The Age of New Knowledge: Situating Calcutta Medical College and Social Changes in Colonial Bengal

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Abstract

This article aims to examine the development of medical education in Bengal Presidency and its assimilation by the Bengali people in nineteenth century. It also desires to explore and re-search the development and expansion of medical education and knowledge through the newly established medical institution, Calcutta Medical College. Throughout the century there was a constant flow and exchange of new knowledge which gradually brought various societal change and advancement in the Bengali society. Calcutta medical College provided opportunity to the indigenous pupil to know about a new and advanced medical system along with the chances to adopt a novel profession. This made a drastic change and its reflection on the contemporary Bengali society was noticeable.

Keywords: Medical Education, Calcutta Medical College, New Medical Knowledge, Social Change.

“When then we consider, how elevating is the study of Anatomy and Physiology, and the Natural and Physical sciences on which the whole art of medicine is based, how exalted are the notions which those sciences give of the wisdom and power of the Omnipotent Creator of Universe:– when we reflect how incessantly are the best qualities of man’s moral nature called forth in the exercise of the profession of medicine, and when we finally bear in mind how inestimable is the benefit conferred on the community at large by the exercise of that profession, we are finally justified in saying in the words of those who promoted the foundation of this institution (Calcutta Medical College), that in the Medical College there has been established ‘a moral engine of great utility and power’, not merely useful in supplying the wants of the State, but instrumental in elevating and at the same time benefitting the people of the country at large”.

W.C.B Eatwell [1]

Introduction

Nineteenth century attracts the attention of all of us because of its unique character. This century had built a bridge between the intellectual tradition of the West and the East. Bengal was the first region in the Indian subcontinent, which bore the brunt of British political, economic, social and cultural bend and by absorbing that Bengal had tried to shape a synthesis, which prevailed almost until the end of the British period. Throughout the nineteenth century, Bengal had first witnessed the encounter of culture and exchange of new knowledge and interestingly, had sustained contacts between western science and Indian scientific tradition. Here the first educational establishment fashioned on western system was set up. In medical field also Bengal served as a model for this system for the rest of the subcontinent, as the Presidency had the first Government medical college of western pattern and was the first to have an organized medical service also.
This work intends to start with the year 1835, the foundation year of Calcutta Medical College (CMC). The newness, that had already entered into Bengal confirmed and strengthened its position amongst the Bengali society through its institutionalized form of education. Without a proper medical institution and education programme it would have been almost impossible to spread an alien scientific knowledge so vastly among the Bengalis. Thus was born the first medical college in India, CMC, with the introduction of western medical system in it.

The nineteenth century was flooded with knowledge, experiments and researches in almost every field including medicine and medical education. New knowledge had been transmitted to India (in general and Bengal in particular) by the British from the very first days of their access into the socio-political scenario [2]. Numerous medical knowledge of the west, produced much prior to the east, were dispersed through medical classrooms, dissection rooms, laboratories in Calcutta by the colonial agents and forces. Gradually, these ideas gained momentum and started circulating among the recipients.

It is true that colonization of distant land required not only military strategy but more than that including the issue of preservation of health of the colonizers. Furthermore for ensuring proper commercial exploitation also, which British wanted initially, health considerations come up.

Thus public health, hygiene, necessary treatment and other medical issues became paramount in shaping colonial expansion in a new land right from the days of trading companies. Since eighteenth century, the European professionals, who came on different assignments, wrote about the health conditions in the tropics. Medical board was formed by the Company to monitor health conditions and necessary requirements. But problem occurred when they observed that a constant resource of medical men from outside was necessary, but was becoming really expensive proposition for the Company. Initially they did it. Once the wars with Indian Princes were over and Company had established its rule over the larger part of India, it decided to introduce modern medical education and to train the local talents then available. Thus was born the Native Medical Institution in 1822-23 in Calcutta [3].

