the appropriate notification form at the end of the *College Journal*.

As a man's umbilical cord is, so may be his swordhand and his stairways. Who knows but what the helix of his DNA may be similarly reversed?

#### JOSEPH GUY OLLERENSHAW — 1903–71

**G**UY was a persuasive compound of energy, enthusiasm and compassion. His whole life reflected his vision of truth in action. Those whose paths were crossed by his counted themselves fortunate to have gained such a friend. True to his Quaker upbringing he spent part of every Sunday in silent communion: he called it "recharging my batteries". He was popular only in the primary sense of "pleasing to the people" but was the last person to court popularity for its own sake. Indeed, he was ready to be in a minority of one if his own ideals demanded this; yet his mind was always open to argument and new ideas. His first contribution to modern group practice in Skipton had already been made in 1939; and in 1971 he was still planning, this time a merger of two large practices.

His work for the College fell into three phases. Ollerenshaw was an obvious choice for the Foundation Council into whose work he entered eagerly. He was a member of the undergraduate education committee in 1953 and 1954, as well as chairman in 1954 of a special committee on criteria for membership. In 1955 he was the first chairman of the Board of Censors. At nearly every meeting in those early years his voice was to be heard on the side of the good doctor doing his proper work of attending upon the needs of his patients. He was not out of sympathy with research or education; he just didn't want *scientia* to dominate *caritas* at the expense of ordinary people.

The second phase of his College work was in the faculties. He helped to found both the East and West Ridings Faculty (forerunner of the Yorkshire Faculty) and also the Merseyside and North Wales Faculty. He served on the board of his own faculty from its foundation until elected Provost in 1961–63. Like Will Pickles he was proud of his Yorkshire ancestry. Like a good Yorkshireman he never lost his zest for life and a sense of fun. Nursery schools, amateur dramatics, dancing: all innocent amusement had his support.

From 1968, his third phase of activity in the College was as a member of the working party and then the Committee on Fellowship. He knew too much about serious illness at first hand to underestimate the importance of good doctoring as the most important standard of excellence. When considering the criteria for fellowship it was Guy who first used the phrase, later adopted in the final report, that the candidate should be someone to whom the College motto was particularly applicable. He did all he could to ensure that someone who was "just a very good doctor" should be considered for fellowship along with, or even ahead of, the committee man or those involved with research or teaching.

His friends will miss him but his wish would be to be remembered, not mourned. What will we remember about Guy? His modesty, his sincerity, his humour and above all his compassion. The College was well served by a good friend. *Cum scientia caritas*.