

nize that it is often dangerous to administer morphin to a nephritic patient, and yet a large amount of this morphin is re-excreted into the stomach and never was or would be excreted by even healthy kidneys, so that the mere holding back of the morphin by the kidneys is not the whole reason for its intense action. On the other hand, we know that in liver malfunction morphin is badly tolerated.

The high arterial tension of nephritis, and especially of uremia, is doubtless due to the toxins in the blood causing sufficient irritation to make the blood vessels contract. Many of these irritants are reabsorbed from the intestine in conditions of fermentation and putrefaction, one more reason for the proper cleansing of the bowel with cathartics and the prevention of further fermentation by a restricted diet. When constipation or maldigestion is in evidence in kidney disease the liver quickly is more and more disturbed and its ability to produce urea is decreased, the ammonium salts increase, and uremic symptoms are the result. Also, in this sluggish condition the bile is not properly liquid and more or less bilious congestion takes place. There are headaches from the bile irritation of the brain, the sclerotics and skin become yellowish, and the skin, endeavoring to excrete irritants from the blood due to the insufficiency of both liver and kidneys, becomes irritated, itches and may show urticarial disturbance. From the scratching, eczematous conditions occur, and if insufficient baths are taken and no massage is done the skin becomes dry and can not do its normal excretory work, and more trouble and irritation is thrown on the kidneys, and uremia is soon the outcome.

The length of time, in uremia, that the diet should be nothing but water, and hot baths should be taken, and saline purges given, depends entirely on whether the symptoms become better or not; it may be twenty-four hours, it may be forty-eight; but if no improvement occurs in two days, the case is probably hopeless. If there is improvement the diet should be such that there is a minimum amount of uric acid formed and a minimum amount of urea, and again we are aiming at the liver function. Intestinal fermentation may be prevented by the administration of sodium glycocholate in half-gram doses, and perhaps no bowel antiseptic is safer, considering the kidney defect.

Cardiac tonics are rarely indicated when uremia is pending or present. On the other hand, vasodilators, as nitroglycerin, are often of great value. Too great lowering of the blood pressure, however, in the chronic interstitial nephritis of old age should not be attempted, and would be pernicious if continued. The liquids and sodium chlorid given should depend entirely on the character of the circulation and whether or not there are edemas.

Whether or not there is an internal secretion of the kidneys, I have certainly seen life prolonged in nephritis by feeding fresh kidneys. I have not had much results from the nephritin tablets. Thyroid extract certainly aids in preventing convulsions in uremia, and is, I believe, the most efficient preventive of that symptom.

If there is severe pain, especially in the cardiac region, morphin must be administered though theoretically contraindicated. If there is coma and other symptoms of cerebral pressure, spinal puncture may relieve them, but is rarely of any avail.

If we have positively seen a case of chronic nephritis progress gradually from bad to worse, I do not believe it justifiable to use superhuman efforts to prolong life

for a day or two. On the other hand, in uremia, when we are in doubt as to how far the pathology has proceeded, and in acute nephritis, we should do venesection in amount sufficient to decidedly lower the blood pressure. If the patient is debilitated and anemic, this venesection may be immediately followed by a small saline transfusion.

In acute nephritis, and when uremia is pending in chronic nephritis, and during uremia, high colon washings with physiologic saline solution should be done several times a day, and as hot as can comfortably be borne. The temperature may be 110 F., with a continuous return flow. A rectal tube can be passed a short distance, and with the hips elevated the water will flow readily into the colon. This hot colon douche will often relieve kidney congestion. If there is no edema, some of this solution should be left in the colon, and is one of the most efficient diuretics.

We may sum up the treatment of uremia as absolute muscle rest; the withholding of all food, not even giving milk; administering very little water by the mouth even if there is no edema, as the ability of the kidneys to excrete water, even, is often abolished; frequent colon irrigations of hot water, leaving some in the colon for absorption if the blood pressure is low and there is no edema; the administration of thyroid; hot sponging of the skin; venesection in most cases, repeated if necessary, as it has been shown that an ounce of blood will remove more toxins than eight or nine times that of fluid feces or than quarts of perspiration; and the administration of nitroglycerin if the pulse tension is high. If the uremic period is passed and the kidneys again begin to secrete and excrete, the diet and life of the patient becomes of primary importance, but that is not the object of this paper to discuss.

