

1847

Memoir of George McClellan, M.D. [1796-1847]:
A Lecture Introductory to the Course of the
Theory and Practice of Physic in the Medical
Department of Pennsylvania College, for the
Session of 1847-48. By W. Darrach, M.D.

W. Darrach M.D.

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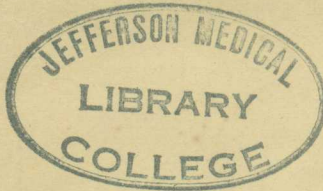
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VERTICAL FILE
McClellan, G.

MEMOIR

OF

GEORGE M^CCLELLAN, M.D.



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From

MEMOIR *July 1874*

OF

GEORGE M^cCLELLAN, M.D.



A LECTURE

Introductory to the Course of the

THEORY AND PRACTICE OF PHYSIC,

IN THE

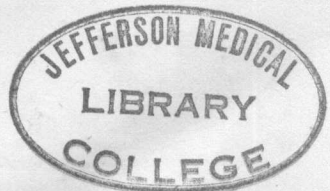
MEDICAL DEPARTMENT

OF

PENNSYLVANIA COLLEGE,

FOR THE SESSION OF 1847-48.

BY W. DARRACH, M.D.



PHILADELPHIA:

KING & BAIRD, PRINTERS, 9 GEORGE STREET.

1847.

MEMOIR

GEORGE WASHINGTON

A HISTORY

of the

THINKING AND PRACTICE OF PHYSIC

MEDICAL DEPARTMENT

PHYSICIAN COLLEGE

AND THE HISTORY OF

OF WASHINGTON

PHYSICIAN COLLEGE

AND THE HISTORY OF

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of
Historical Soc. of Penna.

CORRESPONDENCE.

Philadelphia, Nov. 16th, 1847.

PROF. DARRACH,

DEAR SIR :

At a meeting of the gentlemen composing the Class of Pennsylvania Medical College, Mr. James H. Fisher of Delaware, in the chair, and Mr. A. Reeves Jackson of Pennsylvania, Secretary; the undersigned were appointed a Committee to request a copy of your able, and truly eloquent tribute to the memory of McCLELLAN, for publication.

In performing this most agreeable duty, the committee beg leave to express to you their most heartfelt sympathies, and to lament with you, the melancholy loss of him who called you *friend*, and whom *we* proudly acknowledge as the Founder of our School.

Very respectfully,

We remain yours, etc.,

- JAMES H. FISHER, Delaware.
- A. REEVES JACKSON, Pennsylvania.
- GEORGE MURRAY, Nova Scotia.
- WILLIAM JONES, Delaware.
- JAMES HENDERSON, Pennsylvania.
- ABRAHAM SEITZ, " "
- CHARLES G. STROHECKER, Illinois.
- JOHN L. WOOLFOLK, Virginia.
- JAMES HUNTER, New Brunswick.
- ARTHUR B. WILLIAMS, Michigan.
- SIMON SCHOCK, Pennsylvania.
- DRAPER W. NEWTON, New York.
- GEORGE W. PATRICK, Indiana.
- W. LACROIX ROBINSON, Canada West.
- ALLEN WARD, New Jersey.
- JOSEPH F. ADOLPHUS, Jamaica, W. I.
- JOHN ROBERTSON, Ireland.
- THOMAS A. PEIRCE, Maine.
- ELIJAH W. CUNNINGHAM, Tennessee.
- CHARLES LEIGHTON, Ohio.

Philadelphia, Nov. 17th, 1847.

GENTLEMEN :

With great pleasure and ardent wishes for your prosperity individually, I promptly comply with your complimentary request.

Personally, your proud acknowledgement of the late much lamented Doctor GEORGE McCLELLAN, as the Founder of the School of your choice, is a gratifying confirmation of the judgment of the present Faculty: And representing, as you do in a very interesting sense to us, Nova Scotia, New Brunswick, Canada West, Jamaica, W. I., Ireland, and not less than eleven of our United States, the concession on the part of the class of 1847-8, is a tribute to McClellan which far surpasses the feeble and imperfect effort of

Your very respectful and humble servant,

W. DARRACH.

To Messrs. FISHER, JACKSON, MURRAY, JONES, }
HENDERSON, and others, } Committee.

THE UNIVERSITY OF CHICAGO
DEPARTMENT OF CHEMISTRY
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RESEARCH INTERESTS
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MEMOIR.

IN obedience to our Faculty, I appear before you, Gentlemen, to pay a tribute to the memory of the Founder of the Medical Department of Pennsylvania College;—the late, much lamented Doctor GEORGE McCLELLAN. He died on Sunday morning between twelve and one o'clock, on the 9th of last May, at his late residence, No. 248, Walnut street, in the fifty-first year of his age.

On the day previous to his death, he visited his patients as usual, and held a consultation in an important surgical case with Doctor Horner. In the afternoon of the same day, he was attacked with violent pain in the gastric region and with vomiting. At eight o'clock, P. M. his lower extremities became cold and insensible. A little after midnight he ceased to breathe.

During the last year or more of his life, his countenance and frequent indisposition manifested that he was sustaining himself against chronic disease by his extraordinary strength and activity of mind and spirit. Autopsy discovered this disease to be ulceration of the mucous coat of the bowels, and that the immediate cause of his sudden death was an ulcerated opening a few inches below the sygmoid flexure of the colon.

At the earliest period after the sad intelligence reached us, we met, and among the expressions of con-

dolence, resolved that his memoir be made, by the President of the Faculty, the subject of the opening introductory of the present course.

I may properly understand this resolution to mean a tribute of the heart from, not only the present Faculty of this school, but also from its former and primary one of which Doctor McClellan was a distinguished member; and from her alumni and pupils; and from the parent institution.

We all lament the death of McClellan!—At evening we come together, with slow and silent steps, to plant the yew, the cypress, and the weeping willow, sacred to the memory of departed worth; and also, most gladly, to wreath the amaranth and the laurel for his brow. I feel that, in truth, I may most safely venture to be, on this occasion, a mouth of condolence and praise for such as you. I have long known McClellan;—longer, indeed, than any member of the profession outside of his family, except our mutual friend Doctor Beesley. We have ever loved him; and have always appreciated and admired his genius, his acquirements, and his numerous, extraordinary, bold and successful operations in surgery.

My task is limited to a tribute to the memory of McClellan. More than this, I leave to those who are gifted with the rare talent of constructing human character from moral actions; and, with reverence be it spoken, to the Wise and Gracious Master who, in respect to all his servants, keeps the full record of their deeds, and alone is able to discover the main-spring of human conduct.

