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THE AMERICAN ACADEMY OF MEDICINE—ITS OBJECTS; ITS SIGNS OF PROMISE AND ITS OBSTACLES; ITS FIELD OF WORK; AND SOME SUGGESTIONS LOOKING TO AN INCREASE OF ITS EFFICIENCY.

BY

LEARTUS CONNOR, M. D., A. B.





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# AMERICAN ACADEMY OF MEDICINE,

Its Objects; Its Signs of Promise and Its Obstacles; Its Field  
of Work, and Some Suggestions Looking to  
an Increase of Its Efficiency.

## THE PRESIDENT'S ADDRESS,

Delivered at the Annual Meeting in Chicago, Ills., Nov. 13, 1889.

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REPRINT FROM AMERICAN LANCET,  
DECEMBER, 1889.



DETROIT, MICH.  
1889.



[REPRINTED FROM THE AMERICAN LANCET, DEC. 1889.]

*THE AMERICAN ACADEMY OF MEDICINE—ITS OBJECTS; ITS SIGNS OF PROMISE AND ITS OBSTACLES; ITS FIELD OF WORK; AND SOME SUGGESTIONS LOOKING TO AN INCREASE OF ITS EFFICIENCY.\**

BY LEARTUS CONNOR, A. B., M. D., DETROIT, MICH.

FELLOWS of the American Academy of Medicine: By one of those strange freaks, that make the action of otherwise clear-headed people unaccountable, you last year elected me to the office of your chief servant. As I was unavoidably absent from the session during which this action was taken, I did not learn of it until many hours after you had adjourned. Hence nothing was left me other than to endeavor to understand and execute your wishes. Respecting the outcome of my service you are all in position to judge. The new plans of operation, proposed by Dr. Gerrish last year, and adopted by the Academy, called for the appointment of several new committees, whose reports speak for the wisdom of the changes and the faithful service of these committees. In general it seems to me that the changes, and the individuals who at much personal sacrifice have rendered them so successful, deserve the full approval of the Academy.

For the first time in its history, this Academy holds a meeting in the West. For the first time, it comes into

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\* Address of the President delivered at the annual meeting in Chicago, Ill., Nov. 13, 1889.



personal contact with the mighty material forces clustering about the Great Lakes, the vast rivers of the American Continent, the boundless prairies, and the pure breezes that starting far up in the heavens by the tops of the Rockies, sweep for thousands of miles over fertile plains toward the rising sun. For the first time, it gazes upon the marvellous civilization that has sprung up, as if by a touch of Aladdin's lamp, in the vast garden bounded by the Great Lakes, the Gulf of Mexico, the Alleghanies, and the Rocky Mountains. Within this area is being developed a civilization having the largest and most favorable conditions for gigantic growth, untainted by the disturbing influences of Europe or Asia, as the obstruction of vast mountain chains separate it from ready access to the great ferries which ply the Atlantic and Pacific. Here, if anywhere, will appear the typical American. Here, if anywhere, will be seen the greatest differentiation from all other peoples and races of the earth, and the most perfect blending of all types under the influence of the governing Anglo-Saxon spirit. Here, if anywhere, will be seen the product of the richest soil, the most varied climate, the most perfect air, the purest water, the grandest forests, and the most majestic rivers. Here, men and women do and dare all things in their efforts to bring under subjection the countless natural riches, everywhere found in such profusion. Into this atmosphere, most typically represented in this its largest city, the American Academy of Medicine for the first time comes. That it will grasp some idea of the medical

needs of this superb region, and be able to initiate such schemes as will result in their early supply, is assured. That the Fellows will better appreciate the problems before them, see additional grounds for encouragement, and appreciate more definitely the obstacles to be met and overcome, is our hope. Within this vast area is a teeming population, the parent of millions who within a short time will occupy these fat places. The medical profession throughout it is in a plastic state of development. Now better than ever after can it receive and execute the lessons of its matchless opportunities, and the measures requisite for their best improvement.

Some have said that the American Academy of Medicine is founded upon a new idea, a "fad" born of an aristocratic modern notion. As a fact, we find that Hippocrates, standing at the dawn of historic medicine, urged earnestly that "the preliminary training of medical men be made as broad and as deep as possible." Farther, by precept and example, the same idea has been maintained by the most famous medical men, from Hippocrates down to Alonzo Clark, as was abundantly shown in the eloquent and scholarly address of Dr. George Jackson Fisher, last year. We, the lineal descendants of these worthies, are simply endeavoring to maintain the faith once delivered to the "Fathers" thousands of years ago. Our mission is to galvanize into life the truth of the importance and value of a preliminary education—a truth that has become obscured by the overshadowing influence of commercialism. We strive to aid in the establishment of such conditions as will insure the possession

by every medical man of such general knowledge of literature, science, art, and trade, in their broadest as well as narrowest relations, that he may rank as a real teacher, companion, and friend, of the cultured and uncultured. We rejoice that the medical profession contains large numbers of such men; but the Academy would have them universal—the rule, not the exception. The change which the attainment of this end would make, is illustrated by the change which occurred in the classes of the Harvard Medical School during the interval from 1870 to 1880. On the former date, it will be remembered, this school raised its standard of preliminary requirement, and proportionately its general curriculum. In brief, it began to teach modern medicine in a rational manner. President Eliot, in describing this change, says: "Until 1870, the students in the medical class of Harvard were noticeably inferior in bearing, in manners, and in discipline, to the students in other departments; now they are indistinguishable from other students." He adds: "A corresponding change in the medical profession at large would be effected in twenty years if all the medical schools of the country would institute a reasonable examination for admission. Under the present order of things, the American physician and surgeon may be, and often is, a coarse, uncultivated person, devoid of intellectual interests outside of his own calling, and quite unable to speak or write his mother tongue with clearness and accuracy. To set in operation agencies which will enable all medical students to rank with any other professional students in gentlemanly



bearing, and to supplant the coarse, ill-bred, ignorant physician by one who can comprehend the intellectual forces operating in the community about him, and can meet on equal terms any individual who has become possessed with the intellectual training of his time—such is the mission of this Academy.