THE PHYSICIAN AND THE NEWSPAPER.

E. E. MUNGER, M.D.

SPENCER, IOWA.

There has always been a wide difference of opinion between physicians and newspaper men as to the propriety of advertising. There has been occasional newspaper comment relative to the much talked of, but little understood, Principles of Ethics. It has been assumed that it militates against the advertising function of the newspaper because one of its principles states that: "It is incompatible with honorable standing in the profession to resort to public advertisement or private cards inviting the attention of persons affected with particular diseases; to promise radical cures; to publish cases or operations in the daily prints, or to suffer such publications to be made; to invite laymen (other than relatives who may desire to be at hand) to be present at operations; to boast of cures and remedies; to adduce certificates of skill and success, or to employ any of the other methods of charlatans." The true physician has nothing to advertise except that which is found in the simple card which announces his presence and location in the community.

Physicians are the guardians of the health and physical welfare of the people; newspapers are the molders and often the creators of public opinion. The medical profession, personally, and the newspaper fraternity, through the press, come into closer touch with the community than any other profession or calling. No other two societies of men have so keen an understanding of

human nature and its desires, passions, virtues, weaknesses and faults. The relations of the physician and the newspaper to the public embody great reciprocal obligations and rights.

Recently the press has been giving its attention to "graft," which, in all of its ramifications in the business and political fields, does not equal the graft that has resulted from the advertising of nostrums and quacks. Worse than graft are the wreck and ruin that are traceable to certain classes of advertisements, for an estimate of which one would have to journey through all the eleemosynary institutions of the land, making diligent inquiry as he traveled, listening to the story of the inebriate and dope fiend and their progeny. He would have to learn from the brothel the story of mistakes corrected by crime advertised for sale between the lines of crafty advertisements; but he would have to wait until Gabriel blows his trumpet for the heart-rending tale of the innocents—and their name is legion—whose lives were sacrificed in the dim gray dawn of their early existence. He would have to learn from the physician the amount of suffering, the number of surgical operations, blind eyes and other deformities, directly and indirectly traceable to advertisers who have failed to make good their guarantee to cure certain diseases in from ten to thirty days—a guarantee which every conscientious physician knows to be impossible of fulfilment.

Can not the press be made to realize that it is the ally of fraud and deceit when used as the mouth-piece of the get-rich-quick concerns that guarantee to cure the entire list of human diseases with some mysterious decoction of roots and herbs?

How long will the American press, with a few notable exceptions, continue to contribute inches to the campaign against the great white plague and sell columns to the men who talk about that "hacking cough" and promise to cure consumption with some wonderful new discovery?

The fraud of these advertisements is concealed in their seductive language, which appeals to a credulous and suffering people; when read by the side of news items and high-class, legitimate advertising and in connection with the editorial comment that sustains governments and so often determines their policies, the claims of the advertisers become truths to many because they are substantiated and verified by the very fact of their appearance in the medium which sows them broadcast.

One wonders what the paragrapher's pen would write should he see in his paper an advertisement setting forth that "L. E. Gall, a graduate of the leading law schools of America and Europe, with ten years' experience in the supreme courts of both countries, is now prepared to look after the interests of all who may require his services. Special attention given to criminal and civil cases. He guarantees acquittal in all cases of murder, infanticide, grand and petit larceny, embezzlement, forgery, blackmail, libel and slander. Divorces secured in two weeks. No publicity. Suitable homes provided immediately after acquittal. He was never known to fail. None of the lawyers in ordinary practice has the facilities for handling these cases that he has. Call at once and be convinced. No charge for being convinced."

It has been said that all the quacks do not advertise. Just as there are "yellow journals" there are "yellow doctors," and for ways that are dark and tricks that are mean they are most peculiar. That each calling contains members with whose services society could well afford to

dispense should be apparent to all. It may be confessed that physicians themselves have not been without blame in the matter of quackery, for had there been less quibbling between schools of practice, whose differences are now fast fading away, the way would not have been prepared for the endless string of charlatans who have found it easy to ingratiate themselves into the confidence of so many of the people.

Let medical men continue to guard the public health, but let them put away their petty jealousies and frivolous contentions that open the gaps through which pretenders enter to mystify and cajole some of the most intelligent. Let honorable physicians tear down the walls that separate them; let them enlist the newspapers in a righteous cause and be coadjutors in the emancipation of suffering humanity from a thralldom which has already enslaved too large a part of the human family.

