

Prof. J. B. Flint
Flint (J. B.)
ADDRESS

DELIVERED TO THE STUDENTS OF THE

LOUISVILLE MEDICAL INSTITUTE,

IN PRESENCE OF THE CITIZENS OF THE PLACE,

AT THE COMMENCEMENT OF THE

SECOND SESSION OF THE INSTITUTE,

NOVEMBER 13TH, 1838.

(Box 3.)

BY JOSHUA B. FLINT, M.D.
PROFESSOR OF SURGERY.

By Joshua B. Flint

SUPREMACY
LIBRARY
428301
LOUISVILLE, KY.

PRENTICE AND WEISSENGER.

Printed and
1838. 1838-
Weisinger
Comptroller C. L.

Handwritten text at the top left corner, partially cut off.



It has been objected to occasions like the present—otherwise eminently auspicious to medicine, and flattering to its professors—that they encourage a departure from the legitimate topics of medical discourse, and the strict propriety of philosophical disquisition. The Professor becomes discursive, and is tempted to introduce to his audience almost every subject except that on which he is expected to lecture. The inspirations of the Muse of medicine seem too trite, severe or technical to interest a miscellaneous company, and all her sister Nymphs, are, in turn, invoked for themes more attractive, in a popular sense, or more illustrative of the parts and pretensions, the conceits, prejudices or partialities of the recreant Asclepiade. But surely, to those who are related to medicine, either as *teachers* or *learners*, a plain, didactic performance, occupied only with pertinent facts and exhortations, should be much more satisfactory than any such medley; nor is it becoming to doubt that a similar preference exists among an *unprofessional* audience gathered, as this is, from a community distinguished by a wise, and munificent patronage of scientific medicine.

In complying, therefore, with the request of my colleagues and other friends, that I would introduce my course of instruction by a public address, I have no hesitation in offering some plain, miscellaneous remarks on *the objects of the medical profession, the personal qualities and accomplishments calculated to secure eminence therein*, and on some of the *sources and aids of medical improvement*, during the period of pupilage and afterwards.

I. The ingenious motto on the seal of the Institute refers to a twofold object of the medical profession, the preservation of health, and the cure of diseases—"sanos sospitare, ægrosque sanare."

The first indication is but little known among us as a distinct object of study or pursuit, and has received but a passing notice in most of the text books of the profession. But, whether we consider the importance and varietety of its applications, or the actual benefits it has con-

* The following pages were thrown together amidst the interruptions, tedium, and dizziness of an ocean voyage, and would require much, both of addition and curtailment, to deserve publication; but the Institute has claims on my time at present which forbid me to occupy any of it in finishing up an Introductory Lecture.

It is submitted to the press only for the purpose of procuring copies for my class, and some other friends, whose partiality to the author has prompted them to request it.

J. B. F.

ferred on civilized society, there are few interests having a stronger claim upon the fostering regards of government and citizens than public and private Hygiene.

The name, although etymologically significant, is probably borrowed from a beautiful personification of the subject, which figures in Grecian mythology as the *Goddess of Health*.

Hygiea was the daughter of *Æsculapius*, and succeeded, to a large share of the veneration which, in all parts of the pagan world was paid to that—probably fabulous—God and Father of Physic.

She is represented as a beautiful female of perfect symmetry and developement, in chaste attire, and modest mien, crowned with a wreath of medicinal herbs and flowers. Her right arm is raised, and entwined with a serpent—the emblem of her father's house, and of the universality of his art—which is gracefully extending its head towards a cup supported in her left.

Under this attractive form, the art of preserving health was cultivated at Greece as a religious duty—its exercises furnishing a counteracting influence to that luxury and effeminacy which were the besetting sins, of her citizens, and contributing to maintain that rare combination of grace and vigour, which was the physical characteristic of that beautiful people.

Similar considerations relating to physical developement and power, brought Hygiene into favor in Rome at an early period, when its associate department of medicine was rather contemned than respected by that rude and disease-defying people.

Even at the time of the expulsion of the rational practitioners of the healing art from the city, we may discover the rudiments of that system of public hygiene, which continued to be a conspicuous element in the arrangements of Roman society, during all the political revolutions of the nation. Accordingly we find *Hygiea* among the earliest of the Grecian deities, domesticated at Rome, and a mythological fable of those times, represents her influence to have been so great as to provoke the jealousy of Pluto, and excite apprehensions of the depopulation of his ghostly domain.

Although the moderns have deserted her temples and disowned her divinity, the service of *Hygiea* remains among the humane institutions of Christian civilization—its processes improved by the genius and science of those who have successively employed them, and its sphere of action extended to meet the exigencies of progressive society.

Instead of being merely or chiefly a system of exercises and restraints for the physical developement of individuals, it has risen to

the dignity of a sub-science, and ministers to the welfare of society in many of its most important interests and relations. It investigates the sources of disease in cities, and particular regions of country—traces the natural history of epidemics—scrutinizes the facts relating to contagion—justifies, when they can be justified, quarantine regulations—detects vicious adulterations of food and drink, and exposes the mischievous compositions of quackery.

The location of settlements and colonies is no longer left to the reckless spirit of speculation, the planning of cities to the conceits or mathematics of engineers, nor the erection of public edifices, nor even the arrangements of private dwellings to the taste or economy of an architect. It is now understood that the wise accomplishment of all such undertakings involves the principles of physiology, and wherever intelligence has taken the place of routine, the counsels of Hygiene are sought, and her salutary instructions observed in the premises.

To no nation are we so much indebted, for what is positive and systematic in Hygiene, as to France. For a long time it has there been a function of the executive government of the realm, and has employed, in its administration the ablest chemists and physiologists who have flourished in that nation of savants.

The English, old and wise as they are, have not contributed their portion towards the edification of the world on this important topic. You may look in vain through their magazines and book-shops for a single indigenous treatise on Hygiene, if we except that of Dr. Beddoes, which is too popular and fanciful for a text-book or authority. It is true, that among the treasures of her periodical literature, may be found papers on particular sections of hygienic philosophy, which are sufficiently elaborate and critical; but, like ourselves, she is destitute of any department for the official administration of its affairs, and has neither institutions, elementary books, nor journals, devoted to its methodical cultivation.

In the same incidental manner, American physicians have made valuable contributions to the same cause, both of fact and induction, while engaged in researches involving particulars within the province of Hygiene. It is but justice to our countrymen, in this connection, to advert to the leading and efficient part they have borne in those inquiries and controversies which have resulted in the establishment of more just, liberal, and humane views of contagion—and, but for the restraint imposed by his honored presence, it would be grateful, in obedience to a more special dictate of justice, to designate one of the earliest and ablest champions of this beneficent revolution of opinions,

who still lives to inculcate, with singular felicity, as a teacher, the rational doctrines on this subject, which have often received the advocacy of his industrious pen.

But none will be more ready than he, and those who, like him, have been brought into contact with topics of hygiene, in the course of studies undertaken with other aims, to acknowledge our deficiency in this important department of medical science, and to join me in wishes and efforts to secure for it a more general and systematic cultivation.

The preservation of the public health is taken to be a function of state and municipal government, in all parts of the country—but, wanting the 'lights of science,' how imperfectly, capriciously, and sometimes oppressively, is it not exercised.

It belongs to the Medical Schools to supply the data for a more consistent and rational administration. Either a special professorship should be created in these institutions for instruction in the principles of Hygiene, or some one of the established chairs should be charged with the duty, so as to secure for it a good share of the services of the incumbent. The schools would then become depots of information on the subject, to which the civil functionary might resort for facts and principles, to guide him in the various emergencies which call for his interposition as guardian of the public health.

