

SALUTATORY

TO THE CLASS

OF THE

MEDICAL COLLEGE OF OHIO,

DELIVERED

AT THE OPENING OF THE SESSION, OCTOBER 1, 1867.

BY

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PROFESSOR OF ANATOMY.

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CORRESPONDENCE.

CINCINNATI, OCTOBER 22, 1867.

WM. H. GOBRECHT, M. D.,

Professor of Anatomy, Medical College of Ohio:

SIR,—At a meeting to-day of the Class of '67 and '68, Medical College of Ohio, the undersigned were appointed a committee, to request, for publication, a copy of the Introductory Lecture, delivered by you, at the beginning of the present session.

Respectfully submitting the request, and hoping for a favorable answer,
We remain, very respectfully, yours,

CHAS. E. WRIGHT,
JOHN H. VAN EMAN, }
JAS. P. MOOKLAR, } Committee.

CINCINNATI, O., 338 VINE-STREET, }
October 25, 1867. }

GENTLEMEN,—

Although my Introductory Address, or Salutatory, was written without any idea of publication as such, as it was prepared for you I do not feel at liberty to refuse to surrender that which is, so to speak, your own property.

Please find the copy inclosed. With many thanks for this indication of the confidence and good feelings of the Class,

I am, very faithfully, yours,

W. H. GOBRECHT.

To Messrs. CHAS. E. WRIGHT,
JOHN H. VAN EMAN, } Committee.
JAS. P. MOOKLAR,

SALUTATORY.

Gentlemen,—

IN former times, in the history of Medical Schools, it was the custom for each Professor to prepare and deliver a special lecture introductory to his own course, setting forth its particular importance in such manner as might conclusively demonstrate to his general hearers his ability as a teacher, commanding their respect and enlisting their sympathies by his elegance of style and diction, as well as by the clearness and force of his expression.

This method of opening a session has been in later days, to a great extent, abandoned, perhaps for two reasons—

First: That an entire week was occupied, to the exclusion of serious labor, in purely literary efforts, or in glittering generalities; and

Secondly: That where certain branches are highly demonstrative in their character, the teachers of those branches could not, in the character of lecture expected, by any means indicate their peculiar expertness as teachers.

HENCE the present mode of delivering a *General Introductory*, which method is, in many respects, superior to the former; for, while it leaves each Professor untrammeled as to the peculiar style of the introduction of his own subject, he is, as it were, floating in his own atmosphere, and with his own peculiar and perhaps superior force. He is where you *want to find him*. And more than this, it accords with the law of *unities*.

We have a Valedictory at the termination of our course, when some *one* teacher, for all, says Fare-WELL to those who

go out from us as *Doctors*, (we hope to prove *Physicians*;) why should we not have, by one, for all, a SALUTATORY to those faithful students who return to us, to their friends whom they bring with them, and to those strangers who, we hope, will soon be strangers no longer within these walls?

Gentlemen, in the name of the Faculty of the Medical College of Ohio, I *salute* you, I greet you, I bid you welcome. I trust that you are WELL-come, not only for those who are to teach you, but for your own as yet undeveloped interests. Yet this WELL-come word is not all I have to speak. Here at the threshold let me further speak:

- 1st. Of the profession you desire to enter.
- 2d. Of the opportunities which are afforded to enable you to gratify this laudable ambition.
- 3d. Of the manner in which you should deport yourselves while embracing these opportunities.

I. Of the Profession which you desire to enter.

The Profession which you desire to enter is old and honorable. Theology, Medicine, and Law are SCIENCES whose votaries are termed *professional*, and they must understand their *arts*, or practical applications of their respective sciences, ere they are worthy of the appellation. To students with the higher aspirations these three pursuits are presented, and it is for them to choose.

In this choice I claim that Medicine holds a rank second only to THEOLOGY, which, having its dealings with the sacred mysteries of the past and future, is employed to instruct man how he shall act *in the present* so as to accord with the behests of the Deity and enjoy his approbation throughout *eternity*.

MEDICINE goes far to explain and alleviate the pangs of suffering humanity; it embraces all investigations into the construction, form, functions, and conditions of the human body in a natural and healthy state, in the first place, and then caps all by a recital of the changes produced by injury and disease, relates the symptoms, gives the history, and produces

the remedy, if remedy there be. Its object is to alleviate *the present* condition of man, both physically and mentally, that, with a sound mind in a sound body, he may prepare for the future. The votaries of this science are not only benevolent, but directly beneficent.

