JOHN HARVEY KELLOGG (1852-1943)

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MEDICAL MISSIONARY
PUBLISHED

ANNUAL ANNOUNCEMENT OF COLLEGE ISSUED

B.C. Idea Mar. 26/09.

American Medical Missionary College Opens Spring Term March 24

A UNIQUE INSTITUTION

The fourteenth annual announcement of the American Medical Missionary College is about to be issued by the board of trustees. The calendar sets forth the aims and history of the college, its general course of instruction, the list of officers, faculty, trustees, and advisory council, together with a catalogue of students; the whole being handsomely illustrated with cuts of the main college building, dormitories, interior views of the several laboratories, the dispensary, etc.

The recent unqualified endorsement of the school by the Association of American Medical Colleges at its meeting in Cleveland, has had the effect of centering more or less attention upon this unique institution, which aims to send out to foreign fields Christian men and women possessed of the spirit of self-sacrifice and Christian altruism together with the professional skill and insight of a trained physician that shall enable them to carry to the masses of heathendom both spiritual and physical help. As the calendar sets forth: "The experiences of a century of Christian missionary work in heathen lands has amply demonstrated that the medical missionary is the most powerful of all agencies in lifting up these people to the level of Christian manhood and womanhood."

The institution was started fourteen years ago, and has been successful beyond all expectation. Medical missionaries who have received their training in the school are now at work in China, Japan, India, Persia, South Africa, the West Indies, Mexico, New Zealand, and Australia. Its opportunities for a high standard of work are second to none in the United States; students having not only the advantages of the ordinary medical training such as is demanded by the best school in the country, but they have in addition experience in the clinical laboratories and a large practical experience. During their third and fourth years the students attend the clinics of the Cook County Hospital, also medical and surgical clinics at St. Luke's Hospital, while a missionary experience of untold value is afforded by the training in the free dispensary conducted under the auspices of the school in the Chicago Stock Yards district, where several thousand persons receive treatment annually, in addition to hundreds who are treated in their homes by the students and visiting nurses.

The advisory council includes the names of men of large ability and experience not only in medical science, but in missionary, spiritual, and religious activities, notably: Dr. Howard A. Kelly, the distinguished professor in Johns-Hopkins University, and one of the world's most famous surgeons, who takes an active interest in the school, and who has been of great service in introducing it to medical circles where recognition was needful as a means of entrance to certain foreign fields; Sir Wilfred T. Grenfell, who has won a conspicuous place among the heroes of pioneer medical work, devoting his life and splendid attainments to the fishermen on the bleak Labrador coast; Dr. Robert Beebe, for more than twenty years head of the great Protestant Hospital at Nanking, China, who has devoted his life and extraordinary skill as a surgeon in the most self-sacrificing manner to the cause of foreign missions; Dr. George D. Dowkontt, of New York, whose long experience in medical missionary instruction and training and intense devotion to the cause of medical missions during thirty years of medical life renders his connection with the school one of interest and importance. Dr. Alfred B. Olson of Caterham, England, a member of the first faculty in the American Medical Missionary College, who is now devoting his life to an important branch of home missionary work in England, is also a valuable counselor of the college, and Dr. George Thomason, a member of the first class to be graduated from the college, who is now in active foreign work, is a valued source of advice and needful encouragement .

The board of trustees includes the following: John H. Kellogg, Elmer L. Eggleston, David Paulson, Charles E. Stewart, Jesse Arthur. The officers of the college are John H. Kellogg, president, Elmer L. Eggleston, secretary, Charles Stewart, treasurer, Rowland H. Harris, registrar. The faculty includes the names of twenty-four skilful physicians and surgeons whose names stand high in the profession.

Simultaneously with the announcement of the calendar for 1908-09 is the resumption of class work following the spring vacation, March 24. The annual session closes June 11, and the commencement is held June 15.

PROGRAM

Interdenominational Medical Missionary Conference

TO BE HELD IN

The Sanitarium, Battle Creek, Mich.

JANUARY 19-21, 1909

HE SENT THEM

To Heal the Sick and Preach the Gospel

PRESIDENT

BISHOP JAMES M. THOBURN, D. D., India, 1859

VICE-PRESIDENTS

REV. J. B. HARTWELL, D. D., China, 1858
REV. R. H. NASSAU, M. D., D. D., Africa, 1861

HONORARY PRESIDENT

REV. JAMES C. HEPBURN, M. D., LL. D.
China, 1841 Japan, 1859

HONORARY VICE-PRESIDENTS

REV. GEORGE E. POST, M. D., D. D., Syria, 1859
REV. LEWIS R. SCUDDER, M. D., India, 1888
REV. ROBERT C. BEEBE, M. D., China, 1884

Committee of Arrangements

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A. L. KENNAN, M. D., India
A. F. GRANT, M. D., Egypt
ROYAL J. DYE, M. D., Africa

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BENTON N. COLVER, M. D.
MRS. G. D. DOWKONTT
MISS CARRIE ZAHN

Conference Office, Room 105, in Sanitarium, First Floor

Program

Tuesday, January 19

1.00 RECEPTION—Fifth-floor parlor.

1.30 LUNCHEON—South Dining-room.

2.30 PRAISE AND PRAYER MEETING in the Chapel. Leader, Bishop James M. Thoburn, D. D., India, 1859.

3.00 WORDS OF WELCOME
John H. Kellogg, M. D., Chairman.

CITY AND PASTORS.
Rev. Wm. S. Potter, D. D.

RESPONSE FOR MEDICAL MISSIONARIES
Rev. R. H. Nassau, M. D., D. D., Africa, 1861.

RESPONSE FOR NON-MEDICAL MISSIONARIES—Rev. J. B. Hartwell, D. D., China, 1858.

3.30 ROLL CALL OF DEPARTED MEDICAL MISSIONARY HEROES FROM BOTH SIDES OF THE ATLANTIC.

4-5 FIVE-MINUTE TESTIMONIES AND REMINISCENCES OF DEPARTED HEROES.

EVENING MEETING, 7:30-9:30

Chairman, Rev. John A. Brunson, D. D., Japan.

MEDICAL MISSIONS AS AN EVANGELIZING AGENCY.

AFRICA—Rev. R. H. Nassau, M. D., D. D.

CHINA—Rev. J. H. McCartney, M. D.

INDIA—Rev. A. L. Kennan, M. D.

HOME FIELDS—Dr. Wilfred Grenfell, Dr. David Paulson, Dr. Carolyn Geisel.

Wednesday, January 20

2.00 All Missionaries Assemble in Palm Garden for Group Picture.

2.30 WOMEN'S PRAYER MEETING—Second-floor Parlor.

Leader, Mrs. I. L. Stone, India, 1875.

2.30 MEN'S PRAYER MEETING—Chapel.

Leader, Rev. W. B. Boomer, Chile, 1875.

Chairman, Rev. Arthur McCauley, India, 1900.

3.5 THE CONDITION OF WOMEN IN NON-CHRISTIAN LANDS AND THE VALUE OF MEDICAL MISSIONS.

India—Dr. Winifred Heston, India.

China—Dr. Emily D. Smith, China; Dr. May Carleton, China.

Africa—Mrs. Joseph Clark, Congo.

Turkey—Mrs. McNaughton, Turkey.

Egypt—Mrs. A. F. Grant, Egypt.

EVENING MEETING, 7:30-9:30

Chairman, Rev. W. H. Phelps, D. D.

FIFTEEN-MINUTE TALKS ON THE ADVANTAGES OF MEDICAL MISSIONS, INCLUDING

1. Relief of Suffering.
2. Caring for Missionaries.
3. Overcoming Prejudice and Opposition.
4. Opening the Door for Other Workers.
5. Self Support.

Eight speakers, four medical missionaries and four non-medical missionaries: Dr. Charles L. Bliss, China; Dr. A. F. Grant, Egypt; Dr. R. S. Hambleton, Turkey; Dr. A. J. Reid, Hawaii; Bishop James M. Thoburn, D. D., India; Mrs. I. L. Stone, India; Rev. W. Y. Jones, Japan; Rev. J. H. Freeman, China.

A Few Facts and Figures

A hundred years ago there were not ten medical missionaries in the world. Twenty-five years ago there were only two hundred and fifty. Today there are eight hundred and fifty, equally divided as to either side of the Atlantic.

Dr. John Thomas was the first medical missionary from England to India in 1785. He took William Carey to India in 1793, and Carey baptized his first convert brought in through Dr. Thomas in 1800.

John Scudder was the first medical missionary to leave the United States for a foreign land. He labored in India from 1818 to 1853. His seven sons all became missionaries, five being physicians, and his grandchildren are now following in his steps.

Peter Parker was the first medical missionary to China in 1834. He "opened up" China to the Gospel at the point of his lancet, as he gave sight to the blind by removing cataract.

In the United States we have one physician to about every six hundred persons. There are only eight hundred and fifty medical missionaries among more than a thousand millions—not one to a million—think of it, pray about it, and then do something to help.

The American Medical Missionary College was chartered in 1895. It has nearly seventy students at this time. They represent ten denominations, one-third being women. This is the only college of its kind in this land, or in any other Christian country. Catalogs sent on application to Dr. R. H. Harris, Battle Creek, Mich.

The colors of the Conference are scarlet and white, forming a double cross. The red cross of St. George representing medical aid, and the white cross of St. Andrew, behind it, for Gospel effort. Andrew was the first man to lead another man to Christ, and the object of this twofold agency is not only to relieve suffering, but to bring Christ to the world and the world to Christ.

Thursday, January 21

2.30 GENERAL PRAYER MEETING.

Leader, Rev. Benjamin Chappell, D. D., Japan.

3.4 *Chairman, Rev Frank Taber, D. D.*

MEDICAL MISSION METHODS, EVANGELISTIC, FINANCIAL, ETC.—Three Ten-Minute Talks by Medical Missionaries, not yet named, followed by general discussion.

4.5 EDUCATION OF MEDICAL MISSIONARIES IN HOME AND FOREIGN LANDS.

INDIA—Dr. A. L. Kennan.

CHINA—Dr. J. E. Skinner.

HOME LANDS—Dr. John H. Kellogg, Dr. George D. Dowkontt.

6.30 LUNCHEON—South Dining-room.

FINAL MEETING, 7:30-9:30

Chairman, Dr. G. D. Dowkontt.

TEN-MINUTE TALKS ON THE NEED FOR AND VALUE OF MEDICAL MISSIONS, BY NON-MEDICAL MISSIONARIES.

Miss L. M. Rollestone, China; Mrs. Royal G. Dye, Congo; Miss Katherine Gerow, India; Mrs. C. W. Hall, China; Miss Anna Long, Assam; Rev. W. P. Byers, India; Rev. Mathewson, Japan; Rev. E. H. Richards, East Africa; Rev. Fredrickson, Congo; Rev. S. C. Burger, India.

FAREWELL GREETINGS.

Bishop Thoburn, Dr. Kellogg, and others.

DOXOLOGY.

Important Items of Information.

All missionaries and secretaries of Mission Boards who attend the Conference are entitled to free hospitality for one full week during which the Conference occurs.

Missionaries are further entitled to board, room and medical treatment at the special rate of five dollars a week, and can stay on after the Conference, or come sooner, at this rate.

Upon arrival delegates should report at the Conference office, room 105, as soon as possible, for various reasons. The office will be open from 9.00-12.00 in the forenoons and from 5.00-6.00 in the afternoons. All meetings will be held in the Sanitarium chapel.

Delegates are urged to be prompt in attendance, especially at the daily half-hour prayer meetings.

Speakers are urged to be punctual and not overstep the time allotted to them. If they will keep to time there will not be any difficulty, as every hour is definitely portioned out.

Do not fail to get in the group picture to be taken Wednesday at 2.00 p. m. in the Palm Garden.

The proceedings of the Conference will be very fully published in *The Medical Missionary*, and may be issued in book form, costing about twenty-five cents a copy. Delegates wishing to send copies to friends may leave orders at the Conference office.

Information will be given at the meetings as to arrangements for looking over the buildings, taking treatments of various kinds, etc.

This program is subject to change in regard to some speakers, as their presence is not yet fully assured.

As will be noted, the forenoons of each day are left free, no specific meetings being arranged for. Delegates may arrange for special prayer or other meetings among themselves if they so desire. The opportunity is also thus afforded for friendly intercourse among the missionaries and missionary students.

SEE ALL YOU CAN!—GET ALL YOU CAN!
AND STAY AS LONG AS YOU CAN!

BOOKS BY ANNIE S. SWAN

The editor of the WESTERN CHRISTIAN UNION has read and can heartily recommend every one of the books in the following list. We know of no better books of the kind for young people, and older people as well. Any one ordering one or all of these books and not perfectly satisfied may return the books and we will cheerfully refund the money. Send orders to the editor of the WESTERN CHRISTIAN UNION, Boonville, Mo.

Aldersyde. A Border Story of Seventy Years Ago. 12mo. 90c
A touching story of sisterly affection in Scotland.

The Ayres of Studleigh. Illustrated. 12mo. 90c
A story inculcating respect for true worth and contempt for snobbery.

Briar and Palm. A Story of Circumstances and Influences. Cloth. 90c
A romantic story of English life.

Carlowrie; or, Among Lothian Folk. 12mo. 90c
A Scottish story of love and sacrifice For young women.

Doris Cheyne. The Story of a Noble Life. Illustrated. 12mo. Cloth. 90c
A story for young women, depicting a girl with a lofty purpose.

Dorothea Kirke; or, Free to Serve. Illustrated, 12mo. Cloth. 45c
A story for young women, with a lesson of service.

The Gates of Eden. A Story of Endeavor 12mo. Cloth. 90c
A Scottish story for adult readers.

Hazell & Sons, Brewers. A Temperance Story. Illustrated. 12mo. 75c
Illustrating the hardening effects of the liquor traffic on human character.

Maitland of Laurieston. A Family History. 12mo. $1.00
A religious story for adult readers.

Mistaken, and Marion Forsythe; or, Unspotted from the World. 16mo. Illustrated. 45c
Stories illustrating true and false devotion.

Robert Martin's Lesson. Illustrated. 12mo. Cloth. 60c
A story illustrating the folly of trying to build up a church on a worldly foundation.

Saint Veda's; or, The Pearl of Orr's Haven. Illustrated. 12mo. 90c
A child washed ashore from a wreck becomes the blessing of a Scottish hamlet of fisher folk

Shadowed Lives. One Illustration. 12mo. 40c
A romantic story of Scottish life.

Sheila. Illustrated. 12mo. 90c
A story of life and love in Scotland.

The Guinea Stamp. A Tale of Modern Glasgow. 12mo. $1.00
A story dealing with some of the knotty problems of modern society.

Twice Tried. Illustrated. 12mo. 75c
The vicissitudes of a woman's life.

Ursula Vivian. The Sister - Mother. 16mo. Cloth. 75c
How a young woman's character developed under responsibility.

A Vexed Inheritance. Frontispiece. 12mo. 90c
Introducing scenes from "high life" in England.

Who Shall Serve? A Story for the Times. 12mo. $1.00
Portraying the ideal relations which should exist between labor and capital.

Wrongs Righted. Illustrated. 12mo. 75c
A Scottish story for young women.

A Divided House. A Study from Life. Illustrated. 12mo. 75c
A story for young women, illustrating the chastening influence of misfortune.

Across Her Path. 12mo, 90c
A romantic story illustrating the virtues of repentance and forgiveness.

seems to have kept many from hearing Brother Shepherd. We are almost ashamed to write this, but it is true, and if any of our local readers do not like it, we have no apologies to make for this statement.

Another godly missionary, a converted Jew, from Brazil, South America, spent Sunday, November 27, in our city, preaching and lecturing at the First Baptist Church. This man also was full of the Christlike missionary spirit, and gave some of the most convincing illustrations of successful missionary work in the heathen lands.

We are persuaded that if the Foreign Mission Boards of the various churches were to let more of these consecrated missionaries visit our old Christian communities and tell of the wonderful progress being made in foreign fields, it would greatly stimulate the missionary spirit in our owu Christian country.

Local and General.

On page 16 we print an advertisement for the *Sanitarium Pure Food Store*, F. H. Benhold, proprietor, 413 East North street, Chicago, Ill.

The advertisement shows a cut of three loaves of *unfermented whole wheat bread.* We are using this bread in our own home, and the longer we use it the better we like it. When thoroughly masticated, as all food should be before entering the stomach, it has a rich, nutty flavor. It is somewhat compact, but not difficult to masticate. Four loaves weigh about ten pounds, and the four loaves are sent by express, prepaid, for $1. At ten cents per loaf it seems rather high at first thought, but it saves the time and expense of baking and does not become "stale" in a few days like other bread. At the end of two weeks we have found this bread as good as when it first arrived fresh from the bakery. It is *a splendid keeper*, and we have never found anything in this line more *satisfying.* It is not only an excellent remedy for constipation, but it is also very nourishing and wholesome.

Everything considered, we believe this to be the *best and cheapest* bread that we ever ate. The manufacturer, Mr. Benhold, seems to be a straightforward business man and a gentleman.

We do not get a penny for this editorial endorsement, but if some of our readers will order and use this bread, *their gratitude will be our reward.*

"Science in the Kitchen" is the title of a large, handsoue *cook book* by Mrs. E. E. Kellogg, A.M. It is a scientific treatise on food substances and their dietetic properties, together with a practical explanation of the principles of healthful cookery and contains over 900 choice, palatable and wholesome recipes. This is undoubtedly one of the very best "cook books" that has ever been published. If its plain, sensible precepts were more generally applied, there would be more "sound minds in healthy bodies." The book is published by the *Modern Medicine Publishing Company, Battle Creek, Mich.*

Fifteenth holiday season at the *Wonder Store. Larger stock, more carefully selected*, more five and ten cent goods and more fine, high-grade goods than ever before. All purchased direct from factories and import agents.

Get your Christmas

and cranberries at M. Lohse & Son, Boonville, Mo.

Plumbing, furnace work, iron and tin roofing and guttering done in first-class order by *Joseph Lie-*

ber & Sons, Boonville, Mo. During the long and beautiful fall weather they have been rushed "head over heels," but they always manage to take care of their customers in the shortest possible time and guarantee satisfaction.

Willie Brokmeyer, Boonville, Mo. For Christmas candies, nuts, fruits and supplies for

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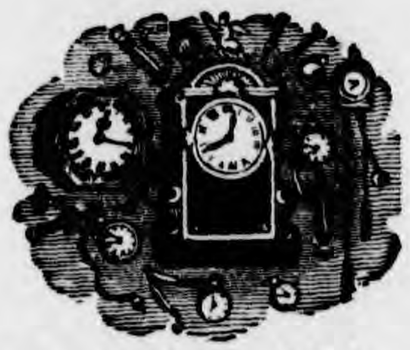
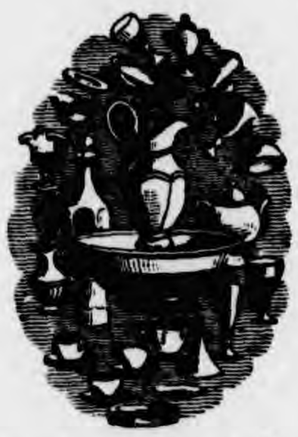


Chilton & Co., Main street, Boonville, Mo. Jewelry, dry goods, and notions. Specials for the holiday season. Popular goods at popular prices.



Fancy chinaware, both French and German, are imported direct and sold as cheaply at the *Wonder* as other dealers buy. We sell only standard goods and guarantee everything to be satisfactory.

Fortunately, cases of fits or epilepsy are not very numerous, but if there are such afflicted ones among our readers or their friends, we conscientiously refer them to the advertisement of Dr. Towns on page 23.

In this connection we print the following personal testimony from a dear brother minister, Rev. E. R. Irmscher, city missionary of St. Paul, Minn.:

Our son suffered from this dreadful disease from childhood, had the attacks daily, and often as high as eight and ten times a day. All medicines and doctors were of no use—his case was considered hopeless. The more medicine he used the worse he became. Somewhat over two years ago we heard of a doctor who had, after thirty years of hard study, found a cure. As hopeless as our case was, we decided to try this doctor. One of our ministers from there wrote us that he was personally acquainted with the doctor, and knew of the most incurable cases, some of which were of thirty or forty years' standing, which had received help and had been able to enjoy good health thereafter. We put our boy under treatment, and at once were aware of a change for the better. The first five weeks he had but one spell a week, then followed weeks in which he had none—the last two spells which he had occurred two years ago. And otherwise his health is bettered. Thanks to God! Any further information will be cheerfully given to any one who may inquire.

REV. E. R. IRMSCHER,
643 Olive street,
St. Paul, Minn.

The *Wonder*, from a small beginning, has become one of the largest stores in Cooper county. *Satisfied customers were the architects.*

The Youth's Companion as a Gift.

What other Christmas present can you choose that will give so much pleasure for so little money as a year's subscription for *The Youth's Companion*? The Holiday Numbers and the Calendar, joyously welcomed on Christmas morning, making a good gift in themselves, are but the foretaste of a whole year's feast to come. The mind is entertained with the numbers in hand, and the imagination revels in the pleasure that each new week will bring until Christmas comes again.

If you desire to make a Christmas present of *The Youth's Companion*, send the publishers the name and address of the person to whom you wish to give *The Companion*, with $1.75, the annual subscription price, stating that it is to be a gift. The publishers will send to the address named, in a parcel to be opened Christmas morning, all the remaining issues for 1904, published after the subscription is received, including the Double Holiday Numbers, *The Companion's* "Carnations" Calendar for 1905, lithographed in twelve colors and gold, and subscription certificate for the fifty-two issues of 1905.

Full Illustrated Announcement, fully describing the principal features of *The Companion's* new volume for 1905, will be sent to any address free.

THE YOUTH'S COMPANION,
144 Berkeley street,
Boston, Mass.

In connection with the present holiday trade, the *Wonder* continues its annual Premium Distribution, and an elegant $50 music box, in mahogany case, with flat-tune sheets; also four fine French-jointed dressed dolls. Every twenty-five cent purchase entitles you to a number.

Santa Claus' headquarters at the Wonder.

Do not overlook our premium book offers on pages 3 and 8.

Pleasantries.

"How did you come out with your lawsuit?"

"I won it."

"Get damages?"

"Sure. I got almost enough to pay my lawyer."—*Cleveland Plain Dealer.*

Papa: "How did you get your clothes so terribly torn?"

Tommy: "Tryin' to keep a little boy from bein' licked."

Papa: "Ah, a brave deed! Who was the little boy?"

Tommy: "Me."—*Chicago Daily News.*

Mr. Economie: "Did you write to that man who advertises to show people how to make puddings without milk and have them richer?"

Mrs. Economie: "Yes, and sent him a shilling."

Mr. Economie: "What did he reply?"

Mrs. Economie: "Use cream."

Mrs. Gossipp: "Mrs. Jones must be very superstitious. She says she wouldn't have thirteen people at her table for anything."

Mrs. Knifer: "Oh, it isn't superstition. She has only an even dozen silver spoons and china dinner plates, you know."—*Cincinnati Commercial Tribune.*

Hose: "Why did you kick my dog? He only sniffed at you."

Visitor: "Well, you didn't expect me to wait till he tasted me, did you?"

The man in the third row: "What do you think of the quartet?"

The man beside him: "Well, it won't take as long as four solos."—*Puck.*

From Van Norden's Magazine
July 1908

To Help the Nation's Health

Fifty Thousand Enlisted Under the Banners of the Committee of One Hundred and the American Health League Against Disease and Death

By Michael Williams

A CAUSE which has already enlisted the earnest support of the president of this country, of an ex-president, and the chief of the prominent candidates for the presidency, to say nothing (just yet) of ecclesiastical dignitaries of various denominations, college presidents, captains of industry and labor leaders, great scientists, leading editors, and other men and women of the highest prominence, and which has become the object of the devoted services of an organization which numbers more than fifty thousand men and women, and is growing by the thousand weekly—such a cause is surely one that cries out for the serious consideration of all American citizens. It is the cause which has called into existence one of the most interesting, remarkable and publicly significant movements of our times, namely, the effort being made by the Committee of One Hundred on National Health of the American Association for the Advancement of Science to double the value of the national capital represented by the working capacity of the population.

This human capital is by all odds the greatest asset of all. It is worth five times that of all the capital represented by actual coin, and all other property values, such as railroads, mines, forests, real estate, capital invested in business, and the like. A concerted effort to cut down the death rate, and lower the burden of sickness, would, if only slightly successful, result in such a saving of money (not to mention the increase of human happiness!) as would turn this line of type into a row of figures marching behind the potent sign of the dollar if an attempt should be made to compute it. The statistical sharps, indeed, *have* computed it, and the millions they name are imposing.

Health, however, has much more than a money value; but even on the most materialistic method of reckoning, the truth expressed in Emerson's statement that "the first wealth is health" has become such a vital issue as to engage the thoughtful interest of all who have at heart the best interests of the republic. It is becoming the keynote of a new and enlightened patriotism, the motto on the banner under which an army of soldiers of the common good is being enrolled in every state, city, town and hamlet throughout the land. This army is the American Health League, organized by the Committee of One Hundred. It is working for the establishment of a National Bureau of Health. Associated with it are sub-committees comprising, for instance, one hundred of the leading newspaper editors of the country, hundreds of writers, scientists who are making researches into problems affecting health, legislative committees, and other committees of an active and also of an advisory nature. About 500 cities and towns of the country are already represented by advisory committees.

The movement originated a year ago, the Committee of One Hundred being formed in April of 1907, the work being inaugurated because of the profound effect made upon the members of the American Association for the Advancement of Science by a paper read before it by a young man from Yale University, John Pease Norton, Professor of Political Economy.

As one writes down such long and formidably formal names as the American Association for the Advancement of Sci-

cott of the Chinese people may be made a *casus belli*.

This has already been done. In the second boycott of the English in 1839, the British Government considered the withholding of provisions and refusal to trade to be an act of war, and hostilities at once followed. To-day, conditions are no different. International intercourse and dealings are still based on the use of force. But whatever may be the attitude of western nations or coalitions of them, towards the Chinese nation, the people must first be taken into consideration rather than the Government; for when the deepest gloom overhangs the Empire, and even Heaven trembles for its welfare, the vitality of the Chinese democracy is most certain to assert itself.

The will of the people has always been the supreme power in the Middle Kingdom. With but two exceptions, those who gained the hearts of the people alone secured the purple, while those who lost the hearts of the people have invariably forfeited the Dragon Throne.

More than four thousand years ago in the dawn of human history, there resounded throughout this old land the *vox populi* of the Chinese race:

"What Heaven hears and sees, manifest themselves by things which the people hear and see. What the people judge worthy of reward or deserving of punishment indicates what Heaven wishes to reward and to punish. There is an intimate communication between Heaven and the people. Let those who govern the people be watchful and cautious." This before the Law of Moses.

A Street in Pekin

Typical scene in a Chinese city

Business Men to Tour the Orient

For the first time business men of the United States have come to the conclusion that the way to get foreign business is to learn the field. First hand, special knowledge, they have concluded, is better than reports or other data. Therefore in the fall about 200 members of the Illinois Manufacturers' Association will begin a tour of Japan, China, Corea, and the Philippines, which will not end until they are thoroughly informed as to the business customs and requirements of the Far East.

The 200 will sail in a special steamer, and in every port they have made arrangements to have competent guides and experts awaiting them. They will satisfy themselves as to the wants and requirements of each section, exactly what is needed, and when. They will see how other countries meet those requirements, and wherein their supplies are unsatisfactory. They will learn the business customs of the country, which is important, how the buyer proceeds, how he likes to be approached, when he may be approached.

Principally he will learn about credits. In that the United States falls far below other countries. Because he has no way of ascertaining the financial status of a buyer, now he insists on cash on delivery. He knows that time is given by other countries, but he cannot understand how it is done. The delegation of the Illinois Association will go into the matter thoroughly, and so far as they are concerned they will return to do business with these countries on a new and more profitable scale.

ence, the Committee of One Hundred, Professor of Political Economy, and the like, still more as one reads such names and titles in cold type, it must be confessed that a chilly impression is produced; there is the thought of red tape, and Circumlocution Bureaus, of unsympathetic officialism, and of Carlyle's dour phrase, "Political Economy: the Dismal Science." But this impression is but a passing one, in this year of grace 1908; it is a reminiscence of the time when science, and research, and statistics were nothing but the bleak occupations of men whose sole concern was the amassing of mere facts, the acquisition of knowledge for its own sake; a time now happily past when science richly deserved the diatribe leveled against it by Tolstoi when he denounced it for its remoteness from humanity, and said that it concerned itself with none of the real problems that were close to the heart and soul of humanity, and therefore was a failure.

But now there is a new spirit moving in men of science, a new spirit in the breasts of the men of the schools, a spirit that was recognized by the leading physiologist of the United States, Professor Russell H. Chittenden, one of the leading spirits of the movement here under consideration, when, in summing up the chief work of his life-time, his brilliant researches into the problems of nutrition, he said that "Knowledge has value in proportion to the benefit it confers, directly or indirectly, upon the human race." The greatest names among men of science to-day are those who clearly recognize this great truth, and who make their researches, observations and discoveries a contribution to the growing body of knowledge that works: vital knowledge, knowledge that can be used in practical every day life. Science is no longer dismal; passion and imagination have touched it as with the fire that glows in art and in religion.

The warmth of this spirit of real imagination, in other words, of that capacity for looking into the future and recognizing how the future may be affected by the conscious and wise application of the will of man, breathes through the whole of the remarkable paper read by Professor Norton on the occasion referred to. Its facts and figures start into life, and his careful, precise language has on this account the interest of a story in its clarion appeal to men and women. The passages in which he pointed out the need for such a work as is now actually being undertaken are typical of the whole of this revolutionary document.

"There are four great wastes to-day, the more lamentable because they are unnecessary," Professor Norton told the Association. "They are preventable death, preventable sickness, preventable

Prof. Russell H. Chittenden

Leading American physiologist who endorses the campaign

Mrs. Mary Foote Henderson

Wife of ex-Senator Henderson and prominent in the movement

Prof. Irving Fisher

Chairman of the Committee of One Hundred

conditions of low physical and mental efficiency, and preventable ignorance. . . . The facts are cold and bare—1,500,000 persons must die in the United States during the next twelve months; equivalent to 4,200,000 persons will be constantly sick; over 5,000,000 homes, consisting of 25,000,000 persons, will be made more or less wretched by mortality and morbidity.

Millions Marked for the White Plague

"We look with horror on the black plague of the Middle Ages. The black waste was but a passing cloud compared with the white waste visitation. Of the people living to-day over eight millions will die of tuberculosis, and the federal government does not raise a hand to help them.

"The Department of Agriculture spends seven million dollars on plant health and animal health every year, but, with the exception of the splendid work done by Drs. Wiley, Atwater and Benedict, Congress does not directly appropriate one cent for promoting the physical well-being of babies. During the next census period more than six million infants under two years of age will end their little spans of life while mothers sit by and watch in utter helplessness. And yet, by merely applying existing knowledge of hygiene, this number could probably be decreased by as much as one-half. But nothing is done. Thousands of dollars have been expended in stamping out cholera among swine, but not one dollar was ever voted for eradicating pneumonia among human beings. Hundreds of thousands are consumed in saving the lives of elm trees from the attacks of beetles; in warning farmers against blights affecting potato plants; in importing Sicilian bugs to fertilize fig blossoms in California; in ostracizing various species of weeds from the ranks of the useful plants, and in exterminating parasitic growths that prey on fruit trees. In fact, the Department of Agriculture has expended during the last ten years over forty-six millions of dollars.

"But not a wheel of the official machinery at Washington was ever set in motion for the alleviation or cure of diseases of the heart or kidneys, which will carry off six millions of our entire population. Eight millions will perish of pneumonia, and the entire event is accepted by the American people with a resignation equal to that of the Hindoo, who, in the midst of indescribable filth, calmly awaits the day of the cholera."

And then Professor Norton went on to show, in summing up this part of his argument, that in the United States, of the eighty millions of our men and women, after having lived on the average but a little more than forty years, more than one-third represents the unproductive years of childhood. And yet, if the average span of life could be lengthened—

(And it can be! Remember this fact; for science has demonstrated no proposition more conclusively than the one that by individuals and nations giving but a slight increase of attention to health reform human life can be lengthened, on the average, by leaps and bounds.)

Returning to Professor Norton's arguments on this point, let his eloquent statistics tell the story of what the nation would gain in wealth by lengthening the average life-span even by five years. Wealth would be coined into health in five main ways. First, Society would progress more rapidly under "the law of increasing returns through increasing the percentage of exceptional men of each degree," many of whom are now lost through preventable accidents, in addition to increasing the total population. Death now robs the race of many potential Edisons, Roosevelts, potential poets, scholars, organizers, as it reaps its grim harvest of children's wasted lives.

Wealth Through Longer Life-Span

Secondly, the burden of the unproductive years of childhood would on the productive years be lessened by increasing the average age at death. More than $800,000,000 could be saved annually from this source alone.

Thirdly, the burden of death on the productive years—the money spent in ill ness and funerals—could be decreased by increasing the age at death; for, calculating that the expense of illness and death are $300, and the average age at death is forty years, the average death

Horace Fletcher

Who has joined the committee in its war against disease

Dr. John H. Kellogg

One of the prominent physicians identified with the campaign

Prof. John Pease Norton

Secretary of the committee, who inaugurated the movement

expenses average $15 burden on the twenty last years, the twenty productive years of each life. Could the average age be increased to 50, the burden would fall to $10, a decrease of 50 per cent. For eighty millions of people, the saving of $1.50 per year of life would amount to $120,000,000 yearly.

Fourth, could the days of illness be cut down by one-third, the economic burden of sickness on the race would be cut down by $500,000,000 yearly. Fifthly, a great saving could be effected if better ways of living should be brought about, hygienically speaking, leaving moral considerations aside, by lessening the burden of criminality, which is largely the product of overcrowding, alcoholism, and the like preventable conditions. Six hundred millions of dollars is the bill we pay at present every year in various ways on account of criminality.

To sum up the total saving that might be made yearly is to discover that it is possible to coin health into wealth to the tune of between $1,800,000,000 and $4,000,000,000.

Thus proceeded the political economist; but he continued: "In addition to the economic gain, the establishment of a National Department of Health would gradually but surely diminish much of the misery and suffering that cannot be measured by statistics. Sickness is a radiating center of anxiety; and often death in the prime of life closes the gates of happiness on more than one life. Let us not forget that the 'bitter cry of the children' still goes up to Heaven and that civilization must hear, until at last it heeds, the imprecations of forever wasted years of millions of lives. If Progress is to be real and lasting, it must provide whatever bulwarks it can against death, sickness, misery and ignorance; and in an organization such as a National Department of Health—adequately equipped—a vast preventive machine—working ceaselessly, an attempt at least would be made to stanch those prodigal wastes of an old, yet wastrel, world."

And the speaker sketched an ideal organization of the kind he thinks necessary; but both he and the calm, unemotional assemblage he addressed were aware that such an organization could not spring full-fledged from a single act of congress, or the banding together of a committee. More, perhaps, than any legislation, and more, certainly, than any "resoluting" of any committee can effect, will be the work accomplished by the spread of health knowledge among the people themselves.