Every one who reads current medical literature even cursorily must be impressed by the frequent demands for a "campaign of education as the only means of fighting the nostrum and kindred evils." There is eminent authority for the statement that "it is the duty of physicians, who are the witnesses of the enormities committed by quackery and the injury to health and even destruction of life caused by the use of quack medicines, to enlighten the public on these subjects, to expose the injuries sustained by the unwary from the devices and pretensions of artful empirics and impostors. As good citizens it is their duty to be ever vigilant for the welfare of the community and to give counsel to the public in relation to matters especially appertaining to their profession."

Living as we do in a nation of newspaper and magazine readers, are we discharging our duty to society when we fail to make use of these large and powerful educational institutions? If fraud can thrive and prosper with the press for its hotbed, can it be that truth can not be planted there, to flourish and grow until the former is blighted and killed by the inherent tendency of the latter to prevail?

Instead of being so very chary about newspapers might it not be advisable to use a little of their space for the education of the people—for the exposure of fraud and the teaching of the plain a, b, c's of health, free from technical phrasology—and thereby counteract, for the present, and ultimately wipe entirely out, the columns of rot with which so many papers are filled, setting forth the great efficiency of some nostrum? It is one of the crimes of the ages that any of the great discoveries made by men of science, who have labored unselfishly, without hope of reward, and given the fruits of their labors to humanity, should be prostituted, as they are, by mendacious charlatans. Witness the x-ray, with its great usefulness in a limited field of application and in the hands of those who are honest and sufficiently competent to make use of it, becoming the chief stock in trade of quacks. There is not sufficient capital on earth to enable these adroit, advertising frauds, these execrable advisers and mercenary monsters, to ply successfully their nefarious trade against a well-directed campaign of education. To be sure they will angle, possibly with new bait, but the fish will have learned to recognize the line from which dangles the hook with its dainty allurements.

The public should know that behind most of the cunning advertisements and reading notices are hidden fraud and deception, and that back of these are base pretenders, who trifle with life and disease, who prey on the

unfortunate and feed fat on bodily ills. It does not seem possible to remedy these evils through medical journals alone. The people must be reached. "The members of the medical profession, on whom has ever been enjoined the performance of so many important and arduous duties toward the community," will never have discharged their full duty until they have educated the people to that degree of intelligence in matters medical which shall convince them that they can receive with safety neither advice nor treatment from any other than the duly qualified and unpretentious sources where they are now wont to appeal after they have been bankrupted in health and bled to financial death by the conscienceless mountebanks into whose hands they have fallen.

Even the base pretenders themselves appeal at last to the medical profession for aid. Witness the spectacle of John Alexander Dowie, after having expended all the vigor of his powerful body in heaping abuse and vilification on the medical fraternity, appealing to the physician and beseeching him to hold his tottering old frame together while he endeavors to regain possession of his lost and ill-gotten gains to traduce anew his benefactors.

There is but one medium through which the people can be taught; it is the same medium that has furnished the instruction for present intolerable conditions; it is the greatest educational medium for the masses extant; it is the medium most eagerly sought and perused; it is the cheerful companion and indisputable criterion of almost every fireside—the newspaper.

How shall we make use of this medium? Certainly not by abusing it, for it has not been shown that even the great wisdom of the newspaper fraternity is sufficient to enable them to detect the cunning cupidity of some of their advertisers. Let the American Medical Association establish a Bureau of Education for the dissemination of such knowledge and advice as will enable the people of this country to act intelligently in matters pertaining to their own health and lives, thereby making it possible for them to assist the medical profession in their efforts to prevent disease, relieve suffering and prolong human life. Organized as this powerful association now is, this bureau would be in affiliation with each state and county society and there could be such a division and subdivision of the labor incident to the writing, editing and distributing of suitable articles for publication as would make a systematic campaign of education practicable. Organizations like the Austin Flint-Cedar Valley Society should also be affiliated with this bureau. Every decent newspaper in the United States would cooperate in this work by giving space in its columns to be filled with true information regarding health and everything affecting it. News of this kind would be of surprising and surpassing interest to readers. With the friendly aid rather than the opposition of the press more could be accomplished in a short time in the way of creating public sentiment in favor of certain reforms and in matters of legislation than can be accomplished by medical journals in the next twenty-five years.

