

Prospects & retrospects in physic and surgery : being the annual address delivered before the Harveian Society of London, January 15th, 1863 / by Thomas Weedon Cooke.

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PROSPECTS & RETROSPECTS
IN
PHYSIC AND SURGERY:

BEING

THE ANNUAL ADDRESS

DELIVERED BEFORE

THE HARVEIAN SOCIETY OF LONDON,

JANUARY 15th, 1863.


By THOMAS WEEDEN COOKE,

*President of the Society; Surgeon to the Cancer Hospital;
Surgeon to the Royal Free Hospital, &c., &c.*

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THE ANNUAL ADDRESS
DELIVERED BEFORE THE
HARVEIAN SOCIETY OF LONDON,
By THOMAS WEEDEN COOKE, Esq.,
The President.

GENTLEMEN,

Your kindness in placing me in the very honorable position which I occupy as your President, and in supporting me so ably and warmly during the now-expiring year of my office, gives me assurance that in addressing you, in accordance with the rules of the Society, I shall not want your generous forbearance and hearty sympathy, whilst I humbly attempt to follow in the footsteps of my great predecessors in this Chair.

We are not here as young alumni, entering, with uninformed wonder, upon new studies, to be prompted to labour by an introductory address, full of the grand aims and objects which a life devoted to our great science holds out most worthily as the noblest work of man. This spring-time, so full of ardent hope, has to us, alas! gone by. The seed-time is over. Our business is with the harvest. What have we done? what are we doing? to advance our knowledge of disease, our means of alleviating not only "the ills which flesh is heir to," but likewise those illegitimate offspring which are bred of ignorance of

the laws of nature, and of uncurbed vice and passion. Our Society, dignified with the name of the illustrious Harvey, whose inductive enquiries, fostered no doubt by his great friend and patient, Bacon, led to the grand discovery of the true theory of the circulation of the blood; has laboured well and usefully, during more than thirty years, in the promotion of a science, incomplete and burthened with fallacies, it is true; but so godlike in its objects, that its pursuit cannot fail to make the men who devote themselves to it fervently, blessings to their fellow-creatures.

The present generation of practitioners of Medicine and Surgery, in this part of London especially, owes a deep debt of gratitude to the originators of this Society, some of whom we have, happily, still amongst us; for the opportunities thus afforded of the free intercommunication of thoughts and experience in cases of doubt or difficulty, as well as for the advantage of that social intercourse which enables us to know one another as fellow-workers in a noble cause, and smoothes any asperities which competition and unworthy jealousy will at times produce amongst men in any profession, who do not know and meet each other in friendly intercourse.

The work which has been done by this Society, in its collective capacity, would astonish many of the younger Members, and I doubt whether many of the older Members would not now be surprised at the value and great importance of the papers which have been read and discussed here; and which have opened up new views of great practical importance, that have since received the sanction of general assent.

The very first paper read in this Society, at the house of the Western General Dispensary, then in

Lisson Grove, was by our now respected Honorary Member, Mr. Alexander Anderson; and I would venture to say that if any young Member wishes a model upon which to found a scientific essay, he cannot do better than peruse the epitome of that paper, as reported in the first volume of our Minutes. Its subject was the Structure of the Skin, and the treatment of Burns and Scalds; and although the microscope has since given us a more minute insight into the peculiarities of this important organism, the anatomy and physiology, as then known, was most clearly given, whilst the treatment advised has stood its ground to the present time.

The Chairman of that first Meeting was Dr. Antony Todd Thomson, certainly one of the most zealous, laborious and useful Members of that small band of workers, who had thus associated themselves for mutual instruction, and the cultivation of friendly intercourse. Dr. Marshall Hall, whose name subsequently almost rivalled that of Harvey as a physiologist, was present and spoke upon this occasion; and here most of his great discoveries were first propounded. He continued to attend the Meetings of the Society until very nearly the close of his career; and it was he who proposed that our motto should be "Esto perpetua." Well indeed may these two words be applied to his own memory. Dr. Theophilus Thompson, whom most of us remember and regret as a practical and scientific physician of no ordinary calibre, was also of this little band. Mr. Edgar Barker, who with Mr. Anderson originated the Society, was, of course, also present; and now after many years of active service, reposes on his well-won laurels as an Honorary Member; a pattern that

I would all of us could follow, as a successful cultivator of science, and a participator in the substantial benefits, which rarely fail to reward those, who skilfully and assiduously devote their time, and their brains, to the benefit of their patients. A few other thoughtful hard-working men were there, but, with the exception of Dr. Grant, I believe that all have passed from our roll, if not from the toils and pleasures of this ever-changing world.

Although, not altogether free from the influence of those lights and shadows, which will irradiate or eclipse short intervals in the lives of associations, as of individuals; the Harveian Society thus worthily inaugurated, has pursued a useful and honorable career; and in now arriving at its full maturity—the *mezzo-cammino* of its existence, can well afford to look back upon the work it has helped to do, and feel pride in its well-spent youth.

