

CHAPTER XII.

"The more one believes in the possibility of error, the surer will he be to avoid mistakes."

Be alert, observant, and apprehensive. You will be supposed to foreknow all conceivable things relating to disease, its dangers and its terminations; therefore never exhibit self-accusing surprise at any possible event growing out of sickness. Even when cunning death has unexpectedly visited some one under your treatment, either directly or as a coincidence, do not let your manner or expressions indicate that you were altogether ignorant of its possibility, or that you regard yourself as deserving of blame, since every case has not only its probabilities, but also its possibilities.

When you are attending cases in which there is danger of rapid or sudden death, beware of ordering chloral, opiates, or other potent drugs in such a manner as to create a belief that they have caused or hastened death (manslaughter). Circumstances or fear of coincidence may at times even render it judicious to avoid writing a prescription at all, and simply to order this or that appropriate remedy under its common name, so that, its suitability to the case and its innocuous nature being understood by all, you may not be unjustly charged with doing harm with it.

When any one under your treatment sinks unexpectedly, or dies mysteriously, or shortly after the use of some agent that you have directed, or after the administration of some new remedy, or shortly after you have performed some operation, or soon after you have pronounced him better,—

"Joy and sorrow are next-door neighbors,"—

or in any other way that could possibly subject you to unjust implication or blame, it is better quietly but resolutely to make a visit to the house of mourning, with a view to ascertain the

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cause of death, and also to discover what attitude the friends assume toward you, and to meet their criticisms and protect yourself by explanations, etc. On such occasions you cannot be too calm and self-possessed, nor too well prepared to explain, and, if necessary, defend your course and the treatment. By so acting you can anticipate injurious and prejudicial reports and suppress or shape them before they become widely circulated.

On eagle's wings, scandals fly.

Bear in mind that such deaths are often due to gross imprudence of patient or friends, or to some mischievous article of food or drink that has been smuggled in.

Dropping in for the purpose of preparing and giving to the family the certificate of death affords a good chance for a desired interview after any one's decease.

When you are called to a case of sudden death the greatest composure of mind and manner is essential and important; be guarded and discreetly reserved,—

"The tongue is the rudder of our ships,"—

and never assume an oracular or prophetic air, or express any opinion of the cause in any such case, but show a Sphinx-like determination neither to form nor deliver one, until you have carefully collected and duly considered all the circumstances.

"Second thoughts are best."

The possibility of death being due to embolism, or paralysis of the heart, syncope, pulmonary apoplexy, or other disease of the heart, or lungs, or brain; to poison, violence, or suicide; should be calmly and thoughtfully weighed before you express any opinion; for, should you rush in with a flurry, neglect this precaution, and un-call-back-ably christen the disease according to your first-born opinion, further developments in the case may prove it to be some other well-known affection, and expose you either as a butt to pleasantry and ridicule, or to severe censure and deep mortification.

If you are called to a case of sudden death in which violence

is suspected, or to which you are summoned by the police or coroner, be very careful to note everything in connection with the body and its surroundings, and also where a post-mortem is necessary, the condition of the viscera, each one of which should be carefully examined before giving an opinion as to the cause of death. Your notes should be taken by yourself or an assistant at the time, in non-technical language, recording first the year, day of the month, and the hour, then the facts of the case and your interpretation thereof, and subsequently your comments. These notes should be preserved; as you will be allowed to peruse them in court, if summoned there to give evidence, in order to *refresh* your memory; though not wholly to rely on them. If the cause is suspected to be poison, be very careful to tie the stomach at both ends before its removal, and keep it and its contents in clean, sealed vessels, under your own eye and custody, till a chemical analysis can be made, unless their care be confided to the police. If a person be dying from the effects of violence (wounds or poison), when called to him, calmly and feelingly impart the fact to him, and if he volunteer a statement of the circumstances causing his injuries, or in reference to his assailants, take his words down at once in his exact language, as such a statement will be received in court as if made under oath, provided the person makes it under the belief that he is about to die of his injuries.

