

to respond to a call, you will sometimes be severely criticised, especially if the case should happen to go wrong in consequence of your not responding. It is much easier for a lawyer to refuse to take a client, or for a mechanic to decline a job or a merchant a sale, than for a physician to refuse to go to a case.

If you have a friend whom you would like to see called to a case that you decline, mention him to them by name. You can advise them to send for Dr. A., or B., or C., or D. If you have anything against Dr. E., be careful to avoid saying, "Do not send for Dr. E.;" merely omit to mention him. Your silence will be condemnation sufficient. You are not bound to recommend a man, but you might have some subsequent unpleasantness were you to practically denounce him.

The chief objection to recommending persons whom you wish to cast off, to physicians whom you wish to aid, is that they are then quite sure still to hanker for you, and to involve you as a consultant or assistant to your *protégé* if things get serious; whereas, if, instead of recommending them to any particular person, you compel them to choose some one for themselves, you will get rid of them permanently.

You will occasionally encounter presumptuous patients, or their wiseacre friends or relatives,—

"All impudence and tongue,"—

whose ignorance is shown by the very fact that they do not know they are ignorant, who will, with a double meaning in every word, make meddling inquiries, examine and cross-question you, and rudely interject *their* opinions, or challenge you to controversy, or seek and presume to discuss your diagnosis and your remedies with you, thrust forward their own favorite doctors, or obtrude their prescriptions of food or medicines, and parley about the merits of various medicines. Such people are generally as full of doubts, beliefs, and theories as a lemon is of acid,—foreknowing and prejudicing all that you do, often destroying faith, and thwarting your every effort; may be, drawing the curtain aside after your back is turned, and exposing to

everybody things that should rightly be regarded as your professional secrets. If you write a prescription for gonorrhœa, or cough, or, indeed, any other ailment, many a presumptuous patient or his keen friend will read it as fast as you have written it, and proceed to comment or argue on it.

"I ain't afeard to argify the topic with 'im."

You will often be harassed and cross-examined by such self-constituted Solomons, and compelled to resort to various expedients to satisfy or baffle them, and at the same time avoid collision with their whims, insinuations, and prejudices. In fact, from this cause, the good effects of mystery, hope, expectation, and will-power are of late almost entirely lost to regular physicians; all special confidence being sapped, all that you can expect in many cases is the gross physiological action of your medicines on the stomach and bowels of the patient, and prejudice and fear actually do much to thwart even that. Such meddling, ignorant gossips will make your duty difficult, and often actually aid in making curable diseases fatal.

When you prescribe a mixture of two or more articles that such a patient is familiar with, take care to make him understand that to judge the relative proportions needed of each ingredient is just as important as the ingredients themselves.

The presence of self-important sick-room critics, with jealous eyes and unbridled tongues, will, if you are at all timid, often impair or destroy your usefulness, by either diverting your mind from your case, or lessening your concentration upon it, and may even lead to mistakes in diagnosis or treatment. Consciousness of being watched by hostile nurse or visitor, who is hoping to detect some flaw, or a chance to make unfriendly criticism, or find fault merely to show that he is a zealous friend to the sick person, will, in many cases, embarrass your demeanor, and to some extent cloud your judgment, and, of course, mar your usefulness. More patients are visited to death by neighbors and friends than die by neglect.

It is better to leave your directions about medicine, food,



etc., with the nurse, or whoever may be in charge, than with the patient. Leave no room for unpleasant mistakes or queer blunders. Tell him in a concise, clear, distinct manner when and how every remedy is to be used, and how you expect it to act, and leave nothing to the discretion or guess-work of patients or nurses. "A few drops," "a little," "a pinch," "a sip," "a swallow," "a gulp," "a thimbleful," "about a mouthful," "a handful," "a cupful," "big as a peach," "the size of a bean," "every hour or two," etc., can each open the door for big mistakes. Be explicit as to whether the patient is to be aroused from sleep to take the medicine or not. Also, whether it is to be taken during the night at all, with or without water, etc.

Give all your directions at one time instead of in scattered fragments; take care to make them precise and complete, and if you have doubts whether they are fully understood, ask the person to whom you have given them to repeat them to you, or, if highly important, write them down.

