

A SUCCESSFUL, INDEPENDENT MEDICAL ASSOCIATION

The group of far-sighted physicians who organized the Southern Medical Association builded wisely and well. They recognized the need in the South for a purely scientific association, free from politics, one that would attract the general practitioners and at the same time be the forum for the various specialties in medicine. That the Association has succeeded beyond their fondest dreams they admit, and the ease with which it has become the second largest and the second most influential medical organization in the United States has been marvelous. It seemed that the physicians of the South needed only to be told that the Southern Medical Association was in existence, to unite with it and to give it their whole-hearted co-operation; and when they learned that it was thoroughly democratic, not in a political sense, but in its entire plan of organization, they have become even more enthusiastic in their support.

The Southern Medical Association passed the experimental stage years ago and with the best men in all lines of work in the South so interested in it, it will surely continue to grow in usefulness. Its place is fixed as the medical clearing house of the great region known as the South.

THE HOT SPRINGS MEETING

The programs of the general sessions and of the various sections, as published elsewhere in the JOURNAL, are the best evidence of the high standard attained in the scientific work of the Southern Medical Association. The entertainment arranged for by the Hot Springs medical profession will also add to the attractions of the meeting.

Hot Springs is particularly favored because of its splendid hotel accommodations, so that no physician need fear that he will

not be comfortable while attending the November meeting of the Southern Medical Association.

Physicians who are planning to visit Hot Springs should not forget that in order to secure the special rate granted to physicians and their families they must have a certificate from the Association office showing that they are entitled to the rate. A letter or a telegram to the Association office requesting a certificate will receive prompt attention; but the earlier the application is made the surer one will be of getting the rate. Even if one is uncertain about going it is best to get the certificate to use if needed. Everything points to a great meeting at Hot Springs with a record-breaking attendance, and it is not too soon for those who contemplate going to complete their final preparations for the trip.

MORTON, THE IMPOSTER, IN THE HALL OF FAME

Through the courtesy of Dr. Samuel S. Briggs, of Nashville, the Editor of the JOURNAL has had the privilege of reading a number of books and reprints that had been assembled by his distinguished father, Dr. W. T. Briggs, a short time before his death, in which are set forth the claims for the discovery of anesthesia by Wells, Jackson, Morton and Long. The controversy among the three New England contestants for the honor and for remuneration by Congress for discovering anesthesia was one of the bitterest in the annals of medicine. The "war of pamphlets," what would now be called propaganda, as carried on by Wells, Jackson and Morton, and their friends and relatives, make interesting reading after more than half a century.

The Editor of the JOURNAL has tried to read without prejudice the evidence as

presented by various affidavits of the friends of each, and the facts seem to be as follows: Wells first produced nitrous oxide anesthesia for the purpose of extracting teeth in 1844¹; Jackson suggested to Morton the use of ether in dentistry and surgery in 1846². Jackson explained to Morton the properties of sulphuric ether and showed him how to use it on a towel. Soon afterwards Morton³, giving Jackson no credit for the information without which he could not have used ether, persuaded a group of surgeons in the Massachusetts General Hospital to allow him to etherize some of their operative patients; and the surgeons published the fact that the long-dreamed-of surgical anesthesia had been discovered.

Had the three contestants known that Crawford W. Long, of Georgia, could present indisputable evidence that in 1842 he had removed a tumor from the neck of James Venable while under the influence of ether, and that he had performed several other surgical operations on patients whom he had anesthetized before any one of them claimed to have used an anesthetic⁴, it is probable that they would not have wasted so much time and money in trying to establish their claims, with the hope of securing a reward of \$100,000 from Congress for being a benefactor to mankind.

MORTON THE MERCENARY EXPLOITER OF ANESTHESIA

The facts as presented by the friends of Wells and Jackson appear to place Morton as a glory-grabber equal to Dr. Cook

of Arctic fame. They also make it plain that Morton's chief purpose was to exploit for private gain the discovery of one of the greatest boons to mankind. Immediately after using ether in November, 1846, Morton patented it under the trade name of "Letheon," which patent, by the way, Jackson seems to have good ground for asserting was obtained by fraud.⁵ A few weeks later Morton employed Daniel S. Blake to travel through New York and the New England states selling the patent right to dentists and surgeons to use "Letheon."⁶

Morton was modest in his terms for the use of a drug that had been known for many years prior to its employment as an anesthetic. In a circular dated November 25, 1846, Morton generously offers the following terms to dentists for the rights to his invention and apparatus for producing ether anesthesia:⁷

In cities of 150,000 inhabitants, \$200 for five years.

