

**Memorial of Prof. Charles Hooker, M.D : the inaugural address of Leonard J. Sanford, M.D., as professor of anatomy and physiology in Yale College, delivered, September 17th, 1863.**

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### **Publication/Creation**

New Haven : Thomas H. Pease, 1863.

### **Persistent URL**

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*Sanford (L. J.)* *Prof. R. Duglison, M.D.*  
*with the kind regards of*  
*L. J. S.*  
*of Jeff. Med. Col., class of 1857*

MEMORIAL OF  
PROF. CHARLES HOOKER, M.D.

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THE  
INAUGURAL ADDRESS

OF  
LEONARD J. SANFORD, M.D.,

AS  
PROFESSOR OF ANATOMY AND PHYSIOLOGY  
IN YALE COLLEGE.

DELIVERED, SEPTEMBER 17th, 1863.

*Box 6*  
Published by the Class.

*Surgeon Genl's Office.*  
LIBRARY.  
30173  
*Washington, D.C.*

NEW HAVEN.  
THOMAS H. PEASE, 323 CHAPEL ST.  
1863.



Dr. LEONARD J. SANFORD,  
*Professor of Anatomy and Physiology.*

*Dear Sir :*

We have the honor, in behalf of the Medical Class, to request for publication your Discourse, commemorative of the late Professor CHARLES HOOKER, M. D., and delivered before the Class at the opening of the present course of Lectures.

We wish to keep by us, this record of the life of a man whose example we should ever strive to imitate, as well as to give to the public a history of one of its greatest benefactors, cut down suddenly while yet the duties of a most extensive professional labor were upon him.

We think that by conceding to this request you will confer a favor upon a grateful community, and do honor to one who was most zealous and truthful in his labors for the advancement of medical science.

Very respectfully,

S. D. TWINING,  
J. G. BECKWITH, Jr., } *Committee.*  
S. H. BRONSON,

YALE MEDICAL COLLEGE, }  
September 23d, 1863. }

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*New Haven, September 24th, 1863.*

*Gentlemen :*

In response to your note of the 23d inst., I would say, that imperfect as my Introductory Lecture is, it is entirely at your disposal, and the more especially so, if its publication can be of service in enabling you to keep more distinctly before you for imitation, the character of our deceased friend.

Have the goodness to assure the gentlemen whom you have the honor to represent, of my cordial desire to coöperate with them in all laudable efforts to promote their interests and your own, as also to elevate the noble profession in which we have enlisted for life. With high considerations of respect for the Class, individually and collectively, I am, Gentlemen, very truly your friend,

L. J. SANFORD.

To Messrs. S. D. TWINING, J. G. BECKWITH, Jr., and S. H. BRONSON.





## INAUGURAL ADDRESS.

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GENTLEMEN OF THE MEDICAL CLASS.

In the name of the Faculty, it is my pleasant duty to bid you welcome to these halls, on this the public opening of the fifty-first course of Medical Lectures in Yale College, and in their behalf to promise you that no exertions shall be spared to make the course as agreeable and profitable to you as possible: Thus can they best show to you, and to the Medical Profession, an appreciation of the favor and good will which have heretofore been extended to this Venerable Institution.

As the fifth in the list of American Medical Colleges—a list which now numbers about fifty—the Medical Institution of Yale began its existence in the year 1813, and from that time to the present it has enjoyed the public confidence and a reasonable share of patronage. If in the future its Faculty are able to furnish to students facilities for acquiring a full and thorough knowledge of Medicine in its various departments, it will still merit their patronage and be worthy of the name of Yale.

The present is a convenient standpoint from which to review the past history of our College, and this occasion would be appropriate to its consideration, but the senior



member of the Faculty, who alone can render the service competently, was not deputed to open this course of Lectures—and its youngest member should not essay to discuss any subject, historically, which reaches far back into the past. For this reason in part, I have undertaken with reluctance the delicate and difficult task of preparing for the opening lecture a Biographical Sketch of my illustrious predecessor, and my apology for doing it at all is, that the respect which I entertain for his memory would not allow of my entering upon his labors here, until I had first spoken of him. I therefore invite your attention to a brief sketch of his life and character.

CHARLES HOOKER, a descendant in the seventh generation of Rev. Thomas Hooker, one of the early settlers and the first minister of Hartford, was born in Berlin, Conn., March 22nd, 1799.† His parents, William Hooker

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† Dr. Charles Hooker's lineal descent from Rev. Thomas Hooker, is as follows. Thomas Hooker, pastor of the first church in Hartford, died July 7th, 1647, aged 61 years, leaving two sons and three daughters. His youngest child, Samuel, was born in 1635, he graduated at Harvard College in 1658, prepared himself for the ministry and was settled in Farmington; he married Mary Willett, and had nine sons and two daughters; his (Samuel's) eldest son, Thomas, was a Physician in Hartford; his daughter Mary, married Rev. James Pierpont of New Haven, whose daughter Sarah married the celebrated Jonathan Edwards. John, the fourth son of Samuel, was born in 1665—he was one of the leading men of the colony, Speaker of General Courts, Assistant Judge of the Superior Court and Town Clerk; he married Abigail Stanley, had ten children, and died at the age of 81. His fourth child, born in 1695, and named John, settled in Great Swamp, after-



and Hannah Jones Hooker, were both natives of Hartford. Their married life was passed in Berlin, where they resided in peace and quietness to the close of a protracted life. Mr. Hooker was a Farmer, and, like most of that class, was a plain and unpretending, but honest man—one whose constant aim was, to exercise a conscience void of offense towards God and towards man. Mrs. Hooker shared in her husband's excellencies of character, and was a faithful and devoted wife and mother, a kind neighbor and friend. Eight children were born to them, of whom the subject of this sketch was the youngest but one. Four of their children, two daughters and two sons, still survive; the deceased are, Mrs. Stanley, mother of William H. Stanley, of this city, who died a year since; Levi, the youngest, who died in 1803; William, who was a Physician of celebrity in Dover, N. Y., where he died in 1852, and Charles, who died March 19, 1863, aged 64 years.

