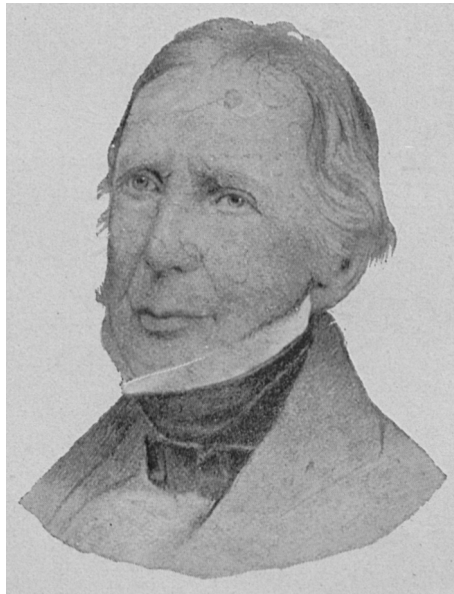


Wm G. Morton MD



J. C. Warren



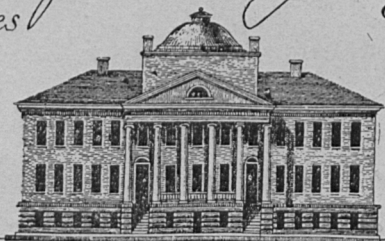
COMMEMORATION
of the
Twentieth Anniversary

The First Public Demonstration
of Surgical Anaesthesia
at the
Massachusetts General Hospital
Boston, October, 16th 1846.

The Honour of your Company is requested
October 16th 1896 at Ten o'clock

Wm Sturgis Bigelow
For the Trustees

J. Collins Warren
For the Staff



SEMI-CENTENNIAL OF ANESTHESIA.

Addresses.

REMINISCENCES OF 1846.¹

BY ROBERT T. DAVIS, M.D., FALL RIVER, MASS.

Mr. President and Gentlemen:—Fifty years ago to-day occurred the first authentic, unquestionable, public exhibition of anesthesia during a surgical operation. As one of the few surviving witnesses of that memorable event, the most important in surgical, and one of the most important in human history, I have been invited to state my recollection of the incidents attending it, and very gladly comply with the request.

The operation in which the anesthetic was administered was performed in the surgical amphitheatre of the Massachusetts General Hospital, by Dr. John C. Warren, in the presence of a number of distinguished surgeons and physicians, including Dr. Hayward, the elder Dr. Bigelow, one of the wisest and greatest men who have adorned our profession with their multifarious gifts and accomplishments, and his celebrated son, not then arrived at the zenith of his fame. The Harvard medical class was also present. After some delay Dr. William Morton appeared with his apparatus, when Dr. Warren addressed the medical class, which had not been previously notified of the proposed experiment, stating in substance that there was a gentleman present who claimed that he had discovered that the inhalation of a certain agent would produce insensibility to pain during surgical operations with safety to the patient, and he added that the class was aware that he had always regarded that condition as an important desideratum in operative surgery and he had decided to permit him to try the experiment.

The patient, who was a young man, was suffering from a vascular tumor of the neck on the left side, occupying the space from the edge of the jaw downward to the larynx and from the angle of the jaw to the median line. Dr. Morton proceeded to apply to the lips of the patient a tube connected with a glass globe. After the inhalation had continued four or five minutes he appeared to be asleep, and the operation was commenced and completed without further inhalation of the ether. It consisted of an incision about three inches in length over the centre of the tumor, and through the skin and subcutaneous cellular tissue, and the removal of a layer of fascia, which covered the enlarged blood-vessels. A curved needle armed with a ligature was then passed under and around the tumor, and considerable compression was employed.

During most of the time occupied by the operation the patient gave no sign of sensibility, and appeared to be sleeping quietly. A short time before its completion he moved his head, body and limbs, and muttered words which I could not hear distinctly, but upon recovering consciousness he declared that he had suffered no pain but simply a sensation like scraping the parts with a blunt instrument.

The exhibition of the anesthetic was admitted by those present to be a complete success. The operating surgeon expressed his satisfaction in these emphatic

words: "Gentlemen, this is no humbug." From that time forward it became the practice to employ it at the hospital in all operations of importance.

