

Dr. Warren Boston 13

AN ADDRESS

TO

THE GUARDIANS

OF THE

WASHINGTON ASYLUM,

AND THE

MEMBERS OF THE BOARD

OF

ALDERMEN AND COMMON COUNCIL,

BY A PHYSICIAN.

“Bonis nocet, quisquis pepererit malis”

Controversy ✓

IN REPLY TO AN ADDEESS

BY THOMAS HENDERSON, M. D.

**PROFESSOR OF THE PRACTICE OF MEDICINE
IN WASHINGTON.**

WASHINGTON CITY.

.....
1827.

Dr. Warren
Brook

WASHINGTON

WASHINGTON

WASHINGTON

WASHINGTON

AN ADDRESS

*To the Guardians of the Washington Asylum, and the Members
of the Board of Aldermen and Common Council.*

GENTLEMEN :—

In presenting you this address, I have been actuated by a principle which irresistibly compels me to expose the character and conduct of one whom, in my heart, I believe to be an enemy to the harmony and happiness of society. And though I write you over an anonymous signature, yet, (as I have referred you to persons and places) it is hoped you will be no less attentive to the facts which I have related.

I am, gentlemen, &c.

MEDICUS.

August 24th, 1827.

STATEMENT

AN ADDRESS

Delivered at the
Annual Meeting of the
British Association for the
Advancement of Science,
at Bath, 1861.
By
JOHN STUART MILL,
Esq., F.R.S., &c.
&c.
&c.
London: Printed by
Longman, Brown, Green,
& Co., 1861.

1861

ADDRESS.

"Bonis nocet, quisquis peperecit malis."

Considerable excitement has been produced in this city in consequence of the extraordinary course pursued by Dr. Henderson, a *Professor* of Medicine, who has, a short time ago, been induced to shift his quarters and locate himself among us for the ostensible purpose of pursuing his profession. This *Professor* had scarcely taken up his residence here when he placed his affections on the Poor House. He fancied that if he possessed only the regulation and entire control of that Institution, the sphere of his usefulness, and the sound of his fame, would be, thereby, very much extended. In accordance with that great general principle which nature has impressed upon the human mind, he had no sooner singled out the object of his affections, than he began to contemplate that plan which offered, to his morbid apprehension, the greatest possible chance for insuring the gratification of his desires. But the designs of the cunning are generally frustrated when the dictates of reason are drowned in the ebullitions of unprincipled passion.

His first *modest* and very *reasonable* request was made to Dr. McWilliams, who then was, and who still is, the regularly appointed Physician to the Asylum.

He asked Dr. McWilliams if he would have any objections in giving up to him the management and direction of the Medical Department of the Washington Assylum? observing, at the same time, that if the salary was any object to him, he (Dr. McWilliams) might still continue to draw it.

This singular proposition, at first, somewhat astonished Dr. McWilliams, who, after some time, told the *modest Professor*, that he, "as a man of honor and principle, could not comply with his request—that he could never consent to hold any situation, and draw a salary, for which he rendered no services."

The gentleman, however, resolving to pursue his darling object, renews his endeavors with a zeal that would have been laudable if exerted in an honorable cause.

Knowing that in a few days the Guardians of the Poor should hold their annual election for the purpose of choosing their physician, he presented them a memorial

which, it is said, covered three or four pages of *fools-cap*. In this memorial he represents numerous advantages that would result, both to the corporation and asylum, from his election—he endeavors to convince them of the propriety of complying with his measures—he greatly underbids Dr. McWilliams; even proposing to do the duties for nothing, if they would only elect him Physician to the *Washington Asylum*. This, no doubt, would have sounded well at a distance. It might have been the means of convincing the good people of Georgetown, in which this *professor* has lived during the last twelve or fourteen years, that in withdrawing even the little confidence which they once reposed in him, they exhibited a total want of that quickness of perception—that acuteness of intellect which enabled the enlightened inhabitants of Washington to discover and appreciate, at once, his *talents* and his *virtues*.

The Guardians of the Poor, not having had their consciences graduated according to the scale of ethicks, which regulates the moral conduct of Dr. Henderson, thought proper to reject his proposals, and re-elect Dr. McWilliams.

