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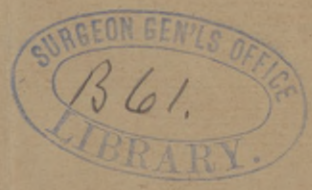
ADDRESS

OF

JOSEPH M. TONER, M.D.,

PRESIDENT OF THE ASSOCIATION.

EXTRACTED FROM THE
TRANSACTIONS OF THE AMERICAN MEDICAL ASSOCIATION.



PHILADELPHIA:
COLLINS, PRINTER, 705 JAYNE STREET.
1874.

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GENTLEMEN OF THE AMERICAN MEDICAL ASSOCIATION:—

Custom has made it a duty for the presiding officer to deliver an address at the opening of each annual session. As the opportunity is one to be prized, though distrusting my ability, I hope with your indulgence to meet the requirements of the occasion. Your long line of distinguished Presidents¹ has gleaned the fields of inviting inquiry, and has so carefully garnered the gems of medical thought, and spoken such earnest words of counsel and encouragement, as to make it difficult to select new topics, or improve upon their recommendations and admonitions. My remarks shall be neither long, learned, nor abstruse, but, I trust, suggestive and practical.

This Association is a true medical republic. National and representative, catholic and paternal, it admits to membership dele-

1 NAMES OF PRESIDENTS.	BORN.	SAT AS PRESIDENT IN			DIED.
		YEAR	MONTH	CITY	
1 Jonathan Knight, M.D., Conn.	May 1, 1789	1846	May 5	New York	Aug. 25, 1864, aged 75.
2 Nathaniel Chapman, M.D., Pa.	May 28, 1778	1847	May 5	Philadelphia	July 1, 1853, aged 75
3 Alexander Stephens, M.D., N. Y.	Sept. 4, 1789	1848	May 2	Baltimore	Mar 30, 1869, aged 80
4 John C. Warren, M.D., Mass.	Aug. 1, 1778	1849	May 1	Boston	May 4, 1858, aged 78.
5 Reuben D. Mussey, M.D., Ohio	Jan. 23, 1780	1850	May 7	Cincinnati	June 21, 1866, aged 86
6 James Moultrie, M.D., S. C.	Mar. 27, 1793	1851	May 6	Charleston	May 29, 1869, aged 76
7 Beverly R. Welford, M.D., Va.	July 29, 1797	1852	May 26	Richmond	Dec. 27, 1870, aged 73
* Jonathan Knight, M. D., Conn.		1853	May 3	New York	
8 Charles A. Pope, M.D., Md.	Mar. 15, 1818	1854	May 2	St. Louis	July 6, 1872, aged 52.
9 George B. Wood, M.D., Pa.	Mar. 18, 1797	1855	May 1	Philadelphia	
10 Zina Pitcher, M.D., Mich.	Apr. 12, 1797	1856	May 6	Detroit	Apr. 5, 1872, aged 75.
11 Paul F. Eve, M.D., Tenn.	June 27, 1806	1857	May 5	Nashville	
12 Harvey Lindsly, M.D., D. C.	Jan. 11, 1804	1858	May 4	Washington	
13 Henry Miller, M.D., Ky.	Nov. 9, 1800	1859	May 3	Louisville	Feb. 8, 1874, aged 74.
14 Eli Ives, M.D., Conn.	Feb. 7, 1779	1860	June 5	New Haven	Oct. 8, 1861, aged 82
15 Alden March, M.D., N. Y.	—, 1795	1863	June 2	Chicago	June 17, 1869, aged 74.
16 Nathan S. Davis, M.D., Ill.	Jan. 9, 1817	1864	June 7	New York	
* Nathan S. Davis, M.D., Ill.		1865	June 6	Boston	
17 D. Humphrey Storer, M.D., Mass.	Mar. 26, 1804	1866	May 1	Baltimore	
18 Henry F. Askew, M.D., Del.	June 24, 1805	1867	May 7	Cincinnati	
19 Samuel D. Gross, M.D., Pa.	July, 1805	1868	May 5	Washington	
20 William O. Baldwin, M.D., Ala.	Aug. 9, 1818	1869	May 4	New Orleans	
21 George Mendenhall, M.D., Ohio	May 5, 1814	1870	May 3	Washington	June 4, 1874, aged 60
22 Alfred Stillé, M.D., Pa.	Oct. 13, 1813	1871	May 4	San Francisco	
23 David W. Yandell, M.D., Ky.	Sept. 4, 1826	1872	May 7	Philadelphia	
24 Thomas M. Logan, M.D., Cal.	June 13, 1808	1873	May 6	St. Louis	
25 Joseph M. Toner, M.D., D. C.	Apr. 30, 1825	1874	June 2	Detroit	

* Names marked with a star served twice as president. No meeting was held in 1861, nor in 1862.

gates from all respectable medical institutions throughout the United States.

