

Max Thorek, *A Surgeon's World; An Autobiography* (New York: Somerset Books, 1943); 90-106.

PART II: SURVIVAL IN CHICAGO

Chapter 9

PRACTISING PHYSICIAN

An army of occupation runs up its colors. A stage star announces his "opening" with his name blazoned in lights. Pawnbroker, barber, tobacconist display-or did in the non-distant past -the three balls of the Medici, the striped pole, the wooden Indian. Dramatic, picturesque ways of saying to the public-"We are ready to serve you!"

A professional man simply "hangs out his shingle." And he does it with a peculiar diffidence. For while his fellows in crafts and arts and other callings attain, at some time or other in their careers, a self-acknowledged rating of proficiency, the professional man will go on through a long lifetime simply "practising."

Whereas the chefs of this world cook, the dressmakers sew, the printers print, the builders build, and the salesmen sell, a doctor merely "practises medicine." If he so far forgets himself as to claim that he "cures," he is recognized at once for the charlatan that he is.

Something profound underlies this distinction which custom and tradition have evolved. Any good medical man must carry with him all his life a deep sense of the incompleteness of his knowledge. He dare not ever claim he "knows." He dare not ever stop his study, his constant pursuit of an elusive forward winging truth. At the moment

when he says to himself, I have learned all I need to know, at that moment he has forfeited his right even to "practise."

All of us who serve under the aegis of Aesculapius know that. And yet I have wondered sometimes why medical education docs not more frankly and realistically recognize the special need of practice" which the fledgling doctor has. We used to recognize [end page 90] it. We used to require a young doctor to keep on "reading" with an older physician until such time as he fell heir to the practice of the older "locum tenens" or was able to move out, with the help and backing of his mentor, into a berth somewhere else. We have thrown away that plan now. And in doing so perhaps we have lost that nice balance which comes when an older man, who has learned to rely almost too much on experience, works with a young man, whose medical knowledge is wrapped in the very latest theories. Any brief I might hold for the much discussed "group practice," in which interesting experiments are being made in these days, would pivot on the point that in such groups older men and younger men might work together to the benefit of both. Such an arrangement would, to my mind, be the *sine qua non* of this method of practice.

I hung out my shingle. I began to practise. And I have today my share of those memories which bring embarrassed blushes to the cheeks of any older doctor worth his salt.

Fortunate for the downy young medico that Nature is so often his ally, that she will, if she can, soften the consequences of his mistakes, bring cures in spite of his blunders.

During the first week of my licensure "to practise medicine, surgery, and obstetrics," I was called in to see a young woman. As I worked, her mother watched me with something that I could see out of the corner of my eye was very close to suspicion.

Suddenly she said:

"Doctor, how long have you been practising?"

I thought of my seven-days'-old license. I tried to parry the question. The mother refused to be sidetracked. She looked sternly at me over her steel-rimmed spectacles, and I found myself blushing like a small boy caught with his hand in the cookie jar. My professional dignity was just about to take wings when my patient saved the day.

"Mother," she said. "I wanted a young doctor. The old fogies don't understand anything. The young men, just out of the universities, know the last word in everything."

My self-respect came surging back. I could not help admiring her acumen. I smiled blandly. I wrote a prescription. I went confidently away from the house. My confidence increased when, two days later, a message came: [end page 91] "Please do not go to see Mrs. M-any more."

So my prescription had worked. It had effected a cure in less time than even I had dared to expect. I was really a fine doctor and the young woman had done well to place her trust in me.

It was not until some weeks later that I learned the truth. My prescription may have worked, but not in the intended direction. My patient had agreed at last to let her mother call in an "old fogy" and, after some weeks in bed, his antiquated and outmoded treatment had brought her back to health again.

The young medico today runs less risk than I did of such humiliating experiences. Insistence by the American Medical Association that medical education emphasize clinical training, has helped to give the new graduate clearer perspective as he goes out to practise. But I am very sure that there are mistakes even on the records of these perfect products of medical education.

Some of his errors a doctor will shake off with a laugh as his living and learning increases. And some - I know it from experience-will cling to him always like restless ghosts, asking him forever-Why didn't you know then what you know now? How did you come to be so stupid? Ben Hecht wrote a story not long ago about an imaginary society of medical men who met for no other purpose than to unburden their minds about the cases in which, through unpardonable wrongness in diagnosis or treatment, they had "done to death" patients they should have saved. A macabre idea. But most of us have seen times when such a confessional would have given us release from hauntings. One's

own knowledge and experience accumulate so slowly, no matter how hard one works. And scientific research, moving on leaden feet, has a way of handing us life-saving facts too late to serve us in some of those particular cases where we would have given our own lives to have possessed them.

