speaker said that he objected to the naming of a disease or a symptom after its first investigator because it was puzzling to the student of medicine, and hence he objected to such terms as Basedow's disease, Colles' fracture, etc.

These few instances of many that might be cited give ample proof that we are far too lukewarm and too chary in our praise. In the last instance here quoted, without taking the speaker too seriously, I would say that his remarks should be positively condemned. I am not aware that the medical student seeks our solicitude, but if he does, it will be in vain, for we were able to cope with such things, nor is he any better than the student of chemistry, botany or astronomy for instance. A new chemical, a new flower or planet bears the name of its discoverer, why not an instrument or a disease?

Instead of indifference, would it not be better then if we cultivated "that most aristocratic of all virtues," appreciation? Why should we, like the proverbial republic, be ungrateful? If it were known that as a recompense for the obedience to duty that requires a medical man to give freely all that he knows for the benefit of mankind to his professional brethren, he would always receive the grateful and substantial plaudits of his colleagues, what an incentive to thorough work that would be. If, after careful investigation, it was found that his work was of such a nature that he was a benefactor to his race, a credit to his profession and to his country, some commensurate action should be taken in appreciation thereof. There is precedent enough for this.

While every soldier and sailor does his duty, yet we hail the returning hero with loud acclaim. His name is on every tongue, his deeds are sung in poetry and prose, we weave garlands to place upon his brow, we present him with swords and gifts innumerable and nothing is too great for us to do. The most facile pens describe his very action and his heroic deeds. What of the doctor? Are his deeds any the less heroic because unsung? Is his bravery any the less than that of his brother at arms who stands undaunted 'mid shot and shell? The bravery that fights the unseen foe in the most dreaded of all contagious diseases is every bit as great in him as in the other. No one is there to chronicle, and none stands ready to cheer and encourage—only duty, nothing more. Marble is enduring, and much may be placed thereon, but the eye that its words would gladden most sees it not, nor do his pulses thrill at its laudatory words, and no smile of gladness can they evoke. How much better it would be if we showed our gratitude during his lifetime. How amply rewarded such a one would feel to receive the plaudits of his brethren—the most competent of judges. What a gratification it would be if, when we acted thus, we saw how lastingly happy we had made him as we said, "Well done, thou good and faithful servant." With such incentive then, there would be no temptation to cease doing good work, for all would know that there is something still better to be had than is conveyed by the meaningless phrase, "Virtue is its own reward."

GERMANY is about to establish a school for the study of tropical diseases in Hamburg. The Medical Faculty of Berlin, led by Prof. Koch, desired the institution located at Berlin as a department of the Institute for Infectious Diseases. The Government, however, is of the opinion that from the fact that as Hamburg nearly always has patients from the tropics in her hospitals suffering from diseases which are of purely tropical nature, it would be a preferable location.

NEUROLOGY AND PSYCHIATRY.*

PROGRESS THEREIN FOR THE YEAR.

CHAIRMAN'S ADDRESS.

BY FREDERICK PETERSON, M.D.

NEW YORK CITY.

There is but one excuse to offer you for the infliction of an annual address at a Section meeting, and that is that it is a requirement of the By-Laws, from which I quote as follows:

The chairman of each Section shall prepare an address on the recent advancements in the branches belonging to his Section, including suggestions in regard to improvements in methods of work, and present the same to the Section over which he presides, on the first day of the annual meeting. The reading of such address not to occupy more than forty minutes.

I shall endeavor to fulfill the obligation thus placed upon me, to your satisfaction, by making the address a very brief one, for I shall be especially careful not to avail myself of the dangerous prerogative of occupying forty minutes should I so choose. Since I am required, in addition to presenting to you the facts of recent progress in our branch of medicine, to include "suggestions in regard to improvements in methods of work," I shall include just one such suggestion, viz., that the annual address referred to be hereafter dispensed with or curtailed to remarks not to occupy more than five minutes. I think this a very reasonable suggestion. An annual address which touches upon "recent advancements" in medicine in a general way is proper for the entire body of physicians here gathered together in one great organization, but for the Sections themselves, which are here for the summing up and discussion of the work of their members during the year, an annual address is unnecessary as well as prodigal of precious time. The chairman who would attempt to present to the members of this Section an epitome of the work done in neurology and psychiatry for one year would have a vast and wearying labor to perform, even in collecting the titles only of the many contributors in these subjects, for I am informed that there are some thirty-five hundred articles, pamphlets and books relating to our special line of work now issued yearly. Should the chairman desire to present a review to date of a somewhat new subject, such as, let us say, the cytology of the nerve-cell, he would have to examine four hundred different contributions, books and journal articles by two hundred and eighty authors, in order to write an exhaustive critique of nervous cytology.¹ I have gathered together here, however, in lieu of such an athletic study, and merely to indicate the extraordinary activity of workers in our domain at the present day, a bibliography of neurology and psychiatry and allied subjects for the year 1898 and this early part of the year 1899. I have limited this bibliography to books of over fifty pages. The innumerable pages and articles in medical periodicals are not included. I have the list here, but will spare you the weariness of hearing the titles read. Suffice it to say that there are two hundred and one books under the following headings:

Anatomy of the Nervous System, Human and Comparative	10
Anatomy and Physiology of the Nerve-Cell	12
General Neurology	48
Medical Jurisprudence	7
Criminal Anthropology	4
General Psychiatry	27
General Relation of Mind and Body	11

*Presented to the Section on Neurology and Medical Jurisprudence, at the Fiftieth Annual Meeting of the American Medical Association, held at Columbus, Ohio, June 6-9, 1899.

