A History of the

ALAMEDA COUNTY MEDICAL ASSOCIATION

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By MILTON HENRY SHUTES, M.D.

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The Alameda County Medical Association

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MRS. FRANK R. MAKINSON

1946

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All sources of information in this book, other than those indicated in the text, can be found in a small collection now in the Library of the ACMA; for the hospital sketches acknowledgment is made to Miss Martha A. Chickering for material found in her thesis, *Public Provision for Care of the Indigent Sick in Alameda County, California 1852-1935;* to Mrs. J. P. H. Dunn, to the surviving Creedon sisters, to the Sisters of Charity of Providence, to Miss Alta Bates, to Mr. Alfred E. Maffly (Superintendent Berkeley Hospital), to Mrs. William Harold Oliver, to Dr. John Louis Lohse. and to Miss Florence Klaeser.

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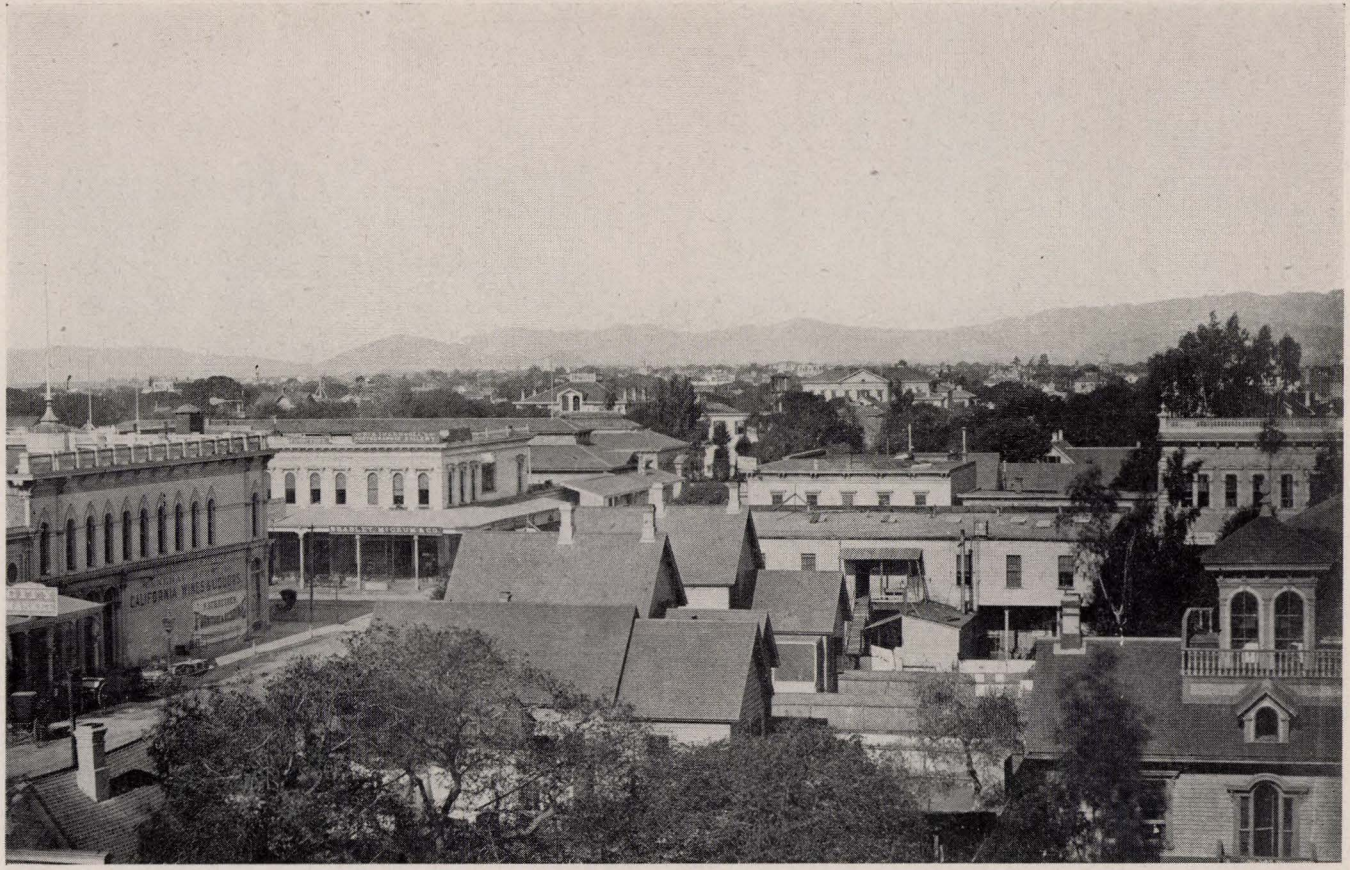

OAKLAND 1869
(Broadway at Twelfth Street, looking southwest from Thirteenth and Franklin Streets)
—Courtesy of Albert E. Norman.

DEDICATED

TO

FRANK ROSCOE MAKINSON, M. D.

(1885-1943)

"The Past is Prologue"

A medical society that is seventy-five years old and older can profit by stirring up its past into a prologue for the years ahead.

The origins of this book appeared in 1931, fostered by Dr. Frank R. Makinson. His extra-professional time, however, came to be claimed increasingly by county and state association work. Some months after his untimely summons in 1943, the present writer was appointed to collect his material and complete the project. The research and the writing proved to be a pleasurable labor, and has exacted no more time than is generally given to extra-professional activities.

It is not intended to be complete, for completeness can be wearisome. Yet, because personalities make history, it is therein faultily incomplete. The names of many men professionally prominent do not appear and some only in the appended list of officers; and in the dusty archives there lie buried the names of still more of the salt of the medical earth who worked humbly, uprightly and proficiently, and are mourned by their fellows and long remembered by their patients. The names that do present themselves appear as they were found in the minutes of the association and in collateral sources, or as by chance they add to the continuity.

This eighty-five-year-old story of a county medical association is published for its members in the hope of quickening individual and collective interest in its honorable past and throughout its enduring present.

Piedmont, 1946

—M. H. Shutes

ILLUSTRATIONS

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Chapter One

PRECURSOR

It was in the gathering storm clouds of the long heralded War Between the States that a group of physicians organized the first Alameda County Medical Association.

In 1853 the great county of Alameda was created at the expense of Contra Costa and Santa Clara Counties. The rich hinterland of the Eastbay, divided into large Spanish-Mexican land grants and ranches, was inexorably acquired by land hungry Americans.

The first American to practice the art of healing in this region was John Marsh, graduate of Harvard University, but of no medical school. He was an adventurous pioneer of the 'forties who became a land and cattle baron partly by profits from the shrewd use of cathartics, poultices and liniments; and he was largely responsible for starting the stream of westward migration that became the flood of the Gold Rush.

The doctor of medicine claimed as the first physician in the new county was Dr. J. M. Selfridge (Jefferson Medical College, 1852) who located in Washington Township not far from Mission San Jose, in March of 1853. In 1866 he relocated in Oakland as a homeopath.[1] However, there was the thirty-year-old, tuberculous Dr. Benjamin Franklin Buchnell (Dartmouth 1846) at Alvarado as early as 1851. Speaking Spanish, he practised medicine among the native Californians, and also was postmaster, justice of the peace, and manager of a ferry service to San Fran-

[1]Dr. Selfridge went east in 1855 to marry and to take a postgraduate course in Philadelphia. He returned in 1857 to the southern part of the county where its population was then the greatest.

cisco. He went to drier, warmer Marysville for two years and then relocated at sunny Mission San Jose. After a few more years of medical practice and waning strength he died in 1860. His widow, inspired by him, went east to study medicine, later to return to Oakland to become a member of this association.

In September of 1853 came Dr. W. J. Wentworth (medical school unknown) who located at what became thriving San Antonio, now East Twelfth Street and Fourteenth Avenue, Oakland. Here the Peralta family had their shipping corral, and here, in 1853, the first ferry service to San Francisco began, connecting with stages to all points south as far as San Jose and the quicksilver mines of New Almaden, and to Stockton and the goldfields. Dr. Wentworth built a beautiful home, still standing in the memory of living persons. He died in 1869. The first physician in Oakland was a Dr. Davis, no medical school graduate, but very popular until he died in 1860.

With the certain influx of medical charlatans came the graduates of drug stores and doctors' offices, as well as of medical schools. As some of all these types located in growing Alameda County it was inevitable that the medical school graduates should desire to differentiate themselves by forming a fellowship of medical peers.

On a Saturday afternoon, August 18, 1860, a group of seven physicians met in the new Alameda County Court House in San Leandro.[1] They were Doctors Haile, Gibbons, Green, Randall, Coleman, Newcomb, and Worthington. Dr. Haile of Alameda was made temporary chairman and Dr. Worthington of Oakland temporary secretary. Dr. Haile appointed Doctors Newcomb, Gibbons and Worthington a committee to "draft a constitution and by-laws for the government and regulation of the prospective association, and to report same at the next meeting." There was some discussion regarding credentials and qualifications for membership followed by a motion that the next meeting be held at the same place on the following week, August 25, for the pur-

[1]The county seat had recently been removed from Alvarado to San Leandro, the newer center of the county population which was 8926.

pose of forming a permanent organization and the examination of credentials. All other proper physicians in the county were to be so informed.

On August 25 the same seven met, with the exception of Dr. Coleman of San Leandro and with the addition of Doctors Paine and Deal. The minutes of these meetings have been preserved by the widow of its secretary, Mrs. R. Worthington of New York City, who sent the originals to Dr. Pauline S. Nusbaumer of Oakland in 1907. The following is a verbatim copy:[1]

MINUTE BOOK OF ALAMEDA COUNTY MEDICAL SOCIETY
AUGUST 1860

San Leandro, Alameda Co., Aug. 18, 1860

At a meeting of physicians of Alameda County held at the court house, San Leandro, Aug. 18th, at 2 o'clock P.M. there were present, Drs. Haile, H. Gibbons, Green, Randall, Coleman, Newcomb, and Worthington. On motion of Dr. Gibbons, Dr. Haile of Alameda was chosen temporary chairman, and Dr. Worthington of Oakland temporary Secretary of the Meeting. Dr. Newcomb then moved "that we now proceed to organize a County Medical Society," which motion was carried. Dr. Newcomb moved that a committee of three be appointed by the chair, who shall draft a constitution and by-laws for the government and regulation of this society, and report same at next meeting—carried. Whereupon the chair appointed Doctors Newcomb, Gibbons and Worthington as said committee. After some discussion in regard to credentials and qualifications for membership, Gibbons moved "that when we adjourn we do so to meet at this place for the purpose of permanent organization and examination of credentials for membership"—carried. Gibbons then moved that when we adjourn we do so to meet at this place on Saturday next (25th) at 2 P.M.—carried. Randall moved that secretary be requested to inform other physicians of the county not now present of the next meeting—carried. The chairman then declared this meeting adjourned.

R. WORTHINGTON, *Secretary pro tem.*

San Leandro, Alameda Co., Aug. 25, 1860

At an adjourned meeting of the physicians of Alameda County held at court house, San Leandro, there were present, Doctors Gibbons, Newcomb, Green, Paine, Randall, Deal and Worthington. Dr. Haile, (chairman of previous meeting,) being absent, on motion, Dr. H. Gibbons took the chair. Minutes of previous meeting read and approved. Newcomb moved that the secty be appointed a com-

[1]Originals in archives of the Alameda County Medical Association.

mittee of one to examine credentials—motion lost. Paine moved, "We resolve ourselves into committee of whole for purpose of examining credentials for membership—carried. At this point Dr. Haile —previous chairman—entered and took his seat. Dr. Paine then presented his diploma from Pennsylvania University, dated A.D. 1830—which, on motion, was accepted and credentials approved. Dr. Newcomb offered diploma from Castleton Med. College dated, A.D. 1833—credentials approved. Dr. Green presented diploma from N. Y. Med. College dated, A.D. 1860—credentials approved. Dr. Haile presented diploma from Middleton College dated A.D. 1824—credentials approved. Dr. Deal presented diploma from University Maryland dated, A.D. 1846—credentials approved. Dr. H. Gibbons presented credentials Pensi. University, dated, A.D. 1829—credentials approved. Dr. Randall presented credentials from Shurtlief College, Alton, Illinois, dated A.D. 1841—credentials approved. Dr. Worthington presented diploma from University of N. Y. dated A.D. 1851 —credentials approved.

The committee on constitution and by-laws being called upon to report, Dr. Newcomb (chairman of committee) reported the following constitution and by-laws, which, on motion, were adopted article by article.

CONSTITUTION OF ALAMEDA CO. MED. SOCIETY

Art. 1st. This association shall be known as "The Alameda Co. Medical Society."

" 2nd. This society shall consist of graduates and licentiates of regular medical schools in the United States and Europe.

" 3rd. The officers of this society shall be elected annually by ballot, and a majority of the members present shall be necessary for a choice. Said officers shall continue in power until their successors shall be duly elected.

" 4th. The officers shall be a president, vice-president, and secretary (who shall also perform the duties of treasurer) and three censors, whose duties shall be such as usually pertain to their respective offices.

" 5th. No additional members shall be received into this society after its organization, excepting upon the recommendation of the censors, who shall be empowered to examine [the] credentials of all applicants for membership.

" 6th. Upon complaint of any member of ungentlemanly or unprofessional conduct against another member the president shall appoint a committee of investigation, which shall report the evidence to the society for their farther action, and if the accusation be sustained and it be deemed of sufficient importance, this society by a two-thirds vote may expel the accused from membership.

" 7th. Such regulations as may be enacted in the by-laws from time to time shall have binding force upon all the members of this society.

" 8th. This constitution may be altered or amended at any annual meeting of this society by a two thirds vote of all the members present.

BY-LAWS

Art. 1st. The president of this society shall deliver or cause to be delivered an address on some subject connected with the science of medicine or surgery at the close of his term of office.

" 2nd. The rates of charges for medical services shall be such as may be established by this society, subject however to a just discrimination in favor of the poor and unfortunate.

" 3rd. In their intercourse with each other, the members of this society will be governed by the Code of Ethics adopted by The American Medical Association.

" 4th. The annual meetings of this society shall be held at San Leandro, on the first Wednesday of October of each year, and the president shall have power to call a meeting at any other time and place that he may deem proper and necessary.

" 5th. Stated meetings shall also be held on the first Wednesday of January, April and July. In the absence of other business the president shall call on the members severally for communications on medical topics.

" 6th. The annual fee of membership of this society shall be three dollars.

" 7th. The meetings of this society shall be governed by the following order of business. 1st calling of roll. 2nd reading minutes of last meeting. 3rd report of censors and election of new members. 4th election of officers at the annual meetings. 5th reports of committees. 6th unfinished business. 7th new business. 8th written communications. 9th oral communications and discussions. 10th adjournment.

" 8th. Alterations and amendments to these by-laws may be made at any stated meeting of the society, by a majority vote of the members present.

MINUTES

Following the adoption of the above constitution and by-laws, Dr. Deal moved that we now proceed to elect officers to hold until next annual meeting—carried. And on balloting the following officers were elected. President, Dr. Henry Gibbons, Vice-Prest., Dr. Haile, Secty. and Treasurer, Dr. Worthington. Censors, Doctors Newcomb, Deal and Paine.

On motion the following gents. were appointed a committee to draft a Fee Bill, to be presented at next meeting, viz, Doctors Paine, Newcomb and Gibbons.

President then declared the meeting adjourned to the first Wednesday in October next.

ROBT. WORTHINGTON, *Secty.*[1]

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[1]The secretary's minutes are followed exactly except for the double s, instead of the then correct use of fs.

No record thus far has been found of that scheduled meeting for early in October of 1860 or of any subsequent one, for the probable good reason that none was held. Political rather than professional discord had sapped the vitality of this infant organization; within one month of that October date, Abraham Lincoln was elected President of a nation so dissentious that even in isolated California, the four-year-old California State Medical Association was completely disrupted for over ten years under the impact of violently divided political sympathies. Its last functioning president, the valiant Dr. Isaac Rowell of San Francisco, for example, was a very ardent and audible abolitionist. During its last meeting in 1859, on the claim that Dr. R. Beverly Cole had insulted the women of the South, the gallant co-founder of the society, Dr. T. M. Logan, and all the other Southerners, walked out.[1] In fact, all medical societies throughout the state collapsed, so the causes were more than apathy, cliques, and fee schedules. In the atmosphere of those very belligerent national and state compaigns of slavery Democrats, anti-slavery Democrats, and "Black Republicans," the prognosis for life was not favorable for a new-born society of individualists such as are doctors of medicine.

There may have been one more conjectural cause. Though the population of the county had increased from nothing to practically 9000, and Oakland seemed to have had some hopeful prospect of stealing away the state capitol from Sacramento, the Washoe Silver Rush to Nevada was at its height, and, in the words of the *Centennial Year Book of Alameda County* (1876), "many prominent citizens, as well as many who were not prominent, caught the contagion of the time and went off to the new mining region."

Either war or silver may account for there being no further records of young Doctors Green[2] and Randall (present at both

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[1] *California and Western Medicine*, p. 9, July, 1945.

[2] There was a Dr. Thomas Green in Oakland and a Dr. David L. Deal in Chico, California, in the 'seventies.

meetings, and Doctors Paine and Deal (present at the second meeting.) Even their initials cannot be found. Dr. W. Newcomb, politically minded, was chairman of the Alameda County Union Party convention in the 1864 presidential campaign for Lincoln, and had his finger in Republican politics of Oakland at least as late as 1875. He also was a member of the teaching staff of the Oakland Seminary for girls. President Grant appointed him a member of a commission to visit San Domingo, a subject on which he became a frequent lecturer. He was an enthusiastic conchologist. About 1876, he presented his collection of shells to Johns Hopkins University, when he accepted a professorial chair in that new institution. Dr. Robert Worthington, nine years out of the University of New York, returned to New York City. Dr. Charles L. Coleman[1] was a successful doctor of San Leandro and father of the identical twins, Dr. Charles Coleman (1880-1939) of Oakland and Dr. George Coleman (1880-1942) of San Leandro. The original Coleman homestead still stands in Victorian dignity on the northwest corner of Washington and Saunders Streets, San Leandro. Dr. Coleman, senior, was present only at the initial meeting of August 18, 1860, but joined the present permanent Association on May 1, 1871.

Dr. Henry Haile, out of Vermont, came to California in 1853 and located in Alameda (office in San Leandro). He died at his residence there in June of 1869. During these 16 years he was a very active man in medical and civic affairs. In 1855 he was a member of the first Board of Supervisors of Alameda County. The following year the board became interested in the indigent sick of the county and appointed Dr. Haile and a Mr. Eagar as a committee to report on a suitable location for their care. During 1858 Dr. Haile served as chairman of a county convention of school trustees of the various townships. This convention resolved, among other things, "that the value of the property of the county should pay for the education of the rising generation." In 1863

[1]Purchased the practice of aging Dr. Haile.

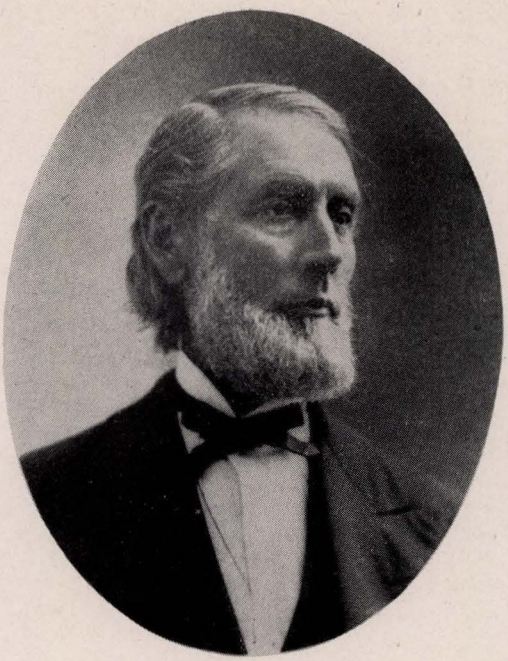
Dr. Haile attracted some attention by his crop of hops in Alameda, and later that year the county supervisors farmed out the care of the indigent sick to Dr. Haile by contract at $7.25 per patient per week. Six years later he died "an old and useful citizen."

The Dr. Gibbons of this first medical association was the famous Dr. Henry Gibbons, senior, of San Francisco, Quaker son of a Quaker physician of Wilmington, Delaware, and at this writing himself the father of three more generations of Doctors Gibbons. He acquired premedical learning from his father, graduated in medicine at the University of Pennsylvania, practised for about sixteen years in Wilmington followed by five more in Philadelphia, where he was "Professor of Institutes and Practice in the Philadelphia College of Medicine." In spite of this success he followed the hard trail across the Isthmus and reached San Francisco on August 20, 1850. He was forty-two years old. "Since climate was so intimately concerned with the etiology of disease, and botany with therapeutics, he quickly set to work in the virgin field of California meteorology, and aided by his brother, Dr. William P. Gibbons (1812-1897) of Alameda, studied the native plants."

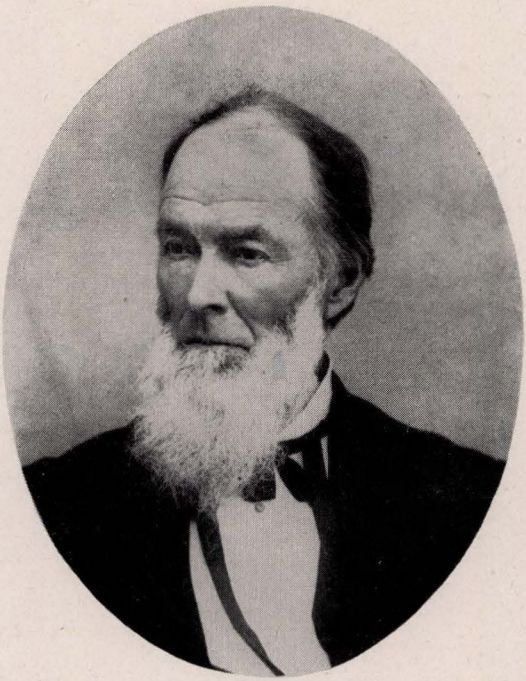
The San Francisco story of Dr. Gibbons is recorded in medical histories of the state, but the preceding, and the paragraph that follows, is the first on his Eastbay activities.

During the later 'fifties he purchased a farm at the southeast end of Alameda peninsula (now an island) and had an office in East Oakland (Brooklyn Township).[1] On July 24, 1858, he and twenty-five others met in San Leandro and organized a county agricultural society of which he was made secretary. The society proposed to hold (and did) semi-annual horticultural and livestock fairs, and all its offices were to be filled by "practiced farmers." In the meanwhile, one of his brothers, Dr. Edward Gibbons of Oakland, ran unsuccessfully for assemblyman on the "Republican-Broderickite fusion ticket." However, during the exciting political year of 1859 in California which culminated in the tragic

[1]Diary of Dr. Selfridge.



Dr. Henry Gibbons, Sr.



Dr. Wm. P. Gibbons.

duel between Chief Justice Terry and U. S. Senator Broderick, and the collapse of the state medical society, Dr. Henry Gibbons was elected county Superintendent of Schools[1] on the Republican ticket. With his talent for organization he characteristically went to work on a county teachers' association, of which he became secretary automatically. Thus he was the guiding spirit in at least three organizations of Alameda County that today are large and important. There are glimpses of Dr. Henry Gibbons which indicate he remained a frequent and notable visitor to the Eastbay. On August 25, 1865, for example, he was one of five that made congratulatory speeches in Hayward on completion of the first railroad through the county—the San Francisco and Alameda Railroad and Ferry Line. On the first of May of that year, less than two weeks after the great San Francisco pageant-funeral for the late Abraham Lincoln, he superintended a "May Day Pic-nic" in Alameda which netted $1,404.87 for the Sanitary Commission, the "Red Cross" of the Civil War. Six thousand people from Alameda and San Francisco counties were present. The Queen of the May was the daughter of the famous traveler and western writer, J. Ross Browne, resident of Oakland. Dr. Gibbons wrote for the occasion an ode to the Queen.[2]

Dr. Henry Gibbons was a man of great mental and physical energy. As editor of the *Pacific Medical and Surgical Journal* he made it one of the best of its kind in America. In addition to his private practice, his teaching, and his zealous work in medical organization, he was an active participant in a number of extra-medical things of importance. Throughout all of it, until his death in 1884, he remained "the urbane gentleman and scholar." There can be little doubt that he was the first to suggest this early medical society for Alameda County.

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[1]In the *Oakland City Directory* of 1869 the name of Doctors Henry Gibbons and William Newcomb are listed as members of the teaching staff of the flourishing Oakland Seminary, established March 1, 1860, in the home of J. Ross Browne at 5th and Jackson Streets. The president of this seminary for girls was the well-known Californian, Rev. Samuel H. Willey. The school had its own building in 1864. It was reopened in 1890 at 528 Eleventh Street at Clay.

[2]Centennial Year Book of Alameda County (1876).

Chapter Two

INTERIM

The years 1861-1862 were full of war, army camps and floods. The winter between was wet and cold with snow and ice, and all the doctors were busy. Even in August there was thunder and lightning with the rain. In 1863 there were three thousand army recruits from the county and many more volunteers fighting in the East. Yet the decade of the 1860's was one of railroad construction and of the beginning of colleges, churches, newspapers, banks, and general growth. The first literary society, the Lincoln Lyceum for young men, was founded by Lowel J. Hardy, Jr. in 1865. There was also horse-thievery, murdering, and the first legal execution.

A brother of Dr. Henry Gibbons, Dr. Edward Gibbons, lived on the corner of Ninth and Washington Streets, Oakland. He was on the City Council in 1856, City Clerk in 1857 to 1861, then Mayor of Oakland, and after that, on the Council again until 1865. He practiced little, if any, medicine but joined this society on November 3, 1873.

In 1866 the first gas-light works was built. In 1867 the Alameda Park Hotel, purchased by a Dr. Tucker was converted into a private insane asylum, and the corner-stone of the State Deaf, Dumb, and Blind Asylum "near Oakland" was laid. Dr. L. G. Yates, dentist, and Dr. Charles H. Allen,[1] both of Centerville, "discovered a tusk of the elephant species" in the Stockton Canyon, and Dr. William P. Gibbons[2] made himself the first of the red-

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[1]Joined the ACMA in December 1871.
[2]Joined the ACMA in May 1871.

woods' saviors. Before the Academy of Natural Sciences in San Francisco he read an illustrated paper on the subject of a proposed park and botanical garden in that one-half by two miles of the once glorious redwoods back of Oakland. In this eloquent plea, Dr. Gibbons said the trees "were fast becoming the prey of reckless squatters . . . a trifling sum would secure title and possession . . . of a botanical garden. It is not a question of local, but of general interest." What remains of Dr. Gibbons' "luxuriant nursery of the primeval forests" in Redwood Canyon is now Redwood Park, a shaded canyon of riding stables and occasional stumps of what might have been.

During this same year the Democratic Party made an unsuccessful effort to return to power. Dr. Clinton Cushing was a delegate to its state convention and Dr. Lambert went no farther that year than the nomination for coroner. Dr. Samuel Merritt, more interested in business than in medicine, was busy accumulating his fortune, but not too busy to be elected Mayor of Oakland in 1868-1869, when he built a new City Hall on Fourteenth Street facing Washington Street, created a Board of Health consisting of Dr. T. H. Pinkerton (first City Health Officer) and Doctors A. Verhave, P. W. Fonda, and I. E. Nicholson. He also fenced off and then purchased the first city park sites, organized the Oakland Library Association, and created a great furore by out-dealing the redoubtable Henry C. Carpenter, and possibly the city also, in the tide-land and Western Pacific Railroad controversy of 1868.

In June of 1868 the first white native son of Oakland graduated from the University of California, then California College—Dr. Joseph Oakland Hirschfelder, (M.D., Leipzig, Germany) Professor of Clinical Medicine at Cooper College. On October 21 at 8 A.M. the earth about the Bay went into a severe quake and did a great amount of damage. It killed seven in San Francisco and a deputy clerk in the Sheriff's office in the new brick County Court House in San Leandro, where the first medical society met.

The year 1869 was an eventful one. Smallpox came over from San Francisco. The Gibbons family was now sufficiently prominent for the *Centennial Book of Alameda County* to record the

death of eighty-four year old Rebecca Gibbons, "mother of Dr. Henry Gibbons of San Francisco, Dr. William P. Gibbons of Alameda, Dr. Edward Gibbons of Oakland, and Rodman Gibbons of San Francisco." Incidentally, Dr. W. P. Gibbons was elected Public Administrator that year. Lake Chabot was constructed for a water supply for Oakland, the energetic Dr. Samuel Merritt was mayor of Oakland, and the booming little city had three newspapers. On September 23, 1869, the newly organized University of California began class work with forty registered students in the buildings of the College of California (opened in Oakland in 1860). Dr. John LeConte, acting president, Dr. Joseph LeConte and Dr. Ezra S. Carr, full professors, joined the new medical association a few months later.

The big excitement was the completion of the Pacific Railroad (Union and Central Pacific Railroads) from Omaha to Oakland, an achievement that California had dreamed of since 1850. On October 29 the last rail was laid, over which the first locomotive passed into Oakland. On November 8 the first overland train arrived and on the 14th the new road received a baptism in blood. In a telescopic collision near San Leandro fourteen people were killed and twenty-five seriously injured. Doctors Coleman, Fox, and Pratt were the first physicians to arrive. Then came Doctors Malcolm, Van Wyck, Trenor, and the homeopath, Nicholson. The injured were removed to Dr. Eustace Trenor's private hospital in Alameda, where came Doctors William Gibbons, Verhave, Cushing, Holmes, and Baldwin; also the prominent homeopath, Dr. J. M. Selfridge and two other homeopaths, Doctors Coxhead and D. C. Porter. Doctors Jonathan Letterman[1] and J. M. McNulty hurried over from San Francisco.

The year 1869 was a year of events and prosperity, but the central matter of importance for this history was the creation in October of the second, and permanent, medical society.

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[1]Dr. Letterman was medical director of the Army of the Potomac from 1861 to 1864. He died in San Francisco in 1872. The Letterman General Hospital, built in 1898, was named for him.

W. {or C.} S. Haile, M.D., in full professional dress, Alameda (circa 1865)

FEE TABLE

OF THE

OAKLAND MEDICAL ASSOCIATION,

Adopted October 25th, 1869.

MISCELLANEOUS.

For each visit in city during day-time..... $3 00 to $5 00

For each visit in city during night-time..... $5 00

Additional patients in same family, each..... $2 00

In cases, also, of extraordinary service, detention or attendance, or when for any reason the case is one of unusual importance or responsibility, the charge should be proportionally increased; and the duty to make such increased charge shall be obligatory upon the practitioner.

For a visit in consultation..... $5 00 to $10 00

In case of a consultation, the attending physician may also charge the usual consultation fee, instead of the fee for an ordinary visit. For each subsequent visit in consultation where the attendance is continuous, the fee may be from..... $3 00 to $5 00

For visits over three miles from town, $1 to $2 per mile additional.

For advice at house or office, from..... $2 50 to $10 00

For an opinion involving a question of law in which the physician may be subpœnaed..... $50 00 to $100 00

In case of an opinion involving special study or experimental investigation, such additional service shall be charged in proportion to the time and labor expended.

For a Post-mortem examination made at the request of the friends of deceased, from..... $25 00 to $50 00

For a Post-mortem in a case of legal investigation..... $100 00 to $500 00

Vaccination..... $2 50

Gonorrhœa or Syphilis, fee in advance..... $25 00 to $50 00

OBSTETRICAL.

Ordinary Midwifery cases..... $25 00 to $50 00

Delivery by turning or forceps, additional..... $25 00 to 50 00

Delivery by embryotomy..... $100 00 to $300 00

Attendance after ninth day, ordinary rates.

For attendance during tedious labor, it shall be considered obligatory to make such additional charges as in the discretion of the practitioner the extraordinary detention or service shall seem to demand.

In cases of labor when the child is born, but not the placenta, before the arrival of the accoucheur, the whole fee is to be charged.

When both child and placenta are born before the arrival of the accoucheur, half or the whole fee may be charged according to circumstances. This rule is intended to apply to cases in which the services of the accoucheur have been previously engaged, and in which the delay does not arise from his fault.

If in any case of labor a second physician is called in consultation, and subsequently detained in joint attendance, both attending and consulting physician shall be entitled to the full fee for attendance, and also to such additional amount as may be deemed proper, in view of the importance of the case, the unseasonableness of the hour, or any extraordinary detention or service rendered.

SURGERY.

For capital operations, or operations of unusual difficulty, such as amputation of large limbs; ligation of large arteries; operations for stone in the bladder; removal of breasts, or of other large tumors; operations for cataract; for strangulated hernia; for vesicovaginal fistula; for cleft palate, etc. $100 00 to $500 00 according to the importance of the case and pecuniary circumstances of the patient.

