AN

ADDRESS,

DELIVERED TO THE

GRADUATES IN MEDICINE,

AT THE ANNUAL COMMENCEMENT

OF THE

UNIVERSITY OF MARYLAND,

On Wednesday, March 19th, 1834.

By PROFESSOR DUNGLISON.

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CORRESPONDENCE.

At a meeting of the Medical Graduates, and Students of the University of Maryland, held on the 19th of March, 1834, the following resolution was unanimously adopted:—

Resolved, That a committee of five be appointed to wait upon Professor DUNGLISON, to request, for publication, a copy of his truly eloquent and able Address, delivered on the occasion of the annual commencement of the Medical department of the University of Maryland.

Whereupon, J. W. Poindexter, John Harrod, John F. Monmonier, Augustus Barnum and T. J. Franklin, were appointed said committee.

University of Maryland, 19th March, 1834.

DEAR SIR,

At a meeting of the Medical Graduates, and Students of the University of Maryland, held this day in the Hall of the University, it was unanimously resolved, that a committee of five be appointed to wait upon Professor DUNGLISON, to request, for publication, a copy of his truly eloquent and able Address, delivered on the occasion of the annual commencement of the Medical department of that institution.

In conformity with the foregoing resolution, we, the committee appointed, respectfully solicit in behalf of the meeting, your compliance with the above request; and we feel assured, that in acceding to our wishes, you will gratify, not only those for whose immediate benefit the Address was pronounced, but also many who had the pleasure of constituting part of the auditory.

We have the honor to be, dear sir,

Your most obedient servants,

J. W. POINDEXTER, M. D.
JOHN HARROD, M. D.
JOHN F. MONMONIER, M. D.
AUGUSTUS BARNUM, M. D.
T. J. FRANKLIN, M. D.

To *Professor Dunglison.*

East Fayette street, March 19th, 1834.

GENTLEMEN,

Flattered by the favor, which the Address I had the honor of delivering this day has met with from the Graduates, and Students of the University of Maryland, I cannot well decline complying with their request to obtain a copy for publication.

My feeling is, that such productions are better adapted for the medical theatre than for the closet, but I waive my opinions, on this occasion, out of deference to the wishes and judgment of yourselves, and the mutual friends whom you represent.

Believe me, Gentlemen,

Faithfully, your friend and servant,

ROBLEY DUNGLISON.

To *J. W. Poindexter, M. D.*
John Harrod, M. D.
John F. Monmonier, M. D.
Augustus Barnum, M. D.
T. J. Franklin, M. D.
} *Committee, &c.*

ADDRESS.

Gentlemen Graduates.

Circumstances, which none can regret more than myself, have prevented my colleague—the Dean of the Faculty—from undertaking an office, which he would have so well accomplished, and it has therefore been made my duty to present to you a few considerations, which may seem appropriate to an occasion, so full of interest to yourselves, and to those, under whose guidance you have obtained the highest honors of your profession,—honors, which, I need hardly say to you, by no means prove that you have attained all that can be acquired respecting the intricate movements of the human economy in health, and in disease, but which show to a discerning public, that your minds have been imbued with the principles of medical science, and that you are prepared to profit, at your outset, by every opportunity for observation; to trace the nature of disease from indications that may be afforded you, and to apply your remedies to such disease, guided by all the lights that illumine the profession in its present improved condition.

At the commencement of my course of lectures on the branches assigned to my particular chair, I attracted your attention to the unphilosophical ideas, that had been generally entertained on those branches, in times not very remote, by the professional and the unprofessional—the learned as well as the ignorant; and I then stated, that to compare them with the views, at present indulged, would be the occupation of the course which has recently terminated; but I could say in advance, that the degrading superstitions, which at one time enthralled the mind, had been mainly abolished; that a better system of physics and of metaphysics had elucidated the laws, which connect effects with their causes;—that an improved acquaintance with anatomy—general, special, pathological and surgical—along with the interesting truths, and speculations of physiology—sound and morbid—had dispelled several of the illusions, "the children of an idle brain," which at one time weighed on the science; that mystery had been discarded; that arcana no longer existed; and that the darkness, and complicated dogmas of the schools had yielded to a better mode of reasoning and experiment, so that what was formerly taught, and implicitly credited, as a saying of the master, is now rejected, unless it comes home to the comprehension, and conviction of the student.

The course of studies, through which you have done me the hon-

or to follow me, has, I trust, sufficiently demonstrated, that those anticipations were just, so far as regards the branches, which devolve upon me, and the exertions of my able colleagues have doubtless shown, that the same remarks equally apply to their respective departments. How cheering then is it to shift our regards from those periods of gross ignorance, and superstition, and transfer them to the present condition, and future prospects of the science you have embraced, and whose interests it is your duty, as I trust it will be your inclination, zealously to maintain.

Not many years ago, the study of Anatomy in the schools was confined to a simple acquaintance with the different organs as exhibited on dissection, and if the student could point out the various prominences, and demarcations of the bones, muscles, &c. he was looked upon as an accomplished Anatomist. The verbal memory was taxed to infinitude, whilst the higher powers of the intellect were suffered to lie dormant, and the beautiful, but mysterious investigation of the intimate nature of the different tissues, and their mode of formation, was totally disregarded. During the present century, however, the science of Anatomy has been made to embrace new grounds. *General Anatomy*, as it has been termed—for which we are principally indebted to the illustrious Bichat—includes these interesting topics of inquiry, and the Anatomist now travels unhesitatingly into regions, half a century ago unknown to the scientific world. The labors of the Germans and the French, more particularly, have been directed to great questions of a yet more interesting character, and although we may be frequently disposed to smile at some of the generalizations of the *transcendental Anatomists*, as they have been designated, the ingenuity displayed on many subjects has suggested materials for reflection to the inquiring mind, and has led to investigations, which might otherwise have wholly escaped attention.

