THE HISTORY OF THE MEDICAL LIBRARY
AT THE UNIVERSITY OF MELBOURNE 1862-1967

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ABSTRACT

This work is an organizational history of the medical library associated with the University of Melbourne. The University opened the first medical school in Australia in 1864, and this same year marks the origin of the medical library. The small library encountered many obstacles in its first few decades of existence including the repeated threat of amalgamation with the main library, lack of funding and inadequate supervision and direction. The library dealt with these pressures, and with those appearing afterward, primarily shortages in both space and funds, to become a significant leader in the provision of library services to the medical community of Melbourne. The importance of the library lies not only in the fact that it was the first medical library in Australia at the tertiary level, but also that it played a significant role in the education of the first Australian trained doctors. The development and subsequent growth of the medical library is intimately related to the social, economic and political conditions that were present in colonial Victoria. The settlement of Port Phillip, the discovery of gold and the declaration of Victoria as a colony in 1851 were all factors which led to the establishment of a University in Melbourne, and as such must be explored before the history of the medical library can be understood and appreciated.
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STATEMENT

I declare that this thesis contains no material which has been accepted for the award of any other degree or diploma in any other university and, to the best of my knowledge and belief, it contains no material previously published or written by any other person except where due reference is made in the text.

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[Signature]

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I. Introduction

The Brownless Medical Library, positioned behind the medical school on the corner of Grattan Street and Royal Parade in Melbourne, is spread over three floors and has the capacity for expansion to include an additional two floors if required by the library. The facilities include a medical history museum, a history of medicine collection, two rooms devoted to housing a large collection of rare books and journals, the AMA archive collection created by Ann Tovell over a period of 30 years and donated to the library by her in 1994, an extensive audiovisual collection and viewing area, numerous network and CD-ROM workstations, and of course the storage of the monographs and periodicals which form the oldest medical collection affiliated with a university in Australia. The library, the recent recipient of renovations worth $60,000 in 1990, received a room for photocopiers, a new and larger reference desk, the extension of the loans desk, an extension of AV Unit to provide an area for group instruction, and the recarpeting of the ground floor.

The periodical collection contained within the library includes some of the only runs of particular medical journals in Australia. The library has always placed significant importance on the purchase of medical periodicals to provide up-to-date information to medical students, faculty and researchers, a tradition which has continued, the serial purchases by the medical library in 1994 accounting for approximately 83% of the materials budget. The Brownless Medical Library has a history of playing a leading role in the provision of medical library services to both the university and the larger medical community, providing classes in reader education not only for students in the life sciences, but also, in 1994, for general practitioners on how to access on-line databases. The library has remained the
base for the Central Medical Library Organization, an organization concerned with the coordination of medical library activities throughout the state of Victoria, though the future of the organization is now under question. The library is also active in developing and incorporating new technology into existing library services, the installation of Medline occurring in 1977, the introduction of the audiovisual collection in 1978, of an automated library system, LIBS 100, in 1983, and of Medline and other databases on the university network in 1993.

The original medical library at the University of Melbourne began as a small collection of books brought to Melbourne from England in 1862. The evolution of that fledgling library into the present Brownless Medical Library is the process which will be explored in this study, though completing this history does necessitate mention of the library beyond the year 1967. This study is an organizational history of the library, and not particularly concerned with the collections that it houses. The history of this medical library is of significance not only to Melbourne and Victoria, but also to Australia, because it was the first medical library to be affiliated with an institution of higher education in the country. It provided the means for study for the first medical students in the country and also supported practising doctors and researchers in the city of Melbourne at a time when there was only one other medical library in existence, the Medical Society of Victoria library. The exploration of the history of the library will rely to a great degree on analysing what took place in the past, as 'looking backward helps us to expand our understanding of how a society, a culture, or an organization arrived where it is, thus helping to determine the reality of the present and the prospects for the future' (Genz, 1993, p.270). The initial development and subsequent growth of the medical library can
only be understood and appreciated by an adequate understanding of the historical processes which acted upon, and continue to affect, the library. The library does not exist separate from its environment. As Reith (1984) states, the library cannot be considered apart from that environment, any more than history can be divorced from time or geography can be divorced from space. The agency is intimately linked to its surroundings; it is one facet of society that shares, contributes, and functions as a developmental process and artifact and neither follows nor creates society. The library is the product of society and not the basis of society. As such an organism, it is subject to change and cyclical renewal and modification of its functions and purpose, of the nature of its store, and of the method of product delivery (p.7).

The library, like other social institutions, is a product of history and to understand the formation and growth of the library, one must first understand the forces which acted to cause its eventual development. The social, economic, and political conditions present in colonial Victoria had a significant impact in the formation of the University of Melbourne, the Medical School and, subsequently, the Medical Library. The immigration which followed the settlement of Port Phillip, in particular the population boom following the discovery of gold in 1851, was accompanied by disease and overcrowding. Rapid growth in the population and the economy, in combination with the health problems brought about by this growth, a shortage of doctors, and feelings of antagonism towards both Sydney and Britain, all played their part in the eventual formation of a University. For this reason, this history of the medical library at Melbourne University will follow the natural progression of events following the settlement of Port Phillip in 1835. The development and growth of the medical library can then be understood as a process involving many diverse factors, and the influence that it has had on the medical profession and librarianship can be traced and appreciated.
II. Victorian Colonial History and the Establishment of the University of Melbourne

The development of the first medical school in Australia, and the first medical library attached to a university, is intimately associated with the settlement, and subsequent development, of colonial Victoria. Exploring the land around Port Phillip in early 1835, John Batman selected the site for the 'village' which subsequently became the city of Melbourne. This small settlement laid the foundation for a complex set of discoveries and changes which culminated in the opening of the University of Melbourne in 1855 and the opening of a Medical School in 1864. The town of Melbourne, which became a city in 1847, was in 1851 dissolved from association with the Port Phillip District of New South Wales as Victoria became a separate colony in that year. The growth of the Port Phillip District, and of the town of Melbourne, was steady and, 'by 1846 the population had risen to over twelve thousand, a third of the Port Phillip total' (Broome, 1984, p.35). At this time there were fewer than 20 doctors working in the district, most having arrived from England as ship's surgeons and spending a few years in the new district before returning home. By the late 1840s, Melbourne had an established population large enough to warrant the increasing influence of government upon daily life, particularly in the town of Melbourne. In Melbourne at this time,

Much of the paraphernalia of Government had been installed in the shape of a Governor called a Superintendent, the army - about 30 in number, the Law with Judges, juries, police, executioner and gaol, a City Council without a Town Hall but with five medical members, a small Post Office -on the present site, a Customs House, yeomanry (militia) who periodically sported their fine uniforms, Churches - but no bishops yet, a small wooden bridge and the incomplete Queen's wharf. Streets were "surveyed" but except in the centre little else was done except that the huts were gone from the roads though numerous stumps still remained to lessen the monotony of city journeys (Howard, 1934, p.5).
The description does leave out the poor drainage and sanitation facilities, and the corresponding poor public health, which were to plague Melbourne for many years. Disease was rife in the district, with all familiar diseases of the time being common, including 'smallpox, typhoid, typhus, diphtheria, tuberculosis, assorted Colonial fevers, dysentery, scurvy, scarlet fever, measles, industrial diseases - and many other complaints, understood or undiagnosable - as well as surgical cases' (Hawken, 1962, p.16). The source of most of these diseases was the passenger ships arriving in Melbourne from Britain, carrying with them whatever diseases were prevalent in Europe at the time. The unsanitary conditions present in both the city and the country allowed the diseases to flourish and travel swiftly through the colony. Melbourne in the late 1840's had one permanent hospital, the Melbourne Hospital, opened in 1848, previously having had '. . . one small temporary hospital in Bourke street West and one for "down and out" (people) and immigrants in Spencer street' (Howard, 1934, p.6). There were fewer than 50 doctors to attend to the health needs of those in the city, a population numbering fewer than 25,000, though it is comforting to note that most of these doctors were abreast of current developments in the field of medicine, having the support of the Port Phillip Medical Association library, which provided both medical journals and books to members.¹ While the health needs of the settlement were beginning to be addressed in a limited way by the establishment of the Melbourne Hospital, significant improvements in public health would be achieved when the Port Phillip District secured independence from New South Wales and dramatically improved

¹ The Port Phillip Medical Association library is discussed in more detail in Chapter IV.
its finances with the discovery of gold.

The higher education needs of Australia were first recognized and addressed by Sydney. The establishment of the first university in Australia occurred with a formal inauguration in 1852. The idea of establishing a university in the colony of Victoria had already occurred to a number of people, though it was the combination of important events and beliefs, including the desire by many Victorians to at least equal the achievement of Sydney in the establishment of a University, which saw the eventual development of the University of Melbourne:

Once New South Wales had taken steps to create a university, Victoria inevitably proposed a similar project. About 1850, a resident of Portland told a meeting that he would donate fifty pounds towards the establishment of a university in Melbourne, to be called the ‘Separation University’ in honour of the forthcoming separation of Victoria from the colony of New South Wales. The Melbourne Herald agreed that the time had come to found a university in this city of twenty-five thousand people, but the creation of a university might have been long delayed but for two vital events of July 1851: Victoria was proclaimed a separate colony, with a governor and legislative council empowered to spend revenue on any public project, and goldfields were discovered within a hundred miles of Melbourne, enriching the treasury and attracting tens of thousands of migrants (Blainey, 1957, p.3).

These two events, particularly the discovery of gold, transformed Victoria almost overnight from a sparsely populated colony to one overflowing not only with wealth and population, but also with the problems encountered by such a massive influx of people in such a short time. The gold rush dramatically changed the colony’s economic, demographic, social, and cultural outlook, and had major implications for public health.

The discovery of gold began a massive rush of people into the state from all over the world: ‘In March 1851 the population of Melbourne and surrounding areas was less than 40,000; by April 1854 it exceeded 100,000’ (Archer, 1860, p.21). The great influx of population into the colony, and the subsequent dramatic rise in
the birth rate, caused immediate problems with housing, sanitation and disease, not
only in the country areas where gold was discovered, but also in the city of
Melbourne itself. A large number of people, desperate to secure some of the gold
for themselves, literally ran to the gold fields and slept wherever necessary, often
without any form of accommodation. Accommodation was also in a desperate
state in the city, and in both areas 'large numbers, diseased, penniless and half-
starved were compelled to sleep out without shelter. Naturally, resistance was
lowered and they were easy victims of any infection' (Howard, 1934, p.8).
Diseases prevalent both in the gold fields and in the city, spread in both areas by
poor sanitation, included tuberculosis, dysentery, rheumatic fever, typhoid and any
number of different types of influenza. Influenza was particularly lethal in children:
'A sequel of the increased birth-rate of the gold rush period was a high mortality
from acute infectious diseases in children in the subsequent decade (1861-1871);
in fact, whole families were lost in this way' (Gandevia, 1957, p.595). The growth
in the number of doctors in the state, from 6 in 1839 (Melbourne, 4; Geelong, 1;
Portland, 1) to 'nearly 400 of whom 64 were members of the Medical Society of
Victoria' (Russell, 1977, p.10) in 1865, the result of the increased immigration to
the country with the discovery of gold, was still insufficient to meet the demand for
health care, particularly in country areas. While the frequency of outbreaks of
disease common in such crowded and unsanitary conditions was eventually
reduced with the improvements in accommodation and public hygiene which
followed the initial gold rush years, the colony still suffered from a lack of doctors, a
lack of facilities to train doctors, and the introduction of diseases through
immigration. Immigrants reaching the city of Melbourne on ships from Europe and
Britain still brought with them numerous diseases, and outbreaks after the arrival of such ships still occurred. And while development of the city eased some of the health problems in the 1860's, life in the country for both doctors and settlers was still very hard:

In the outback the living was rough in the extreme and so was the doctor's life. It needed the courage and resourcefulness of an explorer to be able to survive. There was no more welcome visitor than a doctor at any camp or settlement and for many, notably the women and children, he assumed a stature out of all proportion to that of his counterpart in the city (Russell, 1977, p.10).

Though the health, and corresponding health care system, available to those in Victoria was problematic for a number of years, the tremendous economic growth, both directly and indirectly, led to improvements.

Following Separation from New South Wales, Victoria was able to utilize the gold, and the profits it generated, for a vast array of public projects and general economic development. Melbourne experienced a development boom as money was thrown into the establishment of homes and buildings on a grand scale. Though the notion of developing a university had been in existence for a number of years, the sudden increase in the wealth of the colony saw the growth of a renewed interest in pursuing the idea. The establishment of a university in Victoria is generally credited to Sir Redmond Barry, who not only believed in the social benefits of higher education, but saw in the university a means of attracting more stable immigrants than those who had swarmed to the gold fields. He was not alone in the desire to establish a university; the fact that Sydney already had one committed many to the idea initially:

Emulation of Sydney was the immediate but not the only motive in creating the university. Its more practical advocates believed that it would further the knowledge and exploitation of the natural resources of the continent, prepare the colony for responsible government, and train students who wanted to enter the
professions but who otherwise must go to Europe (Blainey, 1957, p.4).