In cities of 50,000 and less than 150,000, \$150 for five years.

In cities of 40,000 and less than 50,000, \$100 for five years.

In cities of 30,000 and less than 40,000, \$87 for five years.

In cities of 20,000 and less than 30,000, \$75 for five years.

In cities of 10,000 and less than 20,000, \$62 for five years.

In cities of 5,000 and less than 10,000, \$50 for five years.

Surgeons' licenses for five years, 25 per cent on all charges made for performing operations wherein the discovery is used, etc.

What would the Council on Pharmacy and Chemistry of the American Medical Association have to say if "Letheon" were put on the market today? What would some of our surgeons do if they had to give 25 per cent of their fees for the privilege of using ether? Where would the anesthetists come in if the surgeons had to give up one-fourth of their fees for op-

1. Data on anesthesia prepared by Hon. Truman H. Smith, United States Senator from Connecticut, published by John A. Gray, New York, 1859.

2. Congressional Report on ether discovery by Stanley and Evans, 1852.

3. Ibid.

4. Southern Medical and Surgical Journal, New Orleans, December, 1849, statement by Dr. Long with affidavits of Charles Venable, et al.

5. Congressional Report, Stanley and Evans, 1859, p. 41.

6. Ibid, p. 27.

7. Ibid, pp. 33-34.

erations on patients under ether? Morton seems to have been the first and the arch fee-splitter.

MORTON, THE CHARLATAN DENTIST

That Morton was untruthful as well as mercenary is shown by the fact that under his signature in the *Boston Atlas* he advertised falsely to the public.⁸

The subscriber, having returned from Washington, begs leave to give notice to his friends and patients (Congress having decided the ether controversy in his favor), that he is now able to devote his attention to the various operations in dental surgery, particularly to the administration of ether. Persons contemplating having artificial teeth inserted are assured that nothing can surpass the excellence of his operations in this department. W. T. G. MORTON, M.D.

Congress never acted upon Morton's claims. The committee, by a vote of 3 to 2, reported his bill favorably, but it was never passed. Such blatant advertising of fraudulent claims prove that Jackson was justified in calling Morton an "unprincipled charlatan."

The book published by Senator Truman Smith, of Connecticut, setting forth the claims for the honor of the great discovery of anesthesia by Wells is particularly severe on Morton, and Senator Smith "assumed full responsibility for his statements."⁹ Senator Smith says that "Dr. Wells perished by his own hand in a paroxysm of insanity, induced, as his friends believe, by the attempt of Morton to filch from him the fame of his great discovery."¹⁰ Senator Smith asserted that Morton knew of Wells' use of nitrous oxide in 1845. Morton had practiced dentistry at Farmington, nine miles from Hartford, for several years and had visited that city in 1845. Morton had studied dentistry under Wells in 1841 and 1842. Wells had also demonstrated the use of nitrous oxide in 1845 in Boston and suggested at the time that ether might be used for an anesthetic.¹¹ It will be recalled that Morton

claimed to be not only the first to use ether, but "the discoverer of anesthesia." From the affidavits published by Senator Smith it is clear that Morton knew all about Wells' use of nitrous oxide in 1845, a year before he used ether.

Senator Smith also charged that Morton maintained in Washington an expensive lobby, who dispensed "champagne, segars and oyster suppers" to Congressmen and Senators.¹² Senator Smith further charged that Morton used stolen money, about \$50,000, furnished him by one Tuckerman, a defaulter, who expected to be reimbursed by Morton when he received the money which he hoped to get from the Government.¹⁴

Morton would not have been so severely criticised had he not been so mercenary. Among other efforts to profit by a scientific discovery, for which he deserves little credit, was to have introduced in Congress a bill granting him \$100,000 for the patent rights on "Letheon" for the Army and Navy.¹² Think of a man who wanted pay for using an agent to alleviate the suffering of men wounded in the service of their country.

