

# James Henderson Scott – an Appreciation

Professor Bernard McCartan

Honorary Professor of Dental Anatomy, Royal College of Surgeons in Ireland.

I can't recall when I first met James Scott. He lived not far from us and he was a parishioner of our local church. There were very few catholic families on the Malone Road in the 1950s and my parents would probably have been able to name every catholic household within a quarter of a mile of our house.

As I grew older I realised that Scott was different. For one thing, my father respected him; even though my father was economical with his respect. Also, he was a convert to Catholicism; converts were always objects of just a little suspicion; more so in James Scott's case as he was also an intellectual. My growing realisation of Scott as the great Ulster liberal would not have developed until I began to take an interest in politics at about age sixteen. But once I was aware of that, it was hard to avoid him on the letters page of the Belfast Telegraph. As I was rejecting the founding sectarianisms of the northern communities, I found his views sympathetic, but somehow he always seemed to express them in a way that was uncomfortable for the reader.

He always cut a strange figure. An old man with a contorted body and walking sticks in each hand is frightening to a small child. Even when I reached the stage where all adults no longer seemed very elderly, James Scott still seemed to be very old indeed. It was only when I reached college and became his student that I discovered that he was relatively young and, indeed, when I first had known him he was probably still only in his thirties.

I recall vividly the first anatomy lecture. We were crowded into this strange room, wider than it was deep, with prosected specimens laid out behind and below the top rank of benches. I was sitting over by the window which had heavy blackout curtains which, even when pulled back, still obscured a large part of the window. We were well used to blackout in lecture theatres, but this seemed excessive. Scott hobbled in and outlined the course, and how the lectures, seminars and practicals were organised. Then he said that there were some of us whom he would see at every lecture over the next eighteen months, which would disappoint him greatly as this was our last chance to be university students before we would disappear to the clinical school in the Royal Victoria Hospital. Some of the class were aghast, some took it as a joke, and a few of us took it as an invitation. It's interesting in retrospect to see that while I took to heart his suggestion that I shouldn't attend all my lectures (which I interpreted rather liberally), I tended to apply this principle to the other subjects that we studied those two years, and not to anatomy.

The reason for the blackout soon became obvious; Scott lectured in total darkness, broken only by the occasional slide projected onto a small screen to one side. The lectures were short, rarely more than twenty-five minutes. Any attempt to pull back the blackout curtains was met with a sharp reproof. James

Scott did not approve of students taking notes and was determined to thwart any effort. This was almost too much altogether for some of the class. They could not conceive of leaving a lecture without at least four pages of neatly written notes to read over after tea, back home in the suburbs where they would be safe from the unbridled licentiousness and freethinking of night life in Queen's University in 1962. We, on the other hand, were desperately searching the university area for that same unbridled licentiousness and freethinking that always was rumoured to be about to happen in a flat in Fitzroy Avenue or Camden Street, but we could never track it down.

James Scott had a system. He had written his lectures up as two textbooks, one on general and one on dental anatomy (with co-authors, who seemed unimportant to us). These were both our texts and our lecture notes. The illustrations in the books were the same slides that he showed in his lectures. The labelled photographs of prosected specimens were a manual when we sat at the back of the room, behind the benches, studying the originals on their formalin-smelling trays and pulling the strings to lift up and identify the structures. He told us that he revised both books, alternately, in a two year cycle. As the anatomy course extended over five terms, this meant that we always were expected to buy a new edition of one or other book. He was quite frank with us that this was to boost his income. However, when I took my own two copies off the shelf recently, from where I take them as first choice when I have to look up anything anatomical, I found that only one had been bought new, while the other had previously been the property of one Arthur J Taylor, whom most of my contemporaries would remember with great affection.

His colleague (sidekick, more appropriately) was Barry Brown, rumoured (incorrectly, as it turns out) to be an ex-Jesuit. Some of the class were unsure whether to worry about this or to rejoice as he had obviously extricated himself from the very worst excesses of popery. He was a consultant orthodontist in the Royal Victoria and taught part-time in anatomy. Brown was my anatomy tutor. I recall the first tutorial. "Who has heard of Gregor Mendel?" A few of us, a very few of us. "Who has heard of Teilhard de Chardin?" One of us, me. "Who had read *The Origin of Species*?" One of us, not me. And so the tutorials ran all year. I can't remember a single anatomical topic being covered and I suspect that given another term or two we probably would have ended up sitting in a circle reading *Ulysses*.