Study so to control your countenance as to prevent your thoughts, embarrassments, and opinions from showing upon it during anxiety and emergencies, and be especially guarded in your manner, so that nervous and ill patients cannot detect in your flushing cheek, quivering eyelash, or faltering voice, unfavorable reflections about themselves which you wish to conceal; for while your eyes are fastened on them to appreciate their condition, theirs will be riveted on you to read their fate.

Make it a rule not to prescribe large quantities at a time in acute cases, as they may change from day to day, or even from hour to hour; it is far better to have the prescriptions repeated over and over again than to risk having half a bottle set aside untaken. It is always a nice point in practice to decide how large a quantity of medicine to order at a time. In many acute cases you may find it wiser to order only sufficient medicine to last from one visit to the next.

To set aside unused medicines and order others in such a way as not to impair confidence requires not a little clever man-

agement. In many cases where the effect of a remedy is exhausted and it is ceasing to be useful, or where any other indications for a change of treatment appear, it is better not to stop the old abruptly, as though it were wrong or doing harm, but, instead, to give instructions to discontinue it at — o'clock and then begin with the new.

Patients will rarely complain of the cost of medicines that are taken, but they will observe the waste and criticise you when you set one half-used remedy aside and prescribe another. A good plan is to order the empty bottle in which one medicine was gotten to be washed and carried to get the next in. A medicine that has been discontinued is rarely again indicated. If, when you stop one remedy and order another, there be any prospect of its being used again later in the case, take care to mention it, as it will tend to avert the otherwise probable impression that there has been extravagance or misjudgment in prescribing.

Be also guarded against ordering patients to buy expensive instruments, reclining chairs, supporters, braces, atomizers, or other costly articles, unless you are very sure they will answer the purpose and will be used. It is anything but creditable to the physician to have people exhibiting this or that article that cost —, ordered by him, but for one reason or another never used, and now referred to as a shameful instance of needless expense.

You will occasionally encounter patients who have been kept in a furnace of anxiety and terror for months or years (hell on earth) through the ignorance of some novice in the profession, who has examined their simple sore, or abrasion, and mistakenly pronounced them syphilitic, or through the deception of some rapacious and shameless quack, who, for the sake of fleecing, has falsely announced the existence of specific disease, to which their folly has unfortunately exposed them, and whose ravages and horrors their fears have painted to them in the blackest colors, when in fact they have really never had any true sign or symptom of that disease. It is torture enough for those who really



have constitutional syphilis to go through life filled with gnawing remorse for the past, and consumed with horror for the future, without adding spurious cases. When examination proves that the case before you is not real syphilis, it is your highest duty to give such explanation and assurance as will fully banish the error from your patient's mind.

You will be sure to produce unnecessary alarm and distress, in the minds of those whose chests you examine, if, after going through your scientific movements, or, with your watch in one hand and the fingers of the other on their pulse, you tell them of "a slight deposit in the apex," "an abnormal resonance," "a *bruit de diable*," "râles," "a palpitation," "disordered rhythm," or other, to them, ominous symptom or harbinger. Be careful, therefore, to avoid saying or doing anything that will unnecessarily fix the mind of a patient on the character of his breathing, the action of his heart, etc.

You will occasionally meet with persons who were told years ago by Dr. Longface, or Dr. Ogre, or Dr. Sphynx, with a face as long as the bedstead, that their lungs were gone, and that they would not live a year; or that their measles would turn to consumption, or that they had the seeds of this or that affliction which would destroy life within such a time. Such unnecessary and unwise forebodings cast not a little discredit on the profession, and justify severe censure on the erring prophets who make them.

God only knows how many young women in our land are now nervous and dyspeptic, with hollow eyes, sunk in deep anxiety, tormented with apparitions of "womb complaint," which have no existence except in Dr. Spayemall's imagination or in Dr. Squintum's opinion; young women who—had not the subject been suggested to their minds—would have lived a life-time with scarcely a thought of such a thing as a womb.