In that record, doubtless, there is full proof that McClellan was, at least, not a slothful servant. Inaction, with its consequent vice of procrastination, was not his characteristic. His acts in relief of suffering

were numerous, free, spontaneous as the stream of an unfailling spring. Some of them are engraven on the hearts of many who enjoy life from his bold and pioneering surgery ; some are tissued in the growth of American surgery ; some in the diffusion and enlargement of medical education ; many are but imperfectly recollected ; and a multitude are, by the oblivious sand which the current of time deposits, covered up—not lost. There is an eternal memory of human deeds, which, when done in obedience to the Master's command, "Go heal the sick," will graciously obtain the praise of "Well done, good and faithful servant," and the invitation, surpassing all invitations, "enter thou into the joy of thy Lord."

George McClellan was born at Woodstock, Windham County, State of Connecticut, on the 22d day of December, 1796.

His race is Scottish—highland Scotch. We trace his family to Kircudbright on the Galway, and back to the eventful period which terminated the Scottish monarchy. McClellan, at that time, a century back, was a clansman, wrapt in his tartan, a garb which has ever been associated with a martial spirit, and in contrast with oppression.

His great-grandfather, bold, generous and intrepid, after having, with his fellow highlanders, espoused the desperate cause of Charles Edward and fought in the disastrous battle of Culloden, emigrated to this country, and settled in Massachusetts, in or near the town of Worcester. His son was General Samuel McClellan, of the Revolution. He settled and accumulated a large property in the township of Woodstock, Connecticut. By two marriages, he was the father of seven sons and two daughters ; who, by intermarriages, have become connected with most of the older leading

families of New England, and have scattered the paternal name over the country, a name distinguished in the political and military world.

James McClellan, Esq., the father of Doctor McClellan, was born in Woodstock, Sept. 20th, 1773. He, also, was distinguished for energy and intelligence; and, as a very extensive wool-grower, was devoted to the manufacturing interests of our country. He married early in life into a family of English descent, by the name of Eldredge, many branches of which were settled throughout Connecticut, and took an active part in the war of Independence. The Doctor's mother lost, at the storming of Groton, near New London, eleven near relatives, immediately killed or mortally wounded. His maternal grandfather served throughout most of the war, as an officer of the Continental army. He was present at the battle on Long Island, and at the evacuation of New York. This ancestral statement shows that the McClellan spirit has been martial; and the fact, that Lieut. George McClellan, the son of the late Doctor McClellan, is now an officer of the Sappers and Miners, and, with his company, has been in all the actions in the valley of Mexico that preceded the armistice, and have since terminated in the capture of that city, demonstrates that the valiant spirit of the highland Scotch still continues to exist.

A humane rather than a martial spirit becomes the physician, yet oftentimes presence, boldness, and intrepidity are his essential requisitions. McClellan had much of these opposite qualities. Human character, it is true, results from education; and its excellence depends on that Power which constrains into the straight and narrow path of self-denial and obedience: nevertheless, the force, direction, and result of specific character depend upon physical organization, which, unsuppressed

or unperverted, continues to show itself the same, generation after generation. That of McClellan was Gaelic mixed with the Anglo-Saxon stock. From his paternal Gaelic stock, he inherited his restless, generous, intrepid spirit; and from his maternal Anglo-Saxon stock, he obtained his strong, sagacious mind. Hence it is that McClellan, like the elm tree, possessed those two opposite and rarely combined golden qualities of firmness and flexibility, so essential to greatness of character.

A large, symmetrical head, thick black hair, strong brow, stout and projecting chin, and high cheek bone, were blended with a deeply set, quickly glancing, mild blue eye; with an impulsive motion of his muscles, induced by a mind enthusiastically occupied with bold, humane acts; and with a compressed yet smiling mouth—a manly smile at purpose formed or accomplished, which did not relax even in death. We beheld it in the corpse, on the funeral day, as strongly as any of us ever witnessed it in his living face. When we looked on then, and whilst many had cut off portions of his dark locks, slightly grey, we experienced, beside the sadness of the occasion, a feeling of,—shall I call it,—surprise! that that rapid mind, rapid tongue, and rapid hand and foot, were now at last for once still, and that warm and generous heart cold.

McClellan, thus gifted with sterling qualities of body, mind and heart, was educated by a succession of master spirits;—his father, the distinguished Principal of the Woodstock Academy, and subsequently Dwight, Silliman, Hubbard, Dorsey, Physick, Wistar and Chapman!

His primary studies were pursued at the academy of his native township, under the patronage of his father, a principal stockholder, and who fully appreciated the

importance of a thorough system of education. At this excellent institution, George made unusual progress, manifesting the same energy and rapidity which characterized him in after life. He excelled at sports, as did his father, by reason of a remarkable strength and quickness of sight and an unequalled unison in the movements of his hand and eye. It is related of him, as illustrative of this happy unison which, by cultivation, became of inestimable value in his surgical operations, that on one occasion, although he had never previously fired a pistol, he, in several successive shots, did not once miss the mark.

This gift manifested itself at a yet earlier period. When a child, he became expert at a practice of transfixing minute objects by darting a pointed instrument at them. To such acts of childhood, he has attributed much of his surgical character, his remarkable rapidity in taking up arteries; his trueness in striking upon arteries and other important parts with the point of the knife; and his instantaneous and true manner of passing the needle and cataract knife into the eye.

I may here add an anecdote in evidence of an early application of his dexterity to surgery. A servant of his uncle, from an accident, had a fracture with displacement of bone and profuse hæmorrhage. The family physician, living at a distance, was immediately sent for. George, in the meanwhile, was at the case, set the bone and bandaged. The professional gentleman, on arrival, had only to say, in compliment to the lad, that he had supplanted him and made his visit useless. This way, be it right or wrong, George has had through life. In the fall of 1812, McClellan entered the Sophomore class of Yale College, at the age of sixteen years—an early age to be a Yale sophomore. This is an apparently trifling circumstance, but it gave George the disadvan-

tageous position, of being by far the youngest in the class—a lad among young men, many of whom have since become distinguished in society. He was a small, well set, active youth among them, with thickly curled black hair, whom they called Little Mac. Nevertheless, despite of his youth, and the want of that mental discipline which age gives, and which his older classmates possessed, he coped with them by reason of a strong memory, quickness of perception, clear and rapid mode of thinking, and ardent feelings.

Yale College was at that time under the presidency of the celebrated Doctor Dwight, and enjoyed the zealous labours of Professor Silliman. To the latter of these distinguished and learned men, and to his department of studies, McClellan became peculiarly attached. It is now more than thirty years since Silliman and McClellan were preceptor and pupil, yet the former in his condolence at the premature death of the latter, distinctly remembers “his zealous devotion to chemistry, mineralogy, and geology. He excelled in a knowledge of those branches. In continuance,” says Professor Silliman, “he attached himself to me both as his instructor and friend. I was ever happy to have him with me on all occasions, and especially in excursions to investigate the mineralogy and geology of the vicinity of New Haven. Such was his zeal, that he was willing to load himself with minerals on his pedestrian tours; one of which, during a college vacation, for the purpose of observing and collecting minerals, was from New Haven to Woodstock, by the circuitous route of the coast, New London, Norwich, &c.,” being three-fourths of the circuit of the state.

