

# On re-reading Trollope

The first time I read Trollope's *Barssetshire* novels was not long after I completed my English degree. At the time I had no particular knowledge of, or interest in, medicine or general practice, other than as a patient. On returning to *Doctor Thorne*<sup>1</sup> a few weeks ago, I was fascinated to discover Trollope's description of Dr Thorne at the start of the novel. Trollope wishes to explore the social attitudes towards and between GPs and physicians; and naturally he focuses on attitudes to money.

When I joined the College 2.5 years ago I was rather baffled by references made to GPs' interest in money. Frankly, it seemed to me rather obvious that GPs, like all of us, were interested in their remuneration. In previous posts I had worked with other professionals including, for example, lawyers, and they were certainly interested in money. Indeed, had you asked me 3 years ago which doctors I considered were most interested in their income, I would have assumed that it was consultants, since most of them have private patients. But gradually I began to understand that the idea that GPs were particularly interested in money was a truism within the medical profession, and an essential part of the longstanding attitude of physicians to GPs and their apothecary predecessors. Likewise, in the legal profession barristers have never dealt directly with clients and even send their clerks to deliver their bill to a solicitor.

In his description of Dr Thorne, Trollope demonstrates that the key to the issue is not really money but social class. A physician such as his rival, Dr Fillgrave of Barchester, is in fact as interested in money as any Victorian gentleman was. Trollope makes sure we understand this. Later in the novel, he attends the *nouveau riche* Sir Roger Scatcherd, who refuses to see him. Lady Scatcherd tries to give Dr Fillgrave £5 in cash to appease him, but in his anger he refuses the money (despite dearly wishing to accept it) in order to show his superiority in social terms to this low born 'lady', who should not presume to offer cash to a physician as though his

services can be bought like those of a common tradesman.

Trollope's eponymous hero is a GP but, to illustrate the absurdity of the attitudes displayed towards such GPs, Dr Thorne is also a qualified physician. His qualifications and abilities are undoubtedly equal if not superior to those of Dr Fillgrave. The problem for his fellow provincial physicians is that he does not behave like a physician who, while charging a guinea for a consultation, 'should take his fee without letting his left hand know what his right hand was doing'. Instead, as soon as he arrives in Greshambury, he makes it known that his 'rate of pay was to be seven-and-sixpence a visit within a circuit of 5 miles, with a proportionally-increased charge at proportionally-increased distances'. And he would even 'lug out half a crown from his breeches' pocket and give it in change for a ten-shilling piece'. This demonstrated to other physicians that 'Thorne was always thinking of money, like an apothecary, as he was'. Instead he should have 'had the feelings of a physician under his hat, to have regarded his own pursuits in a purely philosophical spirit and to have taken any gain that accrued as an accidental adjunct to his station in life'.

Not only does he behave like an apothecary in matters of money, Dr Thorne also does so in his approach to his work:

'not making experiments philosophically in *materia medica* for the benefit of coming ages — which, if he did, he should have done in the seclusion of his study, far from profane eyes — but positively putting together common powders for rural bowels, or spreading vulgar ointments for agricultural ailments'.

In contrast, Trollope describes Dr Thorne, when introducing him to us, as responding to the needs of the community he serves:

'As was then the wont with many country practitioners, and as should be

*the wont with them all if they consulted their own dignity a little less and the comforts of their customers somewhat more, he added the business of a dispensing apothecary to that of a physician.'*

In the provincial medical world Dr Thorne's approach is an anathema because it goes against the whole philosophy of the physician:

'*The guinea fee, the principle of giving advice and of selling no medicine, the great resolve to keep a distinct barrier between the physician and the apothecary, and, above all, the hatred of the contamination of a bill, were strong in the medical mind of Barssetshire.'*

Interestingly, however, by 1858 when the novel was published, Trollope suggests that these attitudes were no longer universally held. While in his arguments with Dr Fillgrave through the pages of the local press, such as the *Barssetshire Conservative Standard*, Dr Thorne is out of tune with his medical colleagues, there is much greater balance at national level:

'*The Lancet* took the matter up in his favour, but the *Journal of Medical Science* was against him; the *Weekly Chirurgeon*, noted for its medical democracy, upheld him as a medical prophet; but the *Scalping Knife*, a monthly periodical got up in dead opposition to *The Lancet*, showed him no mercy.'

Despite this, nearly 150 years later the vestiges of these attitudes to social class still remain.

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## REFERENCE

1. Trollope A. *Dr Thorne*. London: Chapman & Hall, 1858.