I promised to give you a few thoughts on Pelvic Inflammation.

There are four classes of pelvic inflammation to be considered,—so-called chronic metritis, pelvic metritis, parametritis, and salpingo-ovaritis. You have all passed over this subject in your text-books,—tell me what is chronic metritis? It is a chronic inflammation of the mucous membrane of the uterus,—what is your definition? ("Chronic inflammation of the mucous membrane of the uterus.") What is yours? ("Subinvolution causing inflammation of the uterine body.") It is an inflammatory process is it? ("Yes.") What are the symptoms of chronic metritis? ("Pelvic pain, inflammation and tenderness of the uterus.") What else? ("There will probably be an endometritis associated with it.") That is correct,—those are the prominent symptoms—there is another symptom—enlargement. Those are the three symptoms of so-called chronic metritis, and there is often endometritis associated with it... What are the pathological conditions of chronic metritis? ("There is an increase of connective tissue.") Yes,—what about the bloodvessels? ("They would be enlarged.") Yes,—and that is about all there is of it. What are the symptoms as regards the uterus? The local symptoms are pain—not sharp pain, but dull, aching, persistent pain, enlargement, a tenderness on pressure; and the pathological changes are, an increase of connective tissue, and an enlargement of the bloodvessels. There must be also some pathological changes in the nerves,—what are they? They are abnormally sensitive; there is also a thickened condition of the endometrium. The important thing about chronic metritis is,
that it is not an inflammation; it is regarded as entirely different from all inflammations of the pelvis,—it is not an inflammation; it is a name which is not appropriate to the disease. Dr. Chapman, of Brooklyn called attention to this fact thirty years ago. Dr. E.R. Peas-ly, of the Bellevue Hospital, one of the brightest gynecologists of modern times has studied the subject in a thorough and scientific way; he knew more than any other one man in the whole medical profession of his time, about the science of medicine, for he had taught every branch of medicine. At that time they didn't know much about osteology and pathology, but he knew what they were, and he had become thoroughly convinced that there is no such thing as inflammation in chronic metritis. Dr. Champman was the first to call attention to this,—he was Professor in the Brooklyn Medical College. Professor B.... of Germany, an eminent authority has taken his stand upon the same doctrine. Later, Dr. Thomas took the same position; he said it was uterine (?) hyperplasia,—that is, an increase of connective tissue. That is one pathological condition present.

STUDENT: Increase of connective tissue is classed under "Inflammations."

A. It is one of the consequences of inflammation, but not an inflammation. We may have an increase of connective tissue without inflammation, and we may have a decrease of connective tissue without inflammation. There is no inflammation, but an increase of connective tissue. Now the authorities on this subject are entirely at discord; there is no consensus of opinion upon the question of this hyperplasia, or so-called chronic metritis, but my view of the matter is, that it is largely due to incorrect dress, to start with, because we find in women
even in women who have borne children, that this trouble is commonly
due to constriction making a compression of the pelvic viscera so that
there is stagnation, and we have hyperplasia as the result of this cause.
The same thing results from hemorrhoids. In many cases, this hemorrhoidal-
state of the rectum is a hyperplasia—a great thickening of the
tissues and increase in the size of the blood-vessels. This condition
is similar to what we find in the uterus in so-called chronic metritis
in women. In men we find the same thing in the prostate,—in men whose
bowels have been constipated, and who have been addicted to pepper, pepper
sauce and similar articles, and also men who are addicted to sexual
excesses. This condition is most common in men of fifty to sixty years
of age, especially those who have been gross men. Similar conditions
will bring about the same thing in the uterus. The prostate in man
is the organ that most nearly corresponds with the uterus in women, and
the conditions which result in hyperplasia in men will result in the same
thing in women, through stagnation of the blood which interferes with
the portal circulation.

Another cause of this condition is the sitting position of the
patient which produces chronic prostatitis or hyperplasia of the pros-
tate,—it has been recognized that sitting is a cause of this trouble—for instance in cavalrymen, men who occupy a sitting position a great
deal, as judges and business men who sit much at their desks and books—
such persons suffer most from this trouble. I believe this is one of the
causes of this trouble in women also. I don't know that any one else has
called attention to this fact, so I can't quote you any authority. The
habit of sitting is so common in women, that most of those who come under
treatment have this trouble; and a large share of the men who have this
trouble are sedentary men. The sitting habit with women is
so common that it would be very difficult to get absolute scientific proof that the sitting position is responsible for this trouble, nevertheless I believe that there is good reason for supposing that it is—not simply a sitting position but a wrong sitting position,—a relaxed sitting position. The effect of this you will see at once, is, to lower the intra-abdominal tension. Can you tell me why it is that a relaxed sitting position lowers the abdominal tension? ("The respiration is interfered with, and the circulation is not so good as it should be, and there is passive congestion; besides the organs press down upon the uterus, causing a displacement.") Is there anything more to be said about that? ("Only the relaxed abdominal muscles.") Yes. That is done by approximating the sternum to the pubes, bringing them clear together, and as this is done, the muscles are relaxed. Put the patient in this position, and let the patient draw up the chest, and at once you will see a bulging of the abdomen. There is then no intra-abdominal pressure, because the walls are perfectly flabby, so there is no pressure there at all. But when the chest is raised, the abdominal walls are taut and tense, and then there is an intra-abdominal pressure, and the consequence of this pressure is that the walls of the blood-vessels are supported by the pressure, and that diminishes their caliber. As soon as this pressure is taken off, the blood runs into the abdomen. When people sit in this relaxed position their brains get cloudy, and they cannot think. The blood is running out of the brain down into the abdomen, and this large accumulation of blood into the abdomen must have the effect to increase proliferation of tissue. What is the effect of this accumulation of blood on leucocytosis? ("Do you mean local leucocytosis?") Yes,—local leucocytosis—on the migration of cells, we will say. ("I think it will decrease it.") Suppose you make an application
of any kind that brings the blood to a part,—what is the effect upon leucocytosis? ("It increases local leucocytosis.") That is the benefit of these hot and cold applications, and of the heating compresses,—that is therefore we make these applications; that is the reason we make these applications to the chest in pneumonia, this is the most effective way of combating the morbid processes taking place in the part.

Q. If it is active hyperemia, and we have fermentations, they would be increased there, but is there not a diminution of them in passive congestion?

A. Suppose we had a string round the finger,—would there be an increase of leucocytosis? ("No.") Why? ("There is no access to the bloodmaking organs; the blood is shut up and the oxygen is shut off; the vital portions of the body are shut away and inhibited, and the vitality is lowered.") If the interference with the movement of the blood were so great as to produce an accumulation of CO₂ so as to paralyze the blood cells, that would be true; but suppose there was only a partial interference, so that the movement of the blood was slow, and at the same time, if it was freshened up sufficiently to keep the cells active,—there would still be an increase of leucocytes would there not? ("In pneumonia there is a passive congestion; but a fermentation induces an active hyperemia, and that increases the movement of blood, and that is what brings the leucocytes.") Suppose we get away from theory and come to facts. Of course we might theorize, and we might come to wrong conclusions. Now take the "rum-blossom,—" is that an active or a passive congestion? ("Passive.") It must be so, because the alcohol paralyzes the peripheral vessels, and yet the nose grows and gets too big for the rest of the face. Here is a cardiac disease, or some kind of heart disease which interferes with the function of
circulation causing the blood to be forced back into the vena cava, --what is the effect upon the internal organs? ("Passive congestion.") Do you have any special form of liver trouble connected with certain forms of heart trouble? ("Yes.") What? (Different answers.) . . . . What causes change of liver, --what is the first step in cirrhosis of the liver? ("Infiltration of the cells.") You have leucocytes increased, and an increase of connective tissue; afterwards you have a contraction of connective tissue, --and that is the way you get it (cirrhosis of the liver?) Where do the leucocytes come from? ("The blood.") Yes, --sometimes in one form and sometimes another, --but the white cells have power to build tissue . ; probably all the white cells have power to proliferate the cell the tissues . . . It is true that while there is passive congestion there is infiltration of the tissues of the white cells. I believe this also applies to the uterus.

There is another thing, --there is an infiltration of the uterus with connective tissue --what would be the effect upon the muscular structures of the uterus? ("It would make them larger.".) Do you think it would increase the muscular activity? ("I think it would decrease it.") Yes. The compression is so vigorous that often in so-called hyperplasia or chronic inflammation it feels almost as hard as a stone from the large amount of connective tissue in it . . . The muscles have ordinary function of their own rhythmic contractions, and thus promote the movement of the blood through the organ. Here is a reason why hyperplasia would facilitate the dilatation of the vessels, and then the hyperplasia would lead to passive congestion. Now in making an ocular examination of the uterus with the speculum, --the uterus being the subject of the hyperplasia --it has nearly always a bluish look; it is in a state of passive congestion.
That is generally recognized as one of the symptoms of chronic congestion. In that condition, the glandular functions must be interfered with, and this gives rise to catarrh, so there is an increased secretion, and the condition present in the uterus extends to the vaginal circulation as well, so there is also leucorrheal catarrh.—Do you think there would be increased or lessened resistance then? ("Lessened.") Yes. There is an increased amount of blood, but because of the passive congestion there is a diminished resistance,—then the discharge would be what? ("Pus.") Yes, this passive congestion which decreases resistance finally gives rise to pus; but this would not be an abscess-cavity... Now we must recognize the fact that here are germs,—these parts are continually exposed to the action of germs which find their way into the vaginal canal, as the bacillus coli communis. But these germs are innocuous to healthy tissues because the tissues of the body have power to resist them,—they become immune to it, so long as they are healthy. But when the vitality of the cells is lowered, their resistance is lowered; they are no longer able to resist this germ, and other germs which are constantly found on the outside of the body,—these germs are likely to find entrance into the vagina, where the conditions are present which feed these germs, so there is a great liability to infection all the while, and the reason it does not occur constantly is because the secretions are germicidal.

Now when the resistance of the body is lowered, the resistance of these parts is also lowered, and this germicidal property is also lowered, and the germs work up the vaginal canal, and then there is leucorrhea set up which works farther and farther up the canal, just as mold grows on the wall, or on trees in the woods, or in a garden patch; so these sprouts reach up the cervix, and then find their way into the in-
terior of the uterus, and thus, by-and-by you have a purulent lucorrhea and a purulent discharge from the cervix itself. That is the picture we find in most of these cases of chronic metritis. The patient says, "I have backache across the lower part of the back—at the extreme lowest part of the back,—sometimes across the coccyx, but generally across the sacrum. Backache in the loins or in the lumbar region has nothing to do with this condition,—it is a backache in the lower part of the back. The patient says, "I feel better lying down." This occurs during the menstrual week; but after that,—during the week following the menstrual week, the patient feels better than at any other time. The patient also says, "I have pain in the top of the head." This is a reflex pain, and is sometimes called the "uterine headache," because it is so commonly associated with this form of disease. The patient also has pain in front and lower down in the center,—it is not often referred to the pelvic region ovarian region, but sometimes it is, because the ovaries are sometimes involved in this condition. The patient says, "I have a heavy dragging weight across me—a dull ache a great deal of the time—most of the time—whenever I am on my feet more than usual, I have this pain." Now the more neurasthenic the woman is, the more pain she will have. If she is strong, the pain will not discommoder her, because she learns to bear it,—except when she becomes extra tired by work of some kind, and then it will incommode her, for there is likely to be pain in the uterus, which is a sympathetic pain; this is because the ovaries are involved along with the uterus in a general chronic passive congestion.

What is the cause of this pain? It can only be due to excess of blood in the part. How do we know that? Because we know that
anything that will lessen the amount of blood will relieve the pain. For this purpose, doctors used to bleed patients, apply leeches etc. But you don't see that sort of practice now. The principal instruments and puncturing of the uterus; of the surgeon, doctor used to be those of scarification, but such instruments are not used now. Most of these patients flow much at the menstrual period, hence the taking of more blood from them would only be a damage to them. Large numbers of this class of patients are anemic, and to take more blood from them in different ways, as doctors used to do, would be absurd as well as harmful. Besides, the relief is only temporary. I am glad to say that I have never practiced that method of relief. Bleeding doubtless relieves pain, because the congestion is lessened. On examining the uterus after the menstrual period it will be found to be less congested than before....Just before the menstrual period--the day before--the uterus will be found to be very much engorged, and the cervix large. After the menstrual period the uterus will be found to be smaller and less congested than before, and the pain is relieved; so we know that this pain is due to congestion.

There is fortunately a way of relieving this congestion without removing the blood,--viz., rest in bed, the hot vaginal douches, and other hydriatic treatments are effective means of relief.

Now the diagnosis of this condition is exceedingly important. It requires a digital examination. The patient has pain,--how do you know that this pain is not due to chronic metritis? How do you know it is not due to the ovaries, parametritis or some acute inflammation? You must make a digital examination,--and in doing that, you must use one hand internally and the other hand externally. You must have your patient prepared in such a way that there shall be perfect freedom,--so that the hands will not be embarrassed by the clothing, and can readily come in contact with the skin-surface.--that is, you must make a bi-
manual examination. That is best made by standing at the patient's left side and using the left hand for internal investigation, and the right hand for external investigation. It is better to use the same hands for the same purpose every time, because they become trained in that way, your right hand will become skilled in external examinations, and your left hand will become skilled in internal examinations. You will be surprised to find how much you don't know, when you come to make these manual examinations, and how long it will take you to interpret what you find; but after some years of experience and practice, you will just begin to see how little you know, and how much you could not know any other way. By constant practice your fingers will become intelligent so that you will not need to use your eyes, and know things by the sense of touch. You introduce your finger and feel the cervix, and you know exactly how it looks, and you can tell whether it has cysts or not, and you can imagine pretty closely what its ocular appearance is, and you can think of the uterus as though you were looking at it. But it takes a long while to be able to do this. So you must not be disappointed if you find that you don't know much, on your first examination. You will at first make many mistakes. You will introduce your fingers and make an examination, and then, by the use of the speculum you will verify what you have found. But it is a good thing to train your fingers carefully. Train your fingers on things that you are familiar with. Train them in measuring distances. Take some points with your eyes, and then make manual experiments to determine how far they are apart. Take the table, for instance, and measure it with your hands; not knowing the facts about it, determine the distances of different points,—you will find that that is not so easy a thing to settle,—try it and see. You have got to determine the sizes and distances of things, and you will dis-
cover in a little while that you don't know near as much with your fingers as you thought you did, because we have been accustomed to settling these things with our eyes. Here is an instance in which a blind man would have a great advantage over a man who has his eyesight, because his fingers have been educated. So you must train your fingers, as though you were blind, because in these cases your eyes will help you but little. You wouldn't want to use the speculum once in a hundred cases if your hands were properly trained, because one gets but little information through their eyesight in comparison with what they can get with their fingers when they are trained, because the fingers extend into the tissues, beyond the surface, while the speculum simply shows you the surface.

Now you make the bimanual examination. The examination must be such as to bring the uterus between the hands, and you will make intermittent pressures. These two fingers should be introduced, if possible, so as to support (?) the cervix, and the other two fingers pressing upon the top of the uterus and a little behind, and your hands in such a way as to compress this (illustrating by diagram.) Suppose you press upon this part of the fundus,--it escapes, but if you get behind and press lengthwise with the uterus between your hands, then you can make a firm pressure upon the uterus itself. If you find, when you make these supporting it with the inner finger, intermittent pressures upon the uterus, that the patient complains, you know that the uterus is tender. But suppose the patient complains of pain every time you make a pressure, whether you support the uterus with the inner finger or not, then you don't attach any importance to it, because there is a lot of tender things, so you don't know which it is. These patients often complain of pain about the bladder--they constantly complain of that, so that must be taken into account--that there is a paresthesia of all these parts; but when it is only when you
have the uterus under control that pain complaint of pain indicates this condition (?). It is only when you have these conditions that you can say that you have chronic metritis, or chronic hyperplasia or chronic congestion of the uterus. Now while this condition has formerly been generally recognized by the profession as an inflammation, at the present time doctors understand that chronic metritis is not an inflammation; it is not an inflammation, and it should not be called that. You must see whether there are any sensitive lumps. The pain may be due to inflammation of the tubes or ovaries, to a parametritis or a perimetritis; but in these cases there will be likely to be a sensitive mass on the outside right side, on the left side, in front or behind somewhere.