In 1815, at the early age of eighteen years, he obtained his Baccalaureate at Yale, with a high reputation for his knowledge, especially of the natural sciences.

Immediately on graduating, McClellan applied himself to the study of medicine, and entered the office of the late Doctor Thomas Hubbard, of Pomfret, one of the most distinguished surgeons of Connecticut, and subsequently, the Professor of Surgery in the Medical College of New Haven. He remained a year with him. In 1817, he came to Philadelphia to attend the Medical Lectures, confined at that time to the University of Pennsylvania; and to become the private pupil of the late lamented Doctor John Syng Dorsey, the nephew and associate of the celebrated Doctor Physick. Dorsey was the Professor of *Materia Medica* and, at the time of his unexpected death, of *Anatomy* in the place of the distinguished and beloved Doctor Wistar.

Dorsey's *Elements of Surgery* was the popular text book to his uncle's invaluable lectures on surgery, to which chair Dorsey himself had been an adjunct. The Professor and the community, therefore, regarded Dorsey as the chosen one to advance surgery from where Physick might leave it. But it appears that, in Providence, it was not Dorsey, but the New England youth in his office who, after Physick, was to become the great surgeon, and to make the then coming age a McClellan-epoch in American Surgery; as the then passing one was Physick's. Physick and Dorsey both predicted the future eminence of McClellan. The sagacious Doctor Physick pointed out McClellan when a pupil, as a remarkable young man, who would soon rival his masters in professional eminence and fame!

It was in 1818, during McClellan's pupilage under Doctor Dorsey, that my intimate acquaintance with him began; occurring as follows. As one of the resident medical students of the Hospital of the Philadelphia Alms House, I was making a morning routine of the medical wards, when an arm was shot into the bend of

mine in the most confiding manner. I recoiled for a moment, I confess, at such apparent obtrusiveness. I wist not that the stranger was McClellan!—one to be highly esteemed by the Medical world, destined to be one of the mighty men in surgery; to sustain, after Physick, the chirurgical character of Philadelphia; in order to the making of a national reputation, to co-operate with Warren of Boston, Mott of New York, Smith of Baltimore, and Dudley of the West; to rank with Chelius of Germany, Velpeau of France, Liston of England, and Carmichael of Ireland. Through ignorance and uncharitableness, I did not then discern him. But now I know in review, that that first salute, apparently abrupt and obtrusive, was, in fact, courteous, pleasant and intelligent,—that which honored and benefited, infused a more fixed purpose and more professional zeal, raised to a better position whence to perceive more extensive relations. I became knit to him. By an unanimous election of the Board he became one of us—Beesley, Freeman, McClellan and myself. We became associated as senior and junior to manipulate and prescribe together. Often has he enabled me to make a new and truer diagnosis, and suggested a more efficient therapeutics.

Indulge me, gentlemen, here in giving more of my personal testimony. McClellan's language was ever chaste and conciliating. He was the spirit and delight of the house. Ever advancing in medical knowledge and ever communicating, he became our daily mental stimulus. His unrivalled unison of eye and hand, has been mentioned; with equal truth I notice also his equally remarkable unison of a rapid mind and tongue. At his meals nor in his bed can I recall to mind McClellan! My associations of him relate to his rapid walkings—

rapid and constant talkings, his perpetual prescribing, manipulatings, experimentings; his autopsies and operations, rapid! rapidly at it, and always at it! Book after book on medicine, he constantly and rapidly read and clearly and pleasantly detailed, making us listen to him. He provoked us to physiological experiments. Each corpse in the dead-house was marked by his autopsy and surgical operations;—thus he sometimes made trouble, easily quieted though, for the people even then seemed intuitively to know that McClellan was appointed to be their head Doctor, in spite of all the great doctors; and they let McClellan do any thing. In surgical matters he was ever active, testing and trying whatever he had read, or heard of. On one occasion, I well remember, that, while reading, he jumped from his chair, and exclaimed, “Mott of New York,” it is said, “has taken up the innominata for aneurism, and I believe it!” Having immediately afterward left us a while and then returned, he exultingly exclaimed, “I’ve done it!” He had gone to the dead-house and there imitated Mott’s operation on the subject. Such, in 1819–20, at the age of twenty-two years, was the department of McClellan in the Philadelphia Alms House.

Who of her students has more relieved the sickness among the poor of the county of Philadelphia? He had under his care, as junior, exclusively of other medical cases, fifty, sixty and seventy cases of typhus fever daily; and at the same time he was keeping a cat-watch on the phases of the numerous forms of syphilis, which filled the wards from the breaking up of the American army after the peace of 1814.

Who has reaped more experience from such varied and extensive clinic? made more autopsies? imitated on the subject more major operations, read more her

medical library? It used to be our complimentary query: what author in it, McClellan, have you not examined? Such is my personal testimony of McClellan.

In the spring of 1819, he received his Doctorate from the University of Pennsylvania. The subject of his Thesis was "the tying of arteries;" a manly and practical production, subsequently published as a source of professional information. Among the Alumni of this venerable institution, who has better fulfilled his commission, and done her more honor?

He was well armed against disease. He depended upon his own manly exertions and talents. On these alone he stood before the world. His conduct was open, frank and uncompromising. He served the deepest interest of humanity, alleviating anguish and curing disease. He sought the sick, and soon they sought him, both becoming inseparable from each other. To McClellan, an office, putting out a Doctor's-tin, setting-up for practice, and office-waiting for it were irrelevant. He practised any where and every where. Within the year of his graduation, he successfully treated a case of spina ventosa of the lower-jaw, performed the breaking up and couching operations for cataract; and shortly afterward, the extraction of the lens.

In 1821, he married into one of the most influential families of Philadelphia, and became established as a practitioner, before whom was an open path of usefulness and honor. As such we find him keeping house, and enjoying domestic happiness at the corner of Walnut and Swanwick streets, on the latter of which he had arranged an office and a lecture-room. His now happy life, so far from abating, stimulated his professional zeal. He became most actively engaged in general practice and in delivering courses of lectures on Anatomy and Surgery.

His mind was eminently practical, and furnished with an extraordinary fund of knowledge in his favourite pursuit; and, as a lecturer, he displayed that same vivacity of manner which has characterized him through life, and he became an attraction to medical students. His attentive class consequently became very soon so numerous as to require for their accommodation a larger room.

Thus began a life of public usefulness, which continued unceasingly for more than twenty-eight years, the labours of which admit of the following classification: viz.—First, his surgical operations, which surpassed those of his cotemporaries in number, novelty, and boldness. Second, his efforts with the legislature and with Jefferson and Pennsylvania Colleges, to establish medical departments in Philadelphia. Third, his public and private clinical, anatomical, and surgical instructions in the office and in two medical schools. Fourth, his authorship as a Journalist, and a Writer on the principles and practice of surgery.

