

**How to Make Medical Societies of More Practical Value.\***

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MR. PRESIDENT:—The theme I have chosen is "How to Make Medical Societies of More Practical Value." My answer is:

1. By cultivating sincere brotherhood. Medical societies should not be used for the glorification of one or a few medical demagogues, who strive to advance their specific purposes and endeavor to become medical fixed stars, around whom the members of the societies are expected to cluster, to move, and to rotate like planets around the sun. A medical society ought to be a brotherhood in the true meaning of the word. A member of such society should feel and be made to feel, that the various members take a sincere interest in his woe and weal. He should be sure that in time of joy and sorrow he can count on the cordial sympathy of his fellow-members. As a matter of course, the various members possess different abilities, they have different opinions and experiences, because they have been endowed with different talents, they have had different opportunities, they worked in different localities and have different temperaments; but if the various members have cultivated sincerity and brotherly love, as they ought to have, then all this variety will only serve to enhance their fellowship. I can not express any better what I mean than by quoting St. Paul's advice to the Christians at Phillippi: "Fulfil ye my joy, that ye be like minded, having the same love, being of one accord, of one mind. Let nothing be done through strife or vainglory, but in lowliness of mind let each esteem the other better than himself. Look not every man in his own things, but every man also on the things of others."

2. Medical societies could be made of more practical value by endeavoring to rid the country of illegal medical practitioners, commonly called "quacks," who are detrimental to the community at large and injurious to the medical profession particularly. These quacks ought to be prosecuted and legally punished everywhere. We have in Arkansas a law regulating the practice of medicine and sur-

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\*Read at the Thirteenth Meeting of the Southwest Arkansas Medical Association, held at Hope, Ark., July 3d, 1894,

gery, according to which these quacks can be prosecuted and punished, but unfortunately there is no medical officer in this State, whose sworn official duty it is to protect the medical profession by prosecuting the quacks, like there is in the State of Illinois, where the Secretary of the State Board of Health in all cases of that kind, which come to his knowlence, has to bring charges against these transgressors of the law, and personally to assist the prosecuting attorney during the trial. This ought to be law everywhere. In Arkansas charges against illegal practitioners have to be preferred by the public. But the saying is true, "that which is everybody's business is nobody's business." The people, as a rule, do not care about these quacks, because the great majority of the people are not educated enough to appreciate the value of a medical education, and, therefore, cannot appreciate the value of the law regulating the practice of medicine. The consequence is that the people do not bring charges against these quacks.

There was a case of that kind in my own town. A woman, with merely such an elementary education as can be acquired in the lower classes of any rural public school, has located here, practicing both medicine and surgery, and charging fees. Somebody reported the case to the grand jury. There was sufficient evidence to convict her of having violated the law regulating the practice of medicine. But the grand jury found no indictment against her, simply (so I was afterwards informed by a member of that *august body*), because licensed doctors, they argued, as a rule, charge big fees for their services, therefore, it is to the benefit of the public to allow that woman, and other persons of her class, to practice medicine. The consequence is, that said woman, up to this day, carries on her charlatany with more audacity than before; making the public believe that she was persecuted and that she has a legal right to practice medicine. But somebody will say, why don't the doctor who lives in that town, and who is directly injured, prefer charges against the charlatan? He may have various reasons for not doing so. One reason may be fear that injury may be done to his property (barn, house, fences, well, cattle, etc.), by means of fire or poison, or in some other villainous manner. Another reason may be that he fears the enemies he would make among the people of his locality. It is well known that these charlatans often make fast friends, because, being actuated by nothing but selfishness, and not being guided either by the medical ethics, the law of the State, or by any moral principle, they resort to methods to make friends and to gain the confidence of the public, to which no legally practicing physician can nor will resort.

In all cases of that kind the county medical society, as a body, ought to prefer charges against such charlatans and see to it, that the law be enforced. If each county medical society would do so, I assure you, Mr. President, in a short time the counties, yea, the entire State, would get rid of these medical frauds. In addition to this the various counties and district medical societies, and the State Medical Society ought to petition and influence the legislature to enact a law creating a State Board of Health, whose duty, among other things, it ought to be to attend to cases and matters of that kind, like in the State of Illinois.

3. Again, medical societies could be made of more practical value by prosecuting, as a body, medico-legal cases; like, for instance, my case against the county of Clark, which I took the liberty to report to this society at its last meeting. In which case I was professionally employed by the coroner of the county to make a post-mortem examination and to give expert testimony, with the distinct understanding by both parties, coroner and doctor, that the county would be responsible for the fee; which afterwards was disallowed by the County Court. This case is now waiting for the decision of the Supreme Court. Whatever this decision may be, in my favor or not, in either way it will affect not only me, the single medical individual, but it will undoubtedly affect the entire medical fraternity of the State of Arkansas.

