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EDITORIAL.

DR. ERNEST LEWIS.

"Peace hath her victories,
No less renowned than war."

Never a better illustration of this was there than when the meeting of the Orleans Parish Medical Society on April 24 was, through the happy thought of the Scientific Essays Committee, transformed into a veritable "Lewis night." Never did a conquering warrior receive warmer acclaim—and this not from the fickle mass, easily dazzled by the glitter of a passing success, nor from a composite audience, swayed perhaps by some dramatic or sensational event, but from a dignified body of professional men, co-workers, assistants, pupils, admirers all, come to pay a tribute of love and esteem to their aged confrère.

Aged, did we say? It takes the official records and the good doctor's own figures to convince us that he is really eighty-two years of age and has completed sixty years of medical practice. Erect of carriage, clear in complexion, elastic of step, resonant in voice, with good eyesight and hearing, he is the last man to whom we think should apply the term old. A few days
rise and fall, and we hand to our successors an organization with a clean record, free from the suspicion of unfairness or hypocrisy, resting on a sound business foundation, retaining its self-respect and a considerable degree of independence.

Our labor was mostly one of love for the financial investment was relatively small and unable to produce important results, still, and we say it with much satisfaction, it was the rare exception when the annual balance-sheet did not justify a substantial dividend for our stockholders.

The writer now begs the reader to bear with him a bit longer while he explains briefly why he is giving up the editorial chair, for he is not a quitter and would not want to be taken for such. He has had to bear the load, mental and physical, for many months and is now alone. He hopes it may be considered that he has done his part and is in consequence justly entitled to be relieved of this portion of his task. He is not vain enough to think that he can continue to carry on by himself indefinitely, and especially that it can not be best nor even right for the JOURNAL to remain a one-man affair; it is, or at least should be, too big a proposition for that. Hence, the most important reason for the change, the perpetuation and the betterment of the NEW ORLEANS MEDICAL AND SURGICAL JOURNAL. New Orleans has possessed it as its medical organ since 1844, and there must not be a particle of risk of either the discontinuation or the deterioration of this publication. This city is steadily increasing in importance as a medical center and its medical mouthpiece must develop in proportion. For the accomplishment of this development new blood is needed, new sacrifices must be made, and uninterrupted succession in the administration must be provided for. All this is attained by means of the control of the JOURNAL by the State Medical Society and for that reason the writer, representing all those interested, has arranged to transfer this periodical as a running concern to that society.

Beginning with the July number, the first of the new volume, the JOURNAL will appear under the management and ownership of the Louisiana State Medical Society. May it direct the
work successfully, progressively, continuously; so that, like the brook, the Journal may be able to say,

"Men may come and men may go,
   But I go on forever."

And now, with a heart full of gratitude for the many who have aided and encouraged him in some way at some time, bearing no ill-will to any who may have sought to criticise unkindly or hurt unjustly, with charity to all, the writer says good-bye.
REMINISCENCES.*

By ERNEST S. LEWIS, M.D., Professor Emeritus School of Medicine, Tulane University.

In old age we lose our enthusiasm and the ambitions of life sense to occupy our minds. Having garnered the harvest of our gleaning, we live a sort of negative existence in the past. Occasional instances, it is true, are met with of unimpaired mental and physical vigor in advanced age, but like cases sparsely gemming the desert wastes of Africa they but intensify the desolating barrenness surrounding them. Lacking in initiative and retregressing in mind and body, progress and the onward movement of the world prove disturbing elements to their fossilizing minds. With few exceptions they live in a rut, haunt their experience of the past, deplore modern social changes and are well satisfied of their work, which Kipling tells us "is the perfectest hell of it." These are my conclusions, drawn from observation, reading and self-analysis. But old age has its compensations to the physician, if he can retire, in the immense relief from the anxieties, worries and responsibilities of a taxing and wearing profession and in the esteem and affection of his professional brethren and the public, if he has lived up to the high ideals of the profession, and given unselfish service to humanity. Therefore, with philosophical resignation and acceptance of the mental limitations of age, I invoke my muse in bringing to light memories'long dormant in my subconscious mind which may interest you if only in contrasting the past with the present.

The self-element of my receptivity may appear more evident than is consonant with modesty or desired by me, but necessary to connect the links of the chain of incidents and events to be related in these reminiscences. As I settle to my task "old

*Read before the Orleans Parish Medical Society, April 24, 1922.
Although 63 years have elapsed since my matriculation, the past recurs most vividly to mind. The University of Louisiana (now Tulane since 1884) was on Common, between Dryades and Baronne Streets, the Medical College occupying the center of the square. The Faculty was composed of Professors Hunt, dean; Warren Stone, James Jones, A. Cenas, G. Nott, T. G. Richardson, J. L. Riddell, with W. C. Nicholls and Stanford E. Chaillé as demonstrators of Anatomy. In 1860 Dr. Lawson was added to the Faculty and given the chair of clinical medicine, which he held for one year. They were all men of distinction, but Dr. Stone towered above his colleagues in stature and pre-eminence as Mt. Blanc over her sister peaks of the Alps. He had a heart of gold, was the South's great surgeon, and possessed rare common sense and judgment, especially in deciding when to and not operate, and in the after treatment. His name was a household word in the Southland of his adoption. I recall a remark he once made regarding the abuse of calomel, then considered a universal panacea, that if one were to dig in any of the old cemeteries a mine of quicksilver would be found. Dr. Richardson, who was made Professor of Anatomy in 1859, had left his family in Louisville, sending for them when he had secured a home. Coming down the river by boat, one of its boilers exploded, causing the death of 120 passengers, including his wife and three children. It was a terrible catastrophe, borne by him with Christian resignation.

Being very fond of Anatomy, I not unfrequently went to the dissecting rooms before the opening for the class and lighting the two gas jets above the table on which my subject lay, would proceed with my dissection. One night, having extended the arm and hooked the hand to the head of the table, I proceeded to dissect the axilla. Whilst intent upon my work I suddenly felt the pressure of a cold hand upon my head, a chill ran down my spine and a shuddering awe came over me. All the superstitions of ancestors way back in the ages focussed in my mind and, to my overwrought imagination, the sheets covering bodies in the darkened and distant part of the room seemed to be rising. The cause quickly apprehended as due to the detachment.
of the hook from the hand, which had fallen on my head, my emotion subsided and I continued the dissection but with a sense of discomfort until the porter came in to light up.

During the same year a tragic incident occurred in the Charity Hospital. Dr. John Foster, the House Surgeon, had succeeded Dr. Chopin, who filled that office from 1853 to 1858, succeeding Dr. Foster in turn. They were bitter political enemies and professional rivals. One of the interns by the name of Weams was fatally shot in a brawl at a Carnival ball by a law student and conveyed to the Charity Hospital, where he was seen by both Chopin and Foster, but at different hours. What one prescribed the other threw out of the window. One morning their visits clashed and a fight followed at the bedside of the dying student, which had no consequence as they were separated by mutual friends. A few days later, meeting in front of the hospital entrance and both being armed, they engaged in a gun battle in which Chopin was wounded in the neck and the external jugular vein severed. Dr. Chopin was the Professor of Surgery in the New Orleans School of Medicine, and during the Civil War was on General Beauregard’s staff as Medical Director of his corps. He was a distinguished surgeon, prominent in social circles, and for many years was President of the Boston Club. When he was President of the State Board of Health, during the yellow fever epidemic of 1878, he was harshly criticized by the press, which was not an unusual experience with those holding that office. He was a firm believer in the germ theory of infectious diseases, not yet generally accepted by the profession, and still less so by the laity. In a Carnival parade he was caricatured by a lay figure on one of the floats holding a fishing pole and line hooked with a crawfish fishing for germs.