For operations of secondary importance or difficulty, such as operations for fistula in ano; for harelip; for the radical cure of hydrocele; tapping and injection of ovarian cysts; reduction of dislocations or fractures of large bones; tracheotomy; removing of small tumors, not involving important organs; passing catheter in cases of obstructions; ligature of arteries of secondary size, etc..... $25 00 to $100 00

For minor operations, such as excision of tonsils, removal of nasal polypi, tapping for hydrocele, or for ascites; opening abscesses, catheterism, stitching recent wounds, cupping, passing setons, amputation of fingers or toes, excision of wens, etc...$5 00 to $25 00.

After surgical operations, all subsequent visits shall be charged as in ordinary cases of attendance.

Any case not specified in the foregoing fee table, to be charged at rates as nearly corresponding to the list of prices as practicable.

Nothing here stated shall be construed to prevent any physician or surgeon from charging more than the usual rates in any case where a due regard for equity may seem to demand such an increase in price.

Stillman Holmes, M. D.,
T. H. Pinkerton, M. D.,
Clinton Cushing, M. D.,
A. Verhave, M. D.,

D. M. Baldwin, M. D.,
J. C. Van Wyck, M. D.,
A. M. Malcolm, M. D.,
Thos. C. Hanson, M. D

TERMINI PRINTERS.

Broadside mailed to the profession.

Chapter Three

INCUBATION

By the end of the decade California had enjoyed a post-war cooling-off period and an abundant increase in immigration. The population of Alameda County, approximately 25,000, was centering in and about Oakland. Here, as elsewhere, the "enemies" of medicine were the irregulars—the ever-blatant charlatan, the free-lance eclectic, and the prospering representative of a very irritative school of medical thought, the homeopath,[1] and even more annoying was the technically regular but ignorant physician. Men from acceptable medical schools consequently sought again the distinction and stimulation of organization.

Late in October of 1869, (the 25th) therefore, eight good regulars met in the office of Dr. Clinton Cushing "according to previous arrangement" and neatly organized themselves into a medical society. They called it the Oakland Medical Association, elected officers, and adopted the rules of the American Medical Association and a unanimously acceptable and elastic fee schedule.

The following is an exact transcript of the minutes of that first meeting, and on the opposite page is a copy of the Fee Table that was sent to "each of the regular Physicians of Alameda County outside of Oakland":

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[1]Homeopathy was based on the old principle of Similia Similibus Curantur borrowed from Hippocrates and Paracelsus, and introduced in 1796 by Christian Frederick Samuel Hahnemann (1755-1843)—on the principle that many diseases are cured by drugs which produce a condition similar to the disease, or "like treating like," as opposed to the so-called "allopathic principle of Contraria Contraris Curantur," wherein, for example, a sedative is given in excited states and stimulants in depressed states. Another fundamental doctrine was the belief that the effect of a drug became more powerful the smaller the dosage. Mother tinctures, for instance, were diluted six to twelve times and even to one hundred thousand or a million times. Eclectics believed in using that which they elected to be the best in allopathy (or regular medicine) and in homeopathy.

Oakland, October 25, 1869.

According to previous arrangement, Drs. Van Wyck, Pinkerton, Baldwin, Verhave, Holmes, Malcolm, Hanson and Cushing met at Dr. Cushing's office and proceeded to organize a Medical Society.

Dr. Holmes was chosen President of the meeting, and Dr. Cushing Secretary. It was moved and carried that the Society adopt for its government the rules and regulations of the American Medical Association, and that the Society should be called the Oakland Medical Association.

On motion, it was voted that the officers consist of a President, Vice President, Treasurer, Secretary, and a Board of Censors consisting of three, said officers to be elected annually, and to hold office for one year.

It was moved and carried that the Association meet on the first monday of each month.

The following gentlemen were then unanimously elected as officers for the ensuing year,—

President,	Dr. Pinkerton
Vice President,	Dr. Baldwin
Secretary,	Dr. Holmes
Treasurer,	Dr. Cushing
Censors,	Drs. Pinkerton, Baldwin and Holmes

It was moved and carried that the initiation fee be fixed at five dollars, after which the following Fee Table was unanimously adopted by the Association.

The Association then adjourned, to meet at Doctor Pinkerton's office on Monday, November 1, at 7½ P.M.

S. Holmes, *Secretary.*

Original members:

Thomas H. Pinkerton, Harvard Medical School, 1859.

Clinton Cushing, Rush Medical College, Ill., 1865.

John C. Van Wyck, Univ. of Maryland, 1848.

Stillman Holmes,[1] Univ. of Pennsylvania, 1853.

Thos. C. Hanson,[2] Toland Medical College, Calif., 1867.

Adrian Verhave, Committee of Medical Examiners of Amsterdam, New Holland, 1850.

David M. Baldwin, Dartmouth College, N. H., 1844.

A. M. Malcolm,[3] school unknown.

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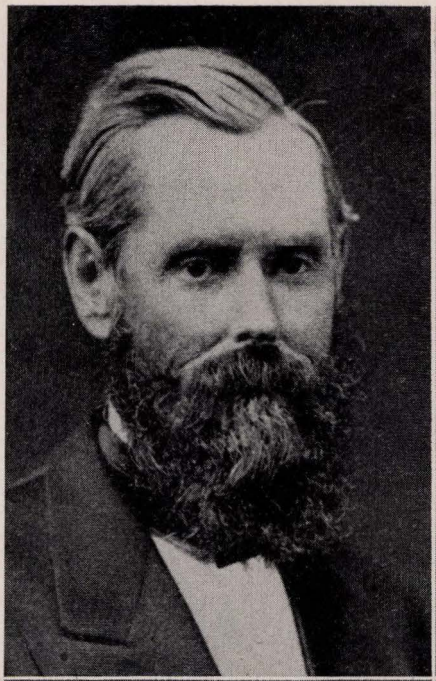
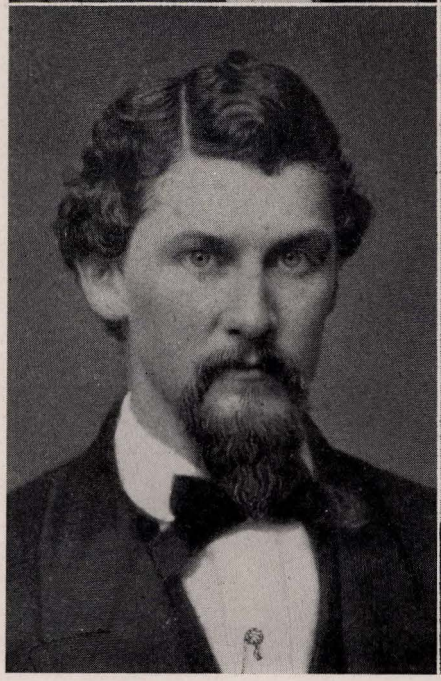
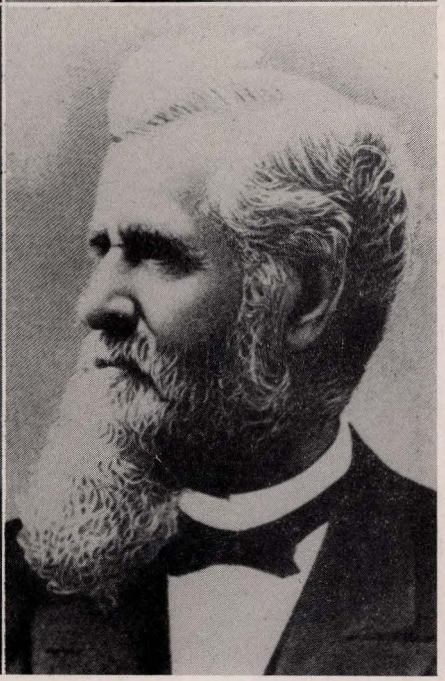
[1]Moved to Santa Cruz during the latter half of 1870.
[2]Moved to Winnemucca, Nevada, in 1878.
[3]Moved to San Francisco early in 1870.







Dr. David M. Baldwin.
Dr. John C. Van Wyck.

Dr. Clinton Cushing.
Dr. Thomas H. Pinkerton.

The second meeting was held on the evening of November 1, 1869, in the office of the president, Dr. Thomas H. Pinkerton, who exhibited a case of *Chronic Eczema* which "had existed in the family for three generations and several of the patient's brothers and sisters were affected with the same disease." Dr. Clinton Cushing described his "uniform success" with small increasing doses of arsenic. The next and second subject for discussion in the history of the Association was the *Influence of Climate on Pulmonary Diseases.* Several members expressed their opinion "founded on their experiences and observations, that there is no climate in the world more favorable to diseases of this nature than that of California." Syphilis was noted as the subject for discussion at the next meeting. A quorum of the little group was not present on December 6, so the meeting was postponed until the 13th, when it was held in the office of the secretary, Dr. Stillman Holmes. Dr. Cushing read a paper on *Syphilis* and expressed views in accordance with those held by Ricard, Bumstead and others, regarding the distinction between "indurated" and "soft chancre." Doctors Pinkerton and Van Wyck participated in the discussion. Dr. Cushing presented a case of *Strangulated Hernia.* Cancer was selected as the subject of a paper for the next meeting. The meeting was held on January 3, 1870 in the office of Dr. Cushing. Dr. Ezra S. Carr, LLD,[1] Professor of Agriculture, Chemistry and Horticulture at the University of California was elected an honorary member. The subject of cancer and its disheartening treatment was discussed, and by vote, continued over to the next meeting. By another motion and vote two members were "to be appointed by the chair" at each future meeting to prepare a paper for the ensuing one.

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[1]Dr. Carr was a distinguished man of 51; B.S. degree from the Renasalaer Polytechnic School of Troy, N. Y.; M.D. from Castleton Medical College, Vermont (1842); Professor of Chemistry, Albany Medical College (1853); Professor of Natural Science, New York State Normal School and Chemist to N. Y. State Agricultural Society; Professor of Chemistry and Natural History and of Agricultural Chemistry, University of Wisconsin; for three years Professor of Chemistry, Rush Medical College, Chicago; called to California 1868, appointed Professor of Agriculture, Chemistry, and Horticulture, University of California (1869). Elected State Superintendent of Public Instruction (1875); president of two state medical societies and vice president of the AMA. (Hist. of Alameda County—page 543.)

At the February meeting the famous brothers, Doctors John[1] and Joseph[2] LeConte, of the University of California were elected honorary members. Dr. Holmes reported "a case of Hemorrhage following abortion which was promptly arrested after the failure of other remedies by the injection of a solution of persulphate of iron into the uterus." Dr. Holmes reported "a case of Vesico-vaginal fistula successfully treated by caustics." The discussion of cancer "was then resumed." *Dislocation of the Hip* was selected for the next month.

The meeting of March 7 was a busy one. Doctors Holmes, Cushing and Van Wyck were appointed as a committee to revise the constitution and by-laws of the Association. This is the first mention in the minutes of a constitution and by-laws. Apparently the society used "the rules and regulations of the American Medical Association" for its government as recorded in the foregoing copy of the minutes of the initial meeting of October 1869. These "rules" doubtlessly were found in a little (16 page 8 vo.) booklet, printed in San Francisco in 1867, entitled *Code of Ethics of the American Medical Association, adopted May 1847.* This San Francisco edition of *The Code* announced therein: "In view of the fact there is no organization of the members of the medical profession in California to enforce the observance by its members of its own laws . . . [all medical societies disrupted in the 1860's] . . . this issue of the Code is printed." The issue also made the

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[1]When John LeConte joined the association he was acting President of the new University of California. He came from Georgia, paternally descendant of a French Huguenot family and maternally from a Puritan family; A.M. University of Georgia (1838); M.D. College of Physicians and Surgeons, New York City (1841); Professor of Natural Philosophy and Chemistry, University of Georgia (1846); of Chemistry, College of Physicians and Surgeons, N. Y. (1855); of Physics, University of South Carolina; of Physics and Industrial Mechanics, University of California and acting President, from January 1869 to August 1870 and from March 1875 to June 1876; President from 1876 to 1881.

[2]Joseph LeConte, A.M. University of Georgia (1843); M.D. College of Physicians and Surgeons, N. Y. City (1845); Professor of Natural Sciences, Oglethorpe University, Georgia (1851); of Geology and Natural History, University of Georgia (1852); of Geology and Chemistry, University of South Carolina (1856); of Geology and Natural History and Botany, University of California (1869). The LeConte brothers were chemists in munitions factories of the Confederacy during the Civil War. They came recommended by Agassiz, Henry of the Smithsonian Institute, and Pierce of Harvard.

complaint that "our state is made the paradise of medical impostors."

Finding those "rules and regulations" inadequate, the society began this month to start the business of revisions and amendments. The constitution, amendments and by-laws, as finally adopted on February 6, 1871 and on February 5, 1872, were inscribed on and after page 300 of the first Record Book and signed by each incoming member.

The Association enthusiastically elected to join the San Francisco Medical Society's formal invitation to the "National Medical Association" to hold its 1871 convention in San Francisco. Dr. R. Beverly Cole[1] of San Francisco was made an honorary member. Dr. Pinkerton's proposition that the Association rent the room adjoining his office for its meetings, for which he would pay half the rent, was accepted. Dr. Verhave donated a number of pathological specimens and "a case" for the use of the Association. *Diphtheria* and *Dislocation of the Hip* were discussed.

At the April meeting the revised constitution was adopted. One important revision was the change of the name of the Association from Oakland Medical Association to Alameda County Medical Association. Phthysis was the subject of the evening and heart disease was proposed for Dr. Thomas C. Hanson to work up for the next meeting. But the time of the next meeting (May 2) was consumed by discussion and adoption of the Code of By-Laws (or Ethics). Dr. George E. Sherman, Medical College University of New York (1867), was elected to membership at the June meeting; Dr. Cushing reported "a case of fistulous ulcer of the nose of many years standing"; and Dr. Pinkerton one of tape worm, "its fragments amounting in all to 71 feet in length." Dr. Van Wyck "had never seen a case of lumbricoides in California." Dr. John Coughie was proposed for membership.

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[1]Dr. R. Beverly Cole (1829-1901) M.D., Jefferson Medical College 1849; practiced three years in Philadelphia; came to San Francisco in 1852; was a brilliant personality but resistant to the idea of the bacterial origin of disease; Dean of Toland Medical College; Professor of Obstetrics at University of California Medical School. When he died "a piece of old San Francisco had departed," it was remarked. See interesting description of, in *California Medical Story* by Henry Harris, page 355.

A special meeting of the Association was called for June 14, 1870 for the questionable purpose of preparing a protest against the appointment of Dr. J. M. Selfridge to the Oakland Board of Health. Dr. Selfridge had made himself prominent as a citizen and among his homeopathic colleagues throughout the state. In 1878 he started the Alameda County Homeopathic Society with Dr. Isaac E. Nicholson of Oakland as president. This group helped to establish the first real hospital for private patients in the county —Fabiola Hospital.

Doctors Cole, Pinkerton and Van Wyck reported at the next regular meeting (July 11) that they had sent the following protest to the city council:

> Having learned that your Honorable body, at their last meeting, had appointed an irregular practitioner of medicine as one of the Board of Health; and believing that this act on your part will establish a precedent dangerous to the welfare and interest of this community, and cause, at this time, dissensions among the members of the Board, thereby impairing their usefulness, we, as members of a noble and time honored profession, which has always made the sanitary welfare of communities an object of special care, study and attention; and as citizens, who have the right, apart from the position we occupy as custodians of the public health, do most emphatically protest against your recent appointment, and in the future, of quacks and self-constituted doctors who will seek the position either for its emoluments and benefits, or for partisan purposes. We do earnestly request you to reconsider your action in such appointment, and not inaugurate a principle which may entail such pernicious consequences upon our rapidly growing city.
>
> Signed
>
> J. C. VanWyck, M.D. — G. E. Sherman, M.D.
> T. H. Pinkerton, M.D. — Thomas C. Hanson, M.D.
> C. Cushing, M.D. — D. M. Baldwin, M.D.
> Stillman Holmes, M.D. — John Coughie, M.D.
> A. Verhave, M.D. — R. Beverly Cole, M.D.

In August Dr. Beverly Cole introduced a resolution that "this association cordially approve the proposed plan of organizing the Medical Department of the University of California as a Board for examining candidates and conferring degrees distinct from any institution for teaching; that such a measure would correct the abuses now existing by which medical diplomas are too often granted without merit; and that the University of California by adopting it would confer a great good on the profession, and on

society at large." Dr. LeConte then spoke for a higher standard of medical education and favored the mothering of Toland Medical College by the University of California. After agreement by Dr. Sherman and others, Dr. Cole's resolution was unanimously adopted, signed by the president and secretary of the Association and sent to the Board of Regents of the University. The transfer of Dr. H. H. Toland's gift of the Toland Medical College in San Francisco to the University of California was consummated on March 4, 1873.[1]

Another matter of importance was a letter from Dr. T. M. Logan[2] of Sacramento to Dr. Pinkerton "asking the co-operation of the medical profession in Oakland in the formation of a State Medical Society." The secretary was instructed by resolution to write Dr. Logan "assuring him of our hearty co-operation in the matter, and recommending that a convention be held in San Francisco for the purpose of organizing."

The September meeting was one devoted to strictly medical thought, highlighted by the eloquent Dr. Cole's expansive statement that "aneurism prevails to a greater extent in San Francisco than in any other city in the world."

The October meeting of 1870 was far more important than those present suspected. The present splendid reference library of the Association was begun that evening. Three good men were elected to membership: Dr. Eustace Trenor, A.M., Columbia College, New York, (1856) and M.D., College of Physicians and Surgeons, New York (1860), owner of a private sanitorium for the insane and Professor of Jurisprudence and Mental Disease, Toland Medical College (University of California) (1871); Dr. William Bamford, Medical College, University of Indiana, (1848); and

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[1]*Origin and Development of the University of California,* William Warren Ferrier, 1930.

[2]Dr. Thomas Muldrop Logan (1808-1876) came to California from New Orleans in 1849 (age 41). He organized the California State Board of Health early in 1870 and was co-founder of the California Medical Association in 1856 and of its reorganization in 1870. He was its first president. For his history see *California and Western Medicine,* July 1945.

H. P. Babcock, Medical Department University of Buffalo (1863), past Assistant Surgeon, U. S. Navy, (1865).

At the suggestion of Dr. Babcock a medical library was decided upon for which he offered the first book. Dr. Cushing was made its first curator and librarian. Before closing another motion was approved for a little daylight saving, by amending Article II of the By-Laws to permit stated meetings to begin at 8:00 P.M. from April to October and at 7:30 P.M. from October to April.

The October 17th meeting, one year after organization, was an interesting one. Dr. Cushing reported a case of pelvic abscess which he had the courage to admit he had mistaken for a peritoneal tumor. In the treatment of a carbuncle Dr. Cushing had had success with permanganate of potash, Dr. Babcock with small punctures, and Dr. Pinkerton with mercurial ointment. Dr. Cushing exhibited two types of pessaries "which he had contrived." Doctors Trenor, Cushing, and Sherman (Dr. Pinkerton, as president, was an ex-officio delegate) were appointed delegates to the convention in San Francisco for reorganizing the California State Medical Association. Then the following, interesting, self-explained resolution offered by Dr. Babcock was unanimously adopted and was printed in the form of a broadside, apparently for distribution:

> WHEREAS, Of late repeated and persistent insults have been offered our professional brethren in the U. S. Navy, by the authority of the Navy Department, degrading them in rank and position; lessening by example, the respect due their profession and contracting their sphere of usefulness; and,
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> WHEREAS, In every civilized community throughout the world, save in our Navy, the profession of medicine is considered, at least, equal in dignity and respectability to any other profession; and,
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> WHEREAS, In our service the members of the Medical Staff are selected by competitive examination from among the graduates of medical schools, while the line officers are selected to be educated at the country's expense from among the uneducated boys of the community, by favoritism, by relationship, or as has been lately proven, by purchase; and,
>
> WHEREAS, Rank and command are distinct ideas, having no necessary connection; there being a recognized necessity for *one* commander in all military operations, to whom the other officers are subordinate for the time being; and,

WHEREAS, If physical courage and personal exposure are the only tests of merit, no corps can show, during the late war for example, a larger proportion of killed by the enemy, by fire, by water, or by the more deadly and insidious foe—disease—than the medical officers of the Navy; therefore be it

Resolved, That we consider the stigma to which they have been subjected as applying to the profession at large, and while it is unremoved we consider that no young medical man having a proper regard to his self-respect, can accept an appointment in the medical corps of the Navy and subject himself and his profession to the indignities which the self-constituted and newly born "Aristocracy of the Line" impose.

Resolved, That we view with pain and sympathy the position of the Senior Officers of the Medical Corps, whose long service now renders it impossible for them to resign and commence life anew; and we call upon our Senators and Representatives in Congress to recognize their position as co-equal with the highest in the service, by giving them military rank, such as is justly enjoyed by the Medical Staff of the Army, and by that in the services of each of the civilized nations of the world, together with such increased emoluments and promotions as will recognize their invaluable services to our country, and recompense them for the insults and oppression to which they have most unjustly been subjected.

Resolved, That a copy of these resolutions be sent to each Senator and Representative from this State and that our delegates to the State Medical Society be instructed to bring this subject before that body for its action.

There were two meetings a month in October, November and December, but no election of new officers. Resolutions were already a habit. On November 7, Dr. Babcock presented another to be forwarded to Brigadier General Joseph K. Barnes, Surgeon General, U. S. Army, requesting donation to the Association's library of copies of "the work issued from his office, being parts of the Medical and Surgical History of the Rebellion." The library apparently had an immediate good start, for Dr. Babcock continued with a set of library rules that were adopted, *viz.,* that access to books be restricted to members only; that borrowing be for two weeks only, after which a fine of ten cents a day would be exacted, such fines to be used for library purposes; that all books lost or damaged be paid for by the borrower; that each borrower sign his name, the title of the book, and the borrowing date, in a book to be kept for that purpose; and that the library be kept locked except

for certain specified times. Such a library could not be a very useful one until the Association had grown sufficiently to finance a special room and full time librarian, as it finally did by 1915.

The November meeting "cordially approved the plan of registration of certain diseases" recommended by the State Board of Health and "recommends its adoption by each one of its members." Blanks for the purpose were to be provided by Dr. Thomas M. Logan, the first secretary of the new board. The two December meetings were given up exclusively to medical cases and papers; the impending election of officers was postponed until the next meeting.

That next meeting, held on January 8, 1871, proved to be the last meeting of the first fiscal year of the Association. Action was begun for articles of incorporation. New officers were elected: Dr. Clinton Cushing, president; Dr. Eustice Trenor, vice president; Dr. H. P. Babcock, secretary; and Dr. J. C. Van Wyck, librarian. After much discussion the new president was asked to appoint a committee "to prepare resolutions in regard to the propriety of advertising and vending Hydrate of Chloral by druggists." This was elaborately done at the February meeting by Doctors Babcock, Cushing and Carr.

Thus ended the year of incubation — fourteen months of organization, medical discussion, and of membership growth by the leading medical men of the community. The membership had doubled itself, totalling sixteen. This successful Association of regular practitioners was soon to attract other good men, increasing the momentum that has carried this county medical society to its present numerical and financial strength and its influential force in organizational and scientific medicine.

Chapter Four

'SEVENTIES

The pioneering experiences of this society during the 1870's will always be of particular interest. It was a decade of firsts, of local and statewide fellowship and understanding, a decade of promise for the organized science-art of medicine.

Since this decade was in the horse and buggy era, and Alameda County was one of distances, attendance at meetings was often less than worthwhile. Including the president and secretary there were frequently only eight, or fewer, present. For years the attendance did not exceed fourteen; then it varied from five to twenty-two; at the last regular meeting of the decade there were again only five present. Early in 1871 it was decided that "eight members . . . residing within a radius of five miles from the Oakland City Hall, shall constitute a quorum," and to accommodate more distant members, two meetings a year would be held on a Saturday afternoon. The new secretary, Doctor Herman P. Babcock, (Past Assistant Surgeon U. S. Navy (1865)) began the routine of recording names of members and visitors present. Generally on hand were those hardy naturals, Doctors Pinkerton, Cushing, Van Wyck, Babcock, Sherman,[1] and in spite of their University duties, the LeConte brothers, especially Professor John, who usually was called to the chair in the absence of the president. The unique Dr. R. Beverly Cole, who resided on Middle Street between Peralta and Center Streets and practiced chiefly in San Francisco, came less

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[1]Doctors Cushing and Van Wyck were listed together in the Oakland City Directory of 1871-2 on Broadway between 8th and 9th Streets. Doctor Babcock had his office and residence on N.W. corner 10th and Washington; Doctor Sherman on 11th Street near Broadway.

frequently in 1871 and not at all after he was Dean of Toland Medical College.

Observance of medical ethics among the members of the Association is taken for granted today. In the 'seventies it was a matter of watchful concern and prompt discipline. All members were required to sign both the Constitution and the *Code of Ethics.* Yet the signatures of three of the eight original members are absent from the minutes. Dr. A. M. Malcolm removed almost immediately from the county, but Doctors David M. Baldwin and Adrian Verhave were forced to resign in 1871 because of difficulties involving *The Code*; they were concocting and selling patented medicines. At the March meeting Dr. George E. Sherman wanted all members to agree to patronize "only those apothecaries who do not keep or sell Patent Medicines." The ensuing difference of opinion was crystallized at the next meeting by Dr. Pinkerton, who suggested "the impracticability of enforcing the resolution . . . and its injurious reaction on the Association." Dr. Sherman promptly explained that he intended the members to use their "passive influence" only on the druggists. Dr. Babcock thought that the enforced resignations of Doctors Baldwin and Verhave was sufficient accomplishment for the Association. Unfortunately the society was embarrassed soon after on learning that it had acted merely on a promised resignation of these men and that word had come from the Council of the American Medical Association that it would refuse to seat any delegation from Alameda County at its convention in San Francisco until the two men were formally expelled. Dr. Baldwin, first vice-president of the Association, indignant at the "unwarranted proceeding," and claiming his equal right to make and patent medicines as others had to make and patent surgical instruments, promptly sent in his resignation. At a hurried special meeting the written resignation was accepted with "an expression of regret and lack of personal feeling against Doctor Baldwin." In the *Oakland City Directory* for 1871-2 there appears in large, prominent print the "Announcement" of "D. M. Baldwin, M.D., Office at His Drug Store, No. 4 Broadway Block between 11th and 12th Streets."

By way of digression, there was a clever advertisement found in the same directory of "Dr. Furber's Cordial of Mountain Balm and Oregon Grape, Mt. Shasta, California," in which that producer of medicinal wine quotes from *Ecclesiastes,* 38th chapter, 4th verse: "The Lord hath created medicines out of the Earth: and he that is wise will not abhor them." Did Mary Baker Eddy eye that verse with her mental blind spot when she wrote her *Key to the Scriptures?*

This second *City Directory*[1] was the first to list the Alameda County Medical Association, on Broadway, between 8th and 9th Streets, Oakland.

New members were coming in. At the March meeting those elected were Dr. Willis Bolton, Kemper College, Maryland (1843); Dr. W. R. Fox, Chicago Medical College (now Northwestern University Medical School) (1863); Dr. J. W. Van Zant, College of Physicians and Surgeons, New York (1851); and Dr. R. F. Winchester, Bowdoin College, Maine (1847).

At the April meeting Dr. E. S. Belden, Bellevue College, New York (1867) was admitted but almost immediately resigned, having concluded that, for him, Oakland offered better opportunity in business than in medicine. He was made an honorary member in contrast to the expression of censure for Dr. Winchester, who had moved to Santa Barbara without the courtesy of notifying the Association. At this meeting Dr. William P. Gibbons, University of New York (1845) brother of Dr. Henry Gibbons, Sr., and a resident of Alameda, was proposed by Doctors LeConte and Sherman. Dr. Charles L. Coleman of San Leandro was proposed by Doctors Fox and Van Zant of San Leandro. Both these men were duly elected at the next meeting. Dr. Gibbons was a distinguished doctor and citizen; Dr. Coleman was the one living tie between the 1860 Association and the present permanent one.

On the eve of the Fourth of July a few verbal firecrackers were thrown about the meeting, set off by a dispute as to whether Dr. John W. Van Zant's resignation be formally accepted or whether

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[1]The first *Directory,* compiled and published by B. F. Stillwell, appeared in 1869. There was none for 1870.

he be summarily expelled. He was the third member to make and sell "patented nostrums." Five large pages of minutes were written about him in the Record Book (No. II), but it did not include a ten-inch column of paid advertisement which appeared in the 1858 *Alameda Gazette*: "SURGEON AND PHYSICIAN" in large type followed by his name, repeated eight times in a column, and the following bits of information treated in a similar eye-catching pattern: *"Continues the practice of medicine—In chronic diseases, Sore, weak and inflamed eyes, nervous deafness,—Weakness, Neuralgia, Rheumatism, Impurities of the blood — City Physician of San Francisco in 1852—Office, Foot of Clay Street:"* and the further announcement of the *"Charity Eye and Ear Hospital, and General Dispensary"* also at the foot of Clay Street and to which he was surgeon.[1] That about covered everything until he moved to Alameda County where he apparently tried with faint heart to reach and maintain the professional level of Association members.

The censors, Doctors Van Wyck, Trenor, and Babcock, urged expulsion, but Doctors Joseph LeConte and Cushing were in favor of accepting the resignation. Dr. E. L. Barber wanted expulsion as a necessary precedent, and for the maintenance of the dignity of the Association. A few years later Dr. Barber was himself a defendant before the society. The votes on Dr. Van Zant were seven for acceptance of his resignation and three for expulsion. The censors were deeply incensed. Dr. Babcock moved that his resignation as censor be accepted, but there was no second. In the end it was compromisingly decided that "the Association do not accept the resignation of Dr. Van Zant as contained in his letter." Dr. Van Zant became a converted sinner, at least temporarily, for soon after this he appeared on one of the programs, but eventually lost interest and was dropped for non-payment of dues. He moved to Virginia City, Nevada. In 1878 he was president of the State Medical Society of Nevada.[2]

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[1]From Photostat from the *Alameda Gazette* for November 13, 1858, reproduced in THE BULLETIN OF THE ACMA, MARCH 1946.

[2]Directory of the State Medical Society for 1878 in the Lane Medical Library, Stanford University, which has furnished frequent obscure items of information.

In August "a Black Book was provided for the exclusive use and protection of the members, in which shall be entered the names of those parties who could but do not pay their medical bills." In September a resolution was ordered prepared by Doctors Trenor and John Le Conte to congratulate the faculty of the Harvard University Medical School for a long needed elevation of the standard of medical education.[1] An acknowledgment by the dean was read at the October meeting. In November there was a discussion over the need to assist colleagues of Chicago who had lost heavily in the devastating Chicago fire of 1871.

Early in 1872 the subject of criminal abortion was exercising the members. Action was taken in the form of "a memorial to the Legislature with a draft of an act which it was thought would prevent such practice and punish the guilty." But as with all criminals, the guilty are punished only when caught and convicted. The state medical meeting was expected to convene in Oakland that summer. Since the treasury was overdrawn to the amount of 61 cents, members were asked to subscribe whatever sum "that could be afforded" for entertainment. The official seal of the Association made its debut at the March meeting of '72. Its first inden-

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[1]The first medical degree granted in the American Colonies was conferred not by a college but by a legislature (General Assembly of Rhode Island) in 1663, to Captain John Cranston. The first medical school commencement was held on June 21, 1768 by the Medical School of the College of Philadelphia, (1765) now the University of Pennsylvania. It conferred the English degree of Bachelor of Medicine. The first doctorate in medicine was conferred on Robert Tucker, May 15, 1770, by Kings College, now the College of Physicians and Surgeons of Columbia University. These two medical schools were followed by Harvard Medical School in 1783 and by Dartmouth Medical School in 1798. After the beginning of the 19th century there were established the medical departments of the University of Maryland in 1807, of Yale in 1813, and the University of Cincinnati in 1819. The great Jefferson Medical College was established in 1824.

Until 1875 there was no legal restriction to the practice of medicine. The usual method of acquiring a medical school diploma consisted of a student registering his name with a successful doctor who became his "preceptor" and as such gave practical instruction. His period of registration with the preceptor was three years, during which time he was required to take two courses of four to six months each at his chosen medical college. At the end of his registration period he was given a final oral examination (not too severe) by the college. If he came through he received a diploma from his Alma Mater and its sanction to practice on his fellow beings. Only two schools required a three year course of instruction: Chicago Medical School in 1859 (Northwestern University after 1869) and Harvard Medical College in 1871, when the latter further improved the standard with a graded course of nine months of the year with clinical and laboratory instruction. Not until 1900 did other reputable schools catch up, and it was after the Carnegie Foundation Report of 1910 that radical changes brought medical instruction to its present standard.

ture is found on page 60 of Record Book II. At the same meeting Dr. Edward H. Pardee, father of the distinguished Governor (Dr.) George E. Pardee (a later member), was elected to membership. Dr. Edward Pardee had been the first "eye specialist" in San Francisco, advertising and practicing his "great knowledge and operative skill." Deciding that both claims needed a truer foundation, he entered Rush Medical College and returned in 1867 with a diploma. He was Mayor of Oakland in 1876.