The Science of LAW is, in my opinion, a necessity of society, and the Art a highly scientific business, and is a fine field for men of intelligence with great *business* capacity. Such qualifications may perhaps make almost any lad a more or less successful lawyer, even though his parents have selected his calling without especially consulting his tastes; *but I* would as soon expect to see a beloved and eminently successful physician, who had embraced his pursuit, from the mere idea of having a good business, as to find a clergyman who had been ordained in the cradle by his parents (desiring to increase their own respectability by the pursuits of posterity), unaided by mature convictions, proving a zealous, successful, consistent, and fervid elucidator of his doctrines.

For each profession, then, I claim that there should be peculiar adaptability; and I feel satisfied that the records of these three honored and honorable professions will sustain my remarks.

I may take it for granted that those of you who are to study with us this winter have looked into the matter to some extent, and believe that you are about to enter upon, or continue in, the right track. I trust that you will never have cause to regret the day when some internal, unexplained force drove you in this direction.

Renouard, writing concerning the ANTIQUITY of Medicine in his History, refers us to Genesis 1, which says when Jacob died, "Joseph commanded his servants, the physicians, to embalm his father, and the physicians embalmed Israel." And he comments as follows: "Thus at the death of the Patriarch Jacob, about 1700 years before the birth of Christ, *Egypt* possessed men who practiced the art of medicine. This passage in

the writings of Moses is the most ancient authentic monument that we possess of the Healing Art; all that is more remote in the history of Egypt and of other nations, is enveloped in uncertainty and obscurity, at least as far as medicine is concerned." With this commentary as an initiative, let us proceed in our own way.

We may certainly infer that long anterior to this, many detached facts concerning the ailments of the human body and their treatment were known, and therefore before the calling of a physician was distinctly recognized, a sort of *Domestic Medicine*, as we now term it, based on facts, (or purely empirical,) must have been practiced. But from the date just mentioned (1700 B. C.) we are able to trace a gradual rise and progress in this peculiar branch, through long ages, until it arrived at the status of a SCIENCE, a position which it did *not* hold at the time referred to.

Medicine has always been *progressive*, although errors and abuses have frequently disturbed it and occasionally diverted it from its course. It would scarcely serve our present purpose to speak particularly of the various periods in the advance of our science to the present time, other than to say that by this advance, (in the words of Prof. Comegys, written in 1856,) "Life has been prolonged more than twenty-five per cent. in the last seventy-five years, and the duration of treatment lessened more than one-third. Now it may be said that the cessation of wars and the amelioration of the general condition of the masses explains this gain in human life, and deprives Medicine of her claims to such titles of glory. But we present these irrefutable hospital reports; their wards are the peculiar battle-ground of the doctors, and showing these results, we demand that they shall be exponents of what has been done for society at large—that this increased longevity is due to our Science."

What is SCIENCE? It is classified general principles.

ART is the application of these principles.

And we hold that *Legitimate Medicine* is *based* upon these general principles, which have been deduced from the *facts*—

the accumulated observations of the long past and present, and though *not perfect* (as we are still progressive,) is vastly preferable to the pure empiricism and irregularities of our time. Its good fruits are shown in the majority of households; though not infrequently its votaries are called silently to mourn over their inability to save the victims of ideas, falsely called principles.

LEGITIMATE MEDICINE we propose *here* to teach: Classified general principles.

We will not teach the falsely so-called *Eclecticism*, for as this refuses certain mineral drugs, it is merely *Exclusiveism*.

Hydropathy, though dissimilar, falls into the same category.

We will not teach the so-called *Homeœopathy*, because we believe its assumed principle, "similia similibus curantur," (like things by like are cured,) to be false, and the preparation of its medicaments superlatively ridiculous. I should as soon think of treating a case of disease, which required any thing beyond hygienics homeœopathically, as my colleague, Prof. Blackman, would dream of treating a depressed fracture of the cranium by infinitesimal taps of a tack-hammer.

And so we might explode all other *isms*.

Yet there is a matter more directly within our own purview to which serious thought may be profitably devoted—I mean the medical education of women. Should women be educated to be Physicians? I think not. I believe that the feeling of this Faculty is against it.

