Journal American College of Dentists

Presents the proceedings of 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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The American College of Dentists was established to promote the ideals of the dental profession; to advance the standards of 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.

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GERALD D. TIMMONS
Temple University
School of Dentistry
The following seven papers were presented at the Third Annual Meeting of the American Academy of the History of Dentistry, held in Miami, 1954. This constitutes the entire program, excepting only the business sessions and is submitted here for the benefit of readers beyond our own numbers. It may be hoped that more dentists may become interested in our professional history and that you will join us in this study. The Academy appreciates the courtesy of the College while we are yet unable to finance our own publication. [J.E.G.]

The Dental Historian and Current Trends in Dental Practice¹

L. LASZLO SCHWARTZ, B.S., D.D.S.²
New York

Twenty-five years ago, Sir Arthur Keith introduced his now notable "Menders of the Maimed" with the following words: "Men of business find it necessary from time to time to take an inventory of the goods they have in stock; occasions arise when medical men must do the same thing and make a survey of the means of treatment at their disposal."³ A brief historical inventory of some aspects of dental practice would seem to be an appropriate way to begin an annual meeting of dental historians.

Over two centuries ago, Mouton⁴ shrewdly observed that caries and tartar are the two leading agents that provide business for the dentist. In 1771, twenty-five years later, John Hunter with his keen scientific insight explained why the agent "caries" was so efficient. "Nature seems, in some measure, to have considered the teeth as aliens," he wrote, "only giving them nourishment while sound and

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¹ Presidential address before the third Annual Meeting of the American Academy of the History of Dentistry, Miami, November 5, 1954.
² Associate Clinical Professor of Dentistry, Head of the Division of Clinical Oral Physiology, School of Dental and Oral Surgery, Faculty of Medicine, Columbia University.

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fit for service, but not allowing them when diseased the common benefits of that society in which they are placed.”

Since nature is unable to cope with dental caries and scientific knowledge was and still is lacking—an art developed. This dental art, developing slowly during the past 2,000 years, reached a level of full effectiveness only in our own century.

It is to America that the world owes most of the achievements of modern dentistry: the effective restoration of carious teeth and replacement of those lost, the successful treatment of diseased teeth and the structures that support them, and the most dramatic of all—the gift of anesthesia.

In dentistry, America has led the world from the beginning. Today, throughout the world, when one speaks of dentistry the words “excellent” and “American” are synonymous. For us, as Americans, the preeminence of our profession is an understandable source of pride. Perhaps as keenly, we, as American historians, also feel the responsibility inherent in a position of world leadership.

American dentistry derived its strength from many sources. The recruits which formed the young profession were drawn from among the dextrous and ingenious of every walk of life—craftsmen, physicians, engineers, and ministers—all attracted by the challenges and the opportunities of dentistry. These opportunities were made possible by an atmosphere of freedom—a freedom which included the right to develop independently of the backward medicine of the 1830's.

To historians it is obvious that the art of dentistry in America has developed far more rapidly than its science. A half century ago, the address of the English physician, William Hunter, before the Faculty of Medicine of McGill University, rudely awakened the dental profession to the gulf which separated its mechanical procedures from the scientific knowledge of the day. In the history of all scientific professions, it is necessary to close such breeches from time to time. Should it not then be the responsibility of the historian of dentistry to bring to the attention of his profession the gap between practice and science whenever it becomes evident?

Sigerist speaks of the historian of medicine as a “physician, trained

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2 Hunter, W.: An Address on the Role of Sepsis and of Antiseptics in Medicine, The Lancet, 1:82, 1911.
in the research methods of history, who takes an active part in the life of his time and is in close touch with the medical problems of his time. He is never a narrow specialist who perceives only limited aspects of medicine, but he tries to see medicine as a whole, not only from the point of view of the medical profession, but of society as well."

The lives and work of the first and second presidents of our academy, J. Ben Robinson and Arthur H. Merritt, are perhaps the most eloquent proof of the fact that Sigerist's definition also applies to historians of dentistry.

In 1910, William Hunter stressed the lag between dental practice and the science of bacteriology. Today, the lag is between dental practice and the science of physiology. In William Hunter's day the disparity became evident as a result of unhygienic fixed bridgework and the widespread devitalization of teeth. Today the most dramatic example of a similar disparity is the growing practice of radical restorative procedures known by various euphonious names. The ability of the dentist to perform extensive restorative procedures, resting as it does on the basic contributions of Taggart and Land, represents the quintessence of the dental art. These procedures have won an important place in dental practice and their value, in the hands of a skilful practitioner of sound judgment, cannot be questioned. However, the growing trend to utilize radical restorative procedures for the avowed purpose of preventing periodontal and temporomandibular joint disease is alarming. Equally disturbing is the popularity of various mechanical and mathematical hypotheses, usually in scientific garb, which hold out individual systems of restorative procedures as panaceas.

In 1803, concerning the cause of dental caries, William Fox wrote, "This delightful secret, although it is pretended to in the advertisements of every quack, we can only expect to acquire when the philosopher's stone and the grand panacea have been obtained." Yet two and a half centuries later, fluoridation holds out much hope for the control of dental caries.

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8 See Footnote 6.
John Hunter, the teacher of Fox, provided a physiological approach to the study of occlusion over 150 years ago. The many formidable technical problems in dentistry delayed the advent of a physiological era until the present time.

Progress cannot be hurried, and usually demands a price. Osler stated that if a monument were to be erected to honor modern surgery, it should be made up of the many organs which were unnecessarily removed, but which developed the surgical technics of today.

In dentistry, we had to pay for our bacteriological era with the wholesale extraction of teeth which followed the wide acceptance of the theory of focal infection. We owe our present interest in the rest position of the mandible to the excesses of the bite raising of a generation ago!

As historians, it is our responsibility to try to keep the cost of the physiological era, upon which we are embarking, as low as we possibly can. We should stress an important lesson of history—that inherent in the refining of technic is always the danger of a period of too enthusiastic and widespread application. With the perfecting of restorative dentistry, the danger concerns the practice of altering occlusion.

Changes in occlusion by restorative means are, as a rule, traumatic, irreversible, and costly. Results are unpredictable because of the physiological and psychological differences in the patients who must adapt to these changes. Understanding the history of dentistry can help the practitioner see that until such time as more physiological knowledge concerning occlusion is available, it may be wise to proceed cautiously and to place reliance upon procedures tested by clinical experience and time.

Panaceas have had, and always will have, a seductive appeal. A dependable safeguard is a knowledge of the past. A dentist who knows that Hayden made dentistry independent, Wells made it painless, Land made it cosmetic, and G. V. Black made it scientific, will be resistant to current ephemeral fashions in occlusion. It has been said that those who do not know history are destined to repeat it. The dental historian can do much to help the dental profession minimize such repetition.
Pioneer Oral Surgeons in America

MANUAL M. MASLANSKY, D.D.S.
White Plains, N. Y.

It is not in the history of the Church or of the State or of Art, but in the history of Medicine and its close kin Dentistry that we find the trends of human progress. The history of the other sciences does not touch near enough to the development of the humanities to be of value as a key to human progress. The practice of the healing arts lies close to the hearts and the homes of the people.

In the history of healing we strike every note that the progress of a race ever sounded. From the mellow sound of the teaching of the Hippocratic period to the shrill cry of distress of the Middle Ages, when the hand of bigotry smote progress; from the Harveun period to the present time, we may read in the history of medicine the history of the rise and fall of prejudice and the always upward race of man toward better things.

The histories of medicine and dentistry for nearly 18 centuries have been inexorably combined. These two sciences branched from the same main root and were always nurtured in the same soil. At times they grew at divergent angles only later to appear entwined.

It is hoped that in this segment of the history of dentistry—"Pioneer Oral Surgeons in America"—we not only affirm the true identity of these pioneers and honor them accordingly but also re-evaluate their problems and their solutions of those problems. Perhaps, too, we can understand their aspirations and vision in the light of the present day.

The specialty of oral surgery is an indigenous American contribution to civilization. It sprang into real being about 1840 and it is in order to give a brief historical background. Although in early Colonial times, we learn of James Reading, John Mills, Robert Woffendahl, Le Meyeur, John Greenvale, Horace Hayden, and Chapin Harris, 1840 may be marked as the year of the advent of oral surgery as a specialty. These men of the Colonial period were excellent operators, stemming from the French school, and undoubtedly adept in the removal of teeth and the treatment of oral conditions. (Their
handbills attested to their skill! They perhaps laid the foundation, but it was Simon P. Hullihen who emerged as the first practising oral surgeon of record in the United States. How did the phenomenon occur? It certainly was not spontaneous with Hullihen for the practice of medicine was all embracing at this time. But he wanted to know not only something about everything connected with the body, but he wanted to know more than was known about some special part of it, that part being the face, mouth and the associated organs and structures. Hullihen was driven perhaps to this activity by the attitude expressed by the average physician of that day, who did not particularly desire to treat diseases of the teeth, jaws and face. As a rule, the patient so afflicted rarely died of these ailments, thus the drama was not there. True likewise, if the patients were treated, there were many resultant deformities of the face, thus opening the treating physician to criticism. Last and most important, was that the average physician did not possess the digital dexterity, the skill and the ingenuity to perform many of these procedures. The dentist invariably did possess these mechanical skills and was therefore better suited to oral surgery. Oral surgery arose not through any spirit of rebellion, but from sheer necessity, due to the apathy and disinterest in oral conditions on the part of the medical profession.

Before 1840, the dentist was self taught, since there were no schools or colleges where he could learn even the rudiments of his profession. There were but few worthwhile textbooks available upon the subjects and papers dealing with discoveries abroad were rare and hard to come by. The young man such as Hullihen, who aspired to become a dentist, found there were but two courses open to him. He could begin at once to practice and by the trial and error method, perfect his skill; or he could serve as an apprentice to some man with an established practice. Hullihen, a farmer's son, apparently did not have the money (many times as much as a thousand dollars) to pay a preceptor so he adopted the first course. His background in medicine was very limited. One year at school at the most, with instructors who were unqualified to teach—constituted his training, but he received his M.D. degree. His innate ability and extraordinary dexterity soon established him in the Ohio Valley as an oral surgeon of note. His scientific papers started to appear in 1840 with his treatise on odontalgia, and at least one paper a year appeared until his death in 1857. Though untutored by our standards, this great man, within
the short span of his professional career of less than 25 years, was able to write more than 20 articles; invent at least six important and ingenious surgical instruments; operate on at least 200 antrum cases; over 90 cleft lip cases; between 50-60 cleft palates. He did more than a hundred operations of cancer of the face and mouth, more than 80 operations of plastic nature to restore nose, lip and the mandible and did an astonishing number of surgical operations of general nature. He was devoted to his work and entered into spirited controversy with those medical men about him who could not or would not see his specialty in its real light. But when he died in 1857, his death was marked by eulogies in many of the medical and dental journals. What this country lad left could never be extinguished or destroyed for men like James Edwin Garretson, the second of the great pioneer oral surgeons, appeared a few years later to continue the work started by Hullihen.

