

## THE PROGRAM OF THE COLLEGE AND THE INITIATES' RESPONSIBILITIES<sup>1</sup>

ALLEN B. KANAVEL, M.D., F.A.C.S., CHICAGO

NO more pleasing duty can fall to one than that of officially welcoming into fellowship the initiates of the College. Out of 1,359 applications for fellowship already approved by state and provincial committees, your group of 642 or only 47.2 per cent of the total has been selected as worthy of membership, attesting the care exercised by the authorities of the College in selecting its fellows. Accredited after careful consideration by your state and provincial organizations, chosen after painstaking analysis of your actual results in the practice of surgery, and approved by the Board of Regents only after grave deliberation, you may justly take pride in your induction into fellowship. With it, however, must come a realization of your responsibilities.

Eighteen years have now elapsed since the organization of the College and we may well pause to pay tribute to that distinguished group who inaugurated and has largely directed the policies of the College during its formative years. No one acquainted with American surgery would dare to say that the development and ideals of the College could have been trusted to abler hands when we recall the names of its first ten presidents, Finney, Crile, William Mayo, Armstrong, Deaver, Cushing, Ochsner, Charles Mayo, Matas, and Chipman. These, with Murphy and Martin, have had a large part in the development of the College during its formative years.

Three of these rest in honor, Murphy, Ochsner, and Deaver. Murphy performed the first appendectomy in America, invented the Murphy button for intestinal anastomosis; performed, among the first, suture of blood vessels; and made other highly important contributions to our knowledge of the surgery of the bones, joints, nerves, and lungs. He was ennobled by the Pope for his service to humanity, and decorated by several of the great powers of Europe and Asia for his service to science. Ochsner was one of the first in America to emphasize the value of the microscope to the surgeon and to correlate tuberculous glands of the neck with tonsillar infection. What Paré did for Paris, Billroth for Vienna, Lister for Glasgow, Edinburgh, and London, Ochsner with Murphy and Senn did for Chicago, making it one of the greatest clinical centers of the world.

The American College of Surgeons in honor of Murphy has erected in Chicago a great memorial

building to further its activities, and in honor of Ochsner has established a department of clinical research. In the future other marks of our respect and admiration should be associated with the names of our distinguished founders.

You have now been inducted into fellowship with these leaders of our profession. You have been chosen as representing the advanced surgical thought in your various communities. Whatever honor this induction may signify, it imposes greater demands upon you for service. You may well observe the law subscribed to by the surgeons of England over five centuries ago, namely, that no member "of the said craft of surgery" is to "put any man out of his cure<sup>2</sup> otherwise than the honesty<sup>3</sup> of the craft will,<sup>4</sup> but that each of them be ready if need be or by any of the parties called thereto, then honestly<sup>5</sup> to help each other with counsel or deed, that worship, profit, and honesty of the craft and helping of the sick be done on all sides."

Your organization is one devoted to self-criticism and self-improvement. Nowhere will you find that the College has arrogated to itself judgment upon the acts of surgeons or organizations outside of itself. We have, however, dared to say that after careful survey and study we believe certain surgeons and institutions are worthy of public confidence and trust. Any authority we may have has followed from the sincerity and honesty of our purpose and actions. To you has been bequeathed this great heritage of public and professional confidence. You will be watched with jealous eye and the failure of anyone of you to conserve the ideals of professional honor, of service to the public, and of self-improvement will impair more than you realize, the prestige of the College.

By a study of reports available to you through application to headquarters you should acquaint yourselves with the past activities and accomplishments of the College since, in the few moments at my disposal, only the barest outline of the work of our distinguished director general, his associates, and the various committees, can be given. These accomplishments have found expression,

<sup>2</sup>Steal his patient from him.

<sup>3</sup>Honor.

<sup>4</sup>Allows.

<sup>5</sup>Honorably.

first, in the maintenance and elevation of professional ideals, second, in service to the public, and third, in the advancement of surgical science.