Efforts have been made in this direction from time to time, principally *outside* of the profession, until the battering-rams pounded so loudly at the doors of certain of the weak-kneed in the ranks, that from expediency, and perhaps personal interest, (without any other fixed principles,) they have fallen from grace, and following that indefinite "will-with-the-wisp" called Women's Rights, they have brought up in a curious quagmire, and are now shouting like the fox who lost his tail in a steel trap, to all others to come and do likewise, *because it is the*

fashion. I do not believe that any of my colleagues will be so entrapped.

Let me give you *my* views on this subject—why I have decided adversely to the claim.

I find in the “*Religio Medici*,” written in 1634, by Sir Thomas Browne, an eminently pious physician, in Article xxi, an allusion to an idea of the Rabbins in reference to the primary physical condition of man, and the origin of woman, clearly indicating that their teaching was that of an original union of the sexes, although it is difficult to ascertain whether or not he positively rejects the proposition.

But, taking up the idea, let us, in a proper spirit, refer to Genesis i, 27: “So God created man in his own image, in the image of God created he *him*; male and female created he *them*.”

In Genesis ii, 7, 21–24, we find: “And the Lord God formed man of the dust of the ground, and breathed into his nostrils the breath of life; and man became a living soul. . . . And the Lord God caused a deep sleep to fall upon Adam, and he slept; and he took one of his ribs, and closed up the flesh instead thereof: and the rib, which the Lord God had taken from man, made he a woman, and brought her unto the man. And Adam said, This is now bone of my bones, and flesh of my flesh: she shall be called woman, *because she was taken out of man*. Therefore shall a man leave his father and his mother and shall cleave unto his wife: and *they shall be one flesh.*”

Now I ask, in all earnestness of purpose and for Truth’s sake, is not this rib allegorical? Do not the descriptions go to show that at first *physically and mentally* man and woman were combined in one being, and *that* for the precise purpose of *after-separation*, in order firmly to establish “moderate subordination,” as Scott, the commentator, hath it, and mutual dependence.

If this be true, then when the physical attributes of woman were removed from the first being to create a help-meet for the man, so likewise were her mental attributes removed to endow the body thus formed.

Mentally and physically, then, the first being was divided, and woman in both respects was then and now is *complementary* to man, and when united in marriage they become *one* flesh, one harmonious whole.

I think that a candid individual of some observant power, even if rejecting this explanation, can not have failed to notice in our times (allowing marked exceptions, which only prove the rule) how widely different, though overlapping, are these mental and physical powers of man and woman. One can not be substituted for the other with justice to either. This principle has a broader appliance than to medicine alone, but with it we are at present particularly concerned.

I have introduced this argument to show that I have taken high ground for the exclusion of females from our ranks, yet for special *physical and social* reasons, as recently set forth by Dr. John Bell, of the Philadelphia County Medical Society, formerly Professor of the Theory and Practice of Medicine in this school, the point should be considered as definitely settled for all time. Now while thus advocating this exclusion, I believe that the successful practice of medicine is, in no small degree, due to the agency of woman.

My friend Robert Gwynn said, in a public Masonic celebration oration, a short time since:

"Deriving our origin, as now organized, from an association of workmen, men united together for purposes of combined bodily exertion, of a nature unfitted for the softer and more delicate frames of the female sex, the landmark which excluded them as unfit and unable to partake in our physical labors is still retained. But they have not the less place in our Lodges. Every Mason knows well the pure and sacred ties which bind him to defend and protect the wife and daughter, the sister and the mother of his brother—how tender and how holy a place they hold in the thoughts and affections—how watchful and considerate in their behalf we are ever taught to be! I am not saying too much when I assert, that the place which *woman* holds in our structure is of such a nature, so essential to the

preservation and perpetuation of our Order, as a bond of universal brotherhood, that were not *special provision* made for her, *the whole fabric would crumble into dust.*"

And I say to you, in unison, that Masonry, the time-honored institution, dating from before the building of King Solomon's Temple, and now flourishing beyond precedent, although absolutely excluding woman from its rites, could not exist for one moment without a full and complete recognition of her social status, or assisting and protecting her *in her efforts* to maintain the *purity of society*. So we may say of her with us. There is a sacred niche for her in *our Temple*; with us she is honorable and honored. She should be familiar with the laws of health, so that she may be enabled to *preserve* her own health and that of her children, to *ward off* disease by proper care, and thus preserve the integrity of physical and moral nature. She must really be the *help-meet* for man, as her noiseless footfall, her tender hand, her subdued tones, her pleasant words, her sympathizing glances, her anxious care, her heroic self-sacrifices have proved her to be. She needs no other patent of nobility than these. By these she has ennobled *herself*.