During the year 1872 the society members became very audible in their personal and collective resentment of the growing big-city attitude and tactics of their San Francisco colleagues. Barbed resolutions were read and discussed and then judiciously "laid on the table indefinitely." Of greater importance were the discussions and plans for a free dispensary for Oakland. It was organized and advertised and paid for largely by the city, but as only four patients appeared during the first two or three months in 1873, this project died from sheer discouragement. What was wrong with that offer of free medical care in that first year of the great post-war economic depression? Perhaps the latter had not yet reached the coast. The answers to this question would be interesting.

In 1871 the society announced its alarm at the extensive advertising and sale of chloral hydrate by druggists, who were teaching the public "to acquire a habit of constant dosing and self-doctoring." In 1872 "Dr. Lansdale of the Navy" was elected an honorary member for one year "for the purpose of making him a delegate to represent the association at the 23rd annual meeting of the A.M.A. to be held in Phila. on May 11."

Dr. William Gibbons demonstrated a gland dissection of the *Mephitis Occidentalis,* or California skunk. He showed by the dissection how essential it was that the tail lie directly on the animal's back in order to create the compression on the oil sacs and glands to eject its protective perfumed oil. He also described the deodorizing of the oil by treating it with ether "to dissolve the

oil," then saponify it with caustic potash and finally wash it with a solution of carbolic acid. Further comments unfortunately were not made by Secretary Babcock.

The second annual session of the State Medical Society met in Oakland on October 9th and 10th, 1872. Delegates were Doctors Pinkerton, Kittredge, Bamford and Fox. Dr. Pinkerton was elected president of the state society.

During 1873 the idea of public relations consisted—at the suggestion of Dr. John LeConte, chairman of the Committee on Medical Statistics—of the annual publication of statistics of the standing committees on disease, on city hygiene, on meteorology, on topography, drainage and geology, and on medical botany. Dr. LeConte suggested that this measure would "strengthen the bonds between the members of the profession and increase the sympathy between the public and the profession." During this same year Postmaster L. C. Benton presented the two volumes of the *Medical and Surgical History of the War of the Rebellion* to the association. They had been placed at his disposal, he said, by Congressman Page. This was another bit of public relations, with political coloring. Dr. Edward Gibbons, brother of William and Henry Gibbons, less interested in medicine than in politics and business, was made an honorary member on November 13. When Dr. Elliot H. Woolsey applied for membership in December, Dr. Pinkerton preferred charges against him, but after Dr. Woolsey wrote Dr. Pinkerton a letter, which was read to the society, Dr. Pinkerton withdrew his objections.

The *City Directory* of 1872-3 was the first to set forth the Association:

> Number of members 20. Meets in City Health Office, City Hall. Objects: First—The cultivation and advancement of the science of medicine by united exertions for mutual improvement and contribution to medical literature. Second—The promotion of the character, interests, and honor of the fraternity, by maintaining the union and harmony of the regular profession of the county, and aiming to elevate the standard of medical education. Third—The separation of regular from irregular practitioners. Fourth—The Association of the profession proper, for purposes of mutual recognition and fellowship. Five committees have been appointed by the Association who are required to make a report at the monthly or semi-annual meetings, on

> the following subjects, *viz.* Vital Statistics; Hygiene, Sewerage, etc.; Medical Botany; Geology and Topography; Meteorology. Officers—J. C. Van Wyck, M.D., President; George E. Sherman, M.D., Vice-President; H. P. Babcock, M.D., Secretary; Clinton Cushing, M.D., Treasurer and Librarian; T. B. Pinkerton, M.D., C. S. Kittredge, M.D., H. William Bolton, M.D., Censors.

The same appeared in the Directories for 1874 and 1875 except for the list of officers. In 1876 it was contracted to a brief statement, with a list of officers and members numbering twenty-four. In later years, merely the name and meeting place were listed.

In spite of the depression Oakland and the Association were growing. The erection of a pier from "Gibbons Point" into deep water had started. Oakland, sometimes called "Park City," took on new life. Real estate speculations were prodigious as farms north of the city were divided into lots. The population had increased to 15,387, and two years later (1875) it was 25,000.

By January of 1875 the Association was well set on its financial heal with $250.38 in the treasury. In addition to the five dollar initiation fee, dues were one dollar per month by 1876. The purchase, therefore, of a set of post-mortem instruments, a ballot box, chairs, periodicals for the library, janitor service, and the printing of 500 postal cards with which to remind members of meeting dates were incidental expenses easily borne. A motion, unusual to these later years, was made to pay bills amounting to $146.45 with 100 dollars in gold coin and the balance in silver. To fight "Quack Doctors" by legal measures at Sacramento, however, required an assessment of $3.00 per member in 1877. The men were further "taxed" when it was moved (by Dr. Van Wyck) and carried "that the members of the Association dispense with smoking during the time of the society's sessions." At the suggestion of the Boston Society of Civil Engineers a recommendation was forwarded to the local representative in Congress that he urge the drafting of the metric system of weights and measures (March 1876).

California became one of the first states to enact a law to regulate the healing art. The legislature of 1875-76 passed the Med-

ical Practice Act effective April 3, 1876. Pursuant to its provisions the State Medical Society met April 17, 1876 and elected a Board of Examiners. The first certificate issued under the new law was to Dr. John S. Adams (Albany Medical College 1855) of Oakland on June 29, 1876. This act was improved during 1878 and 1901.

One important event in 1877 was the re-incorporation of the association (59 members[1]) in December. Since doubts of the legality of the incorporation of 1871 had been raised, which precipitated this second act, a certificate of the latter was framed and hung on a wall of the oil-lighted[2] meeting room. The unfortunate event of the year was the sudden death in August of the highly esteemed forty-nine-year-old Dr. John Charles Van Wyck—one of the founding fathers—who came to Oakland in 1863. He was a classically educated, cultured, vivacious gentleman (University of Maryland, 1848) and his unexpected early death brought a sense of great loss to his fellow physicians and his patients. His body lies in Mountain View Cemetery, Oakland.

The year of 1878 (membership 75) is an especially memorable one to women physicians, who gained a reluctant admission into this group of super-minded males. The first to make courageous application was forty-four-year-old Dr. Cloe Antoinette Buckel, who the year before had come to California from Boston. She was highly educated, experienced, dignified—"a lovely woman." After graduation from the Women's Medical College in Philadelphia in 1868, she was associated with the famous sisters, Doctors Elizabeth and Emily Blackwell of New York City. During the Civil War she headed an army nursing service along the Mississippi River under General Grant. She practiced for twelve years in Boston, studied for two more years in Paris and Vienna, and then came to Oakland. She always was interested in child welfare and a pure milk supply for the Bay region. On her death at seventy-nine in 1912 she left her property to Stanford University for a fellowship in child psychology. She and the eminent Dr.

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[1]Catalogue of Physician and Surgeon for 1877 in the Lane Library, S. F.
[2]The Oakland Gas Light Co. had been started in 1867.

Charlotte Blake Brown, of San Francisco, and Dr. Elizabeth A. Follansbee, of Los Angeles, were lifelong friends.

After Dr. Buckel was guardedly passed by the censors and her name came before the society, one can appreciate the restrained words of the recording secretary when he wrote of her: "some discussion was elicitated." She was elected (June 3), but not unanimously as were Doctors Rothus C. Gray, Amos S. DuBois, and Addison C. Pusey that same evening. The ballot box for her revealed twelve tolerant white balls and four prejudiced black ones. The secretary recorded Dr. Buckel in the minutes as "Miss Doctor Buckel" and then crossed out the "Miss." Dr. Trembley, the secretary, reflected the general confusion when he referred in writing to the next woman member as "Mrs. Eliza Pfeifer Stone," and a month later, to the third applicant as "Doctoress Emma Ward Edwards.[1]" But when the fourth woman applicant was elected unanimously on April 8, 1879, she was properly recorded as "Dr. Sarah I. Shuey."

Dr. Eliza Pfeifer Stone is notable as another "first." She was the first medical-school-graduate woman to practice medicine in the state of California, and the second woman to be admitted into the Association. She was born (1819) and educated in Germany and came to Nevada City with her husband from New York City in 1857 with "a considerable reputation as an obstetrician.[2]" She moved to San Francisco in 1863 and to Oakland in 1871. She was spokesman for herself and four other women on breaking their way into full membership in the state society during its meeting in San Francisco in 1876. They previously had failed to make the San Francisco County Society. The state society was evenly divided; the deciding affirmative vote was voiced by Dr. A. B. Nixon of Sacramento. Dr. Stone thanked the society in a "brief but elegant speech." She attended only a few of the meetings of the Alameda County group, for her strength was ebbing. She died May 30, 1880, after twenty years of ill health, with pain and jaundice during the last six. The June meeting of the Association was devoted

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[1] "Doctoress" Edwards failed to qualify.
[2] *California's Medical Story*, Harris, page 209.

almost exclusively to a report of her medical history and autopsy by Dr. H. F. Legler. "The Ductus Cysticus Hepaticus and Choledochus were filled with a solid gallstone over half an inch in diameter and two inches long—forming a perfect cast of the bifurcation of these ducts. . . . The members present took much interest in the report of the case and looked upon the specimens of gallstones as being quite rare," wrote the secretary.

Another important matter was the new Receiving Hospital for Oakland. There was much ado over the need for a charitable city hospital for Oakland with its 40,000 population. The Association was impressed with the fact that Oakland paid $27,104.00 of the $41,606.00 in taxes necessary for the county hospital out beyond San Leandro. A charity hospital was desired "within reasonable distance of Oakland." The society thought it smelled a little defilement in the finances of the county institution; but failing in proof it dauntlessly passed resolutions and struggled to amend a bill then before the legislature, all in the interests of a project that took almost forty more years for realization — the present Highland Alameda County Hospital. All that Oakland got then was a Receiving Hospital managed by the county supervisors.

During the same year the society suggested to the city council what appears to have been the first move to require all contractors to submit their specifications and plans for new buildings to the Board of Health, in the interest of proper ventilation, sewage disposal, and all other "hygienic conditions." And what appears to be another "first" was "a communication from W. H. Rattenberg & Co., regarding 'The Physicians Protective Association'," a first effort to provide protection against malpractice suits. Dr. Pinkerton urged cooperation.

There was talk of weekly meetings; a letter from Dr. Cushing, written in London, was read; a rent-free meeting room was found in the new City Hall on 14th Street facing down Washington Street.

The most dramatic episode of the decade was the airing of charges of breach of medical ethics brought by Dr. F. H. Payne, of Berkeley, against Dr. E. L. Barber, in which Dr. Babcock became

involved. The affair continued through several meetings to end in a trial with Dr. H. St. Geo. L. Hopkins acting as attorney for Dr. Babcock, Dr. William P. Gibbons for Dr. Barber, the members of the Association as a jury, and President Aurelius H. Agard as judge. The jury of 19 voted "not guilty 14; guilty 2." Nevertheless, Dr. Gibbons, attorney for Dr. Barber, was appointed as a committee to reprimand his client for "violating code of ethics." At the last regular meeting of the year Dr. Gibbons made the following concise committee report: "Gentlemen, I have done it." As a sequence to this trial an amendment to the constitution was made that created a Judicial Council of five members empowered to hear and judge all charges brought against members of the Association, reserving to the accused member the right of appeal to the membership.

A special meeting was called on Christmas Eve (1878) to take "such action of respect and condolence as may be thought proper" over the not unexpected death of thirty-nine-year-old Dr. Herman P. Babcock, Civil War veteran, graduate of Yale, cultured, and socially and professionally prominent. He was secretary of the Association from January 1871 to 1873 and president for 1877; he was one of the editors of the *Western Lancet* in 1872 before Dr. R. Beverly Cole took over in 1873, and was president of the State Board of Examiners. He had had personal war experiences as a medical officer in the Navy. Once, after being stunned by a bursting shell, he found himself placed as dead under a canvas between two dead sailors; later he escaped from the foundering *U.S.S. Sacramento* onto a raft on the hot Indian Ocean. In Washington, D. C., 1863, he married the daughter of Admiral A. A. Harwood. After serving for four years as surgeon for the new Pacific Mail Steamship Company, he settled in Oakland in 1869. He died in Buffalo, New York, seeking medical help from his old preceptor, Dr. Thomas F. Rochester.

The year of 1879 was marked by a valiant but vain effort by Dr. Pinkerton to establish a medical library as "a separate and independent body for the Association." After much consideration it was decided as being legally and financially impractical. Then

he tried to secure $200.00 from the society to start "a real library." The year also witnessed more membership trouble which culminated in the expulsion of Dr. Frederick Wilhelm Riehl, "graduate of Berlin University, house-physician of the Royal Charity Hospital of Berlin, surgeon in the Prussian Army, Knight of the Iron Cross, etc." for, in the words of Dr. Woolsey, "charlatanry in advertising and charlatanry in practice." Dr. Riehl promised near and distant sufferers of chronic diseases of the lung, heart, abdominal, urinary, and genital organs, a sure, rapid, and pleasant cure. All of this he promised in print by an examination of "a small quantity of urine or any other excreta [with a] brief description of morbid symptoms." Consultations in English, German, and French. His address was at respectable 1116 Broadway. His crime against The Code was spread on the pages of Oakland and San Francisco newspapers, but it took the rugged efforts of Doctors E. H. Woolsey and Peter Wheeler through several meetings to secure final action. How charlatanism has progressed from those crudities! The acute and chronic sufferer of diseases from dandruff to corns can obtain for only one Roosevelt debased dollar "scientific" diagnosis, without excreta specimen or even questions asked, by the mere flip of a "diagnosticon" dial! Yet this and every other medical society through the years has fought this social parasite with laws that neither restrict nor punish.

Oakland lost many of its oak trees as it became a prospering municipality early in the 'seventies. Of special interest to the doctors was the appearance of horse-cars on gas-lighted streets, and fresh-water pipes underground. The first wet-battery telephones were installed and, of particular concern to physicians, the beginning of a telephone service system. The streets were macadamized and the unhealthful dust from them was partly held down by a fleet of sprinkling-wagons with refilling stations a few blocks apart.

With state-wide development new diseases found their way into California. Anthrax, glanders, and the epizootic of horse influenza appeared with measles, whooping cough, scarlatina, and the first epidemic of cerebro-spinal meningitis. The three principal

killers, rheumatism, malaria, and consumption, received much attention at the society meetings. Dr. John LeConte was basically correct when he said that the treatment of consumption was just a matter of fresh air, diet, and rest to the lungs. Quinine, then as now, was the treatment for malaria, but all they had for rheumatism were the liniments. These men were characteristically concerned, of course, with causes, diagnosis and treatment. They reported on autopsies, described their interesting cases and experiences, and enjoyed unusual ones such as that of Tympanites Intestinales which had been diagnosed as pregnancy until the irate patient herself had terminated it very promptly by passing a stomach tube via rectum. One paper that elicited endless discussion was entitled *Nicotinia Tabacuum.* Dr. Pinkerton, who had enjoyed his cigar after meals for fifty years, was sure that the use of tobacco in moderation was harmless and even beneficial, but Dr. J. R. Bradway, who never had used "the weed" declared that, in any form, it was harmful, conducive to functional diseases, and even insanity, and in addition "was a nasty habit." Dr. C. Antoinette Buckel vigorously backed him up. She explained that one reason she left Boston was the nose and throat ordeal of riding on her calls in smoke-filled street cars.

They argued the subjects of forceps vs. ergot, the harmfulness vs. the benefit of alcohol, and the genesis of crime; and they memorialized the city council and the state legislature on the evils of quackery, prostitution, and criminal abortion. The LeConte brothers read papers more on the scientific than the clinical aspect of medicine. Dr. William Gibbons objected to Joseph LeConte's theory of the determination of sex because "it was founded entirely on the doctrine of evolution.[1]" He himself read a paper soon after on *Heredity of Intellect and Instinct,* and in 1874 he gave a public lecture in Brayton Hall on *The Natural and the Supernatural.*[2] His *New Remedies* article, read before the ACMA and printed in the *Pacific Medical & Surgical Journal* (Oct. 1878) created such a demand that the issue had to be republished. His *Preliminary*

[1]Darwin's *Descent of Man* was published in 1871.
[2]Oakland Daily *Tribune,* May 23, 1874.

Report on Materia Medica also was published in March 1879. In 1889 his scholarly report on *Indigenous Medical Botany,* read before the state society, was reprinted in pamphlet form. Dr. Gibbons was a recognized authority on medicinal plants of the Pacific Slope.

Urinalysis improved with microscopic examination for phosphates, pus, and epithelial cells. Laparotomies were done by a few and almost solely for gynecological purposes. The remarkable Dr. Joseph Henry Wythe (1822-1901) preacher, educator, and surgeon, was known for his ovariotomy operations. He joined the Association in 1875. Improved kangaroo ligatures were available and there was an increased use of antiseptics, aseptic measures, and finally, (1879) of the Listerian technique. By this time there had been a gradual confused transition from zymotic, miasmatic, and meteorologic theories to that of germs as the causes of infectious diseases. The LeConte brothers in 1874 read a paper on bacteria and Dr. George Sherman in February of the same year demonstrated his experiments on putrefaction in which he proved the cause as bacteria. He described these animalcules, their movements, their growth, and their need of oxygen to survive. The members all agreed on the verity of the organisms but had no reason as yet to accept them as causes. That they were more than the by-products of fermentation and decay had yet to be convincingly demonstrated. That was soon to come, in turn, from Pasteur, Koch, Neisser, Laveran, and Klebs.

The 1875 typhoid epidemic was attributed to bad milk, defective plumbing, and even emanations from decayed matter. Dr. Clinton Cushing reported five cases, all of whom had used the same well-water. During the diphtheria epidemic of 1877 Dr. Van Wyck considered sewage and topography as predisposing causes of diphtheria. Dr. Sherman said that he had never seen a case of diphtheria while Dr. Gibbons suspected that most cases were tonsillitis. Yet Dr. C. H. Pratt in 1873 had escaped martyrdom when he sucked out the tracheotomy tube of a diphtheritic child. Dr. Agard advocated the use of salicylic acid as antizymotic and antiseptic in diphtheria and in surgery, and also as an anti-

pyretic in acute inflammatory rheumatism. Most were using it but with some misgivings as to unfortunate chemical changes in the body. Dr. Cushing linked septicemia, peritonitis and metritis with whatever caused puerperal fever.

Some other papers read at society meetings and published in the *Pacific Medical & Surgical Journal* were: *Vaccine Lymph Jennerian or Bovine; Which?* by A. H. Agard; *On Some of the Uses of Ergot* by Clinton Cushing; *The Enemy of Vaccination—Homeopaths and Now the Eclectic; On the Action and Uses of Stimulants* by J. F. Burdick.

In January of 1876 Dr. Peter Wheeler read a paper on *Abscess of the Vermiform Appendix.* He noted the lack of literature on the subject and then presented its pathology, symptoms and diagnosis. In discussing the operative treatment he expressed the opinion that "in the near future the operation of gastrotomy for various forms of obstruction of the bowels and abscesses in the ileo-caecal region, will not be looked upon with such dread as at present, but will be considered as imperative in many cases where we now hesitate or decline to interfere."

Among the prominent members of the Association were Dr. Richard Beverly Cole, Professor of Obstetrics and Diseases of Women and Children and Physiology at the University of the Pacific (Medical Department) and later dean of Toland Medical College, and in 1895, president of the American Medical Association; Dr. Eustace Trenor (1834-1896. Came to Alameda in 1861), Professor of Medical Jurisprudence and Mental Diseases at Toland Medical College (University of California); Dr. Clinton Cushing, Professor of Obstetrics and Diseases of Women and Children, University of the Pacific (Cooper); Dr. Joseph Henry Wythe, A.M., M.D., Professor of Microscopy and Histology, University of the Pacific, and author of *The Microscopist* (1851), the first manual on the use of the microscope published in America. (It was in its fourth edition by 1880[1]); Doctors Trenor and Babcock, editors of the San Francisco *Western Lancet* in 1872; Dr.

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[1]A copy of the First Edition was presented to the library of the ACMA by the present author.

John LeConte, Professor of Physiology, and Dr. Ezra Carr, Professor of Chemistry at Toland; and Dr. Thomas H. Pinkerton, fourth president of the reorganized state medical society in 1873.

There were in the Association some other better-than-average educated men such as Dr. Charles S. Kittredge, secretary of the society from 1873 to 1876, who had Ph.B. and Ph.D. degrees from Yale; Dr. E. L. Jones with A.B. and A.M. degrees from Princeton who was house surgeon at Bellevue Hospital, but unfortunately died two years after joining the Association in 1874; Dr. George Sherman, with an A.B. from California College; and Dr. John Taylor McLean (1823-1902) who graduated from Wesleyan University, Middleton, Connecticut, and then from Tulane Medical School. He practiced medicine in Santa Cruz and Marysville from 1850 to 1861, when he was appointed Surveyor of the Port of San Francisco by President Lincoln for his special activities as member of the first and second Republican State Central Committee in 1856 and in 1860. After building the Coulterville Road into Yosemite Valley in 1874 at his own expense, he moved to Alameda. He joined the Association early in 1878 and was its president in 1885.

On the sidelines of the "regulars" was the brilliant botanist and eclectic, Dr. J. Horatio Bundy, who introduced cascara sagrada and other therapeutic plants to medicine, and who, incidentally, organized the strong Alameda County Eclectic Society and was Professor of Principles and Practice of Medicine and Clinical Medicine at the California College (Eclectic), on Clay between 10th and 11th Streets, Oakland. This school began in 1879, moved to San Francisco in 1887, and died there in the fire of 1906.

In spite of the financial depression that began in the East in 1873 the Association found itself at the end of these outstanding years with $351.65 in cash, and with minutes that reveal the record of a very active and intelligent group that grew strong in organizational experience and medical knowledge. It was a memorable decade.

Chapter Five

'EIGHTIES

The first business of the new decade was the election of the fourth woman member, Dr. Martha E. Buchnell, one of the determined original five who made their way into the California Medical Society in 1876. She was the widow of Dr. Benjamin Franklin Buchnell, first medical school graduate to practice here before Alameda was a county. A few years after her husband's death in 1860 she returned to the east coast to study medicine, graduated from the New England Female Medical College in Boston, 1871, and came to Oakland about 1870. She and the other "hen-medics"—Buckel, Stone and Shuey—roosted defensively close to each other on the 600 block on Eighth Street. Once a beggar, critically in need of a better pair of pants, approached one of our male members living in the neighborhood and was solemnly directed to ring the bell of Dr. Buckel or Dr. Shuey where he would be certain to secure a nice pair! Of these four pioneers, Dr. Stone died too soon, Doctors Buckel and Shuey gained an increasing respect during long successful lives, but Dr. Buchnell was soon to be regarded with less professional approval.

The Eclectic College in Oakland was fretting the association over its legal intention to change its name to the more pretentious title of the California Medical College. Plans were formulated to contest the action then before the county superior court. The society's attorney, however, advised that the college's petition, as stated before the court, could not be contested since the qualifying word (Eclectic) would be added in parenthesis in the title.

Charges of unprofessional conduct were again thrown about. At the March (1880) meeting the treasurer of the association brought charges against the esteemed Dr. John S. Adams which were promptly investigated by the Judicial Council and found "not sustained by the evidence." Three months later Dr. Wm. M. Brown presented charges against Dr. Ephraim W. Buck for "professional interference," and Dr. Pinkerton against Dr. N. L. Buck, one of the censors, for "violation of the Medical Code and unprofessional conduct." The charges against Dr. Ephraim Buck were sustained by the council, which recommended a reprimand. Dr. Buck appealed to the members from the findings of the council, but after a talk by its chairman, Dr. Agard, the members voted unanimously to sustain the verdict. Dr. Agard then generously moved that "the reprimand be dropped," to which the members again agreed. But Dr. N. L. Buck did not fare so well with the charges by Dr. Pinkerton. There was a unanimous vote to sustain the sentence of expulsion.

The year 1881 opened with 106 members and $503.62 in the treasury. The society soon changed its meeting place to a new location at a rental of $5.00 per month at 1015 Broadway. A new fee-schedule, spread over five pages of minutes, is of interest only because of its approximation to present fees. Dr. Wythe, the microscopist, (histologist) exhibited a Zentmeyer binocular microscope with "colored specimens" of tissues. Two women, Doctors Buckel and Shuey, were made chairmen of standing committees. The Association expressed its annoyance to the state society for accepting physicians to membership who had already been found not acceptable to this county society. Dr. Agard read a paper on *Medical Economics and Jurisprudence,* in which he strongly recommended that the State Board of Medical Examiners go further than the examination of diplomas of applicants by determining through written examinations whether the applicants were academically fit to practice medicine. This procedure finally came in 1901.

In June Dr. Wythe sent in his resignation as an honorary member. Other resignations were accepted but his was "laid on

the table." By December his "status" was still undetermined; it was not until April 1882 that his resignation was accepted. At the June meeting of 1881 the secretary had been instructed to write to Doctors Levi Cooper Lane and Wm. A. Douglas of San Francisco, "respecting their consulting with irregular (homeopathic) medical men and with others (regular) under censure for violation of the Code of Ethics." This was the same subject matter that involved the acceptance of Dr. Wythe's resignation, namely, "for consulting with Doctors Buck and Barber on the case of Mrs. George Hume." This rather amazing little Reverend, A.M. and M.D., already the author of *The Microscopist and Agreement of Science and Revelation,* saw in 1880 the publication of his *The Science of Life; or Animal and Vegetable Biology.* By 1897 he finally was back under the ACMA roof.

This same year (1881) brought sudden death to three prominent members. Dr. Charles S. Coleman, member of the first society of 1860; Dr. George E. Sherman, aged 38, a man of marked ability who had lived in Oakland for ten years after graduating at Cooper and studying for two years in Germany. (He was Oakland's second Health Officer, succeeding Dr. Pinkerton in 1874. He was a son-in-law of J. W. Wetmore of Oakland. He owned a large cattle ranch near Elko, Nevada, where he was found dead in his wagon); and Dr. William A. Bamford (1821-1881) a member since 1870, who came to East Oakland in 1868 and resided at 621 East 15th Street. He was a member of the first Board of Medical Examiners (1876). He reported a case of *Metastasis of Muscular and Arthritic Rheumatism to the Membrane and Substance of the Brain* to the ACMA, in which he concluded "that the diagnosis is Rheumatic Meningitis." The paper was published under "Original Communications" in the November 1877 *Pacific Medical and Surgical Journal.* But of special interest is his professional care of Robert Louis Stevenson in the winter of 1879-80, when that famous poet, ill in San Francisco, was removed to the cottage of his friend, Mrs. Fanny Osbourne, at 11th Avenue and East 18th Street, whom he soon after married in May of 1880. For six weeks Stevenson and Dr. Bamford and Mrs. Osbourne

fought what was feared might be "galloping consumption" even though the sick man, to quote his own words, "felt unable to go on farther with that rough horse-play of human-life." Dr. Bamford probably neither received nor expected to receive a fee from the impecunious poet, but he was presented with a copy of Stevenson's *Travels with a Donkey,* inscribed with the beautiful tribute:

> "You doctors have a serious responsibility. You call a man from the gates of death, you give him health and strength once more to use or abuse. But for your kindness and skill, this would have been my last book, and now I am in hopes that it will be neither my last nor my best."

By 1882 the society had standing committees on Principles and Practice of Surgery, and on Infectious Diseases, and it had $572.36 in the treasury. It also had by now a provocative competitor in the Society of Physicians and Surgeons of Alameda County, organized in 1881. This new society had its first and only mention in the minutes when Dr. Pinkerton asked for instructions in case it made application for recognition by the state society. But it received frequent newspaper notices. This rival county society did not survive the decade because its apparent excuse for existence was to provide an organization for disgruntled ex-members of the Alameda County Medical Association, such as Doctors E. H. Woolsey, E. T. Barber, N. L. Buck, and J. H. Wythe, its president. Other members were Doctors J. B. Simonton, W. P. Mauzy, A. Fine, Wm. M. Brown, and M. Whitney. A few, such as Doctors Wythe, Woolsey and Anthony, returned to the fold.

In June came the first formal sign of a relaxation of the rigid Code of Ethics, at least as it pertained to homeopaths. The chairman of the standing committee on Medical Jurisprudence had a paper read that "embraced a defense of the new departure in medical ethics attempted by some members of the regular profession —to admit to consultations all physicians recognized by law." The paper was considered by the members present "as of rather doubtful acceptance." Three years later the idea had grown more acceptable. Homeopathic Fabiola Hospital was a successfully growing institution. "Regulars" were unostentatiously taking patients there and for years afterwards surreptitiously borrowing its large kettles

for use in home surgery. Dr. Agard told the members in an eloquent paper that the homeopaths and the eclectics were already "laying aside the swaddling bands of their infancy for the maturer garments of the regular profession."

At the very next meeting Dr. August Lillencrantz read a paper on the homeopathic doctrine of Similia Semilibus Curantur. "In all this rubbish," he said, "some good things are found . . . for example, homeopathy has done much to prove that acute diseases tend to recovery of their own accord." If there is any such thing as a therapeutic "law of nature," it is rest; and that clinical experience (therapeutic efficiency) is the only firm foundation on which physicians of any school could stand, he thought. He favored the removal of all restrictions on consultations with the better educated homeopaths and eclectics who tried to live up to certain acceptable standards. He predicted, on that basis, that within five years there would be no homeopaths. He exaggerated to emphasize his meaning. It took some thirty-five years—until that generation of trained homeopaths ceased to live.

During 1882 an attempt was made to classify the therapeutic value of the various mineral springs of the Pacific Coast. On November 14 the association accepted an invitation to attend a gala session of the newly inaugurated, social and literary Ebell Society, the first women's club in California. The Ladies' Relief Society followed, and the Associated Charities later (1889). Electric street lights, electric street cars and cable cars, were beginning to appear—all of interest to the doctors, even though some who could loved to ride behind a pair of matched horses, frock coated and high silk hatted. Many of the younger men, and some of the older, made less spectacular calls on bicycles. Bicycles were used until the late 'nineties according to present survivors. Frock coats and high hats were marks of professionalism and were exacted equipment by a large portion of the laity. An aged former president of this association told the present author that at one time he dared not open his own front door to admit a patient without his

Dr. Sarah I. Shuey.

silk hat on. It took real courage, before the turn of the century, to appear in a business suit. Dr. Frank Adams, protected by his secure reputation, was one of the first to wear a derby.

By the end of 1884 the attendance had increased to fifteen and on January next it was twenty. Since the treasury fund in the bank was over $600.00, the "propriety of investing the money" was considered. Something prompted Dr. Pinkerton to move for a "Supper or Collation." Doctors Adams, Lillencrantz, and Anthony were appointed to see about it, but the only record of that supper was the notation, "Committee on Banquet discharged." In February of 1886 an annual banquet was held in the new Galinda Hotel, still standing at 8th and Franklin Streets. And, once again, the Board of Supervisors was memorialized for a new county hospital in or near Oakland.

Dr. Sarah Shuey had just returned from two years in Europe. Dr. John S. Adams suggested "a graceful violation" of the by-laws to permit a suspension of her society dues for that period. After the ballot box had been passed the tellers announced that "no member had been so ungallant as to vote "no." Soon after, Dr. Martha E. Buchnell (August 1885) sent in her resignation explaining that she had become a "mind curer," and that she "could no longer act in harmony with our Association." At the following meeting Dr. J. B. Trembly, secretary for the preceding few years, whose minutes were spotted by some bad spelling and the old fashioned *"fs"* (as in pafsion), read a studious paper on the *Therapeutics of Climate,* illustrated by meteorological maps, some of his own making. Dr. L. S. Burchard, the new secretary, concluded his resume of the paper with "The north wind then arose for discussion and swept the Association into the executive session."

The latter was concerned with the absorbing, ubiquitous subject of illegal practitioners of medicine and one "Bro. Ambrose" in particular; and with what to do about Dr. Buchnell's apostatic but honest pronouncement. Prompt, unanimous acceptance of a resignation implied an "honorable discharge," but when a resignation was held up for further consideration, the professional status

of a member was in question. The secret ballot-box revealed a tie vote for Dr. Buchnell. When the president called for ayes and nays, five were in favor of acceptance and three, including the president, were against. Was Dr. Buchnell degenerating medically or merely muddled by too early psychiatric aspirations. Her exit was followed by the entrance of Doctor Malinda Goldson, who managed a private hospital and devised new pessaries; by Doctor Myra Wheeler Knox, a long time, highly respected and loved secretary; and from then to now by a growing list of smart, capable, and hard working women in both general and specialized medicine.

