face. I have observed a series of such cases where the most careful examinations of the skin did not show excoriations even from which we might follow out the contamination.

According to my idea, such a comparison is indispensable in the consideration of the theory of local contamination, for, so long as one observes only the one category, where open wounds are present, so does one deprive himself entirely of the opportunity for correction. One is in due form driven to the view that the contamination has occurred from outside, and, if other sources are wanting, one helps himself only too rapidly with the idea that it must have been the air which, by contact with the surface, has produced the contamination.

Such an explanation is very convenient for diminishing the personal responsibility of the physician in attendance, where a change of locality is impossible. And yet no one, who has had a large hospital experience, can doubt that the care and skill of the physician produce the best results under the same conditions of air and space, under which, in the care of another, gangrene and erysipelas break out.

I have thought myself compelled to present these remarks at the outset, not for the sake of contending against, even of weakening, the views concerning the importance of pure air in the treatment of wounds, but because I wished to show with how many precautionary measures every investigation must be surrounded, which is to draw general conclusions from a limited number of cases, and how very necessary it is to employ the greatest foresight in the answering of the question: Of how much importance are the statistics of death and disease in the judgment concerning the good qualities of the air and space in which such occur?

A CASE OF FAVUS.—Dr. Pick reports, in the *Archiv für Dermatologie und Syphilis*, a case of favus, the only place where the crust was present being on the glans and sulcus coronalis of the penis. On the inner surface of the left thigh, where there was a contact of the scrotum and thigh, there was a ringed herpetic eruption of a parasitic nature. A careful examination of the glans and sulcus coronalis was made, and no trace of hair follicles was discovered—a point of interest, as it is insisted by Bazin and others that the presence of hair-follicles is necessary to the development of favus.—*Medical Record*.

Selected Papers.

VALEDICTORY ADDRESS, DELIVERED TO THE GRADUATING CLASS OF BELLEVUE MEDICAL COLLEGE, MARCH 2, 1871.

By OLIVER WENDELL HOLMES, M.D., Parkman Professor of Anatomy and Physiology in the Medical School of Harvard University.

* * * * You will not wonder that I address myself chiefly to those who are just leaving academic life for the sterner struggle and the larger tasks of matured and instructed manhood. The hour belongs to them; if others find patience to listen, they will kindly remember that, after all, they are but as the spectators at the wedding, and that the priest is thinking less of them than of their friends who are kneeling at the altar. * * * *

There is another question which must force itself on the thoughts of many among you: "How am I to obtain patients and to keep their confidence?" You have chosen a laborious calling, and made many sacrifices to fit yourselves for its successful pursuit. You wish to be employed that you may be useful, and that you may receive the reward of your industry. I would take advantage of these most receptive moments to give you some hints which may help you to realize your hopes and expectations. Such is the outline of the familiar talk I shall offer you. * * *

Yet, pause a moment before you infer that your teachers must have been in fault when they furnished you with mental stores not directly convertible to practical purposes, and likely in a few years to lose their place in your memory. All systematic knowledge involves much that is not practical, yet it is the only kind of knowledge which satisfies the mind, and systematic study proves, in the long-run, the easiest way of acquiring and retaining facts which are practical. There are many things which we can afford to forget, which yet it was well to learn. Your mental condition is not the same as if you had never known what you now try in vain to recall. There is a perpetual metempsychosis of thought, and the knowledge of to-day finds a soil in the forgotten facts of yesterday. You cannot see anything in the new season of the guano you placed last year about the roots of your climbing plants, but it is blushing and breathing fragrance in your trellised roses; it has scaled your porch in the bee-haunted honey-suckle; it has found its way

where the ivy is green; it is gone where the woodbine expands its luxuriant foliage.

* * * * *

Your present plethora of acquirements will soon cure itself. Knowledge that is not wanted dies out like the eyes of the fishes of the Mammoth Cave. When you come to handle life and death as your daily business, your memory will of itself bid good-by to such inmates as the well-known foramina of the sphenoid bone and the familar oxides of methyl-ethyl-amyl-phenyl-ammonium. Be thankful that you have once known them, and remember that even the learned ignorance of a nomenclature is something to have mastered, and may furnish pegs to hang facts upon which would otherwise have strewed the floor of memory in loose disorder.

But your education has, after all, been very largely practical. You have studied medicine and surgery, not chiefly in books, but at the bedside and in the operating amphitheatre. It is the special advantage of large cities that they afford the opportunity of seeing a great deal of disease in a short space of time, and of seeing many cases of the same kind of disease brought together. Let us not be unjust to the claims of the schools remote from the larger centres of population. Who among us has taught better than Nathan Smith, better than Elisha Bartlett? who teaches better than some of our living contemporaries who divide their time between city and country schools? I am afraid we do not always do justice to our country brethren whose merits are less conspicuously exhibited than those of the great city physicians and surgeons, such especially as have charge of large hospitals. There are modest practitioners living in remote rural districts who are gifted by Nature with such sagacity and wisdom, trained so well in what is most essential to the practice of their art, taught so thoroughly by varied experience, forced to such manly self-reliance by their comparative isolation, that, from converse with them alone, from riding with them on their long rounds as they pass from village to village, from talking over cases with them, putting up their prescriptions, watching their expedients, listening to their cautions, marking the event of their predictions, hearing them tell of their mistakes, and now and then glory a little in the detection of another's blunder, a young man would find himself better fitted for his real work than many who have followed long courses of lectures and passed a showy examination. But the young man is ex-

