Henry I. Bowditch, M.D.

Memorial Meeting.
Henry Ingersoll Bowditch, M.D.

THE MEMORIAL MEETING OF THE SECTION FOR CLINICAL MEDICINE, PATHOLOGY AND HYGIENE OF THE MASSACHUSETTS MEDICAL SOCIETY, SUFFOLK DISTRICT.

ALBERT N. BLODGETT, M.D., SECRETARY.

A Special Meeting of the Society was held on March 16, 1892. Drs. F. Minot, J. C. White, C. F. Folsom, F. C. Shattuck, and R. W. Lovett constituted the Memorial Committee.

DR. FREDERICK I. KNIGHT

read the following sketch of Dr. Bowditch's life:

Dr. Henry Ingersoll Bowditch was born in Salem, Mass., August 9, 1808. His father was Nathaniel Bowditch, the eminent mathematician, and his mother Mary Ingersoll; parents who have transmitted in a remarkable degree to their descendants the honesty and strength of character peculiar to them. The father, as is well known, educated himself in hours which by others were taken for rest or recreation; and this hard experience led to restrictions in the education of the children, which, though some of them were afterwards regretted by the latter, may have been on the whole beneficial. As one instance, they were never allowed to devote any time to music, the study of which, considering the hard struggle in life before them, the father considered a waste of time, and likely to lead to greater waste in the enjoyment of it. That this and other restrictions were imposed with considerate tenderness is abundantly shown by the thorough respect and obedience of the children.
The only school in Salem attended by Henry, of which I have any positive knowledge, was the Salem Private Grammar School situated on Green St., which was kept at the time by John Walsh, son of Michael, of arithmetic fame. I know that Dr. Bowditch attended here in 1822, for I have seen a programme of an exhibition at the school in this year, on which he appears for a Latin dialogue with J. B. Bigelow. It is interesting to notice on the same programme the names of Henry W. Pickering, of this city, and Benjamin Peirce, late Professor in Harvard College. The fact that Dr. Bowditch was selected for a Latin dialogue argues, I think, that he was at this time a good deal more of a student than he used to represent himself. He was, however, not a "house-rat" (as we were accustomed to call boys who stayed in with their books all the time), but was a thorough boy, fond of outdoor exercise, full of life and innocent fun. On a photograph of the typical Salem house in which he was born and lived, he has marked an upper middle window as one from which he and his brothers used to pelt with beans the promenading boys and girls on Sunday, they themselves being allowed out on that day only to go to and from church. There is a tradition also of the subject of our sketch having had a hand in introducing some fire-crackers into a certain old lady's tea-pot.

The family moved to Boston in 1823, Dr. Nathaniel Bowditch having been invited to the Presidency of the Massachusetts Hospital Life Insurance Company, which afterward under his management attained such wonderful growth and prosperity. In Boston Henry attended the Public Latin School, entered Harvard College as a sophomore, and graduated in the class of 1828.

Dr. Bowditch always represented himself as an indifferent student, as "students" were estimated in those days, that is, he was not a dig for recitation marks. None of his teachers appear to have excited any enthu-
siasm or admiration except Prof. Charles Follen, to whom he was always grateful for having suggested and urged upon him the study of the German language. This was very likely the only personal interest which was ever shown him by any member of the Faculty. However this may be, and student or no student by the gauge of the day, I am sure Dr. Bowditch was busy at something, for a more industrious man I have never seen. He was always occupied. I have wondered whether the non-use of tobacco might not have had something to do with this, knowing how often it serves its devotee as both companion and occupation. He apparently had one of those brains rested by change of work. He never sat still musing, or walked up and down thinking out the solution of any subject, but he thought with pen in hand.

After taking his academic degree, Dr. Bowditch entered the Harvard Medical School. What determined his choice of a profession, I have not learned, except that his mother was desirous that her sons should take different professions, and he felt himself more inclined to medicine than to theology or law. There are now few living associates who can tell us of his immediate, enthusiastic devotion to his profession when once chosen, but of the fact there is no doubt. The medical Faculty at this time consisted of Drs. Walter Channing (Dean), John C. Warren, James Jackson, Jacob Bigelow, and John W. Webster. In September, 1830, he entered the Massachusetts General Hospital as medical house-pupil, and served one year, his colleague on the surgical side being Thomas R. Thomas, Jr. He received his medical degree in 1832, and went to Paris, as was the custom in those days, to complete his medical education. It was natural that a man of his mind and home training in regard to exact truth should have been soon attracted to Louis and his teachings, and eventually to have been thoroughly de-
voted to them. The numerical method as it was called, the recording and analyzing of symptoms in a large number of cases without any preconceived theory of the disease, simply the recording of facts, and drawing logical deductions from them, was then being expounded by Louis, whom Dr. Bowditch delighted to call master. So thoroughly did Dr. Bowditch always practise this method, so thoroughly did he identify himself with it, and so consistent was it with his own character, that one can hardly help feeling that, even if he had not had the advantage of Louis's teaching, he would have adopted such a method himself. His friendship with Louis was kept up till the death of the latter. If asked what he had learned abroad that was especially valuable, he, while admitting the many things in clinical and pathological work which were new to him, would undoubtedly have said, "What I value most is the proper method of observation and recording of cases."

Another great good fortune came to Dr. Bowditch in Paris, in that it was there he first met Miss Olivia Yardley, who was destined a few years later to become his bride; for Mrs. Bowditch had all the qualifications for his complement; whether it was in managing the exchequer, making drawings of his microscopical preparations, or in the exercise of accomplishments which go to make up the amenities of life.

After a residence of two years in Paris, he returned to Boston (in 1834), and established himself in practice. His office was at first on Bedford Street, soon afterwards on Otis Place.¹

With enthusiasm he devoted himself to the propagation of the teachings of Louis, and founded in 1835 a society for medical observation, on the plan of the

¹ Since writing the above, I have been informed by one of our profession, who settled in Boston about the same time, that he remembers visiting Dr. Bowditch, soon after his return from Paris, at an office on Washington Street, near the Marlboro' Hotel.
one in Paris, for practice in the correct observing and recording of cases. Its membership was small, chiefly medical students, the only physicians at its organization being Dr. John Ware and Dr. Bowditch. This was discontinued in 1838.

Soon after this, Dr. Bowditch was associated with Drs. Marshall S. Perry, Charles H. Stedman and Henry G. Wiley in a private medical school. They had about fifteen students. There were recitations and clinical instruction. The recitations were held at an infirmary for chest diseases, with which most if not all of the teachers were connected. Dr. Stedman was connected with the Marine Hospital at Chelsea, and the students went there regularly. Dr. Bowditch, in addition to his duties as admitting physician to the Massachusetts General Hospital, made the autopsies. These the students of his private school were permitted to witness. About 1843, Drs. Wiley, Perry and Stedman were succeeded by Drs. Geo. C. Shattuck, Wm. E. Coale and Samuel Parkman. Dr. Bowditch retained the position of admitting physician to the Massachusetts General Hospital from 1838 to 1845. Exactly how long the private school was continued, I do not know.

