

William Osler and *The Fixed Period*

Conflicting Medical and Popular Ideas About Old Age

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William Osler (1849-1919) has long been hailed as one of the most illustrious physicians in our history. Yet, Osler's claim to fame outside the medical profession in the early 20th century was through what became known as *The Fixed Period* controversy about the usefulness of old men. In 1905, as the 55-year-old Osler said farewell to Johns Hopkins University School of Medicine before leaving for Oxford University in England he remarked that men older than 60 years should be retired. He further mentioned a suggestion, which he attributed to Anthony Trollope's novel *The Fixed Period*, that men older than that age be chloroformed. This article explores the public reaction to Osler in the context of early 20th-century American ideas about old age and manhood. As our society has changed over the past century, so have our ideas about old age. The Fixed Period incident offers us an opportunity to explore the relationship between medical and popular ideas about old age. This historical perspective allows us to see that physicians have not always had authority over old age and that public understanding and medical pronouncements on old age do not necessarily match.

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In February 1905, William Osler (1849-1919) publicly bid farewell to the Johns Hopkins University School of Medicine before departing the United States for a new position at Oxford University in England. Osler was a nationally prominent physician and was well known in both medical and popular circles.^{1,2} In addition, he had been one of the important leaders in founding the new medical school at Johns Hopkins only 16 years earlier.³⁻⁵ His departure was a media event, and members of the press mingled with the Johns Hopkins faculty and students at a gathering in Baltimore, Md. Although Osler's farewell speech predictably produced an emotional response from colleagues and students, Osler made a few remarks to which the press and the reading public strongly objected.

Osler's speech centered on the theme of the energy of youth and the uselessness of old age. Osler began by congratulating Johns Hopkins for the number of

young men on the faculty who prevented institutional mental stagnation. Following up on his comments about the importance of youth in academia, Osler went on to comment about age in general, asserting the "comparative uselessness of men above 40 years of age. This may seem shocking, and yet read aright the world history bears out the statement. Take the sum of human achievement in action, in science, in art, in literature—subtract the work of the men above 40, and while we should miss great treasures, even priceless treasures, we would practically be where we are today." Osler not only claimed that men were virtually useless after age 40 years, but he also contended that they should retire after age 60 years. He supported these conclusions with scientific theories about the finite qualities of life energy available to every man and cited examples of prominent men in history who had made their principal contributions to society before age 40 years.^{6(pp397-398),7}

Osler then attempted an apparently joking reference to Anthony Trollope's novel

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The Fixed Period about what should happen to old men. In commenting about the retirement of men older than 60 years, he added, "Whether Anthony Trollope's suggestions of a college and chloroform should be carried out or not I have become a little dubious, as my own time is getting so short."⁶(pp398-400) Several historians have pointed out that Osler's citation of *The Fixed Period* was not entirely accurate.⁸⁻¹⁰ In addition, Osler either did not understand or did not share with his audience that *The Fixed Period* was a biting satire about age-based categories, with a description of a flawed society organized around the principle of euthanasia at age 67 years. The plot of *The Fixed Period* centered on the first candidate for euthanasia who refused to go when he reached the proper age. In fact, euthanasia never actually happened within the action of the novel.¹¹ Whatever the result, it seems that Osler meant to set his own remarks about the need for older men's retirement in contrast to what he understood as Trollope's more radical suggestion of killing men older than 60 years.

Osler's comments provoked a storm of controversy as newspaper and magazine writers across the country condemned his remarks as heartless.¹⁻¹⁵ In the weeks after his speech, newspapers were filled with commentary, much of it strongly critical, about Osler. Several older public figures reacted with disapproval to Osler's comments. One senator from Nevada called Osler "a crank."¹⁶ Many of those who wrote and were quoted were able to list innumerable examples of still-capable older men to disprove Osler's theories. Even within the medical literature, physicians were not unanimous in their support of Osler's theories. One Jefferson, Ind, physician was irate at Osler's expressions,¹⁷ and prominent neurologist and Osler's good friend S. Weir Mitchell was apparently outraged by Osler's suggestions about age and ability.¹⁸