Then, if ever such time comes, will the degree of Doctor of Medicine be an introduction and passport to any and every class in any community. Then, medical men will take rank among the leaders in all things pertaining to the best interests of the communities in which they live. Until then the physician's diploma avails for naught except as a license to practice medicine in some States. Its general worthlessness becomes more and more apparent as State after State refuses to accept it because of the lack of uniformity of the knowledge which its possessor may have acquired. Until a change is brought about such as the Academy seeks, each doctor must introduce himself, pass his individual examination before the guardian Board of the State in which he desires to live, and before the cultured people of the community among whom he casts his lot. Having passed these examinations successfully, he occupies a place in the community such as his personal merit has won, just as does the blacksmith, or farmer. The London *Lancet* stated the case as follows: "If Medicine is to acquire and sustain a high respect for its membership such as is given men of science, art, and other professional callings, its membership must be equipped with all the richer learning which is required to hold its own

in a world that is daily becoming more cultured, and will certainly demand more of its medical advisors. Its members must have large physical and mental energy, capacity for long-continued efforts, an unselfish devotion to their work, and a high moral life. The practitioner of the future must know more than his father knew, and know it in quite a different manner. Here and there one may leap over all obstacles, and in spite of unfortunate antecedents, mount to the front rank. But the vast majority of the medical profession can reach that rank only by the most thorough and systematic cultivation of every physical, mental, and moral, faculty before they enter upon the study of medicine. Then, if ever, the physician must make the acquaintance of the great world of literature, philosophy, art, poetry, language, etc., which has been growing out of the labors of countless hosts who have lived and by their toils made it possible for us to accomplish more than they in the short span of human life. At such time, or never, the student must master the objects and forces beneath the earth's surface, upon the earth's surface and above the earth's surface. By microscope and telescope, and all other scopes, by retort and test tube, by heat, light, electricity, chemical force and gravitation, he must follow the great teachers into the revealed mysteries of Nature. Only thus can he come to know something of himself, and of the human beings whose ills he would learn to prevent, remove, or alleviate. Only by such training can he hope for a manly development which will rank him with the best educated men of the world." To increase the number of those who

shall thus stand as the representatives of medical science and art, is the crowning glory of the Academy's labors.

But the objection is made such development will not pay; it costs too much time, too much money, for the returns in fees. To this I reply that the history of medical men shows clearly: 1. Those, who enter upon the study and practice of medicine for the fees they hope to receive, have made a fatal mistake. They had better, at once, devote their time and energies to some calling in which it is possible to accumulate large fortunes, for the pure tradesman has no more place in the temple of medicine than in the temple of religion. He may don the lion's skin to cover his own, but the donkey's ears will stick out, and the "braying voice" reveal his identity. He may be sure that at some time the Master will enter and drive from the Temple "the money changers and those who sell doves." 2. The highest honors, the largest fees, the most enduring renown, the greatest glory, have, during all historic time, come to such physicians as have, first and last, sought the uplifting of the profession to which they belonged. In the language of the Great Teacher, those who have "sought the Kingdom of God," have also had added to them "all other earthly things." In brief, it is certain that medical men, developed and equipped as we have desired, would reap the very highest fees, the most distinguished honors that earth can give. We trust that this Academy may in the near future make plain to the world that its principles once fully enforced by the profession, would be attended by these results.

It is fitting, from time to time, to look over the field in which we labor, to observe the progress made in its cultivation, and the signs of promise for the future. Of these I note a few for our encouragement. In truth it must be said, that the Academy is but one of numerous agencies, all striving toward the accomplishment of the same end, but by diverse routes. All these we cordially welcome and wisely seek to increase in efficiency and to multiply.

1.—It will be remembered that last year the College of Physicians and Surgeons of New York, placed in active operation a preliminary examination of considerable severity. The result shows that its classes maintained a size entirely unexpected though gratifying to the friends of an increased preliminary education. In some other medical colleges the increase of preliminary requirement was attended with equally satisfactory results.

2. Better than this, because of larger scope and indicative of a wider interest in preliminary education, is the action of the last New York State Legislature in enacting the following: "Before the Regents of the State of New York, or the Trustees of any Medical School or College within this State, shall confer the degree of Doctor of Medicine upon any person who has not received the Baccalaureate degree in course from a College or University duly authorized to confer the same, they shall require him to file with the Secretary or Recording Officer of their University or College, a certificate showing that prior to entering upon the study of medicine, he passed



an examination conducted under the authority and in accordance with the rules of the Regents of the University of the State of New York, in arithmetic, grammar, geography, orthography, American history, English composition, and the elements of natural philosophy; and such certificate shall be signed by the Secretary of the Regents, and countersigned by the Principal or Commissioner conducting the examination." This enactment shows that the principle for which the Academy contends has been adopted by the State of New York. The examination is low, and the enactment imperfect in some details, but as a whole, it is a great step in advance. We can rely upon the spirit which prompted, and the intelligence which formulated the enactment, to eliminate imperfections, and advance the requirements as public sentiment shall demand.

3. It is meet that the Academy should take heart, because the enemies of the Illinois State Board of Health failed to accomplish its ruin this year. Its position, that no diploma will be recognized as entitling its possessor to practice medicine in Illinois unless given by a medical college which requires a definite preliminary examination, still remains the law of this State, and is enforced. The service of this Board in teaching the doctrine of the absolute necessity of some preliminary requirement of medical students before entering upon college training, has been of incalculable value. It is doubtful whether any moral suasion would have been so effective with the medical colleges, the medical profession, and the laity and other State Boards of Medical Examiners. As the



pioneer of teaching this doctrine by law, it will ever retain the gratitude of such as are able to appreciate its difficulties. Profiting by its successes and failures, other Boards have been established upon a higher plan, but all cheerfully acknowledge their debt of gratitude to this Board.

4. The results exhibited by the Minnesota State Board of Medical Examiners, under the last phase of its development, are especially encouraging. Under the old Act, Minnesota licensed in 1885 one hundred and forty-six physicians. During the following two years the State rapidly increased in population, and yet under the last Act only one hundred and forty per year were licensed. At the examination held October, 1889, of seventeen applicants, only twelve were licensed. From this statement we are prepared to hear that Minnesota has but one physician to thirteen hundred, while in the rest of the States it is affirmed that one physician exists to every five or six hundred people.

