



[From Fernelius' Universa Medicina, Geneva, 1679.]

BOOKSHELF BROWSING

THE CONTRIBUTIONS OF NEW YORK TO AMERICAN GYNECOLOGY AND OBSTETRICS

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A VISIT to the City of the Famous Sky Line, offers much that is diverting and informing to the observant traveler from the interior. New York is the largest of the American villages, and among its miles upon miles of cavernous Main Streets, even a Sinclair Lewis would have cause to hesitate before characterizing its life.

The inhabitants of this metropolis exercise many quaint manners and customs (rather more of the latter than the former) and even the numerically negligible American portions of the population pass curious and interesting existences. Most of them seem to be of the cult of flagellants or self torturers, in that they seek to dwell as far as humanly possible from their places of occupation and twice daily subject themselves, voluntarily, to the most frightful struggles to secure places in noisome underground vehicles, wherein, amid agony and fearful noises, they strive to avoid suffocation long enough to be eructated from the bowels of the earth at their several destinations.

These unusual people have a single creed in life: "Bigger and Better," to which end they construct the largest and highest

office building in the world, which is also, in consonance with their creed, the emptiest. Hospitals, they build in like fashion. Their medical centers are so gigantic that I am informed from creditable sources that 96 per cent of all obstetric patients are delivered somewhere between the entrance portals and the delivery room, the small remainder having their babies in taxicabs while en route to the hospital. These magnificent centers are, by an ingenious inversion of terms, invariably most remote from the center, so that in the time elapsing between the call to the obstetrician and his victorious passage to the institution through the well-known New York traffic, he is usually greeted by an experience-hungry intern with the information that the circumcision has just been successfully completed.

Naturally, from such a remarkable people, one would expect great advances in the medical sciences, and that this is true, we shall presently learn.

The Beginnings. In the history of the American colonies, only occasional mention is found of the assistance of male physicians in childbirth. Deliveries were usually aided by midwives, a good number of whom plied

their trade, especially in the northern colonies. Physicians were sometimes consulted in cases requiring embryotomy or some drastic variety of delivery. Gynecology, of course, was yet to be born a century later.

The first New York doctor deliberately to specialize in obstetrics was Dr. John Dupuy who flourished in the early years of the eighteenth century, dying in 1745. Dr. Dupuy was eminent in public affairs, and was a vestryman of Trinity Church, in whose churchyard he lies buried, his armorial bearing carved upside down upon his tombstone by a conscientious but non-heraldic stone-cutter. It is of interest that the first American obstetrician was connected by family ties with our own obstetrical family, the Hirsts, since Dr. Dupuy was a direct ancestor of Mrs. Barton Cooke Hirst.

Another early New York obstetrician was Dr. Peter Billing, of whom a brief reference is made in the New York Gazette for December 16, 1751, as an experienced physician and male midwife.

During these formative years, there was little or no obstetric surgery. Patients were generally attended by midwives, and perished for lack of surgical intervention in cases in which this was imperative. Advanced extra-uterine pregnancy was occasionally recognized and operated upon by the surgeons of the day; the first American publication of such a case is from the pen of Dr. John Bard of New York and was read before the Society of Physicians of London by John Fothergill on March 24, 1760. It is the account of a case in which a woman became pregnant, had a few labor pains at the end of gestation but was not delivered. She presently regained her health, but noted "a large, hard, indolent tumor inclining a little to the right side." She again became pregnant and was delivered of a healthy child, the abdominal tumor remained unchanged. She subsequently developed temperature and fluctuation in the abdominal tumor. After consultation the tumor was diagnosed as

an extra-uterine fetus and Dr. Bard incised the growth, evacuating a full term fetus with a quantity of pus. The patient made an uneventful recovery.

This John Bard had the advantage of good medical training, being apprenticed to John Kearsley (of Philadelphia, of course) where he practiced for seven years and married a niece of Mrs. Kearsley. Benjamin Franklin persuaded him to go to New York, by reason of the scarcity of physicians in that city, following an epidemic of yellow fever. He went and, prospering greatly, became one of the most distinguished of American earlier physicians (Cutter).

Cutter states that formal instruction in midwifery began in New York in 1767, with the organization of a faculty of midwives under the auspices of King's College, John Van Brugh Tennent (1737-1770) being appointed professor of obstetrics. Tennent was a highly trained Edinburgh man, but developed pulmonary tuberculosis shortly after his appointment and removed to the West Indies where he died of yellow fever.

He was succeeded in the chair of obstetrics by Samuel Bard, son of John, also of Philadelphia, who received his early training in America, then was apprenticed to Alexander Russell in St. Thomas's Hospital (London) and finally was graduated from Edinburgh in 1765. He was elected to the chair of theory and practice of medicine in King's College. After the death of Tennent, midwifery was added to this chair, constituting a combined professorship which Bard held until 1776.

