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PRESIDENTIAL ADDRESS

PROCTOLOGY

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BUFFALO, N. Y.

Former Presidents with profound interest in this Society have emphasized the need of more competent proctologists throughout the country. They have deplored the fact that the teaching of proctology in many undergraduate medical schools is still neglected and that proctology as a specialty has not received from hospital staffs the recognition it deserves.

Graduates of the majority of the medical schools come to our hospitals as internes entirely ignorant of how to make a rectal examination, of what they see when they do try to make one and of the great amount of pathology to be found.

Postgraduate courses in proctology are always well attended, papers on proctologic subjects are in demand by medical societies and the discussions which follow indicate the need for more and better education along this line.

Dr. Jackson has pointed out the crying need of proctologists in cities of 50,000 population and upwards, of which there are so many throughout the United States and Canada.

Many constructive recommendations have been made, and that good has resulted therefrom is evidenced by the recognition proctology has already gained and is still gaining. However, much remains to be done.

A certain measure of responsibility in this matter falls upon this Society, exerting the mass influence such as every organization of standing does. The Society, however, must have the support and look to the work of its individual members through whom direct contact is made with the public, the profession, colleges, hospitals, other medical societies and the physicians who expect and want to enter the specialty.

"How can I enter the specialty of Proctology?" is a question every proctologist has been asked. In answering this the proctologist must have in mind the all-important question: How are only desirable candidates for the specialty to be created? for without doubt, it is by having

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in our specialty and in our Society only the highest type of men possible that we can hope for the further recognition desired.

We cannot expect to get teaching appointments and positions on the staffs of hospitals until there are:

First—A demand on the part of the public for better diagnosis and care of the lower bowel.

Secondly—More proctologists with proper training and qualifications to whom they can go with confidence for relief.

We are all aware of the great number of patients who are suffering, and have suffered for years, from rectal diseases, afraid to have anything done because of the reported and actual indifferent-to-bad results obtained by those inexperienced and unqualified to do such work. Nothing will allay their fears and induce these same patients to seek relief more quickly than knowledge of the fact that there is for them treatment, honest and effectual, with assurance of cure, by trained men. Nothing advertises this fact more than careful, thorough examination followed by treatment and after-care as nearly painless as possible, such as members of this Society are able to render. This practical education of the public creates a demand for the proctologist.

It is not many years ago when otolaryngologists were few indeed, but excellent work by them, fostered by their associations, has created on the part of the public a demand for their skill to the great benefit of the patient and the furtherance and efficiency of a worthy specialty.

Our concern, therefore, is the creation of proctologists of quality rather than quantity and of quantity only when that quantity can be of the best quality.

The standard of proctologic work cannot be kept too high. Every member of this Society has a share in maintaining this ideal and in seeing to it that entrants into the field are imbued with the same spirit. How can this ideal be attained? "How can the young man enter the specialty of proctology?" We all have ideas in this matter, and I am giving you mine for what they are worth.

The man who essays to enter the specialty should be willing to devote sufficient time for thorough preparation. He who enters it late in life is apt to feel that he cannot devote the time necessary for preparation, consequently, I believe we are going to get better material if decision is made to enter the specialty and training begun by the graduate when he leaves college, or soon thereafter.

If the interne in the hospital decides that he wishes to specialize he should then and there begin study along this special line, with no thought

of devoting his whole time to it, however, until he has been in the general practice of medicine, or surgery, or both, for sufficient time to give him a broad view of the diagnosis and treatment of the diseased conditions to which man is heir. In this way he can better appreciate the relationship of proctology to the whole scheme of disease, which knowledge will stand him in good stead when he decides to limit his practice to proctology. He is then ready to begin the real preparation for this life-work. This cannot be accomplished by spending a few weeks taking a clinical course in any one or several of the postgraduate clinics. It must be systematic, thorough and under good teachers. Courses in embryology, anatomy with repeated dissections of the whole abdomen, the physiology, histology and pathology of the whole intestinal tract at least, should be undertaken.

I am of the opinion that the courses mentioned can be arranged in most cities where there are medical schools and proctologists, not always, of course, under the same roof. Even facilities for research work, under proper guidance, can always be arranged in medical schools. While these courses are in progress he should associate himself with some proctologist who has a large dispensary service where he can see and make numerous examinations to perfect himself in diagnosis and nonsurgical treatment. Then, if this association permits assistantship in the surgical clinic, there is developed that confidence necessary to carry on when he is put upon his own resources. In fact this surgical training is absolutely necessary. It would seem that two years at least should be devoted to such preparation.

From among our hospital internes we are often able to find and observe the qualifications of one from another city, where there is no proctologist but where there is need of one, who would like to return to his native city to practice, with the intention in due time of confining his practice entirely to proctology. This man should receive our utmost encouragement and help while in the hospital. Then, when the proper time arrives, if he is willing to undertake intensive study as outlined, other things being equal, he should succeed, and we, by our encouragement and teaching have helped to establish proctology and fill a community's need.

I believe also that a good working knowledge of urology and gynecology, so closely related to proctology, is essential for success in the latter.

Knowledge of the subject, as complete as possible, is required to give one the confidence and skill necessary to practice a specialty. This

is acquired only through long and arduous study and training and no one has a right to pose as a specialist without it.