But the *Professor* is not one of those whose sensibility is to be awakened even by this second mortifying rebuff. He made, it is said, another appeal to the Board of Aldermen in council, has presented to that body the memorial which he originally laid before the Guardians of the Asylum, hoping that a law might be passed compelling the Guardians to break the appointment of Dr. McWilliams, and give the situation to him, as he was the lowest bidder. Here again he has failed.

It is unnecessary to say that the physicians, generally, as well as every enlightened member of society, look upon such unprincipled conduct with contempt and indignation. Some say that, had he intended to commit moral suicide, he could not have adopted a more successful plan of carrying his intentions into effect. Do you suppose that Dr. Henderson now blushes when he thinks of the mortifying result of his unprincipled perseverance? Does he avert the public gaze and withdraw himself from the presence of his fellow man, as a lump of moral infirmity—as a mass of human depravity, unfit to mingle, or be seen, among honorable men? But, no. *Mirabile dictu*: No, he has again addressed the *Guardians of the Poor*, in a printed pamphlet, in which he not only attempts a justification of

his conduct, but even hopes that a reconsideration of the subject may yet be the means of placing him in the *poor house*.

He cites what *he* alleges to be the course pursued by city authorities towards Medical Colleges, with respect to alms-houses and hospitals. To follow him through the different cities, colleges, alms-houses, and hospitals to which he has alluded in his address, is not my present purpose. Neither is it necessary that I should do so in order to convince you that he has in this, as in other instances, been guilty of setting forth the foulest and most contemptible mis-statement of facts, as well as the most infamous and degrading falsehoods and equivocations.

He sets out with a palpable untruth when he says "that there is no hospital or alms-house in this country, in which, if convenience of location will allow medical students to see the practice or the professors in the school to attend it, a fee is paid to a medical attendant." It has been well and appropriately said, that "there is no difference in moral turpitude between asserting that which we know not to be true, and that which we do not know to be true, when the assertion has been made for the purpose of deceiving others, and advancing the personal interest of him who makes it. Let the Doctor choose either horn of the dilemma, and I can prove that he has been guilty of the grossest misrepresentation, and that he has acted so, in order to advance his own pecuniary interests, notwithstanding his hypocritical cant about "public good" and "purity of motive."

In the first place. In the city of Baltimore there is an hospital and alms-house, in both of which, a yearly salary is paid to the attending physicians, and in neither of these institutions have the professors of the University ever had the control of the Medical Department. Does Dr. Henderson pretend to assign *location* as the reason why they have not? Then *a fortiori*, the objection bears against himself, because it is well known that in winter the difficulty of going from the City of Washington to the Asylum is greater than that which presents in going from Baltimore either to the alms-house or hospital.

That he has been influenced by pecuniary considerations, can be proved by his own confession. Will he deny that he said, that the management of the Medical Department of the Asylum would be a great object to him; as he wished to

fill his office with medical students, and as an inducement for young gentlemen to study in *his* office, he would present them the advantages of attending his Clinical Lectures at the Asylum. If he dare give the negative to this assertion, it can be proved by Dr. McWilliams.

Dr. Henderson, in his statement respecting the different medical colleges in this country, has artfully endeavored to impose on the Guardians of the Asylum, by leading them into the belief that the professors of medicine have always enjoyed a monopoly—an important control over the hospitals and alms-houses which the inhabitants of our large cities have, in their benevolence, established for the reception of the poor and afflicted. But upon the slightest examination of facts, such a position will be found to possess not the least shadow of truth for its foundation.

“In Philadelphia,” he says, “where the first medical college was organized, the hospital practice was given for the benefit of the school.” To prove that this assertion is false, I might refer you to Dr. Cutbush, who resided for four years in that institution. Dr. Barton and Dr. Park were both medical attendants, though neither of them ever filled a professor’s chair in the medical college. In fact, the trustees of that benevolent institution elect whom they please, whether professor or practitioner of medicine.

