In This Issue:

The American College of Dentists:
  History, Objectives and Ideals  C. E. Rudolph
  Activities, Past and Present  Milton G. Walls
  Membership in  M. H. Thornton

Delayed Return:
  The Return of the Gripsholm  John L. Boots

Heredity, its part in caries susceptibility and resistance  H. R. Hunt and C. A. Hoppert

Reports: the secretary and committees

Correspondence and Comment: Was John Harris “The founder of dental education?”
Presented by the American College of Dentists and such additional papers and comment from responsible sources as may be useful for the promotion of oral health-service and the advancement of the dental profession. The Journal disclaims responsibility, however, for opinions expressed by authors.

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Objects: The American College of Dentists "was established to promote the ideals of the dental profession; to advance the standards and efficiency of dentistry; to stimulate graduate study and effort by dentists; to confer Fellowship in recognition of meritorious achievement, especially in dental science, art, education and literature; and to improve public understanding and appreciation of oral health-service." — Constitution, Article I.

Announcements

Next Meeting, Board of Regents: Omaha, Neb., Oct. 12-13, 1944.
Next Convocation, Omaha, Neb., Oct. 12, 1944.

Fellowships and awards in dental research. The American College of Dentists, at its annual meeting in 1937 [J. Am. Col. Den., 4, 100, Sep. and 256, Dec., 1937] inaugurated plans to promote research in dentistry. These plans include grants of funds (The William John Gies Fellowships) to applicants, in support of projected investigations; and also the formal recognition, through annual awards (The William John Gies Awards), of distinguished achievement in dental research. A standing committee of the International Association for Dental Research will actively cooperate with the College in the furtherance of these plans. Applications for grants in aid of projected researches, and requests for information, may be sent to the Chairman of the Committee on Dental Research of the American College of Dentists, Dr. Albert L. Midgley, 1108 Union Trust Bldg., Providence, R. I. [See "The Gies Dental Research Fellowships and Awards for Achievement in Research," J. Am. Col. Den., 5, 115; 1938, Sep.]
American College of Dentists

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1943-1944

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W. Harry Archer, Jr. (47), Pittsburgh

James Nuckolls (46), San Francisco

L. E. Blauch (45), Washington (D.C.)

Charles F. Harper (44), New Jersey.
Contents

History, Objectives and Ideals of the American College of Dentists.  
*Charles E. Rudolph, D.D.S.*  
1

Past and Present Activities of the American College of Dentists.  
*Milton G. Walls, D.D.S.*  
4

Membership in the American College of Dentists.  
*M. H. Thornton, D.D.S.*  
9

Delayed Return.  
*John L. Boots, B.S., M.A., D.D.S.*  
13

Inheritance of Susceptibility and Resistance to Caries in Albino Rats.  
33

American College of Dentists:

*John V. Conzett, D.D.S., Chairman.*  
38

Report of the Secretary (Chicago meeting of the Regents, Feb., 1944).  
*Otto W. Brandhorst, D.D.S.*  
43

*Arthur H. Merritt, D.D.S., Chairman.*  
46

Editorial: The Future  
51

Correspondence and Comment: Was John Harris “The Founder of Dental Education”?  
(Continued)

I. John Harris and His Activities.  
*Edward C. Mills, D.D.S.*  
55

II. Did John Harris Make Any Substantial Contribution to the Founding of The Baltimore College of Dental Surgery, The American Society of Dental Surgeons, or the American Journal of Dental Science?  
*Bernhard Wolf Weinberger, D.D.S.*  
63

Book Announcements  
80
American College of Dentists

EMERSON said: "The office of the scholar is to cheer, to raise, and to guide men by showing them facts amidst appearances. He plies the slow, unhonored, and unpaid task of observation. . . . Whosoever oracles the human heart, in all emergencies, in all solemn hours, has uttered as its commentary on the world of actions,—these he shall receive and impart. And whatsoever new verdict Reason from her inviolable seat pronounces on the passing men and events of today,—this he shall hear and promulgate."

This quotation was suggested through its use in *The American Scholar*, Fall Quarter, 1943, published by Phi Beta Kappa. "An address delivered by Emerson in 1837 under that title was called by James Russell Lowell, 'an event without any former parallel in our literary annals', and by Oliver Wendell Holmes 'our intellectual declaration of independence'."

The title of the address became the name of the magazine and with a little paraphrasing might become the name of ours, *The Dental Scholar*. This expresses in few words the real object of the College and the Journal.
HISTORY, OBJECTIVES AND IDEALS OF THE AMERICAN COLLEGE OF DENTISTS

CHARLES E. RUDOLPH, D.D.S.

Necessarily this discourse must be short since there are two other speakers on the program so only a meager portion of the material available can be used. An attempt will be made to give enough to heighten the curiosity and interest of members so that each one may want to go further in seeking knowledge of the institution.

Historically, the idea of the A.C.D. has no birth date. Neither can we say who was the first person to think of it. Sufficient for the purpose, therefore, is the fact that three men brought the idea into fruition in the year 1920. These three men were Arthur D. Black, Chicago, John V. Conzett, Dubuque, Iowa, and H. Edmund Friesell, Pittsburgh, Pa. They are now termed the Founder, Organizers. Their conference led to the selection of eighteen other men throughout the United States who with the original three constituted the founders of the College. The names of the founders are as follows:

Henry L. Banzhaf
John F. Biddle
Arthur D. Black
John P. Buckley
Harvey J. Burkhart
John V. Conzett
Julio Endelman
H. Edmund Friesell
William A. Giffin
Clarence J. Grieves

Thomas B. Hartzell
Thomas P. Hinman
Milus M. House
Victor H. Jackson
C. N. Johnson
Ervin A. Johnson
C. Edmund Kells
Albert L. Midgley
Frederick B. Noyes
Roscoe H. Volland

Charles E. Woodbury

1 This and the two following papers were presented before the Minnesota Section of the American College of Dentists, Saturday, September 18, 1943, at the Leamington Hotel, Minneapolis, Minnesota.

JOURNAL OF THE AMERICAN COLLEGE OF DENTISTS
VOL. II, NO. 1

1
No dentist who is familiar in the least with dental history, literature, scientific procedure, and association work could fail to be impressed with this outstanding list of men, most of whom were in their prime two decades ago when the College was born. The very act of reading these names conjures in all thoughtful minds, the hopes, aspirations, finest traditions and ideals of dentistry. How better could a lasting foundation be built for any living association than through the sincere and benevolent efforts of such men? One might pick a name at random from this list and let that man symbolize the College. A safer and grander tradition can be had by no other organization in dentistry. In this list we find numerous names of men among the immortals. If they had done nothing more in their careers than to aid in the forming of this association, it would have been sufficient to mark them as above the average. Such names as A. D. Black, Biddle, Giffin, Grieves, Hinman, Jackson, Johnson and Kells are symbolic of great achievement, great sacrifice and indelible impressions on the practice and practitioners of dentistry. Such men build for the future.

This living organization has, of course, no definitely circumscribed areas in which it must work and grow. One can think of it rather as an evolutionary, progressive group whose objectives are well outlined by statements found in the original constitution. To live up to the concept of its founders it must be the beacon light searching for the new paths over which dentistry must in the future travel. It is the business of this group to ponder and suggest ways and means for appropriate conduct with the people dentistry serves. Without political or mercenary ambitions, the best minds in dentistry can here function to the upbuilding of the entire dental social structure. It can be and is a helpful force in moulding dental policies in all of its aspects. The members of the College today who number somewhat over a thousand are drawn from every corner of the United States and its possessions as well as from many foreign countries. If there are cliques or divisions in the profession, this group surely has a cross-section of them and to the good
name and honor of this institution they all work in harmony with the single purpose of making life better for all people.

Lest we cannot remember what our pledge is, I shall end this discourse by including it, hoping that rereading it will lend further inspiration to each and every one of us:

"I have read a copy of the Constitution and By-Laws of the American College of Dentists.

"Recognizing that the American College of Dentists seeks to exemplify and develop the highest traditions and aspirations of our calling, I hereby accept, as a condition of Fellowship in the College, all its principles, declarations and regulations.

"I pledge myself, as a member of the American College of Dentists, to uphold to the best of my ability the honor and dignity of the dental profession, and to meet my ethical obligations to my patients, to my fellow practitioners, and to society at large.

"I also pledge myself to refrain from all practices that tend to discredit the profession, including employment, or holding a proprietary interest, in commercial corporations supplying dental products or services to either the profession or the public; giving testimonials for such products or services; participating in radio programs that advertise proprietary preparations sold to the public; bartering in fees; making excessive charges without rendering commensurate service; dividing fees with other health-service practitioners, or in any other manner taking advantage of the ignorance or confidence of the patient.

"I further pledge myself to devote my best endeavors to the advancement of the dental profession, and to perfect myself in every way possible in the science and art of dentistry. I shall be ready at all times to give freely to dental colleagues, privately or publicly, the benefit of any knowledge or experience I may have that would be useful to them; but will give courses of instruction in dentistry, for remuneration, only as an appointed teacher serving under the auspices of a dental school, dental society, hospital, or other accredited professional or educational agency."
PAST AND PRESENT ACTIVITIES OF THE AMERICAN COLLEGE OF DENTISTS

MILTON G. WALLS, D.D.S.

The American College of Dentists was originally founded to be of service in helping to promote dental health. It was not founded for the sole purpose of honoring men who had made outstanding contributions to dentistry, but rather to associate and assist such men through collaboration and concerted efforts to attain greater heights of usefulness than could be developed by individual initiative.

The usefulness of any society depends upon its constructive activities, individual interest and unanimity of membership support of those activities. Membership in the College carries with it certain responsibilities of the individual. Every member should take part in the meetings and discussions. He should do some individual thinking and offer ideas or suggestions for group consideration. Many times these individual ideas brought out in a discussion will open a new vista for another person in the group which may have far-reaching results. In order to achieve certain stated objectives of the College, a number of projects have been undertaken, all of which have been directed by a singleness of purpose: to raise the standards and efficiency of dental practice to achieve more nearly the ideals of the dental profession.

Foremost of these objectives has been an outline of education which has been subdivided several times. Since its inception, the College has tried to standardize curricula and elevate methods of teaching in all accredited dental schools, largely through the suggestions and active participation of members of the College. Under a grant from the Carnegie Foundation, a survey was made of the dental educational facilities in North America.¹ With this as a starting point the American Association of Dental Schools has laid down certain requirements and certain standards of curricula to which all

¹This survey was directed by Dr. William J. Gies. This project was initiated before the organization of the College, but the findings, etc., have been basic in studies by the Committee on Education.
have adhered. This has brought about an advanced standard of basic education for dentists requiring two or three years of general college or academic college training plus four years of dental and medical sciences.

The Committee on Education has continued to study all prospective changes in methods of teaching and through its suggestions has tempered many radical departures, and encouraged many changes for the better. The emphasis at the present time is an endeavor to stimulate more capable young men to take up the study of dentistry. From a high of 13,099 graduates in 1922 to a low in 1934 of slightly over 7,000 graduates, was a terrific drop in those interested in dentistry. This number was barely enough to replace those leaving practice each year. The field of public health dentistry was rapidly expanding, and it was difficult to find enough men to fill the available positions in this type of service.

A second sub-classification under education has been an attempt to encourage post-graduate study and research work. A set of rules has been set up regarding teaching of post-graduate groups; membership in the College is forfeited by any member who gives a course of instruction in dentistry under any auspices except that of a dental society, dental school or other recognized professional or educational agency. It is not permissible to charge exorbitant fees for courses of instruction under any auspices.

Since its inception, the American College of Dentists has shown much interest in dental research and has bent its efforts and given much financial support to encourage research in any field of dentistry. Probably the best known name in connection with dental research is that of Dr. William John Gies. Dr. Gies is a Doctor of Philosophy, educator, author, and although not a dentist, is a member of the American College of Dentists. He has done much to promote a higher level of dental education and has done more than any other man in the furtherance of dental research. He was the founder in 1920 of the International Association for Dental Research which has now become one of the most potent forces in research in
dentistry in the world. About a year before this he founded the *Journal of Dental Research.* He believed so thoroughly in the educational possibilities of such a magazine that he not only served as its editor for 17 or 18 years, but made up the financial deficit each year of that time and finally turned it over to the International Association for Dental Research.

The College earmarked the sum of $25,000 from its general reserve fund to be spent for research over a period of years. A committee was set up to take charge of this fund to see that it was used wisely. Any person who has a dental problem and wishes to work it out may apply for a grant in aid to this committee. He must set up his problem and tell the manner in which he expects to work it out. After a thorough investigation, if the project seems to be a worthy one, the committee will give him the necessary equipment or arrange to pay the money required for the specified need. These grants in aid are in amounts of $50 and up. For instance, the work being done at Minnesota on the use of fluorine as a preventive of carious lesions, is the type of research that we wish to encourage.

The work done by the committees on socio-economics has been one of the outstanding problems in social research that the College has undertaken. The first report was published in book form entitled "The Way of Health Insurance," under the direction of Dr. Herbert J. Phillips. The second report of this committee, which is now under the direction of Dr. Chas. E. Rudolph, will be published this fall. The Minnesota section has been fortunate in having a preview of this report in the very fine analysis of it given by Dr. Rudolph in May, 1942. All agree that research problems unfold very slowly and therefore much of the effort expended has not as yet come into flower. As the years go on, more and more fruition of the labor on many projects will make itself shown.

Still another classification under education is the work which has

*He was also the first editor of the *Journal of the American College of Dentists.*

*This book is now off the press and is available through the Secretary of the College.*
been done in dental journalism. At the time of the inception of the American College, dental journalism was preventing dentistry from reaching the full status of a profession. The accepted advertising in many of the commercially owned journals was so obnoxious that it tended to keep dentistry in the sphere of a trade. A committee was appointed under the chairmanship of Dr. Bissell B. Palmer. This group made an exhaustive study of dental literature, history, and journals. A classification was set up denoting the type of ownership—whether under the auspices of dental societies or organizations, or whether they were privately owned by individuals or trade houses. At this time most of the magazines were controlled by various commercial interests and were primarily a medium for advertising their products. Of these the *Dental Cosmos*, owned by the S. S. White Co., was probably the most ethical, and certainly the most influential among dentists. Nearly all of these have passed into oblivion, the *Cosmos* having been given to the American Dental Association. Due to the work originated by this committee and the follow-up work of subsequent committees on journalism, of which our Dr. Hyde is a member, there has been a great increase in the non-proprietary type.

Today there are only two proprietary journals of note, but there are several press or publishing house controlled. This is certainly a step in the right direction because it has elevated the standards of journalism to a great extent. However, we will not reach the Utopia in dental journalism until all of the periodicals are under the undivided control of organized dentistry. Then and then only will this committee of the American College of Dentists be dissolved.

Another activity undertaken by the College, which has proven of tremendous value to the profession, is the task performed by the Committee on Prosthetics. Theirs has been the task of preventing the licensing of laboratories to make dental appliances for the public. The role they have played has been that of watching the areas in the United States where commercialism has been strong. Then by working with the local dentists it has been possible to prevent the
enactment of laws which would degrade dentistry and be a detriment to the public.

The Committee on Hospital Dental Service has been successful in opening the doors of hospitals on a more equitable, professional basis. They have a good workable agreement which insists that a dentist using the facilities of a hospital must be a member of organized dentistry.

The activities mentioned in this short paper are not all of the activities engaged in by the College and its members, but they are among the most important. The College has laid its greatest emphasis on the education of the dentist that he may be better able to perform his services.

The assignment of this subject has not only given me a perspective of the work of the College, but it has portrayed a picture of dentistry—a picture which shows dentistry in the beginning to be a trade composed, to too great an extent, of charlatans, fakers, and commercial interests; it shows the gradual rise of the true spirit of dentistry due to a few hardy, farsighted men of high ideals; it shows the transformation of dentistry to the full status of a profession, and when the right time came, the American College of Dentists was born to become the guiding star of a growing idealistic group of men and women.
MEMBERSHIP IN THE AMERICAN COLLEGE OF DENTISTS
M. H. THORNTON, D.D.S.

While my small contribution to tonight’s program is mostly statistics, yet to me, as one of the younger members, it proved very interesting and I sincerely hope that it will be of interest to you.