And the great value of the Committee of One Hundred and the American Health League lies here, lies in the educational part of its programme. Pasteur has said that it is within the power of man to rid himself of every parasitic disease. The success of the efforts of

medical men to stamp out such diseases as yellow fever, typhus, the plague, and the like fell blights that once swept millions of lives out of existence, and the growing, rapidly growing, attention being paid to the prevention even more than to the problem of the cure of such diseases as consumption, diphtheria, pneumonia, and other grim ills that flesh may be heir to, but which it more and more disowns as an inevitable legacy—these are the factors of which the committee and the league are taking the utmost advantage.

Prof. Fisher Self-Cured

Among those who heard Professor Norton's paper was a man already in full sympathy with its object. He had good reason to be. The white plague—tuberculosis—had marked him down for a victim. But he had refused to accept the brand. He had gone out into the open air (where alone this white spectre of darkness, this haunter of crowds, this avoider of the sunlight can be successfully combatted) and had cured himself. This event gave him that knowledge of the necessity for improved conditions of health which alone can be humanly valuable—a sympathetic knowledge. It goes without saying that it is hardly necessary for a person to have been sick himself to sympathize with those who are sick; for what home in all this broad land of ours has not at some time or other fallen under the shadow.

But the man who has had to fight for his life gets a better view of the conditions that make up the problem of health than the man who goes a robust way unaware personally of the meaning of bad health until stricken himself; and Irving Fisher, head of the Department of Political Economy at Yale University, had the best of reasons for being deeply concerned in the paper read by his colleague. He is a man of affairs, a man of practical sense, as well as a scientist and man of the schools; and his talent for organizing amounts to genius, for it is inspired by imagination, and, while minutely scrupulous in details, it can look beyond the red tape and the machinery constantly and steadily to what the machinery has been built to effect; and he keeps the machinery on its job! Efficiency is his key word. He took an active part in the formation of the Committee of One Hundred, and is now its chairman. He was joined in his work by a notable body of men and women, among them such figures of national importance as President Eliot of Harvard, Edison, Luther Burbank, Archbishop Ireland, Felix Adler, Lyman Abbott, Jane Addams, Professor Chittenden, Joseph Choate, Edward Everett Hale, Andrew Carnegie, President Caroline Hasard of Wellesley, John Mitchell, Jacques Loeb, Horace Fletcher, Talcott Williams, and many physicians of the highest standing.

A month after the Committee was organized, President Roosevelt swung his immense influence to its support in a characteristic letter, which is reproduced elsewhere in this article. Later, in his famous Provincetown speech, he said. "I also hope that there will be legislation increasing the power of the national government to deal with certain matters concerning the health of our people everywhere," and in a message to the Congress he said:

"There is a constantly growing interest in this country in the question of the public health. At last the public mind is awake to the fact that many diseases, notably tuberculosis, are national scourges. The work of the state and city boards of health should be supplemented by a constantly increasing interest on the part of the national government. The Congress has already provided a bureau of public health and has provided for a hygienic laboratory. There are other valuable laws relating to the public health connected with the various departments. This whole branch of the government should be strengthened and aided in every way."

Grover Cleveland an Adherent

Grover Cleveland gave in his adhesion to the cause; and so did Bryan, who wrote to Professor Fisher that he was deeply interested in the work of the organization. State conventions in Connecticut, Ohio and Delaware have voted planks in their platforms upholding the cause of promoting public health. In all probability at least one of the great na-

tional conventions, the Republican, will do likewise. Men and women and organizations representing all possible shades of opinion and interests can, and enthusiastically do, join hands in supporting the work; it is common ground where all may meet.

In its constructive campaign, politically, the following three steps are being contemplated by the committee:

First.—The passage by Congress of a bill authorizing the President to redistribute the existing scientific and hygienic bureaus of the government. A bill very similar has already been given consideration, in accordance with the results of the act to establish the Department of Commerce and Labor. In accordance with that act, the President, a few years ago, appointed a committee to report directly to him upon the organization, present conditions and needs of the Executive Government work, wholly or partly scientific in character, and upon the steps which should be taken, if any, to prevent the duplication of such work, to co-ordinate its various branches, to increase its efficiency and economy, and to promote its usefulness to the nation at large.

The members of this committee as originally appointed were: Charles D. Walcott, Chairman, now Secretary of the Smithsonian Institution; Brig. Gen. William Crozier, of the War Department; Rear-Admiral Francis T. Bowles, representing the Navy Department; Gifford Pinchot, representing the Department of Agriculture, and James R. Garfield, Secretary of the Interior.

It is the intention of the Committee of One Hundred to co-operate with this committee and secure the passage of a bill giving discretionary powers to the President.

Second.—After the rearrangement of the existing bureaus, the next step will be to ask for larger appropriations for their work. The rearrangement will thus improve and not injure the position of existing bureaus. The majority of the bureaus concerned are in favor of such a rearrangement.

Third.—The establishment of new bureaus to supplement and complete the system of bureaus. The suggestion has been made to utilize the Department of the Interior as a department of health. At present the Department of the Interior carries the burden of the pension list, which, if transferred to where it would naturally belong, the army and navy, would leave the Department of the Interior free to become essentially a bureau of science, education and health. The establishment of from twelve to twenty bureaus under the control of the department would then be worked for.

There would be a bureau for the purpose of Infant Hygiene; expert physicians and scientists devoted to research combining to gather and make utilizable knowledge of how to decrease the present appalling waste of baby-life. There would be a bureau of sanitation, a bureau of Pure Food, a bureau of Health Information, a sort of clearing house where all the news of the various bureaus would be given out to the public through trained and specialized popularizers. There would be a Bureau of Research, and bureaus that would keep a national registration of physicians, druggists and drug manufacture, and would deal with

Our national health is physically our greatest national asset. To prevent any possible deterioration of the American stock should be a national ambition. We cannot too strongly insist on the necessity of proper ideals for the family, for simple living and for those habits and tastes which produce vigor and make men capable of strenuous service to their country. The preservation of national vigor should be a matter of patriotism.

For this reason, and because many of the problems of public health are interstate in their character, the aid of the Federal Government is necessary to supplement the work of State and local boards of health. Federal activity in these matters has already developed greatly, until it now includes quarantine, meat inspection, pure food administration and Federal investigation of the conditions of child labor. It is my own hope that these important activities may be still further developed.

While I could not in advance commit myself to the approval of any specific form of legislation, I can most cordially commend the endeavors of your committee to bring these matters prominently before the public.

Theodore Roosevelt

problems of quarantine, of labor conditions, and other vital and vexing questions.

See just what might be accomplished by a bureau dealing with the problem of infant hygiene, for instance—providing, of course, that workers and not drones, human beings and not officials merely, should fill its ranks, and that the results of its researches and investigations and experiments shall reach the public and not be filed away in duty pigeon holes, neatly strangled in red tape. But this is a danger which the very establishment of a Health Bureau animated by the ideals which inspire the present movement would do much to minimize. Even to sketch the things that might be done by a properly equipped bureau of infant hygiene is enough to cause any normal man or woman, with or without babies of their own, to sit up and take notice of the work of the Committee of One Hundred, and to send in an application for membership in the American Health League!

The bureau would investigate and advocate the regulation of the conditions causing death among babies. The mere registration of births and marriages would enable the Bureau of Health Information to educate the parents of the whole country by means of booklets and articles in the press concerning the care of the child, food, air, dress, play, and so forth; a step that is already taken by the Illinois Bureau of Health. The establishment of municipal pure milk stations now going on in many European cities would probably be adopted.

Look at what was done by the famous Randall's Island experiment, where sterilized milk feeding reduced infant mortality from 41.83 per cent. to 16.52 per cent. The work done in Rochester by Dr. Goler is still more striking; while the thousands of lives saved by Nathan Straus in New York City alone is well nigh incalculable. It has been estimated that the damage wrought by impure milk, and parental ignorance in the reckless administration of soothing syrups and other drugs, to say nothing about ignorance of the commonest laws of good health, is probably equivalent to a decrease of several years in average age at death of the entire population. In other words, we annually slaughter needlessly more infants than Herod slew.

Remember what I have quoted from Professor Chittenden, that knowledge has value in proportion as it benefits the human race; and also listen to what Professor Fisher says: "The purpose of our movement is, of course, not merely the establishment of national bureaus of health. That step is itself merely a means to an end. The end is the elevation of the health of the American people. That there is abundant room for improvement is known to all who realize the truth of Professor Welch's statement that the death rate might be cut in two were we to apply the existing knowledge of hygiene to our living conditions."

With these two statements in mind, the importance of this new movement, this modern crusade against disease, ignorance and death can be realized. Preventive medicine is the ideal of the age; and the nation as a whole is awakening with wonderful rapidity and clearness to the situation. As I finish this sketch of the work of the Committee of One Hundred, the words of a well-known Boston physician, Dr. Crandon, are being quoted and commented upon with sympathy and belief in what he says by the newspapers.

"Sickness is going out of fashion," says Dr. Crandon. "Well-organized, civilized society will not stand for it, and it must go."

The physician quoted is prophetic rather than accurate, says one commentator on his breezy statement, but he is on the right track, and has clear vision. The hospitals are still full of patients suffering from preventable diseases, and on every hand are to be noted the sad evidences of ignorance and neglect. Contagious diseases, such as diphtheria and scarletina are, unfortunately, not going out of fashion among the youngsters, and pneumonia counts its victims from all ranks of life in impressive fashion. "There is reason for hope, however. The leaven of education is at work. The people are realizing the vital importance of practicing hygienic habits. The future is full of promise."

The American Health League has its face turned to the future.

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THE MEDICAL MISSIONARY

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EDITORIAL

THE DAYS OF CHRISTIAN HEROISM, thank God, are not over or ended; and demonstrations of this fact are set forth in these pages this month. In January we told of some of the heroic men and women of America, both past and present, as in the case of Dr. Dye of the Congo. It rejoices us now to be able to tell of some of the heroic service being done by hundreds of our British Christian workers. Two of these are somewhat fully narrated as examples of the grand work being done by the noble "four hundred" of great Britain.

THE GALLANT CHARGE of the "six hundred" at Balaklava has been told many times and will live through all British history even as it should—"Theirs, not to question, why? Theirs, but to do and die." Still we cannot but feel that even a greater heroism is demanded and is demonstrated in such cases as those simply told of Dr. Harold Balme, who, with his colleague, Dr. Broomhall, cared for those poor neglected sufferers in their truly horrible condition—so horrible that one hesitates to print it for others to read. And yet how shall the Christian church know what others suffer, or what heroism is displayed, if the story is not told?

AS ONE READS OF THESE noble young English doctors, who might be driving in their carriages in London and ministering to the *elite* there, instead of doing the horrible, yet honorable—*far more honorable*—service for poor sufferers in China, whose only fee could be a grateful look or bow of the head, we cannot but thank God that the days of splendid Christian heroism have not passed away. To spend fully an hour or longer in *close ministering touch* with one of these poor sufferers in his loathsome condition of dirt, disease and vermin, is to do what Christ did when we read, "And Jesus *put forth his hand and touched him*, saying, I will, be thou clean." Touched the man who was "full of leprosy," and from whom all others shrank away lest *he touch them*.

AND SHALL IT BE that such noble men and women be allowed to *lack the means* to do such work, or the places necessary to shelter such poor sufferers? Think of it!—men like these, doing such work, and appealing for $500 only to put up a place of shelter for their patients! Let us hear from our devoted brethren and sisters as to such needs and we will make them known in these pages, and it may be that the *eye of pity* will see their appeals and hearts be touched and hands extended to help them in their efforts to "help the helpless." What grander work could men and women of means do than to join hands with such workers by aiding them with their means to establish shelters and hospitals. And so much can be done for so little. To many of these workers a gift of $5,000 would enable them to do great things, and even $500 would do so in some cases.

WHAT SPLENDID OPPORTUNITIES are afforded to Christian men and women in these days to so closely follow in the footsteps of the Great Physician who went about "healing everywhere," and those who stay at home can join those who go out.

On another page will be found the yearly report of the Harpoot Hospital, with reference to the work at Diarbekir in which the writer is peculiarly interested, in that Dr. E. St. John Ward, who has recently arrived there, was a student of the I. M. M. Society in New

York during his course of four years spent in the medical department of Columbia University, New York City, from 1900. In 1904 he obtained the position of *interne* at the Presbyterian Hospital in that city and held the same for two years. Dr. Ward's maternal grandfather was the well-known Dr. Bliss of Constantinople, and his father was the late Langdon S. Ward, treasurer of the A. B. C. F. M. for many years. Our young friend has taken with him a devoted and gifted wife to aid him, and we hope and expect much good will be done by them, and wish for them much of blessing and success.

UPON CAREFULLY PERUSING THE REPORT of the Harpoot Hospital we were struck by two statements which appeared in marked contrast. The writer, Dr. Atkinson, rejoices to state that in a community numbering one thousand not a death had occurred, and then says in a single line, "Our little son Leonard died, aged two weeks, of broncho-pneumonia," and adds the simple words, so full of meaning, "Safe in the arms of Jesus." And that is all he has to say of his sad loss of a dear little son. One is almost amazed. Truly the same spirit—even the spirit of Christ, who "*saved others*"—actuates the Christian doctor from America who is laboring in Turkey, as that which prompts the Christian physicians from Great Britain to heroic service in China.

IN OUR ISSUE FOR JANUARY was told in brief the story of the *first medical missionary* to go from the United States to a heathen land—Dr. John Scudder. In the present number it affords us great pleasure to tell of the *first medical missionary* to go to a heathen land from Great Britain—Dr. John Thomas—also bearing the name of John—but, unlike Dr. Scudder, he had no devoted wife to help him in his arduous labors, and left no children to perpetuate his name and continue his work of love. Being accompanied on his return to India by a man who lived and labored many years after him and did so grand a work, that all the world has heard of William Carey, he was for many years forgotten, and today you may find thousands who know of William Carey for every one who has heard of Dr. Thomas, and for this reason, as well as others, we rejoice to tell of this grand man.

OUR GOOD FRIEND OF MANY YEARS, Dr. J. L. Maxwell, of London, formerly of Formosa, in his editorials in the January number of *Medical Missions at Home and Abroad* remarks upon the increase of medical missionaries from 125 in 1890 to 395 in 1908—a trebled increase in eighteen years. He further says that it is probable that the United States and Canada have kept pace with the increase, and we are glad to be able to assure him of this fact. He further calls attention to a real awakening in Germany regarding medical missions and states that there are now about 25 from that country and Switzerland and France. This number added to those from Great Britain and the United States and Canada would bring the final total up to 850 in all the world, in which fact we cannot but rejoice as we look back to past years and recall the fact that in the year 1850 there were not 50 in all the world.

DR. MAXWELL POINTS OUT the dearth that exists of medical missionaries to "fill up the ranks," and if possible to increase the number. He then tells of vacancies existing in various societies to fill which men and women cannot be found, and expresses the hope that the Student Volunteer Missionary Conference then to be held in Liverpool may bring about a better state of things, and we earnestly join in this desire.

There are two sources from which to draw our medical missionaries. On the one hand, some may be and have been recruited directly from our medical colleges; Christian young men who have been led to decide to give up the prospects of worldly gain for Christian service. On the other hand, there are to be found those who are earnest Christians and who are led to *take up* the study of medicine, to fit themselves for missionary service. It matters little which way they are led, whether first for missions and then for medicine, or vice versa.

THE VARIOUS SOCIETIES in the United States and Canada have been invited to make known their need for more medical missionaries in the pages of this journal, and a statement of replies received will be inserted in the March number.

We appeal to every Christian medical graduate and student to study this subject carefully and see if the voice of duty and of God is not calling them to service. Equally would we urge all Christian young men and women who read these pages to seek guidance as to their future lives and learn if God would have them serve him in this glorious service, for such it is, its very trying duties and often repugnant demands, calling forth the highest type of Christian devotion and heroism.

If any who read these lines, especially those who are not already studying medicine, or if they are doing so, and are confronted with financial or other difficulties, let them write us at once.

SINCE THE JANUARY NUMBER was issued Dr. Maxwell's monthly has come to hand and several items of interest are noted. In the present number the list of medical missionaries serving under British societies is reprinted from that journal, and several interesting comparisons can be made.

The total number of active medical missionaries throughout the world is over 800, and this number is just equally divided between Great Britain with a total of 425, including 23 holding American and Canadian degrees in medicine, and the United States and Canada.

THE list issued in the January number of American and Canadian medical missionaries totaled 386, including 3 holding degrees of Great Britain, and 3 repeated in the present British list, bringing the total down to 380. If to this number be added the 23 holding degrees from this sidé the Atlantic the number would be 403, while the number with British degrees would be 402, the two totaling 805, the largest number that has ever existed. But during January, more lists from American societies have been received, adding 30 more, and making the total for United States and Canada 433 and the grand total for the world 860 including 25 for Germany, France and Switzerland.

MENTION WAS MADE in these columns last month of the parallel growth of the cause of medical missions on either side the Atlantic, but we were hardly prepared to find it so evenly matched. It is further interesting to note how closely the two continents tie as to societies.

The six largest societies in the United States total 281, and the six largest British societies furnish a total of 250. The Presbyterians of the United States have exactly 100, while the Church Missionary Society leads Great Britain with 80.

Again, the division as between men and women is somewhat remarkable. The total for Great Britain being, men, 278, and women, 147, while the United States and Canada furnish (including the 20 in the list of Great Britain who hold American degrees), men, 280, and women, 153.

China leads in the list of countries, with a total of over 300, India comes next with a total of 225; then Africa, with only 65, comes after. It seems as if she hardly gets her share. Korea, Palestine, Turkey, Burma, Egypt, and other lands and even the islands of the sea, including the Philippines, are in part at least cared for and not entirely overlooked.

AND yet, in view of the vast needs of the teeming suffering millions of these lands, one is led to ask with one of old, "What are they among so many?" What, indeed!—and yet if they are working *with* the Son of God, and *for* suffering humanity, they are doing what they can, and the Saviour divine who broke the bread, which was only enough for one, and fed a hungry multitude with what the lad was willing to surrender to him for his use, can so bless the efforts of the few noble souls who labor *for and with him* to insure a great harvest and ingathering to the kingdom of God.

MEDICAL MISSIONARIES WANTED.

UNDER the above caption expression was given in the last issue of this journal as to the need for medical missionaries. It is with pleasure that the following from our friend of many years, Dr. Levi B. Salmans, is inserted. It is hoped that some one will be led to respond.

"An *interne* will be admitted to "The Good Samaritan Hospital" at Guanajuato, Mexico, this coming spring, and those interested should begin correspondence on the subject *at once* with Dr. Levi B. Salmans, Guanajuato, Mexico. This is a missionary hospital of the Methodist Episcopal Church, which seeks to obey Christ's command to evangelize the world, first "healing in every city" in which we enter. Only those should apply who desire to devote their lives to the *winning of souls* for Christ. The *interneships* in this hospital are for two years. Nearly all work has to be done in the Spanish language, and this must be learned, and, therefore, shorter *interneships* cannot be awarded. The provisions for support are home, board, and washing, and $50.00 (Mexican currency) a month for the first year, and $75.00 a month for the second." "*Come over and help us.*"

* * *

UNQUENCHABLE LIGHT

Christ stood in the light which my eye could not see,
But a bright ray passed down from His Spirit to me;
Wherever I wandered, 'twas with me and when
I prayed for a soul, it shed light on it then.
Though I did not see it, and went on in pain,
Though the soul did not feel it, and knew not its gain.
Still, it never departed, 'twas fixed to the spot;
I moved from the place, but it changed not.
"*I touch through thy hand*," said the Saviour to me,
"And *that which I touch* shall never get free.
My hold though it be but impalpable ray,
Shall enlighten that soul till I usher in day.
The day of salvation must come to the heart,
Which has ever been *touched*; the lowliest part—
E'en the hem of my garment–the humblest thing
That belongs unto Me, this virtue doth bring.
Art thou then a member, and dost thou not know
That *wherever thou goest, I surely there go*;
That the work that thou doest is not solely *thine own?*
It is mine, and I never will leave it undone.
Go touch, then, the sinner–go whisper my word,
Though thou can'st not see Me, *I'm there*," saith the Lord.—*S. Meredith.*

A BRIEF HISTORICAL SKETCH OF PIONEER MEDICAL MISSIONARIES FROM GREAT BRITAIN.

IN the year 1785 there sailed from England for India a ship called the "Earl of Oxford." Arriving in Calcutta, the young surgeon of the ship went on shore, and was so impressed with what he saw of the neglect and suffering among the people and their need of medical aid particularly, that he decided not to return home in his vessel, but to remain in India and do what he might to relieve their condition. He was not a man of means, and no missionary society existed in those days. However, being a man of action as well as prayer, he appealed to the few English people residing in the city of Calcutta, and also wrote home to a few friends to help him to do the work of relief he had set his heart upon and felt called of God to do. His name was John Thomas. Evidently of Welsh descent, he doubtless had a Christian mother who named her son, as often mothers do, after a man she hoped he would follow. It was so also with John Scudder of whom we wrote in our last issue. It was not long before the noble young doctor was fairly overwhelmed with work, as the sick and suffering crowded around him even by hundreds, clamoring for relief. Dr. Thomas had been brought up in the Church of England and followed the teachings of that denomination, of which he was a devout member, until about the year 1790 he was led to decide to become a Baptist and was baptized by immersion. This act soon lost him many of his best friends, who withdrew their financial aid from one whom they now looked upon as a turncoat, and so made his struggles to maintain himself and his work all the more trying and difficult. But as he saw later, he was but following God's leading, which oftentimes results in loss of earthly friendships. The trial was more keen perhaps to him on account of the loss of friends than the loss of funds; in fact, this nearly broke his heart, poor fellow, and caused him to lose his health and experience a serious breakdown, so that in the year 1792 he was placed on board a vessel sailing for England, in a dying condition. It was

scarcely expected either by himself or his friends that he could and would reach England alive, but he did so. Sailing from Calcutta in January, 1792, he reached England in July. While on the long six months voyage he not only had much time for rest and recuperation, but for meditation and prayer.

It was a sore trial to him and to the sufferers in India that he had to leave them, and that so they had lost their best friend. Realizing the terrible needs of the poor people in that land, he was led to fervently pray the Lord of the harvest that he would send forth laborers into his harvest, and his prayer was heard and answered.

About the time that Dr. Thomas sailed from India, two men might have been seen in earnest conference. The one was a Baptist pastor, by name Andrew Fuller, the other, one of his church members, a shoemaker, William Carey. They talked earnestly about the condition of the heathen, and the duty of the Christian church to take or send the gospel to them. "Someone must go down," said the pastor, referring to the practice when men were imprisoned in a mine. "I'll go down," said Carey, "if you'll hold the ropes." During the month of May, 1792, when Dr. Thomas was midway between India and his native land, a missionary gathering was held, or a gathering to consider the claims of the heathen, and Fuller and Carey spoke memorably earnest words. Neither of these men, at that time, knew of such a man as John Thomas any more than he knew of them, but God knew all three and was leading them by a way that they "knew not" until he brought them together in July, or soon after.

In November of that year a meeting was called at the house of a widow named Wallace in the town of Kettering, and at that meeting the Baptist Missionary Society was founded, and two missionaries duly appointed, *i. e.*, Dr. John Thomas and William Carey. The amount of money secured was not five pounds, but a start was made that has gone on developing for a century and more.

In 1793 Thomas and Carey set sail together for India, meeting with many hindrances and difficulties, but eventually overcoming them all and arriving together in that dark land. Together they labored as doctor and preacher, and seven years passed ere they could count on a single convert willing to come out for Christ and face almost sure death.

One day a patient was brought to the doctor seriously injured. This man was a carpenter and had broken his arm by falling from the roof of a house. The doctor, while attending the man's injuries day by day, told him of Christ the Saviour of men. The man, Krishna Pal, by name, simply drank in the doctor's earnest words and finally declared himself a firm believer in Christ and desired to publicly confess him by being baptized. He was baptized in the river Ganges by Carey in the year 1800, and the act witnessed by thousands. The excitement incident to this event after the strain of fifteen years of arduous toil, so told upon the doctor that he had to be placed under restraint and was not able to witness the baptism of the man he had been the means of leading to Christ. Later on he partially recovered his mental balance and lived a few months longer. Thus ended the life of this grand heroic pioneer medical missionary. A hymn was written by this convert, of which the following is the first verse.

"O, Thou my soul, forget no more.
Him, who all thy sorrows bore:
Let every idol be forgot,
But, Oh, my soul, forget Him not."
Krishna Pal.

It is sad and strange to notice how slow the Christian church has been to see and follow the lesson and divine plan for missions set forth in this striking manner. Thomas, the medical man, going first as pioneer, and opening the way for his colleague and companion; and the two joining their efforts and meeting with resultant success.

As the century rolled on the Church seems to have but laggardly rubbed her eyes so that not as many as fifty medical missionaries came into existence during the first half of the century. However, during the last half of the century, the number was increased ten times and rose to five hundred, and has now grown

to over eight hundred men and women medical missionaries in the world.

Lacking any full and systematic record of the development of medical missions as a whole, it is impossible to give any full and accurate account. All along the line one recalls the names of heroic men as Livingstone in Africa, Elmslie, Lowe and Valentine in India, Hudson Taylor, Henderson, Mackenzie, Roberts, Schofield, Douthwaite, Cameron, and others, in China, and Davidson, in Madagascar: men of marked ability and devotion, they left a noble example which many are imitating today in many lands. Nor must we forget the work of men such as Burns-Thomson, and Maxwell, who, in the homeland devoted themselves to the training of men to labor in other lands by engaging in work in the Cowgate of Edinburgh, or in the slums of London.

Dr. John Lowe, who, after many years of service in India, was at the head of the society that trained him in Edinburgh, and has been succeeded by his able son-in-law, Dr. Sargood Fry. Then, too, we may not forget the band of men like Drs. Chambers, Gauld, and Dixon in London, Bond in Liverpool, Meacham in Manchester, and Crabbe in Birmingham, or Elwin in Bristol. Men of rare devotion to medical mission work among the poor and needy in their own land, who are equally deserving of honor as those who have gone to other lands.

G. D. D.

* * *

A good black heart. A white man of generous disposition strolled into a colored church by mistake in a strange city, but having entered, and been offered a seat decided to stay.

Presently the collection plates were passed around and the one that came by the stranger had a "greenback" on it when it was returned. The good old colored pastor felt so elated at seeing so unusual a gift on the plate that he could not forbear thanking the donor at once, and as he finished, he added. "Brethren our good brudder may have a white face, but he's got a good black heart."

STORIES FROM THE DIARY OF A MISSIONARY DOCTOR.

"Just One Man."

BY DR. HAROLD BALME, TAI YUEN, SHANSI.

It was a Chinaman who spoke, a poor Chinese beggar—one of the type whose hair is usually shaggy and unkempt, whose clothes hang in tatters (but are none the less thickly populated), and whose sole head-dress consists of the round iron pot which does service for collecting stray gifts of food and money and which earns for these gentlemen the nickname of the "Wearers of the Iron Hat."

He had come to hospital for medical aid, but the only help that could be given him necessitated the performing of a small operation. It was not a serious matter, but would require the administration of chloroform, and so, in accordance with our hospital etiquette, he was expected to produce some relative or friend who would undertake the responsibility of whatever risk might be entailed. But when I asked him what relations he had, he answered briefly, "None at all. I'm just one man."

"JUST ONE MAN!"

It sounds quite sad enough to our English ears, but one needs to come to a land like China to realize what an infinite amount of pathos may be wrapped up in those simple words—this land where family ties and claims are so strong, where a man, in his sickness or poverty, naturally turns to his nearest relatives for assistance. And when the last of these has gone, and he is left alone—just one solitary man to fight his battle of life, and to rise or go under without a friend at hand to sympathize or help—he has reached a truly pitiable state.

The story that follows is simply a short account of an attempt made to help some of these poor creatures of the "just one man" type, and others whose condition was but little less deplorable—all of them men to whom the unbending arms of heathenism offered no welcome, and into whose ears an ancient superstition could pour no message of sympathy or love. It was

BUT A FEEBLE EFFORT AT BEST,

and quite inadequate to meet the many needs, but we hope it may have been in some little way an object lesson to those around of "the wideness of God's mercy," and the love which reaches out its hands unto the most needy and debased.

The spring of the present year found this city in a great state of activity, for not only were considerable building operations being carried on, but, in addition, all the main roads were to be properly reconstructed. This brought a considerable influx of people into Tai Yuen, a large proportion of whom seemed to come from the neighboring province of Chih-li, attracted by the prospect of employment. They found employment, it is true, but it is rather doubtful whether they found much beside. The food supplied to them seems to have been but poor, and badly cooked, while for sleeping accommodations they mostly sought the friendly shelter of some old temple or were content to rest by the roadside.

Whether as a result of the unhealthy conditions in which they lived, or the extensive upturning of the soil, or whether from some cause quite apart from all this, it is impossible to speak with any certainty, but it was not long before

DISEASES OF ALL DESCRIPTIONS

became more or less rife in the city, confined, for the most part, to this corner where all these men were working. Typhus, dysentery, and one or two other forms of infectious fever which are not easily classified, began to spring up here and there, and to spread from one to another. At first it was only brought to our notice by the occasional cases which came to hospital for treatment, but later on we began to see something of the terrible condition of these poor homeless "just one man" types, and who were

QUITE UNCARED FOR IN THEIR SICKNESS.

One day, while riding home from a visit to the city, Dr. Broomhall came upon a poor man dying by the roadside. It was a busy street, with people constantly passing up and down, but nobody would give more than a hasty glance at the poor fellow, and the only attention he is likely to have received is that the owner of any house or shop outside which he might be lying, would carefully have him shifted a little way off, for fear of being held responsible for his death. This process would then be repeated, until at last

THE SICK MAN WOULD BE DUMPED

upon some *ash heap* or piece of waste land, and left to die in peace.

A few days later one of our missionaries was stopped by a man in the road who begged help on behalf of his brother. These two men had come many miles to get work, but one of them developed fever, and the other had to give up his work to look after him. On hearing the news, I went to the spot indicated, there to find the poor man lying in the glare of a scorching sun, by the side of an old temple theater stand, practically dead. All we could do was to shelter him from the heat until he died, and then get the local authorities to bury him, while we helped the brother to start work once more.

So it went on for a week or two, until, in one day, Dr. Broomhall met four such cases in different parts of the city, lying by the roadside, sick and untended and alone. It was heartrending to have to leave them like that, but what to do we simply did not know. It was quite impossible to take them into the hospital, for the isolation block, and the court which it is proposed to build for

DYING PATIENTS TAKEN OFF THE STREETS

has not yet been erected, and it would only have brought grave risks to our other patients to put these infectious cases among them. Cast about as we would, we seemed to find no solution for the problem. But it was just as difficult to escape it, even if we had wished to. We go across to hospital one morning, and there, stretched out on the very steps, is a poor miserable beggar, sick with dysentery, who has crawled here in the night in the hope that the foreign doctors of the "Jesus Church Hospital" will not turn him away!

NO! YOU SIMPLY CAN'T DO THAT,

and so Dr. Broomhall at once had a

wooden shelter roughly put together outside the hospital, where the poor man can lie, and where he can receive food and medicine and the attendance he needs. Another day we find a man outside the gate of our own compound, waiting there in hope of sympathy and help.

At last matters came to a point where some definite step must be taken, and this was brought about in a way which forms a striking commentary on the "tender mercies of the heathen." Next door to our compound is an old temple, hardly ever used for purposes of worship, and during the last few months several workmen employed on our premises have been finding a temporary lodging there. One day the head mason asked Dr. Broomhall to go in and see one of these laborers, who had been ill for a fortnight. Dr. Broomhall accordingly did so, and found the poor man very ill indeed with one of the forms of fever prevailing. He therefore ordered him the treatment that was necessary, at the same time informing the fellow-workmen of the man's serious condition, and bidding them take all possible care of him.

That same night, or in the early hours of the next morning, Dr. Broomhall was returning from a midnight visit to a patient, when he heard a low, moaning noise, apparently rising from a heap of bricks opposite our street door. Looking across he could discern the figure of a man, in the moonlight, lying stretched out on the ground beside the bricks, and recognized him as a poor fellow we had passed on the previous afternoon, crawling along in a terrible state of weakness and disease.

Next morning that heap of bricks had two occupants, the second one being the very workman whom Dr. Broomhall had seen on the previous day in the temple. How had he got there? According to the story of his fellow-workmen, he had refused to take food or medicine, and had himself

CRAWLED THERE IN THE NIGHT!

As if it was likely, for a man in his state! There really isn't much doubt that these men, on hearing of his critical state, had themselves carried him across in the night, and left him there, so as to run no risk of being mixed up in the affair!

Something must be done, for they certainly could not be left there to die. Where would we put them? One suggestion after another was made only to be discarded, until Dr. Broomhall thought of the old open air theater stand, opposite the very temple where these men were living. It had a decent roof and side walls as well as a brick floor, and if there did happen to be a big hole in the back wall—well, anyhow it was good for ventilation—and so was opened our

"SICK BEGGARS' REFUGE OR HOME FOR THE DYING."

Here three decrepit patients in various stages of filth, sickness, vermin, and misery, and a couple of doctors to act as medical advisers, nurses, ward sweepers, and general helpers, whose duties varied from feeling pulses to cleaning away "live stock," were to be seen.

The first patient of our primitive hospital deserves special description. Number one went by the name of "Ko Lien Woh," (have pity on me!), which was his one unfailing remark whenever you saw him, day or night,—the very same words and the very same accent that one may hear any day in a Chinese street, as a beggar happens to catch sight of you, and promptly knocks his head on the ground in a mud puddle, and presents his bowl of maggoty millet for your offering. Poor Ko Lien Woh was a piti-

able object, to be sure. His clothes need no description, for he had none—not a scrap—

HIS ONLY EARTHLY POSSESSIONS

apparently being a rough wooden board, which wasn't his, and a filthy, tattered "quilt," which was probably borrowed. When feeling at all fit, he might usually be seen sitting near the edge of the stage, diligently ridding his grimy person of unwelcome intruders in a manner not unsuggestive of the Zoo—but, most days, he was too feeble even to pursue this occupation, and would simply lie and utter his favorite cry.

Number two went by the name of The Prayer Meeting Man, for he was a poor chap that we came across on our way home from the weekly missionary prayer meeting. He was then staggering along in a high state of fever, and that night had sought a resting-place behind some mud-bricks, from whence, as before mentioned, Dr. Broomhall heard his low moans in the early morning. He was better off than Ko Lien Woh, in that he had one or two garments, in varying states of decomposition, but with his matted hair, bleary bloodshot eyes, crusted lips, and unwashed body, he was

NOT EXACTLY WHAT MIGHT BE CALLED AN ATTRACTIVE PERSONALITY.

But he was a wonderful chap for manners, and there was something amusingly pathetic in the way he would try to sit up and prop himself against the wall, and then make a low bow in gratitude for his bowl of food—at the same time assuring us that he could feed himself, and that we must not "spend our hearts" for him.

