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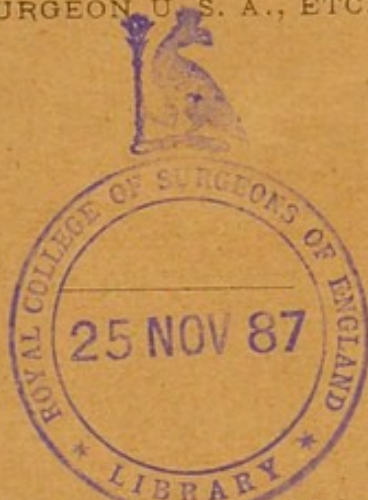
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MEDICAL BIBLIOGRAPHY.

BY

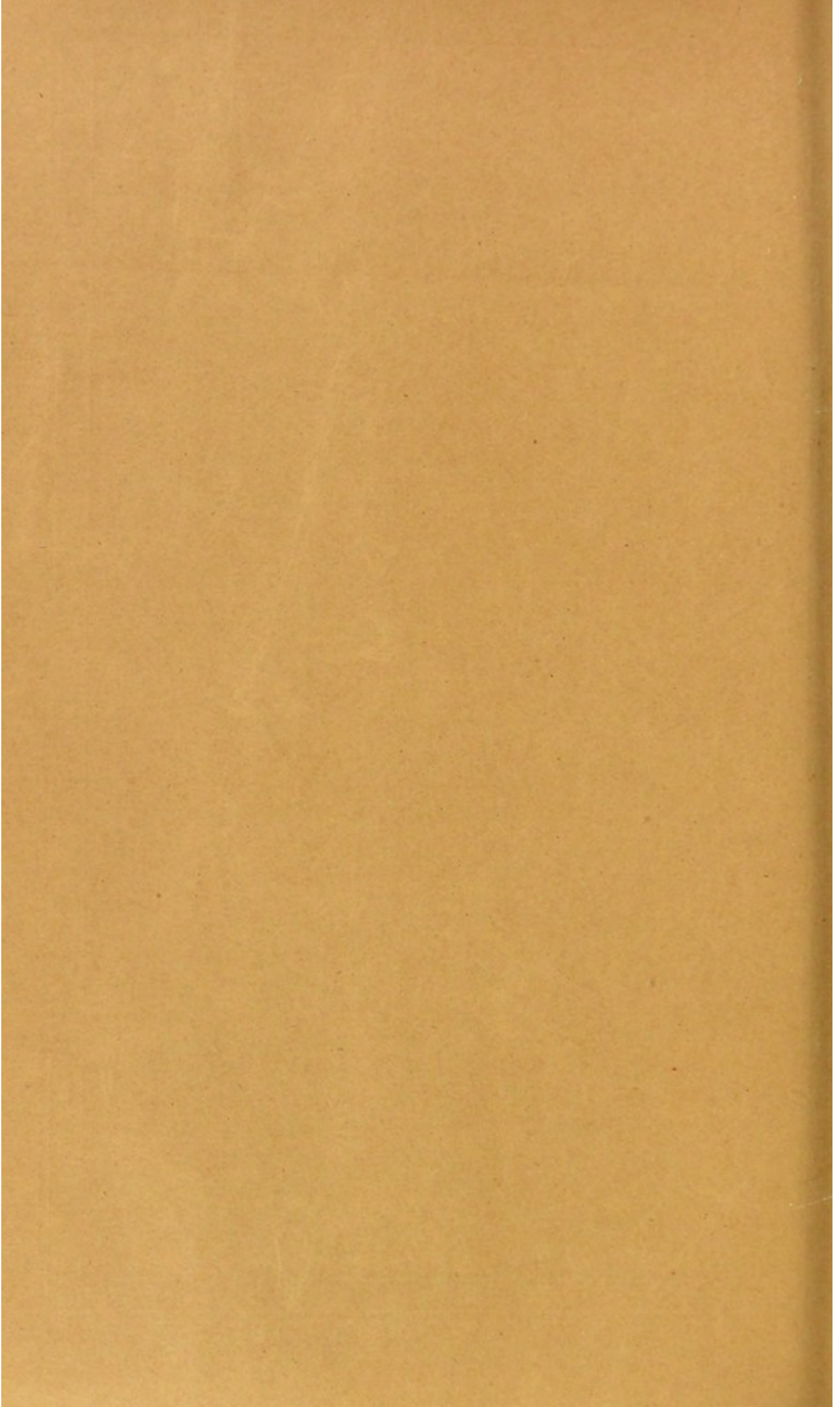
JOHN S. BILLINGS, M. D.,

SURGEON U. S. A., ETC.



REPRINT FROM THE TRANSACTIONS OF THE MEDICAL AND CHIRURGICAL FACULTY OF MARYLAND, 1883.

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ANNUAL ADDRESS.

MEDICAL BIBLIOGRAPHY.

BY JOHN S. BILLINGS, M. D., *Surgeon U. S. A., etc.*

Mr. President and Gentlemen of the Faculty :

First of all, permit me to return thanks for the honor of being called upon to address you at this Annual Meeting, and also for the distinction of an election as an Honorary Member of this body. As regards the latter, my thanks are unqualified; as regards the former, I am reminded of the comparison of such honors to that little book described in Revelation as being "sweet in the mouth but bitter in the belly," since the preparation of such an address as one would wish to present to this assemblage, is by no means an unmixed pleasure; and if my reflections while hesitating in the choice of a subject for this occasion could be given in full, they would illustrate this capitally.

I thought of a number of things which would probably interest you, at all events I should very much like to hear something about them myself; but, unfortunately, I knew just enough about them to deprive me of that unhesitating confidence with which one can advise about matters of which he is quite ignorant,—and yet not enough to feel that I had anything to say about them which would be worth listening to.