The proceedings of the Society, often most fully reported in the Minutes of the Meetings, which are all preserved; afford a rich harvest of facts and experimental enquiries, which have helped onwards in a very patent manner, the progress of Science in Medicine and Surgery. Early sketches of the great works of Dr. Hope and of Dr. C. J. B. Williams, upon the Diseases of the Heart and Lungs, adorn the pages of our first Minute Book; and may well excite the same curious interest which appertains to those pencilled aids to memory, thrown off at random, and left for the benefit of art-students of all time, by the indefatigable and talented Turner.

So far back as 1835, Dr. Green was most assiduous in bringing cases before the Society, shewing the great benefit of hot-air, vapour, sulphur, mercurial,

and other baths, when directed by a practitioner skilled in the knowledge of the diseases proposed to be brought under their influence; and now we find, after the lapse of a quarter of a century, that these views are propounded as new discoveries by far-seeing philosophers, whose telescopic vision is restricted to by-past ages of a defunct civilization. The mania for this *dolce far niente* cure for everything, is happily passing away; but it is to be hoped that in the general collapse which has overtaken the proprietors of Turkish Baths, some one or two of the best will escape the wreck; and that we shall still have the opportunity of obtaining comfortably, and even luxuriously, the unquestioned advantages of the hot-air bath, in many forms of disease; more especially those which depend on suppressed secretions, or a vitiated circulation.

Amongst the many subjects of public and professional interest, Animal Magnetism did not fail to attract the attention of the Society; and its merits and bearings on Medical and Surgical practice were most fully and freely discussed, with the most liberal desire to discover if any, and what, therapeutic effect was to be derived from this supposed power. The decision arrived at by the profession on this subject, has been well supported by what we may call posterity; for although a Mesmeric Hospital is still supposed to be in existence, the *Zoist* I fear is defunct, and we no longer find young ladies sipping water which has been mesmerized by a medium some few hundred miles away.

The subcutaneous division of Tendons for the cure of Club-foot was most ably and fully brought before the Society in 1838 by Mr. Benjamin Phillips, a surgeon distinguished for a most extensive acquaintance

Animal
Magnetism.

Orthopædic
Surgery.

with the literature of his branch of the profession in almost all the languages of Europe, as well as for indefatigable industry in the collection of statistics respecting all the great operations of Surgery. Unfortunately for science, like too many of its votaries, he fell a victim to paralysis, and was obliged to forego the practice of his profession, at an age when the judgment being matured, dexterity of hand fails not to follow the astute eye, and the professional husbandman begins to reap the fruits of his long labor. This was perhaps the first notice taken in our country of the labors of Stromeyer in this important branch of Surgery, although Dr. Little, from his persevering energy in establishing the Orthopædic Hospital, and bringing the subject before the profession in his published works, has obtained the credit of naturalizing orthopædy amongst us. Hunter long before had proved the advantages of subcutaneous incisions, and the great surgeon whom we have recently seen pass, full of honors nobly won, from amongst us, proposed and executed a plan for the cure of varicose veins by subcutaneous section; but there is no doubt that, until Dr. Little came back from Germany impressed with the great results he had witnessed in the practice of Stromeyer, our knowledge upon this subject was theoretical and limited. How the idea, once promulgated and reduced to practice, has thriven, it needs not for me to enlarge upon. Anatomical and physiological science has taken the place of mere empirical mechanism; and the marked absence of unsightly cripples from our streets, notes the benevolent progress made in this most important branch of surgical practice.

Although these cases are treated in some of the general hospitals of this metropolis, there can be no

question that the experience gained in the Orthopœdic Hospital is of infinite value to the public and the profession; as those of us can testify who have had the advantage of listening to the instructive papers read before this Society by our learned, highly scientific, and most worthy member, Mr. William Adams. To him and to his colleagues is mainly due an improvement so extraordinary in surgical practice, that it lifts one's mind with veneration to the Author of All Good, that He should have permitted the finite mind of man so nearly to approach the omnipotence of Deity itself, as expressed in those miraculous restorations of the lame and the halt, which astonished and confounded the sceptics of Roman Jerusalem.

In intimate alliance with this subject, come the Diseases of Joints. great advances made of late years in the treatment of Diseases of the Joints. Almost every full-grown man can remember that "white swelling" was the generic term for all diseases of the knee-joint, and that the unfortunate victim to this malady was at once doomed, in all probability, to death; certainly to an amputation which proved fatal in more than a moiety of the cases so treated. Here again we have to give all praise and honor to our late distinguished chief, for laborious investigations made into the subject of diseases of the joints, which have led the way to such improvements in practice, as may well make each one of us smile with pity upon the flippant critic, who, pretending to a knowledge of our science, which is only to be obtained by years of labor, ventures in his Saturday journal to ignore all the advances thus made in modern times. The treatment introduced by Scott of Bromley was a great improvement upon the old firing and blistering plan, and, divested of its somewhat cumbersome and

unnecessary applications, is still perhaps the most successful method of bringing about a cure of the disease.

