

Address.

ADDRESS OF THE PRESIDENT.¹

DELIVERED AT THE FIFTIETH ANNUAL MEETING OF THE AMERICAN MEDICAL ASSOCIATION, HELD AT COLUMBUS, O., JUNE 6-9, 1899.

BY JOSEPH M. MATHEWS, M.D., LL.D., LOUISVILLE, KY.

IN assuming the duties of the presiding officer of this Association, I must confess that it is with a feeling of great diffidence. For many years I sat at the feet of the masters in medicine, as they were wont to assemble at their annual meeting, and was content to listen only to their wise counsels, to emulate as far as I could their example and to profit by the words of wisdom which fell from their lips. When I reflect upon the names of my predecessors who have occupied this chair, their great achievements in medicine, the high rank to which they attained and the good which they accomplished, it is no wonder that I assume the role with some trepidation. You will therefore permit me to offer you my very sincere thanks for the honor which you have conferred upon me.

In assuming the duties as your chairman I hope to be just to all, and if at any time my decisions should appear otherwise, please attribute it to my head rather than my heart. It pains me to look over this great body and recognize the fact that not only many of its most prominent members in the past are absent, but also that the majority of those who have served you as president have likewise gone to their eternal home. Let their departure remind us that we, too, must soon lay aside our armor and join the silent majority. This thought brings me to consider for a moment:

OUR NATIONAL BODY; ITS PURPOSES AND DESTINY.

I imagine that when the father of this Association, the Nestor of American medicine, called around him a few devoted friends, accomplished physicians and surgeons, and effected an organization to be known as the American Medical Association, the first thought which filled their minds was the unification of the profession which they loved so dearly. It was their desire, no doubt, to bring together each year the men who were laboring earnestly and honestly for the elevation of the profession, that they in conclave could impart to each other the advance that each succeeding year had brought forth in their chosen calling, and done in order that the sick and the afflicted could be profited thereby.

Sacrifices and great personal discomfort were endured by them to obtain the good; but what splendid results were accomplished by their efforts is evidenced in the assembling of the great body here to-day. I opine, too, that anything that partook of the nature of jealousy, unfairness, or politics was deprecated by them, but, to the contrary, they desired that peace and good-will should always obtain. What could be more beautiful than the fruition of this hope? How grand the thought that here in the mother society men of all grades, so far as education and accomplishments are concerned, be they great or small, poor or rich, the rank and file of the profession can meet on common ground and exchange views for the benefit of suffering humanity. Some must be teachers or instructors;

¹ From advance proofs of the Journal of the American Medical Association.

others listeners; they each in their way contribute their mite. It may be that some member from a far-off and sparsely-settled country has heard some truth in the application of which a life may be saved, or in return he can give an experience which may prove of incalculable benefit to his more fortunate brother. Let me impress upon you, then, that no class legislation should be indulged in by this body. Let it not be said of us that we rule without reason, or that we are a set of politicians trying to secure benefit for the few against the many, or for the many against the few, for in no wise are we a legislative body. In lieu of all this, let us receive with open arms all who represent honesty, fair dealing, and entertain an honest desire to elevate the standard of the medical profession, and of this Association. Let no wrangling come into our midst, but rather let peace and harmony prevail, with love to one another, as becomes gentlemen.

SHALL WE HAVE A LOCAL HABITATION?

It is to be seriously questioned whether this Association, so numerically great as it is destined to be, or in truth is now, profits in any manner by its migration each year to distant parts of the Union. It cannot be denied but that a mistake has been made in the past in going to cities too small to entertain it. It certainly adds no dignity to this distinguished body to be thus travelling about, not to speak of the inconvenience occasioned to the majority of its members by the so doing. Nor is it right or proper to impose upon a local profession the expense and trouble that it takes to entertain it. If the members will give the subject careful thought and consideration, I believe that they will come to the conclusion that the Association should have a local habitation. The natural question would then be, where could such habitation be found? In the selection of the same many things would have to be considered: a city within easy reach, which offered the most attractive advantages. Of all, the city of Washington is the best suited. The capital of the nation, it has advantages that no other place can offer. With its great free libraries, it is the seat of learning; its magnificent Government buildings, its natural beauty, its select society, its two houses of Congress, the rendezvous of foreign representatives and diplomats, the home of the medical departments of the Government, army, navy and marine-hospital corps. Then, too, the idea is not far-fetched that the Government, liberal always, would at some time lend the Association a helping hand in the way of securing a suitable building in which to hold its meetings and to become the owner thereof. Again, it would be in touch with the legislative department of the Government, and it can readily be seen of what value this would be in securing much-needed reforms in a medicinal way. The *Journal* would here find the most suitable of all abodes; an atmosphere of refinement, education and wealth. Its editor would all the time be on the alert, and much profit would come to the *Journal* from such surroundings and associations. I beg of you to give this matter your most serious consideration.