In 1860 I entered the Charity Hospital as an intern, and there met Joseph Holt, who was entering his second hospital year. The following summer of 1861 a battle was thought to be imminent in the vicinity of New Madrid, Mo., and Dr. Nichols, who had succeeded Dr. Foster as House Surgeon in 1860, organized a Hospital Corps, to which C. H. Tebault and myself were attached. We arrived at New Madrid and, no battle taking place, all of the party returned but myself, who took a train
for Richmond, intending to enlist in the Crescent Blues, commanded by my friend, Captain Mack G. Goodwyn. In Richmond I met Dr. Stone, who urged my return home to complete my medical studies, saying that in a medical capacity I would be more useful to the Southern cause. I followed his advice, resuming my position as interne. Before the annual meeting of the Board, February, 1862, Dr. Sprague, the Assistant House Surgeon, resigned; and at the suggestion of Dr. Nichols, I petitioned the Faculty for a premature examination, to apply for the vacant hospital position, which was granted, and passed. At the meeting of the Board I was elected. A few months later, Dr. Nichols resigning, I was appointed Acting House Surgeon with an increase in salary. The full title was not given me, I was informed by the President, Judge J. N. Lea, because of my youth. I was not then 22. On the surrender of the city to the Federal fleet and the arrival of General Butler to take possession, his Medical Director called at the hospital and requested me to assign a part of the institution for his sick and wounded. I flatly refused, telling him the institution was for the poor of the State only, but the Federals being in power, he could take possession if he chose and the Hospital Staff would withdraw. He replied he would not have us do that and left. He afterwards converted the St. Louis Hotel into a Military Hospital. I have regretted to this day my discourtesy at that interview, but there existed much bitterness of feeling in those historic days and I was but a callow youth in authority with but little experience. To give you a better understanding of the psychology of the Southern mind relative to the North the two following instances will illustrate it: Dr. Stone was arrested and brought before General Butler, charged with refusing to consult with the federal surgeons. Whether true or not, he did afterwards consult with them regarding an eruption attended with itching affecting the federal soldiers. After the consultation he was asked regarding the nature of the disease. His reply was "the mange, a disease of dogs." The other instance refers to a Jesuit priest, arrested on the charge of refusing to perform the burial service for the federal dead. When brought before the General and asked whether this was true, he replied, "Far from it, General, I would gladly bury you and your whole army." Before the federal occupation of the city, the old Ma-
rine Hospital, on Tulane Avenue, where now is the House of Detention, was used as a Confederate hospital, with Major C. Beard in charge. Cut off from his sources of supplies, it had to be closed. He wrote me to that effect and of his dilemma regarding his sick and wounded, requesting that they be received at the Charity Hospital. My consent being given, they were transferred there. This coming to the knowledge of General Butler, led to the arrest of the members of the Board and myself. When brought to his presence at the Custom House, looking at me sternly he said, "How comes it, sir, that you, a physician, have discriminated between my sick and those of the Confederacy?" I answered, "they were not received as soldiers, but as charity patients," and handed him Dr. Beard's letter, which he read and, looking up, said, "I see you have an excuse, but having established a precedent, you will have to receive my men." Making a virtue of necessity and not aspiring to martyrdom by imprisonment at Ft. St. Philip or Ship Island, I answered, "Very well, sir, but furnish me with medical men to attend them, as we are very short-handed." He then authorized me to employ two physicians at a salary of $50.00 a month each, which he would pay them. I appointed my friends, Dr. Robert Davis, the uncle of Dr. Davis of our city, and Dr. Cleary to that duty. Some time later he issued his famous order compelling everyone to take the oath of allegiance or register as enemies of the United States Government. The entire Hospital Staff registered as enemies excepting J. A. Root, an interne; who took the oath of allegiance and became Assistant House Surgeon in 1871. When General Banks superseded General Butler, he appointed a Republican Board, and at the annual meeting in February, 1863, Dr. Smythe was elected House Surgeon. I was offered the Assistant House Surgeonship with an increase of salary, but declined. The next day I sought to obtain a pass to leave the city, but was refused. Through Dr. Warren Stone I was put in touch with two men about to run the blockade. Their names were O'Brien, an engineer, and Smith. For $100.00 they agreed to take me. When the time was propitious they designated the day, hour and place of meeting on Bayou St. John. Dr. Davis drove me there in my uncle's buggy; a skiff concealed in the weeds and containing two men emerged from the opposite side from where I was waiting. En-
tering, we re-crossed, pulling the skiff out of the water into the swamp. We worked all night and lay concealed or sleeping during the day to avoid detection, resuming our labor at night.

About the middle of the third night we reached the Lake, about midway between Spanish Fort and West End. We rowed with muffled oars for some distance to avoid attracting the attention of federal patrolling boats, and then hoisting a light sail, steered for the mouth of the Tchefuncta and up the river to Madisonville. My companions refused to accept any pay, saying I had worked as hard as they. From this point I went by train to Tullahoma, where General Bragg's army was encamped, and there awaited the permit to my application forwarded to the Surgeon General to appear before the Examining Board. Receiving the permit, I reported to the Board in Charleston as ordered. The examination passed, I returned to Tullahoma, and after a short delay received my commission as Surgeon. Reporting to Dr. Fluellen, the Medical Director, was assigned by him to the Third Georgia Cavalry, Crews Brigade, Martin's Division. Some months later I became Chief Surgeon of the Brigade, and in the latter months of the war was on General Wheeler's Staff as Medical Director of the Corps. Our cavalry, mounted or dismounted, participated in all the battles in which the Army of Tennessee was engaged, and in daily cavalry fights when raiding in the rear of the enemy's lines. The hardships endured on these raids prompts me to give my whole-hearted endorsement to the refrain of a cavalry song: "If you want to see hell, jine the cavalry." Upon my return to New Orleans at the close of the war, C. H. Tebault and myself, as volunteers, assisted Dr. Chaillé in the dissecting room. I also did some prosecuting for Dr. Richardson, which repaid me in anatomical knowledge if not in money. Before the opening of the session in 1866 and 1867, Dr. Hunt asked me to be his Chief of Clinic and assistant, in preparing material for his pathological lectures, for which he paid me $500.00. He was a man of aristocratic carriage with Chesterfieldian manners. He was of a talented family, a born orator, and physiology furnished him scope for oratorical flights hard to follow by the student body, but poorly equipped mentally, as was the case after the war. In pathology he did better, as diseased lungs, livers and ulcerated bowels did not furnish inspiration to flights of fancy. It was
related of him that when his brother, Randall, a distinguished jurist and statesman, was a candidate for some position, the United States Senate, I believe, he was scurrilously attacked in the public press by a political enemy named Frost, which, according to the existing code, could only be settled on the field of honor. In this he was anticipated by his brother, Dr. Hunt, who challenged the traducer of the Hunt family and in the duel which ensued, killed him. Dr. Hunt was stricken with apoplexy about the middle of the course and lingered until March, 1867, when he died. In view of his hopeless condition, I asked and obtained the consent of Dr. Richardson, the Acting Dean, to fill his hours on physiology during the remaining half of the term. This proved the golden opportunity that came to my door and led to my obtaining a professorship later. By the death of Dr. Hunt, Dr. Chaillé became Professor of Physiology and Pathology, and Dr. C. J. Bickham, who had been Assistant House Surgeon in 1859, demonstrator of anatomy. The year previous, 1866, several changes had taken place in the Faculty. Dr. Mallet had succeeded Riddell in chemistry; Dr. James Jones had vacated his chair, taken that of obstetrics on the resignation of Dr. Cenas, and was succeeded in the chair of the practice of medicine by Dr. S. M. Bemiss.

In 1867 I was Health Officer of the State Board of Health in the Third District. Before the outbreak of yellow fever a great many cases of Asiatic cholera occurred in different parts of the city, but disappeared when the fever assumed an epidemic form. One of my duties, assisted by two men, was to disinfect premises and areas infected, by spraying the floors and walls with a strong solution of carbolic acid, and drains, gutters and closets with the crude acid, so liberally used as to create a stinking and nauseating atmosphere, which in crowded tenement houses could not fail to aggravate the graver symptoms of the disease, which, combined with the irrational methods of treatment then in vogue, as drugs which irritated the stomach nearly always irritable in this disease; smothering the sick under blankets in July and August with closed windows, and denying them water when craving for it with the torturing thirst of Tantalus, must have contributed in causing many deaths. Our present knowledge of the cause of yellow fever leads us to regard the sanitary measures then used as about as
effective and sensible as the beating on metal pans and the blowing of horns by our pagan ancestors to drive away the evil spirits to whose malign influence plagues were attributed. I never think of those past epidemics without recalling to mind the following lines from Goethe's Faust relative to a plague which had decimated the population of his native city during which, as a boy, he distributed to those afflicted a mixture which his father, a physician, concocted, the effects of which Faust, in his old age and acquired wisdom, relates to his friend, Wagner:

"This was the medicine, the patient died,
And no one thought of asking who recovered,
Amongst these hills our hell broth wrought
More havoc, brought more victims to the grave
By many than the pestilence had brought,
To thousands I myself the poison gave,
They pined and died, I live to hear
Their reckless murderer's praises far and near."