Although Osler frequently explained that his reference to Trollope was a joke, he stood by his remark about the uselessness of old men. Osler's apologists, as well as

Osler himself, seemed to have believed that the controversy over his speech was due to public misunderstanding of Osler's reference to Trollope.^{19,20} Furthermore, despite the fact that he was 55 years old at the time of his speech, Osler continued to insist that he was right about the need for men to retire at age 60 years. Osler was interviewed by a reporter from the *Baltimore News* several days after his speech. He explained that he had not been at all serious about his mention of chloroform but maintained that men older than 60 years were useless.^{21,22} Osler also recalled the controversy years later in terms of public reaction to his reference to Trollope and did not acknowledge that his remarks about the uselessness of old men might have been the source of the problem.²³

MEN AND RETIREMENT IN 1905

Whereas we in the 21st century are used to the idea that men (and women) retire at particular ages, Osler's audience at the beginning of the 20th century saw retirement based on age as extremely unusual. In fact, some historians^{24,25} have argued that Osler's characterization of men's abilities after age 60 years, not his reference to Trollope, was the most contentious element of his remarks. Before the Great Depression in the 1930s, men retired only when they had accumulated enough money to stop working.²⁶ It was not until the economic hardship and high unemployment of the Depression that the idea developed that old men should retire and make way for young men who needed to work to support their families.^{24,27}

In 1905, Osler not only offended the public because most men did not retire for age but also because men's sense of their masculinity depended on their work. At the time when Osler made his comments, what it meant to be a man was in flux. As several historians^{28,29} of masculinity have observed, men in the 19th century had defined their manhood through their participation in small community activities and through control of their labor. During the 20th century, however, men found themselves part of

enormous crowds and they worked in large corporations in which they seldom knew their coworkers and had virtually no control over their labor. This typical change in living and the work environment led men to seek control over themselves through efforts to improve their physical prowess and efficiency at work.^{30,31}

Although ideas of masculinity were changing in the early part of the 20th century, there was no reason older men could not be fully masculine as long as they met the general conditions for manhood, including continued work. In the early 20th century, older men could pursue physical and mental efficiency through a variety of channels.^{32,33} Still, an increasing number of social commentators during this period began to worry that some men, particularly men at advanced ages, might not be able to maintain the standards of masculinity. Osler's speech suggested that age might disqualify some men from usefulness at work, an important avenue of proper masculine expression.³⁴ The widely critical response to Osler's speech illustrated how unpalatable that idea was for many men of this period.

For men in the early 20th century, Osler's speech implied that they would lose their masculinity in their 60s, when they were forced to retire. Older men at this time of rapidly advancing industrial development were already beginning to worry that they could be fired from their positions because of inefficiency at work. Although there is little evidence that there was widespread discrimination against older workers in the first few decades of the 20th century,³⁵⁻³⁷ some commentators in the popular literature of the time worried that older men could not possibly keep up with industrialization and that there would be discrimination in the workplace. Although there was concern about older men's disadvantages in industry, commentators were even more anxious about elite professionals. Many writers in the early 20th century worried that older men were being replaced on the job by progressively minded younger men and that older men in business occupations were particularly vulnerable.³⁸ Writ-

ers agonized over what they saw as a general business phenomenon in which older men, too entrenched in older business methods, were being fired and replaced by young men with new ideas.

Several commentators aggressively attacked Osler on the specific idea that intellectual men lost their usefulness after age 60 years.³⁹⁻⁴¹ Some commentators insisted that Osler was wrong and that although older men might not have as much energy as younger ones, they have valuable qualities to contribute, such as “ripeness, repose, clearness of vision, and spiritual beauty.”⁴² Another writer pointed out that older men were not less able but rather busier with a wider variety of obligations.⁴³ One of the editors of the *Independent* agreed with Osler’s observation that older thinkers were tired but argued that it was not because they were old but because men’s creative talents were being wasted through too many public obligations. The solution to the problem, he declared, was not to retire men but to allow them space to do work without undue demands being placed on them.⁴⁴

