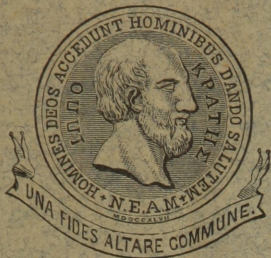


Thomson (W. H.)



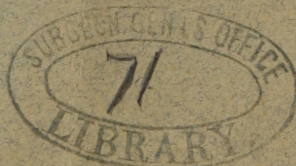
NEW YORK ACADEMY OF MEDICINE.

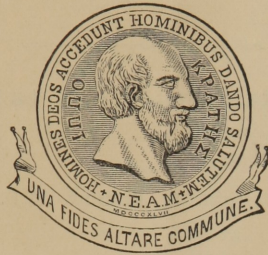
1878.

ANNIVERSARY DISCOURSE.

BY ✓

WILLIAM H. THOMSON, M.D.





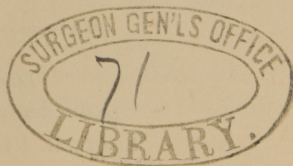
NEW YORK ACADEMY OF MEDICINE.

1878.

ANNIVERSARY DISCOURSE.

BY

WILLIAM H. THOMSON, M.D.



NEW YORK ACADEMY OF MEDICINE,

INSTITUTED, 1847. INCORPORATED, 1851.

12 West Thirty-first Street.

Regular Meetings, First and Third Thursday Evenings in the Month.

OFFICERS FOR 1878.

President.

SAMUEL S. PURPLE, M.D.

Vice-Presidents.

FORDYCE BARKER, M.D.,

WILLIAM T. WHITE, M.D.,

T. GAILLARD THOMAS, M.D.

Recording Secretary.

HORACE T. HANKS, M.D.

Corresponding Secretary.

JOHN G. ADAMS, M.D.

Treasurer.

HORACE P. FARNHAM, M.D.

Trustees.

JAMES L. BANKS, M.D.,

SAMUEL T. HUBBARD, M.D.,

AUSTIN FLINT, M.D.,

ISAAC E. TAYLOR, M.D.,

GOUVERNEUR M. SMITH, M.D.

Treasurer of the Trustees.

JAMES R. LEAMING, M.D.

Librarian.

LAURENCE JOHNSON, M.D.

EDWIN R. PURPLE, *Assistant.*

Assistant Secretary.

EDWIN F. WARD, M.D.

Statistical Secretary.

FRANCIS V. WHITE, M.D.

COMMITTEES FOR 1878.

Committee on Admissions.

EDWARD H. JANES, M.D., *Chairman*, T. MATLACK CHEESMAN, M.D.,
 MARK BLUMENTHAL, M.D., JOSEPH E. JANVRIN, M.D.,
 ELLSWORTH ELIOT, M.D.

Committee on Medical Ethics.

THOMAS C. FINNELL, M.D., *Chairman*, MOREAU MORRIS, M.D.,
 T. MATLACK CHEESMAN, M.D., JOHN C. PETERS, M.D.,
 OLIVER WHITE, M.D.

Committee on Medical Education.

JAMES R. LEAMING, M.D., *Chairman*, CHARLES C. LEE, M.D.,
 EDMUND R. PEASLEE, M.D.,* FREDERICK A. BURRALL, M.D.,
 ALFRED C. POST, M.D.

Committee on Library.

JOHN H. HINTON, M.D., *Chairman*, GEORGE BAYLES, M.D.,
 E. DARWIN HUDSON, JR., M.D., LAURENCE JOHNSON, M.D.,
 JOSEPH WIENER, M.D., *Secretary*.

Committee on Ways and Means.

JAMES ANDERSON, M.D., *Chairman*, WILLARD PARKER, M.D.,
 SAMUEL T. HUBBARD, M.D., JARED LINSLY, M.D.,
 JOHN G. ADAMS, M.D., STEPHEN SMITH, M.D.,
 SAMUEL S. PURPLE, M.D., GOUVERNEUR M. SMITH, M.D., *Sec'y*.

Committee on Building.

SAMUEL T. HUBBARD, M.D., JAMES L. BANKS, M.D.