While I had studied at Rush, I had made friends with a little tailor in the neighborhood, whose kindness to a lonely, half-starved boy is still a bright memory in my heart. He and his good wife, with the simplicity of goodness, made me feel that I had a second home under their roof. Many a morning I had gone to the classroom with nothing under my belt but a crust of bread and some weak coffee, but with the sustaining confidence that, once class was over, I would find a steaming lunch awaiting [end page 92] me in my friend's home. They would not even have to put on an extra plate for me if I dropped in at meal time. My plate would be waiting there always.

How many times I had dreamed dramatic opportunities for me to return this kindness! And now, in the first year of my medical career the chance had come. I was in a glow of anticipation as I waited for the street car which would take me to their home for my first visit there in the rôle of ministering angel.

True, the situation lacked some of the glamor which I had cast around the dreams in which I had repaid my debt of gratitude. The son of the family, a boy of twenty, was ill. But the source of his illness was only a "pimple." I would have preferred to be able to snatch him from the jaws of some dread, obscure disease.

The "pimple," however, seemed to be making a good deal of disturbance for so small an article. The boy had a high fever and had been in bed several days. The pimple was on his upper lip, and the home remedies tried had only seemed to make it worse. Hot fomentations and compresses had done no good. That was why his family had sent for their own special "Herr Doktor."

I came with my best professional air. I took young Ben's temperature-it was 102° F. His lip was sadly swollen and the pimple undoubtedly contained pus.

No one trained as I had been trained could have looked at that lip without seeing a mental picture of the stalwart Nicholas Senn and hearing his robust voice thundering: Ubi pus, ibi evacuo! "

I knew exactly what to do. I took off my coat, rolled up my sleeves, unpacked my instruments, boiled them for twenty minutes. The anxious parents watched me with as much veneration as though I had been a visiting archangel or prophet of the Lord. And, as the instruments boiled, I felt myself indeed a messenger of God, granted a magic power to destroy disease, to bring health and happiness.

Sixty seconds, ninety seconds, one hundred, two hundred, three hundred seconds! The operation was over. Little pus drained from the wound, but I was too inexperienced to worry about that. The temperature dropped and I noted that with satisfaction.

And then the temperature began to rise again. Beads of sweat on the sufferer's brow matched those on my own as for three days and three nights I fought in a vain effort to save his life. I called [end page 93] in my schoolmate, Leon Bloch, for consultation. We infused salt solution, and we worked assiduously, using everything that medicine of that day had to offer.

So fast has medical knowledge moved since that day when the, magic scalpel which I had trusted to help me repay a debt of love turned into a death-dealing poisoned dagger in my hand, that most intelligent laymen today could tell me exactly what went wrong. The poison which had not drained from the incision had been forced into the lymphatics and poisoned the bloodstream. From that moment, the case was almost hopeless.

We were very proud of our superior knowledge in those days of 1904. We had come a long way from the time when even the great Hippocrates prescribed "barley water" for apoplexy and for inflammation of the lungs and brain, and recommended that in treatment of pneumonia or inflammation of the lung, "bleeding from the arm until the patient faints" if the pain pass upward to the clavicle. We smiled at such quaint bits of medical lore as we smiled to read that Diocles believed in "purging the head" with tea of hyssop and sweet marjoram to prevent "inflammations of the eyes, cataracts, strumous affections of the neck, sphaelus of the brain, caries, etc., etc.," or that Galen prescribed as one of his nine great remedies for dysentery

"Of ashes of snails, p. iv

Of galls, p. ii

Of pepper, p. i

Reduce to a fine powder and sprinkle upon the condiments, or give to drink in water or a white savory wine."

What quaint and foolish ideas the ancients had! And we were even scornfully superior to the physicians and surgeons of a nearer past who refused to learn what Lister had to teach.

But we had yet to learn, in that perpetual post-graduate school in which every good doctor is continually enrolled, of such new marvels as 606, insulin, the endocrines, the sulfa drugs. We had yet to learn very much of the value of asepsis, antiseptics and pasteurization, of general hygiene and of operative surgery in general.

