

ADDRESS IN STATE MEDICINE.

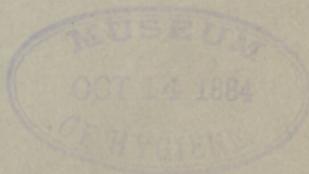
*Delivered at the Annual Meeting of The American
Medical Association in Washington, D. C.,
Friday, May 9th, 1884.*

BY

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Tennessee.

Chairman of The Section in State Medicine, American
Medical Association.



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MR. PRESIDENT AND GENTLEMEN OF THE ASSOCIATION:

The Section of State Medicine, as many of you are doubtless aware, was established and thoroughly organized at the twenty-fifth annual meeting of the Association, at Detroit, in 1874, and has been presided over by some of the ablest, most learned, and illustrious members of this Association. In accepting the chairmanship one year ago, it was with no inconsiderable degree of apprehension and doubt as to my ability to properly discharge one of the duties of the position, and to place before you an address worthy the attention of those who have listened with pleasure and benefit to such men as Bowditch, of Boston; Kedzie, of Michigan; Cabell, of Virginia; Hunt, of New Jersey; and others whose names have been heralded far and wide, at home and abroad, as active, earnest, and able workers in this most important department of medical science.

The work of this Section since its organization, as well as that in its particular line in the earlier years of the Association, whether

embraced in the reports of the various committees on Epidemic Diseases, or the individual papers and essays in the special province of State Medicine, forms a most important part of the published Transactions in each year of the Association's existence, and has accomplished fully as much as other even more popular Sections, towards adding to the glory of the Association, its prestige and its reputation; towards giving "frequent, united, and emphatic expression to the views and aims of the medical profession," or "cultivating and advancing medical knowledge; elevating the standard of medical education; promoting the usefulness, honor, and interests of the medical profession; enlightening and directing public opinion; exciting and encouraging emulation and concert of action in the medical profession; and facilitating and fostering friendly intercourse between those who are engaged in it." Careful examination of the 33 volumes of Transactions, and the now completed first volume of the *Association Journal*, will reveal a vast amount of valuable labor, rich in fruitage, teeming with evidences of successful progress—an intellectual mine, in which is treasured up the matured experience, the scrutinizing thought, and earnest work in this important department.

Accepting the graphic, yet concise definition of Dr. Stanford E. Chaillé, of New Orleans, than which we can get no better if we would, and would not if we could: "*State medicine is the application by the State of medical knowledge to the common weal; and embraces every subject for the comprehension of which medical knowledge, and for the execution of which State authority are indispensable,*" we shall not undertake to tax your patience with a repetition of the gradual, yet positive progress made therein. Suffice it to say, that while there have been no discoveries or advances of a meteoric brilliancy in the past twelve months, yet there has been progress. Some old things have been unlearned—which is sometimes no less important than that some new ones should have been learned.

While new discoveries and new developments in State medicine are of such importance and value, we can patiently wait several successive years in expectation of some one finding a Koh-i-noor, and profitably spend our time and skill in polishing up,

and putting into practical use the rich discoveries of the past. The germ factor of cholera—distinctly stated more than thirty years ago by a Tennessee doctor,¹ as well as the germ theory of fevers by another Tennessee doctor,² a little later, have been burnished, polished and crystallized by later observers into cognate facts; and to these have been added by more recent investigators a like cause for tuberculosis, as well as other diseases. Granted that these ætiological studies are of greatest importance to the individual physician in his essays at individual prophylaxis, yet how much more important in State and National work!

The studies in regard to sewage and drainage; the purities and impurities of the air we breathe, the water we drink, and the food we eat; contagion, infection, heredity, zymotic or other influences are being prosecuted day by day with a vigor, and an earnestness, and an enthusiasm that will surely result in progress. It may be slow, but it will be none the less sure.

Is it necessary that I should inform you that Asiatic cholera again began its accustomed westward march from its lair on the Ganges, in the far distant East; that it advanced its skirmish line even to Western Europe, with heavy battalions doing their murderous work 'neath the shadow of the Pyramids? But, "Thus far shalt thou go, and no farther," was the edict of State medicine in the good year 1883.

Yellow fever had even fastened its fangs on our Southern border, but by the strong arm of State medicine was it held at bay. Although small-pox has been claiming a victim here and there at long and distant intervals, in gratifying contrasts to its former holocausts, yet even the few and infrequent sacrifices it has claimed were the result of neglect of the dictates and teachings of State medicine.