As you have been told by Dr. Rudolph, the American College of Dentists was founded August 20, 1920, by twenty-one charter members. Since then it has grown to an organization of 1118 active members, twenty-two honorary members, and has a roll of 188 members who have passed on.

With the exception of Nevada and Wyoming, it has members in every state in the union, in the District of Columbia, and in the Territory of Hawaii. It has members in the Dental Corps of both the regular Army and the Navy, as well as members in Australia, Canada, China, England, India, and Korea.

It is interesting to note the growth of this membership since its organization according to the years; 1921 was the first year that members were elected to fellowship, and in that year 15 fellowships were conferred; in 1922, 16; 1923, 25; 1924, 11; 1925, 9; 1926, 17; 1927, 22; 1928, 30; 1929, 53; 1930, 23; 1931, 28; 1932, 39; 1933, 45; 1934, 35; 1935, 34; 1936, 37; 1937, 63; 1938, 262; 1939, 103; 1940, 125; 1941, 45; and 1942, 81. You will note that the largest number of fellowships was conferred in the year 1938, which, as a matter of coincidence, is the year that our own Dr. Rudolph was President of the College.

Officers: The officers of the American College of Dentists consist of President, President-Elect, Vice-President, Secretary, and Treasurer.

Regents: A Board of Regents, consisting of the President, President-Elect, the Vice-President, the Secretary, the Treasurer, the Editor, and five additional members, who conduct the business of the College, except as otherwise provided.

Censors: A Board of Censors, consisting of five members, receive all nominations for membership. The College holds a convocation
at least once in each calendar year. The Board of Regents, by a majority vote, may call special meetings of the College and of the Regents. No other authority has power to call special meetings of the College or the Regents.

The membership of the College is divided into sections. Sections are organized in geographical centers, to support and promote locally the aims, purposes, functions, and ideals of the College.

Wherever there are sufficient Fellows, and it is their desire, sections may be formed with the approval of the Board of Regents. They petition the Board of Regents for a charter to form a new section, and at that time the petitioners determine the boundary of the section. There is no set limit to the size of the section or the number of members in it. (Example): There are eighteen such sections in the United States, namely, Kentucky, Northern California, Maryland, New York, Minnesota, New England, Wisconsin, Colorado, Pittsburgh, Iowa, Illinois, St. Louis, Oregon, Texas, Florida, Indiana, Washington, D. C., and Southwestern (California).

The New York section has the largest membership with 92. California is next with 85, but that is divided into two sections, the Northern California, and the Southwestern. Illinois has a membership of 63; Texas, 54; Michigan, 44, and Wisconsin, 45. Minnesota has a membership of 57, with South Dakota, 3, and North Dakota, with 4, gives us a section membership of 64. Montana has a membership of 4; New Mexico, 3; Oklahoma, 2; and Idaho is the lowest with 1.

The Minnesota section was the fifth section of the College to be formed and thus is one of the oldest. It ranks about fourth in membership, and in the last five years, at least, has been very active. We are well recognized in the College, having had the honor of having one of our members, Dr. Rudolph, President of the College in 1938, and Dr. Lasby now serving on the Board of Regents, as an elected Regent.

Membership in the American College of Dentists consists of two
classes—Active and Honorary. Each member receives the title of Fellow.

*Active Members* consist of dentists and others who have made notable contributions to dentistry, or who have done graduate, scientific, literary, or educational work approved by the College.

*Honorary Members*: Any person who, through eminent service, has promoted the advancement of dentistry, or furthered its public appreciation, may be elected to Honorary Membership.

Any member of the College may nominate candidates for membership. The candidate, however, must be nominated by two Fellows, and should reside in the section in which the members nominating him reside.

A candidate for membership must have been in practice ten years, and must be a member of the American Dental Association.

Nominations must be presented, on copies of the official nomination form, to the Secretary at least 90 days before the date of the next annual meeting to enable the Secretary to forward them to the Board of Censors in accord with the rules of the Regents. Knowledge of nominations shall be kept inviolate by the nominators, and by the Secretary, Censors, and Regents, until action is formally announced.

The procedures attending admission of members, and conferring of Fellowships, shall be determined by the Regents. The title of Fellow of the American College of Dentists (F.A.C.D.) may not be used by, and the certificate and academic apparel of the College shall not be presented to a member before Fellowship has been conferred upon him.

The Regents may recall the announcement of election to membership for any person who fails to complete the requirements for Fellowship by the close of the first annual meeting after the original notification.

Eligibility to membership is determined by a Board of Censors, after the individual has been nominated by two Fellows. Upon the
recommendation of the Board of Censors, the Board of Regents may elect and extend the invitation to Fellowship.

The American College of Dentists will not, knowingly, accept into Fellowship persons holding membership in any similar honorary dental organization. Membership in the College is automatically forfeited by members who (a) give courses of instruction in dentistry, for remuneration, under any conditions other than those of an appointed teacher serving publicly under the auspices of a dental school, dental society, hospital, or other accredited professional or educational agency; or (b) give courses of instruction in a privately owned undergraduate or postgraduate dental school; or, in a school that is associated with an independent hospital or dispensary but is not an organic part of it; or (c) exact exorbitant fees for courses of instruction in dentistry under any auspices; or (d) are guilty of unethical or unprofessional conduct, or of moral turpitude; or (e) are in arrears for two fiscal years in the payment of annual dues, unless the reason therefor is presented to the Regents and the delay approved by them.

The Regents shall note and announce for the College the occurrence of automatic forfeiture of membership. But, to insure justice, before declaring a forfeiture of membership, the Board of Regents shall privately inform the affected member of the Board's tentative judgment and shall give him ample opportunity to present evidence showing that forfeiture did not in fact occur.
The closing in of the Japanese on the mission and commercial projects activated or controlled by Americans was well under way in 1938. This was especially marked in Korea, and the center of attack was the large institutions in the capital city of Seoul. The American Dental Health Center, a department of the Severance Union Medical College and Hospital, had been endorsed by the A.D.A. and many other dental organizations, and had been made possible by gifts from American dentists.¹

The Japanese strategy was clever and reasonable. Anglo-Americans were not touched, but by-passed. Life was gradually made unhappy for any Korean citizen having contact with Americans in administrative positions. Fortunately we were far enough along in that project to have developed a staff that could carry on. The Korean staff took over under the leadership of Y. K. Lee (Pittsburgh—1937) and Paul Chung (Northwestern—1939), and I made plans to return to America and begin anew after eighteen years' effort in Korea. It was a comfort to leave behind a going concern in the capable hands of twenty-five Koreans who were my boys and girls. The relationship between student and teacher is one of the five relationships of Confucianism and is unique in Oriental countries.

There was a dental job to do in Peking. The Rockefeller Foundation, Peking Union Medical College, had long been in need of a complete dental department. I moved over early in 1939. By 1940 we had a duplication of the project in Korea, ten chairs and a dental staff of twenty-two Chinese, with the best of American equipment and facilities. Japanese foreclosure was not operable in P.U.M.C. on account of several technicalities. Extraterritoriality,

¹For the story and pictures of Dr. Boots' work in Korea and for funds provided in part by members of the American Dental Association, see the Frater of Psi Omega Fraternity; 31, 131-5; 1932, Jan.
American ownership, and the large size of the medical work there prevented squeezing out of the “foreigners,” so the work went on in spite of the impending Pacific crises.

By the summer of 1941 two difficulties confronted me; first, an unsatisfactory recovery from mastoid operations, and second, my conviction that the Japanese had gotten themselves in such a position in the international poker game they were in, that their best play was to enter the war. By November, soon after I was able to travel and within a week after I had been released from my contract, I left Peking for America, leaving behind, with considerable satisfaction, two continuing centers of American dentistry.

I got a British boat to Shanghai and made connections with the ill-fated “President Harrison” out of Shanghai, en route to Manila. On the second day south we had machine guns mounted all over the deck and a submarine on each “corner,” which certainly looked like something was in the wind. But in Manila all was peace and loveliness. Business as usual, no air raid shelters, no hoarding of food, no anti-aircraft guns, and I could find no one who believed there would be war. It didn’t make sense. The American women, children, and men without necessary work had been strongly warned by the State Department to get out of China. But how could a war affecting China not affect Manila? I felt lonesome. I was sure war was inevitable. No one agreed with me. So I thought I would take the “President Madison” to Singapore, just for the ride. I went to the President Lines office and they told me yes, I could go—$55 round trip. I got out my express checks. The rather surly Irishman behind the counter, who seemed to have something on his mind, as he looked out over the water of Manila Bay instead of into the eyes of a cash customer, said, “Well, it will take some time to make out your ticket. There’s no one else going. You can stop in tomorrow to get it. She doesn’t leave until Friday morning.” This was Tuesday. I was late for a luncheon appointment. I put my express checks back in my pocket and walked out—the sorriest exit I ever made. Those steps were to prove unfortunate steps indeed.
At luncheon and again at dinner, I met a number of old friends, friends from Korea, who had located in Manila, smart fellows all, and I let them talk me out of it. I knew I was right, but I simply didn’t have the courage to carry through. I never went back for the ticket to Singapore. I followed their advice to stay in Manila where I’d be safe and could get out in case I was right and war did come. Four days down and four days back in open sea was not very inviting. No one told me that for a month or more American boats had been going to Singapore down through the islands and up along Java and Sumatra. This was a secret—known to everyone but me. “Stay here and see the Philippines. Nothing can happen here. Why MacArthur says this and MacArthur says that.” And from the men in uniform the old theme song, “Japan! Why, we’ll sink their whole damn navy in six weeks.” I’d heard it so many times, I began to believe it.

The “President Madison” left for Singapore. The “President Harrison” sailed north under sealed orders—I knew, to get the Marines from North China. Both were to return and leave for America on December 23rd. I tried the “Clipper” service—impossible. I stayed to see the Philippines.

On Sunday night—THE Sunday night (Saturday in Honolulu)—I talked with Mrs. Boots in Miami on the telephone, just a couple of hours before the bombs fell. I stayed at a friend’s house in a suburb that night and on Monday morning the papers had the news. I went down to my hotel and wakened the naval officer who was my roommate and told him the war was on. He was out of the room in ten minutes, and I never saw him again. Poor chap, he is a prisoner of the Japanese. Lucky chap, he came through it all and is still living.

The “Madison” was about half way to Singapore, made a dash south and got out, with me almost, but just not on her. That passage would have been cheap for me at $10,000.

I am writing this on the “Gripsholm” in the South Atlantic. By now, I have read the magazines after being entirely cut off from
news, magazines, and letters for two years. At Goa, on the shore of India, in five minutes, in a one hundred yard walk from one ship to another, we stepped into another world. Freedom, letters, magazines, an American consul to whom you could walk up and say, "Listen, damn it, I'm an American citizen and I want to know. . . ." It might not do you any good and he'd probably think you a cluck, which was right, but, oh, the joy of being able to say it again and not have anyone stick a bayonet into you. And that food—that first, wonderful, glorious, indescribable meal on the "Gripsholm." No one of us will ever forget it, and for none of us was there ever, or will there ever be such a meal.

Up to there, then, I had a story, Manila, Shanghai, and the "Teia Maru." Then I read the magazines and my story quietly melted away. I stopped thinking about it. Every magazine had a horror story, cruelty, lust, heroism, privations, pain, death, and sacrifice unbelievable, and by contrast my audience would walk out of any show that I put on. Well, maybe, except for one or two things I could tell. But those were the things that I couldn't tell. Every exciting thing, everything thrilling might get back to Japan and would either get some specific individuals shot or would cause retaliation on our unfortunate friends who are left in the camps, still prisoners of the Japanese.

It was only half way between Port Elizabeth and Rio that I could pick up a pencil. After all, there ought to be something to say. But what to say that's true and what to say that won't hurt anybody? How to describe the feelings in the experiences that meant so much to us, and that one hundred million other Americans never had.

For instance, I stood on Taft Avenue and watched the first Japanese soldiers enter Manila, a motorcycle, then a car, then a few truck loads of soldiers, and something happened inside me that I cannot describe. I don't believe anyone can describe it. I had seen my hope of getting out shattered; I had seen the apparent chaos of army, navy, anyone who seemed to have any authority in Manila; I had run for a ditch or a spot between large tree trunks or beside
a stone wall and watched those silver planes come over day after day and dump their eggs with no opposition but a few rifles; I had squatted behind a pile of sand bags in the High Commissioner's office for three hours while a score of guards in the court shot at planes more than 10,000 feet high, with Springfield rifles; I heard and saw so many bombs drop before the warning siren functioned, I got so jittery that I jumped straight up in the air if a man across the street sneezed. I was arrested in the court of a Spanish church for being a German spy, but it was all just another experience to talk over at supper time. I saw the oil tanks burning, those huge black columns of smoke and flame over there and there, and another big fire in the bombed section of the piers, watching the wind, watching, figuring, as the fires spread, which way to run and how not to be trapped if the city burned.

None of it was much compared to the sight of those first enemy troops taking over the city. It was a symbol. Until then, we still had hope. A sickening, numbing feeling. Here they were, victorious, cruel Japanese with smiles on their arrogant faces. I turned away and went back to the house. Christmas, New Years, what sad days they were! We were licked, completely, thoroughly licked; Americans are not used to being licked, and we couldn't take it. We were at last prisoners, prisoners of the Japanese. I thought of the Japanese army captain to whom I had taught English in my early days in Korea. Was he here? I thought of the drunken Japanese soldier I had picked up out of the gutter on a very cold night in Peking and turned over to the gendarmes. I probably saved him from freezing to death. Was he here in Manila?

We turned on the radio to San Francisco. That didn't help. Noisy, bragging, cocky propagandists, promising to send help—where was it? Shut it off in disgust. I packed a suitcase and stared into space. We had futilely explored every possible means of escape. And then I thought of something else. In 1938 I had been arrested by the Japanese gendarmes for landing my boat on a fortified zone in northeast Korea—maybe I knew something, maybe I
didn't. I got clear of that, all right, but they had a dozier on me an inch thick on thin paper. When would that catch up with me? Anyway, I was thankful I'd listened to the State Department and sent my family home. That was one very, very consoling fact.

The next day the car came, the car we were waiting for. A quiet, English-speaking Japanese clerk told us to pack a bag of clothes and food for three days and get in the car. We were taken to a large athletic field, checked in, and then driven on to the big internment camp at Santo Tomas University. I got into one of the small rooms, only twenty-five men in the room, just a bare schoolroom with concrete floor and walls. We soon found a stock of desks stored upstairs. Putting four of them together made a fairly comfortable bed. There was no space at the side. It was necessary to climb over the foot. Another fellow was smack up against you on each side, and your dressing space was about three feet of an aisle when someone wasn't passing by. We had no mattresses, but there was room to stretch out; it was fairly clean, and we had mosquito nets. We had entered a new life.

It would no doubt make a better story to tell how cruel the Japanese were, how we were slapped around, how some prominent men were immediately shot (as I have read in a magazine article today), how the women were raped and American women were forced to act as amahs to Japanese geisha girls who came in with the army, but it wasn't true. Whatever the Japanese did in Nanking, whatever they did in Hongkong, I am writing of what they did in Manila. I do not know of one authentic instance of any public atrocities or brutality. They gave us plenty of time to pack, and they were as considerate as could be expected under the circumstances. In eight months I never heard of any woman forced to work for Japanese nor any one being raped, nor tied and paraded through the streets.

There is little doubt that Filipinos or anyone on the street who did not bow properly to the Japanese sentries were frequently slapped. And no doubt in the country districts there was some raping. All automobiles, some watches, furniture and personal effects
were taken, but looting was not general. But by and large, the Japanese in Manila were well disciplined and under control.

It was more subtle. We were frightened. The problem was to stay out of an incident, to keep inconspicuous. There was always someone suddenly taken to the military headquarters in Fort Santiago. What they did there was plenty, but it was pretty hard to find out what it was. Either they didn’t come back or they didn’t talk. There was always a feeling, shall I be next?

There were inconvenience, bed bugs, dirt, standing in line to use the much too insufficient toilets and using them exposed to full view of the others, which was necessary to keep them clean. About four hundred men on our floor had one toilet room with five toilets. There was always a waiting line. But that sense of humor which the American has and the Japanese has not, relieved the situation. Someone put a sign up, “If you want privacy, shut your eyes.”