Dr. Bowditch’s first publication was a revision and alteration of Cowan’s translation of Louis’s “Pathological Researches on Phthisis,” in 1836. His second was in 1838, a translation of Louis on “The Proper Method of Examining a Patient, and Arriving at Facts of a General Nature.” His next was a long and spirited reply to some animadversions of Dr. Martyn Paine, of New York, on the writings of M. Louis. In 1842, he published probably the first case of trichina spiralis ever reported in this country. This was illustrated by excellent steel cuts, the drawings for which were made by his young wife from his own microscopic preparations.
From the moment of his settling in Boston Dr. Bowditch interested himself in all that concerned the welfare of his fellow-man. With Charles F. Barnard, John L. Emmons and others he founded the Warren Street Chapel for the education and elevation of the young. He was superintendent of its Sunday-school, and endeared himself to every one in it. The children went to his office every Saturday afternoon for books, and the young men used to meet him on the Common at five o'clock in the morning to play cricket, they being clerks in stores and not able to go at any other time. One of them, however, says in a recent letter that he used to steal time from his dinner hour to call for a talk with Dr. Bowditch, who at that time was not oppressed with patients and was always glad to see him. He well remembers that Dr. Bowditch was quite elated that his first year's income equalled that of Dr. John Ware's first year, namely, seventy-five dollars. Dr. Bowditch kept up his interest in the children of the Chapel long after they left it. One of them writes me that some years after leaving she received the present of a book from him, with a note saying he had intended to buy her a nice one, but on consulting his purse he found he could not do so and pay honest tradesmen, so he sent her a book called "Best Hours," which he for a long time had kept by his own bedside.

Dr. Bowditch had but just settled in Boston when the mobbing of Garrison occurred, and henceforth till the proclamation of emancipation he was an active, zealous, uncompromising anti-slavery man. He was the intimate friend of Sumner, Andrew, Bird, May and the other leaders of this at that time unpopular cause.

In 1846, the visiting medical staff of the Massachusetts General Hospital, which at that time consisted of three physicians, namely, Drs. Jacob Bigelow, Enoch Hale and J. B. S. Jackson, was augmented by the ad-
dition of three more, namely, Drs. Henry I. Bowditch, John D. Fisher and Oliver Wendell Holmes. He served here eighteen years. Any one who ever made a visit with him knows how thoroughly he did his duty both to the hospital and to the patient.

In this year (1846), Drs. Henry I. Bowditch, Charles E. Buckingham, George Derby, John D. Fisher, Samuel Kneeland, Jr., Fitch E. Oliver, Wm. H. Thayer and John B. Walker revived the Society for Medical Observation. This society in its early days approximated more nearly to Dr. Bowditch’s ideal of what a medical society should be than any we have had since. The members were accustomed to sit around a table with pencil and paper taking notes, and when the reader of a paper had finished, they were called upon to criticise. “The criticism,” as one of the original members, Dr. Wm. H. Thayer, of Brooklyn, writes me, “was courteous but unsparing, and from time to time some member resigned, being unable to stand it.” Dr. Thayer also allows me to quote from a letter written to him, while temporarily absent from Boston, by Dr. Bowditch. The date of the letter is April 26, 1846. In it he says: “We have had one meeting of the Society for Medical Observation. Doctor, I have fears of that society falling into the common routine of talking societies. At this meeting we burst away constantly into a general, very desultory conversation; and when I took hold of the presented case, and said everything about it that was in my heart, whether severely critical or blandly complimentary, I saw the members were unprepared for such plain speaking. Now the doctor (that is, one of us) does not want another society for that purpose. He can get enough of social conversation at the other society; and many other things of great importance he learns there: but he does not get sterling, true criticism, a perfectly transparent truthful criticism on every paper presented,
such as he hoped to get at the Observation Society. In our Society we must get over desultory conversation; read strict papers, and stick closely to them, and let mere opinions and guesses go elsewhere. Each member must not only submit to the severest criticism, but he must be thankful for getting it. Otherwise I would not give one farthing for our Society, and, for one, I frankly confess that I shall leave it, and attend the ‘conversazioni’ at Tremont Street.”

Dr. Bowditch’s contributions to medical literature now became more important. It is sometimes said that a man does his best work before forty years of age, but that could hardly be said of medical men of that time, certainly not of Dr. Bowditch. They did not rush into print prematurely, but waited till experience gave them the right to speak with authority. He published “The Young Stethoscopist” in 1848, when he was just forty, and his first communication on “Paracentesis Thoracis” in 1851. Probably his communications on this subject, appearing at intervals during the remainder of his active professional life, are more widely known, and have done more to extend his reputation than anything else he has written. While Dr. Bowditch never thought of claiming the discovery of the method of removing fluid from the chest by suction, he appreciated at once the value of the method, and made such practical use of it as finally, after constant iteration and reiteration in societies and medical journals, to compel the profession not only of this country but also of the whole civilized world to the same appreciation of it.

In 1852 and afterwards, Dr. Bowditch gave courses of instruction in auscultation and percussion in the Boylston Medical School. This school, as some of my hearers will remember, was a private school, which, however, gave a complete course of medical education, had its own dissecting-room, infirmary, etc., but did
not confer degrees. Dr. Wm. H. Thayer, who was one of the founders and a teacher in this school till he left the city, says that it was established for the purpose of getting more thorough hard work out of medical students than was the fashion of the time, and to encourage the graded system of study. If the Faculty had held together, the right to confer degrees would undoubtedly have been granted them by the Legislature. They did not hold together, and the school was discontinued in 1855. A school whose Faculty consisted of such men as Chas. E. Buckingham, Edward H. Clarke, John Bacon, Jr., Geo. H. Gay, Henry W. Williams, Henry G. Clark and John C. Dalton, Jr., would surely have been a formidable rival of the Harvard Medical School.

Dr. Bowditch was appointed to the Jackson Professorship of Clinical Medicine in 1859, succeeding Dr. George C. Shattuck, who was transferred to the Hersey Professorship of the Theory and Practice of Medicine, vacant by the resignation of Dr. John Ware. He continued in this chair eight years. As a teacher he had as little capability for oratorical display as his master, Louis, but his careful examination of patients and analysis of symptoms rendered his exercises very attractive and highly valued by students. He continued and took great interest in the clinical conference, which had been introduced by Dr. Shattuck, and which became and has remained to this day a highly esteemed feature of clinical instruction at the school.

More than by his teaching, however, by his utterly unselfish zeal in his search after truth and the welfare of his patients, has Dr. Bowditch influenced those who came near him, and to-day hundreds are working on a higher level in consequence of their having known him.

In 1852, Dr. Bowditch wounded his hand in an obstetric operation. Septicæmia and a long illness followed. This caused him to give up midwifery, and
as years went on, although he did not call himself a specialist, and although he continued to see all kinds of medical cases, especially in consultation, his practice became more and more limited to thoracic diseases, on which he had now become an authority.

In 1862, he published his exhaustive investigations on soil-moisture as a cause of consumption in Massachusetts, which, with the subsequent work of Buchanan, in England, in the same field, has proved beyond question that soil-moisture may be an important factor in the production of the disease.

During the Civil War he did everything in his power for the cause of the government and good of the soldier. Especially did he labor hard for the adoption of a proper ambulance system in our army, which was finally accomplished, largely through his efforts. He gave his first-born to the army, and bore his death in battle with heroic resignation.