One social commentator, who was also a little-known physician from Philadelphia, Pa, was widely cited for his efforts to dispute Osler’s assertions. W. A. Newman Dorland spent 3 years after the Osler incident investigating the achievements of older men through written records. Dorland was particularly concerned with “the tendency—visibly increasing in this country—of relegating the older and middle-aged men to the oblivion of an ‘innocuous desuetude’ in order that the more progressive and aggressive young men might be given a clear track in the rush to the front.”^{45(p934)} He analyzed the records of the lives of 400 famous men through history, all well-known for their intellectual activities, and found that despite Osler’s comments, society had derived extraordinary benefits from the efforts of those older than 40 years as well as those older than 60 years.⁴⁶⁻⁴⁹ Other commentators agreed with Dorland in disputing Osler’s assertion about the activities of men older than 60 years. Furthermore, they also pointed out that it was better for men to con-

tinue to work. One contributor to the *Outlook*⁵⁰ argued that work helped men live longer and that intellectually active men had a greater life expectancy. Others^{51,52} argued that men would be in good health only as long as they could continue working and that retirement would lead directly to disability and death for most men.

MASCULINITY, FEMININITY, AND WORK IN 1905

As Osler made explicit, at the time when he made his farewell to the United States the implications for old age and retirement were significantly different for men and women. In the written version of his speech, Osler mentioned that although mental stagnation in older men was the rule, “I may say for the benefit of the public that with a woman I would advise an entirely different plan, since, after 60 her influence on her sex may be most helpful, particularly if aided by those charming accessories, a cap and fichu.”^{6(p400)} It is unclear, however, whether Osler actually included this section in the spoken version of his speech in Baltimore. Apparently, the night before his public speech, Osler practiced it in front of some friends, including biographer Harvey Cushing, at home. Cushing’s biography of Osler reports that Mrs Osler convinced her husband to eliminate the reference to older women because it might be considered offensive.⁵³ This section does not appear in the printed version of his speech in the *Journal of the American Medical Association*,⁷ but it was included in the text of the speech reprinted in his collection of essays, *Aequanimitas*.⁶

Osler, like many others of his period, defined usefulness for men in terms of intellectual contributions but interpreted women’s usefulness in terms of their domestic role and their small influences on society.⁵⁴ Although many women worked for wages during this period,⁵⁵ work for women was not tied up with ideas about femininity or usefulness to society. But for men, elimination of work meant elimination of the most critical definition of their manhood. If men no longer had their masculinity, they would be like

women—a fearsome prospect for early 20th-century men.

Older men who could not work faced a greater peril than just economic hardship: they faced a decline in what they and their society defined as manhood. One author identified the problem as he ironically outlined what an older man could do if he could not get work: “He may give up the struggle altogether and stay at home tending the babies, while his womanfolk earn a meagre living for the family. He may drop back and round out his life where he began it in an inferior position. Or—and this appears to be the most practical solution of his difficulty—he may resort to cosmetics, face-foods, hair-restorers, and the other agencies for obliterating the footprints of Time.”⁵⁶ Because the cosmetic and physical efforts to hide age were usually associated with women’s efforts to look younger, the older man out of work faced a number of choices, all of which implied a significant loss in his masculine abilities. Indeed, this same commentator relayed the story of a man who faced continual failures at obtaining work in his later years, and “with each successive failure, he felt the pluck and the manliness oozing out of him.”⁵⁶ Another writer argued that a man’s experiences created “a finer manhood” that should be left active.⁵⁷ According to many observers of the time, retirement for older men based solely on their age was a direct threat to their masculinity.^{58,59}

LESSONS FOR TODAY

The public reception to Osler’s remarks about men’s abilities over a certain age illustrates that Americans have not had fixed notions about what is appropriate in old age, and neither have physicians always been respected authorities on this subject. Although William Osler was a celebrated figure in his time and continues to be remembered for his theoretical and practical approaches to medicine,⁶⁰⁻⁶² his work was susceptible to controversy because there was a serious mismatch between his assumptions and public beliefs. Although old age seems to be a biologically determined stage of life, there have been and continue to be social

and cultural factors that affect the ways in which the public understands old age and how they receive physician pronouncements about the later years of life.⁶³