S E C T I O N S.

Section on Surgery.

Regular Meeting, Second Tuesday Evening in the Month.

STEPHEN SMITH, M.D., *Chairman*, A. B. DE LUNA, M.D., *Secretary*.

Section on Theory and Practice of Medicine.

Regular Meeting, Third Tuesday Evening in the Month.

EDWIN F. WARD, M.D., *Chairman*, E. DARWIN HUDSON, JR., M.D., *Sec'y*.

Section on Obstetrics and Diseases of Women and Children.

Regular Meeting, Fourth Thursday Evening in the Month.

SALVATORE CARO, M.D., *Chairman*, HENRY E. CRAMPTON, M.D., *Secretary*.

* Deceased.

PUBLICATIONS OF THE ACADEMY.

The following Publications of the NEW YORK ACADEMY OF MEDICINE can be obtained of the Librarian, at the prices affixed; or the same may be had in exchange for medical works, etc., not already in the Library.*

TRANSACTIONS.

First Series.	Vol. I.	Pages 461.	}	Each.....	\$2.50
	Vol. II.	“ 454.			
	Vol. III.	“ 476.			
Second Series.	Vol. I.	Pages 420.	}	Each.....	\$4.00
	Vol. II.	“ 502.			

BULLETIN.

Vol. I.	Pages 588.	}	Each.....	\$2.00
Vol. II.	“ 562.			
Vol. III.	“ 470.			
Vol. IV.	“ 264.			

Single Parts of the above will be sold separately (when complete sets are not broken) at the rate of TEN cents for every sixteen pages.

ADDRESSES AND MEMOIRS.

Dr. John W. Francis' Anniversary Discourse.....	1847.	\$0 25
Dr. John W. Francis' Inaugural Address.....	1848.	10
Dr. James R. Manley's Anniversary Discourse.....	1848.	25
Dr. Valentine Mott's Inaugural Address.....	1849.	10
Dr. Alfred C. Post's Anniversary Oration.....	1849.	25
Dr. Isaac Wood's Inaugural Address.....	1850.	10
Dr. Joseph M. Smith's Anniversary Discourse.....	1850.	25
Dr. Thomas Cock's Inaugural Address.....	1852.	10
Dr. F. Campbell Stewart's Anniversary Discourse.....	1852.	25
Dr. E. Delafield's Biographical Sketch of J. Kearny Rodgers, M.D.	1852.	25
Dr. John H. Griscom's Anniversary Discourse.....	1854.	25
Dr. John Watson's Anniversary Discourse, “The Medical Profes- sion in Ancient Times”.....	1855.	1 00
Dr. J. M. Sims' Anniversary Discourse, “Silver Sutures in Surgery”	1857.	50
Dr. J. P. Batchelder's Inaugural Address.....	1858.	10
Dr. E. R. Peaslee's Anniversary Discourse, “The Progress and the Spirit of Medical Science”.....	1858.	50
Dr. Wm. C. Roberts' Anniversary Discourse.....	1859.	25
Dr. John Watson's Anniversary Discourse, “The True Physician.”	1860.	25
Dr. James Anderson's Inaugural Address.....	1861.	10
Dr. V. Mott's Eulogy on Dr. J. W. Francis.....	1861.	25
Dr. S. Conant Foster's Anniversary Address.....	1862.	25
Dr. John W. Draper's Anniversary Discourse.....	1863.	25
Dr. A. C. Post's Eulogy on Dr. Valentine Mott. Steel Portrait.....	1865.	50
Portrait of Dr. V. Mott, on India Paper. Small 4to, 50c.; large 4to.		1 00
Dr. James Anderson's Valedictory Address.....	1867.	20
Dr. Gouverneur M. Smith's Anniversary Discourse.....	1873.	25
Dr. John C. Dalton's Anniversary Discourse.....	1873.	25
Dr. D. B. St. John Roosa's Anniversary Discourse.....	1874.	15
Dr. Austin Flint's Valedictory and Dr. Purple's Inaugural.....	1875.	15
Dr. E. Darwin Hudson, Jr.'s, Anniversary Discourse.....	1875.	15
Dr. Wm. T. White's Anniversary Discourse.....	1876.	20
Dr. S. S. Purple's Inaugural Address on “Medical Libraries in N.Y.”	1877.	20
Dr. T. Gaillard Thomas' Anniversary Discourse.....	1877.	20
Dr. William H. Thomson's Anniversary Discourse.....	1878.	20

* The Library is open daily, free to the Profession and the Public, from 10 o'clock A. M. to 5 P. M., Sundays and Holidays excepted.