With the close of the session, my connection with the college and hospital ceased. In 1869 Dr. Joseph Jones succeeded Dr. Mallett to the chair of chemistry and clinical medicine, and Dr. F. Hawthorne succeeded Dr. G. Nott, who died, as professor of materia medica and therapeutics. In 1873 Dr. Stone died also and was succeeded by Dr. Richardson, who took the chair of surgery, and Dr. S. Logan that of anatomy. In the summer of 1874 I received a communication from the Dean, apprising me of my appointment to the chair of materia medica, therapeutics and clinical medicine, to succeed Dr. Hawthorne, who became professor of obstetrics and gynecology on the death of Dr. James Jones that year. I shall never forget my first clinical lecture. Thinking to make a good impression, I had memorized Trousseau's clinical lecture on Chronic Diarrhea, but memory failed me, and I retired crest-fallen and in an unenviable frame of mind. Evidently I did better later, for when Dr. Hawthorne died in 1875, the chair of obstetrics and gynecology was given to me. Dr. Hawthorne was admitted to be the best and most popular teacher in the Faculty; he was a man of fine character, with a charming personality; he was a surgeon in the Confederate army, and after the fall of the Confederacy, worked his passage to London on a vessel. In London, falling sick and being without funds, he was taken to a public hospital and the physician in charge, recognizing him to be a gentleman of cul-
nature and learning he was a physician, took him to his home, where he was most hospitably and tenderly cared for by the doctor and his wife, and on his recovery was supplied with funds to pay his passage back to the States. The kindness shown him was never forgotten, for after the death of this noble Englishman, who left his family destitute, he contributed liberally towards their support to the hour of his death. The nature of his disease was discovered through accident. To show a friend whose urine upon examination contained albumen, the negative effect of the test when applied to normal urine, he voided some, which upon testing, contained a much larger percentage.

Dr. Hawthorne, realizing that as his disease progressed he would soon have to give up his hospital and college duties, suggested that I prepare to replace him. Following his advice, I ordered works on gynecology of which I knew little, and concentrated my mind upon them. Six months later he died and I was appointed to the chair. At that time and until 1904, when a training school was inaugurated, the nurses of the hospital, if we except the sisters, whose function was chiefly supervisory, although they did some nursing also, were drawn from the lower order of society and but few could read or write. The old amphitheatre, in which major operations were performed, was also used by the professor of pathology and post mortem examinations made there for demonstration of diseased organs to the medical class. At different times the surgical and obstetrical wards had to be closed on account of surgical and puerperal fever, the nature of which and the relation between them not known until enlightened by Pasteur and his followers. At those times hardly a woman confined escaped the fever, and the mortality was high. The use of the amphitheatre for pathological demonstrations was stopped by Dr. Miles, House Surgeon, about the year 1885 or 1886. My predecessors not being surgeons had made no effort to develop the surgery of the female genitals, neglected throughout the South impoverished by the war, and the public mind in a state of continued agitation during the horrors of the reconstruction period. In the North more progress had been made and the publications of the work of Sims, Thomas and Emmett at the Woman's Hospital drew the attention of the profession to the surgery of women. Foreseeing the possibilities of this new field, I resolved to leave noth-
ing undone in making this branch an important part of my course. I opened clinics for the benefit of the students as well as for myself, whose knowledge of the subject was but little more than theoretical. These clinics in time grew in importance, supplying me with abundance of material for learning, teaching and operating, and were largely attended by the students. Surgical gynecology in Louisiana consisted in simple perineal operations, the removal of polypi, by means of the eraser and ligature, cauterizations of the cervix for erosions or cancerous ulcers, leeches to the uterus in inflammatory conditions, the draining of pelvic abscesses and pessaries for displacements. It is true two vaginal hysterectomies had been done by Dr. Dubourg, ex-surgeon of the Imperial Guard of Napoleon, many years before, and two ovariotomies, one of these successfully by Dr. Chopin, concerning which a column and a half was written in one of the daily papers, and the second, which proved fatal, by Dr. Carson, although Dr. Schuppert, who had been to Berlin and followed Volkmann, the Lister of Germany, supervised the preparation of the patient and everything required for the operation to be aseptically performed. In the North, Dunlap, Kimball, Atlee and Paislee had given an impulse to this operation, but it was chiefly due to the success of Spencer Wells of England that it became popularized. In the pre-antiseptic days the pedicle was drawn above the lower angle of the abdominal wound and clamped. At a much earlier period the fatalities of this operation were so great that it was termed by Piorry "Une audace Américaine" and by Scanzoni, "A surgical temerity." Pelvic inflammations were called cellulitis or pelvic peritonitis, and not until Lawson Tate, in the early eighties, ascribed these inflammations to tubal infections and removed the appendages, was the profession enlightened regarding so common an affection. Pelvic hematocele was ascribed to disorders of menstruation and its origin in extraterine pregnancy not known until many years later. Flexions and prolapse were treated with stem and vaginal pessaries, which led Albett to exclaim "that the unfortunate uterus was either impaled on a stem or perched on a twig." The stem pessary, as well as the use of the sound, was soon discontinued, as many accidents resulted from their employment. Submucous fibroids were removed from the vagina by dilating the cervix.
with sponge tents when necessary, which often caused infection, incising the mucous membrane and capsule and with finger or spoon saw, making a partial enucleation and grasping the fibroid with strong-toothed forceps and making traction, it was removed piecemeal or by morcelation, as it was called, by means of knife or strong serrated scissors. I have removed tumors nearly as large as the adult head reaching above the umbilicus, and it was tedious and exhausting work. The removal of fibroids by abdominal section was regarded as the most formidable operation in surgery, and although performed by Péan in France, Koeberle in the Netherlands, who were the pioneers in hysterectomy, Bantock and Spencer Wells in England, and Schroeder and Martin in Germany, it did not gain ground in this country until many years later. The method of Péan and Koeberle consisted in fixation of the cervix constricted by an elastic ligature or serre-noeuds to the lower angle of the abdominal wound, and in cases in which the cervix could not be brought up, its removal through the vagina and the broad ligaments clamped; that of Schroeder the intra-abdominal method of which Martin was the greatest exponent after Schroeder's death, in which the constricted pedicle was dropped.

The mortality was excessively high and recoveries only after a tedious and protracted convalescence. The improved surgical technique of Baehr, published in the American Journal of Obstetrics of 1892 and almost practically the method now in use, so simplified the operation and minimized the risks after the introduction of asepsis that it is attended with no more danger than a simple ovariotomy. As soon as this fact became generally known, the early operators reaped a very rich harvest of fibroid operations, the majority of them were so large and heavy that some operators used pulleys attached to the ceiling with hooks to lift them out of the abdomen. I never used pulleys, but two assistants were not unfrequently required to lift the tumor up to apply ligatures and ablate the uterus. I mention these facts that you may realize the wonderful evolution of gynecic surgery since those early days, which I have had the good fortune to follow, step by step. The removal of a large ovarian tumor from a colored woman sent to the hospital by Dr. Myles, of Port Gibson, was my earliest abdominal operation in 1878. Listerism held sway at that time and antiseptic methods
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were rigidly followed. The day before, instruments, sutures, ligatures and sponges were sterilized by me at my home by boiling, then immersion in a strong carbolized solution, and in boiled water afterwards. Before going to the hospital I took a strong carbolized bath. The patient, who had been purged and given a bath and no food the day before, was prepared for the operation in the dressing room of Ward 36, by scrubbing her abdomen with soap and water, and then with a strong carbolized solution. My hands in the meantime had been thoroughly scrubbed and disinfected. The patient chloroformed, I proceeded with the operation, whilst a student with a portable steam atomizer sprayed the abdomen with a carbolized solution. The tumor, which weighed about 65 pounds, was removed and the wound closed with through and through silver sutures and the dressings applied. The sutures were not removed before the end of the second week. This patient made an uneventful recovery, but was not allowed to get out of bed before the third week. The hand spray was soon discontinued as the vapor blurred my glasses, which had to be frequently removed and wiped, nor was the antiseptic bath continued long except when in attendance on infectious cases. I got Ponder, the hospital engineer, to put a steam atomizer in the amphitheatre to flood it with a strong carbolized vapor for one hour before my time for operation.