Dr. Morton continued to administer it until it was proved that it could be easily and safely administered by others. The apparatus which he had used in the first and a few subsequent instances was soon abandoned as unnecessary and attended with possible risk, and a concave sponge was substituted. Sulphuric ether as an anesthetic very promptly passed into general use in Boston and throughout the State, and soon afterward in public and private practice in the large cities of other States, followed by its employment all over the country wherever scientific surgery was practised. Its fame crossed the ocean, and it rapidly became a necessary adjunct to surgery in Europe as well as here, and beyond, even to the utmost limits of civilization—it did not stop there, but among savage tribes and barbarous races in distant continents and islands it followed the footsteps of the explorer, the trader and the missionary on its divine errand of mercy to mankind.

It is impossible to estimate or comprehend the importance of this beneficent discovery. It safely and absolutely secures insensibility to pain, unconsciousness and immobility for long periods of time, conditions which are essential to the successful performance of prolonged and delicate surgical operations. We know the pain and terror which accompanied ordinary surgical operations before the advent of anesthesia. I cannot forget the impression produced by the case of a naval officer, upon whom a painful operation was performed at this hospital. The suffering was so great that he repeatedly screamed, and was quite unable to suppress the exhibition of his agony. He afterward apologized to the gentlemen present, and stated that he could not control the expression of unendurable pain he had experienced, and to which his haggard features and shaking frame bore undoubted testimony.

It was fitting that the discovery of anesthesia should be ushered to the world from this historic institution, dedicated to the service of humanity in the broadest spirit of charity, by the gifts of noble men and women. It was fitting, also, that the most eminent surgeon of his day in New England permitted the experiment and performed the operation. His name will be always honored and gratefully remembered by the profession and the public, for his courage and wisdom in assuming the responsibility of sanctioning what might have proved a hazardous experiment, whose failure would have compromised his great reputation. Such considerations had no terrors for him; he thought only of the lasting and limitless blessings which would follow success. These qualities he inherited from an illustrious ancestry. He was the son of a Revolutionary patriot and military surgeon, who was for forty years the most distinguished member of our profession in New England, and a nephew of the heroic Warren, who left a profession whose duty it is to save human life, to offer up his own in defence of American liberty in the first pitched battle of the Revolution, and whose name is on the lips of every schoolboy who has read the immortal story of our nation's birth. Blessed forever be the memory of Joseph Warren, who fell at Bunker Hill, and that of John Collins Warren, who aided so signally the renowned discoverer of anesthesia, to whom all generations will be

¹ An Address delivered October 16, 1896, at the Commemoration of the Fiftieth Anniversary of the First Public Demonstration of Surgical Anesthesia.

debtors, in conferring that unequalled boon upon his fellow-men.

Let me add that discoveries of such permanent and universal interest and importance are not accidental. Such an assumption would be an impeachment of the order of the universe, and the designs of Providence. They are the natural and indeed inevitable result of the progress of scientific thought and investigation. The eager quest of previously unknown facts which distinguishes our age reaches the very threshold of discovery, when some fortunate explorer takes a step in advance, ascertains the new truth and proclaims it to the world. The history of surgical anesthesia furnishes no exemption from this general law. In the noon of this grandest of the centuries the spirit of humane science whispered these glad tidings; the attentive ear of Morton heard the message and transmitted it to mankind. Thenceforth this matchless discovery was destined to bestow its blessings, so long as the race shall endure — wherever in all time human suffering cries aloud for succor or languishes in silent despair, and the Divine attribute of mercy, aided by the wisdom of science, flies to its relief.

SURGERY BEFORE THE DAYS OF ANESTHESIA.¹

BY JOHN ASHHURST, JR., M.D., LL.D., PHILADELPHIA.