And we had yet to learn that bistouries, scalpels, and needles have on occasion been more deadly instruments than the guillotine. We do not now-even the greatest of us-incise with bold [end page 94] confidence furuncles on the face or the mucous membranes. We treat them mainly without the knife.

But if I could only have known that in time! If I could only go back and save the life of my good friend's son!

My choice of a neighborhood in which to hang up my shingle was dictated chiefly by my heart, which is after all perhaps the best guide to a man who wishes to serve humanity. I had two opportunities immediately upon my graduation from medical school to join forces with established men, to step into ready-made practice with a good future. I chose, instead, to work among the people who had been my neighbors since I came to America. I knew what it meant to be a stranger in a strange land, hearing a strange tongue, eating strange food, bewildered by strange customs. I knew what poverty was. I had a fellow-feeling for these dwellers in the multiple ghettos of Chicago. My place was in their midst.

Chicago today, in its west and southwest neighborhoods especially, is still a loose collection of foreign villages. But these communities now are one hundred per cent American compared with those same units at the beginning of the century. Sons and daughters of the immigrants people them now, and if the old folks still speak their mother tongues-Polish, Lithuanian, Czech-in their homes, they now have stalwart interpreters in their American children to link them with the new world of which they are a part. No such interpreters were there when I began my work. And a doctor who had, through natural aptitude and curiosity and early education, something of the gift of tongues, was a godsend to the polyglot dwellers in Babel. I suppose that my ability to talk with my patients in words that they understood helped more than my university diploma to win me the confidence a doctor must have if he is to do his work successfully.

The word "ghetto" literally means restricted district. And the section of Chicago which I marked for my field of practice was made up of so many ghettos it would be impossible

to list them all. There was an Irish ghetto, a Jewish ghetto, a Polish ghetto, a German ghetto, an Hungarian ghetto, an Italian ghetto, a Slav ghetto, a Russian ghetto, a Greek ghetto. And, sandwiched in between these well-defined areas were scraps of every nation in the world. Slant-eyed Chinese thriftily plied every kind of busi- [end page 95] ness from laundry to opium, from curios to white slavery, offering their neighbors the novelty of chop suey and the excitement of tong wars. There were even a few Igorots and whirling dervishes left behind, for some unexplainable reason, after the World's Columbian Exposition of 1893.

Before I moved from that neighborhood, I had many patients in all these ghettos, patients of every possible nationality it seemed, excepting only the Chinese, who never came in any great numbers into my office on Twelfth Street.

That office, my first, still holds a special place in my heart as I remember it. It was pathetically shabby-I had a heart of rawhide in those days and a purse as lean! But the office was scrupulously and sacredly clean. By devious makeshifts and skillful barter, I acquired a learned-looking, if somewhat splintery, desk. I scrubbed and rubbed and stained and varnished it myself, and was proud of the work of my hands. I had a big armchair which I thought I owed it to my professional dignity to keep for myself. But I was always finding myself offering it to a patient in a somewhat pathetic effort to hold my practice by a little harmless obsequiousness. I learned to be shrewd and careful about such offers, however. The chair was a bit off plumb. I could balance myself with the skill of a slack-wire artist. But I found out that not all callers possessed such skill and I found

out, too, that being thrown from a bucking office chair is not conducive to confidence in the heart of a patient. So I weighed my callers with my eye. If the caller were heavy enough to hold the chair level by his own weight, he got the chair. If not, he had to content himself with one of the two "splint bottoms" available.

My books made a fine showing, even if the case in which they stood was another rehabilitated derelict. I was always a bookworm, a book-lover, a book-buyer. Some very precious and very wise-appearing volumes that had come with us from overseas stood on my shelves-books on botany, anatomy, chemistry.

I had a skeleton. Nobody in those days could place any faith in a doctor who did not have one. "Monsieur" was the pride of my life. I was especially proud that he had, not one, but two extra skulls!

I was proud, too, of my instruments. Expensive as they were then-always have been and probably always will be-I had managed to get good ones. I also owned a microscope.

[end page 96]

Of the rest of my equipment I was always a little ashamed. The place was shabby-I had to admit that. But I did what I could with soap, water, scrub brushes and elbow grease. And the results were not very bad. The faded rug which covered part of the bare floor was mended, and the floor was endlessly scrubbed. The window, with its threadbare green shade, was washed almost too often, and the red and yellow silken sash curtains hung

there gave a cheerful note of color to the room. My surgical table was a castoff, fearfully and wonderfully repaired, but it was immaculate.