No man *could* take her place if he *would*. Here every physician loves and respects her, and acknowledges freely, without mental reservation or purpose of evasion, that in this sphere she is supreme. Who can forget the unfaltering devotion of a *mother*, alive to the weakest moan of distress—her night-long watchings—her frequent smoothings of the rumpled pillow—her frequent bathings of the burning brow—her oft-presented fever-drink, *or* her final, fervently expressed thank God! he is better? Who can forget the gentle *sister*, vieing with that mother in her care, while between them—all is well?

No! Woman can never be forgotten here, in her appropriate sphere, whether in the chamber of the rich, the hovel of the poor, or in the hospital.

"Lo! in that house of misery
A lady with a lamp I see
Pass through the glimmering gloom
And flit from room to room.

And slow, as in a dream of bliss,
 The speechless sufferer turns to kiss
 Her shadow as it falls
 Upon the darkening walls.

As if a door in Heaven should be
 Opened, and then closed suddenly.

A lady with a lamp shall stand
 In the great history of the land,
 A noble type of good
 Heroic womanhood."

Would you willingly permit Woman to leave her throne to wear, to her, the galling shackles which she now imagines to be diamond bracelets? I think not. Some may aid and abet this unnatural movement; *I never will.*

The Science and the Art of Medicine are clearly consigned to the keeping of man, both on physical and mental grounds; by *him* (and not by women *breveted* men) they have been and will be advanced.

The HEROISM of the Physician is *real* beyond peradventure. We could, but we need not, go further than our own country, nor further back than recent times, when unarmed men, exposed alike with their armed countrymen to shot and shell, in close proximity, performed their saving duties, fearlessly staunching blood upon ball-furrowed fields, or binding up wounds in exposed barn-hospitals, regardless of any immediate interest but that of the sufferer, were he friend or foe, upheld by their firm faith in legitimate medicine and the legitimacy of their calling, once worthily a part and parcel of the ancient priesthood. But this is not all of the heroism of the Physician; perhaps it is the smallest part of it. There are quiet, unobtrusive men in our ranks who, although they do not court the dangers of battle-fields, are certainly as heroic as those who do (though these are not less heroic than they, as they are always ready to share the common risk). Did you ever hear of a *true* Physician who shrank from Yellow Fever, Cholera, Typhus, or Plague? Never, I think.

This is the undying record of our profession, that profession

which you aspire to enter. It is one of benevolence and beneficence. In it you will be called to the rich, to the moderately circumstanced, and to the poor, as all who have gone before us have been. But those who have been greatest in success have never forgotten the *very* poor, or passed them unheedingly by ; they have felt that they had a great matter in hand, a trust, so to speak, for humanity at large, and that while those who COULD pay, SHOULD pay, there were those into whose wounds it was a privilege to pour the healing balm, without money and without price.

The actions of such men have illuminated all time, past and present. Insensibly they operate on us now, and *you*, if true partaker in the lot with *us*, will not prove recreant, but will maintain and perpetuate the honor, the tenderness, the humility, the glory of our noble calling. You will go, in season and out of season, expecting much and gaining little ; expecting little, but gaining much.

“ ‘OGG, the son of Beorl,’ says my private hagiographer, ‘was a boatman who gained a *scanty* living by ferrying passengers across the river Floss. And it came to pass one evening, when the winds were high, that there sat moaning by the brink of the river a woman with a child in her arms ; and she was clad in rags, and had a worn and withered look, and she craved to be rowed across the river. And the men thereabout questioned her, and said, “ Wherefore dost thou desire to cross the river ? Tarry till the morning, and take shelter here for the night ; so shalt thou be wise, and not foolish.” Still she went on to mourn and crave. But *Ogg*, the son of Beorl, came up and said, “ *I* will ferry thee across ; *it is enough that thy heart needs it.*” And he ferried her across. And it came to pass, when she stepped ashore, that her rags were turned into robes of flowing white, and her face became bright with exceeding beauty, and there was a glory around it, so that she shed a light on the water like the moon in its brightness. And she said, “ *Ogg, the son of Beorl, thou art blessed in that thou didst not question and wrangle with the HEART’S need, but wast*

