R. PRESIDENT, fellow members of the Massachusetts Medical Society, ladies and gentlemen: In accepting the honor of becoming on this day your one hundred and forty-third orator out of a possible one hundred and forty-nine since the first of these verbal marathons was run, I am humbly conscious of the fact that I am appearing before you in substitution for my friend, John Fallon. Had he survived the year since last we met, he would have been standing at the rostrum and I would have been sitting at his feet.

There is, however, some precedent for even the editor’s becoming also the orator. In 1818, fourteen years after this series of addresses had been inaugurated, James Jackson, associated with John Collins Warren in establishing the New England Journal of Medicine and Surgery, delivered the annual discourse, “On Fever.” Two years later, Warren himself addressed our ancestral prototypes “On the Sensorial and Nervous System in Man and Animals,” and in 1822 John G. Coffin, who was to assume the editorship of the Boston Medical Intelligencer in 1827, delivered “A Dissertation on Medical Education and on the Medical Profession.”

And so the list continues. In 1833 Walter Channing and in 1847 John Ware; in 1875 and again in 1881 J. Collins Warren, and in 1892 Frank W. Draper, all at one time or another editors of the Boston Medical and Surgical Journal, have occupied this somewhat exalted position at the annual meetings of our Society. Great names they were in Massachusetts medicine in their day, and we are proud that they are of our family, with their discourses, pressed and preserved like autumn leaves, in those massive volumes comprising the Communications of the Massachusetts Medical Society.

When, in 1812, the New England Journal of Medicine and Surgery and the Collateral Branches of Science was established, as an independent quarterly publication, the Massachusetts Medical Society, today the oldest state medical society in the country in continuous existence, was already in its thirty-first year. A Faculty of Medicine had been created by the Harvard Corporation less than thirty years previously, the American Revolution had taken its place in history within a generation and the second war with the mother country was about to begin. The Massachusetts General Hospital had been chartered in the previous year and was soon to be built according to the specifications of its trustees “of stone and of that kind called granite.” As a result of the generosity of the Great and General Court of Massachusetts, this material was “hammered and fitted for use” by the convicts at Charlestown, the cornerstone being laid on July 4, 1818. Thus, in the decade preceding the one that saw the birth of Pasteur and of Lister, of Florence Nightingale and of Clara Barton,—all pioneers in the cause of humanity,—a freer exchange of ideas among physicians was taking place, and the beginnings of modern medicine were stirring in New England.

The New England Journal of Medicine and Surgery was the direct ancestor in an unbroken line of our own New England Journal of Medicine and, so far as I know, had but one journalistic predecessor that has continued in uninterrupted publication since its establishment.

This is the monthly Edinburgh Medical and Surgical Journal, founded in 1805 and published since 1861 by the house of Oliver and Boyd. The firm had been established in 1778, quite unconscious, probably, of the revolt of certain far-off colonies across the water proceeding according to its ordained course. Oliver and Boyd still maintain their original quarters in Edinburgh’s old town, in Tweeddale Court, off High Street, in a building probably of that stone called granite, already mellow with age when first they occupied it.

The third in the triumvirate of hardy perennial medical journals is the weekly London Lancet, first published in 1823 under the editorship of the turbulent Thomas Wakley. The Lancet began to diffuse its light in the same year as did the Boston Medical
Intelligencer, also a weekly and a pioneer forebear of our own periodical.

The first publication for which our Society itself was responsible, although in no ordinary sense a journal, was that of Medical Papers Communicated to the Massachusetts Medical Society, the first part of Volume I of which appeared in 1790. The leading article in this early venture of the youthful organization was "An Account of the Weather and of the Epidemics, at Salem, in the County of Essex, for the Year 1786." It had been presented before the Society by Edward Augustus Holyoke, of Salem, our first president and destined to become the patriarch of patriarchs of New England medicine, for he remained active in good works nearly to the time of his final summons, at the age of "one hundred years and eight months, lacking one day." The balance of Volume I, the second of these literary mausoleums, published nineteen years later, contains the well preserved remains of the first of our annual discourses, delivered in 1804 by Isaac Rand, on "Phthisis Pulmonalis."

Our Society, it appears, even in those rugged days had leanings toward the publication of a journal of its own, for it was voted in February, 1812, "That the committee of publication be directed to ascertain if possible who are the conductors of a publication entitled the 'New England Journal of Medicine and Surgery,' with a view to determine the expediency of incorporating the Communications of the Society in the said publication."

