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ORIGINAL ARTICLES.

MEDICAL EDUCATION THE FUNDAMENTAL FACT IN MEDICAL ETHICS.

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[Read before the Section in State Medicine of the American
Medical Association, at Cleveland, Ohio, June 5, 1883.]

[NOTE.—It is almost an insult to the intelligence of the readers of the Journal of the Association, to explain that this paper is not intended as a sectarian attack upon the organic law of the American Medical Association; but as this interpretation has actually been given to it by over-sensitive partisans, I deem it proper to reaffirm my loyalty to the code to which I have subscribed, without, however, surrendering the right, which in common with every intelligent man I claim, to criticise what I may think objectionable, and to call attention to the inconsistencies of its avowed adherents, who, attempting to observe its letter, ignore its spirit. I fail to see why honest advocates of its principles should be placed in an attitude of "rebellion" for merely defining these principles by the more liberal light of this day. The code properly interdicts any admission of the orthodoxy of the professors of exclusive dogmas, whether of homœopathy, allopathy, hydropathy, or the like; but it nowhere prohibits the intelligent physician giving *his* advice to whomever may seek it, especially when emergencies and the dictates of humanity demand. No one can more energetically discountenance than myself the impossible co-treatment of any case of disease by an educated physician and a charlatan, empiric, quack, or ignoramus, however regular; but it is quite another matter when one's own opinion is solicited in the interest of suffering humanity. I have yet to hear of any one of our profession soliciting an opinion from any of these, and without such an interchange of views there can scarcely be considered any *consultation*, in the sense of the clinical coöperation properly denounced by the code. Any narrower assumption will, as I have endeavored to show in this paper, necessitate the ostracism of those of our famous colleagues who have associated as fellow medical members with homœopaths and eclectics in the professional work of the National Board of Health, State Boards of Health, Boards of Medical Examiners, etc.; and I feel assured that the overwhelming sentiment of the American Medical Association will be in favor of the liberal interpretation I have here given the code, with the previous knowledge and approval of the Surgeon General of the Navy.]

Superficial observers see in the question which has arisen in the State Medical Society of New York, only an attempt to break down the guards which hedge in the kingship of our profession. They have, indeed, proclaimed afar that the time-honored tradi-

tions of the guild are to be ignored, and the right hand of fellowship given to the accursed unbeliever. A year has passed since this question arose, and the dignified body of which we are a part evaded meeting the issue face to face. A few voices were raised in explanation, but they were drowned in the cry, "Crucify him! crucify him! He breaks bread with a homœopath." The august fathers of the Association frowned their displeasure, and the venerable idols of antiquity were taken down from their dusty niches, and displayed to exorcise this new demon of the nineteenth century. Outside the halls animated ex-parte statements were circulated, and a thousand delegates went away believing that a few individuals in the city of New York, mainly specialists, for purposes of personal profit, were advocating the license to consult, confer and coöperate with avowed homœopaths—this and nothing more. Since then the matter has acquired a newspaper notoriety, and it is blazoned to the world as a fact that the delegates of the State and County Medical Societies of New York have disqualified themselves for association with us, because they have sanctioned the formal recognition of homœopaths in clinical conference, and the popular sympathy of the profession has been aroused against these mercenary innovators.

It is, of course, the business of the Judicial Council "to take cognizance of and decide all questions of an ethical or judicial character that may arise in connection with the Association," but every member of the Association has an equal interest with these twenty-one in the inquiry into the causes which have induced some of the most exemplary members of the profession to their course. Is it, as alleged, that the Code of Ethics is an antiquated piece of verbosity? Does it really accomplish what it proposed? Undoubtedly, its purport was the exclusion from professional fellowship of all but those who are entitled to it by their intelligence, their education, their professional skill and acquirements, and that fearless probity that doth become a man. Has it done this? Does it do it to-day? Are there intelligent, educated, skillful and upright men in the profession because of the Code, or in spite of it? It is unquestionably true that there are no homœopaths in the American Medical Association, but are there any *allopaths* there? Does it say "Brother" only to those who are fit to wear the mantle of the wise physician? These are questions for the Association to ask itself, and primarily it is for the State Medicine Section, in its purview over medical education, to discuss calmly, fearlessly and thoroughly, and to go with its conclu-

sions, and announce them to the Association, however unpalatable or unpopular.

I do not propose at this time any formal criticism or arraignment of the Code of Ethics. Practically three lines only are the shibboleth which the elect are required to utter: "No one can be considered as a regular practitioner or a fit associate in consultation whose practice is based on an exclusive dogma." Prior to this it is stated that "a regular medical education is presumptive evidence of professional abilities and acquirements," but you may search the fifteen pages of the Code in vain for the definition of what constitutes a *regular medical education*, and it is to this I now propose especially to limit my inquiry—whether, while straining at the gnat in the twelfth, thirteenth and fourteenth lines of Sec. 1, Art. IV, we have not swallowed a camel in the other eleven. I leave to others the question of the purpose or propriety of the sonorous chapters "On the Obligations of Patients to Their Physicians" and "On the Obligations of the Public to Physicians." The short time at my disposal will only enable me to endeavor to demonstrate the failure of the Code to define as rigidly what constitutes that regular medical education, which makes the physician, as it determines who are to be his fit associates. During a few minutes, at the close of the last annual meeting at St. Paul, I had occasion to refer to this matter, in connection with my proposition that it was our duty not to let down any of the bars which guard our entrance, but to put others up; not to admit into the flock any irregular black sheep, but to exclude the horned and bearded goats already there, clothed in ill-fitting suits of regular white lambskin; and I hastily read some extracts from a paper on Medical Education I had prepared for the Association about ten years ago. I had then just been relieved from duty as a member of the Naval Medical Board of Examiners of candidates for admission into the Medical Corps of the Navy, and the daily evidences of utter incapacity I had read, heard and witnessed from men, "who having had that regular medical education which," in the language of the Code, "furnishes the only presumptive evidence of professional ability and acquirements, and is the only acknowledged right of an individual to the exercise and honors of his profession," determined me not to rest until I had brought these facts before the Association. Orders to sea prevented me carrying that intention into effect, and on my return I learned that the paper had been lost, and it was only recovered by me a few days before our last meeting. In this paper I have collated some of the evidences of professional inability of men, who bear diplomas from honored institutions, and who, at the date of their examination, had been some one, some two, some three, and some six years exercising our profession, with all its honors, invested with all its responsibilities, admitted to fellowship in this Association, and duly guaranteed as fit to consult with or be consulted by any of you, without fear of soiling your professional ermine. The incredulous may verify my statements by consulting the records, whence I have obtained them. I have not specifically named the schools on which these wisecracks were grafted and

