The Journal of the American Medical Association

VOL. XXI. CHICAGO, DECEMBER 23, 1893. No. 26.

ORIGINAL ARTICLES.

A GLANCE AT THE AMERICAN MEDICAL PROFESSION SINCE THE BEGINNING OF THE PRESENT CENTURY.

BY ROBERT HUNTER DALTON, M.D.
ST. LOUIS, MO.

To estimate the progress of medicine since the beginning of the nineteenth century, it is necessary to view the conditions of that period. Physicians then were not troubled with obstacles and responsibilities as they are now, as the calling rested on the same basis with all other common enterprises. Practitioners, whether regularly bred or impostors, had liberty to offer their services, and there was little difficulty in justifying their work among the people, who knew much less about medicine than they do now. Quacks with gift of gab and popular manners were sure of success.

There were no specialties then, but naturally, in every community, some practitioner sprang up into notoriety whose genius led him to feats of surgery, by which he gained superior fame. Opportunities of medical education were so restricted that a majority of physicians in rural and village communities were either self-taught or served a term of apprenticeship under some popular doctor of experience. Scarcity of money and difficulty of transportation were hindrances to all but a few. Transylvania was the only school in the West and South, only three of any note were in the Northeast, and among these, that of Philadelphia held chief patronage, for as far along as 1830, the Pennsylvania University was crowded with students from New York and the New England States. Medicine was then taught almost entirely from the rostrum, clinics being left out at Transylvania, and occupying only one hour of every week at the Pennsylvania Hospital in Philadelphia. The chairs of theory and practice and the institutes entirely overshadowed all others, and the professors of these were favorites of every class; indeed, they were fairly worshiped. Any octogenarian now living who listened to Charles Caldwell at Lexington, Ky., or Nathaniel Chapman of Philadelphia, in 1827, will bear witness to this, for he must have been charmed by their eloquence, especially that of Caldwell, who may have had equals in other branches of oratory, but never a superior. His person was of the grandest type, six feet two or three inches tall, well proportioned and as straight as an arrow, and modeled like an Adonis, all except his feet, which were incased in shining boots No. 10 or 11, of which he seemed to be vain. His eye was that of an eagle, and his bald head, with a broad, projecting forehead, thin lips and ruddy cheeks, gave him the appearance of a superior being. He never failed to arouse the enthusiasm of the class as he gracefully entered the doorway every day at 10 o'clock, elegantly dressed, and with hat in hand marched up to the rostrum, while the house was shaking with thunderous applause. Booth and Forrest never created a louder stamping of feet. His hour never seemed more than twenty minutes, and while speaking, every action was grace and every word was music. Indeed, Caldwell had a right to be vain. But alas! envied by his colleagues and victimized by their secret ex parte machinations, he was finally superseded and left on the brink of old age to pine away in sorrow, with his laurels withering on his brow. Such is fame.

At that early time, medicine could hardly be called a science; the whole practice was more or less imbued with empiricism, for Marshall Hall, Brown-Séquard, Bell and other physiologic discoverers had not yet spoken. Authority was paramount, and he who had the eloquence and logic to maintain his theories, whether they were right or wrong, was always a champion. Didactic teaching was "the order of the day," especially in America, where polemics and democracy dwell together. Humoral pathology was the principal subject of controversy, and the forces were nearly equal. They were dubbed by the boys *fluids* and *solids;* the former referring all processes of disease to the circulation, the latter to nervous sympathy. The fiercest battles, however, were fought to decide whether fever is idiopathic or symptomatic. Caldwell, with his rhetoric, was a brilliant symptomatist, and thus many out of the large class went home "dyed in the wool." According to his view, *ubi irritatio, ibi fluxus* is the *fons et origo* of all disease; and so firmly did he believe in the power of nervous sympathy, that he boldly declared that conception was amenable to it, thus disfranchising and rendering nugatory the spermatozoic individual with all his living energy.