The amount of these labours cannot be estimated nor fully appreciated. It implies, however, a most assiduous and humane exercise, and, to a considerable extent, improvement, of the healing art. This inference being proven, George McClellan becomes a historical medical character. He shines brightly on the page of medical history, an honour to his family, his native state, his almæ matres, our city, and we proudly own him as the Founder of our School.

We demand for the founder of our school, the late Doctor George McClellan, a place, honourable, perpetual among those who, by their worthy deeds, have become historical medical characters; and will attempt to show his claim to this high place by what he has been as a surgeon, a medical instructor, and founder of medi-

cal schools. This admitted, and the alumni of his schools are ranked as (*ad eundem*) in all medical institutions, here and every where. First, then, McClellan as the surgeon.

The pre-eminent surgeon among us, when McClellan began his rapid career, was the late Doctor Philip Syng Physick. Having practically, as a dresser, learned the principles of Hunter, in St. George's hospital, London, and having introduced and successfully practised, taught and diffused them among us, Physick became the acknowledged father of American surgery. By correct medico-chirurgical doctrines, he rebuked the malpractice in the country, and by his peculiarly ingenious and judicious use of rest, position, and diet, prevented not unfrequently resort to the use of surgical operations.

There were instances then, however, of human suffering, and which doubtless have since increased in number, which demanded a bolder surgery than appears in Dorsey's Elements, and the operations and lectures of Physick. Cases such as those of Mary Rice, Dr. Graham, Brook, Wagonseller and Rhinehart, were not reached by American, some of them not by European surgery. The surgery of Physick's day was lithotomy with the gorget; and subordinately to it, as major operations, were performed the extraction of the opaque lens; the tying of the carotid and internal iliac arteries; the extirpation of the entire mamma with the axillary glands; the division, in strangulated femoral hernia, of the stricture, then erroneously supposed to be seated in the inner single edge of the external oblique muscle of the abdomen, and since demonstrated to be seated lower down on the thigh, and made by the sigmoid flexure of the fascia lata. A case of amputation at the shoulder joint outside of army surgery, may be added to the major surgery of the time in this

country. The idea of removing the entire limb was not then conceived. Such an operation did not belong to that day's surgery. By reason of a false anatomical association, the clavicle and scapula were regarded almost as much a part of the trunk as the *ossa innominata*; and therefore the removal of the two former bones was no more imagined than that of the latter. Two accidental cases had occurred previous to 1820, one of them in the French army and the other by machinery, in which the collar bone and shoulder blade were torn off with the arm, without producing a mortal shock, the laceration healing kindly, and recovery being established. Dr. Mussey, of Cincinnati, it is true, removed the said bones in a *secondary* operation; but McClellan was the first one to induce and apply the principle of resection of the entire prehensile member.

His case, exhibited in preparation No. 321 of the pathological cabinet of our museum, is an enormous fungus *hæmatodes* involving the shoulder joint. Without precedent, he made the resection of the scapula and clavicle; breaking thereby new ground, extending the bounds of American surgery, and leading recently in this school to an unexpected improvement in amputation *above* the shoulder joint.* Who, besides McClellan, to meet the emergency, would have summoned to the help of humanity his scientific confidence, intrepidity, and disinterestedness?

McClellan, in 1823, extirpated the inferior maxillary bone. The case was that of a frightful osteo-sarcomatous tumour, filling and protruding from the mouth. It involved the lower jaw bone to the condyles, and being

* See amputation above the shoulder-joint in the case of Dr. Wagonseller, published in the *American Journal of Medical Sciences*, by Professor Gilbert.

raised above the level of the teeth, prevented not only the functions of mastication, deglutition and speech, but also the introduction of food into the mouth. This deplorable condition was aggravated by constant pain, and doomed the sufferer in the morning of life, with precocious intellect, to premature death by pain and starvation. The drawing before you exhibits the case in July, 1823, when McClellan was called to examine and decide on it. He operated. The operation was as rapid as bold, occupying only four minutes and a half. This drawing exhibits the extirpated tumour and jaw; and this preparation is the removed cancerous mass. After the parts had been carefully inspected, the huge flap or pouch of skin was replaced; its cavity partly filled with patent lint bent into the shape of the removed circle of bone, and the whole properly bandaged. The dressing was no sooner completed, than the tongue resumed its natural situation, and, to the great delight and astonishment of all the family, the little sufferer began to articulate with considerable distinctness; called for water, and drank a moderate quantity from a common cup. In three weeks the parts were entirely healed. From the cut surfaces of the condyles shot out a luxuriant crop of granulations, which finally became ossified to the distance of about one inch in front of the angles, forming a solid support for the soft parts below the cheeks. The new flesh beneath the apex of the tongue also became indurated into a ligamentous mass, giving firmness to the integuments, and bolstering out the chin to its natural prominence. The induration of this ligamentous matter eventually became so great as to be a substitute for bone, to which the muscles contracted adhesions, so that the patient masticated common food. In less than five weeks the child became robust and fleshy, went to school in good spirits, articulated accu-

rately, and her countenance, as is shown by this drawing, resumed its natural appearance. But after several months, cancerous disease appeared in the glands and new parts, to terminate the life of this interesting patient. This issue is truly sad: nevertheless, the operation bespeaks the great surgeon.

McClellan's medico-chirurgical judgment, though censured and unsupported at the time, was correct. The censure was based on the belief that ossification proceeds from successive depositions within the periosteum; and that therefore bone, if by any surgical operation or otherwise removed with the periosteum, cannot be regenerated. McClellan's reasoning on the case was, that as granulations become vessels, nerves, and muscles, they, in their appropriate place, will become tendon, ligament, and also bone. The cases of Decker, Guernesy, Belmain, Rargerus, Else and Mott were on record, showing that ossification had followed the removal of portions of the lower jaw. These facts, which had remained a long time isolated and useless, sustained his reasoning, and were enough to free his generalizing mind from the prevailing error on the subject of the reproduction of bone; and enabled him to enrich the profession with the principle that the inferior maxilla is reformed from an old fragment, without a pre-existing periosteal membrane, and to establish it by an operation bolder than those of his predecessors, performed by him subsequently several times with entire success.

A third point of improvement in surgery by McClellan, is that of not shocking the system in the extirpation of large or deep-seated tumours, by the serious preliminary operation of tying a main artery, as for example the carotid, when its branches are involved in the disease.

Convinced that this practice, induced by a physiologi-

cal error, was useless and injurious; and that hæmorrhage was more dependent on the inosculation than the arborescence of vessels, or at least equally so, he determined to save the constitution of his patients from so grave and useless a hazard. "To tie up," says he, "the carotid artery, before the performance of an operation, can only prove that the life of the patient is able to resist a double hazard, while his surgeon is gaining all the advantages which can be realized from such a precaution." Again, continued he, "when we have ascertained that at least as many successful operations of the same kind have been performed without interfering with the main arteries, it can hardly be expected that we should agree to the necessity or even propriety of such a preliminary." And further, "I have extirpated almost all the glands about the throat, — the whole of the inferior maxillary and sublingual, — the lower portion of the parotid and many of the neighbouring lymphatic glands; repeatedly have I had occasion to expose the carotid artery and jugular vein; and have even dissected away tumours from the very coats of these vessels without encountering any immediate danger or subsequent inconvenience."

