

What was to be done in such cases? The physician's duty evidently was to act as if the disease were grave, and bleed freely and repeatedly until the improvement was manifest. But if the case were already of three days' duration, and its history and symptoms clearly showed the existence of pneumonia, he still bled, because he did not know the relation between the date of the disease and the condition of the lung.

And what change has Laennec's discovery of auscultation made? First published in 1819, it remained for a long time confined to the Parisian hospitals. By many it was treated as a vain pretence, and fully twenty years elapsed before it became generalized in France. And when we consider how long a training, under good instruction and with a great variety of illustrative cases, is requisite to insure a sufficient skill even with the young student, it is not suprising that physicians of a mature age failed in the attempt, and were thus led to depreciate the value of auscultation.\* But, however slowly it at first made its way, it has now changed the whole face of the science and art of medicine so far as the

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\* But another reason must be assigned. It is painful to find fault with one so useful in his day as was Laennec. We know not what more brilliant discoveries are before us; but, looking back, we see none, in the whole history of medicine, from Hippocrates to our day (except those of Harvey and Jenner), worthy to be compared with those of Laennec. And yet, in that very work on diseases of the chest, which changed the whole face of the science in reference to these common and dangerous maladies, we find him dwelling with special enthusiasm and eloquence on the acoustic properties of the instrument employed, and exerting himself to show the advantages to be derived from its use in preference to the direct application of the ear to the walls of the chest. He thus unwittingly did more to hinder the general adoption of auscultation than could have been done by the most direct opposition to its claims. It is most difficult for the untrained ear to hear anything with the stethoscope, while no one can fail on applying the ear to the walls of the chest to recognise very soon the sounds to be observed. After having learned the various murmurs and souffles and tinkling and bird-calls by the ear a student is ready (if it is deemed necessary) to learn to recognize them, the stethoscope being interposed. But with the apparent necessity of *beginning* with this instrument, it is not surprising that it and the whole art of auscultation were often summarily condemned and denounced. For ourselves we are free to say that it would have been far better if the stethoscope had never been invented. A stethoscope, costing twenty-five cents, has been in my possession for more than thirty years, and I seriously doubt whether it was a good investment of that amount of money.

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We consider it in almost every case greatly inferior to the *naked ear* (if we may use an analogy from another sense) in the formation it gives, and we think it should be reserved for such cases (if such there be) as forbid the direct application of the ear to the walls of the chest.