The Editor has also read carefully the claims of Morton. His son, Dr. William J. Morton, of New York, strives hard to prove that his father was the real discoverer of anesthesia and that all the other claimants were imposters.¹⁵ He makes as good a case as possible by perverting the facts, and many who have heard only Morton's side are convinced that to him belongs the honor. Indeed, the Morton propaganda has "fooled many people a part of the time," and to such an extent that by a vote of the "intellectuals" of the United States he has been given a place

8. Ibid, p. 32.

9. *Anesthesia*, published by John A. Gray, New York, 1859.

10. Ibid Introduction, p. 11.

11. Ibid—many affidavits.

12. Ibid, p. 130.

13. Ibid, Introduction, p. 5.

14. Ibid, Introduction, pp. 5-6.

15. "The Invention of Anesthetic Inhalation or Discovery of Anesthesia," by William J. Morton. D. Appleton & Co., 1880.

in the Hall of Fame as the discoverer of anesthesia. That the histories and the encyclopedias, with few exceptions, have been misled by Morton's propaganda is the reason he is generally given credit for having been the first to use anesthesia. Few have taken the trouble to get the facts of the case.

HALL OF FAME SHOULD INVESTIGATE MORTON'S CLAIMS

It is never too late to right a wrong, and since Morton has been given a place in the Hall of Fame, it would seem that those in charge of that institution should appoint a committee to investigate the matter to determine if Morton deserves the honor, or if it has been given through misinformation that has been carried in histories and encyclopedias for half a century. The Editor of the JOURNAL believes that an unprejudiced committee would find that Morton was an imposter and a mercenary promoter; and that to Crawford W. Long belongs the honor of discovering surgical anesthesia.

The presentation of the claims of Dr. Crawford W. Long as the discoverer of anesthesia by Dr. Marion Sims should be read by those who desire to know the truth about the matter. Sims¹⁶ gives a judicial statement of the relative claims of Long, Wells, Morton and Jackson. His conclusion was that there can be no doubt of the fact that the honor belongs to Long.

16. Virginia Medical Monthly, 1882.

CANCER CONTROL WORK AND "CANCER WEEK"

The Grim Reaper's chief instrument after middle life is cancer. The threadbare statistics that one woman in eight and one man in fourteen after the age of 40 die of cancer will stand repetition.

There is none of us who does not know, for instance, that a patient presenting any symptoms whatever should be thoroughly examined. The science of medical practice presupposes that as a basic principle. Yet

instances of malignant diseases being dosed with drugs for years without a routine physical examination are of two common observation to permit of denial.

The ulcer of the face or hand is often treated with salves long after its chronicity should have aroused suspicion of one of the great triad—cancer, syphilis and tuberculosis.

The innocent looking tiny sore of the lip, or so-called apthous ulcer of the mouth, must be viewed with suspicion if they last beyond the customary seven days or two weeks. Persistent indigestion, for example, with pain and vomiting even without food, should be studied before being hurriedly classed as "dyspepsia." Bleeding and discharge from the rectum are not *ipso facto* piles, nor is an intermenstrual bloodtinged discharge or spotting around the age of 40 necessarily "change of life." From the old man whose enlarged prostate causes a residuum, infection, increased frequency, etc., to the woman of 30 or 35 with the tiny nodule in the breast, the causes should not be encouragingly attributed to the more simple diagnoses without first ruling out all probability of malignancy. To do this the reasonable patient must receive what he pays for, what he often requests, what he has a right to expect, what his doctor is taught to give him, but what the physician frequently withholds, namely, a careful examination. The sins of medicine are still largely those of omission.

Dr. Joseph C. Bloodgood, of Baltimore, says that some twenty years ago when he began studying the records of Halsted's Clinic at the Hopkins, that, for example, of the cancer of the breast cases, 80 per cent were inoperable and only 20 per cent operable when they first presented themselves. But nowadays, thanks to the knowledge of both patient and physician regarding the so-called precancerous lesions, the present cases of cancer of the breast have the percentages just reversed,