The last Act, in brief, requires all persons, desiring to begin the practice of medicine in Minnesota, to pass a scientifically practical examination by a Board that is independent of all medical schools. No candidate is admitted to examination unless he presents a diploma from a medical school that requires a preliminary examination upon English grammar, composition, geography, algebra, physics, and natural sciences, together with one of the following languages: Latin, French, or German. In addition, the college must require attendance upon at least three full courses of instruction, each of not less

than six months duration, before conferring the degree of Doctor of Medicine. The practical results of this law have been, to restrict the number of new men who have entered upon the practice of medicine in Minnesota, and very greatly elevate the general and special training of professional aspirants. It has also given a stimulus to medical colleges in their efforts to advance the standard of preliminary requirement. It must be, that in the near future the profession of Minnesota will possess a higher grade of general culture and professional acquirement than in the past, or than is proposed by other States. As this accords with its aims, the Academy can rejoice in such tangible proof of progress.

5.—In Montana, Virginia, North Carolina, etc., there are also laws bearing upon the increase of the preliminary requirements of medical students. While these are less radical than the Minnesota Acts, they contain the seeds which are sure to grow until they have equalled if not surpassed the foremost.

6.—At the late meeting of the American Medical Association, Dr. Millard, so long actively engaged in the reformatory work in Minnesota, presented a scheme of measures such as would result in the adoption by each State of the Minnesota Acts. His idea was regarded with favor by those present. That difficulties attend its speedy realization does not render it less appropriate that we should accept it as an indication of the development of our cherished principles. We are ready to grant that law cannot accomplish all the reform we seek, still we must admit that law can do much in numerous direc-

tions otherwise unattainable. It can lay its heavy hand upon the wilful transgressor, and make him respect the forms of propriety. The discussion of such laws in each State, incident to their formulation and passage through the legislature and to their enforcement, compels attention from millions of the laity, and thousands of the profession, who otherwise would not give the matter a moment's thought. Medical colleges would thus learn that they cannot with impunity, in the interest of trade, prostitute the profession to which they belong. The law can make it profitable for the colleges to adequately increase their preliminary and other requirements.

7.—The pharmacists at their last annual meeting, bewailed the low condition of the general culture of their craft, and endeavored to formulate some plan by which such culture could be increased. They sought to have the professional side of their calling occupy a more prominent share of attention. The preliminary requirement suggested as fitting for those who desired to enter upon the study of pharmacy compares favorably with that of most medical colleges, which enforce any preliminary examination. Thus in many directions the spirit of reform is abroad. While it works slowly it is surely coming to the front.

*Obstacles to the General Adoption of the Principles of the Academy.*—We are compelled to admit the existence of another side of the picture. There are numerous serious obstacles to the rapid adoption by the medical colleges of a high grade of preliminary requirement from their students. Among these we note a few.

1.—According to statistics collected by the late President Barnard of Columbia College, it appears that the proportion of literary college students has diminished from one in two thousand of the entire population to one in twenty-five hundred. During these fifty years the population has increased about four fold, and the number of colleges three fold, but the aggregate number of students in all the colleges but little more than two fold. The causes that have thus diminished absolutely the number of Bachelors of Arts we cannot discuss, but the fact exhibits one reason why more Bachelors of Arts are not found in the medical profession, and why a high degree of preliminary requirement is not generally regarded as necessary for entering upon the study of medicine. Significant of the continuance of this tendency of the age is the election of Ex-Mayor Low, of Brooklyn, N. Y. to the Presidency of Columbia College. That a wealthy and successful business man, an able and astute politician with no practical training in the art of teaching, should be placed at the head of one of the most prominent colleges in the United States, is certainly a spectacle worthy of most careful study. Has business so absorbed the best brain of the land that from its ranks must be chosen the leaders of the intellectual and moral training of the country? If so, then we have to meet an obstacle of the first magnitude in the prosecution of our work. In any event we are a part of that protest which every scholar must utter against any and every capitulation of intellectual and moral life to commercialism.

At every turn we shall be opposed by the trade



spirit of our country and our time. This trade spirit cripples the efforts of not a few members of this Academy. One of our distinguished members in his labors said that he was most discouraged because some of those having abilities refused to attempt certain work, for the reason that it would not aid in filling their offices with patients, and their pocket books with dollars. Recognizing our foe, we shall not be surprised at his unexpected and unwelcome presence, but be ever prepared to do what we can to thwart his purposes.

2. It is an historic fact that the medical colleges have constituted a powerful obstacle to any increase of the preliminary requirements. The history of the profession of Ontario fully substantiates our proposition. The colleges there were finally compelled to yield, as at last they must in the United States. This action of the medical colleges is based upon the trade aspect of their work. Adequate preliminary education if exacted of all colleges would reduce the sum total of student's fees and other perquisites. The exaction by one school, having no other advantages than its rival, of a high admission examination, would send a portion of its students to its rival. So, in a variety of ways, the principles of the Academy antagonize the trade interests of the medical colleges. Hence we can understand the efforts they put forth to defeat the enactment of laws adequate for the certain enforcement of an honest efficient preliminary examination and rational college training. That which has been made public is probably only a tithe of the antagonism already existing. Dr. P. H. Millard, in the re-



port already referred to, says: "Only those who by their official positions have been compelled to enforce the Medical Acts of Minnesota, Illinois, Missouri, West Virginia, etc., can appreciate the obstacles and intolerable embarrassments encountered in their execution. The most captious criticism and formidable opposition came from the profession itself. This criticism and opposition did not come from the narrow minded cynic alone, but—to the shame and disgrace of the profession—from a large number of our medical institutions, some of which, we regret to mention, were manned by men of eminence and learning, but carelessly, for financial reasons, gave cognizance to an opposition to a reform which was entitled to undivided support and encouragement from every member of the profession from the Atlantic to the Pacific. Of the nine attempts, at the last session of the Legislature of Minnesota, to repeal the present Minnesota Practice Acts, a majority of the professed amendments emanated directly from the medical colleges themselves." The evidence is overwhelming of the open and covert opposition of the mass of medical colleges to all enactments tending to limit the numbers of their students, and among these must be classed a proper preliminary education. They love large classes better than small ones or professional standing. Reforms that will benefit their individual interests, they will adopt, but all others must receive their condemnation.