Prior to the establishment of the western medical system in Bengal there already existed two types of major indigenous medical systems, i.e. Ayurveda and Unani. The education system was informal in nature. The Orientalist members of the British officials were glad with the Indian culture and in support of imparting both the medical systems simultaneously to the ‘natives’ [4]. The Native Medical Institution started with its new character of dual medical systems (i.e. imparting western and indigenous medical systems simultaneously) [5]. Gradually, with the passage of time, the gaps and flaws of the institution started becoming prominent and the Government realized the need of a better organized medical institution, which came in the form of Calcutta Medical College in 1835.

The western medical system and techniques had already become familiar to the Bengali populace without having any proper educational institution from the very initial days. The first reason was the missionary activities in different parts of the Presidency and secondly, because the British had started engaging Bengalis in the hospital as hospital assistants dressers etc. The preliminary new knowledge, its difference with the indigenous systems and over all its better utility were well understood by a small educated section of the society. But it was limited and they didn’t have chance to spread it out to the larger part of the society. This small knowledge gaining process got momentum after the establishment of CMC which gave the legal right and honorable status of ‘Doctor’ to the Bengalis as well as Indian students of that period. This knowledge transfer process could able to make them empowered by logical thinking and rational activities through proper educational institutions.

Calcutta Medical College: A Milestone

The first attempt for the introduction of a
proper medical training was undertaken by Lord William Bentinck [6]. As a fruit of his effort and long persuasion, government order was passed to set up a medical college in Calcutta. The resolution was passed on 28th January, 1835, which is observed as the Foundation Day of the College [7]. However this gave the history of medical science in India a novel dimension towards ‘modern medicine’ or advanced medicine as well as helped to achieve a world acquaintance in this field. Calcutta Medical College did not appear accidentally. It took several years to give medical education an organized official shape.

We know that up to the establishment of CMC, the Native Medical Institution along with Sanskrit College, and Calcutta Madrassa were functioning. But the strength and ability of these institutions were neither satisfactory nor it could fulfill the immediate needs. 1830s brought enormous political and cultural changes in India. Modification and revision in almost every sector started taking place with Lord William Bentinck’s arrival to India as Governor- General in 1828. He appointed a committee to enquire into the condition of the existing medical institutions. The committee was comprised of six members: Surgeon J. Grant, Apothecary General; J.C.C Sutherland, Esq. Secretary to the Education Committee; C.G Trevelyan, Esq., Deputy Secretary Political Department; Assistant Surgeon Spens, Body Guard; Assistant Surgeon Bramley, Mrine Surgeon, Baboo Ram Comul Sen [8].

The members of the Committee visited various institutions i.e. the schools and colleges of Bengal to get a fair picture about the present condition of medical education and existing demands and requirements for formal medical education. They talked with people from different ideological background, but the most interesting and effective response and evidence came during the unannounced visit to Duff’s College. With Duff’s co-operation the Committee questioned the senior students of his College especially about the idea of a Government medical college for the Indians.

The students responded in a positive way to the question of handling a dead body for anatomical purposes, even while acknowledging that such action would be contrary to the traditional beliefs of Hinduism. After having an affirmative response from the student section and observing the ruined condition of existing medical education in the major three institutions due to their non availability of proper language training, dearth of books, and lack of dissection training, the Committee in its report (submitted on 20th October, 1834) said that, “A knowledge of language we regarded as a ‘sin qua non’... We wish them to be able to drink out of the fountain head instead of depending to allay their mental thirst with driblets of translation”. The Committee recommended for establishment of a new medical institution on an extensive scale where the various branches of medical service cultivated in Europe should be taught and as near as possible on the approved European system [9].

By the Government order of 1835, the Native Medical Institution and also the medical classes of Sanskrit College and Calcutta Madrassa were abolished with effect from 1st February, 1835, and a new medical College was founded for imparting instruction in the various branches of medical science on the most approved European system. Government G.O. No. 28 of 28th January, 1835.

Age of New Knowledge and Social Change
CMC was started with fifty students, limited infrastructure and staffs initially. There was no distinction of caste, creed or religion. Dr. Mountford Joseph Bramley was placed in charge of the institution on a salary of Rs. 1200 per month (later designated as Principal) along with Dr. Goodeve and Dr. B.O’shaughnessyas his colleagues [10].