There was the irritating job of sleeping not only on a very uncomfortable bed but often with a very unpleasant coughing or snoring bedfellow. There was hunger during the early days, but many of us were overweight and hunger was good for us. For those who were sick or for whom the change caused indigestion or a nervous upset, for those not sick enough to get out to a hospital early enough, and for the very old people, it was certainly tough. Many suffered and some died. For those with health, a bed, a mosquito net, and enough to eat, the worst trial was to go day after day with nothing to do, no news, no interests, just watching a wall and a locked gate, and an armed guard—it does something to you.

I disintegrated quickly. In three weeks my mastoid began draining profusely, my dizziness increased, and dengue fever gave me the knockout. After two feverish days in the camp hospital I was moved out to the City Philippine General Hospital. And that prayer from America, traveling up to the Heavens, hit my lucky star so that the angle of inclination exactly equalled an angle of deflection which would bounce it back to me in Manila. It happened several times when a bomb just nicely missed me. Now it was the
simple slip that someone forgot to put an expiration date on my pass. When the pass lists turned up for check-up examination and return to camp, my name wasn’t there. All I had to do was to act innocent and stay out of sight. Two or three times during the next eight months there was a general check-up of everyone out on passes, by a very tough Japanese doctor. For those I provided a nice new case of dengue or a greatly increased mastoid discharge.

I was terribly lonesome. I wanted to return to camp to get into dental work, yet every day there came stories of frantic efforts of those in camp to get out to the hospital. Every expedient known to American ingenuity was tried, making a very difficult problem to the camp medical staff whose overworked members were conscientiously trying to do a difficult job, knowing if they let too many cases get out, it would make it more difficult to move the more serious cases when they arose. So it was. For a while the camp authorities would be quite liberal. Then suddenly they would tighten up and refuse passes to everyone. Internees who happened to be ill on those days suffered. The food was inadequate and limited for a well person, leaving little choice for the sick. Medicines were extremely limited, many of the common drugs unobtainable. Whatever stocks the American army had not taken, the Japanese army commandeered as soon as they found them.

For those whose metabolism could utilize the limited and coarse foods, whose teeth and stomachs and imaginations didn’t mind the bugs in the cracked wheat, the monotony of the meager fare on a tin plate, the glass, rope, stones, floor sweepings in the poorest grade of rice, for those whose temperament didn’t revolt against the confinement and the roll calls and the propinquity to vulgar or dirty or otherwise incompatible people, for them it wasn’t so bad. But for those who couldn’t take it, it was tough. Especially irritating was the thought that we had no right to be interned. Peaceful citizens are not interned in their own country. If Germany marches into French territory, she doesn’t intern peaceful, unarmed French citizens, or so I’m told. The Japanese said it wasn’t American ter-
ritory, but they had a consul there under the American flag on December 7th.

There are many items of interest, but I know of no way to tell them without hurting someone. I see nothing to be gained by going into personalities. Throw a group of American, Dutch and British bankers, lawyers, seamen, missionaries, prostitutes, inside the small campus of one school and lock the gate and of course there will be clashes of personalities, divergence of opinion on what to do and how to live. The housing of women and men together but in separate rooms with no opportunity for normal sexual life, caused much irritability and unhappiness. But it was no more than might reasonably be expected and the details are better forgotten. Recalling it now, the more interesting aspect is how well we got along, how efficiently we organized a city of our own, how cheerfully men turned to unpleasant and laborious tasks to which they were unaccustomed, how women and girls never before without servants applied themselves to all the menial jobs of everyday living.

The attitude of the Filipinos, what the freed Philippine soldier said and thought, the whole organization of the early guerrilla work, the bringing together of isolated and scattered American soldiers escaped from Bataan, getting money and medicines to them, setting up of radio stations to contact Australia, how these contacts were made and how the money and materials, wire, motors, dynamite, grenades, etc., were assembled and smuggled out of the city—all make up a story filled with patriotism, heroism, and sacrifice. But I know of no way for anyone to tell it without great danger to those still interned and imprisoned.

Our morale fell pretty low at the fall of Singapore, lower at the fall of Bataan. The surrender of Corregidor was unbelievable. But for a few of us who had reason for hope of getting out, the nadir of our depression was when the “Conte Verde” went by on the first repatriation trip without stopping at the Philippines. There was nothing left. A day was a day—just hours and hours of waiting for night, to be able to cross that one off the calendar. I had plenty to
eat in the hospital, a comfortable bed and good books to read, but I dropped from 200 to 165 pounds, just watching the calendar.

Finally in September came the rumor that a Japanese boat going to Shanghai would take any who cared to go. The rumor was verified. But why? What ship? Why should they take us? It was typhoon season, there were Allied submarines operating that route and what would we get if we ever arrived in Shanghai? Rumors multiplied. They were going to take us to Formosa. They were going to start to Shanghai but really go to Japan, using us as hostages to protect a valuable Japanese cargo, etc. The decision was not difficult for me. If my number were up, it was up. If that prayer failed to ricochet off my lucky star, it was just too bad. But if Shanghai meant a chance, the barest chance, to get word to and from my family and a chance, oh glorious, wonderful chance, of getting on the next repatriation ship, then it was worth it to me. I signed up. Out of 4,000 of us only 112 felt as I did.

I packed what baggage I could carry and practiced carrying it in the hospital corridor at night. I wrote a letter to my wife, explaining it all as best I could and left it with my insurance and other papers to be mailed to America after the war in case I never arrived. On September 13th we were checked through to the dock and boarded a 4000-ton freighter. Our quarters were the aft hold, which had two floors. That is, there were the floor, the mezzanine, and then the deck. On the floor of the hold were about 100 horses, taken from the American army in Manila. We were on the mezzanine in two layers running around the two hatchways. On the lower layer were about a fourth of us and fifty Indians. On the upper layer were the remainder of the Americans and British, a few neutrals, and a batch of Formosan prostitutes. We had exit to the deck by a ladder stair up the hatchway. One wooden tank on deck had water for us at certain hours. Hot tea, rice, and either fish or something that euphemistically might be called a stew were served to us on the deck twice a day. Toilet facilities were a three-section open slat privy erected on a deck, a couple of boards to stand
on, and half-sized doors without bolt or lock. No light. One asked a friend to watch the door. There was considerable privacy after you got in because stooping to get clear of the five-foot high rough-board roof already put one fairly well down behind the three and a half-foot door. The weather was hot, so clothes were few and easy to manipulate. I often wondered if it could be managed wearing a suit and an overcoat. Nearly 200 people using it made it rather unpleasant, but flushing the trough over the side of the deck with a hose every night helped a lot.

For deck space we had the walking area around the two hatchways, about 50 feet of rail to lean on; and on the deck gear, machinery, hatch edge, and bales of horse feed, we had enough space for some thirty people to sit down. The fore hatch was open to ventilate the horses and us—we were a sweaty lot! There were no bathing nor washing facilities. The aft hatch was all but closed to hold a couple of very nice, looted American cars. To complete the picture, a Japanese gendarme sergeant who looked like a Japanese gendarme sergeant showed off before the crew and the army hostlers by pushing us around. Most interesting were the cockroaches. I have often slept in Korean mountain huts and thought I had seen something in the way of cockroaches, but I never before saw them in organized armies. I would lie on my bunk at night and watch them. They made a moving undulating blanket on the ceiling, four feet above my head. Perfect weather saved us. The sea was like glass. If we had been seasick in that crowded hold—well, I hate to think of it. For defense there was mounted on the stern of the top deck a three-inch gun. On the second or third look, one could perceive that it was only a silhouette, made of wood.

After ten days of this for what is normally a four-day trip, we arrived in Shanghai in the evening of the twenty-third of September and were turned loose into the city with little ceremony. On account of the impossibility of escape and the unique government of the International Settlement and French town of Shanghai City, there had been no interment of enemy civilians, although the Japanese
were in full control. I went to the Metropole Hotel and was refused rooms. The clerk suggested that I cross the street to the police station and find means of getting out to the Relief Center at the American School. I found my way to the Palace Hotel, asked them there if they would take in an American with no money. They said, “Sure, why not?” and from that day until May I enjoyed the full and courteous hospitality of that comfortable hotel. Funny people, the Japanese. The only Christmas card I got was from the Japanese manager of the hotel—a very nice card. Japanese guests walked down the hall with me day after day all winter and turned into the northside rooms which were cold and on the noisy street side, while they watched me enter a quiet south room with a nice comfy fireplace. They never asked me to move until the winter was over. Then the Japanese guest who had asked for the exchange of rooms came in and apologized.

Shanghai was thrilling. To one from Manila, it was paradise. Potatoes, bread, meat, movies, night clubs, dancing! What fun! I used to walk up Nanking Road to the Chocolate Shop every day just to stand and look at the bread. Prices were fantastic. A plastic belt was 1,000 Shanghai dollars, while for two dollars one could get enough baked sweet potatoes to make a good supper. I had a room and breakfast rate at the hotel. For eight dollars on the monthly rate, I got a good full breakfast at ten o'clock. Lunch was skipped. In the evening a bowl of noodles or baked sweet potatoes bought from a street vendor with bread and coffee or soup was enough. One had to learn how in Shanghai. We were allowed to borrow $2,000 a month from the Swiss Consulate, which was just enough to cover my room and breakfast. Other money had to be found very, very privately. If one were caught with too much money, there was only one explanation, “Oh, that, why I won that at the horse races.” One had to learn that the Chinese were having a hard time living, and a foreigner who had a hat or an overcoat that could be snatched quickly was in open season if he got into a dark street or out of sight of a policeman. One dollar bought a
coolie’s meal; an overcoat was worth $2,500, a hat $500. You couldn’t blame the coolie who adjusted his morals to economic necessity as the world has ever done. We did it in the hotel. Educated, cultured, privileged people we were, but we achieved consummate dexterity in getting an extra pat of butter and the contents of the sugar bowl into our pockets, then brazenly walked out of the Snack Room smiling at the head waiter like a Cheshire cat, and it was no more on our conscience than it was on that of a Chinese rickshaw man who had grabbed a hat from a passing tram, or from the head of his friend’s customer passing by.

But the Shanghai paradise didn’t last; it was too good. Early in November the bubble burst. One thousand Americans and British men were picked up very early in the morning without warning, and interned in the American Marine Barracks in Haiphong Road. They were said to be “political prisoners.” From then on, we were jittery. It had been an international city where enemy aliens could not be interned, but there were the men in Haiphong Road, and no accurate information as to how they were being treated. Who would be next?

Then came the armbands—a black letter on a red band, “A” for Americans, “B” for British, and “X” for other enemy nationals, all numbered. This was to point us out to Chinese. It did. It got us special service. Prohibited were all pleasures, all bars, cabarets, movies, the race course, etc. Then radios were taken away. Soon plans were announced for placing all enemy nationals in concentration camps which were to be known as Civil Assembly Centers.

I received my call to the men’s camp at Pootung, across the river from the Bund. I didn’t like it. It was still cold and exposure might exacerbate my mastoid condition to a serious finale. Then, too, the spot seemed too close to the docks to be a healthy place if American bombers came north. Three American dentists had gone to this camp in the first pick-up, so I didn’t see any contribution I could make. I presented my case as a confirmed valitudinarian, explaining my long hospitalization in Manila by authority of the Jap-
anese military authorities and asked for postponement until the cold weather had passed. Deferment was granted, and I stayed on at the hotel. Then the other camps were started—the American mixed camp at Chapei, the British mixed camps at Lunghwa and up the river at Yangchow, and the two camps in the city for municipal council workers and their families, Ash and Yu Yuen Road. These two were almost entirely British.

Strange as it may seem I had obtained a license to practice dentistry in Shanghai and had taken over the busy practice of Dr. Collins, Shanghai’s most popular dentist. There was no dearth of patients, but alcohol, eugenol, mercury, alloy, and gold were unobtainable, and many common items were to be had only as a favor from some dentist friend who had laid in a supply. There were new experiences in improvising. One day an ounce of Trudent alloy was offered by a Jewish refugee peddler for $1,300 Shanghai money, or about $15 United States money.

Once more I caught a prayer bouncing off my lucky star. I never found out exactly why, but there seemed to be some argument between the Japanese consular authorities who were interning us and the naval authorities in charge of enemy property over the release of enemy dental equipment for the assembly centers. It took a long time to settle it, and there was no urge to intern dentists still out until some equipment could be assigned for their work in camp.

Meanwhile, at the request of the joint British and American committee, I had volunteered to go into a British camp, since the British numbered three times as many as the Americans with one-third as many dentists. Day by day the armbands on the streets became more and more scarce until by April I was nearly alone and so conspicuous I hesitated to go out of the hotel. They couldn’t find equipment for me. By May all camps had a dentist except Ash and my conscience was beginning to bother me. I got together a bag of hand instruments and supplies and the British Residents Association found an old chair and motor and arranged for me to enter Ash Camp.

Through the months the hope of repatriation rose and fell in
regular rhythm. One week we would be sure it would happen within a few days. The committee members worked long into the night, making out forms and classifying us, and we would settle our affairs and pack for the boat. The next week it would all fade out. The "Conte Verde" was docked in the river just off the Bund and everyone watched it for the faintest sign of activity. If a man were seen to be painting the stacks or a barge loading produce for the Italian crew, exciting rumors swept over the city. The best way to get authentic information was to know someone who knew a girl who worked in a cabaret where an officer from the Italian liner was accustomed to go for a little relaxation. But every such rumor was checkmated by a Chinese rumor that another load of door knobs, spigots and what-nots had just passed from the pockets of the amiable but poor Italian blue coats to the second-hand shops in Peking Road, and, although the ship looked okay from the Bund, she was in fact gradually being moved to Peking Road, and there was not enough metal left in her to allow her to function as a ship.

Ash Camp was small—400—mostly women and children, living in the old barracks of the British Army, long since abandoned because of the lack of drainage. After a hard rain about half the site was under water for days. But there was room, an average of 60 square feet per person, considerable privacy, commonly only two or three to a room, and families had a room to themselves. There were plenty of baths and toilets, and, rare in Shanghai, hot water. There were adequate public rooms, a dining hall which served as a concert hall, and the luxury of two pianos. The kitchen and stoves were not good, and they had had for too many days a coarse brown rice containing floor sweepings, and ribbon fish, a long flat fish, all bones and no meat. And those Limies were made. British like to grouse about anything, but they had something this time, and they poured out their woes and stood firmly on their international rights. I tried to live up to the American tradition by flippantly telling them I would see that the fish diet was stopped. It was. I don't know why, but we never had fish once after I landed in camp. We got buffalo
instead, very old and very weary buffalo. Gradually there were more vegetables. Then eggs, one a day per person, then fruits, and by summer the canteen was started providing jam, peanut butter, tobacco, and biscuits. They had had a very difficult time and were it not for rather large amounts of foodstuffs personally brought in with them, they would always have been hungry. As it was, the food was deficient in many ways for the average person. Many were losing weight. There was too much sickness, too little medicine, getting out to a hospital was not easy, and if for instance a man's wife were taken to the hospital, he could not see her nor get word to nor from her. In general, I thought the camp much more comfortable than the Manila camp. But I was not there in winter. They are going to be very cold. And the wall and the locked gate and the armed guard were there and had the same effect as in Manila. I kept myself busy in the dental work, and my new British friends did everything they could to help me, showed me every kindness, were always ready to do my laundry or help with my meals on the days when the camp kitchen had to close down because of the fumes. I learned to drink tea, "to jolly well have a bath," and to work the word "bloody" into as many places in every sentence as possible and still carry the meaning. When the word came, that wonderful, breathtaking word, that we few Americans in Ash Camp were going to be repatriated, really this time, and no foolin', those Limies were splendid. No jealousy, no bitterness, glad of our good fortune. They knew they were part of a great empire and that their job was to sit still and take it, come what may, and be there to pick up the pieces and put them together again as soon as peace comes. Everyone of them knows that when the tide turns there may easily be a period of lawlessness in Shanghai which will be terrible, and they will have no protection against the Chinese coolie mobs. It's their part in the way, and they are able to take it.