He states that “in Baltimore, in consequence of the remoteness, both of alms-house and hospital from the city, the citizens have created and support an Infirmary for the express purpose of affording facilities to the medical school. The professors attend it without fee.” This is another of the Doctor’s unblushing misrepresentations. That Infirmary, instead of having been *created* either by the city authorities, or the citizens, (as Dr. Henderson says) was erected and supported by the Professors of Medicine in the University of Maryland. It was well furnished for the genteel accommodation of those whose circumstances enables them to pay a stipulated compensation, per week, for medical and other attendance during the cure of their respective diseases. They have supplied it with a splendid library, and furnished apartments in the most elegant manner for the reception of young gentlemen as resident students. These students pay the Professors a certain sum per annum, for board and accommodations in the Infirmary, and their tickets to attend the public lectures at the College. They

hear clinical lectures on surgery and practice of medicine daily, throughout the year, and they take charge of the patients when the professors are absent. Those who are not *resident students*, pay five dollars for the privilege of attending clinical lectures in the Infirmary, during the winter session; but it is entirely optional with them to take the ticket or not—it is not a *sine qua non*. Dr. Blake and Dr. Thomas, of this city, who graduated at the Baltimore school, can corroborate this statement.

It is obvious, that the privilege of entering into such a speculation as this, is as free to the professors or practitioners of medicine in Washington, as it was to those of Baltimore.

To induce you to comply with his request, Dr. H. has made loud and frequent appeals to the “disinterestedness and purity of his intentions, and the benevolence of his motives;” he says that he is influenced solely “by feelings of philanthropy, and his anxiety to promote the cause of medical science”—he calculates a *specious* saving to the Corporation of 500 dollars, per annum, from the changes which he wishes to effect. To these a passing consideration is due.

His *disinterestedness* and *purity* may be understood from his own confession to Dr. McWilliams, to which I have already alluded, and from which it is obvious that he has been influenced, in this whole affair, more by his own mean and sordid views, than by any desire to advance the cause either of science or humanity. Had he been influenced solely by these laudable motives—had he been prompted purely by feelings of philanthropy—had he been actuated only by a desire to promote the science of medicine, he needs not have resorted to means so infamous in order to effect such an object. Two years ago, he, himself, Dr. May, and Dr. Sewall, as a committee from the medical faculty, waited on the Trustees of the Assylum and Dr. McWilliams, and solicited the privilege of delivering clinical lectures on medicine and surgery to the medical class, during the winter months in the wards of the Assylum. The privilege which they so anxiously solicited, was promptly and cheerfully granted them. Do you see him immediately accompanying the medical class to the Assylum? Do you find him among the wards of that Institution, surrounded by the young devotees of science? Do you hear him demonstrate the cause, and point out the symptoms of disease? Do you see him exhibit those indications of cure which the com-

bined efforts of science and philanthropy have collected for the removal of disease and the promotion of human happiness? No, gentlemen, no: that privilege which he so anxiously sought, which he considered so important to the medical class, he has shamefully disregarded! Two years have now elapsed, and he has never yet availed himself of the opportunity of giving a clinical lecture to the Medical class, either at the Assylum, or any other place. How can he apologize for this flagrant neglect of duty? How will he account to his conscience for having published to the world, in the yearly circulars of the College, that those clinical lectures should be delivered, and that the students attending the medical class should have free access to them? Has he not, in doing so, endeavored to allure young men to his class by holding out inducements merely to deceive? Has he not excited expectations in the minds of students which he has never gratified? How will he, as the Teacher of a liberal science, ask for public patronage after having thus shamefully violated one of the fundamental principles of morality?

But he now tells you, that he has "objections to serving under his (Dr. McWilliams') directions, or that of any individual." Now let me ask, why did he not urge this objection two years ago, when he waited on Dr. McWilliams and the Guardians of the Assylum—when he solicited and obtained the asked-for privilege? It is evident, that this objection (if it be one) existed in as full force then as it does at the present time. But his intellectual faculties have been so benumbed—so involved in tartarian darkness, that he has never, until he breathed the fashionable atmosphere of Washington, discovered that the practice which he *himself* desired, would be "unbecoming" the *dignity* and *honor* of his *elevated* station. I am inclined to think, that his ideas of honor and dignity, as well as morality, must undergo another revolution, before they are countenanced in the City of Washington.

