THE PRESIDENT’S ADDRESS

Dr. Cogill: Dr. Doolittle served most acceptably in an internship in the West Philadelphia Hospital, and I regretted very much that she left us when she took the work of her choice in China.

Dr. Potter referred to Dr. Alice Smith Baker being in this country and to the possibility of obtaining data from her concerning Dr. Doolittle.

Dr. Buchanan asked Dr. Potter to make such inquiry and to report to the Committee on Necrology.

REPORT OF THE COMMITTEE ON ENTERTAINMENT

As no one is having banquets this year, we have arranged for a patriotic rally for this evening. Dr. Edward P. Davis will present the home volunteer work. Captain Curran, of the British Medical Service, who has been a prisoner in Germany, will address us. There will be a buffet luncheon at the close of the meeting.

Alice H. Cook.

The President: It has been thought to be a good plan to adopt the wearing of a badge, with our name and class year indicated on it. Such a plan has been followed at college commencements, and I think it is a good scheme. We need to encourage college and class spirit. When Dr. Macfarlane started the Graduate Council, I think she had some scheme of reunions in mind. While we could not have a reunion of every class, we might easily have such reunions in the fifth, tenth or multiple years of our graduation. I was at the Commencement at Lehigh, and men of many years’ graduation seemed to have as much class spirit as the young fellows; in fact more, for they were not bothered about examinations. Let us remember that we all belong to the Woman’s Medical College, have these five- and ten-year reunions, and see which class can have the largest attendance. Dr. Vera F. Bary is with us, and I am going to ask if she will not say a few words to us. Dr. Bary is of the class of 1878, and in the forty years she has missed attending the Alumnae meetings but three times.

After Dr. Bary had greeted the Association, a short recess was taken to purchase the badges described by Dr. Buchanan.

Dr. Mary S. Rupert, Vice-President, took the Chair and Dr. Buchanan presented the President’s Address:

The President’s Address

“The woman’s hour has struck!” So said Mrs. Catt in her address at the National Suffrage Association meeting in 1916,
and since the entrance of the United States into the World War it is striking louder and louder. In medicine she is coming into her own. Her brothers in the National Committee of Medical Defense are still holding up their hands in horror at the thought of women treating men, and are withholding the titles and privileges that the M. R. C. gives to the men. So far our American women M.D.'s have only been allowed to serve in the reconstruction and civilian work, but as the cry increases for more and more doctors at the front it is probable that women will be called there as well as to other branches of national service. It is hard, when we all want to help, to be told by Uncle Sam that all he can do for us women doctors is to give us the right to cable free of charge. It was left to France to be gallant enough to accept the unit that Dr. Finley strove to raise and to bestow the rank of Captain and Lieutenant upon the women who gave up their practices and the comforts of safe American homes; and, although it is humiliating to admit it, with all the billions raised by Liberty Loans, these women's salaries are paid by women of the Woman's Suffrage Association. We felt last summer, when Dr. Rosalie Morton was appointed Chairman of the Woman’s Committee, General Medical Board, on the Council of National Defense, and picked a half-dozen other women from various parts of the country to serve with her, that before this women would be on the same footing as men in the M. R. C.; but alas! a year has passed and despite the time, money and energy these women have spent going to Washington, Dr. Franklin H. Martin and his male committee are still keeping them at arm’s length with words and arguments. It is enough to make any but Dr. Morton and Dr. Purnell give up in disgust; but those men don’t know the personnel of that committee. However, Dr. Purnell is going to tell us all about it, and I do not want to “steal her thunder.”

The work of our English sisters should not be passed without mention, and, although it is known to most of us, it will bear repetition. John Bull was as deaf as Uncle Sam to the striking of the woman’s hour, and when the Women’s Hospital Corps, raised and financed by British medical women, offered its services, Lord Kitchener swore and said, “He’d have none of them for his soldiers,” so they offered themselves to France, and the latter accepted them. They established themselves in what had been Claridge’s Hotel, in Paris. Rumors reached the War Department that English women were running a hospital in France, and some Tommies had fallen into their clutches. Sir Alfred Keogh was sent to investigate, and asked “Miss” Anderson to show him around.
"Certainly, but it's Dr. Anderson!"

Twice again he "Missed" her, and she corrected him. However, he was evidently impressed, for he said:

"This is quite remarkable, quite remarkable, don't you know."

Afterward he talked to the Tommies themselves, and was told that the word was out in all the trenches that the Woman's Hospital was the place to go when you were wounded. "The Woman's Hospital was all right, quite all right."

"Extraordinary, most extraordinary," he murmured, and carried back the report, commenting: "Incredible as it may seem, gentlemen, it must be so."

"It appears, then," said Lord Kitchener, "that these women surgeons are too good to be wasted on France."

So the War Office invited them back to London and unfurled the British flag over Endel Street Hospital, completely staffed by women.

