

Dermatology in America : being the president's address before the first meeting of the American Dermatological Association, at Niagara Falls, New York, September 4, 1877 / by James C. White.

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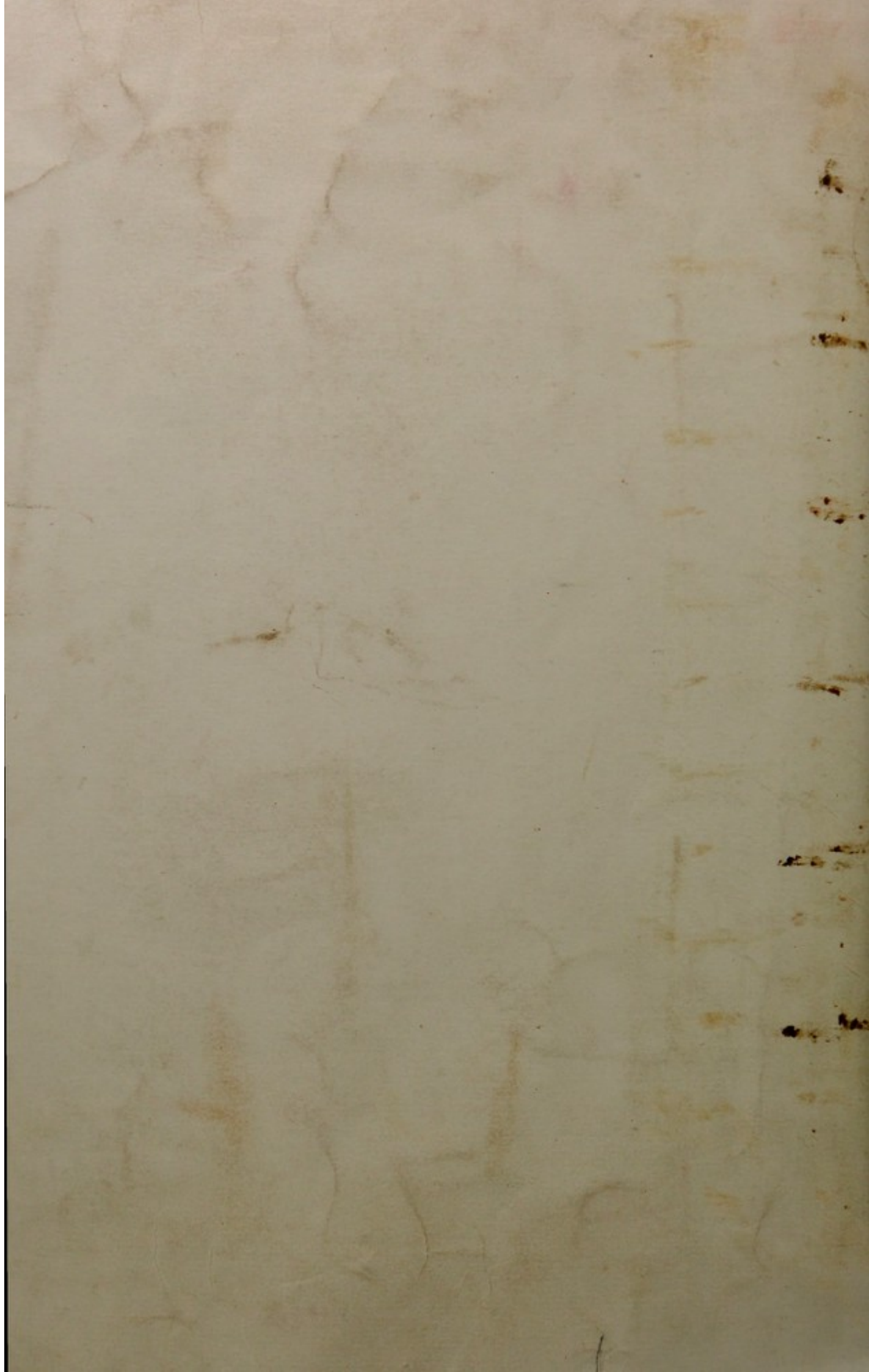
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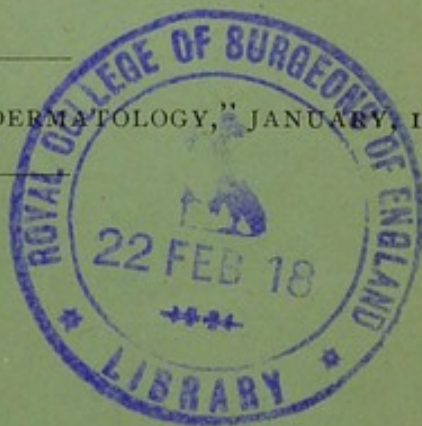
DERMATOLOGY IN AMERICA

BEING THE PRESIDENT'S ADDRESS BEFORE THE FIRST MEETING OF
THE AMERICAN DERMATOLOGICAL ASSOCIATION, AT
NIAGARA FALLS, NEW YORK, SEPTEMBER 4, 1877

