JAMES GREIG SOUTAR, M.B., C.M.EDIN.

JAMES GREIG SOUTAR was a man whose value to his day and generation and real eminence in his profession can in no way be estimated from his conspicuousness outside the area where his work lay and the circle of those who were fortunate enough to know him well. He passed away as quietly as he lived, having characteristically continued in harness as long as it was humanly possible.

Born on November 4, 1859, at Golspie, on the east coast of Sutherlandshire, he was the eldest son of Dr. Robert Ker Soutar, a native of Bervie, Kincardine, who held the post of medical officer to a group of five parishes, of which Golspie was the centre. From the age of 8 to that of 15 his son was educated at the local public school, at that time *sub ferula* of a notable man, the late Mr. Thomas Fraser, whose pupils earned a high encomium for their classical attainments from no less an authority than Gladstone. After a "finishing" session at Watson's College in Edinburgh, James Soutar entered Edinburgh University in 1875, and there, and at the school of the Royal College of Surgeons, Edinburgh, he acquired his medical education. Academic studies, however, by no means monopolized his interests, for he found time to develop those powers of a gifted speaker which were so well known to the members of the Association in later years, and which, combined, no doubt, with his genial personality, won him the unprecedented honour of occupying the Presidential Chair of the Royal Medical Society of Edinburgh for two successive years. The same gift led him to take part at this time in politics, in the Liberal interest, including Gladstone's famous Midlothian campaign. He also manifested a taste for amateur acting, and for a time was strongly drawn by the glamour of the stage. He is stated to have been a facile writer both of prose and verse, but this was little cultivated by him in later life, though what he did write was always admirably expressed. As regards outdoor sports, he played cricket in his younger days and always enjoyed watching county matches, while golf in his later days afforded him recreation for a time, and he also was fond of trout-fishing.

After qualifying with distinction in 1881, Soutar became Resident

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Surgeon at the Royal Infirmary, and was also appointed Demonstrator of Anatomy in the University Medical School; but he soon decided to take up the study of mental disease, and after a short period with Dr. Rorie at the Royal Asylum, Dundee, he obtained the appointment of Assistant Medical Officer at Barnwood House Registered Hospital, Gloucester, in 1883. Here he had the advantage of serving under Dr. (afterwards Sir) Frederick Needham, to whose influence he has expressed his indebtedness, and whom he was destined to succeed as Resident Medical Superintendent.

Soutar had adopted the study of psychiatry with the intention of ultimately practising at the Bar in that line, and with this view, while Assistant at Barnwood House, he went through the necessary legal course to qualify him for being called. But his plans underwent a change, and for reasons, as he said, not connected with his own inclination, this intention was abandoned. Had he seen fit to proceed, there can be little doubt that, with his powers for clear thinking and fluent and forcible expression, he would have gone far in the legal profession.

In 1887 he married a Gloucester lady (daughter of Canon Clarke, the Precentor of the Cathedral), who survives him; and in the next few years two sons and a daughter were born, the eldest of whom, Dr. Alan Ker Soutar, is now School Medical Officer to the Isle of Man Education Authority.

Dr. Needham having resigned his post at Barnwood House on appointment as one of the Commissioners in Lunacy, Soutar was chosen to succeed him in 1892. For some twenty-seven years he devoted himself unsparingly to the welfare of the hospital and its inmates, rarely leaving the institution, except for his annual holiday, or to attend a medical meeting. Although amongst the earliest in the specialty to entertain ideas concerning the influence of the endocrine glands, and to encourage the use of thyroid extracts, he had little confidence in the physiological approach to the treatment of mental disease, believing, as he said in his presidential address, that "the mind diseased is not wholly to be comprehended by chemical analysis or microscopic investigation, that the balm which helps or heals often has no place in any published system of therapeutics," and that psychiatric success will largely depend "on the proved possession of inborn qualities of character, capacity and feeling." Such qualities he himself possessed in eminent degree, and to them was largely due his success both amongst hospital patients and later amongst men disabled in the war; in fact his attitude of mind, though it rendered him conservative medically

