

scientific and philosophical progress, viz., the idolatry of authority, with the resulting dread of original and independent speculation.

In our day surgeons, like the workers in other fields of science and art, have claimed the right to think and reason for themselves, and to pursue their speculations to their ultimate conclusions, and in so doing they have, in large measure, developed the faculty of judiciously estimating the proper relations between observed facts, on the one hand, and speculative deductions therefrom, on the other.

The day is past, and gone forever, when an observing and thoughtful surgeon would tremble in the presence of his own observations, and refrain from reasoning out any theory based thereon to its logical conclusion and applying it in practice lest, peradventure, it might land him in a contradiction of the previously accepted orthodox beliefs which, with all their accumulated load of inherited respectability, have been handed down to him to be carefully cherished and worshipped as the *ultima thule* of all truth and wisdom.

How many pathological, anatomical, and surgical dogmas of the most venerable antiquity has our generation seen swept away like so many stumbling blocks and rocks of offence in the way of the benediction-laden ship of modern progress?

And, in this great work, may we not justly claim for the new world as large a meed of praise as for the old? Is it not a plain fact that the spirit of original investigation and independent speculation has been abroad in every section of this great western hemisphere, in consequence of which an amount and kind of surgical progress has been accomplished which has commanded the most respectable recognition from the whole world, and especially from those places in Europe which have hitherto been regarded as the very fountain sources of all medical and surgical truth?

This is one of the most remarkable and, to us at any rate, one of the most interesting features of the great surgical age. In times past, American students have flocked to the European schools to complete their surgical education, and they do so yet, and undoubtedly with great advantage; nevertheless, the time has arrived when the necessity for such pilgrimages is becoming every day less and less apparent, and

when the question is more and more asked, and with ever-increasing show of reason, whether we are not in a position to make at least a reasonable return in kind for all that the east is able to bestow upon us, and to confer as valuable gifts upon the surgical pilgrim from Europe as American pilgrims were able to obtain there. The current has certainly begun to flow in this direction, and I am convinced that it will continue to do so until a course of American surgery will come to be regarded as indispensable to Europeans as in former times a European one has been to Americans. The beneficent results which such a system of reciprocal instruction and inspiration would insure directly and indirectly to humanity in general might possibly be foreshadowed in the ecstatic flight of a poet's dream or a prophet's imagination, but certainly it cannot be done justice to in the commonplace terms and limitations of such a discourse as this.

A third and, perhaps, equally potent feature in the progress of modern surgery is the creation and growth of the so-called specialties. Notwithstanding the fact that it has been fashionable in certain quarters to sneer at, or even to condemn, this more or less artificial division of labor; and notwithstanding the undeniable fact that some rather serious abuses have risen therefrom, and it has not been an altogether unqualified blessing, still it is impossible to close our eyes to the fact that otherwise unattainable advantages have accrued to surgery by the devotion of certain individuals to more or less clearly marked out segments of the great field, and that such individuals should come to be known as ophthalmologists, gynecologists, and so forth, was no more than natural and proper, provided, always, that they started out in the first place as fully equipped general surgeons.

The ophthalmologist or the gynecologist who is not a general surgeon is like a sailor whose powers as a navigator are confined to one side only of his ship. In other words, the exclusive specialist, the man who knows practically nothing outside of the narrow artificial limitations of his own specialty, is *prima facie* a quack, and for his existence and his foolishness honest scientific specialism should not be held responsible. *Every surgeon need not be a specialist, but every specialist must be a surgeon.*