Many years ago the speaker attempted to persuade a member of this Academy, known the world over for his great learning, splendid abilities and apparent devo-

tion to the advancement of the medical profession, to exert his influence with his own college to establish a preliminary examination, and a three years graded course. He listened to me patiently and when my plea was finished said: "My dear doctor, I believe in the absolute truth of what you say. By no other means can medicine be properly taught. For more than two score years I have said to myself as I finished my course of lectures, 'another farce ended.'" "But," he said placing his hand upon his pocket book, "the real trouble lies just here. The doing as you suggest by my college would diminish its income and the salaries of its teachers. We cannot do it." He did not do it, nor has his college done it to this day. I suspect that it never will do it until it can be shown to pay in money.

Admitting this hostility of the majority of medical colleges to the principles of this Academy, what can it do in the matter? Its collective wisdom can most wisely answer this question, but it would seem evident, that the members of the Academy could cast their influence with such colleges as honestly do enforce an adequate preliminary examination. It could also assist in the enactment of such State laws as will compel all colleges whose diplomas are recognized within its borders, to enforce proper preliminary training. In one or both of these ways it might finally be made profitable for the hostile colleges to join in the vigorous prosecution of our work.

3. It is unfortunate for the cause of preliminary education, that so large a proportion of the professors in medical schools fail to possess the training needful for

the acquisition of the degree of A. B. Not possessing this training, they are unable to comprehend its value to their students, and so are little likely to encourage them to obtain it. Naturally they oppose the requirement by their college of a higher general education than they individually possess. They became professors, because of the fact that they had money or push to invest in the business enterprise which was to enable them as professors to distance all their competitors in the profession. The more pushing physicians who were omitted from the first college faculty gathered together, of the remaining doctors in the town, those having the most money and push, to the end that they might make as large an impression as their rivals, get as much or more business, make as much or more money, and so attain as extended a notoriety, and thus a second college was founded. It is beyond a question that most of American medical colleges originated in one of the two ways mentioned. From this origin it is clear that the general education of the professors was the least important item. Some colleges were organized in other and less mercenary ways, others have reconstructed the character with which they were born, so that there are now medical colleges whose teachers are all that can be desired. Doubtless the remainder will be changed with the natural progress of events. It might be helpful in promoting this change if the exact number of Bachelors of Arts among the professors could be ascertained and published to the profession and the laity. We cheerfully admit that many excellent practitioners and able

teachers are found among the professors of medical colleges, without the degree of Bachelor of Arts, men who have supplied by later studies the deficiencies of their youth. These are men of commanding abilities and indomitable energy who would have conquered all obstacles in any calling. But others in large numbers exist whose early defects have not been rectified in this manner, and whose presence in the lecture room of the college is an offence to any well educated, well bred person.

4. The lukewarmness of so many members of the Academy is another obstacle to the effective prosecution of our work. Those not members, notice and comment upon this state of things. They see members teaching in medical colleges which maintain no preliminary examination; they see members taking students under their direction who have the merest smattering of general knowledge; they observe at the yearly meetings of the Academy only two or three score of members present; they rarely ever hear members speak of the Academy and comment upon it to the physicians about them; in all these respects they differ little, if at all, from non members. True, the Academy has ever had a remnant to whose faithful services it owes its continued existence. The remedy for this state of things is for each member to arise and enter upon his proper duties as a disciple and preacher of the doctrine of the advancement of general education in the medical profession.

5. Lastly, our greatest obstacle is the extensive general ignorance throughout the medical profession. I had collected verbatim letters illustrating the degree of



this ignorance, but from lack of time I will not read them. Nor can I dwell upon the prevalence of this ignorance. It is everywhere apparent to the annoyance of the well educated. Medical editors, secretaries of medical societies, and all having large correspondence with the profession, tell the same story of the constant exhibition of a vast amount of a actual illiteracy among members of the medical profession. It is a humiliating fact that the medical journals having the largest circulation are those who cater to this illiteracy

An editor, himself a man of general and special culture, in response to my expression of wonder that he could have any connection with a medical journal of this class said: I know well this element in the profession. It regards a really good medical journal as a "kid glove" affair, fit only for the "aristocrats." It will not take, nor will it read, such a journal. Hence it is better to make a far inferior journal that it will take and read. This, he said, is the reason for the existence of those medical journals so offensive to the really intelligent practitioner. He then gave the following picture of such subscribers as he had found them: "The typical doctor of this sort, spends much of his time gossiping, in the saloon or in the grocery. His office is as dirty and unkempt as himself. While there, his favorite posture is to sit in an old greasy chair with his feet upon a dirty, dilapidated table. With an old pipe in his mouth, he puffs and spits about, removing his pipe only when necessary for conversation with his patient. When the mood takes him he writes to his medical journal. With



a lead pencil, and a piece of brown wrapping paper, he gives expression to his ideas, in language and forms of thought quite unknown to classical English." All will admit that the presence of such men in the profession constitutes a formidable obstacle to the work of the Academy. To limit additions to their ranks is one of the ends sought by the Academy.

In seeking to understand the resources of the Academy, we are confronted with the question: What is the extent of the field whence the Academy must draw its membership? By the terms of our organization, this membership is limited to such practitioners as have earned the degree of A. B. or one representing a similar amount of college training. The exact number of such practitioners is not known, but we have certain data from which we can estimate the probable number.

The report of the Commissioner of Education for 1886-7 gives the following data concerning the students in the medical colleges:

In 29 States there were 89 medical colleges, containing 9,806 students, 811 of whom possessed some sort of a literary degree. By investigations of the degrees held in Michigan, I find that more than one-third are degrees not recognized by this Academy. It is fair to suppose that one-third of these degrees are of the same sort, hence the students in all the regular medical colleges for the year mentioned, hold but 541 degrees such as this Academy recognizes, or about 5 per cent. of the entire number.