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and in his administration—even unduly so in some respects—in effect was in the direct line leading to modern psychotherapy, and in so far his views were in advance of the rather materialistic outlook fashionable in psychiatry during the greater part of his term of office at Barnwood House. In keeping with this attitude he was disinclined to encourage laboratory work, and placed his chief dependence on the clinical aspect, especially on personal intercourse with the patients, with whom he mixed much in an informal way, singling out and conversing with them individually. Strong, even-tempered and self-controlled, and withal genial and sympathetic, he was well fitted to influence those who found themselves under his care. That this freedom of intercourse, however, was not without its risks was shown by the fact that on two occasions he sustained serious injury, once when the tendons on the back of one arm were badly severed in saving a suicidal patient from throwing himself through a broken window-pane, and once when his nasal bones were fractured by a paranoiac. Amongst the patients in general, however, he was regarded not only as a physician, but as a friend. With the officers and staff he was highly popular, notwithstanding his expectation from them of a very high standard of work; and though this might in a different type of man have at times been regarded as almost exacting, he was so delightful a chief that it was never grudged. Needless to say, structural improvements were not neglected, and the hospital made marked advances under his control.

Outside the institution Dr. Soutar's opinion was much valued by his medical colleagues as a consultant. He was also interested in the work of the British Medical Association, and when their annual meeting was held at Cheltenham in 1901, he was elected Vice-President of the Section of Psychological Medicine, and also served on the Local Executive and Reception Committees.

It was, however, the Royal Medico-Psychological Association—which he joined in 1885—that provided him with his chief opportunities for the expression of his views and for co-operation and friendly intercourse with his brother psychiatrists. Amongst the members he was extremely popular, and his speeches, marked by sound sense and lucid and cultured expression, were always received with pleasure and profit—indeed he came to be regarded unofficially as the orator of the Association. His election to the Presidency for the year 1912–13 met with universal approval.

Dr. Soutar's Presidential Address, though short, was off the

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general track of such dissertations, and it was highly characteristic of the man.

After welcoming the Association to Gloucester, which in fact was its birthplace, as it had been founded at the County Asylum there in 1841, under the name of "Association of Medical Officers of Hospitals for the Insane," he proceeded to offer some shrewd comments upon "two drifts of opinion" then current. The first was the view that continental workers were "outstripping us in the study and practice of psychiatry." Against this he protested, pointing out that the English mind, vigorous in its grasp of facts, is slow to construct or accept systems which cannot be reduced to definite statements and checked by comparison with facts. He doubted whether in the application of knowledge to treatment, or in the search for, and devising of preventive measures, British psychiatrists were excelled by any. The paucity of State-supported clinics and research laboratories as compared with some other countries was not due to remissness, but to lack of sufficient evidence that the benefits to be derived from them were commensurate with the cost.

The second subject had reference to the establishment of diplomas in psychiatry, then under consideration. He sounded a warning against attaching undue importance to such qualifications, seeing that the subjects for the diploma could never cover the whole ground, and it would be difficult to make them adequate for every branch of the specialty. Different men would adopt different lines, but the majority of psychiatrists would be, as it were, "general practitioners," able to appreciate if not to pursue research, deft in the practical application of knowledge, and taught by intimate experience that success in treatment largely depends on the personal endowments of the physician, so that the possession of a diploma should never be the sole passport to advancement in the speciality. If these views were regarded as reactionary, the reaction advocated was "against the pessimism which petrifies British effort by belittling it, and against the optimism which overloads with exaggerated hopes—the precursors of inevitable disappointments."

One need not necessarily be in full agreement with every detail of the views expressed in order to appreciate that such a caution may be highly salutary. But it is interesting also to note that much of what was advanced virtually, though probably unconsciously, constitutes an apologia for Dr. Soutar's own position and highly successful system of practice, and that his subsequent proficiency

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in the use of psycho-therapeutic methods was in some sort a development of those views and that practice.

Dr. Soutar's interest in the Association by no means lessened with the end of his term of office as President. He continued even more than before to assist in its work and attend its meetings as long as his health allowed. His last appearance was at the autumn meeting of the South-Western Division at Dorset House, Clifton, on October 29, 1931, when he was looking well and cheerful, and joined in the discussions with all his old clarity of thought and facility of expression. To a friend who visited him some ten days before his death he spoke much of the pleasure he had found in the Association, and to the February general meeting this year he sent a message of appreciation and of regret that he could not be present.