As Burrage points out in his history of the Society, "We are justified in assuming that the committee found out who were the conductors of the New England Journal of Medicine and Surgery, for John Gorham, one of the committee of publication, was a founder of that journal and for fifteen years an editor." Nothing seems to have come of this tentative exploration.

Two years after its inception the editors of the journal promised its readers that it would "continue to be a vehicle of original communications, and of the correspondence of such practitioners and experimental observers, as may favour the conduction of the work with interesting facts, inferences and improvements, relative to medicine and to general science." They did more than this; they expressed the wish to add one or more plates to each volume, a design that they proposed to "carry into effect so far as the state of the subscriptions will justify the expense."

Some of the titles bear out the journal's claim to represent also the collateral branches of science, for such subjects are included as the "History of the Forest Trees of North America," a scholarly exercise translated from the French; "Description of a Bank for Alpine Plants" and "Remarks on the Importance of Inland Navigation from Boston, by the Middlesex Canal and Merrimack River." Jacob Bigelow, lecturer on materia medica and botany in Harvard University, contributed "Some Account of the White Mountains of New Hampshire," and soon, not to be outdone, George Hayward gratified the curiosity of the journal's readers with a "Description of An Elk."

The weekly Medical Intelligencer set also a good table. Printed in three-column newspaper form, it contained, in its own words, "Extracts from Foreign and American Journals; a Variety of Local Intelligence on Subjects Connected with Medicine; Biographical Sketches of Distinguished Surgeons and Physicians; Descriptions of the Principal Hospitals in Europe; Original Articles on Various Diseases, with Concise Views of the Improvements and Discoveries in the Medico-Chirurgical Sciences."

Its introductory message to the profession announces its editor's fond aspirations as follows:

In the United States, where Science is described as the palladium of national prosperity, every attempt to diffuse truth meets with a cordial reception. No study is more rapidly gaining the dignity it so obviously merits than medicine. A few years ago it was not uncommon for people to be born bone-setters, whose chirurgical celebrity was as immediate as their methods of operation were infallible. Cancer Doctors devoured the humble victims of their duplicity with a slow but certain torture; and a seventh son, however mean, was a favourite of fortune and the peculiar gift of Providence. These scenes of ignorance are passing away. Reason, the best weapon against the absurdities that have enslaved the mind, has triumphed over bigotry and superstition.

Would that these sentiments could be repeated today with equal assurance!

In 1828, the owners of the New England Journal of Medicine and Surgery purchased the Intelligencer for the sum of $600 and combined the two publications into the weekly Boston Medical and Surgical Journal, of little less than sainted memory. The progress of medicine now quickened its pace — at least in Massachusetts.

In the first volume, as a matter of scientific interest, a case of comminuted fracture of the skull in a youth of seventeen tender years was described, in which several pieces of bone were removed from the brain. Five years later the mother reported that the patient, who had always been stupid and never free from headache, had lost his headache and had become "as sharp as a briar."

"It would seem from this case," according to the conclusion, "that a redundancy of brain is equally unfavorable to the development of mental manifestations as a lack of it."

Somewhat later, when J. V. C. Smith, the originator of the Intelligencer, had commenced his more than twenty years of editorship of the Boston Medical and Surgical Journal, a note is found concerning an alcoholic picked up in the streets of London, the liquid in whose ventricles "appeared, to the senses of the examining students, as strong as one-third gin and two-thirds water." Not a scientific observation, perhaps, but picturesque.

Some indication of the Journal's value to the medical community is the very fact that even in
weekly publication it survived and must even at times have prospered, for upwards of a hundred years. Under the ownership of succeeding groups of "medical gentlemen," it conformed, according to the editors of 1868, in which year it adopted a two-column format, "somewhat in shape and appearance to the best modern specimens of hebdomadal literature." Nor was it without competition in its own locality, for during its century of existence under the old familiar name the Boston Medical and Surgical Journal saw close to 80 other journals of medicine come into being in New England and saw most of them, like the more or less abundant snows of yesteryear, depart.

Meanwhile, the Communications of the Massachusetts Medical Society had continued to appear in huge volumes, each containing the transactions of several years, including the annual orations, or discourses, as they were then more happily designated.