2. The number of graduates for this year from all

these colleges was 2,048. Suppose that the proportion of A. B.'s who graduated was the same as among the entire list of students, and the number who would be available for membership in this Academy, from that year, would be about 147. But it is a well known fact that, while usually a person with little general education graduates in one or two years, an A. B. requires three or more years. This would probably reduce the number of A. B.'s entering the active profession yearly to or about 100, or about 3 per cent of the entire number graduating.

3. It is worth remembering the States which are in this Report given as containing among the medical students of all their medical colleges no person having the degree of A. B. They are: Alabama, Arkansas, Colorado, Kentucky, Louisiana, New Hampshire, Oregon, and South Carolina. It must be that some mistake exists here, but I give the facts as contained in the official volume. These eight States are credited with having within the halls of their medical colleges 1200 students, not one of which had any degree in the arts or sciences.

4. Finally, for the year mentioned I find that the several veterinary colleges contained over twenty per cent. of those holding literary or scientific degrees, while, as already stated, the regular colleges had but about eight per cent. for the same year. In short, the veterinary colleges for that year contained more than twice as many students who possessed literary or scientific degrees. Horse versus man: horse ahead.

5. It may be supposed that the year in question was an exception, and that former years exhibited a better showing. Hence I took the reports for the nine years preceding the one from which I have quoted, and I find that, while there is slight variation from year to year, the average for the entire ten years of all those holding literary degrees of all sorts, is six per cent. among the students of the eighty-nine medical colleges; or if we eliminate the degrees not recognized by the Academy, this ratio would be reduced to about four per cent.

In an address before this Academy in 1882, our esteemed fellow, Dr. Charles Mc Intire, presented some pertinent facts. He studied nine county medical societies located in New Jersey and Pennsylvania, in all having a membership of two hundred and twenty-two. Of these twenty-eight had the degree of A. B., or twelve and six-tenths per cent. Seven per cent. had received a partial training, and over eighty per cent. no training at all. Unfortunately, he was unable to give us the proportion of A. B.s among the other physicians of these counties, not members of these societies.

He farther obtained the catalogues of fifty-eight literary colleges that gave the occupations of their living alumni, and found that about nine per cent. were said to be physicians. Incidentally, it may be mentioned that over nineteen per cent. were lawyers, and twenty per cent. ministers, showing that medicine did not receive half so many recruits from these colleges as did either of the two other professions.

He also showed that the percentage of A. B.s among the graduates of Harvard Medical School had decreased from over sixty-nine per cent. during the period from 1788 to 1800, to thirty-five per cent. from 1826 to 1879.

Knowing that our distinguished Fellow, Dr. Lowry Sibbet, had given much thought to this subject, I sought his assistance. He said that some time ago he took the register of the physicians of the United States, the catalogues of the literary colleges, the catalogues of the medical colleges, and statistics collected by himself, and from these data he formulated the following: Practitioners in the United States, one hundred and twenty thousand. Twenty per cent of these are non-graduates or twenty-four thousand. Ten per cent. are sectarian practitioners or twelve thousand. Three per cent. have the degree A. B. making three thousand six hundred. Taking six counties surrounding his own, with the profession of which he was familiar, he could reckon five hundred practitioners. Among these he could find but ten possessing the degree of A. B. This is but two per cent. At the date of making this communication to me Sept. 7th, 1889, the doctor says that he can find but nine A. B.s in these same counties. He allows five per cent. for Philadelphia, and four per cent. for Pittsburgh, and then estimating the other states by Pennsylvania, he cannot reckon more than three per cent. of the A. B.s in the profession of the United States.

By the aid of the Secretary of the Michigan State Medical Society, I sought to ascertain the actual number



of Bachelors of Arts in that body. Arrangements were so made as to cause each member no expense and but a few minutes of time in order to furnish the requisite information. The results are as follows: The entire number of members of this society is four hundred and forty-five, while the entire number of physicians in Michigan is three thousand five hundred and eighty-four. Two hundred and fifty-six replies were received from the members of the State society. Of these twenty-eight stated that they possessed the degree of A. B. Fifteen others possessed other degrees. Thus there was one Ph. B.; two Ph. M.; one C. E.; seven B. S.; four M. A. honorary. Two hundred and thirteen reported as having no literary degree or other educational equivalent. It is presumed that the Michigan State Medical Society contains four hundred and forty-five of the best educated men in the thirty-five hundred physicians in the State. Yet of those who replied to our inquiry only about eleven per cent. are eligible to membership in this Academy, a result corresponding with Dr. McIntire's results in nine county societies. If we regard those who did not reply to the circular as not possessing the degree of A. B. (as is most likely to be the fact), then the percentage of A. B.s in this society is only about six per cent.

But what can we say of the thirty-one hundred not members of this society? Possibly there are many having the degree of B. A., but I was unable to get any tangible evidence of the same. In conclusion, there is no reason to believe that the medical profession of



Michigan contains even two per cent. of Bachelors of Arts.

A fact worthy of note shown by this investigation, is that the A. B.s were more frequent among those who had practiced medicine a quarter of a century or more, than among recent graduates. This accords with facts given elsewhere, and indicates that the proportion of A. B.s in the profession is decreasing both relatively and absolutely.

Finally, in estimating the entire medical profession of the United States from our present imperfect data, it would seem that two per cent. of A. B.s would be a large allowance. Granting that there are three per cent., the entire profession would contain but about three thousand Bachelors of Arts.

But a portion of these are homœopaths or eclectics. To ascertain this portion I secured the catalogues of seven literary colleges giving the occupations of their living alumni. My friends, Drs. Emerson and Heath, kindly, by the aid of Polk's Directory, sorted out the several varieties of physicians with the following results. The colleges whose catalogues were thus studied were. Williams, Yale, Amherst, Bowdoin, Pennsylvania and Dickinson colleges, and Michigan University. From the living alumni of these institutions eight hundred and ninety two persons were found practicing medicine. Of these six hundred and thirty nine were found to be regulars; forty-two homœopaths; two eclectics, and one botanic, and two hundred and eight could not be differentiated. These latter we shall drop from our calcula-

tions, though various reasons lead to the belief that nearly all are regulars. This leaves us with about ninety-four per cent. regulars, and about six per cent. irregulars. There is little doubt that the extension of this inquiry to all the literary colleges of the United States would give substantially the same results, as these seven.