blossomed, since my object has not been to make invidious comparisons, but to demonstrate how shallow the crust on which the foundations of medical education have been erected, and the absurdity of addressing fifteen octavo pages of a code of ethics to such as these, the majority of whom never read it, are not even aware of its existence, and could not understand it if they were. Is it at all credible that the man, however regular he may be certified, who informed the *Naval medicine board* that "*the blud should be clenod of its impurrities every spring*" can comprehend these well-turned sentences and lofty sentiments? Doubtless, he would, with orthodox fervor, execrate the *homeopathes*, even though, in the next breath, he proclaimed himself a *reglar alleeopath*!

Before all, however, it is proper that I should satisfy you of my own right to sit in judgment, and to do this I must first explain that the conditions for admission into the medical corps of the navy are not of any exceptional or exclusive character beyond the limitation of age between a minimum of twenty-one and a maximum of twenty-six, but are merely such as should be fulfilled by any young man, who is certified in classic diction by seven or more distinguished professional elders, to be *doctus in arte medica*, learned in medicine. The prerequisites of respectability of character and correctness of deportment, established by testimonials from citizens of known probity, ought not to be considered superfluous, even for the matriculant, while the modest scholastic acquirements insisted upon, rarely extending beyond a rudimentary familiarity with orthography, grammar, geography and arithmetic, are not a tittle of what ought to be necessary preliminaries to the study of the first bone. The possession of a degree is not required, as it undoubtedly ought to be, and would be, did it carry with it any assurance of professional qualification, the Code of Ethics to the contrary notwithstanding. Why a degree, however regular in origin, is not considered satisfactory evidence of professional qualification, I expect to abundantly illustrate in this paper. Furthermore, the catholic liberty to compete for any position under the government, has not allowed the Board to decline to accept the candidacy of any individual claiming the ability to practice our art, and accordingly we have examined graduates of eclectic colleges and homœopathic colleges, as well as those who did not graduate at any college, who were thus permitted to stand on the same footing with the possessors of sheets of parchment containing their names in a form they would not recognize and in a language they could not interpret. Though all such *irregulars* have failed to pass our examination, it is but just to state that the files of the Department will show that they had no lack of peers in ignorance among the alumni of institutions of the most renowned name and unassailable regularity; and I fail to see how the Board in any way countenanced these practitioners of an exclusive dogma, or lowered the prestige of our own exclusive possession of the only true faith by consenting to demonstrate to these pretenders that they were really ignorant and incompetent. Had the door been slammed in their faces, would they have carried away with

them as lively a sense of their shortcomings, as when the opportunity had been given them to write themselves down asses?

A few words now as to the nature and routine of these examinations by the Naval Medical Board. After the physical inspection of the nude body and the written certificate of the candidate that he is free from inherited or undiscoverable disease, he prepares a biographical sketch, describing his academic and medical education, enumerating the authors read, and detailing his opportunities for acquiring practical acquaintance with any branch of his profession, especially his hospital and other clinical experience. After this, which is usually the work of one day, the formal professional examination begins, and comprehends—

First: An ESSAY, written without notes or references, within an allotted time, the subject ordinarily selected being one with which the candidate, in his preliminary letter, has shown evidence of most familiarity.

Second: The preparation of WRITTEN ANSWERS to fifteen questions propounded in writing, three in each of the following branches: (1) anatomy and physiology; (2) chemistry, hygiene and jurisprudence; (3) materia medica and therapeutics; (4) the principles and practice of surgery; (5) the principles and practice of medicine. These questions are purposely selected to cover as wide a scope as possible, and so serve as introductory texts for the oral examinations. All the written work is carefully scrutinized as to orthography and composition, the errors being indicated by red ink marks, and is filed at the Department as evidence against the candidate, in the event of the dissatisfaction of himself or friends.

Third: ORAL EXAMINATIONS, each about an hour in length, by the several members of the Board in rotation, on all the subjects within the domain of the properly educated physician, including the principles and practice of obstetrics, and forensic medicine, and cursorily on such subjects as may be judged necessary to determine the general proficiency of the candidate.

Fourth: PRACTICAL EXAMINATIONS in the recognition of drugs and pharmacal preparations; in the arts of prescribing and of compounding prescriptions; in the chemical examination of water, urine, etc.; in the uses of surgical instruments, the application of apparatus and the performance of operations and demonstrations upon the cadaver; and in clinical exercises in the wards of a hospital, the use of the laryngoscope, thermometer and other diagnostic apparatus, and the preparation of a written commentary on some one of the cases there examined.

The candidate has the privilege of introducing a friend at any stage of the oral examination. It is a courtesy seldom refused for him to be allowed to withdraw at any time, as it is the privilege of the Board to dismiss him whenever they may be satisfied of his failure. The examination concluded, his qualifications and standing are determined by a majority vote.

Further prolix detail is probably not necessary to satisfy you of the process by which these replies were elicited which I am about to read, a process to which

I insist every person should be subjected before he is allowed to practice medicine.