The mottled, reddish, or livid patches, and the purplish-black discolorations which appear on bodies shortly after death occasion no little talk and exaggeration among the laity, and are often cited as evidence of the malignant or putrefactive nature of the death sickness, or as proof of ante-mortem violence, while they are really due to post-mortem contraction of the walls of the arteries, which squeeze the greater part of their blood into the veins; through whose flaccid coats a portion of its separated coloring matter escapes into the surrounding tissues, creating the appearance mentioned. The escaped fluid tends gradually to collect, by the law of gravity in the most

dependent parts of the body, as the back of the neck, trunk, and limbs, thus leaving the higher parts clear and wax-like in appearance.

You can always distinguish these post-mortem appearances from bruises inflicted during life by making an incision into them. If post-mortem, you will find the blood-stain superficial and not involving the tissues beneath, but the contrary if due to violence during life. In the latter case, moreover, they cannot be removed by pressure or change in the position of the body.

The popular belief is that if a sudden death begins at the heart there must have been a pre-existing disease of the heart, and the family physician is often reproached for not having discovered it during the patient's life-time. You will do well to explain that the healthiest heart may suddenly become paralyzed or mechanically occluded (thrombosis or embolism) and sudden death result. Bear in mind, also, that the ordinary termination of organic heart disease is not sudden, but very slow, death, preceded by dropsy, inability to lie down, etc.; in fact, with the exception of cases of aortic stenosis, or regurgitation, or fatty degeneration, there are few, if any, forms of organic heart disease that cause sudden death. Of course, syncope, from mental emotion or physical exhaustion, if not promptly and properly met, may cause sudden death, even when the heart is entirely free from disease.

A belief that stout, healthy people endure accidents, operations, accouchements, diseases, etc., better than weaker, complaining people is another popular error. The truth is the latter are schooled to pain, to disordered functions, lack of exercise, etc., and when they have to endure afflictions, the mutation from their ordinary condition is less than in the former, and they have not so much vital force to be perverted into morbid action, and in many instances their cases turn out more satisfactorily. Plethoric systems generally, strange as it may seem, bear depletion by blood-letting, purgation, etc., badly, because their circulation is accustomed to a certain degree of fullness and ten-

sion, anything short of which causes disturbance of the different functions. The loss of a few ounces of blood will sometimes cause a plethoric man to faint, while a spare one might have lost a like or larger quantity without injurious effect.

Old persons seldom bear surgical operations well, especially if they have any disease of the urinary organs. Make it a rule, therefore, *always* to examine their urine before operating. If any such patients die from shock, narcosis, hæmorrhage, or sepsis, after your steel-edged interference with harmless growths; or deformities, or ailments which they have endured for years with only a certain amount of inconvenience, you will, in all probability, be greatly blamed, and accused of having operated simply for the expected fee, or to show applauding by-standers your energy, your dazzling skill, or your manual dexterity.

You are not expected to set aside the laws of nature, and will seldom be censured for a fatal issue in the diseases of the aged, and never in those of hard drinkers, or in cases in which you have given an unfavorable prognosis from the first. On the other hand, if a woman dies in her confinement you will be cuss'd and discussed, and if there is any possible chance to blame you it will be done, for the reason that parturition is rightly regarded as totally dissimilar to disease. Child-bearing is designed by nature to increase and not to diminish the number of our race; death, therefore, in labor, which is a physiological function, or during the lying-in, which is a physiological state, seems contrary to nature, and produces a shock, and often evokes severe criticism.