The annual banquet of 1887 at the Galinda Hotel was attended by twenty members and twelve spouses, with wine and tobacco excluded. At the 1888 banquet there were only fifteen members and two guests, but wine and tobacco were not excluded. At the 1889 banquet there were preachers and lawyers present and there were seven speeches. It was the last banquet for some years! That year ended with thirty-six new members, $661.00 in cash, and $192.00 still due. The association had donated $50.00 to the San Francisco County Medical Association to help allay expenses of entertaining the state society, $75.00 went to Sacramento for legislative purposes, and $100.00 to help Dr. G. W. Graves of Petaluma in his discouraging defense in a malpractice suit. The association also had purchased the library and "effects of the Oakland Library and Pathological Society for $185.00," as it absorbed that society. Dr. August Lillencrantz did a neat bit of horse-trading at this time. The association owned twenty-eight volumes of Bancroft's *History of California* and a contract for the future volumes to be published. The doctor offered in exchange his seventy volumes of Zeimsen's *Cyclopedia of Medicine,* and Veljean's *Surgery,* and "a large number of medical magazines." It seemed a good deal to the unanimous mind of the members. The medical books were soon useless except as shelf frontage, but those Bancroft volumes are now collector's items and continue to grow in value.

The association had been moving from reception parlor to reception parlor, from free rooms to a five-dollar-a-month room. Finally it dickered with the YMCA at 825 Broadway and the Moffitt Building at 1155 Broadway. It settled with the latter at $15.00 a month. The furnishings were not to exceed $300.00. After the first meeting in the new room was adjourned (August 1889), the room committee "opened a half-dozen bottles of champagne and a box of fine cigars." "The High Jinks was a complete success," wrote the secretary. Bills later were presented: $25.00 for a president's chair, $16.00 for champagne, and $11.00 for cuspidors; and financial arrangements with the janitor ordered. These items may not all have been uniformly satisfactory, but the members did unite in condemnation of the water of Oakland which, as one member expressed it, was "in taste, smell, and color not equalled in offensiveness by any city in the United States."

At the November meeting Dr. Pinkerton requested that "a committee of five be appointed to consider the advisability of having a hospital in Oakland under the supervision of the Alameda County Medical Association." Doctors Pinkerton, Paterson, Russell, Pratt, and Burchard were appointed. The minutes of the December meeting were merely, "Rained in torrents. No quorum." But at a special meeting on the 30th, the Hospital Committee gave an encouraging report. After much enthusiastic discussion on the immediate needs and prospects, four more men, Doctors Frank Adams, Crowley, Lillencrantz, and Southard were added to the committee. Full power to act for the association was granted to the enlarged committee, which promised performance and a full report thereon two weeks hence. The new decade must bring forth a real, long overdue hospital to which members could bring their sick!

Probably the best paper of the year 1880 was one by Dr. William Gibbons on *Embryology,* and of 1881 one by Dr. Wythe on *Modern Views of Bio-plasm.* An ambitious paper on *Evolution of the Human Race* was discussed with discouraging uncertainty on methods to improve the race. Another paper on *Germ Spores as*

the Cause of Malaria met with equal distrust. Laveran, however, was to describe the malarial parasite before the year was out. In 1882 it was *The Pathogenesis of Phosphatic Diathesis,* a "new disease" called phosphaturia. By 1885 most of the members had accepted the victory of the germ theory over the zymotic or filth theory, had become convinced of the bacterial origin of infectious diseases, and that the latter could be communicated from person to person.[1]

In 1886 Dr. George L. Fitch, former government physician of the Sandwich Islands (Hawaiian Islands), by invitation, presented some startling new ideas on leprosy, and Dr. F. E. Waxham of Chicago, also by invitation, gave an address on *Intubation as a Substitute for Tracheotomy*—a thirty-year-old procedure that had fallen into disuse.

Dr. J. F. Burdich died at age 37 of diphtheria. Dr. John Adams and his son, Dr. Frank Adams, and Doctors Agard, Trembly, Pratt, Augur, and Crowley had fussed over their beloved and frightened colleague with gargles, steamed sprays, tincture of ferri chloride, Seidlitz powder, quinine, and whiskey; also calomel and soda followed by magnesium citrate as a laxative. The sick room temperature was maintained at 75° F. Masses of membrane were removed, and in final desperation, a tracheotomy was done. This was the elite treatment for diphtheria before Behring discovered its antitoxin in 1889.

The first standing committee on Histology and Pathology was appointed in January of 1880. Its chairman, Dr. E. J. Overend, was succeeded a year later by Dr. E. M. Paterson who served for three years. The Committee on Surface Geology in Relation to Public Health was abandoned at the beginning of 1887 and the one on Meteorology by 1889.

Smallpox spread over Oakland in 1887 with eight deaths. Health Officer Dr. D. D. Crowley and his helpers performed 4000 compulsory vaccinations by authority of a city ordinance. When scarlet fever, typhoid, and diphtheria increased in 1888

[1]Koch discovered the tubercle bacillus in 1882, Klebs the diphtheria bacillus in 1883, Koch the cholera bacillus in 1884, Escherich the bacillus coli in 1886, and Weichselbaum the meningococcus in 1887.

and 1889, Dr. Crowley warned the city that Lake Merritt was a cesspool into which drained all the surrounding sewers. Dr. Woolsey, member of the Board of Health, added his warning that, "Some day the city would wake up rotten and do something." In July of 1890 the physicians of Oakland petitioned the city council to drain Lake Merritt and reclaim the West Oakland marshes. The petition was a roster of the ACMA.

Dr. W. F. Southard, "oculist and aurist," read a paper on *Chronic Nasal Catarrh* in 1889. One can still sympathize with his plaint that "he was often in a quandary to know what is best to do." During the discussion, Dr. A. H. Pratt said he liked powdered boric insufflation in acute cases but in chronic cases "his greatest success was his fee." In September "Dr. Jerome B. Trembly gave a thrilling and pathetic description of *Locomotor Ataxia* as experienced by himself." It was a graphic recital as recorded by the secretary. Dr. Trembly's greatest relief came from the Sayre extension apparatus. "But," he said, as quoted by the secretary, "still I am growing weaker and it is a torture to live." He died a year later, "better known to the profession at a distance for his labor in meteorology. We at home loved him most in our families and at our medical meetings.[1]" No finer obituarial tribute can be found in the society records than those few homely words by the recording secretary.

The last papers of the year were on *Maternal Impressions.* The first one, by Dr. Tadlock, cited the case of a pregnant woman who, very frightened by the sight of a man with a fractured leg, "gave birth to a child with a broken leg." Frankly honest, Dr. Luther R. Hess, a new member by a few months, stated that he also had such a case but that it "was caused by himself in delivering the child." But Dr. Tadlock seriously insisted that the "hideously deformed should be kept off the streets" to protect impressionable pregnant women. Aroused, Doctors Antoinette Buckel and E. J. Overend presented rebuttal papers at the next meeting, with which, of course, the members generally agreed.

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[1]Dr. Trembly was widely known for his meteorology. He took regular observations at 7 A.M., 2 P.M., and 9 P.M.

Chapter Six

'NINETIES

The first meeting of the new decade was a large one. Twenty-six members were enticed by the double feature of the annual banquet and the report on the exciting prospect of a new hospital. Dr. Pinkerton informed them that "a building and lot had been secured by contract," that his committee of nine had legally incorporated itself under the name of the Oakland General Hospital, that it would be financed by 3000 shares of stock at $10.00 each, and that it would be under the control of the Alameda County Medical Association. There was much to talk over when they adjourned to meet for a special dinner at the old Barnum French Restaurant on the southeast corner of 7th and Broadway, where the ordinary dinner, a French one, "from soup to a small black coffee, with wine thrown in, was served for 50 cents."

At the February meeting Dr. Pinkerton reported that "matters are taking shape for an early occupancy, for hospital purposes, of the building and grounds recently purchased for that purpose." The lessee of the building, he said, need not vacate until March 5; in the meanwhile, the stock would be open for subscription. During the recess before the executive meeting, 642 shares were subscribed for. Dr. Pinkerton explained that each shareholder would be asked to pay two dollars "to be used to furnish the hospital." By March, 1562 shares had been subscribed for, of which number 902 were taken by physicians. At the April meeting Dr. D. D. Crowley announced that the hospital was being "well furnished and by Monday, April 14th, will be ready for the reception of patients." Dr. Pinkerton followed with a final plea to the mem-

bers "to take up the remaining stock so that it would be unnecessary to go to outsiders." And this ends the society record of the Oakland General Hospital.

Of the survivors of this period, only Dr. James Shannon, still practicing medicine in a restricted sense at the age of 85, remembers that the hospital was located at 8th and Grove and that "Dr. Buteau did his surgery there," and that it was largely financed by Mr. Frederick Delger, who had his Delger Block on the entire west side of Broadway between 13th and 14th Streets filled with high grade physicians. Dr. Buteau had his office there until his death in 1926. The *City Directory* for 1891 lists the Oakland General Hospital at 658 - 8th Street, S. H. Buteau, Resident Physician. The hospital was not found in any subsequent *Directory.*

Attendance at meetings of the association began to fall off. There were only 12 present when Doctors Hess and Crowley debated the subject of cleanliness vs. antiseptics. No annual dinner was held, by resolution, and no reasons given. The year 1892 is mentioned only because the phrase "case of obstetrics" appears in the minutes (February) for the first time. "Midwifery" had been a persistent word; "many of the members" joined the Physicians Dentists and Druggists Collective and Protective Association; and there was an increase in the killers, typhoid fever, scarlet fever, diphtheria, and malaria. Diphtheria antitoxin was not in general use until 1894.

In January of 1892 the association, "as guardians of the public health," and to assist the City Health Officer, called the attention of the city council to the following flagrant offenses which "seriously menaced the health and lives of the people of Oakland:" First, the greatest of these was the accumulated garbage west of Peralta Street, from which germs were blown over the city by the north and west winds, and its "sickening odors" as far as Market Street; Second, the broken and imperfect sewers with their leaking filth and odors, and even with the "perfect" ones the gases were forced back into the city at high tide; Third, the lack of daily removal of garbage and decaying matter about livery stables, markets, and wholesale produce stores; Fourth, the long lines of

unshaded, smooth, white cement sidewalks causing "painful glare . . . injurious to the eyes." (Only those who can remember those early cement walks can appreciate their discomfort.) After more details by Doctors Buckel, John Adams, and Shuey, resolutions and suggestions for improvements were sent to the City Hall.

The civic leader and orator, Colonel John P. Irish, did more than any one person to help the much criticized Board of Health and Health Officer clean up Oakland. When the Board, consisting of Doctors Anthony, Woolsey, Wythe, Muller, H. L. Bradley, and Health Officer Dunn, (all members of the ACMA except Bradley, homeopath) attempted to quarantine the epidemic diseases (even two cases of leprosy were found), the most annoying opposition came from physicians.[1] Dr. Wythe lashed out at them in a statement that was printed for public circulation. People act strangely and physicians are people. Cooperation among themselves is not one of their outstanding virtues.

Attendance in 1892 averaged between 9 and 10. Dr. W. E. Taylor of San Francisco, president of the state medical society, a visitor at the October meeting, stated that of some 2000 eligible medical men in the state, only 349 were members of the state society. New and vigorous men were to come into the county society, such as, in order, Doctors Hayward Thomas, inactive but happy in 1946; Samuel H. Buteau; the astute and witty Jeremiah Maher; E. J. Boyes, William S. Porter, retired in 1933, William A. Clark, Oliver D. Hamlin, J. L. Milton, Francis R. Musser, E. R. Sills, Edward von Adelung, T. B. Holmes, and Carl Rudolph Krone. But the society lost, by death, the hard working, scholarly, and professionally and personally esteemed member, Dr. Aurelius Homer Agard. He was a prolific writer on medical and historical subjects. He and Dr. John Adams officed together. He lived at 1259 Alice Street, not far from the wide veranda of Dr. Samuel Merritt's big home where he very often spent his leisure hours, many of them in talk and advice on the future Samuel Merritt Hospital and its benevolent program.

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[1] *History of Alameda County*, Joseph E. Barber, 1914, Vol. I, page 151.

The year 1893 began with a resumption of the annual dinner at the Albany Hotel, on the northeast corner of Broadway at 15th. Twenty-four members, nine wives, Mr. A. B. Nye, editor of the *Oakland Enquirer,* and Professor W. E. Ritter, of the University of California, sat down at $2.50 per plate. But attendance at subsequent meetings failed to improve. During May, June, and July there were no meetings because there were "not enough members for a quorum." Possibly some were at the Chicago World's Fair. Only four new members were added, but one of them was the ebullient eye, ear, nose, and throat specialist, Dr. Hayward G. Thomas, who was soon to add some needed "pep." By this time, Dr. A. Miles Taylor had built the Taylor Sanitorium (later the East Bay Sanitorium) on the northwest corner of 31st Street and Telegraph Avenue. At a meeting this year he gave the histories, details of techniques, subsequent treatments and final results of twelve cases operated on in his private hospital.

In the great country-wide depression of 1893-4, the society's finances bogged down to $42.65 in the treasury and $406.00 in unpaid dues! The American Medical Association met in San Francisco in June of 1894, and by October there were twenty-six members at the county meeting, so far the largest attendance without the bait of a banquet. In 1895 Dr. Sarah I. Shuey became the first woman president of the association and the last until Dr. Pauline Nusbaumer was rewarded in 1923 for her faithful years as secretary.

In August 1895, 78-year-old Dr. Pinkerton died after twenty-six years of active devotion to the society for whose creation he was very largely responsible. He was born in Amesbury, Massachusetts, in 1817, graduated from Harvard Medical School in 1859, and sailed around the Horn and into San Francisco Bay on January 5, 1861, armed with letters to the financier, J. O. Eldredge of San Francisco, who introduced him to George Hearst. The latter sent him to Virginia City, Nevada. His stage driver from Sacramento to Virginia City was the celebrated reinsman, Hank Monk. He was surgeon for the famous Ophir, Gould, and Curry mining companies, city physician to Virginia City and county

physician to Story County, and was in charge of the Virginia City Hospital during its first five hectic years. He was at the hub of the wildest, most romantic period of Washoe history. Perhaps his life there was a bit too romantic, for he moved to quiet "suburban" Oakland in 1866 and grew with it. He was on the faculty of the California College, was Oakland's first city health officer, and in addition to his great interest in this Association, he helped reorganize the California State Medical Association, was one of its first vice-presidents in 1870, and its president in 1873. His hobby was ornithology and the collecting of stuffed birds. He apparently outlived his lucrative practice, for, as happens to many of the best physicians, he died a poor man. Doctors are always fair game in a permanently open-hunting-season for double barreled salesmen. The society attended his funeral in a body, and St. Paul's Episcopal Church was filled with friends and "pioneer settlers who have been acquainted with the late doctor for half a century."

Just the year before, Dr. Pinkerton's old friend, the scholarly Dr. Ezra S. Carr, died in Pasadena on November 28, 1894. Dr. Carr was a professor in many colleges and universities. He came to California in 1868, was appointed professor of agriculture, chemistry, and horticulture in the University of California in 1869. He was honorary member of this society until he was elected State Superintendent of Public Instruction in 1875. He was also president of the state medical society and vice-president of the American Medical Association.

The Alameda County Medical Association grew with the city and county but its meetings were poorly attended, its papers had fallen below the accepted standard, and too frequently the writers thereof, as if abashed, did not appear. Cash in the treasury had dwindled down to $11.71. Even the lighting was poor as it straggled through the "dirty [gas] chimneys." Dr. Robert T. Stratton,[1] a gentleman and excellent physician, handsome and dignified, arose during the regular August meeting, spoke remonstratively of the lack of spirit and made a plea for reform and betterment.

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[1]Dr. Stratton built the first Stratton building on the northeast corner of 20th Street and Telegraph Avenue.

PROMINENT PHYSICIANS OF ALAMEDA COUNTY.--ALOPATHIC

Dr. J. P. H. Dunn
Dr. L. R. Webster
Dr. Hubert N. Rowell

Dr. E. H. Woolsey
Dr. J. Maher
Dr. E. J. Boyes

Dr. George C. Pardee
Dr. J. H. Wythe

Dr. D. D. Crowley
H. E. Muller
O. D. Hamlin

Dr. A. Miles Taylor
Dr. M. C. O'Toole, Berkeley
Dr. R. T. Stratton

When asked what the society most needed, young Dr. Hayward Thomas, in his alert, characteristic manner, came up with the answer—"a good cup of coffee!" Dr. Pratt seconded the suggestion, explaining that the members were chiefly tired. The coffee idea struck fire and there was born the regular after-meeting snack. A committee was also born to make the meetings "more interesting and profitable."

Dr. Monagle from the East, by invitation, read a paper on *Cancer of the Uterus.* A banquet was given for him, and, incidentally, to get the boys together. During February of 1896, the annual banquet was resumed at the new Hotel Metropole on 13th and Clay Streets. Dr. John Adams talked on *The Doctor of Forty Years Ago,* Dr. Albert Harlow Pratt on *The Country Physician,* and Dr. Edmond J. Overend on *The Doctor as a Social Factor.* What a nice place those talks would have in this book had they been preserved! During the following September another banquet was held at the same hotel. This time, there were cocktails and wine, and singers, and speeches — seven of them — by Doctors Adams, Bradway, Rowell, Maher, Thomas, and by Doctors Tyrell and Williamson of San Francisco. They "adjourned at midnight." One of Dr. Maher's stories of that night is still alive as are many of his witty sallies. Every Irish face of middle or old age in greater Oakland still lights up at the memory of the immaculately dressed, genial, and able physician.

The perennial subject of a hospital was again warmed up. The "Oakland General" had failed. In the face of that failure, there was the provocative homeopathic Fabiola Hospital succeeding at Moss and Broadway. At the January meeting of 1896 all agreed that they "should and must have a Hospital." Dr. (Mrs.) Malinda Goldson presented the merits of her Lakeside Sanitorium, housed in an old school building which she leased at 1020 Oak Street. But the committee which was appointed to "look up this matter" was discharged with thanks. Dr. E. H. Woolsey had his Oakland Hospital and Hotel for Invalids on the southwest corner of 12th and Jackson Streets, where he did contract work for the Southern Pacific Railroad as early as 1890. The following letter from Dr.

A. Miles Taylor, who had completed his private hospital at 31st Street and Telegraph Avenue in 1893, was read to the society and then "placed on file."

Oakland, California
April 14, 1896

To the Alameda County Medical Society
Oakland, California

Mr. President, Ladies and Gentlemen:

Having recently built and fitted up a Sanatorium at considerable expense and having endeavored to make it all that modern science and my limited means would suggest. I would respectfully ask you your kind indulgence in calling your special attention to certain opportunities which I would like to offer you. In the main building of the Sanitorium premises, I have constructed an operating room, which I believe I have a right to be proud of and regarding which I have enjoyed hearing from some of you many pleasant comments.

In the same building, I have a number of large well ventilated rooms, fronting north and south, ranging in price from $20.00 to $50.00 per week. These prices include the services of the regular day and night nurse, special nurse being extra.

A number of Coeliotemies have already been performed there by different members of the Society, and since Oakland is without suitable accommodation for the profession, I would like to assure you, if you care to avail yourselves of the accommodations of my Sanitorium, I will do all in my power to make you satisfied and will further assure that under no circumstances can a patient of any physician become the patient of other physicians while an inmate of my Sanitorium nor shall they be visited by other than the attending physician, except by his or her special request.

My corps of trained nurses are efficient. Special nurses can be had at any time on hospital or outside cases at the regular rate of $20.00 per week.

Trusting that the profession will avail themselves of this opportunity and thanking you for your kind consideration, in advance, I am

Yours very truly,

(signed) A. Miles Taylor, M.D.

P.S. The use of my operating room and its service is tendered to the profession gratis.

Dr. Dennis Crowley spoke up in praise of Dr. Taylor's hospital at the next meeting and Dr. Pratt suggested that nothing be done about a hospital until the intriguing prospects materialized from the eventual settlement of the Merritt estate. There were various private hospitals listed in the city directories of the 'nineties but Dr. Taylor's hospital was leased by Dr. Carl Krone about this time (1895) and the name was changed by him to the

East Bay Sanatorium.[1] Under that name, and until 1925, a vast amount of good medicine and surgery was done within its shingled frame walls by members of the county society. It was here, for example, that Dr. Frank Adams performed the first cesarean section in Oakland in 1900 on a patient of Dr. Joseph Eastman of Berkeley. Young Dr. William S. Porter was invited to assist because he had witnessed the operation in the East by Dr. Hirst. Dr. Porter graduated from the University of Pennsylvania in 1895, was a visitor at the society's meetings in 1896, and joined in 1897. Like many young men, he earned his first income by giving anesthetics. He was the first to administer ether in Alameda County and urged its comparative safety over chloroform. He became a facile, and popular surgeon, devoted to skill in surgery and art in general. At the age of seventy-eight, he has had the stamina to survive a cholycystectomy in 1945.

The inspection and regulation of dairies and milk handling by city ordinance in 1896 was formally and "heartily approved" by resolutions of congratulations written by Dr. Frank Adams, and sent to the city council. The first, (or one of the first) milk-inspectors was William (Billy) Downie, son of the founder of the historic Sierra County town of Downieville, who did his first inspecting on a bicycle and then in an automobile. He retired in 1939 and died in 1945.

If the subject of a hospital was a warm one, the subject of contract and lodge practice was a hot one. In September of 1896, Dr. Hiram N. Rucker (Calif. 1870) introduced it in a paper on *Medical Ethics.* He said it was a mistake to educate the public "to

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[1]The East Bay Sanitorium was quietly purchased in 1899 by Dr. James Shannon. Mrs. Krone, who successfully managed the hospital, purchased the interest of Dr. Shannon in 1905, and two years later was persuaded to sell the hospital to Doctors Frank S. Adams, H. G. Thomas, George Reinhardt, E. W. Ewer, and O. D. Hamlin. Mrs. Krone remained superintendent until 1909. After Dr. and Mrs. Krone returned from a two-year trip to Europe, she leased the private hospital of Dr. and Mrs. W. H. Maxson at 1410 - 28th Street between Telegraph and Broadway. A group of Oakland physicians, Doctors A. S. Kelley, Will H. Irwin, Robert Stratton, and Robert Sutherland, had established a little hospital on 26th Street. They named it the Oakland Central Hospital. When Mrs. Krone took over Dr. Maxson's large building on 28th Street, these doctors moved their patients and the name of Oakland Central Hospital to Mrs. Krone's hospital, which for years paralleled in efficiency that of the East Bay Sanitorium. The Oakland Central closed in 1928 with the failing health of Mrs. Krone, then a widow.

believe that a hospital is the only place for operations." It was very satisfactory for a hospital association itself, "where a few surgeons do all the work at a small monthly stipend." He had no objection to a private or general hospital open to all; however, if certain operations are done in private homes, even though it would entail more trouble and responsibility, it would "benefit us in the end," he said. "Forming contracts with societies is an injustice to all." Then he struck at free clinics, "that do harm rather than good." The record does not explain that statement, but obviously Dr. Rucker meant the exploitation of the free-clinic idea for self-advertising rather than for humanitarian purposes. "All agreed with Dr. Rucker." Dr. Muller arose and told the story of how he "became connected with lodges." Dr. Crowley, who had toured Europe and visited hospitals two years before, claimed that "the hospitals in San Francisco were making a few doctors rich, in Edinborough the surgeons of the hospitals do all the operating of the city, while in Paris, surgeons are starving because of the charities and free clinics." He predicted that "in twenty-five years it will be the same here." Dr. Crowley shrewdly moved that the president, Dr. Joseph S. Eastman, of Berkeley, appoint a committee of three from among the doctors who were doing lodge work. Doctors Maher, Muller, and O. D. Hamlin were appointed. Doctors Hayward Thomas, Joseph J. Medros, and Murray Johnson were appointed on free clinics. Dr. Maher "spoke at some length" on the difficulty of withdrawing immediately from the lodge work. He agreed that it should be done but that it had to come gradually, especially with those "who had a good share of that kind of practice."

Dr. Thomas reported a month later that "the Clinics would probably disband. The Eclectic Clinic has closed. The Homeopathic Clinic has agreed to close, and the majority of the Oakland Free Clinics are in favor of closing. Members of the West Oakland Free Clinic would not disband until the Lodge work is stopped." A motion was carried that "it be the sense of the Alameda County Medical Association that free clinics should be abolished." After Dr. Maher reported for his committee that more

time was needed, that although lodge doctors recognized lodge practice as "a bad thing," still they could not "be pushed." He, too, made a motion which was carried, identical with that on clinics. Dr. Rucker followed with a motion that a committee of five be appointed to draft resolutions against clinics and lodge practice to be signed by "all physicians." Doctors Rucker, Maher, Fisher, Pratt, Stratton, Muller, and Hamlin were appointed. Many signed the resolutions to abstain from contract practice and efforts were immediately made to contact other county societies for similar action. It was even proposed to publish a list of those members who honestly refused to sign up, and in November of 1897 it further resolved that those members who refused to cooperate with the will of the society "shall be refused the professional support of the Society, and that members refuse to consult with or assist the doctor who consults with or assists the doctor who does lodge work." All these resolutions "to be made binding after December 31, 1897." These efforts to combat the beginning of so-called "socialized medicine" lasted through the following year or two. In 1898 the committees asked to be released, but were reorganized later. It was a losing struggle for the Association for two fundamental reasons—there was a certain public need for less medical cost and there were some young and able doctors who were always willing to work for less. Today, lodge practice evokes a slight lift of the professional eyebrow, and contract practice is a usual and accepted thing.

In January of 1897 came the first proposition that members of all county societies, by the payment of two dollars per member, (in addition to the regular dues) be automatically made a member of the state society. It was "laid on the table" for further consideration.

A more compelling matter was the old homeopathic wrangle. Homeopathy itself was riding the crest of its last wave before being lost on the ancient sands of regular medicine, but most of the members could or would not see it. For example, it was so ordered on motion of Dr. Thomas that "it be the sense of this Society that no member serve on the staff of [homeopathic] Fab-

iola Hospital." Three months later, older Dr. Pratt was on his feet asking for a showdown on the Fabiola imbroglio. Members of the society, he said, were on the visiting staff of Fabiola "contrary to the rule." Dr. Pratt demanded that the issue be settled one way or another, that the rule of the society be either enforced or abolished. As for himself, he said, he was very willing to submit to the will of the society, but in so doing he insisted that "the submitting be general." After heated discussion the following resolutions were read by Dr. Frank Adams and "unanimously adopted:

> "That, the members of this Society deny fellowship with any member who accepts a position on any irregular hospital staff. That members . . . refuse to consult with any physician who accepts a position on such a staff. That members of the profession be informed of these Resolutions."

Shunning Fabiola, (the nearest approach so far to a real hospital for Oakland) was not as easily done as it was to agree to resolutions. Two years later, (April 1899) Dr. Crowley brought the subject before the society again. He asked the members to give thought to the following: Their attitude toward homeopathy in general, to hospital practice in particular, and whether operating in "such a hospital," benefits or harms the members. He claimed that it was "just as bad" to send ten patients to Fabiola as to send one hundred, and that for the past fifteen years members had been building up a homeopathic hospital and thereby thwarting the erection of a hospital devoted to the "regular practice of medicine and nursing." "Shall we continue such help," he asked, and "why have we not in the past fifteen years built a large hospital for our own use, convenience, and benefit for the growth of surgical ability and practice?"

The burning question before the association, during these few remaining years before Providence Hospital and Merritt Hospital took the load off little East Bay Sanitorium was, "shall we send patients to other than a Regular Hospital?" Dr. Carl Krone, lessee of East Bay Sanitorium, read a paper at the next meeting, in which he added no water to the fire, when he advocated the recognition of all good and licensed professional men who honestly

toiled "for the good of humanity." In closing, he stated that as he believed that the majority of the members felt as he did, he would offer the following resolutions:

> *First.* To recognize professionally all practitioners recognized as such by the State Law and who conform to our law of ethics.
>
> *Second.* To make sincere and united efforts to secure for this State a just and efficient medical practice law.
>
> *Third.* To adhere to our principles and let posterity decide which is the true system, homeopathy and eclectism with their borrowed glory, or our own system with its scientific research and generous tolerance.

Dr. Buteau questioned the right to discuss such a question, . . . "which should be heard only in the State Society," he said. Dr. Pratt stated that for some time he had been "in favor of consulting with all legalized practitioners," but Dr. Frank Adams said flatly that although he respected the right of Dr. Krone to be heard, he would "withdraw from the Society or belong only to the State Society," if the resolutions passed. "After much discussion the paper was laid on the table," where it, like homeopathy, died the natural death of an over-prolonged senility. After a few years, any and every doctor went unquestioned to Fabiola Hospital. The end of Fabiola Hospital and homeopathy itself synchronized with the last of that generation of homeopathic practitioners of medicine. And so will come the end of osteopathy, just as have and will all sincere but aberrant systems of medical practice.

In 1898 the society respectfully refused to sublet its meeting room to the Christian Church for prayer meetings, but Dr. Buteau moved that the room, physically at least, have more and better light. The examining of the eyes of school children was discussed as a necessary prophylactic routine by the Board of Education. Resolutions directed against polyclinic and postgraduate medical schools that accepted irregular practitioners to their lectures, were printed and mailed to "The American Medical Association and to all Post Graduate Schools." The only mention of the Spanish-American War was by Colonel Chas. R. Greenleaf, Medical Inspector, U. S. Army, who talked to the society on his experiences in Cuba and the Philippines. He stressed the importance of the sanitarian and physician rather than the surgeon because of dis-

eases and the lessened damage done by the shape of the new bullet and its increased speed. He was enthusiastic over the usefulness of the X-Ray and the successful new abdominal surgery on the battlefield. He also displayed one of the army's first-aid kits.

1899 ended in another great spiritual wave of protest against "the crime of abortion"; with sixty new members and but $19.50 "remaining in bank"; and in the loss by death of the promising young Dr. Charles Morrison Fisher and the distinguished Dr. John Smalley Adams. Dr. Adams was born (1833) and reared in Vermont, graduating in medicine at Albany, New York. He came to California in 1863 because of his failing health, practiced in Alpine County, then in Napa County, and finally moved to Oakland in 1874. His son, Frank L. Adams, born in Troy, New York, in 1858, was reared in Oakland and graduated from the University of California in 1881, and from Cooper Medical College in San Francisco in 1883.

The 1890's was a decade that began with buggies acquiring rubber tires. Dr. Peter L. Wheeler was the first to drive one in 1893, according to Dr. Shannon, who remembers his own great interest in that new luxury. Dr. Shannon claims that, later, he and Dr. Crowley drove the first matched team of horses—Dr. Crowley a pair of greys and he a pair of blacks. He said that Dr. E. B. Boyes, a Canadian, silk hatted and frock coated, also drove a pair of beautiful blacks—an impressive sight. Bicycles continued to be useful to doctors for pleasure and work. Streetcar service was being extended and improved, the telephone was in general use, and Oakland was enjoying a steady growth as a city of homes as the train and ferry service across the Bay improved.

Undoubtedly the most impressive figure of this decade was Dr. John S. Adams, who completed and typed his last paper on the night before his sudden death. Its title was *Pleuritis or Pleurisy.* It was read to the society by Dr. Samuel Buteau and its yellowing papers still remain in the archives. His son, Dr. Frank Adams, was the leading surgeon, with younger men such as Doctors Crowley, Buteau, and Porter coming along. The only specialists were

Dr. L. R. Webster, residence and office.

the eye-ear-nose-throat men. Doctor W. F. Southard, A.M., was the first to get the word "ophthalmologist" recorded in the minutes (Feb. 1891) and two months later, Dr. Stratton had the word "obstetrics" in for the first time. In 1890 the argument of "antisepsis vs. cleanliness" was carried over from the 1880's until it merged into the accepted technique of "asepsis." The therapeutic uses of the galvanic and faradic currents were also discussed in 1890. A few men had tried both for six years or more. Most of the men believed only in their "non-permanent stimulating effect." Dr. Mauzer entertained the Society by exhibiting "under the microscope . . . crystals of phosphate and cholesterin as washed from the feces of a patient suffering from biliary calculi." Dr. Franz Kuckein repaired a lacerated perineum by the "flap method of Lawson Tait but he used chromatized catgut instead of silver wire."