Amongst the different vagaries of eminent physiological naturalists, few are more singular than those of the distinguished Lamarck, Professor of Zoology at the *Museum d'Histoire Naturelle* of Paris. He is of opinion, that the habits of an animal are not dependent upon its organization; but that, on the contrary, its habits, mode of life, and those of its ancestors have, in the succession of ages, determined the form of its body, the number and condition of its organs, and the functions, and faculties it enjoys.

In elucidation of the position he has ingeniously supported—that the want of employment of an organ gradually impoverishes that organ, and causes its ultimate disappearance—he first takes the case of the teeth, which, according to the plan of organization in the vertebrated animals, should exist in all; yet those animals, which circumstances have compelled to swallow substances without any previous mastication, have no development of teeth. They remain concealed in the jaws, and are scarcely apparent between the plates that constitute these bones. In the whale—at one time conceived to possess no teeth—M. Geoffroy has found them hid in the jaws of the young. The same remarks apply to the *Myrmecophaga* or

Ant-Eater, whose habit of swallowing without mastication has been, according to LAMARCK, long introduced and kept up in its race.

Eyes, again, form part of the plan of organization of the vertebrated animals; yet the mole, whose habits lead it to make little use of the sight, has small, almost imperceptible eyes, because it rarely exercises them.

The *Aspalax* of OLIVIER—an inhabitant of oriental climes—lives under ground like the mole, and exposes itself to the light of day still less perhaps than that animal. It has completely lost the use of sight, and has mere vestiges or traces of the organs; and these vestiges are entirely concealed under the skin and other parts, so as not to permit the least access of light.

Again, it entered into the great plan of organization of reptiles, as well as of the other vertebrated animals, to have four paws attached to the trunk. Serpents must consequently have had four originally; yet, having assumed the habit of creeping along the ground, and of concealing themselves in the grass, their bodies, owing to perpetual efforts at elongation, to enable them to pass into narrow spaces, acquired an unusual length, in no wise proportionate to their thickness. Paws would have been quite useless to them. Long paws would have interfered with their creeping, and very short paws would have been incapable of moving the body. Hence, the want of employment of these parts being constant, they gradually disappeared; although, says LAMARCK, they may have originally entered into the plan of organization of animals of their class.

As the want of employment of an organ leads to an obliteration, and impoverishment of the organ, so Lamarck maintains conversely, that the frequent employment of an organ augments its powers, occasions its development, and causes it to acquire dimensions, and a force of action, which it does not possess in those animals that use it less. Thus, the otter, the beaver, the water-fowl, the turtle, and the frog, were not made webfooted that they might swim; but their wants having attracted them to the water in search of prey, they stretched out their toes to strike the water, and to move rapidly along its surface; and by the repeated stretching of the toes, the skin, uniting them at the base, acquired a habit of extension, until, in the course of time, they became webfooted as we see them.

On the contrary, the bird whose mode of life accustoms it to rest upon trees, and which has proceeded from individuals that had contracted the habit, has the toes necessarily longer, and formed in a different manner, than those of aquatic animals. Its toes, by time, have become elongated, sharp, and clawed, to enable it to lay hold of the branches on which it has so frequently to rest.

In like manner, the camelopard, which inhabits the interior of Africa, in situations where the parched and barren soil affords it no nutriment, is compelled to support itself on the foliage of lofty trees, whence, in the succession of ages, it has happened, that the

forelegs have become much longer than the hind, and its neck has attained such a length, that the height of the animal, when resting on its legs, is upwards of 20 feet.*

These fantastic, and in some respects revolting, views will remind you of others not less strange, of which MONBODDO, ROUSSEAU, and others, were the promulgators; and in the labors of more recent writers—contemporaries of LAMARCK and ourselves—we meet with enough of the wild, and the romantic. Yet these, and similar speculations, are not without their value. They lead the devout and reflecting physiologist to a knowledge of the surprising uniformity, that prevails in the organization of animated nature;—the wonderful, but all-perfect simplicity, that characterizes the works of the Almighty; and, in many cases, to comprehend the existence of parts, which are apparently useless in a particular species, or individual, but which are capable of being called into activity under favorable circumstances.

In this way, the labors of the transcendental Anatomists of modern times have tended to elucidate the complicated human organism,—that "mighty maze, but not without a plan." Transcendentalism in anatomy and physiology is engaged in daily throwing more and more light on the inimitable *plan;* whilst the *maze* is gradually disappearing under the influence of careful observation, and philosophical induction; and although we may occasionally meet with suggestions like those of LAMARCK, which may appear to be Philosophy in sport, we have the advantage, frequently resulting from them, that in sober minds they become science in earnest.

But, gentlemen, general anatomy is not alone the growth of modern times. *Living Anatomy* or *Physiology*—the doctrine of the healthy function—owes most of its improvements to existing observers. It may indeed be regarded as a new science, and as the source of numerous important improvements in the healing art, of recent introduction. It is to a want of due knowledge of the healthy functions, that we must ascribe most of the errors, which have prevailed in Therapeutics, and which still prevail in the practice of those who adhere to old notions, or who have not taken the necessary steps for keeping pace with the rapidly advancing condition of medical science.