Charles enjoyed the benefits of home training until about the age of fourteen, when, in order to obtain better educa-

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wards called Kensington, which is a parish of Berlin; he represented Farmington in the General Court; he married Mary Hart, had four children, and died at the age of 71. His eldest son, named John, became a Minister, settled at Northampton and married Sarah Worthington by whom he had the Hon. John, of Springfield, Mass., father of Prof. Worthington Hooker of this city; his third son, Ashbel, died in early life, leaving a wife and one child; his fourth son, Elijah, had twelve children, of whom the youngest is Rev. Horace Hooker of Hartford; his second son, Seth, was born in 1731, he married Sarah Burnham and resided in Kensington, Berlin; they had one child, named William, who was born in 1756. He married Hannah Jones and had eight children, of whom Charles was the youngest but one.



tional facilities than Berlin afforded, he went to Hartford and studied with the Rev. A. Flint, D.D., in whose family he resided. For this gentleman he conceived a strong attachment and ever spoke of him in terms of affectionate regard. In the year 1816, young Hooker, being prepared for College, entered the Freshman class at Yale; here he was a diligent and successful student, and having completed the curriculum of college studies, he graduated with honor, in the year 1820.

Mr. Hooker's inclinations prompting him to study medicine, he entered the office of that Gamaliel among medical teachers, Eli Ives, M.D., who was then in the zenith of his excellence as a teacher; from him, a pupil so apt, and one so interested in medicine as Hooker was, could not fail to derive that inspiration for the studies of the profession, and that habit of close observation combined with careful and thorough reflection upon facts observed, which he so eminently exemplified — accomplishments which go far towards the making of a good physician. To Dr. Ives then, more than to any one else, our friend was indebted for that training and instruction which qualified him for a high position in the profession. He attended Lectures at the Medical Institution of Yale College, where he received the degree of M.D. in the year 1823. Soon after graduating he entered upon practice in New Haven, and here continued to discharge the duties of a practitioner until his death, at which time he had nearly completed his fortieth year of professional labor. If the history of those years could be written, what a tale



it would make! For a physician must necessarily have a larger range of observation and experience than is possible to men engaged in other spheres of labor; but, when his term of service treads hard upon half a century, there is accumulated in his storehouse an amount of incident, far greater than any other pursuit can parallel. He has to do with all sorts of people, and that, continually; he is with them in seasons of sickness and bereavement, in joy and sorrow, in prosperity and adversity; their mental trials, as well as their physical ailments, are confided to his keeping, and at last he learns them altogether—and each case becomes a page in his history.

Dr. Hooker's experience in getting into practice accorded with that of most young physicians, who find, in beginning, a dearth of business, and this in quality is even poorer than in quantity. Occasionally the patients die,—then, too often, death is attributed to the supposed ignorance or unskillfulness of the doctor; and when they recover, the faithful attendant, though he may have made many visits and endured a burden of anxiety, frequently receives no money, and sometimes no thanks. A slight income necessitates a plain and simple style of living, and whatever is requisite to make life enjoyable must, of course, be dispensed with. Our friend encountered more or less of these and other trials in commencing, but they abated not in the least his determination to persevere until success and fame were achieved. In the course of a few years he became well and favorably known, and as his reputation increased, his practice extended until he was overrun with it.

His practice embraced Surgery, Obstetrics and Practical Medicine, for all of which he was well qualified. A familiarity with anatomy, a steady hand, and a cool courageous mind, made him a good surgeon: all the nicer operations of surgery he has repeatedly performed, and, during the year preceding his death, he operated for stone in the bladder three times, successfully. In reparative surgery he was quite an expert; a hand or foot so mutilated as to be almost unrecognizable and as most would think, past recovery, he would make over and restore to comparative usefulness; a badly fractured limb, which others would unhesitatingly amputate, he would not sacrifice if there seemed to be the slightest chance of saving it without risk to the patient's life; and in the management of simple fractures he accomplished reparation, without deformity or shortening, oftener than many other surgeons would have done.

Dr. Hooker did a large obstetrical business, attending, in some years, more than a hundred cases; women undergoing the sufferings and perils of childbirth were safe in his hands, and his ministrations to them were kindly, carefully and successfully rendered. In instrumental midwifery he especially excelled, and in this department he was regarded by the Profession as one of the most competent practitioners in the State.

Dr. Hooker was prominent, we may say eminent, as a medical practitioner. He was a close and accurate observer of symptoms, and understood their bearing and indications; he quickly perceived the varying features and



phases of disease, and could often foretell or prognosticate its probable issue, long before any marked changes were perceived by the patient or his friends. In therapeutics, or the application of remedies, he generally pursued a positive course; he had great confidence in the power of medicine, and therefore used it frequently in large doses. He had the reputation of being a heroic practitioner, but he was not one in the sense of using large doses indiscriminately and exclusively: when, in his judgment, large doses were indicated, he used them unhesitatingly and fearlessly; but in milder cases he pursued a more moderate course, frequently omitting medicine altogether, if the *vis medicatrix naturæ* seemed adequate to the cure.

The difference between Dr. Hooker and those practitioners who took exception to his large dosing, was, that they did not see indications for it, when he did; at least it is but fair to suppose this, as his patients so generally recovered. He therefore resorted to large doses understandingly—he understood both himself and his patient. By pursuing a bold and vigorous course, in cases requiring it, he saved lives which undoubtedly would have been sacrificed under any other management. This was abundantly demonstrated in the year 1849, when cholera and epidemic dysentery, of an almost malignant type, prevailed in our city; the customary methods of treatment proving inadequate to cure, our friend suggested the employment of calomel in sufficient quantity to overcome the irritable state of the bowels by its direct action as a sedative: drachm doses were given at short intervals, and with the happiest results;



for the flux quickly ceased, cramps were soon at an end, and debility and languor gave place to returning health. So also in membranous croup, a disease nearly unmanageable under any treatment, his large and frequently repeated doses of calomel have brought many a case to a favorable termination. He claimed to be able to break up cases of typhoid fever through the revulsive effect of large doses of sulphate of quinine, and, though he may have been mistaken in this, he certainly has repeatedly recovered lives that were fast ebbing in the latter stages of this fever, by the heroic administration of quinine. He used it with success, in the quantity of from thirty to forty grains per day, continued for two or three days, in cases in which the pulse was very frequent and feeble, the skin hot and dry, and the tongue parched and coated with dark fur; in this class of symptoms, whether occurring in low fevers, dysentery, peritonitis or other diseases, this treatment sometimes wrought a cure in cases where the functions of the body were blocked and stagnant, and the patient seemed moribund. In these complicated and desperate cases of sickness, our friend was particularly successful; in the management of those of a milder type, whether acute or chronic, we are not aware that he excelled his brethren. His ability to comprehend intricate cases, and his intrepidity in the application of remedies, caused him to be invaluable as a consulting physician, and the members of the profession very cheerfully patronized him, because he was so honorable, courteous and kind in all his relations with them.