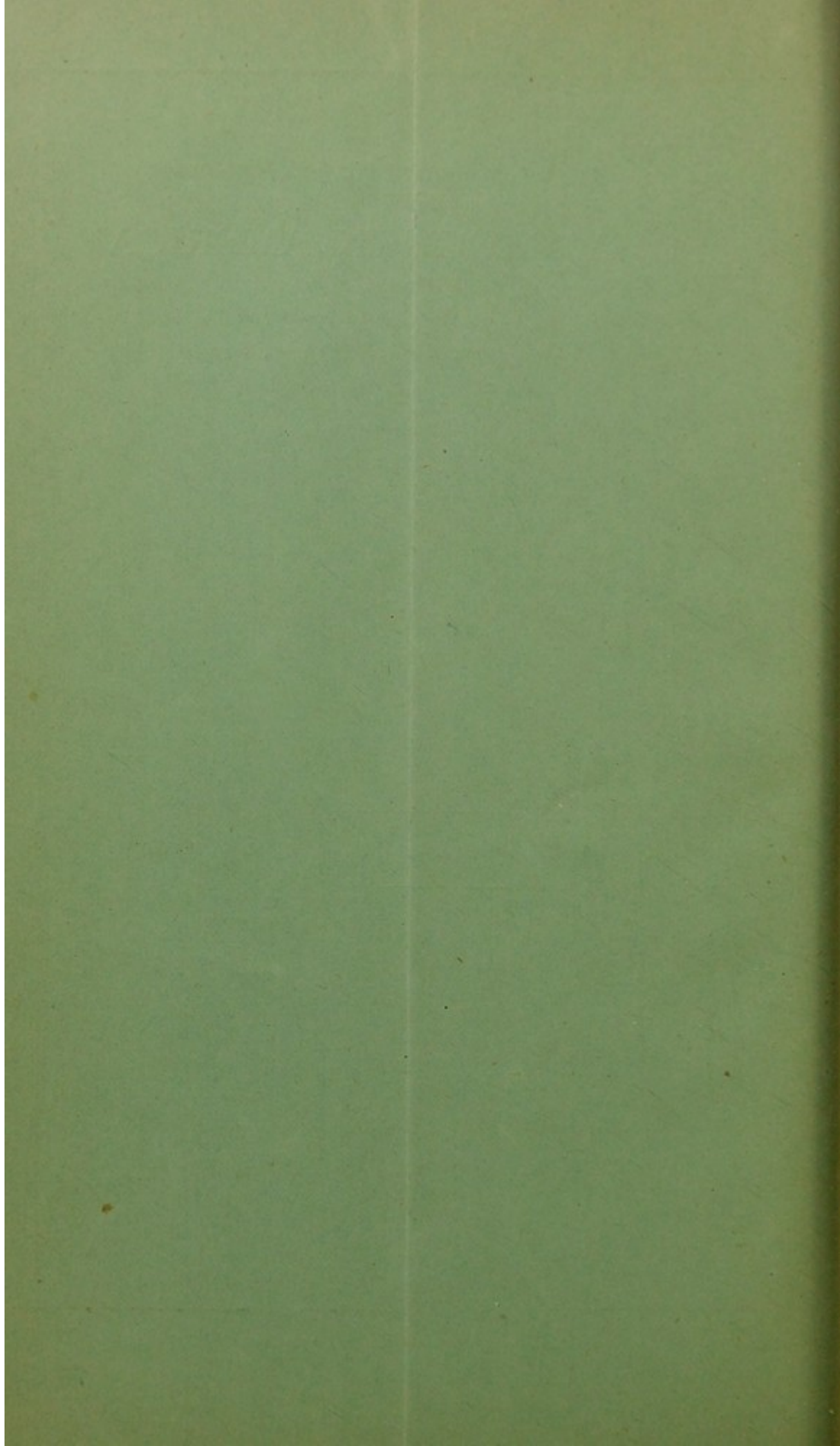
BY

JAMES C. WHITE, M.D.