Bard's life is a most interesting one, personal attendance upon George Washington during the latter's stay in New York being among his activities. He was also influential in bringing about the establishment of the New York City Public Library and the New York Dispensary. Dr. Bard's most important contribution was his "A Compendium of the Theory and Practice of Midwifery" (1807), the first formal work on obstetrics from the pen of an American physician. The reputation of the

author was of the highest, and the book went through three editions. It was then enlarged and again three editions were sold. Perusal of this book will persuade the reader that in Samuel Bard, America had produced an obstetrician far in advance of his time, indeed a conservative who would fit perfectly into the obstetric thought of today.

John W. Francis (1789–1861) was one of the most learned of the New York obstetricians, a student under David Hosack, who had been Bard's successor. He became professor of obstetrics and diseases of women and children in the College of Physicians in 1819, and was also one of the founders of Rutgers Medical College, where he held a second chair of obstetrics. He was devoted to general literature and hence was not a prolific medical writer.

Many medical historians, including Dr. Irving S. Cutter, consider Gunning S. Bedford as the most striking and forceful figure yet produced in American obstetrics. Destined to study law, Bedford changed his plans and graduated from Rutgers Medical College in 1829. After two years of European study, he returned to the United States and eventually located in New York, where he was prominent in the establishment of the Medical School of New York University in 1841. Dr. Bedford was professor of obstetrics in this institution until 1864, when he resigned by reason of ill health.

He published two books which had a wide circulation and exerted much influence both at home and abroad. "The Diseases of Women and Children" appeared in 1855 and the more important work, the "Principles and Practice of Obstetrics," was published in 1861. This was a really scholarly and scientific work and excited great enthusiasm. The Edinburgh Medical Journal said, "The book is, as a whole, so good, that we wish our readers to be impressed with a sense of its soundness, readableness and worth. We can, therefore give Dr. Bedford's volume no higher praise than to say it is remarkable

among its contemporaries for soundness in scientific view, readableness as a literary composition, and worth as a guide of practice. This work will repay reading and it seems regrettable that Dr. Bedford's preëminent contribution should be so little known by the obstetricians of our time."

James D. Trask was another New York teacher and writer on obstetrics of the highest quality. He was a modest and unassuming man, who resigned his professorship at Long Island College to devote himself to his private practice in Astoria, L. I. In his Memoirs of Dr. Trask, written for the American Gynecological Society, Fordyce Barker says: "Few men in the profession have done such good work as he, and none were more highly respected by the best men in the profession." In the community where he lived, he was universally beloved and commanded the most perfect confidence as a physician and the highest respect as a man.

Dr. Trask's monograph upon "Rupture of the Uterus" was by far the most valuable to be published upon the subject at this time. Barker says "Since its publication, all obstetric works refer to it and I think it safe to say that the conclusions of Dr. Trask are accepted by educated and intelligent obstetricians of every nationality as guiding rules of practice in the presence of this fearful accident of parturition."

In 1855 Dr. Trask wrote a ninety-four page essay upon the "Statistics of Placenta Previa" which received the prize of the American Medical Association and excited the most profound influence upon the management of this lesion.

A little known, but most important contribution to medicine was made by Dr. John Stearns of Saratoga County, New York, in a letter to the Medical Repository in 1807. Here Dr. Stearns gives an account of the therapeutic use of ergot, which he calls pulvis parturiens, and states that he has used this preparation successfully in his practice. "It expedites lingering parturition and saves to the accoucheur a considerable

portion of time, without producing any bad effects on the patient," was his comment.

The steady growth of scientific principles in the profession and the progress of clinical medicine and surgery, led to the rapid expansion of hospitals, clinics and medical schools. In New York City, the New York Dispensary and the New York Hospital were opened in 1791, the New York Lying-In Hospital in 1798, and Bellevue Hospital in 1816.

McDowell's ovariectomy had focused the attention of the surgical world upon the possibility of laparotomy. The stage was set for the development of a new specialty and soon its boards were to be trod by the real founder of operative pelvic surgery, James Marion Sims (1813-1883). Born in Lancaster, South Carolina in 1813, Sims studied medicine at first under a preceptor, later graduating at Jefferson in Philadelphia in 1835, and settling into practice in Montgomery, Alabama.