James Edwin Garretson was born in 1828 in Wilmington, Delaware. He received his medical degree from the University of Pennsylvania. Garretson, in contrast to Hullihen, was educated, a great orator, had a magnetic personality and had a formidable knowledge of anatomy and pathology. He, too, soon designated himself as an oral surgeon, but unlike Hullihen, unfortunately, considered dentistry in a meager light—and perhaps justifiably. For at that time, there were more than 11,000 dentists who had no training whatsoever and whose social status was therefore far inferior to that of the physician. These untrained dentists were generally looked upon with disdain by the medical profession of the time.

In 1870 Garretson further entrenched his specialty when he was appointed lecturer of oral surgery at the University of Pennsylvania. Garretson held strongly to his view that the new specialty of oral surgery encompassed all of dentistry. His book illustrates well this belief. More than half of the book was devoted to filling, restoring and replacing teeth. The other half was devoted to surgery of the face, jaws and the oral cavity. He maintained stoutly that the oral surgeon's training should be, primarily, that of the physician, not of the dentist, and in 1881 he advised that the one degree in medicine was enough and wished to abolish the D.D.S. He maintained that the greater degree covers the lesser and includes it. And by 1881 the controversy had grown to such proportions that at the instigation of Garretson and others like Brophy and Goodwillie, an oral surgery
section of the A.M.A. was established. This was a recognition of the claims of oral surgeons holding medical degrees to a position of specialists of medicine but not of dentistry. Yet the status and integrity of the oral surgeon of the time was not impaired by these moves. The specialty was established by those hardy souls who felt that oral surgery was dentistry and saw also that dentistry was not oral surgery.

Though the controversy raged, men of dental training continued to emerge upon the horizon as oral surgeons. Two startling examples of such men are Dr. James Baxter Bean, dental surgeon in the Confederate Army and Dr. Thomas Bryan Gunning of the North. These two gentlemen, practicing dentists, were particularly skilled in the treatment of jaw fractures. Gunning's method of treatment became widely known when he was called upon to treat William B. Seward, Secretary of State under Lincoln. Mr. Seward had suffered a fracture of the jaw just four days before the Civil War ended. On the day of Lincoln's Assassination, Seward's condition was aggravated when he too was attacked by an assassin who slashed his face, thus complicating the fracture. Gunning's interdental vulcanite splint effected in time an uneventful recovery for Mr. Seward. Gunning's method of interdental splint is being used to this day, with variations.

But the chain of great men did not stop with Garretson. Truman W. Brophy, a student of Garretson, continued in his teacher's path and became one of the greatest oral surgeons of the late 19th century. Mathew Cryer, also a student of the master Garretson, will ever be known as a great anatomist of the head and neck. Thomas Gilmer contributed immeasurably to the knowledge of the treatment of fractures, particularly in the use of interdental wiring. John S. Marshall, who was a student of Amos Wescott, wrote the second great treatise on oral surgery and will long be remembered as the father of the Army Dental Corp. He was the first Senior Dental Surgeon in the United States Army.

Two other names must be mentioned to complete the great six. Thomas Fillebrown, who greatly improved anesthetic methods and devised ingenious approaches in cleft palate surgery, and George V. Brown who is remembered for his numerous contributions to oral surgery literature, particularly in the plastic procedures.

We have created a disquieting picture of the state of oral surgery from its advent in 1840 to the beginning of the 20th century. But with the passage of time, many of the differences seem to have re-
solved themselves—or perhaps they only suspended themselves, for today the entire problem has been re-awakened and presents a more ominous picture than that of 70 years ago. Within the last six months, the A.M.A. through its Joint Council, a constituted body whose functions include that of accreditation of hospitals, has issued a directive to all hospitals under its jurisdiction—which virtually implies every hospital in the United States. This directive states that henceforth all dental and oral surgical procedures performed in a hospital shall be under the jurisdiction, control and responsibility of the general surgeon in charge. With one fell swoop, this act has subordinated dentistry and oral surgery, its specialty, to an odious secondary position. This was accomplished without the knowledge of the A.D.A. This tendency to place dentistry and oral surgery in a subordinate position is further manifested in the efforts being made by medical groups in several states to legislate action to prohibit the dental profession from administering a general anesthetic in their offices. This has not taken place as yet anywhere, but talk and clever maneuver on this matter are to be heard and seen in many places. Thus it may be said that the basic problem concerning the specialty of oral surgery is still unsolved and is the same as it was in Garretson’s time. But today the situation of dentistry is certainly different. Where 100 years ago dentistry lacked stature because of its educational shortcomings, today the education of a dental student is equal to that of the medical student in years spent at pre-professional and professional school. Most dental schools today are University affiliated. The basic sciences are presented jointly to the medical and dental students, as a rule. In many instances the dental student receives added hours in anatomy, stressing head and neck, and in pathology, stressing oral pathology. Rigorous National and State Board exams in all branches of dentistry are more than comparable to the examination given to medical graduates. The dental examinee is required to take practical examinations to prove his skill, while his medical counterpart just takes the written examination. With the establishment of the American Board of Oral Surgery there exists today a situation which requires a graduate dentist who wishes to enter this specialty, a year’s general internship, at least one year of postgraduate work in basic science taken in a University and one year's residency in oral surgery at an accredited hospital. Having completed this the applicant is then required to present 15 case his-
tories of major oral surgery operations which he has performed. Then only is he permitted to be subjected to a most searching and thorough examination by a board composed of outstanding oral surgeons. So it is readily seen that oral surgery today is in a vastly different situation than in the day of the pioneer oral surgeon and has every reason to hold its head high and speak on equal terms to the medical profession.

The problem before the professions will never be solved by litigation or acrimonious controversy. Its solution will be predicated on how the public will be served best. And in understanding the history of the rise of oral surgery we must revere the past in order to build the future!
Vincenzo Guerini: Dean of Italian Historians

LUIGI CASOTTI

Milan, Italy

The interest for historical studies of dentistry, which in the past has had few followers and readers, is today felt by many dentists. At the beginning of the last century Delabarre, Aubriban, Maury, Schange and Rogers writing chapters on dental surgery and therapy gave a partial story, but it was only toward the end of the century that dentists dealt with this theme more completely and among them we mention Lemerle, Cigrand, Irvin, Geist-Jacobi, the historian Sudhoff and others. Among the most enthusiastic and authoritative from the beginning of this century is Guerini.

Vincenzo Guerini has been appointed Doctor of Dental Surgery "honoris causa" by the dental faculties of many universities in the United States. The Dean of Italian dentists has the particular distinction of having taken part, from 1888 onwards, in all American and European dental meetings thus upholding the name of Italy. Among his many appointments, honorary and otherwise, are: Vice-President of the International Odontological Federation, Honorary President of the Federation Dentaire Internationale, which he, together with Godon and Augilar, founded, of the National Dental Association, of the British Odontological Society, and of the Italian Dental Federation. Guerini's historical collections whenever displayed have raised great interest and deep admiration and some pieces are shown at the dental school of Paris, at the Leipsig University, at the Eastman Dental Institute of Rome and in various American dental schools. A Guerini bronze head has been placed at the Northwestern University Dental School among the international celebrities of dental science. How proud he is to have received an honorary membership in your American Academy of the History of Dentistry, in November 1953. His main work, "A History of Dentistry," printed in the English language at Philadelphia in 1909, on behalf of the National Dental Association, is still used as a textbook.

1 This paper was read by Dr. Milton B. Asbell, Camden, N. J.

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in many American dental schools. We report now a passage from one of his works "The Life and Works of Guiseppangelo Fonzi." History registers many cases of authors of conspicuous works of the greatest usefulness to humanity who die without having attained the fame or reward to which their efforts entitle them. Often a long period of time elapses before posterity renders justice and honor to the merits of these workers. The case best known to the dental world is no doubt, that of Horace Wells, the unfortunate inventor of surgical anesthesia. Another is that of Guiseppangelo Fonzi, of whose life and works this little text deals. In the history of modern dental prosthesis Fonzi has the same honorable place as Gutenberg in the history of printing. He has the principal merit of the invention of mineral teeth in the modern significance of this term, for it was he who evolved the single mineral tooth fixable upon bases. Several examples of Fonzi's handiwork are still existent, the best teeth among them in no way inferior to those of present day manufacture. Dentists will find the life story of this 18th Century dentist most absorbing and of infinite interest.

Guerini has been for 20 years the Director of the Journal "L'Odonto-Stomatologia" printed in Naples. During World War I he devised various apparatus for soldiers mutilated in the face and maxillary bones and was invited to give demonstrations of his technique at the principal military hospitals of Paris and Marseilles. From a now rare article entitled "About Dental Authors and Their Works" which was read in the Fourth International Dental Congress held in St. Louis in 1904, I pick out some claims on the part of Guerini concerning original Italian studies which had been acquired in other countries as their own, and of course under different names; Giovanni d'Arcoli plagiarized by the German Ryff, Eustachius by Hemard and particularly "Life and Works of Guiseppangelo Fonzi" a citizen of Southern Italy, inventor of the isolated mineral teeth, was considered French. My historical note is in accordance with the thought of Guerini so that these remarks must be exposed under Guerini's name.

Giovanni d'Arcoli (1450-1524) in his volume "Medical Practice" (1493) dealing with dental fillings states that in choosing the material one must keep into account the individual temperament, the gum condition and finally the tooth condition. What is of particular significance to dental historians of today is to point out that Gio-
Vincenzo Guerini advises the use in some cases of golden leaves as filling material and so the use of gold foil for dental fillings is ascertained as far back as 1493, when Giovanni d'Arcoli wrote his book. We must, however, stress that this author does not refer to it as a novelty introduced by himself but gives just a hint of it without a word about its technique. It is therefore to be assumed that gold fillings had been practiced before that time and that he has just recalled what was ordinary practice of the dentists of his time. The book is also remarkable for in it is mentioned for the first time the so-called "Pelican" which remained long in use going through a great number of modifications finally originating the Frate cosimo key, the Garengeot key and the English key. There is moreover another fact that increases the importance of Arcoli's work to the history of dentistry. About a century after the time of his book, a German surgeon, Walter Ryff (who died in 1570) published a work in which for the first time an author writes about dental diseases and how they can be treated regardless of general medicine and surgery. Ryff is therefore looked upon as the forerunner of real dental literature. However, Guerini has found out that all the remarkable points in the book by Ryff had been translated literally from the work of the Italian Giovanni d'Arcoli, written a century before.

A famous anatomist of the 16th Century is Bartholomeus Eustachius who made many tedious and accurate studies on the teeth and their development, publishing in 1563 a work "Libellus De Denti-bus" which marks an important milestone in the anatomy, physiology and embryology of the dental system. The originality of Eustachius' studies led a French surgeon to plagiarize him and it was only Guerini who several centuries later, made the discovery. The name of Urbane Hemard reached a certain celebrity as the author of the first dental monograph to appear in French at Lyon dated 1582, that is 20 years after Eustachius' work mentioned above. A comparison between this monograph and the work of Eustachius shows that Hemard instead of carrying out personal researches on tooth anatomy, did nothing else but make a literal translation of the most interesting parts of the Italian book. This fact, similar to that referred to above in the work of d'Arcoli and Ryff, shows in how high consideration Italian authors were held throughout Europe and proves their influence during the first stages of the development of dental science.
Guerini ends his essay by referring to other Italian dentists who won great reputations abroad. One of these is Bartolomeo Ruspini who practiced successfully for 30 years as a dentist in London, counting among his patients the most important personalities and including the royal family. His position became so outstanding that he was able to found an orphanage which was named after him. It was his great love for children that caused him to do so, for their dental diseases and disorders had always been the object of his most careful study. In 1768 he published in the English language a “Handbook on Teeth, Their Structure and Their Maladies,” reprinted as late as 1797. Ruspini is also to be remembered as the inventor of the little mirror for tooth examination (1768).