LECTURESHIPS FOR PHYSICIANS.

AN

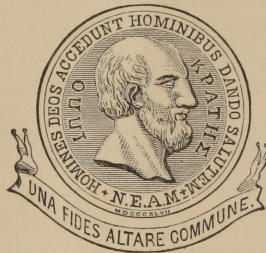
ANNIVERSARY DISCOURSE

DELIVERED BEFORE THE NEW YORK ACADEMY OF
MEDICINE, DECEMBER 5, 1878.

BY

WILLIAM H. THOMSON, M.D.,

PROFESSOR OF MATERIA MEDICA AND THERAPEUTICS IN THE MEDICAL DEPARTMENT OF THE
UNIVERSITY OF THE CITY OF NEW YORK.



NEW YORK:
PRINTED FOR THE ACADEMY,
12 WEST THIRTY-FIRST STREET.
1878.

ANNIVERSARY ADDRESS.

MR. PRESIDENT AND FELLOWS OF THE ACADEMY :

FULLY appreciating the honor conferred upon me by the invitation to address you on this occasion, it is yet with some diffidence that I have chosen to speak about one of the most widely felt trials which the active practitioner of our day is called upon to experience. Fortunately it is one of which the public is little aware, for certainly it would bestow but scant sympathy upon us for it. By outsiders the hard-working medical man is chiefly commiserated for the lot which denies to him even appointed hours for his meals or for his sleep; for a calling which is an enemy to all system, so that he cannot count upon one hour out of the twenty-four as certainly his own, or which he can methodically set apart against all intrusion. And yet, while this is too often the case with those among us who finally attain to what in other pursuits would be the measure of full success, namely, all the business that they can attend to, nevertheless we have a vexation of spirit of our own which often we cannot speak about unreservedly, lest it should sound too much like a confession—a difficulty which may be best illustrated perhaps, by the statement that there are but few physicians of fifteen or twenty years' experience in practice, who would not be glad to take advantage of a law or custom which would oblige the whole medical fraternity to go back, once every ten years, to their educational institutions, and take an entirely new course in all the branches, not excepting the most elementary ones.

To the uninstructed this doubtless might appear as an alarming admission that medical experience was different from every other experience, in causing a loss of knowledge instead of ex-

tension of it, similar to the forgetfulness of the dead languages which befalls the majority of our academic graduates. But though the real reasons are very different, and indeed redound to the credit, rather than to the discredit, of our science, yet they are none the less operative as one of the trials of our professional life.

This particular disadvantage under which we labor is fully brought out by the contrast of its well-nigh total absence in the case of our honorable friends, the members of the legal profession. To the lawyer, just commencing his career, the phrase "keeping up with his profession" has little meaning except that he strive to rise in it. For, if at any future time he find himself well established, he need not fear that he may be then quickly left behind, unless he continues moving along with that general movement of the whole body of his fellows, which knows no halt. A profession like the law, whose greatest lights and most studied authorities belong to past generations, need not change very materially, in its requirements, during the present lifetime. To invest in its kind of knowledge therefore, is a tolerably well-insured investment for permanence. In well-regulated countries, the judge dignifiedly settles down into his seat, much as a great ship in the China trade furls her sails as she drops anchor. The long voyage is over, the harbor is reached, with the owner secure, not only in the consciousness that such a cargo as hers can be obtained in no other way than by the identical voyage which she has taken, but what is equally important, that this cargo will always be in demand.