In no portion of our country is this additional function of our schools so pressing a desideratum as in the West. Miasmatic disease, endemic and epidemic, is the scourge of the valley of the Mississippi; and although acute and well prepared minds have devoted themselves to its investigation, scarcely a single prophylactic principle has yet been established. In one form, it is now reckoned among the unavoidable risques attending the first processes of cultivation in the most fertile agricultural tracts, and populous cities wait its annual visitation, in a more malignant form, as a determination of fate—an inevitable condition of their tempting but doomed locality.

Is this consistent with the enterprising and humane, and hopeful spirit of modern science? In view of the surprising meliorations of the lot of humanity we daily witness, due to the application of true science to its various exigencies, may we not venture to hope that we may yet conjure up some antagonizing influence—some means of averting or avoiding or neutralizing this subtle foe to health and life? Shall the adventurous pioneer of civilization continue to open for himself a premature grave, in the teeming soil just exposed to the fertilizing influence of the sun? Shall the resorts of commerce be periodically depopulated by pestilence which defies alike the conser-

vative and curative efforts of our art? Certainly, the medical topography of the West, and especially her miasmatic peculiarities, open an inviting field to professional enterprise and ambition, and if her medical schools will send into it laborers prepared to investigate the causes and conditions of her diseases, as well to administer their remedies, she may expect to realize, in additional security for life and health, an ample compensation for the expense and effort and controversy incurred in their establishment.

As for the Institute she is pledged to fidelity in this particular, by the very terms of her motto, and will ever be reminded of her duty by the presence of a statue of Hygica, to be enshrined in her halls. May the Goddess, propitiated by the devotion of those appointed to minister here, inspire them for high and effective efforts in her service, and ever dispense the choicest of her blessings, both public and private, to the community which has raised, in this distant region, so worthy a temple to her father and herself.

The second grand division of medical duty has generally occupied the foremost place, and, to the common mind, constitutes the most characteristic feature of the profession. Relief from instant suffering and peril is more likely to be appreciated than deliverance from remote, prospective calamities, and the cure of diseases will naturally take precedence, in the estimation of mankind, of those less conspicuous benefits, conferred on them by the conservative agencies of our art. Hence, the medical profession early received the appellation of **THE HEALING ART**—the most honorable, as well as ancient designation, which has been applied to the medical office. Abstractly regarded, merely as one of the sciences, medicine seems the most imperfect and uninviting of all the circle—its fundamental facts and principles attainable only through processes revolting to the unpractised sense, and the practical application of them binding her votaries to an irksome routine of petty duties, trials and sacrifices. It is only when viewed in the light of her beneficent purposes and conclusions, as the ready friend of frail and suffering humanity—bearing to the chamber of sickness her healing preparations to cool the parched tongue, alleviate tormenting pain, close the sleepless eye, and shed the balmy influence of repose on the exhausted victim of restlessness and vigil—restoring, to the blessed purposes of their organization, the blinded eye, the deaf ear, or distracted brain—arresting the gushing current of vitality, as it pours from a divided vessel, and waging a perpetual and ever more successful warfare with the last enemy, ‘though fear of whom half our race are all their lifetime subject to bondage’—it is only, I say, in the benign light of these labours of love, that our profession

assumes its true dignity and excellence, and appears eminently worthy of the entire devotion of its members. Transcending, by these offices of humanity, the pretensions of common science, and passing by the cold acknowledgments of the understanding, she makes her appeal, at once, to the heart, and there vindicates her claims to the distinguished consideration which a grateful world, in all generations, has accorded her.

II. It is useful for those who aspire to superiority in any vocation, to examine the conditions of excellence therein, and to contemplate, with a determination to possess them, the attributes and qualities most likely to ensure its attainment.

In medicine, as in all other pursuits, there are certain original endowments, which constitute the basis, and are essential prerequisites to eminence. Among these, first in the natural order of topics, and not the least in importance, we may reckon a sound physical constitution. To say nothing, at present, of the toil and exposure encountered in full practice, there are certain portions of the elementary exercises of medical pupilage, which make severe demands on corporeal vigour, especially when prosecuted with the assiduity which their novelty and interesting revelations not unfrequently inspire. I refer particularly to the labours of the dissecting room. The pernicious influence of intense anatomical study on delicate corporeal fabrics, is sadly exemplified in the premature death of Bichat, Godman, and Wells—three illustrious victims of our own times. While their self-immolation should admonish those who emulate their fame, to beware of their intemperance in the pursuit, it suggests, as one of the prerequisites to medical eminence, a good bodily organization, without morbid taints or predisposition, and capable of effort and endurance above the ordinary liabilities of professional life.

In some of the higher exercises of our art, especially in the surgical department, a firm and docile muscular fibre is essential to a satisfactory performance. There are some persons so unhappily constituted, that their organs of manipulation are ever the sport of mental emotions and sympathetic impressions. Generally speaking, the muscular system is so amenable to practice and habit, that this infirmity disappears under familiarity with the occasions in which it is exposed. But not always so. An irresolute touch, a trembling hand, and—the agitation extending to the organs of circulation—a blanched countenance and paralyzing syncope, which defeat or embarrass the smallest operation, are sometimes irremediable disqualifications.

Baron Haller, in whose favor were united all the knowledge which should inspire confidence, to early familiarity with the affecting scenes

of surgical experience, strove in vain to overcome this extreme mobility of fibre, and was obliged to relinquish all participation in operative medicine. The phenomenon is purely physical, depending altogether on the degree of muscular docility, and is essentially irrespective of any moral attributes or susceptibilities. It is false alike to fact and to character to attribute the composure of the surgeon, in the minds of the suffering he is obliged to inflict, to any original insensibility, or acquired stoicism, and libellous is that ancient enumeration of surgical qualifications, which concludes with the fearful term *immisericors*. The heart is not hardened, nor the natural sympathies extinguished, by the exercise of a humane art, although the hands may be bathed in blood, and the senses assailed in vain, by the extremest forms of human agony.

A glance at the biography of those who have been most exposed to these alledged heart-hardening influences, in a constant round of operative surgery, will do more to correct the vulgar error in question, than all disquisition, by discovering examples of compassion, tenderness and sympathy, worthy of the most amiable of mankind. A noble and affecting instance occurs to me in one who was the most constant and resolute operator of his day—an instance so disinterested and intrepid in the performance, and so extensive in its benefactions, as to be worthy of a saint, while it becomes the surgeon. The bloody tragedy of Saint Bartholomew's day was in full progress. 'The hour is come,' said the king, 'when all alive in France shall be of one religion.' The blood of innocents was crying from the streets of Paris, not only to retributive Heaven, but to its fellow-man, for sympathy and timely interposition. Who then, among the refined and sentimental courtiers, was the tender-hearted intercessor? Who then, whether priest, noble or philosopher, was moved with a compassion strong enough to bear him, or an errand of remonstrance, into the presence of his angry sovereign? Not one of these. It was Ambrose Paré alone, an army surgeon, who had passed his life amidst wounds, and agony and death, that went boldly in, with an unredeemed royal promise, earned by the beneficent exercise of his art, and claimed for its fulfilment, a revocation of the murderous edict.

'Mens sana, in corpore sano'—the universal desideratum, is not less essential to eminence in medicine than it is in every other elevated pursuit.