But enough of this. That familiarity with the scientific literature of the day which is incumbent on every member of this representative scientific organization, or a cursory walk through the Museum of Hygiene of the Navy Department here at hand, and

¹W. D. Dorris, M. D., *Nashville Journal of Medicine and Surgery*, Vol. I. No. 3, June, 1851, p. 154.

²Thompson on Fevers, 1859.

an examination of its records, will give you a better idea of the recent developments pertaining directly to State medicine, and will be decidedly more entertaining than any that I can lay before you. Therefore I may be pardoned, if following the line of some of my predecessors, I omit a citation of the "advances and discoveries of the past year" in this particular Section, more especially as there are one or two questions to which I desire to call especial attention. In doing so I must ask your indulgence if the views advanced, perchance, may seem to all or some of my audience to transcend the pale of orthodoxy. Yet I can sincerely claim honesty of purpose, and will yield to none in a sincere and earnest desire to do good to my fellow-man, and will invoke a calm, dispassionate and impartial consideration of questions fraught with greatest importance to ourselves as physicians and as men, as well as to our fellow-man.

A cursory review of the published transactions of this Association, beginning with the Convention that gave it origin in 1846, down to the present day, will convince the most casual reader of the importance of the subject of medical education. Time and again does it show up in our printed minutes and published papers and essays. The effort all along the line has been to bring the aid of legislative enactments to bear upon it.

Am I heterodox when I say that it is not a subject for the State or national law-maker? Is State authority "*indispensable*" for its elevation? Is there need of legislative interference in behalf of medical education? The conditions under which men shall be allowed to practice medicine, the amount and kind of knowledge which they should be obliged to show, the way in which their possession of that knowledge should be tested, the preliminary education prior to, and the length of time they ought to study, the extent to which the details of that study should be regulated by compulsory rules or left to individual option—these are questions upon which there are wide differences of opinion in this country. In England during the nearly thirty years past, and on the continent of Europe for a longer period, entire governmental control obtains. Here, we have *free medicine*, as well as *free religion*, and *freedom of speech*. A few States from time to

time have essayed their hands, and with what result? Over fifty years ago, Daniel Drake, than whom this country never produced a more original mind, a closer reasoner, or one of deeper thought, in an "*Essay on Medical Education*," enunciated the following:

"More than half the States of the Union have laws to regulate the practice of medicine, but I am by no means convinced that they have ever done any real good to the profession or society. New York and Ohio have such laws; Kentucky and Virginia none. It remains to be shown whether the profession in the two former is more respectable than in the latter. I am disposed to believe not."

And to-day what shall we say? Are the people, or the doctors, in a better condition in Illinois than in Indiana? Take Michigan in the Northwest, and Kentucky in the Southwest, and compare their medical men with those of Massachusetts. At Ann Arbor we can see that regular medicine has been *brought down* to a level with one faction of the irregulars, while grand old Harvard holds her head aloft, and the glorious banner of regular medicine floats in its purity, its glory, and a most enviable renown. My own State of Tennessee has furnished in the past an honored and an honorable delegation to your councils. The late A. H. Buchanan, of Tennessee, was one of your first Vice-Presidents, and two of his colleagues had the honor to occupy subsequently the Presidential chair with credit to themselves and this Association. The State from which they hailed has ever left medical matters solely to medical men.

Even in England there are to-day wide differences of opinion on this subject. They are not altogether satisfied that their plan of protection is the better one. Quite a respectable minority hold that they are not benefited by legal control, and that although freedom in medicine is subject to some abuses, it is perhaps the better plan. The medical literature of most benefit to the world is the growth of the present century, and notably the latter half of it. Are not American works being reproduced in the tongues of Europe? Has it received no aid from this side of the Atlantic?

"Flint on Practice," or "Gross" or "Hamilton on Surgery,"

as well as many other volumes of indigenous origin, are as favorably commented on by foreign writers and readers as the most noted productions of the Old World.

The *London Medical Times and Gazette* of Nov. 12, 1881, in discussing in a remarkably fair, candid and impartial article the subject of "Medical Education and Registration in America," says that "American medical literature is very voluminous, characterized by great originality, inventive genius, industry and practicality." And again, can we not see that certain departments of our art have been created in this country, and others notably improved? Did it require legislative aid to develop the genius of a Sims or the inventive originality of a Sayre? The discoveries of Jenner and of Harvey occurred when medicine was as free in England as in the day of Morton, of Massachusetts, or Long, of Georgia, when anæsthesia first dawned upon suffering humanity, to say nothing of Dorris and Thompson, of Tennessee, who were the discoverers of the germ world, as much as was ever Columbus the discoverer of this continent.