Somewhat affectedly, and with seeming arrogation, the followers of a new and distinguished school, in one of the most celebrated seats of science on the continent of Europe, have designated their doctrine "the physiological;" as if to convey the impression, that they alone have duly invoked the science of physiology, in the investigation of the diseased condition, and in the establishment of their indications of treatment. The instructed physician has, in all ages, endeavored to deduce the doctrine of disease from that of health; and the reason why the state of medicine was so irrational

* *Philosophie Zoologique*, par J. B. P. A. LAMARCK, nouv. edit. tom. 1, p. 235.

in former times, was more dependent upon the faulty condition of Physics and Metaphysics, which necessarily retarded physiology, dependent, as it largely is, upon those branches of science, than upon the disposition of the physician to disregard the doctrine of the healthy function.

Who, indeed, can honestly profess to know the signs that indicate the diseased state of an organ, if he is utterly ignorant of its healthy manifestations?

The science of Physiology must, therefore, be an important object of study with every one desirous of distinguishing himself in his profession. A stimulus is now applied to the indolent Physician which did not formerly exist. The public are aware of the importance of attending to "this proper study of mankind;" the youth in some parts of the Union are required to study Physiology in the ordinary schools, and the members of the Bar every where find the utility of having paid some attention to it, in many of those intricate cases of forensic medicine, which so often agitate our halls of justice. This extension of the study of physiology cannot fail to exert a salutary excitation on those of our profession, who are disposed to be idle and listless, for what medical man of character could brook to be excelled by the unprofessional on topics, which so eminently belong to his course of study, and without which it is impossible for him to be a learned, and truly useful physician.

But there is yet another branch of anatomy, which, thanks to the improved spirit of the times! is making rapid strides, and has heavy claims on your attention. I mean *pathological* or *morbid anatomy*. Not many years ago, a hue and cry was raised against every one who violated, as it was conceived, the sanctuary of death; and the Anatomist was exposed to the most wanton insults and outrages. But the community are becoming more enlightened; and although, in some parts of our country, legislative impediments are thrown in the way of the Anatomist, but few cases exist of a feeling so far behind the spirit of the age, and still fewer in which much objection is made to the Pathological inquirer, who may desire to investigate the morbid appearances, in any unfortunate case that may have fallen under his management. Such objections ought, indeed, never to exist. No professional gentleman of character will request permission, unless the object with him is one of importance, as regards the views he may have taken of the nature of the malady, or as an aid in the discrimination and management of similar morbid conditions. Philanthropy would suggest that in all such cases the permission should be granted. By dissection we are enabled to observe the morbid appearances in any fatal case, and to compare them with the symptoms, that were present during life; whence, by careful analogy, we can deduce inferences that may enable us to detect similar diseases when they occur, and to treat them successfully. But, independently of these benefits to suffering humanity,

the mourning relative should bear in mind, that many diseases are of a family nature, and that by careful inspection of one fatal case the family physician may have his judgment so strengthened, as to succeed in warding off a similar attack, should it threaten another of the family, when, without the instruction afforded by his pathological investigation, he might have failed, and the life of a second member of the family might thus be sacrificed to the unfortunate, but amiable prejudice.

Every where the difficulties thrown in the way of pathological investigation are yielding. The press teems with the valuable contributions of the morbid anatomist; and some few philanthropists have gone so far in their desire to remove the prepossessions of those, who are opposed to such investigations, as not only to direct their bodies to be opened, but to be dissected in the public theatre, and demonstrated for the benefit of the student. Such was the testamentary request of the late distinguished BENTHAM—a request which was faithfully executed by his friend Dr. SOUTHWOOD SMITH, of London, in the Anatomical Theatre of the School to which he was once attached, and of which he was a valued ornament.

But I need not dwell longer on the advanced condition of Anatomy in all its ramifications. No one can compare the course of instruction on this fundamental department of our science, as now given, with that laid down in the books half a century ago, without being struck with the immense improvements that have taken place, and the incalculable advantages, which the student of the present day enjoys over his less fortunate predecessor.

Not less advancement has taken place in the more purely practical branches of the profession. Instead of attending, as is too often the case with the mere routine practitioner, to the more prominent symptoms of disease, and attempting to remove these, the inquiries of the scientific physician are now directed to the pathological condition of the suffering organ; and on this all his rational indications of treatment repose. The absurdity of attending simply to prominent symptoms, without a careful inquiry into the precise seat and nature of the disease, is obvious. The feeling of debility may be a prominent symptom in the most inflammatory, as well as in the most enfeebling disorder; but how different is your treatment in the two cases! Yet, strange to say, most of the errors of the practice of medicine are owing to mistakes of this kind, the practitioner being unable—or, what is infinitely less excusable, not bestowing the due degree of attention—to detect the suffering organ.