The Major Anderson mentioned above, who conquered even Kitchener himself, was the daughter of Dr. Elizabeth Garrett Anderson, who was the pioneer woman physician in England. She came to London in 1860 and was turned down again and again when she tried to matriculate at a medical college.

One man asked her, "Why not become a nurse?"

"Because I mean to earn an income of £1000 a year instead of £40."

At last one kindly old doctor took her into his office and let her into the lectures at Middlesex Hospital, with the agreement that she should dress like a nurse and not look intelligent. Even at that she had to go to Paris to get her degree in 1871.

Mabel Potter Daggett, to whom I am indebted for these facts, in her article on "Woman's Progress in the Professions," says of Dr. Anderson: "She came through the days when it was only in zenaia practice in India that English women doctors had a free field. Russia, too, dedicated her pioneer medical women to the heathen." It must have been a vision of the promised land that the dear old lady had when in her eightieth year she heard of the great war hospital entirely run by women.

These aren't the only English women who saw active military service. There are at least twelve Scottish women's hospitals scattered through the war zone and in Serbia as well. Only last February we heard of the heroic march of Dr. Elsie Inglis, who personally led her eight thousand Serbian patients through the dangerous war zone on the Eastern Front, had them transported to England, and then as the vessel entered an English port, in sight of friends, she died a martyr to duty. It was a happy thought of Miss Plumer, chairman of the Woman's Hospital drive, to
dedicate the money returned the day the report came to America as a memorial to her, and to erect a brass plate in the Woman's Hospital commemorating her heroic deed and death.

At the beginning of the war the Scottish women's hospitals made several records for themselves. Their Calais hospital, under Dr. Alice Hutchison, had the lowest mortality record for enteric fever; that at Troyes, under Dr. Louise McElroy, was so good that it was ordered to Salonika to be regularly attached to the French army. The one at Royamont, under Dr. Francis Ivins, was entrusted only with *petits blesses* (fingers and toes), but in two months the War Office asked to have the hospital capacity increased from one hundred to four hundred beds and the medical department was ordered to send to the Dames du Royamont only the "*grand blesses*."

The chief of the Serbian medical command said of the four Scottish hospitals of the Serbian Army: "As regards power of endurance, they were equal to the Serbian soldiers; as regards morale, nobody was equal to them. In Albania I learned that the capacity of the ordinary English woman for work and suffering is greater than anything we ever knew before about women."

When one of the Scottish hospitals was sent to Malta to assist the British army there, where the wounded were coming from Gallipoli, they were so useful that it was decided that the Malta Military Hospital could not do without the woman doctor, and they sent to London for sixty of her. Then the War Office, after hearing this report, asked for eighty more for other military hospitals. By January, 1915, professional posts for women doctors were offered at the rate of four or five a day. They had not graduated enough to meet the demand.

Seven great London hospitals have women on their staff; five of these are entirely staffed by women.

We hear less of the French woman doctor in war, but one must be mentioned, Dr. Nicoli Gerard-Mangin. She got her commission by omitting her first name and was assigned to the front. She arrived at the same moment as a thousand wounded, and as there were only five doctors within call she was invited to take off her hat and stay awhile, and her case would be investigated. She got busy, and when the investigator came, three months later, he found she had performed six hundred operations without a single death. At Verdun she had to improvise a hospital with nothing but barracks and beds—no doctors, no nurses, no utensils, no heat. For six weeks she worked without having her clothes off. One of her feet froze and she had to limp around, but in her two years' service at the front she never had a day off for illness.
and never an hour’s absence from her post of duty. She is the only surgeon with the French army with such a record. She is now chief of the Hôpital Militaire Edith Cavell in Paris. "Madame la Petit Major" is the title the French soldiers give her, and she ranks as Major.

Dr. Martha Francillon-Lobre commands a military hospital in Paris, and in Lyons, Dr. Thyss-Monod is chief of a military hospital. Dr. Monod was nursing a new baby when she was called to military service.

Are we American medical women less capable, less patriotic, less self-sacrificing than they? No! Emphatically no! One of our own alumnae, Lillian Stevenson, was one of the first with the American Ambulance in Paris. Rosalie S. Morton went over to Serbia and came back to organize and head the American women’s hospitals. Dr. Mary Crawford, of Cornell; Dr. Esther Lovejoy and others had had experience at the front before we entered the war.

Last August, Dr. Tallant and Dr. Maude Kelly went over with the Smith College unit for reconstruction work. Some of you probably had the pleasure of hearing from Dr. Tallant's own lips their experience over there, and she promised to give us a paper at this meeting, but instead she sailed back in May to head the hospital that Miss Anne Morgan is going to build for children, under the auspices of the American Women’s Hospitals. Dr. Kelly could not wait a month to get back. She settled up her affairs and departed in a week. Her social work at Barton and her French convent education eminently fitted her for work among the bereft peasants. One of Dr. Tallant’s obstetrical cases there showed what we could do if given a chance. The patient had uremic symptoms and it was necessary to induce labor. The British military surgeon in charge of the district had the case reported to him and said she would have to go to a hospital—it could not be done in such surroundings—one room, dirt floor, no conveniences; but the nearest hospital was twenty-two miles away, over a shell-torn road and a truck the only ambulance. So, after consultation with a brother officer, he called Dr. Tallant outside, and said: "Little woman, what’s to be done? It’s impossible to get her to a hospital. Is there anything I can do?" Calmly, Dr. Tallant asked him to anesthetize the patient, and in an hour she was delivered. The surgeon remarked that "he had heard of Yankee quickness, but he had never seen such evidence of it before.”