The Professor of Surgery, though some cases did present at the Assylum, never could be induced to exhibit to the Students, an operation on the living body at that Institution. It is true, that Dr. Staughton, the Professor of Surgery, got five or six of the Students, some days previous to last Christmas, to go with him into Montgomery County, Maryland, for the purpose of seeing him perform an operation in Surgery. It may not be improper to detail, in this place, the outlines of the case. Capt. Beckwith, some time in the month of December last, in a personal rencounter with a

neighboring gentleman, received a stab with a pointed instrument, (either a dirk or knife) in the region of the neck, near the angle of the jaw. A large *diffused* aneurism of the carotid artery was the consequence. A messenger was sent, with all possible haste, to Washington, for a Surgeon, to take up the artery before the patient was snatched from existence. Dr. Staughton being a *Professor* of Surgery, the messenger was directed to him, as a person who ought to be capable of performing the duty required. The Professor was called on, and consented to go. Accompanied by five or six young Esculapians, anxious to witness an operation—they all repair to the scene of horror—they behold the tender husband of a lovely woman, the affectionate father of a rising family, *in articulo mortis*, hourly waiting the bursting of the *tumor*, and his rapidly approaching dissolution. At the presence of the Doctor, a ray of hope was discovered lighting up his anxious countenance. The fond partner of his bosom, with the pledges of their love, approached the Professor, bathed in tears of the most thrilling sorrow. Can his life be saved? Will my father yet live? is murmured all around. The wound, together with the circumstances attending its infliction, were immediately examined,—his neck was measured, in order to ascertain, if that space, which is described in *books*, as necessary to the performance of the operation, remained. After a complete examination of the case, the Professor came to the conclusion, that there was not sufficient space to perform the operation—that it was impossible to save his life—that if he were to cut down to the artery, he would be inundated with blood, and that the patient would die under the operation! I will not attempt to describe the scene of woe that followed this opinion.

The Professor and Students departed from the “house of mourning,” and after having perambulated Montgomery County for two days, they arrived in Washington, exhausted and depressed with fatigue, mortification, and disappointment.

On the next morning, those Students, who remained, waited in the lecture room with great anxiety, in order to hear the result of the operation. The Students arrive:—What news about the operation? was the general salutation. No operation!—the aneurism had proceeded so far, that it was found impossible to operate,—was the general reply. Presently, Dr. Staughton arrived, and proceeded

to detail to the class a scientific and circumstantial account of the whole affair. He informed them of the directions of books on the subject—told them what he had before told the unfortunate man in the country—represented to them the difficulty of performing the operation—saying, “that every time you plunge your knife into human flesh, your progress is obstructed with blood”—(and this was a *true* fact) he told them “that, after you cut down through blood and muscles, and nerves and tendons, you at last arrive at the common sheath which envelopes the *par vagum jugular vein* and *carotid artery*.” (the vessel which was wounded.) “You then open the common sheath with a stroke of the knife,” and here he represented in the most droling, onerous, tragi-comic style, the manner in which “the jugular vein is found ro-o-ling over the artery, ro-o-ling over the artery.” This ludicrous *anadiplosis* contrasted with the awful scene which the Doctor was describing, almost overcame the gravity of the class: many were obliged to yield to its irresistible impulse, and give full play to their risible faculties. However, he concluded, by *demonstrating* the impossibility of performing the operation safely—saying, that he expected “the gentleman was dead,” at the time he was then lecturing. It is supposed, that the reader also thinks that he was dead and buried—his wife a widow, and her children fatherless: but no! he is not dead yet. Captain Beckwith, like a brave soldier, determining to have another *throw* for his life, resolved on going to Baltimore, and try to induce some of the Surgeons there to operate upon him. A carriage was immediately ready, and he was driven off to Baltimore in all haste. The faculty was consulted, and Dr. Buckler, then adjunct Professor of Anatomy in the University of Maryland, determined to operate. Captain Beckwith was placed in a proper position; Dr. Buckler commenced the operation,—cut down to the cellular sheath, opened it, cast a ligature round the carotid artery—tied it up—dressed the wound—and sent Capt. B. home literally well—Dr. Staughton and the roling of the jugular vein, “*to the contrary, notwithstanding.*”—Thus, by the promptitude, energy, and extensive knowledge of this distinguished young Surgeon, Capt Beckwith, in the vigor of his life, and the prime of his usefulness, has been snatched from the jaws of death, and restored to the arms of his wife and the smiles of his children. This, together with Dr. Staughton’s incapacity to reduce a luxa-