Regarding puerperal fever, many fanciful theories prevailed. By Fordyce Barker it was regarded as a fever *sui generis* affecting lying-in women only. The discoveries of Pasteur and other bacteriologists soon exploded these fanciful views and led to the antiseptic management of labor. At one time antiseptic douches of carbolized or bichloride solution was quite in vogue in the beginning of labor and after its termination, but was discontinued as it was found to do more harm than good. Curetting was also practiced in septic endometritis, followed by carbolized or bichloride douches, and proved harmful also in breaking down the barriers provided by nature and opening up fresh avenues for infection as well as for the occasional toxic effects produced, and was soon abandoned. My chief operations at first were repairs of the cervix, to which there was no end, anterior and posterior colpopereineorrhaphies, vesico-vaginal fistulae and submucous fibroids removed through the vagina. In
these plastic operations silver wire was used exclusively and it was as tedious to remove them as to introduce them. My first abdominal hysterectomy was for a fibro-cyst of very large size, mistaken for an ovarian tumor until the abdomen was opened. The trocar thrust into it was followed by the flow of only a little fluid and the incision had to be extended to the ensiform cartilage to eviscerate it. The tumor was so large and heavy, two of my aids were needed to hold it up in order to encircle the cervix and broad ligaments with a clamp which was tightened by means of screws and a supravaginal amputation practiced. The stump was seared with the actual cautery and through and through silver wire sutures used to close the walls and heavy dressings applied. Every two or three days the screws were tightened and in about fifteen to twenty days the clamp came away and was removed. The stump retracted, leaving a cavity large enough to contain an egg. She made a perfect recovery and lived for many years later. It was fortunate my early cases were successful, for the students returning home circulated the news, and patients with ovarian tumors began to flock to the hospital, which when removed weighed from fifty to one hundred and ten pounds, the largest removed by me. This woman measured six feet around the waist and five feet and a half from the ensiform cartilage to the pubis. There were, however, much larger tumors removed, as the one related to me by Dr. Cartlege of Louisville, Ky., which he removed. It weighed two hundred and forty-five pounds. This woman had sat in a chair for twelve months, for she could not lie down. This tumor he preserved and showed at a meeting of the American Medical Association and a large dry goods box was required to contain it.

Of course, I had my series of fatal cases. Many of these large tumors were found on opening the abdomen to be extensively adherent and the women besides in such a state of exhaustion that some died of shock, secondary hemorrhage or other sequelae. The only men I recall doing pioneer work in the South besides myself were Maury, of Memphis, Tenn., and Batty, of Rome, Ga. By this time the Carpet Bag government was overthrown and Francis T. Nicholls elected Governor in 1876. Among his early acts was the appointment of a new board of Administrators, who elected Dr. Pratt House Surgeon and Dr.
Miles, assistant. Dr. Smythe, whom Pratt succeeded, was House Surgeon since 1863, and his assistants during his term of office were A. J. Foret, J. K. Root and G. W. Lewis. He was a skilled operator, had original ideas and was the first on record to cure an aneurism of the right subclavian artery by first ligating the right innominate and carotid arteries and, on the supervention of hemorrhage, thirteen days later, the vertebral. He was, I believe, the first also to perform a fixation for a floating kidney on a woman suffering from serious nervous troubles ascribed to it, by transfixing the abdominal walls and kidney posteriorly with a long needle armed with a ligature which, when tied, secured it in place. Dr. Pratt resigned because of ill health at the end of a year, and was succeeded by Dr. DeRoaldes, who in his second year of office, with Dr. Holliday, Chairman of the Board, sought to inaugurate a training school for nurses, which met with so much opposition from the Sisters, who may have thought it a movement inimical to their interests, that pressure was brought to bear upon the Governor through their friends; and the resignation of the members of the Board favoring it and of Dr. DeRoaldes was asked and a new Board was appointed, who elected Dr. Miles House Surgeon and Dr. David Jamison assistant, who resigning at the end of a year, was replaced by Dr. Parham, who whilst in this position noted the prevalence of puerperal fever from which the obstetrical wards were hardly ever free, and when in 1887, according to a paper of Dr. Lee, of Galveston, nearly one-half of the puerperae of that year suffered from septic fever, he inaugurated strict antiseptic measures in the obstetrical wards, with the astonishing result that in the same length of time, but one case of fever occurred and no deaths. He also instituted asepsis in his surgical service, for which a small sterilizer was purchased. It is true this had been practiced before by Dr. Schuppert in the ovariotomy mentioned, but not continued, and by Dr. LaPlace in his service, but also discontinued when he was called to Philadelphia, until revived by Dr. Parham, from which time it gained ground until it became the universal practice, when sterilizers were installed in the new amphitheatre.

In 1884 Dr. Beiniss died. He was a physician of distinction, who had made many valuable contributions to medical literature. He was also a good teacher and was a member of the Na-
His successor was Dr. John B. Elliott, Sr., whose Chair of materia medica was given to Dr. J. Y. Payne, of Galveston, who occupied it but a year, then resigned and was succeeded by Dr. A. B. Miles. In 1888 Dr. Bloom replaced Dr. Parham at the hospital and the following year Dr. Richardson died. He was a man of high moral character, but of strong prejudices, an excellent teacher, a skillful operator and dean since 1867, and had been President of the American Medical Association. Several years after the loss of his family he married Miss Slocumb, who after his death donated the funds for the erection of the Richardson Memorial. In an operation of a dangerous character on an old gentleman with sarcoma at the root of the neck (assisted by Dr. Souchon and Dr. Chopin, the consulting surgeon), which he removed successfully, Dr. Chopin introducing his fingers in the depths of the wound, pulled up a piece of membrane deeply attached and insisted that it be cut away, which was done by Dr. Richardson against his better judgment and was followed by the outpouring of such a torrent of blood that death ensued almost immediately, proving a great shock to every one present. The bill presented was thought by Dr. Souchon, who was on very friendly terms with Dr. Richardson, to be rather high, considering the unfortunate result, but he replied, "Not at all. Consider my feelings."

On another occasion he was called to a case, in a prominent family, diagnosed a polypus by a homeopathic physician which proved to be a miscarriage attended with so profuse a flooding that upon his arrival with Dr. Souchon, who assisted him in his operations, he found her exsanguinated and almost pulseless. Without delay he prepared his aveling for transfusion and rolling up his sleeve told Souchon to transfuse from his arm to hers, illustrating in this humanitarian act a trait not exceptional of the self-sacrificing spirit of members of the profession when the occasion arises.

Dr. Logan succeeded Dr. Richardson as professor of surgery, and Dr. Souchon, demonstrator of anatomy from 1872 to 1876, became professor of anatomy. In 1893 the Southern Surgical and Gynecological Association met in New Orleans for the first time. Three of the visiting members invited to operate were handed a list of about 25 cases from my service, and expressed their surprise at the abundance of our material. Kelley selected
a fibroid, Price and McMurtry pus tubes. These were the first
gynecological operations outside of my own witnessed by me,
although there were none I had not performed many times
over. One of my operations a short time before the meeting
was the removal of a floating spleen, mistaken for an ovarian
fibroid. It was oblong and rounded, had descended in the
pelvis and could be felt through the vagina. Two more large
floating spleens were removed by me a few years later, which
caused considerable nervous disturbance and discomfort, and
at the time was a record in splenectomies. All three of my
cases recovered and lived for many years afterward.

A year later, Dr. Logan died from apoplexy. We were
warm personal friends and his death was a shock to me. He
was a distinguished physician and surgeon and highly esteemed.
Besides his war record, he had been professor of surgery and
dean of the New Orleans school of medicine, professor of
anatomy, and later of surgery, in the University of Louisiana,
and was vice-president of the Charity Hospital Board at the
time of his death. The successor to the chair of surgery; Dr.
A. B. Miles, filled the position for one year only, succumbing
to typhoid fever. He had been demonstrator of anatomy from
1876 to 1878, professor of therapeutics and hygiene from 1887
to 1894, and one year as professor of surgery. He did not live
to see the Miles Amphitheatre erected that he and the Board,
headed by Gen. Vincent, had planned, and in which he took
very deep interest. He was a skillful operator, a good teacher,
and had a brilliant career before him.