IMPORTANCE OF ATTENDING THE LAST DAY'S SESSION.

I desire to call your attention to the importance of attending the general session on the last day of the meeting. Business of the very greatest importance always comes up for consideration on that day, and,

strange to say, often there is scarcely a quorum present. At the meeting at Denver last year less than fifty members were in attendance on the last day of the meeting. If, therefore, resolutions are rushed through on that day which displease you, it is your own fault. Besides, if the business transacted on that day comes up for consideration at the following annual meeting, it takes up time which it has no right to. Please, therefore, see to it that nothing interferes with your attendance on that day.

CLINICS, DINNERS, ETC.

It has been a noticeable fact for a long time that the clinics which are held each year during the meeting of the Association by the local profession of the city in which it happens to meet, very materially decrease the attendance at both the general sessions and the various sections. This should not be, and it is the duty of the proper officials of this Association to deprecate the holding of such clinics. Time and again many of the very best men of the Association have been kept away a half day, and often a whole day, from the meeting, when their counsel and presence were much needed at the different sections, or at the meeting in general session. Need I remind you that absence of the same kind and duration is often observed at dinners to which members are kindly invited. This can be easily obviated.

THE JOURNAL.

It is my painful duty to announce to you the death of Dr. John B. Hamilton, editor of the *Journal of the Association*. This Association never had a truer friend than he. Possessed of a clear-cut individuality, he was always outspoken, and what he did he at least believed to be for the best. We will miss his wise counsel in our deliberations. He made a most excellent editor of the *Journal*, and by his efforts it was brought up to the high standard which it occupies today. The Board of Trustees of the *Journal*, after careful consideration and deliberation, has selected Dr. Geo. H. Simmons to succeed Dr. Hamilton as editor. You are to be congratulated upon this wise selection. Dr. Simmons is not an experiment, for he has won his laurels in medical journalism, and already stands among his editorial friends as the peer of any. Having come up from the ranks in journalism, he is acquainted with every detail, and that he will make a good editor goes without saying.

THE MANAGEMENT OF THE JOURNAL.

I trust that it will not be considered out of place if I make a suggestion or two in regard to the management of the *Journal*. It has been frequently urged that much appears in it that should be expurgated; in other words, that a censorship should be established and many articles withheld from publication. I desire to disagree from this sentiment entirely and unequivocally. The *Journal* is simply the mouth-piece of the Association, and if one single paper read before this body is to be refused publication, then you have violated your pledge and obligation. Any member has the inalienable right to disagree with the sentiment of any paper, and the editor is in no wise responsible for said sentiment. If a paper is good enough to be read before any section in this Association, it is good enough to be published in the *Journal*. If any action is taken, it should be by the chairman of the

section before which the paper is to be read, saying to the reader that his paper does not come up to the standard. But who will assume this responsibility? and who is to judge the judges? May it not be that a paper, although couched in bad English, might contain matter of real merit? Many articles, too, with high-sounding titles and verbiage beyond the comprehension of man may contain but little that is of worth, although written in perfect English, with deductions that would puzzle a philosopher, and which contain illustrations that would do credit to Puck. By all means let the editor improve the *Journal* in any way that he deems proper, but let every paper read before this Association or its sections be published in the *Journal*. Let the reader select the wheat from the chaff, the good from the bad.