Today there continues to be a potential mismatch between medical and popular ideas about old age. Physicians have understandably been focused on identifying and treating the pathological conditions that develop in later life. In the past 60 years, particularly with the formation of the specialty of geriatrics, many physicians have become staunch advocates of increasing medical surveillance in old age to prevent serious problems.⁶⁴ In addition, physicians have become attuned to the health care implications of an aging population and the myriad services that are required in old age.⁶⁵ As one historian of gerontology has argued, the ever-growing medical literature that explores old age continues to benefit older patients by replacing myth and prejudice with facts about aging.⁶⁶

Although the work of physicians has clearly been essential in reducing morbidity and delaying mortality in old age, the public does not necessarily share the medical profession's problem- and pathology-oriented picture of old age. Whereas retirement for age became the norm in the wake of the Great Depression, in the last several decades there has been a shift toward longer working lives and postponed retirement. Organizations such as AARP (American Association of Retired Persons)⁶⁷ have begun to describe the phenomenon of "unretirement," in which older people stay in their jobs, switch careers, or fill up their postjob lives with energetic activities. Much of the popular literature directed toward aging individuals emphasizes possibilities such as travel in later life rather than the likelihood of medical problems.⁶⁸⁻⁷⁰

Furthermore, as the popularity of products such as Viagra (sildenafil citrate) and androgen gels demonstrate, modern men are interested in maintaining their identity as masculine and sexual even at older ages. This continued need for men to preserve their sexual identity in old age is sometimes acknowledged by physicians⁷¹ but has not been a sus-

tained focus of medical attention.^{72,73} Physician images of old age, primarily based on the older people who come to their offices for medical care, do not necessarily match the growing public images (produced by such disparate sources as old age advocacy organizations and pharmaceutical companies) of active, energetic, youthful older people.

Although contemporary physicians are unlikely to make public statements similar to those of Osler (or to quote literature in a public forum), we still run the risk of producing controversy and mistrust if we fail to understand popular ideas about old age. On a clinical level, we need to understand our patients' ideas about old age and the implications of those ideas for their health and continued activities. We must also understand the differences between men and women in their attitudes toward aging and in the ways that men and women understand their social roles.^{74,75} Whereas physicians tend to see old age in terms of disease and limitations, this view might well clash with patients who see old age in terms of freedom and opportunity. We should not make Osler's mistake of telling our patients what old age means to them before we understand their assumptions about growing older.

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REFERENCES

1. Dr. Osler's call to Oxford (England). *World's Work*. November 1904;9:5455.
2. Dr. William Osler. *Popular Science*. October 1905; 67:569-571.
3. Ludmerer KM. *Learning to Heal: The Development of American Medical Education*. New York, NY: Basic Books Inc Publishers; 1985:57-63.
4. Harvey AM, Brieger GH, Abrams SL, McKusick VA. *A Model of Its Kind: A Centennial History of Medicine at Johns Hopkins*. Vol 1. Baltimore, Md: Johns Hopkins University Press; 1989:7-48.
5. Fleming D. *William H. Welch and the Rise of Modern Medicine*. Baltimore, Md: Johns Hopkins University Press; 1954:96-118.
6. Osler W. *Aequanimitas: With Other Addresses to Medical Students, Nurses and Practitioners of*