In cases of that kind the various medical societies of the State ought to lend a helping hand. "Unity makes strong." The single brother may not have the means to successfully prosecute his case. For a whole medical body it would be an easy matter. The various labor unions have their origin mainly for the purpose to better their financial, and in that way their physical and intellectual condition. These unions watch with argus eyes the interest of the individual member of the union, and in doing so they advance the interest of the entire body. They hold fast to the principle, "If a single brother is wronged, the entire brotherhood is wronged. If one member suffers, the entire body suffers."

How often have these labor unions demonstrated to the world that they represent a momentous power and exercise a great influence? The medical societies, as a rule, do not care very much, if anything at all, for the welfare of the single members. Each member has to fight the enemy alone in his own peculiar way. And often the neighboring, "so-called," professional brother, and, perhaps, a member of the same medical society is a disinterested spectator, and sometimes even an interested secret enemy, not believing that

any professional injury inflicted to a brother is an injury inflicted also to himself.

Mr. President, it is high time that the medical societies learn to profit from other societies, how to guard more than has been done in the past, the interests of the individual just as well as the interests of the entire body.

4. Furthermore, the medical societies would be of more practical value by agreeing and sticking to a fixed fee schedule. When more than six years ago I settled in this town, not knowing what the customary fees of the physicians in the neighborhood were and desiring that we all might practice on a harmonious basis, I went to each one urging them to aid me in forming a medical society, and to have a definite understanding about fees, etc., but my endeavors were unsuccessful. Each one gave in substance the same evasive answer; that he on his part was willing to form such a society and to have an understanding about fees, etc., but that he knew that the other doctors would not go into it, neither would they stick to any rule agreed to. The cause why they did not wish to become members of such a society was, as I soon should have occasion to find out, that each one believed that it would be to his personal interest.

Mr. President, there are many practicing physicians who are in their selfishness so near-sighted, so narrow-minded that they cannot comprehend that any physician who does not esteem his honestly and legally practicing brother, does not honor and esteem himself; and that the public must have a very low opinion about a physician who tries to build and keep up his practice by craftiness, and by trying to injure and down an honest brother. Men of that character ought to be stigmatized by the medical profession and branded with the mark of infamy, like Cain of old, to whom they are related, who killed his brother. The golden rule: "All things whatsoever ye would that men should do to you, do ye even so to them," is not only the law and the prophets, but also the medical ethics in a nut-shell.

5. Another thing that would make medical societies, at least local societies, of more practical value, would be that physicians belonging to the same society and who live in the same locality, ought to have a so-called black list of such patrons who are able to pay but who cheat a brother of his hard and honestly earned fees. It will not profit a brother to treat patients of that class. Allow me to illustrate. A patient or patron of Dr. A comes to Dr. B, of that same locality, to be treated. Dr. B knows that that person owes Dr.

A a considerable sum of money for professional services rendered, and, perhaps, even for medicine furnished in the present or in a former case of sickness, and that Dr. A has done all he could for that person; furthermore, that Dr. A has failed to collect his fee, although the patient is able to pay the same. In spite of all such knowledge Dr. B takes the case. For cash? No, on the same credit system as Dr. A did. Why does Dr. B take the case? He thinks: "Here is a splendid opportunity to get a customer." What does he care if Dr. A gets his fee or not; if he only gets his fee. But that patient will try to cheat Dr. B like he did Dr. A. He will cheat any doctor if he finds an opportunity to do so.

A physician who will protect the professional interests of his brother practitioner, will not only do a noble deed, but in the final end will reap therefrom a rich harvest of blessings. His brother practitioner will, in return, watch and protect his (the former's) interest. There will spring up between them a friendship, which, in many an instance, will prove to be invaluable to both. It will make each brother feel better. The public will soon esteem them higher and treat them with more respect than before.

6. Again, medical societies would be made of more practical value if all members belonging thereto would take the greatest possible interest in the proceedings of the same. It is the members of the society who make it either of practical value or not. Many members are seldom found in the meetings. They pay their annual dues and think that they have done all that reasonably can be required or expected of them, and that they have done all that is necessary for the welfare of the society. No, brother! To make your society a success, to make it of more practical value, it is desirable, yea, absolutely necessary, to take an active interest in all kinds of work of the same. You ought to visit its meetings; you ought to participate in the discussion of the subject under consideration; you ought to furnish material for discussion either in the form of written articles, or report of cases in your practice. Do not be afraid to let your voice be heard in the meetings, because you are a member from the rural district. Do not undervalue your experience and knowledge which is just as valuable as that of anybody else. Remember, "All is not gold that glitters." There is often a diamond concealed in a coarse looking stone or rock.