Our conservatism has recently led us to cut out diseased joints, and unite by ankylosis the two parts of the affected limb, so as to preserve to the patient the power of prehension or progression, without the necessity for crutches or other mechanical contrivances; and great success has been obtained in this proceeding, owing to the labors of Fergusson, Jones of Jersey, Bullock of Dublin, Henry Smith, Peter Price, and others. There is, however, I believe, no question that not a few of these cases of excision have subsequently required amputation; and perhaps some of them might have been spared any operative procedure at all, if they had been submitted perseveringly to that physiological and mechanical rest, so ably advocated by Mr. Hilton, the Surgeon of Guy's Hospital, in a series of admirable lectures, recently delivered by him in the College of Surgeons. In these lectures, the anatomical research respecting the distribution of the minute branches of the nerves in the neighbourhood of the joints is wonderfully instructive, whilst the reasoning and vast experience, and the highly favorable results of the treatment propounded, lay the mind of the listener or reader under the deepest conviction, that rest, although tiresome from its necessarily long continuance, is the surest and safest mode of restoring a diseased joint to health and usefulness.

It has fallen to my lot to be enabled to put this plan of treatment into operation in several cases of disease of the hip, knee, wrist, ankle, and other joints; and thus far I think we have the greatest reason to be thankful to Mr. Hilton, not for the introduction of a

new method of practice, but for his elucidation of those anatomical and physiological data, upon which the whole rationale of this treatment securely rests; as well as for the able summary of his large experience in demonstration of the great results to be obtained from this truly conservative practice, when well and persistently carried out.

If any one will look back upon the practice of ^{Fractures of Bones.} twenty years ago in fractures of the lower extremities, whether simple or compound, and compare it with that of the present time; he cannot fail to be astonished and delighted at the ingenuity displayed by the surgeons of the present generation, in contriving means for placing the limb in the best possible position for repair, whilst the necessary confinement of the patient to the recumbent position, is reduced in the majority of cases, from eight weeks to two.

The swing-cradle, which Mr. Luke, the President of the College of Surgeons, has the credit of introducing into practice, enables the patient to change the position of his body as often as he pleases, without in the least interfering with or disturbing the injured limb; whilst the introduction of the starched apparatus by Baron Suetin, to whom less than his due meed of praise has been awarded, has enabled the surgeon to dismiss the patient from his bed in a very few days.

During the past year we have had amongst the in-patients only of the Royal Free Hospital, ninety-five fractures of the extremities—simple, compound, and comminuted—many of the most terrible character; and out of this large number three only have died. Perhaps I may be pardoned for somewhat irrelevantly mentioning here, that during the same period nineteen cases of poisoning were admitted, all of whom have

been restored. Of wounds, contusions, and sprains, there were one hundred and thirty-seven cases, varying of course in intensity, but all so severe as to necessitate admission into the hospital. Of these three died. The one hundred and thirty-four were cured.

I am not enabled to give the relative number of cures in severe medical cases, but I have no doubt that these would shew an equal amount of good done. Travelling still a little further beyond the limit I have necessarily restricted myself to, I would point out an important conclusion arrived at by Dr. Arlidge, in some statistics published by him in the *Journal of Mental Science*, which I happened recently to stumble upon. It there appears that the ratio of recoveries to admission into the various Lunatic Asylums of Scotland amounts to 40 per cent. Surely a most gratifying evidence of the progressive advances made in a branch of medical science, which must enlist the sympathies of the benevolent, and even command the good wishes of the unimpassioned political economist. The sceptics and scoffers at our science, however, will argue from their own limited experience; and knowing nothing of the vast services rendered to the injured and suffering poor by the skill and labors of practitioners in Medicine and Surgery, will still spin philippics at our expense, as light reading for idlers on Sunday afternoons. Too well do we know, and deplore, the many slits in our harness; but there is not a profession that can afford to taunt us with our insufficiencies, neither is there any body of men which labors more unceasingly, or with greater expenditure of intellect, in the advancement of a true and beneficent science.

Our Society has taken more than an average share in the discussion of the means of curing Ovarian

disease. So early as 1843, I find Mr. Squibb bringing forward the subject, in a paper which recited two cases of the spontaneous cure of Ovarian Dropsy by opening into the rectum. He at the same time related two cases of excision of the ovary which had proved fatal. Dr. Hodgkin (now one of our Honorary Members) took the opportunity of developing his peculiar views respecting the formation of cysts in the ovary, as in the breast; and approved operations. He likewise supported the treatment by pressure, and mercurial inunction; brought before the Society by Mr. Baker Brown in 1845. Occasional references were made to the same subject in subsequent years, especially with regard to the operation performed by Mr. Walne, which was shewn to be successful in some cases; and in 1859 Mr. Brown gave us the history of five cases of ovariectomy, three of which had proved successful. Since that time it has been impossible for any of us to escape from an abundant acquaintance with all that has been done in this matter. A *cacoethes scribendi* seemed to seize all those who performed this very serious operation, and unfortunately the pen of the ready writers, did not always confine itself, to dry scientific detail. It is to be hoped, however, that the last great storm has cleared the atmosphere, and that the clever surgeons and physicians (for in this case physicians handle the scalpel) who have made this subject their own, will proceed as they have done, improving the details of the operation, and so increasing our diagnostic knowledge of the various forms of disease which attack the ovary, that the risk of a fatal result from the treatment may be reduced to the very smallest average; and that every unfortunate sufferer from this disease, may, with confidence, take advantage of the certain

cure which this proceeding seems to offer; provided the diagnosis is accurate, and the surgeon apt, and well experienced, in this particular operation. I would venture to say to my professional brethren, that in a case of so much difficulty, involving such important results to the patient; that, unless he has had frequent opportunities of witnessing the operation in all its details, and of assisting thereat, no surgeon ought now to undertake so perilous a proceeding. The period of uncertainty has been courageously passed, some lives perhaps have been somewhat curtailed in the process, but the average of success is daily increasing; and ever looking to a correct diagnosis, it may be said, that this operation is a great surgical triumph, which has brought deserved credit to our fellow-member, Mr. Baker Brown, who has *per fas aut nefas* pioneered the way, and removed obstacles which made most of us quail and falter in the path.