Of the valuable auxiliaries, the gift of modern times, which we possess in the discrimination of disease, I shall remind you of one only—"Auscultation"—or listening, with or without the stethoscope, the invention of the late eminent French Pathologist, and Professor, LAENNEC. By this simple instrument, the Physician is enabled to obtain audible evidences of the state of the lungs, and the heart, not to be acquired in any other manner. Those of you, who have accompanied

me round the wards of the Infirmary, have been able to appreciate the information it is capable of conveying, especially in that intractable malady—intractable at least in its advanced stages—*pulmonary consumption*. It is now well established, that if relief is to be experienced in this dread disease by any change of climate, it must be had recourse to, before the malady has made such progress, that cavities have formed in the lungs, or before it has become, what has been called, *confirmed*. In detecting whether this unhappy advancement has taken place, Auscultation is one of your chief guides; and if it should indicate the presence of abscesses or cavities there, the physician assumes a fearful responsibility in advising a patient to incur all the evils of expatriation—the inconveniences dependent upon a removal from family and friends, under the delusive—the forlorn hope—that a warmer or more equable climate may repair the mischief—alas! irremediable.

"When consumption is fully established," says a recent English writer on Climate, who had too much opportunity, in France and Italy, of witnessing the evils connected with expatriation under such circumstances—"that is, when the character of the cough, and expectoration, the hectic fever, and emaciation, give every reason to believe the existence of tuberculous cavities in the lungs, and, still more, when the presence of these is ascertained by auscultation,—benefit is not to be expected from change of climate; and a long journey will most certainly increase the sufferings of the patient, and hurry on the fatal termination. Under such circumstances, the patient and his advisers will, therefore, act more judiciously by contenting themselves with the most favorable residence which their own country affords, or even by awaiting the result amid the comforts of home, and the watchful care of friends. And this will be the more necessary, as the degree of sympathetic fever and the disposition to inflammation of the lungs, or to hæmoptysis, is more considerable. It is natural for the relations of such a patient to cling to that which seems to afford even a ray of hope. But did they know the discomforts, the fatigue, the exposure, and irritation, necessarily attendant on a long journey in the advanced period of consumption, they would shrink from such a measure. The medical adviser, also, when he reflects upon the accidents to which such a patient is liable, will surely hesitate ere he condemns him to the additional evil of expatriation; and his motives for hesitation will be increased, when he considers how often the unfortunate patient sinks a prey to his disease long before he reaches the place of his destination, or at best arrives there in a worse condition than when he left England—doomed shortly to add another name to the long and melancholy list of his countrymen, who have sought, with pain and suffering, a distant country, only to find in it an untimely grave. When the patient is a female, the reasons against such a journey may be urged with increased force."*

*Clark on Climate, p. 342.

How important, then, to be able to discriminate, whether the lungs are yet in a state to admit of well founded expectations of benefit from change of climate, and how valuable the means of diagnosis which can aid you in substituting certainty, or a high degree of probability, for doubt, in cases where the steps of the sufferer, and of anxious relatives are to be guided by your decision, and where such decision is to be attended, on the one hand, with prostration of their hopes; and, on the other, is to subject them to all the inconveniences of a distant, and often uncomfortable pilgrimage.

But I need not remind you, that these are not the only cases, in which this valuable means of discriminating disease is available. I have selected the most striking. The instructed physiologist and pathologist employs it for dispelling doubt and uncertainty in other cases, in which his ordinary means of observation are defective.

In the present improved condition of *Surgery*, in all its branches, the philanthropist finds much to excite his warmest admiration. The major operations have been simplified by the invention of appropriate instruments, and the bold daring of the modern Surgeon has led him to perform operations, which were totally unknown, even in the middle of the last century. I allude particularly to the ligature of the larger arteries, in cases of aneurysmal disease, which, at one time, would have been permitted to run its fatal course without interference, but which is now controlled by the discoveries of modern science. It is not solely, however, in the operative part, that the advancement of Surgery is manifested. The skilful and benevolent Surgeon has more gratification in saving a single limb that has been doomed to the knife, than in his most brilliant operations. There was a time, when every case of compound fracture was considered to require amputation; and this sentiment prevailed until within a comparatively recent period. At this time, the contrary doctrine is maintained, and no case is now doomed to the knife, unless circumstances, which have, doubtless, been well explained by your Professor of Surgery, should render such a step necessary.

To know whether a severe and dangerous operation is demanded is one of the most difficult parts of the Surgeon's duty, far more so than the operation when once determined upon. Yet the public, who are, in general, but imperfect judges of professional merit, are infinitely more impressed with the success of an operation—which perhaps ought never to have been undertaken—than by the skilful and humane exertions of the Surgeon to render such operation unnecessary. I well recollect the *eclat* obtained by a Surgeon for performing the operation of the Trephine in a case of fracture of the skull, with slight depression, *unaccompanied with a single symptom of injury of the brain;* although if fatal mischief had resulted from the operation, it might have been a question, whether he would not have been amenable, in a court of justice, for the injury he had himself inflicted; as no principle is better established, than

that the Trephine should never be employed except for the removal of existing bad symptoms.

The community at large are fond of the exhibition of activity by the physician, and this feeling I have no doubt has at times led a practitioner, not possessed of extraordinary presence of mind, to have recourse to measures, of which his better judgment might not have approved.

A man falls from a height, bruised, stunned perhaps, and the general call is for a Surgeon to bleed him; yet at times, in such accidents, a shock is given to the great nervous centres—the brain and spinal marrow—the effects of which bleeding is well calculated to augment—and augment fatally—if it is employed immediately after the receipt of the injury, and before reaction has taken place. In like manner, if a person, when vehemently addressing an auditory, falls down suddenly in a state of suspended animation or asphyxia, the impression immediately is, that he has had an apoplectic seizure. A vein in the arm or neck, or the temporal artery, is immediately opened, and the state of suspended animation may, in this way, be converted into that of death. The heart has ceased to act, in such cases, and the abstraction of blood from the general circulation, is not well adapted to restore it.