In connection with the business interests of the *Journal*, I beg to make the following suggestion: Let a suitable man be selected, preferably a doctor, to travel in its interest, thereby increasing the membership of the Association—this agent, secretary, assistant secretary, or whatever you may choose to call him, to solicit subscriptions for the *Journal* and encourage membership. He should visit the meeting of each State society, district and county society, besides calling on individual members of the profession. Of course, only those who are endorsed by accepted or recognized organizations can become members of this Association. There are many hundreds of worthy physicians in the United States who would readily join the mother society if properly approached. Many, very many of them are ignorant of the manner of becoming members. It may be urged that the salary necessary to secure such an agent would be too large to justify the employment of such. In refutation I would urge that by such individual solicitation many more would be added to the membership than would be necessary to pay said salary, and they would become permanent members. It can be said, especially to young men, that the mere wearing of the button of the Association adds dignity and confidence. Then, too, it can truthfully be asserted that the *Journal* alone is worth more than the sum paid for membership. By this means I am sure that the treasury would be so increased as to enable the *Journal* to be the peer of any published. Besides, our ranks would be so increased as to make this Association not only the largest but the most important in all the world.

THE SECRETARYSHIP.

For several years there has been a heated debate, if not wrangle, at each annual meeting, in general session, over the secretaryship. This is both unseemly and undignified, and is to be much deplored. It seems to me that there is an easy solution to this matter. Let the editor of our *Journal* be the secretary of the Association. The Board of Trustees has wisely insisted that he devote his whole time to the *Journal*. It does, therefore, appear that the secretaryship should be one of his duties. By so acting he is brought into a closer relation with the business management of the Association and with the active membership of the same. He would himself be responsible for a correct report of all proceedings, and be enabled to keep them without fault. The question whether or not any addition should be made to his salary for this additional work can be determined by the Board of Trustees. Our present secretary has served us long and well, and for

his services in the past the Association should, and no doubt does, feel deeply obligated to him. I am sure that he would be the first to acquiesce in any move that would enhance the business interests or the prosperity of the Association. I therefore very respectfully offer the suggestion as above stated.

SOCIETIES WHICH SHOULD BE RECOGNIZED.

In the last few months many good medical societies which have adopted the "Code of Ethics" have communicated with me through their secretaries, asking how they could get recognition by this body. I have found, in many instances, that the State society had failed to recommend them, but for no particular reason. Anyway, they are debarred from recognition by this Association. In several instances I found that said societies had a greater number in attendance at their meetings than did the State society. I trust something will be done in regard to this matter, in order that these good societies can obtain recognition from this Association.

The appointment by your nominating committee of three such distinguished gentlemen to read the several addresses before this Association in general session assembled relieves me of any duty in that line. I shall therefore content myself with employing the balance of my time in asking your consideration of a few things which are not only a menace to the public health but also to the safety of society. Having served as a health officer for many years, my mind naturally turns into this channel, especially so when I see an opportunity to enlist the interest and co-operation of this large and influential body of physicians.

TUBERCULOSIS.

It behooves this national body of American physicians to take some action, or at least to approve the movement to stamp out, as far as scientific effort can do so, that dread disease that kills one-seventh of the world's population — tuberculosis. A few days ago, May 24th–27th, there was held a tuberculosis congress in Berlin, international in character. The Liverpool Medical Institution, one of the most important medical societies in England, has recently appointed a committee of its members "to consider what further steps can be taken for the prevention of tuberculosis, and for the treatment of the disease in the human subject." This committee proposes to consider: (1) the nature of pulmonary tuberculosis, its communicability and preventability; (2) the provision of sanatoria; (3) the more effectual methods of controlling spread of infection; and (4) the desirability of adopting some form of notification. The eradication of bovine tuberculosis received a powerful stimulus throughout the empire when recently Her Majesty the Queen gave orders to have killed such of her herd of Jerseys as were shown by the tuberculin test to be infected.

At the recent meeting of the French Association for the Advancement of Science, the Section of Hygiene, at the suggestion of Professor Nicholas, passed a resolution pointing out that the conveyance of tuberculosis by inhalation is only one of the modes of infection, and that a larger part of the diffusion of the disease is played by contagion through the alimentary canal, as proved experimentally and clinically, urging the necessity of taking adequate measures to insure the sterilization and harmlessness of articles of food. All Europe is wide awake to the importance of this subject.