But with the physician, no such anchored future need be looked for. Instead of that, he must expect to find that much of the freight which cost him such trouble to collect and to stow away, is constantly becoming wholly unsalable or going out of market. He must even be circumspect how he displays his wares, lest he be ridiculed for their antiquated character. As well might he enter a circle of modern astronomers discussing a transit, with the talk of the old astrologers, as to mention laudable pus to those who are discussing the migration of white corpuscles. Indeed, while the old lawyer finds himself sur-

rounded by juniors who regard him with a deference most welcome to the human nature of its recipient, the wearied physician finds himself, at the corresponding period, uneasily looking round to note whether his juniors are visiting upon him the sin of his youth, when he asked about some predecessor, the formidable question—has he kept up with the profession?

But it is by no fault of his, nor is it a cause of reproach to him either, that the present standard works on any one of the primary branches of his science, may contain much which may be almost as new to him, and nearly as unfamiliar, as if they were written for some other branch of knowledge than the study of his lifetime. A busy practitioner can no more go over each department of his education at will, than he can be expected continually to renew his youth in all its parts. The most that is usually vouchsafed to his burdened hours is the perusal of the medical journal's reports of new studies or of fresh observations, and which often are about as full and as instructive as a morning journal's reports of the sermons from city pulpits.

But when the time comes for him to look into the text-books which he is to recommend his son to begin his medical education with, we may readily imagine the mental commentary which accompanies the turning over of the multitude of pages. We need only instance, for illustration, the last edition of a long and well-known book for students on General Anatomy. The second volume contains nearly eight hundred and fifty densely printed pages, and as he scans the mere enumeration of the Textures of the Body, he finds their arrangement and forms about as different from what they were when he first studied their grouping, as they would have been if they were the crystals of a kaleidoscope, kept agoing by clock-work. Blood it seems is to be classed among the tissues, because the physiologist likens it to cartilage with its matrix liquefied, and he may well wonder whether he has read much about the blood before, when, besides the lengthy list of its components, he is also told that it ought not to show the presence of fibrin in the body. Under the head of Physical Properties, he finds himself amid the distinctions between

crystalloids and colloids, and under Vital Properties are sentences which tell of intracellular protoplasm, noncellular plasmodia, and intercellular nondescript. Should he now wish to turn to the firmer ground of his familiar solid tissues, the constant recurrence of cuts of magnified diameters are enough to indicate to him what a comparative stranger he was in his student days to the new world discovered everywhere by the microscope; the climax of surprise being nearly reached when he reads that a serous membrane, like the pleura, may be regarded as resembling more than anything else, a lymphatic gland unfolded and spread out thin.

But even the metamorphosis of a serous membrane into an unpacked lymphatic gland, is simplicity itself compared with the maze into which the chapters on the Nervous System will lead him. Beginning with the section on Minute Structure, and ending with Meynert's Terminology, is an appalling mass, not alone of anatomical details, but also of supposed physiological relations of those details, which seem collected for the one purpose of mockery at the capacities of the human memory.

If such be some of the new aspects that develop at the very threshold of the modern temple of Esculapius, what must the case be in those advanced studies which unfold the mysterious processes of Disease? The adequate understanding of recent pathology, in fact often requires, among other things, a familiarity with the most abstruse questions in embryology itself. Thus we are told, in a late production, that the explanation of the structure of an osteo-sarcoma is, that the round cells of the normal medulla are the direct descendants of the temporary cartilage cells, fertilized by white blood-corpuscles, and as these tumors originate in a perverted growth of the round cells of the medulla, therefore some of these cells in the body of the tumor have a tendency to revert to their normal function and form bone, while others are incapable of doing so, in proportion as their perverted or diseased properties preponderate over their proper hereditary action.

The truth is, that from the nature of the case, the extension

of medical knowledge has become so great that the time has long passed since it was possible for any one man to know all that is known about the human body, either in health or in disease. And yet we seem still to be far from the time when our knowledge in any one department may be hoped to approach completion. Each generation of medical graduates, therefore, leaves off in its instruction, much like the readers of a story in a magazine which is not completed in that number, being obliged afterwards to depend upon the allusions of others, who have been privileged with the continuation of the story, in order to hear how some of the interesting characters turn out, how some of them get buried, and what new ones are introduced.