Admitting this, and that the medical profession of the United States contains three thousand A. B.'s it will follow that the so-called irregulars take from this number one hundred and eighty persons. Our field of possible members, is now reduced to two thousand eight hundred and twenty. But farther reduction must be made. A considerable number are disinclined to work; others are in bad repute among their neighbors; so that it is quite safe to say that for these and allied reasons one thousand more are removed from our field. This leaves one thousand eight and twenty from which we may hope to increase our ranks. At present we include about six hundred leaving over twelve hundred more to be gathered into the fold.

Incidentally I desire to call attention to the fact that but about six per cent. of the holders of the degree of Bachelor of Arts are homœopaths, while about ninety-four per cent. are regulars. It would scarcely seem the part of wisdom to enact any change in our constitution offensive to the ninety-four per cent. in the hope of pleasing the six per cent. The same facts seem to show that the best prophylactic against quackery of any sort is the rigid requirement of the degree of A. B. from every person who proposes to begin the study of medicine.

Our membership must be recruited from the field already described, but our materials for work, and our aids, must be largely derived from the rest of the profession, from medical institutions, from State Boards of Examiners, from medical societies, and from the laity. We shall in the end utterly fail of our purpose unless we are able to convince the laity of the correctness of our position, and persuade it to support such laws and social customs as shall render it extremely difficult, if not impossible, for those not possessing a good preliminary education to receive a license to practice medicine, or having obtained one to secure sufficient patronage to render their practice adequately remunerative. The intricate problems connected with our work demand for their solution a high degree of such education of the laity as will enable it to comprehend the requirements needful for the attainment of proper professional skill. When once this is accomplished, all physicians, will want to become members of the American Academy of Medicine, all medical colleges will emulate each other in their haste to comply with its standard, because forsooth, it will have on its side the sovereigns of the land—the laity.

Thus far in the history of the Academy, efforts have been largely directed to the securing of a larger membership. The unconscious thought has been that we need first to enlist our soldiers, then train them for the conflict. Indirectly through the medical journals, and by private means, others have been reached and interested.

The method introduced last year by Dr. Gerrish for

the enlarging of our membership is familiar to you all. Its success renders its continuance desirable until its possibilities have been exhausted. By it we shall be enabled to add to our list the doctors just entering the profession. If perfectly qualified in all other respects, I see no reason why we should not admit those who have just completed their college work. But even on our present plan, a considerable number are yearly entitled to enter the lists as candidates for membership. It is to be hoped that the method, by its repetition, will at least secure many who thus far have refused to consider an application for membership. I suggest that the Committee on New Members begin its work early in the year, so that its results may be gathered in before the annual meeting. Another method, suggested by Dr. Sibbet, works from the standpoint of the literary college. A Fellow of the Academy secures a list of the living alumni of his college, with their addresses and occupations. The physicians, by the aid of Polk's Directory, are sorted into the regulars and irregulars. To the regulars he writes, asking each one to consider the subject of applying for membership in the Academy. If for any reason he is in doubt as to an individual's standing, he ascertains it by the readiest channel, and acts according to information received. As a fellow alumni, he will often secure the attention of individuals when all other persons would fail.

Another method works from the standpoint of the State or local society. The names of those eligible can be obtained by circular letter, and then the individuals solicited, as already indicated.



Other methods have been devised by the Committee on New Members, and additional ones will be suggested as they continue the prosecution of the work. By the combination of all these, and pushing them with persistent effort, it would seem that at a not distant day there should be gathered into the Academy the majority of those eligible for membership.

This end being attained, it will be possible to determine what proportion of the advanced work in the profession is done by those possessing the degree of A. B.; what their relative standing is in the profession and among the intelligent laity. With these data at hand, it will be easy to demonstrate the difference between the possession by a doctor of a good preliminary education, or a poor one. Should such a comparison unmistakably show that the advantage was largely upon the side of those possessing the degree of A. B., the lesson to the medical profession, medical colleges, and the laity, would be a most important one. The effects of such a lesson, thoroughly taught, would be far-reaching in all respects, which time forbids me to even indicate.

Of additional methods by which the Academy could effectively preach its gospel to the profession and the people, I cannot even speak. It will certainly uphold all legal enactments tending to require of students a higher preliminary training; it will encourage all medical societies local or National, general or special in their endeavors to advance medical art and science, and to further the higher training of medical students and medical men; it will give the right hand of fellowship to all Health

Boards who directly or indirectly teach the people that a high grade of knowledge and special training is called for by one who would practice medicine in accord with his time; it will sustain all medical institutions that dare to maintain an honest efficient preliminary examination; in short it will seek to learn the ways by which the gospel of preliminary education can be effectively taught and made to bear good fruit. With an organization including the majority of college-bred men in the profession, all earnestly promoting the best interests of general culture, it must be that the American Academy of Medicine shall become an increasing power in the land.

During the year I have carefully studied the mechanism of the Academy, and duty compels me to frankly state the results.

The amendments before the Academy, were fully discussed last year by President Gerrish, and are to be reported upon by a special committee at this meeting. Respecting those relating to modifications of the terms of membership, it seems to me better to leave them in abeyance until we have fully worked our present field. The regulations for admitting members are quite strict and tedious enough. It cannot be that the Academy will suffer harm from the admission of gentlemen who have all the present requirements and are endorsed by a Fellow of this Academy. The trouble is not with our machinery in these regards, but rather in the lack of energy and forces moving this machinery.