Another Italian, Ricci, acquired great celebrity in Paris during the end of the 18th and beginning of the 19th Century. He brought about remarkable improvements in the technique of pivot teeth and the construction of tooth sets and other phases of dental technique. Of his several works, the most important “Principles d’Odontotechnique,” appeared in 1790. The Italian dentist, Maggiolo, with the cooperation of the French physician Jourdain, published in 1807 at Nancy, a valuable work “Manuel de L’Art du Dentiste,” written for the most part by Maggiolo and devoted almost entirely to dental prosthesis, a subject not yet dealt with in detail. Guerini proved to be objective and sympathetic as concerns the invention of artificial teeth. In fact, he claims that among the Italian dentists who worked as dentists abroad, the one who deserves the highest position in the history of dentistry is Fonzi for the important role he played in the invention of mineral teeth, generally attributed to Dubois de Chemant, while others supported the chemist named Duchateau. Finally it was acknowledged that the inventor of mineral porcelain teeth was the Italian dentist Guiseppangelo Fonzi (1768-1840), while Duchateau and Dubois de Chemant were only his forerunners. To be honest we must add that the merit of this invention cannot be ascribed to only one of these men, but it is to be shared by all three. In fact, Duchateau was undoubtedly the first one who put into practice such an idea but his prosthesis were formed by a single block of porcelain representing at the same time teeth and gums, finally, on the other hand, Fonzi was the first to project a technique of an individual single tooth which was to be connected one by one to a metallic base. While de Chemant fabricated only pieces which
could be used by a few persons, Fonzi manufactured the highest range of mineral teeth by which dentures for anyone could be assembled. Moreover he was able to imitate tooth transparency in order to harmonize with natural tooth color.

Guerini believes that Italy, on the facts presented above, has largely contributed to the development of the art and science of dentistry, and to prove it three names would be sufficient; Giovanni d'Arcoli, the first author who tells us about gold fillings, Eustachius, who wrote for the first time about dental anatomy, and Fonzi, who first manufactured individual mineral teeth to be mounted on metallic bases. I end these notes by reminding you that the 94-year-old Guerini, who has been suffering from blindness for many years still has a clear mind and unfaltering memory whenever he recalls together with friends old and new his many scientific and historical activities.
As we walk across Biscayne Boulevard, ducking taxicabs and tourists, it is hard to visualize Miami when it was an infant of six months. But there was a dentist here in those days—he had trouble finding one solvent patient a day. Consequently the dentist was insolvent also. This interesting insight into the practice of dentistry in this southern frontier comes from Dr. C. D. Driscoll, now retired and living in Bradenton where he centered his lifetime practice in Florida.

Dr. C. D. Driscoll has written me a wealth of fascinating information about his early experiences in dentistry in Florida—including a trip to Miami to visit the aforementioned insolvent dentist in 1895 and we can well regard him as a pioneer.

But there was a Dr. Driscoll, dentist, who preceded him, a man who gained wide fame for his skill and fortitude. A man who extracted or filled the teeth of what we can call the genuine early settlers of Florida. This was the late Dr. W. E. Driscoll, father of C. D. Dr. W. E. Driscoll died in 1926 at the age of 86. He had moved to Bradenton when he was 42, broken in health and totally deaf. He had been a successful dentist in Indiana and had come to the Florida Gulf Coast in 1881. Three years later, with his health shattered, he brought his family to Bradenton with the idea of raising oranges.

Knowing there were no dentists other than himself in Florida north of Key West at the time, he brought along enough instruments to take care of his family’s teeth.

Surprisingly his health rapidly improved, and the public demanded that he use his skill as a dentist for relief of their suffering. Dr. Driscoll had never heard of antibiotics, hydrocolloid, diamond instruments or even the high speed technique. So far as I can determine, he didn’t even have a dental chair—at least for much of his work, for he was like the circuit-riding preachers of the day. He

* Arranged in part, and read by Dr. Robert Thoburn, Daytona Beach, Fla.

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hitched up a mule and went to his patients in what he called a "Light Florida wagon."

I have an exact itinerary of his route as given by his son, who says: "We worked Manatee, Bradenton, Palma Sola, Ellenton, Parrish, Tampa, St. Petersburg, Lakeland, Ft. Meade, Bowling Green, Wauchula, Zolfo Springs, Arcadia, Nocatee, Ft. Ogden, Cleveland, Punta Gorda, Charlotte Harbor, Ft. Myers, Punta Rassa, Sanibel Island, St. James City, Naples, Marco, Everglades, Chokoloskee, Pine Level, Miakka and Sarasota."

As you can see by the map, some of this territory had to be reached by boat, and none of it was accessible by anything better than what we would call a backwoods trail today.

The son, Dr. C. D. Driscoll, became a dentist when he was nineteen with a diploma from Indiana College and a temporary Florida license which was destroyed in a Jacksonville fire in 1894.

Writes Dr. C. D.: "I can well remember our little mule and farm wagon which we used for transportation. I remember hazardous journeys by boat, sometimes capsizing and losing our entire outfit, instruments and all. I remember fording swollen streams with alligators swimming about us. I traveled with Father both before and after graduation and know personally of his hardships and the difficulties under which he worked, using hand drills (no engine whatever), no right angle hand pieces or other such instruments, yet with all his handicaps you find his handiwork to this day."

One morning on the way to my office, a boat going through the drawbridge made me five minutes late. I thought of my patients whom I was keeping waiting, but I also thought of a story Dr. Driscoll wrote me about a time when he didn't get to his patients all day long. He was practicing with his father, who directed him to go to Miakka to care for some patients while the father went to Ft. Myers. Here is Dr. Driscoll's story:

"I was driving a three year old mule and a lightweight Florida wagon. Dad went South and I headed toward Miakka, stopping overnight at Henry Lockleer's woods home. He carried the Manatee-Pine Level U. S. mail.

"I arose early the next morning, got directions and left ahead of Lockleer, planning to meet him at the old Miakka Post Office.

"I strayed from the regular road to take a short cut, and coming to a fork of the Miakka River where tall timber and underbrush
crowded both sides of the road, the little mule stopped and snorted.

"I walked to the water's edge and I saw so many alligators there that it seemed I could have walked across the river on their backs if they would just stay quiet.

"However, I scared them off and they ended their sun bath when I forced my little mule into the water. 'Gators were on all sides, but the trail was so narrow that I could not turn the wagon around, so we had to go across.

"As the mule entered the water, she sank so only her head was showing. She struggled and kept going until she made footing on the opposite bank. The wheels and axles sank to the bottom and the bed started floating downstream. I dropped the reins and the mule pulled the running gear ashore with her while I floated along in the wagon bed with 'gators still around me everywhere.

"Finally with a rope I made the wagon bed fast to shore, captured the mule, and with a makeshift singletree, I hitched the mule to the wagon bed. She was barely able to drag it to high ground.

"Eventually we got the running gear and wagon bed side by side. With some pine poles I managed to find, I fashioned skids and the mule pulled the bed atop the axles.

"By the time I got to the Miakka Post Office, the mail carrier had come and gone. I had time only to dry my instruments. The patients had to wait until I could come back again, for I had to turn around to start the 27 mile return journey—without short cuts!

"Another trip I remember well was when Father wrote me to come for him and help him at Pine Level which then was the County seat. I left Manatee at daylight, driving a big sorrel horse named Jim, hitched to a wagon. It was a 41 mile trip ahead of me. I drove all day, and near night one of those Florida evening blue-black clouds came over. Lightning flashed and it was so dark I could not distinguish the road, and boy, did it rain! I could not stop for I could see no farm house. The horse could see the road only by the lightning flashes and there was lots of water on the road—even to making ponds which were hard to cross.

"Finally I decided I had driven long enough, so I decided to stop and wait for daylight. The catamounts were celebrating my arrival. I unhitched the horse by crawling upon his back and rode him around to the back of the wagon. I gave him some hay, took the cushion from the old style spring seat of the wagon and tried to
sleep. The "cats" made so much wailing and the 'gators did so much grunting, that I couldn't sleep. I soon had enough of that. I took old Jim around the side of the wagon, straddled his back and started out to find somebody's house if possible. After riding 15 or 20 minutes I saw lights ahead. I rode to the front of the building and saw a stream of light at the edge of wood shutters. I rode up, peered in and saw my good old Dad in conversation with another man. Was I glad?!

But the pioneer days were far from gone when the younger Dr. Driscoll reached his prime.

One experience he is fond of relating tells about a trip he made to Miami to visit the aforementioned insolvent fellow-dentist. Here is the story in his own words:

"The year of 1895, or a few months earlier, the Florida East Coast Railroad had been completed to Miami. At that time Miami was just six months old. An old dentist located there whose name I do not recall, having seen lower anterior contour gold foil fillings that my father had made, wrote, asking if my father could come over to Miami and teach him to do such work. He said he would guarantee him $300 worth of work to pay his expenses over there and return. I, being on hand, and my father being very busy at the time, was told that I would go to Miami. I did not want to go; I had only $65 and was suspicious of a 'coon in the woodpile,' but being an obedient son, I did as my father bid.

"I traveled to Port Tampa the first day and there got aboard the steamer 'Mascott.' We reached Miami the third day out. I located the doctor, who was on the second floor of a frame building. Approaching the outside stairway at 8:30 A.M., I noticed the doctor's sign which was a home-made affair, printed, or rather smeared on a two foot square piece of red calico, lettered with plaster of paris. When the doctor answered my knock, I was surprised to see him half dressed. I introduced myself and he invited me in.

"Everything was in one big room; his two-burner kerosene oil stove, cot, laboratory, reception and operating room. He seemed pleased to have me on hand and said he would get his breakfast, clean things up a bit, and arrange for a patient that afternoon.

"I drifted off to meditate. I finally found a room, nicely furnished, in which to stay while there. It was just across the street from the doctor's quarters, so I returned to his office and he told me the pa-
tient would be there at 2:00 P.M. But the patient did not show up, and when I asked why, the doctor said: ‘Because of finances.’ However, he assured me that we would have a patient in the morning. This went on for several days until I gave up.

“I was working at night for one of the steamer boys while in port, but soon my cash was nearly exhausted and I realized I must go home. ‘I went down to the harbor and requested passage on a cruiser to Tampa, agreeing to sleep on the deck and offering to help the sailors, but the answer was: ‘NO!’

‘Drifting down the beach around the point, I contacted three Spaniards on a little schooner named the ‘Corsica,’ which was leaving that day for Chokoloskee on the West Coast. They consented to take me that far for $5. I had exactly $5.50. I spent the 50 cents for bananas which I slipped aboard, and then I was flat broke.