Sims' triumph over that scourge of women, vesicovaginal fistula, is an old story to all of us and needs no repetition here. Coming to New York on account of his health, on his own initiative and by his own force alone he founded the Women's Hospital in the State of New York, the first special hospital for gynecology in the United States and one which still maintains its high standard as the ideal training ground for the intending specialist in this field. Sims spent much of his time abroad, practicing, demonstrating his operation for fistula and awaiting the end of the Civil War. During this period he wrote his somewhat revolutionary book, "Notes on Uterine Surgery," which achieved great success in the profession. Returning to America, he became involved in a controversy at the Women's Hospital and was eventually forced from its staff. This incident is still too fresh to bear much discussion and is at best not particularly relevant to this sketch. Sims was probably the best known American physician of his generation. His life abroad, his spectacular and highly

successful operation for the relief of an otherwise incurable condition, together with his rather histrionic personality all combined to make him a figure of international recognition.

In a personal letter to the present writer, Howard Kelly comments that "the best thing Sims ever did for gynecology was to get hold of Thomas Addis Emmet as his assistant. Dr. Emmet married a lady who was known to Sims and when the latter was in search of an assistant at the Women's Hospital, he learned that Emmet was in New York and selected him for the post. Dr. Emmet was apprenticed assistant in 1855 and served in that capacity until 1862, when he was appointed to succeed Sims as Chief, which position he held until 1900.

It is to Emmet that America owes its preëminence in plastic surgery, for he explored the whole field of vaginal operative gynecology, establishing principles and procedures which are still inviolate. His origination of trachelorrhaphy, his extensive perineorrhaphies and his improvement in the Sims fistula operation are perpetual contributions. Dr. Emmet's book, "The Principles and Practice of Gynecology," appeared in 1879 and went through three editions within fifteen months, being translated into French and German.

He was a systematic man, who kept meticulous records and case histories, often illustrating the lesions noted on the margins of the record. From all standpoints Emmet probably did more to advance pure gynecology than any other man, and New York justly honors his memory.

In the discussion of the Women's Hospital and the men who contributed so largely to its fame, the work of James B. Hunter should receive recognition. A self-made man, twenty years a general practitioner before becoming a pure specialist, Dr. Hunter possessed a gynecologic training probably superior to that of any of his contemporaries. Associated in his earlier years with Sims and Peaslee, and later with Thomas and Emmet, he profited so

well by his exceptional opportunities, that he represented all that was best in those honored teachers, the living and the dead. He was renowned for his acuteness as a diagnostician and his marvellous dexterity as an operator. Hunter was not a prolific writer and died in his prime, but his gifts rendered him a successful and highly respected teacher.

There remains to be considered the work of a group of men whose personalities and whose scientific achievements have probably not received the acclaim which is their due. Probably the greatest of these was Edmund Randolph Peaslee, of whom Howard Kelly says in a letter to the writer, "He was a true scientist, greater than Sims or any of the others of his time. His book remains a classic and he never has been given sufficient credit." Dr. Peaslee was a Massachusetts man, born in 1814. Graduating in medicine at Dartmouth and later Yale, he was shortly elected to the chair of anatomy and physiology at Dartmouth Medical College as successor to Dr. Oliver Wendell Holmes. Later he was appointed to the chair of gynecology which he held until his death. Peaslee was also professor of anatomy and surgery at Bowdoin, and at the same time active as professor of physiology and pathology in the New York Medical College. Afterwards he held the chair of obstetrics and diseases of women in the same institution. In 1874 he became professor of gynecology in Bellevue. It is worthy of mention that in his long career of thirty-seven years as professor in different medical colleges, he never was compelled by illness to give up a lecture until the Friday before his death. He was one of the surgeons to the Women's Hospital from 1872 until he died. Dr. Peaslee was active in medical societies, serving as president to seven important scientific organizations, including the American Gynecological Society. He was a prolific writer, his great work, "On Ovarian Tumors," remaining as a model among medical monographs.

Peaslee had great capacity for continued work and wonderful endurance. Yet his physical organization did not indicate this quality. Oliver Wendell Holmes spoke of him in a letter in the following characteristic fashion, "Peaslee's loss must be very much felt in town and country. He succeeded me as Professor of Anatomy and Physiology at Dartmouth in 1841. He looked there as if his circulating capital might be a hundred or two red globules, with twice as many white ones in half a pint of serum, yet he outlived scores of prize-fighters, and looked better when I saw him some months ago than as I remembered him then."

Fordyce Barker was for a quarter century the dominant figure in New York medicine. One of the Founders of Bellevue Hospital Medical College; he filled the chair of obstetrics and diseases of women from its inception until his death.

Early in his career, Dr. Barker strained his voice and ever after labored under the disadvantage of having only a hoarse whisper at his command, due to partial paralysis of the vocal cord. This misfortune would have turned a lesser man from a public career, but he persevered in his lecturing and public speaking to the end of his life, always making himself heard and causing his audience to forget the imperfections of his voice by the charm of his eloquence and the purity of his diction.