Ruptured
Perinæum.

Time does not allow me to dwell upon a paper read by the same surgeon in 1857, upon the cure of ruptured perinæum, by operation. Happily child-birth is as a rule unattended by any untoward results, but it does occasionally happen, that there is a laceration of the perinæum extending even into the rectum; an event most frightful in its consequences to the poor patient. For this accident, if so it may be called, Mr. Brown has proposed and successfully carried out an operation, which can scarcely fail to remedy this lesion in all cases.

Fistulæ.

The improvements effected in the treatment of recto-vaginal, and vesico-vaginal fistulæ, deserve our warmest acknowledgments. What misery and suffering have been set at rest by these successful operations, and whilst giving all credit to our own countrymen

in this matter, we should waft our full meed of praise across the Atlantic to our suffering *confrères*, who were the first to originate the improvements which have led to such great results. The instruments used in these operations are models of ingenuity.

Although we cannot yet dissolve cataract, great advances are being made in the treatment of diseases appertaining to the eye and its appendages. Iridectomy—everything connected with Ophthalmic Surgery is overladen with quaint classical phraseology—is a new operation, imported from Germany, for the cure of Glaucoma, previously an incurable disease; and it holds its ground well. The Ophthalmoscope now reveals all the secrets of the beautiful mechanism of this important organ, and it rarely happens that we fail to discover a remedy when we can *see* the disease we have to treat. These subjects, as well as the defects of vision from natural causes, have been ably illustrated before the Society by Mr. Lawrence and Mr. Haynes Walton. The restoration of sight to the blind, or the skilful prevention of the encroachment of disease upon this delicate and beautifully contrived structure, invite the earnest sympathy of every lover of surgical science. The fascination of this particular study is shown by the manner in which most of our first-class young surgeons devote themselves to it, and the anxiety there is always displayed to obtain an official connection with any of the special hospitals and dispensaries which confine their aid to these particular diseases. From the high-class skill that is at work upon the lesions of this one organ, the next generation cannot fail to receive most important benefits.

Diseases of
the Eye.

Subjects of vital interest to humanity, other than

those I have already referred to, have been mooted here, and freely canvassed, by men of calibre and authority in the particular matter brought before the Society. An epitome of the work done, and the work suggested, is so utterly beyond the compass of an hour's discourse, that I am compelled, with great regret, to forego more than a mere reference to matters of such import as Dr. Marshall Hall's method of restoration, in cases of asphyxia from drowning; an original contribution, which if not complete in itself, at any rate gave the first impulse to a mode of inflating the lungs, which cannot fail to be instrumental in saving the lives of hundreds of our fellow-creatures, who would otherwise have gone to their account;

“Unhousl'd, disappointed, unanel'd,

“No reckoning made.”

Epilepsy.

Epilepsy also, was brought before the Society by the same distinguished physician, on the 1st of May, 1856; being his very last visit previous to that retirement to Brighton, which was to be followed, too soon for science, by his lamented death from cancer of the œsophagus. Most of us remember the vigour of his discourse, upon a subject which has occupied and baffled physicians of all ages, and had consequently for him the fascination of a difficult enquiry. My respected predecessor in this chair, Dr. Sieveking, has also done much to ameliorate the sad phenomena of this obscure disease; and we know that other learned men, Dr. Radcliffe, Dr. Ramskill, Dr. Brown-Séquard, and Dr. Reynolds, are leaving no stone unturned to come at the root and origin of this malady; so that if skill and perseverance can prevail, a remedy may be hoped for at no distant day

Diabetes, was the subject of a discourse by Dr. ^{Diabetes.} Hodgkin in 1853, and it is to be feared that there is much yet to be learned respecting this disease, before we can lay the flattering unction to our souls, that its cure is nearly accomplished. The most recent enquiries of Dr. Pavy, however, hold out sufficiently grounded hopes that the wished for goal may be attained, even in this most intractable of all maladies. The study of pathological chemistry, which has done so much for us in gout and rheumatism, in diseases of the bladder and kidneys, will perhaps eventually reveal the true method of counteracting this curious interchange of the elementary constituents.

In connection with this subject, there is still the ^{Calculus.} great problem of the dissolution of Stone in the Bladder, or in the Kidney, which challenges the enquiries of the chemical pathologist; and offers the very highest reward to a successful investigator. One of our former Presidents, Mr. Alexander Ure, was the first to suggest that Lithia had this coveted power; and certain it is, that this alkali has a very marked effect in diminishing the disposition to uric acid deposit, which of course is the great source of calculous disease, as it is also the *origo mali* in gout; for which disease Dr. Garrod has recently introduced Lithia as a most important curative agent.