What a grand and imposing spectacle it is to see in this beautiful city by the great American lakes, near the northern boundary of our vast country,¹ assembled for the second time,² hundreds of leading physicians, brought together as a national medical council, prompted solely by a desire to promote the general good of the profession—a motive which speaks directly to the heart and head of every true physician.

Here are assembled the Nestors of the profession, who have won their laurels and wear them with modest dignity; the middle aged who have just entered upon the enjoyment of their recently recognized but well-earned fame; and the young physicians, fresh from college, full of enthusiasm, and well instructed in the latest discoveries and improvements in the art and science of medicine, eager for the contest in which to win fame—all seated together, with an equality of rights and privileges; the retiring, the busy, and the expectant practitioner, forming a trinity of links in the great chain of professional life connecting the past, the present, and the future; experience, science, and enthusiasm fraternizing, and forming one of the grandest pictures of advanced civilization.

I am aware that there has been from the first meeting of this Association a contrariety of opinions as to its true province and best policy. Some would have it limited in numbers, exclusive and dictatorial if not coercive in its relation to the profession at large. There are those who would have it abandon all semblance of a convention, and devote its time to the discussion of scientific facts and the recent discoveries in medicine, to the exclusion of all other questions and purposes. A few would have it an arena where any and every subject that can enter the mind of a medical man might be introduced, without order or even definite purpose. Others would be content and feel rewarded for the expense and loss of time in the enjoyment of the social elements so lavishly evoked on all these occasions.

But the arrangement for scientific discussions and the exchange of professional views, with the social reunions which the average

¹ The territory of the United States extends from near the 25th to the 49th degree of latitude (or, including Alaska, to within the Arctic Circle), and from the 67th to near the 125th degree of longitude; embracing nearly 4,000,000 square miles, and over 40,000,000 population.

² The American Medical Association met in Detroit in 1856.

judgment of the gentlemen who are in the habit of attending the meetings from year to year has approved, come as near meeting the requirements and securing due consideration to every factor, social, ethical, and professional, that enters into and serves to advance the true interests of the whole profession, and bind it in one harmonious brotherhood, as any general policy that could at present be adopted.

Aggregations of individuals form communities, and intercourse establishes society. Common interests and enlightened sentiment, with frequent meetings and exchange of views, evolve dominant ideas. And ideas rule not only societies like ours, but the world.

Twenty-eight years ago this Association was organized¹ in the city of New York, on a basis to represent the regular profession of the United States. Whether it has always acted wisely, or done the best and all that was possible under the circumstances for the elevation and advancement of the profession, must be impartially judged by our successors. Whatever it has done, it will be conceded, has been done with disinterestedness and a sincere desire for the elevation of our noble calling, and for the more speedy and certain relief of human suffering. Of those who find fault I might ask—what organizations or institutions are perfect, or give even general satisfaction? They are not to be found among religious creeds. Nor are they to be found in any known code of laws. They do not exist. But the great improvement taking place throughout the world in all the conditions that regulate society and protect the rights of the individual is marvellous. And, though absolute perfection is not attainable, we are striving with encouraging success, to elevate and perfect, as far as possible, the art and science of medicine.

If I possessed the ability to draw a picture that could correctly represent the status of the profession and its organizations² through-

¹ The first meeting was held in the city of New York, May 5, 1846, on a call of the Medical Society of the State of New York for a National Medical Convention. This action was brought about chiefly through the far-seeing wisdom and active exertions of N. S. Davis, M.D., then of Binghamton, New York. All medical societies and institutions throughout the United States were solicited to join in the measure. A convention assembled, which led to our present organization. The institutions represented in the first meeting were: State medical societies, 7; local medical societies, 13; colleges, 14; hospitals, 2. Total 36 institutions, from 17 different States, sending in all 129 delegates.