My personal acquaintance with Dr. Bowditch began in 1863, when I joined the Harvard Medical School. I saw him especially at the clinical conferences which he held, assisted by Drs. Ellis, Minot and others. Here was first exhibited to me one of the many fine qualities of Dr. Bowditch's character—magnanimity to an opponent. A medical student, able, but precocious and impudent, who was a candidate for the position of house-pupil, had taken upon himself to criticise Dr. Bowditch in a very contemptuous manner in the conference, and to continue his animadversions after leaving the conference, in a way which came directly to Dr. Bowditch's ears. It was thought by all that he would not get a vote from the staff for the position. He got one, and that was from Dr. Bowditch! who said that he considered him the most capable of the applicants.

The next year, feeling that I would like an opportunity to learn something more of auscultation than I
was getting in the wards of the hospital, and having heard that Dr. Bowditch had at times taken students as clinical clerks in his office, I went one afternoon to his house on Boylston Street, where he had been established since 1859, and found the waiting-room full of patients and the doctor rather "in a mess." As soon as I made known my errand he put a record book in my hand, and set me at work getting histories of cases. There are others here to-night who have held this position in Dr. Bowditch's office, and who can testify how instructive it was. We took the histories of all the men and many of the women, and when it came to the physical examination in the inner office, from how few were we excluded! He would call us in and ask us to examine, as if for consultation, except in case of some very few ladies. Dr. Bowditch thoroughly recognized a mutual obligation in this arrangement, and never begrudged the time to discuss and explain anything which was of interest. Not the least of the advantages gained by a student from being present in the office of a successful practitioner was the knowledge of how to deal with and talk to patients. In the latter part of March, 1867, I began private practice in Dr. Bowditch's office, to take charge of patients requiring laryngoscopic examination and treatment, and of other patients during his absence. During the twelve years I was thus associated with him there was never, to my recollection, an unpleasant word passed between us!

From this time on Dr. Bowditch devoted himself to private practice and State medicine, excepting a short service as visiting physician at the City Hospital. He was largely instrumental in the establishment of the State Board of Health in Massachusetts (the first one in the country), and was its chairman for ten years. During this time many reforms were carried through against determined opposition, the greatest of these being the abolition of private slaughter-houses in our
neighborhood, and the establishment of the Abattoir at Brighton. He was also for a short time a member of the National Board of Health, established after the yellow fever epidemic of 1878. He contributed valuable papers in this domain, notably the "Address on Hygiene and Preventive Medicine," at Philadelphia, in 1876, and on "The Sanitary Organization of Nations," in 1880.

For many years he was a regular attendant at the meetings of the American Medical Association, and one of the most respected and beloved of its members. He was president of the society in 1877, the meeting being held in Chicago.

His spirit of reform led him in these later years to warmly espouse the cause of the admission of women to the Massachusetts Medical Society, which was accomplished in 1884, and to advocate a more liberal attitude towards educated medical men, who may profess doctrines to which we cannot subscribe. (The past, present, and future treatment of homeopathy, eclecticism, and kindred delusions which may hereafter arise in the medical profession, as viewed from the standpoint of the history of medicine and of personal experience. A paper read before the Rhode Island Medical Society in 1887.)

Dr. Bowditch, besides holding the principal positions which have already been mentioned, was consulting physician to the Massachusetts General, City, Carney, and New England Hospitals, a member of the principal medical societies in Boston, Fellow of the American Academy of Arts and Sciences, of the Paris Obstetrical Society, of the Paris Society of Public Hygiene; and honorary member of the Royal Italian Society of Hygiene, of the New York Academy of Medicine, of the Philadelphia College of Physicians, and of the New York, Rhode Island and Connecticut State Medical Societies.
In 1879, Dr. Bowditch met with an accident to his knee, which ever after gave to him an appearance of general infirmity which did not belong to him. With this exception he maintained his vigor to a remarkable degree until the last year of his life. Increasing deafness rendered his attendance at society meetings less frequent, but he maintained an intense interest in all that was going on in the profession. Within a very short time of his death, the last time but one when he was able to see me, he slapped me on the shoulder and said, "Come, doctor, tell me, aren't they going to make something out of this lymph business?" referring of course to the labors of Koch with tuberculin.

Dr. Bowditch revisited Europe three times, namely, in 1859, 1867 and 1870. These trips gave him an opportunity of renewing old acquaintances and making new ones among the profession abroad. He wrote home very full, interesting letters, which he afterwards claimed as his diary. Such vacations were enjoyed by Dr. Bowditch more than by most professional men, for he was a man of much general culture, who read and re-read his classics, was exceedingly fond and appreciative of art and of the best music, though, as I have before mentioned, this part of his education was purposely neglected by his father.

After the death of his wife, which occurred in December, 1890, his own life began to flicker; and, although he struggled heroically against the loss for the first six months, it was then evident that the beginning of the end had come to him also. After six months' tedious illness, he died January 14th, in his eighty-fourth year.

Dr. Bowditch's life was a very full one, distinguished, whether we consider him as a physician, teacher, citizen, or simply as a man, by courage, simplicity, zeal, industry, and an intense interest in progress. There never was a man who more completely disregarded
consequences when he felt that duty dictated action; whether this was a criticism of current medical practice, or of the selfish motives of obstructors of sanitary legislation, the defence of a runaway slave, or the branding of a deserter from the army.

His simplicity of character was such that on acquaintance his bitterest enemies became his best friends. How true was this with regard to our Southern brethren! When the war was over, it was ended as far as he was concerned; and he was one of the first to welcome the grandsons of John C. Calhoun to his own hospitable fireside. Members of our profession in the South, who had regarded him as an arch-enemy, soon became his dearest friends.

As a natural result of his transparent simplicity there was a playfulness in him, which, as in his father, continued to the last.

It is unnecessary to dwell upon the earnestness of Dr. Bowditch's character before such an assembly as this. There was a reality in it which none of us will ever forget, and which never ceased till his object was accomplished, whether it was compelling the world to adopt paracentesis for the relief of pleural effusion, or the emancipation of the slaves, securing a lock of Highland Mary's hair, or disproving the authenticity of the so-called portrait of Ambrose Paré.

That his industry was remarkable, is testified by the large number of pamphlets, and almost innumerable scrap-books and manuscript notes upon all subjects left by him. This trait may have been inherited, and certainly was taught by his father, who once seeing some idlers lounging about in Salem said, "I wish I could have the time of those men."

Up to his very last years Dr. Bowditch's interest in progress of every kind was most enthusiastic. Nothing could dampen his zeal in the search of new truths. This led him to sympathy and association with the
youngest of our profession. He would welcome promises of good to come from this and that new method of practice, as if he had not been already disappointed a thousand times. When they were a little past sixty years of age, a classmate came in one morning and said mournfully "We are all dying." "Hang it," retorted the doctor, "we are still alive, go to work"; and he himself continued always to act up to the well-known French proverb: "Work as if you were going to live forever, live as if you were going to die to-morrow."