During the sessions of 1893 and 1894 I became infected
through an abrasion of one of my fingers in an operation which
brought me near death's door and confined me for many
months to the house, and from which I did not fully recover for
two years. This accident, I believe, occurred about the middle
of the session, and that the students should not suffer, Dr.
Joseph Holt, who had lectured on obstetrics in the New Orleans
School of Medicine, was requested to fill my hours, which he
kindly consented to do till the end of the course, to the satisfac-
tion of the class and the faculty. He was President of the
State Board of Health from 1880 to 1888, and whilst in that
position originated and inaugurated the system of disinfec-
tion and sterilization continued afterward at the Quarantine Station. What I suffered mentally during my illness sends a shudder through me when recalled to mind. I sought for relief and distraction from enforced idleness and mental suffering in Grecian philosophy which not only soothed and quieted my mind but from which I imbibed also a certain amount of stoicism which enabled me to meet much greater trials later with fortitude. Whilst confined to my bed after the death of Dr. Miles I received a letter from Dr. Chaille, which was brought by the janitor, requesting me to write him my choice for the vacant chair, which I did. At the meeting of the faculty Dr. Matas, who was demonstrator of anatomy from 1889 to 1894, was elected, who in the chair of surgery has soared to empyrean heights of surgical eminence. He was student of my ward in 1878 and chief of clinic in 1880 for a short time, and if so minded, might a tale unfold relative to those early operations more gruesome than was related by Faust to his friend Wagner. I was then chairman of the Hospital Board and occupied that position for 14 years, during the terms of office of Governors Foster, Heard, Blanchard and Sanders, when a change was made by Governor Hall. During my term of office the Miles Amphitheatre, the Milliken and the Delgado Memorials and the Nurses' Home were erected. The Training School for Nurses was organized in 1894, during the first year of my chairmanship, and Dr. Bloom, who succeeded Dr. Miles as house surgeon, and had as assistants Drs. Fortier and Parker, worked very hard to get the consent of the Sisters. When the subject was first broached to Sister Agnes she refused, for she sensed that trained nurses under the direction of untrained Sisters would prove embarrassing, and she would not consent to their undergoing training, until Dr. Bloom proposed to go to Emmettsburg and submit the matter to the governing body of the order, to which she agreed. Dr. Bloom went to Emmettsburg, and after interviewing members of the Council Board, consent was given, provided the Sisters were excused from obstetrical or gynecological nursing, which was agreed upon. An experienced nurse was then employed to act as superintendent and organize this school. The Sisters became pupil nurses, followed the classes and stood their examination for graduation at the end of the term, and are now graduated nurses.
Let me now revert to earlier days of gynecology which I have purposely deferred to write more of until now. The marine sponge I mentioned as used in the earlier operations, gave way to gauze, the use of which at first and the newness of abdominal work and the carelessness of operators, led to accidents such as forgetfulness of a sponge or instrument in the abdominal cavity which was not particularly conducive to the well-being of the patient. Many such cases were related in medical literature, and many more escaped notice, as dead women as well as dead men tell no tales. I plead guilty of a mishap of this kind in an operation on a lady from Mississippi which was discovered when several months later her physician wrote me he had removed a sponge from the rectum which had sloughed through. Fortunately this patient recovered. Such mistakes are today inexcusable, though no doubt occasionally happening. The silver sutures gave way to silk worm gut, and then to catgut, the use of which, at first, owing to imperfect sterilization and preparation, caused infection or were absorbed too quickly, necessitating resutting of the abdominal walls. When vaginal hysterectomies were first practiced I used Pean's forceps on the broad ligaments and occasionally ligatures when favored by conditions. In inoperable cases I removed the cervix, then curetted, and with long-toothed forceps or tenaculum, and with knife or scissors clipped, or cut away so much of the musculature of the uterus as to leave but a shell of the organ, which I would then fill with pledgets of cotton soaked in a strong solution of chloride of zinc, and be on tenterhooks for several days lest its destructive effects would extend to or beyond the peritoneal coat. I have withdrawn after about fifteen days casts of the uterus containing these pledgets. These patients would obtain a new lease of life for a year or more, and occasionally a permanent cure was effected. Radium is now substituted for chemical caustics or the cautery, and accomplishes as much and more without pain or risk, and may, when greater experience is acquired in its application, take the place of operative procedures. My abdominal sections I have never counted, and were I to say several thousands, my veracity might be questioned or accepted cum grano salis, as I can furnish no evidence to substantiate my statement, not having preserved any record of my cases. Let me state, however, I had
the field to myself covering five of the Southern States for fifteen years, and for ten more years did the greater part of the work, though the field was then being contested by men trained under me or from other schools. Only after my resignation from the college and withdrawal from ward service in the hospital in 1912, did my work diminish, partly owing to my age, I presume, and what it signifies, and also to a rumor that I had withdrawn from active work, which I never took pains to contradict, but I still work and occasionally operate. Life to me without activity would prove unendurable.

It has always been a pleasure to me to help young men, and whilst on final analysis success mainly depends upon the man himself, he can be assisted and given opportunity upon which to build. Many distinguished and prominent men in the profession were my chiefs of clinic and served under me for many years, and no one rejoiced more than I did when they succeeded. I love my profession as an artist his art, and the business side was a matter of secondary consideration. I often neglected to send out bills, of which I was seldom reminded. On one occasion, however, I sent one in excess of what was due me. It was the custom with most physicians in family practice to send out their bills annually. Among my clients was one whose wife had added to the family every year for five years. At the end of the sixth year my collector called and among the bills made out was one for this client, which was only for two or three medical visits, but upon my collector’s remarking that I had omitted the usual obstetrical fee, I added it, telling him I must have forgotten to record it. The next day an irate client called at my office and exclaimed, “Great God, doctor, don’t you think five children in five years is enough, and here you charge me for a sixth she did not have.” Looking at him and laughing, I said, “I included the obstetrical fee because it was a grave error on her part, she ought to have had one.”

I have been honored by medical bodies beyond my deserving, having contributed but little to medical literature. At the first meeting I attended of the American Medical Association, some time in the eighties, I was made chairman of the obstetrical and gynecological section, and Dr. Battey, of Rome, Ga., secretary. I went to but a few meetings afterwards. On my first attend-
ance at a meeting of the Southern Surgical and Gynecological Association, in 1895. I was made first vice-president, and the following year at the meeting in Washington, was made president, and a few years later honorary fellow. I am also an honorary fellow of the American College of Surgeons. I was surgeon-general of militia during Governor Wiltz' administration, surgeon-general of the Louisiana Division of the Confederate Veterans under General Behan, president of the Association of Surgeons of the Army and Navy of the Confederacy, and one of the founders of the International Congress of Obstetrics and Gynecology, the first meeting of which I attended in Geneva. In 1898, after the reorganization of the State Board of Health, Governor Foster came to my office and asked me to take the presidency of the State Board of Health, which I declined, thanking him for the honor. He then offered it to Dr. Soulehan, who accepted it. I was also president of the Boston Club for ten years.

In 1866 I married the daughter of the Reverend A. D. McCoy, and from this union nine children were born, of whom five survive, three sons and two daughters. One of my sons, Hampden, is prominent in the medical, Walter in the legal profession, and Merriwether is in business.

In conclusion, I cannot close this narrative without giving expression to my deep sense of gratitude and obligation to those without whose aid a different story would be told. Left an orphan at the age of 12, with two younger sisters, we were taken by two maiden aunts, sisters of my father, by whom we were reared and treated with the utmost kindness, consideration and affection. The expense for my education until my graduation in medicine was defrayed by my Uncle Dr. J. H. Lewis, my father's twin brother, than whom no better man ever lived, and upon my return from the war penniless, was supported by him and aided in my start in practice. He was a father to me and so loved by me. Nor can I ever forget the friends I have mentioned through whose advice and assistance I have achieved success in my profession.
Dr. Matas: Mr. President, Ladies and Gentlemen—It is with no small effort that I rise to express the affection and appreciation in which we all hold Dr. Lewis and the pleasure that he has given us by his contribution to the evening's entertainment and instruction. His fascinating reminiscences have that quality given by personal experience which appeals to every medical man who loves his profession, as well as to everyone interested in the medical history of this community and of the South. But to me, and to a few others here present, who, as his students, hospital interns, or chiefs of clinic, were—more than forty-five years ago among the first to fall under his spell—the story of Dr. Lewis' professional life,—as we have seen and heard him tell it to-night,—has a special charm and still closer appeal. If I may be permitted a statement of my own experience, this evening's discourse has had the effect of throwing me into a contemplative and reflective mood which is far more conducive to silence than to loquacity; a placid state that is akin to the pleasant but passive reveries that one in his "gray days" is likely to indulge by the fireside on a winter's evening—a state of mind which it is difficult to transform into other more objective demonstrations of mental activity.

While listening to Dr. Lewis' narrative, I have felt like a traveler who is hearing the well-told story of a long and adventurous journey which is halted and pointed by many thrills and episodes in which he has participated, and which have influenced and shaped much of his own course in the journey of life. This drift of thought is almost unavoidable in one who, like myself, has had the privilege of traveling over the same road, if not treading the same trail, blazed by Dr. Lewis and paved largely through his efforts, a little more than forty years ago. In this narrative of his life work and experience, our honored guest has drawn on a large canvass an admirable outline of the history and progress of medicine in New Orleans as it has evolved in the course of the sixty years that he has been one of its leading exponents. In fact, as we of the older set, who have tried to follow in his agile footsteps fully realize, he has outlined a history which in so far as concerns his own special branches of surgical culture, are largely of his own making. Apart, therefore, from their personal and biographic
MATAS—Tribute to Dr. Lewis.

interest these reminiscences are destined to remain as an asset of permanent value to the future historian of medicine in Louisiana and of the South.