² In 1846, when the American Medical Association was formed, there were but about 125 medical societies and institutions of all classes in the United States.

out our country at the period when this Association came into existence, and contrast it with one showing our present prosperous condition and numerous well-organized societies, the younger members would scarcely recognize them as representing the same profession. It is not too much to claim that this Association, by the mere moral support it gives in encouraging the formation of local medical organizations, has done immeasurable good, and added largely to this result. It fully recognizes the unity of the regular profession throughout the United States. At the same time it has erected a standard of medical excellence and ethical *esprit du corps* never before attained in America, and has persistently and publicly held them up for admiration and adoption. It has drawn with distinctness a line that separates the regular from the irregular practitioner, which will in the future as in the past be firmly maintained. And it is desirable, as far as practicable, to encourage uniformity in the plan and scope of all medical societies, which, in the sphere of their influence, correspond to our civil political divisions. And, further, I think we should continue our efforts to encourage these local medical organizations until every State and county in the United States shall have its medical society, holding proper relations with each other and with this body. The Association is now, and always has been, anxious to bring into its fold the leading physicians from every State, and from every city and village and rural district in the land, and has solicited and still invites original papers on any subject that can advance medical science.

It has published¹ annually from its organization a volume of contributions and regular and special reports of great value in the

At the present time there are over 1200. The first medical organization in the United States that I have seen any reference to was one in Boston, Massachusetts, in 1741. Another was formed in Philadelphia, Pennsylvania, 1765, of which John Morgan was a promoter and an active member. In 1766, the New Jersey Medical Society was formed. In 1773 the American Medical Society was formed in Philadelphia, Dr. William Shippen, President. In 1776, the Delaware Medical Society was formed; in 1781 the Massachusetts Medical Society; in 1784 the Connecticut Medical Society; in 1787 the College of Physicians, Philadelphia; in 1789 the Medical Society of South Carolina; in 1791 the New Hampshire Medical Society; in 1799 the Medical and Chirurgical Faculty of Maryland.

¹ The Transactions, as numbered, reaches twenty-four volumes. From an oversight of the early publishing committees, the Proceedings and Transactions of the first two meetings (1846 and 1847), which are known as the Proceedings of the National Medical Convention, are not included in the series.

different departments of medicine, on questions of immediate interest to the profession.

It must be apparent to all who are familiar with the history of medicine, or have enjoyed, for a considerable number of years, a position favorable for overlooking the great army at work in the wide field of professional duty throughout the United States,¹ that the concentration of medical thought and the scientific aspirations of the profession of the country, as expressed through this central Association, are such that by its unity of action it exercises more influence now over the public and the profession than ever before, or than would be possible without such combined association. This is particularly noticeable in States in which there has been recent legislation affecting the profession and public health.²

It is within the observation of all, that while the profession is advancing in knowledge and influence, so is the general intelligence of the people, who are yearly demanding greater protection to their health, and greater skill and ability on the part of their physicians in the various branches of medicine.

Education is synonymous with elevation. Knowledge, in medicine as everywhere else, is power and ability.

It is a source of sincere congratulation that our medical educational institutions are rapidly enlarging and perfecting their curriculums, and becoming more thorough and efficient in teaching the science of medicine.³

¹ The number of physicians in the United States who in 1870 paid Internal Revenue Tax was 50,000. This is in the proportion of one physician to every 760 of the whole population. The last United States Census, taken the same year, in the return of persons by occupation gives 62,383 as physicians, male and female; which is in the proportion of one physician to every 618 of the total population. In France and England there is but about one physician to every 2000 of the population, the proportion being much larger, however, in the cities than in the rural districts.

² The several States are gradually enacting laws to secure registration of births, deaths, and marriages, and establishing State Boards of Health. But, indeed, it is rather surprising that so few (California, Massachusetts, Michigan, Minnesota, and Rhode Island) have any laws upon this subject in successful operation. Maryland and Virginia have recently established boards. Massachusetts deserves to be followed as a model in her registration and health laws, as well as in their intelligent execution.

³ In 1859 the Chicago Medical College (now the Medical Department of the Northwestern University of Illinois) adopted the three years course, and a system of graduated classes, and a lecture term of six months. In 1872 Harvard University adopted practically a similar course. I am not aware that any other college has yet adopted this plan. The system is working well in both institutions

The successful medical man must be fully up with the age and the times, conversant with the latest means of diagnosis, the theory of diseases and their cures. He must have tested the newest remedy, examined the most recent invention; he must have read the latest telegram. And, indeed, the genius of the profession, responding to these demands, has devised physical tests for an exact diagnosis in almost every important disease. There is scarcely a vital function, the normal or diseased action of which cannot be determined with accuracy through the aid of some chemical test or mechanical device.¹ The improvement in this direction is still actively progressing.

Perhaps, there is no branch of medicine brought so prominently before the public as that of surgery, or that has been so much improved within a few years. American surgeons can justly claim to have done their part to advance its efficiency. Their daring and successful operations, as well as their ingenious devices and numerous mechanical appliances, are the admiration of the profession everywhere.