REPRINTED FROM THE "ARCHIVES OF DERMATOLOGY," JANUARY, 1878



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1878



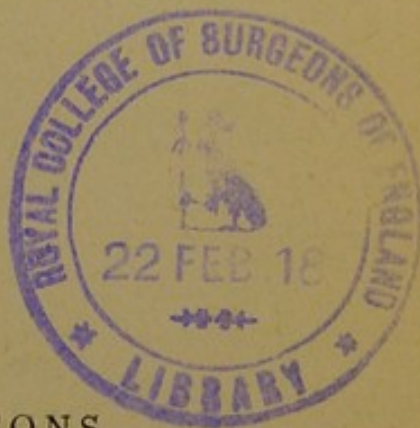
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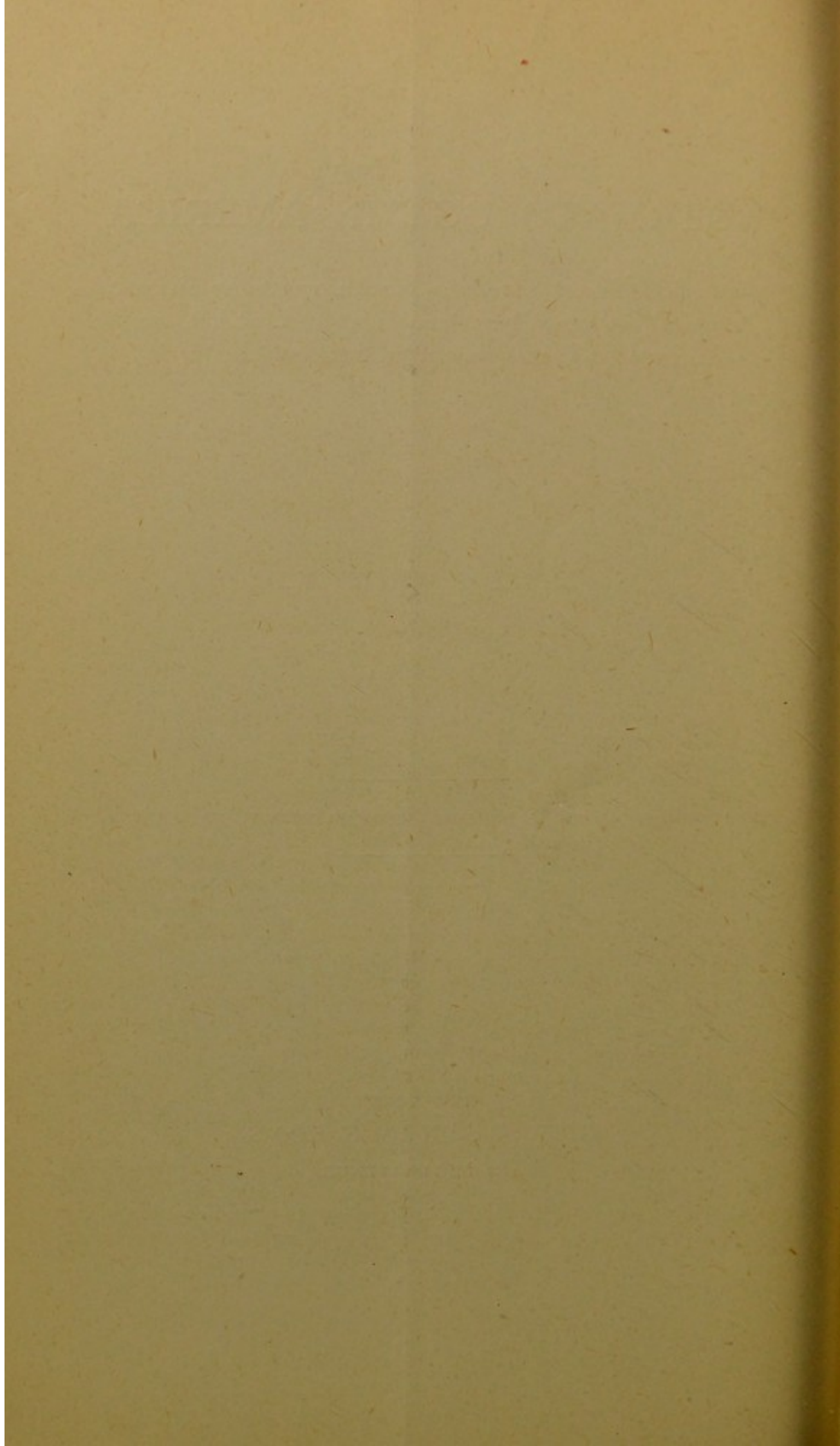
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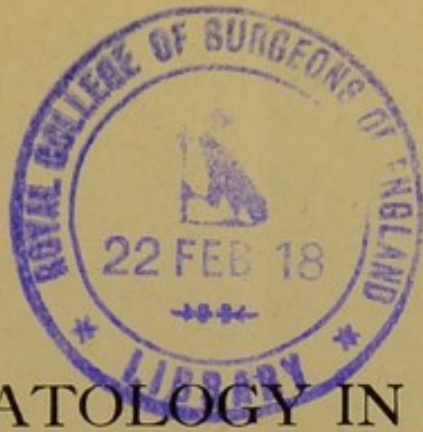
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DERMATOLOGY IN AMERICA.

PRESIDENT'S ADDRESS

DELIVERED AT THE FIRST ANNUAL MEETING OF THE
AMERICAN DERMATOLOGICAL ASSOCIATION
AT NIAGARA, SEPTEMBER, 4TH, 1877.

GENTLEMEN :

After a brief meeting for organization at Philadelphia last summer, we assemble now for the first time prepared to present to each other our views in relation to the general interests of dermatology, to report and discuss the results of our special studies, and to form that more intimate personal acquaintanceship amongst ourselves, dermatologists of a wide country, which is so essential to mutual support and understanding. This meeting marks an important era in American dermatology—that of its fully recognized, independent position.