It is very difficult now to describe how this all stood out against the drab anti-intellectualism of the faculty of medicine in the early sixties. Most of our other teachers were dreary and dull. Some seemed to have been washed up on the shores of Northern Ireland having failed to make it in a 'mainland' university. Some had obviously put their minds into retirement as soon as they had got their Ph.Ds. The dental anatomy department stood out brightly against this.

Every now and then Scott would disappear for a while and we would hear that he had had another bleed. He was severely handicapped by his arthritis and so he fuelled himself on cortisone. His choice, taken apparently quite deliberately and against the advice of his doctors, was for a short and active life rather than

a long and chair-bound one. I think he was a man who could not have borne the thought of being inactive. Large doses of cortisone had their predictable effect: frequent gastric perforations, frequent bleeds, frequent hospitalisation for transfusions. But each time when he returned to the department he seemed unchanged.

Scott appeared to have believed that the best way to make students learn was to tell them what was coming up in the examination papers, having carefully designed the questions to cover the entire course and thus to maximise our study of anatomy. There was a rumour, spread by the class ahead of us, that when our papers had been marked, Scott would leave them out for us to read so we could see his annotations, usually in the form, "Better ask this in the oral." Throughout second and third year we had studied at nights in the dental anatomy department. It was our home, our base, our centre for planning which pub to go to later. After he had written the two examination papers we heard that Scott had been admitted to hospital again. Whatever truth there might have been in the rumours of papers left out to read, this clearly wasn't going to happen this year. One evening Dr. Brown appeared, bustled about making his presence very obvious to us and spent some time in Scott's office. Then he left and we realised that the office was unlocked and the lights were on. Rather cautiously, and rather apprehensively in case he might return, we burgled the office. There was a filing cabinet with a handwritten notice on the front, "Examination papers. Confidential. Do not disturb." Inside were folders, one for each student, clearly and prominently labelled. As promised, the marks were written on the scripts with the comments about questions to ask in the forthcoming viva voce. All but one of the class were there, scribbling on notepads before some porter would appear and chase us all. An hour later Dr. Brown was back. "Oh! I've left Dr Scott's office open. I hope no one looked inside."

However, there was another James Scott in my life. The New Ireland Society had been founded in Queen's by some students and recent graduates to create a more thoughtful approach to nationalism. Scott was involved in some of the study groups set up to foster the society's aims. I remember a discussion on whether the Irish Constitution should give recognition to partition. I was surprised that Scott, the great liberal, felt that to be a concession too far to unionism. I gradually distanced myself from the society as I came to realise that the intellectual basis for the new nationalism was no sounder than the old 'wrap the green flag round me' variety, and that partition was not the cause of poverty and deprivation in Northern Ireland.

My last encounters with Scott were when I was organising bread and cheese lunches for War on Want. I had been involved with a group of friends for several years and then suddenly they had taken their degrees and left while I was taking a five-year degree, and I ended up in charge both of the lunches and of the money we collected. This responsibility took me to meetings of the wider War on Want organisation in Belfast. Much to my surprise, James Scott was involved here as well; I had never seen him as a humanitarian.

Once I had become clinical student in fourth year, I had no further academic contact with Scott. We would hear from time to time of his doings. When Queen's appointed the first professor of periodontology, it was rumoured that Scott had painfully dragged himself up to the Royal so he could stand in the entrance hall of the newly opened school of dentistry (a considerable step up in respectability for dentistry from the old school on the top floor of the VD clinic) and say to each passing colleague, "Have you heard? They've appointed a professor of circumcision!"

When Queen's belatedly gave him a personal chair in 1964, we all went to his inaugural lecture. To our bewilderment, it was delivered in blank verse, alexandrine iambic hexameters, and had nothing whatsoever to do with anatomy or dentistry but rather man's inhumanity to man.

I had left the my junior staff post in the Royal in early autumn 1970 to train in oral surgery in Sheffield, so I did not hear immediately of James Scott's death that November. I sincerely mourned him as one of the few inspirational teachers that I had encountered in Queen's. He remains to this day one of my inspirations and, if ever I write a book, it will probably be dedicated to him.