In our cities, centre not only dense populations, with great wealth, but all the conditions and institutions most favorable for prosecuting special studies in the most thorough and satisfactory manner. It is in them, as a general rule, that society fosters and so frequently rewards with princely fortunes the pre-eminently capable and skillful physicians, as it does men of genius in other callings.

It is true, that in great cities, pretenders and charlatans also prosper; but, where this is a particularly noticeable fact, it may as a rule be fairly inferred that there is abundant room for physicians of first class ability. Indeed, physicians possessing this latter qualification are sure of employment, and are at home and welcomed

named. It has so much to recommend it that it is to be hoped all our first class colleges will adopt it within a few years.

In 1870-1872, returns from 51 medical colleges show 5776 matriculants and 1698 graduates. In 1871-1872, returns from 36 of the 60 medical colleges show 4956 matriculants and nearly 1400 graduates. In 1873, in 59 regular medical colleges there were 780 instructors employed. There were 6491 matriculant students, of whom 1941 received the degree of Doctor of Medicine. (See Report of Educational Department, 1873.)

¹ We shall enumerate but a few of the many appliances used in diagnosis, as they will readily occur to the mind of the physician. The dynamometer, the microscope, the ophthalmoscope, the laryngoscope, the rhinoscope, the stethoscope, the pleximeter, the endoscope, the speculum, the sphygmograph, the spirometer, the thermometer, the anæsthesometer, anæsthetics, chemical examination of excretions, etc. etc.

everywhere. Even the best educated neighborhoods and most highly enlightened communities, if not supplied with acceptable physicians, possessed of adequate professional knowledge, and well acquainted with the latest improvements in medicine, will patronize the most plausible pretenders to such acquirements. The physician is a necessity. He is employed neither as a luxury nor from friendship, but from his actual or presumed skill and ability to prevent, relieve, or cure disease.

Progress is the order of the day—a law of the universe. He who does not constantly keep adding to his knowledge, and increasing his resources, must soon fall behind the more enterprising and better informed of his contemporaries. The physician who does not know that the community in which he lives is keeping a constant watch upon him, and contrasting his knowledge, skill, and success in his profession with those of the best and most successful medical men within the range of their reading or acquaintance, shuts his eyes to an important fact of great interest to himself.

The judicious and observing know that time regulates many apparently conflicting professional interests, and sets them working in a manner that in the end promises no discredit to our calling.

It is the judgment of those who watch closely the workings of this Association that questions of a hypothetical, local, or transient character ought not to be obtruded here. The time of the Association should be fully employed in scientific discussions and in the consideration of questions of necessary and proper legislation.

The absence of delegates from the Massachusetts Medical Society has been noticeable for several years. I trust that, at the present meeting, delegates from that old and influential organization may resume their rightful places. It richly deserves the congratulations of this Association and the profession of the country for lopping off all irregular practitioners who by various pretexts sought to fasten themselves upon it.

The Judicial Council of twenty-one, created at the last meeting, whose duty it is "to take cognizance of, and decide all questions of an ethical or judicial character that may arise," will, no doubt, greatly promote harmony and facilitate the business of the Association.

It is also confidently believed that the change in the plan of conducting the business before the different sections will add to the general interest and efficiency of our meetings. This change may require us to prolong our session to at least four days. Should

each chairman of the five different sections occupy the time of the general session allotted to him for an address which shall review the progress of medicine within the scope of his section, it is not likely they could all be delivered in less than two days. The regulation adopted for the stenographic report, and daily printing of the remarks of members, will make each speaker more deliberate and perhaps more anxious to have his views fully and carefully stated. With a view to secure more time for our deliberations I recommend that a regulation extending our sessions to four days be adopted.

The hope entertained by some physicians, of excluding irregular and incompetent practitioners from the profession by legislative enactment and penalties is, I apprehend, in our country not to be realized.

The thorough systematic education, the skill and availability of the services of the regular medical man must instinctively create in the minds of the people an appreciation of his superior claims to their confidence, and thus the profession become a law for its own protection, and which must prove stronger and more enduring than acts of assemblies or rulings of courts.¹

Its efficiency and influence with the public rest solely on the amount of its useful scientific and practical professional knowledge. Let us at all times and seasons insist upon increasing these by every means possible. Ignorance and charlatanism should be made odious by contrast.