Dr. Crowley read a paper in 1891 on *Intestinal Anestimosis* (spelling is that of the secretary) in which he explained that much of his technique was based on his experimental work on dogs. He "stabs a dog in the abdomen then operates on the assaulted dog," finding the intestinal stab-wound by rectal injection of hydrogen gas. He continued his dog surgery for some years, and included the use of the Murphy button, a new metal device for intestinal anastimosis. Dr. Antoinette Buckel reported on the merits and demerits of California hot-springs such as at Byron and Bartlett and other health resorts. Dr. Southard reported on his examination of 311 freshmen at the University of California in 1889-90, of whom 40 per cent had optical defects, women more than men. Dr. George Brinkerhoff discussed the Crede method of using 2 per cent silver nitrate as a prophylactic against ophthalmia neonatorum. Dr. James L. Mayon read a paper on *Malaria—What is it? Bad Air or Noxious Microscopic Organisms?* The word typhoid-malaria had long since been abandoned. In 1893 there were 305 cases of typhoid fever in Oakland with 27 fatalities. This local outbreak was studied bacteriologically, the bacilli traced to a dairy near Temescal Creek near the present streetcar barns at 49th Street and Telegraph Avenue. But malaria, even though successfully

treated, was still a "what is it." The malarial plasmodium was discovered by Alphonse Laver in 1880, but its transmission to man by the anopheles was not proven until 1889.

By 1895 it was generally agreed that appendicitis should be operated on as early as possible. "But was pneumonia an infectious or contagious disease?" asked Dr. Eastman. The treatment was discussed chiefly by Doctors John and Frank Adams, who favored ergot, calomel, poultices, cupping, digitalis, etc., and it is very interesting to add, the new but short-lived member, Dr. Charles M. Fisher, recommended "inhaling oxygen" for those "who seemed about to die." In 1896 Dr. Peter Wheeler gave his experiences with "Kleb's Tuberculin" in the early stages of tuberculosis beginning treatment with minute dosage. Some of the doctors were inclined to show an enthusiasm for tuberculin that Dr. Fisher did not share.

In 1897 food adulteration was the subject. The art of food camouflage was rampant. A machine was in actual production of imitating coffee beans. During March of this year, Dr. Frank Adams was the first to read a paper before this society on diphtheria as "an acute contagious disease, produced by a specific germ of proven identity." On February 3, 1895, "Dr. Frank Adams of Board of Health [had] cabled to Berlin for an ounce of anti-toxin . . . the wonderful diphtheria cure . . . at the instance of Mayor [Doctor] Pardee who believes the department should have a small supply on hand." Loeffler's work with cultures obtained from diphtheritic throat membranes entirely uninfluenced by meteorological conditions had been reported by Dr. Joseph Wythe in 1891 in the *Pacific Medical and Surgical Journal.* Another new and brilliant member, Dr. H. A. L. Ryfkogel, followed Dr. Adams with a paper on *Serum Therapeutics,* in which he stated that diphtheria antitoxin neutralized the death-dealing toxins generated by the Klebs-Loeffler bacillus. He said that "freshly-drawn blood has a decided germicidal tendency. Tuberculosis of the abdomen is cured by an incision as it increases the leucocytes, tubercular arthritis is relieved by ligation which produces congestion . . . the amount [of toxins] required depends on the amount of poison in

the system." "Evils following the use of serum are due to poisons in the serum other than the toxins." Yet, even though the good news of diphtheria antitoxin had been reported at the 1895 state society meeting, and even though Dr. Ryfkogel reported 50 per cent less mortality with its use, there was an understandable reluctance to use the new serum. Serum sickness was already a recognized complication that had its own mortality record. The necessity of early diagnosis was emphasized and a competent bacteriologist in the City Health Office was urged. Later in the year (1897), Dr. Fisher gave an exhibition of 90 slides of normal and pathological tissues. He was assisted by Dr. W. A. Clark, an excellent surgeon and known for his pioneering hobby in color photography. In the words of Dr. Myra Knox, secretary, "those who were absent [17 present] lost something more highly scientific than is usually found in any Medical Society."

In March of 1898 Dr. Fisher read a paper on *The Cell and its Relation to Heredity,* which was sincerely complimented by Professor William Emerson Ritter, famous zoologist and biologist of the University of California. Unfortunately, this biologically minded young man died five months later. The uses of "normal saline," externally, subdermally, and intravenously, was marked for favorable discussion. Dr. Ryfkogel warned against the use of antiseptics in fresh wounds, that they not only irritated the wounds and removed "vital material able to resist bacterial invasion," but formed a fine layer of "dead material that formed a culture medium for them." In May he read a paper on *The Parasite in Malaria,* illustrated by charts and blood pictures at "various stages of the disease." In September Dr. Frank Adams read a paper on *Vaginal Hysterectomy,* which Dr. Krone considered as "nature's own route."

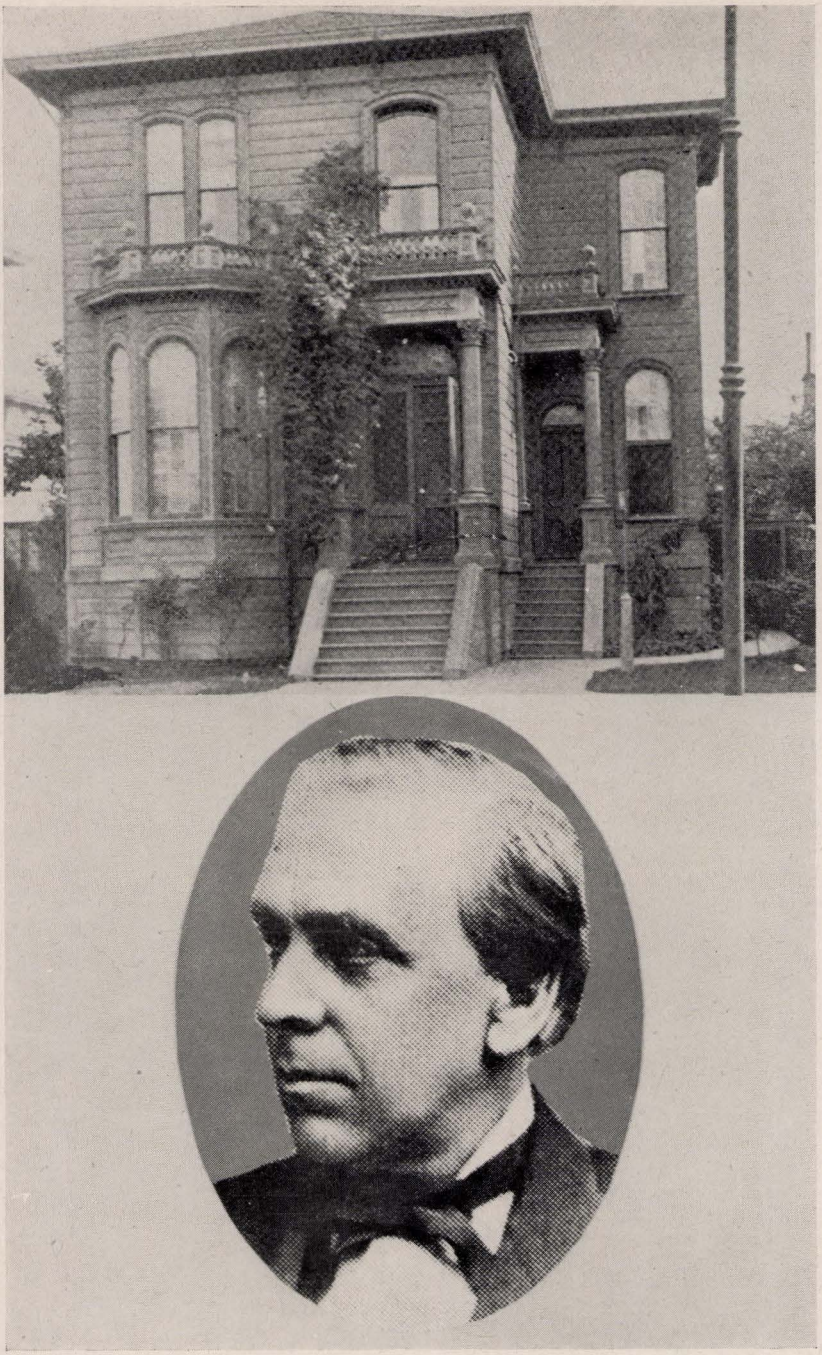
In 1899 Dr. J. H. Barbat of San Francisco read a paper on *Appendicitis,* a very live subject, and Dr. Carl Krone one on *Anesthetics.* A mixture of alcohol 1 part, chloroform 2 parts, and ether three parts, called "A.C.E." was popular in the 'nineties and later, but Dr. Krone liked chloroform and, as the secretary hurriedly recorded it, the doctor uses it "drop by drop and speaks assuringly

to the patient. When the heart stops beating use faradic battery"(!) Dr. W. S. Porter spoke of the importance of thorough knowledge and experience with anesthetics. His advice was that when in doubt or inexperienced, "use ether as the less dangerous."

The last meeting of the year was a whole evening of discussion on *Resection of the Pudic Nerve* for the cure of pathologic masturbation, perverts, and degenerates—an operation that was first done and more or less popularized during the 'nineties. Dr. Ryfkogel concluded the program with a paper on *Leucocytes and Leucocytosis,* describing at least six varieties of the former and a physiologic and pathologic variety of the latter.

Dr. Edward von Adelung, soon to be city health officer, began his life-long fight against tuberculosis, the most formidable of killers. Ten thousand circulars were distributed to the public in Alameda County that stressed its danger, and its prevention. An anti-expectoration ordinance was passed, and streets, streetcars, and trains were placarded to remind the people. Lectures on sanitation were commenced in the schools, and a garbage crematory was eventually erected. Further improvements in plumbing and sewerage were introduced. The Board of Health issued monthly bulletins. The ACMA backed up all these measures. Its own Dr. Pauline Nusbaumer became City Bacteriologist, Dr. Charles H. Rowe, City Chemist, and brilliant R. A. Archibald, D.V.S., meat-market-milk inspector.

Thus the Association came to the close of the 19th century—sharing in the new-found knowledge; working with the new-born essentials, bacteriology, pathology, and roentgenology; and anticipating a new era of specialization. The decade of the 1890's was the epochal link between "old" and "modern" medicine.



Dr. Joseph H. Wythe, residence and office.

Chapter Seven

1900—1920

The first new member in the new century was Dr. W. H. Maxson, who owned a private hospital on 28th Street. The first applicant was Dr. Charles Alfred Dukes, who became a well-known surgeon, president of the California Medical Association, vice-president of the American Medical Association, and a conscientious participant in national committee work. The first case to be reported was that of an eighty-year-old man cured of lupus after five months of X-ray therapy by Dr. Carl Krone.[1] Dr. Krone exhibited four more cases of successful X-ray treatment of lupus at the July meeting.

In June, 1900, the society did a unique thing. It held its meeting in the home of the venerable genius, Dr. Joseph H. Wythe, who, since 1897, had returned to the society after resigning his honorary membership in 1881. Twenty members were present to hear the little old medical warrior speak briefly of his long career in the East, in the army during the Civil War, and in private practice and teaching on the Pacific Coast. He followed his reminiscences with a talk on *Capillary Blood Pressure.* The career of this remarkable, seventy-eight-year-old preacher, teacher, author, and scientific-minded physician-surgeon came to a close in another year (1823-1901).

Later in 1900 Dr. Ryfkogel gave an address on *Bubonic Plague,* a disease from the Orient that hit San Francisco early in

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[1]This same year Dr. J. M. Selfridge, homeopath, was reputed to have cured a cancer with the X-ray, for which he was ridiculed. Dr. Philip M. Jones of San Francisco (1870-1916) was the first to use X-ray in the West in 1896, and the first to use it on lupus.

1900. For months it made the headlines from coast to coast as some members of the medical profession, big business men, state politicians (including the governor), and even the State Board of Health, denied its existence. Dr. Ryfkogel, one of the bacteriologists of the State Board of Health, insisted and proved that the plague did exist in San Francisco. He had transmitted the disease from cases found in Chinatown to guinea pigs, and cured the pigs with Yersin's serum. The denials by business and political interests became a state scandal.

Another matter of great importance in this year of 1900 was the aroused public attention paid to a pure milk supply. Four women, Doctors Antoinette Buckel, Sarah Shuey, Mary D. Fletcher, and Mary B. Ritter[1] were the Milk Committee. Doctors Fletcher and Ritter were delegated to investigate all the dairies in Alameda and Contra Costa counties—a rugged order for two women. Oakland was still very mindful of its recent typhoid epidemic that had been traced to a Temescal dairy. It was stated in meeting that cow barns were usually filthy, as were the sides and udders of the cows; that the clothes and hands of the milkers were "very dirty"; and that the demonstrable sediment "found in ordinary milk contains sticks, wings and legs of insects, hay, blood, pus, bacteria and a large amount of excrement. . . . Women who will not be satisfied with anything but clean milk from cows tested for tuberculosis can have more influence on dairymen and milk dealers than any law." Dr. Rowell stated that the demand for milk from a certain well-regulated dairy in Berkeley greatly exceeded the supply. It was urged that "the course in education begun by the U. S. Department of Agriculture should be retailed to the housewives. The law itself did not avail. It had to be implemented with state inspectors of milk supply and transportation." The new public health officers out of the Association would soon demonstrate their competence.

Another subject, not so unanimously contemplated as bubonic plague and a pure milk supply, was the plan for a medical college.

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[1]*More Than Gold in California,* 1849-1933, Mary Bennett Ritter, Berkeley, California, 1933.

Certain men such as Doctors Thomas, Frank Adams, Ewer, Eastman, Crowley, Krone, Buteau, and Stratton, members of a study group in surgery, decided that a medical school would furnish the Eastbay area with a scientific, scholarly stimulant such as the schools in San Francisco did for medicine there. The population of Oakland had grown to over 75,000 and the whole metropolitan area to about 130,000. There was no lack of needy poor. The college would provide the proper type of free clinic—that for teaching purposes. The intent behind the plan, already activated, was as open and sincere as it was determined.

At the last executive meeting of 1900 Dr. Rucker started a verbal free-for-all when, in reference to the "reported opening of a Medical College," he wanted to know if its contemplated free clinic "would absolve each member from his pledge not to attend Lodges on the contract plan."

The year 1901 opened with a paper on *Cocaine Anesthesia,* by Dr. James Shannon, apparently the first to use it for local injection. The others, so far, had been fearful of shock, idiosyncrasy, and "the bad effect on the patient who could see what is done and hear what is said." Cocaine in one-half-of-one-percent strength came into general use for "local tonsillectomy" and minor operations until supplanted by the less toxic novocaine about 1912. Dr. August Lillencrantz made application "to be restored to active membership" at the same meeting, and then Dr. Overend introduced the following resolution:

> WHEREAS: Ample medical educational facilities exist in the metropolis across the Bay, easy of access by students resident in Oakland, and
>
> WHEREAS: The number of practicing physicians is already in excess of the public needs,
>
> THEREFORE: Be it resolved by the Alameda County Medical Society that the organizing of a Medical College in Oakland, is to be disapproved as serving neither the public needs nor the welfare of the medical profession.

It was seconded by Dr. Rucker, but discussion on it was promptly postponed until the February meeting, which was quickly converted into its executive session, when papers were read on the above resolution. Dr. J. H. Todd unsuccessfully attempted to

intercept the papers by a motion to keep the resolution "on the table" on the plea that "the Society had no right to limit its members" in this wholly ethical project. The papers were read by Doctors Adams, Stratton, and Maher, all proponents of the college. "Remarks" (!) were made by Doctors Overend, Rucker, Kelly, Crowley, Kitchings, and Todd, and the over-heated discussion closed by Dr. Overend, who had to insistingly demand that privilege as originator of the resolution. Dr. Rucker asked for the secret ballot, but Dr. Thomas demanded a rising vote. The ballot box won, but the resolution itself failed. Of the forty members present that night, twenty blackballed and eleven favored the resolution of disapproval of the college. The noise of the fissured feelings that evening reverberated down through the next twenty-five years, as Dr. Buteau later joined the opposition.

With the exception of a later and final futile protesting resolution, this formally ended the medical school quarrel in society meetings, but for reasons human and not necessarily good, it provided the dominant cause of a factional split among the members that the next banquet and a palliative singing of Auld Lang Syne could not restrain. Only death brought final healing.

The opening semester of the Oakland College of Medicine and Surgery on the northwest corner of 31st and Grove Streets began on September 15, 1902. While the building that was specially designed for teaching purposes was already under construction, Dr. Sarah Shuey offered the final protest: "Whereas the impression had gone out that the Alameda County Medical Association endorses the establishment in Oakland of a Medical College, and whereas the undersigned members of the above-named society believe that there is no need of medical schools in this vicinity . . ." then, for three more whereases, attention was called to the two medical schools in San Francisco with universities back of them, and to the already too many, poorly equipped, medical schools graduating too many, poorly trained, and incompetent physicians. Two other protestants were Doctors Overend, president, and Pratt, secretary. Consideration on the resolution was postponed until the next meeting when it was prudently withdrawn by Dr. Shuey.

At the same meeting Professor W. E. Ritter, famed zoologist of the University of California, addressed the society on *Preliminary Requirements to a Medical Education.* He emphasized the new, vast field of preventive medicine, and stated that the future great advances in medicine would be in biochemistry.

The college was intended to be small and well equipped with a properly staffed faculty to train a small class each year, by careful, individual instruction and personal supervision. For sixteen years it did that very thing successfully. It graduated thirty-four men and four women, of whom only one failed to pass the state board medical examination on the first try, and all of whom, with one or two exceptions, have become successful physicians, and some outstandingly so. The first announcement booklet of nineteen pages (1902-1903) was issued in August and listed on the Board of Directors:

Frank Lemuel Adams, A.B., M.D., President
Carl Rudolph Krone, A.M., M.D., Secretary
Hayward G. Thomas, M.D., Treasurer
D. D. Crowley, M.D.
Edward Norton Ewer, M.D.

and as officers of the faculty:

Joseph L. Milton, M.D., President
Robert T. Stratton, M.D., Registrar

The booklet also announced the bequest from wealthy Dr. Morris Herzstein of San Francisco of a complete bacteriologic and pathologic laboratory.

The last announcement (50 pages) issued May 1917, for the 1917-1918 session, listed the Board of Directors as:

Hayward G. Thomas, M.D., President and Treasurer
D. D. Crowley, M.D.
Lemuel P. Adams, A.B., M.D.
Edward Norton Ewer, M.D.
Wm. H. Strietmann, M.D., Secretary

and officers of the faculty as:

Lemuel Payson Adams, A.B., M.D., President
Edward N. Ewer, M.D., Registrar
Thomas J. Clark, M.D., Recording Secretary

There were two specific causes for closing the Oakland College of Medicine and Surgery in 1918. The basic one was the lack of finances to pace the rapid progress of scientific medicine. The

excitant one was the first World War. The building and real estate was transferred by title to the county of Alameda for its charitable purposes as a city and county free clinic, in return for which, the county agreed to "forever" provide a location for the library and for the meetings of the ACMA.

During 1901 the old unfinished matter of lodge practice was still striking fire. A committee reported that some of the lodges had "raised their sick benefits" and had given their members the choice of physicians. The names of three Berkeley physicians were mentioned as still doing lodge work. By February of 1902 the former act of the society to ostracize professionally fellow members who engaged in lodge practice was, after a "very brief discussion," rescinded by a vote of 17 to 7. Dr. Rowell benevolently (and more eloquently than recorded) stated that "the physicians of Berkeley were but little interested in the subject, that they lived in the country, and that they all loved themselves and each other and hoped so to continue." "The doctors remarks were applauded." Dr. Rowell was a gifted public speaker, the orator of the Berkeley Elks Club, and he knew how to manipulate the "organ stops."

The above action was severely criticized by some of the members, and particularly by a formal communication from the Alameda County Homeopathic Society. The action finally taken after many whereases and wherefores was directed more to the ethical conduct of participants in lodge and contract practice than to the practice itself. For these many years, now, lodge practice has been tolerantly shrugged off as "O.K." for those that like it.

An important event in organized medicine came in 1902. It was the affiliation of county, state, and national society, predicated on the reorganization of the American Medical Association at its 1901 meeting in St. Paul, when it was planned to base its own membership upon membership in state societies, which in turn, was to base their membership on members of county societies. The California Medical Association sent its first communication in March regarding the plan, calling attention to its own change in by-laws and constitution. By September the necessary changes in this society's constitution were apparently made, for "the secre-

tary was instructed to apply to the state society for recognition." The "report was accepted and the committee discharged." The exact formal action by the Association was not recorded.

The year 1902 saw a "Hospital and Medical Help Association" rear its strange, unwelcome, social-minded head some thirty years ahead of its time. It had been "claimed by a streetcar employee that if 300 members could be obtained, dues to members would be 50 cents a month, children free, and confinements $12.00. If such was the plan [said Dr. Buteau] the society should know more about it, otherwise let those who do know about it, deny its truth." Dr. von Adelung thought the subject should not be brought before the society but Dr. Shuey and others believed it should . . . "in good faith and in a friendly spirit." Thereupon Dr. Thomas said that he was one of the physicians of the hospital association, that he compared the proposed plan to the French Hospital in San Francisco.[1] It was designed to reach the poor only, the "day laborer" class, and to exclude those earning a "reasonable salary." Dr. Ewer spoke in favor of the proposed plan and Dr. Frank Adams against it. It was the first feeble effort to supply good medicine to the strictly low-income groups on a prepayment plan.

This eventful year closed with a long interesting paper by Dr. Kate Van Orden on *Three Months at Johns Hopkins.* She had watched the famous foursome, Osler, Welch, Kelley, and Halstead. She described in detail Dr. Halstead's two and three-hour radical removal of the breast. But it was while following Dr. Osler about that she came to know why Johns Hopkins had acquired its great reputation as a medical school.

One of the first acts of 1903 was the accepted resignation of Governor George C. Pardee and the placing of his name on the roster of honorary members. Like his father, Dr. E. H. Pardee, he was an oculist and aurist of Oakland, member of this Association, member of the Board of Health, and a mayor of Oakland. One of Dr. George Pardee's opponents for the office of Mayor in 1892 was the aggressive Dr. E. H. Woolsey. In 1902 Dr. Pardee was

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[1]Members of the French Mutual Benefit Society pay a monthly assessment of $1.75 for medical, surgical, and hospital care.

elected governor of California by a big majority. He was also a regent of the University of California. Later he reorganized the East Bay Municipal Utility District and was its president until his death in 1941. He was a man of wit, education, ability, and personal charm, "one of the most beloved citizens in the history of Oakland."

One of Dr. Pardee's first best acts as governor was the appointment of fifty-four-year-old Dr. Newel K. Foster of Oakland as Secretary and Executive Officer of the State Board of Health. This Board had sunk to its lowest ebb with practically no organization remaining. To Dr. Foster full credit is given for the reorganization of the California State Department of Public Health. From 1903 through 1909, "he secured the passage of fundamental legislation that has established the pattern upon which the present state public health organization is built." It was a one-man accomplishment. From 1910 to 1920 he was Director of Health Development and Sanitation in the Oakland Public Schools. He died in 1906.[1]

Another act of the Association in 1903 formed a Board of Trustees to replace the Judiciary Committee and the old Board of Censors. The annual dues were raised from five to six dollars in order to pay one dollar per member to the state society. The state society dues were raised to three dollars four years later. In August of 1904 it was suggested that $150.00 be raised among the members as a contribution to the $25,000.00 fund that the American Medical Association proposed to create for the family of the late martyred Dr. Walter Reed of yellow fever fame.

Therapeutic hypnosis was a subject of much interest about this time, and so was the Russo-Japanese War. A paper on Japanese medicine was read by Dr. E. H. Woolsey, who had just returned from a visit to Japan. Compulsory vaccination for smallpox was agitating this and other medical societies because certain forces were attempting to modify the state law. One of the prominent members, Dr. W. D. Huntington, read a paper on *Biliary Calculi.* He spoke in defense of the favored operation of that day, a tortur-

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[1] *California and Western Medicine,* December 1945, page 275.

ing hesitant procedure that consisted of finding the gall-bladder and suturing it into position in the wound, then waiting a day before opening it. Several more days were necessary to drain out all the stones and debris. It is of reassuring interest to add that during the general discussion, "several physicians favored removal of the gall-bladder."

Dr. Clinton Cushing, one of the young founding fathers of this Association, its first treasurer and its second president, died in Washington, D. C., in 1904, aged 64. He came to Oakland in 1867, two years after graduation from Rush Medical College. Even though he was Professor of Obstetrics and Diseases of Women and Children at the Medical Department of the College of the Pacific, he remained an active member of this society, attending its meetings and reading papers until 1880, when he was made Professor of Gynecology at Cooper Medical College.

He and his beautiful wealthy wife were socially prominent. They maintained a home in the national capital and traveled extensively. He was a versatile raconteur, gave his lectures in full evening dress, and made afternoon professional calls in full dress and silk hat, riding in a coupe behind a pair of spirited horses and a very dignified driver. When President and Mrs. McKinley visited California in May of 1901 and Mrs. McKinley fell ill in San Francisco, it was Doctors Cushing, Henry Gibbons, Jr., and J. O. Kirschfelder who attended her. He always was proud of his friendship with the famous surgeon, Sir Lawson Tait, and rarely failed to mention him and his Staffordshire knot used in tying off the Fallopian tube.

In 1905 the April meeting was converted into "a reception" to Dr. Frank L. Adams, third president of the state society from Alameda County. Dr. Pinkerton was the first in 1873, Dr. Wm. Gibbons was the second in 1885, and then in turn, after Dr. Adams, Dr. Oliver D. Hamlin in 1912, Dr. Edward W. Ewer in 1926, Dr. George F. Reinle in 1933, and Dr. Charles A. Dukes in 1939. In August 1905, an important move was made to provide more time for the regular meetings. An Executive Board was created to transact all business of the Association in lieu of the

executive session heretofore held after each regular session. The meeting room was moved from the Canning Block at 13th and Broadway (since 1901) to Forestor's Hall, corner of 13th and Clay, from March to September, and then to the Athenian Club on the northwest corner of 14th and Franklin.

Although the Association was growing in numbers with well trained men and women from grade A medical schools, the meetings were suffering from the blight of dissension. When Dr. Maher turned the president's chair over to Dr. Ewer, he expressed "the hope and the wish that mutual courtesy and respect would characterize the relations of the society." When Dr. Ewer performed the same little formality for Dr. Shannon a year later (1906), he said to an audience of only fourteen members that county societies had reaped much criticism from the medical press, some only of which was deserved by this society. It was asserted, he said, that scientific papers were rehashes of text books, were unscientific, and that discussions were too often evasive compliments to the readers of papers rather than constructive criticisms. Dr. Ewer admitted that these criticisms applied only "some of the time." Dr. Shannon, in turn, pleaded for unity and for "a home of our own."

The next meeting (March 1906) was held in a room on the third floor of Dr. Shannon's new three-story building at 1728 Telegraph Avenue (west side). The following month a five-year lease was signed to include use of the elevator. Members—at least some—subscribed ten dollars each for furnishings. This was, for a while, a "home of their own." There was, however, no meeting in April, largely due to the great earthquake and fire disaster (April 18th) in San Francisco crowding the Eastbay with refugees. There were only twelve present in May, no meeting in June, and fifteen in July. This low ebb in attendance was doubtless affected by the Bay region catastrophe, yet the latter was referred to once only when the secretary, Dr. A. H. Pratt, wrote: "The subject of assisting the San Francisco physicians was then discussed, and a motion was made and carried that a committee of three be appointed to solicit contributions."

The impact of the San Francisco disaster on Oakland was tremendous. The sudden influx of masses of refugees from across the Bay presented not only the problem of food and shelter but with the dispossessed people came the sick, the injured, and the pregnant. Every hospital in the Eastbay was overflowed. Temporary emergency hospitals were housed in car-barns and other structures; Dr. Dudley Smith and others were in charge of them. Dr. Frank Adams, with Doctors Sill, Larkey, Dukes, and Williams were the Board of Health. Dr. Edward N. Ewer, City Health Officer at the time, was appointed chairman of the Committee on Health by Mayor Frank K. Mott. In the society's archives are Dr. Ewer's reminiscences of his struggles for sanitary measures, especially at the tented camps on the Lake Merritt shores, the big Chinese camp, and the typhoid fever camp of twenty patients guarded by the military.

Later in the year a representative of the "Cutter Anti-toxin Company" addressed the Association on the making of antitoxin, and by his company in particular. The actual name of this new company was The Cutter Analytical Laboratory, then and now the only biological laboratory west of the Mississippi River. It was originated by E. A. Cutter, a pharmacist of Fresno, who started a clinical laboratory in the rear of his drug store in 1897. By 1900 he was producing a blackleg vaccine for cattle. To escape the heat of the San Joaquin Valley, he moved his plant to Berkeley. By 1904 he was marketing anthrax vaccines, tuberculins, mallein, diphtheria antitoxins, anti-streptococcus serum, and smallpox serum. When the earthquake of 1906 struck, Cutter Laboratories (its present official name) was dramatically brought to the serious attention of the doctors of California. Before World War II it had 250 employees and during that war, it had 750.

The Journal of the American Medical Association for April 21, 1906, was an Automobile Number. It was full of short illustrated articles by and of doctors and their automobile successes and troubles from coast to coast.[1] The first citizen of Oakland to run

[1]A reprint of the original is in the Library of the ACMA. In 1895 there were four registered autos in the U. S. 1000 were built during 1898, 4192 in 1900, 11,235 in 1903, and 33,200 in 1906.

his own car was young Dr. L. E. Nicholson in 1898, "allopathic" son of the homeopath Dr. Isaac E. Nicholson. By 1903 he had purchased his third car—all of them steam-motored—with a total of 30,000 miles and a maintenance cost of $30.00 per month. In 1903 Dr. N. H. Chamberlain was president of the Automobile Club of fifty members. There were one hundred and fifty owners of motor cars in Oakland at this time. During 1903 there were a number of doctors using these cars in their professional work, some of whom were Doctors A. L. Cunningham, John Fearn, E. E. Sill, L. E. Keller, G. W. Rudolph, Kergan, and Lilley,[1] and out in the Livermore Valley was Dr. Wm. S. Taylor with his new Haynes-Apperson. By 1906 most of the doctors in Alameda County had motor cars. A few horse lovers such as Doctors Shannon and Thomas were the last to give up their buggies.

The society gathered new life during 1907 with its membership up to 131. In January it had something of a "revival meeting" precipitated by Dr. Dukes as chairman of the program committee. He said that at a meeting to greet Dr. McCormack, representative of the American Medical Association, only seven members appeared. He also said that all the suggestions of Dr. McCormack for better and bigger meetings had been tried and had failed, that "Alameda County has numbers of men well qualified to produce instructive papers but lack of interest or something else keeps them silent." Dr. Lemuel P. Adams, member of the same committee, testified that as a rule "the committee would have to approach six members before finding one who would consent to prepare a paper" and even that one of six would frequently telephone his inability to appear. Few members attended, therefore, and, in turn, there was less incentive to appear on the program. Dr. Frank Adams, cousin of Dr. Lemuel P. Adams, in a punitive mood, said, "as the third medical society in size, we fill a very small space of importance in the medical affairs of the state." Dr. Thomas McCleave thought the society would have to forget its "factional differences and have officers who had earned the honor

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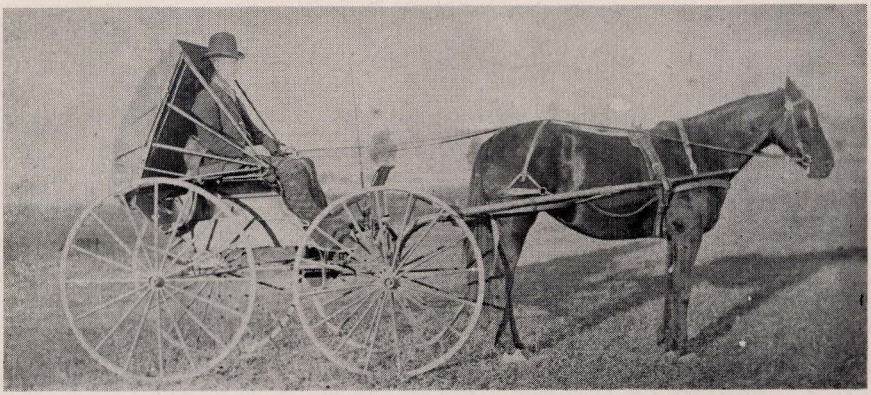
[1] *Oakland Enquirer*, November 7, 1903.



Dr. Hayward Thomas with his first horse and buggy and derby hat.

Dr. Wm. S. Taylor in his 1902 one-cylinder Haynes-Apperson, first automobile in the Livermore Valley.

and who would work." Dr. Krone admitted that he was "sourballed." Dr. Daniel Crosby and others pleaded guilty and promised to work for the good of the Association.