In early times, the precepts of the healing art, were gathered with the dogmas of religion, from an inspection of the auspices, or wrung from reluctant Genii by diabolical arts, or communicated, in more gracious responses, from the benignant oracles. Ancient medicine,

like modern empiricism, was founded in revelation or instinct—and being a *gift*, rather than an *attainment*, might dispense with all intellectual manifestations but faith and pretension. But rational medicine, like other sciences, consisting of facts and inductions, demands a vigorous exercise of the intellect, to comprehend, and employ it intelligently, even in its present imperfect state, and still more to prove, correct, and extend its practical conclusions, in that process of improvement, to which every ingenuous disciple will aspire to contribute.

A sound and discriminating mind—a prompt and decisive judgment, is nowhere more serviceable than in those obscure, perplexing questions of diagnosis and indication, which present themselves, often in the most abrupt and unexpected manner, in the course of medical and surgical practice. In view of such requisitions, while we close the avenues to our venerable profession, against imbecility and dullness, let those of us who already participate in her titles and responsibilities, vindicate her claims to intellectual capacity and effort, by an habitual respect for science in our cotemporaries, and a zealous pursuit of it ourselves.

But it was the moral department of the medical character, which especially invited me into the present topic of my discourse, presenting as it does, when pervaded and affected only by worthy impulses, the most noble and winning forms of moral beauty; but too generally, even where the profession is in its best estate, resigned to the influence of low and sordid propensities, furnishing disgusting blemishes and delinquencies, that deserve the severest animadversion.

Not that physicians in their social and secular relations are peculiarly reprehensible. On the contrary, I am happy to believe, that in these respects, as a body, they are quite exemplary. But, in their professional relations, considering the dignity of their calling, the responsibilities they assume, and the confidence reposed in them, I am certain that there is much to be regretted and reformed.

Our code of medical ethics—the interprofessional code—is both defective and vicious, and a Justinian or Livingston, if he could promulgate his enactments with sufficient authority, would be one of the greatest benefactors our profession could receive.

I cannot but think that we should be spared much of the undignified rivalry, and vulgar animosity which are too common in all medical communities, if sound and generous principles of professional intercourse were more formally and more frequently inculcated. It is probably true, indeed, that some rough and selfish beings would resist the meliorating influence, however it was applied; but the combined

determination of the better, which is happily the larger portion of the fraternity, would ultimately coerce these unworthy exceptions, and a better style of manners would prevail.

While these personal disputes constitute the most common offences against their profession, on the part of practitioners in crowded cities and large settlements, another and negative form of delinquency is the besetting sin of those who reside in retired and unfrequented places. Here, wanting the salutary stimulus of competition, and limited to self-comparison, the physician is apt to become indolent, and rusty, and nothing but a strong sense of duty will keep him to those habits of observation and study which are necessary for the preservation of attainments already made, and still more so to enable him to follow or anticipate the progressive improvements of his art.

Next to a reasonable concern for personal success and emolument, one should be interested in the honor and advancement of his profession—of that institution which not only supplies the means of a sure and respectable livelihood, but secures to him rank and consideration in the social system. To be unmindful of such a benefactor—to be engrossed in a selfish appropriation of professional advantages, is recreancy to the most commanding obligations, and argues a lamentable deficiency in that moral sensibility and corresponding deportment, which I regard as among the essentials to true medical excellence.

Among the duties of the practitioner to his profession, few are more important than a faithful communication of the results of practice, and one would think that none could be more easy and certain of performance. But, unfortunately for the progress of the art, and for the character of its professors, it seems to be thought that, in this matter, if the truth and nothing but the truth be told, the requisitions of morality are answered, and that the 'whole truth' may be declared or suppressed as may suit the interest or ambition of the narrator. This delinquency is by no means peculiar to the present day; but at the time of the learned Dr. Gregory, was so gross and general as to provoke the severe denunciation that 'all medical facts are medical lies, and all medical theories, stark staring nonsense.' The indignation of the worthy doctor, doubtless, led him to extravagant censure, and though his language is quite too absolute and unqualified for truth or decorum at the present time, the spirit of the remark is as richly deserved now as it could have been then.

As for the monographs and 'Reports of Cases' purporting to give us the results of practice, according to particular methods, which constitute a considerable portion of our ephemeral medical literature, we have been compelled to read them with a larger and larger grain of

allowance, till their authenticity is little better than that of a partisan Newspaper.

One man undertakes to communicate his experience in the employment of *Iodine*, and you would think, from his narrative, that it was as unfailing a remedy as the Panacea—that all manner of scrofulous affections disappear under its use, like a snow-ball in the sun. There are not failures enough reported for exceptions to verify the rule. Another finds the efficacy of the drug manifested only in a particular form of it—that of *Hydriodate of Potassa*. This is the subject of his story, and a long and imposing one he makes of it. A large class of diseases of the most unmanagable character appears to have been completely vanquished by this potent product of modern pharmacy; and, reluctant as we may be to swell the list of specifics, our reporter furnishes testimony in favor of his new drug, before which, the claims of sulphur and mercury, old as they are, seem questionable and equivocal. Turning to surgical relations of particular methods of practice, we find the same extravagant and one-sided statements—one man reckoning his amputations by hundreds, and another his lithotomies on the same grand scale, all performed without a single death or disaster, when the utmost that is positively known, as the basis of such confident and incredible declarations, is that no individual actually bled to death under the operation, or expired before removal from the table.

Now I would, by no means, charge these partial, and therefore untrue representations on all who utter them, as willful falsehoods. They are, generally speaking, rather attributable to loose habits of observation, to neglect of seasonable records, or to a sanguine, self-indulgent temper, where the wish is, often unconsciously, parent to the thought and expression. But the mischievous consequences of them is the same, whether prompted by a guilty purpose of deception, or proceeding from mere carelessness. They mislead the unwary, discredit recorded experience, and throw us back upon first principles instead of furnishing data for safe and needful progress.

It would be an unprofitable occupation of time to enlarge on the advantages of a more scrupulous regard to the entire truth in these communications, whether we consider the advancement of our profession or the standard of character in its members.

Unsuccessful cases are often as instructive as those which terminate favorably, and are quite as indispensable in determining the value of any system or rule of practice which is to be tested by experience. Nor are they any more discreditable to the practitioner, provided his report exhibit, in the management of them, an assiduous application

of the best means of treatment known to his art. He has only to show himself faithful to the professional light and knowledge of his day, to be vindicated and sustained, however unavailing his well disposed measures of restoration may have proved. No honest, intelligent, and prudent physician undertakes to *cure* even the mildest form of disease presented to him, but only to administer such counsel, medicaments and appliances, as his knowledge of the principles of health and disease in general, and his experience in that particular complaint, have taught him to consider most favorable to recovery. On the other hand, an affectation of superiority to the acknowledged imperfections of the healing art, and to the consequent incompetency of its professors, or a dread of the vulgar odium sometimes directed against the most deserving physicians, on account of the unfortunate issue of particular cases, are among the most unpardonable of immoralities, and indicate knavery in the one case, and pucillanimity in the other, which should banish the unworthy member from the communion of honorable and enlightened practitioners, and consign him to the more congenial society of quacks and imposters.

Once more—and very briefly—and I shall have concluded what I propose to offer on the subject of inter-professional morality.

By the genius, erudition and industry of our predecessors, the *literature* of medicine has become as rich and respectable as that of any department of science. This is a common treasure, which we are bound to respect, perpetuate and enhance. I fear that we are not sufficiently alive to the duties which this trust imposes, nor even duly sensible of the privileges and advantages it is securing to physicians, as a constituent portion of civilized society.