Dr. Hooker was not given to polypharmacy, but operated, usually, with single remedies, nor did he complicate the medication by using several of these at the same time—his custom rather was, to employ one or two remedies, and if they failed, to substitute, not add, others. And permit me here to say, that in this particular you cannot too closely imitate his example. A prescription consisting of a dozen articles, more or less, witnesses against the physician directing it, and depend upon it he either does not comprehend the symptoms clearly, or, he has less knowledge of his *materia medica* than is consistent with possessing the title of M. D. A poor doctor, like a poor marksman, is too apt to load his gun with numberless shot, which scatter as they fly, while one more competent uses a single bullet and with this strikes the mark.

Dr. Hooker was thought by some of his brethren to be somewhat empirical in the application of remedies, using particular ones because they were favorites, rather than because they were specially indicated by the symptoms; others contended that in his medication he sometimes battled with theories more than with diseases. In entertaining these opinions, we think they misjudged him; his general style of practice was indeed rather peculiar—he was able to accomplish more and better results with a limited number of remedies than many other physicians were, and this, perhaps, inclined him to adhere more to routine in his practice than they did, but it is not true that he medicated blindly and carelessly, or in conformity to preconceived theories. He did use medicines, (if you please to



call it so) periodically, but neither fancy nor theoretical considerations, alone, dictated his choice. He depended on particular articles for a season, simply because they worked well, and he recurred to the same in subsequent months or years, because, through change of diathesis, or for other reasons, they were again efficacious. We think all will be convinced of the correctness of these assertions when they call to mind his remarkable success as a practitioner.

In the sick room he was always cheerful and hopeful, and, by his pleasant countenance and encouraging words, he succeeded in inspiring hope and assurance in the minds of his patients, and they had so much confidence in his skill and so much esteem for him as to be willing to submit to whatever he might direct. In managing their cases he was very thorough, attending as particularly to dietetic and hygienic measures as to medication: no discretionary power was allowed to nurses, they were simply to obey his instructions—to obey them to the letter. Thus did Dr. Hooker exercise control in the sick chamber. When patients were very ill, he visited them often, and sat long at the bedside, pondering in silence the difficulties and dangers of the case; and when all treatment was unavailing, and death seemed to be impending, he was slow to desist from efforts to save. Acting on the philosophy, "that while there's life there's hope," he continued his exertions sometimes, till the patient gasped in death, and occasionally these unremitting exertions were rewarded by a return of consciousness and the restoration of health. He was never flurried or intimidated in the sick room,



but, instead, was invariably cool, calm, collected and decided and this uniformity of temper and demeanor he was able to preserve, even when oppressed with anxiety.

In the ministrations of his profession he was always as ready as he was able to serve the sick; he responded to their calls by day and by night, in all weather and seasons; and, whether they were rich or poor, with the same willingness and alacrity—all alike shared in his sympathies and services, for he was the common friend of all. Dr. Hooker was a very busy man. The constancy with which he pursued his practice was remarkable: such was his health and power of endurance that he could ordinarily attend to patients for three consecutive days and the intervening nights, without much inconvenience, and he has been known, in seasons of epidemic sickness, to dispense with sleep for three successive periods of twenty-four hours each. So extensive was his practice that, in the course of it, it is believed he has visited and prescribed for more patients than any other physician in the State.

In the year 1838, Dr. Hooker was elected a Professor in Yale College, to fill the vacancy in the chair of Anatomy and Physiology, created by the transfer of Dr. Knight to the chair of Surgery, which had been made vacant by the death, in 1838, of Dr. Thomas Hubbard. The appointment proved a most judicious one, for, though Dr. Hooker may not have equalled his predecessor as a teacher of anatomy, his deficiencies were counterbalanced by devotion to all the interests of the medical department, as

well as to those of its students and graduates. As a lecturer, he was plain, practical, concise and moderately fluent; he understood general anatomy thoroughly, and lectured upon it fully: but his familiarity with minute structure, or histology, was too inconsiderable to enable him to impart much knowledge of it to others; his acquaintance with physiology also was general—he was not in advance of the Haller school of Physiologists, and, so far as he taught this branch, he taught the opinions of Haller and his cotemporaries, with some theories which were original. These omissions were not as important as they seem to be, because, being chiefly of topics which do not require the aid of demonstration for their elucidation, the student could as readily acquire a knowledge of them from books, as from lectures.

Dr. Hooker failed to keep pace with the progress of the sciences which he taught, only for lack of time; the demands of a large and all-engrossing practice rendered it impossible for him to give much attention to the recent medical discoveries. His professional duties, however, were not allowed to conflict with those he owed to the students: to his credit be it said, he rarely missed a lecture; the fair fame of this Institution he would not thus tarnish, and a higher actuating motive was, the obligation to give to the class the full number of hours to which they were entitled.

His efforts in behalf of the students were not confined to the lecture room, he was their friend, counselor and helper, in all matters, and did what he could to promote



their welfare and enjoyment during their temporary sojourn in the city: when, having graduated, they were ready to assume the responsible duties of the practitioner, his valuable aid was offered to secure them good openings, and when these were obtained, he improved every opportunity to say what he could in the way of commendation to the members of the community whither they had gone to reside: then his eye watched their career, with pleasure or with pain, according as it was praiseworthy or discreditable. In their occasions of doubt and anxiety, as when patients were critically sick and the doctor was distrusting himself and had lost the confidence of the patient and his friends, Dr. Hooker responded promptly to the summons for a consultation visit. Reaching the abode of gloom, he reassured the medical attendant, re-inspired the patrons with the confidence due him, unsnarled the knots of the patient's case, and when, hope being lighted up, he took his departure, all felt that they had been strengthened and cheered as by the visit of an angel. Doubt not, my friends, that among his truest mourners, are multitudes of medical men scattered all over this State who loved him for what he had done for them.

During his entire professorial career, Dr. Hooker served the Faculty as their Dean; he possessed business tact and executive abilities which abundantly qualified him for these onerous duties, and he found pleasure in discharging them; he seemed to regard this medical Institution as a part of his family, and attention to its con-

cerns,—from providing for the clinics to collecting fees for his colleagues,—was to him a labor of love. During the present lecture session, and in those which are to follow, how much will Charles Hooker be missed by those who were his co-laborers!

It was our friend's custom to devote a few lectures of each recurring course to the consideration of certain topics in Medicine and Surgery, upon which he entertained peculiar views; and to some of these, on account of their value, as also to show the working of his mind, we shall now refer.