Repatriation was one of those things that one dreams about night and day, but when it comes you can't believe it. I tried not to think about it, but I couldn't sleep; I couldn't keep my eyes off that gate.
The day finally came when the few Americans and Canadians were called to the office and given their papers. We were allowed three pieces of luggage, not to exceed sixty pounds, and whatever hand luggage we could conveniently carry—no paper, no pictures, no books but an unmarked Bible. And we were to leave camp the next morning. I packed enough dental instruments and supplies to take care of emergency work. The custom officials and the consular police took it all out. I pled, I argued, I called upon international law, the League of Nations and Bushido. And every time they went into a huddle, I quickly moved another handful from their pile to my pile. I had to repeat it all at the customs jetty. I didn’t get it all, but I got enough to meet the situation which I anticipated.

When we got on the “Teia Maru,” which was the old French M. M. Ship “Aramis,” the people started to hunt up a dentist. I was the only one out of eight dentists who had got any instruments through. Fifteen hundred people who have been in various unusual circumstances for two years can produce quite a quantity of dental needs. Bridges and inlays fell out, temporary fillings inserted in camp loosened, wisdom teeth acutely abscessed, one passenger en route by train to the ship, suddenly became car sick and sent his upper and lower plates out the window with his dinner, and another had carefully placed her full denture in a cup of mouthwash in her cabin and lay down for a rest. When word came that the water was turned on, a helpful friend emptied all the cups and receptacles out the porthole to fill with the precious fresh water. Dr. Klasson from Manila also brought some instruments and we were very thankful for what we had for we were able not only to help many people in pain and discomfort but having the work to do made the time pass much more quickly.

Life on the “Teia Maru” taught us what a large job the J’s can do with a few people. They had a crew of only 350. They all worked hard and long hours. Their treatment of us was cold but courteous. They left us to ourselves. Meals were quick and simple—a little rice gruel, a piece of ordinary bread, and a cup of a drink
that is not so bad if you call it Kohi as the Japanese do. But if you think it to be coffee, it's a disappointment. Dinner and supper were all much the same, one cold boiled potato, a little meat, a spoonful of peas, cabbage, or marrow, and one piece of dry bread, a dessert of plain gelatine or a coarse tapioca. If one knew how to get a little extra or if one were trying to keep his weight down, it was sufficient.

An incident at the dock in Goa may well illustrate the food situation not only for the "Teia Maru" but for the camps. We were walking on our side of the dock before the exchange, and that Darling Red Cross Lady brought over a couple of cartons of cigarettes. She had a clamoring crowd around her immediately. I said, "You haven't got a piece of bread with you, have you?", to which she replied, "Now, now, you don't look starved." She was right. I wasn't starved.

A few minutes later one of the American boys working on the "Gripsholm" came over with a loaf of bread under his shirt. The moment he pulled it out he was besieged. They tore at the bread and nearly tore his clothes off. None of us was seriously starved, but something has happened when men of education, position, and respect will make a scene to get a little piece of plain white bread. Every evening on the "Teia Maru" I brought from my table a piece of bread and a bite of meat to give to someone who was hungry. I never had to throw it away.

I was fortunate on the "Teia Maru." My bunk was in the terrace on the top deck, a room 16 by 32 feet, in which had been made two rows of two tiers of bunks—fifty-six of them, each having the space of two feet by six feet and covered with a rough straw pad. Each person was given two sheets and a blanket. Most of the men were down in the forehold. It was just as crowded there and very hot and poorly ventilated. Many of them slept on deck or in the hallways. Water was carefully rationed and a constant problem. The "Teia Maru" was just not built to handle 1,500 passengers. If anyone complained, there was always in our own mind the answer, "There are 10,000 Americans and British still in the Far East who
would give their right arms to trade places with us." It wasn’t fair
to complain, whatever the grounds. Some of us were much better
off than others. It is ever so in any war, or in life, any place and any
time, and the inequalities are hard to explain.

The transfer to the "Gripsholm" was efficiently carried out and
was completed within half an hour. It was a great sight. The spa-
ciousness of the "Gripsholm" was unbelievable, for the ships were
nearly equal in size. At noon the above mentioned buffet lunch was
served on the promenade deck. Ripley would be interested in the
statistics of the amount of food consumed. It was delicious and was
beautifully served. It had everything. I am sure it was the largest
per capita consumption of food at one sitting in the history of the
world. No one of us will ever forget that meal. Then there was
mail—oh, the precious, wonderful letters. My own news was all
good, but I cried steadily for two hours. Then magazines. Then
Red Cross supplies. We were in a daze, just walking around, think-
ing, "All this and Heaven too."

Everything that could be imagined for the comfort and well
being of 1,500 repatriates had been provided on the "Gripsholm"—
extcept a dental outfit. There was no equipment, no motor, no chair,
no instruments except for extraction, no supplies. After several
days we were given permission to work and were assigned a room
on the boat deck. We were kept busy not only on the repatriates
but also on the crew. Many things happen to teeth during a 20,000
mile cruise. Four hundred and twelve patients came to our im-
provised office before we reached New York. Only by the generous
help of supplies and instruments from the dentists of Port Elizabeth
where we stopped in South Africa, and the help of the American Red
Cross in Rio, were we able to meet the emergencies that presented.

The days have passed quickly. Happy days, homeward bound.
These two years have been like a merry-go-round. Round and
round, can’t get off, a bit dizzy sometimes, on a noisy, monotonous
ride, getting nowhere. Every turn, one grabs for a ring. Some are
lucky and get a brass one. I did.
And now it is over, and there are times to contemplate what an American dentist has done with twenty-three years of life in the strange Far East. The great statue of Christ on the top of the mountain that forms the backdrop of the city of Rio and its beautiful harbor said something to me as we started on the last lap to home. A blanket of clouds slowly covered the mountain in the evening dusk and left the statue, arms outstretched, a huge cross rising above the world, clear, distinct, bidding us farewell and godspeed to America.

And soon, in the morning fog, there came into view another statue, a goddess, holding a light, and a thousand voices broke into "God Bless America," and tears ran down the faces of a thousand Americans who were home again, and one was a dentist who in his youth had left as a dental missionary and had a delayed return.
INHERITANCE OF SUSCEPTIBILITY AND RESISTANCE TO CARIES IN ALBINO RATS \textit{(Mus norvegicus)}

\textit{(SUMMARIZED REPORT OF PROGRESS)}

HARRISON R. HUNT, D.D.S., Department of Zoology,
CARL A. HOPPERT, D.D.S., Department of Chemistry,
Michigan State College

The causes of dental caries constitute some of the most important problems in dentistry. A knowledge of the causes of a disease is essential for its cure and prevention. Many investigators have studied the roles of diet and oral bacteria in the production of tooth decay. The present study is, as far as we know, the first extensive attempt to evaluate the part played by the genes in causing variations in resistance to dental caries. The investigation was begun early in 1937 at the suggestion of Dr. Morris Steggerda of the Carnegie Institution of Washington, whose anthropological studies on American Negroes, Indians, and whites seemed to reveal striking racial differences in the incidence of dental caries.

Hoppert and his associates devised a diet which is satisfactory for promoting growth, health, and reproductive vigor, but which is very effective in producing caries of the lower molar teeth of the laboratory albino rat. The composition of this diet, by weight, is 66 per cent of coarsely ground polished rice, 30 per cent of whole milk powder, 3 per cent of alfalfa leaf meal, and 1 per cent of sodium chloride. It has been shown that if the rice is ground to flour fineness, or even somewhat coarser, dental caries is greatly delayed or prevented. The rice we use is passed through a precision grinder, adjusted so that about 70 per cent of it will be retained on a 20-mesh screen when sifted.

The rats are placed on the above diet when thirty-five days old. The lower molar teeth are examined every fourteen days, and the sizes and locations of carious lesions recorded. The living rat is held firmly, belly up, with the right hand grasping the loose skin on the back of the neck, while the mouth is opened with a nasal speculum and the lower molars inspected under a strong light. Cavi-
ties can be identified quite easily by an experienced person. To date, 3164 rats have been examined, a few of them as many as fifty times. The animals are allowed all they will eat of the standard diet, are confined in roomy galvanized iron cages, kept in the new animal house of the Department of Zoology where the temperature varies little from 78 degrees except in hot summer weather, and receive water from the college water system. Breeding females are isolated when found to be pregnant, the young are weaned when twenty-five to thirty days old, and the mother is allowed one week of rest after removal from her litter before being returned to the breeding cage.

One hundred and nineteen rats from three local sources were placed on the caries diet early in 1937. The 116 surviving animals showed cavities at from 28 to 209 days after being placed on the caries-producing diet. The average was 70 days. Subsequent experience revealed that this group was relatively susceptible to tooth decay, which may account in part for the ease with which we have secured a susceptible line, and the persistent high variability of the resistant line. Susceptible rats from this first generation were crossed to start the susceptible strain, while resistsants were paired to begin a resistant line.

Selection, progeny testing, and close inbreeding have been used since the second generation to build these two lines. For example, a male showing an extreme degree of susceptibility to caries, belonging to a sibship which on the average developed caries early and contained few if any rats that showed their first dental cavities relatively late, would be mated with one or more highly susceptible females from the same sibship. An adequate number of such matings would be made in each generation. A similar technique was followed in developing the resistant line, except that resistant siblings from resistant sibships were used, the sibship containing relatively few, if any, susceptible animals. Such close inbreeding reduces heterozygosity by about 19 per cent of the heterozygosity in the preceding generation, so that genetic uniformity is approached, in early generations, fairly rapidly.
Breeders in the susceptible line, for example, are selected from sibships showing a high degree of susceptibility, because the susceptibility of the prospective breeder might be due to some factor other than the genes. A cracked tooth, for example, might conceivably lead to an early cavity. Tooth decay is very responsive to the degree of fineness of the rice in the ration, and in spite of all our care, numerous screening tests show some variation in rice fineness. If such a rat's brothers and sisters, also, are uniformly very susceptible, then the conclusion is justified that the parents of this family were genetically susceptible, and the susceptibility of any one of the offspring is probably due to the genes rather than accidents or the environment. Resistant breeders were selected from resistant sibships.

The following table summarizes our results to date. The means given are the means of sibship averages, and the sibships used comprised five or more rats each. If the mean used in the table for any generation had been the ordinary average of all individuals, then large families would have had greater influence on the mean than small families, so that the differences between the lines and between generations would have been unduly affected by family sizes. But family size of itself has nothing to do with our problem, so its effect was thus minimized.

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<tr>
<th>Generation</th>
<th>Caries Susceptible</th>
<th>Caries Resistant</th>
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<tr>
<td></td>
<td>Number of Sibships</td>
<td>Number of Sibships</td>
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<tr>
<td>2</td>
<td>57 days</td>
<td>116 days</td>
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<tr>
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<td>6</td>
<td>29 &quot;</td>
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<td>7</td>
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<td>10</td>
<td>30 &quot;</td>
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<td>11</td>
<td>22 &quot;</td>
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<tr>
<td>12</td>
<td>24 (in-</td>
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<td>complete)</td>
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</table>
The means for the susceptible line have steadily declined until they now fluctuate between twenty and thirty days. Variability is relatively low. The eleventh generation consisted of seventy-four rats, whose caries time ranged from fourteen to sixty-seven days, with only six animals developing cavities later than forty days after being transferred to the standard diet. The record for the twelfth generation is incomplete.

The resistant line's means increased from 116 days in the second generation to 248 days in the sixth generation, with indications of not going higher, though the record for the eighth generation is now incomplete. Variability within this line is very high, and as yet shows no indication of decreasing. A very striking feature is the constant occurrence of highly resistant individuals whose caries is delayed until they have consumed the standard diet for 600 to 700 days, or die at an advanced age with no indications at all of caries. This suggests that a caries immune strain may be a possibility.

The upper end of the curve for the seventh generation susceptible population slightly overlaps the lower end of the seventh generation resistant's curve, but there is here no overlapping in the distributions of the sibship means.

We have demonstrated beyond reasonable doubt that inheritance is an important factor in susceptibility to caries in albino rats. Dr. Philip Jay is now studying the mouth bacteria of our susceptible and resistant strains. Dr. Carl Hoppert is beginning an investigation of the potency of fluorides in preventing tooth decay in our highly homogeneous susceptible animals. The unsolved genetic problems are the number of gene differences between homozygous susceptible and resistant rats, and the modes of action of these genes. Our resistant line is too variable (heterozygous) yet to enable us to solve this problem. For this reason we propose to stabilize our resistant strain at the highest possible resistant level, then cross it with the susceptible line, and from the distribution in $F_2$ and backcross generations attempt to estimate the number of gene pairs involved.

This report is only a summary of progress. No doubt the final
check and analysis of the data will lead to minor changes in state-
ment. We are now preparing a more extensive publication. A num-
ber of years may elapse before data are secured for a final genetic
analysis of the problem.

We wish to express our profound gratitude for generous and
prompt financial assistance from the National Research Council, the
American Philosophical Society, and particularly from the William
John Gies Fund of the American College of Dentists.
Another year has rolled around and once again do we pause to take into account all that has happened and has now become history. This has been another year of war for the world and so too for all those groups which are major or minor, yet integral parts thereof.

The American College of Dentists, while not known perhaps beyond the confines of the dental profession, is one of those minor integral parts, but again, so far as we are concerned, it is major. Within the confines of our profession and all its component groups, we have an intimacy in association which makes for those relationships not obtainable in larger organizations. The world is made up of myriads of these smaller groups which ultimately, one might hope, will bring about that desired relationship.

But there is a relationship into which we all must enter and over which, with possible slight exception, we have little control. We have come to the end of another year, when in looking over the accomplishments of the year, and when we dare to look prospectively into the period ahead, we stop for a moment to pay our respects to those of our number who have performed their last tasks in this world and who have now gone on into that relationship beyond our understanding. They have labored well with us here; we shall miss them as we go on about our tasks; but as we remember the things they did and the things they said, we'll be aware of the shadow of their influence. We will be benefited thereby and their lives will thus live on. We record their names with brief biographical data, and with expression of our appreciation of them, of their labors and their fellowship:

ELWYN R. BRYANT
New Haven, Conn.
1876-1942

Graduated Philadelphia Dental College, 1902. Member, First District

The other members of this Committee are (1942-43): A. L. Martin, P. V. McParland, R. H. Volland, M. L. Ward.
Dental Society of New York; New York Academy of Dentistry; New England Dental Society; Connecticut State Dental Association; American Dental Association; Delta Sigma Delta Fraternity; Past-president Connecticut State Dental Association.

WM. N. COGAN
Washington, D. C.
1854-1943
Graduated Columbia Dental School, 1893. Dean, School of Dentistry, George Washington University, 1926-1943. Member, American Dental Association; Washington, D. C., District Dental Society; Past-president, Washington, D. C., District Dental Society.

THOS. J. DAVIS
St. Louis, Mo.
1894-1943
Graduated St. Louis University, School of Dentistry, 1925. Member, St. Louis Dental Society; Missouri State Dental Association; American Dental Association.

HUGO G. FISHER
Chicago, Ill. - Merion, Pa.
1874-1943
Graduated Northwestern University, Dental School, 1896. Practiced dentistry at Cologne, Germany, 1905 to 1919. Member, Chicago Dental Society; Illinois State Dental Society; American Dental Association; former secretary, American Dental Society of Europe.

ROYAL BERTRAM GIFFEN
Sacramento, Calif.
1881-1943
Graduated University of California, College of Dentistry, 1903. Member, Sacramento Valley District Dental Society; California State Dental Association; American Dental Association; Delta Sigma Delta Fraternity; Past-president, Sacramento Valley District Dental Society; Past-president, California State Dental Association.

ELLISON HILLYER
Brooklyn, N. Y.
1870-1943
Graduated New York College of Dentistry, 1893. Member, Second District Dental Society of New York; First District Dental Society of New
JOHN V. CONZETT
York; American Dental Association; Psi Omega Fraternity; Past-president, Second District Dental Society of New York; Past-president, New York State Dental Society.

WM. HAUSMANN
West Bend, Wis.
1879-1943
Graduated, Chicago College of Dental Surgery, 1901. Member, Wisconsin State Dental Society; American Dental Association; Postmaster, West Bend, Wisconsin, 1904-1912.

FREDERICK W. HINDS
Dallas, Tex.
1888-1943
Graduated University of Minnesota, College of Dentistry, 1915. Dean, Baylor University, College of Dentistry, 1928-1943. Member, Minnesota State Dental Association; Dallas County Dental Society; Texas State Dental Society; American Dental Association; Xi Psi Phi Fraternity.