But if any men have reason to complain of this hardship, it is the members of the American medical profession which must feel it the most keenly, owing to the consciousness of the majority of them, that they never heard fully even the beginning of the story, namely, when they were first students of medicine. New beginnings are not always the best beginnings in every respect, and so we find that American processes of education in starting with scarce any inherited regulations, have missed some of the most advantageous customs of European student life, chief among which is deliberateness in the preparation for professional pursuits. Thus in former times, the traditions of all European institutions of learning exacted of the medical student a very prolonged and patient apprenticeship, although the whole body of medical knowledge, and of medical literature, was then of the most modest dimensions, compared with their formidable proportions now. We may adduce here in illustration the original Statutes of the University of Vienna.

After some very proper remarks upon the worth and responsibilities of our calling, in which they say "that medicine is a truly rational science, both as to its theory and its practice." A pastor, weakly and inefficient in body, injures the Church much. Dukes, counts, soldiers, and the common people, who should serve to protect the State, are, if they lose their health,

entirely useless. It is a recognized truth, and on this we lay most stress, that medicine cares for men even while yet in their mother's womb, and from their birth, through all their life, to their death, both by preserving and curing.

Therefore, it is directed that the candidate for a baccalaureate must have heard lectures upon the work of Joannicius; also the first or fourth of the canon of Ibn Sina, the Arabian, and some work on practice, as that of Er. Rhaji Almansor, the Arabian. If he is a master in arts, he must have heard lectures in the medical faculty for at least two years; if a mere student, for three. He must be twenty-two years old, born in wedlock, and not deformed in body. If princes or others, whoever they may be, shall apply for a degree for one unworthy of it, reference shall be made to the statutes in refusal, and to the oaths which have been sworn by the faculty. A candidate for *license to practise*, if he has a degree in arts, shall have heard lectures on medicine for five years, if not a graduate, for six years. If then he is found fit in knowledge and character, without canonical impediments, and not too effeminate of countenance, he may receive his degree at the age of twenty-six in exceptional cases, though in strictness, not until twenty-eight.

In accordance with such traditions, the European student of medicine expects at the start to tarry long over his curriculum, for very full and long it is—witness the hundred and ten courses of lectures delivered at present in the medical department, as we would term it, of the University of Berlin, including, among the rest, a lectureship on the Errors of Modern Medicine! With us, however, except in rare cases, our medical schools partake of none of the great, though subtle, powers of University life. They are chiefly isolated and strictly private institutions, generally owned by a portion of their faculties, and less known to the general public, and certainly less cared for, than many second-class female seminaries. As their support is wholly derived from their pupils, the exigencies of the average medical student's purse prescribes the length of the course of instruction. The result is, that the young mind must be stored as rapidly as possible,

with the effect of rendering our five months of medical lectures, at the rate of eight a day, altogether too suggestive of the five minutes for refreshments at our railway stations, where some of the most varied viands are bolted simultaneously, while much that is paid for is left forever behind.

It is not at all consonant, however, with our present purpose to enter upon the subject of the deficiencies of primary medical education in our country, and our allusion to it is simply to illustrate the fact that one of the most important wants of our profession now, is the provision of some means whereby those who are fairly engaged in the engrossing pursuit of medicine as a livelihood, may yet be enabled to keep their proper places in the rapid march of both our science and our practice. We not only do not begin as well as we should, but after we are fairly engaged in our daily business, we are worse off than many of our European brethren in those facilities for *adult* education, as we may term it, which is nevertheless an indispensable requisite for either duty or progress. Such education, moreover, can be imparted only in accordance with the conditions of a practising physician's necessary routine of work, for this of itself involves a living expenditure which leaves little enough to spare for extra demands. It is indeed not fair to charge him with indolence as the reason for failing to keep with the front of the general advance. It is true that he can obtain now both better books and better periodicals than ever before; but what man is there among us, who, perhaps after years of much longing to get a practice, has not, after gaining his aspiration, made the unwelcome discovery that his practice has also got him? When his leisure hour therefore arrives, it is also the hour of fatigue, and the flesh protests against the spirit which moves him to take up the last weighty folio. Any studious course of medical reading implies not only the time, but also the mental state for it, and both may be felt as totally inadequate to the task of beginning, with a lively hope, the perusal of our encyclopædic histologies or pathologies.