Let me briefly sketch the changes in its history within my personal experience during the last quarter century. So long ago it was I began the study of medicine in a school which, I may fairly say, has always been the first to recognize the ever progressive needs of medical education in general, as she was the first to establish an independent department of dermatology. At that time there was no special instruction given in this branch, either clinical, by text book, or lecture. All mention of the subject was of the briefest sort, as a matter of small consequence and little understood; and the occasional case seen in the clinical wards of the hospital was looked at more as an object of curiosity than of intelligent study. But a single English book on dermat-

ology was known to the student, one from its complex and cumbersome nomenclature, and its ever changing systems of classification, adapted only to impress him with the unconquerable difficulties of the study. Of the names of the older masters of the subject in France he had possibly heard mentioned, but nothing of their doctrines, and the modern German school, even then well started on the course which has carried it steadily onward to its present exalted position, was literally unknown. After three full years of constant attendance at school and hospital the student was graduated doctor of medicine, with the slightest acquaintance with the names of skin diseases, with no knowledge of the doctrines and principles of dermatology, and wholly ignorant of practical diagnosis and therapeutics. Yet this was no exception to the general plan of medical education in all our schools at that time ; indeed, in nearly all others, the only organized instruction given during the year was comprised in four crowded months of lectures. Nowhere were there any special instructors,* nowhere in the hospitals, even of our largest cities any special departments for the study and treatment of skin diseases, without which the former were well-nigh useless. The student of twenty-five years ago then, it may be truly said, knew almost nothing of dermatology when he became a physician.

And the profession which he joined : What was its state of knowledge in this respect ? On the whole but little better. In the large cities there were not wanting those who had had in French hospitals abundant means of making themselves acquainted with the appearances of skin diseases, and had studied them as a part of their general education ; there were even a few who were recognized as possessing an exceptional knowledge of them, and who made of them a special and even exclusive field of practice, but their knowledge was not availed of by the schools for purposes of instruction, nor by their professional brethren to any great extent in consultation. The great body of the profession had but a limited diagnostic acquaintance with cutaneous disease in its most common phases, and practiced a thoroughly routine and bald system of treatment. Of its pathology they knew nothing, but in its place cherished the crudest dogmas of unsupported medical opinion and popular prejudice. Of its literature they may be said to have known nothing beyond the works of Willan and Wilson. In such a state of knowledge but little was of course to be expected in the way of authorship ; and in fact articles in the journals upon diseases of the skin, by those competent in any degree to discuss them, were very restricted in their scope and of rare occurrence. This brief and not flattering sketch of the state of dermatology amongst us only twenty years ago, although drawn from a necessarily limited field of observation, may, I think, be

* I learn through Dr. L. D. BULKLEY, that his father, lately deceased, delivered several courses of lectures on dermatology, between the years 1837-1854. at the schools of medicine in New York City.

fairly assumed to represent the whole extent of our country. What progress have we made since then ?

At that time a few students after graduating at home began to find their way to the great Vienna school of medicine, then at the very height, not of its fame, but of its excellence ; when its eminent teachers were still active, indefatigable even, in teaching. There they found a 'man teaching skin diseases as they had never been taught before, with unlimited means of clinical illustration, with the keenest eye for observation, with an unbounded amount of information drawn from many years of experience, with a self-restraint which no desire for premature fame could tempt into hasty publication, and with a sound and logical mind,' the chief of the German school of dermatology—PROF. HEBRA. Under his personal tuition they were taught to study diseases of the skin by the simple methods of observation which the naturalist employs upon objects of nature, and independently of artificial keys and systems of classifications. That they had so little to unlearn fitted them the better for the instruction they received. What they learned was : that skin diseases are like other diseases ; that the cutaneous tissues are under the same laws of pathology as those of all other structures of the economy ; that they are as free and independent in the exercise of these laws as the other organs of the body ; that is, that their affections are as much local disturbances and unconnected with circulating fluids, organic functions, or intangible, theoretical vices as those of the latter ; that the structural changes by which they are manifested, often temporary stages of progressive development, are no proper basis for the establishment of individual diseases ; and that their successful management is based on the comparative results of all methods of treatment, empirical even it may be, conducted in a careful and impartial manner in extensive series of cases.

In the French capital of medicine they found abundant material for study, and teachers of ability, but a poor, because artificial, school of dermatology ; elsewhere in Europe only a few isolated observers of merit in limited fields of research.

When they returned from these studies abroad they first fully comprehended that deplorable condition of dermatology at home which it became their duty to correct. But the means to accomplish this they had to create : a more general interest in the subject on the part of the profession, and opportunities through the established schools and clinics to instruct students ; and progress in these labors was naturally very slow. By their writings and otherwise, they endeavored to establish the simple and scientific teachings of their master in place of the artificial and false theories so generally entertained here, and succeeded in gradually convincing a few of those most interested in the advancement of medical education of the importance of giving the student some instruction in skin diseases. The teaching was at first hardly recognized by the school, smuggled in, as it were, in some in-

stances under the protection of some professor ; then occasional short courses of special lectures were officially instituted ; later the title of summer or regular instructor was established ; and at last, professorships of dermatology were founded. The opportunities for clinical teaching were none the less slow in their creation. At first public dispensaries furnished some material for study mixed with a vast amount of general disease, but later, special out-patient departments for skin diseases were established in connection with these and the hospitals of the larger cities, and private dispensaries for their exclusive treatment were opened. All these furnish a large supply of cases which are at the service of the special instructors in the medical schools, but they are by no means sufficient for the full requirements of clinical instruction. They afford a vast amount of material from which a good selection for the proper illustration of the more common affections may be made, by which the student may acquire a ready knowledge of diagnosis and some acquaintance with methods of treatment. Used in direct connection with a complete course on dermatology, even such material is of great advantage ; but over it the instructor has at all times but slight control, and for the means of illustrating any lecture, in or out of course, he is wholly at the mercy of so uncertain an element as the weather. Under the most favorable circumstances, however, he is never able to keep his patients under that constant observation, which is necessary to teach the student the relations between the ever varying forms of efflorescences, and the different stages of multi-form diseases, or to properly study the therapeutics of dermatology by regulating the use and observing the immediate action of the remedies advised ; while the treatment in dispensary practice of some of the most serious affections is an impossibility.