Of Dr. Bowditch's religious belief a word is certainly proper, but others may know more of this than I. He indignantly repelled for himself and the medical profession the charge of atheism so often made against it. When the news of his mother's death reached him in Milan in 1834, his whole nature at first seemed to revolt against the loss, but on entering the beautiful cathedral this feeling was succeeded by a calm belief in God and his goodness, and his direction of all things for the best, which continued with him through life. On his return to Boston he diligently followed the preaching of Dr. Channing, taking copious notes, which are still extant with something like this endorsement made on them years after. "I do not destroy these notes as they are evidence of what interested me at the time, but these things (meaning theological problems) have long ago ceased to interest me." He was always a reader and lover of the Psalms and other books of the Bible, but he "did not believe in creeds made by men."

Many here to-night will express their admiration of Dr. Bowditch's character more fittingly than I, but none feel it more deeply. "He was a man, take him for all in all, I shall not look upon his like again."
presented the following tribute to his life-long friend and colleague:

My acquaintance with Dr. Bowditch began in 1836, when I had the good fortune to be house-physician at the Massachusetts General Hospital. He was then a frequent visitor in the wards, and his examinations by auscultation and percussion, then new here, were of great value. I saw him in Cambridge, soon after settling there for my professional life. I shall never forget his kind, affable and considerate manner, so grateful to a young physician looking with anxiety into the dubious future.

In 1850 we were brought into closer relations, which led to results the most important to me of any in my professional life; they were also of the greatest interest to Dr. Bowditch. With your indulgence I will relate the facts, as follows:

February 13, 1850, Mrs. A. F., a lady thirty-nine years of age, generally healthy, after riding, with wet feet, in an omnibus from Boston to Cambridge was chilly, had headache and pain in the back and limbs. Three days later, when I first saw her, there was oppression in breathing, dulness on percussion on the left side, egophony, absence of respiratory sound from the base of the lung to the lower angle of the scapula. No evidence of disease in the right lung. Diagnosis: pleurisy, with effusion in the pleural sac. The usual treatment gave but little relief. On the ninth day of the disease, the pulse was 130 to 135, respiration was frequent, and there was a sense of suffocation and orthopnoea. The following night, the pulse was 140, respiration 50 to 60, lips blue, hands and feet cold, with cold perspiration. Signs of increased effusion; the left pleural sac full, and the heart pushed to the right of the sternum. She was faint, requiring brandy and
water; the pulse at the wrist at times scarcely felt. So alarming was this state of things that Dr. John Homans, a distinguished physician of Boston, the father of the present eminent surgeon, was summoned. He arrived at four o'clock in the morning. He agreed with me as to the nature of the disease and the danger of imminent death. I proposed tapping the chest; we discussed it: Dr. Homans had never known it done in acute pleurisy, and I requested him to meet me again at 12 m., and give me his advice on this point. At noon of the tenth day of the disease, when Dr. Homans arrived, the symptoms were still worse. The respiration was short, frequent and labored; pulse 144, small; the color of the lips and the coldness of the extremities indicated impending suffocation. The friends were again told of the danger of imminent death. They saw the terrible suffering; they were assured that the operation was almost certain to give relief, whatever might be the final result. Dr. Homans had consulted physicians in Boston; no one could from experience advise it. Nevertheless under the present state of things, he advised it, and the friends consented.

The patient was with Dr. Homans's aid seated in a chair inclined to the right and the body bent a little forward. An exploring trocar and canula one-sixteenth of an inch in diameter was then passed by me through the intercostal space between the sixth and seventh ribs (counting from above) midway between the spine and the line of the axilla; it was pushed steadily on until its point moved freely in the pleural sac; withdrawing the trocar, twenty ounces of straw-colored serum was allowed to flow. The canula was taken out; the pain was slight, the patient expressed herself as much relieved, and she was laid in her bed. The following day she slept three hours, the first sleep for thirty-six hours; respiration 36; her hands and feet were warm and her color natural. Two days after
the operation, she had occasional paroxysms of dyspnoea, and at her earnest solicitation the same trocar and canula was passed near the same place as before. This time, the canula had fitted to it a pump, so arranged that fluid was continuously drawn through it without the possibility of the entrance of air, or any septic fluid. With this, ten ounces of clear serum were drawn, with immediate relief to the patient. The recovery was steady; in about three weeks after the operation she was about the house; a fortnight later she drove ten miles in a carriage, and was soon no longer under medical observation.

Six weeks after this operation, April 19, 1850, Dr. Bowditch kindly invited me to visit with him a patient at South Woburn, a small village about eight miles from Boston. This case was printed by Dr. Bowditch in the American Journal of the Medical Sciences, for April, 1852. I copy his words:

"The following case came under my charge, and as it was the first case of which I had control, in which Dr. Wyman's method was used, I shall enter into some detail.

"Case I. A. B., age twenty-eight, house painter, I saw April 17, 1850, at Woburn, his place of residence. His history was as follows: Five weeks before, having been previously quite well, he was attempting to raise a ladder to the side of a house upon which he was working. By accident, the whole weight of the ladder rested upon him, and, directly after a great effort to sustain it, he was seized with a violent pain in the left side of the thorax. Some cough and hæmoptysis supervened, and he was confined to his room for nearly a fortnight, under the care of a homœopathic practitioner. At the end of that time, feeling better, and all his violent symptoms having subsided, he was allowed to go about and to transact business in Boston. In a few days he became more ill than ever, and
was considered by his friends and physician to be dying of "a rapid consumption." At the end of five weeks from the first attack I was called. The patient was in bed, in a semi-recumbent posture, suffering so much from dyspnoea as to be unable to easily converse with me. His pulse was 120, quite small. He was extremely emaciated. His voice was clear, and his countenance, though thin and expressive of suffering, had not exactly a phthisical aspect. It appeared that he had been unable to lie on his right side since his first attack, and not on his back until a week previous to my visit. Owing to the dyspnoea, I did not ask many questions, but on examination of the physical signs, discovered as follows:

"Intercostal spaces of the left side enlarged. Total flatness front and back, even to the apex of the same side.

"Absence of respiratory murmur in the same parts, save at the very apex. Distant egophony at the middle of the back. The heart was beating at the right of the sternum.

"My diagnosis was effusion of fluid. No positive proof of pulmonary disease.

"My proposed treatment, as the only means of saving life, was the puncture of the thorax.

"The friends objected but the patient consented, and allowed himself to be removed to another boarding-house. Dr. Morrill Wyman, of Cambridge, I had previously summoned in consultation as I knew that he had operated a short time previously, with success, upon a case of acute pleurisy threatening suffocation.

"Dr. Wyman agreed with me as to the nature of the case and the necessity of drawing off the fluid. Accordingly, on the second day after our first examination, Dr. Wyman used an exploring trocar, with a strong suction-pump attached thereto. The patient was placed in a chair, and a puncture was made about
four inches from the vertebrae and just below the angle of the scapula. Only a small quantity of bloody fluid exuded, although the trocar seemed to be introduced as far as prudence dictated. I will now simply state that we decided that it would be well to desist. The next day, however, having thoroughly examined the case, I summoned Dr. Wyman and told him another puncture was in my opinion necessary, and that I believed that the instrument could be introduced, *capulo tenus*, without danger. No fever symptoms, and only slight fatigue had followed the first effort. Two days subsequently, April 23d, we found more fulness and great tenderness of the left breast and side. The patient had perspired freely at night. His tongue appeared healthy, his appetite was good; he was somewhat costive. His cough had been less, and the expectoration had been about two ounces of opaque mucus daily. Dr. Wyman operated a little back of the previous puncture, which was scarcely perceptible. Just before the operation was done a violent fit of coughing occurred in consequence of the effort needed to place him in a chair. The patient was completely exhausted and bathed in sweat. His pulse rose to 138, and he felt quite faint. We were obliged to allow him to lie down. After resting some minutes, he was raised again and nine ounces of pure pus drawn out through the canula. The patient bore the operation very well, was less fatigued than by the access of cough, and felt relieved in some degree, of the oppression about the chest.