When a person is attacked with apoplexy it rarely happens, that he dies instantaneously. A train of phenomena, characterized by the loss of sensation, volition, and mental and moral manifestation, succeeds for a time, and is the precursor of dissolution. Circulation, and respiration, however, in the meanwhile, continue; but where the heart dies first, the circulation ceases; respiration is no longer accomplished, and the state of Axphyxia becomes converted almost instantaneously into positive death. This view has been confirmed by the cases of instantaneous death, which I have had an opportunity of examining. In almost all, the state of the heart has indicated, that the cessation of its action was the first link in the chain of phenomena.

The satisfaction, often felt at the exhibition of energy on the part of the practitioner, is well exemplified by an anecdote, which an illustrious native of this country—now no more—who had filled the highest office in the gift of a free people, and whom I had the honor of reckoning amongst my personal friends—was in the habit of recounting.

Travelling from Virginia towards the North, he rested for the night at a tavern on the road, soon after his arrival at which, the hostess came in from the house of a neighbour, with the females of her family, all exhibiting marks of deep distress. He was informed, that they had been witnessing the parting scene of a young friend, who had died of some acute affection. "But, thank God!" observed the contented matron, "every thing was done for him that was possible, *for he was bled seven-and-twenty times.*"

"It is not"—says the inimitable Moliere, who was unsparing in his appropriate philippics against the profession, and the public of

his day—"It is not, that after all this your daughter may not die; but at all events you will have done something, and you will have the consolation, that she died according to form."*

Experience must have shown you the great necessity of an attention to the principles of *chemistry*, both as respects the comprehension of several points of Physiology, and Pathology, and also of Therapeutics.

Many of the functions of the living body, are carried on by chemical agency, and are incomprehensible without an acquaintance with that science. What student could understand the changes produced on the air by respiration, without some knowledge of chemistry; or how could he comprehend many of the other functions, that seem to be accomplished under chemico-vital influence?

In like manner, the action of Antilithics, and of Antacids; the knowledge of substances, that are compatible or incompatible in the same prescription; the action of antidotes when poisons have been taken, and indeed the whole subject of Toxicology—in order to be understood—require an acquaintance with chemistry. The facts of the science are apt, however, to flit from the mind, and will require you to preserve them by repeated attention, especially as it is adepartment of science, whichi s rapidly progressive in its character, and which assumes fresh aspects in successive years, as it is enriched by new discoveries. Within the last fifteen or twenty years, the Materia Medica has received some most valuable additions, from the labors of the French Chemists and Pharmaciens more especially. The active principles of many energetic articles have been separated, so as to allow them to be exhibited without the inconveniences, occasioned by the mixed matters with which they are associated in the vegetable. Hence, the quinine, as you know, often takes the place of the Bark: the morphine of opium: the piperine of the peppers;—the salicine of the willow bark: and the strychnine of the nux vomica. The Iodine, too, has of late assumed a rank amongst our useful therapeutical agents; and the deadly Hydrocyanic acid has, under a wise form of administration, been adopted in medicine.

Under these various changes, how thunderstruck would one of the worthies, even of the last century—to whose opinions so much reverential deference was paid in his day—feel if he were permitted to revisit this earth; and how inadequate would he be to resume his place in the profession, until he had undergone a previous education. Yet there are those in our ranks, who, professing to despise medical learning, for which they have neither taste nor ability, and to be guided altogether by the lessons of experience, which experience may be either true or false, are virtually in the condition of the worthy whose case I have supposed, except that from

*"Ce n'est pas qu'avec tout cela votre fille ne puisse mourir; mais au moins vous aurez fait quelque chose, et vous aurez la consolation qu'elle sera morte les formes."—*L'Amour medecin*, Act. I. Scen. v.

him every thing might be hoped for the future; from the other, nothing. He is beyond all hope.

In medicine, we have individual experience, as well as that which is derived from others, and is recorded in the books which have been handed down to us, and which are incessantly appearing; and that man is sufficiently vain, and arrogant, who presumes to set up the small capital of his individual experience against the accumulated wisdom of ages. How few, indeed, are there, who are capable of adequately profiting by self-experience alone in a science so intricate—so deeply intricate—as medicine, demanding habits of physico-moral investigation, of rigid induction, and of searching scrutiny.

If your man of experience possess not these habits—these qualifications—he commences by treasuring up *false facts;* and after a long life he has hoarded up a tissue of blunders, many of them, alas! not altogether harmless perhaps in their application. He has not read: he has not attended to the collected experience of his predecessors and contemporaries: he has not therefore detected the error of his ways, and although his "ignorance" may be "bliss" to him, it may have been most unfortunate to others.

How different is the "bliss" of him, who, by sedulous study, has enriched his mind with the principles of science; and has compared, at the bedside, the observations of others, with the results of his own experience and reflection; buoyant under the feeling, that whatever may be the fate of the recipient of his careful, and skilful attentions he has left no mode of investigation unappropriated, and no agent unapplied, that was calculated to relieve the morbid condition; and gratified—immeasurably gratified—should the issue be fortunate, especially if he can feel that this has resulted from the fulfilment of indications, which his rational deductions have enabled him to lay down. Well acquainted with the healthy or physiological condition of the organs, and functions, he can appreciate, so far as it can be appreciated, the action of morbific or disturbing causes: he knows the properties of his remedial agents; he applies them judiciously; and science and humanity reap the advantages of his discriminating, and zealous conduct.