“The food aboard was horrible. Each morning the greasy Spaniards would cook soda biscuits and put them into a dirty pillow case to be eaten the next day. That was because the cookstove was on the upper deck, a safety measure—bad weather the next day could prevent biscuit-making.

“So each morning the old, dirty, dry soda biscuits were served with coffee and salted kingfish which had been caught the week before. My appetite, needless to say, was stunted. When we were out four days (by sail), we were blown ashore on a reef outside of Long Key. When the blow abated and the tide rose, we floated, but we had lost our water barrels.

“The next morning we went ashore for water. We came to a clapboard house and were met by three hound dogs. There were no windows at all in the building. A knock brought to the door a big Conch and back of him, through the doorway, I saw a small child sitting on a little box, screaming and holding its face in its hands. The wind was still strong and screeching around us, but I managed to ask the man what was the trouble and he said the child was nearly dead with a toothache. I said, ‘God works in a mysterious way his wonders to perform, I am a dentist.’

“I instructed him to send one of his boys out to the schooner for my instrument case and in a short time I relieved the child. The man offered to pay me, which was a temptation, but I told him that we had come ashore for water and if they would give us a barrel-full and fill the demijohns, that would pay the bill.
"He consented, and in addition to the water, gave us a dinghy load of cocoanuts, a silk sponge larger than my head twice, a wonderful pink conch shell, a half bushel of the rarest shells I ever saw. All that and tears when we left, thanking God for what they called a miracle.

"We battled the diminishing gale all day Sunday, that night and at Cape Sable next morning, arriving at Chokoloskee at noon. I went to the Post Office to look for mail and when I gave my name, the Postmaster asked if I were related to W. E. Driscoll. I acknowledged that he was my father, then the Postmaster asked if I would remove some teeth for his wife who was ill, due to advanced age. He said he and my father were the best of friends. I removed the teeth for $2.50 and went out to dinner which cost me 50 cents. I learned that I might catch a mail boat at Everglades for the North. It was five miles to Everglades. One of the Spaniards would take me over there in a small boat for $2. which I paid and again was broke.

"Arriving in Everglades, we found Mr. George Storter opening oysters on a little wharf. Mr. Storter was founder of the town of Everglades. I learned from him that a little schooner was leaving the next morning for Tampa. Mr. Storter, learning that I was the son of Dr. W. E. Driscoll, permitted me to stay all night, providing I would sleep in a room with 15 children gathered there from the islands and going to school. I slept with them and next morning a Northwest gale was blowing and the schooner could not leave.

"Learning that I could not leave right away, Mr. Storter asked me if I would make a gold filling in his front tooth. This I was glad to do and thus pay my food and lodging bill. He was pleased with the work and asked if I would do some dental work for his wife and children, which I did. Then his brother and his wife, and then most of the inhabitants of the surrounding islands came with more bad teeth.

"I stayed there three weeks working. I paid my bills and had some interesting experiences with the Seminole Indians. They made moc-casins and beaded belts for me.

"Arriving at Marco, I met Captain Collier, who was the Postmaster. When I asked for mail, he too, asked, 'Are you related to Dr. W. E. Driscoll?' Captain Collier told me there were letters for me going to Everglades, but he could not intercept them. He noticed my obvious distress and told me to go down to the beach and count
the shells. I asked no questions, but obeyed and presently he came and sat down on a sand dune beside me. When he arose to leave, I found beside me, the coveted letters. Later he asked if I would serve his porter who was intending to go to Key West on the next schooner for dental work. I told Captain Collier I would do anything except murder for him since he had favored me with the letters and he sent me to his new hotel with room and board free. At sun-up the next morning, the porter was there. I worked until eleven o'clock for him. Captain Collier gave me a check for $26 and said, 'Now if you will send your instruments into the kitchen and boil them and give my little girl some dental care, I will appreciate it.'

"The schooner left that afternoon at 3:00 o'clock, carrying U. S. mail and was due out, but Captain Collier held her over for an hour and a half to let me finish my work and pack up. He gave me $15 for the work I did on the girl's teeth and charged me no hotel bill.

"The schooner arrived at Punta Rassa next day at noon. I purposely missed Ft. Myers and went on to Sanibel Island where I worked two days and made $25.

"I was at work when I noticed a home schooner down the bay headed North. I quit work, flagged Captain Bishop's 'Janette' and he took me aboard for home. This was Friday afternoon. The captain, a Seventh-Day Adventist, anchored at Boca Grande for his Sabbath. We stayed there until Sunday morning and luckily, a threatening Northwester did not break out until an hour before we reached home.

"After having been flat broke, shipwrecked and tired, I was home again and $200 richer. Even with all the hardships I encountered on the memorable trip to Miami, I have always felt that it was worth thousands of dollars as an experience."

So much for Dr. Driscoll's trip to Miami. Doubtless your trip to Miami has been less strenuous—and you may not be $200 richer when you get home!
Early Charleston Dentistry

NEILL W. MACAULEY, D.D.S.¹
Columbia, S. C.

The history of Charleston from its beginning in 1670 has been one of violent upheavals, some caused by nature and others by the ravages of man-made wars. Each has left its distinct mark on the place and its people. While the colonists were still the guests of the Indian Kiawah, who was trying to convince them of the desirability of the location in 1670, a Spanish fleet came to attack. A violent hurricane which scattered the attacking ships, saved the group. These first settlers, however, claimed the glowing accounts given by the Indian caused them to decide to stay. They did move a little further from the ocean but within possibility of protection of the harbor.

The present site of the city determined in 1672, was first called Oyster Point. It was made the seat of Government in 1680 at which time its name was changed to New Charles Town, and in 1682 changed to Charlestown. After its incorporation in 1783 it was called Charleston. The first census taken in Charleston was in 1680 showing 270 names, evidently only the heads of households. By 1690 the foundations of flourishing cities had been laid at Boston, Philadelphia, New York, Newport and Charleston and there was constant traffic by sea between all of them.

Charleston has been laid waste by many disasters which have wiped out records of vital interest to the community and the historian. The earthquake and fire of 1698, followed by the hurricane of 1699 and the fire of 1740; occupation by British in 1780; the violence of the War for Southern Independence; and various other earthquakes, climaxed by that of 1886; have all but completely destroyed all records.

In spite of these “set-backs” the city of Charleston continued to grow. Bull² records its population in 1770 as 10,853; (5,030 whites

¹ Author of the History of the South Carolina State Dental Association.
EARLY CHARLESTON DENTISTRY

and 5,833 negroes). In that same year DeBrahm thought of it as the most wealthy and elegant city in the South and Josiah Quincy in 1773 placed it above every other American city. Built thick as a European town with numerous narrow lanes and alleys which were the breeding places of all the ancient vices, it also boasted of many beautiful palatial mansions belonging to the planter class.

This group consisted not only of planters but also of professional men (lawyers, physicians, clergymen, educators, writers) and some business men (merchants and bankers), many of whom became planters themselves or were allied with planter families. Many of the homes consisted of the central mansion surrounded by kitchen, carriage house, servants' houses and other utility buildings all placed in beautiful landscaped gardens and inclosed by a high wall. Those belonging to plantation owners were often used only a few months during the year as the owner would move his family and house servants for the winter social season and the "sickly" summer months. The flooded rice fields and swampy lands proved a breeding place for many fatal fevers. As Doctor Chalmers wrote in 1776... "The inhabitants in general, being more careful to acquire splendid fortunes than to preserve their health, build their houses near the rice-fields, or indigo-dams, where they must always keep stagnating water."

During their stay on the plantations and often in town, the mistress of the house filled the place of the physician and the dentist. She instructed a negress, carefully chosen for her intelligence, in the art of nursing and midwifery to be her assistant. This was almost an impossible task as the negroes were so strongly given to superstitions. To the lady's care was intrusted the medical chest with its herbs and drugs, bandages of soft old linens and cotton cloths, and simplest instruments. If a stronger hand was needed a man was pressed into service.

It was to meet such a need that J. Hume Simons, M.D., published

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“The Planter’s Guide and Family Book of Medicine” for instruction and use of planter’s families, country people, and all others who may be out of reach of doctors, or unable to employ them. Particular directions respecting Asiatic Cholera were written by a Charleston physician. Under the heading of Surgery is found “How to Pull a Tooth,” which I quote: “Take the instrument which is called the key instrument; fix the claw so that the bolster will always press on the gum inside the jaw, next to the tongue. Cut the gum close to and all around the tooth, down to the bone, with the gum lancet. Wrap a piece of rag around the bolster, so as not to bruise the gum. Let the patient sit down in a chair and throw his head back, and open his mouth wide. Now for the upper jaw stand behind him, for the lower, before him (as a general rule). When the bolster of the instrument touches the gum, put the claw over the tooth and let the sharp points pass in between the gum of the opposite side and the neck of the tooth. Try your instrument by turning the handle a little, to see if it is firmly fixed. If so, turn steadily, but not with too much force, always inward towards the tongue, the bolster kept steady on the gum, and the tooth will come out. If the tooth is a hard one to come, try another claw, but do not force.”

There was never any lack for physicians in Charleston. By 1718 there were twelve called “Doctor” after which physicians became numerous. The Medical Society of South Carolina was organized by Charleston physicians in 1780. Ramsay states in 1808 that every operation possible in Paris or London could be equally well performed in Charleston. In 1817 a law was passed requiring examination and licence for physicians and pharmacists. In December, 1823, the Medical Society established the Medical College of South Carolina, “they elected six professors, but declined to incur any expense.” This was made a state institution in 1833.

Joseph de Labeaume, a surgeon-dentist from Paris, announced in the South Carolina Gazette on December 5, 1774, that he “takes this method to inform the Public that he has just arrived in Charleston to settle and follow his business.” This newspaper was founded by James Franklin, the brother of Benjamin Franklin, and was being published at this time by its founder. This is the first record available of a full time dentist in Charleston, although other records may have

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1 Ibid., p. 204.
2 Ramsay, David: History of S. C., etc., 1670-1808; published, 1809.
been lost in disasters. There were many French Huguenots in Charleston at this time and this probably had much to do with de Labeaume coming to Charleston. Their first place of worship was built around 1681 in the city. The Crown of England had appointed Dr. Charles Fyffe, a loyal Royalist, as physician to the Refugees and his name was still listed as such in the Charleston Directory for 1782. This was the first known printing of a directory of any American city or town.

On March 30 and April 1, 1796 in the City Gazette, Charleston, appeared the following: “Mr. Tessie, Surgeon and Dentist, gives notice to his friends and the public in general, that he continues plugging and cleaning teeth, and setting false ones. Should also, any person want to buy OPIATE, to whiten teeth and keep them from decay, please call at his lodgings, No. 42 Queen Street.”

The Charleston City Gazette, October 22, 1796, contains the following notice: “Dr. Bessieres who has practiced his profession for a number of years in Europe, and for some time past in conjunction with M. Gardette, dentist, in Philadelphia, respectfully offers his service to the public in the several branches of the art of the Dentist.”