I have selected from my notes samples of the replies of twenty-five candidates, *doctores* all of them, men certified to be learned in that noblest of all the sciences which engage the human intellect. I have endeavored to range them over as wide a field of inquiry as possible, to show that it was not abstruse or theoretical points on which the deficiencies were manifested. I have taken them from the graduates of schools in every section of the country, and those of established reputation, in order to prove that no one school, however exalted its rank, can claim exemption from the charge of having graduated grossly illiterate and incompetent men, and that diplomas have been sold, not cheaply and openly, as by Paine and his fellows, but still for a price, meaning two full sets of tickets, a matriculation and a graduation fee. I cannot, of course, say how many of these candidates actually fulfilled their implied contract to attend lectures by sitting wearily on benches listening to discourses that must have been totally unintelligible to most of them, because I am not unjust enough to intimate that these professors did not honestly and faithfully fulfill their part by lecturing, but I do declare that their words fell like idle wind upon hearers such as these, and that the dolt who sat there throughout the course, or part of it, or who did not even sit there, but bought the ticket, issued forth a full-fledged doctor, the peer of the brightest, most industrious, and most zealous student in the class. I do know of one instance which came to me in the shape of an indignant protest from a very accomplished physician at Yokohama, that an Englishman, who had been my apothecary for two years at Nagasaki, had taken the March steamer for San Francisco, and returned by that of July with the diploma of a regular medical school, which he displayed among his countrymen, to the great scandal of American institutions. I know that this man, a fair compounder of prescriptions and with a midwife's experience in obstetrics, had less right to practice our art than the Mrs. Gamp whose functions he had occasionally usurped; yet he was admitted to examination(?) after paying for one course of lectures, and pledging himself to produce a certificate from the London hospital in which he said he had studied and served. I do not know, nor have I sought to inquire into, the antecedents of any of the candidates whose replies I am about to quote. With these the Board had little or nothing to do. Our business was simply to ascertain whether A. B. was properly educated in his profession to be fit to be intrusted with the care of the officers and men of the naval service. Some of the revelations of these examinations would be amusing, were it not the lamentable fact that many of their authors have been for years intrusted with the lives of their fellow-beings, and this by the authority of the most respectable regular medical colleges in the United States.

To begin with the original seat of medical learning in this country, a graduate of one of its great schools, whose diploma was five years old, who had been recently prepared for examination, and whose demeanor evidenced the high opinion he entertained of his own

abilities, stated that "the corpus callosum is that part of the dura mater which separates the cerebrum from the cerebellum;" that "the vertebral artery communicates with the cavernous sinus;" that "the membranous part of the urethra is below the triangular ligament, which is an extension of Gimbernat's ligament;" and that "pneumo-thorax is a collection of pus in the chest."

A second from the same institution, four years graduated, informed us that "the principal muscles of the larynx are the vocal cords;" that "the one-seventieth of a drop of hydrocyanic acid is the dose for an adult, and the tenth of that the proper quantity for a child;" that "the boiling point of Fahrenheit is about 300°, that of the centigrade scale not so high, and that of Reaumur higher;" that he "could not tell what the zero of Fahrenheit was without having the other scales before him;" and that "the normal temperature of the human body is from 112° to 140°."

Still keeping among the "doctors in medicine," the learned ones of our profession from this same school, a regular of regulars, we find a graduate who had left the benches only two years, declaring that "cholera communis is communicable cholera," and "it is a disease of the sea coast of warm climates, occurring generally in the Gulf of Mexico, with a geographical limit of from 20° S. to 10° N."

From a sister school in the same city came a gentleman well provided with testimonials of his social, literary and professional qualifications for the Naval Medical Corps, who stated "that he did not remember the country nor the language of Hippocrates," that "Galen lived before him," and "Virgil died in the fifteenth century of the Christian era."

A brother alumnus, whose diploma was only a year old, declared that *the hole in a sample of Russian rhubarb* shown him *was natural and grew there*; that "accupressure is made with the finger or any other instrument," that "the laryngoscope is a short tube, which you put in the throat and look through;" that "the tuberosity of the tibia is the part broken in Pott's fracture;" that "ranula is a disease of the eye," *he could not tell which eye*; that "internal hemorrhoids are to be chiefly diagnosed from fissure of the anus;" and that he did not know the difference between chordee and priapism, nor could he tell what either was, other than that it was similar to stricture.

It was a graduate of this same school, who, indeed, brought letters to me from an esteemed friend and deservedly distinguished physician in Philadelphia, who, having absented himself several days during the examination, on his return announced to the President that he had been ill with *cholera infantum*, and gravely reiterated the statement, when with some astonishment, I repeated the inquiry.

New England sent us a candidate who had been practicing medicine almost six years, who informed us that "nitrate of potassa is *insoluble* in water;" that "chondrus is isinglass and is used to make blanc mange;" that "liq. sod. chlorinat. is the chloride of lime;" and that insanity is a strictly mental disease, he did "not know that it was ever regarded as a physical disease."

Also from this section came an aspirant for the corps who was born and educated in Vermont, *where I studied Latin grammar*, and, who, after certifying that his *helth* was good, stated that "orchites or Inflammation of the Testicls is produced by external injury manely although occasionally it is produced by internal difficultys the Symptoms are pain through the lumbar regunn through the Kidneys and down the spermatic Cord. The Diagnosis is that it is so and also swelled. The Treatment is to Suspend the Scrotum by means of a Scrotal bag supporter. bathing the part freely with cooling lotions and Cold water to allay the Heat—and Inflammation as rapidly as possible, A low diert, avoiding excitment as far as possible if the Pains is to sever an occasional anæsthetick should be givn to relax the muscle as well as giv rest to the Patient if the Inflammation does not subside but incensans the operation of extirpation of one or both of the testes must be submitted too. being the last and only resurse to be had that can possibly save the Patient."

Bear in mind, gentlemen, that this worthy possesses a diploma of no insignificant medical school certifying that he had had that regular medical education which is the only presumptive evidence of his professional abilities and acquirements, and is thereby entitled to the exercise and honors of our profession.

Hear further: "Scarlatina is an eruption on the Faceis. or Face and Head It is divided into three symptoms Simple mideum and Malignant, The simple form is known by eruptions on the Face, Fever, the eruptions of a scarlet coler and small and Genelle lasts not more than a week. The mideum is like the simple save that the fever is higher and the spots larger. occasiunly attended with soar throat. The Malignant variety is the hardest form the fever running high and the Blotches genelle extending over the whole body with a Gray Sloughy soar Throat. this variety generly terminates in Death in a few days unless checked. by Mental, depression."

And again: "The temperature of the system is variable in helth the cuticle stands at 70°. the Digestive organs at 100 before they act on the Ailment, Any great deviation from this state denotes that the Patient is a Pathological condition. and that the Saliva being a powerful Alkaline, with phosphate Sode it base it causes a fermentation of the Ailment The Saliva is much stronger after than before a meal. It also renders assistance in the action of passing the Ailment through the glottis Cesophigus Thorax to the Stomach."