Once upon a time—many years ago it was—I had a patient! This patient was a locomotive engineer, who ran the night express on one of our great Western through-lines. He told me that on dark and stormy nights he drove his engine into the blackness ahead without special anxiety or fear, but on the moonlight nights, when the vista into which vanished the glittering rails in front was half revealed, and when the bars of shadow across the track seemed like missing rails or fallen tree-trunks, he was fearful and hesitating, and that

the nervous strain then became great and exhausting. It was a new illustration of the old proverb, "Where ignorance is bliss," etc.

But to return to my subject, or rather to my want of a subject. I thought of matters of local interest, of the relations of physicians to public health, the management of smallpox epidemics, and the Baltimore Ordinance for the Control of Contagious Diseases; of the vital statistics of Maryland, and a comparison of the results obtained by the census with those which may be deduced from a multiplication of the supposed number of houses by the estimated number of persons per house; of higher medical education, and the probable relations the Medical Department of the Johns Hopkins University will have to it and to other medical schools in this city; of hospitals in general, and the merits and demerits of the Johns Hopkins Hospital in particular; of quarantine *versus* scientific investigation, and the National Board of Health *versus* the Marine Hospital Service; and the result of these reflections was that the progress of science and the harmony of this auspicious occasion would be best aided and preserved by letting all these subjects carefully alone. "Let us remember," said Whewell, "that we are not infallible, not even the youngest of us," and in all these matters let each abide in his own belief; that is, of course, provided that we cannot persuade or drive him out of it.

Finally, I decided to occupy the time with a talk about medical bibliography and how this Faculty can promote it. The trouble did not end, however, with the selection of a subject; far from it. Do you remember Fuseli's description of his method of painting a picture? He said, "First I sits myself down; then I works myself up; then I puts in my shades; then I drags out my lights." This sounds simple and easy; but, in the first place, I could find no time or opportunity to sit down to this business until a few days ago. As to the working up—let me take you behind the scenes for a moment, and in the strictest confidence show you how it was done.

In the first place, a sheet of foolscap was covered with notes of headings, such as "definition," "utility," "history," "necessity for truthfulness," "difference between a bibliography and an index," "method of work," "how to use a library," etc., etc. Then I wrote out more fully the few ideas I had derived from personal experience. Then I took up the *Index Catalogue* of the Washington library and turned to the heading "Bibliography (Medical)." In this particular case I happened to know pretty well what I wanted, which was a list of

three or four of the first attempts at medical bibliography, and the precise reference to a paper on "errors in medical bibliography," by Dr. A. Petit, which I had found very interesting. I also knew that I had read, within the past year, another article on the same subject by the same author, being a reply to an article by M. Richet in the *Revue Scientifique*. To find the precise reference for this I went to the *Index Medicus*, and in five minutes I had it. Having examined these various papers, I found half a dozen more references which were neither in the *Index Catalogue* nor the *Index Medicus*, and, especially, one to a preface written by Prof. Verneuil to a treatise on gastrostomy, by M. Petit, to which I shall have occasion to refer presently, and which is probably in about the last place where one would have thought of looking for one of the most eloquent eulogiums of medical bibliography with which I am acquainted.

Having read these various papers, together with the very excellent article on Bibliography in the last edition of the *Encyclopædia Britannica*, I discovered three things, all of which previous melancholy experiences had led me to anticipate. First, I found a number of fresh references; second, that I had more material than could be used in an hour's address, and third, that most of the ideas contained in my preliminary notes had been very much better expressed by previous writers, and that they must either be dropped, or quotations substituted for what I had thought might possibly be something new.

I shall not trouble you with further details, my object being merely to indicate one method of commencing a bibliographical research; and also to indicate why it is that such researches tend so strongly to destroy originality of expression, since one so often finds a sentence or paragraph in which his idea is so well stated that any change in it would be the reverse of an improvement, and the impulse to quote becomes irresistible, although the quotation is by no means always acknowledged.

Now, like the fine old Scotch gentlewoman quoted by John Brown, one often finds that the best way to get the better of temptation is just to yield to it; which is simply another way of stating what some modern philosophers would express as the importance of following the lines of least resistance; and therefore you are duly warned that I shall make no special attempt at originality, either in matter or form; and while I do hereby formally apologize for not having prepared a set oration, I do, at the same time, beg that you will shift the greater part of the blame for this failure from my shoulders to

those of the gentlemen who are responsible for my being in this position.

Bibliography is defined by the *Encyclopædia Britannica* as "the science of books, having regard to their description and proper classification," the meaning having been greatly modified from that which it had a hundred and fifty years ago, when it signified "skill in deciphering and judging of ancient manuscripts," which is now called palæography. This definition of the *Encyclopædia*, comprehensive as it is, does not fairly include the most usual sense in which the term bibliography is now used as applied to a particular subject, that is, as giving references to all the literature of that subject: including not only the titles of books and pamphlets specially treating of it, but also articles in periodicals and transactions, and even single paragraphs which furnish information with regard to the matter in hand. Perhaps I can best illustrate this by giving a few specimens of the inquiries made at the Library of the Surgeon General's Office in Washington, such as: "for the literature of hydrophobia"; "for all cases of epilepsy reported as cured by burns"; "for a complete list of all books and papers written by Dr. John Jones"; "for materials for the life of Dr. John Morgan"; "for a list of the printed medical theses of the graduates of the University of Pennsylvania"; "for materials for a history of the Medical Schools of Baltimore, including all catalogues, announcements, etc."; "for all accounts of epidemics occurring in Memphis"; "for data relative to the diseases of Georgia"; "how many editions have been published of the treatise of the school of Salerno?" "Which is the best edition of Galen?" "Who was the author of *Sechs Bücher ausserlesene Artzney*, etc., published at Torgau in 1600?" "Where can I find a paper 'On the voice' by Dr. H. H. Hayden, published in some journal or transactions forty or fifty years ago?" "Where can I find a paper 'On the differences between dead and living protoplasm,' recently published, author's name not remembered?" "What is a copy of Bagellardus *de Egritudinibus infantium* worth?" "What will you give for a perfect manuscript in good condition, written in 1429, being extracts from and commentaries on Almansor and Isaac, and making 160 leaves folio?" The answers to these and similar questions come under the head of medical bibliography, and you will see that it is not easy to give a definition which will include them all, unless you make it so general and vague as to be useless, as, for instance, that it is the science of medical literature. It may be viewed and studied either