¹ Bibliography of the Cytology of the Nerve-Cell. Smith Ely Jelliffe, M.D.

Aphasia	6
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Chronic Poisoning.....	2
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I am unprepared to give you even an outline of the genuine progress made in the sciences compassed by the bibliography just cited. I am inclined to single out, however, one seemingly unimportant thing from this great array of monographs for special comment. It is a book of one hundred and twenty pages² bearing the date 1899, and is a description of a psychopathic hospital in a German city, the newest and finest of them all. Many neurologists would find, perhaps, little in such a volume to interest them, but such as have had asylum experience, or are familiar with the needs of the insane, will hail its publication with enthusiasm, for it describes a method of provision for the insane and a scheme of laboratory investigation, a model psychiatric institution, which is destined to be imitated in many of our larger cities before many years have passed. I shall not dwell long upon the subject here, because I have quite recently published an address, delivered two weeks ago as the Annual Address to the American Medico-Psychological Association, in which the new era in psychiatry and psychiatric methods is discussed in detail. Suffice it to say then that this psychopathic hospital in the town of Giessen, which, modified to suit varying conditions and circumstances, is to be the model for similar foundations in all your American cities of 50,000 to 100,000 inhabitants, consists of ten or eleven cottages for some 116 patients. It is situated near the other university buildings. The central structure contains laboratories for pathologic, microscopic, chemical, photographic and psycho-physical work, besides a mechanical workshop, clinical auditorium, library and polyclinic or dispensary for out-of-door patients. The administrative offices and rooms for assistant physicians are also here. The cottages afford accommodations for each sex, and the patients are divided into private, quiet, restless, suicidal and disturbed classes in separate buildings.

There are many of these psychopathic hospitals in Germany. Indeed, only one university town is now without one. I saw them in successful operation even in my student days at Strassburg, Leipzig and Vienna. This at Giessen was first opened for patients in 1896, and deserves special mention and consideration because it embodies all that is best in this species of institution, the management having profited by the experience of all the others up to the date of its construction. The psychopathic hospital solves many problems, among them improved opportunities for collaborative study by scientific investigation in different branches of research, better facilities for clinical study, a greater diffusion of a knowledge of psychiatry among practitioners and students, and last, but not least, earlier and speedier treatment of the unfortunate patients.

The psychopathic hospital for the acutely insane lo-

cated in the midst of the city, following the precedent of general hospitals in this regard, is the ideal institution of the future for this particular class. The chronic insane on the other hand will be transferred to the country, always in the neighborhood of the city having the detention hospital, and will there be cared for in colonies, for the colony or village system has proved to be the ideal method of cure for the chronic insane. The colony will consist of a small hospital for the sick and injured, a small infirmary for the infirm, crippled, bed-ridden and disturbed cases, and a multitude of small cottages clustered about the centers of industry, where the majority of the patients will occupy themselves with agriculture and handiwork of all descriptions. This colony system or village community system is not new and I have myself seen several of them successfully conducted in other countries.

I will not occupy your time longer by entering into the minutiae of these two methods of state care of the insane, but I thought I would exercise the prerogative of chairman, in calling your attention to the psychopathic hospital and the colony as among "the improvements in methods of work" referred to in the By-Laws above quoted. A little seed disseminated in this way will take root somewhere, spring into existence, and some day bear fruit. Perhaps a few years hence some of you may describe to us here in this Section the model institutes for psychiatry you have builded in your cities and point out to us the great improvements you have made on old-world models.

Original Articles.

APPENDICITIS.*

ITS DIAGNOSIS AND TREATMENT: A REPORT OF ONE HUNDRED AND TWELVE CASES.

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As a preface to my remarks, I wish to submit a report of 112 cases that came under my observation, 82 of which were treated by operation and 30 by medicinal measures. In submitting this report I have not attempted a detailed outline of each case, as there is a sameness in many of the cases that would make such an outline monotonous. I have, therefore, grouped similar ones.

Of the 82 cases operated on there were 2 fatalities. One of these was operated on the fifth day, and had diffuse suppurative peritonitis. The other patient was one of chronic appendicitis, and the cause of death was obscure. Immediately after the operation she began vomiting coffee-ground material, and continued to do so until her death, which occurred seventy-two hours later.

The ages of the patients, grouped in decades, were as follows:

Under 10.....	10
10 to 20.....	25
20 to 30.....	28
30 to 40.....	20
40 to 50.....	19
50 upward	10

Of the operated cases 30 were acute and 52 chronic or recurrent. In speaking of acute cases I refer to those giving no history of previous attacks. Of the 112 cases reported, 45 cases were females, and 67 males.

² Die Psychiatrische Klinik zu Giessen. Published by S. Karger, Berlin, 1899.

*Presented to the Section on Surgery and Anatomy, at the Fiftieth Annual Meeting of the American Medical Association, held at Columbus, Ohio, June, 6-9, 1899.