There are conditions which simulate chronic metritis,—for instance, a fibroid tumor of the uterus. How can we know that it is not a fibroid tumor that causes these enlargements? In fibroid tumors there are nodules and masses here and there, and you find them irregular in shape. There is another point also, which is worthy of consideration,—and that is, that the growth of fibroid tumors, when small, are not accompanied by pain or tenderness—the uterus is not tender; there is usually no pain, unless we have chronic metritis associated with with the fibroid growth—and that may be the case.

Now the form of the fibroid tumor of the uterus: It is a myxomatous growth of the uterus, and you cannot distinguish that from cases of chronic metritis except by the absence of pain and tenderness. In this form, the uterus is often symmetrical. I have often found it so, but it was a myxomatous growth which inflamed the entire uterus so that we have something besides chronic metritis to deal with. It may be that the uterus is enlarged from a retrodisplacement, and that the condition is not that of chronic metritis; it may be that it is simply an
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engorgement. We put the uterus in shape, and in a short time it returns to its normal size; it is simply a swollen uterus, and nothing more... In such a case, you can often find an oedema,—you press your finger into the uterus, and find an oedematous feeling. When the uterus tips back so far that the top has been kept there by the promontory of the sacrum, the uterus is not easily replaced; the circulation is interfered with so that there is an effusion of the swelling, and you may have considerable enlargement. I have seen cases of this kind in which the uterus seemed to be three times its normal size; and yet, when the uterus was put in place, in a week it had returned to its normal size. So these are conditions which simulate the enlargement of chronic metritis.

I must say another word in reference to chronic metritis and subinvolution. Do you think it is possible to distinguish these cases from cases of subinvolution? I am certain that a great number of these cases originate in so-called subinvolution at the lying-in period at parturition,—the patient has a tear of the cervix, and there is an fixation of the uterus from this tear; a fibroid tumor results, and the patient has so-called "child-bed fever;" then, when there is a so-called "milk fever" which is so common, among lying-in women, and which is simply an infection,—in these cases the fever almost always results in subinvolution which interferes with the natural process by which the uterus returns to its normal size. But we also have a subinvolution of the vagina, subinvolution of the uterus and subinvolution of the vagina both. When this condition comes on and becomes chronic, and there is a large amount of blood distributed to the uterus, the result is, a diseased condition of the nerves of the uterus and a disordered state of glandular activity, and thus we have chronic metritis. Unquestionably this occurs in a number of cases.
There is another class called non-puerperal subinvolution—have you considered that in your study of gynecology? ("No, sir.") It is what might be termed menstrual subinvolution. I have found a German author who refers to it, but I have not found any English authorities who refer to this form of subinvolution, and which I think is very important. I think it is the principal way in which women who have not borne children get chronic metritis or subinvolution. Now the menstrual epoch and the period of gestation are closely akin. The uterus slightly enlarges during the week before the menstrual period, and after the menstrual period it returns to its natural size; it gradually increases in size before menstruation, and after that, it becomes a little smaller,—the lining membrane of the uterus melts down and is cast off, and the uterus becomes a little smaller; the circulation is a little less active, than it was a week before the menstrual period,—but there are many things which indicate this condition (subinvolution) as recognized as a fact.

Suppose a woman takes cold during the menstrual period,—she gets her feet wet during this period—and many women are very careless about this matter. It is astonishing how careless the majority of women are in reference to their health, especially in reference to the matter of getting their feet wet or getting a chill during the menstrual period. They go to balls and wear low-necked dresses and sleeveless garments, and get thoroughly chilled. Or they go very thinly clad, or get to primping and then sit down in a draft at an open window and take their chances of taking cold right during the menstrual period, and the result is a checking of menstruation. And when this occurs, the same thing happens to a woman during parturition, who has laceration and fever,—a cold is a fever, and a severe cold is a severe fever. There may be two or three elevations of temperature,—and there may be sore-throat, bron-
shitis, and there is a fever with it, and this interferes with the normal evolution which takes place in connection with the menstrual period, and after it, and the evolution which takes place after it, and the consequence is, that the uterus remains enlarged. This is unquestionably the cause of the enlargement of the uterus or chronic metritis in a large number of young women—taking cold at the menstrual period. We must not, however, charge taking cold with being responsible for everything that occurs in these cases. This is a sort of shield for ignorance, doctors often hide behind it—when they don't know what causes the trouble with these patients, they say, “She has taken cold.” It is the same with “neuralgia”—when the patient has a pain, the cause of which the doctor cannot discover, he says, “It is neuralgia—he does not know the real cause of the pain, and so he calls it “neuralgia.” If a trouble cannot be accounted for in any other way the doctor usually says to the patient, “You have probably taken cold.” The patient says, “I don't know when.” “You might have taken it while you were asleep.” So the cold explains the mystery. Patients must have an explanation, and in this way the explanation is given, and when the thing is explained, that is all that is necessary.

The treatment of chronic metritis is comparatively simple. We have two things to dispose of,—the pain, and the congestion,—the pain and the passive congestion. When we get down to the root of it, we find that we have only one thing to dispose of—we have simply to regulate the circulation of the uterus, so far as the local condition is concerned. We must restore the circulation of the uterus,—it is the blood that heals. In a few weeks of circulation of blood through the uterus in a the proper way, and in proper amount sufficient amount there will be found the healing power of the body. It is often the case that medicine is expected to do good, however. When I was with Lawson Taft, he
gave five grains of chlorate of potash in such a case. He learned this of James T. Simpson, his teacher, and he followed his practice in this respect. But the claim that chlorate of potash will cure chronic metritis is not generally recognized as valid. I have never seen a case of this kind cured in that way. I remember the case of one old lady who took this treatment for two years, but was no better at the end of that time. But if there was any sort of enlargement of the uterus, Dr. Tait used chlorate of potash. Ergot has also been used in these cases. This might be a little helpful in the prevention of subinvolution, nevertheless there are other measures which are much better. Ergot produces uterine contraction and interferes with the circulation and the exit of stagnant blood. It might, however, prevent the migration of blood-cells and the multiplication of connective tissue, and in this respect it might be helpful. The same thing is true of some other drugs. But there are certain mischiefs which arise from the use of ergot: While it contracts the uterus it also contracts other vessels so as to interfere with digestion. It is likely to produce hypocalcemia when used for a long period. Its general effect is not good. The natives of Italy sometimes get an overdose of ergot,—they get it involuntarily in their food, as some of it gets into the corn or rye, and when the ergot is eaten for some time, it produces a purulent disease known as "pellagra. This is due to the chronic use of ergot in corn or rye. Now you can produce pellagra in people in cases of this kind by giving them ergot for a long time. At present, there are some scientific physicians, or specialists who regard it as unnecessary to give drugs of any kind in these cases,—and I am sorry to say, it is held by quite a number of the leading lights of the profession, that there is no drug, nor anything else that is likely to diminish the size of the uterus which
has become enlarged from chronic metritis, with the exception of one thing, --and that is child-bearing. Pregnancy and child-bearing will often remove this condition, because it produces an entire change of the structure of the uterus; this will do it. Unfortunately most of these patients are sterile, and such persons are very likely to prove sterile when they become pregnant, so this remedy is not a good one, --and it is not always applicable. The uterus undergoes a complete change of structure in the process of child-bearing, provided all goes well, --but it is not likely to go well in many cases--they are likely to have tears and are liable to suffer from infection, from miscarriage or from abortion than other women.

Now I believe that the members of the profession who hold that in this condition the uterus cannot be cured, are wrong, --in fact I know they are wrong, because I have seen them cured in many cases --in fact I think every single case of chronic metritis can be cured, and ought to be cured. I don't say that the uterus should be returned to its normal size --that is not necessary, but the chronic congestion can be relieved, and the pain and tenderness can be relieved, and the patient can be practically cured. Suppose we have a patient with an enlarged joint, as in rheumatism, --the ends of the joint have become hypertrophied. We know we cannot reduce the joints to their normal size (?) but the tenderness may be entirely dissipated, and the congestion removed, and the hypertrophied joint may become as useful as any other joint. The tissues may be a little more sensitive, and they may be a little more liable to suffer from overwork than other joints, and there may be other conditions to which the patient may be liable, but I believe the patient may be practically cured; and I believe the same thing is true in cases of chronic metritis, and that we ought not to fold up our hands and say
"They cannot be cured." They can be cured. These are cases that used to be cured eighty years ago by empirical hydrotherapeutics, men who knew nothing about gynecology— they only knew enough about it to make their patients sit in water, because by so doing they could immerse that part of the body which was sick. If the hand was sick, they put it in water; if the head was sick, they put the head in water; if the feet were sick, they put them in water; if the uterus was sick they put that in water,—the patient was made to sit in water, in the old fashioned way. They sat in water from two to three hours at a time, and these long sitz-baths were taken from one to two or three times a day, and the temperature of the water was just as it came from the fountain and flowed down the mountain side—$40^\circ$ in the winter. As soon as the water that had been used on the patient became warmed by the body, an attendant came round and put on cold water—$\text{and this occurred every few minutes;}$ This was uncomfortable for the patient, but you can see what a powerful effect must have been produced in this way. The continuous application of cold caused contraction of the surface vessels, and a contraction of the vessels of the uterus, also a contraction of the uterine tissues as well—$\text{a contraction of the uterine walls, and muscular fibers of the uterus are diminished in size somewhat;}$ they are pressed upon by the hypertrophied connective tissue, and these muscles are stimulated, by this treatment, to a higher degree of activity. Is there any other way that you know of, by which these muscles can be stimulated more powerfully?—Simply stimulating them by a cold-bath!

You might think this treatment very severe, but you will see those patients while taking their bath, engaged in reading a book, feeling very comfortable, with blankets thrown over their shoulders, sitting
in a row against the wall chatting together. In Germany these treatments are usually given in one large room, and with no screens or compartments; the baths are taken in one little room,—that is the custom there. So that with many people these water-cures are objectionable; many people won't go there because of this promiscuous bathing. And then, the bathmen and other attendants are generally men. The treatments are superintended by a man-doctor,—women doctors are scarcely recognized in Germany. So these treatments are embarrassing to many. You will see a long row of patients taking their sitz-baths hour after hour, chatting together and having a very comfortable time, and the thing is not so bad as it looks, after all. I have experimented upon this method myself, and found that I could take a sitz-bath at 40° or 50° very well, and that one can endure a bath at 60° for a long time, by a little occasional chafing and rubbing. It is not necessary, however, to use these great extremes of time and temperature in order to get the best results. I find that it is best, at first, to put the patient in a bath at 80°, and then give a hot foot-bath,—and why a hot foot-bath? ("So as to produce a revulsive effect.") Yes,—and it also renders the cold bath tolerable, and prevents a chill—it produces the sensation of warmth, and renders the cold bath tolerable. The sitz-bath can be applied ten degrees colder when the hot foot-bath is employed than when it is not. You have all the reflex effects that you would have if the hot foot-bath were not taken, and besides that, the hot foot-bath has a reflex effect which encourages circulation (?) The patient must be covered with a blanket round the shoulders. The cold sitz-bath drives the blood into the upper part of the body,—it naturally drives it to the head, so that a person feels his head congested; but the air acts as a breakwater. If you cover the patient all over
the upper part of the body; that encourages the flow of blood into the arms and chest, and the upper half of the trunk, above the umbilicus, and that prevents congestion of the head...It is exceedingly important that this should be done. It is important that the blanket should envelope the knees and the legs, so that the effect of the hot foot-bath will be to warm the legs up to the knees, making a strong reflex upon the pelvic vessels and the uterus,—the most powerful therapeutic effect is thus produced. And let me say, there is no method known to medical science so powerful as this for encouraging the circulation and the nutrition of the uterus, as this bath. Starting with the temperature about 80°, lower the temperature one or two degrees every day,—two or three degrees a day at first, until you feel that you have nearly reached the limit of the patient's endurance, then lower the temperature one degree daily, until you have got it down to 65, and in favorable cases, as low as 60°. When this treatment is followed out intelligently, you will get definite and splendid results,—but the difficulty is, to get it done intelligently. The bath is kept at about 80°, but the nurse arranges it so that the patient only gets 80°. After a few days the patient gets down to a lower temperature. To get the best results, the bath should be used at the maximum of potency every day. You can have four weeks in which—to make treatments in this way, more than you could accomplish in three or four months by using a too moderate, and less potent applications—

Q. For what time should the bath continue?

A. From ten to twenty minutes. After the bath, it is an excellent thing to take the patient from the bath and apply a wet-sheet rub; I like the wet-sheet rub better in these cases, than I do a shower bath
If the patient, however, gets quite cold, then he can take a warm shower and a hot and cold douche—a warm shower with a cold jet, and the jet should be applied to the lower part of the back. The percussion douche—and then the broken jet may be applied to the other surfaces of the body; a douche or jet at the feet; a percussion douche also at the lower part of the back and the feet, and nothing but the broken jet in front;—these are the most powerful means we know of for these cases.

There are other means which may be used in connection with these treatments (?) which are very effectual,—the hot douche to the back and the lower abdomen followed by a heating compress; a revulsive sitz-bath following the heating compress,—this is a very hot bath. Each one of these things that we are talking about should be studied carefully and closely. The revulsive sitz-bath should be given in its order. Put the patient in this bath for ten or fifteen minutes, and then end up with a douche over the hips, and you will have a different effect—you get the patient to sweating—and you must have a different kind of treatment—the patient must have a moderate shower-bath at 80° to 85°. Extra heat is extracted. Then follows a very short cold bath. The revulsive sitz-bath must be short, just as directed in "Hydrotherapy," to get the proper effect.

The revulsive sitz-bath is the best means of relieving pain; it produces definite and positive results. The cold sitz will sometimes be painful, and for that reason we cannot give it; but you may give a very hot bath at the beginning,—it may be 102° to start with. The patient sits in the bath and the water runs in slowly until the temperature is so hot that the patient cannot stand it, and feels almost cooked and the skin is red, and the patient begs off. Then let the hot water run off, and let the cold water run in until the temperature is down to
We are now talking about passive congestion in hyperplasia. This is not for cases of actual inflammation; it is not for cases in which there has been acute inflammation and there is left inflammatory conditions after it. It is only for cases of pure hyperplasia of the uterus, in which the uterus is perfectly free from inflammation, and there is no evidence of inflammatory foci anywhere present. It is important to notice this difference.

Suppose the patient says, "I can't endure cold water," I will tell you how to deal with those patients: Have the bath prepared at $80^\circ$ Now have the patient stand up near the bath-tub, and have a pail of water at $70^\circ$ or $65^\circ$. As the patient stands near the bath-tub douche the cold water upon him; bathe the arms, face and neck; have the patient bend over the wash-basin bathing the face and neck with cold water—the patient herself (or himself) doing that, and while this is being done, warm dash cold water over the hips -- apply a warm douche over the hips and let the patient enter the bath immediately, supposing the water of the bath is about ten degrees warmer than it really is, and feeling very comfortable. This is a very useful trick for a fever-patient......

The heating-compress is a very valuable measure. It is to be placed over the uterus, and must be covered with flannel only, -- leave the mackintosh off, -- why? Because it produces chronic passive congestion; and without the mackintosh we have a slow evaporation, and that is just enough to produce tonic conditions. So we have increased vascularity, but with a tonic activity of the blood-vessels, and that is valuable, and the increased flow of blood will encourage the heating compress. Healthy blood is the thing that is needed in every diseased organ, -- an increased supply of healthy blood. There is no such thing as too much healthy blood, except in very extraordinary and exceptional cases.
There is something more to be done. There are some things which gynecologists can do, which may be of some help. Among these, I should mention the hot vaginal douche or irrigation,--a hot vaginal irrigation. Some raise the temperature of the douche, increasing the power of the douche; this does no harm. I would introduce the nozzle of the instrument into the mouth of the vagina, pressing it backwards. The increased force of the water will have a tendency to increase contraction of the uterine muscles, and so from day to day this will be a gymnastics for the uterine muscles. An alternate douche is best, the water being 110° to 115°, and close with water at a temperature of 75° to 80°. Patients can accustom themselves to a temperature as low as 65° but 75° is cold enough. The effect of hot water is to cause dilatation of the uterine vessels, at first, but later, causing contraction; and the application of cold water in small quantity, not more than a pint, at the end, has the effect to encourage this contraction, also to encourage uterine contraction.