W. E. HUTCHISON
Little Rock, Ark.
1888-1942
Graduated Tulane University, College of Dentistry, 1913. Member, Arkansas State Dental Association; American Dental Association.

OATHER A. KELLY
St. Louis, Mo.
1895-1942
Graduated St. Louis University, School of Dentistry, 1916. Member, St. Louis Dental Society; St. Louis Society of Dental Science; Missouri State Dental Association; American Society of Oral Surgeons and Exodontists; Past-president, St. Louis Society of Dental Science; Past-president, St. Louis Dental Society; Past-president, Missouri State Dental Association.

W. H. G. LOGAN
Chicago, Ill.
1872-1943
Graduated Chicago College of Dental Surgery, 1896. Graduated Chicago College of Medicine and Surgery, 1904. Dean, Chicago College of Dental Surgery, Dental School of Loyola University, 1920 to 1943. Member, Chicago Dental Society; Illinois State Dental Society; American Dental Association; Federation Dentaire Internationale; Dental Educational Coun-
cil of America; Delta Sigma Delta Fraternity; Past-president, Chicago Dental Society; Past-president, Illinois State Dental Society; Past-president, National Dental Association.

JOHN MAXWELL MURPHY
Temple, Tex.
1874-1943
Graduated University of Illinois, School of Dentistry, 1902. Member, Central Texas Dental Society; Texas State Dental Society; American Dental Association; Texas Society of Oral Surgeons and Exodontists; Delta Sigma Delta Fraternity; Past-president, Central Texas Dental Society; Past-president, Texas State Dental Society; served on Scientific Research Committee of American Dental Association continuously since 1916.

J. EMMETT NORTHCUTT
Kansas City, Mo.
1881-1943
Graduated Washington University, School of Dentistry, 1904. Member, Kansas City District Dental Society; Missouri State Dental Association; American Dental Association; Past-president, Kansas City District Dental Society; Past-president, Missouri State Dental Association.

G. J. PATTISON
Rochester, Minn.
1878-1942
Graduated University of Minnesota, School of Dentistry, 1903. Member, North Dakota State Dental Society; Minnesota State Dental Association; American Dental Association; Past-president, North Dakota State Dental Society.

ADDISON K. PARKS
Memphis, Tenn.
1875-1943
Graduated Vanderbilt University, School of Dentistry, 1898. Member, Alabama State Dental Association; Tennessee State Dental Association; American Dental Association; National Society of Denture Prosthesis; Past-president, Alabama State Dental Association.

JAMES H. SHAW
St. Petersburg, Fla.
1893-1942
Graduated Vanderbilt University, School of Dentistry, 1915. Member, St. Petersburg Dental Society; Florida State Dental Society; American
JOHN V. CONZETT

Dental Association; American Society of Oral Surgeons and Exodontists; Past-president, St. Petersburg Dental Society.

GUY L. SPENCER
Lincoln, Neb.
1893-1943
Graduated University of Nebraska, School of Dentistry, 1916. Member, Nebraska State Dental Association; American Dental Association; Delta Sigma Delta Fraternity; Phi Kappa Tau Honor Society; Past Supreme Grand Master, Delta Sigma Delta Fraternity.

CLARENCE V. WATTS
Des Moines, Ia.
1867-1943
Graduated University of Pennsylvania, School of Dentistry, 1891. Member, Iowa State Dental Society; American Dental Association; Past-president, Iowa State Dental Society. Dr. Watts was a veteran traveler. He left a large estate, mostly to Drake University and a children’s home.
The Board of Regents met in the Palmer House, Chicago, Ill., February 20, 1944, at 10:00 a.m., seven members being present. Minutes of meeting of October 14 and 15, 1943, at Cincinnati, approved.

Treasurer's report showed balance on hand as of February 5, 1944, $17,756.58, plus securities amounting to $3,000 par value.

The Secretary, reporting on ad-interim activities, stated that Dr. E. G. Meisel had been elected Assistant Editor. He also reported that fellowships had been conferred by the several Sections, for the Regents, upon the following persons:

- Albaugh, H. E., Miami Beach, Fla.; Albert, A. A., Pawtucket, R. I.; Anderson, O. A., Seattle, Wash.;
- Barker, P. A., Denver, Colo.; Barlow, T. M., Bellingham, Wash.; Boucher, C. O., Columbus, O.; Buechele, K. L., St. Louis, Mo.;
- Cline, Harold Mac., Vancouver, B. C.;
- Dai, D. S. K., Chengtu, China; Delafield, W. P., Dallas, Tex.; Dorr, R. E., East Orange, N. J.; Douglas, A. F., Chattahoochee, Fla.;
- Fleetwood, C. T., Seattle, Wash.;
- Gray, Dell S., care Postmaster, New York, N. Y.; Gullett, D. W., Toronto, Canada;
- Hahn, G. W., Berkeley, Calif.; Hancock, H. R., Santa Barbara, Calif.;
- Heinze, R. L., Brooklyn, N. Y.; Hoskin, S. B., Portland, Ore.;
- Jeffery, A. W. C., Seattle, Wash.; Jenkins, C. H., Hood River, Ore.;
- Johnston, L. W., Denver, Colo.; Jones, A. H., St. Louis, Mo.;
- Kercheval, L. I., Houston, Tex.; Knudson, J. F., Pelican Rapids, Minn.;
- Larkin, R. J., Quincy, Mass.; Lockwood, D. S., Camp Robinson, Ark.;
Nelson, H. J., Fergus Falls, Minn.; Nicaud, W. M., New Orleans, La.; 
O'Halloran, F. H., Evansville, Ind.; Olds, F. B., Los Angeles, Calif.; 
Pelton, W. J., Bethesda, Md.; Pike, J. M., Minneapolis, Minn.; 
Regan, T. P., Helena, Mont.; Rounds, Jack S., Los Angeles, Calif.; 
Rutledge, C. E., Richmond, Calif.; 
Scott, G. B., St. Louis, Mo.; Searl, C. A., Owatonna, Minn.; Skelton, O. G., Dallas, Tex.; Sproule, W. K., Vancouver, B. C.; 
Tipton, J. R., Dallas, Tex.; Trali, W. E., Frederick, Md.; 
Webb, W. L., Fairmont, Minn.; Winter, G. R., Binghamton, N. Y.; 

Fellowship was conferred upon the following persons in absentia: 

The Secretary reported the following deaths since the Cincinnati meeting: 
Frederic E. Haberle, Chicago, Ill., November 9, 1943; 
Amos I. Hadley, Boston, Mass., December 16, 1943; 
John Dickey Hertz, Stamford, Conn., November 26, 1943.

REPORTS OF STANDING COMMITTEES

Progress reports were received from the following standing committees: Education, History, Hospital Dental Service, Journalism, Oral Surgery, and Prosthetic Dentistry. Adjournment.
MINUTES OF THE AD-INTERIM MEETING OF THE BOARD OF REGENTS

AFTERNOON SESSION

The Board of Regents reconvened at 3:00 o’clock seven members being present. Progress report was received from the Committee on Socio-Economics.

The Board of Regents gave detailed attention to the suggestions made by several of the Sections relative to the functioning of the local committee of censors. It was recognized that the approach to be made would have to be on an experimental basis and all Fellows are asked to cooperate in the plans which are to be submitted to each member by the Secretary in a short time.

The request of the Fellows in the United States Public Health Service for the privilege of nominating men in their regular service, as is done in the Army and Navy, was granted. Adjournment.

EVENING SESSION

The Board of Regents convened for the evening session at 8:00 o’clock, with seven members present.

The Research Committee made its report, recommending that $1,300 be made available for grants-in-aid and fellowships in research for the year July 1, 1944, to June 30, 1945. The request was approved.

The Journal Committee recommended changes in the Journal format, material arrangement, advertising section, business manager, etc., all of which were approved.

Dr. John E. Gurley was re-appointed Editor for the ensuing year.

It was voted to confer fellowship posthumously upon Dr. Frederick C. Curtis, San Jose, California, at the next convocation. Dr. Curtis was elected to fellowship last year but passed away before it could be conferred. His fellow dentists in California requested that it be conferred posthumously.

It was voted to hold a streamlined convocation at Omaha, Neb., if possible, details being left to the Ad-Interim Committee. Adjournment.
AMERICAN COLLEGE OF DENTISTS
REPORT OF THE WILLIAM J. GIES ENDOWMENT FUND:
JOURNAL OF DENTAL RESEARCH
ARTHUR H. MERRITT, D.D.S., Chairman

Following the plan as outlined by the Endowment Committee at a meeting in Cincinnati, October 14, 1943, a letter under date of November 1, 1943, including a copy of the Treasurer's report as of March 14, 1942, was sent to every member of the American College of Dentists and to all previous contributors to the Fund, including about one hundred organizations.

The following represents the response to that letter up to February 18, 1944: Total receipts, $2,986. Of this amount $2,106 was contributed by individual subscribers as follows: One gave $1; one gave $2; one gave $3; nineteen gave $5; one hundred and ten gave $10; seven gave $15; three gave $20; eleven gave $25; one gave $75, and four gave $100. The amount contributed by dental organizations amounted to a total of $880.

These funds with the names, addresses and amounts of each contributor have been sent to the Treasurer the latter part of each month in which they were received. A personal acknowledgment has been sent by the Chairman to each contributor.

Meanwhile the Committee has been busy in an effort to obtain the names of forty to fifty members of the profession from each state who were not members of the A.C.D. To date twenty-seven states have responded by sending in such lists. As soon as these lists of names can be assembled, a letter will be drafted by the Endowment Committee, which with a copy of the Treasurer’s report, will be sent to those included in this group of names. It is hoped to get this letter out at a very early date.

While many to whom the appeal was made have been most generous, it is obvious that we shall fall far short of the goal. Later

1A report of the Treasurer for 1943 will be presented later. See Treasurer's Report for 1942, J. Am. Col. Den.; 10, 305; 1943 (Dec.): for membership of this Committee, see J. Am. Col. Den., 10, 59; 1943 (Mar.).
the Committee plans to solicit the cooperation of a selected group known to be interested in the success of the fund by asking them to write personal letters to a dozen or more of their colleagues and friends inviting contributions. The Chairman of the Committee is already engaged in holding up some of his friends in this way among whom he is coming to be known as beggar number one.

Believing that some of those to whom the letter of November 1st had been sent, had overlooked it, a note was addressed to about a dozen of the Fellows of the College, all of whom occupied some official position and therefore were presumed to have a special interest in the success of the fund. This note contained a quotation from the well-known poem by Ben King, as follows:

“If I should die tonight
And you should come to my cold corpse and kneel,
Clasping my bier to show the grief you feel:
I say, if I should die tonight
And you should come to me and there and then
Just even hint at sending me that ten”
What do you think would happen?

I mean, of course, that ten for the J.D.R. Fund about which I recently wrote you. How about sending it along and see what would happen.
(Twenty would also come in handy.)

Not only was the response to this note gratifying from a financial point of view, one even sending in the “twenty” which came in “handy,” but it revealed the fact that there is at least one “mute inglorious Milton” in the College. His reply is so apt and his verse so good that the Committee feels it should be made a part of the permanent records of the College, with, of course, the poet’s permission.

“Your card received—it leaves me cold
To think that you should be so bold
To think that I should have a fear
To stand at last beside your bier
And say or think a single thought
About the ten that I forgot.”
I'd be so filled with grief and tears
That it would take me years and years
To give a thought of how or when
The J.D.R. would get my ten.

I gave a dot, 'twas small I know,
But then I am no wealthy Joe.
So many worthy calls are made
This last two months that I'm afraid
I'd have to beg or steal or borrow
Unless I put off till tomorrow
A further gift to a worthwhile cause.
To your efforts, however, sincere applause.

And so if you should die tonight
And I beside your corpse should light,
I'm sure your spirit would understand
The relation between supply and demand,
And give no further thought of when
I seemed to forget to send that ten."

Erratically yours,
Henry Cline Fixott,
President, American College of Dentists.

So you see, being beggar number one has its sunny side. It is hoped that each of you as you later adopt the beggar's role, as some of you will be invited to do, will fare as well.

A list of the names and amount of each contributor is appended to this report. Special thanks are due to the Secretary of the A.C.D. for his generous cooperation so freely given at all times.


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<th>Amount</th>
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EDITORIAL

The Future

"High up in the North in the land called Svithjod, there stands a rock. It is a hundred miles high and a hundred miles wide. Once every thousand years a little bird comes to this rock to sharpen its beak.

"When the rock has thus been worn away, then a single day of eternity will have gone by."

It is as popular now to write upon something pertaining to the future, as it is to write upon a topic pertaining to the war. This is perhaps only natural, for our minds must of necessity be occupied with thoughts dominated by current events. Yet, at the same time, how futile! Prophecy at any time is both difficult and dangerous, though essential. It is essential to progress and to the well being of man. It is a manifestation of that hope which all men do or should possess, and hope may be said to be the only permanent thing in the world to which man may cling. When hope is gone there is nothing left.

The Future is that to which we must always look. We look at it from the present and surely, to no small degree is our outlook influenced by the past. It was Patrick Henry who said, "I have but one lamp by which my feet are guided, and that is the lamp of experience. I know of no way of judging the future but by the past."

In a recent letter to President Reeves of Chapman College, Whittier, California, Mr. Hugh I. Morrison comments, "... the whole of our national and world organization which furnishes the framework and suggests the patterns for all subordinate institutions and activities is also in process of change. This amazing threat of change is more significant as to ultimate forms and more extensive in outreach than our intellectual or imaginative processes can envisage." In this Mr. Morrison suggests the difficulty and the danger and even

the futility involved in prophecy, especially in days such as these in which we now live. Yet there is little doubt but that the more critical the times, the greater the need for prophecy, for in this same communication, he goes on to make at least three worthwhile observations.

In the bulletin of the *American Association for the Advancement of Science*, March, 1944, page 21, the editor, discussing *Army Education in the Colleges*, makes this concluding observation: "Well may colleges now tremble for their futures because perhaps only those will survive which again have clear vision and burn with high zeal for service to civilization." If it be true of the colleges that they must have "high vision" and "burn with zeal" to serve, then by the same token must this also be true of men as individuals, as groups and of our literature, which expresses the opinions and the findings of men and also leads out in persuading men to do those things essential to the public good.

Someone has suggested that Liberty may be defined as "what you can do in real life without being stopped beforehand or punished afterward." Another has said, "Human progress is manifest in the growth of liberty." A child once said, "The animals don't have 'if' in their vocabulary."

Many comments have at various and sundry times been made concerning the College and the Journal. Some have been "pro" and some have been "con." Both should be welcomed by any group or any institution, provided they are constructive in character. Parenthetically, destructive criticism counts for nought, save only as it injures the one who resorts to it. It is usually used by those who do not know the whole truth about which they are talking, so therefore it becomes only ranting. Constructive criticism, however, is always of value. No matter whether favorable or not the wise man being criticized will examine himself and see where improvement can be made. One of our best criticisms and, of course, favorable, is that "the *Journal of the American College of Dentists* has done more than any other single institution or factor to increase respect
for dentistry and to stimulate medico-dental relations; this has been constant, consistent, continuous and increasingly true with each number and volume of that journal.” Such statements are naturally enough, always pleasant to hear, but immediately there comes to mind, the feeling of greater responsibility. And in the light of this discussion of the future, it may put one in that position in which he has to prophesy or promise.

Enough has been said concerning prophecy and perhaps enough prophecy has been made for immediate need. A brief word or statement of certain facts will not be out of place, this to be followed by a short survey of what may portend for the future.

For the last few years, the contributing editors have been most active and most helpful under the chairmanship of Dr. Gies. But the time came when Dr. Gies expressed a desire to be relieved of this responsibility along with that of the assistant secretarship. We are still in a war and an editor had to be selected and elected. Under the present emergency, the Regents appointed a Journal Committee to study the situation and to make recommendations. Without going into too great detail they reported at Cincinnati and finally at Chicago. You readers have had some of the detail presented to you. The result is the continuance for the present of the present editor and the election of Dr. E. G. Meisel as assistant editor, he to act as chairman of the contributing editors. Others of the group are being solicited to edit specific sections of the journal and so on that basis we expect to go on into the year.