As a result of public sentiment, created largely by the medical profession and the untrammelled press, the pure food bill has been enacted into law. In order that this law may become effective state laws must be made to conform with it. There is still work for the profession and the press. There is enough instructive, constructive and destructive educational ammunition stored up in THE JOURNAL arsenal of the American Medical Association, to say nothing of the other medical journal powder houses scattered over the country, soon to create public

sentiment that will demand the needed state legislation if it be judiciously fired through the columns of the American press.

I will not be accused of anything worse, perhaps, than being a dreamer for expressing the belief that it is possible to carry on such a campaign of education as will result in public sentiment demanding what the physicians have so long striven for—a Department of Health with a representative in the Cabinet of this Government.

The *Ladies' Home Journal*, *Collier's Weekly* and a few other magazines and newspapers have recently taken a decided stand in opposition to the nostrum evil. Some papers have refused contracts for the most obnoxious advertisements. Editorially a few of the reputable newspapers are supporting the medical profession in its campaign against disease, food adulteration and quackery. To all of these who espouse our cause a vote of thanks is due from every medical organization on behalf of the American people, who will profit most by the press' championship for reform.

In this connection, and in view of courtesies extended by the medical profession to the ministry, the following item taken from a telegraphic report of the Presbyterian General Assembly for May 21, 1906, is of passing interest: "The 'quack medicine overture' was handled by the committee on bills and overtures, which recommended no action, as the church papers are private enterprises." Not even a resolution by a great body of righteous people condemning this most heinous thing. Pray tell us who "handled" the committee? And who "handled" the "handle" that "handles" the "private enterprise"?

The Chicago *Sunday Tribune*, in its issue of May 20, 1906, published a significant editorial with this caption: "The Preacher and the Newspaper." Quoting Bishop Fallows, it says: "The minister should use the newspaper as one of the most effective agents for assisting him in his chosen work." Are we better than the ministry, or are we worse, or what is the reason that we should entirely avoid the newspaper? By substituting physician for minister the rest of the article is apropos: "Modern society, with fast mails, telegraph, telephones and improved mechanical devices has developed the newspaper into a daily encyclopedia of information, illustration and inspiration which (should) prove one of the greatest aids in the general improvement of moral, social (and health) conditions toward which the physician ever strives. The individual physician makes his voice heard only by a limited number. The newspaper, with its agencies for the transmission of important items to all other journals of its class, makes its influence felt round the world. . . . It is easy to make a sweeping condemnation of the newspaper if one takes its records of sin and crime (and some advertisements) for a standard and talks of the effects of this publicity of human wickedness. It is easier to prove that the press has been a most powerful factor in bringing about the great reforms which have marked epochs of civilization. With the friendly assistance of the press he can make his effort for humanity far more effective and so do more for the cause of his Great Master."

Will the newspaper aid the medical profession in such a campaign of education in view of the probable financial loss it means to them? Let the question be answered by an extract from another editorial printed Jan. 23, 1906, in the same newspaper: "There are advertisers who labor under the belief that they can silence newspapers by drugging them with advertisements, or punish them,

when outspoken, by withdrawing what they call their 'patronage.' No newspaper worthy of the name will be influenced by advertising conferred on it or withheld from it. Attempted terrorism will simply make an independent newspaper more determined to pursue a course which it believes to be right. That is the policy *The Tribune* will insist on if it shall never print another line of . . . advertising from now until the crack of doom. When *The Tribune* sells space to advertisers it does not sell its convictions."

It will require more time than is at the disposal of the present generation for physicians to counteract the influence now exerted by quackery through the medium of the press, unless they adopt some other method than that of simply dropping a word of advice into a wavering patient's ear as he hurriedly passes through the office.

With the newspapers as the allies of the physicians the malady can be eradicated, root and branch, and the pen be again proved mightier than the sword. The education of the masses will remedy the evil, and the newspapers will "do more for the cause of their Great Master" and further establish their title to the claim of being "the great factors for shaping public opinion, advancing reforms and accomplishing results," when they no longer add to the already alarmingly large number of hapless human beings, which they have steadily, but in a great measure innocently increased; who are being tossed about on this merciless, mercenary sea of quackery from one wave to another—now on the summit of hope, soon in the trough of despair, pausing at each port of promise, only to weigh anchor and drift out on the boundless ocean of symptoms, anxiety and fear and on into the eternity of despondency.