I even managed a pot of rose geranium standing on a worn-out wooden bucket, turned upside down and painted green. On one wall I hung a framed steel engraving of Budapest, on another a picture of myself in cap and gown. My sheepskin from Rush was given, of course, the place of highest honor.

Outside the door was a smart brass bell and a sign which read on one side: "Doctor is Out-Please Wait," and on the other: "Doctor is Busy-Please Wait."

But, like all other newly fledged medicos since the world began, it was I who did most of the waiting.

What doctor can ever forget his first patient?

Mine was a thin and breathless wisp of a child, who knocked at my door crying.

"Doctor, Doctor, come quick," she sobbed, and I grabbed my satchel and was putting on my hat as I asked her,

"What's wrong, my child?"

"It's Ma," she sobbed, and I could see that she was shivering with fright, "Pa's beatin' her awful."

Rosie's thin little legs carried her along like the wind through the crowded, smelly streets. There was scarcely enough flesh on her bones to have filled out a sparrow. I was glad, as I hurried after her, that I had little excess flesh to hold me back. We made good time as we curvetted across a cluttered street, through sidewalks filled with loungers from Hellas, County Mayo, the back-wash of Berlin, the wharves of "la Bella Napoli," the ghettos of Turin or of Toledo, the purlieus of Limehouse, the plantations Of Alabama.

At last Rosie scuttled into a dingy, dirty, fetid cul-de-sac and down a broken set of steps. A Turkish bazaar in cholera time would have ranked no better than a draw for honors in dirt and [end page 97] odors against that alley. Around the staircase clustered the neighbors, held there by curiosity and kept from too near crowding by fear. A frightened cur howled dismally somewhere near-by. Fragments and phrases from a dozen languages shuddered in the hot autumn noontime.

Down in the darkness into which Rosie had disappeared sounded sickeningly a monotonous "twack, twack!"

Someone called out that "the doctor had come," and the crowd shifted slightly to let me pass. Holding fast to my precious bag, I stumbled into the damp mazes of that cellar.

When I had adjusted my eyes to the sudden darkness, I could see by the light of a thin bar

of day which filtered through the dirty broken window some seven or eight children huddled in the corner, hardly distinguishable from the splintered wood and piles of rags in which they crouched. In the middle of the floor lay a woman. A huge human beast stood over her. He was mouthing obscenities and he was so drunk that he had to use one outflung arm to hold his balance, while he methodically swung a heavy leather belt, mercilessly beating the poor creature at his feet.

Blood was everywhere. The woman's ragged clothes had been practically beaten from her body. A few minutes more and she would have been flayed alive. She needed me. Rather, she needed me and a squad of police! What possible use to her was a thin little doctor, so long as that three-hundred-pound murderous brute, crazed with blood lust and liquor, stood between her and any kind of medical aid?

I was no match for him. And nothing I had been taught in medical school was any possible use in this, my first "case"! I thought fast. I am not particularly proud of what I did-but I have never been able to think of more adequate action! An old broom lay on the floor. I picked it up, grasped it firmly, and jabbed the beast in the groin. Knowledge of anatomy has uses not specified in the text books! He collapsed with a terrible bellow which brought help from the curious gallery on the stairway. Now that I had him helpless, they were no longer afraid. They tied him with his blood-stained belt, with rags on the floor, and with a few borrowed clotheslines, for which, by the way, the temporary donors later asked me to pay!

The obvious next step was to call the police. But even little Rosie knew better than to let me take it. Police were dreaded [end page 98] worse than a plague of locusts in that neighborhood. We dragged the now helpless brute to the upper alley and left him there to recover. I turned my attention to the woman. She was still alive but in a desperate state. Like all her sisters in that neighborhood at all times, she had been pregnant, and the drubbing she had received had had the inevitable result. I put into Rosie's thin little hand one of the few coins I had left in my pocket and told her to take her little brothers and sisters to a neighbor's house. I sent a man to phone the County Hospital for an ambulance. The worst was over when the ambulance arrived. The poor soul was hurried off to the Cook County Hospital for a brief heavenly rest in a clean, bright place before she returned, as I knew all too well she would, to slavery under the brutal master she had married.