This douche should be given just before the cold sitz-bath, for the patient complains of being chilly by the vaginal douche. Give only a hot douche, followed immediately by the cold sitz. If the patient has leucorrhea, a solution of permanganate of potash must be combined with this douche. This solution must contain of permanganate of potash in proportion of one half of one per cent. At the end of the cold douche, in which an ordinary soap and water douche has been used, the soap and water douche should be followed by half a pint of a one-half of one per cent. of permanganate of potash,--let us see how much that would be? (Calculation.) Twenty grains would be enough. How much water will you have? you can make it up in different quantities of water, but you should have twenty grains to the dose. This is better than the powder--
Q. Can you use a saturated solution?

A. Yes, you can, if you want to; but I think it is better to have larger quantities,—say about 160 grains to the ounce. If the patient has leucorrhea which causes an itching of the genitals, a hot spray should be applied to the external parts,—a thorough cleansing of the external parts with a hot spray is a very excellent measure; it is a good thing to give the patient a strong solution of borax at the end of the bath. This is generally an infection which comes from a vaginal discharge. There is another thing which is very grateful in these cases,—and that is, the application of glycerine pledgets. But these must be the right sort of pledgets,—they must be soft. There must be three or four of them saturated with glycerine, and three or four more must be dry to press up against them. This must be applied all around the cervix, and then a lot of pledgets packed behind them. This drains the uterus and gives great relief from pain. This is somewhat antiseptic and germicidal, and so it is helpful. This is a perfectly simple thing; it does not absorb, and, as one might say, its effect is mechanical. Staying in bed will relieve congestion more than any other thing. General cold-bathing,—tonic bathing and treatment must be employed in all these cases. The pain is largely due to general neurasthenia which exists. It is only in exceptional cases when neurasthenia is not due to pelvic diseases, and local disease that this is not the case,—the pain is usually due to general neurasthenia. The patient complains of uterine pain because the nerves are abnormally sensitive. This condition is not always attended with pain; it is only complained of as an inconvenience. I remember a case of a woman whom I saw in New York, who had an enormous procidentia; the uterus, as large as my fist, protruded from the body. She was working hard, and washed every day. I asked her if she
experienced any pain. No, she answered. Why did you come here, then? Because I wanted this cut off, it is in the way. She wanted the protuberance amputated because it was an inconvenience; she did not suffer pain, although the uterus was outside the body; the bladder and the intestines were in this pouch, a part of which was outside of the body, but still there was no pain. Many persons have enormous hernial pouches, but there is no pain unless there is an obstruction. I have seen many cases in German hospitals where women, in these cases, were absolutely free from pain. So the pain that women suffer from in this condition, is not altogether due to local disease, but to the fact that their nerves are abnormally sensitive, and we must give attention to this fact. In these cases the patient must have baths, proper treatment, etc. Sometimes it is necessary that the food shall be fattening food, so as to improve the general nutrition. These are very essential measures. In these cases the heating compress may be relied upon as effective... The patient must be kept out of doors as much as possible. Their nerve-tone, appetite and nutrition must be encouraged, and the bowels must be kept regular, and the patient must be kept, as far as possible, in a wholesome state of mind. They are apt to imagine various things, and are generally in a miserable state of mind, pessimistic and melancholic, and they must be surrounded with sunshine and cheered up and made to look at life in a more wholesome light.

Next time, I am going to talk to you on Parametritis and Perimetritis, and I wish you would study up, so as to be as familiar as possible with the subject, as you will get more out of it in that way.
Following Pages Are Best Copies Available
THE BENEFICIALS OF INTEROSTOTIC.
Prepared for the Class of 1906.

Anatomical Considerations.
The viscera are supported by the mesentery, the blood vessels, lymphatics, nerves, and the abdominal walls.
The root of the mesentery at the aortic axis is the immovable center around which the abdominal viscera play in the ceb and flow of respiration. St. Feb. 06, 39.
The duodenum at jejunal flexure and pancreas are firmly fixed by the root of the mesentery and by the bile and pancreas ducts so they do not share in the respiratory movements and so are never paralyzed. St. 60, 61.
Thus the duodenum serves as a solid visceral shelf for the liver and stomach. (61). The liver is further supported by the inferior vena cava which is lodged for five inches in its substance and by the underlying gas filled stomach and bowels, and by the gastro hepatic omentum, etc. C. 743.
The primitive intestine is a simple, straight tube attached to the dorsal wall by a mesentery, and the upper portion is also attached to the anterior wall by a ventral mesentery.
During the elongation of the intestine the dorsal mesentery attached to it grows correspondingly while the attachment to the body wall remains practically the same. So it becomes fan-shaped. C. 60.
It is not primarily intended for mechanical support, but for the conduction of blood vessels, lymph vessels, nerves, which are between its layers with some adipose tissue. It permits large freedom of movement being from one to ten inches long. It separates the viscera into compartments.
Virtually making shelves for the support of the viscera.

The transverse colon has a demerory of its own called meso-colon, the upper portion covering the pancreas and a continuation of which is the great omentum. C. 722,734.

The transverse colon moves with respiration and as it is a shelf for the sub-diaphragmatic viscera, therefore it is especially forced downward in enterophtosis and its two flexures produce vigorous traction on the kidneys. St. 83.

However firm and extensive the fixation of viscera to posterior abdominal wall it plays a minor role in comparison with the diaphragm and the muscular abdominal walls. St. 59.

The superior mesenteric artery, vein, and nerve flexes pass out over the transverse portion of duodenum and in enterophtosis as the patient lies down they are put on the stretch and constrict vigorously the duodenum causing dilatation. St. 63

Physiological Considerations.

The great splanchnic area forms the resistance box of the circulation. When contracted the blood passes to the locomotor organs. Then dilated it passes into the spacious abdominal veins. When the splanchnic area is fully dilated all the blood can collect within the abdomen. Sch. 159,91.

The depressor nerve (or sup. cardiac branch of the vagus nervalion, 440) passes up from the heart to the vaso-motor center. By the means of it when the heart is under too great a strain the splanchnic flood gates are rapidly thrown open and blood pressure is rapidly lowered.

Scho. 59-62. Eirkes 241,2

Section of the spinal cord at the first dorsal vertebrae paralyzes abdominal and intercostal respiration but not the
Abdominal. The tone of the great splanchnic area or blood vessels is lost. Tone of the abdominal wall, if placed in vertical posture abolished all the blood collected in the abdominal veins. Heart beats empty, until either the animal is returned to horizontal position or compression is made on abdominal wall, then right heart once more fills, arterial pressure rises, circulation is renewed. Chap. 92,93.

The same factors prevail with relation to the liver and the spleen, the amount of blood in them being in direct proportion to the amount contained in the splanchnic veins. Since 180.

Compensation for effect of gravity in erect position is one of the most important absolutely necessary functions of bulbar center. During the day this becomes gradually excessed, but in health this compensatory power is restored during sleep. In neurasthenia exhaustion from disease, etc., it is partially lost and in shock from severe injury or hemorrhage or by sudden fright it may be entirely lost, cerebral circulation ceasing and syncope. Therefore particularly abolish this compensatory mechanism. Chap. 94,95.

For syncope more important to get blood into the heart than to the cerebral brain. Strip a firm cushion to the abdomen. Blues 188.

A useful clinical guide to the condition of this compensatory mechanism is obtained by observing the rate of the pulse in change of posture. If the heart beat becomes greatly increased in attire from horizontal to the vertical position wash-water tone is deficient. Chap. 95.
At rest only 36% of blood is in the organs of locomotion while during activity 66%. (Sch. 135). A body after walking if balanced on a horizontal board the head and soon becomes heavier owing to the blood flowing back from the legs into the abdominal cavity. (Sch. 93).

The veins of the limbs are constantly emptied onwards by contraction of the muscles and it is held by the valves. (Sch. 1).

The abdominal muscles must not act as a tonic mechanism to the abdominal veins, therefore their integrity is of the utmost importance. (Sch. 141).

When abdominal muscles are weak the diaphragm has little to work against consequently its strength diminishes, so weakness of abdominal muscles signify weak diaphragm. (Bliss 115).

The cerebral blood pressure varies absolutely and directly with the pressure in the abdominal veins-cava and only indirectly with arterial pressure. (Sch. 147).

Tension of the vaso-motor center promotes contraction of splanchic vessels and a rise of blood pressure at the same time the respiratory center is excited and an increased action of respiratory pump drives more blood to the right heart and so to the brain.

At the moment excitation from the outside world demands a cerebral response the splanchic area contracts and more blood is driven to the brain. The blood supplied to the brain is controlled indirectly by the vaso-motor center acting on the splanchic area. (Sch. 147, 148).

The tone of the expiratory muscles depend upon the integrity of the respiratory center. The earliest evidence of nerve waste is diminished tone of the abdominal sympathetic. (Bliss 138).
The blood can be aspirated into the right heart by the action of the thoracic muscles. 

During inspiration the sectional area of pulmonary capillaries increases. Blood fills up the enlarged pulmonary vessels and flows into the left heart in increased volume.

During expiration, intra-pulmonary pressure increases, the sectional area of pulmonary vessels decreases and the blood is at first expelled from pulmonary vessels and then flows in diminished volume. In addition to this thoracic aspiration the inspiratory descent of the diaphragm and the expiratory contraction of the abdominal muscles both compress the abdominal contents and drive blood into the heart. Respiration thus acts both as a suction and as a force pump. 

The liver forms an enormous reservoir for venous blood at times when the right heart cannot readily empty itself, as in intense muscular effort or in a prolonged dive underwater. 

Foster estimates that the liver contains 1/4 of the blood of the entire body. 

Encroachment of the liver is an almost invariable accompaniment of splenomegaly. 

The portal circulation is aided considerably by the action of the respiratory pump, the blood being sucked from the liver therefore exercising greatly accelerates the circulation of the liver. 

Chns. 91, 115, 116. 

Chns. 127. 

Chns. 183. 

Chns. 129. 

Chns. 120.
The spleen contracts and expands once a minute and thus it may also act as a pump to the portal circulation. *Ch. 162.*

**Results of Intercostalis.**

Interference with circulation of blood and lymph, irritation of nerve centers and nerves, loss of peristalsis and atony of bowel muscle, gastro-intestinal catarrh and indigestion from excessive, deficient and disproportionate secretions, derangement of abdominal organs producing nausea, neuritis, headache, dizziness, nausea. Dilation of the stomach and duodenum often produced by the pressure of superior mesenteric vessels. *Ch. 63.*

Sympathetic neurasthenia is dependent essentially on stagnation of blood in the abdominal veins. The organs and nerve centers are practically in state of asphyxia from being bathed in pools of stagnant blood. The toxic products of digestion which would be removed by normal circulation have a specifically poisonous effect on the sympathetic system. *Ch. 117, 121.*

The congestion of the liver arrests its function of destroying or neutralizing toxic substances from the intestinal canal, producing mental depression and prostration due to auto intoxication. *Ch. 156.*

Owing to the stagnation of the blood in the abdominal veins they contain a large quantity of CO₂ gas and it diffuses into the intestines (ex. of tissue respiration) and they become inflated thereby increasing intra-abdominal tension which in turn squeezes the blood out of the abdominal veins into the right heart. This is distinctively a compensatory process. *Ch. 120, 127.*
Diminished intra-abdominal tension means reduced strength of the diaphragm and that means of retarded lung development, and that means impaired circulation. P. 131.

Splanchnic neurolaemicus, as a rule, have pain on pressure on the ant. abd. wall, they have pains that may radiate to the back, to the neck and to the legs and may be of a most agonizing character. These are due to the congestion of blood in the intra-abd. veins irritating the splanchnic nerves. These pains are lessened by firm compression of the abdomen for two minutes. *Hines 12°, 22.

The cardio-splanchnic phenomenon. P. 178-82.

Therapeutic Considerations.

The sports of the ancient Greeks were specially directed toward the developing of the abd. muscles. The development of the abd. muscles is a modern heritage. And no are hemorrhoids, constipation, nausea, and a host of other ills that can be traced to them. P. 4.

Congestion of the abd. veins is relieved by auto-massage, general massage by diverting the blood into the muscles may lower blood pressure 1/3. 1, 196. By exercise which strengthens the abd. muscles, by respiratory exercises. It is more important to expel the residual stagnant air, then even expelling inspiratory. suggestive exercise.

Transferring water from one bottle to another. P. 296.

For the splanchnic effect which contracts the viscera and the intra-abd. veins and stimulates sympathetic nerve fibers and drives the blood into the right heart. Hepatic enlargement and tenderness may be made to disappear.

Application of cold, irritation, splanchnic, cause 1/2
lack of more retraction. E. 133-205.

It is further relieved by abd. supporters, which act chiefly by compression of the viscera thereby squeezing the blood out of the turgid abd. veins.

Cold douches to the abd. are most effective means of augmenting tone of the abd. walls, organs and tissues.

The circulation of the blood, movements of the alimentary canal and nutritional processes are thus reflexly stimulated by nerves terminating in the skin. E. 138-53.

Whatever stimulates peripheral vaso-constriction will stimulate the digitation nerve of the heart.

In splenetic neurasthenia physicians recognize symptoms of intestinal auto-toxemia and therefore prescribe cathartics, which increase the supply of the blood to the abd. organs thereby augmenting these symptoms depending on abd. congestion. Alcs. 156.
Good evening, Ladies and Gentlemen: I thought I would just look in and say "How do you do," and thank you for your inexhaustible patience, as I found I was going to be detained by some sick people, so I called upon my colleague, Dr. Morse, to occupy the time this evening; but I learned, as I was passing out, that he has been called away and cannot be here this evening. Now I am not going to keep you here to listen to a long lecture to-night, but I want to congratulate you that you are here,--not because I am here, or because my colleagues are so smart, brilliant and capable, but because there are so many of you here for health. You came here because you were sick and needed health, and health you will find, if you keep in the right way, for health is here.

Robert Ingersoll once said a very foolish thing,—he said a good man foolish things, but one particularly foolish thing that he said, on a certain occasion, was this (and when I first read that, I said to myself "For pity's sake, what is this poor foolish man, that he is going to make a suggestion to the Almighty?") "If I had been present when the world was made, I would have suggested to the Almighty that he make health contagious, instead of making disease contagious." Now Ingersoll though that was something awfully smart, but it simply shows his lamentable ignorance; this was certainly one of the great mistakes of Ingersoll.

Why, my friends, health is far more contagious than disease. It is hard work to catch disease,—for instance, if you want to catch
small-pox, you must hunt up another man who has small-pox and rub your-
self against him in order to get it. Small-pox won't catch you; you
have got to catch small-pox, if you get it. I never heard of small-
pox catching a man,—the man catches small-pox. And so it is with other
diseases. Disease don't catch you,—you catch disease. You say, "I
cought cold," and that is right, for you do catch cold; the cold didn't
catch you.

Now, as I remarked, Ingersoll was mistaken. Disease is contagious
in a certain way: If a man wants disease, he must chase it up and catch
it,—for instance: if a man wants dyspepsia, see how he must work for
it and chase it before he gets it: he must go from one hotel to anoth-
er, from one boarding-house to another, from one cook to another; he
must sit down at the table and eat unwholesome things, and he must
keep this up day after day, day after day before he can create a real
monumental dyspepsia,—but after awhile he catches it —dyspepsia nev-
er catches him; he catches dyspepsia, and he sometimes catches it hard.
You know from experience how it feels when you catch dyspepsia, and get
it good and hard. It takes years and years of hard chasing to
catch dyspepsia,—and so it is with rheumatism. If a man wants to
catch rheumatism, he must take uric acid with his beef-steak, mutton-
chops and all sorts of things containing uric acid. He must store up
uric acid—grain after grain, gram after gram, and dram by dram, until
he hasit stored up in his joints by ounces,—I have just been examin-
ing such a case, and could see the little nodules stored up in the
joints. In this way the body gets so full of uric acid that the uric
acid poison irritates every nerve, excites every cell, and poisons every
gland; the nerves are all on end, and are strung up like the strings of a fiddle, ready to snap by a little extra turn. Some one says something which is a little irritating, and there is a snap. I remember the case of a certain business man in Chicago who had a very expert and reliable foreman. After coming here and spending a few days, he came into my office one day with a very sad face. He sat down in a chair, "Doctor," smote his hands together, and said, "I'm a fool! I'm a fool!"