The great and beneficent uses of Chloroform in ^{Chloroform.} Medicine, Surgery, and Midwifery, are now so fully acknowledged and so thankfully adopted by all, that it were a work of supererogation for me to refer to the papers read before this Society upon Ether, Chloroform, and the production of local anæsthesia by congelation; except for the purpose of noting the inestimable advantage to every individual Member, of having such

extremely important practical matters mooted here in open court for criticism, so that in his dealings with the public, he may act with the assured confidence, that he is supported by the matured opinions of a large and influential portion of his fellow-practitioners.

I must not stop to point out the value of papers and discussions on Paraceutesis Thoracis, by Dr. Hamilton Roe; on Diphtheria, by Dr. Greenhow and Dr. Saunderson; on the Sub-cutaneous Injection of Morphine, by Dr. Fuller; on Pyelitis, Phlebitis, and a host of subjects, which show the interest displayed by the Members of this Society in the progress of their adopted science.

Urethritis.

It has always appeared to me that those amongst us who are, from whatever cause, placed in positions of trust and importance, which give a wide field for the testing of questions of practice; have a great responsibility thrown upon them of using these opportunities for the progress of knowledge, not only for the immediate benefit of the persons who come under their own ministrations, but for the general good. Acting upon this impression, I have thought it my duty to bring before this Society an uninviting subject, but still one having a considerable influence over the comfort and happiness of a large section of the community. The diseases arising from impure sexual association are facts which cannot be ignored by us, but must be met and treated in the best manner that science dictates. Finding that much mischief and much disgust arose from the old established practice of treating urethritis, I used the large opportunities afforded me of testing other means of cure, and in a paper which I read before this Society in 1860, showed how easily this disease was to be managed, when treated as a simple

local inflammation. I have good reason to believe, that the suggestions of treatment then made, have been largely and beneficially adopted by the profession.

That other and more serious disease, which also ^{Syphilis.} results from the cause already referred to, has been forced upon my observation in the performance of my duties at the Royal Free Hospital; and although I yield to no man in reverence for the labours of the great men who have distinguished themselves, in the noble art of relieving their fellow-creatures, when struck down by disease; I nevertheless find myself at issue with some of them, as to the treatment of Syphilis; and have elsewhere put forth my reasons for looking upon the so-called secondary symptoms, as nature's own method of eliminating an animal poison, which is artistically balked, and hindered, by the customary mercurial course. An illustration is generally more instructive than any argument, I will therefore ask the Society to bear with me whilst I recite the case of a gentleman who applied to me for advice in June last: He says, "Towards the end of 1849 I contracted Syphilis—a chancre with a hardened base; I used no treatment but black wash, and the chancre healed. In two months ulcers appeared in the throat. I used mercury for three weeks without salivation and got well. In four months the throat again became affected, and there was a rash on the skin. Used mercury for two months without salivation and got well again. Continued well for a year and a-half, and then sores having made their appearance on the legs and other parts, and being much afflicted with rheumatism, was again mercurially treated without salivation, and again recovered. In less than three weeks, however, the ulcers recurred on the calf of the

leg, and there was much constitutional disturbance, which was kept under by an alterative treatment. Tried another course of mercury for three weeks, which caused irritation of the bowels, and there were nodes on the skull and skin; took Iodide of Potassium and Sarsaparilla, for a twelvemonth, when the node on the shin opened into a bad sore; tried another mercurial course for a month with little benefit. Went to the Baths of Kreuznack, and was greatly improved." The ulcers returned, however, on his return home, and he then tried the Turkish Baths and Iodide of Potassium with very little effect. After this he was again put under the influence of mercury for two months, and was this time salivated, which acted well for six weeks; but the sores getting worse it was given up, and the disease was kept comparatively stationary by means of the Iodide of Potassium, and occasionally Nitric Acid. He concludes: "I am quite crippled, and it is only when the Potash is effective I can move at all, still though suffering continuously for the last ten years, and dreadfully at times, I feel yet to have strength of constitution, and if only freed from this cursed disease could enjoy life."

Now this is but a slight exaggeration of what is occurring every day. Not during six courses, as in this poor man's case, is mercury often administered, but three or four courses are frequently given with equally unsatisfactory results; and who shall say in the teeth of these facts, that Mercury is a specific for the cure of Syphilis, and that no surgeon should, as we are warned by Mr. Acton, "dare" to treat it otherwise. Let the mercurialist dare to give up his prejudices, dare to watch nature long enough to see what she will do if she be supported, instead of being thwarted in

her own good efforts; and he will find, that at the age when these diseases most affect men, life is stronger than decay; the peccant humour will be thrown off, and the man may stand erect again, confident that he is freed entirely from the poison which had infected him. On the other hand, distrust nature, pour in your mercury; you will arrest the enemy for a time, you will destroy the eliminative powers of the skin for a season, but you will too surely find that your success is transitory and evanescent—your patient will return upon your hands—and if enamoured of your supposed specific, you repeat the process, you will but

“ Skin and film the ulcerous place,
 “ Whiles rank corruption, mining all within,
 “ Infects unseen.”