The low country planters of South Carolina were now making summer migrations to homes and resort hotels in Virginia and Newport, R.I., or on tours of the North and of Europe. Naturally they made contacts with people in all these places who in turn were desirous of visiting the South. Many dentists practiced their profession in different cities along the Atlantic seaboard, according to the season.

Doctor Henry O. Flagg was the first of the Flagg family to come to South Carolina. He served during the Revolution as surgeon on the Staff of General Greene’s Army assigned throughout the war to the First South Carolina Continentals. He was a native of Rhode Island, the son of a wealthy merchant. While serving in South Carolina he met and married the young widowed mother of Washington Allston, the celebrated artist, much against the wishes of the father of the bride who called the gallant doctor a “Yankee adventurer” and threatened to cut off his daughter’s inheritance. The young lady tossed her head and said, “I married the first time to please my family, now I marry to please myself.” As many others have done, however, Doctor Flagg remained in South Carolina and became an outstanding citizen.

He, no doubt, was responsible for Josiah Flagg’s coming to
Charleston in 1792, where he remained until the summer of 1795, when he returned to Boston to resume his practice there. Leaving Boston under something of a mystery, Flagg\(^\text{9}\) journeyed to his kinsman in Charleston, Henry Flagg, who, by this time, was a man of considerable influence.

Many times have I seen at Carolina dental meetings the original, worn, Flagg hand-bill of 1785, displayed by C. Bunting Colson, M.D., D.D.S. (1850-1942). Not only did Doctor Colson display proudly the hand-bill but would always point with considerable pride to the fact that his father had teeth filled by Josiah Flagg and that he was, while practicing in Charleston, an intimate friend of his forebears. Doctor Colson held the distinction of having practiced dentistry in the same office in Charleston for a period of 63 years. The hand-bill is as follows:

**Doctor Josiah Flagg,**

Respectfully acquaints the Ladies and Gentlemen of this town, that he continues his practice as Surgeon Dentist. Dr. Flagg transplants teeth; cures ulcers and eases them from pain without drawing; fastens those that are loose; mends teeth with foil of gold, to be as lasting and useful as the sound teeth, and without pain in the operation; Makes artificial teeth, and secures them in an independent, lasting and serviceable manner. Sews up Hare lips and fixes gold roofs and palates, greatly assisting the pronunciation and the swallow.

Regulates children’s teeth from their first cutting, to prevent fits and fevers; and extends the jaw with ease to receive their due proportion, should they be inclined to irregularity.

Extracts teeth, roots, and stumps that have been despairsed of, with so little pain to the patient, that no one can want confidence after once submitting to a trial; cuts the defect from teeth and restores them to whiteness and soundness, without saws, files, acids and such abusives, as have shamefully crept into the profession, and which have destroyed the confidence of the Public.

From the experience and success which Dr. Flagg has had in the several branches of his profession above enumerated, he takes the liberty to assert (and he hopes without arrogance) that his skill is superior to that of any competitor, who has yet appeared in this Country, and appeals to the respectable and liberal Medical Gentlemen for the support of this declaration. He therefore hopes still to preserve the confidence and patronage of the public, as his practice has been uniformly guaranteed by the Faculty.

Sells by wholesale and retail, Dentifrices, Tinctures, Chewsticks, Masticks, Teeth and Gum Brushes suitable for every age, complaint and climate, with directions for their use.

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From the above it is seen that Doctor Flagg was well aware of his abilities, although he did not over-estimate his skill in the art and science of dentistry of the day. He was a well qualified dentist and possessed abilities far above the average for his time. His ingenious talent both in the field of appliances and surgery, aided him in suturing cleft lips and in placing palatal appliances which we recognize today as obturators. In addition, his technic for relieving a dead pulp was to cut into the pulp cavity, this was termed pulp tapping. He was also a pioneer in orthodontics and was far ahead of the practitioners of his day in stressing the importance of oral hygiene and proper diet in the development of the teeth. He also understood the importance of cooperation between physician and dentist, so much so that he invited his patients to bring their physician with them when they reported for dental treatment.

Of Flagg's early life little is known. It has been established that his father was Lt. Col. Josiah Flagg of the Continental Army and that he was baptized July 24, 1763. At the early age of fifteen he served as a soldier in the American Revolution. It is believed that he first became interested in dentistry through Paul Revere, who was an intimate friend and business associate of Josiah Flagg, Sr., and the engraver of the first musical work published by Mr. Flagg. Possibly young Flagg received his dental instruction from Paul Revere or from Jacques Gardette (1756-1831), a French surgeon who was also a trained dentist serving with the American forces. His first dental practice was that of an itinerant in the smaller towns of Massachusetts and Rhode Island. In 1790 he settled in Boston.

Josiah Flagg, Jr., married Hannah Collins, by whom he was the father of Josiah Foster Flagg (1789-1853), who achieved distinction as a leading dentist of his generation and who was one of the exponents of establishing schools of dentistry in medical schools of that day. After the death of his first wife and his first visit to South Carolina Josiah married his second wife, Eliza Brewster, who was "a descendant of the sixth generation in direct descent from Elder William Brewster of the Mayflower." By this second wife Doctor Flagg was the father of Dr. John Foster Brewster Flagg (1802-1872) and the grandfather of Dr. Josiah Foster Flagg (1828-1903).

With the outbreak of the War of 1812, Josiah Flagg enlisted in the Navy of the United States. His service was of short duration, however, because shortly after his enlistment his ship was captured
and he was sent to England as a prisoner of war. From 1813 to 1815 while on parole, he practiced his profession in London, taking advantage of every opportunity to improve his knowledge and technic. He attended lectures by Joseph Fox and Sir Ashley Cooper. It was during a lecture by the latter at Guy's Hospital that Doctor Flagg was asked if he would extract a bicuspid which Sir Ashley had been unable to remove. The American dentist bowed to the teacher and class and taking his favorite instrument, a graver such as jewelers use in engraving, from his pocket, he inserted it between the root and alveolus so skillfully that the root flew from its socket half across the room. The astonished Professor Cooper exclaimed, "Gentlemen, that was a marvelous feat, a most marvelous feat." American dentistry had made its first demonstration abroad!

At the close of the war Doctor Flagg obtained his release from the British and returned to his homeland, but within sight of New York harbor his ship was wrecked, and he suffered severely from exposure. Hoping that the warmer climate would be advantageous for his health he, soon after his arrival in Boston, set out again for Charleston. He had practiced only about six months in Charleston when he contracted yellow fever and died September 30, 1816. He was buried in the Circular Congregational Churchyard. It is fitting that Charleston, the city of "firsts" should be the final resting place of this, the first native-born American to make dentistry his life's work and the first to carry to any foreign land evidence of American dental progress. A monument was erected to his memory by the South Carolina Dental Association and the city of Charleston on June 17, 1953. Very close by the Flagg Monument is the tomb of Robert Tradds, "the first male child born in Charleston, who died on the 30th of March 1731, in the 52nd year of his life."

Another kinsman of Josiah Flagg, a dentist of Charleston, Samuel H. Flagg, published the following notice in several editions of the Charleston City Gazette during 1796:

**Samuel H. Flagg**

Dentist

Informs the Ladies and Gentlemen of Charleston, and his friends in particular, that he continues to practice in the various arts of his profession, viz. CLEANING, EXTRACTION, AND SETTING ARTIFICIAL TEETH, removing all scurvy complaints in the gums, etc. He may be seen at Mr. Alexander Jones's in Church Street where he resides at present.
A directory for the District of Charleston in 1809 lists the names of five dentists. The Charleston Directory for the year 1831, when the city had achieved a population of 30,289, lists eight dentists, among whom appears one J. L. O’Wen, Dentist and Dry Goods! Of these, however, Dr. C. Starr Brewster is the only one of note. He was a kinsman of the second Mrs. Josiah Flagg, and was endowed with culture, dignity, and a profound knowledge of his chosen profession. He attended lectures at the Medical College and in this way met Benjamin A. Rodrigues who became his most apt protegé.

Young Rodrigues was one of the first physicians to be graduated from the Medical College of South Carolina. However, his interests had been turned to dentistry, and after receiving his medical degree he served an apprenticeship under Doctor Brewster in Charleston. Then Doctor Brewster moved to Paris, France, in the first step towards attaining an international reputation in dentistry. He developed a warm personal friendship with Napoleon III and Empress Eugenia. Doctor Rodrigues succeeded to the practice of Dr. Brewster in Charleston. Soon, because of his skill and personality, Doctor Rodrigues became one of the foremost dentists of the South and his fame spread into other parts of the country. He was an active member of the American Society of Dental Surgeons from the time of its organization, and vice-president of its successor, the American Dental Convention. The Baltimore College of Dental Surgery conferred the honorary D.D.S. degree upon him in 1850. A statement sent by him to a Mr. Cain in 1851 follows:

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<th>Description</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Feb. 7</td>
<td>6 extractions for lady</td>
<td>$ 6.00</td>
</tr>
<tr>
<td>July 28</td>
<td>1</td>
<td>1.00</td>
</tr>
<tr>
<td>Sept. 11</td>
<td>1 Upr. suction gum teeth</td>
<td>125.00</td>
</tr>
<tr>
<td></td>
<td>19 extraction for daughter</td>
<td>1.00</td>
</tr>
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$135.00

Rec. Payment Oct. 10, 1851 B. A. Rodrigues M.D. Dentist

He contributed quite extensively to the literature of the profession, as well as being a much sought-after clinician before various dental organizations. He died in 1871.

His grandson, Dr. Rodrigues Ottolengui, who was born in Charleston March 15, 1861, carried on with the desire and determination to practice dentistry as a heritage from his venerable grandfather. He took an active part in practically every phase of dental activity, after
his apprenticeship under the famed and revered Norman W. Kingsley of New York, whose assistant and associate he later became. His editorship of the Dental Items of Interest and the subsequent publication of “Table Talks on Dentistry” will keep his influence alive for generations yet to come.

Another dentist of Charleston, Dr. L. W. Houston had an enviable reputation abroad. He began the practice of dentistry in Charleston in 1834. Because of his special skill in swaged gold dentures his reputation spread abroad and he was called upon by many of the Royal families of Europe. However, even more important to American dentistry was his influence which introduced the Patrick family of Charleston to the dental profession. Doctor Houston discovered young J. B. Patrick working in a machine shop and immediately recognized his superior mechanical abilities. The young man apprenticed himself to Doctor Houston, later entering into partnership, and finally taking over his practice when Houston sailed for Europe. Doctor Patrick was the first president of the South Carolina Dental Association and was most active in organized dentistry until his death in 1903. Unprecedented in the annals of dental history perhaps is the fact that Doctor Patrick was followed in the dental profession by six sons and five grandsons, each of whom attained prominence in South Carolina dentistry.

Most notable of the itinerant dentists who practiced in Charleston were the Harris brothers, Drs. Chapin A. and John Harris. Doctor Chapin A. Harris, the founder of the first dental school, while in Montgomery, Alabama in 1846 met and became a close friend of Dr. Marion Sims who had recently left Lancaster, S. C. It was through the insistence of Doctor Harris that Doctor Sims was persuaded to publish his first scientific article. This appeared in the American Journal of Dental Science of which Chapin A. Harris was editor. Much credit is given Doctor Harris by Doctor Sims for spurring him on in his famous career. Doctor Sims no doubt put Doctor Harris in touch with some of the wealthy planters of South Carolina, for it is known that he and his brother, Dr. John Harris, spent much time practicing dentistry around Cheraw, Camden and Lancaster, S. C. They also made frequent trips of several weeks duration to Charleston.