ted humerus and some minor failures, have completely established *his reputation as a Surgeon*. To talk to a Student now of his performing an operation, would be considered as quixotic as any adventure of the hero of la Mancha.

Dr. Henderson, in his proposition, has calculated a saving to the Corporation of \$500. Some of the items which go to make up this sum, are \$100 which, he says, a resident Student will pay—and \$100 that *he promises*, will be paid by the Students of the College, for the privilege of attending *his* Clinical Lectures in the Alms-house! Here, again, he is raising your expectations, by holding out advantages which he either knows, or ought to know, cannot be realized.

In the first place.—The few lazars, with sore legs, chronic rheumatism, and worn-out constitutions, who have sought an assylum in that Institution, offer not a sufficient inducement for a Medical Student to pay for the privilege of *living among them*, while he can see a more advantageous practice in the office of any distinguished practitioner in the District. It is well known, that the private Students of the Physicians of the City and Georgetown, can see as much, and some of them even more practice, than their scientific reading will justify them in attending to.

He promises you one hundred dollars from Students for the privilege of attending his Clinmical Lectures!—Now he must either have intended to deceive you, or he must be possessed of the most unconquerable vanity, else he never would have offered such a *bonum* as this. To convince you that I speak correctly, it will be necessary to investigate the grounds upon which he bases such an extravagant proposition. To do so satisfactorily, would lead me to the origin of the present Medical School, and the manner in which he happened to be appointed Professor. It is sufficient to say, that had his character as a man, and his talents as a Physician, been as well known then as they are now, to those who were instrumental in his appointment, it is confidently believed, that he would not, at this time, be importuning the Trustees of the Assylum, nor would I be exposing that imbecility of mind and obliquity of moral feeling which so eminently characterize him.

Twenty-two Students attended the first session of the Medical Department. It was a short session, and most of the Students from the City, were disposed to be pleased.

The second session twenty-eight Students attended, many of whom, *expressed* great dissatisfaction with the Lectures on Theory and Practice, and Surgery. The third session, last winter, exhibited a great falling off in the number of Students. This falling off in the ranks of the Medical Class, was to be attributed particularly to the paucity of talent in the Professors of Theory and Practice, and Surgery. It was a rare occurrence, that even one-half of the class submitted to hear Dr. Henderson's lecture. As soon as his hour arrived, part of the Students would go off to the Billiard room—some to the Tavern—and frequently almost as many staid up stairs, playing cards, as went down to hear him lecture. In doing so, they justified themselves by saying, that his lectures were so unprofitable, that they had always a less satisfactory knowledge of the subject upon which he lectured, after he concluded, than they possessed previous to his commencement. Even some of those who attended his lectures regularly, acknowledged that they did so more through courtesy, than from the expectation of deriving any instruction from them.

That the Students should pursue this course, is a matter of no surprise, when the character of Dr. Henderson's lectures is taken into consideration. They may justly be described as a heterogeneous mass of isolated facts and conflicting opinions, drawn from Rush, Cullen, Good, Sydenham, Van Swieten, and others; collected without taste, arranged without judgment, and forming a dark, incongruous, literary mole; illustrating no pathological law, coming to no general or satisfactory conclusion, and presenting no clear distinct idea to the mind of the Student who has plodded after him through his tenebral labyrinth, without a clue to direct his way, or a light to guide his path. Such a combination of difficulties is well calculated to paralyze the energy of the firmest and most persevering devotee of Medical science. The ardent ambitious Student departs from his lecture room almost disgusted with a science which the *Professor* has involved in mystery and confusion. Dr. Henderson having no clear practical ideas of Medical science, can, of course, impart to his auditors no satisfactory information on a subject which he has accidentally been called to teach. The Student is consequently obliged to resort to his private tutor, in order to have the obscurities removed, and the disease intelligibly explained, or he must