In response to the growing interest in the creation of a university, the government appointed a select committee to study the issue, assess public opinion concerning the establishment of a university, and formulate a proposal for eventual development. Discovering little, if any, public opposition to the creation of a university, the committee went on to recommend that, '£20,000 be voted for the buildings and that an endowment of £9,000 a year be voted for the working of the university' (Blainey, 1957, p.4). These recommendations were incorporated into a bill to establish the University of Melbourne, which was passed by the legislature, and received the royal assent, in 1853. A Council and Chancellor for the University were appointed in the next year.

The ceremonial opening of the University of Melbourne occurred on April 13, 1855, at which sixteen students were present. The University was initially granted finances by the government to establish faculties in law and engineering, other faculties having to wait a number of years for funding. Though the opening of the University was viewed as a grand occasion by many who had supported its development, support for the University was not unanimous, the Melbourne Age taking a particularly strong stand against it. The paper

reached the university as a costly toy, an insanity of extravagance, an object of mirth to the civilized world. It would be twice as cheap, wrote the Age, to close the university and send all the students to Oxford or Cambridge, where they could live in luxury in term and tour the continent in vacation-at the government's expense. This accurate but short-sighted analysis of the cost of running the university became even more pungent in the following months, for one student was not seen after the opening day while four of the remaining fifteen abandoned their studies later in the year (Blainey, 1956, p.2).

By 1897 the Age had radically changed its opinion about the usefulness of the University, and particularly the medical school, also effectively denying the position
taken earlier by reproaching those who had dared to doubt the University. An article written in this year, which notes the death of Dr. Anthony Colling Brownless and discusses the contributions that he had made to the development of a medical school, provides the following information about beliefs concerning the development of Australian education, specifically medical education:

Just as at the present time a small band of reactionaries oppose the creation of local industries, and think nothing good unless it bears a foreign trade mark, so in earlier days an unprogressive party of Doubting Thomases sneered at the young University and laughed at the idea that the youth of Victoria could cure or kill in an orthodox fashion unless they had walked the hospitals of London, Dublin or Edinburgh (The Age, 1897).

While the University of Melbourne was off to a somewhat shaky start in the eyes of many, there was the continuing hope by those who had founded the university, and those who supported it, that it would grow and prosper. The growth of private schools, in combination with the inauguration in 1872 of a system of free and compulsory primary schools strengthened the pyramid of education, and strengthened the university. In the summer of 1859-60 only thirteen students had passed the matriculation examination which entitled them to enter the university. Ten years later eighty students matriculated, and by 1880 that number exceeded three hundred (Blainey, 1957, p.24).

Though the introduction of compulsory primary education reinforced the position and security of the University, even immediately after the precarious commencement of the first classes there were ideas expressed about the expansion of the University to include other faculties, including a medical school. In 1857 the Australian Medical Journal took the lead in calling for the establishment of medical education in the state of Victoria, as there were young men in Victoria who wanted to become doctors, and who were crossing the world to find teachers. Not only was this expensive, but according to the Journal it was morally dangerous; innocent colonial youths would be 'easy victims for the seductions of a gay metropolis'. Since most Australian
students went to Edinburgh, this anxiety was perhaps excessive, but the editor of the *Journal* was not alone in his desire for a medical school (Inglis, 1958, p.107).

The reliance on Scotland and England for the education of students, and more specifically physicians, was a tradition that many believed needed to be abandoned, not only to protect innocent students, but also to establish a tradition of independence and self-reliance in the new state of Victoria. The serious need for doctors in the colony of Victoria had been a constant since the time of earliest settlement, and the population boom and spread of disease associated with the discovery of gold had only increased the need for more trained doctors, both in city and country areas. The opening of a number of hospitals in the city of Melbourne to meet the health needs of the state, including the Lying-in Hospital (later to become the Women’s) in 1856, the Eye and Ear Hospital in 1863, the Children’s Hospital in 1870 and the Alfred in 1871, were a concern in terms of finding qualified and adequately trained physicians and surgeons to staff and operate them. It was eventually realized that the dramatic need for medical practitioners was unlikely to be satisfied through immigration. There were also concerns on the part of the established medical community about those practising medicine in the city without adequate medical qualifications. From the *Port Phillip Herald* comes a letter from a James Martin, surgeon, describing the conditions in Melbourne medical practice and commenting on the number of individuals who, though not qualified in any way, were setting up medical practices:

The various dangers to the community resulting from the perpetual practice of quackery are so well known that they require only to be referred to that they may excite the solicitude of every benevolent mind. In whatever position the tendencies of this positive evil may be considered they exhibit the strongest possible reasons for counteraction, not merely for the reputation or benefit of medical men, but for the protection of the public (Martin, 1848).
In the late 1850's and early 1860's the leaders of the *Australian Medical Journal* addressed this issue by calling for medical reform, 'the principal one being a Medical Act absolutely debarring unqualified men from practice' (Howard, 1934, p.11). The medicine being practised in Melbourne in the 1860's is described by Hawken as 'a time of medical feuds, lampoons, and impostures, as well as of dedication' (Hawken, 1962, p.16). The problems that the medical profession, and consequently those of ill health, were facing at this time, including the lack of qualified physicians, charlatan medical practitioners, and the lack of any medical educational facilities in the whole of Australia, were eventually recognized as significant by those not already in favour of the establishment of a medical school. The result was a unified drive to establish a medical school at the University of Melbourne.
III. History of the Melbourne Medical School

The establishment of the University of Melbourne effectively liberated students, and future students, from having to travel overseas to obtain university qualifications. To this endeavour came the call by many in the medical community for the inclusion of a medical school at the University to address those problems noted above. Provision had been made for the development of a medical school, as Neild explains, though the founders of the University had not thought it would be necessary for a great many years:

Although the Act of Incorporation provided for the granting of medical degrees, there was no mention made of medical teaching, and, in fact, although a Medical School was sometimes spoken of, it was generally regarded as something altogether anticipatory, and not, for many years, to be seriously thought of (Neild, 1887, p.194).

The foundation of the medical school is generally credited to Dr. Anthony Colling Brownless, who was appointed to the Council of the University in 1855 and immediately began making plans towards the eventual creation of a medical school:

In June, 1855, Dr. Anthony Colling Brownless who had then been only three years in Australia, was appointed a member of the Melbourne University Council and at once started an agitation for the formation of a medical school. He was ably supported by his colleagues in medical practice, but the difficulties at first seemed insuperable - the colony was small, the Treasury exiguous, whilst the Chancellor of the University, Sir Redmond Barry, was just as eager to start a school of law (Osborne, 1929, p.64).

Brownless nevertheless anticipated the development of a medical school and immediately set about developing plans, including the production of drawings of the proposed building. He estimated that the building and necessary equipment to open the school would cost approximately £21,000. His plans for the establishment of a medical faculty and medical school at the University of Melbourne were officially presented to the Council at a meeting early in January of
1857. In his presentation Brownless requested that
the staff be appointed so that the school could open in May, 1858. He
pointed out that a building would have to be erected, an Anatomy Act passed and
lecturers appointed, and suggested that Professor Paget and Professor Owen be
asked to select a person to fill the chair of anatomy, physiology and pathology.
Immediate steps should also be taken to form a museum of anatomy and
pathology. His scheme was approved by Council and supported by the medical
profession (Russell, 1962, p.228).

While Brownless had made significant progress in the foundation of the medical
school, the road ahead was long and difficult. Though the request for funds for the
building of the school was rejected by the Government, immediate steps were
taken by Professor Paget and Professor Owen, both prominent English scientists in
the area of anatomy, physiology and pathology, to find a person to fill the vacancy.
It was eventually, and unanimously, decided by the two selectors that George
Britton Halford, an Englishman, should fill the position of chair in Anatomy,
Physiology and Pathology, and he arrived in Australia in December of 1862. He
was immediately a valuable ally to Brownless, helping him not only with the
continuing battle to establish the medical school in the first place, but also with the
establishment of a curriculum for the school. Halford was at once an avid and
influential supporter of the controversial curriculum that Brownless had planned for
the medical school. Brownless rejected the advice of Dr. Paget that the length of
the medical course reflect the English tradition of a three-, and sometimes four,-
year medical course, and he suggested one of five years for the Medical School in
Melbourne:

Dr. Brownless realised that there was in the old country a belief that all
matters, particularly educational, must be make-shift and below home standards in
the colonies, so he determined that the Melbourne course of study should be
above any such charge. With great courage, therefore, the Council resolved upon
a five years' course with five searching examinations (Osborne, 1929, p.67).
The proposed curriculum was met with significant opposition, but it is testimony to the wisdom and tenacity of Dr. Brownless that the curriculum not only remained in place once the medical school commenced teaching, but later influenced other Australian medical schools in the formation of their curriculum.

The Council once again, in 1858, applied for a grant of £21,000 to establish a medical school, but the application was again rejected. Brownless was, however, able to secure the establishment of a museum of anatomy and pathology and the appointment of Thomas Shearman Ralph in 1859 as curator. Working out of the Melbourne Hospital, Ralph established a collection of specimens for the museum, which in 1861 was given to the University. The Government continued to reject the University's application for funds, though in the years 1859 and 1860 the amount requested had been dramatically lowered to just £12,000 in the hopes of securing approval of the request.

Increasing frustration over the denial of funds to establish the Medical School prompted a new tactic, and a Medical School Committee was assembled in 1861 to help guide the formation of the school. The Committee 'drew up regulations for degrees in medicine and approached the Government for £4,000 for a building. Their request, for the fifth year in succession, was refused' (Russell, 1962, p.228). The Government, though finally willing to support the University, was, however, unable to supply any funding, the consequence of a decrease in state receipts from mining: 'The project was undertaken at a time of comparative economic depression after the surface and alluvial gold had been exhausted and before more extensive mining operations were producing any profits' (Gandevia, 1957, p.596). The Committee was, however, at the same time able to secure from
the government a concession to allow a medical degree to be granted through examination. In 1862 examiners were appointed, and 'the examination was conducted in 1862 with such enthusiasm that three of the six candidates were failed' (Russell, 1962, p.228). There was one other highlight in this otherwise difficult year for those battling to make the medical school a reality, and that was the passage of a bill through parliament allowing for anatomical dissection to take place in Victoria. This development at least cleared the way for anatomy classes to begin once the medical school has been established.

The continuing losing battle to secure any funds from the government for the establishment of a medical school unified the Council of the University in decisive action. It was decided that by cutting back in other areas of the University, including the reduction of the salaries that the current law professor and engineering professor were receiving (both accepted the cutback graciously), that they might be able to save enough money to be able to finance the Medical School themselves. Using this method enough money was saved to appoint Dr. John Macadam as lecturer in chemistry in January of 1862, and on March 3rd, the School was informally opened; in September of the same year Dr. Eades was chosen Lecturer on Materia Medica, and the two appointments of Dr. Macadam and Dr. Eades may be regarded as the actual beginning of the School. In the latter part of the same year, Professor Halford arrived from England, and on the 1st of May, 1863, he delivered his introductory address in the Mathematical Theatre (Neild, 1887, p.195).

The initial lecture given in the Medical School took place in the house of Dr. Macadam, as accommodation for the Medical School was in the process of being built at the University. This first lecture in chemistry signified a new age for the state of education and health care in the state of Victoria, and in Australia. The first medical students, and the first Australian-trained doctors, were being educated.
The opening of the Medical School was not celebrated by all in the state, however. The length of the course, five years, was at the time one year longer than any medical course offered in Britain and thus was criticized as unnecessarily long by those believing that British institutions knew what was best in medical education. The course length established by Melbourne was duplicated by other medical schools in Australia but it was nearly 30 years, as Nattrass explains, 'before a course of such length was adopted by the British universities and then the curriculum was based on the Melbourne design' (1978, p.9). At the time the medical course was also criticized because of the cost of educating medical students for five years. The Legislative Assembly, knowing that the initial costs of medical education would be significant, 'inquired the cost of educating each medical student' and a 'deputation from the Medical Society of Victoria protested that the course was too long and that time was wasted in imparting a liberal education in the arts' (Blainey, 1957, p.30). Though the Medical School was off to a somewhat shaky start and attracting a fair amount of criticism, the importance of the school for Australia was noted by many in the pages of the *Australian Medical Journal*. Discussing the significance of the official opening of the school in May of 1863, the *Journal* states that it '...marks a point in the scientific progress of this colony which will be looked back upon, in future years, as the inauguration of a new era' (*Australian Medical Journal*, July 1863, p.226). The ability of the state of Victoria to produce its own medical practitioners, without having to send students for a medical education to Britain, was also proclaimed as significant:

The prestige and reputation which is to be hoped the Melbourne Medical School is shortly about to possess, will infallibly urge our claims to consideration upon the attention of those who may have debated within themselves the question of obtaining their qualifications here or in London. If it be found that the means for
study are at least as good, and that the prospect of distinction is much greater, the balance will assuredly be in our favour (Australian Medical Journal, Jan. 1863, p.35).