If you feel inclined to laugh at this tissue of absurdities, recollect that it is your professional brother and peer to whom I have introduced you. Rather shed tears for the poor wretch he may have castrated to save his life. A thousand times better for humanity had he drawn his inspiration at the Hahnemannian fountain, and prescribed trillions and decillions of carbo, spongia and sambucus.

A representative from another New England school announced that "phosphorus burns and makes nitrogen gas;" that "the crepitant rhoncus occurs whenever a membrane becomes dry;" and as a part of his academic education, that "Plymouth was settled

by Columbus, who gave the town its name;" and that "each State and Territory has one senator, who is a man of great influence," one of this great influential body having in fact indorsed this learned doctor's competency to assume the care and responsibility of the sick of the navy.

A very elegant young gentleman from New York, graced with all the accomplishments characterizing fashionable society pets, who had an office in one of our great cities, where, though the navy failed to appreciate his worth, he subsequently rose to a lucrative practice through the patronage of wealthy friends, said that "orchitis is a disease of the testicle affecting one of its coats, called the vas deference, which he believed was the external and was a serous tissue;" that "erysipelas is known by its shiny look, that it is confined to the head, and terminates by suppuration or by getting well;" that "the hot bath should have a temperature of 75°;" that "the hyaline appearance of tube-casts refers to their hair-like structure;" that "a microscope of one thousand powers is required to see a blood corpuscle;" that "the symptoms of delirium tremens, of which I have seen numerous cases, are dilated pupils, hot dry skin, slow pulse, and glassy eye;" and "that puerperal convulsions require diuretics at first and then diaphoretics, such as pulvis ipecacuanha compositi 5j divided into six powders and taken every two hours until profuse sweating is produced, and if this does not succeed in sweating her, let her drink hot tea and give her a Russian bath!"

Another, also a practitioner by authority of the same renowned institution, stated that "a poison is any substance that acts as a local irritant upon the mucous surface and thus produces congestion of the brain;" that "acupressure may be pressure by a tourniquet, by a V-shaped bandage, a pad, or by the hand;" that he had always used stimulants, and liked the way his patients built up under them, although he *wholly condemned them as a beverage*, and added that "they ought never to be used in lung disease, for they increase the action of the heart."

A candidate likewise from this school, and whose right to the doctorate was doubly guaranteed by a previous diploma from a western university, in a theme of twenty-five lines on the assigned subject of "The botanical history, physical characters, chemical constituents, physiological action, therapeutic applications, and official preparations of jalap," stated that: "It is a small plant which grows from one to two feet high. There is nothing peculiar about its chemical properties, with the exception of a slight astringency and pungent bitter taste. The root, as found in the market, is about the size of a crow-quill. It acts by increasing the secretions of the *mucus membran* of the intestine. It may be used in any case where the action of a slow cathartic is required. It is also thought to increase the amount of secretion of the *mucus membran* of the lungs."

He said of hydrogen that "the danger attending its manufacture is from the danger of inhaling the gas which is very injurious to the lungs and it is also explosive thereby causing more or less danger."

He also stated that "the antidote in poison from

strychnia is physiologically belladonna, but a dose of the belladonna that would counteract the effect of the strychnia would *kill the patient*;" and that "the coats of the eye are the conjunctiva sclerotic and choroid. The conjunctiva is a mucus membran. It contains blood-vessels and nerves. The sclerotic membran is a dense white membran containing no blood-vessels. The choroid membran is not as dense as the sclerotic. The aqueous humor is not as thick as the vitreous. It occupies the anterior chamber. The vitreous humor occupies the posterior chamber."

A graduate of another deservedly celebrated New York school announced that "Galen introduced vaccination or inoculation in the seventeenth century, and that Aristotle was some ancient philosopher who wrote a book," probably intending that "masterpiece" which naughty youths delight to read, while still another New York M.D. explained that "The conditions which would render Bronchotomy necessary, would be when a foreign body has lodged in one of the bronchial tubes. I know of but one method of performing it and it is to cut down carefully being guided by the physical signs and your anatomy, and after severing the bronchial tube in a longitudinal direction I would remove the foreign body, and carefully close up the wound;" that "an astringent is a medicine which corrogates or contracts the tissues;" and that "to determine accurately whether a person be dead or not, a knowledge of anatomy and physiology is essential. One of the surest signs of death is complete cessation of the heart's action accompanied with a cold surface of the skin, a blueness of the lips and fingers, and a *coldness of the teeth*."

A doctor from a third New York college wrote as follows: "Scrotal hernia is where the intestine passes into the scrotum when it sometimes becomes of enormous size. The prominent symptom is a non inflammatory swelling of the groin and can be diagnosed from other swellings by the impulse conveyed to the figure when placed over the tumor by coughing." "The pathology of surgical fever is a poisonous condition of the blood caused by the absorption of some poison from a wound or injury. This poison is carried by the circulation to the nervous system and different organs of the body causing a general febrile action;" "Gonorrhoea is caused by a specific poison generated by filth and excess of sexual intercourse and by actual contact;" "Malaria is an invisible poison invading the air." This gentleman introduced many orthographical novelties in his written work, such as *spunging, annemia, coraccer brachealius, fassia, abdoman, thygh, plexas, alun, superation, accute, arrises frome betwene, shure, wair, beleaving*, etc.

Next after Philadelphia and New York, Maryland has supplied the largest number of applicants for admission into the medical staff of the navy. One of these, a graduate of seven years, informed us that "The phenic nerve is one of the cranial nerves, I don't recollect which pair;" that "The mind has more action on the cerebrum than on the rest of the brain;" that "The surface of the heart is a mucous membrane;" that "The temperature of the body in African fever is 96°, much above the normal temper-

ature of the body, which is 92° F;" and he wrote a prescription for an emulsion of copaiba containing more than twenty errors, the Board requiring prescriptions to be written without symbols or abbreviations:

"Ricipi

Copaiba Drachmæ quarto
Pulvis acacia
Sachrum Alba añã Drachmæ duo
Aqua Distilata Ouncæ quarto
Oleum sassafras gutta viginte

Mice

Signa One Tablespoon 3 times daily."