"Why do you say that?" I asked. "Why," said he, just think of it! Yesterday I went down to Chicago, saw my foreman, and found that he had done something a little out of the way,—it didn't amount to anything at all, but I broke into a violent passion, and I swore at him and cursed him, and he said, 'Goodbye,' and went off and left me. I would have given fifty thousand dollars rather than to have lost that man. I can't do business without him,—I can't get along without him at all. My business will all go to pieces without him,—and I can't get him back again." I said, "Perhaps you can apologize to him, and make it right with him; and he will come back." "No," he said.. "I can't catch him again,—he's got another job. He is worth twenty thousand dollars a tear, and I didn't have to worry about anything; and now I've got the whole thing on my hands,—I'm a fool! I'm a fool!"

Now the trouble with that man was, uric acid. It was not that his heart was so bad, but that his nerves were so bad. It was not that he was totally depraved morally, but that he was totally depraved physically. I remember very well the case of a lady who came to us some years ago. One day she came into my office and began to weep and lament. "Oh, doctor!" she said, after telling me about her symptoms and
her bad digestion, "I am afraid my case is hopeless." "Why so?" I said don't you think you can be cured?" "Perhaps I can, but Oh, I'm such an awful sinner! I think I must have committed the unpardonable sin."

"What do you mean?" I asked. "I don't think you have done any very wicked things." "Oh, doctor!" said she, "I'm cross. I scold my husband and I scold my children, and I scold the neighbors, and everybody in sight, when there is no sense in it at all, and now doctor, do tell me, am I only cross and ugly, or am I wicked?".. I looked at her tongue, and it looked filthy enough to need the services of a scavenger to attend to it, and there was an awful odor in her breath from the germs growing on her tongue, and I said, "Madam, I am very glad to be able to tell you, after examination, that my diagnosis of your case is, that it is not a case of total depravity, but of total indigestion." Then a cheerful light came into her eyes and face, and I had a delightful time cheering her up, and seeing the sunshine come back into her life again. In six weeks she went home with bright eyes and rosy cheeks, promising never to scold any more... In this manner I cured this lady of scolding. I think that is a part of my business,--the "taming of the shrew," here in the Sanitarium. This was done by her simply getting hold of health again,--or rather, by health getting hold of her.

Ingersoll said that health ought to be contagious,--and so it is. Health is all about us, my friends. Health is in the sunshine,--every ray of sunshine has wonderful health in it. Look out on the green, and see what sunshine does. I have been to the Pacific Coast and back again within the last three weeks, and there was a green carpet on the earth all the way along. All the world, except the land of perpetual snow and ice--almost all the world is covered with this carpet of green grass,
Every one of these little blades of grass is made to spring up by the power of sunlight. There is wonderful power in sunlight—actual creative power. You put a little grain of corn in the ground, and it grows up and becomes a stalk with one, two or three ears, and with several hundred kernels of corn on each ear. The farmer goes out into his field with a little bag of corn—about a bushel—and he drops a few kernels in a hill till he has dropped the whole bushel of corn in that field, and from that bushel, he gets a thousand bushels of corn,—the harvest is a thousand bushels for one. That was a thousand bushels of sunshine, for it is all new corn, the bushel that was planted having rotten, with the exception of the germ. This was a resurrection of that bushel of corn—a type of what will at some time happen to man. Sunshine, then, has life in it, and the proof of it is in the production of that thousand bushels of living corn from the bushel of corn that was planted. And every one of that thousand bushels will make another thousand bushels of living corn by the power of sunshine. This is the potency of the sunlight when put in operation,—it is the crystallized, concentrated sunshine that is in that kernel of corn.

Now you take that kernel of corn into your body, and it is transformed into nerves, bones, muscles, flesh and blood, and thus you have sunshine transformed and transmuted into a human body. And that is in accordance with what the Mastr said,—and I think that is one thing that he meant, when he said "Let your bodies be filled with light." God is light, and this very light makes the corn,—and it has healing power in it. Why? Because the creative power itself is the light; it goes into the corn, and that is what makes the corn. This is the very power that made the worlds—the Universe. This is the power that makes the corn,—
and that power is in the sunlight.

So, when we go out in the sun, we are taking in its life, and creative power—and healing power—for, as Dietl the great German physiologist and Master of Medicine, once said, "The power that creates and maintains, must be able to heal." Did you ever think of that? Doctors cannot heal. Nurses cannot heal. Bathmen cannot heal. Baths cannot heal, and medicines cannot heal. There is no all-healing spring anywhere. There is no healing power that we can put in bottles and dose out in teaspoonfulls. The healing power don't come that way. The energy necessary to create or to heal a mole cannot be put in a bottle and held in by a cork. But the healing power is the creative power that fills the universe with light and causes this green carpet to spring up all over the world, brings forth the buds and leaves of the trees and paints the flowers, raises the waters in clouds and waters the earth. It is the power that is in the tidal wave, the earthquake and the hurricane. It is easy to see the effects of this great creative and healing power all around us. There is also health in cold water and hot water,—in all the thermic and cosmic forces, and in the wonderful energy that spans the earth with an electrical belt that enables a man in one continent to speak with another man in another continent. These are all healing forces.

Now when we have such power in sight, and all we have to do is to reach out and take hold of it, we can understand why it is that the very sickest man need not be afraid if he is in sympathy with these mighty powers. I have just come from a sick room where I found a poor sick woman in despair. "Oh," she said, "doctor! What shall I do? Can't you help me?" "Well, I will do all I can for you." Her
eyes dropped, and I saw that she did not have much faith in me,—she did not believe that I could do much. So I tried to point her, as I am trying to point you, to the Great Source of Power, and I saw her faith begin to grasp the thought. I wanted to get her apart from everything else for a minute or so, and to get rid of all distracting things for a short time, and I said, "Now would you mind kneeling down here for a minute?" We then knelt down and tried, in our hearts, to look out from our present surroundings, and to get the thought of this great Power that is all about us—the great Power that fills the universe—the great Father, the great Creator, the great Healer. At last the thought came into our hearts that there is a great Healer, a great Physician ready to take hold of our hands and lift us up. She grasped the thought, and her heart was comforted,—and I was comforted too, because that case was too much for me,—it was a heart-case, and I knew I could not help her. It was not a case like that of a diseased finger to be amputated; hers was a sad heart, and something must be done for her mind before her body could be helped, and I could not do it. My friends, I am so glad that I haven't got to stand up before you and tell you what great things I can do, for I can do nothing. And I am so glad that I can point you to that great Force, and tell you that these mighty powers in the world are at your command, ready to help you, and that all you have to do, is to put yourself in harmony with God.

Every one who truly believes in God is a member of my church. I don't ask you whether you are a Christian and subscribe to this or that creed—but every one who believes in God and is earnestly seeking truth and ready to receive it, and to follow after things that are pure and good and sweet,—that man is my brother, and he belongs to my church.
I don't care what label is on him,—it makes no difference; God don't look at the label on a man; he looks at the inside of a man; the thing that God is concerned about, is the being inside of the man. And, when we come down to matters of fact, that is the thing we are concerned about—the inside of a man rather than the outside. We don't care what color the skin is, if only the heart is right,—if we are right inside.

Now, when I say that it is only necessary that we should put ourselves in harmony with this great Power, don't think this is a superstition or a mysticism because you can't see it; you can think of this great Power as a reality when you see what it does. You look out and see a storm,—the wind is blowing, and everything is stirred up and you know something is going on. You can't see the wind, but you can see the effects of the wind; you can see the operation of the wind,—you can see the wind at work: Some years ago, I was over in Egypt looking at the huge rocks of which it is composed, and I could see where their corners had been worn off, and the surfaces worn smooth by the little grains of sand that had been hurled against these granite stones for so many ages and with such velocity, that they had polished them smooth. Now you never saw a wind, and I never did, but we can see that there is a power in it that works,—and it is no superstition when we recognize it—we never saw a wind, but we believe there is a wind.

So we have never seen the Creator. Many people have seen the shape of a being that they call "God," and they have some puny conceptions of him. Sometimes people have a conception of God, and some shape of a being that they call "God," but they have doubts as to his existence. But the apostle Paul had a greater conception of God than this, for he said: "That which may be known of God is manifest to them, for God hath
sheved it unto them. For the invisible things of him from the creation of the world are clearly seen, being understood by the things that are made.” (Rom. 1:19, 20.) So when we want to see God, we must look out and see what he has done, and what he is doing. So when we want to see whether there is a wind or not, we look about us and see what the wind is doing. So when we look out into the fields and see the grass growing, and the buds and leaves coming forth, and the flowers blooming, and there we see there is some power at work, and in that work we can see God, my friends, because we can see creation going on, and where there is creation there must be a creator, and that creator is God.

The great Swiss scientist Lavater (?) writes in one of his scientific books that there is a great power behind all things. He wishes to give it a name, and so he calls it "The thing in itself." And Mr. Herbert Spencer says (and I don't know whether he is a Christian or a member of church and believes in a religious creed or not) that after all, "we are obliged to admit that behind all and beneath all, there is at work an infinite power and eternal power,--he named it "The Unknowable Intelligence." Another author names this power "The Absolute," another names it, "The Non-Relative," etc. And so men attach different names to this great Power that is beneath all and behind all, and doing all things. But this Power the Christian calls "God." And "God" is the oldest word for this power, but these new names all amount to the same thing. You can use any name you wish, in speaking of this power, but the Christian says "God," in speaking of this great creative power.

Now, so far as my remarks are concerned, I say that for that man who believes in God and recognizes him in the unseen power that can be seen through the things that are done, just as we recognize the wind
by the effects of the wind—every man who recognizes this great Power (and every intelligent man must do so) the thing that is essential to help you, if you are seeking health, is to get in harmony with that power. But here is a man who says, "I am not going to recognize the forces of the universe. I am a man, and have a will of my own, and I propose to do as I please." This man is crossing a bridge that spans a river; he has an impulse to walk in another direction,—he says, "why should I restrict my impulses and walk in this direction, instead of crossing the bridge?" He does walk in this direction and falls into the water. Why? Because he has put himself out of harmony with the law of gravitation. The law of gravitation is one of the laws of God, and this man has put himself out of harmony with it. He should have maintained his relations with it in order to be safe, and the moment he puts himself in opposition to that law and proposes to fight it, he may be dashed in pieces on a rock, or break his neck or be drowned. People get into trouble and meet with accidents because they don't keep in harmony with the law of gravitation.

In regard to our relations in life, in everything that concerns our moral and physical wellbeing, we are amenable to these great forces,—these infinite forces and powers which all together make up the power of God. The Apostle said, "All power is of God," and all power IS of God. And we say the same thing when we get down to the ultimatum, the ultimate, the last thing, "All power is of God," and God's power is God at work. Now there are laws of these great forces, and we are amenable to them. Whether we eat or drink,—no matter what we do, we are somehow coming into relation with these forces. These forces are able to create, and to destroy. A man is crossing a chasm,—so long as he is stem
walking on the bridge, he is safe, because gravitation holds him in a safe place and keeps him safe. If there were no gravitation, he might fall anywhere—he could not keep himself in one place. So gravitation keeps a man in the right road, if he keeps himself in harmony with it. But if he pays no attention to this law, and wanders off into the wrong road, then the same beneficent power that would have saved him, destroys him. So it is in our other relations in life—the same power that saves our lives when in harmony with it, destroys us if we put ourselves out of harmony with it.

A man eats. Why does he eat? There is a force within him called "hunger," and that force says to him, "Eat food." If he eats, he gets nourishment and energy into his body. The things we eat to-day, as potatoes, apples, bread, etc., are to-morrow, breathing, walking about and thinking, because these foods have been transformed into the flesh of breathing thinking, talking human beings. So if we persist in following the natural, normal way, and in harmony with what is good and pure and right, then what we eat becomes intelligent, thinking, acting forceful human flesh. Now suppose we make a wrong use of this energy or force within that God has lent us,--suppose we eat wrong food: The consequence is, disease of the stomach, liver and nerves, and the whole body becomes the hold of every unclean and hateful kind of germ; it becomes a hold of disease, and falls into wreck and ruin, misery, distress and decay and death.

So you see it is the same law and the same energy that builds a man, and that destroys a man. God does not make us sick. Many people think God makes them sick. I had an idea of that sort when I was a small boy. I had read in Sunday-school story-books that if a boy went
fishing on Sunday he was always struck by lightning or something else happened to him; and I believed that whenever a man was sick, it was a sort of lightning stroke, and that God had smitten him. In times of yellow fever epidemics in the South, they used to claim that it was a judgment upon the people of the South for holding slaves. I am glad to be able to say that I have gotten over that kind of malady—for it is a kind of moral malady—a kind of moral pessimism—but no intelligent human can now think along that line. God does not make us sick and distress us. God's business is to heal, and to cure. He does not make people sick. He cures men—he makes them well. God creates men, and he heals men—and healing is creation. The Bible says, 'The evil shall slay the wicked.'

'Whatsoever a man sows, that shall he also reap.' If you sow corn, you will get corn. If you sow wheat, you will get wheat. If you sow tares, you will get tares—and we see many men and women reaping tares.

There is one most wonderful principal brought out in the Bible, and we doctors often see it, in our contact with people, and that is, that a man who has been sowing for disease, and reaping a harvest of disease until you would think there was nothing but a harvest of disease before during the rest of his life—if he turns about, and says, 'I care for health,' and caresses health, and sows the seeds of health as I have seen men do where it seemed as there was nothing but a Sahara soil in which to sow it—I have seen these seeds grow and develop, and the diseased body put on an aspect of health, and there were rosy cheeks and sinewy muscles and animation in every step. Now why was this? It is because there is this great beneficent Power is constantly going about healing, healing, HEALING, and that is all the time saying to the sick, 'Come back, come back! Turn from your evil ways! Turn from
Obey and live!" We find this principle illustrated away back in Old Testament times, when Moses said to the Children of Israel, by the Spirit of God, "If ye obey all these judgments and statutes—thou wilt diligently hearken to the voice of the Lord thy God, and wilt do that which is right in his sight, and wilt give ear to his commandments and keep all his statutes, I will put none of these diseases upon thee which I have brought upon the Egyptians; for I am the Lord that healeth thee." Ex. 15:26."

Now look at that, and see what it really means,—"If you will obey me, I will bring no disease upon you, for I am God that heals you."

"What," you say, "can a man be healed before he is sick?" Yes. Here is a principle that is worth thinking about,—a man may be healed before he is sick, for we had a predisposition to disease before we were sick; we have all inherited tendencies to disease, so in that respect, we are all sick. Now here is this great beneficent Power that keeps our hearts moving, and keeps up the process of digestion when we are asleep and awakens us from sleep, and all entirely independent of our wills—here is this great Power working within us, and saying to us, "If you will just obey, I will heal you,—and I will not only heal you of the disease that you already have, but of the diseases which you have a tendency to, and which you haven't got."

This is the power of God. This healing cannot be wrought empirically. It must be done in harmony with the great forces of nature. It must be done consistently. When I find a man who has been chewing and smoking tobacco until he has a "tobacco heart," and I say to him, "You must stop using tobacco,—you have a "tobacco heart,"—and he says
"Doctor, can't you cure me without my giving up tobacco? I have smoked ten cigars a day for the last ten years, and I will smoke only two or three cigars a day—can't you cure me without giving them up? " "No," I say, "because that is the cause of your "tobacco heart." The Almighty himself cannot cure a man of the tobacco heart unless he gives up tobacco. Why? Because he cannot be inconsistent. We have been taught that God can do all things, but there are some things that he cannot do—he cannot lie—he cannot be unfaithful and untrue. He cannot be inconsistent; he must be consistent with himself. He is infinitely, and that fact limits him and he cannot do wrong. You and I may be wrong in many ways; we can do wrong and be disloyal and untrue; but God cannot be untrue—he must be true, though every man is a liar.

Now this power works with us when we work in harmony with it. But when we work against it and cultivate disease, then God cannot heal us. We can only be healed when we ourselves sow the seeds of health. When we do that, we may reap a crop of health. When a man sows corn, I feel sure that he will raise a crop of corn, because the same power that was in the corn when he put it in the ground will bring it forth corn. Every blade of grass is a witness that the power that made the first blade of grass is still at work making grass. And the fact that see a little boy growing up to manhood is proof that that power that first made man is still at work making men, and saving men. And when we see these things going on before us, we have evidence that that same power that made and created the world is still at work in the world. He can work for us, and he can create within us. David, you remember, prayed that God would create with a clean heart within him,—and my
friends, that is what we all want—we all want a clean heart, clean livers, clean brains and tissues. We need just exactly what David did, and we have to come to the same source to get it. Whether we believe or don't believe—whether we are Christians or not; whether we have faith or don't have faith, we are all compelled to come to the same source of life and power, because there is only one source of life and power, and there is only one source of healing.