as a means or as an end. The greater part of medical bibliography does not go beyond the titles of books or articles. The first distinct and separate work on the subject is that of Pascal Lecoq, better known by his Latinized name of Paschalis Gallus. His *Bibliotheca Medica*, published at Basle in 1590, gives a list of about thirteen hundred medical authors, the titles of whose works are stated vaguely and indefinitely, usually only one edition being given. It is arranged alphabetically by the first, not the last names of the authors. It gives, also, lists of writers on certain subjects or in certain languages, and as the system of classification is brief and curious, I give it in full: Works in French, works in German, works on Hippocrates, on Galen, on Avicenna, on Dioscorides, on Surgery, Anatomy, Materia Medica, Pharmacopœias, on Practice, on Consilia Medica (or what we would call clinical medicine), on Pest and on Lues.

In the following year, namely, 1591, Israel Spachius published, at Frankfort, his *Nomenclator Scriptorum Medicorum*. This is a subject-catalogue with an index of authors, of whom 1436 are mentioned. The data for both these books appear to have been derived mainly from the *Bibliotheca* of Conrad Gesner. Cuvier, in his life of Gesner, in the *Biographie Universelle*, mentions that Gesner never permitted the section "Medicine" of his *Bibliothèque Universelle* to be printed, as he could never get it arranged to his satisfaction. If this rule were to be generally applied, bibliographies and catalogues would be exceedingly rare. I shall not inflict upon you an account of the various attempts at medical bibliography which have been published from the time of Spachius to the present day. You will find their titles down to 1874 in the very complete and accurate *Bibliographie des Sciences Médicales*, by Pauly, which is itself a book worth knowing, being a bibliography of medical bibliography, history and biography, making a volume of over 1800 pages. I must, however, say a word upon one series of works, not to mention which would be unpardonable, for an address on medical bibliography which contained no allusion to the *Bibliothecæ* of Haller would be like a political speech of the present day with no allusion to reform or the tariff. The quarto volumes which contain Haller's *Bibliothecæ Anatomica*, *Chirurgica* and *Medicina*, comprise a remarkable piece of work, which only those who have been engaged in similar pursuits can fully appreciate. They form a history of medicine rather than a bibliography; but it is wonderful that remote as he was from great libraries, he should have been able to make such a complete enumeration of existing medical books as he

did. These works are, however, much more generally praised than consulted for bibliographical purposes; the arrangement in order of dates, instead of by subjects, or alphabetically by authors, being very inconvenient, and the index being imperfect. Their great value is in the clear, brief analyses and pithy criticisms which are given of a large number of books, and in the fact that he clearly indicates the books which he himself has seen and examined, as distinguished from those of which he knew only the titles. With reference to these last he usually indicates his authority, but, unfortunately, in printing he forgot to give the key to his abbreviations, and some of these are now unexplainable.

Mr. Thomas Windsor, of Manchester, one of the most learned and accurate of living medical bibliographers, has pointed out an amusing error resulting from misinterpreting Haller's abbreviations. "Speaking of Peter Lowe's work, *The Whole Course of Chirurgie*, Haller gives the editions as follows: 'London 1597. 4. Tr. 1612. 4. Port. 1614. 4. Gunz. 1634. 4. Port. 1657. 4. Gunz.' That is, there were five editions, published in the years 1597, 1612, 1614, 1634 and 1657. All were issued in London, and all were quartos. The abbreviations Tr., Port., Gunz., signify the authorities for Haller's statements, he himself not having seen any copy of the work. Watt, in his *Bibliotheca Britannica*, vol. I, p. 618, has amplified Haller in the following extraordinary manner: 'Lowe, Peter . . . *The Whole Course of Chirurgie*. . . . Lond. 1596, 1597, 1612, 1634, 1654, 4to. This is considered to be a book of very great merit, and was translated into a variety of languages, and printed in Fr. 1612, Port. 1614, Gunz. 1634, Port. 1657.' Allibone, in his *Critical Dictionary of English Literature*, has carefully copied Watt."*

It is not my purpose to indicate or comment on the various systematic works on medical bibliography which have appeared since the days of Haller, all of which are largely indebted to his works for information. Most of them are more useful to a librarian or bookseller than they are to a physician seeking for information on a particular subject, unless that subject is bibliographical. The best medical bibliography will be found in the French dictionaries or encyclopædias of medicine, in monographs, and articles in medical journals. I shall presently, however, have a word or two to say with regard to one source of information, namely, catalogues of medical

*Index Medicus, Vol. I, 1879, p. 372.

libraries; but first let us consider some of the methods used in medico-bibliographical work.

First, there is the old-fashioned way, in which the student searches the books immediately at his command, using their indexes and making notes of all references to other works. He then goes to a library—asks for these books, gets more references from them, and so on—his time and patience being usually exhausted some time before the supply of references fails. It is in this way that bibliographical research becomes a pleasure by and for itself, and it is thus also that the best of this work has been done, but it requires much time.

Second, there is the modern mechanical way, the extreme type of which is to pay some one else to make a list of references for you, and then print this list as a bibliography of the subject without taking the trouble to consult the works themselves. Some writers, in fact, seem to desire to finish their article with an imposing string of references, without caring much whether they have any special relation to the matter in hand or not, something like the retired merchant who bought a country place and resolved to have a cow because he was so fond of new-laid eggs.

Do not suppose, however, that I object to mechanical bibliographical work; it is of great use as saving the time of those who can be more usefully employed, and it is now in fact a necessity,—since the mass of material to be dealt with is too great in most cases to be handled in any other way. I only wish to reiterate warnings which have already been given by others. Sir James Paget, for example, thinks that “there is now a danger that in the multiplication of scientific pursuits, and in the superabundance of means of publication, we shall lose the accuracy which should be at the foundation of our work. The publishing of error is quite as easy as the publishing of truth, and there will always be a large number of persons who will believe a statement because it is in print.”