Ideals are not intangible when expressed in action, and the American College of Surgeons has demonstrated their applicability to medical service. Division of fees is not a new evil engendered by modern commercialism. In the 12th century the school of Salerno required of the applicant for its license to practice surgery, that "he must swear to be true and obedient to the society, to refuse fees from the poor and to have no share of gains with the apothecaries." That the determined opposition of the College to this evil has elevated the standard of service, conserved our self-respect, and commanded the confidence of the public is no small part of our contribution to surgical practice.

Our insistence that proper diagnosis must precede operation, that competent service outweigh personal consideration, and that restoration of physiological function is essential to good surgery, has elevated the ideals of practice. Our hospital staff conference with its open confession of error and helpful fraternal advice has made the surgeon desire more the commendation and respect of his discriminating fellow surgeons than the approbation of the uninformed public.

Our inter-American activities have served not alone to cement the professional activities of the United States with South America, Canada, Mexico, and its contiguous republics, but also, we dare hope, have fostered the cultural and political associations of the Western Hemisphere.

Our service to the public has found expression in concrete accomplishments.

To meet the need for nursing of the sick the Knights Templars lined the road of the Crusaders to Jerusalem with hospitals, but the suppurating wounds and fever infested wards recorded by history attest that something more than religious enthusiasm is necessary for competent care of the sick. At a later period Dickens' *Saurey Gamp* caricatures the English nursing home, and all caricature that has lived has had a germ of truth. That hospital service in our own day had not kept pace with the advancement of medical science is attested by the fact that sixteen years ago your College instituted a survey of hospitals and established a minimum standard of service which an institution should attain to be recognized as competent to care for the sick. It is astounding to record that, simple as was this standard, only 89 out of 692 hospitals of one hundred beds and over could meet the requirements. During the ensuing sixteen years at an annual expense of over seventy-

five thousand dollars, the College has maintained a department of hospital inspection and assistance. By education of hospital boards, physicians, and the public, the evil has been corrected, and our last report shows that 93 per cent of these same institutions have reached or surpassed the standard. Equal improvement has been secured by similar surveys extended to smaller hospitals. We have educated the public to realize that something more than good intention, religious atmosphere, and bricks and mortar are necessary to care for the sick; that hospitals must be equipped with chemical and X-ray laboratories, with dietary, social service, and other essential departments. We have educated boards of trustees to recognize the necessity for proper equipment and adequate service, to assume a mutual responsibility with the superintendent and medical staff to attain this end, and to take pride in the fact that they are maintaining not a simple nursing home or custodial institution, but a modern hospital and social medical center devoted to competent care of the sick, the elevation of ethical standards, and the advance of medical science. Our studies of the cost of medical care, proper and economical construction of hospitals, simplification and standardization of hospital supplies and equipment have supplemented and aided their campaigns for better institutions.

By our insistence upon proper equipment, ethical service, better records, more careful study of patients, we have supported the medical staffs of the more isolated institutions in their endeavor to bring to their communities the same competent ethical service attained by university hospitals.

Our yearly report of accredited hospitals and public meetings have informed the public as to where competent care can be secured, aroused the pride of communities in their local institutions, stimulated interest in scientific medicine, and educated the people as to the futility of charlatanism, faith healing, and cultism.

Our surveys as to the care of employees in industry, investigations of compensation laws and co-operative medical service, studies of accident insurance, setting up of medical organizations in industry, bid fair to be of material aid in the adjustment of these vexed questions so vital to industry, insurance companies, and, most of all, to the injured.

Important as have been these contributions to public welfare, they are insignificant compared with the achievements in the elevation of surgical service and the application of medical science. It has been our ambition to remove carpentry from

surgery, to make available in every community honest, competent surgical service, to establish university ideals of diagnosis and service in every hospital, and to bring to every surgeon the opportunity for self-improvement. We have endeavored to make every hospital a post-graduate school. Our staff conferences have fostered the group study of results, thus emphasizing the necessity for better preliminary diagnosis, more judicious consideration as to the necessity for operation, more care as to the choice of surgical procedure, and more painstaking attention to those entrusted to our care. These conferences have engendered mutual helpfulness instead of competition, open acknowledgement of failures, and staff study of the means to avoid them. The surgeon is no more an individualist, but an active member of a scientific staff-faculty, assuming with others a mutual responsibility for scientific, competent, and kindly care of the unfortunate sick.