I expect you think this is not much of a medical lecture, nevertheless, I want to tell you that I am talking scientifically. I am not talking as a churchman, or as a partisan of any creed, or of any religious cult, but I am talking to you as a scientific man and a physiologist. I am telling you just what I read in nature. I have studied the grass and the trees and the flowers, and this is what I read in them, as well as in the men and women with whom I come in contact; and this is what I read when I look at myself and see the wonderful things at work in my body. The reason I have presented these thoughts to you is, that I want you to see that this is the foundation of all our work in all our sanitariums: we recognize God as the great Healer, and we recognize obedience as the one thing that is absolutely essential, as a condition to enable this great Healer to do for us the thing that we need to have done, and that every one needs to have done. I want you to have faith in this great Healer. I am not asking you to accept anything mystical, or to accept any creed or doctrine. I am not asking you to accept anything by faith in human statements or evidence. I am only asking you to recognize things that are, and the things that every man's common sense tells him when he looks out and sees the grass
growing, and all the other wonderful works of God in nature.

But some say, "That is nature." I have also read, in some very foolish books about "God and Nature," Now there are not two Gods. If nature is a creator, then nature is a God, and we have two Gods. So when we say "God and Nature," in speaking of the works of God, we have one superfluous word. And when, in speaking of creation, we say "God and Nature does and so," we have one superfluous word, because there is only one power that can create; there is only one creative force, and that force is God, and if you say it is mixt Nature, you have used the wrong word. As I look out upon nature, it is simply a phenomenon, an expression of things. Nature is simply God at work. Nature is simply a feeble expression of the activity of the power behind it--God at work. Nature is simply God at work.

Now I ask you to look out and see this evidence of God without, and look within you and see the evidence of God within, and cast away all your previous conceptions, prejudices and notions about God as being "a God of infinite justice--" Oh, my friends, how that word has been abused! For instance, that God has to do this and that thing "to satisfy the demands of infinite justice," and this doctrine has been taught until "infinite justice" has been transformed into infinite hard-heartedness, and men cannot see anything about God but "JUSTICE," a being with a quiver full of lightnings to strike men down if they don't do just right. That idea has hidden God from men; it has covered up the true conception of God, and so blinded men's eyes that they cannot see the true character of God.
Now let us look out and see God in the growth of a little child. Let us see God in all things about us; and, as we see these things—these evidences of the wonderful power of God to create and to heal, let us lay hold of this healing power, and say, "We will appropriate this great healing energy to ourselves. The faith we are to exercise, is not to believe in something far away, and that we don't know anything about,—a simply a blind belief—that is not it. Faith is to accept the evidence presented to your intelligence—the overwhelming evidence of what you see—and through that evidence believing in something that you don't see, and that is beyond and behind all this evidence.

So, through the evidence of things that we see about us, let us put our trust in the great Healer, and believe and know that he is ready to work for us. But the one condition is obedience on our part—physical, mental and moral obedience. That means that we must conform to everything that we know is right; let us cultivate right habits. If we have been traveling in the wrong road in our habits, let us turn right about and sow for health. So far as I know, those who have attended our Sanitarium Training School have been under such an influence that the man or woman who had not been thinking of these things could get into the right channel, and accept the right thought and impulse. I remember the case of a man who some time ago came here for treatment, and who said to me, "Oh, doctor, if I could only keep myself sober, I could be successful in business. I have got a good business, and it is a splendidly prosperous business; but just when I have got it to going well, I go off on a spree, and during three or four weeks I throw myself away; and when I get back to work again, everything has gone to the dogs, and it takes me months and months and months and months to disentangle things again, and get
to going again. Oh," (he said) "if I could only restrain my appetite—
if I could only conquer this appetite for drink! Can you help me?" I
said, "My dear man, I don't know of any other help but this: Get on
your knees with me, and let us put ourselves in harmony with God."
We knelt down, and he said, "God help me!" and he did. He got up
and he said, "I feel as I had not strength and help." Now what was
that that helped the man? There was nothing put into him; but his will
was changed; he put his will in harmony with God's will, and then, in-
stead of working against God, he was working with God, and some had the
same power to help him, that made the world and that upholds the whole
and keeps it in order, so that he had power to keep him from drink,
and it did keep him from drink; and at the end of two or three weeks
he went home straight and sober, and I believe he has remained straight
and sober ever since. I believe I could refer you to scores and
scores of such cases. Now a man has an appetite for tobacco and other
unwholesome things; or he has a disposition to eat too much or to
eat too fast,—a disposition to do wrong in various ways—these evil
habits become like fetters that bind him, and he cannot break them.
But, my friends, there is a power that is able to break those fetters,—
it is a power within us—not outside but within; it does not come to
us through infinite space to reach you; it is right at hand—a power
within you; a power that is constantly repairing the body, creating
18,000 blood-cells every second. That same power that is working within
us can do for us everything we need to have done.

Now this is simple and scientific, and you can believe it. It is
not an infidel hypothesis, nor a superstition; it is no mysticism. It
is simple, straightforward fact. I hope you will think of some of these
things, and make God your strength and helper,—because God is the great helper throughout the universe, whole universe. God is the great Helper and the great Healer. I am glad you are here, and I am glad that you came here, because I believe that there is healing for you. Here is power that can heal you through obedience, by getting in harmony with "God and nature," as we sometimes say, really meaning the power that is behind nature—get in harmony with that power and it will work for you miracles of healing. I thank you for your very patient attention.
FACULTY MEETING

Room 14 College. Apr. 28, 1903. 12 A.M.
Chairman: J. H. Kellogg. Secretary: E.L. Eggleston.

Dr. Kellogg: I think we will all agree there is no institution connected with our medical missionary work to which the work is so indebted as the American Medical Missionary College. I think we will also all agree that the American Medical Missionary College is most important of all our institutions connected with the medical work, and from my standpoint it is the most important educational institution of the entire work. It has cost the denomination the least in money, anxiety, worry, care, and thought; and has received the least attention from the people as a whole.

We have felt the last four years, and particularly the last year I have felt very deeply, that this work has reached a point where its interests were seriously jeopardized with the failure to offer the proper facilities to give this school the appearance of stability. We feel and know that it is stable, but the world can not know that. An institution that sends out men with diplomas, which are expected to be recognized in courts of law, by state governments, and international governments, and by foreign countries, must have some visible stability, something which can be seen. I feel that this is an impediment we can no longer allow to remain
in our way. Our recent embarrassments have prevented us from carrying out the effort we started two years ago. I have felt that Dr. Paulson has already felt so intensely over the matter that there was no need to add to his feelings, but I have felt deeply about it because I have been very seriously afraid during the last six months that we were in great jeopardy and some very earnest steps must be taken right away to put the school on a more stable and creditable basis. There is no question but what we receive more credit than we deserve. Our circumstances have made it impossible to do the things which we really felt we ought to do, but the time has come when we should do that thing. Patience will be exhausted after a while and confidence will be at an end unless we do something very soon.

Dr. Paulson: There are two things in my mind; the immediate problems and the future problems. We have to make a $1000 worth of improvements in our property within the next nine days which will not increase its value at all. Our hospital lease runs out the 1st of May, and I hate to go back to Chicago and leave things kind of hung up in mid-air. I do not feel we can go in the dark in this way any longer. We are in a worse shape to-day than we were a year ago. Some of our students too, think that this talk about improvements and all that is really a fake after all. Some of our teachers are beginning to get a little discouraged about it too, but the work has gone on and the Lord has blessed us. If this conference closes and
we go back to the students and leave the thing in just the shape it is, I am bound to say the thing of building is not the chief thing after all. There are a good many students who could not sense the situation, and they have had a sort of feeling that the medical school, although it is the most important in many things, comes out at the little end of the horn. They are free to express these things too. They are giving their time to the preparation and they feel that they should have a little of Dr. Kellogg’s time and attention and that of some of the rest of us. We should carefully consider how we can straighten this work, and see how we can improve it in every way, not only in the question of building.

Dr. Holden: I appreciate heartily everything Dr. Paulson has said and everything Dr. Kellogg has said.

Dr. Kellogg: I guess we all know it is so.

Dr. Olsen: I am sure I need not tell you that I am very much interested in the question before us. I look upon this school as the most important school that we have in our denomination or in our work, -- this American Medical Missionary College. And I believe if we could see the future as God sees it, we should see a large work for the students now in the school and those that have graduated from the school in preaching the gospel of salvation to all the world.

I do not think any of us can realize the vast importance of this school, and consequently the importance of strengthening it. I do not exactly agree with Dr. Paulson in one of his statements. Perhaps we do not quite understand each other.
For I believe that many of the difficulties the doctor referred to would be overcome by providing a proper home for this school in Chicago. I believe a lot of that would be overcome if we had a good modern building of at least 100 beds in Chicago, with first-class treatment rooms. I am thinking about a branch school in London, but I do not believe the time will come until we have something stronger here. I believe it is quite as important for us to have a home for the school as to have a Sanitarium in which to give treatment. I believe the time has come when we that are particularly interested in this proposition will as individuals begin to assume the responsibility, and by our own effort start the ball rolling. I am prepared to consider a proposition like that this morning favorably and take steps. There must be counted all the graduates of this school, and all of us who have had the privilege of teaching in the college, and I want to count all the doctors, every one of us engaged in medical missionary work. If every one of us should start a campaign it would not be very many months until we had a building. I believe the time has come for that.

I have been praying and thinking about it ever since I got a letter from Dr. Kellogg in regard to the strengthening of the American Medical Missionary College. I have said that we have been doing, and are now doing such creditable work that we ought to have recognition. We are doing the work just as thoroughly and a great deal more thoroughly, because we put God, conscience and soul into it, and many of these other schools do not do this.
at all. The reason why we can not get recognition now is because we have not a home for the school, -- a house for it. It is not necessary to have a very large one. A well equipped hospital of 100 beds at least, perhaps 130 or 140, (Dr. Holden: Give us one of thirty rooms), with good class rooms properly fitted up, with dormitory attached or nearby where the students could be well housed and cared for, it would only be a very short time until we could get full recognition in England. This would only put the school where it should be to-day in reality, but we have not the recognition.

Men say, "It is very good if you are doing that work; I believe it; I take your word for it, but where are you doing it?" I have had a number of talks with the secretary of the Royal College. In England they do not accept a College just by the presentation of the faculty or the board of trustees of that college. I will tell you something now which is not generally known in this country. They sent a committee of three responsible men over in England as a committee to inspect our medical schools over here and to make a report to them as to their standing. This committee went to the large schools in the different states and made a written report as to their standing and the kind of work they were doing -- a very voluminous report -- and it is on that report that a good many schools get recognition. They have an idea in England that we pay little attention to entry requirements. They say, "some of your schools do first class work and as good work as you can wish, but
you have a very loose and open door to admit students. They have a very rigorous principle there that in the beginning of the study of medicine the student must pass off all the various requirements at one and the same time and in writing, and it goes into the record as such. They pay no attention to the credits, except of course diplomas from recognized colleges.

Dr. Davis wanted his wife to register there in England, and the Apothecaries' Society which recognizes women would not accept her, but Dr. Davis himself had such good recommendations from Vaughn, that the Apothecaries' Society accepted him on the strength of his membership in the Royal College of Surgeons. Then he said, "Here is my wife on the same platform with me," so they let her in too. They even go so far as to set a minimum amount of investment which must be made in the College which seeks recognition. They want facilities provided so that the work and the subjects can be taught in a proper manner.

Dr. Kellogg: They want and everybody else wants that the medical college has evidence of stability, so that when a man with a diploma from this school goes to the authorities he will not be met with the report that the college is extinct. Such a thing as that will be a terrible blot upon a man's diploma.

Dr. Olsen: They want as Dr. Kellogg says some evidence of stability, and about the least thing is a home for the College; something that belongs to the college and devoted to the teaching of medicine to the students. There is no chance for any question of recognition, unless we have a home for our
college. It seems to me the time has come for us to take hold of the matter in earnest. I believe God's blessing will rest with the effort. I believe that we ought to consider that here in this meeting. We ought to lay definite plans for securing a building and hospital. It is not such a large matter. I suppose $100,000 would go a long ways towards it.

Dr. Kellogg: Less than that would do it.

Dr. Olsen: It is not such a large amount of money, and I believe if we started the effort here there are people who will help us carry it out.

Dr. Kellogg: We need $200,000; $100,000 for Battle Creek and another $100,000 for Chicago. At the last Conference it was voted to raise $100,000 for the Medical Missionary College with the understanding that it should be in Chicago. Then it was voted that this Battle Creek college property should be purchased by the Sanitarium, and then afterwards agreed that it should be purchased by the Missionary Acre Fund, and the property should be turned over to the Medical Missionary Association that it might be used for medical purposes. Now we have that matter in mind just now. Eight thousand dollars has been raised this year towards paying for this building. Some portions can be sold off perhaps, or we may need the whole. This building can be fitted up for a medical school or hospital in part, or it can be sold to the Sanitarium and another building put up, or South Hall, or East Hall, or West Hall, can be used as a hospital. It has been intended to use East Hall for a hospital perhaps, for a certain class of patients and
the clinical work for the students. It is my idea that the medical student should have clinical practice from the first day he enters school, but we need just what Dr. Paulson is calling for now in Chicago, because it is the home of the American Medical Missionary College, though what we have here in Battle Creek can be incorporated with the Chicago building.

Dr. Olsen: I believe we could do it in this way: Each of us taking the responsibility for $100.00 say, and agree to raise it by the last day of this coming December. One hundred of us raising $100 each would make $10,000. I hope some action like that will be taken here today.

"I move, that all the alumni and all teachers, past and present of the American Medical Missionary College, and all the doctors in our Medical Missionary Work consider this question and engage with us heartily in raising the means for securing a proper hospital and college building in Chicago, and that we become responsible each for a certain amount, either individually ourselves, or through others, and that we pay this money by the end of this present year. Seconded."

Dr. Holden: I have a little after-thought about the work in Chicago. I think I will leave Chicago at the end of this year, but I still have an interest in the American Medical Missionary College and always will have them at heart. I do not think it takes a vision to see that unless something is done in Chicago immediately in the line of equipment the Chicago end of the American Medical Missionary College may as well be
discontinued. It is not a matter of recognition in England that we should have something done there sufficiently creditable so that we need not lay awake nights for fear the health authorities will close us up. Some of you don't know what we have to contend with down there. There has been no time in the history of the American Medical Missionary College in Chicago that we have had a hospital that would stand an inspection of the health board. There has been no time that our hospital facilities would pass an inspection by any health board, and the only reason why we are doing business down there now is that when the health authorities came down to see our work, Colloran took them out in a back alley. They never made an investigation; I don't know why, but we have never yet been on any sort of a hospital footing in Chicago. We have the poorest, dirtiest, most incomplete hospital in the city of Chicago to-day, and we stand for the highest things that not one of the others are standing for.

We even had to seal up with collodion the surgical wounds to keep the bed bugs out. It has happened in the hospital where we are now that I have come down the next morning after an operation and found the patient complaining of having been bothered by bed bugs and with rats during the night. It is almost impossible for patients to sleep there with the cars clanging by day and night.
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It is not possible to properly heat the building although twice as much is spent to keep it warm as should be. The coal gasses are so thick in the surgical ward that it gives me a terrific headache to spend fifteen minutes of my time in there, and if that is the way it affects me, how do suppose it is with the poor patients. The bathrooms and the rooms used for the surgical ward do not receive a ray of direct sunlight. They are nasty, dirty places, and you cannot help it at all.

Now something must be done for the Chicago end of the American Medical Missionary College, or it will get into disrepute all our Chicago work. We do not have very many patients there, and if it keeps on a little longer, as we have for a while, we will soon have no trouble about having room for new patients. Good Seventh-Day Adventists say they can hardly recommend our place to their friends, because the conditions are so poor. The patients get well, though. It has been over a year since we have had a death from surgical operations in our hospital. Of course we have had one or two deaths from chronic cases that were dying before they came to us at all.
But something must be done. Our students are feeling it. They are going to leave, and we cannot blame them a great deal either. I take exceptions to Dr. Olsen's proposition for a 130 room hospital. If we had a hospital which could accommodate thirty beds, and that were clean, light and airy, that would give us a footing there and we could do good work.

