
PRESIDENTIAL ADDRESS.

CO-OPERATION AND CO-ORDINATION.

COLLIER F. MARTIN, M.D.

PHILADELPHIA, PA.

It is with a feeling of keen pleasure that I stand before you today to extend to you a welcome to our Twenty-first Annual Meeting. As guests of our own Dr. Jelks and of the Memphis and Shelby County Medical Society, the American Proctologic Society is indeed fortunate.

It is good to see that co-operation, the first text in my address, is so well exemplified in the way in which all have worked to make our program one to be remembered.

Twenty-one years ago this Society was organized by thirteen enthusiastic surgeons, who were far-sighted enough to see that in proctology there was a wonderful field for research and study. Previous to this, dating from 1885, there had been a few informal meetings of proctologists which led up to this organization. It was fitting that Dr. Joseph M. Mathews, of Louisville, Ky., the retiring president of the American Medical Association at that time, should be elected as our president. You gentlemen of the South can be justly proud of this, your fellow worker, this truly great man, who already had accomplished so much in the little known field of proctology.

When Dr. Mathews began to turn his attention to the study of diseases of the rectum and anus, specialization was just beginning. True it was that there were already men claiming to cure these conditions, but their rather doubtful methods of advertising were irritating to those members of the regular profession who were trying to practice medicine honorably and honestly.

Fortunately for us, these irregulars or quacks, had no organization, as also they had little or no special training. Each new light, as he became more or less famous or infamous, gathered about himself a few followers whom, for a generous consideration, he was willing to teach his methods and special tricks. The master quack was willing and eager to admit that he knew more about the rectum than any of
his predecessors or competitors, and even intimated that the world
would never see another so skilled and so learned. The lesser quacks,
in turn, as their fame and fortune increased, went through the same
cycle of development.

This was all a man's game, everyone for himself; self-laudation and monetary gain being the end in view. Honest practitioners felt keenly the disgrace of quackery and more keenly the loss to themselves of both reputation and remuneration.

Fortunately there were a few conscientious surgeons who were devoting all or a good portion of their time to the special study of things rectal. This work unfortunately was carried on single handed, often obstructed by ignorant opposition and unkind slurs. It soon became evident to the more progressive that some organization must be formed, not only for the purpose of getting an interchange of ideas, but for the purpose of advertising and popularizing this specialty.

From necessity, the American Proctologic Society became an established fact. It was organized on June 7, 1899, at the Chitten- den Hotel, Columbus, Ohio. Composed of thirteen original members, it has grown consistently during the past twenty-one years both in membership and influence. Just of age, it has only begun its active career. A good beginning has been made, but still it has much to accomplish and much to learn.

Of necessity, no specialty in medicine is sufficient unto itself. All progress rests upon the fact that all branches of this art are interdependent. It is obvious also that no one member of this Society is sufficient unto himself. Each one to be successful must borrow largely from his fellows, as he must seek assistance from men in other lines of work.

If our members would make a practice of visiting each other occasionally, great good would accrue to all. This meeting, which presents a return to a partly clinical program is a great step forward. Even the best of us do so much that is not above criticism, and some of us with smaller opportunities have accomplished so much that is good, that not one of us have any right to feel self-satisfied.

It must not be forgotten that the practice of proctology has hardly arrived at the threshold of a wonderful future. It is with this future that the American Proctologic Society is chiefly concerned.
President's Address.

Your president feels strongly that true progress rests upon a basis of constructive criticism. At the present time our country is passing through a wave of reform, which unfortunately seems to tend more toward deformity and disintegration. Everything that we formerly believed in is being investigated and reorganized, taxed and regulated. The resulting uncertainty in economic conditions is even being felt by the medical profession.

In the Medical Reserve Corps, a man who admitted that he was only a general practitioner, was a curiositiy. All were specialists. In spite of this self-classification, it was soon found that service in the army meant a sacrifice of the personal freedom to which the physician had been accustomed. The Regular Army had very different views of classification. Doctors were supposed to meet any emergency. Surgeons became anesthetists; internists found themselves surgeons, and even ophthalmologists became genito-urinary surgeons. All became proficient clerks, and many became sanitary inspectors.

After the armistice there was a general scramble of doctors to return to their home towns. Then things began to happen. Because of the change in viewpoint, brought about by new duties and by the intensive special courses offered by the U. S. Government, the grind of general practice seemed particularly burdensome.

As was to be expected, a large number of these men turned their thoughts toward specialization. Many of these had a wonderful clinical experience; more had special courses which they felt should be turned into capital. As a result of all of this disorganization and reorganization, our country is being flooded by a vast number of new specialists. These men who are specializing, but are not as yet finished specialists, if there is such an animal, must be taken care of, must be encouraged, and must be assimilated.