The same alma mater sent us one of her sons whose fluent pen has largely contributed to our medical literature. The same pen in the written examination, beyond which we did not think it necessary to go, was made to state that "The larynx extends from the base of the skull to opposite the fifth cervical vertebra, where it divides;" that "The most simple form of the galvanic battery is that discovered by Buven, of Leyden, and called by him the Leyden jar;" that "one of the common sources of Ammonia is Phenic Acid, a natural secretion from the beaver;" that "The gastric juice is one of chemical solution, and the vital attributes of the stomach are only employed in the preparation of the solvent; that "The gastric juice exists in most animals as hydrochloric acid, necessary for their digestion;" that "Food enters the stomach in successive curves by a peculiar peristaltic motion of the stomach acting through the fibers of its muscular coat;" and that "In the treatment of Measles you regulate the secretions by small doses of mercury and epispastics, astringents and farinaceous diet, and if the type should be malignant, we would relieve the congested organs as speedily as possible by venesection or by local depletion, together with good diet."

Another informed us that "Senna is indigenous, growing in the West Indies."

Still another, that "The Greek language is spoken by the people of the Isle of Greece, which island is southeast of Italy; that "Ovid flourished several centuries before Christ;" and that Longfellow is a great English poet."

A fifth defined coxalgia to be *inflammation of the coccyx*."

A graduate from another school in the same State said that "There are two varieties of senna—Alexandria and Teneriffe;" that "The Technical name of Rhubarb is Colombo;" that "Jalap comes from Spain," and that "The Apothecaries' Weight there are sixteen ounces to the pound."

Another, who was graduated from the same institution four years before, and who was at the time of examination a leading practitioner and the city physician of a western municipality of considerable pretensions, stated that "Opium comes from Egypt and Asia Minor and Hindostun, but not from India;" that "Aloes is the gum of a tree growing in South America. There are two varieties of Aloes in use. The best is Soccotrine Aloes from South America—this variety costs much more but on account of its effects is more extensively used. The other variety

the Cape Aloes of commerce is the inferior of the two and is brought from parts farther north than the Soccotrine variety;" that "Chlorine is a very poisonous gas of a blue color;" that "The difference between Galvanism and Electricity is that one is the substance itself and *the other its use*;" that "The galvano farriadaic company, of New York, are furnishing excellent machines;" that "I do not know the difference between primary and secondary, interrupted and continued currents;" that "In gonorrhoea we use strong injections to destroy the poisonous matter before it gets beyond the glans;" and that "To determine personal identity in a case of questionable personification, we should collect all the reliable evidence possible, and if not satisfied by thorough examination of the facts of the case, I would Chloroform or etherize the questionable party and judge from his expression when unconscious."

A representative from a school in a district farther south wrote that "The ureter is the duck of the kidney;" that "sporadic disease is locally a kind of epidemic;" that "Brandy is a vital stimulant and so is beaf essence;" that "The ordinary dose of Chloroform as an anæsthetic is 3j of ether 3ij;" that "The average respirations are 70 per minute;" and that "I believe there is a slight difference between the inspired and expired air."

From still farther south came a physician who declared that "Carron oil is so called on account of its bad smell;" that I don't know what is meant by colica piconum; that "The period of utero-gestation is nine lunar months;" but that he "could not tell how long a lunar month was, nor why it was so called."

Finally, from the west we had a graduate of unimpeachable regularity, who said that "Campher is an aromatic gum from the islands of the see;" that "The carotic arterie makes its exit between the 1 and 2 ribs and enters the cranial cavity through the petrous portion of the temporal bone;" and that "The best way of facilitating the expulsion of the placenta is to let the woman walk about the room, allowing five minutes to elapse after delivery before requiring her to get up and walk."

These examples were not especially collected for my present purpose. I have merely used such as I had casually jotted down among my memoranda. The notes of my colleagues and the archives of the Bureau of Medicine and Surgery can supply thousands of instances of professional incapacity where I have noted a hundred, and my successors of to-day upon the Board are having the same experience. Within a week one wrote me that "The comic opera and minstrel performances are nothing compared to the Board entertainments." Think of a candidate—a graduate, and a regular graduate—gravely informing us that "*Phimosis is the result of old age*." Ridiculous errors in orthography, inexcusable in a day-laborer in this land of boasted educational facilities, are so common that one might believe correct spelling to be a refinement of culture. "What the hell has spelling to do with the practice of medicine?" demanded an irate Member of Congress of the Chief of the Bureau, Dr. Whelan, on being shown his protégé's written work, and doubtless so thought the

trustees of a charitable institution widely known, who admitted into its resident medical staff a gentleman, the medical graduate from a university, who two years subsequently gave the Board the following written evidence of his literary acquirements, viz.: *immengencies, attact, thare, redy, vigitable, xertion, urin, pluracy, deadly knight-shade, and expulsion of its contence.* Without questioning that there are intellectual giants who achieve greatness in certain careers, though unable to spell at all, it may be doubted whether the average mind accustomed to write *scassity, and orful, and inturlec and aurora epileptica*, in total ignorance of their etymological significance, can ever succeed in comprehending the language which has come to be technical in every department of our science; and only errors such as these, and not mere phonetic mistakes have, of course, been taken into account. Indeed, we did not decline to examine the candidate who addressed his letters to the *Navei medicle bord*, and subscribed himself *yours respect-ively*, and I do not believe he was one whit the inferior of the regular graduate who this very year addressed the following epistle to Dr. John H. Rauch, Secretary of the State Board of Health and Medical Examiners of Illinois:

"To the *Secratary State boar* of health *Deear* Sir I sent you my *dipsuma* early last March and have not heard from it *sinc* did you receive it or do you know anything about it I am become quite anxious concerning its *safy* My *dipsuma* is from ——— Med College ——— dated ——— 1882 I also sent you a letter containing a one dollar bill to pay for the *certifficate* If you will give me the information I *requist* I shall be greatly obliged to you Yours respectfully ——— M. D."

Show me in your Plan of Organization, or in your By-Laws, or in your venerable and venerated Code, which it has been declared to be "rebellion" even to criticise, one line denying that regular graduate admission here on terms of equality with you all, if indeed he may not be here already.