The practical question then arises, how can these needs of the active profession be met, for met they should be in some

way or another? In the first place we may shortly dismiss the suggestion that our medical schools might be made to answer this purpose. If the multiplication of such institutions, for the profession of the whole country to share in, the wide scattering of their lights, if this could do it, then the world can show no country so specially favored as ours is in this respect. There is scarce a city of any size in the Great Republic that has not at least one, and even some villages can boast, if such a thing is ever done anywhere, of their medical colleges. But however excellent many of them may be, and however well up to the requirements of our times in the instruction which they afford, yet our schools are not, and never will they become, schools for both students and their preceptors at the same time. The wants of the veteran are not to be provided for in the same way as the wants of the beginner, even if they be the same wants. There is a manifest and practical unfitness in any plan which would invite to the lecture room, men and boys equally. Moreover, the actual facts of the case are, that the lecture courses of our colleges are almost universally ill arranged for the pupils which they do have—for the tyro, who is just learning the names of the cranial foramina, hears just the same lectures as the student who is ready for his examination.

The creation of medical societies is undoubtedly intended to subserve the purpose which we have in mind, and in the case of large cities, notably in our own, they would appear to be admirably calculated as media for the interchange of medical gifts and acquirements. With our hospitals and educational institutions in as great number, variety, and of as undoubted excellence as many of them are, it would seem that we have here but to call our forces together to have every one that will, share in all the treasures of medical knowledge. And it must be said that our associations are well constituted, both as regards their aim and their organization, for awakening an interest in our scientific progress, and in calling out examples of it in the papers, and discussions which form their proceedings. But the experience of medical societies, however, is the same the world over. If they depend solely upon the papers that

are read before them, from time to time, for the interest which the profession will take in them, then the life and the activity of the association are of an intermittent and fluctuating character. Good single papers that can be read through at one sitting, are necessarily not to be expected or depended upon uniformly, and are, as likely as not, to be followed by weak or indifferent productions. Something more than occasional advantage is requisite to insure a steady and therefore effective, influence, which will tend to crystallize about a medical association the talent of its ranks, as well as call out the exercise of it to the mutual advantage of the members.

A suggestion of one of the ways in which a medical society of high standing may afford an opportunity for conferring a great benefit upon the profession of its locality, and thus by reflex influence increase its own efficiency and prosperity, may be deduced from instituting a hypothetical case. Suppose a gentleman has devoted himself to a particular investigation, whose importance would ensure a wide-felt interest in any well qualified exposition of the subject, where can he turn in our country to find his proper audience? Not to the medical society as at present organized, because the limits of one, or at most two, papers or essays read at an ordinary meeting, impose conditions which practically neutralize any such design. The experience of the civilized world in fact demonstrates, that for a systematic exposition of any scientific subject, the form of the lecture is simply indispensable. But the entire proceedings of a society meeting, from the coming to order and reading the minutes, to the motion for adjournment, are as foreign to the natural belongings of a lecture as can be imagined. While therefore, in a few exceptional instances, medical societies have requested some detailed statements or addresses by distinguished individuals on the subjects with which they were specially conversant, yet such proceedings have never been according to any settled system. In most instances, therefore, where men of distinction have wandered, to New York at least, they have been secured by some one of the medical colleges, and the profession has been invited there to hear them. The disadvan-

tages of this method for reaching a truly representative audience need not be stated. Hence, there being no place, so to speak, for a lecturer to physicians, instead of a lecturer to students, therefore there are no such lecturers.

But is there no want for such lecturers? We can only reply that considering all the elements of the case, it is a matter of wonder that both the place and the lecturers have not been in existence long ago. The profession of New York has now, and long has had among its fellows, men qualified to fulfill all the requirements of such a post on the one hand, and, on the other, there are great numbers of us who would be only too happy to avail ourselves of the privileges thus afforded. There is not a department in the wide field of medical research which is without its representation of New York workers. If we need to know how much has been gained in any direction, or what the drift of the best opinion may be relative to any question of general interest to us, we have those among us who can be called upon to make us acquainted with all that is worth knowing thereon. That a truly representative man, moreover, should fail here of an audience is very unlikely. It matters not how gifted a modern physician may be, or how extensive his learning, yet there exists no physician now who has not a great deal to learn still, and the certainty is, that the greater his advance, the more welcome to him will be any opportunity that enables him to hear a few good lectures on a given subject, rather than that he should be obliged to read a good book on that subject.