I wish to call the attention of the profession to the advantage of competitive examinations whenever appointments are to be made from among professional men to medical institutions as the best

¹ The earliest law passed by any of the American Colonies having reference to the medical profession was the 9th act of the General Assembly of Virginia, passed Oct. 21, 1639, to compel physicians and surgeons to declare on oath the value of their drugs and medicines. This law was revised and amended in 1645-1646, and again in 1657-1658. (See Hening's Statutes at Large, vol. i. pp. 316, 450.) The earliest law concerning medical men passed in Massachusetts was an act in 1649 applicable to churgeons, midwives, and physicians. (See Laws of Massachusetts, edition of 1672, p. 29.) The earliest legislation that established or regulated the fees of physicians in America that I have seen is the act of Virginia, Aug. 1736, entitled "An act for regulating the fees and accounts of the Practicers of Physic." This act permitted the courts to make a distinction between the amounts charged by the physicians regularly educated in medicine, and those who have been merely apprenticed. (See Hening's Statutes at Large, vol. iv. p. 509.)

mode of securing the most efficient, encouraging the industrious and careful student, and rewarding the really meritorious.

We all know that it is not true in fact, whatever may be the theory, that one graduate is just as good and as competent as, and no better than another. It is a duty we owe to ourselves and to the public to give our approbation and encouragement to those who, by special application and thorough study, become eminent in the profession. The man of real ability is usually retiring and without diplomacy; while the shallow pretender is full of tact, and is aggressive and persevering, and therefore, too often for the dignity and the advancement of medical science, is intrusted with the management of our public institutions.

It seems to me very desirable that a complete and well-endowed physiological and pathological laboratory should be established somewhere in the United States, and preferably in one of our great cities. Such a laboratory should be organized not merely for the elementary training of students, but for the encouragement of original research in histology, and in experimental physiology and pathology. The great utility of such institutions has been demonstrated by the experience of Germany, where they are to be found in almost every university town, and where they have rendered possible the brilliant series of discoveries which has given Germany, in modern times, the lead in all matters connected with physiology and pathology.

One or two similar institutions have recently been established in England, and we also must make an effort in this direction if we mean to keep pace with the profession in other parts of the world.

Medicine has always been more advanced through the fortunate discoveries of the few original observers than it has in centuries of adherence to dominant theories.

I wish further to suggest or to inquire whether our influence ought not to be given to the end that all medical institutions created by law or acting under charters should be required to make and publish annual reports, of their facilities, their labors, discoveries, and the extent of their operations, to the legislative body that created them. The principle should obtain that when a charter issues, the institution assumes a public character, and should be held responsible by the public for the manner in which it exercises its privileges, raises and expends its funds, and conducts its business. The public has a right to claim this much, that it may

profit by experience, correct abuses, and encourage only the deserving.

It has been estimated that there are about 2400 separate and distinct diseases. The number will probably be reduced as our knowledge of physiology and pathology and of the natural history of diseases becomes more general and accurate. What seems at first in many cases to be a specific difference, frequently disappears as we become more familiar with the range of circumstances and variations that enter into the producing causes, as well as those that may prolong and modify prominent symptoms.

Hospitals for the care and medical treatment of the insane have been provided for, most liberally by the general government and by nearly all the States. Being public institutions, and yet having the character of specialties, and possessing unequalled advantages, it seems but natural that the profession should expect reports from them with records of carefully studied cases, and detailed accounts of autopsies, and microscopic examinations of diseased brain and nerve tissue, of practical value to the general practitioner. A most important step has recently been taken in this direction by Dr. J. P. Gray, Superintendent of the New York State Lunatic Asylum at Utica, who requested that a special pathologist be appointed as his assistant in that institution. The doctor's recommendation to this end was unanimously passed by the legislature, and an accomplished microscopist was appointed to the position. A complete outfit for careful chemical and microscopical examinations, and for autopsies, and for taking photo micrographs of diseased organs and tissues, was provided. The late reports already attest the wisdom of the measure.

If a hospital for the exclusive treatment of cancerous diseases were opened in some of our large cities, where cases could be kept under treatment and careful observation throughout all the stages of the disease, it would supply an urgent want, and do much toward developing and discovering more efficient means for combating this terrible disease. The pathology of this malady is now perhaps better understood than is the power of remedies over it. An institution of this kind has recently been founded in England.

The number and character of the medical works and journals annually published in the United States show that there is a rapidly increasing demand by the profession of the country for the most recent views in medicine and particularly of the leading histologists and pathologists of the world. Instead of the few, the majority of

American physicians are becoming industrious readers and careful students, and demand the latest and most scientific works.

Twenty-five years ago it would have taken eight or ten years to bring new views fairly before the profession for trial, that will now be read, reviewed, tested, confirmed, or contradicted, within six months, by scores of different observers throughout the country.