Among other recommendations of the committee was one that pages A and B of the advertising section should be eliminated. This does not mean any change in policy, in fact it does mean a strict adherence to that expressed policy. It is the plan as advocated by the committee and approved by the Regents to select a managing editor for the journal and proceed with the development of an advertising program. These pages will undoubtedly be used somewhere in that plan when developed.

This year will witness the centennial of the gift of nitrous oxide
as an inhalant anesthetic. The journal will devote a considerable number of pages to it. There are other matters of historical value which will also come up and a number of great value to the profession and the public whom we serve. There will be papers from researchers and others from those interested in the social sciences.

One critic has referred to dentists as “blessed dentists,” with the further inference that we are not interested in the development of a Health Plan by which the people may receive proper and sufficient care. The record of the College, the Regents and the Journal all will show that it has been our constant aim to promulgate that which is best for our citizenry. However, we know that a contract to be of value must benefit both parties to that contract and we are not accepting any emotional, or political plans which have no foundation in fact.

We go into the new year or the new era, should it actually begin now, with a “clear vision” of what is to be done, nor will we be lacking in tools with which to do the job.

We do have a “clear vision” and we “burn with high zeal for service to civilization.” We are not afraid of the future, whether this year, the near future or far in the distance. We want to make our accomplishments in the exercise of our individual liberty and we do not want any “if’s” to deter us. We advance with the prospect of a satisfactory year for our members and the Journal and with the further prospect that dentistry through all of its organizations will provide that which is best for the people.

**ERRATUM NOTICE**

Please enter the following correction in your copy of the report prepared under the auspices of the Socio-economics Committee of the American College of Dentists and entitled: *Costs of Dental Care for Adults under Specific Clinical Conditions*, by Dorothy Fahs Beck, assisted by Mary Frost Jessup. The third line from the bottom of page 253 should read “less than 20,000,000 adults” instead of “less than 2,000,000 adults.” Unfortunately, this error, resulting in an understatement of the adequacy of the supply of dentists, was not discovered until this book had been distributed.
At a dinner in Cincinnati in November, 1941, Dr. J. Ben Robinson referred to a controversy relating to an historical matter in Ohio, which he stated had been dropped so far as he was concerned. This was a relief to many of his audience, because his arguments, innocuous as they had been, were an outright attack, accompanied by innuendo, against a character whose efforts for education in dentistry and higher professional standards are based on historical facts—satisfactory and acceptable, so far as is known, to every dentist excepting Dr. Robinson.

It was a surprise, therefore, to find that the controversy had not been dropped but was continued in the issue of the Bulletin of the History of Medicine for March, 1942, from which portions were quoted in the section of “Correspondence and Comment” in the issue of the J.A.C.D. for September, 1942. These additions to the controversy were not restricted to new matter, but referred chiefly to statements previously published by Robinson in the issue of Dental Items of Interest for February, 1941, all of which had been refuted in the issue of that journal for June, 1941. The selected quotations in the issue of the J.A.C.D. for September, 1942, called for the replies that were published therein by Weinberger and by me in the issue for March, 1943, to present facts that had been ignored by Robinson. These replies were followed, in the issue of this Journal for June, 1943, by a further derisive article by Robinson, his most significant statements being: “There seems little to be gained by discussing further the question of John Harris’ alleged contribu-

\[1\] Two replies to comment by Dr. J. Ben Robinson: J. Am. Col. Den., 10, 162; 1943, June.

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tions,” and: “This [is] my final public utterance on a subject that has already received more attention than it deserves.” If true, this is received with complacency.

Robinson refers to his article, “The Claim of Bainbridge, Ohio, to Priority in Dental Education” (Den. Items. Int., 63, 105; 1941, Feb.), in which he claimed to have “exposed misstatements, faulty evidence, misinterpretations and unwarranted assumptions,” but failed to mention a refutation of his article in the same publication for June, 1941 (pp. 517-536). I desire, therefore, to refer the reader to that rebuttal and to ask a critical examination of it for the “incriminating statements” referred to by Robinson. He omits specific incidents and speaks mostly in generalities, as though his dogmatic statements should be acceptable as ipse dixit doctrine. He thus leaves the reader to “respect the evidence upon which his conclusion is based,” without question.

Robinson claims that he does not question the veracity of statements that have “remained unchallenged for almost a century,” and that “the claim that John Harris conducted a dental school at Bainbridge is false; that there is no proof that John Harris taught at Bainbridge, and that there is abundant proof that he did not.” He refers to Taft’s statement (Dental Register, 22, 91; 1868, Feb.) about Bainbridge, Ross County, Ohio: “which place might very properly be called the starting point of the following pioneers of the profession in the Mississippi Valley.” Eight names are mentioned by Taft, to whom Robinson refers as “supposititious students” as “having lived in or about Bainbridge.” Three of the number, the Taylors, were born near Bainbridge, but the others were born at distant points and attracted to Bainbridge by John Harris’ announcement in the Supporter and Gazette, Chillicothe, Ohio, Nov. 1, 1827 (J. Amer. Den. Assoc., 19, 361; 1932). At that time Bainbridge had but 250 inhabitants and it would have been most unusual for eight in a community of that size—or from outside points—to take up the study of dentistry without some impelling factor, such as a school of instruction, as announced by John Harris.
Furthermore, in the reference in the Dental Register, Taft states: “Drs. Chapin A. and James Harris, although not residents of Bainbridge, yet took their first lessons in Dental Practice from Dr. John Harris while residing at that place.” This statement is in a postscript to the obituary of Edward Taylor (Feb. 17, 1811-Feb. 26, 1868), brother of James Taylor, founder of the Ohio College of Dental Surgery. James Taylor died June 12, 1881. At the time the obituary was written, Taft and James Taylor were associated in the Ohio College, and Taylor seems to have had no reason to correct the statement. He was probably Taft’s source of information, having also been a student of John Harris’ at that time. Robinson tries to disparage our statements by calling them “modern misinterpretations.” However, there can be no “modern misinterpretation” of Taft’s statement—nevertheless Robinson claims to have “shown conclusively that Taylor [James] and Harris [Chapin A.] did not study dentistry at Bainbridge. . . . There is no proof that John Harris taught dentistry at Bainbridge; there is abundant proof that he did not.” Having known Dr. Taft personally while a student, I cannot, without regret, see a statement by this grand old patriarch of the profession—definitely recorded in history—branded as an untruth.

Elsewhere the writer has stated that while a student in the office of the late Dr. F. H. Rehwinkel, at Chillicothe, Ohio, Dr. Rehwinkel personally gave me the following information: When he went to the Baltimore College of Dental Surgery, from which he graduated in 1855, Dr. Chapin A. Harris, on learning he was from Chillicothe, remarked: “Why you come from near Bainbridge where I studied dentistry.” If Robinson desires to brand this statement as untrue, as he has all others bearing on the subject in point of evidence, the writer will be forced to forgive him, because we understand there is a condition of mind known to medical science wherein a patient has an innate antipathy to certain names and individuals and places.

In the recent catalogs of the Baltimore College of Dental Sur-
surgery, of which Robinson is Dean, the following statement appears: “In 1831 Dr. Chapin A. Harris came to Baltimore to study under Hayden. Dr. Harris was a man of unusual ability and possessed special qualifications... etc.” The author of this statement no doubt knew that Chapin A. Harris located in Baltimore in 1835; and if he (Robinson) read Taft’s statement, he also knew that Harris studied dentistry in Bainbridge—and from other sources he might have learned that Harris also practiced dentistry in Bloomfield, Ohio, and Fredericksburg, Va.—before going to Baltimore. Such misleading statements, to prospective and actual dental students, go far to contribute to the many errors in dental history so frequently referred to by Robinson.

It is not argued that John Harris lectured at Transylvania in 1835-36. It is so stated by Cyrenius O. Cone in Harris’ obituary. In 1845 Cone took over Harris’ practice in Georgetown, Ky. Knowing Harris as Cone did, this statement should be accepted as an historical fact. There is no ground for attacking the veracity of Cone’s statement. (See Thorpe’s Dental Biographies, National Art Publishing Co., 1909, p. 266.) The question of the lectures is irrelevant to any development in Baltimore, and Robinson’s reference to Hayden’s activities there simply cloud the issue.

Relative to the “Bill to Regulate the Practice of Dental Surgery” in Kentucky, and a “Bill to Incorporate the College of Dental Surgeons of Kentucky,” records of the legislative bodies of that state show that such bills were introduced. In regard to the latter, we again accept a statement by Cone to the effect that Harris was responsible for the bill; he also wrote: “Although this effort to secure legislative privileges for educating the dentist was unsuccessful, still it is worthy of remembrance as being the first effort in this country to establish an institution of this kind.” John Harris did fail in Kentucky, as Robinson would have his readers know. But this same John Harris’ student and brother did, according to L. Parmly Brown, establish the Baltimore College of Dental Surgery after Hayden had failed!
The relationship of John Harris—direct or indirect, whichever you choose—in the founding of the Baltimore College of Dental Surgery and the Ohio College of Dental Surgery is in the fact that in his school at Bainbridge, according to George Watt and also James Taylor himself, was discussed "the necessity of a thorough professional education for the dentist, and neither rested until he had, with such assistance as he could rally around him, established a college to offer the desired instruction, of which they both so strongly felt the need." If history is a record of past events, especially those in which man has taken part, we must accept statements of men of character who had no motive other than to place in the records facts for succeeding generations. While records of events themselves may seem commonplace, they are necessary in the field of philosophical history, which considers the causes of events and resulting consequences.

We contend that John Harris' precepts and inspirational influence over Chapin A. Harris and James Taylor, while students at Bainbridge, went far toward the establishment of the above colleges. This is not "modern misinterpretation" but fact based on the writings of George Watt (Ohio Journal of Dental Science, 1887, Vol. 7, pp. 5-6; 250).

The caption of Robinson's article in the June, 1943, issue of this Journal—to which this is a reply—is at variance with the former subject under discussion; but the "new" features can be answered briefly, in that John Harris made indirect contributions to the College, the Society, and the Journal, through his brother, Chapin A. Harris. It was brother John's influence that induced Chapin to forsake a medical career to devote himself to dentistry. Chapin Harris was a charter member of the American Society of Dental Surgeons and, according to L. Parmly Brown's "New Light on Dental History" (Dental Cosmos, 1920), was founder of the Baltimore College of Dental Surgery, and also of the American Journal of Dental Science, in defiance of the attitude of Horace H. Hayden, who declined to assist in the latter enterprise because he had "labored too hard and
too long in the acquisition of professional knowledge, to sow it broadcast throughout the land by means of a magazine.”

John Harris, although elected an “Acting Member” of the American Society of Dental Surgeons in 1840, did not attend a meeting until August 5, 1845, in New York City, when, in a paper on “Toothache,” he stated that circumstances over which he had no control prevented his attending any of the former meetings, and expressed regret that he “had been prevented from sharing in your sacrifices and toils, and manifesting that zeal which the cause of science, our profession and humanity demand. The members of the Association have already contributed largely to the advancement of the science and art of dental surgery; they have already added to the respectability of the pursuit. . . . I am encouraged to believe that the day is not distant when this branch of the curative art will be as much respected as that of general medicine and surgery” (American Journal of Dental Science, Vol. 6, p. 100). According to Robinson that paper, “in comparison with the contributions of other dental writers of that era . . . appeared most commonplace,” even though it forcefully called attention to focal infection resulting from pulpless teeth and advocated their removal to cure systemic conditions resulting therefrom. As this paper “did not elicit the least direct favorable comment,” according to Robinson, it probably went over the heads of those present. We are surprised, however, to hear it called “commonplace” at this time, especially by a dean of a dental college.

Robinson stresses at some length that John Harris was not a member of the Mississippi Valley Association of Dental Surgeons, organized at Cincinnati, August 13, 1844. He fails to state, though he evidently knew, that Harris at or previous to this time was preparing to leave Georgetown, Ky., having made arrangements to turn over his practice to C. O. Cone immediately after Cone’s graduation from the Baltimore College in 1845. The next meeting of that Association was not held until August 19, 1845—John Harris was living in Annapolis, Md., prior to July 14, 1845. Furthermore, on July 11, 1844, John Harris disposed of property he purchased
May 3, 1837, on Second Street in Chillicothe, Ohio, preparatory to leaving for the East. It would have been folly for him to join the Mississippi Valley Dental Association, as there is no record of his having returned to Kentucky or Ohio. Robinson states: “When the latter [Ohio College of Dental Surgery] was founded in 1845, John [Harris] was preparing to leave Kentucky for the East.” We agree fully, and trust the above facts will free Robinson's mind of any stigma against John Harris for not having been a member of the Mississippi Valley Dental Association.

Robinson would convey to the reader his ideas that “John Harris does not merit any recognition as a dental educator, and only casual notice as a humble member of the dental profession to which he neither devoted all his interests nor made a single impressive contribution.” Further, that “John Harris thrived only at the hand of his brother, Chapin, who dutifully attempted to keep him in the foreground.” We feel that the facts pertaining to the professional side of John Harris’ life will prevent any such belief in the minds of our readers. Aside from these qualifications he had a capacity, through his personality and skill, to endear himself in communities where it was his lot to practice. In support of this statement a copy of related Minutes in the Records of the Masonic Lodge at Hertford, N. C., where he died and was buried, is appended:

“PERQUIMANS LODGE, NO. 106, A. F. & A. M.
Hertford, N. C., July 27, 1849

“At a called meeting of Perquimans Lodge 106 at their Hall in Hertford, Fryday morning July 27th, A. L. 5849, the following members were present:


"Visiting Bros.: James V. Reed, Wilson Reed, N. C. Skinner, Wm. Clary."
"A Lodge of Master Masons was then opened in due and ancient form. This Lodge was called to make preparations for the Buryal Services of Bro. Dr. Jno. Harris who died in this town on the 26th inst. Dr. Harris was a member of Scioto Lodge No. 6 of Ohio. After suitable preparations being made for the occasion, the Lodge was called off until 3 o'clock this evening at which time the Lodge of Master Masons was Reconvened when the procession was formed and repaired to the Room where the dead body was and from thence to the M. E. Church where the Rev. Wm. Grant preached the funeral sermon of said dec'd, after which the corpse was conveyed to the grave where it was intered with Masonic Honors in due and ancient form. The Lodge then returned to the Room where, on motion of Bro. Brace, the Lodge voted their thanks to the Chaplain of the day, Bro. Wm. Grant, for his services this day. Also on motion of P. M. Willis H. Bagley, a committee of three was appointed to draft Resolutions of Sympathy and Condolence, consisting of P. M. W. H. Bagley, Dr. J. A. Harrell and E. Brace and ordered that the Secretary forward a copy of same to the family of said dec'd, which are as follows (viz):

"Whereas it has pleased an All Wise Providence to remove from among us by death our beloved and esteemed friend and brother Dr. Jno. Harris and desiring to perpetuate a remembrance of his many social and excellent virtues by some suitable token of our regard.

"Therefore, Resolved, That whilst we deplore this death and deeply feel his loss, it becomes us reverently to bow to the dispensations of God and to express a warm remembrance of one who had endeared himself to us by so many good qualities of head and heart.

"Resolved, That as Masons, we feel a severe affliction has visited us in an event so sad and a loss has been sustained by the Fraternity at Large which cannot be replaced.

"Resolved, That we sincerely sympathise with the family and friends of our dec'd Brother and tender them our fondest consolations humbly praying that so melancholy a bereavement may be sanctified to their eternal good.

"Resolved, That as a further testimony of our esteem and love for the dec'd, this Lodge wear the usual badge of mourning for thirty days and that the Secretary send a copy of these resolutions to the family of the deceased.

"There being no further business to come before this Lodge of Master Masons it was closed in due and ancient form.

(Signed) "Jos. H. White, Sec'ty"
In the obituary of John Harris, in the *Dental Register*, reprinted from the *American Journal of Dental Science*, James Taylor refers to Harris in a glowing tribute, touching upon his qualifications as a practitioner and teacher. It is also to be noted that Taylor, then Editor of the *Dental Register*, did not offer any criticism or correction of any statement made (in the *American Journal of Dental Science*) by Cone on Harris' activities. This seems to have been left for Dr. Robinson, but his criticism must be pronounced a failure, since his "new evidence" or "different viewpoint" still leads nowhere in the attempt to disprove the claim of Bainbridge to priority in dental education. And if the foregoing does not finally reach the hitherto closed recesses of Dr. Robinson's mind, we fear he may forever remain uninformed and therefore unconvinced.