Among other cases, may be noticed, as illustrative of practice on this principle, that of Mr. Joseph Brown of Orange county, New York. He was afflicted with an enormous carcinomatous tumour, extending from the lower part of the right cheek over a large part of the throat, complicated with fistula, caries of the lower maxillary bone, and enlarged lymphatic glands. This case, in the judgment of the profession here and in Europe, demanded a previous interference with the carotid. But McClellan, in the presence of his fellow professors and the students of Jefferson Medical College, successfully operated in accordance with, and in estab-

lishment of his new principle of not making a preceding serious shock on the system by securing the main artery.

This improvement in surgery was rendered the more valuable by being associated with another which was a peculiar characteristic of McClellan's surgery ; viz., the prevention of hæmorrhage by a practical application of the principle of laceration. He put the larger arteries involved in his operation into the condition of those of a lacerated wound, by stripping them off by a quick and dexterous sigmoid motion of his forefinger. He thus saved the time occupied in taking up arteries and applying ligatures, lessened pain, and rendered his terrific operations rapid and almost bloodless. It was McClellan's ambition to put aside the knife, and as much as possible, to substitute its handle and his fingers. By these bloodless means he would rapidly separate adherent cellular tissue, and effect at the same moment a severing and torsion of the arteries.

These new principles and methods of McClellan in surgery came all into play in his famous operations on the parotid gland and superior maxillary bone. These, more than any other of his numerous and bold operations, have surprised and astonished the profession ; and have made him the subject of admiration and praise in America and Europe.

In respect to the diseased parotid gland, McClellan is not only the surgeon, who, for the first time in the United States, has completely and *allowedly* removed it ; but who also by no less than eleven successful performances of this surgical feat—more by far than any other surgeon of his own or former days,—has established medical opinion in favour of its utility and practicability.

Permit me, gentlemen, to occupy a few moments of

your time in an exposition of this grand operation, and of McClellan's pre-eminent relation to it. The complete extirpation of a diseased parotid gland was considered an impossibility. The under portion of this gland is deeply seated and compacted in among important muscles and bones appertaining to the brain, the organs of hearing, mastication, deglutition and speech. Through its substance pass the external carotid artery and the great nerve of expression and respiration. When carcinomatous, it becomes jammed into deep-seated cavities having bony margins: its entire removal by surgery, therefore, was regarded as one of the impossibilities. Its extirpation had however, been performed in Europe, but not without exciting remark and surprise. Says Bordeu of Heister, "We wonder at his skill and courage to extirpate the parotid gland." The cases of Arel, Siebold and Sourcrampe, are recorded as surgical exploits. The intrepid John Bell ventures to express the belief that "it might be performed." Abernethy endeavours to strengthen the yet unformed belief respecting it, by referring to Goodland's communication. Carmichael remarks on a case operated on, that "it proves the practicability of extirpating said gland." Sir Astley Cooper, the surgeon-in-chief of his day, remarks in a letter to Mr. Kingsbury, as a matter of moment, that he had "the last year twice extirpated the parotid." As late as 1824, the distinguished Beclard considered it necessary to certify with his associates, and to confirm it by autopsy, that in a fatal case the entire gland had been removed by him.

McClellan's merit in this matter may be concisely set forth as follows.

In 1826, a medical gentleman from Europe became a patient of Doctor McClellan. He was afflicted with a diseased parotid, excruciating pain, and a chronic

ophthalmia. As he had been already under the care of a distinguished European surgeon, there was no doubt of the diagnosis. The point for decision was the practicability of extirpation. The tumour had on its surface the scar left from a failure to remove it from supposed insurmountable difficulties. The operation, owing to Beclard's recent failure, was in disrepute; and a medical error was commonly entertained respecting its inutility and impracticability. To these discouraging circumstances are to be added the inherent difficulties of the operation, viz., the serious implication of the carotid artery, that of the seventh pair of nerves, the constricting bony margin made anteriorly by the ramus of the lower jaw and posteriorly by the mastoid process and external meatus of the ear; the diseased mass jammed by its processes into a deep expanding cavity in such a manner as to be in contact with the walls of the pharynx, the styloid process and its muscles, the internal carotid artery and jugular vein, and the hypoglossal nerve.

Here was a formidable case, though not to McClellan an impossibility. It was one full of danger and intricacies—one which demanded dexterity, presence of mind, accurate anatomical and physiological knowledge, medical resources and surgical expediences. McClellan had attained only his twenty-eighth year of age, and only his seventh year in the profession, yet he determined to operate. Having denuded the tumour, he cut down upon the zygoma and the masseter muscle before, and upon the external meatus and mastoid process behind; divided the posterior belly of the digastricus, and burrowed under the lower extremity of the mass, in order, by a leverage of his finger, to wrench the tumour from its bed. He then with his thumb and finger tore off, by a sigmoid motion, the trunk of the external carotid from

its place of entrance into the tumour, and so he treated the descending vein. After a momentary gush of blood there was, without ligature or previous securing of the carotid, no more hæmorrhage. Having then divided the strong bands of cellular tissue and adherent fibres of the styloid muscle, he, by powerful and repeated efforts at wrenching, elevated the whole mass above the mastoid process and ramus of the jaw. The greatly enlarged trunk of the portio dura was then seen emerging from under the mastoid process, and mounting over the posterior margin of the tumour, to enter its substance near its anterior surface. The unnatural tension of this nerve produced such agony, that the patient fell into convulsions and syncope. The division of the nerve instantly removed these symptoms, when the conjunctiva became deeply injected with extravasated blood. The operation was then completed by separating the upper portion of the tumour from the zygoma, and dividing and securing the main trunk of the temporal artery. The cavity of the wound was much larger at the bottom than at the surface. Its depth was four and a half inches, and at its bottom were exposed the walls of the pharynx and other important parts. The lips of the wound being brought together, kindly healed.

The patient recovered, returned to Europe, and subjected the seat of the operation to the careful examination of Sir Astley Cooper and Mr. Abernethy, and obtained their joint opinion in the following words: "That no doubt can exist that the whole parotid gland has been removed." McClellan has subsequently performed, as has been mentioned, ten similar operations, of which only one was fatal. Since which, it has been successfully performed by Drs. Randolph and J. B. McClellan; and very recently by Dr. Pancoast, making the fourteenth extirpation of the parotid gland which

has occurred in Philadelphia—a greater number than has occurred in any other American or European city.

McClellan's last surgical feat was the resection of the upper maxillary bone. The disease was scirrhus.