- Medicine*. 2nd ed. London, England: HK Lewis; 1906:391-411.
7. Osler W. Valedictory address at Johns Hopkins University. *JAMA*. 1905;44:705-710, 717.
8. Viets HR. William Osler and "The Fixed Period." *Bull Hist Med*. 1962;36:368-370.
9. White W. Re-echoes of Sir William Osler's "The Fixed Period." *Bull Hist Med*. 1937;5:937-940.
10. Medical causeries. *Med Notes Queries*. 1926; 8:2.
11. Trollope A. *The Fixed Period*. World's Classics ed. New York, NY: Oxford University Press; 1993. First published in 1882.
12. Letters to the editor. *Baltimore News*. February 24-27, 1905.
13. What they think of Dr. Osler's idea. *Baltimore News*. February 24, 1905.
14. Newspaper clipping file on Osler's "Uselessness After 60 Years" Theory, William Osler collection, Alan Mason Chesney Medical Archives, Johns Hopkins University Medical Institutions, Baltimore, Md.
15. Fogg LD. *The Asbestos Society of Sinners*. Boston, Mass: Mayhew Publishing Co; 1906:63-72.
16. Congress against Osler; "Uncle Joe" Cannon says he feels frisky. Washington, DC [unidentified paper], February 25, 1905, "Uselessness After 60 Years Theory" file, Osler papers.
17. Field DL. Osler's nonsense. *Louisville Monthly J Med Surg*. 1906;12:247-248.
18. Burr AR. *Weir Mitchell: His Life and Letters*. New York, NY: Duffield & Co; 1930:313.
19. The passing of Sir William Osler. *South Med J*. 1920;13:74-75.
20. Roland CG. The infamous William Osler. *JAMA*. 1965;193:436-438.
21. Dr. Osler was not joking: is writing essay on work of men under forty; points to Darwin to prove his assertion that from twenty-five to forty are golden years. *Baltimore News*. February 24, 1905.
22. Dr. Osler's joke. *Current Literature*. March 1905; 38:456.
23. Osler W. *Aequanimitas*. 3rd ed. Toronto, Ontario: Blakiston Co; 1944:viii.
24. Graebner W. *A History of Retirement: The Meaning and Function of an American Institution, 1885-1978*. New Haven, Conn: Yale University Press; 1980:3-10.
25. Cole TR. *The Journey of Life: A Cultural History of Aging in America*. New York, NY: Cambridge University Press; 1992:170-174.
26. Gratton B. *Urban Elders: Family, Work and Welfare Among Boston's Aged, 1890-1950*. Philadelphia, Pa: Temple University Press; 1985.
27. Skocpol T. *Protecting Soldiers and Mothers: The Political Origins of Social Policy in the United States*. Cambridge, Mass: Harvard University Press; 1992.
28. Rotundo EA. *American Manhood: Transformations in Masculinity From the Revolution to the Modern Era*. New York, NY: Basic Books Inc Publishers; 1993.
29. Carnes MC, Griffen C, eds. *Meanings for Manhood: Constructions of Masculinity in Victorian America*. Chicago, Ill: University of Chicago Press; 1990.
30. Kimmel MS. *Manhood in America: A Cultural History*. New York, NY: Free Press; 1996.
31. Filene PG. *Him/Her/Self: Sex Roles in Modern America*. Baltimore, Md: Johns Hopkins University Press; 1986.
32. Hirshbein LD. Masculinity, work, and the fountain of youth: Irving Fisher and the Life Extension Institute, 1914-1931. *Can Bull Med Hist*. 1999; 16:89-124.