With the gradual development of such opportunities for instruction under their persistent efforts in the various centres of medical education, and the acquisition from time to time of co-laborers animated with the same spirit, the present school of American dermatologists has brought its specialty from such beginning up to its present independent condition. With its growth they, too, have grown. Coming home from their pupilage overfilled, perhaps, with the personal views of their foreign masters, shining by a reflected light mainly at first, which was none the less valuable to make conspicuous the apathy which prevailed at home, they had yet to learn to digest the doctrines of others by the aid of personal observation, to reject what more mature judgment showed to be unsubstantiated, to retain what their own widening experience proved to be true. Even as lately as April, 1871, in a review of "the progress of modern dermatology," I felt obliged to write as follows,—'Can we wonder, then, that America has as yet contributed little to dermatology, if our views concerning qualifications for authorship are correct ; that it would be better if no man were allowed to write another book upon skin diseases, ex-

cept he had something to communicate new or better than what has already been said by others. This special fitness can be attained only by him who has had large and long continued opportunities for observing all the diseases about which he writes, who is thoroughly acquainted with recent advances in pathology, general and special, who is familiar with the opinions of other observers of all times and countries, and is able by the test of a wide experience to select the false from the true, so that error shall be no longer perpetuated. We have no work then to take its place as the representative of an American school. We have no book on general cutaneous medicine which is the work of a large observer, no monographs containing the researches of skilled and specially trained workers. We trust, however, before long, to be able to welcome the beginning of a national literature of the right kind. Many young men have returned during the last few years, trained by study and observation under the best instructors in this department in other countries, and eager for work, who, if faithful to the methods acquired there and to the spirit of their teachers, will as opportunity and experience are afforded them, bring forth independent and reliable results worthy of their masters and honorable to our country. But observation and work must precede; and we cannot look for a national literature or school of dermatology until our dermatologists are made.'

I repeat these remarks for the purpose of showing how the promise they contained has been already in part satisfactorily fulfilled; how the earlier period of quiet work and observation has already ripened into a fruitful fertility. Well organized instruction in dermatology is now given by special teachers in most of the important medical schools of the country, and students have at least the opportunity of gaining a thorough and practical knowledge of skin diseases. Post-graduate courses and private instruction afford facilities of studying to the general practitioner even, almost as favorable as may be obtained abroad. The establishment of a special *Journal of Dermatology* under the successful management of our secretary with the assistance of sixteen collaborators in many parts of the country, has furnished such a channel of expression, and developed the preparation of original articles of such character as any nation might be proud to possess. It has also disseminated for the benefit of the profession at large, brief but full reports of the progress of dermatology in all parts of the world. Many other Journals also have shown how active in labor and accomplished are our members all over our wide country. I took the liberty, in view of the preparation of this address, of soliciting from all the physicians in the United States, known to me as especially interested in dermatology, a list of their writings upon subjects connected with dermatology, and I am happy here to acknowledge the universal promptness and courtesy with which the request was answered. The results of this enquiry, which will be of service in the preparation of a bibli-

ography for the Association, will be found appended to this address.*

Among these many and valuable contributions to the literature of dermatology in our country, which include digests and reports of the progress in our department; expositions of the views of eminent dermatologists; translations of important articles by workers in other countries; reviews of authors; analyses of cases occurring in hospital, dispensary, and private practice; exhaustive communications upon rare forms of disease; more or less popular treatises on those of the most common occurrence; papers on the anatomy, nomenclature, classification, etiology, and therapeutics of cutaneous affections; reprints and translations of European writers; and original monographs of unsurpassed merit; we may congratulate ourselves that we have at last, also, most praiseworthy and complete works on general dermatology, and an excellent illustrated atlas by members of this association.

In the largest of our cities a society of the resident dermatologists for the purpose of mutual improvement has been in active operation for several years. The presentation of rare and doubtful cases and of valuable papers at its meetings with their consequent discussions, and the publication of its proceedings, have done much to advance the interests of our department among themselves and their less favored brethren elsewhere. Its success has conduced largely without doubt to the establishment of this, our national association. The want of some common meeting-ground for the dermatologists of all parts of our country has long been felt, and the call put forth at the session of the American Medical Association last year, by some of our most active members, for a meeting of organization at the International Medical Congress, at Philadelphia, last summer, met with general and cordial response. The character of the papers presented, and the interest shown in the discussions at the section of dermatology of the congress, was a most happy augury of the future success of the undertaking. Thus was our association founded, and we are now met as a body for the first time to test and strengthen the objects of its foundation. These objects, as they suggest themselves to your president are:

First. A more intimate personal acquaintanceship amongst American dermatologists. The little differences of opinion, personal jealousies, and even malicious criticisms, which are so apt to occur among physicians to the detriment of science, arise largely from mutual misunderstanding, and would be far less prevalent if the parties knew each other better. It is easier to express a harsh or ill-considered opinion of another, or of his works, if we do not know him, and do not take himself as an element, also to be considered in the formation of our judgment. There must be always differences of opinion amongst ourselves,

*See page 14.

differences arising from the natural and unavoidable constitution of individual minds, from the warping pressure of early and later education, from the various standpoints of our observation ; opinions which we are bound to respect as a part of the personality of colleagues, although legitimate matters of fair and open criticism, differences which we should try to reconcile in a common field of debate.