Again, in an excellent article signed “Ch. R.,” in the *Revue Scientifique* for July 1, 1882, it is urged that an indispensable condition in bibliographical work is sincerity. “It is almost a lie to quote a book which one has not had in his hands,” and, again, “It is a part of elementary scientific honesty to cite only the books which one has read. . . . Of course one can neither consult all authors nor have at his disposal all the collections and books which contain desirable information; but if one cannot consult the original record, there is certainly nothing to prevent stating that a given bibliographical note

is given at second-hand, and noting the authority for it. A good bibliography, however, should merit more praise than the mere statement that it is not deceptive. After all the data and materials have been collected it will be found that many items are useless, and it is the elimination of these useless references which forms an important part of true erudition." M. Richet would not have such references mentioned at all, he would have the writer ignore them entirely. This view, however, does not appear to me to be correct, so far as concerns the titles of books or papers which might seem to a person unacquainted with them to relate to the matter in hand. When in the course of his researches a writer has examined such a book or pamphlet and found that it contains nothing original, or that the contents do not correspond with the title, or that for other reasons it is a waste of time to consult it, he should give the reference and note the fact distinctly. It is often just as important to indicate that there is no thoroughfare as to point out the direct road. It is precisely this critical indication of the value of a paper which makes the difference between good and bad bibliography, or between bibliography, properly so called, and catalogues or indexes. Consider for a moment what is, or should be, the main purpose for which a writer gives bibliographical details, namely, to save his reader time and trouble in case he wishes to verify or enlarge upon the author's statements. But if the writer has consulted John Smith's book or article and found that it gives no information in regard to the subject in hand, although its title seems to indicate it; that it is a mere rehash of opinions without any new facts, any intelligent criticism, or anything else which would induce one to look at it if he had no other sources of information, he should say so, and spare his successors in the same path the labor of looking up and reading John Smith's work, and the moral deterioration which the feelings excited by the examination of such a work are apt to produce.

It is very true that when one is speaking of the works of contemporaries and friends there is a very natural and even commendable reluctance to publish unfavorable criticisms or comments, and that it is much easier to refrain from all mention in such cases; but at least it should be done for the older writers when an attempt is made to present a bibliography properly so called. The article of M. Richet, to which reference has just been made, gave rise to an interesting comment by M. Petit upon the method to be pursued in bibliographical researches, in which he points out the impossibility of preventing literary thefts in bibliographical work, and refers to

the "wrath of Broca and Jaccoud at this factitious erudition, and at the fact that their work has been used by others without acknowledgment." (Petit (L. H.) *Sur la méthode à suivre dans les recherches bibliographiques*. Gaz. hebd. de méd., Paris, 1882, 2e sér., tome XIX, pp. 537; 585.)

Jaccoud prefaces his bibliography of diabetes as follows: "The general bibliography of diabetes has been thus far a little neglected. I have taken special pains in preparing the following, and have arranged it on a new plan which I think will much increase its usefulness. I hope that whoever does this bibliography the honor of copying from it, will at the same time indicate the original of the copy."

On reading this note I was naturally led to an examination of the bibliography thus commended, and certainly it shows extensive research and is a very useful compilation. I note in it, however, some errors of matter and form, and as by these I can illustrate one or two rules of bibliography, I will occupy two minutes with some remarks on the first of the ten pages of which this list consists. The merits of a bibliography are to be judged of: 1st, as to its accuracy; 2d, as to its completeness; 3d, as to absence of redundancy or repetition; 4th, as to its form; the most important rules for which last are, that it should be such that a librarian or a bookseller can find the books called for with the least expenditure of time and trouble, and that the classification shall be such as will direct the inquirer most readily to the especial information which he seeks.

First, then, are the names, titles, dates, etc., accurately given? I find that the title of the work of Trnka de Kr'zowitz, which is given as "Commentarius de diabete," is really "De diabete commentarius"; that "Rollo. Cases of diabetes, etc., 1797," should be "Rollo. Two cases," etc., or else the date should be changed; that "Bennet (J. B.) 1801," should be spelled with two t's instead of one; that the paper of "Dupuytren et Thenard," which is said to have been published in the *Bulletin de la Société de médecine*, 1806, was really published in the *Journal de médecine, chirurgie, pharmacie, etc.*, for that year, p. 83, and that only an extract from it is given in the *Bulletin de la Faculté de médecine de Paris* (etc.), which is what Jaccoud intended to refer to, but of which he did not give the correct title; that the date of the dissertation of Salomon, which he gives as 1809, is really 1808; that the article referred to as by "Renaudin" in 1818, is by "Renauldin" in the volume of the *Dictionnaire des sciences médicales*, dated 1814; that the dissertation given as by "Siegmeyer" is by "Siegmayr," and that

the title of the thesis of Dusseaux is "Sur le diabète," and not "Du diabète," as given. Here, then, are at least eight errors on this page, comparatively trivial, it is true, but of such a character as to make it doubtful whether Professor Jaccoud had himself examined all of these books whose titles he quotes.

Second, let us look at the completeness of the list. It gives five titles of works on Diabetes published prior to 1800. If its compiler had consulted the bibliography given at the end of the article by Renauldin, above referred to, he would have found over thirty titles of works published prior to 1800, which should have been included, and he would also have found a large number in Ploucquet's work, which is one of which no medical bibliographer should be ignorant.

Third, as to absence of duplication or redundancy. From this fault Dr. Jaccoud's *Bibliography* is free, and it is one not likely to occur in a list of general treatises. It is a very common one, however, in lists of references to cases, and it is one which requires minute examination of each case to avoid; many specimens of it will be found in those sections of the *Index Catalogue* of your Washington library which refer to cases of a given disease, injury or operation.