But the branches, to whose improved condition I have referred, and the other interesting departments, which are properly regarded, in this and other universities, as necessary elements of a college course of professional study, can receive important aids from collateral subjects which are not generally, regarded as requisites for obtaining the *summi honores;* and which, therefore, are not always taught even in those institutions, which, without them, are not fairly perhaps entitled to the name of *universities,*—where, it ought to be pre sumed, the whole circle of the Sciences and Arts can be studied. I allude more particularly to the *Natural Sciences;* and especially to those departments more immediately applicable to medicine. Of these, Zoology, and Phytology are the most conspicuous. All our

galenicals, as they were at one time termed, are derived from the vegetable and animal kingdoms; and therefore an acquaintance with the Natural History of the beings that furnish them, as well as of the articles furnished, must be a valuable accomplishment to the Physician. A knowledge, too, of the comparative Anatomy and Physiology of plants and animals, signally elucidates many obscure points of human Physiology; and you can imagine the importance of an acquaintance with the botanical characters of the different vegetables, should destiny cast you away upon some unknown shore, where your sole sustenance may have to be derived from the vegetable kingdom, and where hundreds perhaps are to be guided to a knowledge of the innoxious and the noxious by your decision. It may happen, also, that some of you may be so situated as to be unable to procure those indigenous productions, which are usually selected so carefully by the professed herbalist, as to render it less necessary that they should be culled by yourselves. In such case, your Botanical knowledge would be called into play; but, independently of these direct advantages, like every other branch of science, its tendency is to expand the mind, and to react upon trains of thought, with which it does not, at first, appear to be intimately associated.

Botany is not, in the University of Maryland, nor is it, I believe, in any of our Universities, made a distinct branch of medical study. The period of the year, at which medical instruction is chiefly conveyed, is unfavorable to its exercises; but the seasons of spring, summer, and autumn, are well adapted, especially the first, when all Nature smiles; and—

> "From the moist meadow to the wither'd hill,
> Led by the breeze, the vivid verdure runs,
> And swells, and deepens; and the juicy groves
> Put forth their buds, unfolding by degrees,
> Till the whole leafy forest stands display'd,
> In full luxuriance, to the sighing gales."

At this period of the year, a valuable opportunity could be afforded to such of you as are able—I will not say willing, for all probably are willing—to prosecute botanical researches, were some gifted and enthusiastic individual, whose studies have extended in this direction, to assume this new ground, and unite himself with those of us, whose desire it is to afford instruction to the medical inquirer through the ensuing summer. Success, I think, could hardly fail to attend his exertions.

You are now, gentlemen, about to take your place in society in the practice of a profession, unusually arduous and responsible; requiring untiring zeal and industry—the exercise, indeed, of every faculty that exalts the mind, and of every feeling that adorns the heart;—a profession, to the members of which one of the greatest ornaments of the law—Sir W. Blackstone—has assigned pre-eminence for "general and extensive knowledge" and of whom the

late learned Philologist, PARR, remarked:—"While I allow, that peculiar and important advantages arise from the appropriate studies of the three liberal professions, I must confess, that in erudition and science, and in habits of deep and comprehensive thinking, the pre-eminence, in some degree, must be assigned to physicians;"—a profession, the practice of which one of the first of the Romans (CICERO) conceived to elevate man nearer to the gods than any other avocation.

It is this honorable, this dignified calling, which you will be expected to support, not simply as a means of acquiring an honorable subsistence, but as a science, connected with, and consecrated to, the best interests of humanity. Under the eminent improvements of modern times, mystery—the cloak of ignorance—has been discarded never to return, and all is now demonstrative, where shadows, clouds and darkness rested upon it. The materia medica has become cleansed from its impurities, and, in the practice of the enlightened, is as characterized for its simplicity and energy, as it was formerly for its complexity and inertness. Endeavor,—as I have zealously attempted to inculcate,—to separate the known from the unknown—the fact from the assumption. Seek out the suffering organ: investigate the variety of morbid action under which it is laboring. Be guided, in deducing your indications of cure, by great general principles. Avoid being wedded to any exclusive sect or system, an attachment to which has strikingly retarded the progress of true science. Watch with philosophy and diligence the march of nature. Discard all blind empiricism; and, by this course, you will find, that each subsequent day will add to your stock of useful knowledge, and that many points, at present veiled in obscurity, will stand forward in bold relief; whilst on others you may still hesitate, owing to the very nature of the subject—the intricate, the mysterious mechanism of life.

The practice of the profession will afford you wide scope for the exercise of humanity, which, by a distinguished writer on medical Ethics, (Dr. JOHN GREGORY,) has been regarded as the chief of the moral qualities peculiarly required in the character of the Physician. The possession of this feeling will cause you to attend to a multitude of trifling circumstances that may relieve your patient, an attention not to be purchased by the wealth of India. A kind and sympathizing manner attracts the confidence of a patient, which, in many cases, is of the utmost consequence to his recovery. Observe the difference produced, in the feelings of a delicate female, by the approach of a physician, possessed of gentleness, and a compassionate heart, compared with one who is unfeeling and rough in his manners. In the one case, they are such as would be felt from the appearance, and ministrations of a guardian angel. In the other, the heart sinks within her, as at the presence of one who comes to pronounce her doom.