Madhusudan Gupta, a vaidys, Professor of Native Medical Institution was transferred with two assistants from the Sanskrit College to the new Medical College. There was a course outline for the graduates which comprised of five departments namely Surgery, Medicine, Anatomy, Chemistry and Meteria Medica [11]. Most of the students were of local upper caste Hindu or Brahmin
at first and later on one Christian joined but there was no Muslim student for first year. Subsequently some Muslims came but they became always minority in CMC. On leaving the College, the native graduates were to be employed as sub-assistant (SASs), in the discharge of duties of medical attendant in large dispensaries established in different parts of the country, on salaries ranging from Rs. 60 to 100 per month.

There was, however, no compulsion to enter Government service and were free to establish them for private practice [12]. Initially the College had no library, museum, apparatus or hospital to start with. Two skeletons were purchased through Bathgate & Company of Calcutta for Rs. 1500 and other anatomical preparations were imported from England. One Mr. Evans was appointed Curator of the newly established Museum.

However there was a gradual emergence of new and more sophisticated branches of medicine in CMC. The present century was full of experiments and researches in almost every branches of academia. Medicine was no exception. Slowly more coerces were started to be introduced by the British experts which was a result of an urge for experiment and contemporary need as well for better treatment. The evolution of courses in CMC throughout the Nineteenth century is important in describing a complete history of the development of medical education in Bengal. The chronological order of development of the departments of Medical College was like; Anatomy (1835), Physiology (1835), Medicine (1835), Forensic and State Medicine (1845), Anaesthesiology (1847), Dentistry (1861), Pathology (1871), Eye (1880), Obstetrics and Gynaecology (1882), Surgery (1900), Radiotherapy (1910), Pharmacology (1920), Dermatology and STD (1930), Chest and Respiratory Medicine (1946), Paediatric Medicine (1946) [13].

CMC not only brought expertise and skill in medical field but also paved the way to social modification in different angles. As the first example we can discuss about Pandit madhusudan Gupta who played a vital role to push Indians forward for the proper Anatomical knowledge. Despite an upper caste Hindu he dissected human body on 1836 with four of his students [14]. We know that the contemporary Hindu society was very much rigid about human dissection and till date nobody was dared to cross the prejudices and superstitions of the society.

Though the progressive minded students of Duff’s college were in favors of dissection because of the importance of Anatomical knowledge in medical science, but never performed before. It was Pandit Gupta who first made an example and gradually the orthodox society compelled to leave its age old conception of making someone an out-caste if dissection was performed. This became a landmark in the history of medicine in India by opening the gates of the tradition of modern scientific medicine in this country.

It is interesting to note here that the societal restriction and boundaries about women education was slowly attaining freedom through the activities of the then social workers throughout the nineteenth century. After the introduction of Calcutta University it got more momentum when Bengali women started to attain the classes of CMC. Under the Act of incorporation, none of the three Universities got the power to admit any woman to a University entrance examination. The question of admitting woman in Universities was first raised by the Registrar of Bombay University.

On 30th April 1875, he enquired of the University of Calcutta about the expediency of admitting females to the Indian Universities. Despite of receiving the letter of the Registrar did not express an opinion. But after this incident Calcutta University had to face a situation within a few months in which a woman candidate, Chandramukhi Basu, a pupil of Native Christian Girls’ School of Dehra, applied for the admission to the Entrance Examination of the University. Having a much debate the Syndicate resolved the problem by saying in favor of taking steps for the admission of women to the University Examinations. On 12th May, 1877 it was decided that the Entrance Examination should be the same as for the men but women should examined in a separate place under the supervision of women [15]. In the 1879 for the first time
women were permitted to take admission in Indian Universities. Kadambini Ganguly, along with Chandramukhi Basu in Arts stream was allowed to take their degrees at the convocation in 1883. Despite all round social discriminations and discouragement, female medical education continued to spread and flourish through the late nineteenth and twentieth century in Bengal as well as in India.

Mention may be made of in this connection that the Medical College of Calcutta opened its doors for women medical students for the first time in 1880s. But first woman student Mrs. Kadambini Ganguly was admitted in 1884 only and became the first women doctor in India [16]. In 1889 Miss Bidhumukhi Bose became the first Indian women graduate from Medical College. But interestingly Miss Ganga Agarwal was appointed first Indian woman house physician of Medical College in 1934 which means that it took 68 years for women to break the overt and covert gender bias in society.