Professor Huxley in an address "On the Intervention of the State in the Affairs of the Medical Profession," delivered at the London Hospital Medical College, and published in the *British Medical Journal* of Oct. 13, 1883, is thus reviewed in a very able editorial in the *Chicago Medical Journal and Examiner*:

"Professor Huxley practically presents three questions: 1. Why should the State interfere with medicine and the medical Profession? 2. If there be ground for such intervention, what should be its extent? 3. If such intervention be right and proper, how can it best be carried into effect? The answers which he proposes to these several inquiries, seem to us eminently wise and judicious; and some of the commentaries they suggest, are interesting to us on this side of the Atlantic.

With respect to the first question the speaker took the ground that it was not the duty of the State to take medical charge of the public, to protect it against incompetent persons in general, and in particular against quacks and impostors. He thought that it was more wholesome for the public to take charge of itself wherever it can do so in this as well as in other matters, and that on

the whole there should be no interference with the liberty of each person to do that which he likes when he does not interfere with others. The actual impossibility [which all reasonable men must admit, and of which we, in the State of Illinois, have seen the most conspicuous and notorious examples], of absolutely prohibiting the practice of medicine by people not specially qualified for it, is freely admitted by Professor Huxley. The old lady who orders a cranberry poultice, the druggist who undertakes to relieve the pain of an aching tooth, or of any other afflicted organ of the body, will enjoy these peculiar pastimes in the face of all legal restrictions. The charlatan will do no less, and always more. "*Facilis decensus Averni.*" He has smiled equally at the British, Gallic, and Teutonic barriers to bar his progress. Where there is a throne, there will always be a pretender. The shadow will always follow the substance. We shall always have him with us. Whether the truth or its counterfeit prevail, is determined not by a National Legislature, but by the extent of the diffusion of knowledge among the people whose feeblest index that Legislature often is.

Professor Huxley, however, strikes the key-note of the whole question when he points to the death of the individual citizen as the important moment which the State should officially recognize. Here the volition of the individual ceases. In civil and criminal cases, the law should be able to have recourse to persons qualified to give expert evidence. Here lies the justification of the intervention of the State. It says to one class of men: 'Practice medicine, if you like, on any basis, on any theory, whether you are qualified or not qualified;' and to another class: 'Consult whom you choose, pay whom you will for attendance upon you in your illness; but before I can receive from you a certificate of death, before I can appoint any of you to my civil or military service, the standard of my qualifications must be attained. The giver of the certificate, the incumbent of the office, must be those whom I can recognize as fit for such service.' In brief, the State intervenes only at those points where the State touches the individual. With the old woman's elder-flower tea, with the druggist's cough panacea, with the quack's startling an-

nouncement of the cure for consumption, the State has no more to do than with the numerous patent religious enterprises of the day in which we live."

This is rather a lengthy quotation. But as enunciated in a review of an address delivered on British soil, in the leading medical journal of the most protected of all protected States of America, we cannot refrain from using it. Yes, when you select your servant, your lawyer, or your preacher, he must rise to the standard of your requirements. So with the State. This right has been delegated to the State. Has the other? With the enlisted men and commissioned officers of the Army and Navy, the State has a distinct contract to provide them with medical attention, and has a right to require a certain standard in that particular as in the bread, the beans, and other supplies furnished them. Certain requirements are exacted in all civil and military appointments, and the appointing power has the right to fix the standard.

Nay, further, the State has the right, and exercises it, of prescribing the very garb of her appointees. And shall you, or I, array ourselves in cotton or linen in winter, or in furs or heavy woolens in mid-summer, so long as we remain private citizens, attending to our own business, and molesting no one? Granted, that in the one instance a life is sacrificed to pneumonia, or in the other to sun-stroke, has any legislator, State or National, other right than to pity the suicide for his folly? It might justify a writ of "*lunatico de inquirendo*," but alone, would not secure a verdict of lunacy.

The State may prevent fraud in the sale of unwholesome bread or unsound meats—for fraud is criminal; it may prohibit as a nuisance to one or more citizens, the keeping of such articles by one; but if he annoy not his neighbor, can the State prohibit his eating them himself? If he give it to his wife, his child, his servant, or the stranger within his gates, I grant you that he may be chargeable with murder. But eating it himself—is it an offense against the State? Would not public opinion even, readily agree, that the sooner the State is rid of such a one, the better!