From carefully prepared statistics it is found that of the deaths from all causes between the ages of fifteen and sixty years, one-third of the number are victims of tuberculosis, and that it kills four and a half times as many people as do small-pox, scarlet fever, typhoid fever, and diphtheria combined. It is estimated that at any given time in Germany alone 1,300,000 persons are affected with tuberculosis, and Osler says that 1,200,000 in America have the disease at all times. One in every fifty persons has the disease. Over 13,000 die of tuberculosis in the State of New York every year. Also in every American city the proportion of deaths is equally as great. So important has this subject become that at a recent convention held in England to consider the question, "How to Prevent the Spread of Consumption," the Crown was represented by His Royal Highness, the Prince of Wales, who presided over the meeting. Great encouragement was given the move by royalty and all others. The medical profession all over the world is deeply interested in the subject, the aid by governments solicited, and every effort is being made to suppress this formidable disease. Since the germ which causes it is known, and its habitat, the condition under which it thrives, and that the disease is contagious, it does appear but rational to assume that it not only can be prevented by precautionary measures, but that it can be cured by proper environment and treatment. It is equally true that, even in the best of homes, the treatment usually accorded the patient is *nil* in effect and accomplishes nothing. Something more than this must be done if we expect to materially decrease the death-rate. What is that something? Dettweiler believes that over 24 per cent. of cases of tuberculosis are curable, Meisen, 27 per cent., Braymer, 21.5 per cent., and this under ordinary climatic and hygienic treatment. A much higher percentage of recoveries could be recorded if a real systematic and scientific treatment could be afforded these patients. Such a course can be instituted only in well ordered and equipped hospitals designed especially for such inmates. In regard to the extent of the disease, I can do no better than to use the words of Professor Hirsch. He says, "It is emphatically a disease of all times, all countries, and all races. No climate, no latitude, no occupation, no combination of favoring circumstances forms an infallible safeguard against the onset of tuberculosis, however such conditions may mitigate its ravages or retard its progress. Like typhoid fever, phthisis dogs the steps of man wherever he may be found, and claims its victims among every age, class, and race." In answer to the question, What is to be done to prevent its progress? I would suggest a remedy in using the words of a resolution adopted at the International Congress of Hygiene in Brussels, in 1897: "The hospitalization of tuberculosis is urgent and will not long be withheld." In several large cities in the United States an earnest effort has already been made to carry this thought into practical utilization, especially so in Chicago and New York. It can readily be seen, however, that but a comparative few out of this great number of afflicted can be accommodated in this manner. A country or State that is ever on the alert to prevent the landing of a foreign foe, or a hostile army, surely should ever be ready to aid in the suppression of a foe to the human race ten times more destructive to human life than the invasion of the country by an army of great size

armed with the most improved rifles. Let us, then, in the name of humanity, invoke aid from the government of this very humane people, in order to help put down and thoroughly conquer this foe.

During the last session of the New York Legislature a report of the Senate committee appointed to investigate the advisability of establishing a State hospital for the cure of consumption was made. Many reasons for the same were presented in the report. Among other things the report read: "Tuberculosis is one of the most fatal diseases that the human race has to combat at the present day; its yearly victims inflict a serious and unnecessary drain upon the resources of the State. Unnecessary because it is now demonstrated beyond question that by the adoption of proper preventive measures a large proportion of those who suffer from this disease may be saved. This is proven not only by the revelations of science, but by the results which have been obtained in the practical application of the means to prevent the spread of disease. A large proportion of the cases brought under treatment have been cured, and so many have so improved as to be restored to the producing class. It is also shown that the efforts of the boards of health of this and other States, as well as in other countries, have so far succeeded in reducing the percentage of deaths from tuberculosis by the measures adopted that there is good ground for assuming that with wise laws properly enforced this disease may be almost wholly obliterated." Is it too much, then, to suggest that this Association, representing the most advanced thought of the medical profession of America, take action in this important matter? I would most respectfully urge you to appoint a committee to prepare a careful report on this subject and present it to the next Congress sitting, beseeching that this Government erect, prepare or donate hospitals or reservations in and at which the poor or others shall receive treatment for the cure of consumption; also that the advisability of the respective States erecting similar institutions be impressed upon the various State boards of health. The blind, the deaf, the insane, the feeble-minded and other classes are so provided for; why not these? They are not able to care for themselves and they are a menace to the public health. It must be confessed that in so far as the prevention of the disease is concerned, that must come from the education of the people to the facts. The best way to accomplish this I leave to you.