The subject of Diet was foremost among them, and, in discoursing upon it, he maintained that everybody, whether well or sick, should eat three meals a day, which should be about six hours apart, and taken at corresponding hours, daily; the food to be plain, nutritious, mainly solid, and to some extent consisting of fat meat. In sickness, if the stomach was irritable or the disease under which the patient was suffering was of a sthenic type, he would perhaps omit the use of meat and allow a less quantity of the unstimulating articles of food than the person was accustomed to use in health, but the regular intervals must still be adhered to, and the food must always be mainly solid. A sloppy diet he regarded as bad for a well person, and much worse for one who is sick. In a case where most physicians would direct gruel, animal extracts and jellies to be used in small quantities at short intervals, he would order crackers or crusts and meat, which were only



allowed at the regular meal times, and then, in such quantity as could be conveniently borne. If this allowance did not at once supply all the support which the patient required, he would make up the deficiency by a more bracing medication; but he contended that, by perseverance, a healthy appetite could ordinarily be soon reëstablished, which would render an entire discontinuance of medicine safe at an earlier period than would be possible under the other system of dietetics,—in other words, the case would be sooner and more perfectly cured, and with less medicine, with the solid diet, than it could be if slops were fed to the patient. This regimen, it must be admitted, proved very successful in Dr. Hooker's hands; his best results from it were in cases of Typhoid Fever.

But, in the use of aliments, his strongest leanings were towards fat meat; he recommended it to all well persons, as being indispensable to the preservation of health, and insisted on its employment, as the stomach would bear, in all chronic cachectic cases. In the latter, it was a *sine qua non* to recovery, and so he was inflexible in directing its use. A question which he was sure to put to every walking case of sickness that applied for his assistance was, "do you eat fat meat?" and in prescribing for such patients he would sooner have dispensed with medicine than omitted the fat meat, provided, always, that the stomach could be brought to tolerate it.

It is not strange that our friend should have been pertinacious on this point, for a long course of observa-



tions extending over a large region of country, had enabled him to establish the following conclusions.†

I. "Of all persons between the ages of fifteen and twenty-two years, more than one-fifth eat no fat meat.

II. Of persons at the age of forty-five, (at which time, and for several years after, the health is generally most uniform and sound) all, excepting less than one in fifty, habitually use fat meat.

III. Of persons who, between the ages of fifteen and twenty-two, avoid fat meat, a few acquire an appetite for it and live to a good old age, while the great proportion die with phthisis before forty-five.

IV. Of persons dying with phthisis, between the ages of fifteen and forty-five, nine-tenths, at least, have never used fat meat."

When Dr. Hooker's broad views on the subject of oily food were first announced, the profession was startled, and so unpalatable did they seem that we have been slow in putting them to the test; but so far as the trial has been fairly made, results favor the conclusions at which he arrived, and I cannot resist the conviction that the time is coming when the profession generally will conform, more or less closely, to this dietetic practice.

From what has already been stated, it will be inferred that Dr. Hooker regarded temperance in the use of fluids as essential to the preservation of health. He

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† See Report on Diet of the Sick, in Transactions of the American Medical Association, Vol. VIII, p. 460.

held that their excessive use weakened the stomach and gave rise to indigestion, and dyspepsia with all its train of evils; also, that the functions of the liver were deranged thereby, and further, that the blood becoming dilute, the individual was predisposed to dropsy and hemorrhage, and to a variety of diseases incident to a defective nutrition; and moreover, he believed that intemperance in the use of alcoholic stimulants, in some instances, was excited by copious water drinking. It is a well known fact that the more a person drinks (beyond a certain quantity) the more will they desire to drink, the explanation of which, is, that the water, by diminishing the secretion of the saliva, and washing away from the mouth and fauces the small quantity which is secreted, causes those parts to become dry—the individual of course experiences thirst, and finding no permanent relief from a recurrence to water, (which is not strange, for the cause of any suffering can seldom accomplish its cure,) naturally enough resorts to something stronger; the alcoholics are tried, their use is persevered in, and ere the victim is aware, he is possessed of an irresistible appetite for liquor. Thus does water drinking lead to rum drinking, according to Dr. Hooker, and the explanation is not merely a theory, it has foundation in fact, for he could cite illustrative cases which he *knew* were applicable. He considered a quart of liquids in the twenty-four hours as an outside allowance for any person, without regard to the season of the year; they were to be used only with the meals, and in about equally divided quantities.



Another subject to which Dr. Hooker frequently called the attention of the students, was the application of the art of auscultation to the elucidation of diseases of the intestinal canal—an application which we believe he was the first to suggest. It occurred to him, on reflection, that the rumbling sounds of the bowels, which are audible often at a distance from the body, and are described under the term *borborygmi*, might undergo modification, through disease of the intestines, which would give them diagnostic value; and so it proved, in some of these diseases to a greater extent, of course, than in others. In Asiatic cholera he found it very reliable, as the sounds heard, when the ear was applied over the abdomen, were quite unlike anything he had ever observed in other diseases, and manifested a severe commotion of the entire canal. The sounds he compared to those which would be produced by shaking together several flasks of various sizes, partly filled with water; frequently the sounds appeared to indicate that the rapid peristaltic motions were suddenly arrested and reversed by an anti-peristaltic action, which occurrence immediately preceded a paroxysm of vomiting. He further observed that remedies affected the sounds; thus, in the disease in question, stimulants and astringents, by increasing the intestinal commotion intensified them, which was the reason, probably, why those agents failed to arrest the frequent vomiting and purging; camphor, and large doses of calomel, on the other hand, diminished the peristaltic action, and drachm doses of the latter medicine arrested it altogether.



We suppose it was in this way that he ascertained the suitability of the calomel treatment to cholera,—a treatment which has saved more lives in that disease than has any other.