Fourth, we come to the form in which Dr. Jaccoud gives his references. As regards the individual items, judged by the rules given above, this form is very bad. The size of the books is not given, nor the volume of the journal, nor the page. The various medical encyclopædias are referred to as "the Dictionary in thirty volumes," "the Dictionary in fifteen volumes," &c., and the number of the volume is given in only one instance, and that for a German encyclopædia. On the other hand, unnecessary space is occupied by giving the titles of journals in full instead of using well-recognized abbreviations. The classification adopted is a very good one—it is into treatises on the general subject, on complication with gangrene, with disordered vision, etc., on pathological anatomy and etiology, chemistry, theories and treatment.

Now, probably, this seems to you very petty criticism, and so it would be if it were intended for criticism, which it is not. I simply wish to call your attention to the fact that there is a systematic way of giving bibliographical references with which medical writers should be familiar, and incidentally to suggest that when one calls attention to his own bibliographical work as being especially fine, it is a sort of challenge which some carper and doubter is sure to take up sooner or later. Taking all things into consideration, the best

specimens of medical bibliographical work with which I am acquainted are those given by my colleague, Dr. Woodward, in the medical volume of the second part of the Medical and Surgical History of the War; and the work of Petit presently to be alluded to.

M. Richet concludes his article in the *Revue Scientifique* as follows: "Perhaps it is unwise to attribute so much importance to bibliography. Perhaps the turning over the pages of many books and the consulting of many authors has a tendency to destroy originality. But on the whole I do not think so. Moreover, those who have the rare gift of scientific originality are altogether excused. They are creators and have no need of being erudite. Those who need to be such are those who are neither discoverers nor inventors, and it appears to me that such are in the majority." This does not fully accord with the opinions of Prof. Verneuil, who in his preface to the treatise on gastrostomy, by L. H. Petit (Paris, 1879), introduces the book with the statement that it is a work of pure erudition, compiled by a bibliographer who never has performed, and probably never will perform, the operation of which he gives the history; and yet that he has contributed as much to its future success as those who have devised or practised it. He says: "Scientific progress is due to three things of equal importance, namely, erudition, observation and experiment. There is a bibliographical method which is distinct, independent, worthy of cultivation for its own sake, and in no way inferior to its two rivals in the amount and value of the information which it furnishes. . . . While erudition certainly creates nothing, it leads to creation. To discountenance research in literature is like advising travellers who visit regions not yet fully explored, to refrain from making use of the maps prepared by their predecessors. The great objection to such work is the amount of time which it requires, if it is to be done thoroughly and accurately. This time is, moreover, the greater since each bibliophile must serve his apprenticeship almost alone, for the bibliographical method has not been taught yet, nor have its rules been laid down. Certainly no one can do such work for himself upon all subjects. A lifetime would be insufficient to thus study the hundredth part of pathology; but we may ask of those who cannot do such work, that at least they shall not disdain those who labor at it. Certainly we do not wish to depreciate either observation or experiment, but we desire that erudition should be honored as it merits, and that bibliographical work should be recognized as of pub-

lic utility. With us to call a man erudite implies rather the idea of narrow specialization and professional inaptitude."

I have quoted thus fully from Professor Verneuil's eulogium as giving the views of a French master upon the state of French professional opinion on this subject. With us I think the feeling is rather one of undue, uncritical admiration of bibliographical matters than of contempt or dislike; but, until quite recently, American physicians had not at their command the means of research in medical literature possessed by their transatlantic brethren, and even now the physicians of large portions of the country find it very difficult to get access to the original material of literary research.

The members of the Medico-Chirurgical Faculty of Maryland, and especially those who reside in Baltimore, are more favorably situated in this respect than their professional brethren elsewhere. Possibly this may be news to some of you, and I had better explain. You are all aware that your society has a library here in Baltimore, a library which contains for the most part only old books, and is practically little used, except by a very few persons, and of which it might, until within the last few years, have been said that its strongest characteristic was its feebleness, being, as a Kentuckian would say, "powerful weak." Recently, however, by the exertions of a few members, and especially through the energy and zeal of your librarian, Dr. Cordell, the collection has been put in order and made accessible, a certain number of current medical journals are regularly received, and other improvements have been effected. Permit me, however, to suggest to you that one of the most important uses to which you can put your library here is to so arrange it that it may be the means of your getting the full benefit of your other collection over in Washington, which you may consider as a sort of branch library of the Faculty. You all know that what is called the Library of the Surgeon-General's Office is a large and valuable one, but probably you have not all fully realized that it is your library, intended for your benefit and use, and that it is not a Bureau Library intended only for the use of officials. Such, however, is the fact, and therefore it comes within the limits of my subject to offer you some suggestions as to how you can best use both of your libraries, and what should be done to maintain and increase their completeness and usefulness.

First, then, your library in Baltimore should be made, and kept, as complete as possible in the local medical history of the city and State. It should contain every medical book, pamphlet, etc., published in or

relating to the State. The great majority of these will cost nothing but watchfulness and prompt application for them at the time of publication, but if they be not then obtained, the acquisition soon becomes difficult. You want every report of a hospital, asylum, or dispensary, every announcement or catalogue of a medical school, every mortality report, order or hand-bill issued by sanitary authorities for the State or city, and, as far as possible, you want to obtain at least two copies of each, one for the Baltimore and one for the Washington branch. It is a matter of interest, also, to keep in the library a scrap-book for local newspaper cuttings of all matters of medical or sanitary interest which should be promptly and systematically inserted. A small scrap-book, properly indexed, to contain newspaper medical advertisements, especially those of the various quacks who infest this, as they do all other large cities, will be found in years to come very interesting, and, it may be, useful.

The limited amount of funds available for increasing your Baltimore collection will naturally be for the most part applied to the purchase of medical journals. The main thing which you have to do is to perfect the system of care and storage of your books, in order that they may be perfectly secure against, let us say, unauthorized borrowing. This is necessary, not only to preserve your own books, but to make it possible for the Washington library to loan freely to the Baltimore library. The Washington collection is a reference, and not a circulating, library. It does not as a rule lend books to individuals, although in the case of modern books, which can be readily replaced, it will do so upon a deposit sufficient to amply cover their value, its rules in this respect being the same as those of the Library of Congress; but it will lend freely to other libraries which are so constructed, located, and managed that the books in them are secure from fire, theft, etc.