He operated June 15th, 1846, assisted by Drs Atlee, Morton, and his son, Dr. J. B. McClellan. Two integumental incisions were made; one extending from the left angle of the mouth to the temple, across the zygoma, the other from the inner canthus to a point in the line of the first incision, about half an inch above the angle of the mouth. The two flaps being removed from the tumour and bony processes, the maxillary bone was cut through at the base of the nostril on the left of the vomer, by means of the saw and Liston's bone forceps. Then were made the sections of the nasal process at the inner canthus, the sutural end of the frontal process and the zygomatic process. The soft parts of the eye were subsequently detached from the orbitar process, and the soft from the bony palate. These numerous soft and bony separations having been thus rapidly made, and that without a cowardly and cruel preliminary taking up of carotid and other arterial trunks, McClellan boldly seized immediately with his hand, the whole cancerous mass thus detached by saw, forceps, scalpel and fingers, from nostril, eye and malar bone, and tore it from the remaining attachment to the pterygoid processes of the sphenoid, the deep-seated keystone bone of the skull. All came away without further difficulty. The horrid cavity, after proper inspection of the soft and bony parts, and the tying of a small artery, was stuffed with lint, and the flaps replaced and secured. The patient, though he fainted during the dressing, bore the operation with great fortitude. He has since recovered and is doing well.

The appalling hæmorrhage to be expected in this operation, may be estimated by Lizar's statement of it in his first and ineffectual attempt to operate. "I was prevented from succeeding," says he, "by the hæmorrhagic disposition of the gums and palate. My patient lost, in a few seconds, upwards of two pounds of blood, welling out at every incision as if there had been an aneurism by anastomosis." He therefore, in his second operation, previously secured the temporal and internal maxillary arteries and external jugular vein: and in his third, he tied the external carotid. McClellan tied none of these.

Enough, doubtless, has been said in proof of the boldness, novelty, and success of McClellan's surgical operations. Their number cannot be so easily ascertained. An unprecedented reputation, increasing through twenty-eight years, had made him known in Europe and America; and consequently a great number of important cases were referred to him. His office was the daily resort of from ten to thirty surgical patients, on many of whom he would there, in his off-handed way, perform operations which, to the ordinary surgeon, would be a matter of importance and preparation. In ophthalmic surgery, stricture, syphilis, hernia, lithotomy and crushing, he had a special reputation. To these may be added his numerous extirpations of cancerous mammæ, lymphatic glands, thyroid glands, and enormous encysted and adipose tumours, together with his cases of dislocation, fracture and amputation. He was not only rapid in the execution of his operations, but untiring in assuming new obligations, and all as the ordinary events of a day. He has operated in three cases of strangulated hernia within thirty hours. On an occasion, prostrated by sickness, he travelled several miles in a severe snow storm, and arrested a danger-

ous alarming hæmorrhage from the axillary artery, in consequence of a gun-shot wound, by promptly tying the subclavian artery. So soon as he had completed the operation, the stimulus of his surgical zeal subsided, and he was seized with vomiting and great prostration; yet, notwithstanding his sickness, he, on his return home in the storm, turned out of his way with renewed energy, and performed an operation on the eye, after which, the excitement of operating passing off, his vomiting and depression returned.

His surgical zeal caused not only a disregard of health, but also of appearances. On one occasion, he darted into a retail dry good store in this city, opened one of its drawers, took out something without asking permission, which he put into his pocket, and darted out, leaving all in amaze at his rapid, unexplained conduct. Its explanation was that, being engaged, or about being so, in an operation, and needing a certain form and kind of bandage, he promptly remembered that more than a year back he had, after an operation, put away in that drawer the bandage he needed.

On a third occasion, whilst consulting with a fellow practitioner, and in company with the patient at her work-stand, he helped himself to her sewing-silk, twice doubled, waxed and measured off portions of it, talking at the same time more rapidly than he could be easily understood. "What! are you making ligatures, McClellan?" remarked his medical friend. "Yes," replied he, "I'm going to operate, and the operation may be bloody. Come along!" They went; and all the way McClellan incessantly talked. On arrival, they found students in waiting. The case was an enormous carcinoma, deeply seated in the back of the thigh, and reaching its length. McClellan rapidly and completely denuded the tumour, and, whilst burrowing under it

and rooting it out, divided the arteries more rapidly than his assistants secured them, and the parts became deluged with arterial blood. He, with admirable presence and quickness, turned the patient over in his blood, cut down below the sigmoid flexure of the fascia lata, and secured the crural artery, the great trunk of all the divided and bleeding vessels. Then, replacing his patient, he completed the extirpation of the cancerous mass. In the deep, extensive wound, among the exposed muscles and the ligatures on arterial branches, the great ischiatic nerve was seen dangling about like a whip-cord.

From such data some estimate may be made of the amount of his surgical labours. Has any other surgeon in private practice, done an equal amount of surgery? It was not, however, on what McClellan did, bold as it was, that we are willing to rest his chirurgical character, but on his *inherent capability* of performing extraordinary and supposed impossible operations in surgery. Opposition and apparent impossibilities, the ordinary sedatives on human efforts, were to McClellan the needed stimuli to bring into action, for great deeds, his hidden reserved powers. As proof that his surgical capabilities were rather inherent than imposed by education, are the facts, that he operated boldly before his graduation,—that he extracted the lens as before mentioned, within a year after—extirpated the lower jaw within four years after, and in the seventh year of his becoming an M. D., as has been noticed, he performed the supposed impossible operation of extirpating the parotid gland. In view then of his chirurgical genius and his master-pieces in surgery, is not McClellan to be regarded, by the profession throughout the world, as one of her surgeons-in-chief?

McClellan sustained another character, and with equal

merit,—that of a medical instructor in all the departments of writer, private preceptor, public professor and clinical teacher. He excelled in all of them. That happy unison of eye and hand, more than once adverted to, did not more certainly secure to him surgical dexterity, than did that more important unison of a rapid mind, tongue and pen secure for him eloquence in teaching.

As a writer, he has been the contributor of original medico-chirurgical reports; one of the conductors of the *American Medical Review and Journal*; the commentator on Eberle's *Theory and Practice of Physic*; and soon will be known as the author of a system of *American Surgery*. Through the politeness of the publishers, Messrs. Grigg & Elliot, I have been permitted to glance over three hundred pages of proof. One hundred of it unfolds new and important principles of shocks, reactions and irritation. The rest of them is also a rich mass of medico-chirurgical principles illustrated by his own extensive clinic. The entire work will make about five hundred pages octavo. It is one of genius and of high practical value. Its style that which can only be attained by good sense, simplicity, experience, and extensive knowledge.

These remarks may surprise some!—perhaps many! McClellan's off-hand manner did not, to the ordinary observer, bespeak cultivation, but rather that he was only one of the mere knife-men in surgery, and not one of the gentlest. Such indeed is the impression with many.