I would anxiously urge all those who are not zealots of a school, to investigate this matter themselves, and see if there be no room for improvement; whether the theory I have indicated, be not the true one, which should guide us to a very important, and, I humbly suggest, an extremely beneficial change in the management of this serious disease. We have heard in this Society but recently from my learned friend and colleague Mr. de Méric, that Syphilis has become much less severe in its manifestations than it was formerly. If this be so, then is my argument for a modification of the treatment strengthened. Some men even say that the happy immunity from Small-pox which we now enjoy, is due to a decadence of that peculiar disease, and not to the great discovery of Jenner. We are most of us ready to acknowledge, that our fathers were not altogether wrong in the free use of the lancet, and that our change of treatment has been called for by a corresponding change in the habits and constitutions

of men. Growth and decay are the attributes of science, as they are of nations and individuals; and he who resolutely takes his stand upon the ancient ways, is less likely to be useful to his fellow-men, than one who, with due reverence for the opinions of his forefathers, nevertheless fully recognizes, and acts upon, that pithy and rythmical sentence :—

“Tempora mutantur, et nos mutamur in illis.”

Cancer.

Among the many subjects that have been illustrated and discussed in this Society, perhaps there is none that is invariably so interesting, so likely to excite the attention and elicit the opinions of Members, as that of Cancer. Seeing the great mental and bodily suffering which attends this disease, and the painful interest excited in the mind of every practitioner by these distressing cases, it is not surprising that our records make frequent mention of the discussion of this matter. Dr. Anthony Todd Thomson, Dr. Hodgkin, Mr. Anderson, Mr. Ure, Mr. Oubr , Mr. Burford Norman, and several other respected members, have, by papers and cases, endeavoured to pierce the darkness which hovers around us in this instance. In no part of the history of our profession, from Hippocrates downwards, are we without records of attempts to check the ravages of this disease. As we may think now, many of these attempts were senseless, and only deserved the failures they experienced; but they were done in accordance with the spirit of the times in other matters, and exhibited the zeal and theoretical ingenuity of our forefathers, in accordance with that Aristotelian method of reasoning which prevailed before the inductive theory of Bacon had wormed its way into the schools of science. Now that we reason from facts, and prefer to confess ignorance, rather than puzzle our

brains to invent theories, which will probably turn out to be "as idle as the wanton summer wind;" it does seem highly probable, that from the combined uses of physiology and pathology, and not entirely excluding experimental therapeutics, a considerable control may be obtained over this disease, so as to prolong life, relieve suffering, and effect almost as great good as may be done in renal calculus, in gout, or any other disease, which results from chemical or structural changes.

In this Society especially, we honour Harvey for those magnificent logical deductions, by which, using all the anatomical facts he had investigated and proved, he established to the easy comprehension of every student, the double circulation; the pulmonary, through the medium of the right side of the heart, the systemic through its left side, the aorta, and its innumerable branches. Since his time the blood itself has been a fruitful source of investigation, and it has been reserved for the present era to show, that the human blood-disc, that representative of infant life, is not a self-begetting cell; that the nucleus hitherto attributed to the blood cell is a myth, produced by the shadows of an ill-contrived microscope. Yet we have it proved, that from this blood, nucleated cells are eliminated, and of these nucleated cells, muscle, and nerve, and bone, are created. It is believed, that from those minute vessels which connect the arterial and the nervous systems, the capillaries; a fluid, by the wonderful power of exosmosis, is poured into the inter-cellular substance, and that it there forms material for the construction, and the regeneration, of the tissues of the ever-changing body. This process is as quiet, and natural, and universal, as the laws which govern the planetary system; but as in the skies

there are comets, so in man's structure we have eccentric phenomena, which go far to baffle our philosophy.

With or without an exciting cause, apparent to our senses; the constructive material poured out of the capillaries, shall, in some parts of our bodies, be composed of cells which have not the usual formation. Instead of being globular or fusiform, they shall assume strange shapes, and the nuclei shall be unusually multiplied. These are the microscopic evidences of that disease which we designate by the quaint term of Cancer, and from them, as well as from the hereditary nature of the complaint in a certain proportion of cases, we may justly assume that the disease is systemic, and not purely local.

Notwithstanding the constant failures of operation to restrain this disease, there are surgeons who still maintain that Cancer has a local origin. We see almost weekly in the medical journals reports of operations for Cancer in various parts of the body, but we rarely know how soon the disease is again manifested. The ghost of Banquo too surely appears, but no record is made. If it were a fact that this malady was purely local, that the microscopic changes in structure I have indicated were produced by a blow, or some other extrinsic cause; surely the world would know of some few hundred cases out of the many thousands operated upon, in which there had been a perfect immunity from future disease. Where is the surgeon who can point out even half a-dozen such cases? The voluptuous cities of the Syrian plains had escaped destruction, had there been found ten good men among them.

If it then be a fact that the disease invariably returns in the cicatrix, or in some neighbouring or distant part of the body, after operation; how is it

possible for us to cling to the conclusion that a part only, and not the whole system is at fault? Inexorable logic stands at the portal of our minds, inscribed with this incontrovertible truth:—“*Omnis major continet in se minus.*” As to the effect of blows, it appears, from the records of the Cancer Hospital, that but one person in eight, in a collection of nearly three thousand cases, was enabled to ascribe the origin of the disease to any local injury.