Mr. President and Gentlemen of the Board of Trustees and Hospital Staff, Ladies and Gentlemen:—A study of the condition of operative surgery before the days of anesthesia reveals on the one hand a picture of heroic boldness and masterly self-control on the part of the surgeon, and on the other a ghastly panorama, sometimes of stoic fortitude and endurance, sometimes of abject terror and humiliation—but always of agonizing wretchedness and pain—on the part of the unhappy victim, man or woman, whose necessities required a recourse to the surgeon's aid. And from our vantage ground of a half-century's experience it is difficult for us to understand, why, with the constant and persistent efforts made by surgeons in past ages to lessen the pain of operations, and with the gradual but continuous accumulation of facts, showing that by certain agents pain could be temporarily abolished without danger, the eyes of all—patients as well as practitioners—yet seemed to be holden, and why, science and art working with a common object, if independently, though the whole world seemed to be trembling on the verge of the discovery, it yet was not until fifty years ago to-day that the crucial experiment was made in this hospital, and that surgical anesthesia became a glorious reality.

It is somewhat difficult to obtain an accurate picture of pre-anesthetic surgery from the patient's point of view, probably for a similar reason to that indicated by the lion in the fable, when he criticised the artist for always representing a combat between lions and men as terminating in a human victory—lions do not paint; and so, as operations are habitually reported by surgeons and not by patients, we read of the skill and intrepidity of the operator, of difficulties met and overcome, and of victories snatched as it were from the very jaws of impending defeat; but we hear little

of the tortures of the victim under the life-saving process, or, in an unsuccessful case, of the gradual subsidence of agonizing cries hushed in the silence of death. And yet we sometimes catch, incidentally, a side-glimpse of an operation from the patient's standpoint, and can thus form some faint notion of the shades as well as of the high lights of capital surgery in days gone by.

Those who are familiar with the history of British surgery seventy years ago will recall the famous case of "Cooper *versus* Wakley," in which the enterprising founder and proprietor of the *Lancet* was sued and mulcted, though in but nominal damages, for the report of an operation for lithotomy performed by Sir Astley Cooper's nephew, Mr. Bransby B. Cooper. The report opens with a quotation from John Bell, referring to "long and murderous operations, when the surgeon labors for an hour in extracting the stone, to the inevitable destruction of the patient," and then, having described in terms as graphic, as uncomplimentary, the operator's prolonged efforts to remove the calculus, and the words which showed his own anxiety and discomposure during the process, adds: "Such were the hurried exclamations of the operator. Every now and then there was a cry of 'Hush!' which was succeeded by the stillness of death, broken only by the horrible squash, squash, of the forceps in the perineum. 'Oh! let it go—pray let it keep in!' was the constant cry of the poor man." The patient was on the table nearly an hour, and, after a night and a day of great pain, "death" adds the reporter, "ended the poor fellow's sufferings, about twenty-nine hours after the operation." The fatal result appeared to have been due to peritonitis. It is, indeed, not an unheard-of thing that a surgeon's presence of mind should fail him in a difficult operation even at the present day; but at least the patient, unconscious through the blessing of anesthesia, does not know it, and this complication is spared, to the great comfort of all concerned.

The "pitilessness" which Celsus urged as an essential trait in the operative surgeon—though Percy and Laurent declare that this pitilessness was meant to be apparent only—was, indeed, before the days of anesthesia, a feature in the surgeon's character which impressed very strongly the public generally as well as those immediately connected with the operation; and it may be feared that there are not wanting, even at this nineteenth century's end, some who would echo the comment of the younger Pliny upon the operative surgeons of his time: "They make experiments through deaths, and no head is secure from them."

It is interesting to recall that Sir James Simpson, of Edinburgh, shortly after beginning his professional studies, was so affected by "seeing the terrible agony of a poor Highland woman under amputation of the breast," that he resolved to abandon a medical career and seek other occupation; happily, his intention was reconsidered, and he returned to his studies, asking himself, "Can anything be done to make operations less painful?" and, as every one knows, in less than twenty years became himself a high priest of anesthesia, and the introducer into surgical and obstetrical practice of ether's great rival, chloroform.

Not only did delicate women and tender children dread the ordeal of the surgeon's knife, but strong and brave men also recoiled from its use in horror: Buffon preferred death to relief from the agonies of calculus

¹ An Address delivered October 16, 1896, at the Commemoration of the Fiftieth Anniversary of the First Public Demonstration of Surgical Anesthesia.