The telegraph even has been brought into requisition, and contributes its power to assist practitioners in distant cities to carry on consultations for the benefit of influential or distinguished persons.¹ Even the names of patients and their diseases are frequently given in the dispatches of the associated press, with the names of the physicians and the special treatment adopted. What more striking evidence of the progress of the age and of the intelligence of our profession, and of the people who are interested in and avail themselves of the latest inventions and advances in the physical sciences?

There are some hundreds of young physicians, of first-class ability, noted for their originality of thought and boldness of investigation, residing in different parts of our country, who are working with the scalpel, the microscope, and the test-tube in the spirit of true philosophers. But where we have ten such, we ought to have a hundred. It is from among such must come the leading medical men of the future. Young physicians are peculiarly adapted for experimental investigations by having the time, the enthusiasm, and the daring imagination to be original. They are also free from undue reverence for old ideas, and are without preconceived theories—conditions so essential for original experiment and discovery; for which age is found to be largely disqualified. It is, therefore, chiefly to the young that the profession must look for its original work and new facts, and while we are deeply grateful and ever ready to award due praise to the retired or deceased physicians, who have fairly won by earnest study and devotion to medicine, the highest honors of the profession, I feel it to be a duty to encourage by honorable commendation the deserving young men who, by virtue of genius, industry, and force of character, are conquering obstacles to increase the knowledge of our profession, and gain recognition and success. Such young men become the teachers of their teachers, the masters of the colleges.

Preventive medicine is now attracting the earnest attention of many of the most profound thinkers in the profession. Within

¹ Louis Napoleon, Greeley, Chase, Agassiz, Sumner, and many others.

the personal observation and memory of each of us there have been great advances made in the control and prevention of disease. There is still much to be done in this direction. I confidently look forward to the time when epidemics of cholera, yellow fever, and smallpox¹ will be prevented with a certainty just in proportion to the dissemination of the knowledge of efficient preventive measures, and the faithfulness with which the means are applied.

I think the time is not remote when the national government will feel justified in authorizing a central public health council of some kind to act as auxiliary and advisory to the different State and municipal health boards and quarantine organizations of the country.

The organization of State, county, and city boards of health should be encouraged by the medical profession, and authorized by law in every State. It is within the power of such bodies, if properly constituted, and filled with intelligent and energetic physicians, who will make sanitary matters a study, to add much to the security of public and private health. Indeed the organic law of each State should require every county and city to have such a board. Their mere existence tends to educate the minds of the people to an observance of hygienic laws. The aggregated experience and reports of such boards would add greatly to our knowledge of the prevalence of local and epidemic causes of diseases, and their distribution and recurrence throughout our country.

The climate in which we live, the pursuits and temperament of our people, and the terrible rush and enthusiasm which characterize a business life and its efforts in the new world, are in part at least responsible for a numerous class of diseases. In many individuals the stomach and the brain are kept in an abnormal state of excitement, almost from childhood. The consequence of this strain is manifested in numerous disturbances, mental and physical, even in persons who appear to be in good health, as well as in the recognized invalid. Cases of obscure and complicated diseases are believed to be more numerous, proportionally to ordinary sickness,

¹ The epidemic of smallpox in Philadelphia in 1872, which, according to reports of the Board of Health, caused 2585 deaths, and including deaths from smallpox in 1871, 4464, is an evidence of the lax manner in which is applied even the simplest and one of the best known preventives to a most loathsome and destructive disease. But Philadelphia is not the only city where smallpox has of late appeared and caused many deaths. The public should be made to feel the responsibility of neglecting to apply effectually all well-known preventives.

with us than with the people of any other country, and diseases of the nervous system are out of all proportion, more frequently met with among the active business and professional men and in the well-to-do class of society than in other countries. This class of cases, and all the producing causes, deserves to be carefully studied with a view to prevention or cure. There are annually many valuable citizens, statesmen, and professional men, carried off suddenly, whose demise in the prime of life and in the midst of their usefulness is attributable to over-worked brains.

The question of the influence of localities of different elevations upon health is now, more than at any previous period, engaging the attention of the profession. As population increases in the interior and elevated portions of our country, the number of facts observed bearing on this point will rapidly multiply and be recorded by separate observers, and at many different points. Facts thus accumulated can be digested, and results deduced that will largely assist to solve this problem.