Second. Just such a meeting-ground for discussion is amongst our greatest needs. It is very evident not only to ourselves but to the profession at large, to our pupils, and even to our patients, that we, to whom they look for council, instruction, and assistance, do not agree upon many important questions relating to the nature and treatment of skin diseases. Some of us would refer the causation of nearly all these affections to chemical changes in the blood, others to disturbances in the functions of this or that organ, some to constitutional vices of mysterious character, others would make them a part of well known general diseases, some would explain their occurrence by external morbid agencies, others claim for them a local and more independent origin. So, too, in relation to treatment, some direct their efforts against the various general or special vices of the economy to which they attribute their existence, others to the secondary correction of any general disturbances which co-exist, but primarily to the restoration by local remedies of visible tissue changes. The student may hear in the various schools of our country, even in those of the same city, fundamental doctrines in dermatology as widely unlike as their respective origins are separated by century and country. Now until we can fully and freely discuss these and other differences of opinion in the presence of one another, can hear and fairly consider the data upon which those who hold such opinions rest, and are prepared to defend them, they will persist and multiply. Such differences of medical opinion, moreover, can be discussed, or possibly settled, only by those of extensive and mature experience. Questions of this nature cannot be decided by debate or vote in a large assembly of general practitioners, or in a special section of the same, when the only qualification of membership is the self-election of each individual to take part in its proceedings.* It is for this reason that we would have this association, if it is to fulfill its highest mission, consist only of those who have already by education and experience proved themselves capable to discuss in a judicial way special questions of this character ; it should be held as a place of aspiration for those who take as yet but a partial interest, or have not done independent work in our department. By such mutual comparison of opposing opinions, in a spirit of earnest desire for the truth alone, with generous forbearance towards each other's errors, we may in time work out a common ground-work of belief and practice, which

* Vide Transactions of International Med. Congress, at Philadelphia, 1876.

shall become the basis of a truly national school of dermatology.

Third. Another and most important object of the association should be the study of skin diseases as they occur upon this continent. Opinions have been expressed that marked variations from the European type in respect to comparative prevalence, reaction under treatment, and other features exist, and that they differ even amongst ourselves according to the point of observation. The wide ranges of diversity in climate, physical geography, modes of life, and nationality, which our broad continent presents, affords a most favorable field for such studies. A paper upon this subject containing results drawn from a comparison of as extensive series of cases of skin disease at home and abroad as could be collated from the most reliable observers, was presented to the International Medical Congress at Philadelphia.* The home statistics were necessarily drawn from a restricted district, the great metropolitan cities of our Atlantic seaboard, and the conclusions warranted are accordingly diminished in value to a corresponding degree. They are of value, however, as the beginning of systematic work in this direction. As the number of special and competent observers increases, and shall be found to occupy more distant fields of study, we shall in time be able to collect some data as will enable us to determine in more definite form this interesting question of variation. In the meantime, the communications which each member shall feel it his duty to present at our annual meetings, will naturally contain in great part the results of their observation of diseases remarkable for variety and for deviation from the accepted standard, or of these affections as they occur *en masse* in the large clinics of our great cities. It is none the less important that each one of us should keep a record of all cases of skin diseases in all parts of the country, however few they may be, that we may have a reliable and comprehensive census in process of formation. It might be well to establish a standing committee of the association, to which the collection of such data should be entrusted. In this division of our work will be included the consideration of questions which may become matters of national importance. Leprosy has been hovering about our borders for many years, has been introduced into the very heart of our country by the importation of stock from a people prone to the disease, has been, according to reliable report, prevailing to a limited degree within a restricted locality of our Southern States; all for many years; and yet we have seen no reason to fear that it would gain a serious hold upon us. We have regarded it as a disease so far removed from us by time or geographical position, that it did not concern us especially. But the history of its terrible progress in the Hawaiian Islands within the past few years, the growing intimacy of communication between them and us, and the immigration in enormous numbers

*See Transactions, published, 1877.

to the Pacific coast of a race with whom it is indigenous, make the establishment of a foothold of the disease upon our soil by no means improbable. The question of its possible contagiousness, lately revived by competent observers, and of its most effective management, as a part of state or international medicine, may demand before long our special attention. Certainly its immediate condition within our borders should be the subject of careful investigation.

Fourth. The establishment of a uniform and simple system of nomenclature is an important object of this society. Of the miserable confusion which now prevails in this respect, all the world over among dermatologists, there can be of course but one opinion. We lack even yet a common language of expression. Those of us who are engaged in teaching especially, feel the necessity of a reform, and I know of no better body or more practical means to accomplish it than this society. Let a competent committee prepare a plan, which in simplicity and comprehensiveness shall seem to them best adapted to meet the requirements of writer, teacher, and practitioner; let us after due deliberation and discussion adopt it as the official and fixed code of the American Dermatological Association, which we also individually agree to conform to under all circumstances, and we should soon see it universally employed by the profession in this country at least, I doubt not. As an exhaustive table of synonymy, and a key of interpretation which it would also constitute, it would be a most valuable contribution to the literature of dermatology. Without some such concerted and official effort, we shall never be rid of this great stumbling block to progress, which a veritable lode-stone, is built up largely of the repeated attempts which individuals have made to remove it. Let me commend this project to your immediate attention.