Another eminent dentist, Dr. Theodore F. Chupein, received his start in Charleston. Born of French parents, September 7, 1830, he
attended school in his native city of Charleston. On leaving school in 1847, he was placed by his father with Dr. William S. Monefeldt, who is listed in the Charleston Directory in 1828 as a surgeon dentist. After remaining with his preceptor as apprentice and then assistant for five years, he began practice for himself in 1852.

At the outbreak of the War for Southern Independence Theodore Chupein joined the Washington Artillery, a select company composed largely of his friends of Charleston. He served as a sergeant of this company during the entire war. When Gen. Shank Evans heard of his dental training he was sent to Charleston for his case of instruments and put to work providing dental treatment for the soldiers. He labored under great difficulties, often having to repair his instruments at the camp forge and improvising new ones as well as he could with limited resources. He had the satisfaction of relieving much suffering and checking tooth destruction until better times. So forceful was his influence for oral hygiene that the Confederate soldiers of his company began carrying their tooth brushes in a button hole of their uniforms and this practice soon spread throughout the army.

After the close of the war Doctor Chupein moved with his family to Philadelphia where he assumed charge of the laboratory of Dr. J. D. White. In this capacity he proved his ability not only as a technician but as an instructor to dental students. Among these students was one young man whose education had been interrupted by the war, in which he served on the Federal side. For more than a year he had been confined in a Confederate prison in Charleston, had tried to escape and had been caught by a group using blood-hounds. He had seen the worst of warfare and it was only natural that he felt a strong resentment for the Rebel dentist who became his instructor. Doctor Chupein's understanding and friendliness together with his keen interest as an instructor quickly dispelled any misgivings the young man had and they became close friends and remained as such to the end.

In 1866 Doctor Chupein returned to Charleston and resumed his practice, but after a disastrous fire in 1875 he again moved to Philadelphia and remained there until his death in 1901. During this time he attained prominence as a writer of professional articles for dental publications. He also wrote for the “American System of Dentistry” the chapter on “Artificial Dentures on Bases of Fusible Alloys.” In
1890 he published "The Dental Laboratory," a small volume of practical information which was widely used.

These were the leaders of dentistry in Charleston during that period when the character, direction and course of the future of the profession were definitely determined. This was the period when the influence of such leaders gave an impetus to a young and virile profession for rapid development that has seldom been equalled in the professional world.

These men had dreams many years ago of greater educational opportunities for the young men of South Carolina who would become the dentists of the future. Some were instrumental in establishing schools in other states either before or after their residence in South Carolina, and their interest, influence and efforts have been continuously felt through the years. There has always been in South Carolina a group of dentists who appreciated the need for a system of instruction within the bounds of their own state which would give character and stability to their profession. This group has finally prevailed and our state government is establishing a school of dentistry at the Medical College of South Carolina in Charleston. This school is included in the expansion program of the Medical College and will be second to none in physical plant, instruction, and clinical research. The history of dentistry in Charleston will continue to be one of great achievements!

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A Historical Sketch of the American Society of Dental Surgeons, 1840-1856

VAN B. DALTON, D.D.S.
Cincinnati

INTRODUCTION

In his "Foundations of Professional Dentistry" on pages 37-39, Dr. J. Ben Robinson presents, under the subtitle, "A Beginning of Dental Literature," a brief, informative account of Dental Literature by forty or more treatises, papers, etc., by American dentists from 1801 to 1839, beginning with Richard Court Skinner and B. T. Longbothom and ending with Chapin A. Harris. Concerning these authors he says, "All of the works by these authors have a definite claim to merit, but those by Fitch, Spooner and Harris are the most valuable."

Another interesting account of early American Dentists from 1801 to 1840 is found in Arthur Ward Lufkin's History of Dentistry, in which he gives proper recognition to John Harris and the school he conducted in Bainbridge, Ohio, for both medical and dental students in 1827. Concerning this he says, "John Harris established a school of instruction in dentistry in the village of Bainbridge, Ohio, in the year of 1827. Besides Chapin A. Harris there were in the group, James Harris, James Taylor, Edward P. Church, and John Allen and others. Bainbridge may thus be regarded as the first center of systematic dental teaching."

John Harris was the older brother of James and Chapin A. Harris. John Harris is also mentioned among the charter members of the American Society of Dental Surgeons, August 18, 1840. The original buildings where John Harris conducted his school of dentistry is still standing in Bainbridge, Ohio. It is now preserved as a memorial to John Harris and his school.

1 Author, Genesis of Dental Education in the United States; The Spahr and Glenn Co., Columbus, 1946.
James Taylor, mentioned by Lufkin as one of those students, was the chief founder of the Ohio College of Dental Surgery, founded in 1845, the second dental college in the world.

American dentistry both as a science and as an art, had its direct beginning in the 18th century, in the work of Pierre Fauchard in France and John Hunter in England. In the works of these men early American dentists found deep inspiration, but it remained for American dentists to elevate dentistry to the status of an organized, honorable and honored profession. This effort advanced along three lines; the creation of a dental literature, the organization of a national dental society, and the establishment of dental colleges.

A group of high minded, respectable, able and conscientious dentists accomplished these three ends at the same time, in 1840. This group included Horace H. Hayden, M.D., New York City; L. S. Parmly, New Orleans; Elisha Baker, New York; Patrick Houston, M.D., Charleston, South Carolina; Eleazar Parmly, M.D., New York; Enoch Noyes, Baltimore; Vernor Cuyler, M.D., Hartford, Connecticut; John Lovejoy, New York; Chapin A. Harris, M.D., New York; Joseph N. Foster, M.D., New York; Augustus Woodruff Brown, New York; Jahial Parmly, New York; Charles O. Baker, New York; Smith Dodge, New York; Solyman Brown, New York; and others.

Too much credit cannot be given to these stalwart, courageous, able men for rescuing dentistry from charlatanism and elevating it to the status of an honored scientific profession. They organized the first national dental society, The American Society of Dental Surgeons, in August, 1840; the American Journal of Dental Science, the first dental journal in the world, 1839, of which Chapin A. Harris was the principal founder and chief editor for many years; and the Baltimore College of Dental Surgery, 1840, the first dental college in the world.

The American Society of Dental Surgeons

The first meeting was held in the American Hotel in New York City, August 18-20, 1840. Doctor Horace H. Hayden was the chief promoter of the movement. He personally invited the above named men and others to meet for the purpose of organizing a national dental society. The original minute book of the Society can now be found in the library of the Children's Hospital of Cincinnati, Ohio.
It is a large leather-bound volume, 8 by 12 inches, well preserved and with the words, “American Society of Dental Surgeons,” stamped on the cover. It contains the minutes of all the annual and special meetings of the Society during the sixteen years of its existence, from its birth to its demise; it records the names of all the officers elected; the names of the members of standing and special committees appointed; the names of all those appointed to read essays, papers, “aphorisms” and dissertations and the names of many members who took part in discussions, of which there were many and some quite long; and it carries an extended account of their chief controversies, of which three were continued through the years:

1. Controversy over the use of amalgam or other mineral pastes for filling teeth, which they considered rank charlatanism.

2. Controversy over the holding of patents on dental inventions by members of the Society, which was held unethical.

3. Controversy over advertising in the press, by dodgers or circulars, on the part of members of the Society,—also held unethical.

Mention is made of many inventions of dental instruments and processes by the members and of the issuance of gold medals to some of them by the Society; and the story of the effort to secure legislation by the State of New York for the regulation of the practice of dentistry. The first few paragraphs in the minute book, quoted verbatim, read as follows:

“In pursuance of an invitation given to several individuals by Dr. H. H. Hayden of Baltimore, a convention was held in the City of New York on the 18th, 19th, and 20th days of August in the year of our Lord one thousand and eight hundred and forty as follows, viz.:

“At ten o'clock of the said 18th day of August, the convention met at the American Hotel in said city, thereupon Horace H. Hayden, M.D. called the meeting to order, and nominated Elisha Baker Esq. of the City of New York as chairman and Solyman Brown of the same city as Secretary.


“On motion of Dr. Harris, resolved that it is the opinion of this convention, that the Science of Dental Surgery would be advanced and the interests of all well informed practitioners and the community at large, promoted by the formation of a national Society of Dentists:
"Therefore resolved furthermore that in order to the accomplishment of this object, a committee consisting of three persons be appointed by the chairman of this convention, to prepare the form of a constitution of such a society, with instructions to report the same as soon as they shall have performed their duty.

"The foregoing resolution having passed unanimously, Dr. Harris, Solyman Brown, and Dr. V. Cuyler were appointed on said committee."

The meeting was then adjourned until 12 o'clock "to give the committee time to prepare its report, and for greater convenience the convention was to be assembled at the residence of Messrs. S. and A. W. Brown at No. 13 Park Place, where at 12 o'clock that day the convention was reopened for business.

It is quite evident that much thought and serious study must have been given to the preparation of such a constitution before calling this convention, for within much less than two hours after the appointment of the committee, the chairman reported, "that the committee had complied with the instruction of the convention and had prepared the form of a constitution for the Society contemplated."

Doctor Horace H. Hayden requested and was given permission "to make a few remarks" before the constitution was submitted to the consideration of the meeting.

**Remarks by Doctor Hayden**

*(Taken from the Secretary's Minutes)*

"He said that the foundation of a National Society of Dentists had long been a favorite project with himself and that he had happily found that he was not wholly alone in this desire. As long ago as the year 1817 he had consulted with the late Dr. Edward Hudson, of Philadelphia, who was favorably inclined to such an association. Others were not inclined to make an effort in the business, 'although gentlemen in the Medical Faculty, to their honor be it spoken, uniformly approved of the plan.'

"He then adverted to the condition of the dental art when he began his practice forty-three years previously.

"Then, said he, the name of dentist was a reproach and a by-word but viewing it as a subject susceptible of great and beneficial improvements by well written essays and works, and not knowing at the time whether any such had been published, he applied to the elder Mr. Greenwood of New York, then dentist to General Washington, who informed him that he knew of but one work that had ever been published, and that was John Hunter's on the Natural History of the Teeth, which he procured. Soon after he obtained possession of some few other works, both in French and English. From that time he has seen the science assuming more and more importance in the public eye, while men
of learning, worth and genius have been added from year to year to the rank of its professors.

"Dr. Hayden closed his remarks with these earnest words: 'At the present, renewed efforts are making in England, France and Scotland, to place our profession on still higher ground than it has yet attained, and shall we, of these United States of America, remain inactive in this grand endeavor? For myself,' said he, 'I cannot brook defeat in this favorite undertaking. I prefer rather to make renewed and redoubled efforts to secure success. There are indeed many obstacles still to overcome. A new race of Canaanites must be expelled from our borders. Many errors must be exploded and much ignorance must be dispelled, before the light of truth will beam clearly upon our path; but with diligence, zeal and perseverance, we are certain of ultimate success. Let us therefore go forward in the good cause unintimidated by the skepticism of the faithless, the fears of the timid or the apathy of the selfish. If there are some who prefer to plod onward in the path of private enterprise, let us unite our efforts in our great social endeavor to elevate our profession from the degraded condition to which it has sunk and in which it must ever remain until the high minded and well educated among its practitioners shall unitedly arise and shake themselves free from the dust.'