The debate concerning overseas and colonial qualifications was to occur for a number of years until the Medical School had established itself as a quality institution and attained an excellent reputation for both the curriculum and the teaching.

While curriculum, professors and students were present at the Medical School, it was not until May of 1864 that the school received its new building. Financed from a grant from the government totalling some £6,000, the building was located on the north-eastern corner of the campus. A description of the plans for the building was published in the Australian Medical Journal in March 1864, providing for the first time a mention of the room that was to house the medical library and also a vague description of the library:

The school of anatomy is separated from the school of chemistry, library and museum by a large quadrangle, 80 x 32, upon which all the apartments open by separate and distinct entrances . . . The library is 16 x 25, and the museum 26 x 25. All the works bearing upon medical jurisprudence and chemical science will be placed in the library for the use of the students and other attending the lectures (March 1864, p.95).

The building also included an anatomical theatre, dissecting theatre and professors' room, as well as those features described above. This original building was in later years referred to as the "old" medical school.
IV. Other Medical Libraries in Melbourne

At the time of the formation of the medical library at the University of Melbourne in 1864 there were already a number of medical libraries operating in the various colonies of Australia. While this was the first to be associated with a University, other medical libraries were providing access to medical books and journals as a source of continuing education for their members from an early date. Medical libraries were established in Australia as early as 1842, primarily by medical societies, as an important, and often the only, way for medical practitioners to keep abreast of current medical research and developments from overseas, particularly those occurring in Britain, as most doctors were from that country. The development of medical societies in Australia, and the corresponding development of their libraries, a mid-nineteenth century phenomenon, is an activity which parallels the belief by those living in Australia that the country was in fact becoming their home, and not just a port of call for a few years:

This movement reflects not simply the growth of population, but more particularly the growing independence of the medical fraternity and its decision to become self-supporting, as it were, in its new environment. No longer did the doctor consider himself a visitor, spending a few years in the colonies before returning "Home"; no longer did he regard his stay as a transient tour of duty, a more or less welcome interlude, in a professional lifetime centred on Britain and Europe. Now he planned his professional career in Australia; as he and his family had come to stay, as basic stability encouraged planning for the future. ...nothing indicates more clearly the medical profession's deepening roots and developing maturity than its desire to keep abreast of current practice and recent advances in the leading centres overseas (Gandevia and Tovell, 1964, p.314).

This same belief is characteristic of all the permanent developments to occur in early Australian life, including the later belief that the state of Victoria needed its own place of education and its own place to educate students in the art of medical practice.
The first medical library in Australia is believed to be that created by the Medical Society of Van Diemen's Land, which itself was established in Hobart in 1842. There is not much information available concerning this library, though a letter has survived written, in 1842, by the chief medical officer of Van Diemen's Land, Dr. John M. Clark, M.D., to the Lieutenant Governor, Sir John Franklin, concerning the establishment of the library:

Sir, A very general wish exists among the Medical Gentlemen of this Colony for the Establishment of a Medical Library. The disadvantages in a Station like this, so distant from Europe, are so obvious that it is not considered necessary to detail them. Active, and I am happy to say, successful measures, have been adopted to carry this desirable object into effect. Excepting two or three Medical Officers, whose answers have not yet reached me, all have been unanimous, and have forwarded their contributions. Above Sixty Pounds have been subscribed. Valuable Books have already been purchased at London . . . (Gandevia and Tovell, 1973, p.91).

The letter went on to ask that postage for these books and journals be made free, a request eventually accepted. It is not known for how long the library survived, and only one book remains, the rest, for unknown reasons, having been deposited at the rubbish tip in Hobart during the First World War.

The first medical society in the Port Phillip District was the result of a meeting of medical practitioners called by Dr. Wilmot, Dr. Howitt and Dr. Cussen at the Prince of Wales Hotel in Melbourne in May 1846. At this meeting of some eleven doctors it was decided that there was a need for a medical society; thus the Port Phillip Medical Association was founded:

Melbourne had barely been settled for a decade, and its population at this time was less than 10,000, about 25 of whom were engaged in "legitimate" medical practice. The motion of Dr. A. Greeves and Dr. J.S. Griffin that "the objects of the Association be the formation of a Medical and Surgical Library and the promotion generally of the interests of the profession" was rejected in favour of one by Dr. D.E. Wilkie and Dr. T. Black "that in the terms of the circular calling the meeting, the primary objects of the Association be the promotion of medical knowledge, and a more free professional intercourse" (Gandevia and Tovell, 1964, p.314).
The establishment of a medical library was still of importance to the members, however, as one of the rules later adopted dealt with the formation of a library from society funds. A meeting held on August 14th of the same year brought the library to life. The first item of business at this meeting was "the Selection of Medical Works to be ordered from England". On the motion of Dr. Greeves, seconded by Mr. J. Keatinge, it was decided to send £25 to a Mr. Simmonds, a bookseller in London, "to procure the Periodicals and Books undermentioned, the Periodicals to commence from January, 1847" (Gandevia and Tovell, 1964, p.314). The Association enjoyed success for a few years but was dissolved in 1851 and the books collected for the library sold off to members. In the same year as the formation of the Port Phillip Medical Association, a medical subscription library was established in Sydney, though the length of its existence is not certain.

Though the Port Phillip Medical Association had been dissolved, there was still interest in continuing a medical association or society in Melbourne to promote the interests and education of members of the profession, as well as to strive for better health in the colonies. The drive for a new association was initiated in 1851 by Dr. Wilkie, later to become the first president of the Victorian Medical Association, formed later in this year. The dispersal of the small library of the Port Phillip Medical Association must have upset numerous past members, as Gandevia and Tovell explain, 'because a special rule (29) was adopted, to avoid any rapid dispersal of the new Association's property should it suffer the same fate' (1964, p.317). A library was established, and the first order 'was sent by the Victoria Medical Association to Messrs. Smith, Elder & Co. on August 15th, 1852' (Wood, 1906, p.56). The Medical Association continued to place orders for the library,
and both the library and the Association continued to grow. In 1855 the
Association amalgamated with the Medico-Chirurgical Society of Victoria to form
The Medical Society of Victoria.

While the Medical Society of Victoria was active in furthering the knowledge
of its members through the continuing collection of new medical books and
journals, it also played a leading role in calling for medical reform and
improvements in sanitation and general public health in the colony of Victoria. The
Society was active in promoting the development of a Board of Public Health:
'resolution after resolution appeared on the minutes urging on the various
Governments of the day the necessity of appointing such a board, and the still
greater necessity for a proper system of sewerage' (Wood, 1906, p.56). The
Society was also active in promoting the cause of the University of Melbourne
medical school as being necessary for the long-term health of the colony. The
medical library continued to grow, though 'the first order sent by the Medical
Society of Victoria met with disaster, the books going down in the Schomberg,
which was wrecked off Cape Otway' (Wood, 1906, p.56). This disaster may have
paved the way for a change in ordering, as the library in 1857 decided to order
books through the Melbourne bookseller George Robertson. In the initial
Association library, and later in the Society library, members had ample opportunity
to use and borrow library materials, though borrowing was restricted to one volume
at a time; 'Periodicals could be kept for four days and a book for eight days, with a
fine of sixpence a day for extensions beyond these periods' (Gandevia and Tovell,
1964, p.317). The primary problem that the library faced, like many such libraries
before it, was the lack of a permanent room to house the collection in. The library
books and journals were stored from 1857 to 1878 in a variety of places, including a private bookshop, a mechanics' institute and the Melbourne Hospital. In 1878 the Society was united with the Victorian Branch of the British Medical Association, which did not have a library of its own, and when the library became a joint collection it 'finally found a home at the hall of the Society' (Wood, 1906, p.57). The library was arranged according to the Dewey system of classification and had a card catalogue, and by 1905 'the total number of volumes in the library, bound and unbound, were 1647, and the value placed upon them for insurance purposes was £1013' (Wood, 1906, p.57). This joint library has the distinction, as Gandevia explains, of being 'the oldest in Australia, with continuous existence of over a century' (1969, p.253). The only other medical library in existence during this time in Melbourne was Harwood's circulating medical library, in existence from 1864 to 1865. Little is known about this library, and the brevity of its existence was due to the suicide of Mr. Harwood in the Yarra River in 1865.

The crucial role that the early medical society and association libraries played in the health of Victoria cannot be underestimated. These libraries were often the only way in which doctors in Australia could keep up to date with the techniques and medical discoveries occurring throughout the world, reported and taught through both journals and books. Gandevia and Tovell stress the point that the establishment of libraries for just this reason may have been one of the primary incentives for the formation of medical associations in the first place:

... it is encouraging to see with what determination our predecessors tackled the problem of establishing a library, and we may conclude that the formation of a library was in some cases the main reason for the founding of medical societies; the stringent penal clauses and the repeated discussions on library policy at meetings are evidence in support of this. Books were expensive by the time they had been imported, there were increasing numbers of them, and
there were important new discoveries and observations appearing regularly in the periodicals. Furthermore, no doctor could confine his own purchase to a speciality, for all practitioners were in highly competitive general practice. To this enthusiasm for keeping up with overseas progress by means of the printed word we may attribute the remarkably rapid introduction of such advances as anaesthesia and Listerism to this country. To this enthusiasm we also owe most of the collections of nineteenth century and earlier medical works which we have, that of the Medical Society of Victoria being enriched by a small number of important private collections in quite early years (1964, p.320).

The early establishment of medical libraries in the settlement of Port Phillip, and then the colony of Victoria allows Melbourne to claim the distinction of having two of the oldest medical libraries in Australia, the joint library of the Medical Society and Victorian branch, and the University of Melbourne medical library.
V. The Early Medical Library at the University

The completion of the Medical School also saw the successful realisation of plans for a medical library at the University. While the curriculum, the hiring of professors and the building of the medical school had been of primary importance, the library had not been forgotten: 'Although there may be differences of opinion as to the desirability of its topographical segregation from the main library, there is no question of the far-sightedness of its founders in other respects' (King, 1951, p. 103). The medical library was the first in Australia associated with a medical school, and provided the learning materials to the first Australian-educated doctors in the country. The formation of a medical library at the new medical school was planned from the beginning, the design for the building incorporating a room for this function, as mentioned above. With the completion of the Medical School in May of 1864, the medical library was open with '...a room set apart as a Library, and a valuable collection of standard medical works placed in it as books of reference for the use of students' (Russell, 1977, p.33). The collection of books which was to form the core of the first medical library at the University of Melbourne was purchased by Professor Halford, acting on the request of the University Council, in England in 1862 before he moved to Australia to commence teaching at the University:

Previous to his departure from England Dr. Halford was able to employ himself much to the furtherance of the interests of the University. His presence and active exertions enabled him to procure, upon terms more favourable than could have been expected by correspondence from this country, a considerable number of medical works, for the purchase of which a sum of £500 had been placed at his disposal. In addition to this, by means of personal communication with members of his profession, he succeeded in obtaining donations to the Library of many works of scientific value, as well as in receiving offers of contributions to the Museum and in eliciting expressions of sympathy with the Council in their endeavour to render the Medical School worthy of the reputation which they
desired it should attain (Osborne, 1929, p.65).

The actual sum that Halford at his disposal is a matter of contention, some accounts listing it as £500, and others as £300. While the actual amount may never be known, the important point is that Halford did purchase the first books for the medical library.

While little is known about these first books and journals, a letter from John Drummond Kirkland, Lecturer on Medical and Practical Chemistry, in June of 1869 to the Chairman of the Medical School Committee provides some information about the state of the library at this date. Kirkland wrote that at present,

There is no chemical journal received at the Medical School Library although other medical sciences are well represented. The necessity for these chemical periodicals is obvious, as by their means, a student is enabled to pursue any series of important experiments from their commencement, so obtaining a much greater amount and variety of information than would be found in the mere abstracts contained in Text Books (Kirkland, 1869).

He provides a list of chemical books and journals which he recommends the purchase of; included are the books, 'Cavendish Society Publications', 'Millers Elements of Chemistry, 4th Edition, 3 vols, 1868-9', and the following periodicals: 'Journal of the Chemical Society', 'Chemical News', and 'Pharmaceutical Journal'.