The chief reason why womb-doctoring might tempt to dissimulation, and why there are so many spurious cases of womb disease, is obvious. When a man is told he has a luxated

shoulder, or a cataract, or hernia, or cancer, he finds many ways by which to confirm or refute the physician's opinion, and he can also see what effect the treatment is having; but when a miserable, nervous woman, morbid on the mysterious subject of "womb disease," goes to Dr. Bugaboo or Dr. Fallopius, mounts his gynæcological table or chair, with its elevating mechanism, "gets examined," and is told, correctly or otherwise, with a solemn phiz, and with all the force of a proclamation, that her womb (like many noses) is "turned a little to one side," or "is down," "ulcerated," "dislocated," or "affected," or that she has pyosalpinx, or salpingitis, it tallies exactly with her fears; and, shrinking from both the expense and the exposure to be endured if she were to consult another physician, she naturally submits to the manipulations, long periods of treatment, and the monetary exactions of the physician or the charlatan who first made the examination,—possibly recovering from morbid states that never existed and paying for cures never performed.

"Small justice shown, and still less pity."

If there be a knave meaner than all others in the sight of God it must be the swindler who, void of moral sense, pretends to make operations on parts of the body the patient cannot see, or makes useless ones, or, with cold-hearted selfishness, exaggerates the nature of any case and terrifies the sufferer for dollars and cents.

"Remember him, the villain, righteous heaven!  
In thy great day of vengeance."

It is also cruel to tell patients, without due explanation, that their trouble arises from the heart, or kidneys, or liver, or the lungs; or that they have the "liver complaint," or "kidney disease," or that their lungs are "affected," when there is only some slight or temporary affection of these organs. And it is still more cruel and unwise, and terrorizing, to predict immediate or impending death, even if you discover serious organic disease of the heart or the lungs. The duration of life will, in



many cases, depend on circumstances that you cannot always foresee,—the cheerfulness or depression of the patient, his carefulness and prudence, the conservative powers of his system, the compensative efforts of nature, etc. *You* know that a man's liver, or his lungs, or his heart may be deranged this week and well the next; but many people think that if any of these organs are affected in any way it is necessarily permanent, and it gives them long and constant anxiety. Many people are at this moment living in as great anxiety as though a sword were suspended over them by a hair, because they were told long ago by old Dr. Vinegar, or Prof. Hasty, or Dr. Cowhelp, or Dr. Shallow that this or that organ was affected, without explanation being given of the functional or temporary character of the derangement. By explaining the difference between temporary ailments and those of a permanent character, or the difference between a functional and an organic affection, you will avoid magnifying real diseases or creating imaginary ones; infuse new joy into life, and insure many a patient perpetual sunshine in exchange for constant gloom. It is your duty, at least, to avoid all ambiguity of language in such cases.

Contrary to the belief of the laity, and of some physicians, sudden death rarely occurs in heart disease, except in aortic obstruction and regurgitation.

In nervous, hysterical, and impressible persons it is possible to convert a slight or even an imaginary complaint or functional trouble into a serious one by fixing their attention on the organ deranged; hence, in these cases, ignorance is bliss, and the physician should divert the mind of the patient as much as possible from the real or supposed seat of disease, even if he has to avoid letting him know exactly what he is being treated for.

Even our instruments of precision can be used in such a manner as to excite the brain, and become objects of study, fear, and dread. That excellent instrument, the (try life) clinical thermometer, often tells from day to day the unwelcome truth

that fever continues, till it seems to the patient and those around that you do little else than measure how long he has to live, and they almost wish it had never been invented. Try, therefore, so to use it as to prevent, if possible, such ill results.

Many now rush to the vaginal speculum on the slightest pretext. Never make an examination with it unless a correct diagnosis imperatively demands.

Take especial care not to allow patients' attention to become unduly fixed on their urine. Some persons have a morbid tendency to watch this excretion, and only need a discouraging word from the physician to make them as anxious about their kidneys—with apprehensions of Bright's disease, diabetes, gravel, etc., arising before their distempered vision—as are some women about their wombs.