Sympathy for suffering, and that benevolence to the distressed, which droppeth

> "As the gentle rain from heaven
> Upon the place beneath,"

have ever been the proud attributes of your Profession, and have elicited from one, who was not disposed to give undue credit to the practisers of the healing art, (VOLTAIRE,) the remark, that "the man who is occupied in restoring health to his fellows from pure benevolence, is far above all the grandees of the earth: he belongs to the Divinity."

Let not the taunts of those physicians, who are deaf to the calls of compassion, induce you to abandon feelings so creditable to you, because they may be represented either as hypocrisy or as the indications of a feeble mind.

It has been properly remarked, that the insinuation, that a compassionate and feeling heart is commonly accompanied with a weak understanding, and a feeble mind, is malignant and false. Experience demonstrates, that a gentle and humane temper, far from being inconsistent with vigor of mind, is its usual attendant; and that rough, and blustering manners generally accompany a weak understanding, and a mean soul, and are indeed frequently affected by men, void of magnanimity and personal courage, in order to conceal their personal defects.

After what has been said, it is unnecessary to dwell on the importance of attending to your address; of adopting a kind and soothing manner, and of impressing the patient with the conviction, that you are alive to his welfare; or to urge the advantage of your possessing gentleness, and flexibility to bear patiently, and with apparent cheerfulness, the contradictions, and disappointments to which the best of you will occasionally be exposed; and of gratifying the whims, and caprices of your patients, so far as you can do so with propriety; but never let it be supposed, that you have not firmness to resist a proposition, which is, in your opinion, contrary to their interests, however grateful it may be to their inclinations. When once the authority of the physician over his patient is lost, indifference is apt to be engendered; confidence is gone, and contempt, and estrangement follow.

Need I, gentlemen,—after the numerous exhortations you have heard, and read,—depict the advantages of temperance, and sobriety; —virtues, which, although expected and demanded of all, are peculiarly required in the medical practitioner. It is not my province to point out the numerous—the awful evils—temporal and eternal—that follow in the train of intemperance. This would proceed more appropriately from other, and more hallowed lips; nor need I remind you of

> "All the kinds
> Of maladies, that lead to death's grim cave,
> Wrought by intemperance."

Recollect that you are often the arbiters of life or death; that the hopes of an afflicted family are reposed on your exertions; that a heavier weight of responsibility is cast upon you, before God, than could perhaps exist in any other situation; and think, oh think! with "memory confused, and interrupted thought," how utterly unfit you would become to exercise a profession, which requires, above all others, an exertion of judgment, clearness of thought, and absence of all perplexity and unsteadiness,—which demands, in short, a lively and vigorous use of all the powers of the intellect.

Nor shall I expatiate on the necessity of your possessing presence of mind to adapt you for every sudden and trying emergency, of which you will be destined to meet with many, in your surgical career especially; nor on your obligations to secrecy, to discretion, and to honor. It is sufficient to name these qualifications, to impress you with their value. So long ago as the first promulgation of the oath, ascribed to the Father of Physic, but which does not appear to date farther back than the School of Alexandria, these requisites were urged upon the graduate, and an oath, binding him to the discharge of these and other points of professional duty, was always administered to him on occasions like those, which we are engaged in celebrating. The oath, even now required in the University of Edinburgh, calls upon the graduate "to practise physic *circumspectly*, *correctly* and *honorably*, (caute, caste, probeque;) and faithfully to have recourse to every thing conducive to the health of the bodies of the sick; and lastly, never, without great cause, (sine gravi causa,) to divulge any thing that ought to be concealed, which may be heard or seen during professional attendance." "To this oath," it adds, "let the Deity be witness."

There is one other topic, to which I would advert in this brief, and imperfect outline of professional Ethics.

So far, I have referred to your duty, to those who may be placed under your healing care; but there is a duty which you owe to your professional brethren equally with your fellow-men in general. It is the foundation of all professional etiquette; and although the anxious relatives of the sick are often incapable of comprehending the object of this etiquette; it reposes simply on the heaven-descended injunction—the great basis of all ethics—"whatsoever ye would that men should do unto you, do ye even so to them."

This clear and comprehensive principle of human action commands us to exercise justice and benevolence towards our fellow-men; a principle, which, if observed by all, could not fail to add largely to the amount of human happiness and prosperity. Yet, strange to say, a violation of this great rule of conduct is so common amongst the members of a profession, which, I have endeavored to shew, is, in its essence, most dignified, most exalted, most liberal, and, as a recent writer has expressed it, "the most noble and disinterested of human avocations,"* that the disagreement of

* Ryan's *Medical Jurisprudence*, p. 57.

physicians has become proverbial; the profession has been discredited, and ridicule and contempt have been cast upon it, owing to the delinquency of those, who, from defective manners, feelings, or education, ought never to have been admitted within its pales. Too often, also, this ungenerous conduct is suggested by base ambition, or by the love of lucre in a mind devoid of the kindlier sympathies, careless of the honor and advancement of the science, and not regarding it in the more ennobling aspect, as a means for relieving suffering humanity.

It is unhappily too easy for an ungenerous individual, if possessed of tact, to create an unfavourable impression in the minds of a distressed family, against his more distinguished brother. The public cannot well discriminate between the man of science and philanthropy, and the unprincipled pretender. Pretension is accordingly too often received as an evidence of capacity; and this facility of belief is the cause why empiricism, in and out of the profession, meets with so much success.