Patient Number Three has already been described, more or less, for he was the workman from next door, and by the name of The Workman he is still known. He, too, was in an interesting condition of dirt and vermin on his arrival amongst us, and for a time lay in an exceedingly low state, but by degrees he began to show signs of substantial progress.

Our first difficulty was as to how to make these poor fellows to some extent comfortable. Their arrival on the theater stage was the signal for the advent of all the blue-bottles and green flies in this corner of Tai Yuen Fu (more or less), attracted, no doubt, by the penetrating odors which they brought upon their persons, and which, for the most part, can only be described by the old saying that "they could be cut with a knife" (though a specially sharp one would undoubtedly be required). It wasn't that these pests disturbed the patients, either by their buzzing noise or by alighting on their faces. It takes more than that to disturb a Chinaman's slumbers. The danger of these flies lies in the fact that they breed *huge maggots in the ears and nostrils* (even in the mouth) of the miserable patient who is too weak to brush them away.

To get over this difficulty, Dr. Broomhall had some wooden frameworks roughly put together and covered with gauze netting; but it must be confessed the patients' heads were more often outside than in!

THE DIFFICULTY OF FEEDING THEM.

The average Chinaman's idea of a sick diet in times of fever is to give thin millet "skilly," and very little of it. But in their low state something more nourishing was imperative, if we were to have any hope at all of saving them, and Dr. Broomhall therefore kindly provided them with eggs and milk. But even then the difficulty wasn't ended—for no one would dare feed them, and the very bowls they drank out of would be held by the servants as though they contained deadly poison, and ought only to be regarded from the distance, with nose and mouth discreetly covered over by an ancient cloth! And so, for a time, we had just to prepare their food

AND GIVE IT THEM OURSELVES,

until we were fortunate enough to find an old man who would brave the dangers! He wasn't much good at first, his only idea of feeding a helpless patient being to ladle it in as if he were pouring water down a drain, until the poor sick man either choked or spat at him. But he improved splendidly in time, and turned out quite a first-rate nurse.

It didn't take long for news of our "Sick Beggars' Refuge" to spread. To begin with, there was the small crowd of passers-by who would collect while

the patients were being fed, and, one by one, ascend the theater stage to watch proceedings. At times they threatened to be a nuisance, but a gentle hint that

THE DISEASE WAS VERY INFECTIOUS,

and that too close an inspection might expose *their honorable persons* to considerable danger, usually resulted in a most effective clearance of the field. Then, again, there were other sick men who heard of it—to say nothing of the beggars who weren't sick, but who jumped at the hope of free food and shelter.

But the sick men couldn't be refused. On one occasion a poor fellow was brought on a wheelbarrow from the other side of the city, in a raging fever, and with the typhus rash well marked on him; another time it is a couple of policemen who bring along a beggar they have

FOUND HELPLESS IN THE ROAD;

while on more than one occasion a decrepit, sickly candidate would manage to crawl up on to the stage in the night, and there wait in hope of not being turned away. On the other hand, it sometimes happened that the very patients who seemed most in need of help were afraid to entrust themselves to us. Going across to hospital one morning, I stumbled upon an appalling-looking specimen of a man at the gate—his hair clogged with dirt and other things, his ears and nose *a living, squirming, repulsive mass of maggots! I spent considerably over an hour with that gentleman, syringing out literally hundreds of maggots* (and not a few green flies even), from the recesses of his ears and nose, and scrubbing up his head and hair until his own mother wouldn't have recognized him; finally, we had him taken across to the theater stage to be looked after. But while the old man was preparing him some food, he quietly crawled away, and we saw no more of him until two or three weeks later, when he came back to the hospital, almost well, to express his appreciation of what had been done, and seek a little further attention for one ear!

But I must bring this story to a speedy close. I wish I could do so in the approved style by saying that

"THEY ALL LIVED HAPPILY EVER AFTER;"

but this unfortunately, was not the case. Some of them, undoubtedly, had their lives saved, and among these one might specially mention the old workman from next door, who is now getting quite strong and well, and is a most regular attendant at the hospital services. But in other cases we could only manage to make the last days a little more comfortable for the sufferers. Poor old "Ko Lien Woh" was the first to leave us. Day by day his plaintive cry became fainter and fainter, until, one morning, he

PASSED AWAY BEYOND ALL MEN'S PITY,

into "the Land of the Great Hereafter." He was followed, not many days after, by the typhus patient who had come on a wheelbarrow, and barely another fortnight elapsed before a third was added to the number. This case was a real disappointment to us, for he was one of our first patients—the one known as The Prayer Meeting Man.

But, in spite of all the disappointments and deaths, we cannot but be thankful that we have put forth this effort. It is to be judged, we would hope, not merely by the number of poor beggars we have been able to save, but rather as a little attempt to show

THE REAL MEANING OF OUR WORK HERE,

and to tell of Him who came to raise the outcast and befriend the fallen.

It is a lesson China is in sore need of. At present "the love of Jesus, what it is," is something quite foreign to their ears, and it may be that only by living objects will they be able to appreciate the infinite kindness of "the heart of the Eternal." If this tiny effort could in any way help towards this glorious end, it would indeed have been worth while.

We are hoping before very long to have a proper private court at the hospital, where we may be able to put any patients who are brought in dying from off the streets, and who cannot be admitted into the general wards. A sum of at least £100 will be needed to build this court, to say nothing of the yearly expenses that will be entailed. It may be that some friends at home would be glad to help us, in caring for the poor "just one man" class.

HOSPITAL BUILDING, ENG-CHUN, CHINA

THE NEW ENG-CHUN HOSPITAL.

BY DR. PRESTON MAXWELL.

Buildings in China, especially in mission service where every penny has to be considered, are erected with an eye to utility rather than appearance.

Over the gateway of the hospital are two inscriptions in Chinese, the lower one, "God is Love," and the other one, "Jesus' Holy Church Healing Hall." Passing through the main hospital door, which is on the inner side of the porch, taking the path to the left, you reach the large outer or administrative block, Block No. I. Its two doors, one for men and the other for women, admits you to the Hospital Chapel. Down the center of the chapel runs the movable partition which separates the men from the women, and at the further end is the platform with the motto over it in Chinese characters,

"PREACH THE GOSPEL, HEAL THE SICK."

On the walls are bright Scripture pictures, and facing the platform is a fine tablet, recalling a dear mother to whose memory the administrative Block, No. I, and the Women's Block, No. IV, have been erected. Above the tablet is the hospital clock, kindly presented by the children of Bromley Presbyterian church.

Entering by doors to the right and left behind the platform, you come into a passage leading down the center of the block, and on each side of which are a set of rooms. On the left are the hospital assistants' room, a drug store, and the dispensary. On the right are the main staircase, with ophthalmic room below it, and, further on, the office of the student on duty, an examination room for patients, and the doctor's consulting room, these last three connected by doors.

Mounting to the upper floor, one finds over the chapel eight students' rooms, shut off from the rest of the block by double spring screen doors. The windows are all netted with fine wire netting, so that these rooms are defended from mosquitos. On the left of the central passage above are the students' dining room, a small store room, the sterilizing room, and a fine operating theater. On the right of this central passage are the students' bath room, an after operation ward, and a large scientific work room. So much for Block I.

Passing now either by the lower passage or along the bridge at the end of the upper passage, we enter Block No. II. With the exception of the hospital preacher's room, the whole of this block above and below is divided into wards of two, four, and six beds respectively. Two of the wards of two beds are supported, one by friends at Solihull, and the other by the children at Bromley. Three similar wards, of two beds each, are for hire by private patients. Three wards in this block, containing fourteen beds in all, are fitted up for the cure of opium smokers. The windows of

THESE PARTICULAR WARDS ARE BARRED,

and are mosquito proof, and the doors are fitted with locks and bolts. Those coming for the opium cure go into these lock-up rooms for the first week, and are not allowed to leave them during that time. No. II contains in all fifty-four beds, fourteen of which are for opium patients, six for lepers, and six for venereal and isolation cases, the rest being general.

Passing into Block III by another bridge or from below, we find that it is divided into four large wards, two above and two below, designated in Chinese by the names of Faith, Hope, Charity, and Peace, and

ACCOMMODATING FORTY-EIGHT PATIENTS.

On the south front of this block, on the ground floor, is a large covered area fitted up with a stone table, a large case for dressings, a large irrigator, and some stone seats. This place is used for the dressing of chronic ulcers, of which one has to treat a large number.

Block No. IV, or the Women's Block, with twenty-eight beds, is divided off from the other blocks, below by a wall with gateway and above by a door at the end of bridge, these entrances being kept strictly locked. This block consists of two large wards, one above and one below, four small wards, a small operating theater, a store room, matron's room, and lavatory.

The doctor's study, in his own house, is connected with the administrative block by telephone, and the consulting room with various parts of the buildings by means of electric bells.

On the south side of Block I is a water tower, to be finished at some future date. A well has already been sunk to serve this tower, and it is hoped that

IN THE FUTURE IT MAY BE POSSIBLE

to erect a proper water plant with pipes all over the buildings.

One point may be noted about the drainage system. There is not a covered drain in the place, and in all the building care has been taken to avoid leaving any place which might serve as a harborage for rats. With plague all round, this is an item of great importance.

The total number of beds is 132. As to the possibilities of the hospital, perhaps it would be well to say a word. The building has been opened some six and a half months, and in that time there have been in-patients 600, with operations, mostly serious, 300, while 200 visits have been paid outside the hospital.

The cost of this large building has amounted approximately to £1,950. Of this sum, £927 was contributed through the Foreign Mission Committee of the Presbyterian Church of England, the remaining £1,023 having been contributed privately. It could not have been built more economically, and on the opening day the Mandarin guests, who were

CURIOUS TO KNOW THE COST

of building such a hospital, expressed their decided conviction that it could not have been built for such a sum by the Chinese themselves. A good deal yet remains to be done in subsidiary but still important work, *e. g.*, the water plant, a mortuary, etc., etc., in order to make the hospital as thoroughly complete as it ought to be.

The writer's father, Dr. James L. Maxwell, editor of the journal from which the above is taken, adds the following: "Another £150 would gladden the doctor-builder's heart, and the editor would rejoice to forward any sums contributed for this purpose." And how it must gladden the father's heart to know his son is doing so good and great a work!

ANNUAL REPORT OF HARPOOT (TURKEY) MEDICAL DEPARTMENT FOR THE YEAR ENDING JUNE 30, 1907.

THE year began with bright prospects for a hospital, nurses, and progress. A portion of the hoped for has been realized. Our prospects are still with us brightened by the flight of time.

A trip to Diarbekir in July with Dr. Barnum, our senior member, began the year. Our object was to attend the jubilee services of the Diarbekir Church, to quiet some unpleasant rumors about a gift by an Armeno-American for Diarbekir, his native city, to arrange for the payment of a portion of said bequest, and to investigate regarding a hospital and its site. The journey was satisfactory in all respects. The jubilee was

A MEMORABLE AFFAIR.

The services were well attended and helpful. The bequest matters were satisfactorily arranged. No decision was made regarding the hospital site, it being thought best to defer all such matters until the arrival of Dr. E. St. John Ward, who will have charge of the hospital. He is now enroute, stopping in France in order to learn French to pass his examinations for a license to practice.

Our vacation we spent at Lake Geoljuk. It proved to be a much needed rest as well as a very pleasant time. It was the first outing that I have taken with my family since coming to Turkey.

A VIRULENT EPIDEMIC OF MEASLES, with resulting dysentery, occurred during the autumn and early winter. Hundreds of children died from it. The people of this region are more afraid of measles than smallpox. In spite of its virulence no case that applied at our clinic was lost, nor did we lose any case of dysentery that applied to us before being moribund.

The portion of the year's record in which I take the most pride is the organization of the Euphrates Medical Association. This is an organization of all of the Christian physicians and pharmacists in the Harpoot field into a mutually helpful body. These gentlemen are successful practitioners, men of excellent character, of high standing in their respective communities, and, best of all, for the most part, active in Christian work. They are just as much a product of our missionary endeavor as are teachers and preachers. And from my partial point of view I think they have a more useful place in the effort to uplift the people than do most preachers and teachers. We take due pride in their achievements. Permit me to briefly introduce a few of them to you. Dr. Haroutyun Hekimian, a leader of the Protestant community of Harpoot. Dr. Michael Keshishian, the most successful practitioner of Malatia, who organized a Y. M. C. A. and has had an important voice in the church work there. Dr. Sarkis Moumjian, a busy man in Arsbir, yet he finds time to be useful in the church work there. Dr. Voskian Topalian,

A BRILLIANT YOUNG SURGEON

in Diarbekir, who, in addition to his heavy practice, gave a course of lectures in the church on helpful subjects. Dr. Kambourian, a careful diagnostician, a member of the board of managers of Euphrates College, Harpoot's most successful practitioner. Dr. Michael Hagopian, the surgeon of this locality, a member of the Co-operation Committee which has the management of all schools and churches supported from common funds, active in all church affairs, preaching often in the villages, a helpful Christian brother. Our membership consists of eight physicians and three pharmacists, or six local members and five non-resident.

I CONSIDER IT AN HONOR

to work with such men as these; a pleasure to be of service to them, and a privilege to encourage them to more Christian endeavor. The Association has held eight meetings of the local membership, from the first of January to the end of June. Just before the college commencement we held our first annual meeting which consisted of a session lasting all of one day and half the next. The topics presented were helpful, the discussions lively, the reports interesting, a very successful first endeavor.

The Association hopes to have its home in

THE ANNIE TRACY RIGGS MEMORIAL HOSPITAL

as soon as it is built. We hope to have a special room for ourselves in which will be our library and museum of pathological specimens. We have many plans for co-operation, self-improvement and helpfulness to the people. We have understandings among ourselves regarding fees, consultations, and operations. We take among us six medical publications, three weeklies, and three monthlies; also eight others, five weekly papers and two religious and three monthlies, three news magazines. These circulate *inter nos*. We have planned for a class in midwifery. An outline course has been adopted, and we hope to begin the class this coming autumn. As soon as the hospital is opened we will have *a class for training nurses*. These classes will be instructed jointly by members of our Association and our trained nurses with practical training in the hospitals. There are other plans, but as they are only plans, we will not mention them here. At any rate our Association promises to be wide awake and useful.

THE ASIA MINOR MEDICAL MISSIONARY ASSOCIATION

increases in usefulness each year. This year's round of our circular letter was full of interesting reports and useful suggestions. The first meeting of our Association was planned to be held in Aintab during the last week in July. At the last moment it was postponed because of the prospects for a much better meeting next summer.

It has been our intention to have a small branch hospital for students, orphans, and the people of Harpoot city near the Mission compound. There is no reason why we should wait until the hospital is built for this, so we purchased a building for forty liras and for seventy more liras entirely altered it. It contains two wards large enough for six to ten beds each, a small clinic room, a neat little operating room, a small kitchen, storage room, closets, etc. We call it our infirmary. It is all finished but the paint.

Just as soon as the hospital is built and ready Sister Laura,

AN EXPERIENCED GERMAN NURSE

will be here to take charge of it. She knows Armenian well and Turkish a little and is an efficient, economical manager.

A little more than a year ago the Danish Missionary organization promised us a nurse. Miss Marie Jacobson has been appointed. During the past year she has been in England studying in the hospitals and about mission work. She will come to us this autumn. She will have charge of the Harpoot nursing. The infirmary will be opened just as soon as she arrives. We eagerly await the day.

The hospital prospects brighten slowly. It is a long story of vexatious and unlooked for delays. We accepted an offer for the site. The donor kept us waiting for more than a year. We made new terms with him, agreeing to buy water and additional land at generous prices. Still he delayed. In disgust we dropped him and turned to another offered site of a more favorable location. We paid this donor's taxes. We paid a small outstanding debt. The papers of transfer were all made out, then we

BUTTED INTO A MULISH GOVERNMENT,

one excuse after another, clever, artful, always delaying. We appealed to our Consul for aid. He succeeded in getting a definite statement from the local governor that we must get permission from the central government. So a petition was made out and sent to Constantinople, the plans for the hospital were made out, adopted, and sent. So it is all now in the hands of the American ambassador in Constantinople to secure permission from his Imperial Majesty to build this little hospital in Harpoot. Our ambassador, Mr. Leishman, has done excellent work along this line in the past, and we hope will soon succeed with our petition.

The health of the station has been better than usual. Among the student body, the orphans, teachers, and all those dependent upon us,

MORE THAN A THOUSAND SOULS,

not one death has occurred. In our mis-

sion circle, our infant son, Leonard, died of broncho-pneumonia after being with us only two weeks. "Safe in the arms of Jesus."

The spiritual portion of our work has not been overlooked. This is our real object in coming here. All these forms of activity should be aids to the spiritual endeavor. It is our constant aim to faithfully fulfill this commission. We earnestly ask your aid by sincere prayer especially in this portion of our work.

The dispensary, as previously, has been under the efficient management of Pilibos Effendi Movosian. He has had five students who wish to become pharmacists, one gives his entire time and receives a small wage. The others put in as much of their time as they can spare from other duties. They are much interested.

During the year we have filled 6637 prescriptions, other sales, 2971, making a total of 9608 sales made. Of these prescriptions 1317 were sold with profit, 2099 at cost of dispensing or less, and the remainder free.

Finances of dispensary: The receipts have been 522.62 liras, Turkish (one lira equals $4.40). The expenses were: Value of drugs dispensed 380.14, salaries 84.26, rent 25.00, making total expenses 489.40. This leaves a net profit of 33.22 liras. This has gone towards increasing our stock.

CLINIC AND GENERAL PRACTICE.

Five morning clinics have been held each week for the poor. The afternoons have been given to bedside visiting and other forms of work as letter writing of which I have had an unusual amount this year.

I have seen 400 individuals at their bedsides; whom I have visited 820 times, making a total of 1220 bedside visits. I have had 2751 office patients who have returned 2826 times, total for office, 5577, making a final total of 6797 times advice was given. These may be classified by sex, males, 56 per cent, females 44 per cent; by class, orphans 10 per cent, teachers 6 per cent, local public 69 per cent, villages 15 per cent; by nationalities, Armenians 80 per cent, Turks 15 per cent, Kurds 3 per cent, others 2 per cent.

Operations 95. Trachoma, circumcision of conjunctiva, internal strabismus, rectal fistula, hernia, hydrocele, urethral calculus, vesicle calculus, uterine curettement, tubercular fistula, tubercular glands, bone necrosis, excision chronic ulcer, perinephretic abscess, excision optic tumor, epithelioma lip, dermoid cyst, osteochondroma, hemorrhoids, repair of perineum, sewing wounded hand, plastic surgery on mouth and nose, and resection of elbow. We hope that with the advent of a nurse and opening of a hospital that this branch of our department will develop.

Gifts from friends, supplemented by my own fees have been

SUFFICIENT TO MEET ALL EXPENSES

without drawing one cent upon the hospital fund. Total income $864.73.

We have planned the hospital in such a way that we can put it up a section at a time. It consists of four buildings around an open court. Three of these belong to the hospital proper and the fourth we call the physician's residence. Each building will cost from two to three thousand dollars. These will be put up as we get the funds. A sufficient amount is in hand to put up and furnish the first building, and partly enough for one of the ward buildings.—*H. H. Atkinson, M. D., Medical Missionary, A. B. C. F. M.*

* * *

THE late Dr. Mackay, a Canadian Presbyterian, educated at Princeton, who spent more than a quarter of a century in the island of Formosa, had an experience that has often been repeated in other places. When he took up his station in the important city of Bangkah, many years ago, the predjudice of the natives was so great that they literally TORE THE HOUSE TO PIECES and literally TOBE THE HOUSE TO PIECES and carried the fragments away. Fifteen years later, when he was on the eve of returning to Canada, the chief officials of the city sent a messenger with the request that he would allow himself to be carried through the streets in a sedan chair, preceded by the head men of the city.

PHYSIOLOGIC MEDICINE

CONDUCTED BY J. H. KELLOGG, M. D.

WHAT IS DISEASE?

DISEASE differs from health essentially in the fact that, in consequence of some wrongdoing on the part of the individual, the harmony of his bodily functions is disturbed. We often speak of disease germs, but it should be understood that germs themselves are not capable of producing disease. It is only when the resistance of the body has been reduced by wrong habits, by the violation of divine law, by sin, that the body becomes a prey to so-called disease germs. Typhoid fever germs are incapable of injuring a man whose stomach is sound, for the reason that the gastric juice of the stomach is capable of destroying, even digesting, typhoid fever germs. The same is true of cholera germs and other germs that enter the body through the stomach. Consumption germs can do the body no harm until after the bodily resistance has been reduced by sedentary habits, inhalation of bad air, impure blood through wrong eating, and similar digression.

Disease does not differ from health, except in the fact that in a state of disease the body is working under unfavorable conditions, and consequently is not able to perform its work properly, whereas in health the work of the body, being done under favorable conditions, is normally performed. Disease is not an entity, but a condition; it is not a thing, but a relation.

The healing process is always being carried forward in the body even in health. When one has exercised until exhausted, he must be healed of his fatigue before he can be ready to undertake the task again. The digestion of a meal leaves the stomach in a state of congestion from which it must be healed before it is ready to digest another meal. The body is being continually worn and damaged by its work; hence it must be continually healed. This healing process is carried on by the forces within the body. We say natural forces, as they are natural, and common to all animals, but we must not forget that these natural forces are divine forces. They are the evidence of the intelligent, active presence of creative power. In disease, unusual and extraordinary injuries exist which are due to the failure of the defenses of the body. Germs produce poisons which paralyze and irritate the tissues, causing inflammation, congestion, pain, and other disturbances. The organs, overwhelmed with work, become crippled, and unable to perform their usual duties; so digestion fails, the action of the liver, the kidneys, and other execreting organs is diminished, poisons accumulate, every tissue is damaged, every function disturbed. General fever, nervous collapse, or exhaustion may be the result.

Disease is not to be successfully combated by fighting symptoms, but by the removal of causes. A man whose head aches because of undigested food in his stomach will not be relieved by an application to his head, but by removing the fermenting mass from the stomach. Headaches due to constipation must be cured by relieving the bowels of the poisonous matters accumulated there by means of an enema or other suitable means. Weakness is not to be cured by the taking of a drug which will produce the sensation of strength,—an excitant, a stimulant,—but by increasing the ability of the body to store up energy from the food, and by the removal of the poisonous substances which paralyze the nerve centers, the primary source of energy in the body.

The true remedies for disease, or rather the true aids to recovery, are those measures which are essential to the maintenance of health, for the body in disease is essentially the same as the body in health. In disease the body requires special assistance, but not different in kind from that which it receives in health. Life is maintained by means of the energy which is introduced into the body by means of food, water, air, light, and heat. The advantages of these agents are secured by the regulation of the diet, clothing, exercise, sleep, and the various normal conditions of life.

Those means by which these natural forces may be made available in the treatment of disease are known as physiological remedies, and their use is termed

physiological therapeutics, or the physiological treatment of disease. This is now a thoroughly developed and organized system, the principles of which may be grasped by any intelligent person, and utilized to a most useful extent in dealing with a great variety of common maladies.

* * *

RATIONAL USE OF WATER.

WATER is a physiological agent. A drug is an anti-physiological agent. Water acts upon the body, and the body reacts to it. A drug does not act upon the body; the body simply acts upon the drug to get rid of it. Water applied to any part of the skin causes it to contract, and thus stimulates an internal portion associated with that part. The portion of the skin overlying the stomach is so intimately associated with the stomach by the vasomotor nerves that whatever happens to the skin over the stomach happens to the stomach; that is, as regards its circulation and nerve supply.

Over the heart an area of the skin about as large as the two hands is associated with the heart. When we wish to slow the heart beat, we put an ice bag over this part of the skin, and when we wish to make the heart beat faster, we remove the ice bag. Whatever is done to excite the skin over the heart, excites the heart also. The skin overlying the liver is associated with the liver; hence, if a cold application is put on this surface, it contracts the blood vessels of the liver; but if a hot application is made to the skin, it dilates the blood vessels. Therefore, if the liver is congested, the blood can be removed; and if its vessels are obstructed, healthy blood can be made to pass through it and it will be healed, for it is the blood that heals.

When one feels drowsy, if he bathes his face in cold water, he will be aroused.

If a person has an internal congestion or inflammation, we may put him into a tubful of hot water, and the heat will dilate the surface vessels, and will thus bring the blood into the skin in such quantities that the inflamed part will be drained of the surplus blood, and thus relieved. This is the simplest thing in the world.

Here is a man whose heart is running away. Alcohol may be given him to slow the heart. How long will it be before the alcohol reaches the heart?—It must be first taken into the stomach, absorbed, circulated, and distributed all over the body; it goes to the head and the heels and all the places between, and the heart gets only a little of it. If we put a cold application over it, that very instant the heart feels the influence of the application. Why?—Because the impulse travels over the nerves directly to the heart, and it goes at the rate of two hundred feet a second. How far it is to the spinal cord?—About a foot. And how far it is to the heart?—Say a foot. That is two feet to the spinal cord and back to the heart. So it requires only one one-hundredth of a second before the cold application begins to do its work.

Suppose a person faints away, and falls upon the floor; we have only to dash a little cold water upon the patient's face, and the heart begins to beat again, the chest expands, the eyes open, and the patient lives.

Every case in which an organ has ceased to do its work is in a certain sense a case of fainting. Here is a stomach that has fainted away at the descent of an enormous dinner; the poor stomach is unable to do its work. What is to be done? Shall we swallow pepsin, the digestive principle from a pig's stomach, or some stimulant? Better apply a hot fomentation over the stomach, followed by a short cold application and massage. The stomach is energized by the applications, and goes to work.

So it is with every bodily organ. If one knows where to apply the water, hot or cold, as the case may be, he can wake up any organ of the body. Water is a remedy that will revive a sluggish organ almost instantly. It is an almost universal remedy, and it is well to know how to apply it in simple cases.

Malarial disease is curable by quinine. This is a parasitic disease, and the quinine kills the parasite; but it does not cure the man, because he succumbs to the disease again if he is exposed to a

new infection. Water operates differently. By cold water properly applied, the strength and vigor of the body are increased to such a degree that it is able to destroy the parasites without the quinine, and then it becomes a dangerous place for them. Cold water renders the body uninhabitable to the parasites, while quinine acts simply as a temporary palliative. Cold water is not an infallible remedy for malaria, but a most valuable preventive.

HYDROTHERAPY AND HOT WEATHER.

Cold is a universal antidote for heat, as heat is for cold. We use water to put out fire and fire to warm cold water. There are no disorders or morbid conditions which so readily respond to the use of water, and which are so radically and readily benefited by hydriatic applications as those especially incident to hot weather. The public generally have found this out, and hence it is a custom in many countries, even in lands where the remedial use of water is not well understood, to make a summer trip to the seaside to get the benefit of the hydrotherapy of the sea.

Sea bathing, which from the most ancient times has been considered a great health promoter, is wonderfully beneficial to thousands. And what is true of sea bathing is also true of lake bathing, river bathing, and bathing in natural sources of water of all kinds. We must remember, however, that what is good for one person is not always good for another, and many are injured by sea bathing through ignorance.

COLD BATHING.

Cold has the marvelous property of increasing vital work of all kinds. When cold water is applied to the skin, impulses are sent inward that awaken every organ of the body. Let us see what takes place: When a person dashes into cold water, the first thing he does is to draw a deep breath; the lungs swell out, a deep inspiration is taken, and the heart begins to beat with wonderfully increased vigor and strength. This deep breathing is purely involuntary, just as is the jerking of the leg when the bottom of the foot is titillated; it is one of the organic functions carried on by the bodily forces entirely independent of the will.

This deep breathing increases lung activity, thus bringing in more oxygen; it increases heart activity, so that the blood is circulated with greater force; hence we have more blood and purer blood carried into every tissue of the body. The result is a stirring up of the bodily forces, and a distribution throughout the system of a larger amount of highly vitalized and oxygenated blood. Thus we see that the blood-making powers of the body are increased by sea bathing or by the application of cold water in any form.

Another very important activity which is increased by the application of cold or by cold bathing is the digestive function, by which the food is absorbed and taken into the blood. The application of cold water to the skin has the effect to stimulate the secretion of gastric juice. Every one knows the effect of taking a walk on a cool morning, or of sea bathing—what an appetite it gives. Digestion as well as appetite is wonderfully stimulated by cold. That is why the Eskimo can live on blubber and other food, the digestion of which would be quite impossible to the ordinary stomach.

Cold air stimulates the formation of gastric juice by the peptic glands. The liver and the salivary glands are stimulated in the same way.

All the functions of the body are stimulated by a general application of cold water or cold air.

THE NEUTRAL BATH.

The neutral bath is a full bath at a temperature of from 92 to 95 degrees. In cold weather a little warmer water may be used than in summer. The neutral bath is an excellent remedy for sleeplessness, and for nervousness in both adults and children. A long neutral bath is an excellent means of antagonizing the effects of excessive summer heat.

SUNSTROKE AND OVERHEATING.

Suppose one has been overheated, or had an attack of sunstroke; what is to be done? Water is the best means in the world of rescuing one from the effects

of sunstroke or overheating. The application of cold water alone is dangerous, because it drives the blood inward; but when cold water is applied, and accompanied by vigorous rubbing, the blood is kept at the surface, and the body is rapidly cooled.

Sunstroke is a very dangerous accident, and is likely to prove fatal without proper treatment; but by the aid of cold water poured from a height of five or six feet, the water being about 60 degrees or colder (ice water, if you can get it), and with two or three people rubbing the patient vigorously, we may expect cure in almost every case. Especial pains should be taken to wet the head and back of the neck, and to keep these parts cool. Continue the rubbing both until the skin is well reddened and consciousness restored.

STOMACH DISORDERS.

Hydrotherapy is the best remedy for the stomach and bowel disorders so prevalent in the summer. Cold applications to the abdominal surface are almost a panacea for excessive activity of the bowels. The reason is that the blood vessels of the congested parts are made to contract. A hot enema should be given for cleansing the bowels and stimulating the circulation. A cold compress to the abdomen, changed every hour or two, affords great relief. If there is pain, a fomentation should be applied for fifteen minutes, followed by the cold compress, to be changed every ten or fifteen minutes; it must be allowed to warm up, and then be changed. This keeps a current of vitalizing blood flowing through the part. By the cold application there is a contraction; and then as the blood warms up, there is a reaction and a crowding out of the blood. When the cold compress is applied again, there is another contraction, then as the compress becomes warm, reaction again takes place, and another crowding out of the blood; at each time fresh blood comes in, and the white corpuscles are enabled successfully to combat the parasites and to carry them off.

THE HYDRIATIC TREATMENT OF TYPHOID AND OTHER FEVERS.

It is not the purpose here to discuss fully the treatment of typhoid fever, but only to give a few brief hints about the use of water in this very common and very grave disease. Under ordinary treatment, the mortality from this disease is about twenty to the hundred. Under skillful treatment by baths, the mortality has been reduced to two or three per cent and even less.

First, let us remark the importance of water drinking as a means of washing out the poison through the kidneys and the skin. The patient must drink half a glass of water every hour when awake, and more if he will, and whether he is thirsty or not. He does not drink to quench thirst, but to cleanse the blood from the typhotoxin and other poisons produced in this disease. The water may be advantageously flavored with fruit juices of various sorts, but should not be sweetened with sugar. If the patient will not drink, an enema at 80 degrees F. must be given three times a day, and retained as long as possible. An enema to cleanse the bowels must be given daily besides.

The fever is best controlled by the cooling wet-sheet pack.

Headache is best relieved by the head compress, changed as soon as it begins to warm, and an ice collar about the neck, or a towel wrung out of ice water.

The cool abdominal compress must be applied from the beginning of the disease during its entire course.

For the cough, which is sometimes troublesome in typhoid, apply a chest pack.

If the patient becomes delirious, the prolonged wet-sheet pack or the long full bath at 92 degrees F. will afford relief. The bath may continue from half an hour to an hour or even longer. The patient must be gently rubbed from time to time, to prevent chilling. When the pack is employed, the wet sheet should be changed as soon as it becomes warm, and repeated until the patient's temperature falls, an hour or more if necessary.

The diet in typhoid fever should be grape juice or fruit juice of some sort, with little or no cane sugar, for the first three to six days. Then cereal food, such as zwieback, granola, granut, browned rice, or malted nuts may be added. Avoid beef tea and milk. Fresh

ripe strawberries, baked apples, prune puree, and fruit soups are most wholesome for the fever patient. A competent physician must be employed.

USEFUL HINTS FOR THE LOCAL APPLICATION OF WATER.

A very cold compress, as a thick folded towel, or a mass of cheese cloth, applied to the head and face, will relieve headache when the head is hot. The hair should be wet, and if the case is obstinate apply an ice collar around the neck. Change the compress as soon as it becomes warm.

A cold compress applied to the abdomen in typhoid fever during the entire course of the disease will prevent ulceration and hemorrhage in nearly every case. The compress should cover the whole abdomen, should be wet in water at 60 degrees F., and must be changed every twenty to forty minutes, according to the degree of fever, or as often as is becomes well warmed.

For weak or failing heart, apply a cold compress over the heart (60 degrees F.) for fifteen or twenty minutes, and repeat every hour.

For inflammation of the lungs apply a cold compress (60 degrees F.) over the whole front part of the chest and the affected side, and change every fifteen to twenty minutes, or when well warmed. Apply a fomentation for ten minutes once in two or three hours, or more often if pleurisy pain is present. Keep the legs and general surface warm.

An acute coryza, or cold in the head, with sneezing and running at the nose, may often be cured in a night by wetting the hair, and putting on an oil-muslin or mackintosh bathing cap to be worn overnight.

For a severe pain due to inflammation in the hand or finger, immerse the elbow in cold water.

For a lung cough, apply the chest pack. There is no other remedy so effective, and at the same time harmless, as the chest pack. The compress should warm up at once and keep warm.

For a sleepless man, who has too much blood in his head, there is nothing better than a bath at 92 degrees F. for thirty minutes at bedtime, and a wet girdle to be worn during the night. The girdle is a towel long enough to reach once and a half around the body, wrung dry out of cold water, and covered so it will warm up quickly, with a thick woolen bandage.

For a "crick in the back," a large fomentation applied at bedtime and followed by a towel wrung out of cold water and covered warm with flannel to remain overnight, is worth a hundred porous plasters and all the liniments of the pharmacy, "pain-killers," "wizard oils," "kidney pads," "electric belts," and all the rest of the quackish ilk.

For pain in the eyeball, apply a light fomentation over the eye and forehead, just above the eye, not the cheek.

For colic pain, give a hot enema, apply a fomentation, and afterward a wet girdle for an hour. Repeat this procedure if necessary.

Pain in the pelvis is almost always relieved by a very hot foot bath, which relieves the congestion by diverting the blood into the legs. A hot hip and leg pack is still more effective.

RATIONAL MIND CURE.

THE potent element of mind cure is belief. Absolute, unfaltering belief is always an effective force. Belief in the fetish of the heathen, belief in the witch doctor, the Indian medicine man, the magnetic healer, the hypnotizer, the patent medicines,—belief in these and other pretended "healers," may be sometimes capable of causing temporary cures. But it is impossible to cure a real disease with a counterfeit faith, although there may be a palliation of the symptoms. It is as impossible to accomplish this, as it is impossible to cure a real disease by the application of remedies that have no relation to the cause of the disease. An inflammation of a kidney, for instance, will continue its progress just the same, no matter what the patient believes about it. By and by the limit of endurance will be reached, and the sufferer will succumb in spite of his belief.