Sir Thomas Brown, Linacer, Mead, Friend, and their compeers, who acquired for English physicians the favoured rank in society, to which their American bretheren have succeeded, were scholars as well as doctors, and the same accomplishments which enabled them to elevate and dignify their profession, secured for themselves a place in that precious repository of the merits of British genius and learning, Westminster Abbey.

In truth, there is nothing like polite learning, the intellectual refinement and erudition, which, of old, was commended, as that which ‘*emolliet mores, ne sinit esse feros*,’ to qualify one for the manly, graceful, and satisfactory discharge of medical duties. Nor is there any thing so essential to the preservation of that rank and consideration, which, as a class, physicians at present enjoy in this country.

Just in proportion as they neglect mental culture, and are content to become mere prescribers and pill-drivers, will they lose cast, and

find themselves ranked, as they will then deserve, with common tradesmen and artisans.

We cannot be faithful to our profession, as it seems to me, under the present system of medical education, which scarcely recognises general scholarship, and especially classical learning, even among the collateral branches of study.

Medical schools will continue to exhibit a capital defect in their organization, until some good measure of attainments in science and literature shall be made a condition of matriculation. For rarely after entering on the absorbing engagements of practice, will the physician have resolution, if he have the inclination, to recur to elementary studies which he has omitted in youth, but which are essential to any subsequent proficiency. These preliminary requisitions, must, of course, be moderate at first, but might gradually be augmented, until the candidate for medical honors should possess a respectable share of general scholarship before entering on studies peculiarly professional.

In the intense competition now existing among the medical schools—a competition, which, it must be confessed, has too much regard to the length of the catalogue or the ticket-list—it can hardly be expected that any single institution will be disposed to introduce an innovation in the terms of discipleship, which, for a time at least, would materially effect the numerical strength of its classes. But I regard this, as one among many* particulars of our present system, calling for reform, and requiring concert and mutual good-faith, in the parties interested, for its accomplishment.

While this timely mental culture would be of inestimable service to the subjects of it, in securing them from the perpetual mortifications they must otherwise encounter in their subsequent intercourse with educated society, it would inspire tastes in harmony with their station, and often lead them to find their recreation in pursuits which might result in productions calculated to dignify their profession, as a liberal and literary calling.

Is it asked, why scholarship is insisted on among the *moralities* of the physician? I reply, in the first place, that it is salutary, as a general rule, to apply the sanctions of morality to every desirable effort and accomplishment, and that from the outset of my remarks, I have entertained this extensive view of *medical morality*—regarding it

* The wearisome routine of lectures, for instance, whereby the student is daily crammed with an heterogenous mass, upon which memory and reflection may labour at digestion in vain, even through the night watches; and which, however excellent its several ingredients, becomes absolutely repulsive before the conclusion of the term.

as comprehending the *To prepon* of the Greeks, and the *Bonos-mores* of the Romans, as well as the golden rule of Christian conduct—and secondly, that I might characterise, as it deserves, a degrading idea, which too often finds expression among physicians in sneers at ‘the books,’ and in a contemptuous contrast of *erudition* with vaunting self-sufficiency, which is ill-disguised under the specious term, *experience*.

In pursuing our views of medical morality into the interesting relation which the practitioner sustains to his patients, we find ourselves in the midst of duties and trials, imperiously demanding an enlightened, tender and uncompromising conscience.

It is unnecessary to enter into the details of medical services, in order to illustrate their ethical requisitions. A glance at the leading features of the *occasions* of those services, will reveal, at once, their peculiar obligations. These occasions are generally characterised by extreme necessity, and unlimited confidence on the part of the patient. Life,—health,—the precious objects of friendship—the hopes of families, and interests ordinarily intrusted only to tried and reciprocal friendship, in seasons of sickness, are unhesitatingly committed to, it may be, the stranger hand of the physician. The domestic circle is invaded by disease, and must be thrown open to the minister of the healing art, however unfavorable an aspect it may present, and all the infirmities of the sufferer exposed to his view, in moments of weakness, agony, despondency, and death. What absolute candour and faithfulness are not invoked by such unreserved confidence? What gentleness, delicacy, patience? How are not the convictions of duty enforced, and the dictates of the moral sense rendered imperative, by such affecting appeals to sympathy, humanity, and every amiable and generous sentiment? It surely is not too much to say, of any one who, in the midst of duties, thus hallowed alike by their essential and circumstantial attributes, can practice deceptive arts or assume deceptive airs, can act the hypocrite, mercenary, libertine, or sot, that he is incapable of true excellence in any thing, and particularly disqualified for it, where there are so many devious avenues to undeserved distinction as are opened in the way of the medical practitioner.

There is a class of questions of the most serious character, arising in the course of surgical practice, in the determination of which, I would especially recommend the strict views of morality I have just been presenting. They relate to the propriety of operations involving protracted agony, or grievous mutilation, or dismemberment. Is every local disease, adjudged to be fatal in its tendency, to be removed by operative measures, at all hazards? Is there no limit to the suffer-

ing and risque which the surgeon may rightfully inflict, in attempts to eradicate malignant degeneration, or burdensome morbid accumulations? I certainly think that there is. Lamentable cases of this kind, not unfrequently present themselves, where the disorder is so extensive, or involves parts so essential to existence, that no operative proceedings are justifiable—where the hand of adventurous art is arrested by the august command, ‘thou shalt not kill.’ Nor only so; there are relative as well as absolute risques, to which the surgeon cannot rightfully subject his patient—where the utmost anticipated advantage from the operation is altogether disproportioned to the inevitable suffering and danger incurred in its performance. I would not paralyze the functionaries of the healing art by any pucillanimous scruples, but only insist upon the application of a rigid morality, in the determination of these perplexing and painful questions, which will rebuke the passion for daring surgery inspired by the eclat of great operations, and withhold the surgeon from those extraordinary performances which minister to his own notoriety rather than to the benefit of his patient.

The example of the departed Physick, so recently and eloquently eulogised in these halls, is highly instructive to his profession in this point of view. His enviable reputation was not earned by a few imposing performances, of equivocal propriety and advantage, but by a long series of faithful services rendered in more ordinary emergencies, where success was sure to be a blessing to his patient, and failure implied no reflection on the morality of the surgeon.

III. In adverting to the sources of medical knowledge and excellence, it may be expected that I should offer some comments on the advantages offered to American physicians in the transatlantic institutions.

I should answer this expectation with much more pleasure—so far as the limits of this exercise would permit—if my opportunities for observation there had been more extended, and my impressions such as would enable me to utter, more universally, the language of commendation. I should be sorry, however, to have it supposed that even my transient acquaintance with European institutions and masters had been altogether lost to the purposes of comparison, or had failed to supply me with some suggestions respecting them, which may be serviceable, at least, to my pupils.

Addressing those, therefore, who have a right to my opinions on such subjects, I shall venture to offer, with much plainness and freedom, and in the form of brief conclusions, rather than that of description or narrative, such views of the absolute and comparative merits of

foreign Medical institutions, as a hasty visit to some of the most notable ones has furnished.

The capital of France is now-a-days regarded as the medical emporium of the world. Her School of Medicine, with its score of Professors—her ample facilities for the pursuit of practical anatomy—her spacious hospitals, thrown open, with the most commendable liberality, to all who seek instruction—her copious medical literature, in a language which has well nigh supplanted the Latin as the ‘*communis lingua doctorum*’—conspire to give to Paris a position in regard to external equipments for the prosecution of medical studies, unequalled by any other city, with the exception, perhaps, of Padua, at the time of the illustrious Fabricius. But unfortunately there are certain capital faults, as it seems to me, in the administration and employment of these signal advantages, which in a good measure defeat the purpose of their creation, and nullify their efficacy as means of preparation for the practical duties of the profession.