"... for I search after truth, by which man never yet was harmed. But he is harmed who abideth on still in his deception and ignorance."

II. DID JOHN HARRIS MAKE ANY SUBSTANTIAL CONTRIBUTION TO THE FOUNDING OF THE BALTIMORE COLLEGE OF DENTAL SURGERY, THE AMERICAN SOCIETY OF DENTAL SURGEONS OR THE AMERICAN JOURNAL OF DENTAL SCIENCE?

BERNHARD WOLF WEINBERGER, D.D.S.

*New York City*

Upon reading Dr. Robinson's "final utterance on a subject that has already received more attention than it deserves," my first reaction was to ignore it and close the subject. This I would like to do, for after all he is the sole remaining individual who does not desire to be convinced and I am sure most of the men in the profession as well as myself are fed up with such an unnecessary controversy. As Dr. Robinson has, however, "challenged the validity of modern misinterpretations placed on historical incidents by Mills and Weinberger, a course resorted to by them in order to bolster a claim that is at complete variance with facts of history," I must forego my wishes, otherwise my silence would be misinterpreted. Then, too, the title of his comment is at variance with the original subject under
discussion and appears to be intended to swing the controversy in a new direction.

In the Dental Cosmos (Nov., 1929, pp. 1074-1082), I brought to the attention of the profession “John Harris, the Father of American Dental Education. His True Place in American Dentistry.” In opening, I wrote: “Preceptor to the founders of the first two dental colleges, of the editors of the first Eastern and Western dental journals; himself, first [dental] lecturer to medical students in this country and the first to endeavor to establish a dental college in connection with a medical university, John Harris played a most conspicuous part in the educational evolution of the dental surgeon in America.” John Harris’ career centered mainly on his school in Bainbridge, Ohio, and its influence—a period from 1823 to 1840—and no claim was ever made, except as above stated, that he directly contributed to the founding of the Baltimore College of Dental Surgery, the American Society of Dental Surgeons or the American Journal of Dental Science. Mention was made, however, that he was a member of the Society and that he was “one of twelve appointed to write an essay for the following year’s meeting,” which he later did and that he did contribute to dental journalism as well as elsewhere. One cannot help but wonder what reason Robinson now has for injecting this angle, far removed from the time of the Bainbridge School and what we understand by “organized” dentistry.

Robinson’s reply creates the impression that Mills and myself are the only individuals who ever wrote about, or supported the claims to, John Harris’ position in dentistry, and entirely ignores statements by L. P. Anthony (Proc. Dental Centenary, p. 872), Harry Bear (Proc. Dental Centenary, p. 899), Arthur H. Merritt and J. Martin Fleming (J.A.D.A., 1940, pp. 1187-92). The opinions of these men apparently mean nothing to him. Let us turn to the writings of another, then, one who has received recognition as a medical historian and who has contributed many excellent articles to our own history; also one whom Robinson quotes when it suits his convenience. In discussing “The First Dental School and the
First Dental College” (J. Ohio State Dental Soc., 1940, pp. 158-9), Dr. Frederick C. Waite, after considering the preceptor-student system of professional education, remarked:

“In Cincinnati, then the largest city in the West, soon after 1810, two or three physicians had groups of medical students and from these arose the first chartered professional school in Ohio, the Medical College of Ohio, founded in 1819.

“A few years later, at Bainbridge, a small village not far from Cincinnati, a physician, who was a popular preceptor, continued to attract a considerable number of students. It happened that he had especial interest in dentistry and gave his students much more instruction in the dental field of medicine than did most preceptors. In fact, one group of his students gave most of their attention to dentistry. It is quite possible that this preceptor had attended one of the several private medical schools in central New York State whence he came.

“Following the precedent familiar in New England and New York, this organization of a preceptor and a group of students was, with justification, called a school, specifically a school of medical instruction. Dentistry was not at that time recognized as distinct from medicine. Had it been, since this preceptor was emphasizing instruction in dentistry to a part of his students, it would have been entirely proper to have called the organization a school of medical and dental instruction. It had no charter and could give no degrees, so it would have been improper to call it a medical and dental college under the usage of the word college at that time. To have called it a premedical school would have been entirely incompatible with the medical educational system of that era, because no preliminary education was required for the study of medicine.

“Until a prior record of group teaching of dental students is found, it is justifiable to call this the first dental school in the United States. This first group teaching in dentistry was by Dr. John Harris at Bainbridge, Ohio, beginning in 1827.

“The first dental college was not organized until thirteen years later, when the Baltimore College of Dental Surgery was founded. It had a charter and was the first institution empowered to grant degrees in dentistry.

“No conflict seems to exist between the claims of these two institutions as to priority since they were two different kinds of organization. The one at Bainbridge was not a college, but a private unchartered school which followed, both in method and name, precedents that went back over fifty
years in the United States. The institution at Baltimore was not a school, but a college with a charter giving right to grant degrees and in its name followed precedents that went back over two centuries in the United States."

We have here a clear statement by Waite that John Harris did have a school for dental instruction at Bainbridge, beginning in 1827. Waite, an historian of repute, therefore must have found sufficient proof to justify his conclusions. The same holds true for Anthony and others, excluding Mills and myself; yet Robinson boldly states "there is no proof that John Harris taught dentistry at Bainbridge; there is abundant proof that he did not," but offers no evidence, only his opinion.

Under dental education, paragraph (b), Robinson wrote as follows:

"It is argued that John Harris lectured on dentistry at Transylvania in 1835-36. While I freely doubt the validity of this claim, I shall concede it for purposes of argument. If these lectures were given as claimed they had no influence on developments in Baltimore where for thirty-six years before '1835-36' Horace H. Hayden was engaged in promoting efforts to provide educational opportunities for those about to begin the practice of dentistry, and where at the University of Maryland from 1823 to 1825 he tested the advantages of teaching dentistry in a medical school. The Baltimore College of Dental Surgery was the direct result of Horace Hayden's diligent efforts in Baltimore, not the indirect consequence of John Harris' doubtful ventures in Kentucky."

As to John Harris' activities at Transylvania University, which Robinson questions and then endeavors to link with developments in Baltimore—something he is trying to figure out in order to confuse himself and his readers—the following statements with other supporting evidence is sufficient proof for any unbiased historian:

"Agreeable with these views, he made an effort, in 1836, to obtain a charter for a dental school in Kentucky, with means for teaching ... still it is worthy of remembrance, as being the first effort, in this country, to establish an institution of this kind."

"During the winter of 1835-36, in compliance with a request of the Faculty and Students of the Medical Department ..., Dr. Harris delivered a course of dental lectures before the medical class of that institution. These
lectures, probably, are marked as the first successful effort at a systematic course of teaching dental surgery in the West, if not in the United States."

I believe the English is perfectly clear in both of the above statements. The word "first" in each sentence cannot be misconstrued, yet Robinson states that "modern misinterpretations" have been placed upon both as well as other claims. Now neither of these statements was originally written by Mills or Weinberger, only submitted by each as evidence; they were written in 1850 by one who was then on the staff of the Baltimore College, "from which he graduated April 15, 1845, with honors. Immediately following his graduation he went to Georgetown, Ky., where Dr. John Harris (a brother and preceptor of Chapin A. Harris, also preceptor of James Taylor, John Allen and others of the best men of the day) who was to absent himself from his practice for a year, turned his practice for that period over to the care and skill of Dr. Cone," etc. (Koch's History of Dental Surgery, Vol. 3, p. 266.) Nowhere in the literature of that day can one find the statements made by Cone disputed or questioned; on the contrary, James Taylor and others supported the claims; yet Robinson now feels himself capable of denying their validity.

As far as we know, prior to 1840 only two others, L. S. Parmly and Horace Hayden, were sufficiently interested to give instruction by dental lectures. One, Levi S. Parmly, returning from London in 1818 after having seen the results of the lectures given by Fox and others, introduced this innovation in American dentistry. These first lectures, however, were intended for instructing the public as to what constituted proper dentistry. (See my "Educational Evolution of the Dental Surgeon," Dental Cosmos, May and June, 1929.)

The other important figure was Horace H. Hayden. No one desires to take away from him any credit for the part he played in helping to advance dentistry during those trying years. History shows, however, that working alone he failed to accomplish his hopes, for he himself confessed his inability to interest men in the
profession except in New York. Not until Chapin A. Harris began to work with him did events take shape. Certainly Hayden's reluctance to assist in the founding of the first dental journal, because of reasons often stated—Robinson's attempt to excuse him falling far short of a logical reason (Proceedings, p. 1017)—shows that he was not as broad and helpful as was his associate. Likewise, one wonders what reasons Thorpe (Koch's History, Vol. 3, p. 58) had when he ignored Hayden's efforts in dental education and journalism and wrote the following introduction to Hayden's biographical sketch: "Architect - geologist - dentist - organizer and promoter and 'Father of the American Society of Dental Surgeons'." If Thorpe considered Hayden to have been more than an organizer, he certainly would have designated him as the "Father of Dental Education" instead only "of the American Society of Dental Surgeons."

Relative to the lectures Hayden delivered at the University of Maryland which Robinson now stresses: he has forgotten, apparently, that in 1932 (Dental Cosmos, p. 737) he himself called attention to the following evidence he discovered: "Dr. Willis H. Baxley, writing from London to Dr. R. B. Winder, refers to the subject (Hayden lectures) as follows: Dr. Horace H. Hayden delivered to a few medical students of the University of Maryland some lectures on Dental Physiology and Pathology. I was one of his class." Until then it had never been clear as to just what subjects Hayden taught at the University. Robinson now desires us to believe that "he tested the advantage of teaching dentistry in a medical school," yet in 1932 Robinson emphasized the fact that one of Hayden's own pupils said they consisted of "some lectures on dental physiology and pathology." Thus they were not instructions in the art and practice of dentistry, as he now implies. History therefore shows that John Harris, in 1827 at Bainbridge, did succeed in teaching the fundamentals of the dental art, and that at least two of his pupils later took leading parts in the establishment of the Baltimore and Ohio dental colleges.

Robinson's statement that "the Baltimore College of Dental
Surgery was the direct result of Horace Hayden's diligent efforts in Baltimore, not the indirect consequence of John Harris' doubtful venture in Kentucky," is indeed interesting. One would infer from this that Hayden was the only factor in its establishment; that Chapin A. Harris and others, and the financial support given by men here in New York (see my "Origin of Organized Dentistry," Bull. Dental Society State of New York, 1937, Nov., pp. 51-90), had nothing to do with it. Robinson quoted in error this cited article as having been published three years previously, and being of no value. One wonders why this confusion? (Proceedings, pp. 1014-1015).

Now a word regarding the dates generally ascribed to Hayden's effort, which Robinson has made much of. Robinson cites in this reply the American J. Dental Science, Vol. 1, 1841-42, p. 158, where one finds the following: "Many years ago he (Hayden) had consulted with the elder Hudson on the formation of a society." This statement was corrected on p. 246 to read: "as long since as the year 1817, he had consulted with the late Dr. Edward Hudson," etc. Let us compare these when Hayden gives others, and see how little his dates can be relied upon. In the same Journal (Vol. 2, 1841, p. 23), Hayden again states that John Greenwood "must have commenced his professional career in the city of New York about the year 1788 or '90." The fact is that Greenwood in his own "Memoirs," and verified in other writings of his, gave the date as 1785. Again on p. 25 we find Hayden saying that "Mr. Woofendale [Woofendale] who arrived in New York about the year 1794 or 5 from England," when definite records show his first arrival to have been on October 3, 1766. With Hayden so uncertain as to his dates, how then can one accept as correct "many years ago" as the date of 1817, 1823 or others?

It is with regret that I must waste my own and the reader's time replying to Robinson's insinuations. "I [he] have not violated tradition but have strongly upheld it. I have, however, challenged the validity of modern misinterpretations placed on historical inci-
dents by Mills and Weinberger, a course resorted to by them in order to bolster a claim that is at complete variance with the facts of history." Robinson has the audacity also to write: "The thoughtful and intellectually honest reader cannot fail to respect the evidence upon which my conclusion is based." By such dogmatic statements he desires to have his reader believe that because of his ego his evidence must be accepted without question while others are falsifying history. Well, let us see how he has, in his historical presentations, misled the profession into believing something that truth and evidence reveal to be otherwise.

Those who know Robinson are acquainted with his intense hatred of anything that pertains to the Harrises; for that reason he cannot write an unbiased history. Has Robinson other reasons why he finds, for instance, that John Harris' contributions to dental journalism "were not impressive" or "appeared most commonplace?" I believe he has, and later one will be suggested. Robinson's line of reasoning is remarkable, to say the least. How often contributions to science fail to be understood at the time they are presented, and are forgotten by contemporaries; later to be dug out of the musty files by others, their importance then appreciated and heralded as milestones in progress. History is full of these incidents, and such was the case with John Harris' "Dissertation on Toothache"; yet Robinson makes much of only one aspect of this situation. As Harris' paper has been singled out, let us examine it briefly, for it is ten pages in length. "The subject having been left discretionary with myself [John Harris] I have been influenced in its selection more on account of its practical importance and a desire to benefit the junior members of the profession, by inviting attention to doctrines and principles with which it is connected...." (A. J. Dent. Science, 1845, p. 101).

In conclusion, Harris remarked: "by simply observing, that the remedies must, in most cases, be addressed to the general system; or to organs remote from the teeth, and can only be determined by the pathological and therapeutical knowledge of the practitioners. To attempt to cure this form of disease by local treatment, would
only be to protract the sufferings of the patient, and in the end, to realize nothing but disappointment." (p. 110). Below, selected at random, are a few of Harris' observations, which will enable the reader to judge whether they are or are "not impressive" or "appear most commonplace."

"The surgeon dentist, should always under such circumstances, endeavor to persuade his patient to submit to the removal of the tooth, by pointing out the bad effects that will inevitably result from its retention (tooth) in the mouth. . . . (p. 103).

"The necessity for promptitude and decision in the treatment of this disease, becomes apparent when we consider the physical peculiarity of organization of the teeth, and the relation they sustain to each other and to the circumjacent and even remote parts of the body. . . .

"It should also be recollected that tooth-ache, usually treated as a disease, is only a symptom or the effect of disease, and is always preceded either by local physical predisposition, excited by constitutional disturbance, as in the sympathetic form of the affection, or by inflammation of the peri-dental membrane, resulting from mechanical violence or the irritation caused by dead teeth, etc. . . . (p. 104).

"Cases are continually occurring, in which the young and inexperienced practitioner, finds it difficult to determine on the practice most proper to be pursued, but it is hardly necessary to observe, that he should never extract a tooth, however he may be urged to do so, unless, upon careful examination, he finds this to be the only curative indication. It is a well established pathological fact, that parts primarily affected, do not always complain for themselves; the pain is often felt in a remote locality. Hence, sound teeth are often referred to as a seat of the disease, when in fact it is seated in some tooth quite remote from it, and are frequently sacrificed both by medical and dental practitioners."

Here, for the first time in American dental literature, we have a warning of the effect of pulpless teeth on the patient's health, a warning the dental profession neglected to heed until William Hunter in 1910 gave dentistry a violent jolt. Fortunately John Harris' paper is preserved in our literature and can be read by everyone. Then let each determine for himself its value, and see if Robinson is correct in claiming that it is "not impressive." Perhaps there is an explanation as to why he does not want this paper to
become too well known. This is easily perceived when one reads his historical “Dentistry Through the Centuries” (Proc. Dental Centenary Celebration, p. 867). There he presented what he considers a truly historical review of the literature, where he has “not violated tradition but have strongly upheld it.” Yet he ignored and suppressed the observations of John Harris on focal infection in order to credit another, he created, with being the first American dentist to understand “the effect of oral disorders on general health.”