But while all this was going on in America, now and then an ambitious young graduate who had ventured across the perilous waters in search of additional accomplishments, was soon convinced that he had yet much to learn. He was surprised to observe eminent professors walking the clinics surrounded by crowds of students anxious to see as well as to hear, while others, with gangs of seekers intently looking on, were delving in laboratories to expose to their view the hidden mysteries of Nature. At once he became a lover of science, and appreciated the glaring necessity of reformation in the mode of teaching at home. Availing himself of the favorable opportunity, the young man labored as a student again; and after ample observation, and storing his mind with all the improvements of medical art and science in Europe, he returned to his native country to enlighten the profession and fall in as a teacher of young men in some one of our schools. And as intercourse with Europe became facilitated by steam, crowds of young men began to pass over, to imbibe

history-of-obgyn.com

the lore of renowned institutions there, and thus medicine soon became renascent in America, where it had still maintained the conditions of colonial times.

Before the advent of this revolution, surgery differed materially from surgery now. Though commanding the most profound admiration of every one, and exalting the bold operator far above his compeers, yet few, even the most talented, ever aspired to that distinction; for, in the absence of anesthetics, surgery was little less than human butchery, as it unavoidably tortured the victim of a capital operation beyond endurance. Screams of the agonizing patient, wails of the nearest kindred, tears of sympathizing friends were never absent. It is a fact that operating surgeons, having passed through these sad ordeals, were known to weep like children when all was over and they were away from the scene of suffering, and dared remember the tragedy. Well does the writer of this, recollect an operation performed, in 1811, on his little brother, by the once celebrated Dr. White of Virginia. The child was 9 years old. His right tibia, for two-thirds of its length, was necrosed, and the doctor might have left the lower third in its socket, but he did not. He rapidly scooped out the entire bone, and then filled the gaping space with fine oiled tow and wrapped a loose bandage around it. Then leaving the room to put up his instruments, tears were falling and he was wiping the instruments dry, and wiping his eyes at the same time. Another case has not been forgotten: a young physician, just returned from Philadelphia with his diploma, was called upon to amputate the leg of a poor young man brought from a distance and accompanied by his mother, sister, two brothers and several friends. The large attendance signified the interest felt in the young man. An empty old house across the river was obtained free of rent, and the doctor and assistant were on hand at the appointed time. The leg had been amputated with firmness and dispatch, and directions given for attending to the case, and the two doctors were fording the river on their way home when, all at once, the operator burst into tears as his mind began to realize the pitiful scene, impressed but not noted while the operation was going on. Doctors of the present generation may regard all this as quite silly; nevertheless, language fails to portray the horrors of bloody surgery in the absence of an anesthetic.

Midwifery in those times was chiefly confided to the care of old women who, in the country and village, were called "granny," whether white or black. In the slave States, the black granny was often employed and physicians were seldom called in, except in difficult cases—mal-presentation, hemorrhage, or retention of the "arter beth." In the few large cities of that period, doctors were just beginning to reap the benefit of that valuable practice, which had ever been in possession of midwives since the first accouchment of our Mother Eve. Surgical gynecology was unknown then, and horrible cases of vesico-vaginal fistula, uterine fibroids, and ovarian tumors were the painful, long continued preludes of death among the women of almost every neighborhood. It is true that Dr. McDowell of Kentucky had long since plunged his knife through the *sacred* peritoneum and turned out a very large ovarian tumor, saving a woman's life, but that only proved that he was a reckless dare-devil void of conscience; and so the great surgeon and benefactor of woman lived on and died, ignorant of the fact that he had rendered the name, *Ephraim McDowell*, immortal. In fact he might have regarded himself as under the ban of public sentiment. Such is often the reward of manhood and genius. Thus went on the sufferings and misfortunes of the gentler sex, till about the middle of the century, when a poor young doctor, in feeble health at Montgomery, Ala., was known to be harboring, at his own expense, two or three negro women in a small board shanty in his own yard, which was laughed at as *Sims' Hospital* by some neighboring physicians. These women were victims of vesico-vaginal fistula, and Sims was experimenting to find a substitute for the hollow, conical speculum, which precluded free manipulative access to the injured parts. The bent handle of an old pewter spoon was improvised, the rupture exposed, and nothing remained to insure a perfect cure, but ordinary mechanical digitation. The jokers had enjoyed their fun for a year or more, but when Aunt Peggy and Aunt Lucy walked out smiling and rejoicing, dressed in their clean, homespun, white cotton frocks of sweet smelling odor, they began to bite their lips; and one of them even ventured to declare that he had already anticipated Sims, and a controversy seemed imminent. But the poor young man only said "shoo fly," and went on stitching, till he found himself in Europe hobnobbing with royalty and nobility, while stuffing his pockets with shining shekels to scare away the wolf from his door forever. The writer was several years older than Sims, and at that time lived in the same State not far distant, when he was struggling, as a young practitioner, for means to support his family; and he well remembers the witty comments of rivals, who criticised his methods of laying the foundation of surgical gynecology. He must plead guilty to the charge of smiling as he listened to those jokers, but now he begs the privilege of falling on his knees to honor the memory of Sims. And now, who will say that Dr. Francis Marion-Sims[1] ought not to have a monument erected and paid for by American physicians to immortalize his name?