I desire also to recommend that this Association take into consideration the question of the desirability of encouraging the formation of an *International Medical Association*. This can be done by inviting and securing the co-operation of the national medical societies of the different countries of the world. This Association, I would suggest ought to meet regularly every five years, or oftener, in some one of the different national capitals. The organization should be composed of delegates eminent in medicine, to be appointed from the several national medical bodies, in the proportion of say two members from each body and one additional delegate for every one hundred active members. The purpose of the congress should be to confer, and consider from an international point of view all questions that are promotive of public health, the advance of medical knowledge, and the true interests of the profession throughout the world. The present rapid and frequent communication of all civilized countries with each other makes us all akin, and the advancement of science renders this kind of professional intercourse desirable, to the end that frequent and free exchange of all that is known to be new and useful in medicine may be speedily brought to benefit mankind in every clime. The progress of science, the facility of intercommunication, the general and wide-spread intelligence, the claims of humanity, and the aspirations of the age and of our noble profession, demand the formation and support of some such organization. Should the measure

suggested, meet the approval of this Association, all the details and correspondence proper to be taken to secure co-operation can be left to a committee. I would suggest, however, that an effort be made to have the first meeting held in Washington City some time during the summer of 1876, while the American International Exposition will be open in Philadelphia.

Our country has much reason to be grateful to a kind and overruling Providence for the prosperity and general good health that have been vouchsafed to her citizens during the past year. A few cities in the South, however, have been visited by severe epidemics. You will immediately recall afflicted Shreveport and Memphis, where yellow fever of a most malignant type prevailed for over two months, carrying off thousands of valuable citizens.¹ The devotion of physicians to their professional duties in those places furnishes additional evidence of the heroism of medical men, even to the extent of sacrificing their lives in the line of duty. In Memphis seven physicians fell at their posts.² And at Shreveport four,³ three of whom were resident physicians; and one, J. A. Richardson, of Jefferson, Texas, who had volunteered his services to these people in their hour of distress. At a most alarming period of the epidemic at Shreveport, in response to a call for professional aid, a number of physicians went there from New Orleans⁴ to assist the over-burthened and thinned ranks of the practitioners of that city.

The departments of the national government in which exist an organized medical corps, the army and the navy—need no special mention or encomium from me. Their well-conducted bureaus and the highly accomplished personnel of the medical staff corps are the pride of the profession of the whole country. Their works speak more fittingly their praise than could any words of mine. The great army pathological museum and the magnificent medical library which their thoughtful consideration for the profession

¹ In Memphis, in 1873, about 2000 died of yellow fever. In Shreveport, the same year, 759 died of yellow fever.

² The physicians dying of yellow fever in Memphis were Drs. Crone, Minor, Kennon, Hatch, Brout, Freeman, and Williams.

³ The physicians who died of yellow fever in Shreveport were Drs. John B. Wise, T. P. Hotchkiss, J. L. Hebbette, and J. A. Richardson, the latter a volunteer physician from Jefferson, Texas.

⁴ Drs. Finney, Hurd, Smith, Angel, Choppin, D. H. Bruns, Davidson, and perhaps others.

have created, fully attest their devotion to their high trust and their love for the advancement of medicine.

Within a few years a third medical department, known as the Marine Hospital Service, under the Treasury Department, has come into existence. Its direction is under the immediate supervision of an able medical officer, and its purpose is to provide hospital accommodations and medical treatment for sick seamen belonging to the merchant marine of the United States. At most of the ports, contracts are made with local hospitals to receive and treat the sailors. The government owning but ten hospitals, it consequently makes but few medical appointments. The service is therefore small, and may from its importance be considered in a formative state.

The medical officers of the army have not yet received that consideration and relief from Congress which you recommended at our last meeting. The committee appointed by you drew up a memorial, which was duly presented to Congress, they also called in person upon the members of the Military Committee of the Senate and House of Representatives, and prepared a bill entitled "A bill to increase the efficiency of the medical department of the army," which, if passed, would place the medical staff upon a footing of equality with the other staff corps. This bill was introduced into the House of Representatives Jan. 6, 1874, read twice, and referred to the Military Committee, who have not yet taken any definite action on the subject. Meanwhile the action of the American Medical Association and of your Committee has been heartily endorsed by the several State and county medical societies, almost every one of which has passed resolutions on behalf of their brethren in the army, and forwarded them to their representatives in Congress. The medical profession of the United States can never be content that the medical officers of the army shall continue to be treated with less consideration, in the matter of rank and pay, than the officers of other staff corps or of the medical corps of the navy, and will never cease their appeals to the representatives of the people until justice is done to this deserving body of medical men. I recommend, therefore, that a larger committee be appointed to plead their cause anew, that we may, if possible, secure favorable legislation before the present Congress adjourns; or, if this prove impracticable, that we may bring the matter to the attention of the next Congress so soon as it convenes.