Now, suppose that a member of the Faculty desires to prepare a somewhat elaborate article upon some medical subject for a society or journal, and that for this purpose he wishes to compare his own experience and observations with those of others: how is he to proceed? Before attempting to answer this, permit me to suggest one or two things which he should not do. In the first place, he should not as the first step write a note to the Washington librarian, somewhat as follows:

Dear Sir:—I am preparing a paper on fractures and wish to obtain the bibliography of the subject. Can you favor me with a copy of all the references which you have collected upon this head? I shall be happy to pay the expense of the copy.

Very truly yours,

This will no doubt seem to some to be not an unreasonable request, and yet it is one with which it is impossible to comply. The librarian is busy with his current work—cataloguing, printing, furnishing books, etc. He has no clerical force available for making copies, and he cannot employ an unskilled clerk and give him access to his manuscript cards. He cannot himself spare much time to assort and arrange references for these special demands. For a subject which has only half a dozen references he can furnish them, he can verify a quotation, and is glad to furnish information which a brief examination of a few volumes will provide. If the inquirer will visit Washington he can see and examine the reference cards and make such notes as he desires, provided always that this does not interfere with the catalogue work.

In the second place, the man who proposes to write a paper or a book should not as a rule issue a circular informing the world at large of his intention, and calling upon physicians generally to report to him at once all cases which they may have had of the particular disease or injury which he proposes to discuss. I say *as a rule*, for I admit that a certain amount of interesting and useful information may be obtained in this way when it is requested by one who is recognized as having himself already contributed largely to our information on the matter in hand, and who is therefore an authority on the subject who may be well intrusted with the classifying, comparing and judging of the results of the work of others. But when a comparatively unknown man makes such a demand upon the profession at large, his success will probably be small—and properly so. A man should show that he has some money of his own before calling on the public to bank with him.

This is, however, a digression from medical bibliography, which seems to be a subject with regard to which it is extraordinarily difficult to keep to the point. To obtain as much as possible from a library you should bring as much information there as you can, and have it in as clear and definite a form as possible. Note upon a slip of paper the books you wish to see, giving their titles concisely, but clearly, so that the man who is to find the books will not have to waste ten minutes of his time in deciphering your references. Consult the *Index Catalogue* so far as published, the *Index Medicus*, and the bibliographies attached to the articles in the modern French and German encyclopædias, and it will be strange if you can find no titles which will put you on the right road. Remember that the *Index Catalogue* is

not a bibliography. The question is sometimes asked why an attempt, at least, was not made to make it such. Why the comparatively few medical journals, etc., which the library does not contain, could not have been found in other libraries and indexed there, and in like manner the titles of books have been taken from other catalogues and the whole combined into a huge bibliography. It is said "You have got so much, it is a pity you cannot give it all." I shall not detain you with the various reasons why this could not be done with the means and opportunities we had. When the *Index Catalogue* is finished, if Congress will provide the funds necessary for the preparation of a supplement to contain the titles of all medical books and papers which are not in the library, it would no doubt be a very good thing; but, for the present, we must console ourselves with the reflection that when we look down a string of references in the catalogue, we can at all events promptly verify all of them by examining the books; whereas, when we have consulted a bibliography, we have next the very serious task of discovering in what libraries and collections the various books are to be found, and we are nearly sure to be made unhappy by being unable to discover some of them anywhere. The fact that those which we cannot find are probably worthless is small consolation, for we want to determine that fact for ourselves. My experience is, that by the time one has examined all the books on a particular subject, to which references are given in the *Index Catalogue*, and has followed out the various clues given in these books to others not indexed but which are in the collection, he is usually rather pleased than otherwise that he knows of no more references and therefore does not feel bound to consult them. A large number indeed of those who use the library select only the most recent literature relating to the subject of their studies, and, so long as they can get this, care little or nothing for the historical side of the matter. Perhaps I may some day have occasion to write about the uses and abuses of the *Index Catalogue*, in which case the main point I shall insist on is that it is a tool which must be used for a time before you can judge of its merits. It is by no means a perfect work, and although as yet I have only discovered, or had pointed out, some half dozen errors which are specially discreditable as indications of ignorance on the part of its compiler, I am nevertheless quite sure there must be a number of others, and I hope those who discover them will point them out to me, although I cannot truly say that I shall be happy to receive this information.

Having prepared the list of references to be consulted, which it

will be found most convenient to arrange on card slips of uniform size—that of an ordinary postal card is very good—the next thing is to get the books. It is best to go to Washington and visit the library in person, when this is possible. If the list of the books which it is desired to consult be sent to the librarian so that he can have it the day before the visit, some time and confusion will be avoided, and the visitor will find the books which he desires to see laid out ready for his examination. If, however, it is impossible to visit Washington, the inquirer had best get some library which has the means of safely caring for the books, and will be responsible in case of loss or damage, to borrow the books for him through its librarian, the borrower of course paying the expense of transportation. Now, in order that the library of the Faculty may be able to borrow freely from your Washington branch, it must be so managed and arranged that the books in it will be perfectly secure against loss. At present this is not the case, and one of your first cares should be to improve matters in this respect. Until this is done books can only be obtained freely from the Library of the Surgeon-General's Office by the Library of the Peabody Institute, or that of the Johns Hopkins University.

Permit me next to call your attention to the fact that it is a part of your duty to see that your Washington library is made and kept as complete as possible. In the first place it should have every new medical book, journal, report, or thesis, in every language, as soon as possible after its publication. You ought to be certain of finding in this, our National medical collection, the latest literature upon any subject connected with medicine, and everything noted in the *Index Medicus* should be upon its shelves. Now, to effect this would require an appropriation of from seven to eight thousand dollars a year. The journals and transactions relating to medicine and the allied sciences will alone cost about \$2500 per annum. In the second place, the deficiencies in the library should be gradually supplied as opportunity offers. The amount and character of these deficiencies are matters of some interest. In order to obtain some data on this point I have compared the catalogue of the Washington library with those of the two largest collections of books in existence, viz. the British Museum of London, and the Bibliothèque Nationale of Paris. Taking the fasciculi of the catalogue printed by the British Museum in 1881-82, I find that on 1140 pages, containing about 34,000 titles exclusive of cross references, there are the titles of 657 books and 880 inaugural theses relating to medicine. Comparing these with the cor-

Table giving results of a comparison of 1140 pages of the British Museum Catalogue in the letters A and O, with the corresponding pages of the Index Catalogue of the Library of the Surgeon-General's Office, U. S. Army, Washington, D. C.