Some plans have got to be made to support the College if cases come along especially interesting and instructive to the students, we should be able to take them in and care for them. As it is, many of this class of patients are sent on to St. Luke's and other Hospitals, which we could utilize to exceedingly good advantage if we had the facilities for taking care of them properly. When we have buildings properly fitted up and the equipments are such as they ought to be, we could charge the students to help support that thing. I think this policy of giving the students their tuition is rather a bad policy. If they pay for what they get and we gave them what they paid for, everything would be on a better footing.
I do not think we should wait about this thing for another year. Something must be done this coming year. We have been putting it off from year to year for five years, and it looks further off now than it did five years ago. Now is the time for us to do something.

Dr. Kellogg. The thing is coming. We made a great jump this way yesterday.

Dr. Paulson: I do not want to say a word to dampen what Dr. Holden has said. I do want to properly emphasize the truth of Dr. Holden's last statement. We have debt, that we ought to settle immediately, to put our Chicago work in better shape.

Dr. Kellogg. I wish just to make this suggestion. The things coming out here are just the things that are very important to be said in our public meeting. We certainly ought to do this. We ought to take up this question in open meeting. These people here are not likely to read it in the Bulletin, for they are more or less conversant with the work and are too busy. It is highly important, it seems to me, that this thing should be done, and I trust that it may be done.

Dr. Paulson: The hospital as it is is a losing proposition. Every cent we are able to earn in the Sanitarium must be put into the Hospital to keep it going.
Dr. Haskell: Several times since I have been out, I have started to write a letter to Dr. Eggleston, asking that we might make some sort of a fund to which the alumni can contribute. I am willing for the help and the advantages which the American Medical Missionary College has afforded me to sacrifice to a considerable extent that others may have these opportunities. I wonder if all the alumni could not contribute annually to the support of the college. I would like to see some such provision put into this motion that we could have a yearly contribution to the American Medical Missionary College.

Dr. Olsen: Just another word. I do not mean from my remarks to defer the matter. I can appreciate, I believe, in view of my past experience in the school, especially at 1926, that what the doctors are telling us are true. I do not wish for a moment to defer the thing, for a moment longer than necessary. When you come to vote on this question, I want you to realize that the next thing after that I am going to make a call to see how much you are going to do. If we can do it this summer, I say, let us do it, and personally I would be in favor of going into debt to do it, as much as I despise debt. I do not believe in going into debt, but I do believe in carrying on the work of God, and that is more important than some policies we subscribe to some times. Something there is nothing of greater and vaster importance in this world than debt, and that is a human soul. I believe in this school as an educational factor for saving souls in this world. I think you all understand thoroughly what I mean by that. I am in earnest about this American Medical Missionary College and I do believe in making definite arrangements for getting a
home and proper hospital for the school in Chicago. I am ready to stand by and help the school in every possible way I can.

Dr. Kellogg. Perhaps we should pass this motion, and then take up some of the various phases of it.

(Motion was carried by unanimous rising vote, after recasting it as follows:

"We believe that effort should be immediately made to provide better hospital and teaching facilities in the City of Chicago, and that we as teachers, past and present, alumni, and physicians interested in this work, pledge ourselves to raise some definite sum to be later fixed, and that we will individually take a part in the raising of this money.")

Dr. Kellogg. The question is, How should the money be raised, and to what amount? The proposition is that the doctors and alumni should raise ten thousand dollars.

Dr. Olsen: I move that the doctors and alumni and all missionary physicians interested in this medical missionary work become responsible for the raising of ten thousand dollars for the American Medical Missionary College.

Dr. Kellogg: Would it not be best to agree to raise this sum as a whole? If we agree to raise the whole amount, perhaps we will bring the thing to pass more easily, but say to ourselves, Let us try to raise at least one hundred dollars each.

Dr. Olsen: I am heartily in favor of this motion, provided we can arrange with a committee afterwards to canvass. I believe in doing something right away. I think the committee should canvass every one of us and put down our names
and the amount we would like to volunteer to raise. I would like to have that thought put into the motion. I would also like to have it understood that this is to be a gift to the American Medical Missionary College, rather than that we merely raise it and become responsible for it.

Dr. Kerby: Speaking of the students paying tuition. I for one would like to have this privilege. Not many of us could pay that sum, but I would like to put in my pledge in that way, that is to pay $400.00 as tuition.

Dr. Kellogg: I think all the alumni feel toward the school a certain responsibility in this way, and would like to show their appreciation by paying $100.00 or as much as they can, or become responsible for that amount. But if a person is putting in all his time working for nothing, and getting nothing, how can he be expected to put in any more?

Motion: That we as physicians and alumni and medical missionary physicians, and faculty of this school, agree to raise ten thousand dollars as a gift to the American Medical Missionary College to provide proper hospital and teaching facilities in Chicago. Carried.

Dr. Kellogg. Here is a question which I have been very anxious to hear discussed right away. Here are several questions. Shall we make a debt? Where shall the building be located? Just how shall we raise the money? What shall be done for supporting the hospital after it is built? What about tuition? What about these buildings here?

I will mention the last thing first. A few years ago Sister White mentioned the purchase of these buildings for the Sanitarium, and everybody rose to their feet and voted that
the Sanitarium should purchase these buildings. I am sure Sister White had in mind the medical missionary work, not the enlarging of the Battle Creek Sanitarium. The matter was so arranged that the International Medical Missionary and Benevolent Association should have control of these buildings, to be deeded to this association as soon as paid for by the Missionary Acre Fund. We thought that was best, as it would bring it under the control really of the American Medical Missionary College, for the International Medical Missionary and Benevolent Association would take care that the College had the benefit of these buildings rather than the Sanitarium. It would have better that this gift should be given to the charity department than to the Sanitarium, which has a means of support. Now, at the last General Conference we went ahead on that basis, and in order to facilitate this transfer there was created an intermediary Association known as the International Medical Missionary Training School Association. Now this Association was recognized as a sort of dummy association to act as intermediary. It was necessary that this should be done for there was no one who wanted to assume the responsibility for the old college debt. Neither the Sanitarium, the Review & Herald Board, nor the Medical Missionary Board wanted it, so it was thought best to make a new Association to carry that debt.

Now at the General Conference held at Oakland, at one of the last meetings it was voted to request this International Medical Missionary Training School to turn over this entire property to the General Conference in harmony with the general action taken there as you know. In harmony with that, the vote was passed requesting that this property be turned over
to the General Conference. It was also voted that the Internation Medical Missionary and Benevolent Association should organize itself in such a way that it would become a department of the General Conference. Perhaps some of you didn't see that.

Now we have peace as you know. We decided to have peace any how. But I suppose you know and understand that the peace we have to-day and harmony, and unity and concert, is without any discussion of the mooted questions. We declared that we would have peace anyhow. Before, we declared we would have peace if we had to fight for it, but now we have adopted a different policy, that we are going to have peace without fighting for it, and we are going to make it possible to settle all these questions without any body being waged war upon, and I thank the Lord we have gotten to that point. I feel it is a great victory for truth that this thing has come about. I want to say that I thank the Lord that he gave me the opportunity as a medical missionary to offer the concessions that brought about this peace; it is a delightful thing to me, and I am glad to do it, and I did it for you as much as for myself.

But here are all these questions to be struggled with and settled in the future, all these questions that existed before; but we are going to have them settled without war. There will be no attempt to settle them by force, by votes, by bringing about situations that would compel submission. This has been the policy and we are all in it. We say things
that we thought were an attempt to drive us, so we said, "we will fix ourselves so we can not be driven," but everybody is tired of it, and we are not going to have any more of it. But here is a question which ought to be settled to-day, the question of this very building: What will be done with this building?

It occurred to me, while sitting here, that we might request this International Medical Missionary Training School to turn over these buildings to the American Medical Missionary College, and ask the International Medical Missionary and Benevolent Association to carry forward the campaign through the Missionary Acre Fund with the understanding that we are raising money for the American Medical Missionary College, but in this way we will also be raising money for the Berrien Springs school, it will buy this building and build their building. This offers a double reason for raising the money.

Ques. How much interest is being paid?

Dr. Kellogg: About $3,000. The Battle Creek Sanitarium is paying the interest for the rental of the buildings. The Battle Creek Sanitarium has been paying $5,000 a year for the use of these buildings, and that is far more than they are worth; but we agreed to do that in order to help this thing on. Since the fire, however, we have not been able to go paying this since the fire. The Missionary Acre Fund has gone on the indebtedness. Our actual debt is now $98,000. With the American Medical Missionary College and the hospital as its
ultimate object, it can be raised I am sure. We can do this easily in a few years, for judging by the experience of the past year, the money can be raised at the rate of $15,000 a year. This will, I think, help the whole situation. I think it will be an easy way out of the embarrassment on both sides of this thing. The proposition is, that the Medical Missionary Board ask the International Medical Missionary and Benevolent Association Board to take such steps as will secure these buildings definitely and permanently for the use of the Medical Missionary College.

Dr. Reed: I make that motion.

Dr. George: I second the motion.

Motion carried unanimously.

Dr. Kellogg: With reference to raising the money for the hospital in Chicago. I am satisfied that the patient friends of the Battle Creek Sanitarium and the Chicago branch Sanitarium, the wealthy people who have been cured here, would give money toward a hospital when they would not give money toward a Sanitarium. I am satisfied we can make an appeal to them and tell them that we want to give to the poor some of the advantages which they have had, and in this way get them to help us create a charity department. The putting up of the Sanitarium building here will enable us to demand the confidence, esteem and respect of a much more wealthy class than we have reached before. I believe that these great food companies and the great looking on to Battle Creek and the familiarizing of the people with the name Battle Creek
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all over the United States and all over the world, it seems to me God is doing this thing for a purpose. There must be a significance in this that we can not help but recognize. When I saw that thing it seemed to me a most wonderful thing, the most wonderful thing I ever recognized in my life. I had a dream and I saw myself here in the Sanitarium with my colleagues and about us there were fifteen hundred sick people gathered together in this town seeking help. I can not help but believe this time is coming, not because I had that dream but because things are marching that way. We do not propose to gather them in at all. The people are going to come any how, and other folks have discovered that they are coming. They know that many sick people are coming up that hill and they propose to be there where they can catch the eyes of some of those people. These men who have put their millions into enterprises all about the city have seen that vision of multitudes up that hill. Now the Lord has done that thing and the truth has done it. Through all this storm of mysterious things, which we can not understand or know anything about, the Lord has been working. Here we are, here is the thing going on, and here is our opportunity to do our best to uphold the truth and the principles, and that is all we can do. Why it is so and how it is so, I don't pretend to know. I know I am here and these principles are here, and the facilities are here and the sick are here and they are going to keep on coming in spite of everything. I believe if we put this matter before the
people and keep it before them they will respond. Now having our food business swallowed up by pirates, (at least in the eyes of the public), and our fire, and having our business inquired into by the Citizens Committee, etc., has created a feeling of sympathy for us, and for this medical missionary work. We can present to them our need to have provision for the endowment of hospital facilities here in Battle Creek so we can invite the poor to come in and have opportunity for our students and the members of our faculty here to gain experience in clinical work. We could do this also for Chicago. The whole thing can be brought in in the one plea. How do you feel about this thing of providing proper teaching facilities and putting the school on a better basis?

Dr. Olsen: I move that we lay the matter before the friends of the institution and invite them to give toward the establishment of the Medical Missionary College Hospital in Chicago.

Dr. Kellogg: The reason why I am bringing this forward now is that we can go to the General Conference and show that the Medical Missionary College has a constituency no one else can have access too. That is a good argument, we can give why this thing should be turned over to the Medical Missionary College. Here is a new constituency to help in the establishment of this work.

Motion was carried.
Dr. Kellogg: There are some questions to be referred to the Committee I think. The question of the disposition of the present buildings in Chicago should be discussed. Also whether it is right and proper to make a debt in the establishment of this building. At the present time $10,000 would build the American Medical Missionary College in Chicago and do it easily, because there are parties there who have plans already and have agreed if we put in just a little money, with the property we already own, the security is good to raise the balance at a low rate of interest and put up the building. It is a question of debt. We all feel that it would not be wise to press this matter or any other matter in which the question of debt is involved. I think the Committee should take up the question of how much money we should raise before we can begin the Chicago building; whether we should build in the city or out of the city, and to what extent the present property can be utilized in connection with the building; also what plans can be adopted in raising this money.

Dr. George: I move we appoint a committee to take up these propositions.

Dr. Kellogg: There are really four propositions which the committee ought to take up. Should not the motion be recast, something like this:

MOVED, that a committee be appointed to consider the following questions: How much money shall be raised before we begin building; where shall we build; to what extent and how shall we utilize the present property; what further suggestion
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can be offered regarding ways and means for raising the money? Motion carried unanimously.

Dr. Olsen: I have thought about the proposition for several days, about the hospital and college building in Chicago and I am in favor of laying the matter before our General Conference brethren and telling them just how we are situated and invite their co-operation in this so we will not have a penny of debt at any time. But if it is not possible to do this without a debt, then it seems to me proper to give a careful consideration to the question of involving a certain amount of debt. But I think we ought to take the other step first, and I do not know but what we can make this so clear to the brethren that they will see the need of it.

Committee on Plans: Drs. Olsen, Paulson, Eggleston, Simmons, Stewart.

Committee on Subscriptions: Drs. Mortensen, Olsen, Harris, Kirby, Holden, Eggleston.

Meeting adjourned to the call of the chair.
NEW SAMITARIUM

DEDICATION EXERCISES. May 31, 1903.

Hon. Fred. Perry Powers, Chairman.

CHAIRMAN: Ladies and Gentlemen.--We have met here this afternoon in response to a sentiment as old as civilization, a sentiment which desires to express itself in the approval of that which seems to have been for the general good, and for the advancement of better purposes.

Yesterday, throughout the United States of America, in every city street, hamlet and hamlet, processions of people walked behind the colors of our flag, and to slow and solemn music, thus testifying their appreciation, their love and their gratitude to the men who, in years gone by, in a service which called for many lives, had performed for our country that which demanded the greatest sacrifice ever known since this world began. That sacrifice, in the year 1861, which yesterday's memorial brought to mind, was not, my friends, that our country might be what we sometimes idly boast of,—the greatest country on the globe, in a military way, or the greatest country on the globe in a merely industrial way, or the country which is in the forefront of civilization in many other respects. The lives which were given up in that great war, my friends, were offered because they believed that this great country, under the direction of God, had a purpose in civilization which could not be served by any other country, or any other form of government.

I believe, in these later years, this great loss of life and treasure is seen to be justified, in great part,—if ever such
loss could be justified. But it is not, my friends--although the boast can well be made--because America stands high, and stands to the fore--but because there has come into our national life, into our community life, and into our individual life a realization of the fact that a man, a community, and a country gains for itself the most, and lives to the highest purpose only when it gives out most from its life, that which will most benefit those around him.

I take it, therefore, that this is a national celebration that we have here to-day. We are celebrating one of the greatest conflicts of this country, and one which we believe stands unique only as it stands united. In this celebration that we have here to-day, I believe that I, though not a citizen of Battle Creek, and not directly connected with this institution, yet, I feel that I, and every other citizen of the State of Michigan may well feel proud, and this is a dedication of an institution which for all time to come will make life in our own State longer and better, and the term "Citizen of Michigan" a prouder one than ever before.

It was because this is true, my friends, that there was sent throughout our entire country, notifications as to the time and place of this occasion, an invitation to the President and Governors of States to be here to-day. And it is because they sympathized with the sentiment thus expressed, that the President of the United States and the Governors of States have sent telegrams of congratulation,--and in many cases, telegrams expressing their regret that they could not be here. This is what our State and country represents, a desire and an ability on the part of the strong, to help the weak; to live in response to the sentiments of the men who gave their lives for this purpose. And this, I believe is the central thought.
expressed by those whose names appear on the program for this occasion.

(Here insert written address by H.E. Johnson.)
KLD. A.T. JONES: In the beginning, God made man upright, but man turned to sin, and consequently, to disease. This is the temple which God had built to glorify himself; to be the place of his own presence, but this temple, through disobedience, became defiled and spoiled by everything that was out of harmony with God's will. God did not make this temple for any such purpose; therefore Christ gave himself to redeem this desecrated temple; to bring it once more to himself, that he might abide therein and glorify himself through that temple. Accordingly, when he delivered his people from the land of bondage and sin—from Egypt—the very first revelation that he made to his people after the scene of deliverance at the Red Sea—was a revelation of his power in giving them a revelation of the true way of deliverance from disease, of the true way of health—a revelation of himself as "the Lord that healeth thee."