Successful practice of a specialty means continuous postgraduate study, ways and means of which are so varied that it would be presumption on my part to attempt to mention all. A few thoughts along this line, however, may not be out of place. Although postgraduate work in sister clinics is valuable, doubtless we often fail to realize the opportunities afforded by our local hospital and schools.

The pathologist of the institution, if progressive, is always willing and glad to co-operate and lend a helping hand in the study of our problems. With such help and the use of the material from our own cases a fund of valuable knowledge is accumulated.

Attendance at the autopsy table offers another constant source of education. What can be more instructive than a study of the records and specimens in unsuspected cases of diverticulosis, multiple polyposis, cancer, ulceration, colitis, dermoid, etc.? Such a course we can arrange and pursue to a great extent as a part of our routine daily labors. Thus lively interest is maintained.

A collection of photographs, illustrations, diagrams, X-ray pictures, pathologic slides and lantern slides, made of all interesting and unusual things seen in our practice, add much to our own knowledge, besides giving us permanent records and valuable material for papers and discussions.

Much stimulation in one's work is gained from visits to brother proctologists in their own clinics, and the benefits derived are greatly enhanced when several make the visits at the same time. In these small, intimate clinics, with mutual problems, there need be no reservation in the discussion of difficulties and mistakes or the launching of new ideas. May I suggest that, among ourselves during the coming year, we arrange such pilgrimages. Thus will new and closer friendships be formed and our proctologic education greatly broadened.

The late Dr. Murray said: "Since medical colleges do not, we must, educate the medical profession." This is still necessary.

Now there arises the question: "How can we keep proctology before the profession?" Members of our Society, leaders in proctology, should always be prepared and willing to give clinics or read scientific papers before other medical societies. Such opportunities come unsolicited to the properly trained and equipped proctologist. For success the speaker must know the make-up of the audience before which he is to speak and select a subject which will hold the interest and convey a message to all.

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The subject chosen may seem old, threadbare and commonplace to the proctologist, yet if he handles it clearly and logically with terse and practical suggestions in diagnosis and treatment an interest will certainly be created.

Papers dealing with conditions daily confronting the general practitioner, or with the relation of rectal diseases to diseases and symptoms elsewhere in the body, are of special interest. Papers on diagnosis are always timely, for how often have you seen an operation for hemorrhoids performed when there was a cancer only a few inches higher, an operation for internal hemorrhoids where only a few skin tags were clipped off, or an operation for fissure done and the infected anal pocket and valve above, causing it, left behind?

One such paper brings requests for others and soon the educational work is under way.

Often in the preparation of such a paper I have submitted it to a member of our society for criticism and suggestions and have been most grateful for his point of view. Most of us, not having about us assistants trained in this work and having to depend upon ourselves, appreciate this helpful service.

In order to create a widespread interest in proctology among the profession it must be brought to their attention from every possible angle, and I believe that one very excellent way would be for this Society to offer an annual prize, of perhaps \$100.00, to the senior medical student or hospital interne producing the best contribution of original work along some proctologic line. Every letter regarding this sent to the Dean of a medical college, if it did nothing more, would call attention to proctology and the Society fostering it. In such correspondence might be mentioned the number of medical schools in the United States giving a course in proctology and the number which do not. It might also be stated, as you have all observed, that the internes from the latter schools, who are in hospitals where there is a proctologic service, express regrets at having received little or no instruction in this important subject and that the prize is given to stimulate young men to a greater interest in the subject.

The details of the administration might be left to the Executive Council, or to the President to appoint a special committee to take charge of it. It would mean considerable correspondence, but the extra work would be well worthwhile.

If my suggestion meets with the approval of the Society I should like the privilege of donating the first hundred dollars, in order to launch this at the earliest date possible.

"Some Thoughts in the Teaching of Proctology" is the subject chosen by Dr. Pennington and I am sure he will give us most valuable information.

The keynote of success in teaching a subject is: knowing your subject, knowing how to teach it and knowing exactly what is to be taught and the time in which one has to teach it.

Proctology, as taught in undergraduate medical schools, should endeavor only to perfect a general medical education, giving the graduate a practical knowledge of the subject.

In order to identify such a course it has occurred to me that it might be well for this Society to outline a curriculum which might serve as a guide to schools already teaching proctology and be something tangible to offer where an effort was being made to introduce it.

Members of a Society get out of it exactly what they put into it. The real character of our annual meeting is a reflection of the interest shown by each member. All of you are interested, as evidenced by your presence here to-day, and your officers hope that your interest will increase as the program progresses. While the merits and shortcomings of this meeting are still fresh in your minds is the time to begin work on the program for 1927. May I bespeak for the incoming officers, who I believe will appreciate it, your assistance, and accordingly I would urge that, before the close of this meeting, each one of you write, sign and hand to the Secretary any suggestions you have for improving the next program.

The recommendations which I have made have been an honest effort to promote the interests of proctology and this Society and are presented to you for your consideration. Whether or not you adopt them I trust that some good may result therefrom.

In conclusion let me assure you that I appreciate the honour of having been chosen as your president. At the same time I have felt the deep responsibility which the office entailed. Whatever success may attend this Annual Meeting must be attributed to the splendid co-operation of our efficient Secretary, other members of the Executive Council and to all others who will take an active interest in the program. Lastly we are greatly indebted and thankful to Dr. Graham and his associates for the splendid arrangements they have made for us in Indianapolis.

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