## PROCEEDINGS OF THE NUTRITION SOCIETY

SEVENTY-SIXTH SCIENTIFIC MEETING—THIRTY-FIFTH SCOTTISH MEETING
WESTERN INFIRMARY, GLASGOW

27 SEPTEMBER 1952

## TECHNIQUES OF HOSPITAL DIET DEPARTMENTS

Chairman: PROFESSOR SIR JOHN W. McNEE, D.S.O., M.D., F.R.C.P.,

University of Glasgow

## Chairman's Opening Remarks

By J. W. McNee, University of Glasgow

To-day we are to interest ourselves in the problems and techniques of hospital dietetics and of hospital dietitians.

It is appropriate that I should be in the Chair to-day, for I am one of the original founders of the small Society of Hospital Dietitians which later, I think about 1935, drew up a proper constitution and established itself as the British Dietetic Association to which all accredited hospital dietitians now belong.

My interest began in 1925, when I was an exchange Associate Professor at Johns Hopkins Hospital, Baltimore. There I found a department of hospital dietetics well established and acting as a training school. The emphasis was then, of course, largely on the dietetic problems of diabetes under the early insulin treatment which began in 1923. On my return to University College Hospital, London, I tried to interest my colleagues and the Board of the hospital in the subject, but it was not until 1929 that a proper department and a training school began, with Miss E. M. Marshall, B.Sc., as our first dietitian. This was certainly one of the first departments of its kind in London and in England, but Edinburgh, with Miss Pybus, had started on its own even earlier. This, I believe, was because of the presence in Edinburgh of Professor Meakins, their first Professor of Therapeutics, a Canadian well versed in American medical affairs.

In 1928 the University of London established a part-time Chair of Dietetics. My colleague, Dr S. J. Cowell, became the first professor. Initially the Chair was attached to St Thomas's Hospital Medical School. In 1936 the Chair was moved to University College Hospital Medical School. The origin of this Chair is interesting. It was established through the activities of a daily newspaper, of a lady who thought that the importance of dietetics in disease was being neglected, and of the manufacturers of a well-known and still very acceptable invalid food. At or about the same time other hospitals in London established dietetic departments; the one I knew best (through my friend Dr George Graham) was at St Bartholomew's, with Miss Abrahams in charge.

The need for some corporate body of hospital dietitians was soon mooted, for two main reasons. First of all there was a rival body, the London School of Dietetics, of which many did not fully approve because of its close association with the New Health Society. This School, which in its prospectus offered a great variety of curriculums, did not prosper. The second reason was to encourage and in some way to control the entry of student hospital dietitians, and to draw up a curriculum of training.

A few of those interested called a meeting at the rooms of the Medical Society of London in Chandos Street, and I was in the Chair. Towards the end of the meeting Lord Dawson of Penn, then President of the College of Physicians, came in and requested that he might be heard. The first snag then emerged—should hospital dietitians all be graduates in science or should hospital nurses, after special training, also be eligible? There was—it is wrong to deny it—very considerable controversy, long since happily resolved. After our first meeting a whole series of odd events occurred, which led to a most voluminous correspondence, which I still have in my files. There was a strong move on the part of the Royal College of Physicians to draw up conditions for, and to grant, a Diploma of Dietetics. This idea, after much discussion, fell to the ground. There were some difficulties with the Department of Household Science at King's College, and also with Sir Frederick Menzies, Chief Medical Officer of the London County Council, about the status of his food supervisors. Altogether there were many small storms in one small tea-cup before the British Dietetic Association was safely launched and drew up its constitution.

Since then many hospital dietitians have been trained in Britain, most of whom remain in hospitals, but others have gone to help industry and some—like Miss Scott Carmichael—to help the Government.

In some hospitals the dietetic needs of all patients come within the purview of the dietetic department, but in most hospitals the trained dietitians are concerned only with the special diets advised by the medical staff. Circumstances vary in different places, but it is the special diets in obesity, in diabetes, in cardiac, renal and hepatic diseases that have naturally interested me.

Those who are not hospital dietitians may find it of interest to be told that on an average about 10% of the patients in a large teaching hospital are on special diets—I think most of the dietitians present will confirm this figure.

## Organization of a Diet Department. In-patients

By E. E. RICHARDS, Queen Elizabeth Hospital, Birmingham

During this century great strides have been made in assessing the food requirements of man. Much of this research was carried out in the biochemical, dietetic and metabolic departments of hospitals but, until recent years, the ordinary hospital in-patient received very little benefit. A few patients, who were prescribed special diets, benefited, but the feeding of the majority of the patients was inadequate.