Noteworthy among them was that which epochal classic, delivered in 1835 by Jacob Bigelow, on "Self-Limited Diseases," characterized by Oliver Wendell Holmes as having "more influence on medical practice in America than any other similar brief treatise." Its lesson is summarized in the single sentence: "It is a common error to infer that things which are consecutive in the order of time, have necessarily the relation of cause and effect." Thus the age-old fallacy of post hoc ergo propter hoc was exposed as such once more.

The field of medicine was broadening, the consciousness of the obligations that society owes to its members was deepening, and unexpected agencies were sometimes found to carry out the commands that compassion put upon them.

In 1841, Dorothea Dix, having retired to her Beacon Hill house at the age of thirty-nine after a physical breakdown occasioned by an excessive application to the problems of pedagogy, discovered the conditions under which the insane of the Commonwealth were confined in many of its institutions — "wretched in our prisons and more wretched in our Alms-Houses." Her breakdown was canceled, and she began the career that was to occupy the next forty years of her life with an investigation and a report to the General Court of Massachusetts that may be found in the Boston Medical and Surgical Journal of March 1, 1843.

I proceed, Gentlemen, briefly to call your attention to the state of Insane Persons confined within this Commonwealth, in cages, closets, stalls, pens: Chained, naked, beaten with rods, and lashed into obedience!

The words sank into the minds of our legislators and opened their hearts, the immediate result being an enlargement of the state hospital at Worcester. Miss Dix's second adventure was the procurement of funds with which to build the Butler Hospital in Providence. The Trenton State Hospital in New Jersey was the fruit of her labors; she visited every state in the union east of the Rocky Mountains and was instrumental in the establishment of 30 hospitals before she turned her attention to Great Britain and secured the appointment by Queen Victoria of a Royal Commission to study the deplorable conditions under which the insane then existed in Scotland!

Three years later, two papers appeared in the Boston Medical and Surgical Journal that have made Volume 35 of the publication a collector's item. The first of these, published on November 18, 1846, is "Insensibility During Surgical Operations Produced by Inhalation," by Henry J. Bigelow. The second, which appeared on December 9, was by John C. Warren himself on "Inhalation of Ethereal Vapor for the Prevention of Pain in Surgical Operations." His final statement is a masterpiece of scientific reserve:

Let me conclude by congratulating my professional brethren on the acquisition of a mode of mitigating human suffering, which may become a valuable agent in the hands of careful and well-instructed practitioners, even if it should not prove of such general application as the imagination of sage persons would lead them to anticipate.

Such was the part that the Boston Medical and Surgical Journal played in introducing ether to the universe!

In February, 1847, the matter of publishing a medical journal of its own came up again in the Council of the Society, on the motion of no less a person than its president, Jacob Bigelow. The motion was referred to the Committee on Publications, which brought in a resolution authorizing itself to issue a quarterly publication to be called The Journal of Practical Medicine of the Massachusetts Medical Society.

The report was accepted in May, but at the fall meeting of the Council a new motion was introduced, calling for the postponement of publication for one year because of the condition of the treasury. An amendment struck out the words "for one year," and before favorable action was finally obtained the one year was multiplied by seventy-three.

Five years later, with that versatility to which we have been long accustomed, the Journal published an account of a "Strangulated Phrenic Hernia in A Horse."

Time marches on, and the art and the science of medicine march with it. The annual discourse of May 30, 1860, "Currents and Counter Currents in Medical Science," by Oliver Wendell Holmes, is one of that writer's most felicitous medical essays. I wonder how many physicians below the age of fifty have read it. Here, again, the privilege of publication went perforce to the Society's Communications.

Upholding the effectiveness of nature in the treatment of disease, Dr. Holmes noted that on nature's side "we have had, first of all, that remarkable discourse on Self-Limited Diseases, which has given the key-note to the prevailing medical tendency of
this neighborhood, at least, for the quarter of a cen-
tury since it was delivered.”

Not to make silver shrines for our old divinities [he
concluded], even though by this craft we should have our
wealth, was this Society organized and carried on by
the good men and true who went before us. Not for this, but
to melt the gold out of the past, though its dross should
fly in dust to all the winds of heaven, to save all our old
treasures of knowledge and mine deeply for new, to cul-
tivate that mutual respect of which outward courtesy is
the sign, to work together, to feel together, to take coun-
sel together, and to stand together for the truth, now,
always, here, everywhere; for this our fathers instituted
and we accept, the offices and duties of this time-honored
Society.