ceptionally fortunate who enjoys the intimacy of such a teacher. And it must be confessed that the great hospitals, infirmaries, and dispensaries of large cities, where men of well-sifted reputations are in constant attendance, are the true centres of medical education. No students, I believe, are more thoroughly aware of this than those who have graduated at this institution. Here, as in all our larger city schools, the greatest pains are taken to teach things as well as names. You have entered into the inheritance of a vast amount of transmitted skill and wisdom, which you have taken, warm, as it were, with the life of your well-schooled instructors. You have not learned all that art has to teach you, but you are safer practitioners to-day than were many of those whose names we hardly mention without a genuflection. I had rather be cared for in a fever by the best-taught among you than by the renowned Fernelius or the illustrious Boerhaave, could they come back to us from that better world where there are no physicians needed, and, if the old adage can be trusted, not many within call. I had rather have one of you exercise his surgical skill upon me than find myself in the hands of a resuscitated Fabricius Hildanus, or even of a wise Ambroise Paré, revisiting earth in the light of the nineteenth century. * * *

A certain amount of natural ability is requisite to make you a good physician, but by no means that disproportionate development of some special faculty which goes by the name of genius. A just balance of the mental powers is a great deal more likely to be useful than any single talent, even were it the power of observation, in excess. For a mere observer is liable to be too fond of facts for their own sake, so that, if he told the real truth, he would confess that he takes more pleasure in a *post-mortem* examination which shows him what was the matter with a patient, than in a case which insists on getting well and leaving him in the dark as to its nature. Far more likely to interfere with the sound practical balance of the mind is that speculative, theoretical tendency which has made so many men noted in their day, whose fame has passed away with their dissolving theories. * * *

I warn you against all ambitious aspirations outside of your profession. Medicine is the most difficult of sciences and the most laborious of arts. It will task all your powers of body and mind if you are faithful to it. Do not dabble in the muddy sewer of politics, nor linger by the enchant-

ed streams of literature, nor dig in far-off fields for the hidden waters of alien sciences. The great practitioners are generally those who concentrate all their powers on their business. If there are here and there brilliant exceptions, it is only in virtue of extraordinary gifts, and industry to which very few are equal. * * *

The public is a very incompetent judge of your skill and knowledge, but it gives its confidence most readily to those who stand well with their professional brethren, whom they call upon when they themselves or their families are sick, whom they choose to honorable offices, whose writings and teachings they hold in esteem. A man may be much valued by the profession and yet have defects which prevent his becoming a favorite practitioner, but no popularity can be depended upon as permanent which is not sanctioned by the judgment of professional experts, and with these you will always stand on your substantial merits. * * *

If there happened to be among my audience any person who wished to know on what principles the patient should choose his physician, I should give him these few precepts to think over:

Choose a man who is personally agreeable; for a daily visit from an intelligent, amiable, pleasant, sympathetic person will cost you no more than one from a sloven or a boor, and his presence will do more for you than any prescription the other will order.

Let him be a man of recognized good sense in other matters, and the chance is that he will be sensible as a practitioner.

Let him be a man who stands well with his professional brethren, whom they approve as honest, able, courteous.

Let him be one whose patients are willing to die in his hands, not one whom they go to for trifles and leave as soon as they are in danger, and who can say, therefore, that he never loses a patient.

DR. STIEMER says:—The muriate of quinine acts as surely and quickly in small-pox as in intermittent fever, and makes vaccination useless. In the stage of eruption three grains are to be given every two hours; the fever and even the pustules disappear slowly from the tenth to the twelfth hour. At a later stage restoration needs from three to five days.—*Indiana Journal of Medicine*, from *Berlin Allgem. Centr. Zeitung*.

Reports of Medical Societies.

BOSTON SOCIETY FOR MEDICAL IMPROVEMENT.

F. B. GREENOUGH, M.D., SECRETARY.

FEB. 12th, 1871.—*General Tubercular Deposit on the Peritoneal Surface*.—Dr. J. B. S. JACKSON, who saw the patient a few days before death, reported the case as showing tubercular disease of the intestine, that probably preceded that of the lung. The patient was a young mechanic, who had for some months gradually failed in health, without any acute symptoms. He had some slight diarrhoea, but hardly any cough. Dr. Jackson found some slight dulness beneath the left scapula and spine, but the respiration was normal. At the autopsy, the intestines were found matted together, and beneath the peritoneal surface curdy, opaque masses were seen. There were some old pleural adhesions, where dulness had been noticed, and three or four tubercles.

Dr. D. H. STORER reported a case of pregnancy where intense pain had been felt for a few weeks preceding labor, as follows:—

At a recent meeting of the Society a case was reported of adherent placenta. During the discussion elicited by the relation of the case, in answer to a question asked, I remarked that it was impossible to diagnose the condition previous to the birth of the child; that although it might, and undoubtedly did follow in some instances a direct injury to the abdomen, it not unfrequently occurred where no such injury was known to have been received; that occasionally persistent pains were complained of in some portion of the uterus during pregnancy, sometimes quite distressing and long continued, which would seem to be accounted for should the placenta be found to have been adherent; while in other cases this same symptom may be present, and yet no unusual fixedness of the placenta exist. A case strikingly illustrative of this latter remark has just fallen under my observation.

A lady, the mother of five children, and whose previous labors had been perfectly natural, complained, in the eighth month of her pregnancy, of a fixed, circumscribed, severe, sometimes intense pain in the right hypochondrium; during the week previous to her confinement, her suffering was so great that she repeatedly took chlorodyne several times in the course of a day to make