The war years brought to Barnwood House, as to all such institutions, many difficulties, which, though successfully overcome, involved strain on the responsible head. In 1916 he developed a duodenal ulcer, which necessitated an operation in the following year. He continued to suffer, however, and having piloted the institution through the rough waters of the war years, at the end of 1918 he decided to retire.

His resignation was accepted with the greatest regret by the governing body of the institution, who paid a most appreciative tribute to his professional ability, administrative tact, and devotion to duty during his twenty-six years service; while the whole staff, in presenting an address and a piece of plate, took occasion to express their esteem and affection for him and their sorrow at his departure.

It was decided to settle no further away than Cheltenham, to which he removed with his family early in 1919, in the expectation of enjoying a leisured retirement. This, however, was not to be, for not only was he involved in the claims of a private practice which ultimately attained large dimensions, but in May of that year his services were secured as a member of the honorary medical staff of St. Martin's Home at Cheltenham, so that, as he subsequently admitted, he had never had to work harder in his life.

St. Martin's Home had been opened at Cheltenham on March 29, 1919, by the Gloucestershire Branch of the British Red Cross Society for the treatment of paralysed ex-Service men. In some of these cases the disability arising from spinal injury was partially of a functional character, and such patients were handed over by the surgeons to Dr. Soutar, who spared neither time nor trouble in

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their treatment, visiting them daily, and often devoting hours to them. In the autumn of the same year further scope was afforded him by the opening, in connection with the Home, at the request of the Ministry of Pensions, of a clinic for neurological cases, of which he, assisted by Dr. J. Rupert Collins, took the out-patient department, to which were allotted ten beds for cases requiring in-patient treatment. Speaking of his work at this period the commandant of the hospital, Miss A. H. Yonge, A.R.R.C., writes: "Dr. Soutar was a great believer in team work, and his enthusiasm spread to all who worked under him. The patients idolized him" —(years after it was learnt that he was affectionately known amongst them as "Father")—"and everyone in the hospital missed his presence on any day when he did not visit it. If any man ever earned the name of 'the beloved physician,' this indeed applied to Dr. Soutar, whose passing is felt as an irreparable loss by those who knew and loved him."

The Ministry of Pensions Clinics closed on September 1, 1922, after three years' work, during which 87 in-patients and 377 out-patients were treated in the Neurological Department, the daily attendance at the most active period averaging 30, so that the amount of work entailed upon Dr. Soutar and his colleague may be imagined. As regards results, it is stated that at least 80% of the "neurasthenic" cases were cured, while those with organic troubles as well were very greatly relieved. Dr. Soutar's "prize patient" was a man, previously quite helpless owing to a gunshot wound of the spine, who was enabled to get about on a tricycle and to earn his living at secretarial work.

The remainder of the Home carried on for another three years, and then, its work being done, closed in August, 1925.

In private Dr. Soutar, as has been said, conducted a very successful practice, not only in psychiatry, but in functional and general neurology, and medical men both in Gloucestershire and in the surrounding counties availed themselves of his professional ability and wide experience. With the unimportant exceptions already touched on, he had no hobbies, and his cases seemed to absorb all his interests, as they occupied most of his time. At the beginning of the year 1931 his heart rather suddenly began to give him trouble, and he had to curtail his practice and take long rests, though he always returned to work. Early in the present year he had a severe heart attack from which he did not rally, and for some weeks before the end he suffered acutely from cardiac asthma. With invincible optimism, he long maintained that he would recover

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once more, but if he could not work again he had no wish to linger on. He passed away very peacefully on February 29.

The kindly sympathy characteristic of Dr. Soutar did not end with his patients. As was said by a colleague and intimate friend, "he would do anything for anyone," and he was very generous in giving financial aid in case of need. Possessed of a fine intellect, a strong character, an irresistible charm of manner, and other gifts and qualities which might well have enabled him to take a more prominent position had such been his desire, he preferred to devote all in personal service to his fellows rather than to science or philosophy, or to mere self-advancement. But it may well be doubted whether he could in any other way have lived to better purpose, gained a higher degree of esteem and affection, or aroused in those who were privileged to be his friends a more genuine feeling of thankfulness that it had been granted to them to know so fine and so intensely lovable a personality.

W. R. Dawson.

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