Rational mind-cure does not undertake to cure structural diseases by purely psychological means. Rational mind-cure does not undertake to cure diseases

which are in themselves incurable, and those which require the surgeon's knife. It does not undertake to cure a tumor, for it is only necessary to cut it off; nor a broken limb, which only needs to be set. It does not undertake to reduce a dislocated shoulder which must be brought back into place by mechanical means. Rational mind-cure promises less than false mind-cure, but accomplishes more.

The basis for true mind-cure is to be found in genuine religion,—sound, common-sense religion. The prejudice against religion entertained by too many is largely the result of confusing religion with superstitition. Many intelligent persons hold themselves aloof from religious associations and activities, not because they are altogether irreligious, or because they are in heart opposed to the principles of righteousness, but because they have been educated to look upon religion as something unnatural, sentimental, sensational, or theological. This is a most mischievous and destructive error. Religion is a natural thing. To be perfectly natural is to be perfectly spiritual. To be perfectly spiritual is to be perfectly natural. (Man's perverted state cannot be considered as his natural condition.) The foundation of religion is recognition of the fact that we are finite beings; that we are created by an infinite power that dwells in us and in all about us, that is always seeking to bring to us the very best that we can appreciate, that maintains our life, and that heals our wounds when we are injured, and our diseases when we are sick.

We are not made up of a moral part and a physical part. Man is a unity. His moral, intellectual, and spiritual life are so interwoven that they cannot be separated. Suppose that a man has a wound in his hand. He looks at it, and sees that it is slowly healing. What heals it? No physician can heal it. No surgeon can do anything, except to keep it clean and protect it, and watch over it while it is being healed. Men say, "Nature heals it." What is nature?—Nature is to some people a philosophical name for God, who is the active force in nature—the "all in all."

Common sense tells us that there is an intelligence at work throughout the universe, and that this power is in us, in our bodies. We catch a glimpse of the working of this power whenever we look at a part that has been wounded, and see the skin gradually covering the surface again. If we look through the microscope, we find that this healing is being done with the most marvelous intelligence, with consummate skill. We see forces at work in cell life that remind us of an army of soldiers, movements akin to those of companies of soldiers marching and countermarching. Under the microscope, the contents of living cells are seen moving in systematic order, hither and thither, grouping themselves after fixed laws.

The same forces that are working in gravitation, in the growth of the trees, in the lightning, in the storm, in the tidal wave, in the hurricane, and in all the great processes of nature, are at work within us.

There is as great a miracle in the purple fruit of a grape vineyard as in the turning of the water into wine at Cana. There is as great a miracle in a cornfield as in the feeding of the five thousand. The power that takes the little grains of wheat and kernels of corn, expands them into leaves, rears them up in stalks, and manufactures five hundred kernels out of one,—this power is just as mysterious as the power which expanded the five loaves to feed five thousand people. It is the same thing. One of these phenomena we call natural, the other a miracle, because we are accustomed to see the one and not the other. This same miracle-working power is ever at work in our bodies, creating, healing, regulating, directing, harmonizing all the mysterious forces which throb and thrill within us.

The miracles of healing and other marvelous works wrought by Christ were only a manifestation of the same creative power which is at work in the cornstalk, the grapevine, and in all the world of life about us. We do not ordinarily apply the word "miracle" to the creative energy manifested in the production of the living bread, in the waving fields of grain, and the vast acres

of growing corn, because the phenomena of vegetable life has become commonplace through our familiarity with it, and because these are the ordinary and regular methods by which the creative hand supplies our daily needs. Nevertheless, we may with profit learn from the special manifestations of creative power seen in Christ's miracles the lesson that the source of power is one and the same, although the manifestation is different. This view does not belittle Christ or his power, or lessen the authority or sanctity of his work, but rather lifts the ordinary operations of nature to the same level, and enables us to see in them all the active beneficence of him who made us each, who actively and constantly interests himself in our behalf in providing for our daily and constantly returning needs.

Belief in God is the basis of the true mind-cure. Belief gives rise to hope, and hope is one of the most powerful stimulants to which the body can be subjected. If a man have nothing to hope for, he must be depressed, melancholy, cheerless. The emotions have a marvelous influence over the body. We know how joy lights up the face, and makes the eyes sparkle; how despair and melancholy darken the countenance, and draw the lines down. If any man needs to have a sound basis for hope and good cheer, it is the sick man. The man who believes in God, and who knows that he cares for each one of us, has a great foundation upon which to base faith and hope.

If we believe in God, in this ever-present intelligence and ever-present will that is seeking to guide us right, that is always striking harmonious chords, that is always drawing us upward to that which is for our good, that is always leading us onward toward that which is truest, most beautiful, sweetest, and best, and to that which will bring into our lives the greatest joy, peace, and satisfaction,—if we really believe in this power within us, we shall be led by that belief to put our wills into harmony with that will, to co-operate with this divine will in doing those things that make for our good.

Prayer, then, does not change God, but changes man. Prayer does not modify God's plans or purposes, but brings man into harmony therewith, and is an advertisement to man of what God has in store for him. Here is the physiological, the scientific basis for faith. We are certain to receive the things for which we sincerely pray, for our desire to pray is put into our hearts by the all-wise Being who knows our needs and desires to supply them, and adopts this mode of preparing us to receive the things needful for our welfare.

* * *

THE AMERICAN MEDICAL MISSIONARY COLLEGE.

REV. M. C. WILCOX, PH. D.
[Twenty-five years a missionary in China.]

NOT long since I spent several weeks at the Sanitarium, in Battle Creek, Mich., for treatment and rest after months of almost incessant public speaking. While there I had the privilege of addressing the students of the above-named college and was glad to find that they are connected with five or six different branches of the Christian church, my own—the Methodist Episcopal—being included. So greatly was I pleased with what I saw and learned of this medical college then and at other times that I desire to extend this information to others to whom it may prove helpful.

I learn that the American Medical Missionary College was incorporated in the State of Illinois in 1895 with the sole purpose of training medical missionaries for work in whatever fields they may choose at home or abroad. An important purpose in establishing this college is, I understand, to provide an opportunity to receive a thorough medical missionary training for students whose purpose is to devote their lives to medical mission work but who are unable to meet the expenses connected with such special, scientific training.

The connection of the work of the college with that world-famed Sanitarium, and also with the great hospitals of Chicago, affords specially favorable opportunities for work along both medical and missionary lines. At Battle Creek the students are daily brought in contact with the sick through their practical work in connection with the

A CLASS IN BACTERIOLOGY, A. M. M. C.

Sanitarium. There they have an opportunity to earn their current expenses by work in the laboratories, offices, treatment rooms, and surgical ward of the Sanitarium, and in the bedside care of the sick, all of which are, at the same time, unsurpassed means of obtaining medical knowledge.

I am told that the members of the medical faculty residing at Battle Creek are all connected with the Sanitarium and are able to present to their students many interesting cases that come under their care from time to time—cases which would seldom or never be met with in any ordinary hospital. As assistants in the operating room, the students are brought in touch with surgery at close range. Throughout all their course the students are surroumded by a moral and spiritual atmosphere which, I can testify, is truly elevating and helpful.

In their work in Chicago the students have all the privileges afforded in the Cook County Hospital to the students of other Chicago medical colleges. A number of the professors of the American Medical Missionary College are also on the faculties of Rush Medical College and of Northwestern University. The American College, of which we are speaking, has a large missionary dispensary in the Stock Yards' district of Chicago—the "Jungle" written about by Mr. Upton Sinclair. The twenty to twenty-five patients daily attending this dispensary afford an abundance of interesting cases for the clinics held there. These patients are suffering from all kinds of physical, mental, and moral ailments, and afford the students a chance for missionary work similar to that Dr. Dowkontt so ably conducted for more than a quarter of a century in New York City.

For admission students must present a high school diploma or a diploma from a similar institution, and their preliminary education must include two years

THE CHEMICAL LABORATORY, A. M. M. C.

of English, two of Latin, one each of algebra and geometry, and one year of physics. With these qualifications students can readily secure the endorsement of the Michigan State Board for the preliminary education. This certificate of endorsement is accepted by the General Medical Council of Great Britain and exempts from further preliminary examinations for admission to English medical colleges. Students holding literary degrees are not obliged to present detailed reports of the studies pursued, though such reports are advantageous.

I am pleased at the fine record the American Medical Missionary College has made, and at the high standard it has always maintained. I am informed that quite a number of its students, after completing its regular course, have taken post-graduate work, and have invariably secured excellent standings. Five of the graduates have graduated at the great Edinburgh University without taking post-graduate work in other American schools. According to the last report of the examinations before State Boards of fourteen states of the Union, only 4.4 per cent of the graduates of this college failed to pass. This shows that very thorough work is being done.

It is needless to say that this college confers the degree of M. D. the same as do other medical colleges of the United States. The degree is granted by the authority of the State of Illinois.

Four of the graduates of this college are in China, two in India, and one in Japan, from which field two others have also just returned. Many of the graduates are also doing missionary work in other fields, which though needy, are not considered heathen lands.

I found that many of the present students have already decided upon their future field of labor. Two have chosen China, four Africa, two Bulgaria, and one each have selected Armenia, Honduras, and Mexico.

After careful inquiry I can truly say that this medical missionary college is entirely free from anything like a proselyting spirit, which is also true of the Sanitarium. The college is entirely of an *inter-denominational character*, and I am thoroughly convinced that the supreme

aim of Dr. Kellogg, the president of the college, and of all others connected with it, is to extend the triumphs of the cross through the medical missionary agency and not to build up any one Christian denomination. In view of this fact, and of other facts I have given, I most heartily endorse the American Medical Missionary College.

I would like also to speak at this time of the Battle Creek Sanitarium and Hospital Training School for Nurses which is doing a great and important work in different lines, but also of an inter-denominational character. Perhaps I shall have a chance to say something about this in the next number.

All inquiries relating to the college should be addressed to the president or the registrar, Battle Creek, Mich. In closing I would add that I hope one of my sons will devote his life to medical work in China, and I shall be glad if he receives his training in this college followed by post-graduate work elsewhere.

Mt. Vernon, Iowa.

DAILY BREAD.

WATCHING a crowd of people scrambling frantically off the Boston ferryboat one morning, I remarked to the friend beside me, "Give us this day our daily bread." "These people are after cake," he tersely answered. There was point to the remark; those late-goers to store and office represented the great host of people who think that luxuries are necessities. Almost every one of them was probably desirous of some prize which he did not need. It is because the twentieth century is covetous of houses equal to a neighbor's, of raiment surpassing that of other people, and of the accessories of social position possessed by the few, that it wears such a wrinkled, careworn face. Covetousness, which the New Testament calls idolatry, is the century's sin.

THE MEDICAL MISSIONARY was represented at the recent meeting of the Secretaries of the various foreign mission boards held in New York, by Dr. J. H. Kellogg and Dr. Geo. D. Dowkontt, who were present by invitation. In our next number we hope to give account of this important meeting.

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FEBRUARY, 1908.

DR. W. H. RILEY, one of the Sanitarium medical staff, has been elected president of the Calhoun County Medical Association. This is the name of the local county association, and the action of the association shows the esteem in which Dr. Riley is held by his fellow physicians.

ON an evening of last week the following matters were going on simultaneously at the Sanitarium and almost if not quite unconsciously of each other: A banquet of the Young Woman's Christian Association; a lecture in the parlor by one of the physicians; a friendly game of ball among the young people in the gymnasium; a meeting of the directors; and a meeting of the W. C. T. U. All these were well patronized and the fact that all could be going on at the same time goes to show something of the capacity of the building and of the family.

THERE are 4,000 Chinese in the city of Chicago. There is an opening and an urgent call for a medical missionary to go to work for the Orientals there. Offices and rooms are ready, moderate salary is secure, and the opportunity to do good is ample and inviting. Is there anyone ready to fill this call? Here is an opportunity to do foreign missionary work at home and under the most favorable conditions. Is there anyone of our readers who is ready for such a call? If so, let him send to us for particulars.

Medical Missionaries Serving Under British and Other Societies

ALL ARE FULLY QUALIFIED MEDICAL GRADUATES HOLDING VARIOUS TITLES AND DEGREES IN MEDICINE

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Wheeler, Miss C.....Quetta, Beluchistan
Stuart, Miss E. G.....Quetta, Beluchistan
Stagg, Miss G. M.....Quetta, Beluchistan
Lillingston, Miss A....Bangalore, S. India
Lockwood, Miss.....Bangalore, S. India
Moore, Miss H.....Bangalore, S. India
Longmire, Miss.....Khammamett
Mitcheson, Miss E.....(sick leave)
Marks, Miss E.....(sick leave)
Colthurst, Mrs.. (3)..Matya, Burj, Calcutta
Langley, Miss M (3)...Penegar, C. P. India
Massy, Miss M (3).....Tarn Taran, Punjab

CHINA.

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Cooper, Miss F.....Longtong, Fuhkien
Shire, Miss M. J.....Foochow

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Hearn, Rev. J. G.....Hazaribagh, Chota Nagpore
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Muller, Miss.....Delhi
Hayes, Miss.....Delhi
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Wynne-Edwards, Miss St. Catharine's Hospital Cawnpore
Gibson, Miss K.....St. Catharine's Hospital
Dawson, Miss.....St. Catharine's Hospital

Ferguson-Davie, Mrs.. Rawal Pindi
Dexter, Mrs. Allen....Sarawak, Borneo

CHINA.

Phillips, Miss E.....Ping Yin, Shantung

AFRICA.

Booth, Very Rev.L. (2) Umtata, Kaffraria
Peake, Rev. J. S.....Chopiland
Pryce, Miss E.....Sydenham, Durban

CHINA INLAND MISSION.

CHINA.

Carr, S. H.....Kai-feng-fu, Honan
Guinness, G. W.....Kai-feng-fu, Honan
Carr, J. C.....Pingyang, Shansi
Cox, G. A.....Chin-Kiang
Hogg, Alfred.....Chifu
Hewett, Julius.....Ian-cheo, Kansuh
Judd, Fred. H.....Raochow, Kiangsi
Laycock, A. P.....Chang-sha
Parry, H.....Chentu, Sichuan (at home)
Shackleton, W.....Ching - Kiang - pu, Kiangsu
Wilson, W.....Sui-ting, Sichuan (at home)
Taylor, F. H.....At home.
Anderson, John A (1)..Tai-chow, Che-Kiang
Anderson, Mrs.(1).....Tai-chow, Che-Kiang
Clark, Walter T. (1).. Ta-li-fu, Yunnan
Elliott, C. C. (1).....Hsuting, Sichuan
Keller, Frank A. (1)..Chang-sha, Hunan
Barrie, H. G. (1).....Chang-sha, Hunan

ZENANA BIBLE AND MEDICAL MISSIONARY SOCIETY.

INDIA.

Board, Miss B.....Patna
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Hanson, Miss H.....Lucknow
Landon, Miss E.....Nasik
Lea-Wilson, Miss.....Nasik
Mackinnon, Miss.....Patna
Mayne, Miss.....Lucknow
Pailthorpe, Miss.....Almora
Slater, Miss C.....Jaunpur
Cockburn, Miss (2)....Benares
Stilwell, Miss (4).....Patna

FRIENDS' FOREIGN MISSION.

CHINA.

Davidson, W. H.....Tung - Chwan, *via* Chungking, W. China
Harris, Miss L. E.....Tung - Chwan, *via* (at home)
Hodgkin, H. T.....Chentu, W. China

INDIA.

Robinson, Joseph.....Sehore, Bhopal State
Robson, Mrs. H.....Hoshangabad

SYRIA.

Manasseh, Antonius J..Brumana, Beirut

MADAGASCAR.

Moss, C. F. A.....Tananarive (at home)

THE UNITED METHODIST CHURCH.

CHINA.

Marshall, F. W.....Wu Ting Fu, Shantung
Jones, A. Fletcher.....Chu - chia, Shantung
Baxter, Alex. K.....Yung Ping Fu, via Tien-tsin
Plummer, W. E.....Wenchow, China
Jones, John.....Ningpo, China
Savin, Lewis.....Tong - chuan, Yunnan, Tien-tsin
Robson, John K (1)..Kai-ping, *via* Tien-tsin

EDINBURGH MEDICAL MISSIONARY SOCIETY.

Mackinnon, F. I.....Damascus, Syria
Turnbull, J. N.....Damascus, Syria
Vartan, P.K.....Nazareth, Palestine
Scrimgeour F. J. .....Nazareth, Palestine
Huntly, W.....Agra, India

PRESBYTERIAN CHURCH OF VICTORIA, AUSTRALIA.

NEW HEBRIDES.

Mackenzie, Ewen.....Ororo, East Santo
Crombie, David.....Wala, Malekula
Nicholson, J. C.....Lenakel, Tanna
Bolton, Henry.....Vila

WELSH PRESBYTERIAN CHURCH.

Williams, E.....Jaintia, Assam
Williams, O. O.....Karimganj, Assam
Jarvie, Geo. R.....Chenapoongee, Khasia Hills
Fraser, Peter.....Unlocated

"BRETHREN'S" MISSION.

Amner, F. H.....Tong-kah, Siam
Fisher, Walter.....Kazombo, C. Africa
Parrott, A. G.....Shanghai, China
Case, J. N. (1).....Wei - hai - wei, N. China
Morey, O. L. (1).....Bihe, C. Africa
Hunter, Ernest(3).....Belgaum, S. India

LONDON SOCIETY FOR PROMOTING CHRISTIANITY AMONG THE JEWS.

PALESTINE.

Wheeler, Percy d'Erf..Jerusalem
Masterman, E. W.....Jerusalem
Guerney
Anderson, W. H.....Safed

NORTH AFRICA MISSION.

Wilson, George.....Tangier, Morocco
Breeze, Miss G.....Tangier, Morocco
Churcher, T. G.....Susa, Tunis

UNIVERSITIES' MISSION TO CENTRAL AFRICA.

Hine, Right Rev. Bishop.....Zanzibar
Haviland, H. A.....Zanzibar
Howard, Robert.....Lake Nyassa

KOREAN MISSION.

Baldock, E. H.....Seoul, Korea
Carden, W. A.....Seoul, Korea
Weir, H. H.....Chemulpo, Korea

UNION MEDICAL COLLEGE, PEKING.

Wenham, H.....Peking, China
Wheeler, E. R.....Peking, China
Stenhouse, J. M.....Peking, China

SALVATION ARMY.

Turner, P. E.....Nagercoil, S. India
Mumford, E. R.....Nagercoil, S. India
Maxwell, Ernest.....Anand, Gujerat, India

MARDAN MISSION.

Lankester, Cecil.....Mardan, nr. Peshawur, N. W. F. P., India
Holst, Miss M. K. S...Mardan,

LUDHIANA, MISS GREENFIELD'S MISSION.

Greenfield, Charlotte..Ludhiana
Umpherston, Miss A.M. Phillour, Ludhiana

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Brown, Miss Edith....Ludhiana
Noble, Miss(1).....Ludhiana
Condict, Miss Alice B.(1) Ludhiana

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Hutton, S. K.....Okak, Labrador

FREE CHURCH OF HOLLAND.

Scheurer, J. G.....Djokjakarta, Java

PRESBYTERIAN CHURCH OF NEW ZEALAND.

Bowie, John T.....Ambrim, N. Hebrides

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Martin, J.....Antioch, Syria

RHENISH MISSIONARY SOCIETY.

Kuhne, J. E.....Tung-kum, Canton

BASEL MISSIONARY SOCIETY.

Stokes, W.....Calicut, India

JAFFNA MEDICAL MISSION.

Curr, Miss I. H.....Jaffna, Ceylon

JAFFA MEDICAL MISSION.

Keith, J. Melville.....Jaffa, Palestine

SOUTH AFRICAN GENERAL MISSION.

Hertzlet, Lewis E.....Ntabamhlope, Africa

CENTRAL MOROCCO MEDICAL MISSION.

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McALL MISSION, FRANCE.

Burroughs, W. H.....St. Etienne

NANNING, KWANG-SI MISSION, CHINA.

Clift, H. L.....Nanning, Kwang-si, China

NAMES OF MEDICAL MISSIONARIES SERVING UNDER AMERICAN SOCIETIES OMITTED FROM LIST PUBLISHED IN JANUARY.

Cumberland Presbyterian Church of America.

Balph, James S., M. D., 1887 — Latakie Syria
Wright, J. M., M. D., 1902 — Takhing-chow, West River, China.
McBurney, Kate, M. D. 1903 — Takhing-chow, China
McBurney, Jean, M. D. 1903 — Takhing-chow, China
McCarrol, Calvin, M. D. 1904 — Nicosia, Cyprus
Peoples, John, M. D., 1908 — Mersina, Asia Minor
Scott, Ida M., M. D., — Takhing-chow, China

Associate Reformed Presbyterian Church.

Grier, Mrs. Mark B. — China

American Friends Board of Foreign Mission.

Andrews, B. F., M. D. — Matehuala, Mexico
DeVol, George F., M. D. — Luho, China
De Vol, Isabella F., M., M. D., — Luho, China
Goddard Abigail, M. D. — Nowgong, Central India
Blackburn, Elihu, M.D. — Kaimosi, Br. E. Africa
Gaynor, Lucy A., M. D. — Nanking, China
Pretlow, Clotilde, M. D. — Gibava, Cuba

Working in United States, Etc.

Atterbury, B. C., M.D. — California
Julian, Rev. C. P., M. D., — West Indies
Black, James H., M. D. — Porto Rico.

Protestant Episcopal Board of Missions.

Boone, Henry W., M. D., — Shanghai, China
Lincoln, C. S. F., M. D. — Shanghai, China
Jeffreys, W. H., M.D. — Shanghai, China
LeClaude, H., M. D. — Wusih, China
Tucker, A. W., M.D. — Shanghai, China
Myers, Angie M., M.D. — Shanghai, China
Glenton, Mary V., M. D., — Wuchang, China
Woodward, E. L., M.D. — Anking, China
Taylor, H. B., M.D. — Anking, China
MacWillie, John, M.D. — Wuchang, Chiua
Tuesler, R. B., M.D. — Tokyo, Japan
Street, L. A. B., M.D. — Kioto, Japan

CLASSIFICATION OF BRITISH MISSIONARIES ACCORDING TO COUNTRIES.

COUNTRIES	MEN	WOMEN	TOTAL
China	116	52	168
India	65	85	150
Africa	40	3	43
Palestine	14	0	14
Persia	4	5	9
New Hebrides	5	0	5
Syria	5	0	5
Japan	4	0	4
Assam	4	0	4
Korea	4	0	4
Arabia	4	0	4
Egypt	2	1	3
Turkey	3	0	3
Soudan	2	0	2
Madagascar	2	0	2
Siam	1	0	1
Java	1	0	1
Labrador	1	0	1
Canada	0	1	1
France	1	0	1
	278	147	425

NOTE—The numbers placed against names in the foregoing list indicate graduates of other than British medical schools as follows: 1. United States; 2. Canada; 3. India; 4. Australia.

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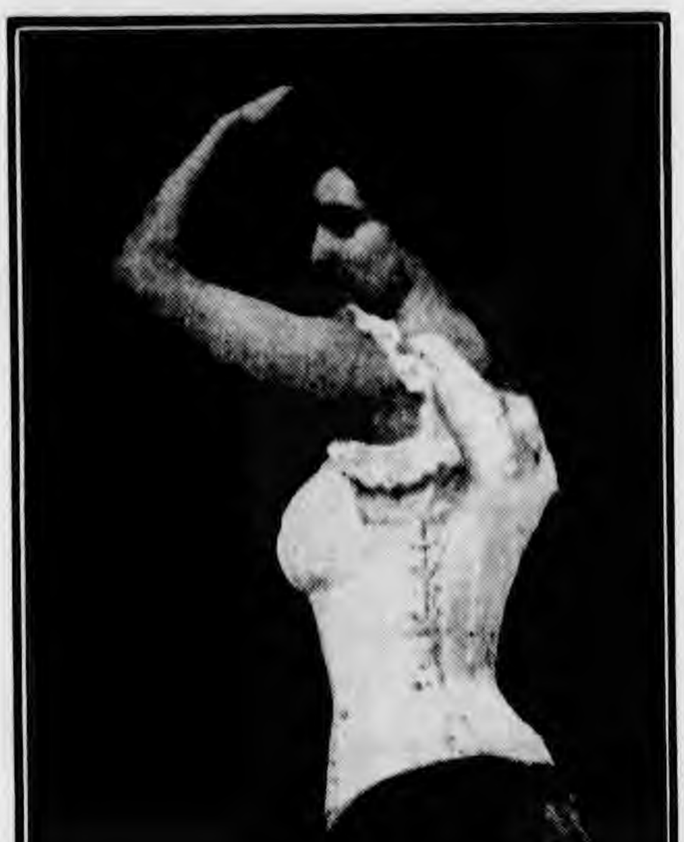

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* * *

THREE students from Bulgaria have recently joined the preparatory school, having a medical course in view. These with others who have come are teachers by profession, consequently intelligent and cultured young people. None of them upon arriving have been able to speak a word of English, but they soon become familiar with our language and make very acceptable students and associates. The last arrival has just reached us. He is Mr. Demetri Diamandieff, a student and soldier as well.

M. M. Jan 22/08

WE learn from England that Dr. H. J. Williams of the '06 class A. M. M. C., who has recently taken degrees at the Edinburgh University, has gone to the Rostrevor (Ireland) Sanitarium to fill Dr. Bell's place there while the latter is in Madeira recuperating his health. The patronage of the institution is quite good. The institutions at Caterham, near London, and at Leicester, are doing well. Great Britain proves to be a very receptive field for health principles, and our workers have all they can do to respond to the many calls that are coming to them.

yellow feeling.

* * * M. M. Jan 8/08

THREE students from Bulgaria have recently joined the preparatory school, having a medical course in view. These with others who have come are teachers by profession, consequently intelligent and cultured young people. None of them upon arriving have been able to speak a word of English, but they soon become familiar with our language and make very acceptable students and associates. The last arrival has just reached us. He is Mr. Demetri Diamandieff, a student and soldier as well.

* * *

THE MEDICAL MISSIONARY

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Address: MEDICAL MISSIONARY, Battle Creek Mich

APRIL 10, 1907

A NEW SANITARIUM.

WE present herewith a photograph of the High Park Sanitarium, located in the suburbs of Toronto. This is probably the latest addition to the now large and flourishing family of sanitariums in operation throughout the land.

Dr. W. J. McCormick and his wife, Dr. Florence D. McCormick, left the Battle Creek Sanitarium about two years ago for the purpose of opening up medical missionary work in the city of Toronto. At first the prospect for opening an institution at once seemed very encouraging, but circumstances changed somewhat and difficulties appeared in the path of progress. But these faithful workers, assisted by Mrs. Mattie J. Hawver, have earnestly set themselves at the task of reducing difficulties and overcoming obstacles, carefully laying a foundation for a larger work by creating a constituency and a demand for sanitarium work in the metropolis of Canada.

The Lord has blessed them in their efforts and now they have the satisfaction of starting out in a finely equipped institution of their own establishing, backed up by the providence of God and their own devoted efforts.

Dr. McCormick says: "Since December 1st we have been very busy equipping our institution and making the necessary alterations. We have now been in running order for about two weeks, and already most of our rooms are occupied by patients. Our buildings are most beautifully located in a western suburb of the Canadian metropolis on a high elevation overlooking Lake Ontario and just across the road from a most beautiful natural park reservation of five hundred acres. The Sanitarium grounds comprise about four acres beautifully laid out in trees and terraced lawns including a natural, wooded ravine and spring. We expect to have our dedicatory exercises some time in May or June."

This institution will be conducted according to the latest and most improved system of medical treatments. Those standing at the head of this work are imbued with the true missionary spirit and have gone out from the parent institution with the single and sincere purpose of communicating blessing and help to suffering humanity. We bid them a most hearty God speed and shall rejoice to hear of their well deserved success and prosperity in their work.

THE HIGH PARK SANITARIUM.

* * *

THE MEDICAL MISSIONARY.
Mr. 27, 1907

OUR respected fellow-worker, Dr. George Thomason of the Plumstead Sanitarium in South Africa, in enclosing the article which appears in this paper, writes very encouragingly of the work under his charge. He says: "I have had four public lectures in Cape Town during the past four weeks, and four at a camp-meeting during the same time. The lectures in the town have been very well received. The city papers have given them full attention, and the leading evening paper accompanied its report with a column of editorial comments. Our Sanitarium is always full and we have several patients waiting to come as soon as we can receive them." The article under the caption of "Essential Qualifications and Preparation for Missionary Work," will be found to be well worth the reading, and it furnishes food for reflection for all who are interested in missionary work.

* * *

ANOTHER WORKER CALLED.

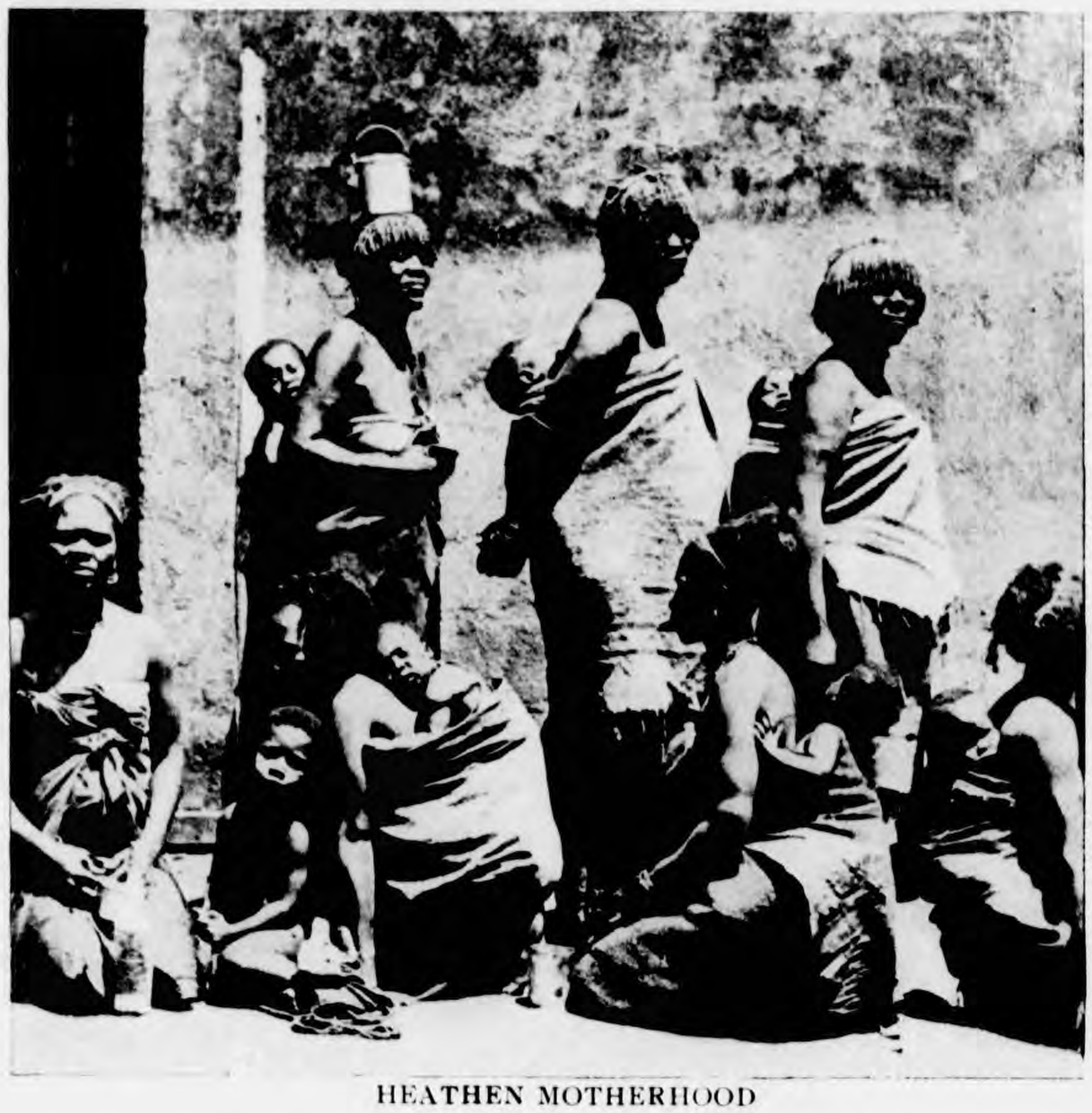
M. M. apr. 3/07

DR. R. G. EDIB and wife have accepted a call of the Foreign Mission Board to take up medical missionary work in Cairo, Egypt, and are now on their way across the great waters. Dr. Edib is a native of Greece and has an extensive acquaintance with the Levant, and an intimate knowledge of Cairo, and has prominent friends there. He will resume the work of Dr. Keichline, who has returned to this country.

Dr. Edib was graduated with the last class of the American Medical Missionary College. Soon after graduation he was afflicted with sciatica and continued to suffer from it until within the past few weeks. He has been incapacitated from work, but has retained his faith in God and endured his sufferings with Christian fortitude. Now he is rejoicing in restored health and strength. Mrs. Edib is a devoted Christian lady and will be a helpmeet for her husband. We are sorry to miss them, but glad to have the workers go out into the harvest field; and thus another representative of the A. M. M. C. is going to a distant and needy field. We rejoice in the fact that so many of them are already scattered abroad, and in the prospect that very soon they will be found in every part of the world bearing to all nations the message of mercy, of truth and healing. May the Lord go with these who have lately left us and with all the dear workers in the harvest field.

THE MEDICAL MISSIONARY

VOL. XVI. JANUARY 2, 1907. No. 1.



HEATHEN MOTHERHOOD

"A year has gone; another now appears;
I turn my whole soul forward to receive
The blessing, as its brighter presence nears
My joyous faith to crown, and to believe
That God hath still some greater task for me,
Some holier thought to urge me toward his throne,
Some fuller hope of what I yet may be,
When years shall cease and time no more be known."—*Selected.*

* * *

The time is short!
If thou wouldst work for God, it must be now;
If thou wouldst win the garland for thy brow,
Redeem the time.

Shake off earth's sloth!
Go forth with staff in hand while yet 'tis day;
Set out with girded loins upon the way,
Up! linger not!

Fold not thy hands!
What has the pilgrim of the cross and crown
To do with luxury or couch of down?
On, pilgrim, on!

Horatius Bonar.

THE MEDICAL MISSIONARY.

DR. C. C. CREEGAN.

[Abstract of an address to Medical Missionary Students.]

IF one would speak of small things in connection with this school, let him reflect that there are those going forth from it, as David Livingston, medical missionary, went forth to Africa, and at the time of his death he was recognized as absolutely the greatest missionary since Paul. Do not forget, medical students, and those of you who have a foreign field of missionary work in mind, that David Livingston, who stood at the head of all modern missionaries, was a medical missionary.