Two stimulating men came to Oakland about this time. Dr. Martin Fischer, present Professor of Physiology at the College of Medicine of the University of Cincinnati, came in 1902 from the pathological laboratory of Dr. Ludwig Hektoen of Rush Medical School, University of Chicago, to the University of California in Berkeley to be assistant professor in physiology. He came under the wing of the widely known Dr. Jacques Loeb of the University of Chicago. At Berkeley he began his original thinking on his colloid-chemical theory of water absorption and secretion by living matter. When he published in the *Journal of the American Medical Association* an article on *A Physio-Chemical Theory of Fertilization,* he offended Dr. Loeb and was forced to resign from the University of California.

This also forced him into the private practice of medicine in 1904. At the State Board Medical Examination he made an all-time high in grades. During the summer of 1905 he was the appointed doctor in Yosemite Valley and made enough money to spend the winter studying in Europe. He returned for the 1906 tourist season in Yosemite Valley, after which Dr. Dudley Tait of San Francisco, Chairman of the State Board of Medical Examiners, recommended him to the Oakland College of Medicine. He came to Oakland in the fall of 1906 as Professor of Pathology and with the opportunity to practice internal medicine. This was a happy arrangement for, according to his own recently written statement, it gave him the opportunity to continue independently the study of his colloid theory with special attention to its relation to glaucoma, coma, and nephritis. While a member of the faculty of the Oakland College of Medicine, his first book, *The Physiology of Alimentation,* was published. His next volume, *Oedema,* was published in 1910 and was a compilation of his dozen or more original scientific papers written during this four-year period. The book was immediately translated into German and later into Russian.

In 1910 Dr. Fischer accepted the offer of a full-time position for teaching and research at the University of Cincinnati. Two years later, from there, his third book, *Nephritis,* appeared. On the subject of that book, he wrote: "I had come to colloid-chemical conclusions before I ever took ticket out of Oakland." He gave up his membership in the Alameda County Medical Association in 1914 and was immediately placed on the honorary list.

Dr. William B. Wherry arrived January 15, 1907 to be Professor of Parasitology at the Oakland College of Medicine and Surgery. He had been in Manila, P. I., since his graduation from Rush Medical College in 1901. A few months later he also was bacteriologist to the San Francisco Board of Health, where he became interested in rats, fleas, ticks, and bubonic plague. His first published article was *Insects and Infection.* While working in Oakland he made the startling discovery of plague among the ground squirrels in the Contra Costa hills during July 1908. This was his greatest contribution in epidemiology, wherein he proved that ship rats from the Orient were not the only carriers of bubonic plague. In September 1909, Dr. Wherry accepted the position of Assistant Bacteriologist in the medical department of the University of Cincinnati, then in the throes of reorganization. He devoted the rest of his life to making that school the present teaching institution it is. He contributed eighty-two publications in scientific journals, fifteen of them while in California. His biography, *William B. Wherry, Bacteriologist,* was written by his friend and colleague, Dr. Martin Fischer, and published in 1938.

During this year of reanimation (1907), there was another courageous attempt to construct a first-class hospital building. It was called the "Claremont Hospital Association" and was incorporated on February 8, 1907 with a capital stock of $175,000.00 divided into 35,000 shares at a par value of $5.00. Dr. Edward N. Ewer presented to the present writer, as items of curiosa for the archives, two certificates of ownership in that association—one for 2900 shares dated February 10, 1908. This was in the depth of the Panic of 1907. On them are the signatures of Hayward G. Thomas, President, and George F. Reinhardt, Secretary. Dr. Rein-

hardt was the originator of the student infirmary on the Berkeley campus of the University of California. It was the first of its kind in the United States. It has since become the present Cowell Memorial Hospital. Dr. Reinhardt died in 1914 leaving a widow who, two years later, became the president and builder of the reborn Mills College for women. The long and expensive efforts of Doctors Thomas, Ewer, and others in this and later attempts to construct a first-class hospital came to final fruition and reward in the present Peralta Hospital.

By 1908 there was an active membership of 161, the annual banquet was "resumed," and as a pre-Ripley Believe It or Not episode, the March meeting was one joined with the Alameda County Homeopathic Society! Doctors August Lillencrantz and Mark Emerson presented cases, and Dr. G. B. McClow read a paper on *Peripheral Endarteritis Terminating in Brachial Thrombosis,* demonstrating the latter with a specimen of the pathological artery. Doctors R. A. Archibald and Pauline Nusbaumer, pathologists and co-originators of the Western Laboratories, read a paper on *The Opsonin and the Opsonin-index of Wright,* then in vogue. It already was four years old and persisted for some years more as a forward step to serum and vaccine immunity.

During the preceding fall the Oakland Board of Health reported ten cases of bubonic plague with seven deaths. At the April meeting (1908) the thirty-seven members present signed Dr. O. D. Hamlin's formal petition of protest against certain non-medical people who, for business and political reasons, continued to impede the campaign of the Board of Health against the plague. A few months later Dr. Wherry proved that the ship rats from the Orient were in truth not the only rodent carriers.

On August 25th and 26th Dr. Joseph Price of Philadelphia was a guest of the Association. A surgical clinic was held at the county infirmary. "One hundred twenty-eight physicians were present and some forty automobiles being used." Eighty-seven remained for the banquet. The members were delighted with Dr. Price as a genial guest as well as a skillful surgeon and "instructive teacher."

In November Dr. Grant Selfridge, oto-rhinologist of San Francisco and son of the prominent Oakland homeopath, Dr. J. M. Selfridge, presented a paper, with a demonstration, on bronchoscopy. The year closed with the sudden loss of the society's most prominent member and surgeon, Dr. Frank L. Adams, on December fifteenth.

The year of 1909 was confined to medicine and surgery with the exception of one set of resolutions which implored the City Council to act favorably on the proposed Board of Health ordinance which provided inspection of meat and meat products brought into Oakland, together with "adequate inspection at the abbatoir as practiced by the United States Bureau of Husbandry."

The ever-living subject of illegal practitioners, however, was up for another toss. In the monthly-printed letter to the members, after announcing a program on *Certified Milk,* by Dr. Tom C. McCleave, the *History of the Alameda County Milk Commission,* by Dr. Sarah I. Shuey, and two related papers by Dr. A. Ward and Dr. M. Joffa of the University of California, the letter announced the trite information that the midwives, abortionists, and the numerous quacks were the really busy workers, not the doctors; that a certain notorious quack claimed that Oakland "was the easiest town he ever struck." The letter added that, "It is high time we were considering this matter seriously. A special fund, however, will have to be raised according to the enclosed letter."

The enclosed letter was one from Dr. Charles L. Tisdale, secretary of the Board of Medical Examiners, that urged every county society in the state to prosecute and rid its county of illegal practitioners of medicine, and that since the Board had no funds for such work, the county societies would have to supply their own finances. There is no record of action that was begun or completed toward this hopeless project.

In 1910 Dr. Pauline Nusbaumer of the Western Laboratories was elected secretary, and with her there came upon the society's record books the first neat, typed sheets of minutes; Dr. Martin Fischer presented his original work on *"The Nature, Cause and Treatment of Edema;* resolutions "proposed by Dr. Hubert Rowell,

and enthusiastically adopted, congratulated the Honorable Board of Supervisors of Alameda County on its decision to erect a new County Hospital (Highland) within the city limits of Oakland;" once more an effort was made even to the extent of pledges of from one to five hundred dollars for "a home of our own," and a library with a paid librarian; a letter from the State Board of Health was read announcing that syphilis and gonorrhea would be reportable as communicable diseases as of January 1, 1911; a recommendation by a committee of six to expel two members for violation of the state narcotic law was softened by changing the word "expelled" to "probation for six months;" an identification insignia for automobiles of members designed by Dr. Alvin Powell was adopted; and finally, the following adopted resolutions, proposed by Dr. William S. Porter are interesting reading in the bewildering light of the compulsory state and federal medicine threat of World War II:

> To consult with no doctors connected with Hospital Associations. That doctors connected with such institutions shall not be eligible to membership in the Society.
>
> That the Alameda County Nurses Association be notified of our action in this matter, and that support will not be given nurses who recognize these associations.
>
> That such hospitals as have not as yet been approached shall be asked to join in refusing hospital accommodations to these associations or the doctors connected with them.
>
> That the resolutions adopted by this Society be forwarded to the Pharmaceutical Society for its action.
>
> That the physicians connected with the various hospital associations be notified of the action upon these resolutions and given thirty days to withdraw therefrom, and that those refusing be listed as "irregulars," such list to be mailed to the professions throughout the county.

Most of these early schemes for pre-paid medical care were devised by laymen primarily for their own profit and, as Dr. Porter expressed it, "in adopting these resolutions, the laity cannot look upon our action as the work of a Union, for the members (16,000 in Alameda County) of these associations get no better service than their dollar [per month] demands, . . ."

The scientific programs were keeping up with the steady advance in medical thought, and were often improved by interspersing guest programs, such as this one on Public Health:

1. *Future Possibilities of Sewage Disposal for the East Bay Cities,* (twenty minutes) C. E. Grunsky, Former Consulting Engineer, United States Reclamation Service.

2. *Opportunities of the State Hygienic Laboratory* (fifteen minutes) W. A. Sawyer, M.D., Director of the State Hygienic Laboratory.

3. *Animal Diseases affecting the Public Health in Alameda County* (fifteen minutes) C. N. Haring, D.V.S., Assistant Professor of Veterinary Science, University of California.

4. *Needed Public Health Legislation* (twenty minutes) W. F. Snow, M.D., Secretary of the State Board of Health.

5. *The Question of Garbage Disposal in Alameda County* (twenty minutes) C. G. Hyde, Professor of Sanitary Engineering, University of California.

Although the lights in Dr. Shannon's building flickered out for the above program, it was resumed in the new YMCA building four blocks farther out on Telegraph Avenue. In accordance with this policy of securing occasional outside speakers, the San Francisco Medical Society gave a program and there were also such guests as Dr. Ray Lyman Wilbur of Stanford University and others of medical prominence from San Francisco and the East. Often the members met at the Fairmont County Hospital for medical and surgical demonstrations.

Doctors von Adelung and Thomas, believing that physicians should be the first to commend Dr. Harvey W. Wiley, Chief Chemist of the U. S. Department of Agriculture, for his epochal fight to establish the new federal pure food and drug law, suggested a congratulatory letter. Dr. Wiley's acknowledgment was read at the final meeting of 1911.

The society used the YMCA building at Telegraph Avenue and Hobart Street from November 1911 to January 1913. With expressions of appreciation and a donation of one hundred dollars to the YMCA, the meetings then were held in a large room on the second floor of the new Hotel Oakland at a rental of ten dollars a month with messenger service.

In March of 1912 Dr. William A. Clark resigned as superintendent of the Alameda County Hospital after seventeen years of service. The society gave him its warm resolution of "recognition of his faithful and efficient services to the poor people of the County." A Mr. Morrow of Los Angeles spoke to the Association

of the successful fight in his city that was begun two years previously. He said that whereas the ratio of the illegals to those legally licensed had been four to one, the ratio was reversed, all due to a revulsion of the apathy that still existed in all other counties. Dr. C. L. Tisdale of the Board of Examiners said that "Los Angeles had five hundred quacks and today there are only sixty-eight left. . . . It was the worst quack city in the United States!" Isn't it yet? asks the general medical opinion. Ridding this land of the free and the brave from medical quacks will remain a hopeless task until the ailing public ceases to want them.

During September of 1912 the society was excited over the threat of annexation of the Eastbay cities by San Francisco during the latter's unsuccessful efforts to compete with the territorial expansiveness of Los Angeles. Contributions for this and that has been a never-ending portion of the history of the society. This time the apportionment alloted to the medical and dental professions of Oakland to combat annexation was twenty-five hundred dollars. During this same month Dr. C. Antoinette Buckel, retired and living in Piedmont, died in San Francisco. She will be remembered as the first woman to be admitted, with reluctance and even distaste, to this exclusively male Association. In contrast to sentiments expressed thirty-five years before regarding her, are these: "In Dr. Buckel we recognize a woman of unusual personality . . . in her we honor one of the small group of women who defied public opinion and endured many hardships to open to womankind the profession of medicine . . . that we, the members of the Alameda County Medical Society, unite in expressing our high appreciation of her work and worth, of the inspiration of her life and the beneficient result of her labors . . . we honor her memory. . . ."

The state society met in Oakland in June of 1913. By the end of the year dues were raised from twelve to fourteen dollars even though there was a reported reserve of $1412.74 in the treasury "with one bill of ten dollars still to be paid." But the most interesting meeting of the year was the last one at which Mr. A. J. Pillsbury of the State Industrial Accident Board addressed the society on the subject, *Employees Compensation and Safety Act.*

No action was taken. It merely was concluded that "each man should decide for himself whether to accept work of this class."

There was much ruffling of feathers over the fee-schedule offered by the Industrial Accident Commission, but by August 1914, the society approved, by post-card vote, of "the Plan and Schedule of Fees as adopted by the House of Delegates of the California State Medical Society in regard to Industrial Accident Work under the Boynton Act."

In the same month, just four days after the outbreak of World War I, there came, at long last, a preface to the present Alameda County Medical Association Library. When Dr. George Reinle, chairman of the Library Committee, reported that a "municipal medical library is to be established in the new City Hall of Oakland," two hundred dollars a year was promptly appropriated from the treasury to purchase medical journals and books for it. The library was well along on its embryonic way in 1915 as part of the Municipal Reference Department of the Oakland Public Library housed in the City Hall. In December 1916, because the Reference Department was to be returned to the Public Library, the journals and books were ordered, by vote, to be moved to the Oakland College of Medicine and Surgery, "to join the Association's library already there." The College furnished a room and custodian in return for the use of the library. The society furnished a typewriter "not to exceed fifty dollars." A year later the Alameda County Library allowed two hundred and forty dollars of its general book fund to be allotted to books for the medical library of this Association, thereby making the latter a branch of the county library. When the College closed its doors soon after, the building was transferred to the county supervisors for clinic purposes, with the agreement that a room and a librarian's salary would be provided by the county. In 1925 a trained librarian, Miss Anna Kennedy, was installed. The county library continued to supply books and the medical Association the periodicals and binding of journals. After the economic depression of 1929, all expenses except that of the librarian, fell to the Association. This arrangement continues. In 1933 the library was moved to the Highland-Ala-

meda County Hospital and new furniture and equipment added. The cataloguing of the books follows the Library of Congress system of classification. An annually appointed Library Committee recommends to the council of the Association the purchase of new books and periodicals and the consideration of other matters pertaining to the operation of the library. In addition to members of the Association, nurses, medical students, interns and other qualified persons, have access to it. This is a brief chronicle of the origin and present set-up of the society's excellent reference library supervised by its able librarian, Miss Kennedy, and augmented (1946) by an assistant librarian.

Early in 1915 the society's back was bent to the work of Dr. C. G. Browning, President of the State Anti-Tuberculosis Society, in his successful urging of the state legislature to pass its two appropriative measures for the hospitalization and care of indigent tuberculosis patients. It then sent fifty dollars for the maintenance of the anti-tuberculosis exhibit at the Pan-American International Exposition in San Francisco.

In June of 1917 the Association purchased its first thousand dollar Liberty Loan Bond in World War I; and later gave two hundred and fifty dollars "to help defray expenses of Mr. Peabody of Boston in his series of anti-Christian Science lectures." It also generously remitted the dues of members in uniform and passed emotionally inspired resolutions asking every member to turn over to the secretary of the society "thirty-three and one-third per cent of all fees collected from any patient who is clearly a patient of a physician absent in government service," that each member shall inquire of each new patient, whether he has been a patient of one in the armed forces, that members do not attend a "patient of an absent physician for a period of one year following his return," and to persuade "any such patient to return to his own physician." These and other impractical measures such as requiring each commissioned doctor to send a list of his patients to the secretary of the society, who would write to all such patients imploring cooperation. Yet, in spite of the obvious difficulties, two or three of the

members, it has been said, actually did follow through by handing over received income to returned friends.

The County Medical Committee of the Council of National Defense had a list of physicians of the society whom "the authorities" considered available for military duty, "who were to be contacted and urged to enlist." None of the following volunteers needed to be tapped on the shoulder, although one or two scarcely beat the armistice:

ARMY

Warren B. Allen (overseas)
Sam Downing (overseas)
Albert M. Meads (overseas)
Alvin Powell (overseas)
Edward von Adelung
Lemuel P. Adams
Channing Hall (overseas)
Henning Koford
H. Gordon MacLean
Wm. S. Porter
Thomas Rea
W. B. Sando
A. M. Smith
Benjamin Thomas

NAVY

Wm. S. Kuder
Milton H. Shutes

Early in 1918 the following radical subjects appeared on one of the society's programs:

I. *A Tentative Plan for the Working of the Proposed Compulsory Health Insurance Act.* By Dr. Langley Porter of San Francisco.

II. *The Results of Compulsory Health Insurance to the Physician and Patient.* By Dr. W. E. Musgrave of San Francisco. During 1917 certain social-minded people, already forming the habit of making an experimental guinea-pig of California, devised a compulsory health bill patterned after certain European plans. In 1918 it was placed on the November ballot and was defeated by nearly three to one. In Alameda County by 58,271 to 16,546.

This same year the great war influenza epidemic struck. In November the society sent out frantic calls for more physicians to man the desperate situation in the "Emergency Influenza Hospital" that filled and overflowed from the arena of the new Municipal Auditorium. Those overworked doctors never forgot that tragic experience. Their automobiles were going day and night. When the society asked a leading oil company for consideration with the high price of gasoline, it received no reply. For the most part the

doctors did not receive or expect to receive the usual fees. It was a chaste demonstration of an unmixed call to professional duty.

In 1919 the first one thousand dollar Victory Bond was purchased. During this year the "noble experiment" of the Volstead Act was imposed upon the nation for four years. In July a Mr. W. Bruce Philips explained the new law's regulations for the sale and prescribing of alcohol and alcoholic beverages. Over night, good patients felt the urgent therapeutic need for whiskey. Whatever good or evil came to people, an insinuating kind of pressure was suddenly placed upon physicians to morally break the liquor law of the land.

During November an earnest plea for the health and pleasure of the people was carried by a special committee, in the form of six whereases and two resolves, to the City Council of Oakland urging the latter to accept a fair last offer to purchase the area known as Sather Park and Trestle Glen. This long, lovely glen was considered an important link in the city's park system. The society hoped to see it preserved as a health measure, but it met the fate of Dr. William Gibbons' redwoods in the 1870's.

Chapter Eight

1920—1945

How mellow must the years be before contemporaneous events become historically interesting? For this chapter, the answer will be: from now to TWENTY-FIVE YEARS AGO. If some of the more recent events merely recorded here seem less interesting because of their being contemporaneous, they at least serve for future reference.

The monthly meetings of the Association were applied almost entirely to general medicine. They prototyped the best in medicine and surgery and reflected the general scientific advance.

1920 A life membership in the Lane Medical Library was purchased; and the new insignia for automobiles of members of the American Medical Association was officially recommended.

1921 The first *Bulletin* of the ACMA, a small four-page folio (3.5 x 6 inches), appeared in September, apparently at the suggestion of the secretary, Dr. Pauline Nusbaumer. It was planned especially for the many members who infrequently, or never, attended the society meetings. The front page announced that the next regular meeting of the Association "will be held at the Public Health Center, 3105 Grove Street MONDAY evening, September 19, 1921, at 8:15 sharp. Piedmont 8505." Then followed the name of Alvin Powell, President, and Pauline S. Nusbaumer, Secretary-Treasurer, and their office addresses and telephone numbers. The second and third pages consisted of the program, new members, applications for membership, and standing committees. The fourth or back page listed the members of the Milk Commission and those dairies certified by the commission. With a few

deletions, modifications, or additions, this continued to be the general format of the first little *Bulletin* until its last issue of June 1945.

1922 The meeting place of the Association was changed in November from the Public Health Center at 31st and Grove Streets to the new Health Center Building at 121 East 11th Street, just completed to house the Alameda County Public Health Center and the Alameda County Tuberculosis and Health Association. It was not named the Ethel Moore Memorial Building in the *Bulletin* until 1924.

The society programs were, of course, contributed by members, but frequently guest speakers and guest programs were substituted. This year, for example (Oct.) Dr. Eva Reid, University of California Medical School, spoke on *Freud and the Freudians;* Dr. G. M. Stratton, Psychologist, University of California, Berkeley, on *Coue's Work at Nancy* [Day by day, in every way, I am growing better], and Dr. V. H. Podstata, Livermore Sanitorium, on *The Unusual Children.*

This year brought the sudden death of Dr. Sarah I. Shuey while at obstetrical work. She was one of the first women physicians (if not the first) to locate in Berkeley, and the first woman president of this Association. (Dr. Pauline Nusbaumer was the other.) After an unsuccessful hospital venture in southern California, she returned to Oakland and was associated with the distinguished Dr. C. Antoinette Buckel, until the latter's retirement.

1923 A program was presented by four members of the California Association of Physiotherapeutists.

1924 The ACMA became a member of the Oakland Chamber of Commerce.

1925 The January issue of the *Bulletin,* one of the occasional six-page issues, was the first to contain a presidential message. It was a buoyant one from cheerful Dr. H. B. Mehrmann[1] that seems to reflect the new Chamber of Commerce membership: ". . . another milestone passed . . . all the world has taken a new lease

[1]Genial Dr. Mehrmann died in November 1946 after 60 years of practice.

on life and is radiant with prosperity . . . California . . . the garden spot of all the world . . . let us go to work with a will . . ." This was the beginning of the great tidal wave of "prosperity" when elevator boys gambled on the stock market, but it ended four years later in deluge. The active membership of the Association was 344, the dues $18.00 ($10.00 to the CMA) and the financial statement was:

Commercial Account	$ 450.12
Savings Account	2717.76
U. S. Liberty Bonds	2000.00
	$5167.88

1926 A Medical Officer Reserve Corps was formed by Colonel Edward L. Munson after his speech before the Association. On a seconded motion by two of the too-old members, the Association "heartily endorsed" the patriotic movement to fill the California Reserve Corps quota, and urged eligible members "to promptly enroll." A similar volunteer group was formed by the Navy. These two groups were the first to be inducted into the armed forces fifteen years later.

The CMA met in Oakland. Pre-convention clinics at Fabiola, Merritt, and Providence Hospitals were conducted by Dr. Gabriel Tucker of Philadelphia, Dr. Emil Beck of Chicago, and Dr. John Pemberton of the Mayo Foundation. There was also much entertainment. Dr. E. N. Ewer was CMA president.

Before the year was out the Association lost by death the secretarial services of the beloved sixty-nine-year-old pathologist, Dr. Pauline S. Nusbaumer. A Nusbaumer Memorial Fund was quickly subscribed by ninety per cent of the members.

1927 For the first and only time the ACMA presented a program (March) before the San Francisco County Medical Association. A new by-law: every legally registered doctor of medicine must have practiced for one year in Alameda County before being eligible for membership in the Association. This rule was changed to the present classification of memberships when the hospitals ruled that only members of this Association could admit their

patients. See the *Bulletin* for February 1945—the Constitution Number.

Dr. James T. Percy of Los Angeles held a cancer clinic at Fairmont County Hospital, at which he demonstrated the Percy Cautery.

1929 The society began this last year of the 1920's with 410 active members and $11,288.10 in liquid assets. By December the membership had increased to 450 and the meeting place was changed from the overcrowded room of the Ethel Moore Memorial Building to the large Hunter Hall in the nearby administration building of the Oakland Board of Education at 1025 Second Ave.

1930 The Woman's Auxiliary to the Alameda County Medical Association was organized on September 15, a very efficient, cooperative organization—a good housewife.

A formal protest was made against members working for salary or fees for lay, profit-making organizations, such as the so-called Hospital Associations.

1931 The first tentative move was made to "compile a history of the ACMA." Dr. Frank R. Makinson was chairman of a committee "to see about it." Dr. Dennis O. Crowley died of pneumonia. He had joined the society in the 1880's and was president in 1890. The California-Nevada section of the American College of Surgeons met in Oakland April 23, 24, 25, and 26.

1932 Dr. Robert T. Sutherland was the first to write tentatively a monthly article for the *Bulletin* which he formally signed "The President." In the January *Bulletin* he warned the Association that plans already were cooking for the introduction in California of "a form of State Medicine similar to that now operating in England." On the program that month was the subject *Medical Economics,* reviewed by the fluent and well-versed Dr. Daniel Crosby, and discussed by Dr. Morton Gibbons of San Francisco. A demonstration clinic was held in March by Dr. Meakins, Professor of Medicine, McGill University, Montreal, and in September a children's clinic by Dr. W. McKim, Dean and Professor of Pediatrics, Washington University School of Medicine, St. Louis.

There came this year the death of the venerable Dr. Susan G. Fenton, and of Dr. William A. Clark who, when superintendent of the county infirmary, "changed a refuge or poor-house into a modern hospital." Liquid assets of the Association had increased to $14,064.72.

1933 The society resolved that "Whereas the public at large believes Fairmont and Highland Hospitals to be part-pay institutions with a medical staff that is paid for its services . . . petitions the honorable Board of Supervisors to change the name of Highland Hospital to Alameda County Hospital and Fairmont Hospital to Alameda County Infirmary." The change was made as suggested but modified later.

In February the subject was again *Medical Economics,* presented by Dr. George MacLeary, Director of Medical Insurance Activities in England, described in the *Bulletin* as "the most constructively co-operative director from the standpoint of the medical profession." Later, Dr. Walter Alvarez, of the Mayo Foundation, gave an instructive and entertaining talk on *Abdominal Pain.* Dr. George Reinle was president of the CMA.

1934 The first physician of Italian parentage to join the society died this year. He was the highly respected Dr. Caesar A. Querido, born (1868) in the Bear Valley (Mariposa County) site of General Fremont's gold mines. He had graduated in medicine at the University of Geneva, Switzerland, in 1897, and a year later located in Oakland.

An interesting program for February was *The Outlook on Malpractice Litigation,* by Joe G. Sweet, San Francisco attorney and brother of the Doctors Sweet of Oakland; *Testamentary Capacity,* by Dr. Hubert N. Rowell; and *The Medical Witness,* by Earl G. Warren, District Attorney of Alameda County, and later, Governor of California.

1935 The society's council urged the staffs of all general hospitals to confine their staff-meeting programs to case histories originating in their respective hospitals, and not include subjects rightly belonging in the scientific programs of this Association.

1937 The society sponsored a Doctors' Hobby Show under the direction of Dr. Paul Michael, pathologist of Peralta Hospital, at the California School of Arts and Crafts on March 27, 28, and 29. Its success was repeated in 1940 when 3000 visitors saw the exhibits.

Dr. H. Gordon MacLean was the first to boldly sign his name below the president's report or editorial in the *Bulletin.* In the January issue he succinctly described state medicine in three words. "Hello—Rx—Goodbye." The Association now had 500 active members and, adding retired and junior members, a total of 550. The dues were increased to $25.00, $15.00 of which went to the CMA. There were about 150 M.D.'s in the county ineligible for membership in the Association and some 25 or 30 non-members who were considered "reputable physicians practicing good, conscientious medicine." This smaller group was called "Moochers" in an editorial by Dr. MacLean, because they enjoyed all the benefits of organized medicine without participation in it. He expressed the hope, in the June *Bulletin,* that "in the near future all of the approved hospitals will allow only members of the ACMA to practice within their walls." He meant there should be no exceptions to the existing rule.

In October the ACMA and its Women's Auxiliary held a joint speakerless banquet—only "cocktails at seven," a good dinner, and entertainment.

1938 · $100.00 was donated for a medical exhibit at the Golden Gate International Exposition on man-made Treasure Island.

Resolutions were adopted to appropriate $2655.00 to cover membership fee in the society for the Promotion of Medical Research — an assessment of five dollars for each of the 531 members.

On February 24 the first doctors and lawyers (get-together) banquet was held at the Athens Athletic Club. There were cocktails and entertainment in abundance but it resulted in no demonstrable, useful, get-together good.

The cost of malpractice insurance steadily mounted higher with the trend of judgments against defendants. Some companies

ceased to cover, and one or two limited the coverage of the risk.

Dr. Frederic M. Loomis, because of a disturbing heart, withdrew from a large practice of adoring women. He and Dr. John Sherrick, something of a character in his own right, had been partners in obstetrics for fifteen years. Dr. Loomis came to Oakland in 1917 as the first specialist in obstetrics. Dr. E. N. Ewer, who came to Oakland in 1894, was already busy with a large practice restricted to obstetrics and gynecology. These two men are mentioned because they—both hard, day and night workers—each in his own way made successes of their autumnal years. As of 1946, Dr. Ewer, father of an obstetrician and of an orthopedist, remains a happy old warrior against "compulsory medicine" and an active, skillful obstetrician at the age of eighty-one—a rare achievement; and Dr. Loomis, an unhandsome but suave and colorful person among the women and around the poker table, has found a new and joyful life as the writer of a best-seller, *Consultation Room,* of *The Bond Between Us,* and of lucrative magazine stories of semi-fiction.

1939 The European War began. In an editorial of the April *Bulletin* President Frank H. Bowles optimistically wrote that the California Physicians Service "though new, is well conceived. No doubt as time passes imperfections will appear but a united medical profession working for it can make it perfect."

Dr. Charles E. Dukes was president of the CMA.

1940 This year the ACMA offered constructive criticism of the CMA sponsored California Physicians Service (CPS) that began to operate in 1939—criticisms that led to correction of errors and to major improvements.

Members filled out comprehensive questionnaires from the American Medical Association Committee of Medical Preparedness, designed to facilitate a program of medical mobilization—already under way by the CMA—at the request of the Army and the Navy.

On December 13 the council (ACMA) was already considering the professional welfare of members to be called into the services.

1941 The call of the Army and Navy came for volunteers as reserve medical officers. Pro-rated Association dues were refunded to members joining the armed forces and further dues were canceled entirely for the remainder of their service and for six months thereafter.

The tall, dignified, and competent internist, Dr. W. H. Strietmann, died suddenly. While president of the Association in 1919 he alone was able to "heal" the serious, seventeen-year-old factional breach in the society that grew out of certain unpleasant relations in the origin of the Oakland Medical College. Never have the members enjoyed such utter freedom from factional differences and personal jealousies as exist at this writing. One must read between the lines of this history to imagine how much of both has existed.

Association members worked diligently in behalf of the CMA's petition for a state Basic Science Initiative to be placed on the ballot at the November 1942 general election which required every person attempting to practice the art of healing to take a written examination in anatomy, physiology, biochemistry, and bacteriology or pathology. 212,117 valid signatures of registered voters were required and many more were obtained. The measure did not survive the election because the opposition out-fought the busy war-time M.D.'s.

Lodge practice was again up for condemnation. "Lodge Practice when it is controlled by a lay board or for the benefit of laymen, is unethical," wrote Dr. John Sherrick in the *Bulletin* for September. During this eventful year Doctor Sherrick was the most prolific of the writers of *Bulletin* editorials.

DECEMBER SEVENTH! The Pearl Harbor disaster and the war with Japan and Germany!

1942 The Procurement and Assignment Service Committee for Alameda County, Dr. A. M. Meads, Chairman, began tentatively, gently, and firmly to put its finger on more or less reluctant medical volunteers. All members under 45 years of age were classified as "essential" or "non-essential." Most of them needed no urging by this committee. The phrase, "Indispensable Medical Man,"

was frequently heard and as frequently was joked about with a tinge of sarcasm. This led Dr. Safford A. Jelte to write sincerely for the April *Bulletin* the following *President's Message*:

> Strictly speaking, no man is indispensable in a large community in peace time or war. Collectively, many doctors are necessary. But in time of crisis, there is one group of medical men who are absolutely indispensable. These are the experienced practitioners, once described by Osler as "the flower of the medical profession." It is true that in our modern complex medical economy the general practitioner has often considered himself as "the forgotten man," but at the present time he stands forth, immeasurably better equipped than his predecessors, armed with potent new weapons in the war upon disease, as the foundation of medical practice, the one "indispensable man."

The general practitioner has remained the indispensable man. In Alameda County he has returned from the war to fight for a place in the sun, to demand and receive a greater respect, and to qualify himself as a "specialist in general practice."

Dissatisfaction with the California Physicians Service and its low "unit value" of $1.20 had become so acute in this county that as of March 1, two hundred members of the Association had resigned from the CPS panel. The council of the ACMA, when severely scolded by the CMA for officially advising and encouraging these resignations from CMA's plan for voluntary prepaid medicine, threatened to detach itself from the jurisdiction of the CMA. The latter retaliated with a threat to rescind the charter of the ACMA. Both sides were bluffing, but since the controversy had exposed organized medicine here and in the rest of the state to dangerous hazards, the following resolution was unanimously passed by the council of the ACMA and printed with editorial comment in the June *Bulletin*:

> "Whereas, The Council of the Alameda County Medical Association on February 13, 1942, passed a resolution disapproving California Physicians' Service as now constituted and operated and advised the members of the Alameda County Medical Association who were professional members of California Physicians' Service, to resign from California Physicians' Service, and,
>
> "Whereas, The Council of the California Medical Association on May 3, 1942, asked, in the interest of organized medicine that this resolution be rescinded,

"Therefore, Be It Resolved, That the Council of the Alameda County Medical Association rescind this resolution of February 13, 1942, relative to California Physicians' Service effective June 3, 1942, and,

"Be It Further Resolved, That this action is taken solely at the request of the Council of the California Medical Association in order to prevent open dissension in the medical profession and does not indicate a change in the opinion of the members of the Council of the Alameda County Medical Association relative to the California Physicians' Service."