The room housing the medical library of the late 1860's and early 1870's appears to have been quite cosy and relaxing. The initial intake of medical students being small, the room was often used by lecturers for their classes. In the early days of the School '...the lecturers for a time lectured in the Library. There were only three students in the class, and they and the lecturer sat round the fire and made

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2. Gandevia and Tovell, 1964, p.319, state that Professor K. F. Russell informed them that books were brought out by Halford to the value of £300. Osborne, 1929, p.65, using a quotation from the Melbourne University Calendar of 1863-64, notes that a sum of £500 had been placed at Halford's disposal.
themselves comfortable' (Russell, 1977, p.34). Even as late as 1898, however, classes were still being taught in the medical library. A reference to this fact is made by a student in *Speculum*, a Journal produced by the Melbourne Medical Students, relating that a medical forensic lecture was delivered in the medical library (July 1898, p.42). The numbers of medical students were to rise dramatically, however: as at the end of the 1870's, 'half of the students in the university were studying medicine, and in the hospitals of the city and in the surgeries far outback Halford's former students were establishing a tradition of competence surpassed in few other countries' (Blainey, 1956, p.6).

The dramatic increase in the number of medical students strained the limited resources of the medical library, and it appears to have been somewhat neglected during the 1870's. Though there is no indication of who exactly was in charge of the library during this time - the Medical Faculty, the Council or the Registrar - there is a hint in certain accounts that the library was controlled by the Council and that this relationship explained the dismal state of the library.3

The small medical library which had been reasonably stocked with books and journals when the school opened and to which additions had been made sporadically since then had, by 1880, rather lost its original identity. Many of the

3. Neild, 1887, p.242, refers to the unhelpfulness of the Council as it related to both the Medical School and the Medical Library in the early stages of their development. The inclusion of the Registrar in this list of those who may be responsible is due to information provided by Scott (1936) concerning the main library at the University and the fact that for the 'first thirty-four years there was no librarian. The Registrar was, officially, not only what his title signified, but also had charge of the library. This duality became no longer possible with the growth of schools and the increased demands upon the library. In 1865, when the library was moved from the Registrar's office to the north wing, C.H.H. Cook was appointed "assistant librarian," which meant that he was "the" librarian, though the Registrar was nominally in charge. His successors were G.H. Neighbor and T.F. Bride. In 1889 Edward Hippius Bromby was appointed "assistant librarian." He was not given the full status of librarian till 1892' (Scott, 1936, p.137).
books were missing; the room had, in the first years of the school when there were few students, been used as a lecture room and later would seem to have served as a club room for the students and even as a store for museum specimens (Russell, 1977, p.60)

While the medical library was enjoying increasing use by the ever-growing medical student body, and the collection was slowly, though haphazardly, growing, there was a debate brewing on the issue whether the medical library should be incorporated into the main library on campus or left on its own. This issue was to plague the fledgling medical library for several years, the University Council continually suggesting the move and medical staff and students vigorously defending the position of the library. The unfortunate condition of the medical library in the late 1870's eventually reached the ears of Council members, and the first threat upon the separate existence of the library was made. In July of 1879 the Medical Faculty received a message from the Council that unless a person was found to look after the library within one month, the books would be removed to the university library. The Faculty protested at the decision, pointing to the inconvenience that the move would cause both staff and students. The debate concerning the fate of the Medical Library even reached the pages of the Australian Medical Journal, where the importance of the library was vigorously defended:

The medical students now represent half of the whole number of students, and therefore, one would think, their interests and convenience should claim some consideration. But the Council wish to take away the little library of the Medical School, and cause its absorption into the general library, where it would be of no use to the Medical Students. . . . The Faculty of Medicine have protested against the removal, and have recommended the appointment of a paid Librarian, and the Council at their last meeting decided to postpone their decision for a month (Australian Medical Journal, 1879, p.401).

A few months later it was still a contentious issue, as Council had not yet acted on its ultimatum, and the Journal was again defending the rights of the medical faculty
Hitherto the care of the books has been left to the students themselves, an arrangement which worked well enough when the numbers were few, but which proved thoroughly inefficient with crowded shelves, a small room, and nearly a hundred students. But to do away with a distinct library which now contains nearly a thousand volumes, and place it in a part of the University comparatively difficult of access, would surely be a step in the wrong direction (Australian Medical Journal, 1879, p.493).

The medical library was saved from incorporation and given some formal guidance and structure by the appointment in early 1880 of a medical student, James Booth, as an assistant librarian, 'to supervise the medical library and faculty was instructed to draw up regulations to cover his duties and also to prepare the formal rules to be observed in the library. This they did, setting up at the same time a library committee consisting of Halford, Neild and Jamieson' (Russell, 1977, p.60). James Booth received a salary of 10 guineas per year and began, with the direction of the faculty library committee, to restore some order into the medical library. Booth was faced with a library which required not only sorting, but the urgent re-stocking of materials. Many books had not been replaced for years, as Gandevia explains: 'in 1886 the copy of Gray's Anatomy was 20 years old!' (1948, p.22). Another description of the medical library at this time compares it to the one that Halford brought out from England: 'it remains numerically very much as it was then. Very few additions have been made to it, the Council having, until recently, displayed a persistent parsimony towards both it and everything else connected with the Medical School' (Neild, 1887, p.242).

The overwhelming success of the medical school and the increase in the number of medical students were soon stretching the resources of the medical school beyond its limits. The curriculum of the medical school needed to be
updated and improved to ensure a high standard of medical education in the state. Brownless, in 1882, suggested a number of improvements to the course, including the addition of clinical teaching to the curriculum, believing it mandatory now that 'the medical school of Melbourne was certain now to supply the colony with most of its doctors. Fewer British practitioners were arriving than thirty years earlier, and 180 medical students were now enrolled at the university' (Inglis, 1958, p.113).

The hopes that Brownless and others in the medical community held concerning the success of the medical school in training Australian students to become doctors were finally being realized. In an attempt to address the ever increasing space problems of the medical school, as early as 1884 plans for extensions to the buildings, including the library, were drawn up. The building, which had been criticized by some for being far too large in its initial construction, was already proving to be too small. A report from the Medical Society of Victoria at a meeting in January 1884, published in the *Australian Medical Journal*, provides some information on the growth of the medical school and the need for new buildings:

> The growth and multiplication of the classes has rendered necessary a decided extension to the Medical School buildings; and accordingly the Premier has directed that the £10,000 recently voted by Parliament shall be devoted to their completion. A new dissecting room, a substantial museum, a larger library, with additional lecture rooms and work rooms may thus be provided (*Australian Medical Journal*, 1884, p.27).

The plans for a larger building, incorporating a larger library, along with the supervision of the medical library by Mr. Booth, were not enough, however, to satisfy Council about the management of the medical library, and it again threatened the library with incorporation into the main library.

The second call for the movement of the medical library came in 1886, when at a Council meeting Dr. Morrison moved 'that the books in the Medical School
Library be restored to the general library, and that the Finance Committee be instructed to deal with the necessary expenses. The motion was agreed to by 10 votes to 2' (Australian Medical Journal, 1886, p.88). While Council believed this move to be desirable, students, professors and even the Medical Society of Victoria quickly made their belief known that this decision was a horrible mistake. The Medical Society of Victoria believed the decision by the council to be an 'unfortunate one', based on the 'common-sense grounds that medical books are of use almost only by medical students; and that the chief object of their purchase will not be obtained, if they are not in a place convenient for consultation by them in the intervals of other work' (Australian Medical Journal, 1886, p.88). The Melbourne Medical Students believed the proposal to be 'very absurd' and speculated that the probable reason for the suggested move was the 'mutilation of books' in the medical library:

... it was considered that they would be safer in the general library. In the first place mutilation of books by a set of vandals takes place to a greater or less extent in every library. This does not make the crime any less, but the disease is by no means so rampant as it is in the large University library in which there are books, to our own knowledge, wanting whole pages. . . . Each member of the Medical Students' Society does his utmost to prevent wilful destruction of medical works, and it is a remarkable fact that the greater amount of the damage done is among works prescribed as text books in the first year. As a proof of the care taken of the books in our library may be mentioned the fact that an antiquated Grey's Anatomy is still of use after having done duty for nearly two decades (Speculum, No. 5, 1886, p.3).

The overwhelming support for the medical library to remain a separate entity ensured that it was not moved. The library survived in part owing to the formation of a new medical library committee: 'In 1887, council set up their own medical library committee which included the chancellor and had almost the same powers as the university library committee' (Russell, 1977, p.60). The medical library was
given a new lease on life with the formation of this committee in 1887 and its new location as the renovations to the medical school, which had been in the planning stages for a number of years, were finally complete. The role of the medical library in the education of medical students, and as a support for medical practitioners and researchers, was finally secure at the University. From this point on the medical library was to increase both in size and in the extent of the influence that it exerted on the medical community of Melbourne by providing a leadership role for other medical libraries both locally and interstate.
VI. The Medical Library from the 1880s to the Early Twentieth Century

The late 1880's saw the alleviation of many of the problems associated with both the medical school and the medical library. The medical school had become one of the most popular faculties at the University of Melbourne, with a substantial increase in the number of students to the point that medical students in the late 1870's formed almost half the entire student body of the University. To teach these students effectively plans for the expansion of the medical school were finally put into effect and the "new" medical school opened in 1885. The medical school was becoming the major means through which Victorian students were being educated to become doctors, with decreasing numbers of students choosing to travel to Britain to undertake medical studies. James Edward Neild, a lecturer in forensic medicine at the University, a librarian for the Victorian Branch of the British Medical Association, and an important figure in the development and growth of medicine in Victoria, believed the medical school competent in teaching and stated:

I think it will be seen, ...that a good deal has been done to make the School an efficient means of teaching the science of Medicine, and that there is no need for our young men to go to Europe to learn their profession. I do not forget that the disposition to undervalue everything Australian has not seldom found its expression in a sneer, both at our University generally and our Medical School especially. Even the Council itself has not been entirely free from this kind of prejudice, seeing that two of its members have sent their sons to Europe to be medically educated. But I do not think the prejudice is increasing, and I feel confident that every year will tend to diminish it (1887, p.242).

It was also important that at this time Great Britain passed an amended Medical Act which allowed for the registration of degrees from Universities in the colonies. Therefore, Neild goes on to point out, 'Our diplomas are not now under a ban of inferiority, so that the alleged reason for going to Europe to study Medicine is set aside' (Neild, 1887, p.248). The influential position of the Melbourne medical
school was also enhanced by the fact that it was the only one in the country until Sydney established one in 1883 and Adelaide one in 1885. Prior to the opening of these schools, Melbourne attracted a number of interstate students, and even with the opening of the new medical schools continued to attract these students, based on its growing reputation for excellence.

The medical library, having avoided for a second time amalgamation with the main library, saw changes in the year of 1887, which finally secured its existence as a medical library. The small library was given a larger room in the "old" medical school building when the "new" medical school was being built. The library moved into its new accommodation sometime after May of 1887. A letter by H.B. Allen, Dean of the Faculty of Medicine, dated May 30th, 1887, informed members of the Council that '. . . the Library of the Medical School is about to be transferred to the larger room formerly occupied by the Museum of Anatomy and Pathology' (Allen, 1887). The medical library effectively took over the first floor of the old pathology department, with the departments of physiology and biochemistry located on the floor above.

The second major event for the medical library in this year was the establishment of the Medical Library Committee, a decisive step in securing ongoing and authoritative management for the previously neglected medical library. The establishment of the Committee also marks a turning point in the history of the medical library in that important information concerning the library was, with a few exceptions, regularly recorded in the Minutes of these meetings, providing valuable information about the library in its early years. There are a few unaccounted-for gaps in the meeting minutes, making it unclear whether meetings were held in
certain years or whether the Minutes from these meetings have disappeared. The first meeting of the Medical School Library Committee occurred on June 19th, 1887. Those present at the meeting included the Chancellor, the Dean of the Faculty of Medicine Professor Allen, Professor Masson, Dr. Neild and the Secretary of the Committee Mr. Burke. Detailed at the first meeting of the Committee was the processes involved in the establishment of the Committee and the responsibilities that the Committee was to have. The Committee was formed to manage the medical library, and a detailed account of its formal arrangements is contained in an extract from the report of the Committee of the Council:

That the management of the Medical School Library and the expenditure of the Annual vote-thereon be entrusted to a Committee consisting of the Chancellor, the Vice Chancellor and three members of the Faculty of Medicine elected annually by their Faculty; that the Secretary to the Medical Faculty act as Secretary to the Committee; and that the Committee report to the Council annually in the month of October (Medical School Library Committee Meeting Minutes, June 19th, 1887).