In following Dr. Lewis in the story of his great Life Hike, I again realize how much easier, if not pleasanter, it would be to remain quietly seated to ruminate and degustate unobtrusively the many choice surgical experiences and adventures recalled by his reminiscent memoire. So many incidents and events have occurred in the forty-five years that I have known him that would serve to recall the characteristics that have made him famous; his uncompromising integrity, his plain, blunt spoken truthfulness; his coolness in action; his courage in the face of almost insurmountable obstacles; his physical endurance; his quickness of decision; his fine judgment governed by the clearest common sense which extricated him from the most difficult situations; his wonderful capacity to infuse confidence in his subordinates as well as in his patients, who never questioned the accuracy of his touch or the certainty of his diagnosis when once asserted.

Many interesting supplementary anecdotes could be told to confirm the qualities of head, hand and heart, which have illuminated the professional history of the honored guest of the evening and which are now rapidly becoming traditional in the student body.

But in listening to Dr. Lewis' address, I have been reminded that, with characteristic modesty, he has hurried with the greatest brevity over the list of honors which he has received in the course of his superb medical career. He has laid no claim for the merit of his work as one of the most generous and charitable medical practitioners in this community, or to the historic recognition that he is entitled to as a pioneer and founder of surgical gynecology and abdominal surgery in this section of the country. Nor does he stress the recognition which his services as a patriotic and altruistic citizen have won for him in the respect and admiration of his professional brethren and fellow-citizen.

Feeling confident that this would be a great hiatus in his otherwise most interesting narrative, I decided, upon learning that Dr. Lewis was to read tonight, that I would make bold to
supplement his reminiscences by adding an appendix, even though without his knowledge or consent. The epilogue or supplement which I propose to submit, embodies the sentiments of the Faculty of the School of Medicine of Tulane University of Louisiana as expressed at the time of Professor Lewis' golden anniversary of his entrance into the medical profession, including thirty-five years of active professional duty at the Medical School, and exclusive of the last ten years of his emeritus professorship (with partial service), in all forty-five years of teaching in this school and community.

It seems to me that the sentiments expressed in an address and resolutions adopted by the faculty in May, 1912, through a specially appointed committee of which I had the honor to be chairman, and which have never been given publicity outside of the faculty archives, can now be brought to light with renewed emphasis on a joyous occasion such as this, when at the close of another decade of ever green vigor, clarity of vision, and unrivaled physical and mental energy—we all, his colleagues, fellow-alumni, comrades and friends—can unite in mutual congratulations: Felicitations to ourselves that we can count with so much reliance on the encouragement and stimulus of his presence, and on the prestige that his achievements and example have given this community and our common profession. Congratulations to him that he is "carrying on" strong on the way to the eighty-third link in the golden chain of his "accumulated years," with a healthy prospect of adding one annual sparkling gem after another to an already precious store!

He may be well pleased that he, as one of the acknowledged mentors of the profession, is able to add another lesson to his numerous teachings, by demonstrating with the "vim, sap, and rubber" that he has displayed tonight—that age is not always measured by time or by the calendar. In fact, he is one of those of whom Dr. Johnson would say: "Panting Time toileth after in vain." What is more, while always a teacher, he can repeat the famous exclamation of Michael Angelo, who in his ninetieth year could say with pride, "Ancora Imparo"—I yet can learn! Who, knowing our "young Dr. Lewis," can ever doubt that, when he attains his centenary, some one may say of him what was said of Sophocles in his hundredth year: "Dans ses Veines
toujours un jeune sang bouillonner,’” or fail to recognize in him the qualities extolled by the poet, in the lines:

“Eye hath not seen, tongue hath not told
And ear hath not heard it sung,
How buoyant and bold, though it seems to grow old,
Is the heart, for ever young.”

(After these introductory remarks Dr. Matas read the following hitherto unpublished address delivered at a meeting of the Faculty of the Medical School, on May 23, 1912, in commemoration of the fiftieth anniversary of Professor Lewis’ graduation in medicine and of the thirty-ninth year of his service as a teacher in the Medical Department of Tulane University of Louisiana. Copies of this address and of the resolutions adopted by the Faculty at the same meeting were incorporated in the minutes of the Faculty, together with a record of the presentation to Professor Lewis by the late Dean Dyer, of a gold watch suitably inscribed, as a token of the appreciation of his colleagues and of their deep regret at his retirement from didactic teaching. The coincident election of Dr. Lewis as Emeritus Professor of Obstetrics and Diseases of Women, is fully referred to in the resolutions. The proceedings of the Faculty on this occasion were never published and it is with pleasure that the Editor and the Officers of the Orleans Parish Medical Society avail themselves of the opportunity offered by the “Lewis Jubilee Night” to give them due publicity.)

**Address of Dr. Matas at the Meeting of the Faculty of the School of Medicine on May 23, 1912.**

Mr. Dean and Members of the Faculty, Professor Lewis:

Contrary to all precedent and past experience in the history of our faculty meetings, we again assemble at the close of an arduous evening session, to consider a new business— which is not announced in the Dean’s program. But the crowded halls, the anxious face and the exultant yells of the successful candidates all remind us that the session of 1911-12 is about coming to an end, and that the grave and most solemn of our professorial duties has been discharged. This occasion serves to remind us that 50 years ago at the close of the session in the memorable year of 1861-2, there stood in the vanished halls of the old historic building that was the home of our predecessors, an impatient and handsome youth who with scarcely twenty-two summers to his credit, was waiting the verdict of the seven learned Doges who at that time presided over the destinies of this then young, but already famous, republic of medical letters. Possibly, with the assurance that no doubt characterized the
hospital interne of 1862, as much as he now displays in the year of 1912, this particular interne, conscious of his brilliant record and of the affection in which he was held by his chiefs at the old Charity, did not tarry with his fellows to wait for the dictum of the Dean, of which he had already been assured. For, indeed, as prophesied by the Seers who had read the triumphal march of this juvenile Esculapius in the stars, the dignity of the doctorate degree in medicine, duly inscribed in parchment, was issued to the young aspirant by the faculty on the fated 5th day of March, 1862. Little did the learned professors dream then that only eleven years thence this young stripling was destined to fill a coveted chair vacated in 1876 by the untimely death of one of the most respected and best loved men who has ever sat in a professional chair in this faculty, Professor Frank Hawthorne. The wheels of Time had barely rolled over the space of two years when our young professor, then scarcely 34 years of age, found himself elected by the will of his colleagues to the highest pinnacle of his legitimate aspirations, and was proclaimed professor of obstetrics and of the diseases of women and children, a position which he has since so brilliantly adorned.

You have thus divined in this brief reference to the remarkable and triumphal career of one of our members, that I have alluded to no other than Professor Ernest Sidney Lewis, better known to the people of this community as the "young Dr. Lewis,"—because he, among other advantages that he enjoys over the other members of the profession, possesses the secret of perennial youth—which he jealously guards as his own.

And is it not eminently fitting and proper that we should meet on this special occasion to honor and celebrate with him (or, in spite of him), the attainment of the golden anniversary of his espousal of the medical profession? Is it also not meet and proper that we should select this moment when we are gathered in watchful attendance at the lying-in chamber of our prolific alma mater, at the happy close of one of her annual parturient efforts, when she gives to the world her numerous and vigorous progeny? Is it not right that, leaving her safe and sound after the ordeal, we should hie us to the festive board and in the late hours of the night unite, as a happy family, to congratulate the accoucheur in chief on his success, to congratulate the greatest "birth-helper" of his generation—"Geburts hilfe"—
as the Germans so appropriately designate the obstetrician; he who has stood unfailingly and steadfastly at his post, year after year, decade after decade, to help us through in this annual crisis; what is more, to congratulate him, and ourselves as well, for leaving her sound, unrent, robust and more perfect for the next gestation?

Yes, Professor Lewis, you may be surprised, and your innate modesty may protest against our outspoken declaration to hold you here tonight, and, in spite of you, to tell you what we think of you. It is a long time since your colleagues have thought of your just due; how we feel that it is only right that a long and unblemished career of arduous and devoted service should receive at least the open recognition that it so eminently deserves, and that you who have contributed so much to exalt the merits of others, should also receive a proof of the esteem in which you are held. And yet, your modest self-effacement which shuns all public or noisy demonstrations has barred the way to our well-meaned purpose. But the semi-centennial of your professional birth and the insistence with which you have urged your much-feared retirement from the exacting and exhausting duties of your chair, has given us no other choice but to tell you to-night what has been silently locked up until now in our hearts. We who are your debtors as well as your friends—and proud to be so numbered—as we stand about you tonight, wish to pay you collectively and in our individual ways, and according to our several relations, our heartfelt tributes.