THE ANTIVACCINATIONISTS.

It may appear superfluous to ask that you consider, in the proper way, a rebuke to a certain class that is doing much to endanger the lives of our citizens, and whose meddling ways are giving the health boards of the various States much annoyance. I allude to the antivaccinationists, encouraged as they are by an antivaccination society. It seems strange and beyond belief that citizens of respectability and supposed intelligence should band themselves together to prevent a means of saving human life. But "'tis true, and pity 'tis, 'tis true." If these misguided people would only inform themselves of facts patent to every reader of history, they might at least stop long enough in their mad career to think.

The true condition is so well described by Dr. Seys in a recent paper that I beg to quote from him: "Well has small-pox been termed the most terrible of

all the 'ministers of death.' It dates back to the early history of our race, but from whence it came no man can say. Then all expected to have it and but few escaped. No respecter of persons, it was found in the palace and in the hovel, in the fair green fields and in the foul dungeon. All ages yielded to its noisome touch, and no season of the year was free from its deadly breath. One-third of the children born to the daughters of men died before they were a year old because of this pestilence, and one-half before the age of five. In epidemic years it is estimated to have caused 50 per cent. of all deaths in Europe, and in non-epidemic years not less than 10 per cent. Two-thirds of the pauper blind in Europe of that day looked no more on the faces of their loved ones or the blue sky, nor saw the light of day, because of its blighting visitation. In Mexico it is said in a few years to have caused the death of three and a half millions of people. Iceland and Greenland were almost depopulated by it, and it has well-nigh rendered extinct some of our Indian tribes. It was the all-important factor in keeping down the population of Europe. Nor would the task be a difficult one to-day, should we desire to do so, to bring back the horrors of but a few years ago."

We may rest in peace and disregard the efforts of these half-mad people, but we must not close our eyes to the fact that, by their loud cry, aided by political influence, given often for self-aggrandizement, they are endangering the lives of every community. So far has this thing gone, that the vaccination law in England has but recently been amended so that only those who may desire shall be vaccinated. This is a menace to the public health and smacks of the dark ages. I again respectfully ask that you give to the medical profession in America an endorsement of their views in a resolution sustaining *compulsory* vaccination. The safety of the people from this most direful malady demands it.

A CRUSADE AGAINST SYPHILIS.

An international medical conference will be held at Brussels, Belgium, in the month of September next, known as the International Conference for the Prevention of Syphilis. A statement of the fact has been sent the Honorable Secretary of State of the United States, through the Belgium minister at Washington, with request that he appoint a delegation to attend this important conference. The Honorable Secretary in turn requested me, as your presiding officer, to name said delegation. This I have already done, as the call was for immediate action. In the preamble which accompanies this notice the following language was used: "The increasing propagation of syphilis and venereal diseases has become a serious danger to society, and it is important while there is still time to take efficient measures to stop the progress of this scourge. The spread of the evil is an incontrovertible fact; on this point all physicians who are in a position to know or observe its progress are agreed. The number of victims increases daily, and a serious consideration is that this malady is penetrating into strata of society where it was formerly rarely seen. Scarcely any attempt hitherto has been made to check this social evil, or rather while some attempts have been made, they were without concerted action, without preconceived plans, and without an international understanding to success."

What can be said of Belgium in this regard can be said of the United States. Perhaps the ratio of cases is not so large, but this matters little. It is estimated that there are in this country between six and seven million people who are afflicted in one way or another with syphilis. A distinguished French authority says that one man in every four has the disease in France. When we consider that by this the very foundation of society is shaken, our families imperilled, the constitutions of our youths undermined, our women wrecked, it is high time, as this official says, that we turn our attention to the subject. The warning should be in words that the most illiterate man or woman could understand, and it should emanate from sources and places that would reach the greatest number. Our false modesty in the past has been too pronounced, and has prevented us from giving to the common people valuable information; so we are, in a measure, as a profession, much to blame for the great spread of this blighting curse.