This same report also recorded that the medical library was to receive the annual sum of £150 for the purchase of books and serials and the same amount for the binding of these materials. A number of topics were introduced and discussed at this first meeting which were to have significant impact on the library. One of the first resolutions dealt with works in the areas of chemistry and biology. The Committee resolved that 'Chemical books and journals should be placed in the Medical School Library and Biological Books and journals in the General Library; but that the absolutely necessary books of reference in Biology should be provided for the Medical School Library also' (Medical School Library Committee Meeting Minutes, June 19th, 1887). The Committee also decided that a circular should be sent to all those teaching in the Medical Faculty requesting them to name those journals, with attached prices if possible, that they deemed essential for the
medical library. It was decided that all books and journals in the future were to be obtained directly from H.K. Lewis of London and that notice should be sent to other suppliers at the close of the year cancelling existing orders. George Robertson was contracted as chief binder, and in 1887 28 volumes were sent to him to be bound. In an effort to determine the condition of the existing library, the Secretary was requested to 'ascertain what journals were now taken from George Robertson and Co., and what liabilities the Library has incurred already for the present year' (Medical School Library Committee Meeting Minutes, June 19th, 1887). Mr. Burke was also asked to prepare a listing of the periodicals in the Library and to note any missing volumes. Mr. Burke at this meeting noted that 'the existing Catalogue of the Library was imperfect; that it was a Catalogue of authors only; that its completion was impossible until the books were transferred to the new library' (Medical School Library Committee Meeting Minutes, June 19th, 1887). In 1887, as well as receiving a yearly grant, the library also decided to update the book collection, and 'old books were sold to finance replacements, so that the Library at last began to make some progress' (Gandevia, 1948, p.22).

Subsequent meetings for the year record that the existing commitments of the library for the current year 'amounted to about £25 including journals, binding and books ordered' (Medical School Library Committee Meeting Minutes, July 12th, 1887). At the third meeting of the year, August 12th, 1887, there was still no reply from the main library concerning the resolution about the movement of Chemistry and Biology books and journals. The Minutes for this meeting list the journals, totalling 38 in number, and a larger number of books, ordered on recommendations from the medical faculty. The final meeting of the year, occurring on September
16th, 1887, dealt with the move to the new library and the fact that not enough funds had been allocated to equip the library with needed provisions and furniture, including library chairs, blinds, a grate and fire-irons, matting or carpet and stain for the floor. The Dean estimated the expenditure for these items at approximately £50 and was given the authority to write to the Council to request these funds. At this meeting it was also decided to ask the Public Library that any duplicates of medical works received by that library be sent to the medical library, as well as to request the help of both the Public Library and the Librarian of the Medical Society of Victoria in completing sets of journals. The request for help marked the beginning of cooperation between the medical library and other libraries in the community, a relationship which was increasingly to depend on the leadership role of the medical library. A catalogue of the medical library was in rough form, prepared by the Secretary, and would be completed for the next meeting.

The next information about the functioning of the medical library occurs in the Medical Library Committee Meeting Minutes for the year of 1889. In this year the medical library had an annual vote of £250, a sum intended to cover needed furniture and shelving for the library. The only important news pertaining to the library found in the minutes for this year relate to the book stock and the fact that it had been decided to weed the library. A letter was received from the Registrar "stating that the Council had granted permission to sell or otherwise dispose of duplicates and old editions of works in the library" (Medical School Library Committee Meeting Minutes, March 21st, 1889).

The grant for the medical library during the years 1891 and 1892 was increased to £300. The annual report submitted by Professor Allen, as Chairman
of the Medical School Library Committee, for the year of 1891 provides some information on how the medical library was spending its vote:

1) . . . About £170 has been expended in books, £50 in binding, and £80 in payment of charges for the periodicals of the next year. 2) The list of periodicals has been considerable increased. It now includes the most representative journals of the United Kingdom, America, Germany and France. 3) Several encyclopaedic works on Medicine and Surgery have been ordered during the year. 4) Some additional shelving has been erected this year, but only enough for immediate requirements (Medical School Library Committee, Annual Report, 1891).

It was hoped that additional funds would be provided for the medical library to purchase more cases to house the growing collection of books and journals, as the collection was rapidly occupying all existing shelving. This report marks the beginning of a struggle that the medical library was to be engaged in for decades in relation to the problem of securing additional space for the collection. Professor Allen notes that

6) A larger room for the reception of the Library is required. The room now used measures only 24ft. x 23ft., and is barely large enough to give sitting accommodation to thirty students, a number often found together in it. There are now about two hundred and fifty students in the Medical School. If the room were larger, a greater number of the Students would make use of the Library (Medical School Library Committee, Annual Report, 1891).

Though the new library was already beginning to run out of space the improvements made to it since the formation of the Medical Library Committee to manage it had been substantial, and the medical students, though crowded within its walls, had mostly words of praise for it. An editorial in Speculum in 1888 states that

A stranger, who for the first time looked round the well and wisely filled shelves of the Medical School Library, which has of late made such rapid progress in the direction of what a Medical Library should be, might ask, "What can the Students want more than this?" (No. 15, p.1).

It appears, however, that some medical students at the time were questioning the
fact that the medical library did not contain general reading materials, or in other words, recreational reading. To address this problem, the Medical Students Society began a small library.

The Students' room has been furnished partly at the expense of the University Council and partly by the Society. . . . A bookcase has been purchased, and about 130 volumes of general literature ordered to form the commencement of a Students' Library (Speculum, No. 17, 1889, p.14).

This library continued to grow through both purchases and donations. In 1911 the Medical Students' Society established technical libraries at each of the teaching hospitals, a practice which, while initially successful, soon proved to be financially draining, and the libraries were eventually closed. The only criticism that the medical library attracted was from students questioning the library's loans policy, which allowed books to be taken out of the library before exam times for far too long. A student wrote that 'it seems to me that the books in the Medical Library should be viewed as works of reference only, and on no account should men be allowed to have them away for days and even weeks at a time. The very objects of the Library appear to me to be thereby frustrated' (Speculum, No. 36, 1896, p.101). This appears to be a justifiable criticism, though no mention is made in further issues of this journal about this particular problem. It is not until the 1930's that there is any information concerning the problems of students borrowing library materials: an annual report produced by the medical library in 1931 stated that the importance of a number of books to medical students had resulted in the policy that books could not be removed from the library without the express agreement of the librarian.

While the medical library had finally secured direction and annual funding through the leadership of the Medical Library Committee, there is no mention made
of anyone being directly responsible for it until 1892. While it is known that James Booth, a medical student at the University, was appointed to look after the medical library in 1880, there is no mention of him after this year, and one can only guess that he may have held this position for a few years until he completed his medical studies. The annual report by Allen in 1892 is significant in that mention is made that the librarian of the Medical Library for a number of years, Mr. Burke, had passed away. No mention is made of when Mr. Burke assumed the role of librarian, but there is reference to the fact that he had been actively involved with the Committee since its formation, acting as Secretary, and on the basis of this position he may have been appointed as librarian as early as 1887. It was in this year that he was asked to prepare a list of journals in the library, and he also noted that the library catalogue was incomplete. The annual report for 1891 goes on to state that in this year,

Mr. J. Steele Robertson, B.A., was appointed by the Council in the room of the late Mr. Burke. On his accession to office, stock was taken of the contents of the Library, the books and journals were re-arranged, and two new and complete Index Catalogues- one indexing by authors, the other by titles -are almost completed (Medical School Library Committee, Annual Report, 1892).

The report also notes the continuing need for more spacious accommodation for the medical library, as the number of periodicals had again been increased and a large number of books had been purchased. Funding for shelving was also desperately required, as there was not enough space to accommodate the new books and journals that had been ordered.

The comparatively good times that the university, medical school and medical library had been enjoying in relation to funding came to an abrupt halt in the 1890’s as Melbourne experienced a depression:
The "boom" broke rather suddenly and a terrible "depression" followed. In August, 1891, four banks closed, and within the next year the operations of twenty-one trusted financial bodies were suspended, holding up payment to depositors of £11,000,000 and calling up £4,600,000 of unpaid capital (Graham, 1948, p.279).

The medical library was affected by the depression in 1893, when the annual vote was reduced by half, dropping to just £150, and finances were denied for the extra shelving requested. The vote was to remain at this level for a number of years, and the implications of this action to the library were discussed in the Annual Report of the Medical Library for the year 1893:

The decreased vote to the library has been found very crippling. The greater part of the medical literature of the day, and almost all records of advance in medical science, are published in periodicals; therefore if the library is to be of any real use at all to the teachers and students of the medical school, a very large number of medical periodicals must necessarily be subscribed for. Moreover, to prevent loss, the parts of these must be regularly bound as the volumes are completed. When it is pointed out that 115 periodicals (issued at various intervals from weekly to yearly) are regularly received, and that during the last twelve months 370 volumes had to be bound, the necessity for a larger vote than the library last year received is at once apparent (Medical School Library Committee, Annual Report, 1893).

The purchases for the year were very small, the primary additions to the library being those volumes ordered in the past year which were not immediately received. The Annual Report reasserts the familiar problem of increasingly cramped accommodation for both the books and the students in the library, and requests additional funds to provide new shelving, stating that the shelf accommodation has become so bad 'that for the last three months several hundred volumes have had to be stacked upon one of the two large tables in the library, much to the inconvenience of students' (Medical School Library Committee, Annual Report, 1893). The sum of £15 was requested to begin the process of adding additional shelving to the library, which would not only alleviate some of the crowding but also 'permit the proper classification and numbering of the 4000 volumes in the library, a
proceeding hitherto impossible, and thus of the perfecting of the catalogues, already almost completed' (Medical School Library Committee, Annual Report, 1893). As a possible consequence of the reduction in the vote the medical librarian sent out some 2000 letters to libraries, governments, medical organizations, etc., asking that any surplus and relevant library materials be donated to the medical library. The request was met with a large number, and wide variety, of donations, which in part added to the cramped conditions that the library was trying to alleviate. The year, while financially quite difficult, did see the production of a major work which was to become of instant importance to the medical profession and also important in relation to the holdings of libraries, particularly medical libraries, in the state of Victoria. Beginning with the preparation by Mr. Robertson of a list of the medical periodicals contained in the medical library at the University, and assisted by similar ones prepared by the Librarians of the Public Library and the Medical Society of Victoria, Professor Allen prepared a "tabular list of the Medical Periodicals in Melbourne Libraries," which was published in the Australian Medical Journal, and has been found very useful by the profession (Medical School Library Committee, Annual Report, 1893).

This listing equipped members of the medical profession with invaluable information about which libraries in Melbourne contained particular medical journals and which issues of these particular journals were available in the city. It also brought these three significant libraries together in a joint exercise which furthered the ability of all to provide better service to the medical community.

The annual report for the year 1896 illuminates the continuing problems faced by the medical library in light of the severe financial restrictions still imposed upon it by the Council. The medical library had been unable to purchase any new
works for the collection, 'save by way of completing works being issued in parts at intervals, and purchasing volumes of transactions of societies and periodicals' (Medical School Library Committee, Annual Report, 1896). The accommodation problem for library materials was becoming ever more desperate, with the removal of a number of less frequently used volumes to the lecturers' robing room and the Faculty room as a temporary solution to storage problems, though even with this removal 'it has been found impossible to keep the books properly classified, for which reason numbering had to cease' (Medical School Library Committee, Annual Report, 1896). The financial constraints imposed upon the medical library and the related problems of accommodation for both books and students in the library, were to follow the library into the first years of the twentieth century. The library, though suffering in terms of the consistency and maintenance of its book and periodical collections, remained an influential institution for the medical community in Victoria, providing valuable information sources to medical students, the medical faculty and the larger medical community alike. The library was able to begin the process of making up for these sparse years as the economy stabilized and grew, and the annual vote for the library was increased in the years following 1905. The regeneration of the medical library in terms of the supply of periodicals and books occurred at such a rate that by 1907 'Professor Allen was able to say that "the Library is now one of the finest south of the equator"' (Gandevia, 1948, p.23).

By 1905 the library vote had crept back up to £180, and a grant of £30 was provided to cope with arrears in binding. In 1908 the book vote was increased to £250, and in 1909 it finally reached the point that it had been at in the early 1890's, £300. The medical library was again able to purchase books, though on a limited
The library scale and to expand its periodicals holdings and purchase any that had been missed in previous years, as well as to increase the amount of binding. The library was still very active in campaigning for more substantial increases in its funding, and also in documenting the storage and accommodation problems that it was facing. However, in 1905, a manageable solution was finally suggested to solve the continuing space problems facing the library. The annual report for this year states that,

As reported year by year, the library accommodation is not sufficient in floor space or wall space. The suggestion has already been made that the room now occupied by the Medical Students should be devoted to Library purposes, and other more suitable accommodation provided for the Students Society. There would then be space for the growth of the Library for several years. A special grant of £125 would be necessary for alterations and fittings (Medical School Library Committee, Annual Report, 1905).