I confess frankly that I am an enthusiast in behalf of medical missions. I do not mean to say that I would undervalue in the least the ministry of those ordained men who have not the healing art, and who go forth to preach the gospel, or the work of those men and women who go out as teachers, establishing schools and colleges. In the work under the board with which I am connected we have a large number of such schools. We have one hundred and twenty high schools and colleges, including our theological schools, and we have twelve hundred common or village schools, and in all of them are seventy thousand pupils. I would not undervalue this work, but I am going to speak to you for a few minutes especially along this line of medical missionary work. I hope to be able to speak with more knowledge a year from now, after I have made a tour of the world.

I want to say frankly to start with that the American Board has believed in this work of medical missions since away back. Let me tell you how far back. Our fathers in connection with the American Board had the honor to send out the first medical missionary that went out under any board in this land in the person of Dr. John Scudder, who had to meet the opposition of his father, who was creeping along in years at the time and thought his son was going on a fool's errand. Dr. Scudder had not a relative except his wife, so far as we are able to learn, who at that time had the least sympathy with his mission. He was commencing so nicely as a young physician in New York that he could well have said, "With such claims upon me here—my little children beginning to grow up, my wife, my parents, my practise opening up in such a way that plainly Providence indicates that this is the place for me to spend my life." On the contrary, the same year that the brilliant young Bishop Heber wrote those remarkable verses which we all sing with such zest:—

"From Greenland's icy mountains,
From India's coral strand,"

then followed spirit of his song and died finally within sight of the island of Ceylon, the same year John Scudder went out, and he was the first medical missionary in connection with any missionary organization in a foreign land. As you all know, afterwards his chil-

dren and grandchildren became medical missionaries. Eighteen of his children and grandchildren became missionaries under the American Board, and I do not know that anybody ever counted how many of them became missionaries under other boards. He went out to be a medical missionary and was the pioneer medical missionary from this country. And God gave him the honor of being the founder of the greatest missionary body of any conference yet born on American soil.

There are certain things that go along with this when a man consecrates himself to the work of foreign missions. I want first of all to plead for it on humanitarian grounds. Of course I hear some one say up here at Battle Creek, "We are more than humanitarians, we are Christians." I am well aware of that. But I want to plead for medical missions on humanitarian grounds. In a town in Eastern Pennsylvania they had an awful fever two years ago. The providence of God led me to form a small church in that little town, and I had scarcely gotten out of it when the fever broke out and some twelve hundred people were down with it, and perhaps half that number died. Physicians from Philadelphia and trained nurses came—nobody knew how they got there, they just simply came as it were on the wings of the wind, and they were there to minister to those dying people.

It is because there are human hearts in our breasts, because we feel for that suffering man over yonder, that suffering woman, the brotherhood is stirred within us, and we say we can not stay here in comfort and ease when somebody over yonder is dying and needs our help, and perhaps we can save their lives. Aye, but we are taught that the people across the sea are our neighbors. More than that, we are taught that they are our brothers.

BROTHERS ARE NOT HEAVY.

A little while ago it was said that a good minister was crossing from New York over to Brooklyn on the ferry, and on his way over he saw a frail child in the crowd. At first he could not see what the child was carrying, but evidently it was a burden too heavy for her frail arms and form. This man, with a human heart, saw the little girl bending under her load and approached her, thinking perhaps she had a bundle of dry goods or something of the sort she was carrying home to her mother, and may be he could help her. As he came near he saw it was not a bundle, but that it was a child almost as large as the girl herself, with some spinal ailment so that he was unable to walk. Then the man's heart was really touched, and he looked into the face of the little girl and said, "Won't you let me help you?" The timid child drew back and said, "No, no." Yet once the man approached, and with a sympathetic heart said, "Isn't he heavy?" And the child realized that she was carrying her brother and didn't like to have the word "heavy" used in that connection. She looked up into the face of the good man and said, "No, sir, he isn't heavy; he's my brother." The love that throbbed in that heart made strong those frail arms; and as she thought of that sick child, her brother, she repudiated the word "heavy" when she was carrying him. And I want you to get hold of that thought, that true thought, that our Elder Brother taught us, that the man over in China yonder, is my brother, he is *your* brother. And we will never get hold of this missionary idea right until we realize that that man yonder, that drunken man, that ailing man or woman who needs our help, is our brother, or our sister, until we are ready to repudiate the thought that it is a heavy burden to go even to China when there is a brother there that we can help.

That is the first argument for medical missions. The second is that it is Christlike,—just exactly what Christ did when he was here on the earth. When we take up the New Testament and count the miracles you will find most of them are miracles to relieve suffering humanity, miracles wrought right along the line of medical missionary work. And there isn't anything that comes so near—I do not say that it is an excellent parallel—that comes so near to perpetuating the work of our Lord as the work of these skilled medical missionaries as they open the eyes of the blind.

A REAL MISSIONARY.

A very dear friend of mine made a tour around the world, such as I hope to make beginning next month, and when he came home he said what impressed him most of all was the medical missionary work. Out in the interior of China, he stood by the side of a medical missionary, watching him in his work, and by and by a man came who some months before had been blind. He had what I believe is called a double cataract, if there is such a thing, and he came to this medical man and by the skillful use of his instruments this medical missionary had removed the cataract, and the man went home after a little while seeing. While my friend, Dr. Max, was looking on the scene this man came back seeing as well as anybody could see, heading a procession in round numbers of one hundred men. Every one of them was blind, and they came each with his right hand on a rope, and this man who once was blind was their leader. He brought these one hundred men to have their eyes opened. This doctor had opened his eyes, and he saw no reason why he could not open the eyes of this hundred. He believed it could be done. Unfortunately Dr. Max noticed some of the men who came didn't have eyeballs in their sockets, so the medical missionary could not help them only as he might give them some knowledge of the One who came to be the light of the world.

But just think of it! that man going away and bringing back in round numbers one hundred men afflicted, as he supposed, just as he was, with the confidence that if they came to this medical missionary they would go back seeing. Let us hope that many of them did go back, not only seeing with the natural eye, but seeing the One that saves us all.

Now that is Christlike. Following the same thought I will just read a sentence or two of what my friend, Dr. Post, of the Syrian mission, who is one of the best known medical missionaries in the world, says about this:—

"There is a language which all can understand, and which carries a message which every man cares sooner or later to hear. From the moment the medical missionary sets foot on his chosen field, he is master of this universal language, this unspoken tongue of the heart, and is welcome to the home of strangers. The simple Arab lifts for him the curtain of his goat's hair tent and bids him enter. The mandarin calls him to his palace, the peasant begs him to come to his lonely cabin, the Brahman leads him to the recesses of his Zenana. He stands before kings, and governors escort him with squadrons of cavalry, or take him to and fro in their gunboats or barges of state. Kings build hospitals for him, and the rulers of the earth aid him with their treasures and their power.

"You take the Bible to the heathen, and he may spit upon it, or burn it, or throw it aside as worthless or harmful. You preach the gospel to him, and he may regard you as a hireling who makes preaching a trade. He may meet your arguments with sophistry, your appeals with a sneer. You educate him, and he may turn from a heathen to an infidel. But heal his bodily ailments in the name of Christ, and you are sure at least that he will love you and bless you and all that you say will have to him a meaning and a power not conveyed by other lips."

That is an eloquent piece of literature, and it is one of the most magnificent tributes to the work of the medical missionary that I have ever seen, and written by the hand of one of the greatest medical missionaries of the world, Rev.

Dr. Post, of Syria. You say, "He was a medical missionary; of course he would appreciate it." But, ah, here is Isabella Bird Bishop, who spent four years and a half traveling around through the byways of Asia and other heathen lands, and who went out with a sneer for missionaries,—simply as a curious traveler but with an intelligent mind, and came back fully converted to missions, and she stands up in London and among other things she says these words:—

"In a survey of many mission fields, and of vast, unevangelized regions, especially in Asia, where Christianity comes into contact with Islam, and the higher philosophical non-Christian systems, I have come to think that the multiplication of male and female medical missionaries is the most important work in connection with the missions which lies before the church, as well as the most blessed form of missionary effort to which young men and women who are consecrated to foreign service can aspire. . . . In conclusion, I desire to emphasize my unqualified testimony to the value and power of medical missions. To my thinking none follow more closely in the Master's footprints than the medical missionary, and in no work are the higher teachings of Christianity more legible and easily recognized. The true missionary doctor witnesses by his life-work to Christ the Healer, and is an epistle of Christ, translating Christ's love and teachings into object lessons which all can understand."

A REMARKABLE MEETING.

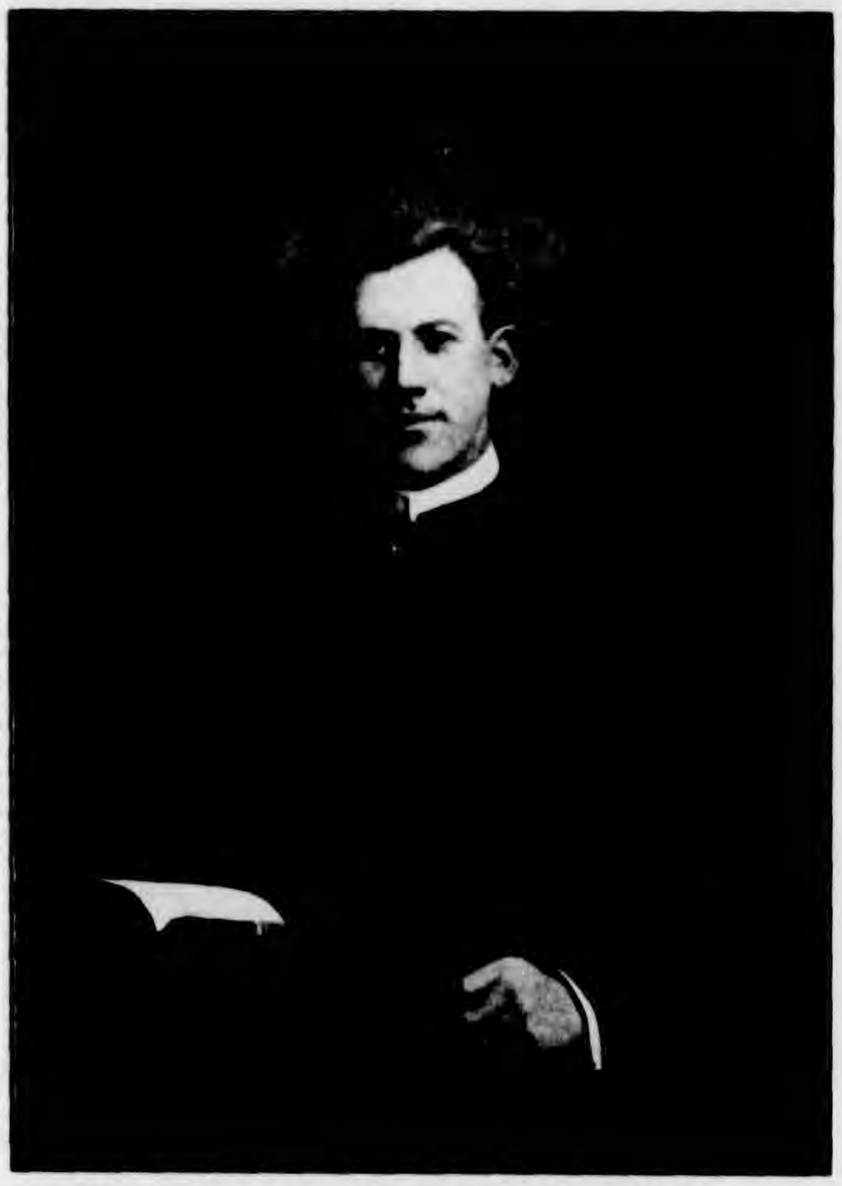
At the time when medical missionary work was first introduced into Chicago, some fifteen years ago, there was in operation in the same block in which the Workingmen's Home was first established, "The Open Door Mission" under the charge of Mr. Gorham Tufts. As our work at that time had no room for meetings, and "The Open Door" had no bath room and laundry, there was co-operation between the two institutions, our men going there to hear the gospel, and their men coming to us to get cleaned up.

After some years "The Open Door" was closed. Mr. Tufts disappeared from our view until recently we received a visit at the Sanitarium from him, when we learned that he had felt a call of God to go to India and had proceeded to go forth without backing or authority from any one, depending wholly upon the promises of God, very much against the advice of his friends who looked upon the attempt as very inconsiderate. So much was said to him after he had formed his resolution to go that before sailing he was almost brought to the point of abandoning the project. But when he asked the Lord to give him a passage of Scripture that would indicate his will, his Bible was opened to the 91st Psalm, and this wholly decided him to proceed; and he went forth standing on the promises and assurances of that Psalm.

Providentially he was led up into the northern boundary of India, and finally located within five miles, in a straight line, of the borders of Tibet. Here during the six or eight years of his experience in India, he has been able to establish a Christian Colony. The mission owns three thousand acres of land which is paid for and they are in the midst of some fourteen or fifteen millions of people who have never heard the gospel, who were exceedingly jealous and suspicious of them at first, and in many instances very antagonistic and barbarous in their attitude. But by conforming to the native prejudices, showing unmixed kindness, refusing to retaliate for any injury, they have won the confidence of all the people and there is now a loud call for the gospel. Thousands and even millions of people are pleading for the missionary. At the time of his first visit, Mr. Tufts spoke but once to the Sanitarium family, who were so impressed by his Godly manner that he was urged to return, and he did so on the 21st of December, remaining with us two days, during which time he spoke three times to public congregations. The first of these meetings was on Friday evening in the Sanitarium chapel. The congregation was not very large, there being perhaps two hundred present. Mr. Tufts spoke of the call of God being a personal and individual call from the text, "Ye have not chosen me, but I have chosen you, and ordained you, that ye should go and bring forth fruit." Gradually his remarks turned to the wonderful dealings of God with him as he wrought in faith, looking to his Heavenly Father for every blessing, and to him alone for help.

His path was not devoid of trials by any means, on the contrary, he was led through many distressing experiences, but the Lord delivered him out of them all with wonderful deliverances. We shall, in the future numbers, reproduce an outline of his remarkable discourse, so will not enter into it now. But as the speaker proceeded, the Spirit of God rested upon the congregation in a great measure and tears flowed freely, and continually responses were bursting forth to the word which came with power.

When he had closed, the speaker resumed his seat without making any appeal for assistance. He afterward stated that it was not his custom to do that, he



DR. GORHAM TUFTS, ALMORA, INDIA

had never appealed to anybody for help and had never taken a collection in his own behalf. He looked to God and to him alone, leaving it to him to influence the minds of his people to render necessary help. Some one remarked that it was not appropriate that we should listen to such statements and remain inactive, that the appeal was coming to our hearts directly from God's Spirit and it was incumbent upon us to do something now that we had listened to the situation. One of our dear workers volunteered to go to this field at once, and others expressed a determination to fit themselves for this work as soon as possible.

Mr. Tufts had spoken of two thousand famine orphans, who were wandering in the jungles, living on leaves and berries, often times eating the soil to blunt the gnawing of hunger. They were sick and covered with sores, utterly naked, mere walking skeletons, sleeping under trees and wandering about in the woods. He was asked how much it would cost to save one of those children, and he responded that ten dollars would rescue a boy or girl and support them for one year, then the way would be clear for them to earn their own way. Nearly one thousand dollars was subscribed for this purpose on the condition that the children be assigned to the donors who were to receive the names of the children with their photographs and reports of progress as long as they contributed to their support.

It then became necessary to provide houses for this large company of one hundred children, and Mr. Tufts stated

that a stone house could be built for one hundred dollars capable of receiving forty. Three houses were provided for and the money paid down. The most of this money was subscribed at this meeting, a small portion being raised the following day, and the occasion was certainly one long to be remembered. The action coming so spontaneously and so unexpectedly to the speaker brought great joy to his heart, and there was a feeling of general rejoicing that the Lord had by his Spirit put into the hearts of the people to help in such a worthy cause.

There was in the meeting no excitement, and yet the air was laden with the deep movings of God's Spirit.

Mr. Tufts is an independent, undenominational missionary who impresses one with his earnestness and whole-hearted devotion to his chosen work. He is untrammeled by any obligations or authority, believes in true Christian liberty, and is perfectly willing that those who work with him shall enjoy the same freedom and liberty in their work in association with him as he asks for himself in his work. He is not under the control of any board or church, nor is he dependent upon any society for his support. He has learned by actual experience the fulfilment of the promise, "My God shall supply all your need according to his riches in glory by Christ Jesus."

The other meetings held by Mr. Tufts were also characterized by a large measure of God's blessing, and we shall be pleased to place before our readers from time to time the substance of his remarks. He departed from us on his way to Cincinnati and expects to sail for his field on the second of January. We shall follow the progress of his work with great interest.

* * *

FROM DR. THOMASON.

[A Letter to Medical Alliance, read by the Secretary.]

DEAR FELLOW-WORKERS:—To my friends and colleagues assembled I wish to send a cordial greeting from Africa. It is hard to realize that it has been a year since you were assembled in a similar capacity; but it is no harder to realize this than that it has now been more than three years since I left America to take up work in this field. The fact that time has seemed to pass so rapidly is perhaps the best evidence that the days and weeks do not hang heavily on our hands.

I am very thankful to be able to report many evidences of divine blessing upon our work the past year in this field, and in consequence to make a report of progress and development.

SOUTH AFRICAN SANITARIUM, DR. THOMASON, SUPT.

Since the last meeting of the Alliance we have completed the addition to our building with the great convenience of a commodious and quite fully-equipped bathroom, an inexpensive operating room, and several additional rooms for patients, all of which can only be fully appreciated by those who have attempted to carry on sanitarium work with only a bath-tub, a pail, a massage cot, a few sheets and towels and other real necessities.

The Lord directly opened the way for us to secure the means with which to complete this new addition, and the best justification of the step taken has been in the fact that in addition to being able to utilize the improved bathroom facilities, the extra rooms for patients have been occupied practically every day since completion.

In spite of the great financial depression, the patronage has continued to the extent of keeping our little building always full, and at times with several rooms occupied by two, or even three, patients. Within a few days it has been necessary to pitch a tent, as our accommodations were overtaxed and we could not make arrangements otherwise.

It has been exceedingly gratifying also to note the progress of our patients toward health and to see the splendid triumph of the principles over disease. The voluntary expressions of appreciation from pleased and satisfied patients have been very gratifying. The results of the work must be left with God, but we humbly trust and believe that our efforts will bear fruit in eternity. This we do note, that many men have come to us desecrating the body-temple with tobacco and alcohol and other abominations, and have gone away free and clean, and have declared almost to a man, that they will never take up with those habits again. As a leading banker who left us several months ago, states in a letter just received an hour ago, speaking of a veterans' race for men over forty and which he won easily, one hundred yards in eleven and one-fifth seconds, says: "I had four running against me, three of whom were likely winners. I never saw one of them after starting. The splendid prize adorns our dining-table. The performance is certainly another feather in your already crowded cap. My wind is nearly as good as when I was twenty-five, and that is of course due to the careful diet and the absence of the evils of alcohol and tobacco."

Here are a few of the messages that have been left with us as patients have been departing. This same banker from the Orange River Colony says: "On the eve of my departure for the North, I wish to place on record, in no uncertain manner, my grateful appreciation of, and my sincerest thanks for all your care of me, your thoughtfulness for me and your untiring patience through all the different phases of my illness. . . . We can not speak highly enough of the methods of the Cape Sanitarium, which I verily believe has a grand future before it."

A merchant from Natal says: "As I am leaving I wish to express to you my sincere thanks for all your kindness while I have been at the Sanitarium and for the great benefit I have derived. I am sure the good influences with which I have been surrounded while here will bear fruit in my future life."

A word with reference to our family, and which is much appreciated, is from

a leading minister in Cape Colony, says: "You are fortunate in your helpers, my friend,—so considerate, so gentle, so forbearing, I have always found them."

Several months ago we organized a Vegetarian and Food Reform Association in Cape Town. The principal object of this Association is to promote a knowledge of the principles of dietetics and other reforms which it considers to be essential to the securing of a sound mind in a sound body. Several successful meetings have already been held. The membership is now more than thirty and new members are constantly being enrolled.

I have given several lectures in Cape Town and other places during the past year which have been very favorably and enthusiastically received. The daily papers gave full reports of these lectures, and the report was also taken up by papers in quite distant parts of South Africa, demonstrating considerable interest in the topics discussed. I have appointments for two more lectures in Cape Town within the next few weeks, one under the auspices of the Vegetarian Association and another of a leading temperance organization.

I am also very pleased to report that in response to an urgent demand, a vegetarian restaurant is just now being opened in Cape Town. Some weeks ago Mrs. I. J. Hankins felt impressed to open something in this line. As a test of the degree of interest, Mrs. Hankins started a vegetarian dining room at her home. But the amount of interest which was immediately awakened at once demonstrated that a full-fledged vegetarian cafe in town would be an assured success. The cafe will be opened this week, and we are thankful that the way has been opened to at last meet this long-felt want and to know that another splendid facility for reaching the people with these glorious principles has been established. The health foods are gaining in popularity. We grew so bold some time ago as to order a ton of corn flakes for one shipment.

We have two splendid nurses' classes. The senior class of five girls have now had two years of training. One member of this class who expected to go to America later to take post-graduate work, having an opportunity to go as a nurse to a patient, is now on her way to America. She will complete her nurse's course in one of our sanitariums, take some post-graduate work, and she then plans to return to join us in our medical missionary work in this field.

An excellent spirit prevails in our institution. We feel it is a splendid investment to devote time to the training of these young people for medical missionary work.

As a sort of parenthetical thought: It is wonderful what an affection springs in the heart of one having the responsibility of all the training of these students. I look upon these boys and girls with a daily increasing interest and solicitude. They have come to be as members of my own family and I have a jealous regard for their welfare. How infinitely better it pays to invest one's time in helping develop these young people for service for God and humanity than in seeking wealth or worldly gain. As I have paused in writing this it seems to me I see more clearly and intelligently God's attitude toward his children. Our interest and love grows as we invest time and talent in the development of these young people, and we are ready to guard them and shield them under any and all circumstances, and our disappointment is great when we see our best efforts failing to accomplish for some what we would desire. So with the infinite investment made for us by God and Christ; how they must watch over their children with, if possible, ever-increasing solicitude, how they feel that "He that toucheth you toucheth the apple of his eye." And when we fail in reaching the divine standard, the sorrow of the great heart of God as he says, "How *can* I give thee up," is great.

I have from the beginning seen the great need of bringing these principles within the reach of the poor colored people. Last month I received calls from and visited in their homes one hundred and fifty colored patients. Very little opportunity is offered in their homes for rational treatment. Even if our nurses go to their homes, it is very difficult to get hot water with which to treat them. We must have a place to receive these people. They are wonderfully appreciative of kind treatment and in many ways it is a great pleasure to work for them. We have just bought a little wooden-iron building about a mile away, which is now being used as a bar for the colored people. I go by this place several times a day and see it nearly always filled with drinking and drunken colored men. In a few weeks we shall gain possession of this building, we will move it onto our lot and we will also fill it with colored people, but with a different purpose. It is now being used to as rapidly as possible destroy the image of God in these poor men; but we will seek to bring them under the influence of principles which will as rapidly as possible restore the image of God in them. If some people in this country, and perhaps I should say, if most people in this country should read this report, they would say: "What! talking about the image of God in a nigger? Fancy; how absurd!" But to you I say, yes, we will seek to bring them in touch with principles that *will* restore the image of God in them. But a building which has been used as a bar, or "tap," is not in every way adapted for use as a sanitarium. Without any argument on this point you will recognize that something must be added to the equipment. I mention this so that as you are planning the matter of donations to foreign fields you will remember that our little colored sanitarium needs beds and bathtubs and some other necessaries.

Brother and Sister Willson are faithfully and loyally pushing the work at Kimberley. Brother I. R. Armer and his wife are also doing a splendid work in Pietermaritzburg, Natal. The work in both these places commands the respect of all the people, including the medical men. Many of their patients come upon the direct recommendation of their physicians. In a letter recently received from Brother Armer, he states that they have entirely outgrown their present accommodations and are planning an enlargement. A health food depot and cafe was started in Johannesburg several months ago by Brother and Sister Ticton, both of whom for a number of years have been staunch advocates of the health principles in connection with their work as canvassers and Bible workers.

So the work is growing and expanding. We wish we could report a great deal more, but we are few in numbers and we are financially poor. Only a few hundred people of the two hundred millions of Africa have yet been reached. I confess I feel more lonesome when I realize that Doctor Keichlein is not pegging away at the other end of this continent.

While we are not by any means satisfied, we are thankful that something is being done and we can only work to the extent of our strength, capacity and ability, and pray that the Lord of the harvest will send many more laborers into this great harvest field.

Praying for much of the blessing of God upon your meeting, that your hearts may be bound together in love and good-fellowship, and that the good influence of your meeting may extend throughout the year in better service in the great cause of truth and righteousness, I am,

Yours most sincerely,

GEO. THOMASON.

* * *

The account of the recent meeting of the Medical Alliance which should have appeared in this paper will be delayed two weeks in order to procure matter needed to make it complete. It will be good when it comes.

INCIDENTS IN MEDICAL MISSIONARY WORK IN CHINA.

FRANK A. KELLER, M. D.

WHILE medical missionaries who go to other lands find a work to be done for their fellow-laborers, the great work we go out for is to minister to the natives, and the work among the natives of the country to which we go might be divided into four different classes. First, the dispensary work. This is the work the young medical missionary gets into first of all, and I do not need to dwell on it. It is very much like dispensary work here, and very much like the work Dr. Paulson and others are doing in Chicago.

We have to meet the deceptive tendencies of the people. For instance, the Chinese are exceedingly fond of our glass bottles. They have not seen them until recent years. And often a man will come in very sick and get his bottle of medicine, and as soon as he gets outside he will become suddenly well, the medicine goes into the gutter, and he carries his bottle home in triumph. That is one of the interesting features of medical work in China, and one of the things we have to guard against.

In regard to this dispensary work and the outdoor clinic in our station, we have a little different plan from that used in the majority of medical mission dispensaries. The usual plan is to get the patients all together in the waiting room, and then an evangelist goes in where these people are—some of them suffering severe pain, and exceedingly anxious to get to the doctor and have their diseases attended to, and the missionary preaches the gospel to them for half an hour or an hour. Now how much of that gospel message do you suppose they take in? How much do you suppose you would take in with a felon on your thumb, or some great sore on your leg, with an awful colic and anxious to see the doctor, and know that listening to this message was the price you had to pay—how much of it do you suppose you would understand? I don't want to criticize, but because you are medical students, and because some of you are looking forward to a foreign field, I just speak of it as something you might think about.

We do, as a matter of form, send a man out to preach, but we warn him he must not preach more than five or ten minutes. Then we begin to see the patients at once, and as rapidly as we can. But do not imagine the evangelist's work is finished as soon as we begin to see the patients. He singles out a man he knows will be sitting there for some time, sits down beside him and begins to talk with that man in rather a loud tone of voice. The rest of these people haven't anything to do, and the minute they find him talking to that one man there isn't a man or woman of them who does not want to know what he is going to say, and they are listening with all their might. So our evangelist sits there while the patients are coming in, and when one place is vacant another man edges up and asks him some questions. That is the dispensary work and the way we are seeking to use it and make it an evangelical agency.

It struck me very forcibly the other day that when John sent his disciples out to Jesus to ask him whether he were really the Christ or not, Jesus did not send word back to him and say, Why, John, don't you remember that day that you baptized me, when you said you were not worthy to unloose the latchet of my shoes; don't you remember how the heavens opened and a dove came down, and a voice came out of heaven which said I was realy the Son of God? Have you forgotten that? No, Jesus didn't send any such message as that back to John. He simply said, Go and tell John what you have seen and learned here—the blind receive their sight, the lame walk, the lepers are cleansed, and the dead are raised, and the poor have the gospel preached to them. That is the word that Jesus Christ sent back to John as proof that he was indeed the Son of God. That is the kind of work that will prove to heathen people that we really are ministers of the gospel of eternal life.

Then another branch of work which the young missionary probably gets into very soon after the dispensary work is the itinerating work, and this is exceedingly interesting. It is perfectly wonderful how God does use little simple remedies and little sanitary suggestions away out in inland China to perform cures.

But then it is not to do a large and comprehensive medical work that we go out on these itinerating journeys. We take just a little bunch of remedies that we can use for almost everything, and some eye lotion, and start out on our journey. And it is wonderful how many cases of apparently very severe inflammation of the eye this one simple little eye lotion will relieve. Going out with these little things, preach to the people, tell them we have a few medicines with us and if any of them are ill we try to help them. Thousands of cases can be cured right there. Perhaps someone has a trouble that necessitates his going to a hospital, and we say, "Now we are going on a few more days' journey, but we are coming back again. On such and such a day we shall be in the city, and there we have a hospital. If you will arrange with your friends to come in and stay at our hospital for a week or two we will try to cure you. We can not do anything for you here, and we explain the nature of the disease. And so they come, from fifty or seventy-five or one hundred miles. We have had Chinese come even from neighboring provinces, hundreds of miles, making this trip bringing their baggage and bedding with them, because the people who travel in China carry their bedding and cooking outfit wherever they go. Then we get them into the hospital, we do a little operation, and minister to them, we see them all we can personally, and the evangelist stays with them from morning until night, and he tells them about the Lord Jesus Christ.

So by this itinerating work we reach the people from long distances. In the first place we win their favor, and get a reputation by ministering to some of these slight things that we can help with the simple remedies, and thus we get the sympathy of the people over a wide circuit of the country. Then we get some of them to come right into the hospital where day by day they can hear the sweet story of Jesus and his love.

I have anticipated the hospital work, which is the third class of medical missionary work. Our hospital, and as you must all suspect, because you know we have only been in Chang-sha five years, is necessarily very small. The medical work naturally had to be more or less neglected. Missionary property had to be secured. Buildings had to be erected. We are assisting to get the other missionary work going. By the wonderful working of the Spirit of God there were called into our work young men of the student class whom we have had the privilege of training as evangelists and Christian workers, so we have been able to give to other missionary societies as they came to us and said, "Keller, I am here; I have no experience; I do need a man; can't you let me have a man to act as evangelist?" One by one we have been able to give them men to help, until the number has now reached twenty in this short time that have gone out from us. Therefore the medical work necessarily has been neglected to a certain extent. We have only a little Chinese house fitted up as best we could fit it up with limited means, made as clean as possible; and we have in this Chinese house about twenty beds—we could possibly have twenty-four beds—and that is our hospital.

Before we got to Chang-sha, a barber came to us with an ulcer on his ankle. Unless he got relief his means of living was gone, and he was about to despair.

(*Continued on page 8*)

Extraordinary OFFER

By special arrangements with the publishers we are able to present to our friends the following Combination of good and popular reading for the coming year. For general reading we doubt if there is a more valuable journal printed than the ***Review of Reviews.*** As a popular journal ***Success*** is well and favorably known. The ***Woman's Home Companion*** has a circulation of 600,000 which is all we need to say as to its value in its capacity. These are united in the following grand offer:

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THE Tacoma (Washington) Sanitarium is in need of a lady and gentleman nurse who have had experience in treatment room work. For particulars address the Tacoma Sanitarium, 426 South C St., Tacoma, Wash.

* * *

THE Calhoun County Medical Society held its thirtieth annual meeting at the Sanitarium on Dec. 4. The meeting was well attended and a repast was served to the visitors who seemed delighted with their glimpse of Sanitarium life and ideas.

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* * *

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JANUARY 2, 1907

(*Continued from page 6*)

I think I never met a more stupid man. I could not make him understand a thing. I had only been in China a year and a half, and I do not know that he was all to blame. But our evangelist could not make him understand much more, so I felt I could conscientiously lay it down to the man's stupidity. I attended his foot every day myself, washed it with my own hands, but finally I said to him, "Now, if you are going to keep on at your trade, it is simply useless to treat your leg. I can not do anything for you. If you want to get well you must stop work, go to bed and rest, or at least sit with your foot up on a chair. He said, "I can't do it. I would starve, and my boss would not let me go. I simply can't do it." I said, "You talk with your boss. Tell him we invite you to come here and live with us." He came finally. The ulcer had gotten down to a little thing, and then came the riot, and we were driven away and scattered, and didn't see him again for a long time. When I got back to that city the ulcer had grown again to a big ugly thing. But we got him in again, and got him to stay a month, and the ulcer was cured.

Two or three years passed by and we were down at the capital city. This man came down to pay us a visit. As soon as he was converted he began to study the Bible and his own language. One day I was speaking to my class of evangelists on one of the chapters of Romans, and I realized the effort had been a failure. I said to them at the end of the hour, "Men, I can see from your faces that you have not grasped this. I have not been able to make it plain to you. The only thing I can do is to commend you to the Holy Spirit. Pray about it, and God will reveal his own Word to you. This is an exceedingly important chapter. I wish you might have grasped it, but you have not. Just pray about it." And I said to that brother, "lead us in prayer now," and we knelt down around that table and that barber led us in prayer, and when we arose from our knees every eye was filled with tears, and there was not a man who did not understand that chapter.

HOW BEAUTIFUL THE FEET.

AND He hath said, "How beautiful
the feet!"
The "feet" so weary, travel-stained and
worn—
The "feet" that humbly, patiently have
borne
The toilsome way, the pressure, and the
heat.

The "feet" not hastening on with
winged might,
Nor strong to trample down the opposing
foe;
So slowly, and so human, they must go,
By painful steps, to scale the mountain
height.

Not unto all the tuneful lips are given,
The ready tongue, the words so strong
and sweet;
Yet all may turn, with humble, willing
"feet,"
And bear to darkened souls the light from
heaven.

And fall they while the goal far distant lies,
With scarce a word yet spoken for their
Lord—
His sweet approval He doth yet accord;
Their "feet" are beauteous in the Master's
eyes.

With weary human "feet" He, day by day,
Once trod this earth to work His acts of
love;
And every step is chronicled above,
His servants take to follow in His way.

—*Selected.*

THE NASHVILLE AGRICULTURAL AND NORMAL INSTITUTE.

THE Nashville Agricultural and Normal Institute is prepared to give ten men students and five women students an opportunity to earn all of their regular school expenses while taking a course of instruction in preparing for missionary work. This offer is made with the special object of encouraging men and women to obtain a preparation to enter the Southern field as missionaries. There are many who are impressed at the present time by the Spirit of God to come to this needy field to work. Some of these are not prepared to bear all of the necessary expenses in taking the required training. This offer will make it possible for such persons to enter the school. There are many opportunities just now to establish small, self-supporting, industrial schools where the message can be taught in the most effectual manner. Those who expect to enter this field and desire some training before entering upon their regular work, are invited to write to E. A. Sutherland, Madison, Tennessee.

The winter term opens January 16.

DRS. C. P. and Annie Farnsworth are anticipating a change in their field of labor within the next few months. They have for some years been in charge of the Madison, Wisconsin, Sanitarium, and expect to locate in Chamberlain, South Dakota, in the coming spring. A fine new institution awaits their coming at that place.