Wretched, heart-broken patients who are suffering acutely, perhaps afflicted with painful, incurable diseases, and the miserable, flabby melancholiacs, with all their emotional chords out of tune, who are a hopeless burden to themselves and to others, will occasionally imploringly ask,

"Is there no short, no gentler way
To mingle with our fellow-clay?"

and prayerfully plead to you from the depths of earnestness to

give them something to put them out of the (to them) weary, weary, weary world. Likewise, in the case of those who are enduring terrible sufferings from which recovery is impossible, or at the birth of deformed and monster infants, or with helpless imbeciles, the friends will also sometimes hint at, or even openly request, that a sleeping potion may be given with the view to release the unfortunates—by death.

"It were an alms to hang him."

In many such cases you will agree with the view that—were God to take the poor sufferer it would be a blessing; yet with this aspect of the case you have nothing to do. In refusing such solicitations, in sympathetic but explicit language, let your argument be that human life is sacred, and that no man has a right to say another's life is useless, or with Nero,—

"Twenty more with no excuse for living! Kill them, too,"—

and, also, that since a person has no right to end his own existence, he cannot delegate such a right to another, and, even if he could, you would be the wrong person to ask, since your province, as a physician, in the great drama of life is to prolong life, not to shorten it.

So sacred is human life that were you to perform craniotomy and the child be still alive when born, or should you deliver a monster unfit for earth, you have no right to extinguish life in either. You may, occasionally, actually be blamed for saving a life that selfish guardians don't want saved,—whom they want out of the way.

Many cases admit but gradually of a diagnosis and prognosis. In accidents obscure as to nature or degree, and in cases of sudden illness, when you are pressed to say whether you consider the case dangerous, or likely to be of long duration, reply deliberately and avoid giving definite answers, until you see whether any graver affection is hidden behind the present symptoms, whether new symptoms will develop, whether the system will react, and whether there will be a response to the

remedies used. During the progress of such cases be careful to school your features and your manner, so that people may be unable to read your hesitations, doubts, and surprises,—

Like the pages of a printed book,—

and either insist on consultations or, maybe, dispense with your services. Therefore, in giving a diagnosis or prognosis, you should always use the plainest (English) language and as concisely as possible, and, whenever and wherever it is necessary to repeat it, it is best to adhere as closely as possible to the same phraseology.

In cases of accident and injury to people found in an insensible condition on the highways, or lying in bar-rooms or at station-houses, life itself may depend wholly on a proper diagnosis; therefore, although you may strongly suspect them to be due to drunkenness, you will act wisely to do no guessing, but give a *provisional* opinion only, until they return to a sober state. It is better to say, "He is unconscious; whether his insensibility be due to alcohol, or to other causes affecting the brain, it is at this time impossible for any one to say."

Never pronounce that an injured limb is "only bruised or sprained," and order liniment, with assurances that it will be all right in a few days, until you are positive that it is not fractured or dislocated; or the continued pain and swelling may carry the patient to some more cautious physician, who will discover the truth, to his great honor and your great shame. A great many of your brethren have been caught in this trap.

Bear in mind that death following an injury does not always mean that it resulted from the injury.

"Death has a thousand doors to let life out."

It is well when called to cases of serious burns, cuts, lacerations, fractures, bites, etc., to *mention incidentally* to the family the possibility of the supervention of erysipelas, septicæmia, lock-jaw, etc., and of deformity, or permanent impairment, or whatever other unpleasant results may be reasonably feared, so

that the parties may know that you are alive to all the possibilities and probabilities of the case. With regard to burns, remember that the gravity of a burn is often due less to its depth than to the extent of surface involved.