This thought was continued, in this revelation, unto the latest writer of the Bible, who has left us, on the behalf of God, this greatest of all possible wishes, "I wish, above all things, that thou mayest be in health, prosper and be in health." Christ, the great center of divinity and humanity, set this example for his church, when, anointed with the Holy Ghost and with power, he went about doing good, and healing the sick and those who were possessed of the devil. And through him, this gift of God's saving help, his way of deliverance from disease—the way of true health, and of God—the true healer of disease—was given to God's church, and is confirmed in the life of Christ for all. But his church forgot this, and instead of prizing or appreciating the wonderful work which God had accomplished in the building of the human body, the soul was lifted (or pretended to be) away above and beyond the body,—the body.
was to be despised and neglected, and accounted as of no value. So that those who were esteemed the most saintly in the professed church, were those who regarded the body as of the least worth, and who had the least earthly use for it. But God will not allow that truth that he introduced into his church on delivering them from the nation of sin and the house of bondage—he will never allow that truth to be lost sight of, or be made little of,—"I am the Lord that healeth thee." He has redeemed a people to himself all through the ages. He has a church still in the world, and he intends that that church shall make known the gift of God's saving health to all people and to all nations.

And this building which we are here assembled to-day to dedicate to God,—this building and all who shall be connected with it, and the church which stands back of it—is intended to make known to all people, God's true way,—the way of his saving health—and, so far as possible, to bring to all mankind, even unto the ends of the earth, and the end of the world, that message of God's saving health which shall bring mankind, so far as it is possible to do it, to the place where each one shall stand as a temple of health to the glory of God and the benefit of mankind. So, to-day we are here to dedicate this Temple of Health, and to let all understand, and we are glad to announce to all, that the only purpose of its being on earth is, as far as possible to bring every soul on earth to the place where he shall stand, with God, in Jesus Christ, a living Temple of Health to the glory of God.

(Here follow speeches of O'Shea.)
FRED. N. SCOTT, A.M., of the University of Michigan:

I take great pleasure, Mr. Chairman, Ladies and Gentlemen, in saying a few informal words on this occasion, for the reason that it gives me an opportunity to pay a debt of long standing which I owe to the head of this institution. It is a twofold debt. The debt is, first, for health and strength such as I now enjoy. That is a debt which thousands of others owe to the head of this institution, and I need not dwell upon it. But I owe another debt to him,—I may call it a moral debt—a debt to him, a revelation to me, at a time when I needed such a revelation,—of a new type of human character.

It was my fortune, when I was a very young man, to act as Private Secretary to the head of this Sanitarium, at a critical period in the development of the Sanitarium and of its director. In this way I came to know the director of the Sanitarium very intimately. I suspect that few public men know how intimately their private secretaries come to know them. Given, a young man with some power to read character, with some education, put into his hands all the correspondence of his employer, let him hear a great part of his conversation, and he is a pretty poor student of human nature if he does not come to know that public man more intimately than his private friends know him,—perhaps more intimately than he knows himself.

I came to see and know Dr. Kellogg very intimately. I came to know his weaknesses,—and doubtless he came to know mine—and if he will promise not to tell anything about my faults this afternoon, I will promise not to tell anything about his. (Laughter.) But I also came to know his strength of character and to admire it. I came to know his courage in the face of emergencies, and his singlehearted devotion to his cause, also to know some things which a physician must now and then seek to conceal—showing his sympathy and warm-heartedness. Perhaps now and then a public man, especially a physician,
must surround himself with a kind of shell, as he cannot live upon
his emotions; but I wish now to testify to the warmth to the core,
of the head of this institution. I knew him intimately, and that was
a revelation to me of a new type of man. I have known two types of
men pretty thoroughly,—the religious leader, who is on fire to
redeem men's souls; and I have known the intellectual leader, the
thinker, the investigator, the scientist who is on fire to redeem the
human intellect; but here I came to know a new character,—a man who
was burning with zeal to redeem man's bodies, a man who was on fire
to see normality and health of body prevail throughout this insti-
tution. This, I say, was a revelation to me of a new type of man, and
at a time when such a revelation meant a great deal.

This is a high ideal for any man,—and it is a high ideal
for the physician. And I wish, here and now to testify that during
those years that I had occasion to know almost everything that any
one could know about the private life of the man, that, so far as I
ever knew, he never, by act or word, or in writing, swerved from
his high ideal. That was years ago. We have met infrequently
since then, but I am ready to believe that he has never, in those
intervening years, has lost sight of that high ideal; that he has
never, for an instant, above this ideal of humanity. And I like to
think of this gigantic building as rising as the visible and
outward expression of that ideal; and I like to think of it,—not
as founded on mere mortar, stone and cement, but as resting upon
eternal principle, and upon the faith that ultimately throughout this
nation soundness of body and normality of health shall prevail. An
institution that is founded upon such a faith as that must endure.

(Appause.)

(Here follow addresses of Nichols, Bush, Webb, and Gardner.)
HON. JESSE ARTHUR: Mr. Chairman, Ladies and Gentlemen: It certainly gives me a great deal of pleasure to be able to add my tribute to that of the gentlemen who have preceded me, in commemoration of this great event. You will all understand, when I say to you that these gentlemen who have preceded me, and have said such kind words with regard to this work, are not in any way connected with this institution, except as citizens of Battle Creek, and well-wishers of the cause which this institution represents.

I am not only officially connected with the Sanitarium, but I am heart and soul connected with the "Battle Creek Idea," and I am proud of it. From the very earliest dawn of human achievement, it has been the intense desire of men to erect some visible monument to give expression, in some tangible form of appreciation of the great deeds of its heroes, the great achievements of its statesmen, the heroic performances of its warriors, and the noble sacrifices of its philanthropists. But, in the march of time, all these visible monuments must decay, and crumble into dust,—although some of them remain seemingly for all time, and apparently for all eternity. We have monuments of this kind, which now exist, and they have been in existence for thousands of years; but we all know that everything wrought by human hands must eventually crumble into dust; from dust it was made, and to dust it must return.

As I stood, on the morning of the 18th of February, 1902, just at that corner, and saw the magnificent old Sanitarium crumbling into ashes, and as the thought occurred to me that this great monument that represented a great philanthropic idea was crumbling into dust, my heart was filled with sadness. It did seem to me that a great and an almost irretrievable disaster was rapidly taking place; that soon there would be nothing left of the Battle Creek Sanitarium.
rium. Dr. Kellogg was not here, and the thought occurred to me, "How will the Doctor view it?" And I said to myself, "It will break his heart." The tears streamed from my eyes, for I tell you, my fellow citizens, it meant a great deal to me, for I loved this institution,—I loved that old building better than I can ever love the new, because it meant to me, the dawn in my heart of all the great ideas that are represented by Sanitarium work. It was the threshold over which I entered into these ideas, and therefore it was doubly dear to me, personally.

But then, as I turned my eyes to the old framed building that represented the beginning of this work, and then looked again on the building that was going up in smoke and would soon be a pile of blackened ruins and ashes, the thought came to me, "This is not the monument of this work,—this is not the representative of the Battle Creek Idea, nor the great work of the Battle Creek Sanitarium that was going down; and when it was told me that every one had been gotten safely out of the building, and when one by one came to me and told me of the heroic courage, self-sacrifice and fearlessness of every one connected with the institution—perfectly regardless of consequences to themselves as they walked through the halls of the old building, or crawling on their knees in the smoke rescuing patients, some of them, as one lady told me, in the last extremity—she told me she thought she had been abandoned by everyone, and a lady nurse, a frail woman, came to her, and said, "Why my dear Mrs. Clarke! Are you still in the building?" She said the nurse spoke to her as calmly and with as little excitement as though she were going to give her a treatment, and she said "I was perfectly reassured. Why, I knew that God was there, and that I would be taken care of." She said the nurse led her by the hand to the fire es-
cape, and she passed out of the building, and said she, "I think I was the last lady that left the Battle Creek Sanitarium on that morning."

When I thought of that spirit, it occurred to me that I had wronged myself and this great work by supposing that when this building was destroyed, there would be nothing left to represent the work of the institution but a pile of black ruins and ashes,--as though the work itself were no longer in existence. Then it occurred to me that the monument of this work lived in the hearts and minds of the people who had been there. All over the civilized world,--I said "civilized world,"--I must correct that, and include the uncivilized world; for, away in the very depths of Africa the Battle Creek Sanitarium and the Battle Creek Idea are known, from call-boy to the head of the institution.

I then asked myself why this was so, and what it meant, and then this thought came to me, that it was because every person connected with this work, as well as the religious denomination behind it which was supporting it, believed in and undertook to practice the principle of the Fatherhood of God and the Brotherhood of Mankind, and the completeness of human existence in the life of God through the teachings of Jesus Christ. It meant that, in opposition to the pure Spiritualism that teaches the unreality of the material world and the insufficiency of mortal existence (characterized by Mr. Emerson as a "bubble," it meant either skepticism on one hand or gross materialism on the other,--it was but a step from the thought of such a religion, and the impulse that stimulated it, to the broadest philanthropy--to the practice and the advocacy of the principle of the elevation of the human body as well as the human soul to the very highest plane attainable. It was but another step
from that thought and that impulse to the development of the idea that all health depends upon natural laws, and that sickness and disease result from the mistreatment of our bodies, and the violation of natural laws; that the fundamental principles of health depend upon the use of natural laws, and the adaptation of natural laws to the cure of disease. And that means that the same principle that created man is absolutely and essentially the only true principle that will cure a man when he is out of order; the divine order and ill health; it means that you have to re-create the sick man—you may only have to re-create a small portion of him, but the principle is essentially the same. Man was created, at first, in the image of God, and every function of his body, or any part of it, when in an abnormal condition, had to be re-created in the image of God in order to make him well. It was that principle, and that principle alone that made this Institution possible, and made it possible that the idea that it represented should spread itself broadcast over the universe.

I had faith, and I am glad to say that that faith was not misplaced. It was founded upon something substantial; it was founded, I say, upon the idea that the great and beneficent Creator of man would never let an institution die that represented these emanations that came directly from him. Why this great pile that we see here is no monument of this work without the spirit that is in it. From the helpers and all connected with this work, from all that inhabit it, from every brick and every trowel of mortar, from every steel rod and every piece of material that is in this building radiates the spirit of the Battle Creek Idea. But take these out of it; take all these helpers with their care and attention, and with the great spirit that actuates them,—take these out of it, and it amounts to
nothing.

When I saw the old building going up in flame and smoke, I thought, "What does this building represent?" Then the thought came,--"It represents the tears of individuals, the self-deprivation, the self-sacrifice, the hunger, the want of sleep, the care and anxiety of all these people who, for more than a quarter of a century had helped to build it up, and that God would not permit that to die or go up in flames and perish that was materially represented in it. And now I can fearlessly look forward, in the belief that God in his infinite wisdom will make this cause and this work greater and grander, and will increase its usefulness more and more for the benefit of humanity. (Applause.)

(Here follows Address by Dr. Stewart. See "Enquirer."
Burdick has it, I think.)
DR. MORSE: Mr. Chairman, Fellow Citizens.--I present to you greetings from the Sanitarium family to-day; and I wish to tell you this afternoon how much we appreciate your words of sympathy, as well as the substantial aid which you have rendered us in the hour of trial and difficulty.

The principles of this institution have made possible this day of dedication. Let us, for a moment consider the question,--"What does 'dedication' mean?" Literally, it means "to hand over; to deliver." Technically, it means "to consecrate to some special purpose or use." Is this all that is meant by the dedication of this building to-day? No. It is a far greater work than that.

This work may be typified by the construction of a building,--more beautifully, perhaps, by the growth of a tree, including the growth of the seed-plant, the rootlets underneath the surface, the branches, the leaves and the fruit. The seed-plant in the heart of the earth, expanding now and again, may typify a time of winter or adversity, while the development of the plant means the blossoming of the soul's awakening, and finally the harvest of the soul's complete consecration, when the life is completely devoted to God and humanity.

The completeness with which that work has been going on in our hearts, my friends, determines to us the meaning, to us, of this dedication to-day. If, in our busy life, we have seen time to cherish those things which are noble and true,--the wholesome word, the kindly greeting, the deed that never is seen, but that always helps some one,--if that shall be said of our lives, if not in the past, yet if from this day forth, our lives shall contain more of these things, then this shall be, in truth, a day of dedication for us, and if we go forward in the days that are to be, doing the work
that comes to our hand with that spirit, and with that thought in mind, we shall be "minute men" and women for God and humanity.

DR. KELLOGG: Mr. Chairman, and Friends. I should do violence to my own feelings, and violence to the truth, if I did not at once disclaim all right to any compliments or commendations. I feel that there is but one thing concerning which I should be congratulated, and that is, that I have been so fortunate as to know the truths upon which this institution is founded. So far as the building of the institution is concerned, the credit of that belongs to the men whose calloused hands, whose aching muscles, and tired backs attest to the consequences of the toil which has made this structure what it is; the laboring men, the carpenters, the masons, the men who have wheeled the wheelbarrows, and the men who have piled up these bricks and mixed the mortar are the men who deserve the credit for the erection of this building, yes, and the men who gathered in the money necessary to meet the bills, and the men who have cheered us on, as we have been laboring to bring together the materials and the means, and to make the plans. So far as I am concerned, I am glad to say that I have never, for a moment, thought of "duty," that it was "duty." I have never thought of duty. I believe if I had thought of "duty," I might have done something else. But I have thought only of the delight, the pleasure and the satisfaction, and the good fortune which I have had, to have the privilege of laboring here. And I am sure, in what I say of myself, I speak also for all my colleagues and for my comrades who have borne the labor and the toil, and for myself, as I have said, I cannot take any compliment or commendation whatever.
Now I wish, my friends, that you should not look upon this building simply as a great structure which you have come here to dedicate; I want you to look at something greater. I want you to see the great principles, and the great truths for which this institution stands,—and I feel that you do see them, otherwise you would not be here at this time. There are buildings far greater than this; there are buildings far more beautiful than this,—there are structures in every respect more beautiful and more wonderful than this. I feel that your presence here to-day, and the presence of these distinguished gentlemen upon the platform, and of this great multitude gathered upon these steps—I say I feel that your presence here, is evidence that you do recognize the ideals for which this institution stands, and that that is what brought you here. And I thank you for your presence here as an approval of these ideals, and of your approval of what we have undertaken to do here. And I want you to look at this institution, not as a monument to any anybody nor to any class of men, or to any body of men. It is more than a monument, my friends. This institution is erected here to be a light-house to warn human mariners off the shoals of disease and destruction. It is erected here to be a light to the world—a light to this city, to this country, to this State and to the world, as far as these truths and principles can be made to shine out.

What these principles are, you know, and what these ideals are, you know, and I will not take up your time in rehearsing them. I thank you again for your approval of these principles and ideals, as shown by your presence here to-day. And I wish also to thank these distinguished gentlemen who have left their burdens of State,—who have left behind them their cares and their great heavy responsibilities, and have come here at no small trouble and expense to
stand beside us and to aid us in holding up these principles and ideals to the world.

I thank you, and I also thank the Building Committee who have done most of the mental labor; I have stood aside, having many other things to do, and have only looked on occasionally, to do what I might be able to, but most of the work has been done by others. I also wish to thank my colleagues, and the members of the faculty of the College and Sanitarium, who have labored so faithfully to hold up these principles and this work. And I want to thank these faithful nurses who have so faithfully and earnestly gone on about their work under the most difficult and perplexing conditions and circumstances.

I want to thank the various Branch establishments in other parts of the world who have helped us by their encouragement, and in many other ways, in our hour of trial and perplexity. And I want to thank the members of the Common Council of this city, the Mayor, and the members of the Business Men's Association, the railway officials, and all the citizens of this city, for their cordial sympathy and encouragement. It was this that inspired us to arise and build. If it had not been for that note of courage which was given at that time, I assure you, my friends we should never have dared to undertake to do what has since been done. We could never have done it without your moral support and sympathy, and I want to thank you here to-day most heartily on behalf of all my colleagues for your support and sympathy. And I feel that the kindly spirit that has been manifested toward us is, to us, a guaranty of the good will which will be shown to us in the future; that the support which has been given to us is a guaranty to us of the support which you will continue to give us—because we are worthy, or because there is in ourselves and of our-
selves any good thing, but because of the grand work which this institution represents, of which we are simply the humble instruments. I want to thank you again, my friends, for your presence here today, and for your patience; and I also want to thank these gentlemen for the kind and encouraging words which they have spoken this day, and for the eloquent and able addresses to which we have listened. And I want to thank the public in general, the railroad officials, and to all who have helped to make this occasion a pleasant and interesting one.