The amendment relating to the admission of the so-

called irregulars seems to me ill-timed. I have already shown that of all the A. B.'s in the United States there is not more than six per cent. of irregulars, while ninety-four per cent. are regulars. Why should we do anything to offend the ninety-four per cent. in the hope of attracting the six per cent? To my mind this settles the question fairly in so far as we are concerned. Ethical questions affecting the entire profession should be relegated to societies adapted for this purpose. When such societies representing the majority of the medical profession of the United States shall, after fair and full discussion, decide to change their ethical rules, then it will be in order for us to decide whether or no we will accept their decision. It seems to me that the wisest method of disposing of this amendment would be indefinite postponement. All our energies are needed for the gathering together of our forces and using them for the advancement of preliminary education.

In correspondence with members of the Academy, and other intelligent individuals in the profession, I have been impressed by the general ignorance respecting the Academy, its nature, its aims, its constitution, its membership, its time and place of meeting, what it had done, what it was trying to do, and what it proposed for the future. In fact, my own knowledge of the Academy has been acquired through great tribulation, and I fear I am still densely ignorant. However, ignorant as I was, others were still more so, and together we have floundered along as best we could. The lesson from this state of things is obvious; the Academy should so make

itself known to the profession that all essential facts respecting it would be in such shape that any physician can readily obtain them. Thus far, all will agree, but when we ask how this shall be done, there is ground for difference of opinion. In accordance with the suggestion of Dr. Gerrish, last year, a committee was appointed to ascertain the practicability of publishing a full volume of transactions. Possibly the report of this committee will solve our difficulty and provide for our wants. He also suggested, and the suggestion was adopted by the Academy, that a list of Fellows, with brief notes of their history, be collected and published shortly after this meeting. I understand that this work is in such shape as to be speedily issued from the press. Possibly these measures will suffice; certainly they will be a marked advance upon the past. But it strikes me that we ought to make more use of the medical journals. There are two ways of doing this. One is to make the needful arrangements with some existing journal that has a large circulation, and is friendly to our organization; the other is to establish a journal of our own. If we choose to use the first method, arrangements could be made by which the minutes of the meeting could be reprinted and distributed to the members, and so each be kept familiar with all that has transpired. Doubtless, the papers could also be reprinted in a single volume, at small expense, and distributed to the members for permanent keeping. Whatever method is adopted, a full account of our meetings, with papers read, should appear at as early date after our meeting as practicable—cer-



tainly not later than two months. In any event, each paper should be placed in the Secretary's hands immediately after reading, so that his work need not be delayed.

The plan of the Academy establishing its own journal, for the publication of its own transactions, and such other material as would promote the objects of the Academy, is worthy of consideration, but not of adoption until all sides have been fully considered. When editor and publisher are found entirely satisfactory, and the financial portion of the enterprise fully provided for, then the Academy can make the change. There is no reason why a journal on preliminary education should not find a field of usefulness as well as any other journal on any special subject. Its very existence would, monthly or quarterly, place the Academy and its work prominently before the profession. All living questions could be discussed as influencing, or influenced by, the preliminary training of medical students.

The vigorous prosecution of the work of the Academy calls for money constantly and in not inconsiderable amounts. Its present income is small and uncertain; its sources of revenue are the initiation fee and sale of diplomas. Because we have spent little we have got along, but any considerable branching out of effort to make the Academy a power in the direction of increasing the preliminary requirements of medical students will necessitate some additional source of income. As I have said, we live in a commercial age, a "*trade*" age, a "*business*" age. Money, as well as brains and persist-

ent energy, is necessary for the promotion of reformatory as well as other enterprises. In accord with the age, if the Academy intends to conduct an aggressive campaign in behalf of preliminary education, it must have more cash. Hence it seems to me worthy of considering the question of so changing our law as to make annual dues imperative. It will be said that such a change would drive from us many members. Doubtless this is true; but, after all, it does not appear that non-fighting soldiers ever won a hardly-contested battle. On the other hand, it is certain that large numbers would be attracted by seeing that the Academy was aggressively pushing its principles to their logical application, so that our loss would be more than compensated by our gain. I present the matter, not for immediate action, but for such consideration as will enable the Academy to adopt the wisest course to increase the effectiveness of its work.

The time and place of meeting deserve a moment's attention. In general, these should be fixed at least for a year in advance. Such fixation would enable each member to plan his work so that without too great sacrifices he might attend the meeting and contribute to its interest.

The fixing of the place and date by the Council and Fellows, will be influenced by their deciding whether it is best to meet in relation to some other larger organization, or to continue, as we have in the past, to meet without reference to any other body. If, as in the past, we decide to meet at a time and place distant from other medical meetings, there are obvious advantages for fix-

ing our meeting on the second Wednesday and Thursday in November. At such time all State and National organizations have held their annual gatherings, so that the Academy cannot conflict with any.

On the other hand if we decide to meet near the time of meeting of some other large organization and at the same place, we have a large number of societies to choose from. There are all the State, bi-State, tri-State, quator-State, quinque-State, all the various river valley medical societies, the several National special societies, separate or combined in the triennial congress, and lastly the American Medical Association. It is not proposed that the Academy shall blend its organization with any or all of these bodies. It is simply suggested that the Academy meet in the same city as one of them and end its sessions before that of the other society begins. Held in this manner I see no valid objection to the meeting before any one of these. But on the whole I am inclined to think that the gain to the cause of preliminary education would be greater by fixing our meetings so they would close just before those of the American Medical Association began, and at the same city. Perhaps I will be pardoned for stating briefly the grounds upon which I base this judgement. Since 1874 I have been an active participant in the meetings of the American Medical Association. With it I have visited most of the large cities east of the Missouri river and learned by personal contact the profession of those several cities and adjacent country. I have seen the membership of the Association grow from five hundred to over five

thousand. I have seen it adapt itself to the wants of the East, the South, the West, and the North, to a remarkable degree maintaining a uniform character throughout—simply that of an association of American physicians. I have seen it struggle to adjust itself to the changing elements of membership; its conflicts over medical colleges, over medical education, over preliminary education, over ethical differences, over the International Congress; have seen it establish and maintain an excellent medical journal in spite of powerful and unscrupulous opposition. As I look back over its forty years of history I find written on every page a sturdy devotion to steady professional advancement, and a constant preaching of our doctrine of preliminary education. At its first inception I was placed upon the Board of Trustees of the Journal, and have been kept there ever since. This has compelled me to most closely study the Association, that for better or worse the Journal might be made to represent its wishes. In this periodical the effects of a lack of preliminary training can be studied with advantage. Hence it was necessary for the Trustees of the Journal and all connected with it, and all the better men in the Association, to seek for a higher grade of preliminary requirement. Frankly I confess that oft-times I become discouraged at the obstruction of ignorance, and selfishness, but the work goes on, and will go on because there still remains enough leaven in the Association for its preservation.