More than one-third of the century had passed away, when it became evident that the domain of medicine was too extensive for the qualification of any individual physician to discharge its functions with intelligence and honest service. Therefore, specialties naturally came into vogue, enabling the general practitioner to fully equip himself for every phase of disease in his line; and at the same time, the simple stethoscope and the marvelous microscope, with many other minor improvements and facilities of great value, were inaugurated to augment the importance of our profession. But when the middle of the century was reached, lo! chloroform had been discovered, and surgeons everywhere were seen quietly and leisurely carving the flesh of living, sensitive human beings, while their subjects were wrapped in the folds of lethean bliss, and then at a single bound, surgery leaped to the highest distinction. The terrible agonies of frightful operations had ceased forever, and blood, in great measure, had ceased to flow by the surgeon's knife, being restrained by more careful cutting, and the genius of Esmarch. In addition to all this, the civil war came in 1860, not only to alter, with terrible vigor, the basis on which

1 Named after General Francis Marion of the Revolution.

history-of-obgyn.com

our political institutions had rested from the beginning, but to arouse the energies of the American mind, in the way of invention for the benefit and comfort of the race, to a degree never witnessed before; and medicine was not left in the rear of that progress.

For some years the microscope had been sporting with bacteria, but only as a biologist would scrutinize the appearance of a new species; but now bacteria began to be suspected of playing an important part in the production of disease, and forthwith the eye of almost every physician was piercing the lens to observe the habits, potency and peculiarities of these mysterious, imponderable minutiæ of life; but thus far the investigation fails to result in any satisfactory or positive conclusion. Whether the microbes are the cause or mere harmless accompaniments of disease is yet a question. However, one great benefit has already resulted; aseptic surgery, almost equal to the discovery of chloroform, has been established and healing by first intention fairly secured.

Whatever may be the final outcome of this earnest inquiry, an honest review of the last half century will show, beyond peradventure, that our profession has vouchsafed to mankind, independently of its grand achievements in the way of sanitation and quarantine, everlasting benefits entitling it to the highest honor; but when we take into consideration the fact and truth that the nation's health and vigor have, in the meantime, been fortified by medical science, against the assaults of deadly epidemics, that sacrifice so many thousands of human beings every year to the Moloch of contagion, we are startled at the magnitude of the obligation.

Public health is manifestly a matter of the gravest importance and can not be too highly regarded, for a nation, like an individual citizen, is strong and progressive or weak and inert, according to its condition of health and vigor; for a nation is only an aggregation of individuals. Look at John Bull. He dines every day on roast beef and feels buoyant, and then he bounds away into enterprise with enduring muscles and tensive nerves, hustling among the nations and beating his warlike tattoo from the rising to the setting sun. On the other hand, behold the Celestial King. He lives on a little pale rice and feels lethargic, and then he reclines in vaporous dreams to vegetate, as he has been doing for the last two thousand centuries or more. A feeble, ill-nourished people are always cringing slaves, and ill health is equally debasing to a nation.

Hitherto all efforts to guard or promote public health have been more or less due to the spontaneous intervention of physicians, supplemented occasionally by State or local authorities, but now there seems to be a reasonable demand for the general Government to recognize it as a Department, with all the functions of a Cabinet office. So mote it be.

history-of-obgyn.com