"Dr. Hayden then offered a resolution that the Secretary proceed to the reading of the constitution as reported by the committee appointed for that purpose; whereupon the Secretary by order of the chairman read as follows:

(Then the secretary read the proposed constitution, consisting of fifteen articles and after thorough discussion and amendment, it was unanimously adopted and signed by the fifteen members present. The first two of those articles are here given.)

"Art. I. The objects of this Society are to promote union and harmony among all respectable and well informed dental surgeons, to advance the Science by free communication and interchange of sentiments, either written or verbal; between members of the society, both in this and other countries:—in fine, to give character and respectability to the profession, by establishing a line of distinction between the truly meritorious and skillful, and such as riot in the ill-gotten fruit of unblushing impudence and empiricism.

"Art. II. The Society shall be known and designated by the name and title of 'The American Society of Dental Surgeons.'"

Following the adoption of the constitution, "Mr. Eleazar Parmly stated to the convention that he was under the necessity of leaving the city on indispensable business, which would deprive him of the pleasure of taking further part in the proceedings; and asked leave to make a brief communication before his departure which after being read was ordered to be deposited with the archives of this Society."

One paragraph of Eleazar Parmly's "communication" will indicate the bitter struggle through which these pioneer dentists passed in the effort to elevate dentistry as a profession to an honored place in respectable society: "Our forefathers met with opposition and op-
expression in every attempt to establish their rights as men. We too have met in former years with indignities and sarcasms in every attempt to sustain our privileges as members of our profession. We have I presume all of us, the mortification to know, that, in this country more particularly than in any other, the community at large have been accustomed to regard men and gentlemen too as unfit for the drawing rooms of the rich and the fashionable, if they attach themselves to the profession which we are resolved to honor and to elevate. It is time to blot from the annals of Society this degrading feature, and to claim for ourselves a full equality with the honorable avocations of our fellowmen. We owe it to ourselves; and we owe it especially to our children."

The morning session of August 19 was held at the residence of Dr. Baker, No. 6 Warren Street. At that session Messrs. Harris, Solyman Brown and E. Noyes were appointed as a committee on By-Laws.

At the "evening" session on the same day "the convention resolved itself 'The American Society of Dental Surgeons.'"

It was also "On motion resolved that all the individuals that have attended the convention in person, by letter or by proxy, as well as those who have been invited to attend the same, be considered as members of this Society." From this action it would seem that all the thirty-eight dentists who were originally invited by Dr. Hayden, and others chosen, were elected as constituent members.

After the adoption of the Constitution and By-Laws the following officers were elected: "Horace H. Hayden, M.D., Baltimore, President; Josiah F. Flagg, M.D., Boston, 1st Vice President; Eleazar Parmly, M.D., New York, 2nd Vice President; E. B. Gardette, Esq., Philadelphia, 3rd Vice President; Solyman Brown, A.M., New York, Recording Secretary; Chapin A. Harris, M.D., Baltimore, Corresponding Secretary; Elisha Baker, New York, Treasurer; Joseph N. Foster, M.D., New York, Librarian." It will be noticed that five out of the eight officers elected were also M.D.'s.

At this first meeting of the Society twenty-four other dentists were elected to membership. First on this list was John Harris, M.D., then living in Georgetown, Kentucky, the older brother of Chapin A. Harris, and the founder of the Bainbridge, Ohio, School of Dentistry.

It is apparent that this first national society, from its constitution,
its utterances and its activities, was not only national but interna-
tional in its aims and objectives.

The Second Annual Meeting

The Second Annual Meeting was held in Philadelphia, at the
United States Hotel, on August 10, 1841. Seventeen members were
present, the meeting being called to order at 10 A.M. and adjourned
at 12 M. to meet at the home of Doctor L. Roper at which time 18
members were present. A committee was appointed “to take into
account the best means of perpetuating the Society,” and another to
take into account the subject of using various mineral pastes for
filling teeth.

Thus early in its history this controversy began. A committee on
grievances was appointed, to receive and report complaints; five new
members were elected, including Samuel W. Stockton of Philadel-
phia; adjourned to meet at the United States Hotel, which had
offered a room free, at 8 o'clock that evening.

The Society was called to order by the president at 8 P.M. in the
U. S. Hotel and because of a heavy fall of rain, was adjourned till
Wednesday morning at 9 o'clock. On Wednesday, August 11, 10 A.M.,
it was “Resolved that half-past eight o'clock on Thursday be the
time for exhibiting any specimens to the committee appointed to
examine them.” It was also “Resolved that this Society establish a
periodical as the organ of its opinions on subjects of dental theory
and practice and for the purpose of advancing the interests of the
profession.” Doctor Harris then tendered to the Society the American
Journal of Dental Science, on certain conditions. “Resolved that this
offer be accepted,” and it was voted:

(1) That the journal be called “The American Journal and Li-
brary of Dental Science,” and that it be issued quarterly at a price
of $5.00 per year, in advance.

(2) That 400 copies of each issue be published.

Chapin A. Harris and Solyman Brown were elected editors for the
following year; twenty-eight new members were elected; on the
motion of Dr. Greenwood it was “Resolved that the Recording
Secretary be instructed to get a list of the names of all the members
of this Society handsomely printed on parchment to be sold at one
dollar each copy.”
The Third Annual Meeting

The Third Annual Meeting was convened on Tuesday, 19th day of July, 1842, at Tremont House, Boston, Massachusetts.

It was "ordered that all members wear crepe on the left arm for thirty days," in memory of A. B. Hayden (brother of Horace H. Hayden), of Savannah, Georgia, a member of the Society, who had died since the previous meeting; the following motion was made by Jahial Parmly, "Resolved that no letters be taken from the post office by officers of this Society unless the postage has been paid by the writer after the issue of the next No. of the Journal"; the president presented sundry papers relating to alleged unprofessional conduct on the part of one of the members of the Society. The papers were referred to the committee on grievances. The name of the alleged offender was not given; the five dentists chosen to read the dissertations at the next annual meeting were all also M.D.'s; an essay was read by Dr. Gunnell on "The Best Remedy For The Jimber Jaw" and was ordered to be printed among the archives. (It probably referred to what today is called "Mandibular Protrusion," or to use a slang phrase, lantern jaw.)

On motion by Dr. Joshua Tucker, Resolved that a Recommending Committee of three members for each of the four cities, Baltimore, New York, Philadelphia, and Baltimore, be appointed, whose duty it shall be to report to the executive committee at each annual meeting of the Society, the names of such persons as they deem worthy of membership in the respective Districts where said committees reside. (The repetition of "Baltimore" in the above resolution was obviously a mistake, for committees were appointed for Boston, New York, Philadelphia, and Baltimore.) All eight officers elected for the ensuing year were also M.D.'s. On motion duly seconded, Resolved that the constitution of this Society be so amended as to give to the Society a permanent locality and place of meeting after the next meeting in the city of Baltimore; and that said permanent place of meeting be either in the city of New York or in the City of Philadelphia. The vote taken showed the City of New York, 14, and the City of Philadelphia, 6 votes. On July 21st, 1842, Solymon Brown read a paper on "The Art of Sinking." It must have been a very able and important paper because "On motion of Dr. May-
nard, Resolved that Dr. Brown's dissertation be printed in the Journal and that an extra number of copies be published separate from the Journal matter, to supply all subscriptions that may be made in season for the issue of the same. Whereupon three thousand one hundred and eighty copies were subscribed for by the members present.

"Resolved that the Dental-Drill-Stock exhibited by Dr. Maynard of the City of Washington receives the approval of this Society; and that in the opinion of the members present it is the most complete instrument for the purpose intended, known to this Society"; (Case of discipline) Resolved that the case of Dr. Grant shall be postponed for one year in order to afford opportunity to present him with a copy of the allegations as filed in his case and he may be fully prepared for his defence; on motion of Dr. Mackall, Resolved that the editors of the past year receive the sum of two hundred dollars as a compensation for their services, out of any monies in the treasury not otherwise appropriated.

The Fourth Annual Meeting

The Fourth Annual Meeting was held in Baltimore, Tuesday, July 18, 19, 20, 1843. (Ladies present.)

On motion, "Resolved that E. Parmly, S. Brown and E. Baker be continued as a committee to prepare a memorial and make an application to the Legislature of the State of New York for a charter of this Society with power of conferring the Degree of Doctor of Dental Surgery and the privilege of holding such amounts of property, personal and real, as to enable the Association to own a building in the City of New York for the purpose of holding its annual meeting and containing its library and preparations, and also for the purchase of such a library. (Such a charter was never granted by the legislature.)

The Amalgam Controversy (Continued): Doctor Westcott introduced the subject of quackery in connection with the practice of plugging carious teeth with mineral pastes employed by certain dental operators. Dr. Westcott read to the Society a newspaper article written by himself on the subject. On motion, resolved that the editors receive each, twenty-five copies of the second and third volumes of the Journal as compensation for their editorial labors during the above period.
The Fifth Annual Meeting

The Fifth Annual Meeting was held in New York, July 16-18, 1844, at the Stuyvesant Institute: The decease of the president, Dr. Horace H. Hayden, was announced by Dr. Chapin A. Harris. (Hayden had been president since the organization of the Society.) Dr. E. Parmly was unanimously chosen as president; Doctor Solyman Brown, the recording secretary, announced his retirement from the active duties of the profession including his secretaryship; the editors of the Journal were voted “25 copies of the 4th volume as partial compensation for their service during the past year.” Voted “That Dr. Brown receive $50.00 in cash in settlement of his accounts with the Society, and 50 copies (of the Journal) in lieu of the 25 copies of the 4th volume aforesaid. ‘On motion of Dr. Merriman, Resolved that a Committee be appointed to prepare a plan for State Societies as auxiliary to this Society.’”