"From the time of the operation, April 23d, I date the commencement of his recovery, although there was no very sudden and decided improvement in any one of the rational or physical signs.

"June 25th (sixty-two days from the operation). Steady improvement; had gained five pounds of flesh in two previous weeks, and had worked for two hours
upon his farm. No cough for two weeks. No pain or dyspnoea except a little on walking. He was, in fact, so altered in aspect that I did not recognize him on his entrance into my office in Boston."

Dr. Bowditch's original notes of this case which I have been kindly allowed to consult has this caption:

"The most important of my cases of thoracentesis was the one operated on by Dr. Wyman."

These two cases were the first operated upon by what may be called the new method, that is, with the smallest trocar and canula practicable, with a suction-pump. I afterwards connected the pump and canula by a short flexible tube, with an inch or two of glass tube for inspection and a catch to hold the piston when drawn out to maintain the vacuum. It has been used in all my operations. Dr. Bowditch and others used a modified pump, but the principle is the same in them all.

At the meeting of the Massachusetts Medical Society in May of the next year, 1851, an attempt was made, under the presidency of Dr. John Ware, to secure the reading of papers on medical subjects, to take the place, in part at least, of some of the annual routine of business, and of time often spent in long discussions on the wording of by-laws and matters of discipline. Dr. Ware requested me to prepare a paper on my own experience in thoracentesis since adopting my method of the previous year.

At this meeting, Dr. Bowditch and I each read a paper on thoracentesis. In these papers are the results of 39 chests punctured; 25 by Dr. Bowditch and 12 by myself. The whole number of punctures in these 39 cases was 82; 47 by Dr. Bowditch and 35 by me. In no one of these cases could any injurious consequences be fairly attributable to the operation. It was, so far as we could see, harmless. Dr. Bowditch's paper was published in the American Journal
for Medical Sciences, the following April, 1852, just forty years ago, and was translated in Froriep’s Tages Berichte, four months after, in Weimar. It is by no means a report of cases only. It is an almost complete essay on effusions into the chest: whatever concerns the history, diagnosis and medical treatment and the best method of practising the operation of thoracentesis are described and discussed. My own paper was not printed, but the subject was fully treated subsequently in my annual course of lectures as Adjunct Hersey Professor of the Theory and Practice of Physic in the Medical School of Harvard University. A paper on thoracentesis was also read by me some years after at a meeting of the Middlesex South District Medical Society, cases in my practice affording illustrations of my method.

Any one conversant with the history of medicine and surgery, knows that for the past eighteen hundred years, indeed, since the days of Hippocrates, the operation for the removal of fluids from the chest has been from time to time practised, sometimes with the scalpel, sometimes with the trocar, but with results far from encouraging. Through the Middle Ages it fell into disrepute, to be revived in the fifteenth century by a bold surgeon (Jean Arculanus). I give you his own graphic description: “When you have made up your mind to do this operation, first protect your reputation with a doubtful prognosis, then, scalpel in hand, in God’s name cut between the fourth and fifth ribs, and push on till the pus flows.” Scultetus, in the frightful pictures of his “Armamentarium Chirurgicum,” shows the kind of instruments in use in 1672, and the importance attached to the operation.

The question of the safety or danger of thoracentesis in acute pleuritic effusion is mainly a question of method. The method of free incision, practised before the use of the small trocar and canula, with suction to
Correction. — On page 23, lines 15 and 16 from the bottom should read as follows:

lungs, or by its consequences, if not promptly relieved, often becomes of more therapeutie importance
make it available, was dangerous and seldom resorted to. With the fine canula, or hollow needle, and exhausting syringe, it has become both practicable and safe. In the apparatus used by Dr. Bowditch and myself and others since 1850, the essential principle is the combination of a hollow needle or trocar and canula, the smallest possible, through which a fluid can be drawn by diminished atmospheric pressure. It is the principle upon which many instruments since used have been constructed. This is true whether the suction is made by a pump, by a cupping-glass, an elastic ball, a column of water in a tube, a Davidson's syringe, Dieulafoy's bottle, or any other of the fifteen different forms he has enumerated; the same principle will be found in each. As to the wound, it is hardly more than that for acupuncture.

Extravasation into cavities, for the removal of which it is used, is a symptom of many diseases for which we can do but little otherwise. Extravasation into the chest, considered as a symptom only, either by the obstacles it opposes to the functions of the heart or the lungs, or by its consequences. If not promptly relieved, it often becomes of more therapeutic importance than the disease from which it springs. "A man may often, with stricter propriety, be said to be ill of the symptoms than to be said to be ill of the disease, and, what is more, to die of the symptoms than to die of the disease."

In 1884 Dr. Bowditch reported as follows: "Since 1850, when I first began to operate with the fine trocar and suction pump, I have had under my care 253 patients with pleural effusion which required surgical interference; to relieve the fluid 395 operations were done. The vast majority of them have been that by suction above named. In a certain number a permanent opening became necessary." To these should be added many more cases, judging from my own expe-
rience and that of others, whose cases have not been reported. Indeed the acknowledged simplicity and safety of the operation satisfied the general practitioner, skilled in physical diagnosis, that he could himself successfully treat his patients without special aid. The merit of the method at first doubted and deemed "imprudent" was thus established by a large experience.

Dr. Bowditch did more, I think, than any other to bring about this most important result. Few can know how earnestly he labored, almost to the end of his life, to disseminate the knowledge of the method. He at once saw its value and practised it. He brought the force of his position, his well-earned reputation in his specialty, and his characteristic enthusiasm, to aid in making known its usefulness. For this he deserves well of his profession and of suffering humanity.

There is another side of his character that should never be forgotten—his generosity; his candid estimate of other men's works and qualities.

Some years ago, when occasion was taken to congratulate him on his eminently successful professional life and his devotion to the interests of public hygiene, and to thank him for his many kindnesses, I received the following:

Boston, January 29, 1883.

Dear Doctor: Letter received. I thank you for it. In every paper I have published, or, at least, in the majority of my papers, I have endeavored to place your name as that of the person who first suggested the proper instrument for the operation of tapping the chest, which I had previously for many years ineffectually endeavored in some way to have done in cases where one pleura was full or nearly full of fluid. I caught at your fine trocar and suction pump, and what a blessing it has been, and will forever be, to mankind! No one, so far as I can find, ever thought of, much less proposed to the profession, your plan.

Very sincerely yours, Henry I. Bowditch.
I am reverently thankful to the Disposer of Events that my days have been so lengthened that I can offer my grateful tribute to the noble, truthful and generous character of Henry Ingersoll Bowditch.