As I look over this paper at my honored friend, my gratefully acknowledged master, I am reminded of a similar occasion when the profession of Chicago had decided to celebrate the achievements of one of their greatest leaders, that distinguished but blunt-spoken Dane—Christian Fenger. When one of his most brilliant and attached pupils, Dr. J. B. Murphy, guardedly informed him of the proposed action of his colleagues, the modest man vehemently protested, explaining: "Yes, that is alright for you to speak this way, Murphy, but I am not dead yet!" The response was: "Yes, you are very much alive, and, thank God for that, but is it fair that you should make us wait and let some of us die—waiting until an Almighty and inscrutable Providence shall determine the time when according to your terms
we are to have our say? Is it necessary to all honors should be posthumous? Furthermore, you might not be as fortunate as Socrates in your biography. There is no medical Plato within our visual horizon. There is no certainty either that, like Dr. Johnson, you have your Boswell." And I would add in the more direct language of one of your most venerable companions in gynecology, Dr. Henry O. Marcy, of Boston, "I would much rather have a little 'taffy' while living instead of a great deal of 'epitaphy' when I am dead." And you must agree, in spite of all your protestations, that a flower here and there during life is far more fragrant to our nostrils than great pyramids of roses to a dead man in his coffin. The assurance of the love of our fellows, of their esteem; of their loyalty, of their respect, is surely far more stimulating and encouraging than the most eloquent panegyrics when we are gone—where all is silence.

Fellow members of the faculty, we have met tonight not merely for personal gratification, but with the splendid purpose of paying a tribute of friendship to one of our fellows who has honored us for nearly four decades with his inspiring presence and support; who has honored our common profession; who has been a great personal help to many of us; who by the prestige that his great and good name has given to this college—to all of us.

The friendship that we feel for you, dear friend and colleague, is one of the things that adorn and sweeten human life the most. Its delights have been pictured by the Roman orator in an immortal essay. It lives in the heathen legend of Damon and Pythias. It reappears in Holy Writ where David and Jonathan are linked together like one soul. "It begins with our youth; it heartens and cheers our manhood, and in the autumn of our lives, it illuminates our later days as with the glow of the setting sun. Even after we are gone, the memory of our friendship is as the afterglow which perpetuates the glory of the departed day. It becomes the highest better than a crown. It is one of the few things of which even poverty cannot rob the poor." (W. W. Keen.)

Inspired by these thoughts, the faculty, your friends, have decreed that we should dedicate the last hour of this closing session to the reading of a congratulatory message on the attain-
ment of your glorious golden anniversary, which, in conformity with the usage that you have helped to fashion, we propose to insert, if only in justification of ourselves, permanently on our records. In deference solely to your insurmountable modesty we have restrained our enthusiasm to the extent of limiting this manifestation to a purely family gathering where we may keep you longer to ourselves, though it would have suited us still better to have proclaimed to the world what you had done for us and how much we loved you for it.

RESOLUTIONS SUBMITTED TO THE FACULTY AT THE SPECIAL MEETING HELD THURSDAY NIGHT MAY 23, 1912.

At a meeting of the Faculty held May 3rd, it was resolved by unanimous vote (Professor Lewis alone being absent) that a special committee be appointed by the Dean to commemorate in suitable resolutions the golden anniversary of Professor Ernest Sidney Lewis as Doctor of Medicine and as a graduate of the Medical Department of the University of Louisiana. These resolutions were to attest the appreciation in which he is held by his colleagues, the teachers of this College, the majority of whom are his pupils and all of them his friends.

In compliance with these instructions, your committee has the honor and the privilege to submit the following:

Whereas, Professor Ernest S. Lewis, B.S., Tulane, was graduated M. D. in the University of Louisiana (now Tulane) on March 5, 1862, thus completing with the close of the present session of 1911-12 the fiftieth since the date of his graduation, and a half century of service in the medical profession, devoted untringly and unstintingly to the alleviation of a suffering people of his native city, of his state, and of the tributary section of this Southern country. Of these fifty years fully thirty-nine have been continuously dedicated to teaching in this college, one year as Lecturer on Physiology (1886-7), two as Professor of Materia Medica and Therapeutics (1874-76), and thirty-six as Professor of Obstetrics, Gynecology and Diseases of Children (1878-1912), and in addition, other lesser official functions exercised in the earlier years immediately following his graduation; and,

Whereas, Professor Lewis has again renewed his request that he be relieved of the official duties of his Chair, a request which on previous occasions he has reconsidered and withdrawn solely at the urgent solicitation of his colleagues, who could not bear to part with his almost vital influence as a teacher in this University, at last yield to the justice of his demands and reluctantly consent to his release;

Resolved, That the Faculty of the Medical Department, in regretfully accepting Professor Lewis' resignation from the Chair of Obstetrics and Gynecology, unanimously recommends that the Board of Administrators of the University elect him Professor Emeritus in the same Chair; but that this resignation be qualified by the provision that the title of Emeritus shall only mean that Professor Lewis is to be relieved of all systematic routine teaching. The Faculty is not to be denied the inestimable value of his active participation in directing the affairs of this Faculty, when it may please him to do so, and he is to consider himself the same welcome and trusted councillor at its Board, always a source of inspiration and encouragement to his colleagues and junior associates. It is also...
Resolved, That a special clinical hour be set apart in the weekly schedule of the curriculum for Professor Lewis' purposes at the Amphitheatre of the hospital, where the Senior class may be privileged to witness his operations and profit by his teachings and example.

Resolved, That in his several and distinct professorial capacities, and especially in his favorite and chosen specialties—Obstetrics and Gynecology—to which he has given the best energies of his life, Professor Lewis' ability as a teacher, his technical skill as a surgical operator, his wide culture, his vast and varied experience, have made him the foremost consultant of his generation, the recognized and undisputed leader, facile princeps, in the special fields of medical knowledge with which he has identified himself. As a teacher and pioneer in this community, in the development of the obstetric and gynecologic arts, his willingness and readiness to share the benefits of his knowledge and experience with his younger and less experienced colleagues, and to impart to them the secrets of his success, has been the most powerful stimulus towards the creation of a local school of operators and specialists, who are a credit to their Alma Mater, and who, in diffusing his teachings, recognize him as their master and the inspirer of their best achievements.

But in addition to his professional eminence and above his superior technical skill, Professor Lewis has indelibly graven his name in the hearts of his people by the boundlessness of his charity and his prodigal generosity in dispensing the treasures of his knowledge in the hour of need, without a selfish thought of material reward.

Dr. Lewis' broad humanity, combined with his unpretentious simplicity and genuine modesty, are conspicuous among the endearing and distinguishing characteristics which he has most amply demonstrated in the course of the five decades of the professional life which he has just spanned. He has been the friend of the poor and in the bestowal of his professional and other charities, he has known no distinction of class or condition, but consecrated his services to all.

"The palace of the prince and the hut of the peasant have been alike the scenes of his professional activities and the beneficiaries in the same unselfish manner of his skillful ministrations." Like the Doctor of the Bonnie Briar Bush, immortalized by Ian Maclaren, it may be said of him: "No night was too dark, no sun too hot, no blast too chill, and no waters too deep for him to go on his errand of mercy to alleviate the needy sufferer."

In public life, though never a politician, Professor Lewis has always found time to actively discharge the duties of citizenship and to participate in all the social movements that have affected the welfare and the prosperity of the community in which he resides. Sought for his social prominence, his popularity with all classes as well as for his ability and, still more, for his unswerving and absolute integrity, Dr. Lewis has discharged important public trusts involving great responsibilities which he has always filled with honor and dignity. Like his departed and honored friend, our late Dean, Dr. Chaillé, he shared with him the distinction of a patriotic, militant and humane service, in the battles of the lost cause. Since the retirement of our Emeritus Professors, Drs. J. B. Elliott, Sr., and L. F. Reynaud, Professor Lewis remains with us the only member of this Southern Faculty who may now claim the honor and the dignity of wearing the gray, as a Confederate veteran.

It is now a matter of history how, in 1862, Professor Lewis gave up the coveted position of House Surgeon of the Charity Hospital, to enlist as a Confederate Surgeon at Tallahoma, how he was rapidly promoted for his valor and efficiency to a brigade surgeonship, and medical directorship in Wheeler's famous cavalry corps, to which he
was attached until the close of the war. It was then that he returned to his home in this city where he began his civilian career and obtained immediate recognition as one of the most successful practitioners in the metropolis, quickly ascending the ladder of fame until he reached the high pinnacle where he stands today.

In recognition of these facts and in expression of the friendship and esteem in which we hold him, we, his colleagues and his associates of the Medical Faculty, hereby extend to Professor Lewis our heartfelt congratulations on the attainment of the golden anniversary of his wedding with the medical profession; a union which has known no discord, dissension or disloyalty; a union which has been characterized by a spotless purity and has been blessed with a bounteous fertility out of which have sprung Honor, Gratitude and Love. That he may continue to enjoy for many more years the fruition of his generous sowing and that in the contemplation of the rich harvest he may find the most fitting and joyful reward of his laborious toil, is the fervent wish of his friends—The Medical Faculty.