Generalizing extremely the expression of my objections, I should say that ‘the School’ is weakened by the excessive elaborateness of its organization, and burdened by the multitude and detail of its lectures*—that anatomical instruction, both normal and pathological, is too deeply tinctured with transcendentalism—and that the practice in the hospitals is vitiated by a servile adherence to antiquated rules, or a spirit of rash, unjustifiable experiment in the present practitioners. In one or other of these two extremes, you may arrange all you can see of medical or surgical treatment in the general hospitals of Paris—the *juste milieu*, so much talked of by their politicians, has no place in the counsels of their physicians.

I was exceedingly surprised to find how little of sound, rational, curative information could be gathered from the lessons and example of the hospital practitioners in their vaunted clinics, additional to what a respectable graduate of good American schools will possess before leaving home.

In surgery, with the exception of a few specialities, they do not seem to have improved on the practice of Ambrose Paré, and exhibit but little of the independent, patient spirit of progress which distinguished that great man. Certainly they cannot be said to have entered on the epoch of John Hunter; and although the labours and accomplishments of their own Bichat are admired and praised, and

* In one respect, however, the routine of instruction is on a better plan than that which is pursued among us—there are but *three* lectures a day at ‘the School,’ during the term, and no one Professor lectures oftener than three times a week.

his portrait honored with a place in the Hotel-Dieu, I could not perceive that the inmates of that institution were realizing, from the application of his principles to the treatment of disease, any thing like the advantages they have secured to the sick, even on this distant continent.

The French practice surgery too etymologically, if I may so speak, as if it were a mere handicraft or species of trade. They put on their aprons and go to work, for all the world like so many barbers or bakers, emulating each other in the elaborateness of their dressings, burdening and tormenting diseased and wounded parts, *more canonico*, with that same system of absurd appliances, so admirably criticised by Mr. J. Bell, in his chapter on adhesion. The barbarous cautery is still in too much favor with the Parisian surgeons, and most of the old-fashioned notions respecting suppuration, digestion, &c., with the painful appliances they indicate, appear to be a part of the orthodox surgery of Parisian hospitals. Not that novelties are unknown there—but modifications of practice, to be attractive to them, must be extravagant, ultra, or even fantastical. They entertain, with enthusiasm, a plan for curing *Fistulala Lachrymalis*, by obliterating the puncta, for healing amputated stumps by enclosing them in wooden ovens, or for retaining the fragments of a shattered limb in comfortable and sanative contiguity, by crushing them in the rolls of a tightly applied bandage. It was not a little amusing, indeed, to observe the last-named conceit, after having run the gauntlet of rational surgery, from the valley of the Seine to that of the Mississippi, returned to the place of its origin, and figuring among the novelties of La Pitié. And there it belongs—in a French hospital, where neither fatality, nor any less mischievous consequence seems a valid objection to any scheme or proceeding, by which a practitioner can acquire a temporary notoriety, in contrast with his competitors and rivals.

While some such eccentricities as these may be constantly observed in these institutions, the simple, rational process of *union by the first intention*, which is at the foundation of most of the modern improvements in surgery, is rarely attempted, and still more rarely effected in the general hospitals of Paris.

There seems to be nothing more difficult for a Frenchman to appreciate, than simplicity, either in thought, feeling, or action; and hence it is, in a great measure, that their surgeons so frequently fail in attempts to procure *immediate union*. They do not understand the simplicity of the conditions and processes on which that desirable result depends, and, instead of coaxing the divided parts into contact, and

retaining them there by the most gentle and inoffensive means, they torture them by violent traction and retention, burden and heat them with masses of lint, unguents and compasses, or by some other mischievous work of supererogation, defeat the object they have in view.

To these disparaging views of general surgery, there are admirable exceptions presented in the practice of gentlemen who have devoted themselves to particular departments of the art. Among these is M. Ricord, who, carrying into his ample field of observation, an enlightened sense of our deficiencies and desiderata in that class of diseases, has established discriminating views and sound rules of practice, which, so far as ends can justify the use of means of equivocal propriety, extenuate at least, the means—some of them of doubtful morality—which he has employed in their attainment.

A similar commendation is due to M. M. Civiale and Leroy. Devoting themselves to a new process, unembarrassed by antiquated rules, and aiming at practical improvements, these gentlemen have associated their names indissolubly, with the most conspicuous melioration of the healing art effected in our times. By a succession of simplifications, equally rapid and ingenious, they have delivered their favorite method from the thralldom of a complicated and dangerous mechanism, and rendered it a safe and inviting alternative to one of the most formidable operations of surgery. The ease, address and elegance, with which they execute the manipulations of the process, are truly admirable, and constituted the only performance, in the way of operative surgery that I witnessed in Paris, which was absolutely excellent. Indeed, so satisfactory are these performances, that unless we observe and conclude with much discrimination, we are in danger of overlooking the intrinsic difficulties of the method, and attributing to Lithotrity, in general, what is really personal to these accomplished operators. Determined to rescue Lithotrity from the imputation of mere artisanship, so far as the example of one of its advocates could avail, M. Leroy has employed himself in extensive and productive researches on the general pathology of the urinary apparatus, and although not yet one of the 'Faculty,' offers a course of instruction on these subjects, for which one may well forego the prolix and inconclusive discourses delivered at 'the School.'

The details of *medical practice* are much more exactly communicated in writing than those of *surgery*, and I shall not surprise any who are conversant with French medical literature, in pronouncing their treatment of disease to be inert, lame and inefficient, to a degree surprisingly in contrast with the show of science and research which appears in their writings. I am not an advocate for the heroic practice, in

general—I am disposed to think that excessive medication is the besetting sin of many practitioners, at the present day, and especially of some American practitioners; but there is in the other extreme, a reprehensible impotence of curative appliances, which is sometimes quite as mischievous. I defy any unprejudiced, sagacious, experienced physician to follow the medical clinic of the Parisian hospitals, and mark the prevailing inactivity of the treatment pursued, without being tempted to apply to it, over and over again, the sarcastic definition of the Roman empyric, ‘a meditation on death.’

Moreover, French medicine is ever vitiated by sectarianism and party spirit, and what with the dogmatism of the prevailing school, and the counteracting efforts of its rivals, there is little of that dispassionate search for truth, which is indispensable to improvement. Their systems are equally remarkable for their multiplicity and transitoriness. Three at least, have had their day in Paris among the present generation of teachers, each of them involving, to a greater or less extent, the professional preferences of other parts of the world.

The masterly ‘examination of medical doctrines’ by Broussais, was only introductory to a new system of his own, which, under favor of an imposing name, and the eloquent advocacy of its founder, rose into the ascendant with unexampled rapidity and with the fairest promise. But its fall was not less rapid and signal—the physiological system has passed to the receptacle of things, not lost, but disused, and its illustrious author, the most gifted, as I think, of the living physiologists of his country, participating in its downfall, now lectures to empty benches, where, ten years ago, disciples crowded to his instructions by thousands.

Laennec and his party depreciated a reliance on symptoms in the investigation of diseases, and founded a new school, insisting on the absolute necessity of the physical signs to a correct diagnosis, and maintaining the exclusive precision of their own method with as much pertinacity as if Hyppocrates, Sydenham, and Morgagni had never lived, and left discriminating views of disease, rarely approached by the most astute of the stethoscopists.