And I feel, my friends, that I want to thank the kind Providence which has stood by us and helped us. I want to say to you that no human hands have built this building,—except as men have toiled in a mechanical way; that no human brain has been able to conceive the things necessary for the construction of this building. I am glad to say to you, as a Christian man, that the Building Committee, and the Board of Directors, and hundreds of others who are interested in it, have built this building upon their knees. Upon our knees we have earnestly asked God to send us the things necessary for this purpose, and those things have come day by day, week by week; when it seemed to us, at times, during the last few months, that we were at the end, and could go no further, we have again earnestly asked Providence to help us,—and help has come, just at the opportune moment. And so we bring this building to you,—not as our work, but as God's work, and we ask you to accept it as such. (Applause.)

PRAYER by Chaplain McCoy.
AFTERNOON SESSION.

At the Tabernacle, May 31, 1903, 7:30 P.M.

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RELIGION AND HEALTH.

ELD. A.T. JONES: The next subject on the Program is, "Religion and Health." The relationship between these, as it truly is, is to-day very little understood, even by the religious. In this of course we consider only the religion of the Bible, the Christian religion, and I shall not take time more than to call attention to just a few statements of Scripture that have a direct bearing upon this subject, and that announce the very principles that are recognized by physicians everywhere as being an essential to recovery from disease, and to good health.

For instance, one passage of Scripture reads thus: "Peace, peace," saith the Lord to him that is weary, and I will heal him. The wicked are like the troubled sea which cannot rest, whose waters cast up mire and dirt. There is no peace," saith my God, "to the wicked." Thus showing that peace has a place and a bearing on health,—"'Peace, peace," saith the Lord "to him that is weary, and I will heal him.'"

Another verse: "The inhabitants shall not say 'I am sick;' the people that dwell therein shall be forgiven their iniquity." Thus the Scriptures reveal to us the fact that forgiveness of iniquity has a place in the recovery from sickness. "The inhabitants shall not say, 'I am sick;' for (because) the people that dwell therein shall be forgiven their iniquity." Thus the forgiveness of sin, and the peace of God, each of these, and one with the other, come to the heart; and that peace of God forgiveness which brings the peace of God, are both announced in the Word of God as in direct connection with health. What physician is there in the world, even though
he be an avowed Atheist, who does not hold and teach, that peace of mind, quietness of mind, and a quiet life, have a direct bearing on, and are direct elements in recovery from sickness? What physician will not tell you that a disturbed mind, a restless heart, and an unquiet life are direct hindrances to any one's recovery from sickness, and that the very opposite, peace, quietness, rest of heart, mind, and life which the Scriptures present to us, are a direct element in recovery from sickness. Consequently the Bible presents to us the fact that there is a direct, specific connection made by the Lord in his word between religion and health.

Another citation, there are many of these Scriptures—Jesus tells us, "Be not anxious as to what ye shall eat or drink, or wherewithal ye shall be clothed; your Heavenly Father knoweth that ye have need of all these things. Take no thought for the morrow, for the morrow shall take thought for itself." Teaching us this very trust in God and rest in the Lord which takes away which takes away all anxiety about the affairs of life, and that of itself is an element of good health and recovery from sickness and exemption from disease.

Another, Good Cheer. What is a greater element of health and recovery from sickness, even, that good cheer. Very good! What does the Lord give us? "Be of good cheer, I have overcome the world." So all the perplexities of life, all the burdens that may come, all the distresses that we may meet are met by this prescription of the Lord, "Be of good cheer." And when that is received by each one—the good cheer which comes by that word of the Lord, and that blessing of the Spirit of God which brings good cheer, peace, quietness—the peace which passeth all understanding—
you have the one way of life.

Again, a Scripture,--"A merry heart doeth good like a medicine-- not a silly, giddy, thoughtless heart, but, as I once saw expressed by a motto in a large dining-hall, "Eat, drink, and be merry,--but not foolish." That is the thought,--not a foolish heart; not a silly, giddy, thoughtless heart, but a heart of good cheer. That "doeth good like a medicine"--and that is the medicine that the Scriptures prescribe to us. So I could occupy my time in citing only one class of Scriptures, revealing to us the fact that the Word of God, the religion of the Bible,--the religion of Jesus Christ, is intended to be the direct way--the "open sesame"--of health. The Lord has united these, over and over, in the Scriptures,--for instance: "I wish, above all things that thou mayest prosper and be in health," the Lord presenting--representing himself as "the Lord that healeth thee." What possible higher wish could be presented to the human mind than that you may "prosper and be in health, even as thy soul prospereth."

But the great mischief with the professed religious world is, that they do not acknowledge the great truth that "the peace of God which passeth all understanding" lifts the Christian above all troubles and distresses, and connects him with Heaven, and brings down the joy of the Lord from Heaven and makes it a privilege to live, and gives the peace of God which passeth all understanding. We see so many Christians going round the world with downcast eyes, long faces, and a forlorn, doleful voice, when they meet their neighbors. Anybody can do that,--a heathen can do that--in this world where we have trials, troubles and distresses, anybody can be mournful and sad. But Christians are connected with the Source of joy, the Fountain of Peace and Good Cheer ("true, ")
consequently Christians here in the world, being connected with the Fountain of Joy and Good Cheer, do receive a constant flow of good cheer,—cheery voices, bright eyes and pleasant faces—passing on good cheer to those who do not know that connection, and they can see that there is a blessing there; that there is good in the religion of Jesus Christ, and that they shall want it,—and they may have it, for it is open and free to all.

And so, in closing, I will read a verse that tells the whole story in a few words, which you will find in Romans 15:13: "Now the God of hope fill you with all joy and peace in believing, that ye may abound in hope, through the power of the Holy Ghost." There are multitudes of people who go along through the world almost hopeless and despairing; but here are Christians on every hand that the Lord has placed in the world for the express purpose of being filled with all joy and hope peace and abundance of hope to pass along to the hopeless, the sorrowing and the despairing. Oh, then, Christians, let us all rise to the position that belongs to us as Christians, receiving from the Fountain of Life in Heaven, the peace, the joy, the good cheer that belongs to Christians to pass along to a sorrowing world, that God's saving health may be known among all nations, and his way upon the earth.

(Here follows MS. address of Rev. D.D. Martin.)
REV. W.S. POTTER: In the native city of Columbus,--Genoa, Italy--there stands an appropriate and suitable monument to the prowess of the great discoverer. On the pedestal of this monument is this inscription, "There was one world; Columbus said 'Let there be two,' and there were two." Some centuries after this came Cyrus W. Field, the promoter of the Atlantic Submarine Telegraph Cable. Looking out over the interests of the world, Cyrus W. Field says, "There are two worlds,--let there be one;" and there was one.

We are here to-night in the interest of the unities. All the unities political, social, moral, literary, commercial, are bound up in that mighty cord that lies under the sea. There are many here to-night,--let us be one. (Voices: "Amen.") One in our love to God; one in our love to man; one in our love to each other. We are not here to-night to emphasize diversities, but to emphasize unities. We have been commanded to "weep with those who weep, and to rejoice with those who rejoice. It might be fitting, perhaps, in view of the sad calamities that have come to our friends on the hill in the past, to spend a moment in regret,--but only a moment--only a few notes by Professor Barnes on the "Miserere," but put in the whole anthem of the "Te Deum"...

My subject is The Old and the New. I readily grant Br. Martin's claim for the superiority of his theme; but I claim indulgence for one who comes before you with a theme which is perhaps less calculated to attract your attention. The New has many champions, many advocates. This is an age of novelty--an age of new things. We have our new science, and even our new theology. It is time
that some one arose to champion the Old interests of the Old.

Ah, beloved! there is much that is old that is respectable, that is admirable, that is lovable. After all, Solomon must have been right when he said, "There is nothing new under the sun." Discoveries are generally rediscoveries—new forms given to old ideas. Justice, love, mercy, friendship, humanity—all these great truths, as well as the great body of truth itself—are old. David Swing, and I may be permitted to borrow a few flowers of illustration from that most eloquent man—says that "the Past and the Future constitute two continents" and possibly I might venture to add that those continents are united by a narrow isthmus of the Present. The true relation of the Old and the New is thus intermittent—they are not antagonistic. There must always be the Old and the New. Then remember that the Old is ever recurring—ever becoming new, and the New is growing old—that is to say, if it is worthy—otherwise it perishes.

The goddess of yesterday is Memory. The present has no particular divinity; and the goddess of to-morrow is Hope. Memory with seed is a granary for to-morrow's sowing. Memory is an armory with weapons for to-morrow's battle. Memory is a library with knowledge for to-morrow's emergency. The rain that fell yesterday disappeared at the roots of the flowers; to-morrow it will reappear in blossoms laden with fragrance. Thus the New and the Old are counterparts, complementary—and supplementary, if you please—to each other.

The bearing of this upon the great theme that is before us tonight, is evident, I think, as applied to sanitariums old and new, during thirty-seven years, rich with history, feeble in its beginning, those years also represent struggle and sacrifice, and hope, though hope often deferred. Those years represent the putting in operation that which the Chairman of this meeting (Eld. A. T. Jones) has so fitly
suggested to us in the relationship of Religion and Health. There is a beautiful spirit that dwells within the walls of that institution. It has often been a duty and a privilege to my brethren and myself, of the ministry of this city to visit the sick within the walls of the institution, and find hovering about the sick the beautiful spirit of which brother Martin spoke so eloquently. Multitudes all over this land, and in many foreign lands have carried away the blessings of restored health, and the "peace" that was referred to by Br. Jones.

Macaulay said of James II, King of England, the notorious tyrant and bigot, that he was a man who never forgot anything, and a man who never learned anything. Here again is suggested a relationship between the Old and the New. I trust that those whose lives and interests and callings and pursuits are so closely identified with this great institution are of such temperament and genius that they shall learn well the lesson of thirty-seven years. There have been sorrows; there have been afflictions, but God has turned the darkness into light, and made the morning break upon the night of their severe sorrow.

When Joseph was sold by his brethren to the caravan in the desert, his brethren meant it for evil. But Joseph arose to the highest position in the great empire of Egypt. Moses was born in Egypt, and he was trained in Egypt. Then came the Exodus; then the wilderness; then Canaan. When Joseph gathered his brethren about him in Egypt, he said, "God meant it for good." And as I look over your experiences here, and see how wonderfully God has led you, I say, "God meant it all for good." (Voice: "Amen?")

Now the genius of the New, is hope. Following our own impulses, we prize the future more than the past. Man writes the most
of his poetry in the name of hope. Hope is a realm whose gates are always open. This is the genius of the New, and as old forest roots give way to a new and grander forest, so here a new splendor has come forth,—a magnificent temple of health that stands upon the hill, and which has to-day been dedicated with appropriate exercises; and as in God's Word, which I honor equally well with the Chairman of this meeting, we are told that in the day of Resurrection old we shall lay away the garments, and shall arise in newness of life and glory and power. (A voice: "Amen,") so the new building has arisen out of the grave of the old— in newer splendors and proportions. So intimately are the New and the Old associated that there is unbroken continuity in this work. Not for a week, not for a day, — not for an hour—has the work of this institution ceased, and you may say as Tennyson represents his brook as saying:

"Men may come and men may go,

"But I go on forever."

And that stream of blessing and beneficence has not ceased; its banks have been filled with goodness and helpfulness every moment.

When Napoleon led his army from France, in his famous Italian campaign, he came to those great natural barriers that frowned upon "the Little Corporal," he turned and said to his soldiers, "Over the Alps lies our Italy." And so, in spite of these insuperable obstacles, this mighty military genius led his armies through difficult passes and over rugged steeps until they descended into Italy with its soft skies and beautiful plains, and its rich fields and gardens. Beloved, it is after this manner that I prophesy for you, as I look upon the New: Over the Alps of your patience, of your sacrifices, of your energy lies your Italy. May God give you to see it in all its beauty and loveliness.

(Here follow MSS. of Osborne and Roe.)
EDM. S. H. LANE: Owing to the lateness of the hour, I should consider it inappropriate to make an extended address to-night. In the early '60's, a few individuals living here then, became very enthusiastic in relation to the subject of health. They agitated the matter just as far as their influence extended. The probability is that some of them carried the matter a little too far an extreme. Some said they were fanatical, and they called them "bran-eaters." But they were a class of sturdy men and women who had built their theory upon facts instead of fancies, and, believing that they were right, they put an enthusiasm into the subject only of right; and, as the right always prevails, they found followers far and near.

It was soon thought advisable to rear a temple of health, at that time termed "The Health Reform Institute." This institution was opened formally to the public on the 6th day of September 1866. There were not as many hundred present upon that occasion as there were thousands present to-day. The institution was a very small affair,---indeed it was a mere private residence. It had but one bath-room and one bath-tub,---and indeed there was but one patient,---and he was very patient, from the fact that he withstood, during the entire service, our united gaze.

The institution immediately began to prosper, and this was due to the fact that it was founded upon right principles, and it began to grow. Soon an addition became necessary, the addition, if I remember correctly, being 24 feet wide, about 46 feet long, and two stories high, and we said to ourselves, "We will have to be very patient." But we were astonished and deeply gratified to find that in just a few months--or years--at most--the institution was full to
overflowing. Then we began to build on, and we built on, and on
and on the 18th of last February, one year ago, there stood upon
the hill one of the grandest institutions in the entire State, and,
healthwise speaking, in the whole country.

At the time of the opening of the first institution, Dr. Kel-
logg and your speaker were young—to speak a little plainer, we were
mere boys—he in his teens, and I, just past 21. We had taken
stock in the institution,—and, by the way—the only excuse I have
to offer you for mentioning this fact is, that I want to speak of the
original stockholders; they were men and women of real moral
worth. They took stock in the institution, not because they expec-
ted a dividend, not because they expected to make money out of it,
but because they wanted to see a cause which they felt to be a grand
one, prospered, until it should call to itself adherents from
everywhere.

At first it was thought best to divide the earnings; but
those who had put in their money and taken shares and had become
stockholders, saw that if they took a penny of the earnings, it
would cripple the institution. So some of the leaders said, "Here,—
we will ask every stockholder to assign their stock." Circulars
were sent out, letters were received, and almost every stockholder
from Maine to the Mississippi assigned their stock; they gave up all
right to their stock, so far as dividends were concerned, and the
institution grew from its own resources, until it became a magnifi-
cent one. It waited a long time for success, until Dr. Kellogg,
an earnest young man was called to stand at its head,—and he has
stood at its head for a quarter of a century and over, always stand-
on principles which have grown until they have become recognized by
the medical profession at large. And to-day, the old stockholders,
few in number are still longing and earnestly desiring that the institution shall be a grand success.

When the institution was incorporated in 1891, the old stockholders were asked as to whether they would go out or remain, and every one of them to-day, that are true to their principles have a controlling voice in the management of the institution. It belongs to no man; it belongs to no set of men. It belongs, my friends, to God and humanity and the denomination which gave it existence. In its principles, it is undenominational. And its principles to-day are enlivening society everywhere, until the word "Sanitarium" has become a household word everywhere. When traveling upon railway trains, you hear men and women talking about the Sanitarium. Crossing the briny deep upon a steamship, as it plows through the billows, you hear men and women talking about the Sanitarium.

The Sanitarium has advertised this city extensively, and to-day, not only the old stockholders are earnestly desiring its success, but there are thousands and thousands of people everywhere who are just as earnest as these old stockholders are. And we are glad to-day, that the institution has climbed step by step up the ladder of fame, and she is still climbing. The new institution will be greater and grander than the old, and the institution will continue climbing up this ladder until it reaches the last round, and then, at the last moment of time, it will step off that round to receive the results of its grand existence, world without end.

(Dr. Kellogg was here called for, but that part of the Program was a blank.)

SINGING, "Harwell."

Miss Horney
God is Kellogg's Residence
Dedication of Jan. 81/03
(Please file)