R. MATAS, Chairman,
JOHN T. HALSEY Committee.
S. M. D. CLARK

(Citation of Professor Lewis by the President of the American College of Surgeons on the presentation of the Honorary Degree of the College, at the Convocation held in Philadelphia on October 27, 1916, Professor Lewis being the only recipient of this distinction that year.)

ERNEST SYDNEY LEWIS, B.Sc., M.D., of New Orleans, Louisiana; Emeritus Professor of Obstetrics and Gynecology in the Medical Faculty of Tulane University of Louisiana; sixty-five years a Doctor of Medicine; forty-five years a teacher in his Alma Mater, the Medical Department, Tulane University, — of which forty years have been largely devoted to the teaching and practice of obstetrical, gynecological and abdominal surgery.

A pioneer in the development of gynecology and abdominal surgery in America, and the father of these branches of medicine, as specialties of surgery, in the community of which, throughout his life, he has been an honored part.

A man of wide culture, of vast and varied experience, of great technical skill and judgment, of spotless character and integrity, and of whole-hearted devotion to his profession, he became, early in his career, an undisputed leader and the foremost consultant in his special field of practice, of his generation.

He is beloved by his people for his unswerving rectitude, his patriotic and courageous citizenship, his unpretentious simplicity, and unquestioning readiness to respond to any call and bestow the best of his life's energies upon the suffering, without distinction of class or condition.

Always a man of action, he has never been a chronicler of his own deeds; hence, his contributions to the literature of his profession count as a very small part of the large sum of his accomplishments. A record of his unpublished achievements would easily fill many portly tomes.

In conferring upon Dr. Ernest Sydney Lewis its highest distinction, the American College of Surgeons recognizes, in his life of public service, that type of surgeon who, through his skill and learning, has not only contributed materially to the advance and progress of his art, but who, living up to the highest traditions of medical conduct, has exalted the esteem and dignity of his calling in the minds and hearts of his fellow-men.
Dr. Parham: Mr. Chairman, Ladies and Gentlemen—At this time I am reminded of a conversation which took place between a Bishop and Uncle Mose. They were discussing Dr. Osler's proposition, jocularly made, that at a certain time in a man's life he should be chloroformed or otherwise retired. The Bishop asked Uncle Mose what was his opinion. "Well, Bishop," he answered, "my idea is about this, that a man goes up for a while, then he goes along the level for some time, then he begins to go down." "Well," asked the Bishop, "when, in your opinion, does he begin to go down?" Uncle Mose replied: "That 'pends upon the speed with which he went up."

It is certainly a great pleasure for all of us to listen to a man who has been practicing medicine for two generations. I am reminded of some remarks that were made on the 99th birthday of Dr. Stephen Smith, who, in 1871, organized the American Public Health Association. Dr. Smith, who is still alive, was 99 years of age last February. In a bibliographical sketch of him it was stated that he could still march through the streets in full vigor, not even wearing eye glasses. I beg to quote some remarks made about him, substituting for his name that of Dr. E. S. Lewis, as they are equally appropriate. To few beings in this age is it given to look back over a life that spans four score years. To still fewer is it given to look down such a vista of years with eyes undimmed, mental faculties alert and unimpaired, and figure unbent by the weight of years and the cares of life, but it is, indeed, a unique privilege to review in retrospect four score years of life so filled with unselfish service to one's fellow-men as has fallen to the lot of Dr. Lewis. It is worthy of remark, too, that these two generations of practice of Dr. Lewis have been those the most active in the history of the progress of medicine. Dr. Lewis came on the stage of practice at a very busy time in medicine, just two decades after the popularization of anesthesia in 1846 by Morton. The epoch-making work of Lister, first published in 1867, was just beginning to make itself felt in this country. I well remember in 1878 how an assistant of Sir Joseph Lister came over to this country and paid a visit to our hospital one morning when I was Dr. Logan's interne. He desired to show us the antiseptic method of Lister and asked for a case to
apply the dressing. I had such a conception of the wonderful virtue of this dressing that I presented him with a case of suppurating disease of the leg on which a liquid glass bandage had been applied with a fenestrum through which the dirty pus could be seen oozing. When the gentleman looked at this case his countenance fell; he made only the comment that this was not a suitable case to apply the dressing, and merely showed us how the dressing was used. I had had the idea that there was nothing to do but put the dressing on and all would be well. This illustrates the fact that the Lister procedure was slow in making itself felt in this section of the country. Dr. Lewis was in the most active period of his professional life at this time, and gynecology was at a very low ebb. I had myself seen only one case operated on for removal of an ovarian cyst by Dr. Chopin in which the antiseptic system was partially carried out. When Dr. Lewis became professor of gynecology he took up the study of the branch with enthusiasm, and what was known about gynecology at that time and for some years afterward in this section, centered about Dr. Lewis. Even after Dr. Lewis had been practicing his specialty for a number of years it was well known that he had himself not seen anybody else operate except on an occasion when a society met in this city and some of the visiting gynecologists were requested to operate, and truly his light was hid under a bushel. I remember Professor Dennis some years ago while on a visit to this city remarked to me that he understood there was a man by the name of Lewis who, he had been told, had done more gynecological work than almost any man in this country, and yet he had not heard of him until he paid this visit to New Orleans. Dr. Lewis used to say of himself that once when he was in New York he saw a prominent gynecologist coming down the street and he dodged him, so that even on a visit to New York he did not see the work done by other men. I mention these incidents to show that his work in gynecology was entirely built up out of his own head with the assistance
he got from reading the literature of the subject, yet it was well known that his work was equal to that of any done in the country. Most of the men prominent in gynecology today owe largely their efficiency in this line of work to Dr. Lewis.

Dr. Lewis is one of those men who seem never to get old. I fully expect that he will go to the end of his century. He, like Ulysses, felt

"How dull it is to pause, to make an end,
To rust unburnished, not to shine in use."

"We live in deeds, not years; in thoughts, not breaths;
In feelings, not in figures on a dial.
We should count time by heart throbs.
He most lives who thinks most, feels the noblest, acts the best."

When a man has lived as Dr. Lewis has lived, we never expect him to grow old. At least he will live long in our hearts as well as, I was going to say in literature, but unfortunately Dr. Lewis has not contributed his share to our literature. He acknowledges himself having operated on thousands of cases, but these are lost to the profession because truly he has hidden his light under a bushel.

I hesitate, gentlemen, to go further than this as I did not expect to make an address and did not prepare one. I certainly feel fortunate in coming after Dr. Matas, who has left so little to be said that should be said, that I will not be doing amiss in not attempting to go further.

ADDRESS TO DR. E. S. LEWIS.*

By DR. E. DENEGRE MARTIN.

I have no doubt that all here present share with me the great pleasure of this occasion. I would like to recount a few pleasant experiences in my association with Dr. Lewis, for many times have I assisted the doctor in his operations to the tune of "There'll be a hot time in the old town tonight," but

*Read before the Orleans Parish Medical Society, April 24, 1922.
the hour is late and refreshments await us. I shall therefore confine myself to the task assigned me in closing the program; I cannot let the opportunity pass, however, without saying that Dr. Lewis was the one teacher from whom we learned the most practical lessons. His lectures were always replete with facts and personal experiences interestingly told.

Why, my dear doctor, when it was learned that you were to read a paper before this Society, it was suggested and unanimously voted that we make it a "Lewis Night," and in answer to the esteem, love and reverence with which you are held by your fellow-men, I have but to point to this assembly. We have all come here tonight to do honor to you, and, in a manner, to show you how we feel towards you.

You hold, my dear sir, a most unique position. Not only have you practiced longer than any physician who has preceded you, but you have apparently outlived your enemies, for we have not been able to discover any.

We are assembled here tonight not only to listen to your most interesting and instructive paper, but to convey to you by a small token of our regard, our high appreciation of your friendship, and I am asked to present you with this Loving Cup, on which the inscription reads:

"Presented to Dr. Ernest Sidney Lewis, April 24, 1922, by members of the Orleans Parish Medical Society, in commemoration of the completion of his sixtieth year in the active practice of his profession, as a token of their love and esteem for the Man, Soldier, Teacher and Physician, 1862-1922."

We know that you have often tasted of the cup of sorrow and disappointment; we now present you with this cup of happiness and contentment, and as we wish it to be a solace to you in your remaining years, we have filled it with good wishes to cheer you in your hours of leisure.

You will need no monument to proclaim your fame, no statue to grace a hall, for your kindly words and noble deeds will e'er remain, engraved, on the hearts of all.