And now we are in the midst of another ‘epoch,’ as they are fond of terming their successive dogmas—the ‘school of observation,’ par excellence, better known as the ‘numerical system.’

Under the guise of the utmost liberality, it is as exclusive as the Koran. With the most plausible pretensions to exactitude and positiveness as its characteristics, it exhausts us with a burden of insignificant details and inappreciable distinctions, and really aims at a delusive

result which has played jack o'lantern to medical philosophers from time immemorial—the perfectibility of our art.

According to this scheme, the present generation, and how many others nobody knows, are to employ themselves in collecting particulars called facts, carefully abstaining from all comment or generalization, until a second Borelli shall be born to the fortunate future, who, applying the pure mathematics, instead of geometry, shall add, subtract, multiply and divide the figures we have left, and evolve from them, in the form of quotients and products, the terms and principles of an exact science. In the mean time the sick are to live—or die—by the *traitment expectant* and *eau du Gomme*, and M. Louis figure at the head of a sect, in the august employment of redaction.

Let me not be understood to sneer at observation as a method of scientific attainment—forbid it the cause of truth; much less at M. Louis, whose estimable qualities as a man, and assiduity as a teacher should rebuke the slightest discourtesy.

I am only attempting to give concise expression to my views of the intrinsic absurdity of this system, in the course of remarks, the spirit of which is equally directed against them all. The method of observation is certainly good—indispensable; but it is a desperate push for originality to claim it, or its application to medical studies, as the invention of any modern master. This application is at least as old as John Hunter, and if, at present, it appear to receive any peculiar homage, we must thank the spirit of the age, and not this or that ambitious leader.

Neither is this numerical system, as some claim for it, a return to the Hippocratic method of medical investigation. The sage of Cos, indeed, employed observation, but always with a view to some specific conclusion, and not in the *omnium-gatherum*, irrelevant manner of our modern fact gatherers.

I repeat then, that the method of observation is good—indispensable. But there are rational facts as well as sensible ones. Man is constituted a reasoning as well as an observing being, and that system is unnatural, and correspondingly impotent, to whatever subject it be applied, which discourages comparison and inference, and is satisfied with a partial employment of the faculties. Although the matter-of-fact feature of our times seems to me quite too prominent for the most perfect symmetry, and although the science of theorising is too much neglected, I would not revive the dominion of the dialectic school, nor return to the sophisms of the logicians. I reverence the method of the *Novum Organum*, and only protest against the mischievous divorce which the fashionable system of medicine

attempts to effect, between the acquisition of facts and the exercise of reason for their generalization.

‘Philosophy abdicates’ says the eloquent author of the ‘Philosophical Fragments,’—‘it renounces its true end, which is the understanding and explanation of all things, by the legitimate employment of our faculties, when it renounces the unlimited employment of reason.’

* * * ‘To limit philosophy to the accumulation of sensible facts, is to engender a pucillanious wisdom, which, in spite of our deepest cravings and our most imperious instincts, chains itself down to the poverty of a barren observation.’

Besides this metaphysical objection to the *numerical system*, which I intended only to have glanced at, I believe it is hindering the progress of rational medicine, by loading the memory and the books with heaps of micellaneous particulars, and by encouraging its ardent votaries to believe that they are contributing to place their profession among the exact sciences.

But there it does not belong. Its essential elements are neither to be weighed, measured, nor computed. The arcana of vitality are not to be penetrated by human art or assiduity—they are among the reservations of omniscience. The ‘angel with a flaming sword,’ that was early placed to guard the ‘tree of life,’ will be faithful to his trust, and man will essay in vain to pluck that forbidden fruit, of which ‘whosoever eats shall live for ever.’

Nor is this confessing to any discreditable imbecility in our art. Its partial impotence—its procedure by probalities rather than by axioms, are attributes which it shares with most of the institutions and agencies which determine or employ human action, in the various pursuits of life. Enough is attainable to stimulate the highest ambition of her worthy votaries—enough is attained to rebuke the vulgar sneer, and to command the universal gratitude of mankind.

In the foregoing remarks on French medicine and surgery, differing, as I am aware they do, from the prevailing current of opinion on that subject, I have certainly been actuated by no prejudice nor hostility to the nation, their institutions nor their masters; but am conscious only of attempting to render strict and needful professional justice, according to my own humble views of it. Multitudes of young men, in the enthusiasm of their new doctorate, and with a commendable ambition to render their education complete, at no small expense of time and means, hurry to the ‘School’ and hospitals of Paris, with hopes of augmenting their professional resources, which I am quite sure are seldom realised. They witness much activity in the medical corps—are charmed by the enthusiasm and fluency of

the teachers, mistake bustle for progress, and novelties for improvements, and fancy themselves adding to their stores of healing knowledge, when they are only substituting the seductive and impracticable subtleties of their new masters, for the sober, rational, available instructions of their native schools.

I should advise such young men to engage, at once, in practice—to test the value and completeness of attainments already made by the only unerring touchstone, experience, and to occupy the ample leisure of their novitiate in making themselves masters of all that can be learned at home, which they can by no means accomplish during the short period allotted to medical pupilage. With judgment somewhat matured, and habits of self-instruction formed, they may then resort, with the greatest advantage to the sources and materiel of more complete attainments, which are presented in Paris. They may then ‘walk the hospitals’ to good purpose—the professional man within, deriving not only entertainment and recreation, but actual vigour and developement from the exercise.

But if impatient to terminate at once their scholastic education, let them rather repair, in the first place, to England, and seek among the masters of the British metropolis, instruction which will reinforce, illustrate and extend the practical lessons they have received at home—where their previous education may receive polish and lustre, without indangering its temper or edge. They may find less that is dazzling and seductive in British than in French medicine, but, as it seems to me, much more that is substantial, progressive and available. English surgery consists less in a certain routine of manipulations or showy exploits, and medicine there, postponing the transcendentalism of the French, condescends to therapeutics, and busies itself actively in the cure and relief of the sick.

In a critical notice of the medical institutions of London, I could by no means represent them as faultless. Among the patients in some of the hospitals there appeared slovenly habits of person and apparel, quite inconsistent with Hospital hygiene, and altogether out of character among a people so remarkably neat in all such particulars, as are the English. In others, the dietetic arrangements seemed to be very exceptionable, the errors being generally on the side of excess, and in most of these institutions the records of the larger part of the cases are quite too meagre and imperfect, to present any thing like an instructive history of the disease or its treatment.

The medical corps of this metropolis, moreover, seem to exhibit too little activity and enterprise with a view to the progress and

improvement of their art. With abundance of talent in every department—with excellent notions respecting the availability of scientific attainments, and with precious stores of the means and material for medical investigation, in their unrivalled libraries, museums and cabinets, there is not so much zeal and effort as might reasonably be expected, on the part of those who should take the lead, in securing for medicine the same rate of advancement which is realised in other departments of science.

The British surgeons are reposing too long on the transcendent merits of John Hunter, and among their physicians, the imitators of the assiduous Baillie are far less numerous than his admirers.

Nevertheless, whatever they do undertake, is generally conducted in a sensible manner, and to some practical purpose; and while the London schools can boast of such enlightened practitioners and teachers as Lawrence, Liston, Johnson, Blundell and Clark, and can exhibit such examples of erudition and research as appear in Owen, Willis and South, they will offer attractions to the medical student or traveller, unequalled by those of any similar institutions, on the other side of the channel.