The sounds detected in cholera morbus were not so characteristic as were those of cholera, still they had peculiarities which enabled him to prognosticate concerning its duration. In common colic, it was the absence of all sounds which marked the disease, and he discovered that the remedies accomplishing relief were successful by reëstablishing the peristole. In this affection, by means of auscultation, he was able sometimes to detect a favorable change long in advance of any amelioration in the symptoms, as the two following cases will show—they are contained in a report on intestinal auscultation which Dr. Hooker made to the New Haven County Medical Society, at its annual meeting, in 1847. “Some eighteen years ago, I called one morning to see an eminent medical friend who had been subject to frequent attacks of colic, and who was now thought to be dying, after a night of extreme suffering with this disease. Applying my ear to the abdomen, I immediately assured him that a regular peristaltic action was restored and that the danger was over. He replied that he experienced no relief of symptoms, saw little reason for encouragement, and felt as though he could survive but a short time. The pain was now severe and increasing; and it was more than two hours from this time before the apprehensions of the patient, and his friends generally,



were at all relieved. In this case, as in many others that I have observed, it was full three hours after my confident assurance that the disease had made a favorable crisis, before there was any evacuation from the bowels." Describing the second case, he says, "in March, 1847, I was called, at night, to a man affected with colic. After the usual precursory symptoms, he had now, for about two hours, suffered severe pain which had suddenly increased within the last few minutes, so that he could hardly be confined to the bed. The application of the ear discovered a regular active peristaltic motion. I concluded that this was a case, such as are sometimes observed, of a spontaneous restoration of peristaltic motion, and that this returning motion had caused the present sudden increase of pain. As the pain had not continued long enough to induce any considerable inflammation or soreness of the intestines, I did not hesitate to assure him that if he would keep warm in bed, the pain would soon subside. I remained with him about thirty minutes, and left him in a quiet sleep—not taking to myself the credit of a cure, as I might have done, had not auscultation informed me that a spontaneous natural action had rendered medication unnecessary."

In employing Auscultation in diagnosing diseases of the bowels so generally as he did, Dr. Hooker incurred the charge of overestimating its value. He did not however use it to the exclusion of other means, but as auxiliary to them; it was one of the means which he always used in cases where it was applicable, and in

these, he freely admitted that it availed much more in some than in others; he also acknowledged that the results of its application to diseases of the intestines were not, on the whole, as satisfactory as they are in those which affect the lungs and heart.

Dr. Hooker was an enthusiast in his profession, he loved it ardently and devoted all the energies of his mind to the development of its resources. This temperament coexisting with the right mental endowments, abundantly qualified him to succeed, and success, to an extent realized by but very few, did attend his efforts. He was of an investigating turn of mind and was able to take broad and comprehensive views, possessing, as he did, keen perceptive faculties and good judgment. He did not however, rapidly arrive at conclusions; some of his opinions, (as for instance those to which we have just referred) were not established until after years of diligent observation and study, but when anything was once settled, it was settled to remain so—to remain so, simply because he would not form a conclusion, unless the evidence furnishing it was abundant and incontrovertible. Having substantiated a doctrine or fact, he of course conformed to it in practice as far as was consistent, and no further, for he would not allow his discoveries to mislead him, though in themselves they might be ever so important. We lay stress upon these points, for the reason that an impression prevails to some extent that Dr. Hooker applied his dogmas indiscriminately in the management of the sick: he was not thus wedded to hobbies.



While tenacious of his own opinions he was tolerant of those entertained by others; and though they opposed his own, and were advanced by the youngest members of the profession, he listened to them considerately and kindly; he courted discussion, believing that the cause of truth would thus be subserved; to get at the truth, was his continual aim.

Dr. Hooker wrote but little for publication. His principal essays were, one on "Diet for the Sick," read before the American Medical Association at its meeting in Philadelphia, and published in the Transactions of the Association for 1855, and another, on "Intestinal Auscultation," which originally appeared in the Boston Medical and Surgical Journal in the year 1849; both of these papers will well repay a careful perusal. Other, and shorter articles from his pen, occasionally appeared in the pages of the medical journals of the day. It is to be regretted that he found so little time to record, for the benefit of the profession and posterity, the results of his extended observation and experience.

He took a deep interest in all those medical organizations whose object is the improvement of the profession; he was a member of the American Medical Association, of the Connecticut Medical Society, and of the New Haven City Medical Association, and in some of the medical societies of other States he held honorary membership; all of these he assisted in sustaining, being present at their meetings whenever practicable, and then, always joining freely and heartily in pending discussions.

He was also a devoted member of the Connecticut Hospital Society; as a member of its board of directors, and one of its physicians and surgeons, to which offices he was elected at the organization of the Society in 1832, he was ever faithful and efficient; as director, his counsel and judicious management have been of large avail in the successful maintenance of the institution, and as physician, hundreds of those who have enjoyed its benefits will testify, that to his skill and kindly ministration, under the blessing of God, is due the preservation of their lives.

Dr. Hooker possessed a noble character, and its excellencies were conspicuous in all the relations of life; most prominent among these was benevolence—benevolence in its largest sense, for it comprehended mankind and was accompanied with a desire to promote the well being and happiness of all—a more unselfish, a more self-sacrificing man than Dr. Charles Hooker, we never knew. Another beautiful and striking trait which adorned his character, was conscientiousness; it was noticeable in trivial as well as in important matters; he always sought to do right, and, having done it, was invincible in adhering thereto, neither bribes nor reproaches would swerve him; his decision and independence of character were depicted in his very countenance. He was an impulsive man, but impulse with him did not pander to the lower passions—of these he seemed to be quite dispossessed, it rather moved and added lustre to his nobler traits. His temper was mild; provocations seldom ruffled it.

It is superfluous to add that Dr. Hooker was a Christ-



ian; the graces above enumerated are the offspring of true religion, and, "by their fruits ye shall know them." While he exemplified religion continually, he was singularly reticent as to speaking upon the subject; he was not in the habit of alluding to it, either with patients or bereaved friends. This omission was not however because he did not appreciate its importance, for, when the mother of his wife, to whom he had rendered the devotion of an own son, was at the close of life, he frequently sent for his pastor, the Rev. E. L. Drown, to dispense to her its aid and comfort; and again, during the last sickness of his beloved wife, he sent notes daily to the pastor, requesting him to come and pray with her, and in those prayers he always joined.

He was a member of St. Paul's (Episcopal) Church, uniting with it in 1845, the year it became an independent parish. He had also been connected with its vestry from the first organization of the parish, and, notwithstanding the irregularity of his attendance upon the services of the church, he was an active and useful member, and his removal from its communion is deeply felt both by pastor and people.