smitten with pity, and didst straightway RELIEVE the same. And from henceforth, whoso steps into thy boat shall be in no peril from the storm ; and whenever it putteth forth to the rescue it shall save." And when the floods came, many were saved by reason of that blessing on the boat. But when Ogg, the son of Beorl, died, behold, in the parting of his soul, the boat loosed itself from its moorings, and was floated with the ebbing tide in great swiftness to the ocean, and was seen no more. Yet it was witnessed in the floods of after-time, that at the coming-on of even, Ogg, the son of Beorl, was always seen with his boat upon the wide-spreading waters, and the Blessed Virgin sat in the prow, shedding a light around as of the moon in its brightness, so that the rowers in the gathering darkness took heart and pulled anew?"

Let this, the Legend of St. Ogg, be a guide and rule for you.

II. I shall now remark concerning the opportunities which are afforded to enable you to gratify the laudable ambition to enter the profession of which I have just been speaking.

Office instruction has long and justly been considered the basis of medical education. For if the practitioner who receives a student, does his full duty, he not only directs his studies generally, but he shows him patients, requires him to examine carefully such as his progression may warrant, and then expounds the laws of medicine as applicable to the cases, questioning the student on all points which bear upon them; finally requiring him to record their history and treatment for reference.

But time has long since shown that advances in medicine have been so rapid, and the field has become so broad, that *one man* can not fully instruct his apprentice; hence SCHOOLS were established, where the students of many practitioners, assembling at stated periods, could receive information in a systematic manner, as *classified general principles*, which they might apply on returning to their office duties. These schools are provided

with several professors, each teaching a different branch or subdivision of the science, for each by devoting attention especially to his branch, and expending his means for its particular illustration, it is plain that he must become authoritative therein, and a combination of such men must be powerful indeed for the advancement of the tyro.

The subject of Medical Education has of late years attracted the attention of many minds in our profession. Practical and theoretical men have discussed the matter. Result—a muddle. It appears that the point, at present at issue, is, whether teaching should be *repetitive* or *progressive*. That is to say, whether we should go on, as it is claimed we have done heretofore, in *repeating* the same lectures every session; and demanding, for the purpose of inculcation, (incalcitrance, tramping in by the heel,) that each student should listen to precisely *the same* demonstrations and elucidations *twice* before applying for a degree, OR whether by an arrangement of studies, so that the primary branches should be thoroughly mastered in one session, and the higher branches in a second and third, the student should be brought *progressively* to the termination of his pupilage.

As in all questions, there are two sides to this. There are advantages in both methods. We know how very beneficial the *repetitive* method is, from long usage; but I unhesitatingly deny, for myself, that any course on Anatomy which I have ever delivered, is an exact counterpart of the preceding—the general facts are the same, it is true, but the illustrations are improved or increased; new thoughts are ever evolved; advances in science are marked and commented upon—mere routine holds no place. My observation of the courses of my colleagues shows me that we are alike both in principle and in practice. Therefore, if a *modified repetitive* method, as we have it now, has virtues, they are to be found here, as well as elsewhere.

I will, however, concede that the *progressive method* has inherent merits, and that a *judicious* movement in this way

is a step in the right direction; but as medical schools are organized in America, the change can *not* be made in *one step*.

I have often asked myself, in traveling through the country, why it was that in the clearing of land, the farmers cut off the trees, and left the straggling stumps in the ground, when it seemed so comparatively easy to uproot them, and thus give more space for seeding; for years I have puzzled myself with this question, and the idea of waste worried me; but I thus figured out the problem, and I am informed that my conclusion is correct—should the roots be torn up bodily, so much subsoil and gravel would be thrown upon the adjacent surface, as to destroy the usefulness of much already available, adding nothing to, but rather diminishing the value of the farm—better let the stumps gradually decay, and by their decadence add richness to the soil.

So in OUR changes we must be gradual, not violent. The body of teachers must carefully study, still further, their surroundings, and as judicious and earnest men *gradually* approach to an universally accepted repetetio-progressive system of instruction. As a present step in this direction, this Faculty have been increasing their professorships, so that in number they accord with the recommendation of the recent Convention of Medical Teachers.