I have seldom been more agreeably surprised than in my professional observations in Italy. Their limited medical literature, and our imperfect acquaintance with their language, have left American physicians but very indifferently informed respecting the condition of our art in that country, since the times when it found its favorite seat in Padua, Bologna and Pisa. But from a tolerably thorough inspection of the medical institutions in Florence, from a glance at those of Milan, and from the best information I could collect about other places, I am convinced that in the Italian schools, our profession is at present advanced and progressive to a considerable degree beyond the standard of other sciences, in what we are accustomed to call degenerate, instead of neglected and abused, Italy.

There are anatomists in Florence worthy to be successors of Mascagni, and the clinic of the *Santa Maria Nuova*, may be followed with as much interest and advantage as any on the continent.

The decorum with which the medical and surgical service of this institution is conducted, I reckon among its most praiseworthy attributes. The pupils are held to a more strict observance of the proprieties of the place, than in most hospitals, and the practitioners, are respectful towards each other, and considerate of the rights and feelings of the sick; in this respect, furnishing a grateful contrast to a Parisian style of hospital service, where it frequently happens that gross blackguardism of his compeers is all that is remembered of the pro-

fessors' clinic, and barbarous indifference to the pain and risque inflicted on his patients, the most striking feature of his practice. Verily, there are Hospitals in Paris which need a Howard, as much as ever did the prisons of England.

The Faculty of Florence, though less ostentatious than their Gallic neighbors, are quite as assiduous and scientific, more deferential to the common sense of the profession, more ready to appreciate the progress of the art in other nations, and therefore in a more promising condition for advancement themselves.

I cannot but look upon this circumstance as highly auspicious, not only to medicine, but to the cause of Italian improvement in general science.

It would not be the first time, in the vicissitudes which have marked the progress of knowledge, if Medicine should lead on an intellectual revolution, nor would it be unexpected that the revival of Italian learning should begin in Tuscany, where the unavoidable discouragements of absolutism are mitigated through the personal wisdom and liberality of the reigning Sovereign.

May it be so. I wish it for the sake of the estimable men in whose hands the interests of the profession now rest in Florence, to whom I am personally indebted for fraternal kindness, and who seem to me altogether worthy of such a mission. I wish it, and its speedy realization, for the sake of the glorious associations which quicken our interest in all that relates to the intellectual state of that fair land.

On the whole, if an American medical student should determine to pursue the elementary branches abroad, I should advise him to repair at once to Florence. The language is more readily acquired than any foreign tongue, the expenses of living are less than in any foreign Capital, and a comfortable passage to Leghorn may generally be secured from some Atlantic port, for a less price than is demanded by the packets to Liverpool or Havre.

There is no Medical School in Geneva, which is the only Swiss city I was able to visit. I cannot, therefore, speak from personal observation, of their arrangements for medical instruction. But of the Hospital at Geneva, which I visited repeatedly, in company with M. M. Lombard and Senn, who respectively perform its medical and surgical service, I cannot forbear to speak, in terms of the most unqualified commendation. It is a small establishment, but, in every particular except its dimensions, decidedly superior to every other receptacle for the sick, that I visited in Europe. In the neatness and quiet of its wards, the excellent arrangement of the nursing department, and in the unostentatious, but faithful manner in which the resources of the

Healing Art are applied to its inmates, it resembles one of our own institutions, which, at the risque of being suspected of undue partiality, I must regard as the best Hospital, in all its essential attributes, that I have ever entered—the Massachusetts General Hospital at Boston.

Of the American Schools, I can say but little. Indeed, I know but little of them individually, and, with more particular information, should decline the ungracious task of comparison or criticism. From what is notorious, however, of their organization, curricula and equipments, I am persuaded, that, in general, they are as competent to the important purposes of their creation, as any others, and that, in the first class of American Schools, medicine is actually taught in a very thorough, complete, and available manner. Without depreciating at all the advantages of foreign travel and observation, it is but just to domestic institutions, which have been reared and organized throughout the country with much liberality, to affirm, that a persevering student may become master of all that is positive in the present state of the science, and of whatever is most material in the qualifications of a practitioner, without crossing the Atlantic. The refinements, embellishments, luxuries of professional education, await him, in tempting variety abroad—its substantial, essential elements may be commanded at home.

There is one matter of reform, however, imperiously demanded in some of the most popular of these institutions, which I would venture to present, for the consideration of all—the inculcation of a more thorough and complete eclecticism.

It would seem strange, that in an age and country like ours—both of them encouraging the utmost independence of thought, and freedom of investigation—there should be any occasion to complain of dogmatism, did we not bear in mind that, among the inconsistencies of humanity, none is more conspicuous in the history of science, than a disposition in her votaries to become sectarian, to adopt exclusive creeds, “jurare in verbum magistri.”

American physicians have furnished remarkable examples of this infirmity, the exclusive homage sometimes being rendered to the intrinsic plausibility of a dogma, and at others, to the mere authority of its promulgator.

Not long since, a large portion of the élite of our profession had realized a charm in *Broussaisism*, which blinded them to the claims of every other method of study and practice. After wasting much time and talent, and corrupting medical phraseology, in the service of their school, and probably augmenting, considerably, the catalogue of self-

limited diseases, by the scepticism and timidity in the employment of remedial agents which its doctrines inspired, most of them have abandoned *the* physiological system, and, devoting themselves to *a* physiological system of doctrine and practice, have become as rational and eminent physicians as the country can boast.

A similar infatuation has since doomed another body of ardent and promising young men, to the tread-mill of *Numericalism*. All their studies and labors, begin, proceed and terminate in transcendental pathology. Their system encourages them to elaborate tables of the products of disease in the dead-room, instead of accumulating observations and delineations of disease itself, at the bedside, and to employ themselves in measuring shreds of membrane and weighing grains of deposite, instead of applying these processes, upon articles of the *materia medica*, in the exercise of sound and beneficial therapeutics. The fruitless character of these exclusive pursuits will soon disenthral the more sensible of the devotees of the numerical pathology, and the habit of exact observation which it may have contributed to form, will undoubtedly, compensate for much of the time and effort misspent on the details of the system.

There is an extensive sect in our country—indigenous here, I believe, associated under common, but ultra and mistaken, notions of the efficacy and administration of mercurial medicines. I intend no reflections on any individuals or their practice—scarcely any system in the hands of sensible and conscientious persons, is mischievous in any degree corresponding with its abstract errors, however serious they may be. But if we would know the tendency of this, or any other system, we must go from the principle, to its consequences, from the circum-spect master to the daring pupil; and volumes would not suffice to record the melancholy mischiefs, occasioned by those who deem it a light thing to shatter the jaws by salivation, or impregnate the system with a subtle mineral. It is an unwelcome opinion, but one which my own judgment and observation, confirmed by the statements of those who are better informed than myself on the subject, compel me to entertain, that the ulcerations, gastric disease, chronic pains, &c. resulting from the ‘calomel practice,’ as it is called, more than counterbalance the beneficial effects realized from the judicious use of this valuable, I had almost said indispensable, article of the *Materia Medica*.

Another practical dogmatism has gathered a circle of disciples, in a certain portion of our country, under the authority of a gentleman, to whose transcendent merits in certain departments of surgical practice, I have often been proud, as a countryman, to bear witness both at home and abroad. Having mounted his ‘*Currus triumphalis Antimonii*,’

with the Genius of abstinence at his side, he either rides down all manner of diseases, by an heroic emesis, or reduces them, as soldiers do cities, by famine—‘not considering,’ in the latter case, as the widow Blower says of starving doctors, ‘that the friendly inhabitants often suffer as much as the hostile garrison.’ According to the creed of this school, patients will generally thrive on three vomits a day, ‘tartar and ipecac, ipecac and tartar,’ iterum iterumque daily, and even hourly, is safe and rational practice, and may be equally efficacious, whether the disease be cancer or cholera, consumption or curvature of the spine. If such reckless and indiscriminate use of a corrosive emetic be not calculated to light up atrocious phlegmasiæ, or to induce chronic incapacity on the gastric membrane, all that we are supposed to have learned about organic sensibility and vital reaction, is a complete delusion.