The systematic observations in meteorology that are being made

throughout our country, under the direction of the United States Signal Office and the Smithsonian Institution, promise in their results to be of great value in the study of climatology and the causation of disease. I hope to see that system widely extended, and its stations multiplied through the whole country.

Electricity justly deserves the careful attention which has recently been given to it by a number of medical observers in our own and other countries. It is well known that electricity is manifested in different forms, as frictional electricity, galvanic electricity, and magneto-electricity. Each of these forms has probably different effects on living organisms, and each should receive special attention from the profession. It has been found that a current of electricity passed from the extremity toward the centre affects the nerves differently from a current passed in the opposite direction. The great power this agent is known to exercise over nutrition justifies the hope that it may be made serviceable in changing or retarding morbid growths, and in reviving lost nervous and muscular strength.

Within the last few years several additions of great therapeutical importance have been made to our *materia medica*, and it is worthy of note that the most valuable of these are not simple substances existing ready formed in nature, but organic compounds which we owe to the patient investigation of modern chemistry; and that their medical uses have not been ascertained by the accidental chances of a blind empiricism, but discovered in the course of exact experiments into the physiological effects of various organic substances, undertaken and carried out with all the precautions and refinements suggested by modern science. As examples of the class of experiments from which such results are to be anticipated, I may refer to those of Dr. H. C. Wood, in our own country; in Europe to those of Richardson and Liebrich. The latter observer has been singularly fortunate in discovering the therapeutical value of two new bodies, which, like chloroform, are chlorine compounds, and which, like it, though in a somewhat different manner, are of singular efficacy in procuring rest and the relief of pain: I refer to chloral hydrate, which has already gone into such extensive use, and to the new anodyne, croton chloral hydrate. Is it not a hopeful sign of the times that we should owe such remedies to that very spirit of exact science which is so often unjustly accused of tending towards nihilism and scepticism in medicine?

At each recurring meeting we are painfully reminded, by the absence of some one or more gifted members, whom we have been accustomed to meet, that death has been thinning our ranks. On the 8th of Feb. 1874, Prof. Henry Miller, of Louisville, Kentucky, sank to rest, in his 74th year.¹ He was president of this Association in 1859. At home and abroad, he was extensively known as a vigorous thinker and an able writer. For over half a century he enjoyed a large and responsible practice, and much of this time was a popular teacher.

In conclusion, I must beg the privilege of thanking you for your patient attention, and again reiterate my confidence in the belief of a steady increase and accumulation of knowledge in the world, and the undoubted progressive and permanent elevation of the profession in the United States. My conviction is decided, that in no period in the world's history have the rights of individuals and the wants of humanity been so well secured and so invariably accorded to the mass of the people as at the present time. And, further, I affirm that the United States, by her liberal institutions, the customs and intelligence of her people, conspicuously leads the nations of the earth for comprehensive benevolence and Christian charity. The heart and mind of the American people are educated from childhood to enjoy freedom of thought and liberty of action, and to exercise all their talents as their judgment dictates; at the same time they recognize a brotherhood in the whole human race, and award an equal opportunity to all in the struggle for fame and fortune.

“Do unto others as ye would that they should do unto you”

expresses the spirit and logic of the age, and renders invincible the crusade that is revolutionizing the world. With Tennyson I exclaim:—

“Ring out the old, ring in the new!
Ring out the false, ring in the true!”

The inspired promises and hopes of mankind demand a kindlier

¹ The combined ages of the thirteen presidents of this Association now deceased give an average of nearly 74 years; the oldest having reached the age of 86, and the youngest dying at the age of 52. The average age of the twelve now living is 63 years; the oldest being 77, and the youngest 48. [Dr. George Mendenhall died June 4th, while the meeting was in session.] From records in my possession I find the average age at which 2000 American physicians died was 58 years. I find also the average age which 1000 United States congressmen have died is 62 years. The average age at which 1200 Presbyterian clergymen of the United States died was 57 years. The latter fact has been furnished me by J. M. Wilson, of Washington, D. C.

heart, a larger brain, and a more intimate connection and sympathy between all classes, the rulers and the ruled.

Finally, I beg your earnest support and wise counsel in conducting the business of the Association. The eyes of the profession of the United States are upon us. It is in our power to make this meeting one of marked success, both in the amount and character of the scientific work we may do. Whatever ability I possess is at your command. It is with me an earnest desire to win, by fealty to my trust, the approbation of this Association and of my brother practitioners through the country. I hope to deserve to have it written of me that I love my profession and my fellowmen.