DR. JEAN VERNIER has renewed the lease of her present quarters in Detroit and reports that she has a good practise, and is able to place the principles of right living before many of the people of that city both in her practise and in public meetings.

DR. RUTH BRYANT-LEAKE of Saratoga, New York, was in attendance at the meeting of the Medical Alliance and is spending a few days longer renewing very pleasantly her former long acquaintance with the Sanitarium where she was a physician for some years. We are all glad to have her with us. She has spoken at some of our noon services very acceptably.

DR. C. E. STEWART of the Sanitarium medical staff is now on his way to England where he goes to avail himself of the opportunity for study and investigation in the great universities along medical lines. He expects to be absent several weeks, and we sincerely hope he may be prospered in his errand.

WE are informed that Dr. J. S. Reekie of New Zealand has been called to take charge of the sanitarium at Papinui, Christchurch, in the place of Dr. Gibson. The latter has been appointed stipendary magistrate and health officer to the Chatham Islands which lie a short distance off the east coast of New Zealand.

WE learn that Mr. Edward Forga and his wife from London are in this country on their way to Arequipa, Peru, intending there to open a sanitarium. Mr. Forga is a recent convert to our principles and views and his wife is a most estimable young lady, daughter of David Lacey of England, formerly of Australia, with whom we have been intimately acquainted for several years. We certainly wish them every prosperity in their undertaking, for there is no doubt great need of the knowledge of the principles of right living in that country so long under the powers of darkness and superstition.

provinces of China. Chang-sha, the capital city, is enclosed by a wall nine miles in circumference and has a population estimated at 400,000. The Hunanese are said to be very proud and to have rather more than the average amount of intelligence accorded Chinese. Hunan was the last province of China to hold out against residential foreigners. It is only within a very few years that Chang-sha has become a "treaty port." The literati here is a very strong body and some years ago issued an anti-Christian tract, the first edition of which was eighty thousand copies. Prominent on the outside cover was a crucified pig which was said to represent Christ. Thus a wide influence was created which Satan used to harden men's hearts against the entrance of the Gospel.

Dense darkness abound, and superstition with fears of demons is prevalent, keeping the poor people bound down by a slavery that is cruel indeed. It needs to be seen in order to be realized. Very real are their fears of the demons, various devices are used to send them away or get them confused so they won't trouble their business or their homes. High walls are built around the houses of those who are able to afford them, to keep them out. Screens are erected in front of their doors and walls before their gates for the same purpose. Crooked streets and roads are made to confuse them, often necessitating going a much longer distance than is necessary. Roads fit to travel on are very rare. Such as there are have to be endured because the cure is absent.

In spite of all this China is making some progress but at the present rate it will be years before she can take her place among the nations of the earth. One might say it is well nigh impossible in view of the near coming of the Lord, nothing but the mighty influence of the gospel of Jesus Christ can scatter this darkness.

In this city nine Missions are represented with three independents. The Chinese who become Christians are often persecuted by their fellows. At Siangtu near here we hear of a dispute in progress between students and church members caused by the refusal of a Christian butcher to pay a temple tax. We who have a special message to give in these last days can aid in bringing the Chinese healing for the soul and health for the body, who can lend a helping hand to lift them out of this darkness and gross superstition.

A lady physician of the Norwegian mission is the only one who has established a hospital in this place and a dispensary where the poor can go and receive assistance for their ailments, but only women and children are admitted. The dispensary is open three mornings weekly from nine to one. A small fee of two and a half cents gold is charged if the patients have it, if not, care and medicine are given free. It has been my privilege to assist in this work for the past month while waiting the arrival of our freight and I can testify that it is a work fraught with great blessing. Am now in full charge for two weeks while the doctor is away attending a conference. Last Wednesday was my first day alone when thirty-four cases were treated. Eleven were new cases with history to take, examination and diagnosis to make with treatments to be given if needed. Some cases beyond description present themselves which yield very readily to simple treatments and medicine. The medicines, so-called, most used are, water, soap, bichloride soutanin, with a good laxative, and condensed milk. It is surprising that very serious maladies disappear like magic. The Chinese come quite readily to the foreign physicians in severe cases of illness as they do not have much confidence in their own medicine men, they have so often seen their futile efforts. Often all that is done for patients is to have a priest hold his incantation over them. O for the consecrated physician who will show them through his life what the love and compassion of Christ is.

A good occulist is sadly needed here. Cases of strasbismus and myopia are sadly frequent and could easily be corrected with glasses properly fitted. There is no oculist, to my knowledge nearer than Shanghai or Hong Kong, the former more than a thousand miles away. Chinese take very readily to the wearing of spectacles, thinking that it adds to their dignity. Frames made of metal or tortoise with large circular glasses seem to be a favorite style. We visited a Chinese glass factory recently where lenses for spectacles were made and saw the process.

A large mass of melted glass is collected on the end of a pipe or blower and carried up some steps where it is held downward over a pit. It is applied to a bellows which causes a large bubble some ten or twelve feet long and three or four feet in diameter to be formed. The central portion used for the lenses is very thin and fragile. When cool it is cut into circles about ten inches in diameter. These are sent to the "eye man" who fits them into frames most antique in style for his unwary countrymen, the price may be anything over ten cents.

The blind are exceedingly numerous as you may well imagine owing to the ignorance in regard to infection. Smoke from the open fires with no means of egress from the room is a frequent cause of conjunctivitis especially among the women who spend the greater portion of their time indoors. Their bound feet makes it anything but a pleasure to walk far from home. For treatment they often go to the quack who may have a limited amount of foreign drugs with no knowledge of their use. He sometimes, I have gathered, puts carbolic acid in the eye which finishes it.

A rational school of medicine where Chinese could receive a practical training under Christian influence would be a real benefit to the Chinese. This would do more than anything else to break down the walls of prejudice against Christianity. Other Christian organizations are recognizing this principle and schools for higher learning and universities are being formed to train the young men and women of this mighty empire for real practical work, right here in their own country. Yale has started the nucleus for such a work at Chang-sha. It, however, is not very popular on account of the boycott of "Things American" Work of this character takes time, patience and a real work of grace in the heart. Not a few who have taken such a course of training have become splendid Christians. Would not this be an excellent work for you as a body to equip and support a school of this character? In this there would be real blessing, not only for the Chinese but for you who are privileged to have a part in it. May the needs of this great empire speak to your souls, and God grant there may be many who may hear the cry from the four hundred millions of Chinese, even as Paul heard that of Macedonia. "Come over and help us." And, having heard the call let there be a ready and willing response.

Oh, hark to the call:
It cometh to all
Whom Jesus hath rescued from sin's deadly thrall.
Come over and help us, in bondage we languish
Come over and help us, we die in our anguish,
It comes unto me;
It cometh to thee,
O, what shall the answer be.
Go, for the Saviour sends thee forth,
To all from the distant east,
The idolaters for whom Christ died,
To the heavenly marriage feast.
The Gospel that thou bearest now,
The power of God shall prove,
To triumph over the souls of men
By the omnipotence of love.
Awake, for duty calls thee forth,
The voice of thy brother's blood
A million a month in China dying without God.

Yours in His Service,
EMMA PERRINE LAIRD, M. D.
Chang-sha, Hunan, China.

These circumstances illustrate a little of the pressing need of medical missionaries in ministering to their fellow-workers, to say nothing about the needs of the natives, which we will now consider.

A MISSION FOR THE BIBLE.

H. E. BARIGHT, M. D.

[DR. H. E. BARIGHT, of New York, is the leader in a great movement for the daily study of the Scriptures. He is the compiler of the "Daily Bible," and editor of *The Morning Watch,* a monthly journal devoted to the systematic study of the Bible. Dr. Baright attended the Medical Missionary Rally in this city in September, and the following formed a portion of his remarks in the Tabernacle:—ED.]

I have been asked to say a few words with regard to the little work which God has put upon my heart and into my life. It grew out of my professional work in a sanitarium, one of the largest sanitariums of the Eastern States. I suspect that our patients were of much the same class as those that you have with you, essentially a Christian class of people who are church members and who profess faith and love and dependence upon God, and yet I, as their physician, found that when they came to the hard places in life, such as they found when they became sick, especially that class of chronic disorders, where depression of spirits is particularly common, where the resources of their actual Christian spirits were put to the test, they were not possessed of a measure of faith to which they, as Christians, were entitled and which they could have had. We have, all of us, had sufficient experience to know what this means and what these tests are.

At first the way out of this difficulty was not clear to me, but as I was meeting these patients, trying and longing to help them, God put it into my heart. Among my patients were many of those who were comforted and cheered by the grace of God, and among these was one of those sweet, sunny-spirited young women. She had been a worker in a New York hospital settlement house and she was always cheery, she never talked about her ailments. It was only by persistent inquiry that I could find out her troubles, because she never brought them forward, but, on the other hand, was always talking about her Christian life and experience and how good God was to her.

And it was such a pleasure, such a relief, to get into her presence. She had her needs, to be sure, but her deepest needs had been supplied by the grace of God. I noticed lying upon her bed, for she was confined to her bed most of the time, little slips of paper with texts of Scripture and Scripture references written on them. She told me they were sent out by the Mission for use in their settlement. I felt that I had need of something of that sort myself in my own work, something definite just for the day, something upon which to concentrate my thought.

The use of these little slips in that way seemed feasible at once, and I asked to have them sent to me. I put them in my pocket as they came and used them and they accumulated until there was a bundle in my pocket. In odd moments I would pull out that package of texts and after reading them over, put them back and go about my work. If any one will follow that plan he will find that he is storing away Scriptures which will serve him well many, many times.

I formed the habit of making my calls upon my patients in the evening, especially those who were apt to be restless and wakeful during the night. Thus I could oftimes insure them a good night's rest and they would feel better and more comfortable in mind and body the next day.

I did not give many medicines. I have known about Dr. Kellogg's teachings for many years, and I can almost say that I never went to the dispensary after sleeping powders or draughts until I had tried to find other means, and I soon found that the best, really the most effective means I could use was to just sit down and have a little talk about spiritual matters. I would then finish our conversation with a word of prayer and commend the patient to God, asking him to care for and keep the patient and close their eyes in restful sleep. And do you know, my faith was taken back by the splendid results, professional results even, to say nothing about the deeper satisfaction that comes from the gratitude we see in those patients for the help that reached beyond their mere physical need to their deeper spiritual wants. Those little texts came out of my pocket handily on a good many of these occasions and I would pick out two or three and say, "I want to leave these with you. Read them over, think about them and take them to yourself, as a precious message from God. Let that be your last thought. Say as you lie down, I leave myself in God's hands, with his word in my heart and in my thoughts. I will let him care for me during the night." And it worked. I might sum up my whole message in that—*It worked.* The Word of God and the Spirit of God work through us and in us that which our faith hardly dares to claim, if we will just let it work.

Out of these little texts came a desire to reach more patients than the little slips could reach and we began to print texts on the same plan by the mimeograph and these were passed to a larger number of people. It came to be quite a systematic thing so that a desire and a call was created for them. As patients went home they wanted the texts sent to them. So the circulation grew and there came to be a large list and it was quite a task to get them mailed. There was no charge for them and the postage came to be a large bill, and these problems suggested the thought of a periodical which we could send out through the mails at one cent a pound. We could not thus mail simple quotations at pound rates. The periodical must contain something in the line of original matter. So we began to add words of comment and the work has grown and grown from that little beginning, not through any advertising, but through God's leading only, and I am not exaggerating when I say there are thousands who have written to me telling how their lives have been blessed and changed and their homes transformed, the family altar has been established through the habit formed of daily reading the Bible, beginning with those little texts.

We are constantly receiving evidences of the good that this simple little effort is doing to our patients. On other occasions we would write out a prescription for something or other, now we often send a comforting text of Scripture. I am more and more convinced that the better we are able to meet the spiritual needs of our patients the more perfectly we meet their real needs, not to neglect or ignore their real needs nor to permit ourselves to be carried away with anything akin to Christian Science or mental healing, which is not founded on faith in God's Word or God's power to work through his spirit and thus to supply their mental and physical needs. Let us therefore be possessed of this thought that it is God that worketh in us and through us to do his good will and pleasure and let us be teachable, keeping in touch with him through his Word and through prayer. God is looking for faithful workers. He is more anxious to find and use us than we can be to find him and to be used of him.

A LETTER FROM CHINA.

FROM DR. EMMA PERRINE LAIRD.

The following letter was sent to the meeting of the Medical Alliance now in session:—

DEAR FELLOW-WORKERS IN CHRIST:—Hunan is one of the west central prov-

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MEMBERS OF THE FRESHMAN CLASS A. M. M. C.

WHAT HAVE WE DONE TODAY?

We shall do so much in the years to come,
But what have we done today?
We shall give our gold in a princely sum,
But what did we give today?
We shall lift the heart and dry the tear,
We shall plant a hope in the place of fear,
We shall speak the words of love and cheer,
But what did we speak today?
We shall be so kind in the after-a-while,
But what have we been today?
We shall bring to each lonely life a smile
But what have we brought today?
We shall give to truth a grander birth,
And to steadfast faith a deeper worth,
We shall feed the hungering souls of earth,
But whom have we fed today?
We shall reap such joys in the by and by,
But what have we sown today?
We shall build us mansions in the sky,
But what have we built today?
'Tis sweet in idle dreams to bask,
But here and now do we our task?
Yes, this is the thing our soul must ask,
"What have we done today?"—*Selected.*

AMERICAN MEDICAL MISSIONARY COLLEGE.

THIS college was incorporated in 1895 and consequently has passed through twelve years of work and experience. The reasons which led to its establishment were principally: First, the growing demand for medical missionaries. The opening up to missionary effort of those portions of the earth which had heretofore been closed to the gospel, now leaves the door of opportunity open as wide as the earth. There is practically no part of the earth that is not accessible to the gospel of Christ; not only so, but many of those nations which have opposed the entrance of the gospel are now inviting the religion of Christ and its accompanying enlightenment and blessings. And not only in so-called heathen lands has the effectiveness of medical missionary work been recognized, but in lands nominally civilized and Christianized. There is no community that does not offer to the Christian medical worker an inviting and fruitful field for philanthropic and Christian self-sacrificing effort.

Second, it has been amply demonstrated that of all the means employed for reaching the hearts of men and women with Christian influence, none are so effectual as those employed in medical missionary work. This work in its fulness comprises the work carried on by our Saviour while on earth, to whom we ascribe the title of the Great Medical Missionary.

Third, in the establishment of this college it was borne in mind that a large share of the young men and women who desired to devote their lives to the noble work of the medical missionary are without means to meet the expenses of the education and training necessary in the preparation for such work. Such students invariably require to be assisted financially; therefore, in the establish

ment of the school, the way was opened by which a large proportion of the students might meet a part or the whole of their current expenses while at the same time obtaining a valuable, practical experience in doing medical service in the laboratories, wards, and offices connected with the institution.

A fourth reason which led to the establishment of the College was the well-known fact that the influences attending the average medical school are far from being conducive to spiritual life and faith, to that consecration and self-denying effort which must characterize the true missionary. They are directly opposed to all these qualifications, and it has been lamented for years that so many candidates for medical missionary work have lost their faith in God and their interest in the cause of Christ while in medical schools and led to abandon their purpose. It was therefore deemed expedient that this school should be established and conducted on such lines as would tend to build up and strengthen the life of spirituality and devotion.

There has existed in medical circles a degree of suspicion, whether well-founded or not, that the introduction of the missionary and Christian element into a medical course would have the effect to cheapen the grade of work. It has therefore been necessary to prove this suspicion unfounded in the character and conduct of this College. Consequently the utmost pains has been taken to place the work above criticism and suspicion, so that while it has been subject to close surveillance by medical authorities, it stands to-day above reproach in the character of its work and respected by all competent authorities.

During the period of its operation about three hundred and twenty students have been admitted to the school, and one hundred and seventy have been graduated. Many of these students are actively engaged in distant parts of the earth in the service of Christ for humanity; others have found opportunities for Christian medical work nearer home; and with very few exceptions, all are conscientiously carrying out the avowed object with which they entered upon their course. As the work goes on, the field and opportunities for workers broaden and increase in every direction, and many times the number that we are able to supply might find employment in organized medical missionary work, while there is no limit to the number who could profitably engage in private work for humanity.

In its religious instruction and requirements the American Medical Missionary College is non-sectarian. Students of the various Christian denominations are freely received and given equal advantages. The study of the Bible and of missionary methods and experience,

MAIN BUILDING OF THE AMERICAN MEDICAL MISSIONARY COLLEGE.

attendance on religious worship, and the maintenance of religious activity, are made incumbent on students as being essential to proper missionary training.

Since the opening of the College great progress has been made in Medical Science, and it is the determination of the faculty to keep abreast with advancing knowledge and skill. The missionary physician requires not less knowledge than the ordinary physician, but more; and the law recognizes no difference in responsibility between the missionary physician and the ordinary medical man, and makes no discrimination in favor of one or the other. As the missionary can seldom know in advance where his field of work will be during his whole lifetime, it is necessary that he should be prepared to go anywhere that duty may call. Hence it will be the policy of the Board of Trustees and the faculty of this College in the future, as it has been in the past, to maintain such a standard in teaching and training as will give to the graduates of this school superior standing, as well as the highest efficiency, as practitioners in the exacting work which is liable to fall to their lot as missionary physicians located in isolated sections, where the assistance of medical experts, specialists, and experienced consultants is seldom available.

As will be seen elsewhere in this paper, extraordinary facilities for clinical and hospital work have been acquired in Chicago where about one-third of the work of the school is performed. The opening of a new dispensary in the famous Stock Yards District affords great advantages to the students both in professional and medical lines of work. This feature of the school is spoken of in a separate article.

The attendance of the students of the College has been quite satisfactory to its projectors, being considerably in advance of what was anticipated it would be, and everything indicates at the present time a successful career.

The school occupies an enviable position amongst medical colleges as to the character of its work. Graduates of this school have appeared before the various examining boards of the country and have rarely failed to meet the most exacting requirements. Several of the students have received degrees from foreign universities.

The equipment of the college as to buildings and apparatus is all that could be required. Extensive laboratories, commodious recitation and lecture rooms, comfortable living quarters, the beautiful surroundings of the Battle Creek College, and the association of the famous Sanitarium and the special advantages offered in Chicago make it a most desirable place for the medical student.

* * *

THE FUTURE OF THE AMERICAN MEDICAL MISSIONARY COLLEGE.

BY J. H. KELLOGG, M. D., PRESIDENT.

THE American Medical Missionary College was the first Christian medical missionary school ever brought into successful operation, and although several attempts have been made at various times, and in various places, to organize a similar work, this school stands today as the only Christian medical school in existence.

It is but just, however, to say right at this point, that the founders of the American Medical Missionary College were by no means the originators of the

idea of medical education with special reference to medical missionary work.

The Medical Missionary Institute of Edinburgh, and the similar work established in New York by Dr. Dowkonnt were pioneers in this work, although their institutions were not empowered to grant diplomas. The earnest and devoted persevering efforts of Dr. Dowkonnt failed, only because of the lack of a sufficiently large body of medical men in sympathy with the enterprise to constitute a constituency and a teaching force.

The A. M. M. C. was made possible only by a contribution of providential circumstances and conditions which came into existence in connection with the Battle Creek Sanitarium, an institution founded upon a Christian, nonsectarian basis and providing unusual facilities for the study and practice of medical missionary principles and methods.

For some years before the opening of the American Medical Missionary College, the Battle Creek Sanitarium management had appropriated several thousands of dollars yearly, to the education of men and women who were willing to devote their lives to medical work in Christian lines at home and abroad. At that time, nearly a score of students were pursuing their studies in various medical schools by financial assistance from the Battle Creek Sanitarium.

The instruction received in the medical colleges was supplemented by summer courses at the Sanitarium. These methods were found expensive and by no means satisfactory for many reasons, but especially because it was found impossible in the short time thus afforded, to make the student thoroughly and practically acquainted with the principles and methods of greatest importance for this work.

When the A. M. M. C. was organized and opened, the Battle Creek Sanitarium management not only placed at the disposal of its faculty the unequalled facilities for practical training afforded by the medical and surgical departments of a great sanitarium and hospital, but provided the necessary buildings and equipment, and means of maintenance, thus making possible a work which otherwise could not have been undertaken without the raising of funds to the extent of hundreds of thousands of dollars. A medical school cannot give to its students proper training without adequate hospital advantages. A medical missionary college needs above all others, complete facilities for practical training, for the missionary physician has not often the opportunity to call in experienced counsel in difficult cases, nor to spend a week or two in post-graduate work every few months when the need of special instruction is felt; he must be "thoroughly furnished unto all good works." Of especial value to the missionary physician is the practical training in physiological methods which the students of the American Medical Missionary College enjoy, thanks to the favor shown the school by the management of the Battle Creek Sanitarium.

It will be readily seen from the above that the American Medical Missionary College is not an ephemeral enterprise but that it is the carrying on of a great purpose which existed before the school did, and not only in the minds of the promoters of the school, but in actual operation in a less efficient form.

Within the last year, notwithstanding some special, peculiar, and unusual difficulties which have beset the enterprise, considerable real progress has been made. Ten or twelve thousand dollars have been expended in improvements especially in providing better dispensary facilities in Chicago as described in Dr. Harris's article in this number. Here are at work eight physicians and several nurses besides the students of the College classes who are working for the physical, moral, and social improvement of the needy throngs of human souls who inhabit the Stock Yards' District, "the jungle" of Chicago.

This dispensary is probably the most complete establishment of the sort in the world, indeed, there is probably none quite like it, none which offers such a great variety of curative means, none in which such pains are taken to make a thorough investigation of cases, and certainly very few in which the sick come in contact only with those who are ready to offer Christian sympathy and aid as well as medical help.

An additional feature which has aided in placing the work upon a sound and permanent basis, is the establishement of an endowment fund which already promises an annual income of $20,000 or more, and will probably increase. The College laboratories earn $6,000 or more annually, and the income from students amounts to a few thousands more. These various sources of income secure to the students all requisite advantages and facilities which require cash expenditures and removes all apprehension of a deficit from running expenses.

The most encouraging feature of all as regards the future of the school is the organization at the beginning of the present year of a large and most promising freshman class. The high standard of entrance requirement, equal to that of the very oldest and largest medical schools in the country with a very few exceptions doubtless reduces the number of students, but quality rather than number is the aim in this school. Besides, a close scrutiny is made of the character of applicants, the highest credentials must be given with satisfactory assurance of missionary aim and purpose.

Substantial encouragement has been received from most of the great missionary boards, who are ready to co-operate with the school as soon as assured of its non-sectarian character.

The American Medical Missionary College was organized to meet a valuable need. The need still exists. The College also still stands, thanks to a kind Providence, notwithstanding strenuous opposition from certain quarters, and so long as there remains a mission for it to fulfill, we believe the same kind Hand will guide its career and guard and protect its interests.

* * *

SOME RECENT IMPROVEMENTS.

BY R. H. HARRIS, M. D.

THE session of the American Medical Missionary College which is just opening gives promise of being the most successful year in the history of the school. The new students who are entering the school, many of them, have much more than met the requirements for admission, some having literary degrees and others having been teachers for a number of years. The school adheres strictly to the standards of the Michigan State Board of Registration in Medicine, the Illinois State Board, and the Association of American Medical Colleges with regard to the preliminary education which is necessary for admission to the school and with regard to the medical curriculum. In fact, the number of hours of didactic and practical work given in the course is nine hundred hours in excess of the minimum requirement of the above-mentioned Associations.

A perusal of the announcement of the College for 1907–8 will afford a fairly good idea of the progress that was made during the last school year in the arrangement of the work and in the facilities for teaching.

Since the issue of the calendar there have been many improvements which are worthy of notice. The dispensary which was located at the north of the College building has been moved into more pleasant and commodious rooms at the south of the building, and has been well equipped. The dispensary has been well patronized by patients who come from the city for attention, and many of these cases are seen by the students in the medical clinics held by Drs. C. E. Stewart, W. H. Riley, J. H. Kellogg, and other members of the faculty.

In connection with the dispensary, on the same floor, are treatment rooms for women, and in the basement of the College building are the treatment rooms for men which were used for a number of months, after the Sanitarium fire and before the new building was completed, as the treatment rooms for the pay patients of the Sanitarium.

The room formerly occupied by the

dispensary has been connected by doorway with the adjoining laboratories and has been fitted up for special laboratory work, and no doubt constitutes one of the finest and most convenient practical laboratories in the world. Quite a number of valuable scientific instruments and appliances have been added to the laboratory equipment.

The obstetrical ward which was fitted up in East Hall at the close of school is well-equipped and is doing good service. This ward with the obstetrical practice connected with it, affords greater advantages for the students in Battle Creek in this line of work. Besides this increase in obstetrical opportunities in Battle Creek, the obstetrical work connected with the Chicago dispensary has steadily grown. There was no member of the last graduating class who had not attended at least twelve obstetrical cases during the course.

The alumni of the school will rejoice to know that the students of the school have not only all the clinical advantages that have been hitherto enjoyed in Cook County Hospital, but also clinical advantages, both medical and surgical, in St. Luke's Hospital, in Chicago. The students not only see the cases in the clinic and in the operating room, but each week go through the wards and are thus enabled to follow the cases in their subsequent history. These ward walks are greatly enjoyed by the students and afford invaluable bedside instruction. In addition, students enjoy the advantages of the great dispensary at St. Luke's Hospital, one of the finest in the city. The life-sized, hand-colored photographic enlargements of illustrations in the Anatomy of McMurrich and Sabotta and in other standard medical works which have been added to the equipment of the school since last year are a great help in indelibly fixing facts in the minds of the students. The photographic department is doing splendid work in preparing these beautiful charts and in making stereopticon slides for use in the school. Moving pictures have been made of some of the peculiar gaits of patients suffering from organic nervous diseases, who have from time to time been under the care of Dr. W. H. Riley.

Space forbids a more extensive consideration of the recent improvements in various lines. As the closing word, it seems fitting to remark upon the splendid Christian missionary enthusiasm which has been aroused and strengthened by the interesting and profitable addresses of the missionaries who have been with us at the opening of the school and from time to time. The students and teachers are in earnest and are determined to make this year the best year in the history of the school both from a scientific standpoint and from the standpoint of Christian work for their less fortunate fellow-men.

A CLASS IN BACTERIOLOGY.

MEETING OF THE AMERICAN MEDICAL ALLIANCE.

THE fifth annual meeting of the above alliance was held at Battle Creek Sanitarium, September 17 to 20, in connection with the opening of the Medical Missionary College. This Alliance is composed of Christian physicians who are actively in sympathy with the practise and development of physiological therapeutics, and an auxiliary organization of nurses devoted to the same principles. The membership of this Alliance has now reached about two hundred, the members being scattered throughout America and the different parts of the world. The majority of the members of this Alliance have received their education and training in the A. M. M. C. in affiliation with the principles and methods of the Battle Creek Sanitariu.m Others have been led to adopt the principles in their practise.

The present meeting being held at the season of the year when the members are particularly busy was not as well attended as some of the preceding have been, and yet a goodly number of members and visitors were in attendance. Among the visitors present were Dr. C. C. Creegan, secretary American Board of Commissioners for Foreign Missions; Dr. J. H. Van Allen, for eighteen years medical missionary in India, now on furlough; Dr. Maxson, of Wisconsin; Dr. R: S. Ingersoll, of Calcutta, India; Girard A. Bailey, Venezuela; Dr. Margaret Stewart, of Northern India; Mrs. Flora Chew, of Lucknow, India, and others.

Dr. Van Allen's recital of his missionary experiences in India will be long remembered by all who heard him. When he went to India, nearly twenty years ago, the medical station was occupying an inadequate building that had grown up piece by piece as the work had grown slowly, but surely, during forty long years. It was a group of cottages rather than a single edifice. An aggressive work was begun, and a few years later, impressed by the faithful, efficient dispensary and hospital work that had been done, several rich traders and merchants clubbed together and erected a fine large hospital building, which has been pronounced one of the handsomest in India. The structure and equipment could not be duplicated in America for less than $100,000. Spiritual work has been carried on steadily, and is as fruitful as the medical.

Dr. Creegan, it may be said, has but recently returned from a tour of missionary investigation and inspection around the world. He favored the Alliance and Sanitarium guests one evening by a delightful lantern-slide lecture on his trip. European and Asiatic Turkey, India, China, Japan, and the Philippines each passed before us in review. The doctor gave a brief resume of the work of the great Shanghai Missionary Conference, and spoke enthusiastically of the position he believed China was destined to occupy among the world powers.

These interesting addresses will be given to our readers through these columns in future numbers of the MEDICAL MISSIONARY.

During the progress of the convention several practical and valuable essays and addresses on medical topics were presented, one of these was a lecture by Dr. F. J. Otis, of Chicago.

A severe case of esophagal obstruction, due to muscular spasm, was brought to the doctor in Chicago, who overcame the stricture by forcibly dilating it with an expansile rubber bag inflated well in the throat. The work had to be carefullv done but the operation was successful, and the patient recovered rapidly, gaining fifteen pounds in a few days while under treatment. Dr. E. L. Eggleston, of the Sanitarium, called the attention of Dr. Otis to a young man who might possibly be suffering from the same obstruction. The doctor's examination of this

THE MEDICAL ALLIANCE MEETING.

case before the clinic proved the surmise to be correct.

Dr. J. H. Kellogg addressed the Alliance on the importance of intestinal autointoxication as a constant and active factor in the production of chronic disease. One of the principal features of the treatment as worked out at the Sanitarium is the use of an antitoxic dietary. The doctor insisted strongly on the fact that the greatest possible care in diagnosis is a necessary part of every successful physician's equipment. Every case must be approached from every possible standpoint. Less than this will spell disaster.

Dr. A. J. Reed, of the Sanitarium staff, presented a valuable paper on the adulteration of foods and on the pure food law. Specimens of foods that had been purchased in the open market were shown which responded to government tests for poisons. A most instructive feature of this paper was the exhibit of over a hundred specimens loaned by Dr. Wiley, the United States food expert. Among these were found a large number of harmful coloring extracts, various substances used for diluting and cheapening the output of preserved foods of every kind.

Scarcely less interesting than the paper itself was the discussion from the floor which followed.

Papers were also presented by Dr. M. A. Mortensen, Dr. M. V. Dryden, Dr. Margaret Lewis, on India as a medical missionary field; by Dr. Loisa Elwell, on obstetrics; by Dr. J. F. Morse, on surgery; and by Dr. Whitney-Morse on the treatment of malignant endocarditis, by opsonic vaccines.

The medical papers will be published in the *Modern Medicine*.

The papers and addresses, however, do not represent half the work got through at the convention. A large portion of each of the four days was spent in practical clinical and laboratory work. The scope of the laboratories is being constantly enlarged, and they now offer many advantages to be had in but few places outside Battle Creek.

Officers of the Alliance for the coming year were chosen as follows:—

President, David Paulson, M. D., of Chicago.

First Vice-President, O. M. Hayward, M. D., of Nashville, Tenn.

Second Vice-President, J. F. Morse, M. D., Battle Creek.

Secretary and Treasurer, Benton N. Colver, M. D., Battle Creek.

Executive Committee, with the above, C. C. Nicola, M. D., Hinsdale, Ill., and Mrs. M. S. Foy, Battle Creek.

Committe on Plans and Membership: C. E. Stewart, M. D., Battle Creek, F. J. Otis, M. D., Chicago, R. H. Harris, M. D., Battle Creek.

The meeting of the Alliance closed on the 20th after a busy session with a dinner at the Sanitarium at which the friendships and fraternal bonds which unite the members were renewed. All felt that the time had been most profitably spent. It was voted to hold the next meeting in Chicago, in June, at the close of the meeting of the American Medical Association, with the understanding that there would be an adjournment taken to Battle Creek.

* * *

THE NEW CHICAGO DISPENSARY.

FOR a number of years a dispensary has been maintained on Halsted Street, near Thirty-fifth Street. The dispensary was fitted up with electric-light baths, various appliances for the administration of hydriatic treatments, and conveniences for the treatment of accidents and emergencies. Although the facilities have been inadequate, several thousand persons have received treatment annually, and in addition hundreds have been treated in their homes by the visiting nurses.

The work of the dispensary from year to year has grown in magnitude and efficiency; and being the only dispensary in that part of the city known as the Stock Yards District or "The Jungle," which is peopled almost entirely by laboring men and women, the dispensary has had a great field of usefulness.

For years the growing inadequacy of the Halsted Street Dispensary to deal with the multitudes seeking relief was a source of great anxiety to the faculty of the American Medical Missionary College, and both faculty and students have recognized the necessity of providing larger and better facilities for the work. The Board of Trustees of the College feel great satisfaction in announcing that a building has been purchased which is admirably adapted to the purposes of a complete and representative physiologic dispensary.

The building is located within half a block of the rented building which was used for dispensary purposes during six years. It is located on Thirty-fifth Place, a few steps from Halsted Street, far enough away from the street cars to secure quiet. As it stands in the middle of a large lot there is an abundance of light on all sides. The building has been used for a number of years for school purposes, for which it was erected. It has two stories, each twelve feet in height, with a high basement, and an attic. An addition twenty feet in width, two stories and a basement, has been added to the north end.

The long basement is divided by a partition into two entirely distinct apartments, one for men and the other for women. Each apartment is provided with an excellent shower bath, a vapor bath, an electric-light bath, full baths, sitz baths, foot and leg baths, and facilities for every form of hydriatic treatment, together with tables for massage and appliances for electricity. The partitions are of hard brick covered with Keene cement, and so are waterproof and vermin proof.

The first floor is chiefly devoted to offices. Near the entrance is a capacious waiting room. Along the hall leading from this to the back of the building are the Office of the House Physician, the Laboratory, the Emergency Room, the Electrical Department, the Gynecological Department, and the Nose and Throat Department. At the rear is a large lecture and clinic room, capable of accommodating one hundred persons.

The second floor is divided into small wards and class rooms. At the north end of the building is a large, well-lighted room to be used as an anatomical laboratory.

Several of the leading physicians of Chicago have pronounced it the most thoroughly equipped dispensary in the city. There is probably no institution for the treatment of the sick poor in this or any other country so well prepared for dealing with all classes of cases.

The new dispensary will be the headquarters for a work many times greater in magnitude than that which has been carried on at the old one. In connection with the lying-in department there will be a post-graduate course of instruction in obstetrics; and other post-graduate courses will be organized as rapidly as circumstances will permit.

All students are given opportunity to do actual practical therapeutic work in connection with the dispensary. This professional work, done under supervision, is a most valuable part of the student's training. Nowhere else in the world do medical students enjoy such an opportunity as is afforded in this thoroughly equipped dispensary. Members of the senior class take turns in acting, under supervision, as house physician at the dispensary. This gives the student an opportunity to feel something of the responsibility of the profession, and to learn how to deal with emergencies of an exceedingly varied sort.

THE CHICAGO DISPENSARY.

* * *

THE ADVISORY COUNCIL.

DURING the past few months there has been added to the management of the American Medical Missionary College an Advisory Board the members of which are Howard Kelly, M. D., Baltimore; Wilfred T. Grenfell, M. D., Labrador; Alfred B. Olsen, M. D., London, England; George Thomason, M. D., Cape Town.

* * *

THE CHICAGO WORK.