Now, to counteract this propensity to system-worship, and to overthrow the idols it has set up, we must invoke, as I have said, the spirit of rigid eclecticism.

Let us not misunderstand this salutary principle of reform. Eclecticism is not a principle of confusion; rejecting method, arrangement, order in the materials of our knowledge. Nor is it a blind syncretism, regarding, with equal favor, every dogma, whether sober or fanciful. But it is a principle of analysis and selection. As pure, unmingled error is ever rejected by the human understanding, it teaches us to look for a portion of truth in every doctrine, which has recommended itself to the favor of mankind. For the purpose of decomposition, therefore, it entertains with respect, all systems, while it becomes the dupe of none. Hippocrates and Paracelsus, Cullen and Brown, Humoralism and Solidism, will all contribute to form the creed and practice of an eclectic physician. Even the vulgar quackery of Thompson, may thus furnish a hint to the rational practitioner, while the most refined speculations and imposing dogmas of the day must submit to an uncompromising analysis, and live, if they survive at all, by virtue of the portion of simple, sanative truth, which haply may be found among their more dazzling peculiarities.

So much has been said by others, on various occasions—so well and truly said—of the advantages, claims and prospects of our own school, that I should refrain from any similar remarks at present, were it not to take advantage of the only opportunity I shall have without intruding politics and controversy upon the exercises of my classroom—an indecorum which I shall be slow to commit—to utter a single word, which shall be the last as it is my first, on the only disagreeable feature in the early history of the Institute. It is known to all

I address, that the establishment of this school was made the occasion—it was, in no true sense, the cause—of one of those inter-professional controversies which are generally to be deprecated and regretted. Some of my colleagues were unavoidably involved in it. Happily for myself, no direct participation in it was ever invited, and certainly none was desired. But it would be recreancy to friends and good-fellowship, to affect entire indifference or absolute impartiality in the questions at issue, as it would have been unjust to myself, in the first instance, to fail of ascertaining their merits before assuming a position in which I must be, more or less, effected by them. If such preliminary examination had disclosed anything, in the separation of my colleagues from other institutions, reflecting unfavorably upon the conduct or motives of those gentlemen, I never should have become their associate. If the establishment of the ‘Institute’ had appeared to be a violation of the rights of others, or ‘a mere project of ill-natured competition’—on the other hand, if it had not seemed to be clearly indicated by favorable circumstances of location, popular favor, &c., demanded by the interests of medical education, due to the West, I could not have been tempted into the enterprize.

But the battle, which certain parties thought fit to wage with the infant institution, has been fought. Far be it from me to attempt to characterize the conduct of it, on the one side, or the other, or to indulge in exultation over a triumph which is due only to truth and right. Henceforth let us have peace. The spirit of the age is of peace—the pursuits of science are eminently pacific—the healing art is the counterpart of war—truth is seldom developed by controversy, but has generally beamed forth from the tranquility of private study, attracting the regards of mankind chiefly by the gentleness of her bearing, in contrast with the bustle and conflict of surrounding qualities.

We shall be indulged, however, in congratulating ourselves on the encouraging circumstances under which we commence our second session. Organized according to approved forms, and equipped, in addition to such apparatus as was attainable at home, with whatever could be found in European cabinets and magazines, calculated to render medical instruction impressive and complete, the Institute opens her new and spacious halls, conscious that in all the external machinery of her vocation, at least, her liberal founders have emulated the best examples, and answered, at once, the requisitions of taste and utility.

It devolves upon us, my colleagues, who are charged with her internal economy and administration, to give efficacy to these extraordinary

endowments. Let us see that the first impulses in this enterprize, so honorable and interesting to Louisville, are wisely given—that the first steps be so ordered as to introduce a career of usefulness and respectability, corresponding with the auspicious circumstances of its commencement. While acknowledging the stimulating influence of a spirit of honorable competition towards neighboring schools, let us be chiefly animated by the reflection, that, with associates as with individuals, the most serious obstacles, as well as the best impulses to progress, are from within; and ever be mindful that positive, rather than comparative excellence, is the constant aim and motive of a worthy ambition.

Gentlemen of the Medical Class:—While bidding you welcome to the relation which our respective positions in the Institute has established, I cannot refrain from a word of advise, on your improvement of the means and opportunities for professional accomplishment, which the munificence of the city has opened to you, in this school.

A common fault of pupils, in all cases, is a want of independent mental activity—a contentment with the passive reception of instructions offered by the master, and an indisposition to self-instruction, which is the most profitable kind of teaching.

Knowledge earned is ever more permanent and available than knowledge purchased. You may be faithful to your teachers, by a punctual and attentive hearing of the established routine of Lectures; but you can hardly be faithful to yourselves, except by an assiduous appropriation, during the remaining hours, of the advantages offered in the Library, Laboratory and Dissecting-rooms.

Let me advise you especially, to devote a liberal share of these hours to select medical reading, by which you will become improved, at once, in general scholarship and professional knowledge.

I know of no way of becoming an accomplished medical practitioner, but by a diligent and discriminating perusal of 'the books.' It is very true, that they contain much that is unimportant, and some of them, not a little that is apocryphal and falacious; but it is equally true, that they contain much more that is authentic and indispensable to a complete medical education.

I say to you, therefore, gentlemen, read 'the books'—count it among the highest privileges of your collegiate pupilage, that you have access to a choice and extensive Library, by improving which, you may be able to compare the doctrines and precepts promulgated in your school, with the recorded wisdom of other masters, and to amplify the instructions of your Professors, which are necessarily concise and limited, by resorting to the copious commentaries of

their professional fathers and cotemporaries. It is easier to sneer at 'the books,' than to study them—to disparage their contents by wholesale, than to analyse, discriminate, and appropriate their excellencies, or to inculcate exclusively the results of one's own experience—vitiated, as it may be, by the perverting influence of system and theory, partial as it must be, in the case of the most favored individual—instead of those enlarged, and impartial views of medical doctrine and practice, which can be attained only by patient research, and a candid appreciation of the opinions and services of others.

The books that are most likely to mislead you, are the writings of systemists, composed for the purpose of sustaining some ingenious speculations, or illustrating the efficacy of some favorite and exclusive method of practice. But the tongue may be quite as mischievous as the pen, in propagating these partial, narrow, apocryphal instructions, and there is much less to be feared from the mute heresy of all 'the books,' than from the imposing dogmatism of a single popular teacher, who denounces research 'ex cathedra,' and abuses the confidence, or practices on the credulity of pupils, by inculcating his own conceits, instead of the settled medical doctrines of the day.

Read 'the books,' I repeat; but read them, as you should hear lectures, not with a passive acquiescence in every thing that is uttered; but, while entertaining it with respect and candour, which are due to all communications from sources to which we resort for instruction, submit it to the test of reflection, comparison and even controversy, so that when it is adopted, it may be received on conviction, and not on authority.

In this way you may read or listen without danger of being misled by the favoritism, sophistry or mistakes of the masters, and fairly appropriate to yourselves whatever is sound and valuable in their teachings.