	UNITED STATES.			ENGLAND.			FRANCE.			GERMANY.			ITALY.			SPAIN.			OTHERS.			TOTAL.		
	Both.	Surgeon General's Office only.	British Museum only.	Both.	Surgeon General's Office only.	British Museum only.	Both.	Surgeon General's Office only.	British Museum only.	Both.	Surgeon General's Office only.	British Museum only.	Both.	Surgeon General's Office only.	British Museum only.	Both.	Surgeon General's Office only.	British Museum only.	Both.	Surgeon General's Office only.	British Museum only.			
Books—Prior to 1600.....																								
1600-1799	13	63	3	20	8	17	3	10	3	5	3	12	7	5	14	1	1	1	1	1	16	8	34	
1800-date				80	41	64		32	4	29	9	16	6	2	12	6	2	4	2	2	4	66	25	62
Editions not in Library but of } which it has the book. }	13	32	4		30	71		8	9	57	52	43	3	14	7	1	3	4	1	8	192	252	166	
Total Books.....	13	95	7	100	79	152	45	69	63	91	76	85	16	24	45	1	5	9	8	25	19	277	373	380
THESES.																								
Prior to 1600	1	1	1	6	18	1	3	1	21	89	60	4							5	11	2	104	91	4
1600-1799	1	4	1	3	14	2	412	69	223	39	177	76			9				47	16	6	404	251	116
1800-date.....																								252
Total Theses.....	2	5	1	9	32	3	415	70	244	128	237	91			9				5	58	24	508	342	372

NOTE.—Periodicals, Transactions and Reports of Medical Institutions excluded.

Table showing results of comparison of the medical section of the Catalogue of the Bibliothèque Nationale, Paris, with the Index Catalogue of the Library of the Surgeon-General's Office, U. S. Army, for the subjects "Anatomy," "Fevers," "Eye diseases," and "Cholera."

	UNITED STATES.			ENGLAND.			FRANCE.			GERMANY.			ITALY.			SPAIN.			OTHERS.			TOTAL.		
	Both.	Surgeon Generals' Office only.	Paris Catalogue only.	Both.	Surgeon Generals' Office only.	Paris Catalogue only.	Both.	Surgeon Generals' Office only.	Paris Catalogue only.	Both.	Surgeon Generals' Office only.	Paris Catalogue only.	Both.	Surgeon Generals' Office only.	Paris Catalogue only.	Both.	Surgeon Generals' Office only.	Paris Catalogue only.	Both.	Surgeon Generals' Office only.	Paris Catalogue only.			
ANATOMY, FEVERS AND EYE DISEASES.																								
Prior to 1600.....		1		5	3	17	7	2	2	17	10	24			4	6	11	36	23	58				
1600-1799.....				21	13	65	13	31	30	10	7	16		1	5	27	23	27	90	116	156			
1800-date	1	46		41	8	60	17	62	6	7	9	5		4	2	2	18	13	73	192	88			
Different Editions.....		7	1	11	11	91		18	27		2	21		3	1		20	26		85	181			
Total.....	1	54	1	67	35	233	37	113	65	34	28	66	1	8	12	35	67	77	199	416	483			
CHOLERA	2	85		142	79	219	17	272	5	10	64	39		4		5	111	7	194	745	272			
Grand total.....	3	139	1	209	114	452	54	385	70	44	92	105	1	12	12	40	178	84	393	1161	755			

NOTE.—Theses and reprints excluded.

responding portions of the Washington catalogue it is found that the British Museum has 262 medical books, 372 medical theses and 118 different editions which are not in the Surgeon-General's Library. On the other hand the Surgeon-General's Library has 285 books, 342 theses and 88 different editions which are not in the British Museum. There are common to both libraries 277 books and 508 theses. The two libraries therefore appear to be nearly equal as regards medical books. This is exclusive of medical journals, transactions and reports, in which the Washington library is much the richer. The tables, pages 17 and 18, show in detail, by countries and periods, the difference between the two collections as regards medical books.

The catalogue of the medical section of the Bibliothèque Nationale in Paris is arranged by subjects and not by authors, does not include inaugural theses or dissertations, and was published in 1857-73; hence it is not possible to make an exact comparison between it and the *Index Catalogue* or that of the British Museum. But taking the general subjects, anatomy, fevers, diseases of the eye, and cholera, I have prepared a table showing the results of a comparison of the two catalogues, from which it appears that in the first three subjects named 199 books are common to both, 416 are in the Washington collection only, and 483 in the Paris collection only. On the subject of cholera (excluding treatment) 194 books are common to both, 745 are in the Washington library only, and 272 in the Paris library only. The books which the Paris library has, and our own library has not, are for the most part old books dating before 1800, or French books which have come to the library under the law which requires one copy of every publication to be deposited there. This law is not strictly obeyed, for we have in our library 79 French works on cholera which are not in the Paris catalogue, but it is due to this law that the medical section of the National library of France is essentially French and not cosmopolitan.