The division of labor in instruction is based upon the following rational propositions: *Anatomy* is the foundation of the whole, to which *Chemistry*, inorganic and organic being added, (an important condition not generally recognized by students,) leads directly to *Physiology*, more extensively designated as the Institutes of Medicine. The student being properly grounded in these branches may advantageously study *Materia Medica* and *Therapeutics*, when he will be fully fitted to receive with profit, information in *Surgery*, *Theory* and *Practice of Medicine*, (in which Pathology is included though not expressed,) and in *Obstetrics*. Subdivisions of these important final branches have given us two teachers of specialities; namely, Ophthalmology

and Affections of the Ear, and Medical and Surgical diseases of Women, each of which extracts something from each of the three branches just named.

This schedule is presented for your consideration, and on this plan we propose at present to instruct. The method is distinctly *repetitive*, though in a manner progressive; *but* we shall ever be on the alert to make all *practicable* alterations in accordance with the spirit of the age.

These branches are taught, for the most part, in two ways:

1. *Didactically*, or Preceptively, "line upon line, precept upon precept," in the lecture-room.

2. *Practically*, when the principles taught are applied.

Practical Anatomy is pursued in the Dissector's room, where each student examines for himself the parts spoken of, familiarizing himself by repeated efforts with the various members of the wonderful machine which he proposes to keep in working order. I hope to live to see the time when the Chemical department will have its working laboratory and a Demonstrator of Physics and Chemistry will, if no other plan can be devised, divide the hours of evening study with the Demonstrator of Anatomy.

Clinical, or bedside Medicine, Surgery, and Obstetrics are grand points in instruction. In the Wards of the Hospitals the teachers who have spoken preceptively, will illustrate by presented cases the principles which they have enunciated in the lecture-room, thus benefiting not only the student, but the patient, and all communities present or distant. Such arrangements have been made for the ensuing session that the student will receive not only full didactic instruction, but Operative Surgery, Practical Obstetrics, and Practical Medicine, with several important specialities included in these branches, will be presented to the class in the most available form in Hospital and Dispensary. These are the opportunities which are afforded to enable you to enter the ranks of our profession. And this brings me to speak,

III. Of the manner in which you should deport yourselves while embracing these opportunities.

Gentlemen, I trust that not one of you came here with the idea that your visit to a great city is a mere trip after long-looked-for *amusement*. The attractions and temptations of a great city are great in proportion to the magnitude of the city; and this life may be new to some; its novelty may have charms which tend imperceptibly to lead astray. But you must not lose sight of the fact that you are now here to fit yourselves for the serious duties of life, that you are to obtain such information as will enable you to cope with diseases which, by their insidious approaches or terrific malignancy, make brave men tremble at the mere thought of them; that you must learn how to treat the results of fearful accidents, the very sight of which causes the strong to shudder; that the principles of the practice among children, the future men and women of our country, are to be committed to your care. *Therefore* fully appreciate the fact that you have a great and serious work before you; one worthy of the full energies of the most powerful minds; one which will permit no trifling.

I do not mean to imply by these remarks that there should be before you an unbroken round of *monotonous* work. This you can not find in the study of our science, for as you advance the information gained expands the mind of the ardent seeker after knowledge to such an unthought extent that labor is no longer work but pleasure, great pleasure. There are times when you can well afford to relax, and, going into the outside world for a little, will return to your studies with redoubled zest. Let this expenditure of time be judicious and held at its true value—*minor* in importance.

The period, I am glad to say, has long gone by when the distinguishing characteristic of a Medical student was held to be his irrepressible disposition to find himself at the bottom of all mischief in a new place; when the community were ready to charge every unexplained evil to his account, just as Coroner's juries were, in the absence of satisfactory evidence of the cause

of death, in the habit of sapiently charging the same in due and legal form to a Visitation of God.

It behooves you to act in such a manner that the respect now generally accorded to Medical students shall be unimpaired, so that the annual advent of yourselves and your successors in the city will be hailed with satisfaction by our community, and regret only felt and expressed when you leave it. This is the time for you to work with an energy like to the Village Blacksmith:

“Under a spreading chestnut-tree
The village smithy stands;
The smith, a mighty man is he,
With large and sinewy hands,
And the muscles of his brawny arms
Are strong as iron bands.

Toiling, rejoicing, sorrowing,
Onward through life he goes;
Each morning sees some task begin,
Each evening sees it close;
Something attempted, something done,
Has earned a night's repose.

Thanks, thanks to thee, my worthy friend,
For the lesson thou hast taught!
Thus at the flaming forge of life
Our fortunes must be wrought;
Thus on the sounding anvil shaped
Each burning deed and thought.”