Some of the advantages of the cause of preliminary education by the Academy meeting just previous to the Association meetings are:



*First.*—Those who desired to attend both meetings would be saved the expense of one trip, the loss of time in making such trip, and the difficulties in making arrangements for two breaks in actual practice.

*Second.*—Some, who otherwise could afford to attend but one meeting, would be persuaded to attend both, so that either the Academy or the Association, or both, would gain in attendance.

*Third.*—Members of the Academy to some extent would remain to the sessions of the Association, and carry with them to the Association some of the enthusiasm for preliminary education they had absorbed at the Academy meeting. Not a few members of the Association would come early, attend the Academy meetings, and also be filled with the ideas there forcibly impressed upon their minds.

*Fourth.*—Both Academy and Association would be more widely advertised, in medical and secular journals alike. As does not happen now, the members of the Academy would be brought more fully before the intelligent people in the cities in which the meetings were held, and so the doctrine of preliminary education be preached to a larger audience.

*Fifth.*—We should expect to persuade members of the Association, eligible to membership in the Academy, to join in our work. Misunderstandings could be removed by personal explanation to the benefit of all concerned.

What objections can there be to such an arrangement?

Possibly some enemies of the Association would be offended. And yet, as the Academy would have no connection with the Association other than such as might arise from the members intermingling, it is difficult to imagine a valid objection. But suppose some were offended? It is more than possible that more would be pleased, and so the Academy be better off in the end.

Another objection lies in the supposed difficulty of obtaining sufficient papers for two such meetings so near each other. It seems to me that owing to the increased stimulus, it would be far easier to secure the needful papers than under present arrangements. The stimulus of an increased audience would rouse to greater intellectual effort, and I believe both meetings would reap the benefits of an enlarged intellectual activity.

On the whole I regard the arrangement as affording a splendid opportunity for the Academy to exert an influence in behalf of increased preliminary education among the profession outside of its membership, and upon intelligent people throughout wide areas. To my mind, if it be right for the Academy to exist and hold its present doctrines, then it is right for it to utilize every opportunity or agency by which these doctrines may be scattered and made a living reality among all our people. When we shall have convinced others that we are in dead earnest, our influence will be enlarged a hundred fold. Enemies will arise, but friends will also spring up to meet them, and we shall calmly perform our work for our profession, for medical art, for medical science, and for humanity.

Since our last meeting, the Academy has lost several of its members by their journeying to that country which persistently receives but never returns its visitors. Pre-eminent among these was Dr. J. L. Cabell, for fifty-two years a teacher in the University of Virginia. During this entire period he was known as a typical gentleman of culture and refinement, a teacher of living medicine able to inspire his pupils with that enthusiasm imperative for attaining the best results; a learned scholar who from time to time gave of his labor for the benefit of his fellows, freely, fully, and without price; a Professor whose counsels aided in establishing and maintaining a sound system of training for medical students—a system peculiar to the University of Virginia; a sanitarian high in the councils of his fellows; not to particularize further, a man typical of the best development of his race, who, like a ripe sheaf, was gathered to his fathers when his life had been fully rounded out. Last January I wrote, asking him to assume the duties of Chairman of the Committee on New Members. I knew that his name would carry great weight among both old and young, in all groups of physicians, in every portion of the land. Almost by return mail I received a long letter from him, explaining in detail, that for some years he had been compelled to forego the pleasure of engaging in such work, though often solicited by gentlemen whom he specifically mentioned. He said that he wrote thus in detail lest the Academy might think that he desired to shirk any duty to the profession he loved so well, or to the Academy whose principles had been

his life-long standard. Had his physical condition admitted, he said, this service to the Academy would have been performed with the greatest delight. As President of the Academy, I responded to his touching letter in terms such as would have sprung from the heart of any member. To this he replied on Feb. 1st, thus: "I have this moment received your very kind letter of the 29th ult., and I cannot resist the impulse to tell you how much gratified and touched I am by your generous expressions of sympathy and regard, not to speak of your too flattering estimate of the little work I have done with a view to the elevation of the standard of medical education, and to the furtherance of all enterprises looking to the improvement of our common profession."

Dr. Stephen Weeks, of Orange, N. J., one of the early members of the Academy, and Dr. William Elmer, of Bridgeton, N. J., have also passed to the unknown shore. The first was born in 1813, and the other in 1814. Both came of stock distinguished for culture and largely impregnated with the pursuit of medicine. Dr. Elmer was formerly a Vice-President of the Academy. We also note the deaths of Dr. Theodore I. Wing, of Susquehanna, Pa.; Dr. James Foultes, of Oakland, Cal.; Dr. James Kerr, of York, Pa.; and Dr. J. I. Miner, of Wilkesbarre, Pa.

Our meetings are marked with two acts typical of human life. We record the admission of members into our ranks, and we note their departure to the land of the majority. In the narrow space between this advancing and that retreating column, we must complete our earthly



work. In full view of these, we will ponder the problems before us, decide upon our line of action, and joyfully march to the conflict. Our battle is but a portion of the conflict of ages, and its winning by the forces with which we are affiliated will usher in the dawn of "Peace on earth, good will to men." As physicians, we are bound to cherish and keep bright the golden thread of professional truth, honor, and progress, which links us with that portion of our army already sunk behind the Western hills, so that as we rejoin it, a still brighter thread will be left behind us to guide our successors. As men representing high intellectual and moral culture, we will ever exhibit that kindly courtesy, manly independence, and tireless energy, characteristic of the highest manhood, so that as in turn we join the departed throng, we shall have the individual consciousness that we have done what we could for the uplifting and ennobling of our race.