33. Hirshbein LD. The glandular solution: sex, masculinity, and aging in the 1920s. *J Hist Sex*. 2000; 9:277-304.
34. Achenbaum WA. *Old Age in a New Land: The American Experience Since 1790*. Baltimore, Md: Johns Hopkins University Press; 1978:9-25, 39-54.
35. Carter SB, Sutch R. Myth of the industrial scrap heap: a revisionist view of turn-of-the-century American retirement. *J Econ Hist*. 1996;56:5-38.
36. Gratton B. The labor force participation of older men: 1890-1950. *J Soc Hist*. 1987;20:689-710.
37. Gratton B. The poverty of impoverishment theory: the economic well-being of the elderly, 1890-1950. *J Econ Hist*. 1996;56:39-61.
38. Crissey F, Wilhelm D. The human scrap heap. *Technical World Magazine*. 1914;20:759-764.
39. The period of mental activity. *N Y Med J*. 1908; 88:899-900.
40. Dexter EG. Age and eminence. *Popular Science Monthly*. April 1905;66:538-543.
41. Editorial. *Life*. March 16, 1905;45:298.
42. Comfort for the aged. *Outlook*. May 2, 1908;89: 12.
43. When does old age begin? *Living Age*. January 11, 1908;256:123.
44. Wasting good men. *Independent*. January 25, 1912;72:211-212.
45. Dorland WAN. The age of mental virility: an inquiry into the records of achievement of the world's chief workers and thinkers. *Century*. April 1908; 75:934-946.
46. Dorland WAN. What the world might have missed: the great work done by men over forty. *Century*. May 1908;76:113-125.
47. The age of mental virility. *Century*. May 1908;76: 154-155.
48. The superstition of old age. *Review of Reviews*. October 1910;42:490-492.
49. Cargill JF. The value of old age. *Popular Science Monthly*. August 1905;67:313-318.
50. Work and long life. *Outlook*. August 2, 1913;104: 737.
51. Hanging on and letting go. *Atlantic Monthly*. April 1910;105:571-572.
52. Getting old and staying young. *Literary Digest*. December 21, 1912;45:1174-1175.
53. Cushing H. *The Life of Sir William Osler*. Vol 1. Oxford, England: Clarendon Press; 1925:664-672.
54. Rothman SM. *Woman's Proper Place: A History of Changing Ideals and Practices, 1870 to the Present*. New York, NY: Basic Books Inc Publishers; 1978.
55. Kessler-Harris A. *Out to Work: A History of Wage-Earning Women in the United States*. New York, NY: Oxford University Press; 1982.
56. Lindsay F. The man of fifty. *Harper's Weekly*. October 16, 1909;53:15-16.
57. Powell EP. Old age: the epic of a new year. *Independent*. March 14, 1907;62:598.
58. Morse JH. According to Osler. *Independent*. March 18, 1909;66:567-570.
59. Accomplishment and longevity. *Independent*. April 30, 1908;64:979-981.
60. Stone MJ. The wisdom of Sir William Osler. *Am J Cardiol*. 1995;75:269-276.
61. Bryan CS. What is the Oslerian tradition? *Ann Intern Med*. 1994;120:682-687.
62. Golden RL. William Osler at 150: an overview of a life. *JAMA*. 1999;282:2252-2258.
63. Hirshbein LD. *The Transformation of Old Age: Expertise, Gender, and National Identity, 1900-1950* [PhD dissertation]. Baltimore, Md: Johns Hopkins University; 2000.
64. Hirshbein LD. "Normal" aging, senility, and the American Geriatrics Society in the 1940s. *J Hist Med Allied Sci*. 2000;55:337-362.
65. Andres R, Bierman EL, Hazzard WR, eds. *Principles of Geriatric Medicine and Gerontology*. New York, NY: McGraw-Hill Co; 1999.
66. Achenbaum WA. *Crossing Frontiers: Gerontology Emerges as a Science*. New York, NY: Cambridge University Press; 1995.
67. AARP Web site. Available at: <http://www.aarp.com>. Accessed February 4, 2001.
68. Yancey KB. 10 great places to act your 50+ age. *USA Today*. January 19, 2001:12D.
69. Carstensen LL. On the brink of a brand new old age. *New York Times*. January 2, 2001:A15.
70. Shapiro JP. Enjoying life after death: once sidelined, widows are making the golden years better for everyone. *US News & World Report*. September 11, 2000;129:76-82.
71. Downs TM, O'Leary MP. Sexual dysfunction in patients with benign prostatic hyperplasia. *Curr Opin Urol*. 1999;9:9-14.
72. Bortz WM II, Wallace DH, Wiley D. Sexual function in 1,202 aging males: differentiating aspects. *J Gerontol A Biol Sci Med Sci*. 1999;54: M237-M241.
73. Duffly LM. Lovers, loners, and lifers: sexuality and the older adult. *Geriatrics*. 1998;53(suppl 1):S66-S69.
74. Friedan B. *The Fountain of Age*. New York, NY: Simon & Schuster; 1993.
75. Miller NK. The marks of time. In: Woodward K, ed. *Figuring Age: Women, Bodies, Generations*. Bloomington: Indiana University Press; 1999:3-19.