Permit me to introduce here an interview between McClellan and a medical friend, which will present this matter in a correct light:

“Having read me,” says the latter, “the section on burns of his new work; I remarked that he had con-

cisely embraced in his section all our knowledge on that topic,—adding that I was agreeably surprised at so great perspicuity and method. At this last remark he started! Yes! replied he, in his peculiar emphatic manner, ‘you have the opinion which others have of me,—that I’m confused and thoughtless, and never take time to reflect. I confess that it is reasonable that you all should think so; for you judge me from my out-door manners and conversation. But *there!* pointing to his sofa, there! I can be found at study. I visit patients at the hotels and elsewhere, pick up the news, glance over the papers and talk politics, for amusement and relaxation, and back home to my study. I’m now engaged in this work. I read the washy stuff from the press, study other works, am posted up in Egyptian Archæology, and have lately read some of the classics. I have not only kept up my knowledge on all the branches of medicine and surgery and the collateral sciences, but also in history, poetry, &c.’ I know, continues he rapidly, ‘that I’m as hard a student as there is in the city, and always have been so. I toil and spend a large portion of my time at my books; and that is the reason I’m always at home except when called away by business. Yes, except for patients; and in the evening, I’m at home;’—and again pointing to the north end of his study sofa, ‘I’m there.’”

McClellan had an exoteric and an esoteric manner. In public, he was inconsiderate and irregular; alone, he was the grave, profound Philosopher. The forthcoming system of surgery will then not only not surprise us, but we shall expect it to give to him the character of a classical medical writer; and that it will be regarded an American standard work.

As an oral instructor he was not less distinguished. His principles were Hippocratic, Baconic, Hunterian. It

was the straight and narrow path of orthodoxy in Medicine, and not the broad and devious road of French and German sophistry, in which he walked. Hence it was that pupils had confidence in him, and in after life now look back and respect him, and with us now condole. He drew them and keeps them by truth and right. "Recollect," says he, to the graduating class of Jefferson College, "what I have so constantly urged respecting the rules of induction. What else than classification of phenomena is the whole science of nature? Be governed therefore by the observation of symptoms,—not by the imaginary causes of them. Follow the dictates of common sense. Be satisfied with the opinion thus formed. Reject all inquiry into the secret and undefinable causes of life and disease. You cannot imagine the advantage you will gain, by such a course, over those who are governed by the long exploded precepts of the schoolmen—revived and repolished, as it must be confessed they have been, by the innovators of France. While they are balancing doubts and difficulties, and vibrating from one conjecture to another, you will be fortified by the calm and unchangeable dictates of sound reason and philosophy."

Such precepts were incessantly given. His instructions were not restricted to the official condition of chartered institutions. He communicated knowledge any where and every where—at the bed-side, in the office, at the corners of the streets, in the gig and by the way side. He rapidly and abundantly acquired intellectual nourishment for pupils; and with the instinctive propensity and delight of a nursing mother he pressed the hungry pupil to his heart and fed him from his truthful scientific lips. Such was the multiform character of McClellan as a Medical Instructor, making the second item of our claim.

McClellan held a third public station; which in its

results, has proved to be by far the most important—the founder of medical schools. A short statement will show that he founded them in accordance to order, time and place.

The origin of Medical Schools in this country is in two events. Doctor William Shippen, recently returned to the colonies from Europe, commenced, in 1762, the first anatomical course of lectures; and, in his introductory, expressed the belief “in the expediency and practicability of teaching medicine in all its branches in Philadelphia.” The other event was that Doctor Morgan formed, whilst yet in Scotland, the project of engrafting a medical department on the College of Philadelphia. Two are of one accord, to make Philadelphia the American seat of Medical Science. Morgan secured the opinion and recommendation of several influential friends of the institution in Great Britain. They accordingly, by letters, advised the trustees in favour of establishing medical professorships. They, in approval of the plan, appointed Doctor Morgan to the professorship of the Theory and Practice of Physic on the 2d of May, 1765, and Doctor Shippen to that of Anatomy and Surgery on the 23d of the following September. Thus germinated our time-honored Medical Department of the University of Pennsylvania,—the parent medical school of America.

The trustees, to conciliate public sentiment, made, through Professor Morgan, an exposition of the adopted plan. His address contained the following prophetic expressions. “Perhaps,” remarks this patriarch of our medical schools, “this medical institution, the first of its kind in America, though small in its beginning, may receive a constant accession of strength and annually exert new vigour.” So it has been. Oak-like, after a slow growth of 39 years, and then ten years of more rapid

evolution, it attained in 1817 its acme. This acme, for now thirty years, as a bloom which can have no decline—no involution—no senile atrophy, it has fully retained and will retain.

Second, "this medical institution may collect a number of young men of more than ordinary abilities and so improve their knowledge as to spread its reputation to distant parts." This expectation also has been realized. It numbers more than 4000 graduates. Many of them have become chemists, druggists and agriculturists. Among the rest are the great body of skilful and humane physicians, and the corps of army and navy surgeons, together with discoverers, journalists, authors and eloquent teachers.

Third, "this institution, by duly qualified alumni, may give birth to other useful institutions of a similar nature." This also has come to pass, not only in Philadelphia, but elsewhere. Most of the medical schools throughout our extended country have been formed by the alumni of the University of Pennsylvania.

I call attention to the object of our venerable alma mater: viz., obedience to the great command, "Go heal the sick;"—the sicknesses of the people of a new country—their fevers, inflammations, chronic and nervous complaints, and accidents,—to the liberal and wise policy adopted to fulfil the command; viz., the establishment of a maternal institution, which, through the instrumentality of her able alumni, shall form other medical schools. One of these alumni was the late Doctor George McClellan. An effort to form a second medical school in Philadelphia, was made during the winter of 1818-19. The items in the argument presented on the occasion, were the inordinate increase of population by birth and immigration, the uncomfortable increase of the class from that of three hundred and eighty-eight to

four hundred and fifty-five pupils, and the genius of the republic favouring competition rather than monopoly. The spirit of the enterprise and the methods being objectionable, the unwise effort proved abortive. With this matter McClellan was not engaged.

Nevertheless, a second school was subsequently formed, and that by McClellan. He formed it in accordance with the expectations of Shippen and Morgan, the founders of the parent school. Pupils clustered about this able alumnus of this school, and filled his office; for when he eyed a pupil, he locked his arm, grasped his hand, and instructed him. McClellan's zeal may be inferred from the following extract of one of his letters to a student of medicine, viz., "It will give me great pleasure to meet you among my small company of fine young fellows in the office where at least you can be happy if you do not improve. As to the terms, I'm on such terms with your excellent brother, that I shall be happy to have an opportunity of showing my good feelings towards him; and if you do not feel satisfied with that, why, we will wait until I get poor and you get rich before you do or say any thing further on the subject."

In regard to generosity in the character of McClellan, I will add in digression the following short anecdote.

On one occasion, he visited one on whose eye he had recently operated. The case demanded subsequent rest in bed and darkness. He found her at the wash tub. To his rebuke, she replied, that her poverty forced her to disobey the doctor. He instantly walked her back to her bed and dark room, and putting the good prescription of a twenty dollar note in her hand, said:—"Now you don't have to disobey."