DR. OLIVER WENDELL HOLMES

sent the following letter:

Dr. Bowditch was so well understood, so universally trusted, so generally beloved, and in his patriarchal years so deeply revered, that I feel that there is little for me to add to the judgment already passed upon him by his professional brothers and the community.

He was in the class before mine in college, and I hardly knew him at all until I met him in Paris, where he was following the teachings of Louis, the favorite instructor of American students, especially of those from Boston and Philadelphia. Louis had no more devoted and ardent disciple than Dr. Bowditch. I remember, when I first met him in Paris, asking him if he was not a firm believer in Louis's theory. "Louis's theory is not a theory," said Dr. Bowditch. I maintained that it was a theory like any other teacher's doctrines. He was right and I was wrong. It was as much a theory as a merchant's balance sheet, and no more than that. I came to a better understanding of him after that conversation with his American pupil. I met Dr. Bowditch occasionally at the Society for Medical Observation, and in 1846, he and I, with the late Dr. Storer, were appointed physicians to the Massachusetts General Hospital. All my relations with him were pleasant, but they were not intimate, so far as personal intercourse was concerned, yet I felt as if I came nearer to him than to many whom I saw much more frequently. Though I have not been a working physician for the last forty years, I have been his colleague as a Professor in the Medical School of Harvard University, and had the opportunity of justly
estimating his noble and generous nature. His scientific labors have always interested me, and I recognized more especially the great value of his study of our local climates in relation to disease. It is but a small pebble that I drop upon the cairn beneath which he rests, but I could not pass it without leaving my slight tribute.

DR. THOMAS DWIGHT.

It is granted, I believe, to very few of our profession whose private lives were so secluded as that of Dr. Bowditch, to leave behind them so many, who, in all sincerity, claim the title of friend. It is as such that I wish to add a few words of kindly veneration to those which have already been spoken. But there are so many who have claims as strong, or stronger, than my own, that I shall venture to call myself a representative of his friends, and in their name to speak of him, not as of a physician, but as of a man. He was, however, so essentially a physician, his calling was so deeply stamped in his being, that he can hardly be considered otherwise than professionally. It was my good fortune, when a student, to act for a time as his assistant in his office. It was there that I learned to know him, and the more I knew him, the more to love and respect him. I saw him with his patients, rich and poor alike, always sympathetic, always kind. Each was to him a fellow-being in need, whom it was his duty to help. He was not more considerate to one than to another. If they could pay it was well; if they could not it was well; the service at least had been rendered. I shall never forget an incident, which I have treasured for more than twenty-five years, to tell to-night if I should survive him. There came in one day a feeble, haggard young woman, with cardiac symptoms, which even my inexperience recognized as functional. He spoke to her with a respect
and courtesy which could not have been greater had he been speaking to a duchess. "Have you anything that troubles you? I do not ask you what it is; but is there anything?" She replied that her husband had left her. He gave her advice, and before leaving she offered him a dollar. He declined it. When she was gone he turned to me and said, "Doctor" (a title as yet unearned which he gave to his assistants), "when a young man is with me it is not merely to learn diagnosis and treatment, but the principles that should actuate us. Now if I had taken that woman's money, I feel that when I come to die I should see her face looking at me." That his charity was imposed upon we all know. His waiting-room was thronged by those who had no means even if they had the will to pay. He said to me once with momentary impatience, "This cannot go on. I do not keep a dispensary." Accordingly I asked a burly individual whose face did not inspire confidence whether he was able to pay. He said no, but that he had served in the army. I told Dr. Bowditch. "Let that count for him!" he exclaimed. It is needless to say that the poor continued to come.

"Careless their merits or their faults to scan,  
His pity gave ere charity began."

He was so simple and so human that his very weaknesses were endearing. His contempt for trickery, for wrong-doing of any kind, was more appealing than a sermon. I remember his contempt for a surgeon, who, putting his reputation against the possible benefit of the patient, had refused to intervene in a desperate case "lest he should seem like a murderer." In the excitement of those days of civil war he was roused to withering wrath by tales, let us hope unfounded ones, of oppression of the helpless. Indeed to be op-
pressed or in need was in itself a claim to his sympathy.

Many of us can bear witness how he tried to help the students, especially the poorer ones. Of his many kindnesses to myself I say nothing, for I am not speaking for myself, but for all his associates who loved him.

There remains, however, one point on which I wish to speak as the representative of a more restricted class. About 1868, when the Carney Hospital was founded, he was the first President of the Staff, which office he held till some ten years or so ago, when it fell to me to succeed him. His position was an important and onerous one. It was characteristic of him to take it. Prejudice was stronger then than now. A hospital, under the control of a Catholic sisterhood, was to begin its work in Boston. Many and vexatious difficulties surrounded the undertaking. He had much to endure from ignorance, prejudice, and misunderstandings. In giving the support of his name and of his work he did that hospital an inestimable favor. As his successor I feel that I have a claim to rise to-night to speak, not only for his professional friends, but for all the sick and suffering who have been helped at the Carney Hospital, and who never knew how much they owed him.

DR. H. P. WALCOTT,

of the Massachusetts State Board of Health, of which Dr. Bowditch was formerly chairman, gave an account of the formation and labors of that Board, and of Dr. Bowditch's untiring zeal for the public good, as follows:

While I esteem it a personal privilege to join in these testimonials to the life and services of a beloved and wise physician, I feel it a duty as a member of the State Board of Health, of which Dr. Bowditch was
the founder and the head, to say a few words about the debt that State Preventive Medicine in Massachusetts and this country owes to him.

However important the cause of Public Hygiene may have been, and though the thinking world has always written and spoken much in its favor, it is only within a generation that practical measures have been adopted by the State in a persistent and methodical way for increasing and protecting the public health.

Lemuel Shattuck, a man wise beyond the men of his day, and like his great contemporary in England, Edward Chadwick, not of our profession, had in 1850 prepared and submitted to the legislature of this State a report of a general plan for the promotion of public and personal health in Massachusetts.

Though this was the real foundation of our public-health movement, it made but slight impression on the authorities of that day. But nearly twenty years afterwards when a State Board of Health had been established by the influence of Dr. Bowditch, more largely probably than that of any other man, this report became, I quote Dr. Bowditch's own words, "the inspiration and support of the Board."

The organization over which Dr. Bowditch presided was a most efficient one. It is, I think, one of the best proofs of his real capacity for leadership that this Board, during the years of his connection with it, contributed so much to the general cause of public sanitation in this country; it was from the first permeated with Dr. Bowditch's noble enthusiasm, and in every department of hygiene has left an enduring record.

In the course of some remarks made at the first meeting of the recently established Board, September 15, 1869, he said: "I confess to you that I know of no higher office than that which we now hold, namely, that of inaugurating the idea of State medicine in Massachusetts. Upon our high or low appreciation
of the position and of the duties resulting from that position, and upon our wise or foolish performance of these duties, depends the success of the object aimed at in the establishment of a State Board of Health."

We who have been connected with the Public Health Service of the State, in these later years, realize, perhaps more fully than others can, how justly the difficulties were estimated and how completely success was attained.

