American Proctologic Society, 1921.

PRESIDENTIAL ADDRESS.

Alois B. Graham, M. D., F. A. C. S. Indianapolis, ind.

I have no original proctologic research work to offer, and, as a scientific subject or case report is best presented where a full opportunity for discussion is permitted, it shall be my endeavor to direct your attention to some suggestions or matters of general interest, which, if adopted, might possibly improve the general welfare of this Society.

In reply to those who are of the opinion that there are too many medical societies, I would emphasize the fact that the American Proctologic Society needs no apology for its existence. The watchword of its charter members was "Progress", and it has withstood all storms. If nutured properly and carefully it will continue, as it has since its birth, to occupy a prominent position in medical and surgical progress, and fulfill the object for which it was organized, namely: the investigation and dissemination of knowledge relating to the anus, rectum and colon.

As to age, the American Proctologic Society has attained its majority, and with but one exception, which was in 1918 during the world war, it has held its annual session as prescribed by its constitution. Its membership of approximately fifty Fellows indicates a slow but continuous and healthy growth. A review of its scientific programs is sufficient testimony to illustrate that progress has been made, and we who enjoy the privilege of membership in this Society may well feel proud of the honor and distinction which has been conferred upon us.

Notwithstanding the fact that this Society has progressed rapidly, I would direct your attention to the possibility of over-confidence, or even indifference, on the part of the Fellows, to the possibility of a feeling of permanent secureness, and a tendency to lay back a trifle lazily on our oars, in a somewhat subconscious state, entertaining the belief that this good old craft of ours, sailing along

serenely, smoothly and unobstructed, cannot possibly drift upon hidden rocks. We must not overlook the fact that our past successful achievements cannot assure our future success and progress. The continuance of our past and present uninterrupted progressive march must necessarily imply the best efforts and work on the part of all the Fellows.

The work of the secretary of a medical organization, either small or large, is not easy. This is especially true as regards the work of this Society, since the Fellows are scattered far and wide, and all communications must necessarily be transmitted by personal letters. I cannot refrain at this time from paying tribute to the excellent, efficient and untiring efforts on the part of our present secretary, and to the work of his distinguished predecessors. All our success and progress are primarily the result of their labors and efforts, for a progressive medical society is incompatible with an inefficient secretary.

I feel secure in making the statement that all the Fellows of the American Proctologic Society are unanimous in the opinion that proctology should be maintained as a separate and distinct specialty, and that it continue to be so recognized by the medical and surgical profession. This is not an impossibility, and I would offer for your serious consideration the following suggestions or recommendations, with the sincere belief that if they are adopted the reward will be ours, and "Progress" will continue to be the watchword of this Society.

First. I would urge an increased interest and co-operation on the part of the Fellows in all the work of the Society. I should enjoy seeing co-operation on the part of every Fellow with our secretary so perfected that to secure a place on the annual program would be regarded as a distinct compliment. In other words, the secretary should not be compelled to beg for scientific contributions, or to rely upon a small number of our faithful Fellows, who have been and continue to be ever ready to respond to all requests in order that our annual program may be a successful one. It may be true that some of us cannot contribute original proctologic research work, but there is not a Fellow in this Society, I care not how limited his proctologic experience may be, who cannot present some scientific paper or case report which will prove of some interest to his hearers. If every Fellow will play the part that a membership in this Society implies, there need be no apprehension as to the future position of proctology.

Second. I would suggest that we discontinue holding our annual session just preceding the annual meeting of the American

Medical Association. Those of us who are desirous of attending both of these meetings are obliged to remain away from our private work for too long a period at one time. This, I believe, works to the detriment of this Society and the section on gastroenterology and proctology, in the success of which all of us are interested. A two, or even three days' session in the fall of the year, held in some city where one or more of our Fellows reside, would prove much more satisfactory, and the attendance would be larger than we now enjoy. This Society, I believe, is the only one, having representation or a section in the A. M. A. which holds its annual session at this time, and I would urge that the Fellows give this question of changing the date of our annual session grave thought and serious consideration. It will mean an increased progress on the part of this Society, as well as better work in the section of the A. M. A.

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Third. Dr. Collier F. Martin, in his presidential address, suggested that the clinical session be made a part of our scientific program. I wish to urge the adoption of this suggestion. The Fellows, who were so fortunate as to be present at the annual meeting in 1920, can testify that the clinical session, all the credit for the success of which is due Dr. John Jelks, added greatly to the interest and attractiveness of the meeting, and the recommendation was unanimous that there be an annual repetition, if possible, of this most satisfactory and successful session.