I learned something of her story later. It is all too typical of those ghettos. She and her husband were both Lithuanians, both still in their early thirties. Rosie had been born about twelve years before, in the first year of their marriage. Since then, there had been a child every year-but a couple of them at least had died. The marriage had climaxed a romance sprung of loneliness. Both were strangers in that strange neighborhood, both worked in the "Yards." That had been basis enough for the romance, and everything had gone well at first. The husband was a fine pig-sticker and he made a good wage. The wife worked, as most of her neighbors did, right up until the last minute before Rosie was born-and was back at work again when the baby was nine days old.

That kind of toughness was all right in the old country where women had worked on the farm and in the sunshine. Here it was different. Rosie fell sick. Her mother found herself pregnant again. The father began to cash his wife's pay check as well as his own, at the corner saloon. After he had stood drinks for the bartender and the boys there would sometimes be scarcely a dollar left. He felt himself slipping-knew that he wasn't providing for his family the comfort he wanted them to have-he was all at sea. And he took the way of forgetfulness-he began to drink more, and drink transformed him into a monster.

He felt that his wife was disappointed in him. But there were other women, plenty of them, who gave this handsome gorilla of a man the admiring attention he craved. They were blondined, [end page 99] painted, pert, and they touched him with the tar brush of their trade. Soon his wife was in the same predicament. An unscrupulous corner druggist supplied the "treatment" for their disease. The next two babies died. The third was blind.

Impaired vitality cut down earning power. The family pay checks dwindled. They had nowhere to turn. For the nuns and priests who toiled day and night as missionaries among their neighbors, they had a high disdain. The Salvation Army they might use at Christmas time-never for any other purpose. Gospel Missions they thought a rare joke. The overworked profession of social worker was then in its infancy, but even if it had been fully developed, I doubt if it could have reached a helping hand into the hovel where such misery dwelt. As wild and shy as forest animals, people like this family were all but

unreachable for good or for ill. The strong arm of the law holding punishment for misdeeds and the helping hand of charity were alike helpless.

I never knew exactly what happened to the father after that near-tragedy which had brought me into that home. I suppose that, when he was on his feet again, he was off for safety until things "blew over" through the strange catacombs of the "sheds" which were a feature of that neighborhood and neighborhoods like it. Strange labyrinth of shacks-no one knows exactly how or why they are built-they are used for keeping kraut, for storage, to shelter the cow or the chickens or the pigs. And their greatest use of all is as impenetrable avenues of escape. Once let it be known that the "law" is after a neighbor and the whole network of the sheds is offered for his protection.

As for the rest of the family, something was salvaged, with the help of Mary MacDowell of the University of Chicago Settlement. I came to be very proud of little Rosie. How she studied, worked, saved, hoped, dreamed, and salvaged! She never rose higher in the economic scale herself than a head waitress in the "plant's" lunch room, but she was a shield and buckler to that whole family. Single-handed, she worked to make them decent, respectable citizens. Her one passion through the weary working years was to "keep 'em away from the drink." And she succeeded better than I or anyone would have thought possible.

Rosie was one of the saints I learned to reverence in those ghettos. And Mother Mellaney was another.

Mother Mellaney was the tiniest, neatest little daughter of Old [end page 100] Erin to be met in a day's journey. She was poor as a churchmouse. She had five big, roistering sons-the highstrung, fighting, black Irish. They all drank like fish. They were all the toast of every girl or woman who could get a flick of an eyelash out of them. They were all generous with the lip and quick on the fight. 'Twas from the Mellaney boys that I-well, I learned about skulls and craniums from them. The old lady hated the "domned poteen" as she called it, with the same fervor as the lads loved it. Night after night, I heard her bird-like tap on my door, her soft Celtic voice calling:

"Docther, Docther, dear, is it you? Well, 'tis I, Mrs. Mellaney. This time, 'tis Timmy-Ye bein' a young man, ye'll understand the flightiness of the young-He's a black eye, Docther, and a bad crack on the skull. Can ye be comin' along, now, Docther dear?"

Never did I fail her. Never did I refuse the small pittance she was always "a'fther payin'" though I knew that it was probably her last cent-and that borrowed. She was so bravely proud. I tried to salve my conscience by waylaying one or all of the five sons on pay day and getting enough out of them, while there was yet time, to keep her alive and the modest home going. It became a game as to whether I got those boys first or the saloons and women got them. They played the game with Irish good nature, never resentful when I won, but never of their own volition turning over the money to their mother.