A wealthy army officer, long afflicted with a difficult surgical complaint, on being completely cured and re-

stored to health by him, in the most gentlemanly manner presented him, with his expressions of gratitude, a most generous fee. "No!" replied McClellan, "I can't be fee'd for curing wounds received in the defence of my country." A military gentleman had an only son congenitally crippled. A mutual friend urged the sending for McClellan. He successfully operated, and here also he refused pecuniary compensation. His admiration of the virtues and talents of the father induced McClellan to decline compensation for service to the son.

In addition to zeal and generosity, he possessed that rare and enviable gift of recollecting names and faces. Says one of his former pupils, in exemplification: "I first saw Doctor McClellan when he passed through our town to Harrisburg, to favour the law chartering Jefferson College. He called at my brother's office, in which I was a student, at a time when several medical students from other offices were present. He was introduced to us all, and all were named. He was there but a few minutes, picked up a newspaper, glanced over it, seemed to devour its contents in an instant, talked about it rapidly all the time he was reading it, said a few words about the College, and was off, leaving an impression in his favour which I'm sure has never been effaced. What is remarkable, one year after, three of us went to Philadelphia to attend the lectures, and the moment we entered Doctor McClellan's office, he recognized and named each one of us, although he had seen us only once before, a year back, and only a very short time."

A teacher so qualified will attract pupils. To his office he added an anatomico-surgical room. And here he lectured night after night with all the ease and animation of a clinical teacher. Who cannot perceive here the legitimate germ of a medical school? Who and what could arrest its evolution, and who could give the

measure of its full development? New York and Baltimore, whose schools for a few years were prospering, did not then know how the reversion to Philadelphia was to be effected. In the course and by the Orderer of events, the McClellan class became the Medical Department of Jefferson College; and he, for fifteen years, the lecturer extraordinary,—at times on surgery, and at times on both anatomy and surgery. Since then it has commanded and received for its professorships the best talents of the country, and has become a great school.

Was the location of it in Philadelphia an impropriety? Shippen, in view of the spirit of his first introductory, could not consistently have thought so. The state elsewhere can furnish no requisitions and appliances for medical instruction. The unprecedented growth of the scion in the same soil, has not rendered less fruitful the deeply rooted mother. To change the metaphor, the two schools, like two magnets, collected more than double the amount of pupils,—fulfilling thereby, with increase of zeal, usefulness and reputation, the object of our alma mater, and the liberal expectations of the American medical patriarch.

Another school was to be formed by McClellan. In 1838 his labors as a teacher were restricted again to those of a private class. Rich in medical science and general literature, and more than ever Hippocratic and Hunterian in his views, he enforced, with more zeal than ever, his favorite common-sense inductive system. His class consequently prospered, and in 1839, became, with a full faculty on the six cardinal branches, The Medical Department of Pennsylvania College, located at Philadelphia.

I need not notice the evidence that this third school is also both well timed and well placed. During four years it enjoyed unprecedented prosperity—its class averaged

100 matriculates. Suddenly in 1844, it was in the condition of a ship just out of a storm. And now, it is like the same remanned, having safely made four additional voyages, and now spreading sail for the fifth. May we have fine weather and happy faces all the voyage.

Such was the public life of the late Doctor George McClellan. He now appears before us in the triple character, pre-eminently, of a surgeon, a teacher, and the founder of medical schools.

Man's daily acts seem like trifles,—worthless as detached and separated grains of sand; but these aggregated, as the shore of the ocean, and those enchained and summed up, as life's work, excite our admiration,—indeed they both seem to be almost sublime. Permit me to make an application of this truism by saying that McClellan, except when he performed some bold act of extra surgery, seemed to us who were familiar with him in the ordinary, unfinished, imperfect doings of detached and separated days, as merely one of us; but now, that life's duty is done, and gazing at him in the completeness of his character, we instinctively honor him with the honor due unto him. This is the tribute we pay to his memory.

In review, we discern a three stranded thread, genius, utility and rapidity in thought, word and action, like the triple elements of light, passing through all the events of his life, to be the unity of his character.

With remarkable quickness he learned from books and conversation. That, which without and beyond precedence, his sleepless genius strongly and practically conceived, he promptly executed. He thought, executed and communicated, in a day, more than others did in a week,—his weeks were as the months of ordinary men; and his years, each of them, as their lives. His

crowded hours making him precociously experienced, he consequently distanced his contemporaries, and, as a youth, was found among his seniors and the master-spirits of his profession. McClellan, surely, "was not one of those who are appointed to lock their hands in those of their preceptors and predecessors, and tread the same bare path with neither change of motion nor ground, where each one leads as he is led." His appointment seems rather to have been, to seek for Truth in Truth's own Book, which by God Himself was writ; wisely thinking it was fit, not to read comments only on it, but, "on the original to look."

McClellan had his peculiarities. His *sans ceremonie* and *en avant* spirit seemed like obtrusiveness, insubordination and disrespect—and the infliction of rebuke has been doubtless sufficiently given!—Some of his best friends indeed would say that he was impolitic, and unwise, and, at times, even inconsiderate and imprudent. His bold and novel acts in surgery, to him not extraordinary matters, he would most freely communicate to all and every one in season and out of season, and in such a peculiar rapid incoherent manner, that often it displeased the lover of established usage and propriety. He sometimes thereby indeed also disturbed the ordinary course; and ruffled occasionally even those who seemed, at a very early period, to prophetically perceive that McClellan was not commissioned for an ordinary life. But we all did it ignorantly. Now, looking at the full cartoon of his character, we discern that his peculiarities were the guilelessness, unceremoniousness and unsuspectingness of a child of genius perpetually burning with a surgical zeal. The peculiarities of one who oftentimes felt his spirit stirred against opprobrious disease stalking with defiance in the terrified presence of the medical profession, and who, with-

out professional support, dared to meet and subdue it. That daring he has imparted to others. Like Bowditch, he infused his spirit into his pupils. There are now hundreds of them scattered over the country who manifest it in their bold and efficient surgery, and who will welcome the forthcoming publication of those principles which they once heard from his eloquent lips, and on which their success in practice has so much depended.

His Faults! they were those of humanity and genius, and those educed by external relations! There is a repentance which cometh down from above!—"If man, said McClellan, had nothing better to depend on, before his Judge, than his own righteousness, it would be a poor dependence!" Is this the language of the penitent—then his sins are washed away—away for ever!! He is before us without his faults,—the gifted man of our profession,—his ten talents all improved.

We honor him for his marvellous works!—"In the sight of great men" he "shall be in admiration"! His pupils, his schools, his parents, our city and county, our state and nation, and the whole medical profession "will honor" him "for the uses they have had of him," subordinately, however, for "of the Most High cometh healing." He createth the physician; giveth him skill, and medicine out of the earth. As His servant we honor him. "The sick had need of him, and in his hands there was good success."