Once the adoption process of western scientific methods and knowledge was done by the Indians they started to practice science within the colonial frame work as a method to assert their existence vis-à-vis the colonial rule. For Indians, science now emerges as a component to make enlightened India and to empower the recipients through education. Mahendra Lal Sircar was one such individual without whom the history of medical science is incomplete. He was one of the most distinguished graduates of the Calcutta Medical College in the nineteenth century (1833-1904).

He studied at Hare’s School but his predilection for science led him to the Medical College, where he was from 1854 to 1860, earning the Licentiate in Medicine and Surgery after a brilliant student career. In his second year he gave at the request of seniors and the concurrence of the professors a series of lectures on optics as applied to ophthalmology. The University of Calcutta granted him the M.D. after he passed first in the 1863 examination, being only the second such recipient.

Mahendra Lal Sircar strongly believed on the potential of science for all India and founded the Indian Association for the Cultivation of Science in 1876. This was the first effort towards institutionalizing Indian interest in western science. Sircar wanted this institute to perform two functions: one was the cultivation of and research in science by Indians and other was the popularization of science within the general populace. He set out his ‘nationalist’ agenda to create culture of science among the Indians. For him science was a metaphor of nationalism and this scientific spirit would be a clear indicator of national progress and status. It proves that while the British initially used their science to make a more proper and effective rule in India, the science education made the Indians so potential that they started to use it as a tool for nationalism against those British only.

Conclusion

Calcutta Medical College was designed to train the Indians students properly so that they could meet up the need of superior doctors than the early ‘native doctors’ in the army as well as in the civil stations. Rejecting vernacular language as the mode of instruction, the British imposed English as the medium of language in the new college. For the first time British Government took up the medical education programme officially for the Indians and to give them degree for private practices.

It is notable that, on one hand western medicine was officially started but on the other the training of indigenous medical systems was abolished from Sanskrit College and Calcutta Madrasa on the same year. The success of the Calcutta Medical College can be gleaned from a variety of contemporary sources. W.W. Bird stated that the Medical College students had considerable skill and ability, becoming excellent anatomists, and those native families were actually hiring students while they were still studying [17].

A commentator declared that the College inculcated "those habits of analysis which must be most important in its effects on the national character and social life of the Hindus. . . . The Medical College . . . now
equals many of the best and ancient schools of Europe. It affords the finest medical education” [18]. The heritage of the rigorous standards in the basic sciences of the medical curriculum in this century established through this College. The heights of achievement of early modern scientists were the fruits of the scientific tradition so successfully established in the formative years of the Calcutta Medical College.

The older concept of caste degradation due to touching dead human body and lower caste people disappeared with the arrangements of new status of the doctors as ‘daktars’ in the society. Gradually the demand for Western medical education increased among the ordinary people. It reached its zenith when the vernacular class was attached with Calcutta Medical College. Within a very short period medical education reached out to the mofussil areas also by attracting ordinary people. These people were neither financially nor academically suitable for the main English class (fees were high and English made obstacles sometimes for them). So the medical education, which had till then an elite characteristic, became a field of interest to the ordinary people of Bengal also. It is noteworthy here that the teachers of Calcutta Medical College were not always the English scholars, Bengali doctors were also considered as good teachers.

References
4. For more detail about Orientalism see Edward Syeed.
6. Lord William Bentinck (1774-1839), who was Governor-General of Bengal (1828-33) and later of India (1833-35): He was a reformer of the Benthamite persuasion and is best known for his suppression of such practices as suttee, female infanticide, and ritual murder and robbery.
8. Ibid, P 18
9. Ibid, P 18-19
10. Later Goodeve was appointed as the Professor of Anatomy and William Brooke O'Shaughnessey joined the Professor of Chemistry.
13. 175 Years of Medical College Bengal, Commemorative Volume.
15. The decision was taken because there was a strong opinion from the Bengali society that there should be a separate arrangement for women as they were prohibited to come in front the outer male persons (Purda Syatem).