None of the sons was married. And the old lady was an inveterate matchmaker. The best *Schadchen* in the near-by Jewish quarter was not above lending her an ear at times. She longed for "grandchilder." Had she had them, they would undoubtedly have had skulls of oak and wills of water. They certainly would, had they taken after their fathers who, Mrs. Mellaney admitted with a gentle smile, were a "bunch of fine, handsome, dirthy spalpeens."

Her hopes for "grandchilder" were never realized. Mother Mellaney buried all her five sons one October. They went like grain before the scythe-all from typhoid. And before the Noel bells had rung, Mother Mellancy had followed them. On her death certificate, I wrote "lobar pneumonia." I know I should have added, "Contributory cause-a broken heart."

Maria was another of my early patients, and she nearly gave me apoplexy a dozen times a month. She was swift and quick as [end page 101] the water of the Bay of Naples. And she had a way with the boys-Heaven help her-and the boys had a way with her.

There was sheer, stark tragedy in her eyes, the day she came to tell me that she was afraid there would be *un bambino* and she knew there was no *mario*. The bambino had to be, of course. Never in Maria's sweet mind was there any other idea. She came to me really to see whether I could not connive with her to soften the news when she broke it at home. She was fearful of what her father would say. She was, of course, praying to the Madonna for help. She knew just what kind of help the gentle Mary could give her. She

could send along another youth, someone who would be willing to accept the responsibility of the unknown seducer.

Maria was like all the rest in her refusal to name this wretch. He was "so reecha-so granda-too much for poor Mareea."

I was pretty sure that the bambino would have a welcome once Maria had had a good sound thrashing from Pietro, her padre. The Italians seem to realize that man makes conventions, but that the Almighty Power itself distributes souls. But I had not the remotest idea how to help Maria avoid that preliminary thrashing. I suggested that the priest might help-the family were, I knew, devoutly religious.

Let good Father M-- know what she had done! Maria was horrified at the very idea. Never. Never. Why, for four months now she had not had the sacraments . . .

The very simplicity of Maria's view of her problem made it exasperatingly baffling. She was going to have a baby. Therefore she must have a husband. It was as simple as that. And she was quite sure that I could arrange things. But how? Certainly I could not marry her myself. And she was so confident that I would find a way out.

I did find one, goaded by that very confidence. I took a day off, circled around the city. In a saintly cleric, now dead, I found understanding and assistance. He was amused at my predicament, but he was full of sympathy for Maria. Would I bring her to see him? I

would. And I did. There was a long hot cable car ride across the city, with Maria proud about going with the doctor and the doctor very embarrassed about going with Maria. The interview was far from difficult. I found the young priest far more adequate to the situation than I had dared to hope. He [end page 102] knew his Havelock Ellis and perhaps his Krafft-Ebing as well as his prayer book, and best of all, he knew human nature.

He had a perfectly concrete and practical solution to offer. Among his parishioners, he said, was a wealthy young man. His mother was neurotic and the boy had been left too much to servants, especially to his tutor...A scandal was brewing. Would Maria . . . ?

Maria would do anything for the bambino!

The affair was arranged with complete honesty and openness. The boy, who had homosexual inclinations, was told exactly how things stood with Maria. He had a good mind and a fair one. He agreed. Maria's family were overwhelmed. Here was a good marriage for their daughter beyond their wildest hopes.

The young couple left for Europe immediately after their wedding and six months later Maria gave birth to a son. A daughter was added to the family a year later and soon after her birth the happy young couple returned to America. No trace of abnormality was left in the proud husband and father. Maria had cured him.

As the years went on, Maria bore eight children. I like to think that seven of them belonged to her lawful husband. With the zest for living which had made her so attractive as a child, Maria threw herself completely into the new world which her strange marriage had opened to her. She invented for her children a fine genealogy of aristocratic ancestors. She forgot her associates and friends back of the yards, including the doctor who was, in a sense, responsible for her fairy-tale good fortune. But I, at least, had no heart to blame her. She was too naïve, too childlike, too sincere.

Rich and rewarding were the years I spent among people like Maria, Mother Mellaney, little Rosie. And they were years, too, when the utmost that I could do, that any doctor, any score of doctors have done, seemed pathetically small, seemed hardly to count at all in the midst of the great human needs around me.