For we need only ask of some recognized leader among us, and he will tell us that there is nothing so alarming at the present day as the rapid increase of the difference between the amount of medical knowledge which one can buy for the library shelf, and the amount that can be stored in the head. Of the making of books there appears to be no more end now than ever, and if we can keep up only by patronizing the publisher, then nothing can be more partial than the medical knowledge of the best among us. On this account we must have recourse to other methods, in part at least, for informing ourselves of that of which we ought to know something, and so far it must

be said, that we have no better process practically than to have one of our fellows tell us about it, face to face, with all that wealth of language which the living voice and the living presence can convey, but which is inevitably missed from the printed page.

A well-trained lecturer possesses the immense advantage over the author, of being able, by the conditions of his task, to arrange the different parts of his subject into the proper perspective that will allow of a rapid view of the whole. His work resembles that of a painter, who groups the elements into a picture which needs only to be seen to be remembered. The author, on the other hand, is more like the map-maker who puts down every detail according to the scale of measurement. But how often it is that the picture gives the mind that which it can carry without mistake for years, while the more methodical map has to be referred to again and again, for that which seems somehow to adhere only to paper rather than to be transferred to the mental library.

In the interest, therefore, of our fellows, and of each of us individually, it would seem highly desirable if some centre could be provided for true professional education as such, of a more systematic kind than the means hitherto afforded by any of the agencies which we have had among us. Without presuming, however, to advocate it as a measure, I would nevertheless beg leave to suggest whether the New York Academy of Medicine may not at some time consider the advisability of instituting, in connection with its other functions, one or more endowed lectureships to be delivered to its fellows and to the profession generally, which should consist of courses of three, six, or some such limited number, of discourses upon subjects of true professional interest. The relations of the Academy to the whole body of the profession are such that its fitness for this purpose would be cheerfully recognized on all hands. Moreover, experience would seem to show that official or quasi-official organization, working through recognized and definite methods, succeeds better than simple individual association, for the promotion not only of scientific acquisition, but also for the diffusion

of scientific knowledge. Centralization, in other words, whatever its evils may be in social or political spheres, is always advantageous in the working world of science. About the old and long-established professional associations, therefore, to be found in Europe, there collects an attractive prestige which stimulates many to take part in their proceedings from the honor alone which attends upon a share in their privileges.

One of the best illustrations of this fact which we would now cite, is to be found in the advantage which the medical profession in London possess in the endowed lectureships connected with the Royal College of Physicians and the Royal College of Surgeons. By means of a number of standard medical treatises of great variety and of value, which have grown out of them, we in America have become familiar with the names of the Lettsomian, Croonian, Gulstonian, and Lumlein lectures. Both as regards the objects of their first institution and the connection in which they are given, these lectureships seem to fulfill the ideal of that which we have been advocating as desirable among us. In the first place they are delivered before corporate medical bodies of such standing, and authority as well, that the simple fact of the invitation is equivalent to the conferring of a life honor. Moreover, as these bodies are in no sense identified with any particular medical training-school, but, on the contrary, are the highest representatives of the profession of Great Britain, the whole aristocracy of merit can be, and is, called upon to come forward, and through these opportunities, to address their fellows upon the subjects of which they are recognized masters. It would seem as if no better system could be devised than this, whereby the scattered and multitudinous investigations, observations, and discussions in the world of medicine, could be more easily and at the same time authoritatively brought before the medical public.