Yet, gentlemen, the unprofessional empiric is a character, in my estimation, far more exalted than the physician, who, from malevolence or envy, or any sordid motive, will openly, or by insinuation, undermine a reputation,

> **"Whose cordial drops once spilt by some rash hand,**
> **Not all the owner's care, nor the repenting toil**
> **Of the rude spiller ever can collect**
> **To its first purity and native sweetness;"**

and who attempts to elevate his dishonest self on the ruins of his fellow-man—his professional brother. He may flourish for a time. He may vegetate in fungous luxuriance; but his feeble vitality will not withstand the chilling blasts of scorn: the leaf, whilst yet green, will be seared; and he will sooner or later sink into that insignificance from which he ought never to have emerged.

Follow, then, my young Friends!—for as such you will permit me to regard you—follow the dignified calling you have chosen, "circumspectly, correctly, and honorably." Feel the responsible character with which you are invested. Feel that the true dignity of medicine is to be maintained by the superior learning and abilities of those who profess it. Let your manners and address be liberal and polished, compassionate and gentle. Be open and candid, disdaining all artifice. Then may you set at nought the ridicule, and abuse, to which the science has been exposed, from those who are unacquainted with its character, and resources. Prosperity and happiness will attend you. The infant on the maternal lap will be taught to lisp your name with gratitude. The widow, and the fatherless will, even in their bereavement, bless your skilful and benevolent exertions, though unsuccessful. The affectionate parents, who have watched over your youth, and witnessed, with solicitude, your ripening manhood, will glory in you. Your Alma Mater

—this prosperous Alma Mater—which has shed upon you her highest honors, will cherish you, as the fond mother cherishes her offspring; and your country will be proud to rank you amongst the most useful, and the most meritorious of her citizens.

GRADUATES

OF 1834,

With their places of residence, and the subjects of their respective Theses.

Maryland.

1	Thomas J. McGill,	on Marsh Miasmata.
2	Augustus Barnum,	on Pleuritis.
3	James C. Palmer,	de Vita.
4	John C. Richards,	on Consumption.
5	John Harrod,	on Lateral Curvature of the Spine.
6	Albert G. Welch,	on Antimony.
7	Ellis Hughes,	de Hydrothorace.*
8	William T. Boyd,	on Hæmoptysis.
9	Samuel F. Newcomer,	on Dyspepsia.
10	Thomas E. Bond,	on Malaria.
11	John Oswald,	on Delirium Tremens.
12	William Ghiselin,	on Epilepsy.
13	William B. Rowland,	on Apoplexy.
14	Thomas B. Harris,	on Cynanche Trachealis.
15	John Turner,	on Hepatitis.
16	John F. Monmonier,	de Abortu.
17	John T. Boteler,	on Bilious Fever.
18	Thomas J. Franklin,	on Lithotomy.
19	Carlton S. Sams,	de Concoctione.
20	Joseph Flint,	on Yellow Fever.
21	Francis Butler,	on Rheumatism.
22	Alex. H. Tyson,	on the importance of Legislative enactments for the suppression of empiricism.
23	James A. Muse,	on Cellular Tissue.
24	Michael J. Stone,	on Emetism or Vomiting.
25	Wm H. Stokes,	on Gastro-duodenitis.
26	George J. Robertson,	on Cholera Infantum.
27	C. G. Brown,	on Purgatives.
28	Charles H. Ohr,	on Inflammation of the mucous membranes.
29	Hiram King,	on Medical Theories.
30	John F. Leigh,	on Therapeutics.
31	Nicholas J. Hutchins,	on Menorrhagia.
32	Wm. R. Sanderson,	on Syphilis.
33	Thos. Edmonson, Jr.	on Electro-Magnetism.
34	James Power,	on Eupatorium Perfoliatum.

*The medal for the best Latin Thesis was awarded to this gentleman.

Pennsylvania.

35 Wm. C. McPherson, on Cholera Infantum.
36 Wm. L. Watson, on Osteology.
37 Saml. E. Boggs, on Puerperal Fever.

Virginia.

38 William R. Rose, on the Influence of the mind on the body.
39 James W. Poindexter, on Inflammation.
40 Charles L. Ashton, on Epilepsy.
41 James L. Cabell. on Chronic Nervous Diseases.
42 Joseph G. Hays, on Scarlet Fever.

North Carolina.

43 A. M. Osborn, on Milk-Sickness.

South Carolina.

44 William G. Mills, on Apoplexy.
45 John H. Brown, on Apoplexy.
46 William Stanton, on Dyspepsia.
47 Lingard A. Frampton, on Hydrocyanic Acid.
48 Samuel J. Carr, on Lepra Tuberculosa.

Georgia.

49 Henry A. Grant, on Gastritis.

Kentucky.

50 Basil Duke, on Pneumonia Biliosa.

Ohio.

51 Theodatus Garlick, on Chronic Enteritis.

Mississippi.

52 Josiah N. Wilson, on Spasmodic Cholera.

The Honorary degree of Doctor of Medicine was at the same time conferred upon the following gentlemen, who had been previously proposed by the Medical Faculty.

Dr. Joseph Gazzam,	Pittsburgh, Pennsylvania.
Dr. M. A. De Leon,	Columbia, S. Carolina.
Dr. Wm. Rogers,	New Orleans.
Dr. Otho Wilson,	Montgomery county, Md.
Dr. George W. Williams,	Louisville, Kentucky.
Dr. George W. Boerstler,	Frederick county, Md.
Dr. James Roberts,	Pennsylvania.

The medical class, in attendance during the recent session, numbered one hundred and forty-five, exclusive of several graduates of other schools, and medical officers of the Army and Navy.