I can readily and heartily agree with England's "uncrowned

king of science," in protesting against State authority prescribing my pill, my potion, or my plaster,—I might be compelled to submit to infinitesimals.

To take another view of the subject. Can we better ourselves, our profession, or our fellow-man? Take the history of our own great country and compare it with other nations. Will we suffer thereby? In the March number of the *Sanitarian*, I find on pages facing each other, that the death rate of Toledo, Ohio, was 15.3, while in London, it was 18.8 per 1,000. In 28 of the largest towns of England, with a population of 8,500,000, the death rate for the third quarter of 1883, averaged 19.9 per 1,000, while in 28 of the largest towns of the United States, with a population of 7,395,000 the death rate for four weeks ending, January 26, 1884, was 19.36. In the *Sanitary Engineer* of March 6, 1884, page 337, the statement is made that the death rate per 1,000 in 30 of the cities of the United States for the week ending February 23, was 20.3, while in 28 of the large towns of England for the week ending February 2, it was 20.5. We think we can stand the comparison.

Take the Medical and Surgical History of the War of the Rebellion, published by the late Surgeon-General of the United States Army. Will it not bear favorable comparison with any military and surgical records of a like period?

We have already cited the field of general medical literature; but we think it will bear repetition. Medical journalism, which in my humble opinion, has done, and will do, far more to elevate the standard of medicine in an educational, as well as a practical point of view, than all State and national legislation, had its very origin in our own goodly soil. Yes, by far, the brightest diadem the coronet of medicine ever bore is "native and to the manner born."

Take the discoveries in medicine, whether in anatomical or physiological facts, therapeutical or prophylactic edicts, the devices of surgery, the suggestions of practice, or the grand innovations of the specialists, from gynæcology to ophthalmology, and is not a fair and honorable portion ours? These are questions for us to consider, and to consider well, before we throw down our

grand and glorious birthright of free medicine—alike honorable and independent.

I can readily see how you can bring medicine down by legislation, but pardon the obscurity of my vision when I say that I can see no way of raising it up by the same means. I can see how legislation can force me to stand on the same plane with those “who claim a special designation and trade upon the same.” I can see how honorable, regular medicine can be pulled down to the level of the irregular, the nostrum-vender, and the charlatan. If medicine is to rise, there is ample power within her own domain. If medicine is to be elevated, to medical men alone must be entrusted the lever. If medicine is to be regulated, in this Association can we find the power which but needs to be put into action. In a series of resolutions adopted by this Association in 1869 we find the following preamble:

“WHEREAS, The history of medical legislation in the various States of this Union clearly shows that no reliance can be placed on either the uniformity or the permanency of any laws relating to the practice of medicine—”

In 1872, Dr. David W. Yandell, of Kentucky, in his address as President of the Association, stated that:

“The profession does not appear to my mind ‘corrupt and degenerate.’ I do not believe ‘it is going from bad to worse,’ and that the people will have to rise in their might and stay its downward progress. I cannot see the thing in this light at all, and so am not ready to appeal to Federal Legislation to correct our evils, and certainly should not go to Congress to establish National Medical Schools.”

In 1874, at the twenty-fifth meeting of the Association, Dr. J. M. Toner, of this city, as your presiding officer, said:

“The hope entertained by some physicians of excluding irregular and incompetent practitioners from the profession by legislative enactment and penalties is, I apprehend, in our country, not to be realized.”

Consulting the published transactions of this Association from 1846 until to-day, will evince to you that this subject has been carefully and well considered; effort after effort has been made,

and yet National legislation has not been accomplished. The people through their representatives have said that they did not want it. Shall we not abide by their decision, that State authority is not needed, and thus relieve State medicine from a futile and unnecessary struggle, and free its arms the more successfully to cope and grapple with the many foes to be found in its own proper field?

The next subject to which I wish to call your attention is a more perfect organization for State medicine. And in doing so I do not propose to become the partisan of either faction involved in an unfortunate wrangle in regard to National Sanitary matters. I most cordially recognize and acknowledge the excellent results as accomplished by the National Board of Health, both in its labors of investigation and as the custodian of the appropriation made by Congress for the prevention of epidemic diseases up to July, 1883. The members of that Board as Scientists and as Sanitarians are deserving of the lasting gratitude of the American people. As cheerfully do I accord the same meed of praise to the Marine Hospital Service from July, 1883, to the present day. But I must deplore and sincerely regret the contest that has arisen between them. Having carefully examined into this imbroglio, having impartially considered both sides of the question, and having patiently and carefully read the statements made by the opposing parties, I can only say: Unfortunate for the National Board of Health, unfortunate for the Marine Hospital Department, and most unfortunate for National Sanitation.