The history of the foundation of some of these lectureships bears out the familiar fact that no monument can be so lasting, and no means be so sure for perpetuating the memory of the passing life of an individual, as the provision for some future good to one's fellows, but above all, when that provision

is for aiding others in the acquisition of knowledge. The names of these founders are more widely known, with some of them centuries after their death, than they were ever known in life. In 1684, Dr. William Croone devised by his will a lectureship to be delivered before the Royal College of Physicians, to which, however, he tacked a condition of a sermon also to be preached, for the edification of the fellows, at the church of St. Mary-le-Bow. The property, then known as the King's Head Tavern, in Lambeth Hill, was devised in trust to supply the funds. Among the many instances that may be named from that early date of Croonian lectures which have marked the different epochs of medical progress, we may cite the work of Murchison on Diseases of the Liver as one of the latest examples of the continued good fruits of a will made so long ago. The lectureship of Dr. Theodore Goulston, however, dates still further back, and to him therefore belongs the great honor of first devising this means of a good that prolongs what, in Dr. Goulston's case, was a remarkably good life. Dr. Goulston died in 1632 and by his will bequeathed to the college £200, a far larger sum in that day than the same now represents, to purchase a rent-charge for the maintenance of lectures to be delivered by one of the four youngest doctors of the Royal College of Physicians. A dead body was, if possible, to be procured, and two or more diseases treated of, upon the forenoons and afternoons of three successive days, or six lectures in all. This provision for young doctors, however, practically assures, owing to the constitution of the Royal College, only men who are in middle life, but at the same time in the full vigor of their professional activity, and the long list of distinguished men, and of well known medical treatises which have grown out of the Goulstonian lectures, are enough to supply all the arguments that would be needed to stimulate others to go and do likewise.

One of the finest characters that could adorn not only the ranks of a particular class of men, but of a race of men as well, was that of the wise and good old Quaker physician, of London, John Coakley Lettsom. With a modesty characteristic of him, he founded, in 1773, the great prize of the Royal College

of Physicians for Medical Monographs, but which he insisted should be named not after himself but after Dr. John Fothergill. The record of the good works of Dr. Lettsom, of the various enterprises for the relief of the poor and the sick which he initiated and carried through; of the improvements in the construction of hospitals, and of his, the first, society for the reform of fallen women, would by itself be enough to make men grateful for such an example of their human kind. But Lettsom was, above all things else, a physician; and he was incessantly occupied with projects for the advancement of medical science. It was by him that the Medical Society of London was founded, and its constitution drafted, to serve as it has done, as a model for subsequent medical societies. As might be readily imagined, he was not slow to follow the good example of Drs. Goulston and Croone before him, by founding very liberally the course of the Lettsomian lectures, with the further improvement, I believe, of not hampering them by any conditions other than the good conscience of the lecturer would impose. In this respect, indeed, all those who meditate enterprises of the kind in the future might profitably learn a lesson. It is most unfortunate to hedge in by present conditions the future conduct of our successors.

The history of endowed lectureships indeed abounds with many whimsical contrasts between the conditions laid down by their founders and their fulfillment in subsequent times. At present the fellows of Harvard University, who I believe are all Unitarians, are obliged, four times a year, to have some one come and fulfill to all the students the duties of a Dudleyn lecturer. The first lecture of this course must be on the Evidences of Natural Religion, the second on the Evidences of Revealed Religion, the third on the Errors of Episcopacy, and the fourth on the Damnable Errors of Popery. The original provision for the reward of such discourses was a barrel of wine and a suit of clothes. In the world of science it may be supposed that we need fear no such coming amusement at *our* modes of thought. But some medical lectureships have narrowly escaped being wedded forever to the use of the lancet,

or to some now formalized theory of practice. A broad, unfettered provision, calculated to act only towards unfolding the acquisitions of our science and art, is all that we need, leaving to posterity the right performance of its own duties.

In conclusion, we may say that a measure of this kind will have the incidental advantage of promoting an American medical literature. Besides the already ascertained result that such lectureships in Europe have been the means of bringing out some of our best monographs, and even systematic treatises, they act as a stimulus, much needed in our country, to our best informed men, to address a wider audience than obtains only in the rooms of our medical colleges or at our medical societies. It is a common reproach that America produces so few standard works, but one operative reason undoubtedly is that few of our medical men have formed the habit of addressing their own equals at length on any topic. Many a teacher who enjoys expounding his themes to students, yet shrinks from meeting the public, even at the safe distance of a stenographic report. But, once fully established and properly supplied, I doubt not that a New York Academy lectureship will not only be productive of a greater interest in its other connections, but also bring out much of the proficiencies and the acquirements of the New York profession in permanent forms, to its own lasting credit and that of the American profession generally.