Fifth. Lastly, another high object of the association is to foster the general interests of dermatology in all its relations to the profession and the public. First, in connection with medical education. We should endeavor to create an influence which should secure instruction in our department by thoroughly competent men in all our schools of medicine, by men, where they can be obtained, whose whole study and practice are devoted to it. Fortunately but little remains to be done in this particular. The schools have been the first to recognize the claim of dermatology in this regard, and to furnish their students with the best opportunities of study at their command. Whereas hardly ten years ago, we had not a single officially recognized representative among the great body of medical instructors in the United States; we now have:

Professors, 4; Clinical Professors, 5; Instructors, 1; Lecturers, 6; Total, 16.

PROFESSORSHIPS: Vermont, Bellevue, Chicago, Harvard.

CLINICAL PROFESSORSHIPS: University of City of New York; College of Physicians and Surgeons; Long Island Hospital-College; University of Pennsylvania; Women's College of N. Y. Infirmary.

LECTURERS : Missouri Medical College; Detroit Medical College; University of Louisville ; Baltimore College of Physicians and Surgeons ; Medical College of Ohio ; Albany.

INSTRUCTORS : Jefferson Medical College.

The chief obstacle to more complete instruction now is the want of proper means of clinical illustration, which leads up to the question of our relations to hospital management. We have already in our largest cities well established and supplied out-patient clinics, which furnish abundant material for exhibition specimens of the more common affections, but, as already stated, wholly insufficient to fulfill some of the most important purposes of clinical teaching. What we need is the foundation of separate hospitals, or better, the establishment of special departments or wards in those already well organized and endowed, for the study and treatment of skin diseases. As now managed nearly everywhere amongst us, these institutions refuse to a large class of sick persons the benefit of hospital residence either wholly, or offer them, if received, not, we may fairly say, the best medical skill it is in their power to procure. There is no class of affections, moreover, which gives rise to more bodily suffering or causes more mental distress through the personal disfigurement they occasion, none which more especially demands the daily attention of the skilled specialist to meet the ever fluctuating changes they so often present, and to superintend the treatment which cannot be properly administered elsewhere. Every day we see in the out-patient department and elsewhere cases which we know are requiring attention they will not, cannot receive at home, cases which without restraint and peculiar management last indefinitely and spread disease, cases which entail horrible consequences upon others ; all of them sure of more rapid and certain recovery if they could receive such hospital care, some of them as surely doomed to years of misery and even speedy death, because they do not obtain it. Those who from love to their fellowmen or pity for their bodily woes have left large endowments for their care in sickness, they who make generous appropriation from the wealth of states and cities for the treatment of disease among the poorer classes of society, certainly have intended no such arbitrary distinctions. It is not they who have ordained that a fever and a fracture shall have the best chance of recovery by proper nursing and the most eminent professional attention,—while an inflammatory or destructive process of the integument shall be debarred from both.—There is neither reason nor justice in such action, and they who control the government of such institutions have much to answer for, for such unequal distribution of hospital charity. The defence sometimes offered : that they cannot nourish specialties, is a very narrow one ; skin diseases form a large portion of the ordinary affections of mankind, and general hospitals are bound to provide proper accommodation and the best medical skill within their reach for the sake of justice and

humanity. On broader principles a hospital board which cannot rise above the petty jealousies of individuals or cliques, which in these days of wonderful advance in special medicine can see no wider field of usefulness than its antiquated divisions of medical and surgical service, with their restricted modern signification, offer; which fails to perceive its duty to develop means in every practical direction, for the advancement of progressive medical education, is open to the criticism of the profession at large and should receive it. Until such reform is effected we shall have in this country no hospitals worthy the name of general or great. Let it be our most constant endeavor to create the sentiment in the public and profession which shall make such a reproach no longer possible.

And our relations to the profession at large and to the public: are they what they should be in all respects? The hostility which at first existed against all specialties affected that of dermatology also, and has not yet wholly subsided. Physicians, who openly confess ignorance in all matters relating to skin diseases, and who would not venture to attempt the diagnosis and treatment of simple affections of the eye and ear for instance, do not hesitate to assume the care of every cutaneous disease which falls in their way. There is the disorder immediately before them, they can at least do no serious harm by their management of it, and such affections are not fatal, they reason. Moreover, they know so little of the advances made in modern dermatology, that they do not know how much more may be known by others than by themselves. Deeply rooted errors, too, with regard to the nature of some of the most common affections, and which form a large part of popular belief concerning cutaneous disease, still hold possession of the professional mind, or are made use of by some for selfish purposes. We constantly hear in our practice patients say that their family physician had advised them, often after ineffectual attempts to cure, that this or that chronic affection had better be let alone, that it would get well of itself, that it would not do to "drive it in," or that it might "strike in," and hint at possibly fatal results if it should be treated by the specialist. Such pandering to popular ignorance, or intentional perpetuation of error, cannot be too strongly condemned. Another popular belief is that the skin in some way serves as a mirror which reflects upon its surface visibly the disorders of the internal economy, and that 'humors' and other vices of the blood work their way outwards through the skin, and there express themselves in the form of various eruptions. The skin has thus lost its individual character in disease, and come to be held merely as a sort of index of the internal system; and the immediate conclusion of most persons with any affection of the skin is that 'the blood must be out-of-order, or that they have scrofula, or a 'humor.' What this last word means nobody knows, so that it may be disregarded as something which does not exist, but so far as concerns the