But let us try and correct the error. The National Board of Health is the result of earnest and faithful work on the part of this Association, and its younger ally, the American Public Health Association. It was authorized and established by Congress in answer to repeated applications of the two organizations, so terribly emphasized by the yellow fever epidemic of 1878.

With a morbid dread of an autocracy, with an apprehension of placing too much power in the hands of one man, I am of the opinion that error was committed in its inception. It was made too unwieldy. Incompatible elements, apparently, have entered into its composition, and in the struggle that has ensued we have

seen that these representative men have "degenerated into detraction, ridicule and unseemly personalities which can only result in great injury to the public health service." By its representative organization, by selecting its members partly from four departments of the public service, and with seven civilians from as many different States, have we not secured a "divided responsibility" ending "in inefficiency and failure?" Can it be possible that with its brief but brilliant record, the auspicious future presaging its advent, it is so soon a stranded wreck?

Would it not have been better to have modelled it in exact conformity with the Departments of our National Government? Surely the Department of Justice is of no greater importance, is of no more utility or benefit than a Department of Health, if organized and sustained in the same manner and on the same basis. I think it would have been far better if we had demanded, and I do not believe it is yet too late, that a Department of Health be created by Congress, with a Chief, the Secretary of Health, or Medical Director of the United States, a member of the President's Cabinet, nominated by him and confirmed by the Senate as other Cabinet officers, and with equal rank and compensation as other members of the Cabinet; said Chief to organize his Department by the appointment of the necessary assistants, sanitarians, scientists, chemists, physicians, surgeons, clerks and other subordinates, just as is organized the Department of Justice and other Departments. Said Chief to advise with the President when necessary, and to report the working of his Department to Congress as required.

To this Department would be referred all matters of National Sanitation, such as quarantine of seaports, the regulation of inter-State quarantine, and the aid and assistance to be granted State and local sanitary organizations, when occasion required, under certain restrictions. But I have not time or space to go into specific details, and they will readily suggest themselves.

With the advice of this Department, Congress could intelligently legislate as regards all matters of National sanitation, including marine and inland quarantine. With the advice of such a Department Congress could intelligently and successfully aid

State and local health boards and officers in their efforts at prevention of diseases requiring more ample means of suppression than within their power.

The objection, and I believe the principal one that can be brought against the National Board of Health, was that it was too unwieldy. That there was an objection, and a tangible one, is evidenced by the fact of its failure to secure that confidence necessary for its proper maintenance, or to hold the position originally assigned it. I have no hesitation in asserting that a similar result would have inevitably ensued if the Department of the Navy, or the Army, the Department of Justice, or the Interior, had been organized on a similar basis—no matter how able, how eminent, or how efficient the members of the Board in charge.

As before stated, a Department of Health is of fully as much importance as that of justice, war, or the navy. Recognition of this fact is but an evidence of progress in civilization. "Public health is public wealth" is an established axiom in civilized and intelligent communities at this day. As enunciated by England's great primate, "it should be the statesman's greatest care."

Fully recognizing its needs, as our entire people now do, the question is, how best to meet the issue? Our national legislators are elected by the people, and from the people. They are ever ready to pass any law that will benefit those whom they represent, and while occasionally they may have one in their midst who has had special training in medical or sanitary science, or one who like our distinguished Senator from Tennessee—the Hon. Isham G. Harris—under the pressure of impending circumstances, will turn the entire weight of his intellect, and bring his every nerve and fibre to bear upon questions of National sanitation, yet the outcome so far has been indifferent good.

The bill establishing a National Board of Health, together with the one for the prevention of epidemic diseases has found serious objections in more quarters than one. Hon. Casey Young, of Tennessee, has recently, in a bill introduced, made certain suggestions in regard to this question. So also may be said of Hon. Mr. Pettibone. These suggestions, I apprehend, will not fully cover the ground. They do not sufficiently comprehend the mag-

nitude of the question at issue, its many intricacies and the numerous conflicting interests to be reconciled.

The army and the navy have their own particular needs. While their medical staff are composed of able, talented, scientific, thoroughly educated and energetic men, and men who have closely studied the question of sanitation as regards their particular branch of the service, yet this is entirely different in many particulars from National sanitary work. That the Marine Hospital Service—a sub-department of a department—has quite enough to do in its own particular line, is well demonstrated by the fact that only during the winter just past, individuals under its own care and for whom it was organized, have become charges upon the counties of my own State, and thereby have disseminated the seeds of small-pox in more than one locality on the banks of the Tennessee river.