ON the closing evening of the meeting of the American Medical Alliance, Dr. David Paulson, of the Hinsdale (Ill.) Sanitarium, was with us and spoke of the Rescue Home for Girls which they are erecting this fall in Hinsdale. This work has heretofore been carried on in a rented house much too small to receive those who came to the Home. Now they have in erection a four-story building of wood and cement which will make a most appropriate and much-needed abode for this grand, good work. Among all the agencies for doing good we know of none more deserving of consideration and support than this. We have but to picture some dear one of ours in the hopeless, sad situation of those girls who have fallen into the terrible pitfalls of the great city to have our pity stirred for those who are really there, who desire to escape and to live an upright, pure life, but have no possible way of getting free. No one will receive them; no one will employ or trust them. They are outcast and shunned by those who might lift them up. But here in this Home they find a Christian welcome and those who are ready to do all for them that true kindness can do for the one who is down.

Dr. Paulson reports ninety cases of permanent rescue from a life of shame and vice to Christian respectability in three years. The cost of the work has been about $600 each year or twenty

dollars for each person rescued. Think of it! A girl saved from something far worse than death for only twenty dollars. Are there not a number among our readers who will be glad to invest in such an enterprise? Is there any way in which an amount of money can be invested to better profit? Dr. Paulson will send to each contributor of twenty dollars an account of the person who was rescued through that means. The experience of such a case is often more thrilling than any romance ever written. If you can not contribute twenty dollars, get others to join you until you have the amount in hand, and then send it on.

Dr. Paulson is endeavoring to raise $1,000 to aid in putting up this building. Certainly a very modest sum. Who will help him? It ought to be a privilege to many a wealthy man or woman to build that Home, but we are now looking for those who can help a little. Send to your friend, Dr. Paulson, a little help just now. Address Dr. David Paulson, Hinsdale, Ill.

* * *

[redacted]

have given to their school the name of "The Old Paths Industrial School." It is located at Eliza, Jackson Co., Ala. Beginning with meager facilities Dr. Hayward has been able to add to his buildings and equipment gradually until they are now able to accommodate a school of fifty or more. The object is to promote Christian education along industrial lines of a practical character. Mrs. Hayward is also a teacher of experience in natural methods, and there is no doubt that under the blessing of God the school will be of the greatest benefit to the community in which it is located, and that its power for good will be felt far and wide. Such efforts are deserving of substantial aid and sympathy. Dr. Hayward and his devoted wife have undertaken an heroic work for needy humanity. It is a work of self-sacrifice, with no hope of earthly reward. Will it not be a pleasure to some of our readers to show their sympathy for this move by financially assisting these worthy workers in their task? Letters sent to the address given above will reach them.

There is perhaps no section of our country that so urgently appeals to philanthropy as the South with its two uneducated classes, the colored people and the mountain whites. This effort of Dr. Hayward's is in behalf of the latter, and all who know him will be assured that means entrusted to him will be faithfully devoted.

Publications

The following publications are issued from this office and will be sent postpaid to any address for the prices named:—

THE MEDICAL MISSIONARY, eight page weekly, illustrated, per year.....***$0.60***

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SCIENCE IN THE KITCHEN, Mrs. E. E. Kellogg, A. M., 487 pages.....***$1.90***

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MRS. M. S. FOY,
Battle Creek, Mich.

Extraordinary OFFER

By special arrangements with the publishers we are able to present to our friends the following Combination of good and popular reading for the coming year. For general reading we doubt if there is a more valuable journal printed than the ***Review of Reviews.*** As a popular journal ***Success*** is well and favorably known. The ***Woman's Home Companion*** has a circulation of 600,000 which is all we need to say as to its value in its capacity. These are united in the following grand offer:

Review of Reviews - -	**$3.00**
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Address: MEDICAL MISSIONARY, Battle Creek, Mich

OCTOBER 2, 1907

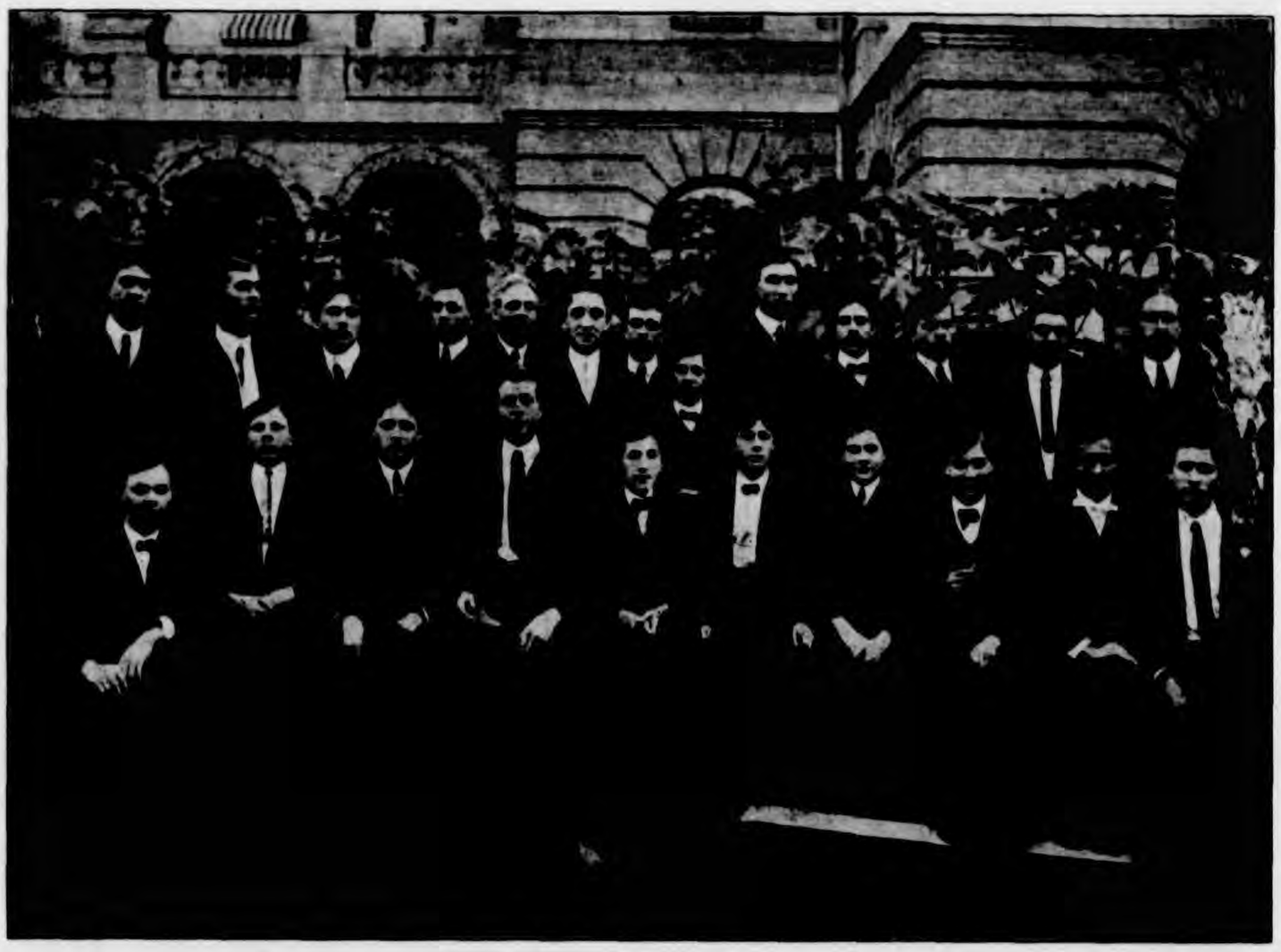
AN OPPORTUNITY TO OBTAIN AN EDUCATION.

THERE are many young men who lack the means with which to go to school for the necessary education to enable them to fill places of usefulness in the world. The Battle Creek Sanitarium has undertaken to meet the wants of youth who have no money with which to pay the large expenses of schooling away from home, and yet are deserving of a good education. A competent school in all useful sciences and industries is in constant operation throughout the year, and the privilege of working to pay all expenses is extended to every earnest young man or young woman who wishes to accept such advantages.

Just at the present time there is urgent need of young men to act as messengers in the institution. Quite a large force of messengers is employed, and it is very desirable to have those in this place who are trustworthy, intelligent, and true to good principles. It is comparatively easy to obtain the average boy of to-day, but something better than the average boy is required here. The faithful and efficient messenger wins the confidence and gratitude of employers and guests. Shiftless young lads who are irresponsible and tricky are not wanted anywhere, especially around an institution where the sick are cared for and where so much depends upon the faithfulness of every worker. But here is an opportunity for the young man who is determined to make the most of himself, and good inducements by way of pay and educational advantages with likelihood of advancement are held out to such. The management of the Sanitarium are very desirous to secure the services of several such young men now. Young lads who need the care of home are not asked to come unless their parents are here with them. But young men whose principles are fixed are wanted. Perhaps this will come to the notice of some such who would be glad to correspond with reference to this opening. Letters may be addressed to the Sanitarium, Battle Creek, Mich.

* * *

IT is a pleasure to have with us again, Mrs. Anna Ruthven, a graduate nurse and former efficient assistant in the work. Mrs. Ruthven is much devoted to vocal music, and being possessed of an unusually fine voice, has been engaged with a prominent Philadelphia instructor. While with us Mrs. Ruthven favored our family with some sweet songs on different occasions. We hope to hear her again.



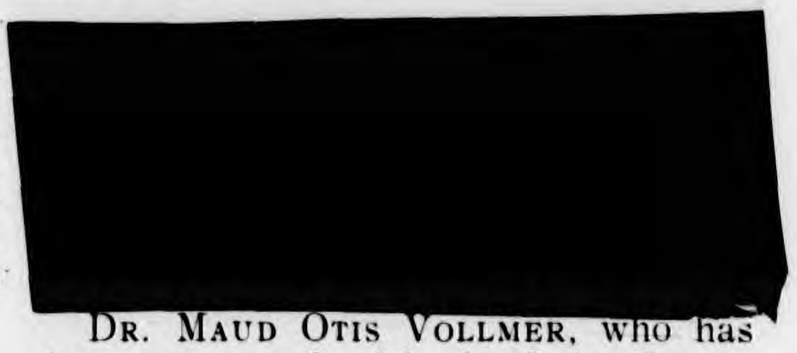
A GROUP OF SANITARIUM MESSENGERS

* * *

WE were much pleased to have a short visit from Dr. Elsie Merritt, of Princeville, Ill., a graduate of the A. M. M. C., '01. Dr. Merritt has a good practice in her home community where she is gradually winning the people to a better knowledge of how to live. She is of good courage, and we heartily enjoyed her brief visit.

* * *

DR. HENRY HARROWER, of the class of '07, is joining forces with Dr. Chrisman, of Kankakee, Ill., where he has established a good and growing work. We expect to hear good reports of their work, and confidently expect that they will be a blessing to the community in which they are located.



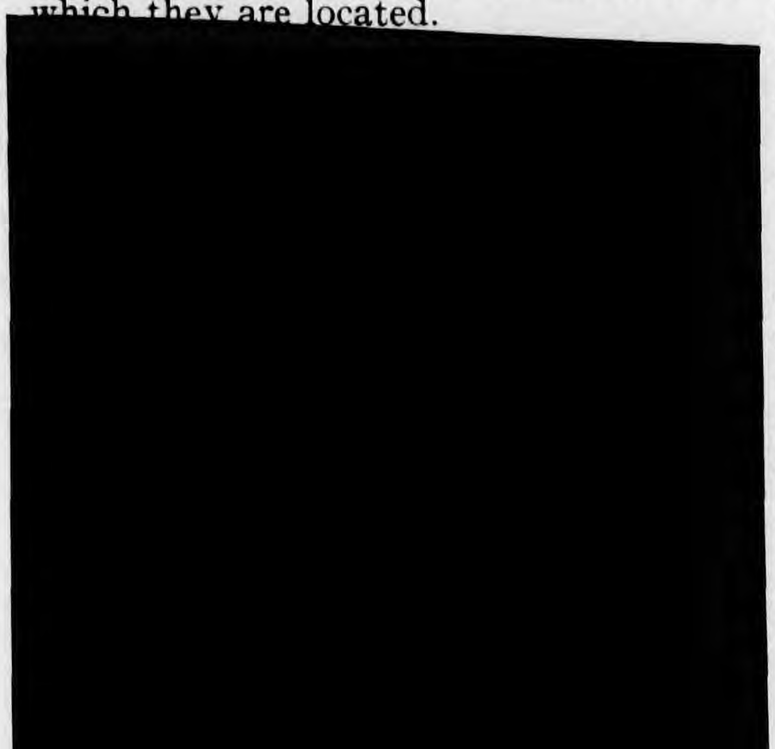
DR. MAUD OTIS VOLLMER, who has been connected with the Lake George (New York) Sanitarium, of which her brother, Dr. E. F. Otis, is superintendent, is engaged in laboratory work in the Battle Creek Sanitarium for a time.

* * *

SPECIAL COURSE IN TROPICAL DISEASES.

THE most recent addition in the curriculum of the A. M. M. C., is a course in tropical diseases, which is most appropriate for a school of this kind. Quite a proportion of the students attending this school expect to find their field of activity in the tropics. The special maladies which prevail in these portions of the earth require special study. Cases are of course rare in this country, but fortunately there are excellent text books on the subject, and the clinical laboratories are provided with a supply of interesting illustrative material.

Valuable clinical instructions on tropical diseases is often received from missionary physicians on furlough, who are guests at the Sanitarium. It is very rare indeed that we do not have the pleasure of having with us one or more representatives from the foreign field who are able to draw most helpful lessons from their actual experience in the treatment of the plague, the cholera, and various tropical fevers and other maladies peculiar to the tropics.



August 24,1807,which held till 1811 when Napoleon's war with Russia compelled that power again to conclude a peace with Turkey and to "abandon the *long coveted prey, when it was already in its grasp.*"—*Id., pp. 466-468.*

In 1828 Russia again brought on a war which was openly declared June 4. In June, 1829, one Russian army had gained Adrianople once more; another had taken Erzeroum in Asia; "and the two generals would doubtless have joined hands in Constantinople, but for the efforts of diplomacy and the fear of a general conflagration. . . . Austria was ready to send her troops to the help of the Turks and the English also seemed likely to declare for the vanquished. It was therefore necessary to come to a halt. Russia reflected that, after all, 'the sultan was the least costly governor-general she could have at Constantinople,' and lent an ear to moderate conditions of peace."—*Id., pp. 544, 545.*

In 1831 Mehemet Ali, Turkish Pasha of Egypt, had attained such power that he decided to strike for independence. In October of that year he sent an army of fifty thousand men for the invasion of Syria. This army made an easy conquest as far as to Acre, but that stronghold had to be beseiged. It was taken however, May 27, 1832. A Turkish army that had been sent for the relief of Acre was defeated, as were all other forces that were met by the Egyptians; and by a decisive victory December 21, 1832, "The victor was free to march upon Constantinople; nothing could impede his progress."

The advancing army reached Brusa, "and was menacing Scutari," the city only across the strait from Constantinople. The western Powers had witnessed all of this without offering to the Sultan any aid whatever. Indeed their sympathies, if not their encouragement, were with the rebellious and invading forces. Here was a grand opportunity for Russia; and she seized it. She offered aid. The Sultan "Mahmud, being frightened, accepted the offers of aid made him in the name of the Czar by General Muraviev." France advised further parley with Mehemet Ali, but he now asked so much that the Sultan could not consent. The invaders "marched upon Scutari. Mahmud then summoned the Russians, who landed fifteen thousand men in the city, and prepared to defend it." Thus at last with fifteen thousand armed men in the city, Russia had practical possession of Constantinople.

But, "The French and English ambassadors, frightened at this intervention, pointed out to the Sultan the danger of letting Russia gain a footing in the heart of the empire; it would be better, said they, to capitulate to his rebellious subjects. The Sultan allowed himself to be persuaded, and on May 5, 1833, the viceroy consented to evacuate Asia-Minor in return for the Pashalik of Acre, Aleppo, Tripoli and Damascus, with their dependencies."

But again the pendulum swung toward Russia: "Mahmud, blinded by resentment, and misled by the promises of St. Petersburg, signed with Nicolas a treaty of offensive and defensive alliance . . . Turkey put herself at the mercy of the autocrat of all the Russians."

This, however, was too much for the other Powers to bear. Russia must not be allowed to hold this mighty advantage, which in a crisis could so easily be turned into absolute and irresistible possession The arrangement of May 5, 1833, between the Sultan and Mehemet Ali, was merely an arrangement, and not a conclusive peace: and the quarrel went on, with the Powers shifting their sympathies or their favor, advising settlement or urging war, as advantage seemed to invite.

This continued for six years, when, June 30, 1839, died the Sultan Mahmud, and the Sultanate fell to his son who was but sixteen years old. The tide still ran full in favor of the rebellious Pasha. The Turkish fleet sent from the capital to attack the Egyptian fleet, went over bodily to Mehemet Ali. "Fortune seemed to be emptying its horn upon the Egyptian."

The case was desperate for Turkey, and, in that, for all the Powers—*except Russia.* For her, as well as for the Egyptians, it was Fortune's own bounty. But the other Powers must act, or Constantinople and the Turkish empire would be gone forever, and Russia alone would be the fortunate possessor. This was certain: and as certainly a general confused war, if the Powers were to hold up their heads at all. Therefore, the four Powers—Britian, France, Austria and Prussia—suddenly, and for the occasion, *sunk all differences,* and made the original, bold, and high and mighty stroke, of *assuming absolutely all the responsibilities of Turkey and the whole case.* "In order to prevent Turkey from again throwing herself into the arms of Russia, the four great Powers, in a collective note of July 27, 1839, declared that *they would take the settlement of the Eastern Question into their own hands.*"

This bold lead checkmated Russia by the single move itself. She could not suddenly, without any preparation whatever, war against all Europe; nor could she afford to be completely left out and have the other Powers go on and settle all the matters involved, without any recognition or consideration of her in any way whatever. She was therefore forced to abandon every advantage that she possessed, either by position or by the late treaty, and, with the bare saving of her face, enter the "concert" upon original conditions with the other Powers. Accordingly, "Russia, in order not to be entirely left out, had to give her assent, and to support the convention as fifth Power."—*Id., pp. 451-453.*

Such was the origin, and thus arose, The Eastern Question.

Primarily therefore, the Eastern Question is, The Responsibility of the Four Great Powers of Western Europe for Turkey. And this responsibility was assumed from the necessity of keeping Russia from permanently possessing Constantinople.

How the Eastern Question has become the whole world's question, will be told next week.

* * *

Med. Miss. July 3/06.

THE MAKING OF MEDICAL MISSIONARIES.

THE value of medical missionaries and medical missionary work has in modern times been so frequently and so clearly demonstrated that there is no longer any discussion with reference to the importance of this department of missionary work. The only question nowadays is how to find young men and women of intelligence who are willing to devote their lives without reserve to the cause of medical missions.

It is confessed on all hands that the American Medical Missionary College has wielded a greater influence in the matter of medical education during the last ten years than any other institution. Of the one hundred and fifty graduates of the American Medical Missionary College nearly all are at the present time actively engaged in medical missionary work. About one-fifth are at work in foreign fields. Nearly all the rest are engaged in work in connection with charitable institutions in this country. At a recent gathering of the students of the College the question was asked, How many of those present entered the school for the purpose of preparing themselves for work in some line of missionary activity, and are still holding to this purpose? Nearly every person in the class raised his hand without the slightest hesitation.

The American Medical Missionary College bears the name of a missionary school. It is closely connected with active practical missionary work, both at Battle Creek and in Chicago. The students in connection with the Battle Creek Sanitarium, The Life Boat Mission, and other missions in Chicago, are constantly in close contact with live practical missionary work. The advantages for missionary activities in various

lines furnished by the American Medical Missionary College cannot be duplicated anywhere in the world.

That these influences and opportunities are not without good fruits in their influence upon the students is well shown by a circumstance which occurred some years ago. A young man who had recently learned of the school and of the work in general, came to Battle Creek and matriculated as a student of the American Medical Missionary College. He was a good student, and exemplary in his conduct. Months passed. The young man grew in knowledge of the science and art of medicine, and at the same time profited by the opportunities which he enjoyed for Bible study and actual live missionary work, and to that extent that he finally experienced a real genuine conversion such as he before knew nothing of. Those who came in contact with the young man noticed a radical change in him from this moment. From being somewhat harsh and even censorious, the change in manner and character was so marked that all who came in contact with him appreciated that a change had been wrought in heart and life such as only a divine Providence can accomplish.

The young man finished his course, and later became a missionary to China, where he is now laboring with heart and soul to bring a knowledge of the true God to those who are sitting in darkness in this far distant heathen land. A number of students now in attendance at the A. M. M. C. remember distinctly a certain interesting occasion when the students were met together for prayer and testimony meeting and this young man arose and said that when he entered the College he was an unconverted man, that he recognized the truth, and entered the school simply because of his interest in the truth, but that after many months he had experienced a real genuine conversion. That such a change had taken place was as clearly apparent to all who were acquainted with him as to himself. A rather harsh, sometimes over-bearing, censorious, hypercritical disposition had given place to a gentle, genial, and unfailing amiability which was a worthy example to all who came in contact with him.

The young man referred to is none other than Dr. A. C. Selmon, of Siangcheng, China. If the American Medical Missionary College had done nothing more than to train, educate, and help to a higher spiritual life a single missionary capable of accomplishing the splendid things in missionary lines which his friends and colleagues all expect of Dr. Selmon, the labor and effort which has been put forth for the building up and maintenance of this school would be amply compensated. Dr. Selmon's able colleagues, also graduates of the American Medical Missionary College, together with twenty-five more splendid missionaries who are now at work in foreign fields, received their education largely at the expense of the Battle Creek Sanitarium, which has furnished the equipment of the College, and for years met its deficits, it being the feeling of the Board of Directors of the institution that in no other way could a greater work be accomplished for the world than in thus helping to positions of immense usefulness young men and women who were willing to devote their lives to this line of useful activity.

* * *

THE ANNUAL COMMENCEMENT EXERCISES OF THE AMERICAN MISSIONARY COLLEGE.

THE exercises in connection with closing of the year's work of the A. M. M. C. and the graduation of the finishing class took place in Battle Creek, June 16 to 19. The occasion was one of much interest in each particular, and attracted the attendance of a large number of friends of the College and personal friends of the students. The last portion of the year's work had been crowded with taxing effort to make the goal lying at the close of the term. This was true of all the classes alike. Then followed the examination period—that mind and soul racking experience that is popularly supposed to test the real proficiency of the work done through the course—but which in many cases does not furnish any such criterion. At last, all was past and the die was cast, and nearly all had made the race successfully.

Then came the celebration of those years of delving and wrestling and the final victory. The first feature of the commencement exercises was, as usual, the baccalaureate sermon. This was delivered in the Tabernacle on the forenoon of June 16 by Prof. B. J. Wilkinson of the Washington Training College. The day was pleasant, and a large audience was present.

The singing was by a large and well-trained choir under the direction of Prof. M. W. Newton and included "Luther's Hymn," the anthem, "Praise Ye the Father," and the solo, "Calvary," which was rendered by Prof. Newton.

It is not our purpose in this place to give even an outline of the various addresses, abstracts of these will follow in subsequent numbers of the MEDICAL MISSIONARY. Prof. Wilkinson chose for his text the words which the messengers of John the Baptist brought to Christ while John was lying in prison: "Art thou he that should come, or look we for another?" The tenor of the discourse was to lead the mind from the regions of uncertainty to certainty. This, the speaker said, was the aim of the Bible. He followed with an earnest and comprehensive presentation of different features of Scriptural faith. The discourse was well received.

Sunday the 17th was set apart as "Class Day," and was closed with a class meeting on the lawn south of West Hall in the evening. The orchestra was present to give sweet music. The grounds were beautifully prepared in addition to all that a lavish nature had done for the embellishment of the scene. The exercises consisted of prayer by W. S. Sadler, a Salutatory Address by C. W. Heald, Class History by A. H. Larson, Solo by Minnie E. Staines, Class Prophecy by Louie E. Vandervoort, and Valedictory by L. A. Lavanture. These were followed by an exhibition of moving pictures by Mr. Ralph DeVault, and the very pleasant evening was brought to a close. Each of the items elicited vigorous approval and applause. There was a vein of pleasantry running through some of the productions calculated to revive in the memory many of the incidents of class life, and some of the peculiarities of its various members, but at the same time, there was ever kept in view the more solid basis of the earnest life-work for which they had been in preparation.

THE GRADUATION EXERCISES.

On Monday evening the Tabernacle was well filled with people who had come out to witness the graduation exercises. The faculty, students, and as many of the nurses as could be spared formed in line and marched to the Tabernacle from the Sanitarium in a body, filling the main portion of the auditorium. Upon entering one was at once impressed with the taste and appropriateness of the decorations. The principal feature was a representation of a ship's compass over the rostrum showing all points of the compass, and in the center the word "Go."

The orchestra discoursed fine music to introduce the exercises and as interludes throughout the program. Seated upon the platform were the speaker of the evening, Dr. Howard A. Kelly, of the Johns Hopkins University, Baltimore, Dr. J. H. Kellogg, president of the College, Elders Alonzo T. Jones, of the faculty, and B. Frank Taber, pastor of the first Baptist church, and in the rear of these the faculty of the College including several of the professors from Chicago, Doctors Halstead, Walls, Paddock, Marquis, Paulson, Thornton, and the Battle Creek members of the faculty Drs. Riley, Stewart, Morse, Eggleston,

A. E. Lemon, located at Sault Ste. Marie.
R. L. Mantz, Treatment rooms at Cedar Rapids, Iowa.
Elsie B. Merritt, medical missionary work in Illinois.
L. Ruth Merritt (Mrs. W. W. Miller), medical missionary in India.
W. E. Phillips, private practise in Boston, Mass.
A. R. Satterlee, Supt. of Sanitarium at Buffalo, N. Y.
H. E. Truex, private practise.
W. W. Worster, Supt. of Sanitarium at Connersville, Ind.
Silas Yarnell, Treatment rooms in Spokane, Washington.

CLASS OF 1902.

Maud L. Atherton (Mrs. J. E. Colloran), Chicago.
C. F. Ball, practising in Rutland, Vt.
Maud L. Bull, practising in Marion, Ohio.
Mary E. Britton, medical missionary in Lexington, Ky.
J. E. Colloran, medical missionary in Chicago.
John E. Cooper, practising in Fort Collins, Colo.
Maude Edgerton (Mrs. W. J. Erkenbeck), in Mexico.
Mary I. Goodison (Mrs. Leach), residing in Indiana.
W. J. Erkenbeck, in Mexico.
P. F. Haskell, New England Sanitarium medical faculty.
Lottie C. Isbell, Treatment rooms in Birmingham, Ala.
J. M. Keichline, medical missionary in Egypt, now taking post-graduate work.
Elizabeth M. Kerr (Mrs. R. H. Harris), Battle Creek Sanitarium faculty.
Bertha E. Loveland (Mrs. A. C. Selmon), medical missionary in China.
H. W. Miller, medical missionary in China.
Maude J. Otis (Mrs. A. M. Vollmer), returned medical missionary from Samoa, now Hinsdale Sanitarium faculty.
Vahan Pampian, medical missionary in Persia.
Eunice Rand, practising in Oklahoma.
A. C. Selmon, medical missionary in China.

MRS. H. W. MILLER, M. D.
Class '02, Missionary to China, deceased.

Eulalia T. Sisley (Mrs. F. C. Richards), practising with her husband in Leicester.
Maude A. Thompson (Mrs. H. W. Miller), medical missionary in China, deceased.
W. O. Upson, in Colorado.
A. M. Vollmer, medical missionary in Samoa, deceased.

CLASS OF 1903.

G. K. Abbott, Supt. of Loma Linda (California) Sanitarium.
Margaret Banta, Battle Creek Sanitarium faculty.
Paul Christman, Treatment rooms in Kankakee, Illinois.
W. C. Copeland, Aspen, Colo.
Florence N. Chrisler (Mrs. Mortenson), location unknown.
H. M. Doodakyan, practising in Michigan.
P. K. Gaston, Guadalajara Sanitarium in Mexico.
Effie M. Hawke, location unknown.
J. E. Heald, Supt. of Sanitarium in Peoria, Illinois.
M. Clare Hinds, deceased.
Mabel Howe (Mrs. F. J. Otis), practising with her husband in Chicago Sanitarium.
Amy M. Humphrey, Nebraska Sanitarium faculty.
Lucinda A. Marsh, medical missionary to India.
W. E. Kitchell, practising in Missouri.
C. R. Knox, Colorado Sanitarium faculty, Des Moines, Iowa.
Alace M. Mantz, Sanitarium faculty, Des Moines, Iowa.
Frank C. Richards, Supt. of Sanitarium in Leicester, England.
W. F. Martin, Battle Creek Sanitarium faculty.
R. R. Miller, practising in New York.
G. R. B. Meyers, Guadalajara Sanitarium, Mexico.
A. W. Nelson, Battle Creek Sanitarium and A. M. M. C. faculties.
Cora M. Richards (Mrs. G. K. Abbott), practising with her husband in Loma Linda Sanitarium.
W. T. Thornton, Chicago, Halstead St. Dispensary, and A. M. M. C. faculty.
Leona Westcott (Mrs. G. B. R. Meyers), Guadalajara, Mexico, Sanitarium.
Ludwig H. Wolfsen, practising in California.

CLASS OF 1904.

B. N. Colver, faculty of American Medical Missionary College.
R. S. Cummings, Sanitarium, San Jose, California.
Florence E. DeLhorbe (Mrs. W. J. McCormick), practising with her husband in Toronto, Ont.
L. E. Elliott, Treatment rooms in Superior, Wis.
Rachel E. Elwell, Pennsylvania Sanitarium faculty.
Nettie A. Evans (Mrs. H. B. Knapp), faculty of the Pennsylvania Sanitarium.
B. W. Fullmer, laboring in the Southern California Conference.
R. R. Hilborn, practising in southern Ohio.
C. C. Hubly, practising in Alpha, Ill.
Gertrude M. Johnson, Battle Creek Sanitarium faculty.
B. B. Kinne, Supt. of Middletown, N. Y., Sanitarium.
H. B. Knapp, Supt. of Pennsylvania Sanitarium.
A. G. Larson, Berrien Springs, Mich.
W. P. Larson, Sanitarium, Skodsborg, Denmark.
B. N. MacLafferty, Port Townsend, Wash., Sanitarium.
N. C. MacLaffertv, St. Helena Sanitarium faculty.
Bertha E. Mosier, Battle Creek Sanitarium faculty.
E. H. Risley, American Medical Missionary College faculty.

A. M. VOLLMER,
Class '02, Missionary to Samoa, deceased.

Paul Roth, Battle Creek Sanitarium faculty.
Mrs. Linda M. Roth, Battle Creek Sanitarium Training-School faculty.
Laura B. Stoner, New England Sanitarium faculty.

CLASS OF 1905.

S. E. Barnhart, Battle Creek Sanitarium faculty.
Harry M. Bonniwell, Battle Creek, Mich.
J. T. Case, Battle Creek Sanitarium faculty.
J. E. Groff, Battle Creek Sanitarium faculty.
Mayme M. Jefferies (Mrs. B. N. MacLafferty), practising with her husband in Washington.
H. S. Kelsey, Battle Creek Sanitarium faculty.
W. T. Lindsay, Madison Sanitarium faculty.
W. T. McCormick, medical missionary work in Toronto.
H. A. Morel, in France, preparing for medical missionary work.
Herbert Ossig, Germany.
A. H. Ross, medical missionary in New Zealand.
Wilburn H. Smith, Charlotte, Mich.
C. R. Thornton, practising in Corvallis, Mont.
H. M. Vollmer, Battle Creek Sanitarium faculty.
Henry G. Westphal, Kansas.

As for the class of 1906, consisting of twenty-two members, everyone expressed it as his or her fixed determination to abide by the principles taught in the school and to devote his life to the cause of Christ and humanity in any field to which the providence of God may lead him. So far as we are able to judge this is the earnest purpose of everyone of these graduates. And we are warranted in saying that no class has ever left the A. M. M. C. more fully imbued with the true missionary spirit than the last one. Several of its members have already found their fields of labor and others are

still with us laboring in the various departments of the Sanitarium and gaining further experience.

We have spoken only of those being engaged in the medical missionary work whom we have every reason to believe are doing thus, even though it be in a private capacity. The sanitariums and treatment rooms are regarded as representing the principles and methods of Christian medical work. In reference to those in private practise we believe that the most of them are doing the best they can in doing good in Christs name and in loyalty to the principles taught in our school.

It affords no small degree of grateful surprise in looking over this list of graduates to see how large a proportion are now actively engaged in dissemmingating and applying the truths upheld by this school and faithfully representing its principles to the world either in some of the various institutions or in private practise.

Certainly no better testimonial to the character of the American Medical Missionary College as being a medical *missionary* college could be required than a glance over the list of names given above. That it may continue and abound more and more in the missionary spirit and in its fruits is the earnest purpose and desire of all who have the work in hand

CHICAGO MISSION AND WORKERS.

* * *

MISSIONARY WORK IN THE A. M. M. C.

J. EDGAR COLLORAN.

In order to appreciate fully the advantages of a course in the American Medical Missionary College the student must compare it with a school which offers no missionary training.

I entered the A. M. M. C. in the sophomore year, having taken my first year in another college. As soon as I arrived on the campus I noticed the difference between the spirit manifested by the older students toward the newcomers and the attitude of the older students in an ordinary medical school.

The first evening there was a reception for the new students, and it afforded quite a contrast to the hilarious class times I had been accustomed to witness. The exercises were opened with Scripture reading and prayer. Each class was represented by a speaker, and the theme was missionary work, home and foreign.

The following day the classes were called together, and after prayer the faculty told us that the object of the school was to train missionaries, and pointed out the opportunities for missionary effort there in Battle Creek

When our class met they organized for a missionary campaign. The class was divided into committees. One committee looked after the cottage meeting work, another had charge of distributing food to the poor and doing Christian help work; another had for its work the services at the Battle Creek Mission one night each week, providing speakers and music, while the fourth group made the long trip to the county jail at Marshall every Sunday.

Twice a week we had Bible class which was as faithfully attended as any other part of the college course and was much enjoyed.

Friday evening was looked forward to by every member of the class. Tired after the week's work, we would gather for our class prayer-meeting. If any little difficulties had come up during the week they were all made right; if any were discouraged they gained fresh courage from the experiences of their class-mates, and all began the Sabbath in a good spiritual frame of mind.

Sabbath afternoons found faculty and students meeting for missionary study and instruction.

When the time arrived for our annual visit to Chicago, for practical work in anatomy and clinics, everybody was happy, for it meant not only great opportunities in medical lines but also unusual chances for missionary experience; as our Chicago mission work cannot be surpassed by any mission organization in the United States.

Our work in the school kept us busy, but we also found time for missionary effort. Our Bible studies in Chicago were along the lines of personal work; we were taught to use the Bible as a guide-book to show men and women the way to salvation.