relation of the skin to the blood we recognise that it is an intimate one, as the blood flows freely through it, but no more intimate than that of the blood with all other structures of the body, and that as far as can be shown the condition of the blood has no more to do with the causation of skin diseases than of those of any other part of the economy. We recognise also the fact that the skin is of itself a great series of complex organs, with just the same inherent tendencies to disease and just the same right to its independent affections as the tissues of any other organ. By this we do not of course intend to deny that it is a part of and closely connected with the general economy, and sympathizes with the general condition of the body in disease; only no more so, necessarily, than any other of its separate parts. There is no more reason why we should not endeavor to cure any and every disease of the skin as of any other organ of the body, and no more danger is to be feared from our results, if successful. The combined evidence of all dermatologists of high standing is the same on this point. Another difficulty in the relations between the dermatologist and the general practitioner is the inability of the latter to comprehend the necessity of the constant personal attendance of the former in the successful treatment of many of the most common cutaneous affections. Even those who are ready to admit the superior knowledge of the specialist, and to avail themselves of his skill in the management of their patients in such cases, fail to understand why a consultation with him is so often followed by results so unsatisfactory. It is impossible in a disease like eczema, for instance, that we should be able to communicate in a single interview those principles of local therapeutics, which call for the simultaneous use upon various parts of the affected integument of as many different applications, in which the constantly occurring changes of this protean malady may necessitate change after change during its natural progress, and by which the properly selected remedies for to-day may become later either wholly inefficient or positively injurious. Yet I have known physicians practising among the most intelligent classes of society to base their opinion of the practical skill of the dermatologist upon the failure of immediate recovery in individual instances of such disease after one brief consultation, and to state with possibly innocent motives, when his aid was suggested in other cases, that the specialist had failed to cure in this and that instance of like character.—It is the same want of knowledge of the fundamental principles of treatment and pathology which instigate the frequent letters received by the dermatologist, asking for a few lines of advice in the management of some affection described simply by name, which often baffles his own skill acquired by years of special study and applied under direct daily observation. How unavailing are our best efforts under the most favorable conditions at times to gain the mastery over some of the most common forms of cutaneous disease, it is

our regret, not our shame, to confess. We may say without boasting that we prevent, control, and overcome the functional disturbances and tissue changes which constitute the diseases of the skin, perhaps more completely, however far short of our aim in this direction, than our brother specialists or the general practitioner those of the organs which they undertake to treat. Yet there is no class of affections which are so impatiently borne, none so difficult to keep under individual observation even in the highest classes of society, as those belonging to our special department of medicine. A patient with protracted fever or chronic pulmonary disease, for example, is content, family and friends also concurring, to remain for months, even years, under the care of the family physician in unquestioning submission to him and to the uncertain laws of disease. In our practice too few are found who are willing to follow implicitly for any such periods and under our constant observation the appropriate methods of treatment. Our patients mostly are able and prefer to consult us at our office, possibly because they act thus independently of the advice of the family physician in most cases, and therefore are but slightly under immediate control. They are at liberty to carry out at home the directions thus received, one half the success of which often depends upon the manner in which they are followed, and which may be irksome and disagreeable, as they best remember or please, and can obey our request to come at proper intervals or not, as they will. If the disease appears to improve, that is reason why they should not call, if it fails to recover after a period of trial in their judgment sufficient, that is reason not to call. Thus it happens that we are too often deprived of a fair opportunity of exercising our full skill, and that our reputation suffers most unjustly, thus that the average number of visits for each patient treated in comparison with that in general practice is ridiculously small and our income proportionately diminished. There is with us, moreover, but little opportunity for the exercise of that mechanical treatment which in other specialties and surgery commands such excessive rewards. These are the reasons why the exclusive practice of dermatology is more poorly paid than that in any other department of medicine, and why we should be justified in raising our fees for attendance to some proper and equalizing scale of compensation. To obtain a thorough knowledge of dermatology requires years of special study, to claim the position of a professed dermatologist demands, in justice to the profession at large, the relinquishment of all other practice, and the hope of the establishment of all those lasting family relations of friendship and authority, which are among the pleasantest rewards of the physicians life. Let not those therefore, who, tempted by the monied success of some specialties, would join our ranks with the expectation of an easier life or ampler rewards than are to be found in the practice of general medicine, do so without due consideration of the facts here presented.

I have thus endeavored to point out at the outset of our Association the directions in which its inherent energies should be guided, and the interests which should be its chief object to promote. Its formation may be regarded as the happy culmination of progress in a national dermatology of which we may well be proud, and as the completion of its established and independent position in American medicine. Let us cherish it warmly, serve it willingly and always, and make its future as sure as its present promise is bright.