Though the move eventually took five years to complete, the Annual Report for the year 1909-1910 mentions the fact that the library was undertaking the move and quite anxiously looking forward to its completion, especially considering the fact that in this year 97 volumes were purchased, 72 volumes received as gifts, and 160 volumes bound, stretching the already tight accommodation to the limit. A Report to the Council on the management of the University Libraries in this year also provides some new information concerning the functioning of the medical library:

The Medical Library is under the supervision of the Secretary to the Medical School. It is open 9 to 5 on ordinary days, from 9 to 12 on Saturdays. It is not closed for lunch hour; and there is no assistant in charge when the secretary is out. There is free access to the shelves, except that the newest books are kept in a locked case; to use these application is made to the secretary, who can thus better see that they do not go astray (General Library Committee Meeting Minutes, 1909).

The report goes on to mention that card catalogues, both author and subject, are maintained for the library and that books are allowed to be borrowed from the
library, patrons writing their details in a loan book. The librarian is also given credit for maintaining and checking the collection, with missing books being reported as few.

The addition of the Medical Students Society club room to the medical library was finally completed late in the year of 1910, 'the available floor and wall space being greatly increased . . . The Library Committee gratefully acknowledges the provision made for new fittings, which will give adequate storage for all acquisitions for several years' (Medical School Library Committee, Annual Report, 1911). The continuing vote of £300, with a special vote in the year of 1911 for the purchase of books, allowed the library to expand both its services and its collections in ways previously impossible through the lack of space. Information about the medical library from 1911 to the mid-1920's is lacking in terms both of Medical Library Committee Meeting Minutes, which do no resume until 1923, and of General Library Committee Meeting Minutes, so that the history of the library will have to jump forward approximately 12 years.
VII. The Medical Library in the Twentieth Century

The growth of the Medical School, and the medical library, at the University of Melbourne paralleled the continued increase in population in the state of Victoria: 'Soon after the turn of the century Melbourne topped the half-million mark' (Dingle, 1984, p.152). The number of students attending the University of Melbourne increased, as did the number enrolled to study for medical degrees. When celebrating its jubilee in 1915 the medical school could also note the ever increasing enrolments at the school in relation to the total number of students studying at the University. In 1919 the total number of students at the University was 1987 of whom 664 were medical. Compared with 1914 when there were 407 medical students, this is a sharp rise, but in the subsequent years the increase was even more marked. In 1920 there were 782 medicals and the post-war peak was reached in 1921 with 795 (Russell, 1977, p.128).

To support the increasing health needs of the growing population, and the increasing number of medical students, the Medical School again expanded. The Anatomy Department was first in line for a new building, completed in 1923. The movement of Anatomy into a new building created a new home for the medical library: 'When anatomy finally moved into the new building late in 1923 the anatomy museum on the ground floor of the old building was modified for the medical library and the dissecting room on the top floor, after considerable modification, became the biochemistry laboratory' (Russell, 1977, p.130). The medical library had moved from the "old medical school" into the one completed in 1885. This building was to house the medical library until 1967, when it received a new building of its own, subsequently named the Brownless Medical Library.

The movement of the medical library into larger accommodation was obviously greeted with great enthusiasm, not only by the staff of the medical library,
but also by its patrons. The happiness of the medical students is presented in a brief account of the move published in *Speculum*, which states that the old medical library

has been moved into infinitely more suitable quarters in the old Anatomy Museum. Under the capable guidance of Professor Osborne all literature of interest to medical students is being gathered into this central spot. An especial feature, we understand, is to be made of current scientific journals. Only those who have experience of "hunting up references" under the old regime will appreciate the immense benefit this will confer on future generations (No. 115, 1924, p.106).

The medical library was able for the first time in many years not only to purchase books and journals, and finish binding, without thought to the old problems of accommodation, but also to bring the collection of infrequently used library materials, previously stored in miscellaneous rooms, together with the main collection in the new library.

A Joint Meeting of Representatives of Library Committees was called in 1924 to consider the question of library service within the university, with Professor Osborne acting as the representative of the medical library. This Committee produced a report and recommendations in 1925 which provide a significant amount of information concerning policies affecting the medical library and decisions relating to the organization of the university library network. It was proposed that the medical library be known as the medical and chemical library, a proposal which was eventually accepted. Those recommendations of interest to, or affecting, the medical library are listed below:

3. That the direction of the several libraries be by Committees as at present, but that the Librarian act as Secretary to the Committee of the Medical and Chemical Libraries.
4. That all requisitions for the purchase of books for the libraries be submitted to the Librarian for reference by him to the appropriate Committee or Head of Department.
5. That orders shall issue from, deliveries be made to, accounts be kept and cataloguing be done under the direction of, the
Librarian. 7. That the Medical Library be open during the evening to the same extent as is the Central Library. 8. That the following officers be added to the permanent staff of the libraries and be under the direction of the Librarian. A. Medical Library - an officer to supervise by day and keep records at a salary of £200 per annum. An evening supervisor at 30/- a week. 9. That the Medical Library Officer act also as Secretary to the Dean of the Faculty of Medicine. 10. That the Medical Library Officer be appointed as soon as possible. It was thought that some student might be appointed as Evening Supervisor in the Medical Library in the same way as is the Evening Supervisor of the Central Library (General Library Committee Meeting Minutes, 1925).

Though the medical library had moved into its new accommodation, the 1924-1925 Annual Report of the General Library Committee discussed the fact the library was in need of major reorganization after its move into the old anatomy museum. A Miss Matthews, appointed to work in the chemical school library, was transferred to the medical library to help establish order and complete the reclassification of books according to the Dewey system: 'She undertook the responsibility and has now classified, catalogued and shelved all medical books according to the Dewey Decimal System' (General Library Committee, Annual Report, 1925). With the move complete and order established at the new library, the Medical Library Committee was next faced with a fight to increase the annual vote for the library.

By this time the annual vote had been marginally increased to the £400, although it was felt by the medical library committee to be an amount very much below the needs of the expanding library. On the 30th of September 1926, with the vote still at £400, a meeting of the Committee reported that,

As the Library grant for the year is £400, no books can be ordered and binding will have to be postponed. After general discussion it was decided (1) that, for the present no periodicals be discontinued, and, (2) on the motion of Professor Berry, that a letter protesting that the grant was utterly inadequate for the needs of the Library, be sent, by the Chairman, to the University Council (Medical School Library Committee Meeting Minutes, September 30th, 1926).

While acquisitions for the library were restricted, the year did see increased
cooperation take place between the medical libraries operating in Melbourne, a
development which could not have occurred at a better time for the medical library,
struggling to adequately maintain its collections. The same Medical School Library
Committee meeting in 1926 reported that

on June 24th 1925 a conference of representatives of the Committees of the
Medical and Chemical School Library, the B.M.A. library, and the library of the
Walter and Eliza Hall Institute had been held, when it was decided that the libraries
co-operate to avoid duplication, and to secure as far as possible the purchase of all
important medical and chemical journals by some Melbourne library. As an
outcome of the Conference a list of Medical and Chemical journals currently
received in Melbourne had been prepared, and typewritten copies were available
(Medical School Library Committee Meeting Minutes, September 30th, 1926).

This type of cooperation marked an important step by the medical libraries to
increase their usefulness to the medical community by working together to secure
subscription to, and the completion of, important runs of journals.

The medical library celebrated the year 1928 as one which would finally
allow it to make good the cutbacks of the past and to update the medical collection.
It was in this year that the library vote was increased to £1000. The annual report
for the year 1929-30 provides the information that 384 bound volumes had been
added to the library, which now consisted of 3128 books and 8958 bound volumes
of periodicals. The report also praised the increased vote in terms of the number of
journals that it had been possible to purchase and of the fact that these were very
important to the functioning of the library:

The number of periodicals received in the Library has been considerably
increased in recent years. This class of literature is so essential to professors,
teachers and research workers in medicine and chemistry, and to the medical
practitioner, that periodicals constitute the major part of the Library; and it is likely
that in the future the proportion of periodicals to other books will be even greater
than it is at present. The Library is now committed to an annual expenditure of
£650 for periodicals and £150 additional for binding them (Medical and Chemical
This report also mentions the ever-increasing use made of the medical library by the medical community: 'The extensive use made of the Library indicates how greatly it is appreciated not only by staff and students but also by workers from other scientific institutions and by the practising doctor' (Medical and Chemical Library Committee, Annual Report, 1929-30). Though the library was happy to play a leading role in the provision of library services to the medical community in Victoria, it believed that to maintain this role at least one additional staff member would have to be appointed. The library had only one attendant, making the addition of other staff members an important issue for the library, though it was one that was not resolved for a number of years. The role of the library in serving the medical community was also enhanced that year with the implementation of an agreement between the medical library and the Public Library whereby certain specified periodicals could be borrowed by the medical library from this institution. The agreement was proclaimed as an easy way to avoid unnecessary duplication and also to promote closer co-operation between the two libraries. The Annual Report of the General Library Committee for 1930/31 provides valuable information about the number of periodicals subscribed to by the university and, more particularly, the medical library: 'The University Libraries subscribe to 505 periodicals, 350 in the General Library and 155 in Medical Library. Of the General Library periodicals, 181, and of the Medical Library periodicals, 99, are taken elsewhere in Melbourne' (General Library Committee, Annual Report, 1931). The increasing cooperation between medical libraries was helping to ensure that the extent of duplication between the various medical libraries would decrease as new relationships were founded concerning the exchange of materials. In 1932 the
medical library received a valuable collection of periodicals from Sir James Barrett 'consisting of files of German ophthalmological periodicals covering the years from 1874 to 1914' (Medical and Chemical Library Committee, Annual Report, 1932). The rest of the library collection was growing at a substantial rate during the 1930's as the annual vote remained at £1000, though most of these funds were spent on the purchase of periodicals and the subsequent binding of the completed volumes. Books of course were purchased, but the emphasis was placed on the continued building of the journal collection, an important research tool for the medical community using the library. The number of bound volumes in the medical library had increased to 14,996 by 1937 and the popularity of these volumes among the growing number of medical students is noted in a comment concerning borrowing privileges at the medical library made in a meeting of the General Library Committee in 1933, where it is noted that, at this time, 'the number of copies of books is limited and many are in constant demand; consequently students cannot be permitted to take books out of the Library except with the permission of the Librarian, who may require a written order from a Professor or Lecturer' (General Library Committee Meeting Minutes, 1933).

The formation of the Medical Library Committee in 1887 had played an important role in ensuring the existence of the medical library at the University of Melbourne and also in guiding its growth and reputation since this date, as this thesis has documented. The continued need for this Committee came into question in 1939, when a conference was called between the Medical and Chemical Library Committee and the General Library Committee to debate the amalgamation of the two. At this meeting
Both Professor MacCallum (Dean of the Faculty of Medicine) and Professor Hartung (Medical and Chemical Library Committee) considered that there was no necessity to continue the separate committee for the Medical and Chemical Library, and it was agreed to report to the General Library Committee . . . in favour of an amended Library Statute (Report of the Conference between members of the General Library Committee and members of the Medical and Chemical Library, General Library Committee Meeting Minutes, 1939).

The meeting proposed a series of statutes, which were eventually accepted by Council in 1939 and came into force in 1940. These included that the library be divided into the "General Library", which included all the various branches, and the "Veterinary Science Library". The management of the General Library and the various branches was to be 'entrusted to a committee consisting of two members elected annually by the professorial Board, and one member elected annually by each of the Faculties of Agriculture, Architecture, Arts, Commerce, Education, Engineering, Law, Medicine and Science' (Report of the Conference between members of the General Library Committee and members of the Medical and Chemical Library, General Library Committee Meeting Minutes, 1939). The Librarian appointed in charge of the General Library was to act as the Executive Officer of this committee, and all purchases for the General Library and the branches, including the medical library, were to be made by the Librarian. The Veterinary Library was to be managed by the Director of the Veterinary Institute.

The year 1940 saw the first Annual Report issued by the new General Library Committee, thus closing an important chapter in the history of the medical library.

A Library Committee meeting in late 1940 provides some vitally important information about who had recently held the position of librarian at the medical library, no name being mentioned in annual reports or committee meeting minutes since that of J. Steele Robertson in the early 1890's. At this meeting it is noted by
the University Librarian that 'Miss Gordon, Librarian in the Medical School Library was likely to resign at the end of the year' (Library Committee Meeting Minutes, 1940, No.4). At a Library Committee Meeting in 1941 the Librarian 'reported that on the resignation of Miss Gordon from the Medical Library the Vice-Chancellor had approved the promotion of Miss Main and the appointment of Miss L.M. George to fill the vacancy' (Library Committee Meeting Minutes, 1941, No.1). Since there is no mention made of Miss Gordon in any of the Medical Library Committee records it is not known for how long she had been in this position, and it is possible that there was at least one other librarian between Mr. Robertson and Miss Gordon.