We had dispensary practice at the Training School, the boys going to the Workingmen's Home for an hour each evening and some of the girls helping Miss Emmel in her Rescue Home work.

Friday evening was "Medical Students' Night" at the Life Boat Mission, to which place most of the class would go after class prayer-meeting to assist in the services.

Sunday mornings some went to Harrison St. police station to conduct services, while in the afternoon others assisted at a large mission Sunday School at the Tyng Mission on Archer Ave.

The above is taken from the actual work of the class. It was not an exceptional class, but followed in the footsteps of its predecessors.

This spring on my return to Chicago I was glad to see A. M. M. C. students continuing the good work, especially at the Workingmen's Home, Life Boat Mission, and Rescue Home.

Dr. A. C. Selmon, now a missionary doing a great work in Honan, China, entered the school when I did. He also had taken his freshman year in another college, and many times we exchanged experiences which we had had in the other schools, and often tried to show the students the advantages the A. M. M. C. offered over the other colleges; but I believe one must experience them in order to realize what they are.

narrow him down to some little method of theirs, that he must act through such and such channels, in such and such ways.

Here, my dear friends, is the secret of the weakness of our churches today—taught false systems, particularly as these false systems have their strength in our churches, and people have been studying them for a lifetime under Christian ministers. Here is the explanation of all the lamentable ignorance of the things of God in pulpit and in pew. Here, in this lack of knowledge of the work of the Spirit is the cause of the prevailing coldness. This explains why missions languish, and the heathen in the Sudan, and in India and in China when they cry for bread receive a stone. Be very clear about this, and know that even as when our Lord was on earth, it may be said today of people at large, sad though the words are—let me repeat these words of John the Baptist, "In the midst of you standeth One whom ye know not,"—a person definite and real, as real as our Lord himself, though unseen, a comforter, a guide, a teacher, the power of the church, the great Life Giver. See what our Lord says of him in John's gospel. Only run through it yourself. Chapters 1, 3, 7 and 14-16. And then see how like a flood he comes in, acording to our Lord's promise in the Acts,—spoken of some fifty odd times, about as many times in the one book alone as in all the gospels. Recognize Him and his work, and He will be in you the power of Christ, living again on earth, and working his will through you.

I charge you, therefore, that you go forth to your work in Christian patience, and in the power of the Spirit of God.

* * *

PRESENTATION OF DIPLOMAS.

[Address by the President of the A. M. M. C., J. H. Kellogg, M. D., at the graduating exercises, June 18, 1906.]

"By their fruits ye shall know them" is a principle which applies to medical colleges and all institutions of learning, as well as to men and to trees. The American Medical Missionary College comes to-night for the eighth time bringing its fruits, and I am sure I am expressing the feeling of all my colleagues of the faculty who sit upon this platform and all those who are here, when I say that we feel in our hearts to-night a just pride in bringing these fruits. The members of the class of 1906 have endeared themselves very greatly to the teachers with whom they have come in daily contact in the class room by their loyalty, by their faithfulness in their work, by the scientific spirit they have shown, and especially by their Christian bearing and their unfailing courtesy as Christian men and

WEST HALL, A. M. M. C. DORMITORY.

women. The class has some special characteristics. A large number of the class—a larger number of the members than usual, are men and women of mature years, who have already borne the responsibilities of life, and who have, at a later period in their lives than is usual, taken up this course of study, which requires an extraordinary amount of hard work, and a long period of close mental application. It is only a deep conviction of duty that could lead men and women to turn aside from professions which they had already chosen and followed for some years, to enter upon a new profession. And I may say that the faculty have during these four years been looking forward with a great deal of interest, thinking, what shall the harvest be when this class comes to fruitage. And now as they have made the preparation in the school, and are going out into the world, I am sure that their future will be followed with great interest.

The number of men and women who have devoted themselves to medical missionary work is small, astonishingly small, when one thinks of the very great need in the world. The number sent out from this country each year into the missionary field is scarcely half a dozen. A well known medical missionary told me two years ago that the American Medical Missionary College sends out more medical missionaries every year than all the missionary societies and all the other medical schools in the United States. So if this class shall go out as missionaries, and remain missionaries, the work of these four years will mean much for the world. So this is, as Dr. Kelly said in the beginning of his remarks, a momentous occasion. It means something for you; and I trust it means a great deal for the world.

I have already stated the number of graduates composing this class is twenty-two. I will read the names: Tell Berggren, William Everett Bliss, Daniel Delos Comstock, Grace Anna DiuGuid, William Colby Dunscombe, Robert George Edib, Virgil Luther Fisher, Horatio Norman Greaves, Charles Avery Hansen, Charles Wesley Heald, Lena Leota Holland, Roxette Landis, August Harold Larson, Lewis Adolphus Lavanture, Henry Ritter, Wells Allen Ruble, George Runck, Minnie Ethelyn Staines, Lena Kellogg Sadler, William Samuel Sadler, Louie Ethelyn Vandervoort, Horace Joseph Williams.

In the days of Hippocrates, the father of medicine, who practised medicine several centuries before the beginning of the Christian era, the custom was introduced which required every physician who received instruction in medicine and was admitted to the profession to take a very solemn oath, which has been since known as the Hippocratean Oath. We do not ask these graduates to take the Hippocratean Oath, but in order that this audience may know what these young men and women pledge their lives to, I will ask them to stand while I read in their presence and yours this missionary physician's pledge:

"Realizing the serious nature of the duties, and the grave character of the responsibilities of the missionary physician, and especially appreciating the solemn obligations of the missionary physician, I hereby solemnly pledge myself, by the help of God, faithfully to perform

the duties of my calling, sacredly to regard its obligations and responsibilities, to keep inviolate the professional confidences which may be reposed in me by those under my care, and to labor earnestly and truly for the relief of human suffering and the amelioration of human woe, and especially for the moral and physical uplifting of those of my fellow mortals who may be in need of my assistance, wherever duty may call me to labor."

I ask of all you who are willing to take this pledge here in the presence of this large audience, and of the faculty, your teachers, to raise your hands. I am glad to see that every hand is raised.

Representing the Board of Trustees of the American Medical Missionary College, and the Faculty of this College, and by the authority of the State of Illinois, it now becomes my very pleasant duty to confer upon each of these whose names I have read, the degree of Doctor of Medicine, of which thes diplomas which I now present to you are the tokens.

[The members of the class stood upon the platform in the presence of the great audience while Dr. Kellogg addressed them and then presented to each a diploma conferring the degree of doctor of medicine. The benediction by Rev F. E. Taber brought the exercises to a close.]

* * *

THE AMERICAN MEDICAL MISSIONARY COLLEGE.

WE wish to be understood as using the above title in this instance with a special emphasis upon the word *missionary,* for it is this particular feature of the College into which it is the purpose of this article to inquire.

It is in this feature that the College is unique among other medical schools, and its claims to have a distinct mission, or in fact any kind of a mission, or plausible reason for being in existence at all, rests upon its maintenance of that feature of its profession. We are all aware that the term *missionary* refers necessarily to something of a very practical nature, if it really means anything at all. In the first place, it means work. It means unselfish devotion to the interests of others. It means work for the helping and uplifting of mankind. In short, it means walking in the footsteps of Him who "went about doing good, for God was with him." Nobody can devote his life to such a purpose except God be with him, and the best definition of missionary work is, "doing good."

It is perfectly evident that no one can do good by simply calling himself a missionary. Nor can he be a missionary by simply talking about it. That is a calling that is not in word or in tongue, but in deed and in truth. It is therefore a comparatively easy matter to test the validity of the name "missionary" by whomsoever it may be borne. "By their fruits shall ye know them."

There may be danger of misjudging this matter unless we have correct ideas of what constitutes true missionary work. It has a wider signification than going to what are called heathen lands to preach. That is one branch of missionary work, but it also embraces the work that is done for the good of others in our own lands, in our own neighborhoods, in our own families.

The call of duty to one is to go, while another may be commanded to stay. Some are wanted at home to care for aged or infirm loved ones. Some are called to labor for the poor and the outcasts, while others are led to the mansions of the wealthy. The true missionary is one who hears and obeys the call of duty as it comes to him from above. A spirit of true consecration, a willingness to be led, and an earnest seeking to know what the Master would have us do, will secure to any of us the guidance from above that will bring him to the place where the Lord of the vineyard wants him to labor.

But here is a school that says to the world that it is a missionary school. Is it? How shall we know?—By its fruits. These are seen in the students who are from year to year graduated from it and sent forth to the world.

In applying this test we shall not expect that everyone who is sent forth from its halls will be equally imbued with the spirit of the principles of the school. Some will succeed and some will fail in living up to the instruction they have received. No school in the world can show a different record from that. So then, we purpose in this place to give the names of those who have been graduated from the A. M. M. C. and to indicate the line of work they have chosen to follow, and their location, as nearly as we are able to do from the latest reports at hand. As we are not in active communication with all these the list which follows only claims to give the best knowledge we have.

CLASS OF 1899. (The First Class.)

T. J. Allen, Supt. Sanitarium, Tacoma, Wash.

Lillian Boyer, medical missionary work, Missouri.

Alice J. Conway, present location unknown.

I. A. Dunlap, medical instructor in Walla Walla College and Supt. of Sanitarium.

S. P. S. Edwards, Supt. of Sanitarium in Moline, Ill., and Med. Sec. for the Lake Union Conference.

Paul Ellwanger, deceased.

J. W. Erkenbeck, in Mexico.

J. E. Froom, Supt. of Portland Sanitarium.

W. L. Gardner, medical missionary in Salt Lake City.

Mrs. W. L. Gardner, medical missionary in Salt Lake City.

H. A. Habenicht, Supt. of Sanitarium, Des Moines, Iowa.

Emma Mae Hall (Mrs. H. A. Habenicht), with her husband.

Otis M. Hayward, until recently at the head of the medical work in the South, now in private medical missionary work in Alabama.

Eveline Helman, in private practise in California.

Maria S. Loughborough (Mrs. S. P. S. Edwards), lady physician in Moline Sanitarium.

J. F. Morse, Battle Creek Sanitarium and A. M. M. C. faculties.

Frank J. Otis, Supt. of Sanitarium, Chicago.

L. J. Otis, Supt. of Sanitarium, Grand Rapids, Mich., Med. Sec. for West Mich. Conference.

Louise Patterson, present location unknown.

C. O. Prince, instructor in S. Lancaster Academy and Supt. of Sanitarium.

W. R. Simmons, Supt. of North Western Sanitarium, Port Townsend, Wash.

A. Q. Shryock, Supt. of Sanitarium, Seattle, Wash.

Carrie A. Staines, Battle Creek Sanitarium staff.

Amelia A. Zipf (Mrs. Tucker), located in New Mexico.

CLASS OF 1900.

Nettie F. Armstrong (Mrs. P. M. Keller), medical missionary work in New Zealand.

Clara L. Beckner (Mrs. Elmer F. Otis), practising with her husband at Lake George, N. Y.

Anna M. Bennett (Mrs. C. P. Farnsworth), practising with her husband in Madison Sanitarium.

E. L. Eggleston, Battle Creek Sanitarium and A. M. M. C. faculties.

Lillian B. Eshleman (Mrs. P. T. Magan), Nashville Agricultural and Normal College.

C. P. Farnsworth, Supt. of Sanitarium, Madison, Wis., member of Wis. Conference Committee.

H. B. Farnsworth, practising in Missoula, Mont.

D. E. Garvin, practising in Empire, Colo.

A. W. George, medical missionary at Constantinople.

Sarah E. Kirby (Mrs. Gibson), Dayton, Wash.

Lydia E. Kynett (Mrs. R. W. Parmele), medical instructor in Union College.

S. A. Lockwood, medical missionary in Japan.

Elsie M. Martinson, medical missionary in Tennessee.

E. F. Otis, Supt. of Sanitarium at Lake George, N. Y.

Emma A. Perrine, medical missionary in Japan.

Maui Pomare, medical officer for the New Zealand Government to the Maoris.

R. O. Ross in California.

J. D. Shively, Supt. of Colorado Sanitarium.

Myrtle E. Spencer (Mrs. S. A. Lockwood), medical missionary in Japan.

Jean A. Vernier, Supt. of Sanitarium in Detroit, Mich., Supt. of Med. Dept. of East Michigan Conference.

Julia White, Loma Linda Sanitarium (Cal.) medical staff.

Frederick G. Dryden, in Yorkville, Ill.

C. T. Ferguson, whereabouts unknown.

R. H. Harris, Battle Creek Sanitarium and A. M. M. C. faculties.

Amy L. Hawke, present location unknown.

A. J. Hetherington, medical missionary to Honduras, later Supt. of Phoenix, Arizona, Sanitarium.

Lyra E. Hunt (Mrs. W. S. George), Nebraska Sanitarium faculty.

Carrie M. Johnson, present location unknown.

THE CHICAGO DISPENSARY.

W. T. THORNTON, M. D.

M. M. Aug. 1906

OUR new dispensary is situated in one of Chicago's most densely populated districts. For the past five years it has been located on Halsted street, about a block from where it is located at present. We are one-half block west of Halsted street on 35th Place, just a nice distance from Halsted street, having all the advantages of this most extensively traveled street in Chicago, and yet are out of its noise and dirt. Our present location is by far the best we have ever had in Chicago in many ways.

We are five blocks from the main entrance to "Packing Town" which every one has heard so much about of late, and a large part of our patronage is made up of people working in the stockyards. Just west of us there was a large open tract of land about two miles long and one wide. During the past two years this has been occupied by many large manufacturing plants so the population has very materially increased in this district, making it one of the greatest centers for laboring men in the city. Our dispensary being practically the only one in this district, a great field is open before us. The people are mostly laborers, and among these we have several distinct classes. There is the well-to-do class that own their homes or have good homes, and are comfortable. Another class that have been in good circumstances, but through misfortune or sickness, usually of the husband, have been reduced to want, and are often in very needy circumstances. Many a case have we known where the father being unable to work, the wife and mother must care for the children and the father by washing or scrubbing.

Then there is the reckless drinking class that are always out of money, have very poor homes, many of them very filthy, or in other words, the typical slum class of the city. There are all grades between these three classes. In our dispensary work we have all these classes.

Much has been done by the city and various charity organizations to improve the social condition of this district. The Board of Health has compelled property owners to remove many of the most unsanitary buildings and do not allow inside rooms without ventilation placed in new buildings.

Our work is very interesting and we try to give them the complete gospel of health and salvation when possible. The "drink habit" is the greatest curse of this district. Saloons are on almost every corner, and often there are several between corners. It is an interesting fact that now and then we find men that have grown up among these saloons and never tasted whiskey or beer, but it is a sad fact that they are very few.

With poor, unhygienic surroundings, poor food, and plenty of bad whiskey and beer, we find almost every disease here to which the flesh is heir. Tuberculosis is very common, so much so as to attract the attention of medical journals. A great many cases of tuberculosis coming to us have worked indoors in some of the great slaughter houses.

Nothing so excites a worker's sympathy as the sick children, and fully one-third of all our patients are sick children. Among the poorer classes the sufferings of these little ones will never be known, and to be appreciated one must work among them. A large amount of sickness among these children could be easily prevented if they could only have proper care. Last year we treated over six thousand patients in the dispensary. In our new place with more room, increased apparatus, and better facilities, we hope this number will be much increased. Our new building is well adapted to this work. The treatment rooms are located in the basement, and are well lighted and airy. Every one that has seen them has pronounced them very good, indeed. The walls and floor are of solid cement, and are easily kept clean by simply turning on the hose.

On the first floor are to be found a fine clinic room, 18x20 feet, with six large windows, laboratory, emergency room, electric and phototherapy rooms, and examination rooms. On the second floor is operating room, ward, laboratory, and small rooms for patients and helpers. There is also a large attic that could easily be fitted up with several small rooms for students.

We all feel that the procuring of these new facilities is a decided step in advance for our Medical College work and we are well pleased with its prospects.

We have a place that can be so equipped that our students can have every advantage along the lines of rational treatment of disease that can be given them anywhere, and we can do much better work for our cases. Many cases which we have been unable to treat in our old quarters can now be cared for properly, and with our work more centralized in one place it is hoped to bring students and patients more closely into contact with each other and by that means do more effective work for our Master in giving to this district the complete gospel of health and salvation. We can certainly find no better field to work for both soul and body, or a more needy field.

THE CHICAGO A. M. M. C. DISPENSARY.

At another time a man came back few days after he had been before the class and said that he came back to thank us for what we had done for him. I soon learned that it was not the advice nor the treatment he especially had in mind, but the fact that we had prayed for him.

We are often asked, "What do you do in your work?" We try to give the people the complete gospel, care for their bodies and their souls, and we give away many thousands of garments every year which are sent us by friends of the work. In caring for their bodies we try to do all that any Christian physician should do for the sick, and in all our work to remember that our patients are not for us to simply learn from, or to practise upon, but are souls for whom Christ died.

* * *

THE AMERICAN MEDICAL MISSIONARY COLLEGE—ITS ORIGIN AND DEVELOPMENT.

J. H. KELLOGG, M. D.

EARLY in the spring of 1893, when preparations were being made for the opening of the Quarter Centennial celebration of the Great World's Fair in Chicago, the writer and his associates, connected with the Medical Missionary and the Battle Creek Sanitarium, were very much impressed with the idea that a medical mission should be opened in Chicago. Many plans were considered, but the way seemed hedged up.

THE BEGINNING OF MEDICAL MISSIONARY WORK IN CHICAGO.

About this time a circumstance occurred which opened the way. The daughter of a wealthy banker of Chicago had been a patient at the Battle Creek Sanitarium. The case was one which required a serious surgical operation. The patient was persuaded by her friends to return to Chicago to have the operation performed by a prominent Chicago surgeon. Her parents insisted upon her having a sanitarium nurse to care for her. The operation was performed, but in spite of the best care which could be given in her home, the patient died. In her last moments she exacted from her parents the promise that they would employ and maintain a Battle Creek Sanitarium nurse to work among the poor of Chicago as a visiting nurse. A letter from the gentleman soon after the death of his daughter related these facts, and as soon as possible a nurse was sent to Chicago to take up the work and was assigned to duty in the very center of the city, in the very heart of the slum district in fact, a region in which no nurse had ventured.

This was the beginning. The writer soon began to make visits to Chicago to inspect the work of the nurse and to study the situation with reference to enlarging the work by connecting other nurses with it. After a few months Sister Louise Burkhart, an unusually capable, well-trained nurse, was connected with the work, and later other nurses were added.

About the time of the opening of the World's Fair, a basement room was hired at thirty dollars a month and fitted up for a laundry and bathrooms. Here Doctors Rand and Kress, then medical students, began their work as medical missionaries, and labored faithfully during the summer of 1893. The work prospered wonderfully under the conscientious and faithful labors of these able workers. The writer spent every Sunday in the city in the fall and established a Sunday noon meeting and penny dinners. Many thousands were fed and not a few were through these means led to abandon their evil habits, and through the Lord's great mercy some of these remain steadfast to this day. Among these are Brother Tom Mackey, who is now a well known and most successful evangelist, and dear old Uncle Joe, who labored earnestly for the upbuilding and maintenance of the work during several years, and is now in his old age an inmate of a Soldiers' Home where he is daily doing noble work for the Master.

During the same summer the Branch Sanitarium was opened in Chicago in the building formerly occupied by the Chicago Missionary Training School. The work grew rapidly and developed until more room was needed. Large unoccupied buildings were leased at a nominal sum and were quickly filled with workers and needy persons of various classes requiring assistance for soul and body.

The next year the Life Boat Mission was started and has been uninterruptedly and successfully in operation ever since. This was the beginning of the medical missionary work in Chicago.

A short time prior to the starting of this Chicago work, the stockholders of the Battle Creek Sanitarium at the request of the writer had authorized the management to use five thousand dollars annually in the encouragement of medical education. A considerable number of young men and women had been assisted by the funds thus supplied, and the number gradually increased until more than a dozen were attending different medical schools, their expenses being paid from the fund referred to. As the interest in medical missionary work increased, the number of applications from young men and women who were anxious to enter upon medical study grew until it was evident that the Board would be unable to supply the funds necessary to pay the tuition and other expenses of the great number who desired to enter upon medical studies. It was evident that these young people must be provided for by less expensive means.

Another fact became equally apparent, namely that the instruction received at the very best medical schools in the country was not sufficient to prepare physicians to enter upon sanitarium work intelligently and successfully. Practically no instruction was at that time given in any medical school in the United States in the use of the measures of treatment which were chiefly relied upon in the treatment of the sick at the Battle Creek Sanitarium. The consequence was that

it was necessary to institute supplementary classes of instruction, but even this was not sufficient to prepare the young physicians to enter upon their work after graduation. Postgraduate classes were needed, and the result was the organization of regular classes for medical study to supplement the work of the medical schools from which the students received their diplomas.

Still another fact became apparent, namely the importance of giving to the students an opportunity to pursue their studies under more favorable religious influences than those which are to be found in the ordinary medical schools, and also to give them an opportunity for acquiring a knowledge of missionary principles and methods while pursuing their medical studies.

These several considerations led to a careful study of the situation with reference to the possibility of opening up a regularly organized medical college. After careful consideration the plan was found to be feasible, and the college was regularly incorporated in Chicago, July 3, 1895. Many great and apparently insuperable obstacles presented themselves, but in various and providential ways these were overcome and the work was finally organized; and the school has not only held its sessions successfully up to the present time, but has made from year to year marked advancement in its educational advantages and facilities. The school has acquired excellent standing and recognition everywhere through the exceedingly excellent manner in which the students have acquitted themselves in State Board examinations.

All told, the A. M. M. C. has sent out into the world more than one hundred and fifty well trained men and women whose influence for good cannot be estimated in dollars or represented in words. These physicians are not only doctors in the fullest medical sense, but they are ministers to the souls as well as to the bodies of men and women. They are indeed ministers in the fullest and truest sense, not simply doctors, or even preachers, but real ministers.

One thing which has been most unexpected and at the same time most grateful to the Board and Faculty of the A. M. M. C. has been the kindly attitude of the medical profession and of other medical colleges to the work of this college. It was hardly to be hoped that the profession would so soon and so fully grasp the aim and purposes of the promotors of this school as to secure to it the cordial recognition which has been accorded it by medical men, medical colleges, and medical associations. In fact, the A. M. M. C. has not only secured this recognition, but also the co-operation of eminent members of the profession, even leading professors and teachers of special subjects in other medical schools, who have given their services either gratuitously or for small compensation as didactic and clinical teachers in the school. The faithful work of these men and their loyalty to the school and especially their patience and courtesy in dealing with students and patients has been a favor so great and so unexpected that all could not regard it otherwise than providential.

There have been many most remarkable and unmistakable providences in the history of the school, of which we may briefly mention a few. The gift of $40,000.00 by the Wessel Brothers which formed the nucleus of the College property in Chicago.

The gift of a valuable library by an aged physician.

The gift of $5,000 in cash.

The gift of property valued at $10,000.

The gift of $20,000 or more by friends of the school, which made it possible to secure the college buildings in Battle Creek.

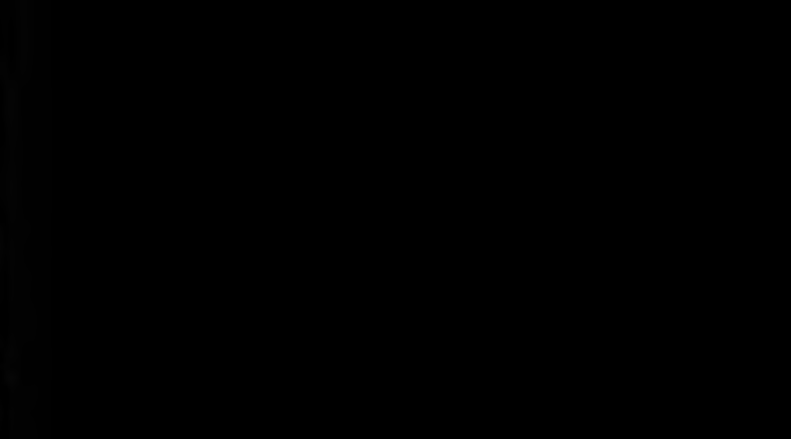
The providential opportunity to obtain a splendid building for dispensary, laboratory, settlement and clinical purposes in the vicinity of Halstead street, Chicago, and gifts rendering possible the equipping of the same.

Contributions establishing a number of free scholarships for the education of foreign medical missionaries.

The A. M. M. C. has sent its students out into all parts of the earth, equipped with knowledge and training which qualifies for the greatest possible helpfulness to their fellow men. The Board of Trustees and the Faculty of the school are doing their utmost to maintain this school as a nursery of missionaries from which shall annually go out a score or more of men and women prepared as no others to fulfill the injunction of the great Teacher to his disciples to "preach the gospel, and to heal the sick."

The expenses for board and tuition are extremely low, as is fitting and necessary for such a school. Most students who desire so to do may be afforded an opportunity to work their way either in part, or wholly. There is always remunerative work to be done in the great Battle Creek Sanitarium located just across the road from the Battle Creek department of the school, so that students have an exceptional chance to obtain a practical knowledge of disease and methods of treatment, while at the same time earning their expenses. This is one of the unique features of the school which is not elsewhere duplicated.

Especially remunerative employment is offered, to those who desire, for the vacation period, by which many students are able to earn enough to pay their entire expenses for the year during the vacation months of summer. Thus an energetic young man may enter the school with barely sufficient to pay his first



BULGARIAN STUDENTS IN A. M. M. C. OR IN PREPARATORY SCHOOL.

year's tuition and work his way through the entire course. Many have done this and without injury to their health or detriment to their studies, a thing which would not be possible but for the fact that the time employed in labor is often of very great practical value as an opportunity for clinical observation and experience.

Through the recent establishment of free scholarships provision is made for worthy young men and women who, having the necessary preparation, are anxious to enter upon a course of preparation for work in some foreign mission field to which they have consecrated their lives.

The attendance at the school has averaged between eighty and one hundred students. The provision for instruction is ample to accommodate this number and with the addition of the large new dispensary building, one of the finest in Chicago, even a larger number can be accommodated.

Application should be made early to Dr. Elmer Eggleston, Secretary, or Dr. R. H. Harris, Register, Battle Creek, Mich.

J. H. KELLOGG, Pres., A. M. M. C.

PROSPECTUS.

IT seems expedient at the present juncture to change the form of the MEDICAL MISSIONARY and to issue it weekly. For fourteen years it has borne faithful witness to right principles of living in matters physical, moral, and spiritual. Its work is not yet done, and there is a demand for greater activity than goes with a monthly.

The spirit and aim of the paper will remain unchanged. It is the purpose of the publishers to fill it each week with living, stirring truth for these times. Its mission will still be evangelical and educational. Medical missionary work will continue to be the leading interest of the journal. Schism or division shall be no part of the work of this journal, which will be conducted in the spirit of Christian unity, and charity, and liberty.

The price of the MEDICAL MISSIONARY is now placed at **60 cents per year;** to foreign countries, **85 cents.** The capacity of the paper for the year will be doubled, and its value in every way increased.

Liberal discounts will be given to Tract Societies and others who send in subscriptions.

Trial Subscriptions for Three Months for Fifteen Cents.
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THE MEDICAL MISSIONARY, Battle Creek, Michigan

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WITH BOOK OF TRAVELS, "BY LAND AND SEA"	*1.40*

Address, MEDICAL MISSIONARY, - - Battle Creek, Michigan

The American Medical Missionary College

THE American Medical Missionary College offers exceptional advantages to those who desire to prepare themselves for work in medical missionary fields at home or abroad. Women are received on equal terms with men. Opportunity is afforded by this school for obtaining a thorough practical medical education, and especially for attaining proficiency in the use of physiologic remedies. Those whose means are limited are given opportunity to pay a considerable part of their expenses by caring for the sick, and thus gain the double advantage of financial aid and practical medical experience. This school is non-sectarian in

The Battle Creek Sanitarium School of Health and Household Economics

To those interested in the principles of health and hygiene, a new field of study and work is open. ¶ The Sanitarium management are offering three new courses of study — ***a one year course for Matrons and Housekeepers, a two years' course for School of Health Teachers and Lecturers, and a ten weeks' summer course in Practical Home Studies.*** ¶ Students who desire to work for a part or all of their expenses may do so : : : : : : : :

FOR FURTHER INFORMATION WRITE TO

THE BATTLE CREEK SANITARIUM SCHOOL OF HEALTH AND HOUSEHOLD ECONOMICS, Battle Creek, Mich.

FROM NEW ZEALAND.

M. M. Aug. 14/07

THERE are four physicians in New Zealand who received all or the greater portion of their medical training in the American Medical Missionary College. Drs. P. M. and Nettie Armstrong Keller have located in Auckland, where they are having a good practise and exerting an increasing interest in behalf of true principles. Dr. Keller's mother is with them and shares in the pardonable family pride that centers in a beautiful young baby danghter.

Dr. A. H. Ross and his wife, *nee* Bertha Gibson, has succeeded to Dr. Keller's country practise at Hikurangi, some distance north from Auckland. They, too, are doing very well as we learn. Miss Gibson had some trying experiences we believe in reaching the goal of her affection, but all abstacles were overcome and her marriage with Dr. Ross was duly celebrated at the residence of Dr. Keller in Auckland. We, and many others, certainly wish them every joy and much success.

Dr. John S. Reekie and his wife, formerly Edith Hare, a graduate nurse of this school, are located at the town named Pukekohe, (a Maorie, not an English name), where they, too, are having a busy life in alleviating the sufferings of the people. For a time they were connected with the sanitarium at Christchurch. Besides these there are two nurses in New Zealand, Misses Jones and Harker, from whom we have not heard recently who are students from the Sanitarium training-school, and who have done good, faithful work since returning to that country; so that the North Island of New Zealand has several good representatives of the truths and principles for which this institution stands. May they be true and faithful and be enabled to do a great work for the benefit of suffering humanity.

M. M. Aug 14/06

Last week we presented a picture of three young men who recently came to this country from Bulgaria. As is indicated in their appearance, they are gentlemen of culture and refinement, being teachers, and have come to prepare themselves for philanthropic work among their own countrymen. Two of them have fully decided to take the medical course, and one has already taken his first year. The third is at present undecided between a medical and literary course of study. They were unbelievers when they came to us and knew scarcely a word of the English language. They are now developing an earnest Christian experience and are moved with considerations of love to God and their fellow men.

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The twelfth annual session of the American Medical Missionary College opens Sept. 18, 1906.

For catalogue and other information, address the Secretary,

E. L. Eggleston, M. D.

BATTLE CREEK, MICH.

From Dr. Marsh. M. M. Oct. 24/06

Dr. Lucinda A. Marsh, who recently went from South Lancaster, Mass., to India as a missionary, writes of her experience as follows:—

"It is scarcely more than a month since we arrived at Bombay, but such has been the blessing of the Lord that we already have a little institution started with one inside patient as well as treatments and calls more than sufficient to pay our rent from the very first. Rent is very high here and landlords are not disposed to be accommodating in the least, so whatever improvements were necessary, we have had to put in at our own expense as well as renovating the place. Notwithstanding our heavy expenses, we feel assured of success in our enterprise as our opportunities so far have been among the very best class of Europeans in Bombay and the wealthy Parsees.

"I feel very incompetent of myself to stand in the profession practicing these principles of rational therapeutics, but the Lord knows all about that, and I believe there is power in him and in the principles to open the way.

"There is a great demand here for competent trained nurses. Both of our nurses have been out almost ever since they came, so that it has been difficult to administer our own treatments. We feel anxious to train nurses, but on account of the instability of the people it will be difficult to get proper material with which to work.

"Wishing God's blessing upon you all,"

LUCINDA A. MARSH,
Mereweather, Rd., Apollo Bunder,
Bombay, India.

M. M. Aug. 21/06

MISS ISBELL'S WORK IN THE SOUTH.

FROM time to time we are pleased to hear of the faithful work of Dr. Lottie Isbell in behalf of the colored people of the South. Some time since she located in Birmingham, Alabama, and is now engaged in building up an institution for the treatment of the colored people there. Of course the beginning is upon a small scale as Dr. Isbell stands almost entirely alone in her work. From the first there have been evidences of success attending this effort, and thinking the undertaking more than she could well manage alone she called the church to her assistance and a board of management was chosen. It is now expected to change the location of the treatment rooms about the first of October, and then to install a good equipment for the treatment of the sick.

Dr. Isbell writes that she has numerous opportunities to appear on the lecture platform, and that several influential people are ready to co-operate with her in establishing and carrying on the medical missionary work in the South. A great work remains to be done for the colored race in elevating and emancipating them from forms of thraldom that are even more enslaving and degrading than was the old form of slavery. And it must remain largely with the members of their own race to be the benefactors and leaders of the people. The educating and saving of the colored people of the South is a most worthy work, and we have for those who are engaged in it the utmost sympathy. It occurs to us that some of our readers may feel an interest in Dr. Isbell's work that would lead them to correspond with her and ascertain what they can do to be of assistance to a most worthy Christian laborer, such as we well know her to be. Should this be the case, letters addressed to Lottie C. Isbell, M. D., 1506 Third Ave. N., Birmingham, Ala.

As noticed heretofore in these columns, Dr. Lottie Isbell, of Birmingham, Alabama, is establishing a sanitarium and treatment rooms for the benefit of the colored people. She is almost single-handed in this undertaking and is struggling with great difficulties. Her friends at the Sanitarium are endeavoring to assist her in this laudable undertaking by procuring some of the necessary apparatus. The time to assist the work in behalf of the colored race is fully come and will evidently soon be in the past. This is an important and critical time and there is, perhaps, no more needy and urgent field in the world than that within our own borders. We appeal to our readers and to all who have the interests of this cause at heart, to assist in this worthy work. Any donations, no matter how small, will be gratefully received and we shall take pleasure in forwarding the same to Dr. Isbell and we earnestly invite the co-operation of all such in this undertaking. Donations may be sent to the MEDICAL MISSIONARY and we shall take pleasure in forwarding the same and receipts or acknowledgments will be made of all subscriptions.

M. M. Oct. 1/06

M. M. Aug. 21/06

BIRMINGHAM, ALA.

DR. LOTTIE C. ISBELL, of Birmingham Alabama, writes concerning the progress that is being made in the establishment of a Sanitarium for colored people in that city. They have recently opened their work in the new location, an illustration of which is presented with this article. She writes as follows:—

"We have been very much hindered since moving to our present location on account of the delay in getting our plumbing done, though we have not been idle, as the patients are coming in for treatment daily. The Lord is wonderfully blessing the work that is done, although our facilities have been very meagre indeed.

"The spray outfit, therapeutic electric light, and vibrator, so kindly donated, have arrived in good shape. They will certainly make a great addition to our outfit and far exceed all my expectations. Of course, one could not help being pleased and grateful for such kindnesses.

"We are all of good courage notwithstanding the fact that society in this part of the country is quite unsettled. Troubles due to race prejudice are daily growing more frequent and bitter, and the leading men of both races are looking forward to a terrible conflict in the near future, and are preparing for it. To us who can read the signs of the times, this is but another omen of the time of trouble that is before us and we are more sure than ever that the Saviour is soon coming. I trust we shall be ready to stand at his appearing."