As the result of these comparisons I think it is safe to conclude that the Library of the Surgeon-General's Office in Washington not only contains more medical literature than the British Museum or the National library of France, but that it covers a wider field, represents better the medical literature of the whole world, and is decidedly a better practical reference and working collection for medical purposes than either of the great libraries referred to. Each library is, as might be expected, richest in the literature of its own country; but the French library is comparatively poor in English and German

medical books, and has almost nothing in American medical literature, while the English library is also poor in American literature, and comparatively weak in German medicine of the present century. Both of them are rich in the literature of the fifteenth and sixteenth centuries, and have many editions of older works of which the Washington library has only one or two. Both of them have been in existence for over three hundred years, and have had almost unlimited funds for the purchase of books. Why then is it that they do not contain all medical books which have ever been printed; and that your medical library in Washington, which is only about twenty years old and has never had in any one year funds sufficient to purchase more than two-thirds of the medical books printed in various parts of the world during that same year, should already be equal if not superior to them in practical value? It appears to me that it is very largely due to the fact that while the Washington library is the National collection, it has been kept separate from the general National library. The result of this has been that the medical profession has taken much more interest in it than they would do if, as is the case with the English and French medical collections, it became merely a section of the National library.

As a matter of fact, comparatively little use is made by medical writers of the collection in the British Museum or the Bibliothèque Nationale. They consult, in preference, the special medical libraries in London and Paris, which are under the direction of medical bibliographers, such as the libraries of the Royal College of Surgeons, or of the Royal Medical and Chirurgical Society, or those of the Faculty of Medicine, or of the Academy of Medicine, of Paris. It is to such special libraries that physicians give their books and pamphlets; and the rapid growth of the Washington library is largely due to this cause. There is pouring into it a steady stream of literature the sources of which are by no means confined to this country, although, of course, the largest part comes from the United States. Those who incline to pessimistic views of human nature, and to attribute all the actions of men to selfish motives, would not find their views confirmed by my experience. I could name a number of gentlemen who take almost as much interest in the library as if it were their own, and who are constantly on the lookout to supply its deficiencies. Now, so long as the library can preserve and extend this feeling of interest in its completeness, so long it is sure to grow in value and usefulness, but if it be merged into a gen-

eral National library this interest will rapidly diminish. It is not to be expected that the manager of a large miscellaneous library, if well fitted for his position by a knowledge of general literature, should also be familiar with the various departments of scientific literature; as the modern Greeks say, "two watermelons cannot be carried under one arm," and no subordinate or assistant will have the same stimulus to do good work that the man who is responsible in the eyes of the public will have. I think therefore that you will do well to see that a proper and commodious fire-proof building is provided for your Washington collection, that it is not merged into the Congressional Library, and that it is granted sufficient funds to enable it to secure all new medical books as they are published, and gradually to collect the best of the older literature.

It is supposed by some that this library receives a copy of every medical book published in the United States. This is not the case. Under the copyright law, two copies of every copyrighted medical book are deposited in the Library of Congress, but no copy comes to the Library of the Surgeon-General's Office. It seems to me that the law should be so amended as to make our library the place of deposit for one of the copyright copies, and this is a matter to which I invite your attention.

It may perhaps seem to some of you that this Washington library of yours is not after all such an important matter as I make it out to be, and it must be confessed that I am not an impartial judge; nevertheless it does seem to me that the making and keeping this library complete is one of the most valuable means of advancing medical science in this country which at present is within our grasp, and that it is within our grasp if the medical profession of the country choose to exert their influence for the purpose.

It is also well to remember that the opportunity which is now presented for placing this matter on a proper and permanent basis will not occur again. There are not two springs in the year, nor in the life of a nation, and if the spring work is not done in time the fruits of summer and autumn will be correspondingly deficient.

It is true that the successful practitioner is rarely a book-worm, but it is also true that "improvements are made by those who know well the old methods." The toast of the Pure Mathematical Society of England as given by Sir James Paget, namely, "Prosperity to pure mathematics, may it never be of use to any man," is one with which I have no special sympathy, but in so far as it is a plea for amusement, and for

mental exercise without reference to pecuniary results, it applies to bibliomania as well. I like to see on the doctor's shelves a little group of books such as Sprengel's or Daremberg's or Haeser's Histories of Medicine, the letters of Guy Patin, the Medical Portrait Gallery of Pettigrew, the works of John Brown of Edinburgh, or a collection of pamphlets relating to local medical history; and it certainly does not cause a lower estimate of his ability as a practical physician and surgeon to know that he reads something else beside manuals and text-books.

I like the quaint, old-timy name which the physicians of this State have preserved for their society, "The Medical and Chirurgical Faculty of Maryland." Do you know why for the last three hundred years and more physicians have been known as *the* Faculty? All universities, properly so called, have other faculties—Faculties of Arts, of Law, of Theology; but by the world at large, when one speaks of "the Faculty," he is understood as referring only to the medical profession. You will remember that in the old University of Paris, where this special meaning of the term originated, those who graduated as doctors graduated also as teachers; in other words, the Faculty of Medicine in Paris was composed of all the graduated doctors of medicine of the University. Now, as Dr. Raynaud points out in his admirable little book, "Les médecins au temps de Molière" (which should be added to the list of books above mentioned), the other Faculties of the University were composed purely and simply of learned men, whose sole object and work was to teach. "The physicians, on the contrary, formed both a corps for instruction and a body exercising a liberal profession of which they had the monopoly, a profession lucrative and honored, accessible as a rule only to the upper middle class and brought into continual relations with the public." It was therefore the Faculty whose affairs were of the most interest to the world at large, and it is for this reason, according to Raynaud, that in the world of Paris and France it became known as *the* Faculty.

As the Faculty of Maryland has preserved the name, let it also preserve the best of the traditions, such as for example that the doctor should be what his name implies, an educated gentleman. It is to be hoped that the scheme of higher medical education which your University is about to organize will include instruction in bibliographical and historical methods as well as in those of the laboratory and clinic. If this be done, your Washington library will become a very

important aid to the University, and your Baltimore collection will also be more used and require more looking after.

I have occupied more time than I had intended, and yet I have said very little of what I had in my mind to say when I prepared that memorandum which was mentioned at the commencement of this address. I shall be quite satisfied, however, if I can arouse some interest in providing proper means for good medico-bibliographical work for the direct benefit of our teachers and writers, and through them for the benefit of every one, not only in this country, but in the whole world; and if the result shall prove to be that "Our University" and "Our Library" have been both helpful to and helped by "Our Medical and Chirurgical Faculty of Maryland."