In taking the above action your Council has made an effort to preserve harmony between the official medical bodies concerned; it has, at the same time, reiterated its stand with regard to the present constitution and operation of California Physicians' Service. Its opinion is in no sense binding upon any of the members of this Association, who are perfectly free, as they always have been, to serve California Physicians' Service as professional members, or not, as they see fit. In the long run, a medical payment plan will prosper or fail on its own merits.

1943 Dues were increased to $35.00.

The subject of public relations received more serious consideration this year because of the growing resentment of the public, fostered by left-wing groups, towards doctors as a mass.

The Association sent to every stay-at-home-from-the-war member a nicely printed card (6 x 8-inch) in large lettering to be displayed in his office in a place most visible to the eyes of patients:

"IF YOUR PHYSICIAN IS IN THE ARMED FORCES, YOU ARE URGED BY HIS COLLEAGUE TO WATCH FOR HIS RETURN, AND TO EXPRESS YOUR APPRECIATION OF HIS PATRIOTIC SERVICES BY RETURNING TO HIM FOR MEDICAL CARE."

Because this attractive card was signed by the stay-at-home colleague, it was noticed and read, and frequently and favorably commented on (in at least one office, for certain).

The *President's Message* for September, concerned with the challenges in CPS and *Senate Bill* 11611 (extension of social security), was "unity, peace, and concord." About three years later many of those 200 dissatisfied members were reconciled to a stronger and improved CPS.

During October seventy-three-year-old Dr. Oliver D. Hamlin (L.L.D., Santa Clara University) surgeon, and one of California's most widely known medical leaders, died. For years very little in

this county's and state's medical affairs was done without his participation and counsel. Few men have lived a fuller, more useful life.

1944 A full-time secretary was employed, a typist, who received incoming requests for a physician between the hours of 9 A.M. and 4 P.M. She gave the names of three physicians, general practitioner or specialist, as asked for by the inquiring patient. The Hawthorne (telephone) Exchange handled these requests during the night and when the secretary was not on duty.

On April 17 the Association, in a "closed meeting," heard a report by a representative of Foote, Cone, and Belding, a national research and public relations organization, employed by the CMA to make a survey in California regarding the attitude of the public toward voluntary and compulsory prepaid medical care. Results of the survey are summed up in the August *Bulletin.* Some of its conclusions were questioned by some interpreters, but not the basic one that the major portion of the public, though desiring prepaid medical care, did not want it to be compulsory.

Dr. Ruby L. Cunningham, B.S., and M.S., (1880-1944) died in June. For the preceding twenty-six years she served, in her quiet, kindly, and efficient manner, as senior women's physician of the Student Health Service at Cowell Memorial Hospital. A Ruby Cunningham Memorial Fund has been very substantially started by friends at the University of California. In July there also passed the catholic, human-minded Dr. Daniel Crosby (1875-1944), civic leader, fluent speaker, and all his professional life an earnest, faithful contributor to county medical work.

An attempt was made to celebrate formally the seventy-fifth anniversary in October of the reorganized or permanent ACMA. A banquet and a distinguished guest speaker were planned for, but because the doctors were busy and tired, and because of other difficulties created by the war, this potentially historical celebration was canceled. However, a history of the ACMA was in preparation by the officially designated "historian of the ACMA."

1945 For the world, this was one of the most significant years in all history as it yielded the Atom Bomb, the hopeful Peace Conference of the United Nations across the Bay, and the end of World War II. And for this Association, the year 1945 brought a spontaneous flowering of its deep-rooted strength.

A "Post War Benefit Fund" seemed to be the most practical gesture of appreciation to the 225 members[1] released from the miltary services. On March 28, pledge cards were mailed to every civilian member asking for a voluntary contribution of no less than one hundred dollars. The purpose of the fund was to provide a loan of not more than five hundred dollars, without interest, for any applying member-veteran of World War II; the fund to be closed for loans within five years after the cessation of hostilities; after that period, and when all loans were returned, the fund to be released for "charitable, scientific, or educational purposes." By December there was over $15,000 in the fund, and two loans already negotiated. However, what the returnees desired most was not financial aid, but merely office space in which to practice. Unfortunately, office space was the most difficult to secure and the need for it the least foreseen. The Association, however, obtained out of this fund the services of a full-time realtor, who solved the embarassing dilemma.

In a 1940 *Bulletin* President A. A. Alexander had written: "We stay so close to the problems of patients that we neglect our own—we need help which can only come from within our ranks." But the problems were too great for any medical man or men. Slowly there grew the idea that an able and sympathetic layman might do the solving. But where could such a man be found?

Early in 1945 Dr. J. Murphy Reeves read an article in *Medical Economics* about the business-like Lake County Medical Association of Gary and Hammond, Indiana, and its experienced executive secretary, Mr. Rollen Waterson. He showed it to President

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[1]Their names are recorded on the honor rolls in Association's Bulletins.

Harry J. Templeton who, soon after, was conventioning in Chicago. After a personal interview with Mr. Waterson, the latter accepted an invitation to address the ACMA to present his ideas on medical economics and public relations and to suggest a plan of procedure for the ACMA. Unsuspecting Mr. Waterson was met in Oakland by Dr. Templeton who had arranged one of those beautiful perfect days that long ago brought fame to northern California. Dr. Templeton shrewdly diverted all organizational shop-talk to the subject of California. Mr. Waterson was taken up on a hill and shown the promised land of the Eastbay; the climate meanwhile was permitted to do its own surreptitious infiltration. After thirty-seven-year-old Mr. Waterson had been dined and very slightly wined that evening of May 23, and had addressed a large audience of ACMA members, both he and the ACMA were in a mood to discuss the transplantation of his talents to Alameda County. The salary offered as a full-time executive secretary was acceptable, a successor for the Lake County Medical Association was arranged for, and the Waterson family and dogs took to the overland highway to California.

By June Mr. Waterson had rented a floor of a new downtown building at 364 - 14th Street, and was on his quiet, effective way toward organization. He promptly laid plans for the present new *Bulletin,* the first issue of which appeared with forty pages on August 1. If to future critical eyes the first few numbers appear cheaply done on poor paper, the reason lies in war-time restriction of materials. By December the *Bulletin* was realizing a profit of $300 a month and the various business departments were off to a promising start.

In October, the Alameda County Nurses Association unionized a substantial, voluntary portion of its members into a guild. The latter soon after affiliated with the Congress of International Organization, which prompted resignations. (Organized nursing is, at latest writing, in a state of flux; the California Nurses Association has, November 1946, approved a ruling of the American

Gertrude Moore, M.D.

Secretary and Treasurer to the

Alameda County Medical Association

1926 to 1945

Physician Able, clear-thinking, untiring, devoted to the service of others.

Student, Teacher, Leader in her chosen specialty.

Councillor, Consultant to the members of the Medical and of the Legal Professions.

Champion of a fair deal for all, insisting on frankness and honesty in all things; sincere, fearless and outspoken in her beliefs and convictions yet open-minded, kindly and tolerant to the views of others; fiercely loyal to Medicine and its ideals for universal medical service of high quality available at all times to all economic groups at costs within their ability to pay; loyal advocate of a high standard of medical ethics and demanding in others efficiency, honesty of purpose and effort that Medicine and the Public shall be well served and that the Medical Profession shall retain the inherent right of free enterprise in its efforts; working continuously for organization and unification of the Medical Profession that it may better serve the Public and its own members.

Friend Loyal, kindly, sympathetic, honorable.

In recognition of thirty-eight years of service to Medicine and to Mankind, and in particular in recognition of nineteen years devoted to the interests and problems of this Association, we, the Members of the Alameda County Medical Association, express to Gertrude Moore our sincere and affectionate appreciation.

Oakland, California
November 19, 1945

President A.C.M.A.

Nurses Association that a member of a county society can not be a dual member of the C.N.A. and the C.I.O.) The battle ground in California is Alameda County.

After nineteen devoted, hard-working years as a very proficient secretary-treasurer of this Association, pathologist Dr. Gertrude Moore resigned. At the November ACMA banquet, the first since Pearl Harbor, she was presented with a beautiful, illuminated testimonial, a reproduction of which appears in this book. She was succeeded by Dr. Dorothy Allen.

The Association voted (December 17) an important revision of its by-laws, the principal matter being the creation of four branches of the ACMA; the Alameda Branch, the Berkeley Branch (including Albany), the Oakland Branch, and the South Branch (remainder of county south of the Oakland city limits). Each branch will decide its own peculiar problems subject, of course, to the approval of the council, on which each branch will be represented by a member of their own choosing.

* * *

The profound changes in scientific medicine that came near the close of the nineteenth century were followed by more profound changes in the mechanics of medical practice. One effect of the latter was the steadily increasing cost to the sick, particularly felt by the poor non-indigent, and the various income groups of the substantial "middle class."

Social medicine and socialized (state) medicine, smoldering for years, were rekindled during World War I, were fanned by the profound depression begun in 1929, and were ablaze during World War II. Medical men, cautious by training and habit, were slow to meet the complex problems involved therein until goaded by the menace of legislative compulsion from federal and state governments. By wise and sympathetic direction social medicine will parallel the traditionally high grade medicine of competitive private practice, just as social anthropology brought order and culture out of the past, and social architecture, more recently, has brought better homes, factories, and hospitals.

The remainder of this chapter attempts to relate the gropings of this Association toward a prudently aggressive participation in an adequate, working formula in social medicine.

* * *

In this general community the pre-pay plan of the French Hospital in San Francisco (1851) was a very early solution for that group. The railroads developed their unique system of medical care, wherein their doctors were compensated (excepting a few on salaries) with an annual pass on second-class trains and opportunity of private practice among the dependents of employees. In 1902 a few young doctors of this society made a futile attempt at a type of French Hospital plan for Oakland. Fabiola, Providence and the Baby Hospital (now the Children's Hospital of the East Bay) gave what they could of free and part-pay care. The endowment of Merritt Hospital that provided free medical and surgical care for a specified type of needy citizen, had been thought out during the 1880's by Doctors Merritt and Agard. Profit-interested "Hospital Associations," rendering their perfunctory medical care, were also at work. All these efforts—good, bad, and inadequate—were local straws in the wind.

Impelled by the world economic collapse, a few progressive county societies scattered over the United States began planning medical care for the lower income people. In California the Sacramento, Alameda and Los Angeles County Medical Associations led the way. The Sacramento Plan, consisting of a smaller group of physicians and of one or two hospitals, was able to operate as early as June 15, 1932.

The Alameda County Plan was preambled as far back as 1916-17 when the care of the indigent was placed under the newly-formed, non-political Alameda County Institutions Commission. In 1918, through the initiative of Miss Annie Florence Brown and the studied approval and cooperation of the ACMA, the Public Health Center of Alameda County was begun as a free and part-pay clinic with emphasis on the latter. Independent clinics had already been established in Berkeley, Alameda, and in several rural districts sustained by the Community Chest and Board of

Supervisors. In November of 1918 the first state compulsory health insurance bill, patterned on European methods, was defeated at the polls by a vote of almost three to one.[1]

During 1930 a request for a county health survey was submitted to the State Board of Health. The survey was made by Surgeon J. W. Mountain of the U. S. Public Health Service and paid for by the Alameda County Tuberculosis Society. The report of the survey recommended that full control (appointments, budgets, and accounts), of health centers or clinics be assumed by the County Institutions Commission. On August 23, 1932, the county supervisors set up the new procedure whereby all part-pay clinics were abolished and indigent citizens (re-defined by the commission) only, be cared for by the commission. This placed the low-income groups as a problem for the ACMA to unriddle.

Two months later the Association came through with explanatory whereases and the following resolutions:

> ". . . That it appears to be necessary to establish a plan whereby certain patients formerly cared for at health centers, who do not technically fall under the term "indigency" and at the same time require attention at the hands of reputable physicians, and whose care should be assumed at a fair price within the ability of the patient to pay; and be it further resolved,
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> That the Alameda County Medical Association agrees to establish a list of physicians who will volunteer to accept part-pay in cooperation with the established official county agencies and centralized social service, as established in Alameda County, and according to such additional plans as may be adopted."

Thus was born the Alameda County Plan. Under it, applicants for examinations and treatments were rated by the social service agencies as those "without resources or indigent, and those with some resources or part-pay patients." The former were referred to county care and the latter were referred by the agencies to a voluntary, rotating list of Association members. Only six members failed to respond. Fees varied from 50 cents to $1.50 for office and home calls. Refraction of eyes from 50 cents to $2.50 and glasses at a

[1]State medicine was thereafter a dead issue until 1935 when the CMA sponsored an anemic compulsory health bill which was defeated as anticipated. In 1939 Governor Olsen, supported by the CIO, brought forth a bill that was defeated in the Legislature. Another in 1941 and one in 1943 were defeated in committee. In 1945 the popular and able Governor Earl Warren sprung one of his own that was kept in committee by a one-vote majority in the Assembly. Another, by the CIO, was also kept off the floor by a narrow margin.

low cost from a manufacturing optician. This early plan need not be detailed but it can be applauded, for since it operated satisfactorily to both patient and doctor, it functioned successfully. With the prosperity of World War II, applicants practically ceased. Yet, one occasionally came through, but far more often these grateful people returned to their doctors as full-pay patients.

Considered in retrospect by those who have had an opportunity to observe the efforts of other counties to solve the problem of the care of the poor non-indigent sick during this period of economic depression, the Alameda County Plan is perhaps the nation's outstanding example of intelligent cooperation between the private practice of medicine and the community.

This plan, however, with its inclusion of X-ray and pathological laboratories, pharmacy supplies, and its liaison relationship with the county tuberculosis association and the County Institutions Commission, emphasized an inherent weakness, for it was generally recognized that at least 46 per cent of the cost of medical care is used up by hospitalization.[1]

After eighteen months of deliberation by a hard working committee headed by Dr. W. Earl Mitchell and aided by the general counsel of the CMA, a tentative blue print for a non-profit or mutual prepayment insurance company under the control of this Association and of seven approved hospitals of the county was made as a separate unit of the Alameda County Plan. Its contemplated name was the East Bay Mutual Hospitals.

This plan failed of approval by the California Medical Association, but it was unanimously decided to proceed with further developments as soon as a survey of public opinion showed its approval. Mr. Roy Kelly, an efficiency engineer, was employed to contact industry, labor, the University of California, and county and city governments. He received the "go" signal.

Finally on August 31, 1936, a hospital plan renamed the Insurance Association of Approved Hospitals was incorporated under the state insurance code. Its original board of directors was

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[1] Another less conservative estimate was 60 per cent.

composed of representatives of the ACMA, the seven participating hospitals, and a consulting attorney. The first president, Dr. Daniel Crosby, was followed (1938) by the organizing committee chairman, Dr. W. E. Mitchell, and he in turn by Dr. H. Gordon MacLean.

The original financing required for a certificate of authority by the state insurance code consisted of a deposit of $25,000 with the state treasurer. This money was raised by the contribution of $1000 from each of the participating hospitals, $100 from individual members of the Association, and a loan of $7000 at interest from the ACMA. These monies were returned subsequently out of the first surplus earnings of the corporation.

Before the corporation could start its business, however, the insurance code further required a minimum of one thousand applicants with an advanced premium deposit of at least $5.00 with each application. This task was completed, again largely through the work of individual doctors and the seven hospitals. The date of issuance of these original applications was November 16, 1936. From that time membership in the plan was, according to the best known and successful insurance methods, restricted to employed groups and to members of the ACMA. Within a year the coverage was made available to dependents of the insured groups.

For obvious reasons, a bill was submitted to the state legislature in 1939 which, in general, provided that only non-profit organizations contracting with hospitals to furnish service to the public, could be formed; that at least two-thirds of the directors thereof must be equally divided between representatives of the medical profession and of the contracting hospitals. This bill was enacted into law as Chapter 11A, Part 2, Division 2, of the Insurance Code. On May 28, 1940, this insurance association amended its Articles of Incorporation to conform to the new law, and changed its name to the Hospital Service of California, a Non-Profit Hospital Service Corporation. This transformation became effective on December 16, 1940.

This hospital service now occupies the ground floor of the same downtown building that houses the offices of the ACMA.

During 1937 the plan met with sales resistance because of labor-management strife and the new program of the Federal Social Security Act. At the close of 1945 it had over 110,000 subscribers in the Bay Area and a reserve fund in excess of $600,000. Surplus funds have consistently been distributed to subscribers in the form of additional benefits with no increase of the original rates. The plan soon included approved hospitals in all surrounding counties, and is now in general affiliation with the Blue Cross hospital service all over the country with its total enrollment of over twenty-two millions. * * *

The hereafter history of this Association will be found largely in its indexed *Bulletins* and in the minutes of its council; yet neither there nor here, will be found the story of the day and night work, the stress and strain of surmounting unexpected obstacles, and the unobtrusive, skillful direction of its executive secretary in bringing to this society of 800 active members a new and vigorous economic organization, and a deepened sense of social and professional consciousness, as expressed in the following credo: *The Philosophy of the Alameda County Medical Association is the interpretation and direction of its every act in terms of the ultimate public good.* Developed, it means that Medicine is essentially an *individual* matter and should be effectively administered and outrightly controlled by the doctors; that the most important unit of organized medicine is the county medical society; that its professional destiny is the responsibility of its *individual* members; that medical care is a necessity of life and therefore must be available to every person in the county regardless of ability to pay, and that good public relations outside of the county society must come from good relations within the society.

To give substance to these ideals, a Bureau of Medical Economics has been established. Success after its first year is measured less by the hundred thousand dollars in collected delinquent accounts as by the improvement in public relations through the firm but understanding tactful methods of collecting and through corrections of certain injustices and misunderstandings between doctor and patient. It has brought improved business methods in

doctors offices (on request), makes arrangements for the financing of medical bills (when desired), assists with federal and state taxes and has built up increasing credit files. Briefly, the Association headquarters has a staff of eighteen full-time persons engaged in the special work of collecting, accounting, tax aide, publishing, editing, group accident and health insurance, group malpractice insurance and prevention, medical-social service, information to the public, publicity, and public relations. The Bureau, after its first year, has been self-supported and is now refunding from $500 to $1000 a month to the treasury of the Association.

The immediate "unfinished business" is the publicity program that is essential to the success of the public relations project, the foundation of which has been in the making for the past year and a half. Our sanguine expectations have gained assurance from the approval of other county medical societies. The San Francisco County Medical Association employed a full-time executive secretary within three months after Mr. Waterson came to us. With his assistance, San Diego and Santa Clara societies have instituted programs almost identical with ours. The Sacramento society has examined, approved, and expects to adopt the program. And as this book goes to press a Bay Area Coordinating Committee has been formed by the county societies in the area through which the Alameda county program, including branch offices of its Bureau of Medical Economics, will be expanded.

The new philosophy of the ACMA program is its spirit; the Bureau of Medical Economics is its flesh and blood and bones.

* * *

Scientific medicine during these later years has beaten back the battlefront against infectious diseases, but it is still on the losing front against degenerative diseases. And on the aggressive front of social versus socialized or state medicine, scientific medicine, through the implementation of organized medicine in nation, state, and county, is now marshaling its forces at last in the good fight for human health-welfare.

Some day, not far beyond this little history, these great problems will be adequately solved.

HOSPITALS

Because the hospitals of Alameda County are an integral part of the professional activities of the members of the ACMA, these sketches are appended.

They include those hospitals recognized by the American College of Surgeons; they are listed in order of hospital origin; and their length is based on the material available.

County Hospitals

The first hospital in Alameda County was established for the indigent. Indigents were officially considered in 1853 at the first term of the Court of Sessions held in the county seat of Alvarado, after a state "Indigent Sick Fund" had been provided earlier that year for distribution among the organized counties of the state. William Haley, compiler of the Centennial Year Book of Alameda County, 1876, thought that Dr. J. M. Selfridge, because he had presented a bill to the Court for $20.00 for examining two insane persons, must have been "our first County Physician." By similar presumption, Dr. H. C. Sill was the first county autopsy surgeon for he "presented a bill for $25.00 for . . . making a post-mortem examination of the body of a man found dead.[1]"

In 1855, the County Board of Supervisors was further empowered by the state to provide county physicians, erect buildings, and levy a tax to care for county indigents. Under this act, the supervisors appointed Doctors D. C. Porter, A. W. Powers, H. C. Sill and W. J. Wentworth, who were allowed $2.00 a visit and $1.00 per mile traveling expense. After Dr. Wentworth turned in a bill for $183.00 for the care of one patient, and other similar bills came in, the county physicians were discharged. In 1856, Dr. Henry Haile (member of the first county society of 1860), supervisor of Alameda township, and Mr. Eagan of Brooklyn township, were appointed as a committee to consider ways and means of finding "a place for their keeping." The bid of Mr. Ollin Hamlin "to house, feed and take care of the indigent sick of the county at

[1]He was paid $15.00.

a charge of $12.00 each, per week, was accepted." The following year, this plan was abolished when the supervisors decided to take over the care of the indigent sick in their respective districts. Then the bills, fattened up for the kill, poured in: $985.25 was paid to nine doctors, and an Oakland doctor received $700 for one fractured leg. But what wild-eyed the supervisors was a series of bills for indigent John Stanley—one bill for $24.00, another for $43.42, still another for $628.00, and then one for $1,950.00 for "a surgical operation," accompanied by a meek little bill of $5.00 for the digging of his grave! And finally, six years later, the Board finally had to pay a bill of $22.00 for the coffin of poor but expensive John Stanley.[1]

In desperation, the supervisors unsuccessfully turned for help to the San Francisco City and County Hospital. In the words of William Haley, provision for roads, bridges, schools, and the care of the sick "taxed the wits of our township statesmen to the utmost." There followed, early in 1860, a contract with the Sisters of St. Mary's Hospital in San Francisco to provide hospitalization at $1.25 per day per patient. The price was soon raised to $1.50. Transportation and other extras, added to large bills, soon made this arrangement appear equally unsatisfactory to the supervisors. The board then voted to accept the bid of Dr. Henry Haile "to lodge and take care of and furnish all medicines and medical attendance necessary for the Indigent Sick at $12.00 per week per person" at his private sanitarium in the town of Alameda. Later Dr. Haile reduced his charge to $10.00 per person for "medicine and medical attendance, board, lodging, washing and nursing." By 1864 Dr. Haile was ready to meet all competitive bids with the following, ". . . and to do it for fifty cents per week less than the lowest responsible bid which may be given." He accepted a contract at $7.25 per week per person.

Out of this experience eventually came an idea. In August of 1864, the enlightened supervisors decided to rent a house in Oakland for $35.00 a month, and appointed Mr. Ollin Hamlin as

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[1]These bills undoubtedly included housing, food, medicines and attendant.

steward, and Dr. J. C. Van Wyck as medical attendant at $50.00 per month. Thus, Dr. Van Wyck, one of the founding fathers of the ACMA, was the first County Physician. The first patient in the first county hospital was admitted on August 16, 1864 for "ophthalmia" and was discharged on January 25, 1865 for "disobedience." Part-pay patients were admitted at $1.00 per day.

Bills from the rural end of the county, however, continued. In 1868, because the rent was raised, the house damaged by earthquake, and a smallpox epidemic made a pest-house imperative, the board finally purchased 123.5 acres of rolling foot-hill land near San Lorenzo, and a building (36x56 feet) was erected. On August 15, 1869, "patients, furniture, etc.," were moved from Oakland to the new County Infirmary. The site was beautiful, but the building, wrote the editor of the Alameda County Gazette of December 25, 1869, "was nothing more than a shell, while its accommodations and arrangements are a disgrace to any civilized community." He then amplified that statement with details.

The infirmary was in charge of a steward, and Dr. Charles L. Coleman of San Leandro was the County Physician at $50.00 a month, out of which he had to pay for drugs. He visited the sick about once a week, but by 1875, because of the increase in patients, he was required to appear at least three times a week. Four years later, he and his assistant, Dr. Amos S. Du Bois of San Leandro, asked for $60.00 a month and for drugs to be furnished by the county. Then Dr. John T. Burdick of Oakland took over for some stormy years. In 1894, Dr. William A. Clark brought reorganization, improvements, new buildings, and new life to the place and made a real hospital of it. Seventeen successful years later, he was succeeded by Dr. W. A. Wills, who was the first to suggest separate care of the tuberculosis patient. All were members of the ACMA. The institution became known as Fairmont Hospital, and in 1933 as Fairmont Hospital of Alameda County. In 1920, Mr. A. C. Jensen was made (and remains) superintendent of Fairmont Hospital. Medical care has been donated by members of the county medical society.

The medical association had long been appealing for a county hospital in or nearer Oakland. Eventually, in 1910, the Board of Supervisors called for competitive bids for a new county hospital in Oakland, and made search for a site. In 1911 a $500,000 bond issue for the hospital failed.

In 1917, at long last, nine and one-half acres in the Highland Park district of Oakland was purchased as a site for the hospital. The county society promptly printed 10,000 post-cards that urged their patients to vote for the new bond issue. But the building was financed under the general tax fund until 1924 when a $1,800,000 bond issue was authorized for its completion at a cost of over $3,000,000. It was constructed under the guidance of Dr. R. G. Broderick as consultant to the architect. It was opened in September of 1926. Dr. Broderick was made Director of Hospitals, but resigned in 1927 to be succeeded by Dr. O. D. Hamlin, Chief of the Oakland Receiving Hospital and briefly, in quick succession, by two other part-time doctors, A. M. Smith and Carl Krone. On April 17, 1928, smart, capable and experienced Dr. Benjamin W. Black, Chief Medical Officer of the U. S. Veterans' Bureau, became Medical Director of Alameda County and Superintendent of Highland Hospital. In 1933, he was made Director of the County Institutions Commission (1917) which controls all county care of the indigent sick, including the Arroyo Sanatorium (1918) and the Del Valle Preventorium for Children under the superintendency of Dr. Stanley Bush. Dr. Black died in 1946 and was succeeded by Dr. G. Otis Whitecotton, recently superintendent of the University of Chicago Clinic.

The name Highland Hospital had been suggested by Dr. Broderick to remove whatever stigma seems to be associated with county care of indigency. Because people not classified as indigent, and some far removed from it, sought to (and did) enter this imposing 487-bed general-hospital, staffed by leading members of the ACMA who gave and still give their services free and freely, the Association petitioned in 1934 for a change of name. It accordingly was changed to the Alameda County Hospital, Oakland.

However, on December 24, 1940, the name was compromised to its present official name of The Highland Alameda County Hospital.

Fabiola Hospital

When Mrs. R. W. Kirkham, a new-comer in town, witnessed a street accident in 1876, she was more distressed over the lack of a hospital in Oakland than over the severely injured man. She and seventeen other women each gave $50.00 and an unlimited amount of energy and enthusiasm to the establishment of a hospital for the worthy non-indigent poor and for those of limited means and no home.

A five-room house was secured at 864 - 19th Street (near Market Street), and was cleaned, painted and furnished. It was named the Oakland Homeopathic Hospital and Dispensary. The first patient was a homeless young lady dying of tuberculosis. There were two free beds and the others were to be paid for according to the patients' ability to pay. The county Board of Supervisors voted $40.00 per month to the hospital on condition that it care for all cases referred by the board. This agreement was promptly discontinued when a deficit developed. From then on, the Board of Directors was on its own resources. The hospital was listed in the 1879 *City Directory* with Dr. J. M. Selfridge as surgeon.

By 1883, the little hospital had outgrown its quarters; a larger house at 1057 Alice Street was purchased. After three more years, as that house proved inadequate, generous Anthony Chabot presented two and one-half acres on Moss Avenue (now MacArthur Boulevard), between Broadway and Howe Street, for a specially constructed hospital; Mr. Frederick Delger gave $5000 toward the building to be erected "after the models of the most eminent sanitary engineers." This came at a time when the report of the treasurer of the Homeopathic Hospital Society showed a balance of forty-five cents!

The new hospital building was opened in 1887. Since this society desired that the use of the hospital be not restricted to homeopathic physicians, the name was changed to Fabiola Hospital in honor of the noble Roman matron who, in the fourth

century, founded the first hospital for the sick poor. Although once shunned and then either slyly or frankly used by some members of the ACMA, it was used after 1900, one by one timidly and then unreservedly by all. In 1890, Fabiola Hospital erected a separate maternity building, and in 1898 added another for children. In 1908 a new surgery was built on and in 1923 a fireproof fifty-bed modern maternity building was erected—the last word in mother and child care. (This building on the corner of Broadway and MacArthur, after some inexpert handling by a federal government agency, became the original part of the present Permanente Foundation Hospital.)

In 1932, this amazing society of women who, with the help of the prominent homeopaths, Doctors J. M. Selfridge and I. E. Nicholson, erected the first general hospital in Oakland, had to liquidate all its property during the world economic depression. It was no longer able to carry on the benevolent work for which it was founded 56 years before. The frame structures were torn down, and the new maternity building and real estate was given to the Samuel Merritt Hospital, because the latter came nearest to paralleling its own benevolent program.

Under the leadership of Mrs. J. P. H. Dunn, daughter of Mrs. Remi Chabot, and her mother's successor as chairman since 1916, the Fabiola Hospital Association lives on. It holds regular meetings in its own dignified room in Merritt Hospital, and if so minded, can point with justified pride to having successfully established in the area of the East Bay, the

First general hospital
First school of nursing, 1887
First public health nurse
First ambulance
First scientific diet kitchen
First modern maternity hospital building

Fabiola Hospital, now gone, is worthy of remembrance and a place in this record.

Alameda Hospital

Capable, ambitious Kate Creedon, R.N., from St. Luke Hospital, San Francisco, came to the city of Alameda in 1895, and rented a former private school building for boys (Taylor) at 2116

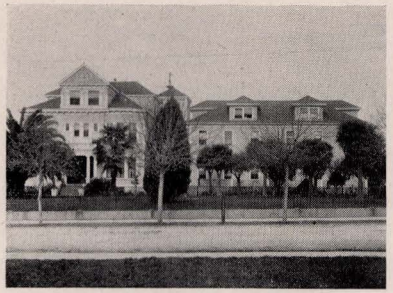
San Jose Avenue, and began a six-bed hospital. Dr. G. P. Reynolds brought in the first patient and Dr. George C. Bull, the second. She named it the Alameda Sanitarium. Three years later, Miss Creedon had twelve beds and a little surgery with wooden tables. About 1913, she leased a building erected for her by Dr. Henry M. Pond on the present site at 2054 Clinton Avenue backed by the bay shore. One year later, she owned the new twenty-five bed hospital. Five years later, she erected another hospital building and joined it to the first building, giving her thirty-five beds, a new surgery and a training school. She and her two sisters, Margaret and Mae Creedon, both graduate nurses, operated the hospital and school.

In October of 1925, the present fire-proof building of approximately 100 beds, was opened. Kate Creedon died two years later, and her sisters carried on the work until the depression finally forced their retirement and the loss of their holdings. The bank which held the mortgage was compelled to take over. In 1939, the hospital was reorganized as a non-profit institution under control of a group of Alameda physicians, and its name changed to the Alameda Hospital.

Providence Hospital

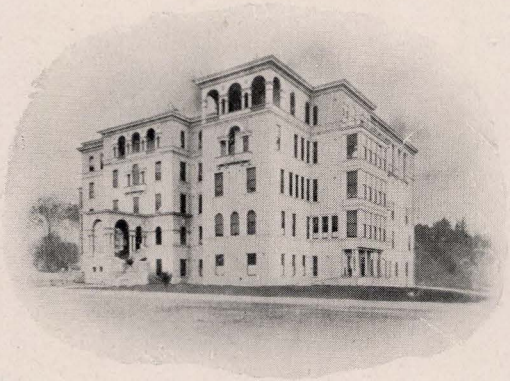
In 1900, there was only one adequate hospital in Oakland, constructed for that specific purpose, and that (Fabiola) was built, owned and run by a group of women. The need for another was great. The East Bay Hospital was only partially meeting the need. Father Thomas McSweeney, pastor of St. Francis de Sales Church, brought the matter to the attention of the Reverend Monsignor Reardon of San Francisco who thought he knew the answer. He wrote to the Institute of Providence, Montreal, Canada, explaining the need and opportunity in Oakland. In 1901, Mother Theresa and Sister Irene arrived from Canada, looked about, and started a campaign for funds.

A large lot on the northeast corner of Broadway and 26th Street was purchased on January 19, 1902, and the hospital organization of five founding Sisters of Charity of Providence was incorporated on December 21, 1903. Ground was broken in September



Berkeley General Hospital.