I do not wish to be understood as recommending an “autocratic power to be conferred on any one man, with sole discretion in regard to quarantine,” marine or inland, or other matters belonging to State Medicine. By no means. I, as much as any one, believe in certain rights belonging to the people, certain rights belonging to the States, and certain rights by the people and by the States delegated to the National Government. There is no autocracy in the Treasury. Yet, without this Department as now organized, how could our National law-makers as successfully grapple with the intricate and delicate problems of finance? Is the “dollar of our daddies” of more importance than the lives of our fathers, our mothers, our wives, our children, or ourselves? Are monetary questions more difficult of solution than sanitary, that we grant to Congress an able adviser, with able assistants, educated and trained as each separate need demands, for carrying out the regulations and edicts of that Congress? Are they more important? It is by no means an autocracy that is needed. Let Congress, as the voice of the people, say what steps shall be taken to meet the invasion of foreign or domestic disease; and that it may act advisedly, and that it may have the means of carrying out its dictates—let it have a Department for this special purpose. Recruit this De-

partment from the army, the navy, the Marine Hospital Service, or from civil life, from its head to its most humble subordinate; but these recruits, when in its service, owe allegiance to it alone. And when necessity occurs, or emergency arises, give such aid as may be needed from other departments of the government, as such need or emergency may demand.

Is there danger that an inefficient or unsuitable man may be placed at its head? No more danger than that our Chief Executive will appoint, and the Senate will confirm an inefficient or unsuitable man as Secretary of State or of the Treasury. He is responsible to the people. His appointee is responsible to him, and through him to the people for the faithful execution of such laws and regulations as the people, through their representatives in Congress assembled, may decree to preserve them from foreign pestilence or domestic disease.

Dr. J. F. Hibberd, of Indiana, as Chairman of the Section on State Medicine, in his annual address in New York, 1880, very justly compliments the National Board of Health in "that some degree of harmony of action was established among the various State and local Boards of Health that were charged with the immediate execution of sanitary regulations." And further says, that "it should be clearly recognized that the National Board does not supersede local sanitary organizations." Recognizing as we do certain rights and duties belonging and pertaining to towns, cities, States, and the inhabitants thereof, I can clearly foresee and confidently expect a far greater degree of harmony as the outcome of a properly organized department, with a responsible head, than with a cumbrous Board. To use the words of one of the most eminent members of the National Board, Dr. Stephen Smith: "Divided responsibility must end in inefficiency and failure." As in many of our States, we have quite a diversity of legal, social, commercial and other regulations as pertaining to the varied questions of political economy in the different States, all working smoothly together as a whole without conflict, because harmonized and properly restrained as regards each other by the various departments of the National Government; so, also, there is just as positive a certainty of harmonizing National, State and local questions of Health by a similar department.

Dr. C. C. Cox, of this city, in 1871, advocated views somewhat similar to the suggestions I have the honor to submit. And in 1872 a bill was introduced into the U. S. Senate providing for the establishment of a national sanitary bureau, with a chief executive officer ; but as advocated by Dr. Cox, subordinate to the Department of the Interior. The duties of the chief, which are specified at length in the bill, were to collect information on sanitary matters and to report on the same from time to time. He having the appointing power to select such additional officers required, as chief clerk, chemists, experts, etc. Dr. Jno. S. Billings in his report on the National Board of Health and Quarantine to this Association in 1880, says that "there was a general feeling among sanitarians that this bill was not opportune, that the circumstances were such that it would lead to purely political appointments, and that the result would be upon the whole prejudicial to the cause of public hygiene. It therefore received little or no cordial support. The American Public Health Association did not recommend its passage, and it was practically pigeon-holed in the Congressional Committee to which it was referred."

A similar idea was suggested in the American Public Health Association in 1873, by a resolution recommending a National Health Department similar to that of Agriculture or the Bureau of Education. The resolution does not say to what department it should be subordinate.

My objection to Dr. Cox's suggestion is, that if either should be subordinate, the Department of the Interior might be made as an annex to the Department of Health. For of the two, I cannot but think that our National Health, and the questions pertaining thereto, are paramount. As for the political bias that seemed to be so much dreaded, it has no fears for me. If a department is created as suggested, we can, I think, very safely trust the chief magistrate elected by the American people, no matter from what particular political field he may come, to select a head for that department, to manage it according to the regulations of a Congress elected by the same people.