But errors in orthography, faulty grammar, and the absurdities and senseless incoherencies of the oral examination, pale beside the display of ignorance during the practical examination. I have seen the spermatic cord demonstrated in a female subject; the structure of an entire limb torn up in the search for a superficial vessel in open view of the operator; the anterior tibial sought on the inner side of the bone, and again through the sural muscles; the posterior tibial ligated at the external malleolus; and the palm boldly laid open by a long, deep incision to secure the radial. I have witnessed the application to fractured limbs of apparatus that would have deformed the sufferer for life; prescriptions written that no apothecary could decipher or compound; and others compounded either with fatal doses deliberately prescribed, or ignorantly and carelessly weighed, which it would have been eminently proper, in the interests of humanity, to have required the exhibitor to have swallowed. Yet these were all the acts of men who had received that accepted "regular medical education" which makes of them the elect, who have the "acknowledged right to the exercise and honors of

our profession." I appeal to these very Professors, who signed the diplomas of these men, whether any practitioner whose practice is based on an exclusive dogma, could rival in ignorance that regular doctor, who, having amputated through the thigh, regarded the stump sharpened like a lead pencil, and coolly remarked, "Why, I must have made my cuts the wrong way!" Can any Code of Ethics exalt him into a position fitting him to be consultor or consulted with, even by a homœopath; or him, who having a superabundance of flap in an amputation through the arm, neatly tucked in the superfluous ends and deliberately stitched the folded cuticular surfaces in apposition; or him, who having attempted a disarticulation through the tarsus, delared that he would allow the protruding cuniform bones to remain *until they skinned over*; or him, who having advised the operation of trephining, minutely described the method of introducing a silver plate in the cranium, the bone being carefully grooved to receive the plate in the fashion of a watch-glass; or him, who on the morning of his graduation, when requested by an old physician to bleed in a case of emergency, plunged his lancet on the cardiac side of the bandage; or him who proposed to treat orchitis by removing one or both testes, if the inflammation does not subside after rest, cold applications, and occasional anæsthetics; or him, who defined pneumonia to be a particular disease of one lung, and pleurisy the name given to it when it affected the other side; or him, who advised cauterization of the soles of the feet in congestion of the brain, using the actual cautery for poor people, and the potential cautery, by which he meant nitrate of silver, for rich patients, that they might not be discommoded *by the smell of the burning flesh!*

I do not want to be misunderstood as arrogating for the medical corps of the Navy, even by implication, any superiority to the average general practitioner. We do not pretend that any of our number has any claim to but the humblest seat in the medical forum, but we have striven, and I believe not in vain, to exclude from our rolls every one of these arrant fools and worthless graduates, who, not having succeeded in entering the Navy, where it is popularly supposed neither skill nor acquirements are essential, must remain in civil practice, slaughtering the unfortunates who fall in their power, and adding their share to the mantle of shame, in whose folds the whole profession is involved. Though we have no statistics of the future careers of those who have voluntarily left our ranks, nevertheless we can point with pride to the large number of ex-naval medical officers, who are now occupying distinguished positions as editors, teachers and practitioners.

Of 1,141 candidates for the medical corps in the twenty years since 1853, only 370, or about 32 per centum, have been accepted. Admitting that 10 per centum of those rejected might have been accepted by less rigid examiners, or were causelessly and improperly rejected, there still remain 700 graduates of regular medical colleges who can give the sign and pass-word that admit them to the benches on which sit Bowditch, and Agnew, and Gross, and the Flints, and Fordyce Barker, and all our other

great men. Many of these seven hundred have, doubtless, through native ability, industrious observation, and after study, learned something of the art they began to practice in the dark, but most of them have only learned to see as the blind see, and at what a fearful cost of human life!

Mr. Chairman.—The time has come when this Association must be up and doing. A few medical schools have undertaken the reform, but the movement that has been inaugurated notably by Harvard will avail little so long as the Association unconcernedly witnesses and indirectly countenances the wholesale manufacture of doctors elsewhere, by accepting their membership without question of their competence. The time has come when something more than paper bulwarks shall be considered defense for our orthodox stronghold, and paper partitions sufficient to separate the sheep from the goats. The time has come for us to act, and it is eminently proper that the Section in State Medicine shall be the scene of action. The dissension in New York has made it impossible for us to remain indifferent spectators. I trust no member of this Section has been misled into believing that any of the distinguished men who have taken part in this agitation have asked for anything that involves in the least degree any concession to the claims of homœopathy, allopathy, or any other exclusive dogma; that none of them have suggested, advocated or desired any arrangement that can provide for or permit the joint clinical treatment of any case by themselves and homœopaths, or any other paths. They have, however, claimed the right to give *their* opinion to any one who asks for it, and is willing to pay for it, to tell any sick person what *they* think of his case, and what *they* advise to be done. In this they give no sanction to the “irregular,” whoever he may be, who has sought their advice, even though this irregular may be wiser than that regular who castrates in orchitis, and gives his puerperal woman a Russian bath. The very fact of their advice having been sought is an admission on the part of the irregular that he has done wrong or knows not what to do, and if, as alleged, these irregulars have not sought these so-called consultations, then none will be, and the storm is but a tempest in a tea-pot, since it is very certain that none of us will ever ask or accept, or care to know what they believe. It is for you, however, to determine decisively whether you will place under the ban the man whose only offense has been to say to one of these irregulars, “You are doing wrong,” or will exclude from the ranks of the profession that one of your distinguished colleagues in New York, who, when called in consultation in a case of difficult labor requiring instrumental interference, did not stop to examine the diploma of the attending physician, but went to work, finding him an exceedingly expert assistant, and learned, when the patient had been rescued from danger, that he had been coöperating with a homœopath; or will threaten the young road surgeon, who, at the close of the meeting at St. Paul, asked me whether he should operate in a case of caries of the tibia in a poor woman at a station where the only physician was a homœopath:—“Do it if you