For many years there have been few proctologists; during the next few years there will be many. Our Society has been going along quietly and conservatively; now we must face new conditions. As we are enlarging the scope of our work, we must decide whether or not we are to greatly enlarge our membership by taking in these new men, who are soon to become a power in the medical world.

It would seem that we must adopt a course that will result in the greatest good to the greatest number. Proctology will only become a dignified and recognized specialty when every city and every large town possesses one or more men of high character and special training in this important branch of surgery.
Your president feels that a few suggestions may be welcome as to the future conduct of the Society, having in view the development of a more effective organization:

First: A clinical program should be an annual feature of our meetings.

Second: The Society should continue its practice of holding its sessions during the week preceding those of the American Medical Association. This prevents any interference with the association, and gives our members a chance to attend the sessions of the Section on Gastro-Enterology and Proctology which should receive our earnest support. The Executive Council has full control over this matter, and it may be safely left to this body to make the decision.

Third: The time may come when this Society will have to enlarge its membership. At present it would seem unwise to make such a change, particularly as the Section on Gastro-Enterology and Proctology in the American Medical Association will take care of the newer proctologists. We should only take in those who are becoming well known in this special field, giving preference to those who are engaged in teaching. This is a matter purely for the decision of the members of the Society itself.

Fourth: Members should be encouraged to read papers on proctology before local societies.

Fifth: It would seem desirable that some exchange should be organized so that each member would receive reprints of papers read by the others.

Sixth: It would be a good idea to have some interchange of ideas between meetings. This could take the form of a quarterly letter sent out by a special committee, or by the president. This letter would deal with the new things which are being done by our own members and by others here and abroad.

Seventh: Every effort should be made to see that systematic courses in proctology are given in all medical colleges in this country, under the supervision of approved proctologists.

Eighth: The Society might also endorse certain text-books on proctology for teaching in our colleges. At the same time it is obviously impossible to standardize proctology or any other branch of medicine. Because of the constantly varying factor of personal idiosyncrasy, both in the patient and in the physician, the greatest latitude as to methods must be encouraged. It seems that every physician must go through a certain formative process. Apparently he must make up his mind to have certain methods of treatment. We may do so except in a very few instances. Practitioners either in private practice or in the medical school should make known to the public about the methods which they are using for general proctology, and let the methods conflict and make this Section of Gastro-Enterology, in some way.

Ninth: The American Medical Association should use every propaganda to cultivate the science of proctology. Proctologists are so irregularly placed on their own line, the less we do to encourage, the more probably we will lose.

Tenth: With the secretaries of the Society, the work can go better, and we should try to make the secretaries so that most of the business will be handled one doing it, and the other members being consulted for their influence.

SOME ADDITIONAL MATERIAL

It is a common experience of the physicians by to the recognition of the practice that this activity extends to the general proctologist. ugl, just such a proctology is a period that was ever a time when the proctologist was an outlet of the practice.
he must make a certain percentage of errors in judgment and must have certain clinical experience before his judgment becomes mature. We unfortunately are more or less unwilling to accept advice, except in a very general way. Since so called good surgical practice either is merely a matter of fashion, or is the blind imitation of the methods of some one man who happens at the time to be in the public eye, we can support only such methods as are founded on general principles. This will give the greatest freedom in choosing methods which are suited to the particular ease. In other words, let the method fit the ease and not the ease the method. Let us make this Society the mouthpiece of authoritative American Proctology, in so far as it represents good usage.

Ninth: A committee might be appointed to cooperate with the American Medical Association and the State Medical Societies in propaganda work for the suppression of charlatans and quack remedies. Proctology is one of the famous specialties for this form of irregular practice. The more people are educated in the proper line, the less will be the danger, for at the present time there are probably more quacks than regular men in this line of work.

Tenth: Members should be urged to keep in constant touch with the secretary, and cooperate with all his requests, so that the work can go on promptly and efficiently. No society can be run by the secretary alone. While the president has some influence, most of the real work falls upon the secretary. It is only by everyone doing his part and keeping in active association with his fellow members that this Society can maintain a place of importance and influence.

SOME AIDS IN THE RECORD KEEPING OF ANO-RECTAL CASES.

RALPH W. JACKSON, M.D., F. A. C. S.

FALL RIVER, MASS.

It is a far cry from the itinerant quack pile doctor of days gone by to the respected proctologist of today, with his field of profitable activity extended to include at least the whole colon. Yet it was in just such a lowly way that our specialty found its beginning. There was ever a need for some one to relieve the troublesome ills of the outlet of the digestive track, and the quack saw that need before the