Dr. Hooker was married in April, 1823, to Miss Eliza Beers, youngest daughter of the late Deacon Nathan Beers of this city.† Mrs. Hooker was an excellent woman:

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† The family of Deacon Beers, was extensively connected with the Medical Profession. His eldest son, Timothy P. Beers, M. D., practiced in this city from 1811 until his death, in 1858. The son of Dr. Beers, Timothy P. Beers, Jr., graduated in medicine at Yale College, in 1847, and practiced

she possessed a sunny countenance, a genial disposition, uniform cheerfulness of spirits and a generous soul; her happiness consisted in doing good to others, and many afflicted and sorrowing ones have derived comfort and strength from her words of cheer, and Christian example. With such a wife was our friend blessed, and with her he was permitted to enjoy the quiet happiness of domestic life for nearly forty years. Their enjoyment, however, was not unmixed with sorrow—the sorrow of bereavement. Of the eight children born

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here, and in California, until his death in 1860. A second son of Deacon Beers, John, died young, while pursuing medical studies; a third son, Isaac Beers, was for many years, and until his death, a Druggist in New Haven. Two of the sons of Isaac, John P., and William I., are at the present time, Druggists, here.

The three daughters of Deacon Beers, all married Physicians, the eldest, Maria, was the wife, and is now the widow, of the late Eli Ives, M. D.; their children were three sons and a daughter, Nathan B., who graduated in Medicine at Yale College, in 1828, and Levi, who graduated M. D., at Yale, in 1838, are now in practice here. Charles L., son of N. B. Ives, M. D., a graduate of Jefferson Medical College of Philadelphia, class of 1854, is also a practicing physician. Charles L., a third son of Eli Ives, died while engaged in the study of medicine. Maria, the only daughter of Eli Ives, married Henry A. Tomlinson, who graduated in medicine at Yale College in 1832, and practiced in this city, until his death, in 1840; his son, Charles, received the degree of M. D., at Yale, in 1862.

Abigail, the second daughter of Deacon Beers, married John Titsworth, M. D., of Yale College, class of 1818, who practiced in New Haven for many years,—they now reside in New Jersey. The youngest daughter of Deacon Beers, Eliza, became the wife of Charles Hooker, M. D.

[For these statistics we are indebted to Dr. Knight.]



to them, six were removed by death—all dying in early life.† Mrs. Hooker's death occurred March 11th, 1862, and on the anniversary day of that melancholy event, in the next year, the widowed husband was prostrated and died after an illness of only eight days duration—he died at forty-five minutes past ten o'clock in the evening, exactly the time of day of Mrs. Hooker's decease. The two surviving daughters,‡ in their fresh experience of sorrow, cannot but be soothed by the recollection that their loved and honored father sustained through life an unblemished character and reputation, having the full confidence of his professional brethren, the gratitude of those who had realized his skill and kindness in sickness, and the esteem of this entire community; while their mother, in her more limited sphere, exhibiting always the graces of the Christian character, ever received the praise and love of all who knew her.

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† The deceased children of the late Doctor, and Mrs. Hooker, are—

Jane Havens Hooker, who died October 25th, 1828, aged 13 months.

Mary Phelps Hooker, who died May 25th, 1830, aged 6 years.

Mary Phelps Hooker, who died January 12th, 1832, aged 1 year.

Charles William Hooker, who died February 6th, 1832, aged 3 years.

William Seth Hooker, who died September 6th, 1834, aged 14 months.

Charles Richard Hooker, who died November 17th, 1841, aged 6 months.

‡ Miss Eliza Beers Hooker, the eldest of the surviving daughters, died soon after the above discourse was delivered. She was taken ill September 19th,—just six months from the date of her father's decease. Though life in its prospect seemed full of brightness to her, she cheerfully relinquished it in the full confidence of a glorious immortality, dying October 8th, 1863, at the age of 28 years.



Dr. Hooker continued to visit his patients until Wednesday evening, March 11th, though for several days preceding he had not been in his accustomed health. At this time, his business was excessive and called him from the city considerably, and the journeys out of town were made in his own carriage, and in several instances when the weather was quite inclement. His last visit was paid to a neighbor, to whom he remarked on leaving the house, that he was going home to be sick, and not only did he apprehend sickness, but, before the symptoms were at all distinctive, he expressed the conviction that he should not recover. His disease, congestion of the lungs, developed itself slowly; at first a general prostration was all that was apparent. On Thursday afternoon, March 12th, febrile tendencies were observed; these however abated during the night following to such an extent that he was able to pass the forenoon of Friday in his office, reading; later in the day however, the stomach became irritable, and from this time onward he complained of a sinking sensation in the region of the stomach; superadded to it on Saturday, was oppression in breathing attended with crepitant rales, which were perceptible over the lower part of the right lung, and afterwards, over the lower lobes of both lungs. The oppression, as also the gastric sinking, were judged by the patient to be lesions of typhoid fever, which he supposed was his disease. Thus the case continued without much change other than a progressively increasing debility and dyspnoea, until Wednesday morning, March 18th. The



pulse up to this time had not exceeded ninety, nor the respiration twenty-two, per minute, but after eating a hearty breakfast (on Wednesday), which he called for, both became greatly accelerated and the patient correspondingly worse; in the evening, the pulse was one hundred and thirty, and the respiration sixty, per minute; and so they continued, most of the time, to the close of life. During Thursday, March 19th, he steadily failed, and, though unable to speak, seemed to preserve consciousness until about seven o'clock, P. M.; then a comatose state ensued, which became more profound and resulted in death, at forty-five minutes past ten o'clock, the same evening.†

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† The following report of Dr. Hooker's sickness is copied from the Records of the New Haven Medical Association.

"*Thursday afternoon, March 12th.* Dr. Lindsley was called and found Dr. Hooker lying upon a sofa in his dining room. He said he had not felt quite well for a week or two; feared he had been imprudent in keeping at business too long. Had been to Branford, (ten miles distant from New Haven) four times within a week. The preceding day he had been to Ansonia, and performed a tedious and difficult surgical operation which very much exhausted him, so that he doubted whether he should be able to drive home. For more than a week previous to giving up, he had often felt a sense of weariness and fatigue, quite unusual to him. Dr. Lindsley thought he was much depressed in spirit. His pulse was full and strong and, 78, per minute; the tongue was covered with a thick yellowish fur, skin nearly natural; he complained of nothing but a feeling of complete exhaustion; had no pain, but had been slightly chilly at intervals. The preceding evening, he took a Dover's powder which proved somewhat nauseating. Was taking (at the time of Dr. Lindsley's first visit) quinine,—he had prepared a half-drachm in solution with lemon-juice, of which he had taken about one-half, and intended to take the



Thus, in the maturity of age, and in the midst of usefulness, did our friend pass away. His death, following almost immediately the announcement of his serious illness, produced a sensation in the community, and many of his fellow citizens on hearing of it, hastened to the house of mourning to mingle their grief with that of the bereaved home circle; among them, came also the poor, and it was touching to witness their falling tears as in silence

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remainder before bed time. He more than once expressed the fear that he had delayed too long to be restored and saved from a course of fever, by quinine.