In the course of your professional career you will come into contact with humanity in all its varied aspects and phases, and your patients will greatly differ in the nature and extent of complaint which they will make in detailing their subjective symptoms to you. Some who are naturally stoical and apathetic will fall into the error of *understating* their true condition, fearing that a fuller statement may alarm their friends, or lead you to think their case serious, and to prescribe much and strong medicine for them, or induce you to pay them many visits. Such patients will sometimes die almost without giving a sign. Others, again, of a hysterical or nervous temperament, fearing that you may not consider them as ill as they really are, or as they conceive themselves to be, will, in detailing their symptoms, *magnify* every detail, and seek in every way to impress you and others with an exaggerated idea of the intensity of their sufferings and the gravity of their condition. One of the many advantages which one's regular attendant has over other physicians is his familiarity with these peculiarities of temperament, with the extent of the vocabulary that each of his patients employs, and with the amount of precision which each uses in answering questions and in describing his sufferings. A gilt-edged society lady, a hod-carrier, a lawyer, a backwoodsman, a school-miss, a straight-laced old maid, a sailor, and a girlish dude would each use a different kind of language to express the same symptoms.

In spite of your earnest and best endeavors, you will often be criticised or upbraided for your lack of foresight in relation to the recovery or death of patients. The ability to estimate the vital resistance in each case, by the temperature, pulse, look, visage, voice, attitude, movements, and general appearance of the patient, is essential to the perfection of your skill as a phy-

sician. It is something apart from your diagnosis, pathological and therapeutical, and few attain it.

The truth is that life is a *different* quantity in different people: one man will scratch his finger with a pin and die, another will get both legs cut off and live, and you will usually have no other way to judge this or that patient's prospect of recovery from either of the twenty-four hundred different maladies that afflict mankind than by the *average* human standard. You will sometimes have cases which will baffle every method of calculation and surprise you by their possessing a great deal *less*, and others by having a great deal *more*, than the average tenacity of life; and, no matter how careful you are, there exist rocks that are not to be climbed, and pits not to be fathomed, and things which are, from their very nature, unknowable; hence, you cannot, with our present knowledge, accurately and unfailingly prognosticate the endurance power of every patient.

To illustrate what is meant:—

HEALTH,	0.
	1st.
	2d.
	3d.
CLASSES,	4th.
	5th.
	6th.
	7th.

Suppose the above seven figures to represent the various degrees of mankind's ability to endure sickness and injury, and that the fourth figure represents the average extent of human endurance power: some patients, then, will actually succumb and die like sheep if the first degree be passed, some if the second be reached, others can endure to the third, and so on, while still others, with iron constitutions, have tenacity of life enough to recover after going as low as the fifth, or even the sixth degree. Now, if you could penetrate each patient's vital

recesses and measure, as with the rule and the compass, his assimilation and innervation, absorption and secretion, reproduction and decay, sensation, motion, and reflex action, and the total of *his* endurance power,—could see at what point *his* possibility of recovery ends and *his* dissolution begins,—you could disentangle and unroll the concatenated web of life from perfect health to death, solve the great problem, and make the strength of this web a matter of mathematical certainty. There would then be fewer unanswerable hows and whys, and you would seldom, if ever, be reproached for unpredicted terminations. This neither you nor any other mortal can do; but you can prepare yourself on all points, and make anatomy and physiology your grammar and dictionary, and pathology your crowning study; also, keep your eyes and ears, mind, heart, genius, and talent, all wide open, and make use of the teachings of accumulated experience, and avail yourself fully of every aid offered to you by advancing medical science.

Full many a pupil has become
More famous than his master.

Disease and pain and death are parts of the plan of creation. Disease is ever afflicting thousands of earth's children in every clime, while death (on his pale horse) is busy from pole to pole. Fear of the former and dread of the latter are parts of human nature, and these (fear and dread) cause mankind everywhere to employ physicians: the prince in his palace, the peasant in his cottage, and the outcast in his hovel; the citizen in his mansion, the laborer in his shanty, and the felon in his dungeon; the millionaire and the beggar; the conqueror and the captive; the lord and the serf; the sailor and the soldier; the purple of authority, the ermine of rank, and the rags of squalor; the man of religion, the man of law, and the man of science; every nation and tongue, the Christian, the Jew, and the Pagan; the pale-faced Caucasian, the Hindoo, the painted Feejee, the oily and savage Hottentot on the burning plains of Africa; the tattooed, fierce, brutal New Zealander, and the

sinewy savage of our own far west; the Esquimaux in the blood-chilling Arctic regions, and humanity in the pestilential swamps and jungles of the tropics; wherever sick and suffering mankind is, they turn to our guild for relief.