As further evidence that the interests of the pri-
ivate practitioner were the main goal of this erudi-
tion of a bygone century, let me quote from an issue
of the Journal of a hundred years ago, or nearly so.
The excerpt is entitled “A Card Left on a Doctor’s
Door, On His Going Out To Tea.”

Here dwells, awaiting all the haps of life,
A doctor humble and of less conceit;
For lofty stations never was his life,
And mammon-folly mars not his retreat.
Few are his wishes, with the world content;
His daily recompense enough, though small;
In early studies all he had he spent;
Now gains in practice oft (‘twas as he hoped) a call.
No farther seek him till tomorrow’s dawn,
Let him, uncalled, a casual feast attend
(Where he awhile from troubling care has gone),
The supper of a neighbor and a friend.

In 1873 “A Case of Extra-Uterine Foetation” was
published in the Journal; my grandfather had
come up from Gloucester to report it before the
Obstetrical Society of Boston.

A sporadic flirtation between Society and Journal,
though fruitless, continued. In 1880, when F. W.
Draper, the treasurer, sent out a circular letter ask-
ing if the Boston Medical and Surgical Journal
should be substituted for Braithwaite’s annual
Retrospect of the Medical Literature and Science,
which was then being distributed to the fellows of
the Society, the answer came back “Nay,” and again
in 1898 when the Worcester North District Society
introduced a motion in Council to the same general
effect, economy triumphed and the fellows were
again denied this richly cultural opportunity. The
cost of the Journal was at that time five dollars a
year; in the succeeding fifty-four years three dollars
have been added to the rate for independent sub-
scribers, and five dollars are now being deducted
for its support from the dues of the fellows, $6.54
per subscription being the net cost of its distribution!

Fresh ferments were at work. In 1886 a report of
Reginald H. Fitz’s paper on “Perforating In-
flammation of the Vermiform Appendix, with
Special Reference to Its Early Diagnosis and Treat-
ment,” read before the Association of American
Physicians, was published, and three years later,
“Acute Pancreatitis” appeared, by the same hand.
The medical practice of our grandfathers was passing
over into the practice of our fathers, and that which
we ourselves, perhaps in sinful pride, have designated
as the Golden Age of Medicine was about to move
in on mankind with this new and fateful century.

In 1914 the affair between the Massachusetts
Medical Society and “the conductors of a publication
entitled the ‘New England Journal of Medicine and
Surgery’” and their successors came to an honorable
conclusion. In that year the Boston Medical and
Surgical Journal became the official organ of the
Society, assuming the publication of its proceedings.
The final stage in the union was consummated in
1921, with the purchase of the venerable publica-
tion by the Society for the sum of a dollar—which,
I have been told, was never paid. Thus our Journal
achieved the relative security of sponsorship, which
has permitted so many medical periodicals to con-
tinue in existence in a highly competitive world,
and the Society acquired a publication of consider-
able distinction at something better than a bargain
price.

In the conduct of the Journal during these his-
toric years, George B. Shattuck had stood out as its
giant among editors. Ink must have flowed through
his veins as well as blood, for he had assumed its
editorship in 1881 and had held it on its course until
1912, when he was succeeded by E. W. Taylor and
then Robert M. Green, who carried on until the
year of the purchase. At that time the Committee
on Publications drafted Walter P. Bowers for the
post, which he held with unique distinction until
1936, when he was succeeded by Robert N. Nye.
The present executive editor, Clara D. Davies, ably
guiding the footsteps of four successive editors,
alone has bridged the years between the Journal’s
days of solitary independence and the present.

These thirty years have been crowded with events
of which a few only are germane to the account. In
1923, the result, I am sure, of mutual Yankee
sagacity on the part of both the publishers of the
Journal and the directors of the destiny of the
Massachusetts General Hospital, the weekly Case
Records of that institution were gathered into the
pages of the Journal, where they have resided ever
since. Despite occasional differences of opinion on
minor matters, no unconquerable feeling of frustra-
tion has been experienced by either party.