Although operation in Cancer must be abandoned, as a means of cure, it is, nevertheless, in selected cases, acceptable as a compromise; and unfortunately, in this sublunary world we are obliged to make compromises, and build half-way houses in many paths of life. Five-sixths of the cases of Cancer that come before us are in the female sex, and of these, three-fourths are made up entirely of Scirrhus of the mamma. It is therefore of the first importance that we should arrive at the best mode of treating this particular lesion, which afflicts so large a class of our country-women. There are different temperaments to be observed, various degrees of health to be noted, the assurance of mental and bodily comfort to be obtained, before any plan of treatment can be decided upon with advantage to the patient. If statistics could decide the question, operation, whether by knife or caustic, would give us but poor comfort. Of 307 cases of operation noted at the Cancer Hospital, the average lapse of time before the disease returned, was but eleven months. There were, of course extreme cases. Some three or four having an immunity for ten years, whilst a considerable number suffered a relapse in less than three months. The longest time that any case of Scirrhus of the Breast operated on by myself, has remained free from the disease, was three years and

a-half; and certainly in that particular instance, I cannot have a doubt, that life was prolonged by the operation. The occasionally favourable result of operation, has unfortunately made this easy mode of cutting the gordian knot popular amongst surgeons, and the result is, that numbers of persons are submitted to operation, who from temperament, or the state of their general bodily health, want the recuperative powers necessary to put them in a condition to benefit by this proceeding.

The cases of two illustrious personages may be aptly contrasted in reference to the question of operation. It is generally understood that the estimable mother of our gracious Queen, whom we all love to honour and obey, was afflicted with Cancer for many years. In her case no operation was performed. Another royal lady, whose virtues are not highly lauded by native historians—the late Queen of Madagascar—had Cancer of the Breast at 70. It was removed by a skilful surgeon, but the disease re-appeared in three months, and she died very shortly afterwards.

Within these last few weeks, two marked cases of imprudent operation have come under my notice. A gentleman, practising in a beautiful part of Surrey, sent up to me a respectable farmer's wife, who had Scirrhus of the right mamma. Her general health was good. She menstruated regularly. There had been no blow, and there was no evidence of hereditary taint. Her age was 49, and she had one child which she had suckled. The tumour in the breast was hard, circumscribed, and the size of a duck's egg. In the axilla there was an enlarged, indurated gland, the size of a walnut, lying quite close upon the axillary artery, and there was a band of thickened absorbents connecting the tumour in the breast with that in the axilla.

The question for me to decide was operation or not. I objected to operation, and proposed tonic and palliative measures, because the axillary tumour was evidently cancerous, and not the result of common irritation only; and because it would have been impossible to cut out the axillary tumour without serious risk of wounding the axillary artery. I thought also, that with her general good health, some more favourable resolution of her disease might be brought about. The sequel of the case is painfully instructive. Her family adviser informs me, that after seeing me twice, her friends advised her to consult successively three other surgeons, and the last undertook to perform the operation. The exact particulars were not known, but the result was death in twelve days. The second case I wish briefly to mention, is that of a lady, aged 36 only, well proportioned, slightly inclined to embonpoint, and somewhat pale and exsanguineous. The catamenia were regular, and she had suckled children. There was no hereditary taint, but she had received a blow upon the left mamma, and a tumour appeared, which gradually increased for six months. A surgeon of great repute in London advised excision, and it was performed in the country. In *five* weeks after the operation the disease re-appeared in the cicatrix, and when seen by me, only two months after the operation, Scirrhus tubercles were forming all along the cicatrix; and in all human probability this poor lady's life will have been curtailed considerably, by this operative interference. These happen to have been very recent experiences, and I am perhaps too vividly impressed with the sad feelings which such failures necessarily create, or I should not have ventured to enter into the details of cases in a general address.

It is generally conceded amongst histologists that

the cancer cell is comparable with the cell formations of embryonic existence—that it is, in fact, deficient in a something which, if added, would make it form healthy adult tissue. It is patent that this something must come from within, and the blood must be the means of supplying it. If we cannot pour into the body, nutriment, to manufacture the very highest health in the vascular system, so that no more half-fledged cells shall be created, we shall necessarily fail in checking the fatality of this malady. The means to that end, it were a work of supererogation for me to indicate in a society of highly educated practitioners; neither does it come within the scope of my discourse to particularize the assistant local treatment, which experience teaches to be highly beneficial in these cases. I would only protest against the abandonment of patients suffering from Cancer to their own ill-directed domestic resources, or to the tortures and extortions of presumptuous charlatans; whenever it is decided by the authorities that the case does not admit of operative interference.

In the epithelial form of the disease, perhaps, we have more favourable results from operation than in the scirrhous form. The removal of an epithelial Cancer from the lower lip, which is by far the most frequent seat of Cancer in man, is generally satisfactory; provided all due precautions be employed to build up and support the constitutional powers previous to the operation, during the healing process, and subsequently. Amongst the large number, however, that present themselves for treatment at the Cancer Hospital, there are very few whose cases are suitable for this proceeding. If the indurated lip have any thickened cord extending from it, or if there be any commencement of glandular enlargement beneath the

maxilla, operative interference is sure to be injurious, the disease will be aggravated by the proceeding; and although the lip may heal kindly enough, the sub-maxillary or other glands will become the seat of cancerous depositions, which cannot be controlled. It is a singular fact that the upper lip is almost entirely exempt from this disease. So much is this the case, that out of more than 200 cases of Lip Cancer, observed at the Cancer Hospital, only one has been situated in the upper lip. This particular instance came recently under my care, and after trying various methods of healing the ulcer, which proved only temporarily successful, I cut out the indurated part, and upon examination under the microscope, found unmistakable evidence of its cancerous nature. The great rarity of Cancer of the upper lip renders it exceedingly doubtful whether the case of M. Sax, which made so much noise in Paris some two or three years ago, was one of Cancer at all.