Dr. Barker always remained a general practitioner and developed a practice which is still spoken of with awe by physicians who knew of its power and extent. "Physician to the nobility" he was called, and it is said that his case book read like a combined Social Register, Who's Who and Financial Directory of New York and neighboring states. Dr. Barker wrote well, but contributed little of permanence to medical literature. He was essentially a clinician and his fame rests upon the affection and respect in which he was held by his many patients and his medical confrères.

In John Byrne, we find a man of entirely different stamp. An Irishman, educated in

medicine at Belfast, Dublin, Glasgow, and Edinburgh, he came to Brooklyn and rapidly rose to a commanding position in practice and in public affairs. In 1857, he was instrumental in founding a dispensary and hospital which in the succeeding year was incorporated as the Long Island College Hospital. For a time he held the clinical professorship of uterine surgery in this institution. For many years Dr. Byrne controlled the largest hospital service in Brooklyn, had the largest private clientèle, and ranked as the leading consultant in his special field.

His great contribution to gynecology was his wide cautery dissection in cervical carcinoma, and his results, so brilliant as often to be challenged during his lifetime, remained as possibly the best statistics in the cure of this dread disease, until the advent of radium improved the figures.

Alexander J. C. Skene was a Scot by birth, a scion of the old Aberdeen family of that name. He came to America at the age of 19, studied medicine in Toronto and Michigan and was graduated from Long Island College Hospital in 1863. Following a war service, Dr. Skene entered practice in Brooklyn and soon became professor of gynecology at Long Island, where he was most active in securing practical and beautiful plans giving adequate expression to the great Polhemus gift of a college and clinic building. Dr. Skene was a founder and president of the American Gynecological Society and a prolific medical writer. He remains known to posterity by his observation upon the urethral glands, which bear his name. He was a skilled sculptor and spent his spare time in modelling portraits of animals in his mountain retreat in the Catskills.

T. Gaillard Thomas, a South Carolinian by birth, received his medical education in the Medical College of Charleston in 1852. Coming to New York, Dr. Thomas established a quiz class in obstetrics which soon attained a wide reputation. He later became lecturer on obstetrics in New York University and attracted large audiences

by his brilliant and entertaining presentation of the subject. He finally became professor of obstetrics at the College of Physicians and Surgeons and held that post for a number of years.

Dr. Thomas' name is especially identified with his operation, laparo-elytrotomy, which he presented to the profession as a substitute for the classical cesarean section. Its principles have become incorporated in operative obstetrics, and it is still in quite general use, though in somewhat modified form. He was a member of the leading obstetrical Societies of the world and was a most impressive figure in New York Medicine.

The development of gynecologic and obstetrical pathology was slow in America and one must mention a pioneer in this branch, Dr. Henry C. Coe, still living, but now in retirement, whose many publications presented this specialized pathology to the profession.

Also, there must be a tribute paid to the genius of Paul F. Mundé, the German scientist who, as its brilliant editor, placed the American Journal of Obstetrics in its enviable position as the educator of the American specialist. Dr. Mundé was followed in his editorial chair by Dr. Brooks H. Wells, who maintained this journal in its high estate until his untimely death following a bicycle accident.

One might prolong this list indefinitely. Names of men mighty and puissant in the profession come crowding into memory and the biographer finds himself at a loss to determine their order of precedence in the work to which they devoted their lives. Gill Wylie, the sportsman, he who gave the intra-uterine stem to relieve suffering thousands of their dysmenorrhea, Polk, Cragin of the velvet hands, the genial Studdiford, the flamboyant and lovable Florian Krug, Edebohls of the ubiquitous stirrups, Jewett, Lusk whose midwifery still remains a classic, the modest but brilliant Pomeroy, Garrigues, Goffe and lastly that man whose love of his work, whose open mind and whose devotion to

teaching made him an inspiration to this writer, John Osborn Polak.

New York's contribution to gynecology and obstetrics has not closed with the passing of the great physicians whose attainments have been so hastily characterized. The work goes on, the torch burns with an ever brightening luster and one can discern in the eager younger hands that are reaching up to grasp the beacon and carry it on, that these contributions will not fail in the years to come. It would be a most congenial task to chronicle the work done and being done by those colleagues of our own generation. Time, however, does not

serve, nor is the occasion auspicious for an appraisal of the men now active. Suffice it to say, that we rest content in the knowledge that in your hands gynecology and obstetrics will continue to develop and broaden in scope, in the future, as in the past.

This brief sketch, begun on a note of friendly irony, ends with a sense of the deepest affection for the living, and of profound respect for the dead members of our well beloved specialty, together with full appreciation of the obligation to them, which rests upon all of us, who labor in our chosen field of medical endeavor.



HONEST sympathy and understanding must be acquired and practiced outside as well as inside the sick-room.

From—"Disease and the Man" by Roger F. Lapham (Oxford).