*Friday, A. M., March 13th.* Found him in his study, reading; he said he felt much better and talked about visiting patients. His tongue was still heavily coated, but there was little or no febrile action; later in the day, the stomach became irritable. Dr. Knight being called, advised ten grains of blue pill, to be taken, but the stomach revolted and it was omitted. In the evening Dr. Bronson suggested an emetic of ipecac, which he took, and it operated kindly, relieving the nausea, it also caused an evacuation of the bowels with the relief of some griping pains in the abdomen.

*Saturday, March 14th.* In bed. Was persuaded that he had typhoid fever, although not feeling much worse than the day before; complained only of debility; the appetite was good.

*Sunday, March 15th.* Still in bed, appearing very much as yesterday; appetite the same; complained of great exhaustion, and to this he attributed the oppression felt in breathing,—took a mixture of carbonate of ammonia and camphor.

*Monday, March 16th.* Debility much increased; expectorating a dark brownish, viscid, mucous, in small quantity; some cough, and slight crepitation with the expiratory murmur at the lower lobe of the right lung. He spoke with much effort. Advised three grains of calomel, which operated as a laxative; the discharges had a natural appearance; urine moderate in



they bent over the inanimate form of their late benefactor. How eloquently did those tears testify to the worth of the departed, and to the affection with which he was regarded by those, before unknown, mourners. In their memories will his name be enshrined forever. How much better it is to write one's name in lines of gratitude on living hearts, than to have it inscribed on costliest shafts of mar-

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quantity and high colored; much thirst,—he drank freely of cider and of ale and water.

*Tuesday, March 17th.* Condition nearly the same as yesterday. No thirst; a little expectoration of light colored mucous; pulse 90; respiration more frequent than on the preceding day,—objected to having a fire in his room lest it should oppress his breathing.

*Wednesday, A. M., March 18th.* He ate a good breakfast of meat, egg, toast and coffee, and appeared to relish it. During the previous night he had been a good deal restless, with troublesome dreams and talking in sleep. At noon, very much worse; alarming congestion of both lungs; pulse 115, and respiration very quick. A consultation was held at 7 P. M., at which Drs. Knight, W. Hooker, N. B. Ives and Lindsley were present. Patient growing worse; pulse 130, and respiration 60, per minute; unable to speak, and in a semi-comatose condition. It was decided to get him under the influence of veratrum viride, and to apply counter irritation to the chest, also to administer wine, moderately. Doctors W. Hooker and Lindsley, remained with him during the night:—About midnight, discovering retention of urine, used the catheter and drew away over a quart of water: Temporary relief was obvious; rapidity of pulsation and respiration diminished to 108, and 40, per minute, respectively. He seemed more easy, and appeared to sleep a little.

*Thursday, 6 o'clock, A. M., March 19th.* Respiration 50, and pulse 120, per minute, but variable. There was no conspicuous effect from the veratrum viride. From that time he gradually and steadily declined until 10.45 o'clock, P. M., when he expired."

ble or granite; for time will efface the inscription, and the granite must turn to dust, while affection's epitaph upon the heart will be read by the light of eternity.

"To live in hearts we leave behind,  
Is not to die!"

The truly great—the good—when summoned hence,  
"Rest from their labors, and their works do follow them."

The funeral services of Dr. Hooker were held in St. Paul's church, on Monday afternoon, March 23d, when the Rector, Rev. Mr. Drown, impressively discoursed upon his character in presence of a large and attentive assembly of his friends and acquaintances.

Allow me in a closing word, to set more distinctly before you for imitation when you become Physicians, some of the traits of character which enabled Dr. Hooker to become the man and physician that he was, for without them, it will be impossible for you to attain to corresponding eminence.

His most conspicuous characteristic was, devotion to the profession; he loved it for its own sake, and for the opportunities it afforded of doing good to others, and this must be your purpose if you would be qualified for its arduous and responsible duties. Think not to master the studies of medicine in the brief term of your pupilage, for this period will barely suffice for acquiring a knowledge of the elementary principles and general facts of its several departments—the details, the filling in, is the work of a life time, and then you will not have comprehended all.



To be both practical and skillful, and so of course most successful as physicians, you will need to combine study with observation. If you depend on book knowledge altogether to prepare you for treating disease, you will be likely in practice to disregard the peculiar features of each particular case in the application of remedies: and if you rely solely on observation, you are in danger of degenerating into mere routine practitioners, and then of managing all cases of the same disease exactly in the same way. As no two persons are identically alike, either in countenance, character or conduct, so are no two cases of a disease precisely correspondent; each case therefore must be observed, studied and treated independently, in the light of knowledge previously acquired.

Study, then, in the way of observation and from books, you must persist in until you are through with the labors of the profession, and you will not be likely to do this if a lower motive than love for the profession has determined your choice of it.

Multitudes of men who are dubbed Doctor, fall to rise no more when let go of by their preceptors, simply because they studied Medicine for no better reason than that they knew not what else to do; and the number of such wrecks has so disparaged our calling, in the esteem of the world, that it is common everywhere to hear it said of a blockhead, "he is good for nothing else but to become a doctor."

Daniel Webster, when asked by a young friend if the legal profession were not already overcrowded, is said to

have replied to him, "There is plenty of room up stairs," an intimation which is equally applicable to our own profession, for, of the crowds that are yearly admitted within its portals, only the smallest number ever reach its highest honors.

Other pre-requisites to success, and they are scarcely subordinate to that diligent and comprehensive study of which we have spoken, are to be found in the possession of right social qualities and manners. In the sick room you must be amiable, cheerful, hopeful, gentle and kind; the exhibition of these graces will often be of more service to your patients than would be the exhibition of medicines.

Let not familiarity with disease and suffering blunt your sympathies or sensibilities; ever have a heart to feel for the woes of others, though you should not always betray sympathy, lest by thus humoring a patient you discourage him. And also you will have need of patience, for many are the vexations and annoyances incident to the duties of a medical practitioner, and if suffered to fret and disconcert you, they will seriously impair your usefulness as physicians. The traits which we have enumerated must be cultivated, they must be inwoven in the character and made a part of the man, for they are of inestimable importance in all the walks of life.

" A smile on the face, and soft words on the tongue,  
Will serve you as passports all nations among ;  
A heart ever cheerful, a spirit that's free,  
Will carry you safely o'er life's stormy sea."