This reliance of humanity on you as a physician skilled to heal its wounds and to cure its diseases naturally brings you in contact, on one side, with mankind's greatest, most vital interests, and, on the other, with the great science and glorious art of medicine, and makes your power in your legitimate sphere almost monarchical. You go when you please and come when you will, order what you choose and forbid what you may. You are intrusted with secrets that would be confided to no other person, and are as an honorary member and guardian to every family you attend; and you wield strong influence over husbands, wives, children, and servants, and lay down laws to govern each in matters of life and death, and are obeyed almost as implicitly as though you were Julius Cæsar or the Czar of Russia,—

“The foremost man in all this world,”—

and your knowledge, skill, and attention will be many and many a one's last earthly hope.

Thus, you see, no other men under heaven can do as much good as physicians! Others may have the will, but they have not the power and opportunity; this, with its humane nature, makes ours as noble a calling as exists on the face of the earth,—a calling capable of developing all the good qualities of one's heart, hand, and brain.

Bear, therefore, the greatness of your trust and the responsibility and glory and almost divine mission of our sublime and ennobling profession ever in mind, and remember at all times that every action, every phase of your conduct, every word you utter, every look, every nod of your head, tremble of your tongue, quiver of your lips, wink of your eye, and shrug of your shoulders, will be observed and weighed. Therefore, strive to make your character and your methods as faultless as pos-

sible, and let no word ever escape you unsuitable to the occasion. Also keep your lamps trimmed and your oil ready, and observe punctuality and system in attending all who place themselves under your care, and strive to do the greatest absolute good for each and every one who trusts to your skill for relief, that you may fill every bosom with kindness toward you, and every mouth with praise; and be truly called A GOOD PHYSICIAN.

Thus, my professional brothers, I would attempt to show that the more closely we study the moral and physical peculiarities of the various classes that make up the community, the more clearly we will see that the practice of medicine has a peculiar and complex environment, and that WE SHOULD MAKE SKILL IN PREVENTING, RELIEVING, AND CURING DISEASE OUR CENTRAL THOUGHT AND OUR CHIEF RELIANCE, AND, AS MEN AND BROTHERS, SHOULD DISCHARGE EACH AND EVERY DUTY TO OUR GREAT MASTER'S ENTIRE FAMILY, AT ALL TIMES AND IN ALL PLACES, WITH FIDELITY AND HONOR; and, further, that we must also possess professional tact and business sagacity if we would succeed in the profession to the fullest extent that lies in us, and create for ourselves corresponding spheres of usefulness in the world.

IN CONCLUSION, I FONDLY HOPE THAT THIS LITTLE BOOK ON THE PHYSICIAN HIMSELF MAY TEACH THOSE WHO FOLLOW ITS SUGGESTIONS TO SURMOUNT THE MANY OBSTACLES AND DECIDE THE MANY DILEMMAS THAT ARISE IN THE COURSE OF PROFESSIONAL LIFE; AND ALSO AID THEM TO DISCERN THE STRAIGHT AND NOBLE PATH MORE CLEARLY; AND TO FOLLOW IT MORE BRAVELY, MORE FAITHFULLY, AND MORE SUCCESSFULLY; FOR THE BOOK THAT DOES THESE WILL BE OF UNSPEAKABLE BENEFIT, AND WILL LIVE TO SERVE THE PROFESSION FOR MANY, MANY YEARS; AND NEITHER CHISEL NOR HAND—OF BRONZE, MARBLE, OR GOLD—COULD BUILD ITS AUTHOR A BETTER OR MORE ENDURING MONUMENT.

D. W. C.