The final significant date in this presentation of a
historical background is that of February 23, 1928.
On that day the Journal, having borne for a hundred
years practically to the moment the title that had
inescapably linked it to the Boston scene, acknow-
ledged its cosmopolitan ancestry and its own secret
longings for a life unconfined by city limits, and
again took title to all New England as its field.
What the rest of New England thought of this
geographical assumption remains another matter,
except that the New Hampshire Society was there-
after willing to accept the Journal as its official
publication.
In the succeeding years, probably because of its life of symbiotic felicity, the Journal seems to have found an increased sphere of usefulness. Its circulation, restricted at the beginning of its association with the Society to little more than the membership, has benefited so from the transfusion it received as to have taken on various collateral aspects. The addition of the Case Records opened new channels, and, particularly during and after the war, the number of independent subscribers in all parts of the world increased until now there are more than three times as many of them as there are of us. Much of this expansion was due to the astuteness of the late editor, Dr. Nye. The medical students of the country seem also to have found the Journal of some value, for of its nearly 20,000 independent subscribers approximately 5000 are in this category.

The association of the Journal with the Society represented not a break with the past but a link with the future—some assurance of support when times were hard, a guaranteed state-wide circulation and new functions to perform. It came at an opportune time. Competition was growing keener, with the world’s supply of periodical medical literature emanating from over 5000 journals, including an increasing number of state-society publications, and with specialty journals ad infinitum descending like locusts on the land, seeking to devour the few spare dollars that might still be found in the wallets of our thrifter colleagues.

The character of the literature has changed with the needs of its readers, sensitive to the progress that has been taking place about them. The selection of material has required ever greater care in order that the majority of tastes might be at least partly satisfied. Few subscribers, presumably, read everything in their journals—nor do they read the entire Sunday paper; the many read according to their needs and interests—including the advertisements, the advertisers hope—and the few read not at all, possibly because of specific reading disabilities; perhaps, as the British practitioner confessed, because they find unopened medical journals in their wrappers handy missiles to hurl at the cat.

In the early days when communication was slow and the opportunities of obtaining reading matter were limited, information culled from various sources was eagerly received. The scissors and the paste pot were as powerful as the pen and much more easily employed; any journal’s motto, like that of the humorous weekly of a generation ago, might have been “aut scissor aut nullus.” Miscellany, intelligence, book notes and news made up a good part of a periodical’s content. Original articles, although relatively few, were of considerable merit, sometimes representing extremely accurate observations of cases.

Although no great amount of original research was produced during those years before the advent of modern medicine, the spirit of inquiry has nevertheless prevailed since Paracelsus burned the works of Galen in the novel belief that medicine had better make a fresh start. Nor can we forget two English practitioners, late in the eighteenth century, who left to us, their legatees, the foxglove and the lymph of cowpox—or the Reverend Stephen Hales, who in the same century measured the blood pressure and the rate of blood flow in horses.

Editors began tentatively to introduce their official views in the Journal in the 1840’s and, after a considerable period of thus testing the bog to see if it would bear weight, came forth with an overt and acknowledged editorial section in the ’60’s. From that time on, an editorial point of view, when properly expressed, with regard to the truth as it is given to see the truth, with respect for an opposing opinion,—which may turn out to be the right one, then or at some future time,—without meanness or bitterness, has come to be considered by our editors as a legitimate and valuable adjunct to medical journalism.

Nor need the editorial necessarily be confined to topics related to medicine, so long as they are ones in which the reader has or might have an interest. As has been written elsewhere, certain proprieties consonant with the ethics of the profession must be preserved. “The duties of the physician as a citizen and the relations that should exist between him and the rest of society may be stressed, but a medical journal, although it may uphold a principle, cannot become the mouthpiece of any candidate or any party,” nor should it otherwise, as Holmes warned his students a hundred years ago, “dabble in the muddy stream of politics.”

As the forms of medical practice became more technical and more diversified and its followers more sophisticated, different technics became necessary to transmit the messages that marked its progress, to maintain reader interest and to meet the pressure of competition. Visual technics in particular came into prominence. The editorial promise of 1812 to publish at least one plate per volume if funds permitted had undergone considerable expansion by 1868, when actual photographic contact prints were pasted into the Society’s transactions to illustrate a paper on orthopedic surgery by Buckminster Brown.

Still the pursuit of the eternal verities, though hot, has not ended. The mathematics of research has expressed itself in a multiplicity of graphs, charts and tables with the aid of which the average reader at a quick glance can often learn next to nothing—unless he has somehow mastered the elementary use of that unpredictable instrument, statistics. The amazing formulas of chemistry and physics have become part of our literature; photomicrographs and x-ray reproductions display their visual but still baffling technics in an all-out effort to bring the precision of science to aid in shoring up our ignorance, and the electrocardiograph still
sometimes fails to make the message of a humble and a contrite heart completely understandable.