That political schemers should have made an effort to advance themselves under cover of the well-earned position of this organization, was to be expected; that they should have succeeded, even for a brief season, was a grievous disappointment; that the Commonwealth should have finally confirmed the original constitution of the Board, with far wider functions and greater means of usefulness, was the legitimate result of the unselfish, unpaid, and most valuable services of Dr. Bowditch and his associates.

He was one of the original members of our first and only National Board of Health. Unfortunately, it soon became evident that neither the national authorities nor the people of the whole country were able to appreciate the needs of such an organization as must surely come sooner or later; and he withdrew, a veteran, from this his last public service. But if the circumstances of his life had been such that he could have taken a more active part in affairs at Washington, I do not believe that the subsequent melancholy history of national public health administration would have been written.

During these fruitful, early years of the State Board, we find him busy with the tenement-house question in our cities — himself a working member of one of the incorporated associations for the improvement of such houses; investigating most carefully the evils of intemperance and measures for diminishing them; and
at all times considering the causes or antecedents of consumption. I hesitate, as I mention these most important topics, for the enumeration would seem to imply that these were the limits of his interest. It was not so; the records of the Board show him to have been an active participant in every detail of the work.

The observations, which led Dr. Bowditch, in the year 1862, to lay before the Massachusetts Medical Society, "the law of soil-moisture and land-drainage, and their influence on consumption," were undoubtedly the first made in this special field of inquiry. As is well known, Buchanan in England, three years later, arrived at conclusions substantially the same. While the exceptions found to this law are numerous and not to be dismissed as mere errors of observation; and while our later knowledge of the influence of microorganisms in the causation of tuberculosis must be taken into account, it is still true that a considerable share of our gain in the diminished death-rates from consumption is undoubtedly due to the removal of excessive soil-moisture by more efficient drainage of the ground; and the beneficial influence of Dr. Bowditch's demonstration of the value of this process cannot easily be overstated.

In a note received from him as late as June 7, 1891, he called my attention to certain matters which he thought that the Board of Health might usefully and creditably present to the Congress of Hygiene and Demography at London. His example, his lofty enthusiasm, his words of encouragement, remained to the end of his own life, and will remain in the lives of those who knew him, as most eloquent reminders of the obligations of public service and as incentives to a more devoted application thereto.

Prefixed to some papers intended for the use of his college classmates, and now deposited in the library at
Cambridge, I find the following lines, in which, I think, may be found the story of his life:

Writing in 1887, he says: "I look back now on those days of inspiration with unmingled satisfaction. Among them I call to mind the 'Latimer times' and their results in the State; the years spent in urging physicians to believe in thoracentesis; the law of soil-moisture, as provocative of consumption, first proved by me for New England, and three years afterwards rediscovered by Buchanan of London, to hold good in England. I remember with joy my necessarily persistent but successful efforts to persuade Congress to establish a proper ambulance system for the fighting armies of the republic. Subsequently to peace, I remember with joy the years of patient but delightful work which our State Board of Health carried on, by which we endeavored to indoctrinate the people with the laws of health, climate, race influences, intemperance, etc. . . ."

"Finally, I cannot but remember with satisfaction the fact that the International Medical Congress, which met in 1876 in Washington, D. C., voted to send my address on "Public Hygiene in America" to public bodies in all the States of this Union, and to those of Canada. . . ."

"If, according to the directions of the Delphic Oracle, I know myself, my chief, I had almost said my sole, emotion, is that of intense gratitude to God, for the beautiful and blessed boon of life, with the power and liberty to work for all, during these formative and magnificent days of youth of our Nation. . . . I trust that I may be deemed by my classmates not unworthy to use the brave words of Saint Ambrose, who to the friends around his death-bed said, 'I have not so conducted myself amongst you, that I am ashamed to live or afraid to die.'"
No tribute to the memory of Dr. Bowditch would be complete unless a few words were said by one of the many who, though not contemporaries or associates or pupils even, yet owe so much to him for the example of his life. We all of us as students or physicians have had moments of fatigue and discouragements, when our art seemed long, our achievements paltry, the science we strive for far beyond our reach, and our chosen profession a pitiful trade. Whenever we fall into this mood it is well to remember what Dr. Bowditch has said so earnestly, that “the profession of medicine is man’s noblest work, and the physician God’s viceregent on earth.” To have heard these words was more than a help, it was a moral stimulus, a tonic, for they came from the lips of one whose life made them real. In thinking of him, we can recall the words of Rokitansky speaking to a number of students who celebrated his seventieth birthday by a torchlight procession, saying “Youth should kindle its torch at the funeral pyre of the best and the noblest past.” If we hope to keep our ideals bright, where can we turn to a better or nobler memory than that of Henry Ingersoll Bowditch?

The elder Cato was once asked why the Imperial City had no worthy statue of him, a man who had been tribune, consul, and had received the highest honors of the State. Cato’s reply was that he would much rather that men should ask why he had no statue adequately commemorating his great services to the State than that any one should have cause to inquire why he had one. Dr. Bowditch’s character in many points resembles the sturdy virtues of the simple Roman, whom, with reason, as Plutarch said, every one ad-
mired. To Dr. Bowditch we owe a deeper personal debt of gratitude than to any other physician of our generation. His life work, a monument of the great moral force which a single, earnest, devoted man may be in his community, is an incentive to our best efforts. Nobody who ever knew him as teacher, counsellor, friend, can ever forget him. Like Cato, he never would have taken thought whether he were worthily remembered. His work was its own reward. His profession was to him what his art was to Angelo. Do we not owe it to ourselves and our successors here that the question may not be asked why his fine presence has not still its fitting place with us?

DR. J. G. BLAKE.

My reminiscences of Dr. Bowditch would be without value among these valued testimonials to his worth, if even such slight and personal topics were not enlarged by having to do with so worthy a subject. I desire, besides, to place my slight tribute on record with those of others who loved him. My first memory of Dr. Bowditch dates from the time when as a medical student, a happy chance in the lecture-room of the Massachusetts General Hospital allowed me to answer correctly a question of diagnosis, and when I was fortunate enough later to mention symptoms which he had not enumerated. It was a case of pneumo-thorax, and it led to his kindly notice of me while I remained as a student.

Before the establishment of the Carney Hospital he had been for a long time physician to the St. Vincent Orphan Asylum, then on Purchase, now on Camden Streets. Sister Ann Alexis, the Superior, had inspired him with her own devotion to suffering childhood, and I think it was as a result of their consultations, etc., that Mr. Carney was first induced to form his project. Dr. Bowditch was the first visiting physician at the
hospital, and I, as his colleague, can testify to his great faithfulness and care of its interests in those busiest days of his life. It is a happy memory to look back upon.

I remember, too, with pleasure, an incident during war time when thirty of us were wandering about the streets of Alexandria in search of shelter for the night. We had gone down in answer to the call for surgical aid after the second battle of Bull Run. It was late in the afternoon. Fortunately for us, Father Finotti, who accompanied the party, had at one time been Parish Priest of Alexandria, and at last he succeeded in obtaining for us a single room with one bed, in which we placed Dr. Bowditch and the elder Dr. Steadman, while the other twenty-nine slept on the floor. It was at this time that I chanced to ask him about his political opinions. “Doctor,” he answered, “you know Wendell Phillips. He is a pro-slavery man compared with me.” Later, we came together in the Co-operative Building Company, and I remember hearing of the evenings he spent in the “Crystal Palace” on Lincoln Street, where he established a whittling school, which was one of the germs of the present system of industrial education. He had the boys gathered here out of the streets, and passed many hours with them himself, encouraging them and providing ways of selling their work—a noble thought and one that has borne lavish fruit.