The annual vote for the medical library had gradually increased to £1100 by 1940, with the number of bound volumes reaching 16,678. The medical library had been experimenting with the extension of operating hours, because of the increasing use of the library, by opening from 7.30 to 9 p.m. on Tuesdays and Thursdays during terms. It was found that the small numbers of students using the library at this time were generally visiting only to borrow books, and it was suggested by the Library Committee that improved lighting might increase use. The issue of the need for improvements in medical library facilities was carried over to Library Committee meetings in 1941. A report produced by the new medical librarian addressing these needs was presented later in the year and called not only for adequate lighting but also for additional seating, floor coverings and the production of a subject index to monographs, text books and review journals in the medical library. In response to the report the Library Committee decided

(1) to recommend to the Council as urgent needs the provision of adequate lighting, floor covering and seating accommodation; (2) to open the library for
reading purposes (and not only for borrowing as at present) on three nights per week in 1942; (3) to approve the preparation of a subject catalogue, to be commenced as soon as practicable. The Committee realised that resolution (2) would involve additional demands on the staff which would have to be considered under another item (Library Committee Meeting Minutes, 1941, No.4).

A recommendation dealing with the appointment of an additional staff member was also forwarded to Council, with the inclusion of a request for increases in pay for those already employed. In 1942 a pay increase was granted to a few of the permanent staff members and provision made for the hiring of one person in a temporary position. The consideration of other improvements to the library was to take the Council a bit longer.

In 1943 the Vice-Chancellor agreed to the appointment of an additional staff member and Miss P. Wade was appointed to the library in a junior position. He also reviewed the recommendations made by a committee comprising Professor MacCallum, Professor Wright and the Librarian which dealt with the planned improvements to the medical library, including lighting, structural alterations to allow for better supervision, special shelving for new books, a photostatting service and improvements in the accommodation for readers. The improvements in accommodation focused on plans to increase the seating in the library from the 60 it currently had to 100, at an estimated cost of approximately £800. This year also saw the commencement of work on a union catalogue by the assistant at the Medical Library, Miss Corzier. The catalogue was to be an updated version of those previously prepared listing medical journals in Melbourne libraries. By 1944 the catalogue was completed, the report for this year stating that apart from the normal work of the Library certain work of wider interest has been done. Early in the year the list of medical journals in Melbourne libraries prepared by Miss Corzier and Miss Main was issued with the co-operation of the Librarian of the Royal Australian College of Surgeons who did the necessary typing.
and duplicating. This effort has proved of considerable value and requests for the list have been received from overseas (Library Committee, Annual Report, 1944).

The accommodation plans for the medical library were also approved by Council, though not implemented until 1947, as the Council deemed other projects to be of greater urgency. The medical library also saw a change in leadership late in 1944, with a list of the current staff at the medical library for 1945 noting that a Miss J. W. Raff was in charge of the medical library and currently receiving £300 a year salary with an additional £48 for living expenses. She held this position until 1948, when it is noted in the annual report that 'Miss J.W. Raff, after twenty-five years' service to the University, and since 1944 in charge of the Medical Library, retired at the end of December' (Library Committee, Annual Report, 1948). The frequent changes in library staff at the University were noted as a problem in the report for the following year, which observed that

as library service in Victoria develops frequent changes in staff are likely. It is unfortunate that members of the staff frequently leave just as they are becoming really useful; but there is some aggravating satisfaction when officers trained here are chosen for financially better library positions than the University offers (Library Committee, Annual Report, 1949).

The Library Committee went on to suggest that some of the senior library positions be equated with lectureships in an effort to attract, and keep, skilled librarians at the University. In 1948 Anne Harrison joined the library, and in 1949 she was appointed as medical librarian, 'and held that position until her retirement in 1983' (Incite, 1989, p.5). She played an influential role not only in the continued development of library services but also in positioning the medical library as a dominant partner to other medical libraries in Victoria, particularly in relation to the formation of the Central Medical Library Committee.

Though cooperation between the medical libraries in Melbourne had been
taking place, there were a number of problems which needed to be addressed in order to establish and improve relationships. The primary problem facing the medical libraries was a reliance on a union list of books and journals from 1943 which was obviously incomplete in terms of current library holdings. The union list hampered inter-library loans between the medical libraries and was ineffective in helping the individual libraries to rationalize their own holdings by comparison with those of other libraries. In an effort to explore and hopefully produce some solutions to these mounting problems Anne Harrison and Jean Scott, Librarian at the Walter and Eliza Hall Institute, called a meeting of medical librarians in Melbourne in 1950. The group, which included the librarians of the Royal Australasian College of Surgeons, the Medical Society and various hospitals quickly formed a voluntary network, members of which were in almost constant contact with one another, and began meeting regularly to address the primary problem of library holdings. The program of action agreed upon at these first meetings required that

each member list amendments to the 1943 union list for her own holdings, and circulate copies to all other members. Members also listed their wants and duplicates, which were collated in a master-list at the Medical School Library for the circulation of exchange lists interstate and overseas (Harrison, 1955, p.19).

It was eventually decided that because of the continued growth of the group, and the initial success that they had in collating the information about individual library holdings, a new union list should be produced. It was first necessary, however, to establish the group on a more official, and permanent, basis.

The interest shown in the work of the medical librarians' group and the support that it received, not only from the University librarian and faculty of medicine at the University of Melbourne, but also from officers from other member
institutions, allowed the group to establish itself on a formal basis. The Vice-Chancellor of the University of Melbourne in May 1953 began the formal process by convening a

meeting of representatives of institutions having an interest in medical Library services. Members were asked to subscribe £25 and pledge support for a program of activities for the period 1953-54. The University undertook to provide a paid part-time assistant for the work of the Organization, as well as assistance in kind. Fortunately the Medical School Library had just obtained a share of a sub-basement in the University grounds, and this was offered as a Central Medical Exchange, where for the first time duplicates could be shelved and listed in one series (Harrison, 1955, p.19).

The Central Medical Library Organization was officially established in June of 1953, with 18 medical libraries joining the organization and subscribing their £25 a year. The only prerequisite for membership was that the libraries must have librarians. The objectives of the organization were focused on continuing those activities already initiated by the group, in the hope that the service would one day form the backbone of an integrated library service. Those in the organization were relieved of the housing and listing of duplicates, as 'these were centralized in the Exchange after local requirements had been met. Incomplete cards for the union list were collected and typed at the Medical School Library, and in the process were scanned for scattered and broken files' (Harrison, 1955, p.20). The organization appointed a committee, consisting of Associate-Professor Russell as Chairman, Miss Harrison as Secretary, and representatives of all member libraries, to oversee the work and to assume responsibility for a report on the progress of the venture, to be presented in 1954, when the organization would be reviewed.

In the event the Organization was particularly successful:

The overwhelming need for such a service is shown by the fact that during the first twelve months of its operation no less than 289 bound volumes of periodicals, 523 unbound complete volumes and 2952 unbound parts were
obtained by exchange and distributed to the libraries which requested them, at no further charge apart from their subscription to the C.M.L.O. (Russell, 1977, p.189).

The Organization, while concentrating its efforts on the exchange, was also interested in improving the quality of medical library services around the state of Victoria. In an attempt to establish acceptable standards in this area, the Organization Committee encouraged member libraries to formulate library policies dealing with services and collections, recommended the collection of medical materials across the non-metropolitan areas of the state and produced a statement on library standards thought to be relevant for the development of new libraries.

The organization was also concerned with the state of medical librarianship in Victoria and the fact that there were no standards in place ensuring the proper training or certification of medical librarians. That the Library Association of Australia, the body responsible for the examination of librarians, had no test specifically for medical librarians was noted as particularly distressing. The Committee took the view that 'training was the responsibility of the librarians themselves, but that the Committee's influence should be exerted to secure recognition of such training when acquired' (Harrison, 1955, p.21). The Central Medical Library Organization had in two years already established itself as an important body drawing the medical libraries of Melbourne together to improve library collections and services. It was also credited with being 'a key factor in the development of hospital libraries in Victoria, encouraging the employment of qualified staff, improvement of collections, and co-operation through union lists and duplicate exchanges' (Biskup, 1994, p.305). The continued existence of the group hinged on the review of the organization, to take place in 1954 after the Organization Committee completed a report of the success of the group in meeting
its objectives. The developments occurring at the medical school library in terms of personnel and space for the collections are intertwined with those of the Central Medical Library Organization, and so the findings of the report will be presented after the activities of the medical school library are brought up to the year 1954.

The number of bound volumes in the medical library reached a figure of 20,851 in 1949. It was also in this year that a significant gap in periodicals was filled in for the library through the efforts of Professor MacCallum in receiving 'from the Royal Society of Medicine a microfilm reader and some hundreds of feet of microfilm copies of German Medical Periodicals to fill many of the gaps left in our war-time files' (Library Committee, Annual Report, 1949). The library also received in 1951 a total of 29 sets of various medical journals on permanent loan from the Victorian Branch of the British Medical Association, some of which were the only sets in Australia. The growing number of important donations, in combination with the regular acquisitions of the library, once again began to strain the storage capabilities of the medical library, and requests to Council to consider improvements in accommodation and facilities began once again. There were also continuing concerns about recurring water damage that had occurred as the result of the library's position under the biochemistry laboratory. These concerns, along with the space problems that the medical library faced compared to other branch libraries, were highlighted in the annual report for the year ending 1951:

Yet none of these is so seriously handicapped for space as is the Medical Library, where the position is now desperate. There is little room for additional shelving and even if there were ample room, the position of the library under the bio-chemistry laboratory, with frequent slight (so far) damage from water is, making an understatement, 'unfortunate'. The fear of serious damage is real. The recent transfer, on permanent loan, of twenty-nine files of medical journals from the Medical Society's library makes the need for space especially urgent (Library Committee, Annual Report, 1951).
In 1952 Miss Harrison, now recorded in Committee Meeting Minutes as being in charge of the Medical Library, wrote a memorandum to the Library Committee stressing the need for more shelving and for changes to the staff room to increase the amount of work space. The memo was sent by the Committee to the Faculty of Medicine to secure their approval and receive additional input into plans for the expansion of the library. Later in the year the Medical Faculty responded to the memo, agreeing

(i) that in order to ease the shelving position certain books be stored in the basement of the New Arts building
(ii) that the Buildings Committee be asked to investigate the possibility of flooring over the museum in the Anatomy Building and using the floor space so provided as the Medical Library
(iii) that more efficient accommodation be provided in the librarian's room (Library Committee Meeting Minutes, 1952, No.2).

These alterations to the Medical School Library were later in the year approved by the Council, and it was subsequently noted in a Library Committee Meeting that the alterations to the library had taken place and that selected periodicals were now being stored on shelving erected in the basement of the new Arts building.

The extension of accommodation facilities for the medical library had an important impact in allowing the library to continue to act in a leadership role in relation to the functioning of the Central Library Medical Organization. The success of the Organization was in large part due to the assistance that the medical library, and the university, gave the fledgling organization in terms of a part-time clerical assistant and accommodation for the duplicate materials collected from the member libraries. The assistance provided, while requiring some money and effort, at the same time directly benefited the university and the library by strengthening the holdings of the medical library and enhancing its position as one both able and willing to lead the medical library community in its quest for better organization and
services. The activities of the Organization are mentioned for the first time in Library Committee Meetings in 1953, though the Report for the Year ending 1953 has a significant amount of information on the accomplishments of Central Medical Library Committee and the positive effects that it was bringing to the medical library:

Lists of Melbourne wants have been circulated and masses of material have arrived from overseas: our own lists of surplus material have been circulated and many demands made on those lists. Our own Medical Library as a result of this work is likely to grow and grow in importance; and with the establishment of the new chairs more demands will be made on it. The co-ordination of the work is not easy and many problems of distribution, the building up of files in the places where they will be of most value, decisions on importance, will present difficulties that the Committee will not be able to solve too easily. The response to the requests for gifts of surplus material from overseas has been very generous - so generous as to be somewhat embarrassing. But there can be no doubt of the value of the work to this University in particular and to medical work in Melbourne in general (Library Committee, Annual Report, 1953).

The overwhelming success of the Central Library Medical Organization ensured that it remained an important association drawing Melbourne medical libraries together. The report produced by the Organization Committee at the end of 1954, detailing the activities of the group, was circulated and later accepted by all members. It included a number of recommendations, upon acceptance to become rules for the Organization, including 'that the Organization continue as a properly-constituted, financially self-supporting body, for which a subscription of £50 per member was proposed, to pay for a full-time assistant and incidental expenses. In addition, the University pledged continuance of paid half-time assistance and assistance in kind' (Harrison, 1955, p.20). The Central Medical Library Organization continued to unite medical libraries throughout Melbourne in their determination to improve the organization of existing medical resources, though one ambition was never fulfilled. The Organization was not able to achieve the
goal of becoming the foundation for an integrated library service, primarily because

the growth in quantity and sophistication of medical work outstripped the
growth in medical library facilities, and the base library for the system, the Medical
Library of the University of Melbourne, became relatively less adequate as a base
library for a system which now includes two other universities. We were always
perfectly clear that a medical library service could only be founded on a base
library of a higher order of size and wealth than the libraries it was designed to
serve (Harrison, 1969, p.292).