Poverty and want and ignorance and dirt still lurk in the alleys and hovels of Chicago's lower west side. But most of my early patients, could they return today to the neighborhood they called home, would think it paradise compared with the jungle they once lived in. [end page 103]

Those were the days, in the back of the yards area, which Upton Sinclair mercilessly, but on the whole all too truthfully, described in *The Jungle*. The great stockyards, sprawling uncleanly across several city blocks, dominated the area. To it moved the constant stream of animals destined for slaughter, and to it moved also the men and women, dumb and uncomplaining as the beasts, who had no alternative but to earn their meager daily bread

in the stench and slime within those walls. Sanitary conditions, both in the yards and in the neighborhood where the workers lived, were frightful. The hideous "Bubbly Creek" was a festering sore, breeding disease and death. Sewage was a farce and drainage hardly attempted.

A shocked American public, reading Sinclair's sensational findings, moved to alleviate some of the worst of the conditions. A cynic might remark that it was thought for the safety of the consumer of the meat prepared with such frightful carelessness rather than for the worker which brought effective reform. Workers themselves were to find their champions in the labor unions--A.F. of L. at first and C.I.O. later-which succeeded, at times amazingly, in lifting wages from ten cents an hour to something more nearly approaching a living wage, and in securing better working conditions. The battle against these unions-one of them was raging when I worked in that neighborhood-has been one of the darkest pages in Chicago's history.

Some lighthouses were beginning to shed their beams in that dismal neighborhood. There was, at the very gates of the stockyards, the University of Chicago Settlement, presided over by the redoubtable Mary MacDowell, whom the stockyards' workers knew as champion and friend. Further north, Hull House, with Jane Addams at its head, was an oasis in a desert of want and dirt. There was the Abraham Lincoln Center, headed by Dr. Jenkin Lloyd Jones. There were a score of synagogues. There were Protestant missions. And, vying with the chimneys of the stockyards to dominate the landscape, there were the

spires of almost countless Catholic Churches, representing the hope of reward in heaven to hundreds of thousands of otherwise hopeless souls.

Through the stink of the stews was heard the cry of children. They died like flies in summer from dysentery. Bad water was responsible for that, and bad milk. There wasn't much milk of any kind for those babies, but what there was was [*sic*] so poisonous [end page 104] that the cry of protest had already reached City Hall. My late friend, Charles J. Whalen, in his term as Health Commissioner, had started the ball rolling which was finally to give Chicago an almost perfect milk and water supply. But in those days the scheme had not yet "taken." In winter, bitter cold and unspeakable crowding in the miserable houses, added to the illness and death. Plagues and epidemics were taken for granted. Cleanliness was impossible. When Alderman John J. Coughlin of "de First" got through the City Council the appropriations for municipal baths which were to win for him the soubriquet "Bath House John," the halo which sanitarians placed about his head all but blinded the eyes of the public to his other contribution to the health conditions of the ward he represented-those "First Ward Balls," annual orgies at the Coliseum which set all "Twenty-second Street" loose to spread venereal disease as a flail spreads chaff!

A doctor had to be jack-of-all trades to work in a neighborhood like that. He had to be his own pharmacist and surgeon and nurse. The Visiting Nurse Association was as yet a fledgling dream, being dreamed in New York's Henry Street. The Registered Nurse was, as she still for the most part is, a white-uniformed elegance for the rich and grand.

I learned there the things the medical books had failed to teach me. I found out that it is of very small importance to a young doctor to be able, at least theoretically, to perform a delicate operation for the removal of the Gasserian ganglion or ramisections, if he finds himself all at sea when confronted by a case of skull fracture or a plain case of incipient delirium tremens, if he is deficient in the technique of removing tonsils, if he has somehow been allowed to skip over those parts of his education which would fit him to deal with measles and scarlet fever and smallpox and the like.

I believed then, as I believe now, that no one should enter a specialty unless he has been in the general practice of medicine for a number of years. In my last visit on the European continent I noticed that there was a feeling in France and in England-and I felt that the feeling was justified-that the tendency to overspecialize was often inimical to the best interests of the profession. For myself, I have never regretted, indeed I have always been profoundly thankful for, the broad basis of experience and [end page 105] knowledge I was able to lay for my future career as a surgeon in those years of almost unbelievably "general" practice.

How long I might have stayed in this first field of my choice, if I had had only myself to consider, I do not know. There was a fascinating humanness about the work. And certainly there was plenty of work to do. I was almost overwhelmed with success--though that success was measured, as every good doctor would like to measure it, in number of suffering human beings helped, rather than in fees rolling in.

But I was no longer alone in the world. I had others to consider now. And the time came all too soon when it seemed advisable for me to move. [end page 106]