As for medical art, that has indeed become a uniquely specialized profession, although not a new one, as one realizes after a glance at the drawings by Calcar in Vesalius’s great book on the structure of the human body, published in 1543. The limits are set by the costs, and only the trade journals can demonstrate the real possibilities of medical illustration.

Outside of journalism are the even more spectacular though evanescent technics of moving pictures and television, which, when they are gone, leave but a vacant screen. For those products of the human mind that are worth preservation there is still the ancient sacrifice—that of reducing to a hard core of literate verbal construction those ideas that are considered sufficiently acceptable to become part of the record.

Writing, if not a lost art, seems at times to be a losing one. If editors have any function (and I would not disagree entirely with those who doubt it) it is that of trying to persuade authors that there is no good writing, only good rewriting,—that what is worth setting down at all can be done twice as well in half the number of words,—only it takes twice as long to do it. Original writing, like tapping a maple tree, is tedious business, but the really slow work, and the hard sugar, come in the boiling down of the sap.

The graphic arts are indeed seductive, but any serious attempt to supplant by any means an original idea that has been firmly phrased and clearly printed would be an attempt to push back the keeping of the records of mankind to those dim periods prior to the Code of Hammurabi or the Ten Commandments.

In our search for the fundamental truths of life we know that we will find no easy road to discovery or to the recording and the transmittal of ideas. Progress in scientific endeavor, as in human relations, comes the hard way, and we are too often blinded by the illusions that beset us.

Each of us, in his search, is somewhat like the youth in Emerson’s Conduct of Life, after he had entered the hall of the firmament, where all is system and gradation and every god is sitting in his sphere.

On the instant, and incessantly, fall snowstorms of illusions. He fancies himself in a vast crowd which sways this way and that, and whose movement and doings he must obey; he fancies himself poor, orphaned, insignificant. The mad crowd drives hither and thither, now furiously commanding this thing to be done, now that. What is he that he should resist this will, and think or act for himself? Every moment new changes, and new showers of deceptions, to baffle and distract him. And when, by-and-by, for an instant, the air clears and the clouds lift a little, there are the gods still sitting around him on their thrones,—they alone with him alone.

It is a principle often and piously enunciated that we must all, whether specialists or general practitioners, administrators or servants of the public in matters of public health, be dedicated to a single purpose—that of making continuously and universally applicable this knowledge of health and disease that has increased so greatly. For the intricacies and the costs of medical care long ago reached the point where the utmost organization of our facilities is necessary even to approximate its proper distribution. This is the new direction in which research must turn, to teach us how to direct our skills into the channels where they are most needed. It is in this sincere attempt to ensure the fullest deployment of medical care, with due consideration for the physician, that the present problems lie—in promoting the health of the community and the individual.

In the discharge of this function, our own Society’s most valuable contributions are in postgraduate education, including the support of one of the world’s great medical libraries; in the promotion of cordial public relations, and in the encouragement of a high grade of professional service, without which our vaunted ethics are as nothing. And implicit in all these matters is the good will of each individual member of the profession, loving his neighbor somewhat more than himself, which will initiate the work and will carry it on. For the physician, more truly than most men, remains still his brother’s keeper.

Social consciousness, which started Dorothea Dix on her life mission and drove Clara Barton to the battlefield of Antietam, is the factor that induced every good doctor and every other worker in the vineyard of human relations to assume his or her particular responsibilities, and that makes civilized man of today somewhat different from his ancestor of fifty centuries ago.

It is a foregone conclusion that any agency that actually promotes good medical care in a sound and effective and ethical manner deserves the unbiased appraisal and the unstinted support of the profession. It should also be a foregone conclusion that the best public relations are the good private relations that exist between physicians and between each physician and his patients. There is no more place in this country than in any other for self-congratulation on the quality of the medical care that has been developed, until the utmost has been achieved in making it available to all levels of society, in all places and at all times. In working toward this fulfillment of the traditions to which we are heir, may our Massachusetts Medical Society and our Journal knew always to the line! With this there must be no compromise.

Let me repeat again, in concluding, the words of Oliver Wendell Holmes on this same occasion, ninety-two years ago this month:

To cultivate that mutual respect of which outward courtesy is the sign, to work together, to feel together, to take counsel together for the truth, now, always, here, everywhere; for this our fathers instituted and we accept, the offices and duties of this time-honored Society.