

fully attained. As a school of midwifery, it is still unrivalled by any institution in this kingdom. But its character of later years has been materially modified. Wards for the treatment of those *diseases which are peculiar to women* were added, under the mastership of the late Dr. Collins; and, in point of fact, this institution is, as at present constituted, more justly entitled to be styled **THE DUBLIN HOSPITAL FOR WOMEN** than **THE DUBLIN LYING-IN HOSPITAL**, which latter is its legal designation. Gentlemen, in this hospital you have opportunities afforded you of acquiring a knowledge of these important branches of your profession such as it is impossible to over-estimate the value of. I urge you, I earnestly urge you, to avail yourselves of these advantages to the utmost. It has been well observed by a former pupil of this hospital, now a distinguished surgeon—I speak of Dr. Hodges, of Boston, U. S. A.—that “the value of a hospital, in its relation to medical education, turns upon the facilities which it affords, and the extent to which these are improved, by students and teachers;” and he adds, “the clinical study of disease depends for its success upon a personal examination of patients.” No one can question the soundness of these views. The facilities afforded to the student in midwifery by this hospital are great indeed; it remains for you to take advantage of them. I do not wish to under-value the good done by our extern maternities, but “in their relation to medical education” they are most imperfect. “How can we learn without a teacher?” has become a proverb. Yet the student who is attached to an extern maternity has to a great extent to “learn without a teacher.” He goes alone to the patient or at best accompanied by a fellow-student, possibly more ignorant than himself, and as a result finds that, though he may have attended the case, he is but little wiser than he was before. One of our American students once made use of the following words to myself:—“Before I came here I had been in practice at home, and attended many women; but I now find out I was working in the dark.” I believe that this gentleman’s candid admission of his shortcomings would apply but to too many practitioners. He, after a comparatively short stay here, thanks to “the extent to which he had improved his opportunities,” left with a practical knowledge of midwifery which would have done credit to any obstetrician. The same result is possible for each of you. The labour wards are visited almost hourly by some one of the resident medical staff, and we are all actuated by the same wish to aid you to the utmost of our power in acquiring a thorough knowledge of those branches of your profession which it is our duty to teach. But any efforts we may make will be vain unless you yourselves second us by your exertions to turn your opportunities to good account. The time allotted by custom for attendance at a lying-in hospital is short indeed, while what you have to learn embraces a variety of subjects of great importance. You are compelled by the regulations of the licensing bodies

to devote three years at the least to the clinical study of medicine and surgery. A short six months, however, is deemed sufficient in which to study, not midwifery alone, but also the nature, symptoms, and treatment of that large and complex class of diseases which are “peculiar to women,” including affections of the uterus, ovaries, Fallopian tubes, and vagina, all which are unfortunately of very common occurrence.

Six months at the most is allotted by our medical legislators for the study of these numerous and complex affections. Need I add that it will require unremitting attention on your part to attain to even a very moderate proficiency in that short time? Indeed, the mass of students go forth into practice absolutely ignorant of midwifery and gynecology. With some this lamentable result is the consequence of sheer indifference; with others, of a foolish self-confidence, which induces them to suppose that midwifery is a very simple affair, needing no special study to fit them to become efficient practitioners. Such men, when they enter into practice, are soon undeceived. They will certainly ere long meet with difficult cases of midwifery, and, moreover, will discover that they require the exercise of no ordinary skill to treat efficiently. They will also find out that such are of far more frequent occurrence than those demanding surgical interference; while cases of dysmenorrhœa, menorrhagia, and others of minor importance, exhibiting symptoms referable to the uterus, are common indeed. And, remember, it is now-a-days absolutely essential that you show yourselves conversant with these latter affections. The public have become educated, and are well aware of the advance made in recent years in the knowledge of uterine diseases, and expect much more from their medical attendants now than they did in days of yore.

Great indeed has been the advance made in the departments both of midwifery and gynecology since I was a student within these walls some five-and-twenty years ago, and correspondingly great will be the amount of proficiency in these subjects expected from you, not only by the examiners appointed by the various licensing boards, but by the public also, with whom you will daily come in contact.

I think it will not be unprofitable to spend a few moments in contrasting the practice of the present day with that which existed when I was a student. It will probably impress on you forcibly the necessity of availing yourselves to the utmost of the opportunities afforded to you in this institution of obtaining a knowledge, not of *midwifery* alone, important though that be, but also of those *diseases which are peculiar to women*.

The rule which guided obstetric teachers when I was a pupil was this, “that meddling midwifery was bad,” a rule not devoid of truth when applied to the attempts made by ignorant practitioners to accelerate delivery, but to be utterly repudiated when applied to the skilful efforts of the educated accoucheur. The effect of the rule was this, that women were allowed to linger in agony for fifty and