dare! You shall never cross our threshold if you do. Let her die first.”*

If it be unpardonable sin to give advice to one such, where is the sinning less for my honored friends Professor Cabell, and Professor Stephen Smith, and Professor Bowditch and Professor Hosmer A. Johnson, to sit in the National Board of Health in daily consultation with a homœopath as their medical peer, in consultation not over the life destiny of one individual, but over the life destinies of hundreds of thousands? Surely mere considerations of pecuniary recompense or public distinction did not tempt these men to voluntarily accept an association based on what the Code of Ethics has been interpreted to denounce as inconsistent with the honor and duty of a regular physician. When men of their unassailable integrity, against whom no other man in this Association can lift a finger, have done this thing, it ill becomes us lesser lights to thunder *anathema maranatha* against him who, once in his career perhaps, may have occasion to say to one of these irregulars, “Throw away your pellets—take a dose of castor oil.” Or, if the litany of curses be hurled against all who violate even one aspect of one command of the ethical decalogue, be consistent and begin with these sinning elders in Israel. Excommunicate the members of the State Boards of Health and Medical Examiners, who sit cheek by jowl with both homœopaths and eclectics, even though they have done more, as in Illinois, to lift the wheel of progress in the true ethics of medicine out of the rut in the beaten road over which it has jolted, than any formal code however rigidly construed. Drive out from this Association whole societies, which, as none know better than your Permanent Secretary, have admitted graduates of eclectic and other spurious colleges as members and can send them here as delegates. Go further—add this new section to Article IV: No practitioner of medicine who counsels or allows his wife to employ any physician whose practice is based on an exclusive dogma for herself or his children, (and I know more than one such) shall be recognized as worthy of fellowship in this Association. And furthermore, look not only at the mote in the twelfth, thirteenth and fourteenth lines of Article IV, but make your combination general against all those who ignore or violate any line of any other section of the fifteen pages of the Code. Execrate the advertisers, the trumpeters of their own exploits, the slanderers and back-biters, the cutters-in and the cutters-out, and the man who prescribes “my diaphoretic mixture,” or “my tonic cordial” to be had only at Mr. Jones’ store and pockets a share of the sale. I fear you will have to decimate and re-decimate the 85,671

* Since this paper was read, my friend Dr. Bush, of Wilmington, President of the State Board of Health of Delaware, and the member for Delaware of your section in State Medicine, narrated to me a case in point of a worthy old gentleman of his acquaintance, whom being seriously ill he went to visit and found under treatment by a homœopath for “disease of the kidney,” but suffering intolerable agony from an enormously distended bladder. He did not hesitate to seek the homœopath and inform him, notwithstanding the latter’s assurance that urine was dribbling away all the time; that the bladder must be evacuated or his patient would die, and he offered himself to catheterize him. Dr. B. was chagrined when the homœopath asked leave to accompany him in his carriage, but he consented, discharged three pints of detained urine and then having saved his friend’s life and relieved his sufferings, left the case, although the homœopath begged him to continue in charge.

practitioners of medicine in the United States until instead of 1 to every 585.44 inhabitants, there will remain but 1 to every 58,544, who can be adjudged by such a rule of ethics and found guiltless.

But a truce to these contentions. The Association must attend to weightier matters, and speak in no uncertain tone. Temporizing and procrastination have been practiced without success. If medical societies and medical schools and medical teachers will not act, this Association must do so for its own dignity and self-preservation. We have tilted against the wind-mill of homœopathy until every Don Quixote is assured he has attacked a castle. But for the prominence we have given it by the intolerance of our attitude, it would have shrunk into insignificance with Thomsonianism and the surgery of Regina dal Cin. The most blatant denouncers of association with homœopaths do not hesitate to proclaim themselves allopaths, "An allopath? Why an allopath is a regular physician," is the stereotyped reply to the questioner in fundamental methods of cure. "Certainly, sir, I am an allopath," is the unhesitating admission of men who have subscribed to a Code of Ethics, which denounces those whose practice is based on an exclusive dogma.

Such being the results, let it be your part to prescribe an efficient remedy. The expectant treatment will not answer. *Similia similibus non curantur*. The knife must be applied and the unsightly cacoplasm removed. To the schools we should be able first to look, and if *all* the schools would only matriculate those who can read and write the English language correctly and use the simple arithmetical processes involving a knowledge of weights and measures, the first important step would have been taken, but so long as M.D.'s are granted to men who are not A.B., or its equivalent, what can be expected? I was once asked by the Secretary of the Navy to obtain for him the requirements for matriculation at one of our great schools, and when I told him with much chagrin that I was sure there was none, he urged that I must be mistaken, since every literary college in the land insists upon some measure of preparation in those who enter its halls. What would he have thought of the requirements for matriculation at an institution whose graduates discoursed of the *blud*, and of *helth* and of *medasin*, who prescribed *granes of calomel*, *drams of lodnum* and *watter dressings*, and treated *spraned fingers*, *broken thyghs* and *fishers of the anise*? What of that school, one of whose quiz-masters, laughing with me at the failure of a candidate to define my question, "What constitutes potable water?" remarked, "Why, any fool should have known that. The very name denotes that it is water that can be carried, and I suppose you had special reference to taking it on board ship."

The standard of our profession is trailing in the dirt, and this not because the rank and file are unworthy, but because the standard bearers fail to hold it aloft, and the leaders are laggard. Of the seven hundred and seventy-one men we turned away, many, perhaps a majority might have been made competent physicians. One very sad case elicited the sympathy of the board. A candidate from the Eclectic Medical College of

Philadelphia, who had shown considerable aptitude, lamented his own incompetence, and when asked how he came to study at such a place, said that he went there by the advice of his preceptor, a graduate of the University of Pennsylvania, and that he had spent in fees, tickets, etc., more than five hundred dollars, the savings of many years by his father, whose ambition had been to educate him thoroughly as a physician.

If preceptors fail to apply the lash and spur, if mushroom schools can spring into existence wherever half a dozen men ambitious of the title of professor, get together, if colleges, in their rival contention for students accept any who apply and graduate all who pay their fees, this Association, at least, ought to bar the door against the pretenders who issue from them. Some years ago, in conversation with an intelligent mechanic, who was painting my house, and who had been a master workman until he lost health and everything he possessed by services as a subordinate officer in a volunteer regiment during the war, he told me that he had just met a former comrade in the army, a mechanic like himself, who was so well dressed that he congratulated him on the prosperity of which there were so many outward signs, and was amazed to learn that he was practicing medicine, having secured a petty position under the government, which only required his services during the day and left him free to attend the lectures at night, and in less than two years he emerged a doctor. I myself knew a messenger in one of the Bureaus of the Navy Department who accomplished this feat, and a young auctioneer's clerk, learning from me that twenty-one is the legal age for graduation, said: "Well, I am going to be a doctor, but I am not yet nineteen, and I will not begin before, since it only takes two years to get through."

