American Proctologic Society, 1919.

PRESIDENTIAL ADDRESS.

JEROME M. LYNCH, M. D., F. A. C. S. NEW YORK CITY.

It is two years since last we met, and in that time great changes have taken place. Many of us have been in the service of our country, either here or overseas. During this period there was little opportunity for original work in our special line; but now that the war is over and peace is in the offing, it behooves us to make up for lost time, and to make every endeavor to bring about a better understanding of diseases of the alimentary canal.

It is necessary to educate the public, and this can be done only if the physician himself is a master of his subject. Specialization is important, but it is essential that one have a comprehensive sight, since he of narrow caliber is a dangerous man. The man of liberal training is a cosmopolite; the other a provincial.

It is impossible to study the alimentary canal segmentally, since all its parts are so closely related and correlated that one is apt to misinterpret symptoms by confining his interest to one segment. There is no more important problem in connection with the subject of disease than the proper interpretation of symptoms; and it is of the first importance that one should know embryology, anatomy, physiology and the other fundamentals for such interpretation.

Since, embryologically, the alimentary canal is divided into a fore and a hind gut, and since the hind gut includes about thirty inches of the ileum, which is capable of taking on the function of the colon, it is self-evident that this whole segment should be included in our special work.

We must be, not only good proctologists, but trained abdominal surgeons as well. Otherwise, how will it be possible for us to perform the most difficult operation in surgery—that for cancer of the rectum? This disease comes much more frequently under the observation of the proctologist than under that of the general surgeon. How can one justify his reputation as a specialist, unless he is equal to the task? In the past men of very slight surgical knowledge took

up proctologic work; but now the time has arrived when only men of proper training can hope for success as specialists in our line.

I trust therefore that the American Proctologie Society will take cognizance of the essentials for winning that recognition, which can be gained only by good work, well done.

SOME OBSERVATIONS ON PRURITUS ANI.

EMMET H. TERRELL, M. D. RICHMOND, VA.

A reference to the Transactions of the Society, since its organization, will show that more papers have been read on pruritus and than any other subject. It will be found, also, that these papers have been freely discussed, and many varying opinions, as to the etiology and treatment, have been brought forth. Certainly there has been no unanimity of opinion on the subject by the members of this Society, but slowly one by one, the infectious theory has been receiving its converts.

Because of the great prevalence of pruritus ani, and because its cure has been so difficult, and ofter impossible, it has a special interest to every one engaged in the practice of proctology. I have never studied a subject which was more perplexing in some of its aspects. During many years of experimentation, almost every means suggested by others, and a few original, but probably not always well-founded ideas of my own, have been tried out. It is needless to say that my history cards show many cases, "Not permanantly benefitted," but my experiences are not unlike those of the rest of you, I am sure. A mention of the many measures employed, while hoping and trusting for a solution of this perplexing problem, would be a reiteration of much that previously has been brought out at meetings of this Society.

While the greater part of my work on pruritus was of little value from the standpoint of results, from time to time certain interesting and important observations, not before mentioned, were noted. These studies have led me, I believe, to a very practical and satisfactory solution of the problem. My findings, I think you will agree, are based upon sound surgical, pathological and biological principles.

Before giving you my present views on pruritus, I wish to relate

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