Dr. Mary Lapham, 1900, was sent by the Rockefeller Institute to take charge of tuberculosis work over there. Drs. Mabel
Bancroft, Marianna Taylor, Marie Formad, Laura Hunt, Mary Getty, Regina Downey, Jessie Weston Fisher are all W. M. C. alumnæ in France. Dr. Purnell will doubtless tell of many more.

"Over here" our medical women are vying with their lay sisters in war-work. The withdrawal of many men from practice here leaves much more for our women to do, and we are conscientiously turning over the proportion of fees agreed upon to the wives of our absent colleagues.

Some of the hospitals, too conservative before, are now asking for women clinicians. I was told that even old Pennsylvania would welcome women in some departments. Jefferson offered the directorship of its laboratory to our own Berta Meine. Dr. Harriett Hartley is head of the Department of Child Hygiene. The cry is now not for positions for women in medicine, but medical women for positions. Quite a number of our women doctors are touring the country under the auspices of the Y. W. C. A., lecturing to women and girls in the neighborhood of cantonments—Mary Noble, Caroline Croasdale, Esther Jefferis and Alice Purvis Robie among them.

Any number of us have given emergency aid and first-aid lectures to eager listeners. Dr. Hanna Kindbom has had several classes this past winter of young society women, to whom she not only gave lectures in nursing and dietetics, but for whom she arranged practical nursing work at the College Hospital, both the students and the hospital profiting thereby.

As to the women interns, it is their turn to pick and choose hospitals at present. Bellevue welcomed Drs. Mantow and Bauman when the New York Infirmary closed its doors this spring and the College bulletin board is full of notices of interns wanted. Some are even offering salaries to secure them.

The conservative colleges are admitting women to their medical courses, even Harvard (stipulating only for the period of the war), and, last, McGill University, of Canada, have admitted women to the study of medicine and dentistry. Young college women are responding to the call to study medicine, but often with slim purses to back them. Eight have applied to our College for scholarships and only one is available. When they ask bread, shall we give them a stone? We need students and they need us. Cannot we guarantee some of them the tuition fees? The war-chest is calling, it is true; but charity begins at home, and nobody can realize the need of more medical women in this country better than we who are actually engaged in the practice of medicine. The boys in khaki are splendid fellows, and Uncle Sam will see that they are taken care of, but Sister Susie must be trained not
only to sew shirts and knit socks for soldiers, but to heal their wounds as well.

We need successors. We have the confidence of the community. The trail has been blazed for the woman doctor. Shall we allow it to be lost because there are none to "carry on?"

The Dove of Peace has had a hard time of it in the last four years, but it really looks as if he had found a haven on North College Avenue. The two hospitals, which were so near and yet so far apart, are getting together in a way that was deemed impossible even a year ago. The new Venereal Ward is shared by both. The laboratories will be. The heating plant may be. The clinical material at the Woman's Hospital is to be used by our students, not on the sly, but on schedule. Dr. Jones has been giving Ward Classes this past year in the Children's Ward of the Woman's Hospital. At the recent campaign of the Woman's Hospital, through the enterprise of Dr. Cogill, two scholarships in the College were offered as prizes for the applicants bringing in the largest amount. The Dean, the Medical Director of the College Hospital and most of the doctors on the auxiliary faculty of the College worked with a will to help them "go over the top." It seems as if these hospitals are learning, with the rest of the world, that cooperation and not competition is the watchword with which to win.

The President resumed the Chair and Dr. Eleanor C. Jones presented a report on the "Baby Saving Campaign of 1918."

DR. JONES: The slogan adopted by the Children's Bureau of the U. S. Department of Labor, of which Julia Lathrop is head, and the Children's Welfare Department of the Woman's Department of the Council of National Defense is "save 100,000 babies!" The "Children's Year" in the United States began on April 6, 1918, and ends April 6, 1919. It began on the anniversary of the declaration of war by the United States! The great war has stimulated human endeavor, both in this country and abroad, to find a solution for the problems of the falling birth-rate and the high rate of infant mortality. Every one feels, as never before, that the true wealth of the nation is in the child, and that the child is our primary national asset, and that the health of the child is the only sure foundation on which the nation can be built. If the health of the child be imperilled, we build upon sand. The same concern for the welfare of the child comes from France and other warring nations. England waited until the second year of the war before she began an intensive campaign for child welfare and the reduction of infant mortality. The