The study and tracing of infections to their source, the group consideration of complications, and the verification of diagnoses and analyses of fatalities by postmortem examinations, has increased our knowledge and insured to patients better care and better prognoses.

The insistence upon adequate records has resulted in the more intensive study of the patient's disease, insured fewer unexpected complications, and lowered the mortality rate. This scientific staff activity has resulted in better training of internes and stimulated the aspiring surgeon to seek his training by assistantship to competent men rather than to acquire his knowledge by incompetent surgery upon a confiding public. From this intensive study of disease, availability of adequate records, and the facilities afforded by the College through its literary research department and circulating package library, the literature of medicine has been enriched by many valuable contributions, and, equally important, the surgeon has been stimulated to keep informed as to the advances of medical knowledge through constant reading of current literature.

Our district clinical meetings have increased our knowledge of local problems, helped in the educational program, and shown that equally good surgery is done in every part of the country.

Supported by the fellows, our commissions for the study of sarcoma, cancer, fractures, traumatic surgery, technique, and the problems of surgical research have not alone advanced medical science, but also secured for patients better treatment, less disability, and longer life.

The College of Surgeons makes no claim to being the only activating force for better medicine

and better surgery, but that it has inaugurated many movements for better and more ethical service, stimulated the whole profession to higher ideals, and done much to advance the frontiers of surgical knowledge and to insure patients competent care, no one can deny.

This brief survey of the activities of your College should not be ended without some consideration of its interest in public education. Charlatanism is not a modern evil. In the 17th century quacks pretended to remove stones from the head to cure insanity. Jonna Stevens' recipe for the cure of stone, consisting of a mixture of egg shells, garden snails, swine cresses, soap, and other ingredients, was purchased for the public by act of Parliament for five thousand pounds. In some of our states today the number of pseudophysicians equals the number of those practicing scientific medicine. Conscious of our own rectitude, engrossed in the joy of scientific investigation, proud of our guild accomplishments, we stand astounded that our worth, sincerity, and scientific attainments are not universally acknowledged; that the faith healer, cultist, and quack share with us, even in small part, in the confidence of the public. With outraged feelings we threaten to expose and fight them. I suggest that the only effective measure to combat these evils is found in the education of the public as to the principles of scientific medicine and its victories over disease.

In extenuation of our failure to accomplish this it is urged that the advancement of science is not news, that the translation of the discovery of a new bacterium or a new serum into its effects upon human life and its benefits to society is as difficult to the average man as the proper evaluation of Einstein's theory of relativity is to most of us. But I question whether more dramatic pictures can be drawn than those portraying the advances of scientific medicine. How often have we reminded the public of our victory over the plague that lifted a paralyzing horror from the civilized world, that black death which carried off one-fourth the population of the civilized world, broke down all restrictions of morality, decency, and humanity, while ghouls slunk through the deserted cities afraid to rob even the putrefying bodies that littered the streets (Garrison).

How often have we paid public tribute to Gorgas, Lazear, Reed, Carroll, and Agramonte and recalled the ravages of yellow fever that in our own day devastated our cities, paralyzed industry, established shotgun quarantines in our southern cities, and left the whitening bones of thousands as mute evidence of the brave but futile

endeavor of the French to build the Panama Canal, that now, through the unselfish devotion of these physicians, permits untrammelled commerce between the Atlantic and Pacific with its beneficent influence upon the amity of nations.

How often have we told our patients of Pasteur and Lister whose researches opened the door of hope to the tens of thousands suffering from surgically curable diseases and do we mention the scientists who removed the hand of death from tuberculosis, syphilis, diphtheria, diabetes, typhoid and cholera, and many other great enemies of health and society?

The great dramatic story of the modern conquest of disease may be told ethically, modestly, and honestly and yet by its recital confirm the confidence of the public in the scientifically trained physician.

The American College of Surgeons regards the education of the public as to scientific medicine an official duty and your personal obligation.

On behalf of the officials of the American College of Surgeons, I welcome you to this fellowship of ideals in self-improvement, in the advancement of the science of surgery, and in service to the public.