Fourth. I would recommend that the membership of this Society be increased. This will necessitate an amendment to Section 6 of the By-Laws, which limits the number of Honorary, Active and Associate Fellows. There are not a few members of the medical profession who are doing most creditable proctologic work, and if their names were on the roster of this Society I am confident it would furnish an impetus for more efficient work on the part of all the Fellows. The larger the membership of this Society the greater its usefulness to the medical profession, and the more efficient will be its work in the investigation and dissemination of proctologic knowledge. It is possible for the American Proctologic Society to become a most powerful organization, and one whose influence and work will and should command the recognition and endorsement of the entire medical profession. From these remarks I would not have you infer that the past work of this Society has not been of the highest type, for it has, but I do believe that we are capable of greater efforts, and an increased membership would be an asset rather than a liability.

Fifth. I would urge an increased interest and attendance of the Fellows at the A. M. A. section on Gastro-enterology and Proctology. It was only after long and persistent efforts on the part of a small number of the Fellows that the recognition of proctology by the A. M. A. was secured. This was a notable achievement, and now that success has crowned our efforts, and another avenue for the advancement of proctology has been opened, it is only proper that every Fellow of this Society give his best efforts and assist in making it one of the best, if not the best, section in the A. M. A. Such is a possibility, and to attain that position implies the earnest endeavor of each and every one of us.

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Sixth. It is particularly important that there should be an increased understanding of early cancer and the conditions which suggest cancer. Since patients are coming to surgeons in increased numbers, it is most important that the proper method of dealing with them should be standardized. The American Society for the Control of Cancer, of which every Fellow of this Society should be a member, is asking the various societies throughout the land to devote at least one meeting during the year to the cancer problem, or at least a portion of the annual meeting, if a society holds one meeting in the year. This important subject merits our most serious consideration, and I would recommend that the annual program of this Society contain at least one, or even more papers devoted to the subject of cancer.

Seventh. I would suggest for your further consideration the advisability of having a committee of not more than three Fellows, appointed annually, to cooperate with and assist the secretary in making up the annual scientific program. Such a committee, I believe, would prove of valuable assistance to our secretary, and relieve him somewhat of the excess burdens he has so willingly carried in the past. I would further suggest that this committee, cooperating with the secretary, in addition to formulating the annual program, select two leaders in discussion for each paper that is presented. Fellows should be required to furnish abstracts of their papers sufficiently early, in order that they may appear in the preliminary program. This plan will not only assure a discussion of every paper that is presented, but it cannot fail to bring forth more learned and satisfactory discussions, and there will be no excuse for wandering from the subject as presented. This plan is followed by the majority of special medical societies, and by all the sections in the A. M. A. It is true that it will mean increased efforts and work

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unsideration the a three Fellows, he secretary in a committee, I secretary, and as so willingly s committee, coling the annual paper that is stracts of their war in the prea discussion of ang forth more tio excuse for is followed by the sections in Forts and work

for some of the Fellows, yet I am firm in my conviction that it merits a trial by this Society.

These suggestions, or recommendations, may not appeal to some of the Fellows, yet all of them are worthy of your consideration and if adopted would, I believe, prove beneficial to the welfare of this Society. Changes in these recommendations are possible and may be made in any one or all of them. All that I would ask is that we ever remember the watchword of our charter members, namely, "Progress," and that we lose no opportunity for advancing proctology and maintaining for this recognized specialty a prominent position in medicine and surgery. As previously stated, the American Proctologic Society needs no apology for its existence. Its work is beyond criticism, and with our arrow pointed in the right direction, I can see only continued progress and future success if we but do the work of which all the Fellows are capable.

In conclusion, I wish to express my sincere appreciation for the honor you conferred upon me when you elected me to the highest position this Society affords. This is an honor of which any man may well feel proud, and your hearty co-operation with me the past year has been the source of the greatest pleasure and satisfaction. The twelve years that I have been associated with you have been a liberal education, and your many favors have not been unappreciated, I assure you. My annual pilgrimages to the meetings of the American Proctologic Society, have been a source of much happiness and pleasure. I count all the Fellows of this Society my good friends, and for what more could a man wish?

POSTGRADUATE TEACHING OF PROCTOLOGY.

Collier F. Martin, M. D. PHILADELPHIA, PA.

For thirty years past, there has been a great increase in the requirements of undergraduate medical education. Previous to this, medical education seems to have been a matter of chance or opportunity.

From a two winters' attendance of medical lectures, reinforced by some practical experience under the guidance of a medical preceptor, the subject has become so complex that in certain of our better institutions a bachelor's degree is required before a student may matriculate in medicine. In conjunction with the academic studies