Think it not strange, and be not discouraged, gentlemen, if the applicants for your professional service include many among the poorer classes; remember to whom the poor belong, and that He who cares for them has promised to reward those who in a right spirit minister to their wants. A noble member of our profession, on being remonstrated with for giving his attention so largely to the poor, replied, that they were his best patients, as the Lord was their paymaster. Our lamented friend, Dr. Hooker, was equally ready to serve all, of every class, who applied for his aid, and so every physician who is possessed with the spirit of philanthropy, will not hesitate to exert himself for the relief of suffering, whenever, wherever, and from whomsoever, it may appeal to him.

Finally, if you would attain to the highest excellence in the profession, be not strangers to the Christian religion. Christianity confers nobility upon manhood; it elevates, purifies and sanctifies character; it gives to the soul new purposes and aspirations, and makes its possessor, Godlike. It will largely augment your facilities for usefulness, and contribute greatly to your peace and happiness. You will need it to live by, and to die by; to enable you to bear up under the trials and sorrows of life, and to endure with patience and composure the infirmities of age. And when at last you languish in sickness, and the resources of our profession are powerless to save, it alone will sustain and comfort you—and it alone can secure to your departing spirit, the benediction of the Judge, "Well done, good and faithful servant."

## A P P E N D I X.

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At a meeting of the New Haven Medical Association, held March 20th, 1863, the following Preamble and Resolutions were unanimously adopted, viz:

WHEREAS, An all wise Providence has removed by death Professor CHARLES HOOKER, M. D., for forty years a member of this Association:—

*Resolved*, That in common with this whole community, and the profession throughout this Commonwealth, we deplore the loss of one who was eminently successful as a teacher of medicine, and who by great skill, uncommon energy and Christian fidelity in the performance of his professional duties, won the respect and esteem of all, and endeared himself to the many to whom he ministered, both as physician and friend, in their seasons of sickness and bereavement.

*Resolved*, That we tender our sympathies to the family of the deceased, and that we will, in a body, attend his funeral, wearing the usual badge of mourning.

*Resolved*, That a copy of these Resolutions be presented to the family, by the Clerk of this Association, and be furnished to the daily papers for publication.

Attest,

MOSES C. WHITE,

*Clerk of New Haven Medical Association.*



At a meeting of the Yale Medical Class, held March 20th, 1863, the following Preamble and Resolutions were adopted :

WHEREAS, It has pleased God in His all wise Providence, to remove from our midst our esteemed friend and instructor, Professor CHARLES HOOKER, M. D., we, the Medical Class of Yale College, desire to give this public expression of our sorrow.

*Resolved*, That while we mourn his loss as that of a faithful teacher and valued counselor, we recognize the wisdom and goodness of the Supreme Ruler, who, in His most mysterious providences, "doeth all things well."

*Resolved*, That in the death of this eminent physician and professor, the medical profession at large, has lost a valuable leader; this Class a rare instructor, and his immediate acquaintances a true and faithful friend.

*Resolved*, That in his enthusiastic devotion to science, his independent and original investigations, his comprehensive, accurate and minute observations, and more than all, his fearless and uncompromising advocacy of what he believed to be truth, he gave a needed tone to medical study and practice.

*Resolved*, That we extend to the family and friends of the deceased, so suddenly bereaved by his death, our heartfelt sympathy in their great affliction.

*Resolved*, That the above Resolutions be presented to the family of the deceased, and that a copy be furnished to the newspapers of the city for publication.

JOHN D. BRUNDAGE, *President*.

GEORGE R. SHEPHERD, *Secretary*.

At a meeting of the Directors of the Connecticut State Hospital Society, held March 21st, 1863, the following Preamble and Resolutions were unanimously adopted :

WHEREAS, Professor CHARLES HOOKER, M. D., a Director of this Institution, and one of its attending physicians from its foundation, has been removed by death—

*Resolved*, That while we bow with submission to the mysterious Providence which has suddenly cut short the life of our associate, in the height of its usefulness, we would be grateful for the abundant service which, during forty years, he rendered as a physician, a public teacher, and an active promoter of the interests of humane institutions,—and for the bright example which he set, of zeal, energy and benevolence, in the discharge of the duties of his profession.

*Resolved*, That a copy of these Resolutions be presented to the bereaved family, and published in the daily papers—and that we, in a body, attend the funeral of the deceased.

J. KNIGHT, *President*.

S. G. HUBBARD, *Secretary, pro tem.*

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At a meeting of the Rector, Wardens and Vestry of St. Paul's Church, New Haven, held March 22nd, A. D., 1863, the following Preamble and Resolutions were unanimously adopted:

It having pleased Almighty God to suddenly remove by death, our beloved associate and friend, Dr. CHARLES HOOKER, while in the full maturity of his usefulness, and whereas, the Vestry of St. Paul's Church, with whom the deceased has been officially connected since the first organization of this Parish, desire to give suitable expression to the heartfelt grief which this sad bereavement has caused, not only to themselves, but to the community and the congregation which they represent, therefore,

*Resolved*, That in the death of Dr. Hooker, the Church which he loved has lost an exemplary member, a consistent Christian, a faithful officer, and a wise counselor.

*Resolved*, That we believe the Medical Profession which he adorned, has been deprived of one of its brightest ornaments, as well as of one of its ablest public teachers; that society will long lament the loss of an upright, useful citizen, and will often recall with deep regret the light of his cheerful eye, and the gentle kindness



of his heart: but above all, the sick and suffering poor of this city will bitterly mourn for their lost friend, whose untiring benevolence and efficient skill was ever prompt to relieve the distress of the *humblest* patient. Greater men have fallen in our midst whose memory may claim louder praise, but few have left a void more difficult to be filled by another, and none will be more regretted by all classes of our citizens. His memory is embalmed in the hearts of all who knew him—for to know him was to love him.

*Resolved*, That in testimony of our respect, we will attend the funeral of our late associate in a body, and that we tender our unfeigned sympathy to the family of the deceased, especially to his orphan daughters, praying that in this their sudden and heavy affliction they may be comforted by Him who is a father to the fatherless, and whose decrees, though inscrutable, are always merciful and just.

*Resolved*, That a copy of these proceedings be presented to the family of Dr. HOOKER, and also to the public through the daily papers—not as the customary formality towards a deceased associate, but as the sincere tribute of those who for many years have intimately known him and esteemed his worth.

Attest,

SAMUEL E. BARNEY,

*Clerk of the Vestry.*