The time has arrived when we, as physicians, singly or when in convention assembled, should throw aside all restraint when dealing with this vital question. Fathers, mothers, sisters, brothers and all others should be informed, and this information should be in the plainest language. The minister and the priest should aid the doctor in his praiseworthy undertaking. The doctrine should be inculcated into the youth of both sexes, that freedom from this awful condition should exist before the marriage relation is thought of. Upon this declaration rests the hope of the State, as well as of families, for neither good soldiers, good citizens nor good husbands with tainted blood can be had. Please permit me to suggest that a committee be appointed from this body, to report at the next annual meeting on the subject: "What is the Best Means of Preventing the Spread of Syphilis?"

A PLEA FOR HARMONY.

In conclusion, let me beg of you that this meeting be one of perfect harmony and peace. Let nothing of an acrimonious nature be indulged in, but rather let your deliberations be characterized by patience, love for each other, and a desire to ennoble the profession to which you belong. For are we not brothers indeed, fighting for a common cause—the obliteration of the common enemy, disease? May your future life, each and all of you, be one of peace and perfect happiness; and may God grant to all a long life filled with good deeds. If fate should decree that any one of you should pass away before we meet again, may you find eternal rest in "God's next country."

Original Articles.

ON SOME CONDITIONS OF HEALING BY FIRST INTENTION, WITH SPECIAL REFERENCE TO DISINFECTION OF HANDS.¹

BY THEODOR KOCHER, M.D., ETC., BERNE, SWITZERLAND.

Mr. President and Gentlemen:—If we are to decide whether we are on the right way with our aseptic preparations to warrant a healing by first intention or not, we cannot answer that question simply by bacteriological demonstration of presence or absence of

¹ Read before the American Surgical Association, Chicago, June 2, 1899.

bacteria alone, but we must be guided by our clinical results. We know that even in cases of healing *per primum intentionem sans phrase*, where we withdraw a drainage-tube after twenty-four hours and get our wound absolutely closed within two days, we may find bacteria by dropping some of the bloody liquid of the first day in sterilized bouillon and keeping it at 37° for twenty-four hours.

It seems perfectly sure that we can get a primary union, that is to say, either a healing of our wounds without any secretion whatever, when it was possible to close a wound throughout, or with a serous bloody discharge, diminishing from the very moment of the operation, when a drainage-tube had to be put in a cavity, even in cases where some bacteria have been introduced. Accordingly it seems necessary to give first the clinical results of a method of asepsis which we think worth recommending for general use.

Therefore when I was greatly honored with the invitation of your president and secretary, Dr. Keen and Dr. Burrell, to present an introductory paper for a discussion on disinfection of hands at the annual meeting of the American Surgical Association in Chicago, I asked my assistant and son, Dr. Albert Kocher, to gather the whole material of our operative cases during the winter session from October 1st, 1898, to last of February, 1899, and to put all cases where we operated on not already infected cases, down in a chronological order, with the indication of date, disease, operation, and of the material we used for ligatures and sutures, of the use of gloves, of drainage-tubes, the final result, and date of dismissal of the patient. Certainly this last date does not mean the moment of healing of the wound, which had always taken place days before, but it gives still a better idea of the form of primary reunion. (See table.)

As is seen by these statistics, we have had during five months 339 aseptic operations, of whom 5 died—1.4 per cent. No one of these has died from infection going out from the wound. The first case was a case of acute fatty degeneration of the liver, to be attributed to the chloroform, after excision of goitre² in Graves's disease three days after operation; the wound entirely healed by first intention. The second case was a death by pneumonia four days after the operation of too long standing incarcerated hernia, as they often occur without any local complication. The third case of death was an excision of malignant goitre, having gone much too far, as we had to perform resection of the trachea; the patient died of pneumonia. The fourth and fifth cases of death were two patients with carcinoma pylori in a state of great exhaustion. The one on whom resection was performed died after two days from pneumonia, the other after exploratory incision three weeks afterwards from exhaustion.

As to the 334 cases left for judging the value of our aseptic preparations, we have had small abscesses in 8 cases, with healing by *secundam intentionem*, very quickly as a rule. So we see that except in 2.3 per cent. of cases there has been always absolute primary healing of our wounds.

Of the 8 cases where this was not the case 3 had to be excluded from the question of failure of the aseptic measures, because there was another source of

² I have to explain this case, which was quite exceptional, as I never in the last years used any anesthetic in these cases except cocaine, but the patient, who had agreed with that manner of performing the operation, behaved in such an extraordinarily unruly way that we were obliged to give chloroform, though perfectly aware of the great danger.