Fabiola Hospital, 1888.



First Providence Hospital.

but because of the difficulty of securing $200,000.00, the hospital of 100 beds was not finished and dedicated until April 5, 1904. Patients were admitted on the following day. Dr. John M. Kane brought in the first patient and Dr. Oliver D. Hamlin the second. Dr. Hamlin, for the rest of his life (1870-1943), was the "Angel" of both this and the second Providence Hospital. A year later the Providence Auxiliary Ladies was organized and continued as an active body of help to the Sisters. During the San Francisco disaster of 1906, the Sisters fed between seven and eight hundred refugees three times a day from its kitchen, and its beds and corridors were filled with the sick. The Oakland College of Medicine used it for teaching purposes.

Within ten years after its opening, the hospital felt the need for a larger and fireproof structure. On January 15, 1916, the first printed broadsides appeared for the initial opening of a highly organized, fund-raising campaign for $150,000 of the contemplated $450,000 hospital. The Executive Campaign Committee was chairmaned by Dr. O. D. Hamlin and the Physician and Surgeon Committee by Dr. George F. Reinle. The campaign, under the guidance of lay professional promoters, went merrily on through 1916 and 1917. The hospital was intended to be built on a site owned by the Sisters on a block bounded by 5th and 6th Avenues and East 19th and 20th Streets. Unfortunately, the promoters moved out with most of the funds.

Undismayed, the determined Sisters in 1922 purchased the spacious old Arthur Breed home and grounds, a hill city-block back of the original St. Mary's College. A few of the younger Brothers from crowded St. Mary's were domiciled there until 1925 when new plans were made and new loans negotiated for the present fireproof, six-story, 221-bed hospital. It was opened on October 21, 1926, and its School of Nursing soon after, all encumbered with loans from the Bank of America, the Central National Bank and the University of California, amounting to $1,075,000.00.

This remarkable institute of women, with its headquarters in Montreal, sent the business-talented Sister M. Napoleon back to Oakland in 1927. She had joined the Sisters of the first hospital

from 1906 to 1911, during which time she reduced its indebtedness to a comfortable portion. Sister Napoleon, now eighty years old, has done the same for the present, crowded and efficiently managed Providence Hospital.

Alta Bates Hospital

In the spring of 1904, Miss Alta M. Bates, first graduate nurse from the new Sequoia Hospital in the lumber city of Eureka, California, located with her parents in a lower flat on Walnut Street near Vine in Berkeley. Dr. Frank E. Kelsey, who had a large maternity practice and lived near by, fired her ambition to start a hospital. With her father's help, she rented a fourteen-room house at 2314 Dwight Way, and on April 1, 1905, opened a ten-bed hospital for women and children. She was assisted by a nurse with one year's training and by "four green women in white," as she characteristically phrased it.

Miss Bates began this venture with "$114.00 in cash and plenty of debts." Needing linens, she appealed to Mr. Lester Hink of the J. F. Hink and Son for credit. From then until the federal government (in 1942) stopped all extension of retail credit, she had been in the debt of J. F. Hink and Son. Doctors J. L. McLaren, Frank Kelsey, Frank Carpenter, David Hadden, Tom C. McCleave, Edith Brownsill, May Sampson and Frank Edmunds kept her hospital alive. Two younger men, Dr. Frank Simpson and Clarence Page, added their help, and after 1916, Dr. Clark Burnham.

Within three years, the need for a general hospital was so urgent that father Bates and Mr. Noah Webster helped to finance a couple of lots on Webster Street. Mr. Webster, for whom the street was named, accepted $200.00 in cash and a mortgage for $1800. The Bank of Commerce in Oakland helped finance a three-story frame and stucco building with a major and minor operating room, delivery room, and nurses' quarters for $8000. It was called the Alta Bates Sanitarium. Miss Bates had trained her nurses from the start, and by this time had a school of twenty students. In 1912, she obtained a second loan of $12,000 for a

Alameda Sanitarium.

Original Alta Bates Sanatorium, 1905—Miss Alta Bates (left).

wing that increased her beds by twenty-two. This was followed by another loan of $25,000 on Miss Bates' reputation, and a third addition of forty more beds at 2460 Webster Street.

Miss Bates and her brother handled all the affairs of the institution until 1920, when a business manager was necessary. Because the hospital was again bulging its seams, plans for the present fire-proof modern hospital building were started. Ground was broken on the corner of Webster and Regent Streets in March of 1927, and opened for work on April 21, 1928. Before the year was over, an executive committee (at present consisting of senior staff members[1]) was created to govern the policies of the hospital.

The financing bonds for the new hospital went into a tail-spin in the whirlwind of the depression. No one woman or man could have pulled out. Creditors took over and eventually, with painstaking efforts, returned the hospital to solvency.

Miss Bates remains very active. She is president of the Board of Directors, Superintendent of Nurses and chief anesthetist; she is generally about, honored and loved by doctors and employees, as "her" hospital continues on its well-ordered way with the growth of Berkeley.

Berkeley Hospital

Dr. LeRoy Francis Herrick (ACMA member) practicing and living in Oakland, purchased in 1904, the spacious Joseph Hume grounds and home on Dwight Way at Milvia Street. He converted it into a hospital and named it in honor of Theodore Roosevelt. After a few years the hospital lost its private-home facade and was expanded by the additions of new wings and a nurses' training school. Eventually, in 1923-4 a concrete wing along Milvia Street was completed and the institution renamed Berkeley General Hospital.

Dr. Herrick died in 1935 at the age of 71. His heirs converted his hospital holdings into the present non-profit organization and the word General was dropped from its name. The hospital is

[1]Doctors Clarence W. Page and Dexter N. Richards are life members of the Committee.

supported by income from patients and the Berkeley Hospital Guild. Mrs. Ivadell Henderson, daughter of Dr. Herrick, is president of the Board of Trustees.

The present rebuilt and new ultra-modern hospital building with its surgery in the basement and its roof constructed as a helicoptor landing field, was opened in 1946, and was financed by the heirs and the hospital association ($225,000), by doctors in notes and gifts ($100,000), and by the federal government in loan and gifts ($425,000). This 250-bed hospital with its part-pay out-patient clinic, is intended to meet the needs of increased population of Berkeley, North and West Oakland, Emeryville and Albany, and is "dedicated to the health of the community, regardless of race, creed, and color of the sick."

If a present plan becomes official the name of the hospital will again be changed—this time in honor of its founder.

SAMUEL MERRITT HOSPITAL
(190 beds)

"The man most prominent in the establishment and building of the City of Oakland died peacefully yesterday morning in the fullness of years, after a life of activity and energy and a commercial career that now seems like a romance of finance," stated the *Oakland Tribune* of August 18, 1890.

A bronze plaque fastened to the Merritt tomb in Mountain View Cemetery in 1933, carried the following brief information:

> Samuel Merritt, M.D.
> 1822 1890
> Physician, Shipmaster, Philanthropist
> Regent University of California
> Mayor of Oakland
> Founder of the Samuel Merritt Hospital

Dr. Merritt, six feet three inches in height and 340 pounds in bulk, came to San Francisco and Oakland in 1850. After practicing medicine for a while in San Francisco, he settled in Oakland to become his unhampered self — a talented Yankee trader. Already rich at the age of thirty, he left an estate of two million

dollars. His biography and a history of the hospital can be found in a little factual volume by Dr. Henning Koford, from which this brief story is largely gleaned.

Dr. Merritt and Dr. Aurelius H. Agard, who officed with Dr. John S. Adams, were close friends. The two sat through many hours on the broad veranda of the Merritt mansion, discussing plans for a hospital with certain benevolent features. In the early 1880's, Dr. Merritt seriously and impatiently considered buying at auction a very large residence at 8th and Grove Streets, and converting it and his ideas into his type of a hospital. Fortunately, its very inadequacy stimulated those ideas into something bigger, which developed into a Deed of Trust.

Being a bachelor and alone in his big home, he had sent for his sister and her husband, Dr. Seward Garcelon, of Clinton, Maine. Dr. Garcelon died here in 1877. Dr. Merritt bequeathed his estate to his widowed sister, Catherine M. Garcelon, who, keeping faith with her brother, carried out his instructions for its disposal. On April 21, 1901, she granted by deed of conveyance to Mr. Stephen W. Purington, a nephew, and to Judge John A. Stanly, friend and neighbor, all the real and personal property which according to the Trust was to be converted by them into cash within five years after her death. Furthermore, after certain sums were to be paid to specified relatives and friends, and a certain portion to Bowdoin College (Maine) as the "Garcelon and Merritt Fund" in memory of the two alumni, six-tenths of the residue was to be given, by order of the Trust, to Dr. A. H. Agard, Dr. Thomas H. Pinkerton (two prominent members of the ACMA) and Judge Stanly as trustees for the erection and conduct of the Samuel Merritt Hospital.

Judge Stanly died in 1899 and Mrs. Garcelon, Mr. Purington, and Dr. Agard died in 1902. Bitter litigation affecting the validity of the Trust ensued; more litigation by two of Dr. Merritt's nephews was settled for $250,000 to each. The final distribution of the estate was completed in 1904.

The site chosen for the hospital was Academy Hill, so called because the Golden Gate Academy or Hopkins Academy, and the

Pacific Theological Seminary had been located there. Construction that began in August 1905 was seriously interrupted by the 1906 earthquake, forcing new plans which were devised to withstand earthquakes. Construction continued through 1907 and 1908. The 37-bed hospital which also housed the school of nursing and nurses' dormitory was opened on January 26, 1909. On May 31, a medical staff having been appointed by the Trustees, the first free or "staff-patients" were admitted. In 1911, Mrs. Henrietta Farrelly of San Leandro gave $50,000 for a nurses' home. This increased the hospital beds to seventy-six. In 1927, a three-story addition was tied onto the front side of the long corridor that connected the two original buildings. This increased the capacity to 103 beds. In 1936, by gift of Mr. E. W. Ehmann, in memory of his mother, a new, fire and earthquake-proof three-story wing was added on the north side of the main building which provided a maternity floor, a new surgery, and additional beds.

Public beneficiaries of the Trust are selected persons "who, though able to support themselves and those dependent upon them when they and their families are in health, are nevertheless possessed of such limited means and income that a serious or protracted illness of themselves or of such as may be dependent upon them would be financially burdensome." These "worthy and valuable citizens" receive complete medical and surgical care by a group of staff doctors who are appointed every six months by the Trustees and who give their services without charge. The income from the original endowment of $500,000 maintained twenty "staff beds." This same number has been available through the years, in spite of the greatly increased costs of the growing techniques of medical practice and of hospitalization.

Trustees are appointed for life and have the power to fill vacancies. Original trustee, Dr. Agard, was succeeded by Dr. Ashbury J. Russell in 1902, by Dr. Samuel H. Buteau in 1909, and by Dr. George C. Reinle in 1926. Original trustee, Dr. Pinkerton, was succeeded by Dr. Peter Lansing Wheeler in 1895, and by Dr. W. Earl Mitchell in 1935. Original trustee, Judge Stanly, was succeeded by Dr. John R. Glascock, attorney, congressman and

mayor of Oakland, in 1899, and by William B. Bosley, attorney, in 1900. Mr. Ellard L. Slack, superintendent for the past eighteen years has quietly and constructively identified himself with the present development of Merritt Hospital.

The Cowell Memorial Hospital
(and Student Health Service)

In 1902, a group known as the Berkeley Hospital Association, with Frank Howard Payne, M.D., as its president, and Mrs. Phoebe Hearst as one of its interested members, liquidated its property and returned all to the original subscribers, largely University people, because sufficient funds could not be raised to insure success. The residual fund of $1865.25 was presented to the Board of Regents of the University of California to be "held in trust and used by the regents for general hospital purposes in connection with the care and treatment of sick and injured students. . . ." The Prytanean Society of the University of California (with a past and present prime interest in student health and welfare) offered its Hospital Fund of $666.53 as its original donation.

In the same year, Dr. George Frederick Reinhardt, who had been a student assistant in the Department of Physical Culture (as it was then termed) graduated from the medical school and was appointed an assistant instructor. For the academic year of 1905-1906, he was appointed Professor of Hygiene and the first University Physician. His "job of work" was the visiting and treating of sick students in their homes, fraternities and rooming houses. He was soon appealing to the great President Benjamin Ide Wheeler, for a student hospital.

The San Francisco earthquake and fire of that year gave the necessary impetus to the project. Student relief work was rendered by the Red Cross in Hearst Hall, gymnasium for women, then located on College Avenue. An old home near by and opposite to the present hospital, known as the "Meyer House," was set aside as a student infirmary by the Regents, with provisions for essential remodeling and enlargements. This was done with the help of two sympathetic campus societies. Two dollars and fifty

cents per student was added to the regular gymnasium fee as insurance for medical care. Material and equipment used by the Red Cross was moved into the "Meyer House." In August of 1906, with three nurses in attendance, the "Meyer House" was tentatively in use.

On March 12, 1907, President Wheeler reported to the Regents that since the Infirmary opened in August, "There had been eighty-four patients treated at home, thirty-one in outside hospitals, twenty-eight in the Infirmary, 781 dispensary patients and 445 visits to students homes. . . ." This medical service, he wrote, "has thus far been made possible through the labor and self-sacrifice of Dr. George F. Reinhardt." The completed Infirmary, consisting of the "Meyer House" with its kitchen, dining room, surgery and rooms, and the large two-story frame and shingled annex (1909) for offices, waiting room, dispensary, treatment rooms, X-Ray and laboratory rooms, was made possible by the initiative and energy of Dr. Reinhardt and the interested cooperation of President Wheeler. Not the least of their difficulties were some members of the faculty who denounced the project as unacademic and by many of the medical profession as "socialized medicine."

The first members of the part-time staff were Dr. Wilbur Sawyer (now retired director of the Rockefeller Foundation), Dr. Eugene Kilgore in 1910 and Dr. A. M. Meads in 1911. The first woman physician was Dr. Eleanor Stowe Bancroft in 1907-1912, followed by Dr. Romilda Paroni (Meads) in 1912. The first specialist was Dr. M. H. Shutes in 1913 (eye, ear, nose and throat); since then every branch of specialization has been added. The first dentists were Doctors G. F. Stoodley and B. G. Neff in 1915.

In June of 1914, Dr. Reinhardt was struck down by a violent blood-stream infection. The funeral service was held on the lawn of his Infirmary. President Wheeler then invited Dr. Robert T. Legge, chief surgeon of a large industrial plant in northern California, to become Professor of Hygiene and University Physician. Almost from the start, Dr. Legge began to dream and plan for a

new fireproof modern hospital. Fortunately, President Wheeler and Professor Eugene W. Hilgard had interested wealthy alumnus Ernest V. Cowell, in student health welfare. Mr. Cowell provided $250,000.00 in his will for a new Infirmary. When this was available it was no longer sufficient to meet the needs of the expanded student body of the second largest university in the United States. After some effort, additional money was provided through a state bond issue in 1926. Late in 1927, architectural plans were begun. The present beautiful and substantial hundred-bed hospital and dispensary was opened for the fall term of 1930. Before the participation of the United States in World War II, the part-time staff was comprised of forty-seven physicians, seven dentists, thirty-six nurses and fifteen technicians.

In 1939, Dr. Legge, having reached the age for retirement, was succeeded as University Physician and Director of the Hospital and Dispensary by Dr. William G. Donald.

The Ernest V. Cowell Memorial Hospital (formerly called The Student's Infirmary) is situated on the east side of College Avenue on the University campus just across from the site of the original Infirmary. "The purpose of its Student Health Service is to conserve the time of students for their class work and studies by preventing and treating acute illnesses." All students, before acceptance as such, must appear before the University Medical Examiners and pass a medical and physical examination, which must include satisfactory evidence of small-pox vaccination, in order to safeguard the health of the student and the University community. "This service is made possible by the general funds of the University and, in part, by the staff physicians, and is not a health insurance plan; therefore, the services are limited by the staff and facilities available.[1]"

CHILDREN'S HOSPITAL OF THE EAST BAY

Miss Bertha Wright, a visiting nurse, and actively interested in child welfare, decided that there was a crying need in this county for a hospital for young children. On September 4, 1912, a group

[1]The above quotations are from the University of California General Catalogue.

of thirty purposeful women was gathered at the Town Club in Berkeley. They there founded the Baby Hospital Association of Alameda County, and made their plans for securing the money for its realization. This was the second time in the county that a few scattered women organized and built a successful first-class general hospital—feats that had eluded the repeatedly determined efforts of the medical men.

Within a year, the John E. McElrath home and grounds at 51st and Dover Streets had been purchased, and a clinic for children begun in the old carriage house by Miss Wright. Practical alterations were made in the large house, and on September 16, 1914, it was opened as a hospital. The financing of this project was started in January of this same year by Mrs. Charles R. Lloyd, a member of the founding group, working with Miss Wright. She organized a clever system of auxiliary groups of women, which were called Branches. By the end of the year, there were nineteen Branches. Their earnings and their membership dues, and gifts, constituted the entire resources of this Association.

The hospital was controlled by a Board of Managers, all women, and assisted by a Board of Directors, all business men. Some of the best medical men gave their advice and services. Outstanding in their devotion were Doctors Thomas C. McCleave, William A. Wood, Ann Martin and, now, Dr. Clifford Sweet. The age limit of outpatients and hospital patients was originally fixed at five years, promptly raised in 1914 to eight years and, a few years later, to the present limit of fourteen. There were, and are, three classifications of patients—full pay, part pay, and no pay. The latter, however, are now accepted only if ineligible to the county hospital.

In 1915, free service was paid for by the County Board of Supervisors, who "declared the Baby Hospital to be the Baby Department of the County Hospital." This arrangement continued until the Children's Ward in Highland Alameda County Hospital was opened in 1927.

In 1923, the newly inaugurated Community Chest of Alameda County accepted the Baby Hospital as one of its participating

agencies. Relieved of this maintenance burden, the Branches lent their energies to building a necessary, modern hospital building.

On March 17, 1928, the present class A hospital building was opened. Shortly thereafter, the administrative bodies were merged into one Board composed of nine men and nine women and three non-practicing physicians. The thirty-nine Branches continue to function under the present able chairmanship of Mrs. William Harold Oliver. Extra services have been added, such as physiotherapy for pre-school victims of poliomyelitis, a child guidance clinic, a Child Development Center, and a program for acute rheumatic fever convalescents.

To indicate more precisely the function of this 78-bed hospital, its name was changed in 1934 to The Children's Hospital of the East Bay. Its present status is that of a children's health center. As such, it has the promise of a brilliant future, as new construction, already begun for added facilities, and 65 more beds, reach out for its goal of a 200-bed institution.

Peralta Hospital

The definitive planning for Peralta Hospital began twenty years ago, but its rudiments lay under the sod of defeated aspirations. All the plantings of a small zealous group of doctors died by the blight of promotional efforts of skilled medical men unskilled in finance.

During 1925, persistent and experienced Dr. Hayward G. Thomas, who never ceased to water the sod, gathered a small group of younger men about him. Their objective was the promotion and building of an adequate, fire and earthquake-proof hospital to house the very best and latest of facilities and equipment. This group consisted of Doctors H. G. Thomas, J. L. Lohse, P. N. Jacobson, Q. O. Gilbert and W. B. Palamountain, to which were later added Doctors Charles L. McVey and William Strietmann. After one or two faltering steps, the group took a tip from the successful ladies, and placed their problem before the lay public.

When Mr. William Cavalier, a successful financier of Oakland was approached, he gave his immediate approval and promise of support.

A number of influential citizens were invited to a dinner at the Claremont Country Club. They included Charles D. Bates, head of a large construction company; Stuart Hawley, investments; Joseph R. Knowland, owner of the Oakland Tribune; Frank Proctor, investments; Harry Mosher, vice-president of the Central National Bank; Harry Fair, capitalist; Stanley Dollar of the Dollar Steamship Company, and two prominent doctors, W. S. Porter and J. L. Lohse. Their interest was enthusiastic. A committee on procedure was designated, consisting of Messrs. Hawley, Cavalier, Proctor and Bates, which was expanded into a Board of Directors, to which Mr. Knowland, Mr. Mosher and an attorney, Leon Clark, were added.

These men met frequently, consulted with doctors prominent in hospital construction, and formulated a financial structure. The funds for the hospital were to come from three sources. The first third to be subscribed in common stock by doctors, the next third in preferred stock by laymen, and the last third in a mortgage by the Bank of America. This put the original group of doctors to work. Thirty-five doctors quickly subscribed $6000.00 each, but it was not enough by $35,000.00. However, after Doctors S. H. Buteau, Charles A. Dukes, and A. Galbraith, nicely fixed at Merritt Hospital, gave their disinterested support, enough subscriptions followed to complete the professional obligation. The remaining third followed in due course.

The Campbell hill property on Orchard, now 30th Street, was selected and construction of the hospital began on April 13, 1927, and was completed and opened for patients on May 1, 1928.

Soon after construction got under way, it was realized that the original estimate of $450,000 was short by $150,000. A limited but insufficient number of doctors were again prevailed upon to subscribe $6000 each. Though these subscriptions stipulated membership on the medical staff of the hospital, future subscriptions carrying the same agreement had to be reduced to $1,000.

This, in turn, reduced the $150,000 to $35,000 which was secured by another bank loan after the original thirty-five subscribers signed their names to the note. This loan was whittled down to $2,000 by further purchase of common stock.

In the "romance" of this valiant struggle, one more loan was needed. This solidly constructed 160-bed hospital with its equipment and laboratory facilities, its personnel and graduate nursing service, had to receive support until it was self-sustained. A final loan of $50,000 was negotiated with the personal signatures of the lay Board of Directors. Then came the paralyzing Depression late in 1929, through which these worried laymen and doctors safely weathered their hospital. If special mention in this brief sketch of tough facts is deserved, it could note the inspiration of Dr. Thomas in the beginning, and the perspiration of Dr. Lohse and of Messrs. Bates and Hawley throughout.

On December 7, 1936, the hospital was reorganized into a non-profit association; debentures were issued for the outstanding common and preferred stock. By August of 1942, all indebtedness had been paid off. Between these dates, a small but growing Endowment Fund for Care of Premature Infants, was derived from a silent color film entitled "Behind the Scenes in a Modern Hospital," produced and directed by Mr. George U. Wood, administrator of Peralta for the past successful seventeen years.

The affairs of the hospital are under the control of a Board of Trustees (7 laymen and 4 doctors) who are elected by the Peralta Hospital Association which consists of Medical Staff members, Associate Staff members, and certain lay members.

Peralta Hospital, named in honor of the original Spanish land-grant owners of the East Bay, is a monument to the courage and private enterprise of a small group of doctors and a few laymen.

East Oakland Hospital, Inc., Ltd.

This general, privately owned hospital in its fire-proof building at 2648 East 14th Street, was built and financed by the firm of Hosletter and Barr, which leased it to Dr. Orta E. Kuhn for twenty-five years. Other capital was furnished the hospital, espe-

cially that of Mr. A. M. Mull of Sacramento. When the hospital itself showed disturbing signs of illness Mr. Mull, to save his investment, took over the hospital as sole owner.

This eighty-bed general hospital in East Oakland was opened in 1929, was approved by the American College of Surgeons in 1932. It is successfully managed by Florence Klaeser, R.N., its popular superintendent.

Permanente Foundation Hospital

During the pre-war year of 1941, Mr. Henry J. Kaiser of Oakland built a shipyard in Richmond by government contracts. After the impact of Pearl Harbor, his yards underwent a tremendous expansion, with the eventual employment of ninety thousand workers living in the Richmond-Oakland area.

From knowledge gained in the experience of successfully caring for the workers in previous huge construction projects, such as Boulder and Coulee Dams, Dr. Sidney R. Garfield was promptly authorized by Mr. Kaiser to organize similar pre-paid medical and hospital services. It was called the Permanente Hospital Foundation, the name of Mr. Kaiser's Permanente Cement—the word in Spanish meaning everlasting. The Foundation was set up as a non-profit trust with a Board of Trustees headed by Mr. and Mrs. Kaiser.

The first move was the opening of offices in the Medical Arts Building on 30th Street, Oakland, and the hospitalization of injured workers at Merritt Hospital on March 1, 1942. The concrete wing of Fabiola Hospital, on the corner of Broadway and MacArthur Boulevard, which had been thoroughly messed over by the Federal Youth Administration, was purchased for $75,000 from the Trustees of Merritt Hospital on April 15, 1942. The building was rebuilt within and reconditioned without, and opened for patients on August 1, 1942, with seventy beds, a full-time group of thirteen doctors, twenty-five nurses and thirty-two miscellaneous technicians and workers.

An addition, or annex, was started on November 2, 1942 and completed on February 25, 1943, with a total of two hundred and

nine beds, 62 doctors, 241 nurses and 324 employees. On January 1, 1944, another hundred-bed addition was approved by a Washington "Urgency Committee." Already $500,000 of the $700,000 debt incurred in building this and the field hospitals in Richmond had been paid—by a voluntary 91 per cent of the workers in the shipyards of fifty cents per worker per week. This complete and latest general hospital of three hundred beds was opened on December 1, 1944.

The Permanente plan was offered by its progenitors as the best solution in "socialized medicine" and as the answer to state and federal medicine. Its claims are based on the three principles of: (1) Prepayment "on budgeted payments by groups of people—the well paying for the sick—is the only way for people of moderate means to pay the higher and higher cost of medical care;" (2) Group Medicine, as "the best possible medicine—as proven in the universities and large clinics throughout the country;" (3) Adequate Facilities, "streamlined to serve the Group with . . . offices, hospitals, laboratories, X-Ray, etc. . . . under one roof to permit accessability and ready consultation.[1]"

The creator of this plan expects the phenomenal success of the Permanente Hospital Foundation, developed during a great wartime prosperity, to function permanently with equal success, in a peace-time economy. It appears to be doing so.

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[1]From *Bulletin* of the Permanente Hospital Foundation, Volume II, No. 1, January, 1944.

ELECTED OFFICERS OF THE ACMA

	President	*Vice-President*	*Secretary*	*Treasurer*
1869	T. H. Pinkerton	D. M. Baldwin	S. Holmes	Clinton Cushing
1871	Clinton Cushing	E. Trenor	H. P. Babcock	G. E. Sherman
1872	J. C. Van Wyck	G. E. Sherman	H. P. Babcock	Clinton Cushing
1873	G. E. Sherman	W. P. Gibbons	C. S. Kittridge	H. P. Babcock
1874	W. P. Gibbons	Wm. Bamford	C. S. Kittridge	H. P. Babcock
1875	E. Trenor	E. L. Jones	C. S. Kittridge	H. P. Babcock
1876	E. L. Jones	M. W. Fish	C. S. Kittridge	Peter Wheeler
1877	H. P. Babcock	A. H. Agard	J. B. Trembley	E. W. Buck
1878	A. H. Agard	Peter Wheeler	J. B. Trembley	E. W. Buck
1879	J. B. Trembley	Peter Wheeler	Ruben Woods	E. W. Buck
1880	Peter Wheeler	J. R. Bradway	Ruben Woods	E. W. Buck
1881	J. R. Bradway	J. S. Adams	J. R. Trembly	E. W. Buck
1882	J. S. Adams	A. H. Pratt	J. R. Trembly	E. W. Buck
1883	A. H. Pratt	J. T. McLean	J. R. Trembly	E. W. Buck
1884	A. H. Pratt	J. T. McLean	J. R. Trembly	E. W. Buck
1885	J. T. McLean	J. P. Reiley	J. R. Trembly	E. W. Buck
1886	J. R. Reiley	A. G. Anthony	J. R. Trembly	E. W. Buck
1887	A. G. Anthony	E. W. Buck	L. S. Burchard	R. Harmon
1888	W. T. Southard	W. M. Patterson	L. S. Burchard	R. Harmon
1889	E. M. Patterson	D. D. Crowley	L. S. Burchard	R. Harmon
1890	D. D. Crowley	A. J. Russell	L. S. Burchard	R. Harmon
1891	A. J. Russell	W. J. Wilcox	L. S. Burchard	R. Harmon
1892	W. J. Wilcox	F. L. Adams	L. S. Burchard	R. Harmon
1893	F. L. Adams	L. S. Burchard	Myra W. Knox	R. Harmon
1894	L. S. Burchard	Sarah I. Shuey	Myra W. Knox	R. Harmon
1895	Sarah I. Shuey	G. E. Brinckerhoff	Myra W. Knox	R. Harmon
1896	J. S. Eastman	S. H. Buteau	Myra W. Knox	R. Harmon
1897	S. H. Buteau	H. G. Thomas	Myra W. Knox	R. Harmon
1898	H. G. Thomas	R. S. Stratton	Myra W. Knox	R. Harmon
1899	D. D. Crowley	J. L. Milton	Myra W. Knox	R. Harmon
1900	J. L. Milton	R. N. Rowell	Myra W. Knox	R. Harmon
1901	H. N. Rowell	E. J. Overend	M. W. Knox	R. C. Krone
1902	E. J. Overend	O. D. Hamlin	A. H. Pratt	C. A. Dukes
1903	O. D. Hamlin	E. N. Ewer	A. H. Pratt	C. A. Dukes
1904	J. Maher	E. N. Ewer	A. H. Pratt	C. A. Dukes
1905	E. N. Ewer	J. M. Shannon	A. H. Pratt	C. A. Dukes
1906	J. M. Shannon	Daniel Crosby	E. M. Keys	C. A. Dukes
1907	Daniel Crosby	E. M. Keys	A. H. Pratt	C. A. Dukes
1908	E. M. Keys	L. P. Adams	M. L. Emerson	C. A. Dukes
1909	L. P. Adams	C. A. Dukes	M. L. Emerson	Dudley Smith
1910	C. A. Dukes	A. S. Kelly	Pauline Nusbaumer	Dudley Smith

	President	*Vice-President*	*Secretary-Treasurer*
1911	A. S. Kelley	W. A. Clark	Pauline S. Nusbaumer
1912	W. A. Clark	M. L. Emerson	Pauline S. Nusbaumer
1913	M. L. Emerson	Dudley Smith	Elmer E. Brinckerhoff
1914	Dudley Smith	George G. Reinle	Elmer E. Brinckerhoff
1915	George G. Reinle	David Hadden	Elmer E. Brinckerhoff
1916	David Hadden	W. H. Irwin	Elmer E. Brinckerhoff
1917	R. T. Stratton	W. O. Smith	Elmer E. Brinckerhoff
1918	W. O. Smith	W. H. Streitmann	Elmer E. Brinckerhoff
1919	W. H. Streitmann	Clarence W. Page	Pauline S. Nusbaumer
1920	Clarence W. Page	Alvin Powell	Pauline S. Nusbaumer
1921	Alvin Powell	Elmer E. Brinkerhoff	Pauline S. Nusbaumer
1922	E. Brinkerhoff	Pauline Nusbaumer	Charles L. McVey
1923	Pauline Nusbaumer	C. L. McVey	E. Spence DePuy
1924	Chas. L. McVey	H. B. Mehrmann	Pauline S. Nusbaumer
1925	H. B. Mehrmann	J. K. Hamilton	Pauline S. Nusbaumer
1926	J. K. Hamilton	Geo. Rothganger	Gertrude Moore (Pro tem)
1927	George Rothganger	John L. Lohse	Gertrude Moore
1928	John L. Lohse	Guy Liljiencrantz	Gertrude Moore
1929	Guy Liljiencrantz	A. M. Meads	Gertrude Moore
1930	A. M. Meads	E. Spence DePuy	Gertrude Moore
1931	Henning Koford	R. T. Sutherland	Gertrude Moore
1932	Robt. T. Sutherland	D. N. Richards	Gertrude Moore
1933	Dexter N. Richards	Frank S. Baxter	Gertrude Moore
1934	Frank S. Baxter	Frank R. Makinson	Gertrude Moore
1935	Frank R. Makinson	W. Earl Mitchell	Gertrude Moore
1936	W. Earl Mitchell	H. G. McLean	Gertrude Moore
1937	H. Gordon McLean	C. A. DePuy	Gertrude Moore
1938	Clarence A. DePuy	F. H. Bowles	Gertrude Moore
1939	Frank H. Bowles	A. A. Alexander	Gertrude Moore
1940	A. A. Alexander	John W. Sherrick	Gertrude Moore
1941	John W. Sherrick	Safford A. Jelte	Gertrude Moore
1942	Safford A. Jelte	Clifford W. Mack	Gertrude Moore
1943	Clifford W. Mack	Donald D. Lum	Gertrude Moore
1944	Donald D. Lum	H. J. Templeton	Gertrude Moore
1945	Harry J. Templeton	W. B. Allen	Gertrude Moore
1946	Warren B. Allen	Theo. C. Lawson	Dorothy Allen
1947	Theo. C. Lawson	Wm. G. Donald	Dorothy Allen

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(*Note: Other names appear in the hospital sketches.)