THE OPERATION OF GASTRO-JEJUNOSTOMY AND ITS PHYSIOLOGIC EFFECTS.*

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When your distinguished President of last year conveyed to me a cordial invitation to be present at this meeting of the American Medical Association, I accepted at once, thinking of the opportunity which I should have of seeing for myself and profiting from the work of the many in your country whose fame has spread across the sea. When I came to seek for a subject on which to address you, however, I realized the rashness of my ready compliance. So much work has been done here on that branch of surgery in which I am especially interested that I felt that, were I to dwell on any purely surgical aspect of gastric disease, I should be going over ground already familiar to you, and so should be trespassing too far on that indulgence and leniency which I have heard you so invariably extend to those who are your guests.

In my Hunterian lectures,¹ delivered before the Royal College of Surgeons last year, I gave the results of some investigations into the effect of the operation of gastro-jejunosomy on the metabolism of the human body. After some consideration I determined to pursue those investigations further and to lay the results before this meeting.

* Read in the Section on Surgery and Anatomy of the American Medical Association, at the Fifty-eighth Annual Session, held at Atlantic City, June, 1907.

1. Gastric Surgery, London, 1906.

When, as was the case but a few years back, the operation of gastro-jejunosomy was performed only as a last resort in cases of pyloric stenosis, physiologic questions were a secondary consideration, but at the present time, when the operation is frequently advised for conditions such as intractable gastric ulcer, in which it is an operation of expediency rather than of necessity, a knowledge of its precise effects on the gastric and metabolic functions of the body must be one of the determining factors in the decision for or against operation. It is on this aspect of gastro-jejunosomy that I purpose to offer some observations for your consideration.

THE EFFECT OF GASTRO-JEJUNOSTOMY ON THE FUNCTIONS OF THE STOMACH.

The Presence of Bile in the Stomach.—All observers are agreed that a certain amount of bile finds its way into the stomach after the operation of gastro-jejunosomy. It is said that the quantity is at first fairly abundant, but after a few weeks considerably less.

In my own experience it is rare to find bile in the fasting stomach, and I regard its presence under such conditions as evidence of inefficiency of the efferent opening. The fluid drawn off one hour after a test breakfast often appears to contain bile, but Gmelin's test usually gives a negative result. If the gastric contents be tested two hours after a test meal, Gmelin's test is frequently obtainable. I use the expression obtainable advisedly, for considerable care is often requisite to demonstrate the presence of bile, although from the appearance of the gastric contents one would judge that it is present in some quantity.

Indeed, I believe that the amount of bile which regurgitates into the stomach is considerably overestimated. Gmelin's test does not give a positive reaction unless bile be present to the extent of about 5 per cent., and the green color of the test is, as a rule, only just visible and sometimes can not be seen at all. It is probable, therefore, that the regurgitated bile forms not more than 5 or 6 per cent. of the stomach contents. I need hardly point out that if bile gains entrance into the stomach pancreatic secretion must do so as well.

Granted, then, that there is a permanent reflux of bile into the stomach after gastro-jejunosomy, the question arises, Is its presence harmful? All the evidence indicates that it is not, provided the efferent opening of the anastomosis is efficient. Dastre² and Masse³ have shown that in dogs the presence of bile in the stomach does not interfere with the digestion and general health. The well-known case reported by Moynihan⁴ as well as the results of the operation of cholecysto-gastrostomy in man, confirm these observations, while the metabolism experiments, to which I will refer later, afford further evidence to the same effect. Indeed, I think we may safely affirm that, in part at least, the beneficial effects of gastro-jejunosomy on gastric ulcer are due to the entrance of the alkaline pancreatic juice and bile into the stomach.

The Effect of Gastro-jejunosomy on the Gastric Secretion.—The most marked effect of gastro-jejunosomy is the diminution of the total acidity of the gastric contents which follows operation. At first sight it would appear that this diminution is but the result of partial neutralization of the gastric contents by the bile and pancreatic juice which gain entrance into the stomach. But the problem is not such a simple one.

2. Archives de Physiol., 1890, ii, 316.

3. Congres Francais de Chirurgie, 1898, 300.

4. The Work of the Digestive Glands.