Nevertheless, significant gaps in periodical collections were filled through duplicate
exchange and donations from overseas, the end result being better library service
to the medical community. The role of the Central Medical Library Organization
was, however, beginning to falter by the 1980's, a Committee Meeting called at this
time to consider the future of the Organization receiving no input from members on
future activities that the Organization should implement. The meeting was intended
to clarify future activities, 'but in fact it was quite unproductive. Those members
who replied expressed appreciation, especially of union lists, but made no concrete
suggestions' (Brownless Medical Library, Annual Report, 1982). The service
continued to function out of the medical library at the University of Melbourne, the
Life Sciences Librarian acting as the Secretary/Treasurer to the Organization, a
position which allowed her to keep in constant contact with other medical libraries
throughout the state. Along with the continued production of holdings lists, the
Organization concentrated attention on inter-library loans for its members with the
introduction of the PALS scheme. The introduction of the PALS scheme, through
which members of the organization obtained a cost-efficient and fast inter-library
loans service, proved extremely popular with members. By 1991 the 'PALS
scheme, in which the 31 participating libraries request books and photocopies,
mainly from the University of Melbourne, resulted in 5168 requests for the period
July 1990 - June 1991. 42,943 photocopied pages were supplied during the period' (University of Melbourne Libraries, Life Sciences Division, Annual Report, 1991). At the same time 189 overseas requests were processed for members. This service, unfortunately, came to an end in June, 1994, when it became clear that the 'CMLO did not enjoy sales tax exemption and that it would be necessary to raise the costs and reorganise the service along the lines of a small business in order to continue the service' (University of Melbourne Libraries, Life Sciences Division, Annual Report, 1994). The future of the service, and of the organization, has yet to be decided.
VIII. The Expansion of the Medical Library and Establishment of the Brownless Medical Library

The year 1954 marked a turning point for the leadership of the libraries at the University of Melbourne. The University had created the position of librarian in 1892, removing the responsibility for the running of the library from the Registrar\(^4\), but the first professional librarian - Leigh Scott - was not appointed until 1926. It was in 1954 that 'Mr. Leigh Scott after a twenty-eight years' span as University Librarian, and a distinguished career in the Australian Library and book world' (Library Committee, Annual Report, 1954), retired from the university. The year also saw significant events call into question the storage solutions which had been adopted by the medical library in an attempt to solve the growing storage problem that it was facing. A Library Committee meeting in May of that year saw Associate-Professor Russell draw attention to

the acute shortage of space in the Medical Library particularly for the accommodation of periodical sets. Valuable and irreplaceable material was housed in a basement which was liable to flooding and the reading room itself was still subject to water damage from the floor above. The Acting Chairman suggested that the vacating of the Biochemistry building, now anticipated for 1956, might afford additional storage facilities for the Medical Library (Library Committee Meeting Minutes, 1954, No. 2).

The anticipation of water damage was to be fulfilled later in the year, when it was reported that '600 books were recently soaked by a flood in the basement' (Library Committee, Annual Report, 1954). In 1955 the library introduced a temporary solution to the storage problem by shelving new issues of periodicals with those volumes already bound. The removal of new periodicals from the reading room

\(^4\) 'Initially the libraries were the responsibility of the Registrars or their staff, but assistants could be appointed to look after the libraries once they were large enough and needed to be properly organised and supervised' (Adams, 1985, p.97).
allowed this room to be expanded, though in reality this accomplished little more than only briefly stemming the ever increasing tide of materials entering the library, particularly when one takes account of those entering through the affiliation of the library with the Central Library Medical Organization. The library remained the base library for the Organization and in 1955 alone ‘acquired 70 bound volumes, 164 unbound volumes, and 86 unbound parts from this source’ (Library Committee, Annual Report, 1955). The problems of accommodating medical library materials were briefly forgotten with a recommendation for an additional staff member for the medical library being accepted in 1955. The request was made to Council in anticipation of longer opening hours. With the appointment of a junior assistant in 1955 the library was able to extend its opening hours from 5 p.m. to 6 p.m. on weekdays.

By the late 1950’s medical library accommodation was reaching a desperate state:

The large accessions as a result of the Central Medical Library Organization and the rapid proliferation of medical periodicals and monographs after the war meant that every available square inch of space was being fully utilized. In 1958 when biochemistry moved into their new building the laboratory above the medical library became vacant. This was to have been used by the library but for over twelve months the laboratory had been needed for the crowded classes in chemistry. Eventually it was finally vacated and alterations were made for its use by the medical library. It became a periodical stack area with seating for staff and students. Access was provided to it from the medical library and two preparation rooms were converted to library processing areas; toilet facilities were provided for library staff and a book lift was installed. It was during 1960 that the medical library took over the upstairs area but in addition books from the library were stored in at least five different areas of the university, including the basement of the new biochemistry building. Even so there was no adequate office accommodation for the library staff, the seating for staff and students was quite inadequate and many valuable books were still being stored in a wet, mouldy cellar below the library (Russell, 1977, p.195).

The basement of the biochemistry building was no better a solution for the storage
problems of the library than the cellar had been, as it had previously been the tank
room for cadavers in the old anatomy department and retained moisture, a
damaging environment for library materials. A proposal explored by the Library
Committee in 1958 dealt with the idea of the medical library serving as a central
medical library for the community at large, an idea which, if adopted, would
definitely have required the movement of the medical library into a far larger
building. The idea, originally conceived by the Central Medical Library
Organization, had secured the support of the Medical Faculty and was thus under
consideration by the Library Committee:

The Vice-Chancellor had agreed in principle to the use of the University
Medical Library as the basis for the scheme. Implementation of the scheme
requiring a new building, adequate book stocks and staffing would depend to a
degree on financial support from sources outside the University, but the new library
would be a fitting project to mark the centenary of the Medical School in 1962
(Library Committee Meeting Minutes, 1958, No. 4).

The Library Committee approved the scheme, subject to financial support from
other institutions being granted, though financial support for the project was not
forthcoming and the scheme was eventually abandoned. The continued expansion
of the medical faculty and of the number of medical students at the university by
the late 1950's again necessitated the construction of new buildings for the faculty,
and the plans for this expansion finally addressed the need for a new medical
library. In 1959 a new committee was formed by the medical faculty to plan for a
new medical centre for anatomy, physiology, pathology, bacteriology and
experimental physiology, and a new medical library building was incorporated into
these plans and the whole project given priority. Professor K.F. Russell, Associate-
Professor of Anatomy from 1948 and Reader in Medical History from 1956, was
Chairman of the University Library Committee throughout the 1950's and
acted as convenor of the faculty committee. The new library was planned for a site just south of the Baillieu library, which had been completed in 1958 and occupied in 1959, and adjacent to the site of the new pre-clinical building. Suggested plans for the building were presented to faculty in May 1959 and strong representations were made to council stressing the urgent need for the new building. Faculty also re-affirmed its support for a central medical library for the whole profession but this plan was shelved so as to concentrate on the new library. It was suggested that an appeal be launched as part of the centenary celebrations and the money could then be used to augment the holdings of the library (Russell, 1977, p.199).

The centenary celebration of the medical school was used as the platform for an appeal for funds to increase the holdings of the medical library and began with the aim of raising the substantial amount of £25000; and while ‘this target was not reached . . . a significant amount was donated by a relatively small number of the profession’ (Russell, 1977, p.202). Important donations to the medical library included in 1966 a large number of back issues of medical journals up to the year 1925, given to the library on permanent loan from the Medical Society of Victoria. The completion of a new medical library, scheduled for 1967, undoubtedly assisted in the acceptance of this important donation, space in the existing library having all but evaporated.

Though construction of a new medical library was under way, there had been no consideration of a name for the library once complete. The first meeting of the Library Committee in 1966 dealt with the naming of the library, as a letter from the Secretary of the Faculty of Medicine, addressed to the chairman of the Library Committee, Associate-Professor K.F. Russell, recommended that, based on faculty opinion, the new medical library be named the Brownless Medical Library:

The Chairman, in supporting this recommendation, pointed to the importance of Anthony Colling Brownless, not only as founder and chief architect of the Medical School, but also as a Vice-Chancellor and Chancellor of the University. He added that within the University at present, no memorial to Brownless exists. It was agreed that the Vice-Chancellor be informed of the Committee’s unanimous
support for this recommendation (Library Committee Meeting Minutes, 1966, No. 1).

The new medical library, the first specifically built for the medical library since its establishment in a small room in the medical school building in 1864, was named the Brownless Medical Library and opened in 1967. The small collection of medical books brought out by Professor Halford had grown to encompass more than 30,000 bound volumes. The medical library had finally been accorded a building which matched both the significance of the service it provided to the medical community and the high standard of its collection. The new library, built over three floors, provided ample room - and significant room for expansion - not only for the existing collection of periodicals and monographs, but also for the new Department of the History of Medicine, housed on the top floor. The establishment of this department was the result of a large grant from the Wellcome Foundation, financing as it did 'a large reading room where books and journals relating to the history of medicine are gathered together, and a rare book room together with another large room for a museum' (Gandevia, 1969, p.255). The museum was later furnished with the items from an 1850 London pharmacy, items which can still be viewed there today.

A year after the establishment of the Brownless Medical Library, the Library Committee had to farewell a man who had played such a significant role in the history of the medical library, most recently in helping to make secure the new library building. A Library Committee Meeting in 1968 noted the retirement of Associate-Professor Russell and at this time a fitting tribute was prepared by the committee to honour his contributions:

Associate-Professor K.F. Russell's association with the Library Committee
dates back to 1951. For the last nine years he has been Chairman of the Committee, and during that time he has rendered the Library services which have been both valuable and unremitting. This was a period of considerable growth, in buildings and accessories, and Professor Russell has played a large part in fostering that growth. As a member of several international bodies concerned with libraries, and especially medical libraries, and the author of a distinguished medical bibliography, he has naturally taken a significant role in the establishment of the Brownless Medical Library, the development of library services both within the state and beyond, in addition to devoting so much of his time and energy to the well-being of the Baillieu Library (Library Committee Meeting Minutes, 1968, No.2).

The retirement of Associate-Professor Russell fittingly marks the point at which this history of the medical library at the University of Melbourne is complete. The achievements of the medical library are still numerous and significant, its position as a leader within the medical library environment strong, and the service provided to medical students, staff, the medical profession and the community still excellent, as would be expected as the medical library continues to follow the pattern established in 1862.
IX. Conclusion

The medical library at the University of Melbourne was a product of the historical events occurring in Victoria in the nineteenth century. It in turn influenced the history of medical education and library services for the state, all of which have been documented in this thesis. The medical library was formed at a significant point in the history of the colony of Victoria, which, in 1851, separated from New South Wales. The discovery of gold increased the wealth and population of the colony, and Australia, and more particularly Melbourne, was increasingly viewed as a permanent home by this population. The combination of these factors was influential in the formation of a university in Melbourne. The need for an ever increasing number of doctors to care for the rising population, and the rapid increase in the number of diseases which accompanied this growth, necessitated the establishment of a medical school, and subsequently of a medical library, at the university. From the start, the medical library assumed an important place in the medical community, providing services not only to medical students and staff but also to a larger medical community. The library also established and maintained ties with the various medical society libraries in order to improve medical library services throughout the city.

Though the medical library faced numerous difficulties over the years, including the threat of amalgamation with the main university library, significant decreases in the size of its annual vote and an almost continuous accommodation problem, the medical library went from strength to strength as the years passed. The library, while active in developing the infrastructure of cooperation among medical libraries which was to develop into the Central Medical Library...
Organization, an organization which accomplished much, was also concerned with meeting the needs of Melbourne University students and staff, and as such vigorously sought new accommodation to maintain the high standards of service that had been so many years in the making. The opening of the Brownless Medical Library in 1967 was a fitting tribute to more than a century of medical library services at the University of Melbourne.
APPENDIX

LIBRARIANS AT THE MEDICAL LIBRARY

1880-?    Mr. James Booth
1887?-1891 Mr. Burke
1891-?     Mr. J. Steele Robertson
?—1940    Miss Gordon
1940-1944 Miss Main
1944-1948 Miss J.W. Raff
1949-1983 Anne Harrison
1983-1990 Joan Martin
1990-      Dorothea Rowse
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Blainey, Geoffrey and Norman H. Olver
Blainey, Geoffrey

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Dingle, Tony

Gandevia, Bryan

Gandevia, Bryan

Gandevia, Bryan

Gandevia, Bryan and Ann Tovell

Gandevia, Bryan and Ann Tovell

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Graham, H. Boyd
Harrison, Anne

Harrison, Anne

Hawken, Noel

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Wood, A. Jeffreys

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