You will also have patients lacking in sound common sense—the salt of wisdom—(generally soft-bearded youths who have not yet cut their last molar teeth), who come tormented with evil forebodings over alleged conditions that are either imaginary or perfectly natural: some because they have discovered that their left testicle hangs lower than the right, or because their scrotum remains contracted or relaxed;—

“How green you are, and fresh, in this old world;”—

others terribly alarmed because they have, in examining themselves, discovered the little odoriferous glands on the posterior part of the glans penis, and imagine them to be chancres or cancers; others because the fear of disease, or of blackmail, or of a charge of bastardy, or self-accusation, or a reluctance to sin, or disgust for the (cow) female has thwarted their attempts to copulate with loose women and made them imagine themselves impotent. You will also occasionally be asked for advice by those about to marry, and by others newly married; and also by old sinners, who have burned the sexual candle too fast in youth and lived too fast in general, who find their passions or powers of flesh gone; and others who are almost crazy on account of this or that affliction, defect, or fear. In all such



cases bear distinctly in mind that your opinions and advice are your capital, and do not fail to charge your *full fee*, even though you write no prescription. With such patients the charge is for banishing fears and anxieties and giving valuable information and satisfaction. No one has a right to tax your time and talent in any way without proper remuneration.

Be careful to warn all such people against the curse of falling into the hands of "Lost-manhood Quacks," Pseudo-scientific Anatomical Museum Impostors, with their terrifying plates and examples of venereal diseases, and other "friends of erring youth," who circulate pamphlets on the evils of spermatorrhœa, masturbation, etc., and do not fail to tell them of the mischief such skulking impostors inflict on their victim's health, and also of their merciless, never-ceasing voracity for money. A whole book could be filled in telling the various ways in which these human foxes wring money from their victims as you would water from a sponge.

"Oh! for a whip in every honest hand,  
To lash such rascals naked through the land."

It is doubtful whether the various medical guide-books for the public—Dr. Quackem Wiseacre's "Family Medical Guide," Professor Scolasticus Lollypop's "Every One His Own Physician," and a host of others—ever do any one much good. It is certain, however, that people cannot understand them as they are intended to be understood, and that they do a great deal of harm, by filling men's minds with imaginary wisdom, and emboldening them to try their hands at doctoring cases that require a physician until either much suffering or permanent injury has been entailed, or possibly life itself sacrificed.

Are not such attempts to teach the laity how to treat diseases like trying to teach one how to read who does not know how to spell?

The eight or ten large papillæ seen upon the base of every one's tongue often occasion much anxiety, on being discovered by overanxious laymen, while looking into their throats for indi-

cations of syphilis, diphtheria, or ulcerations, and great relief is afforded when told that these are natural.

You will often be consulted by true syphilitics, who wish to know what would be the result of their marriage. To such never promise certain immunity against future outbreaks; and do not sanction marriage, unless three years at least have elapsed since they contracted syphilis, and at least two years since they had any indications of the disease. Even then they should marry only under hygienic and therapeutic restrictions.

When a patient, alarmed about his health, consults you, if you wish your opinion fully to satisfy him, *be earnest*, and let personal intentness to his case overshadow all that you say or do; take especial care not to divert his conversation from himself to extraneous subjects. If it be at your office, do not digress by showing him your paintings, or the toy steam-boat you are making, or by telling the latest bits of news or gossip, or the history of the good cigar or fine pipe you are smoking, or of the newspaper or novel you are reading, or of the cane you are twirling. If *he* divert the conversation from his case, bring him back to it at the first opportunity, and know nothing but your professional duty.

Never, under any circumstances, recommend sexual intercourse as a remedy for self-pollution, nocturnal emissions, hyperactivity of the sexual system, spermatorrhœa, hypochondriasis, disordered emotions, acne, unruly sexual excitement, priapism, prostatitis, or anything else. If those who are subject to these affections choose to run the risk of syphilis, or gonorrhœa, or bastardy, or exposure; or to commit rape, adultery, or self-pollution, or marry merely as a remedial agent for masturbation or nocturnal emissions, let it be on their own responsibility, not on yours. Perfect chastity is not only entirely compatible with good health; but I know of no disease, either of body or mind, in which sexual intercourse is essential as a remedy or palliative, and I do know that it is far better for all, male and female, to grow up pure in mind and body.