Whilst, however, the results of operation in well-selected cases of cancer of the lip are comparatively favourable, the same proceeding is so constantly injurious in Cancer of the Tongue, that I would willingly see it established as a canon in surgery that this operation should never be attempted. Much palliation may be obtained, life may be considerably prolonged by treatment, perhaps even the operation of dividing the gustatory nerve, recently revived by Mr. Moore, may be useful in relieving pain; but as far as I have observed, or can learn from others, the removal of any portion of a cancerous tongue, whether by knife, *écra-seur*, or ligature, is invariably followed by a rapid return of the disease, and that in an aggravated form. The diagnosis of cancer of the tongue is not always an easy matter. Induration accompanies other diseases

of this organ, and it consequently not unfrequently happens that much credit may be gained by the rapid cure of an affection which has been erroneously looked upon as a malignant and incurable disease. Many such cases have come under my notice, and one from its quaintness deserves mention. A man of middle age had an ulcer on his tongue. He applied at one of the Metropolitan hospitals for relief, and after two or three visits was reluctantly induced to submit to an operation. He was placed in position for the purpose, but getting alarmed at the sight of knives and other instruments, he made a bound from the table whilst the surgeon's back was turned, and leaving his hat and coat behind him, escaped from the hospital, and never returned. He told this story with great gusto, and I had the happiness of perfectly curing his ulcerated tongue in a few weeks.

Epithelial Cancer of the extremities, especially of the hand, is not very uncommon, and may generally be advantageously treated with the Permanganate of Potash, or Chloride of Zinc; but in advanced cases, where the discharge is destroying the patient, amputation may be resorted to with the best results.

In all the various forms of Cancer, I would pursue the same principle of treatment, that of improving the assimilating powers of the body, so that, if possible, nothing shall be generated but healthy tissue,—cutting off, in fact, the supply of diseased structure. If we can attain that goal, we may certainly look for a cessation of the disease,—an atrophy of the tumour already deposited. This hopeful view of this terrible disease is warranted by the observation of many cases which have assumed this quiescent condition. In no case of Medullary Cancer, however, is it possible to effect any hindrance to the progress of the disease. The eye and

the testes are the parts peculiarly affected by this malady, and we see cases continually in which these organs have been extirpated; but insatiably the malignant influence seizes on its victim, and in our present state of knowledge it baffles all our efforts to repress it.

I have sketched but a few of our battles won—of our peaceful victories over disease; and I have indicated where we have still ramparts to storm, almost “forlorn hopes” to encounter. The men of the past in this Society have laboured like good soldiers in the cause; the men of the present, with improved machinery for the examination of the eye, the ear, and the larynx, cannot fail to subjugate many of the ills which have hitherto eluded our attacks; whilst there are still grand deeds of valour open to the laborious student, who is just entering upon this wide field of enterprise. Thus our glorious contest with disease goes bravely on; Conclusion.

“Bequeathed from labouring sire to son,
“Tho’ baffled oft, is ever won.”

Each year brings forth improved methods of diagnosis, and treatment; and whilst we continue to elevate our profession, by electing only into our body minds prepared for the verification of such great and important truths as are already disclosed, or the investigation of others that lie buried in their native quartz, till some persevering miner reveals them to the glare of the sun; we may look forward to an annual scrutiny or stock-taking of the work we have done, with a lively confidence, that much which is occult now, will be made plain; and that our usefulness as a body will be continually advancing. Perhaps the deficiencies of our science make it the more fascinating. We have ever work to do of the most interesting character;

each man, according to his taste, is labouring at some investigation which tends to the benefit of his fellow-men. One at the chemical laboratory pursues something very like an *ignis fatuus*, until at last he fixes it in a crucible; and then he seems to realize some of the feelings of Frakenstein, when his monster moved. Another, delving with his double microscope into the innermost arcana of life and health and disease, seeks with painful industry, to explore the means by which the raw material of our existence is converted into healthy bone, or muscle, or nerve-fibre; or, on the other hand, is perverted to uses which clog and check, and ultimately annihilate, the powers which keep the human machine in action. Some are great in diagnostic skill, and love to obtain absolute and exact knowledge of those changes of structure, which too frequently may be verified by post-mortem examinations; whilst others devote themselves to therapeutical enquiries, which are eminently useful, provided reason and analogy be not overtopped, by vulgar empiricism. Look at it in whatever light we may, our profession has noble aims and objects; its professors of course must live, like other men, by the labour they perform; but there is such a heartiness of purpose, such a continual craving desire for more knowledge, and, as a consequence, more power, over the infirmities of our kind; that I am convinced we each and all of us require no other stimulus than the love of our art, to bid us accept, and act upon, that grand old sacred precept;

“Whatever thine hand findeth to do, do it with thy might.”