

tracted gifted students who have already had considerable clinical and laboratory experience, and who, after three years of intensive study in the diagnosis and treatment of cancer at the Memorial Hospital, are well-fitted to go out and take charge of cancer departments of other hospitals.

In looking over my forty-four years of active hospital work, I find it hard to realize the numerous advances in surgery that have taken place during this period. I recall that Samuel Gross, in his Centennial address in Surgery in Philadelphia in 1876, declared that surgery had reached its acme and that little further could be expected in the way of improvement or discovery. But it was scarcely a decade later when Lister brought out his method of treating wounds by antiseptics. This marked the beginning of a new era for surgery, which made greater strides during the next decade than had been made in the two-thousand years preceding Gross's confident prophesy.

What of the future, and whither are we going? This is the question that was recently asked by Professor Faure in the Bi-centennial report of the Academic Royale de Chirurgie. While he assures us that there are still beautiful days for surgery, he laments the fact that our successors will never see spread before their eyes the magnificent horizons which during the last forty years have opened themselves to our view. Faure, like Gross, believes that further progress in surgery is quite unlikely.

If the great discovery of the cause of cancer is made and it results in some real effective control of the disease, a considerable proportion of surgical operations will no longer be necessary. When this day arrives, I am sure no one will welcome the happy event more eagerly than the surgeon himself. Prophecy, however, is a dangerous occupation, and one in which I shall not indulge.

At the present time one cannot fail to note certain trends toward a socialization of medicine as shown by the recent Wilbur report. If these continue along the lines suggested by that committee, I feel sure that medicine and surgery will lose much of their attraction for the physician and surgeon of the coming generation. On the other hand, the more exhaustive survey of medical education recently made by the Lowell Committee gives ground for hoping that this tendency towards socialization of medicine may be kept in bounds, and that some way may be discovered to render the proper care to the sick and in-

jured both in cities and in rural communities without sacrificing the family physician, who still retains the most important role in Medicine today.

In 1917, my old friend and classmate of '84, the late Edwin McClellan, decided to build a hospital in his old home town of Cambridge, New York, in the foothills of the Green Mountains, in memory of his mother who was still living. I had some small part in helping him plan it; but he, having made such a careful study of hospitals, and having a longer vision than I, built a hospital of sixty beds instead of one of the thirty I thought would be sufficient. This hospital supplies the medical and surgical needs of a large number of small towns and rural communities. The local doctors at first regarded it with suspicion, in fact, with an undercurrent of hostility, for they believed it would injure their practice. Within a few years, however, they learned that the hospital was of the greatest possible help to them, and they became its loyal supporters. Within less than ten years the hospital of sixty beds proved too small, and Mrs. Edwin McClellan, the widow of the founder, added another pavilion as large as the original one, making a hospital of one hundred beds. It has a training school of nursing affiliated with Skidmore College, and is the second nurses' training school in this country which has a combined degree of Bachelor of Arts and Bachelor of Nursing. I was asked by Mr. McClellan to act as Surgeon in Chief of the hospital at its opening in 1918, and for the first two or three years made weekly visits doing much of the major surgery. I was fortunate in securing two excellent Resident Surgeons, Dr. Stanley T. Fortuine and Dr. D. M. Lee, in 1920-1921, and since then up to the present have been making monthly visits. Nothing in my professional life has given me greater satisfaction than my work at this hospital, in which I have come in contact with the family doctor of these rural communities and have learned to appreciate his sterling qualities.

In closing these rambling remarks, once more I beg to thank not only the Toastmaster and the distinguished speakers of the evening for the very generous and much too flattering tributes they have paid me, but also the Medical Board of the Memorial Hospital, Dr. Burton J. Lee, who planned this testimonial dinner, and the many friends who have gathered here tonight to make this the most memorable occasion of my life.