

The President then introduced DR. J WHITRIDGE WILLIAMS, of Baltimore.

DR. WILLIAMS.—I count it a great honor to be present on this occasion and to be invited to speak at this dinner. Your chairman simply calls upon me to “shine,” but as I am not luminous that will be a difficult task. Indeed, I do not know whether it is more embarrassing to be given a text for one’s remarks or not, for in either event I always wish when I have finished that it had been the other way. In this connection, I might mention an alarming experience which I had at a dinner in Scotland. Upon looking over the program I was startled to see that I was scheduled to propose a toast to the “chairman and croupiers,” and immediately lost my appetite. To propose a toast to the chairman was simple enough, as I knew him well, but I was puzzled to know who and what the croupiers were. In my innocence I had always associated them with gambling, and imagined that they were individuals who sat at the end of the table and with a long rake-like appliance either pushed money toward the players or more usually drew it toward themselves. I saw no signs of such an arrangement and found it difficult to reconcile such associates

with the chairman, who was a virtuous and God-fearing gentleman. Finally, in desperation I sought aid from my neighbor and was greatly relieved to find that the term was applied to the gentlemen who sat at the free ends of a "U" shaped table. When I had identified them with the end men of the negro minstrels, my task was easy, and the reputation of the chairman was saved.

It has given me the keenest pleasure to come here and to hear the talks and to see the pictures of your former great men. I remember most of them except Sims, and am under personal obligations to many. I shall never forget the courteous kindness shown me by Dr. Thomas, whom I met shortly after graduating in medicine; and his treatment of me—then an ignorant boy—has been an example to me to dealing with young men.

Indeed you have a glorious heritage in the famous early members of this Society, and it will be difficult if not impossible, for those of the present generation to live up to the standards set by them. In those days the soil was virgin and discoveries were waiting for the earnest worker. At the present time young men, and those who still feel that they are young, can scarcely expect to solve fundamental problems or to revolutionize gynecology as did our predecessors; but, nevertheless there is still an opportunity for well trained men of intelligence and industry to make discoveries upon which our future work will be based. Such discoveries, however, will not be made exclusively in the hospital operating room, but rather in the laboratories of chemistry, physiology, pathology and experimental medicine and by the patient adaptation of the results there obtained to accurate clinical observations. The field for such work is almost unlimited. Thus, we are practically as ignorant concerning the significance of menstruation and the causes of dysmenorrhea, as were Adam and Eve's first children. We know almost nothing of the fundamental facts of obstetrics, and have scarcely advanced beyond Naegele in our knowledge of the mechanism of labor. We are quite ignorant of the cause of labor, and as yet can only say that it usually occurs at the time appointed by the grace of God. We are just beginning to recognize that the toxemias and eclampsias are not due to the state of the moon, and are absolutely ignorant concerning the etiological factors concerned in the production of the simplest tumor—to say nothing of the malignant growths. Surely, the field is still open to those who are willing to relax to some extent the strenuous "chase after the dollar" and are anxious to add their little mite to science.

Notwithstanding my article of last year, in which I showed that in this country obstetrics is the most neglected of the fundamental branches of medicine, I have great faith in its ultimately reaching its proper plane. But that day will not come until every University Medical School possesses a suitable and properly equipped Woman's Clinic under the control of a conscientious professor, who is prepared to devote his energies to the care of hospital patients, teaching and research, instead of regarding the post as an opportunity for his personal aggrandizement.

I rejoice that you have made a beginning along these lines in New

York, which at present possesses the only suitably equipped clinic in the entire country.

I cannot avoid feeling that a part at least of this backwardness may be due to the name under which some of us labor. Recently, I read the life of Thomas Denman and was surprised to learn that as late as the end of the eighteenth century he was contemptuously referred to as a man-midwife. Is it not surprising that a man so designated was able to accomplish creditable work? But Denman was a great man. Think of it—a man-midwife! What could be worse, for even in New York, with its plans for education and registration, a midwife is regarded as occupying the lowest extremity of the social scale, and a man-midwife must be still worse. In Great Britain, and to a less extent in this country, the entire subject is designated as midwifery. With such a name but little can be expected; while to speak of the "science of midwifery" appears to involve a contraindication of terms.

I object almost as much to the designation "accoucheur." Did you ever consider what it means? The term is derived from "accoucher"—to put to bed, so that the accoucheur is literally a putter to bed of women. Can you expect science to be advanced by men who are willing to allow themselves to be so designated?

Passing to the terms currently employed in this country—obstetrics and obstetricians. Have you ever thought that they are mere eupheisms? The former is derived from the latin term "obstetrix," which means a midwife, so that obstetrics is merely midwifery latinized. If we study the development of the term, we find that it is derived from the verb "obstare"—to stand before. Consequently, the obstetrician is a stander before women, a mere looker-on, and it would be asking almost too much to expect one so occupied to be a scientific man.

Midwife, man-midwife, accoucheur, obstetrician! A choice collection of appellations. Possibly, the last sounds better for the reason that most people do not know what it means or how to spell it. Many of us have to stop each time we write the word, and I am certain if we go back to our student note-books that most of us will find that we spelled it incorrectly. I consider that such terms are handicaps and are derogatory of an important department of medicine, and that it is difficult to expect one to be proud of one's work, when one feels demeaned each time that is mentioned.

I hope to live to see the day when the term obstetrics will disappear and will be swallowed up in gynecology. The latter means the science of women, and is a broad and dignified term, which should include not only the anatomy, physiology and pathology of the generative tract, but everything—mental and physical—directly dependent upon the existence of the female sex. Obstetrics is a branch of the broader gynecology, and I hope that the day will soon come when this is realized, and a band of scientific men will be developed who will recognize that gynecology means much more than the mere ability to use a knife, a pair of scissors and a needle and thread.