yield to that negligence and despair of success which invariably accompany that want of classical arrangement, that *vox et prætera nihil*, that rhapsody of words to which no definite or satisfactory idea can be attached. To substantiate what I have here stated, I would refer to the young gentlemen who have graduated at the school, and who have attended the three courses of lectures which have been delivered in the Medical Department. Dr. Wing, Dr. Kirkwood, Dr. Hagan, and Dr. King, can testify to the truth of the facts and opinions which are here stated.

Now, I would ask candidly,—can any man, for a moment, suppose that Medical Students will either walk or ride through the mud up to the poor-house, and *voluntarily* pay for the privilege of hearing Dr. Henderson's clinical lecture, when they will not listen to his lecture delivered at the College, in the midst of the City, with a brick pavement to the door, and for which lecture they are *obliged* to pay, by the laws of the College? I should think not.

But even supposing you were to yield to his repeated importunities, you would soon find that in a pecuniary point of view, it would be a real loss to the Corporation. In the first place, before you could charge resident Students for their accommodation, you must furnish apartments in a style equal to similar institutions—you must supply them with a variety of expensive surgical instruments—you must fill the wards with patents from the City or elsewhere. All this must be done, before you can render it an object for young men to pay for the situation of resident student.—When all this is done, instead of diminishing the expense of the Corporation, it is confidently believed, that it would vastly increase it.

He says, that “by recent arrangements in the chair of Chemistry, the school has concentrated much good feeling *in and out* of the profession.” If, by his expression, he intends any disrespect to Dr. Cutbush, he may rest assured that the poisoned shaft will recoil upon himself. As a man of science, and as a gentleman, Dr. Cutbush occupies too elevated a position, to be affected by the malevolent insinuations with which Dr. Henderson would insiduously assail him.

In his pamphlet, he says, that it has been urged against him, that he is a “stranger of recent introduction and pretensions in the Medical circle of Washington;” and in order to meet this objection, he tells you, that, instead of being a stranger, he has enjoyed, in the City of Washing-

ton, "a highly respectable practice for more than ten years"!! I should like to know who has ever before heard of his "highly respectable practice in the City of Washington." So very improbable is this, that in Georgetown, where he has resided for the last 12 or 14 years, he had become so obnoxious to the people, that he had scarcely a single patient, while other Physicians, of "recent introduction," were enjoying an extensive and profitable practice.

But he is not a stranger. Happy would it be for himself, happy would it be for his family, happy for the institution to which he is attached, if he were even an entire stranger, a *novus homo* in the literal sense of the term. A liberal and enlightened public would then have supposed him honorable until he had fully proven himself unworthy of their confidence. But his character preceded him. Marked by treachery and dissimulation, cunning and deceit, he had become obnoxious to society where ever he lived, and he is now rapidly confirming that character which all good men detest.

Towards a student of the College he has acted the part of baseness, treachery, and deception, which, if exercised towards his equal in years and iniquity, would have rendered him contemptible in the estimation of a virtuous community; but when exercised towards a pupil, who had listened to his lectures for three successive seasons, it was infamous, it was hateful.

Still Dr. Henderson may get men, aye, and good men too, to sign him a certificate of character. Pity for his family may induce many to do so: as the tear of sympathy has rolled down many a virtuous cheek, and pardon has been asked by many a feeling heart, for the most abandoned felon that ever dangled on the gibbet.

The author of our existence has wisely arranged the various objects of creation. Where he has planted the bane, he has placed the antidote. Before the snake can discharge the deadly poison into the vitals of its intended victim, it is obliged to warn him by its rattles; before Cain was let loose upon society, he received a mark by which his character might be known. So it is with Dr. Henderson: nature has impressed upon his forehead that obliquity which is found to pervade the moral and intellectual, as well as the physical man.

MEDICUS.

Washington, August 25, 1827.