Robinson, on page 867, stated:

“The knowledge of the rôle that oral sepsis plays in the cause of general disease has been one of the most significant developments of the century. Its importance has created a keen interest among physicians as well as dentists for a more effective correlation of effort in the interest of the patient. As late as 1910 Dr. William Hunter announced his conclusions that many diseases have their origin in foci of infection, particularly in septic mouths in which prosthetic appliances were to be found. Dr. Hunter, according to the language of his address, believed that he was proposing a new theory. A review of medical and dental literature reveals the fact that Dr. Hunter had applied his powers of observation more to the patients in the two hospitals in London with which he was associated than to the facts of dental and medical literature. In 1776 Benjamin Fendall, a distinguished American dentist, referred to the effect of oral disorders on general health: 'Disorders or diseases of the teeth, however slightly regarded by some people, are inevitably attended with evils which affect the system' (7). [Italic not in original.] The immortal Benjamin Rush, the dean of American medicine in the closing years of the eighteenth century, said: 'I have been made happy by discovering that I had added to the observation of other physicians in pointing out a connection between the extraction of decayed and diseased teeth and the cure of general disease' (8). I have previously alluded to the statement of Chapin Harris made on a point of dental education that if the practitioner were able through knowledge of the sciences to arrest the diseases that come within his province he would be able to 'prevent the various evils that are frequently consequent thereupon.' [Here Robinson stops, but let us continue the quotation]: 'or, in other words, if you would be able to preserve those invaluable organs, the teeth, and thus secure to those by whom you may be consulted, one of the greatest of earthly blessings, a healthy denture, endeavour to attain the knowledge that will enable you to do it.'”

[Robinson continues]: “Such reference and such allusions are climaxed
in 1891 by the conclusions of Dr. W. D. Miller: 'During the last few years the conviction has grown continually stronger, among physicians as well as dentists, that the human mouth as a gathering place and incubator of diverse pathogenic germs, performs a significant rôle in the production of varied disorders of the body, and that if many diseases whose origin is enveloped in mystery could be traced to their source, they would be found to have originated in the oral cavity' (9). In view of the foregoing it would seem that William Hunter's claim to priority in discovering the relation of oral sepsis to general disease is quite as faulty as was the accuracy of his derogatory allusions to American Dentistry."

I have purposely quoted the whole of the first part of Robinson's focal-infection history so that I cannot be accused of misquoting or placing a "modern misinterpretation" upon it. Why the part relating to Chapin A. Harris was injected is beyond me, for the portion Robinson failed to include clearly shows Harris was not dealing with the subject under discussion. Based, therefore, only upon the short but "impressive" paragraph on Fendall quoted above, Robinson credits Fendall with recognizing "the effect of oral disorders on general health," yet John Harris' ten-page dissertation he "overlooks" because it was "not impressive"—or was it because of personal reasons and animosity? For the benefit of those not acquainted with the history, and for those who are not familiar with Fendall, the following interesting story is related. It is enlightening, and shows just how Robinson arrives at his deductions and secures his needed evidence.

In 1938 (J. Baltimore College Dental Surgery, March, pp. 1-4) Robinson published his paper, "Dr. Benjamin Fendall (1753-1818) A Pioneer American Dentist." Therein the author began to build up a very new and supposedly great person of importance in early Colonial dental history. By the time he wrote his "Foundations of Professional Dentistry" (Proceedings, 973-1048) Fendall "stands at the head of the dentists in eighteenth century America" because: (1) "His clear understanding of the sciences involved in dental practice, as indicated by his announcements, was far superior to that of any early American dentist" [p. 989]. (2) "The announcements of Fendall are not only the most extensive but the most enlightening
made by any American dentist of the eighteenth century. The descriptions of the operations performed by Fendall suggest that his qualifications were closely comparable to the very best that Europe could at that time afford”. Robinson failed to recognize the reason for this because he did not know dental history. (3) “He was the most prolific contributor to the press of all the American dentists of the eighteenth century. He easily ranks number one among early dentists in America” (p. 991). It would only be natural to ask oneself where did Fendall, a native American, obtain such a vast and broad concept of dentistry, something unknown in this country? How often it has been said that there is no such thing as a perfect crime and that for each some fatal clue is always left behind. So did Fendall, by using the Latin quotation that he was so fond of displaying at the head of his short announcements. In that way he convicted himself as being one of the greatest plagiarists of his time.

Having recognized that quotation as the one appearing on the title page of Berdmore’s 1770 edition, I examined the book. Had Robinson compared more carefully Fendall’s long advertisements of 1776 and 1784, which are published in full on pages 989-991 of the Proceedings, with Berdmore’s “Disorders and Deformities of the Teeth and Gums”—with which he states (p. 987) he was familiar, but which proved not to be the case—he would have discovered that both advertisements were verbatim copies of Berdmore’s Chapter I, a case of flagrant literary plagiarism. For once Robinson was correct, for they were “the very best [thoughts] that Europe could at that time afford.” The two long advertisements cited by Robinson are decidedly in contrast to Fendall’s more popular one, used repeatedly from September 4, 1776, through 1786, and which Robinson carefully does not mention. Always headed by the Latin quotation, the advertisements remained unchanged during the intervening years, showing that Fendall did not have any original ideas of his own; nor was there any progress in his concept of dental practice; yet Robinson uses him as the “yardstick” in the appraisement of others during this period.
The accompanying illustration\(^2\) compares portions of Fendall’s advertisement and Berdmore’s writings. The comparison shows that the former’s was but a verbatim copy, and that Fendall did not even take the trouble to think for himself, but lifted sentence after sentence from Berdmore’s book. In the 1784 announcement, Fendall copied from the “Contents Page,” item by item, minus the page numbers. Robinson “fell” for all this plagiarism, built up Fendall to be the ranking dentist of that period, and deceived his readers and the profession into believing he was writing a correct history of dentistry.

But let us proceed a step further and learn just how Robinson was able to credit Fendall with a knowledge of focal infection. In the accompanying illustration I underscored the words disorders, deformities and disorders or deficiencies to emphasize these facts: On pages 989-990 of the Proceedings, Robinson copied Fendall’s advertisement of 1776 correctly, as Berdmore wrote it. Now examine Robinson’s misquotation on page 867, wherein he cites under Hunter’s remarks, as previously noted, Fendall’s claim to knowledge of focal infection and see what it reveals. In that misquotation we find that the word diseases has been substituted for “deficiencies” (of the teeth) and in this manner an historian gives credit for something Fendall had no knowledge of. This situation recalls the famous remark: “It is more than a crime, it is a blunder.”

One must credit Robinson with at least having read Harris’ “Dissertation on Toothache” and that he is acquainted with its contents. He must have recognized in the article that here was a warning that Dr. William Hunter stressed 65 years later; but in case

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\(^2\)On the left of the illustration (p. 76) is a portion of Fendall’s 1776 advertisement minus the first paragraph, a verbatim copy of John Baker’s Sept. 16, 1773 announcement. [This is dated Annapolis, September 14, 1773 and appeared in the Maryland Gazette (Annapolis) on September 16, 1773.] On the right is a portion of Berdmore’s “Treatise,” 1770 edition. The numbers at the paragraphs in Fendall’s correspond to the equivalent paragraphs in Berdmore’s, and illustrate how the former copied word for word the latter’s knowledge. The portion at the bottom is likewise a verbatim copy of a portion of Chapter 20 (Berdmore). It was Robinson’s failure to recognize these plagiarisms that permitted him to arrive at the false conclusions he gave the profession.
DOCTOR FENDALL,

Operator upon the Teeth,

Is just arrived in this city, on his way to Baltimore, and intends returning about the middle of September next.

It is perhaps unnecessary to add, that the teeth give satisfaction in all the different articulation of sounds, and for ornament. The soundest of the teeth by some people is little regarded; but with the white race of the world, it is looked on as a certain mark of simplicity and sloth; not only because it disfigures one of the finest ornaments of the countenance, but also because the fault is imparted to the breath by dirty rotten teeth, is generally attended with deformities of the teeth, however slight; regarded with evils which affect the whole system; and deformities of them are often remarkably hurtful in common life.

Disorders of the teeth also frequently bring on the most excruciating pains and dangerous inflammations, sometimes deep seated abscesses, which destroy the neighboring parts, and affect the whole system by sympathy, or by infecting the blood with corrupted matter; and it is well known, that cutting the teeth carries off an immense number of children, who by due assistance might easily be saved.

Disorders of the teeth, as they generally tend to disease, are objects of serious attention; but setting apart a consideration which appears so distant, it is well known that they are often as formidable as disease itself.

CHAPTER I.

The Design of this Treatise.

1. To preserve the teeth, to regulate their growth, and to remove the vast variety of disorders and deformities to which they are exposed, are matters of greater importance than is generally imagined, and of such universal concern as justly claims the attention of the public; for disorders or deficiencies of the teeth, however slightly regarded by some people, are inevitably attended with evils which affect the whole system; and deformities of them are often remarkably hurtful in common life.

2. It is also necessary that the teeth should be preserved from the most trifling injury, which will also prevent the most trifling unfavourable consequence. It is well known, that cutting the teeth carries off an immense number of children, who by due assistance might easily be saved.

3. In common life, we every day observe, how a slight deformity carictures every gesture of some worthy people; whilst beauty and elegance soften the foibles of others, and grace the few accomplishments they are possessed of.

TREATISE ON THE TEETH.

1. The oratory of the pulpit and the bar, and above all the art of pleasing in conversation and social life, are matters of the highest concern to individuals. But in these no one can excel whose loss of teeth, or rotten livid stumps, and fallen lips and hollow cheeks, destroy articulation, and the happy expression of the countenance, whose voice has lost its native tone, and whose laugh, instead of painting joy and merriment, expresses only defect and sloth; not only because it carries off an immense number of children, who by due assistance might easily be saved.

2. Disorders of the teeth also frequently bring on the most excruciating pains and dangerous inflammations, sometimes deep seated abscesses, which destroy the neighboring parts, and affect the whole system by sympathy, or by infecting the blood with corrupted matter; and it is well known, that cutting the teeth carries off an immense number of children, who by due assistance might easily be saved.

3. In common life, we every day observe, how a slight deformity carictures every gesture of some worthy people; whilst beauty and elegance soften the foibles of others, and grace the few accomplishments they are possessed of.

4. The oratory of the pulpit and the bar, and above all the art of pleasing in conversation and social life, are matters of the highest concern to individuals. But in these no one can excel whose loss of teeth, or rotten livid stumps, and fallen lips and hollow cheeks, destroy articulation, and the happy expression of the countenance, whose voice has lost its native tone, and whose laugh, instead of painting joy and merriment, expresses only defect and disease.

5. In common life, we every day observe, how a slight deformity carictures every gesture of some worthy people; whilst beauty and elegance soften the foibles of others, and grace the few accomplishments they are possessed of.
he did not, in 1929 I stated that “the present edict against pulpless teeth is but a revival of the ideas then advocated by Dr. John Harris” (Dental Cosmos, p. 1075). Mills likewise has repeatedly made the same claim, and up to now not even Robinson has refuted the statement. Robinson has, therefore, no excuse in overlooking John Harris’ contribution to focal infection when writing its history, excepting bias and prejudice.

One would think that Robinson was the most scrupulous observer of historical accuracy that the profession has ever seen, as judged by his: “The thoughtful and intellectually honest reader cannot fail to respect the evidence upon which my conclusion is based.” Knowing what we now know, have we the right to accept his evidence and conclusions without question? Yet he is brazen enough to accuse others of “bolstering a claim that is at complete variance with the facts of history.” It was William H. Trueman (Dental Review, 1901, p. 129) who wrote: “It is much to be regretted that the dental historian is hampered at every turn by carelessly written articles such as this in review. A little research by these writers would show whether their statements were facts or fiction. Anyone unwilling or unable to make such needful effort has no business to write upon history at all.”

What sort of an historian is he (1) who writes that Fendall’s “qualifications were closely comparable to the very best that Europe could at that time afford” and is unable to figure out how impossible it would have been for an American, lacking a dental education and years of practical experience, to have written the advertisement that Fendall published? I questioned it and found my theories to be correct. (2) Or, who professes to be acquainted with Berdmore’s writings (Proceedings, p. 987) yet is unable to recognize that Fendall, his creation, merely copied sentence after sentence from Berdmore’s book, as well as from the Baker advertisement of September 16, 1773 (p. 988)? Why did he not call attention to the fact, as an historian should, that either one or both of these men’s writings had been quoted, and that Fendall had no original ideas of his own? (3) If these facts were known, how then could an historian have
used such advertisements to build up Fendall to be the outstanding dentist of that period? The truth is that Robinson failed to recognize these obvious facts and yet he desires his readers to accept his evidence and conclusion without question. What can we expect of students when the Dean of our oldest dental college—who likewise held the high position of President of the American Dental Association—quotes an advertisement correctly in one article and then, in another, offers it as evidence to support a false concept—by substituting one word for another, thus altering the meaning and intent of the original? This is indeed "impressive." Who made the error in copying, I do not know, but I do know there must have been carelessness somewhere; and then to have placed a false "modern misinterpretation" upon it "is at complete variance with the facts of history."

As I pointed out in an article in the Bulletin of the History of Medicine (Mar., 1942, pp. 343-355), errors by Robinson are a common occurrence. Is it possible that he has no explanation to offer or that he does not desire to explain them? His lengthy reply in that Bulletin consisted of personal abuse and insults, terminating in an endeavor to show my "unreliability as a writer of dental history is clearly exposed" by offering a letter from Mrs. Norton which he deliberately misread and misinterpreted. This same letter was published in this Journal (Sep., 1942, p. 335), which I answered in the number for March, 1943. In his latest answer, his silence regarding his misinterpretation of that letter is an open confession that he was unsuccessful in accomplishing his deceitful purpose and now is resorting to another line of attack by claiming the "bolstering," etc. It seems strange that he fails to realize his weakness by adopting such methods.

It is with regret that I find it necessary to inject Fendall in this reply. Had Robinson confined himself to facts—and not accusations, and then requested the profession to accept his evidence at its face value—I would have passed this by, but the readers of this Journal are entitled to know the truth. Furthermore, it is my per-
sonal opinion that one of the reasons why he desires to make John Harris’ contributions to dental literature appear “unimpressive” is to protect his writings and Fendall’s position as the earliest American who understood the problem of focal infection. That is why he ignored John Harris’ contributions in his historical survey. Likewise I feel he must subjugate Harris in order to have Hayden’s position strengthened as far as it relates to dental education and journalism. That is why he continued an unnecessary controversy.

The literature shows that with the exception of Robinson, who is now the sole “dissenter,” others besides Mills and myself have accorded John Harris the place he deserves. The question at issue is, did John Harris conduct a school in the twenties; did it teach the fundamentals of the then dental art; and if so, did those under his instruction carry forth any ideals and teaching of his that were worth while and that later could or did influence others. If so, he is entitled to be known as “The Father of American Dental Education.” Waite, from evidence satisfactory to him, states “until a prior record of group teaching of dental students is found, it is justifiable to call this [Bainbridge] the first dental school in the United States.” We know the school existed in 1827, and that two of John Harris’ students—his brother, Chapin A. Harris, and James Taylor—played important parts, the former at the Baltimore College; the latter, at the Ohio College of Dental Surgery.

There is but one logical conclusion to draw from this. Here we have two men, imbued with a similar spirit and desire, doing exactly the same things in separate parts of this country: influencing the direction that dental education was to take at our first and second dental colleges; both editors of our first and second journals; and both taking an active part in directing the second and third dental societies. Certainly—and they both acknowledged this to be true—the teachings and the ideals of their dental preceptor, John Harris, made a lasting impression upon each. The evidence that Robinson states is lacking may be found in the literature of that day by anyone with an open and unprejudiced mind.
BOOK ANNOUNCEMENTS

Dental Care for Adults: This is the title of a printed report of 306 pages, made under the auspices of the Socio-Economics Committee of the American College of Dentists, Charles E. Rudolph, chairman. The study was made by Dorothy Fahs Beck, assisted by Mary Frost Jessup. The report was reviewed by another smaller committee, immediately prior to publication, and finally edited by Dr. William J. Gies. It was made, and is presented with the hope that something constructive may be offered out of which realizable plans may be developed in the effort to make better provisions for the health of the people.


American Review of Soviet Medicine: This is the name of a new magazine, published by the American Soviet Medical Society, as stated, for the exchange of medical information. It is published under the editorship of Henry E. Sigerist, M.D., Medical School, John Hopkins University, and Dr. Dorothy A. Halpern, 130 West 46th St., New York, N. Y., Managing Editor.
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