7. Again, the medical societies could be made of *more practical value*, if the members of that town or city, where the meeting is held, would take a more vital interest in the same. I have frequently noticed that a great number of the resident members are missing in the meetings, or, that after a very short stay, they ask to be excused

on account of urgent work. Others, as soon as the meeting has been adjourned, depart in a very dignified manner, hardly noticing the rural brother any more. That class of city brethren endeavor to impress the rural brother of having an enormous practice, a great many cases on hand *just then*. Such a dignified brother hurries down or up from the meeting room to his office. In less than a minute he reappears on the street with his medicine chest, and in passing the rural brother abruptly remarks, "Have to see a number of patients, am in a great hurry. Good-by doctor." Then he disappears around yonder corner. Fifteen minutes later he comes back. Up he runs to his office. A minute later he comes down again and hurries away in some other direction. So that brother comes and goes, comes and goes, now along this and now again along that street. He has no brotherly word *outside* the meeting for his rural brother, who is perhaps a stranger in that town or city and feels very lonely. He may have to wait four, five, six or even more hours before the train or omnibus comes, that will carry him home.

Now, very busy resident brother, can't and won't you make it a little pleasant for the visiting brother *outside* the meeting hours? Can't and won't you take him to your pleasant home and introduce him to your family members, as that brother would do if you should happen to come to his village or town? He may be a little bashful, and in style and fashion not up to the latest season, and rusty in social etiquette, but sincere brotherly love on your part will cover up all which the brother is lacking. And now, after a short, but pleasant, stay at your home, you have to leave to see quite a number of patients. Can't you, perhaps, take your rural brother with you and show him some interesting, rare and instructive cases, as you have *so many on hand just then?* To be sure, the visiting brother would under reversed circumstances not fail to do so, and to do so with pleasure. In short, brethren residing at the place of meeting should try to make it pleasant in every possible way for the visiting brethren, and then the latter will not fail to reappear at the next meeting. In this way, brethren, residing at the place of meeting, will help, on their part, to build up their medical society, and to make it of *more practical value*.

8. Again, medical societies could be made of *more practical value* by doing more work in their meetings, and by better utilizing the fixed time for the sessions of the same. We have various times visited meetings, where nothing else was done but officers elected for the ensuing year, or delegates to the State medical society, which was done by acclamation, and did not take more than five or ten minutes, and then, "*as there was nothing else before the meeting.*" it

was adjourned in due form. The "so-called" meeting was indeed nothing but a farce, and ridiculous to the uttermost. Such societies are usually worked up and started, and their meetings called by medical demagogues (or men who strive to become such), for their special selfish purposes; perhaps for the purpose to be elected president of that society, or delegate to the State medical society, with the secret hope to be elected president or something else of that State society, and for that "*very important business*,"—as it was expressed in the invitation,—some visiting brethren had perhaps to travel twenty, thirty, forty, or even more miles, spending a day or more, spending their money, leaving at home a dangerously sick patient, and all this they had to do for the purpose to create a medical president, etc.

A brother of this society, in its last meeting, speaking about loss of visiting brethren, coming from a distance, made the very appropriate remark: "I do not know how much I may lose at home by my coming up to this meeting. It may be ten, twenty or one hundred dollars. I may lose a good paying customer, who never will come back again." In fact, a member, coming from some outside or distant place, *loses always* in comparison to a member residing at the place of meeting. Because the latter carries on his practice up to the moment of convening the session, then again immediately after adjournment, and in many instances during the sessions of the same. Is it strange, that after such a meeting, *unprofitable and valueless to each and every one, except to one demagogue*, the members from a distance will go home and say to themselves: "We shall not make fools of ourselves by visiting another meeting, *if one should be called again*. Let the dead bury the dead. We have to do something more important." That medical society will exist, as a matter of course, but it will only exist in name. After the originator has accomplished his egotistic purpose, he has no further interest in it. Now, is it astonishing that under such circumstances county medical societies do not thrive?

Any medical society which will practice what I have suggested in the foregoing paragraphs, *will become more and more of practical value*. Such society will attract many of those medical brethren who have hitherto failed, for reasons assigned in the above, to become members of the same. They will be a benefit to the society. The society in return, will benefit them, according to the law of ethical and scientific reciprocity. Let the motto of every medical society be: "*All for one, and one for all*." Then will medical societies approach more and more the ideal standard of what they ought to be, and they will become not only of *more practical value* than they are now, but a *perfect blessing to the medical profession generally, more especially so to the members of the societies, and indeed a sincere brotherhood*.