But I am only repeating a trite, thrice-told tale. The necessity for reform in medical education is undeniable. Let us begin the work of reformation. If the American Medical Association is something more than a convivial assembly—if it is sitting here as a senate in serious deliberation as to the interests of the profession, it can no longer ignore this question. Years ago, your excellent committee, Drs. Davis, Toner and Weatherby, and the committee of the Medical Society of the State of New York, Drs. Squibb, Eliot and Bradford, provided for raising the standard of preliminary education required of medical students, by compelling preceptors to exclude from their offices all who fail to receive the certificate of a properly constituted Board of Censors, but the colleges must be coerced into doing their share. Harvard and the University of Pennsylvania will fight a hopeless battle if they are without allies.

It is for you to say to every one of these great schools and famous teachers, as well as to the petty schools and their tyros in teaching, you must, and at once, set the example of reform; require a preliminary scholastic training of your matriculants; appoint examining boards, who shall have no pecuniary interest in the size of your graduating classes; make your examinations in part written, to remain on record as evidence of the candidate's ability or lack of it; and

insist upon a practical familiarity by the novice with the tools of his art—its drugs, and apparatus, and instruments. For awhile, there will be a falling off in revenue, but the Code of Ethics denounces the prostitution of our calling for sordid purposes, and what more mercenary spectacle can there be than that witnessed at the close of a college session, when, with blessings and music and big bouquets, a new battalion of doctors marches forth, commissioned to assume the most solemn responsibilities humanity offers!

Should the colleges neglect to institute these reforms, then let the Association appeal to the State Medical Societies to urge the several State Legislatures to appoint State Boards of Medical Examiners, who alone shall conduct the final examinations and issue certificates of qualification. It will not be long before the public will recognize, appreciate and reward the work. Nowhere in the world are there more able teachers than in this country. Why should not their pupils be equally signal? While the former sow such good seed, why should it be cast on rocky, untilled soil? Let it be our part to see that only good grain, free from tares, shall be garnered into the storehouses as food for the suffering multitudes who cry to us for help.

In furtherance of these objects, I beg to offer the following resolutions, to be referred to the Association, should the Section in State Medicine give them its approval:

Resolved, That the Section in State Medicine urges upon the Association the necessity for at once taking steps to exclude unqualified members from the profession by refusing fellowship to illiterate, ignorant and incompetent graduates.

Resolved, That the Association be recommended to authorize the Section in State Medicine to act as a standing committee on Medical Education, the several elected members being required to communicate without delay, (1) with the several State Medical Societies and the Legislatures of the States they especially represent, with the object of creating *State Boards of Medical Examiners*, where such are not already in existence, whose certificate shall be necessary to the issue of a license to practice medicine in that State; and, (2) with the authorities of every regularly organized medical college in the State, which has not already taken such action, urging upon them, *First*, the requirement of a proper preliminary education of matriculants, to embrace at least a knowledge of English orthography, and grammar, the etymology of the more common Greek and Latin derivatives, and the fundamental rules of arithmetic, to be ascertained by a written examination, preserved for reference; and, *Second*, greater care in ascertaining the fitness of candidates for a degree, by making their final examination in part a written one, to be kept on record and accessible for inspection by State Boards of Medical Examiners, Boards of Censors of medical societies, and other authorized persons requiring information as to the professional qualifications of graduates.

Resolved, That it is the opinion of the American Medical Association, that medical colleges should con-

fer upon graduates the degree of *Bachelor in Medicine*, such graduates to be eligible to the degree of *Doctor in Medicine* at the end of three years, after having given satisfactory evidence of their qualifications to the Board of Censors of the State Medical Society.

Resolved, That Article II. of the Plan of Organization of the American Medical Association be amended by this additional proviso: *Provided*, that every permanently organized State, County, or District Medical Society entitled to representation in this Association shall be required to appoint a *Board of Censors*, which shall rigidly scrutinize the literary and professional qualifications of every candidate for membership therein; and hereafter no delegate shall be admitted to a seat in this Association, who shall not have received the certificate of such a Board of Censors, or of a State or National Board of Medical Examiners.

A VERY LARGE SALIVARY CALCULUS REMOVED FROM A PATIENT.

BY JULIAN J. CHISOLM, M.D., BALTIMORE, MD.

Salivary calculi are not of very rare occurrence. A tumor under the tongue, on one side of the frenum, a dilated duct from the sub-maxillary gland full of fluid, and called ranula, might contain calcareous deposits. But very rarely have we the opportunity of reporting a calculus of such magnitude as the one which I extracted from the mouth of a patient two months since. I herewith append a report of the case:

Mr. W., aged 73, consulted me for a glaucomatous trouble. During the consultation, he desired to know whether his defect of vision could be aggravated by a disease of long standing in the mouth. In inspecting this cavity, I found a large swelling under the tongue, on the right side of the frenum. It was a very prominent elevation on the floor of the buccal cavity, extending from the inner face of the chin toward the root of the tongue. Its nature was apparent at the first glance, for at the anterior and upper part of this large, round, fleshy mass was an opening one-fourth of an inch in diameter, through which could be seen the exposed surface of a salivary calculus. A probe passed in through this opening entered into a large cyst, the thickened and distended duct of Wharton, which was filled with a solid calcareous mass. With a scissors I slit up the cyst wall, and removed from its bed a very large calculus of brownish-white color, which weighed, when thoroughly dried, 159 grains. It was pear-shaped, the stem or contracted part having been moulded in the less dilated posterior part of the salivary duct. The calculus was $1\frac{3}{8}$ inches long, $\frac{3}{4}$ of an inch broad at its largest end, and $\frac{3}{8}$ of an inch near its most contracted end.

A thread passed around the stone in its longest diameter measured $3\frac{3}{8}$ inches. The circumference at the thickest part was $2\frac{1}{4}$ inches, and $1\frac{1}{4}$ inches