Later on we were colleagues in the service of the City Hospital for three years. He enjoyed the position because, as he quaintly remarked, he liked to see people getting well under him. A specialist of his eminence and in his particular branch would be likely to have many unavoidably unsatisfactory results in private practice.

He thoroughly enjoyed the opportunity which a large hospital service and the variety of diseases com-
ing under his care allowed for the exercise of his skill in restoring health.

The faithful, painstaking, earnest manner, and the lavish devotion of time to his work was an example and an inspiration to me that I shall remember to the end of my life.

DR. HENRY O. MARCY

sent the following letter:

Unfortunately my engagements are such as to utterly preclude my attendance at the meeting held by the profession in commemoration of one whom they have so long loved and delighted to honor.

To me the memory of Dr. Bowditch is exceptionally precious. His magnetic power and personal enthusiasm made him the centre of attraction to all the students of my period of pupilage. I never met him without imbibing somewhat of the inspiration with which he taught and practised his divine calling.

To those who evinced a desire for knowledge, he was ever ready to impart, often with a patience and tenderness, not only personal but paternal. He seemed to take his pupils, even the most humble and less promising, into his confidence, and never wearied in encouragement and personal endeavor. He cherished the memory of his great master, Louis, of whom he often spoke in terms of enduring affection and whose example he imitated.

It was due, in large degree, to Dr. Bowditch that clinical instruction in America received a new impetus, and its methods of teaching were revolutionized. Who that belonged to his auscultation classes can ever forget the delightful evenings of pleasure and profit combined, which were spent in Dr. Bowditch's library? There we caught glimpses of his charming home life, so often repeated and endeared to us by the long years of intimate relationship.
Dr. Bowditch also established clinical conferences, which at once became popular in the Medical School, and I esteemed it a rare good fortune that he selected me as his first secretary.

I am well aware that it needs no words of mine to attest to the patriotism and the self-sacrificing devotion of Dr. Bowditch during those years when the nation’s life hung in the balance. He gave up, in large share, his very lucrative practice, in order that he might devote himself to the examination of recruits for the military service, and those of us who had the privilege of assisting him in this work, will never forget the thorough manner in which he discharged this duty. It was done in a kind and tender way, and his “God speed and bless you, my dear boy,” as he grasped the hand in parting, was a benediction, given with that warmth of feeling that often drew tears in response.

During these days he frequently narrated to me, at length, his early experiences as an Abolitionist, with charming anecdotes of his intimate friends, Garrison, Phillips, Sumner, and a host of others scarcely less famous. It was my exceptional fortune to be his office-assistant for a considerable period soon after the close of the war; and, although he rarely referred to its events without a touching allusion to his own bereavement in the loss of his idolized son, he was ever proud of the privilege of being able to serve his country.

In the later years, when it was my privilege to propose his name as an honorary member in the Order of the Loyal Legion, there was not a single comrade who did not gladly couple the name of Bowditch with that of Kingsley, Brooks, Lowell, Whittier, each in their way most noble servants in their country’s need. His acceptance was coupled with the statement that he regarded it as the highest honor that could be conferred
upon him to be thus publicly enrolled in the order of the country's defenders.

I leave it to others to make mention of Dr. Bowditch's many contributions to the science of medicine, which will render his name immortal; his public services to the State and to the Nation in the boards of health which were established largely by his own personal endeavors, the fruitage of which laid the foundations of modern sanitary science. His interest in the advancement of his chosen profession, in which he was such a distinguished worker, knew no narrow limits. He early interested himself in the American Medical Association, of which he was elected President in 1876; and few will ever forget the splendid service which he rendered in that capacity, or the generous, loving words with which, as a patriot, he expressed his desire for harmony and union between all sections of our vast country.

Through the American Medical Association, the medical profession of the North and South were early brought into a fraternal state of union which has done much toward the re-establishment of harmony between the States. To the very end this thought was uppermost in the mind of Dr. Bowditch. Perhaps the last letter he wrote, only a few days before his death, was to me upon this very subject, the best means of uniting and fraternizing the medical profession of another State.

Such a life ends not at death. Its noble influences and power will continue to be felt; the name of Henry I. Bowditch will be referred to with pride, so long as medicine is taught as a science, as one of the great leaders of his profession in America.

DR. E. W. CUSHING.

I do not feel like letting this occasion pass without having a word to say in regard to one who has
been kind to me personally, as he has been to many others. After what has already been said, it is not necessary for me to mention his distinguished medical services, but I may be allowed to recall the magnificent individuality and the moral courage of the man. The majority of the members present here can hardly conceive of the fortitude which was required to take the position he did in the times before the war, when it meant little less than the repulsion of his friends, the ostracism of society and possibly the violence of the mob. I lived opposite Wendell Phillips, when a boy; I have repeatedly seen the crowds jostling him through the street, as he tried to get home; and such treatment was encouraged and justified by those who stood high in the community. It was no light thing then for a man to sever himself from respectable people, owing to his convictions: disregarding the wrath of the vulgar, the vengeance of the powerful and the fear of ultimate consequences. Dr. Bowditch has tonight been compared to Cato; permit me to remind you how well he fulfilled the ideal of Horace:

"Justum ac tenacem propositi virum
Non civium arbor prava jumentium
Non vultus instantis tyranni
Mente quatit solidam..."

Si fractus illabatur orbis
Impavidum ferient ruinae."

I never had the honor of being in Dr. Bowditch's office, nor was I his student. I first knew him at the time when I had been investigating something of the relations of epidemics and sun-spots, when he asked me into his office, and, instead of discouraging me, he urged me to go on. He brought out a book, and showed me what he had done in reference to a non-medical subject, a description and drawings of some animalculae, which he had presented to the American Academy of Sciences. I was surprised at the deep
interest he took in various scientific matters not immediately related to medicine. His influence has always been felt against Philistinism. Afterwards there was an attempt to introduce a medical-practice law in Massachusetts. I, with others, was interested in that. I went to Dr. Bowditch, and he received it with enthusiasm. The first meeting was in his house, and he aided the undertaking with his advice and suggestion. I was deeply impressed with the utter unselfishness of the man, and remember well his anger at the way in which the bill was finally killed by those who should have supported it. Again, at a time when I was in a position where it was difficult to determine what I ought to do, to decide as to the relative importance of various claims which might be considered as conflicting, and between different views of the highest duties of a physician’s life, I turned to Dr. Bowditch as to a man whose advice I knew would be right; and his encouragement, his kindness, his appreciation of all the various conditions, made a deep impression on me, for I had no claim on him except that which every human being had on him. I therefore desire to render my tribute to the memory of a great man whom we have had among us. We cannot see him yet in the perspective in which he will be seen fifty years from now. I wish, personally, to render thanks for his assistance, sympathy and sound advice at a time when I needed to know who my friends were; for at such a crisis, in the words of Ennius, “Amicus certus in re incerta cernitur.”