The Sixth Annual Meeting

The Sixth Annual Meeting was held in New York, August 5-7, 1845. The Amalgam Controversy continued with full steam ahead; a committee was appointed to investigate the use of amalgam by members of the Society. The committee was composed of Drs. J. B. Rich, J. Taylor, John Allen, E. J. Dunning, Alex Nelson; a letter from W. A. Palmer was read by Dr. Harris, “asking the Society if it would grant him a diploma on certain compromising terms. The letter was laid on the table and Palmer’s name stricken from the list of members.” A letter of resignation was received from J. Smith Dodge. (It was not accepted.) The investigating committee reported on the use of amalgam. Of 25 members in New York and Brooklyn two were absent, two had been out of practice for over a year. Of the 21 remaining, 10 disapproved entirely of the use of amalgam and had never used it in practice. Of the remaining members, 5 have used it in certain cases but were willing to discontinue its use, and 6 use it under certain circumstances and refuse to pledge discontinuance. All six were prominent dentists. Of non-resident members of the body now sojourning in New York the committee called on 21. All of them disapproved entirely of its use, and only one of them had used it once experimentally. Among these were John Harris, Chapin
A. Harris, John Allen, J. Taylor and Solyman Brown. Thus, out of 46 members called on by the committee at that meeting in New York, 31 disapproved entirely of its use, 5 had used it but were willing to discontinue its use, 6 had used it and refused discontinuance, 2 had been out of practice over a year, 2 had not been at home. John Harris read his essay which was requested for publication. Doctor J. Allen of Cincinnati read an essay and exhibited an apparatus for restoring the shape of the face lost from any cause. It was “Resolved that Dr. Allen’s improvement be regarded as important and that a medal be presented to him, also five volumes of the Journal bound and subscribed by the Recording Secretary as awarded by the Society for said improvement.” A committee was appointed to devise and report some plan for getting legislative action regulating the practice of dentistry in the state. It was “Resolved that during the present Convention there be no election for the admission of members.” (Probably due to the Amalgam Controversy which was at white heat.)

The Seventh Annual Meeting

The Seventh Annual Meeting was held in New York, August 4-7, 1846. The Amalgam Controversy: a letter had been sent to all members of the Society asking them to sign and return within a given time an enclosed pledge against the use of amalgam or any form of mineral paste in filling teeth; a total of 72 had signed the pledge; 62 failed to sign and return it; 4 of those who failed to sign and return the pledge within the sixty days limit, complied later giving reasons for delay; 2 others had failed to receive the circular and petitioned the Society to excuse them because they were with the Society in feeling and practice; several others had signed a previous petition in 1845 and supposed it to be superfluous to sign again; only 3 of all those responding refused to sign the pledge, two of them stating that they were opposed to the use of all amalgams but refused to sign because they disapproved of the Society’s action in passing the resolution originating said protest. The total number signing was 78, total not responding was 53. Only one expressed himself as friendly to the practice of using amalgam for dental purposes, and that only in certain cases: the constitution was so amended as to raise and tighten the standards for membership; all applications for active membership must have the recommendation of at least 3 members
who are personally acquainted with the moral character and professional attainments of the applicant, and be filed with the Secretary at least six months prior to the regular annual meeting; elections to honorary membership were also safeguarded; all candidates shall be balloted for by ball ballots, if there should appear against a candidate one black ball for every six acting members present, the even sixes only counting, he shall be rejected and so declared.

THE EIGHTH ANNUAL MEETING

The Eighth Annual Meeting was held in Saratoga Springs, New York, August 3-6, 1847. There was much discussion on the Amalgam problem and drastic action was taken. Those who persisted in the use of it were expelled from the Society. This included some of the most prominent members of the Society.

THE NINTH ANNUAL MEETING

The Ninth Annual Meeting was held in Saratoga Springs, New York, August 1-4, 1848, with only 12 members present at the opening session. Letters were read from several members who could not be there. The record of the discussion was made by a shorthand reporter and hence were not recorded in the minutes. This omission is to be regretted, for unfortunately we have no record of those discussions. Numerous resignations from office or from membership, for various reasons, were received. Asa Hill explained his use of gutta percha for stopping teeth. He could not reveal his secret compound, for some reason, so they decided "not to listen further to its virtues."

THE TENTH ANNUAL MEETING

The Tenth Annual Meeting was held in Baltimore, March 25-27, 1850. (The meeting to have been held in Saratoga Springs in August, 1849, was called off by the President, Eleazar Parmly, because of the prevalence of cholera.\(^2\) Doctor L. S. Parmly was authorized to act as General Agent of the Society, both in this country and in Europe. A committee was appointed to revise the Constitution, particularly the part of it pertaining to the admission of new members. It was "Re-

\(^2\)For further explanation, see letter to Dr. Chapin A. Harris from Dr. Cone in the minutes of the 14th Annual Meeting.
solved that the officers of this Society (except in cases of vacancy) hold over till the next annual meeting."

**THE ELEVENTH ANNUAL MEETING**

The Eleventh Annual Meeting was held in Saratoga Springs, August 13-15, 1850. Eighteen members were present at the opening of the Convention. A resolution was adopted which rescinded and repealed the actions taken in 1845 and 1846 on the use of amalgams. Thus they sought to put a "soft pedal" on that controversy. But the bitterness of the divisions created was too serious to be healed, too many prominent members had been alienated.

A Resolution as presented reads: "Resolved to discontinue publication of the Journal and transfer it to such of its members or member who would assume its debts and give security to the President of the Society or his successors for the same. It was "Further resolved that the President of the Society be authorized to transfer the Journal to Dr. C. A. Harris under the above conditions." Doctor Harris thus took over once more the ownership of the American Journal of Dental Science.

**THE TWELFTH ANNUAL MEETING**

The Twelfth Annual Meeting was held in Philadelphia, August 5-7, 1851. The society had had three recording secretaries up to this time, Solyman Brown, A. Westcott, and C. O. Cone. Cone used only the right hand side of pages for his record of minutes; the society had had only two Presidents up to this time, Horace H. Hayden and Eleazer Parmly. (Later Dr. Elisha Townsend became the last President.) A motion was carried to put advertisements in two Philadelphia Newspapers inviting the public to be present to hear an address. A vote of thanks was given to Dr. John Allen "for exhibiting of his process and method of making artificial plates and uniting single teeth to the plates"; a motion was carried "to strike from the roll the names of members whose dues are in arrears more than three years, who, upon notification, have neglected to make any payments." Aphorisms; "Dr. E. J. Dunning's aphorisms on the Treatment of Exposed Dental Nerves, on motion of Dr. Arthur, was so amended as to embody the 1st and 2nd aphorisms into one, which should read as follows: a tooth whose nerve is exposed may be preserved permanently by entirely removing the pulp and filling the place
occupied by it with gold." The Society thus prepared a long series of aphorisms on practical dentistry, encouraging brevity and terseness in the papers of its members, and discouraging verbosity: (Cases of Dr. Dwinelle and Dr. Cushman) A committee was appointed to receive charges preferred by Dr. A. Westcott against Dr. William H. Dwinelle and also the evidence and to report later, and charges preferred by Dr. O. P. Laird, with the accompanying papers, against Dr. C. T. Cushman were referred to the above committee.

The committee later reported that the charges against Dr. C. T. Cushman by Dr. O. P. Laird were fully substantiated and recommended that he be expelled from the Society. This recommendation was adopted.

In the case of Dr. Westcott against Dr. Dwinelle, the committee was divided and majority and minority reports were laid on the table until 9 A.M. the next morning, at which time a minority report was presented, signed and read by Dr. Robert Arthur. The report follows:

"The charges made were so serious and crushing to a man in the commencement of his career that great care should be taken, and as the case was still before the court and as yet undecided, he offered a resolution that Dr. Dwinelle be suspended from all rights and privileges of the Society until the next meeting of the Association. At which time, unless he is able to show that the case in which he is involved is still in progress, the action of this Association shall be final in his case and that if he have a defence to offer it shall be presented in writing." No record was made of the majority report.

An important resolution by Dr. E. Townsend was presented and adopted:

"Resolved, that the objects avowed by this Society at the time of its organization; and the purposes of its founders were all right, necessary and well-timed; and the measures adopted, honorable, expedient and successful; that eleven years' experience fully justifies the hopes entertained of its agency in advancing the interests of the science, and of the profession, and that its present condition and duties, and the prospects of usefulness commensurate with its capacities alike require an enlargement of its sphere of action, an increase of energy in its efforts, and freedom and liberality in its spirit."

Doctor Townsend was requested to furnish the Society with a copy of his argument supporting the above resolution, for publication.

THE THIRTEENTH ANNUAL MEETING

The Thirteenth Annual Meeting was held in Newport, Rhode Island, August 3-4, 1852: eighteen members were present at the
opening session and eleven visiting dentists. This was the first meeting of the Society at which Chapin A. Harris was not present. "Resolved that gentlemen of the profession, resident of Newport, or otherwhere be and hereby are invited to attend the sessions of the Association." The case of Doctor Dwinelle: "Resolved that Doctor Dwinelle's case be laid over until the next annual meeting in the absence of certain papers." The question of the admission of delegates from dental societies and colleges was laid over to the next annual meeting. It was voted that a gold medal to cost $25.00 be offered for the best paper on "Dental Irregularities and Their Correction," to be judged by a special committee at the next annual meeting.

THE FOURTEENTH ANNUAL MEETING

The Fourteenth Annual Meeting was held in Westpoint, New York, August 3-4, 1853: the first item of business was the case of Doctor Dwinelle, in which the following resolution was unanimously adopted, expelling him from membership in the Society; "Resolved that the resolution in regard to Dr. W. H. Dwinelle passed at the annual meeting in 1851, convened at Philadelphia, be carried into effect, and that he be and hereby is dealt with according to Art. VI of the constitution." The 13th section of the by-laws relative to the exclusion of all persons who held dental patents, from the association as members was finally adopted as reported: "Resolved that any member of this association who shall extoll his own peculiar merit over a fellow practitioner in the public prints or employs means of advertisement which may be regarded by this Society as lowering the dignity of the profession or compromising its character, shall be impeached, suspended, or expelled." The resolution was unanimously adopted: there is a record of long correspondence between Dr. C. O. Cone, the secretary of the Society and Dr. Chapin A. Harris over a dispute as to liability of payment of a printing bill of $25.00 due to a Mr. Wood, which resulted in a censure of Dr. Harris as being "ungentlemanly, uncourteous and insulting to the Society." The bill was incurred in 1849. It was finally paid by Dr. Harris as owner and editor of the American Journal of Dental Science. Dr. E. Parmly was nominated for re-election as president, but "peremptorily declined" to serve longer. He had served as President since August, 1844, following the death of Horace H. Hayden, the first President of the Society; Dr. C. O. Cone also declined the nom-
ination to re-election as the Recording and Corresponding Secretary. This was the only meeting of the Society, up to this date, in which Dr. Chapin A. Harris was not elected to any office or committee membership, or assigned to any other duty. Dr. Elisha Townsend of Philadelphia was elected President. A resolution was passed expressing "deepest respect and affection for Dr. E. Parmly and profound regret at his decision not to occupy the office any longer.

THE FIFTEENTH ANNUAL MEETING

The Fifteenth Annual Meeting was held in Cincinnati, Ohio, May 8-10, 1855. Evidently this meeting took the place of the meeting to be held in Cincinnati in August, 1854. No explanation is given as to the postponement of this meeting. The only two annual meetings not held at the scheduled time were this meeting and the one in Saratoga Springs, New York, in the summer of 1849, which was called off on account of the prevalence of cholera. Nine members were present at the opening session: Drs. Townsend, Dunning, Wheeler, Miller, Berry, Goddard, (James) Taylor, (John) Allen and Bonsall. Many other members of the profession, not members of this Society, were present, several of them being members of the Mississippi Valley Association of Dental Surgeons, who had met for the purpose of welcoming this Society. President Elisha Townsend was in the chair, and the secretary being absent, Dr. Bonsall was elected secretary pro tem: "All members of the profession who may be present at any of our sessions are invited to participate in our discussions." Dr. Townsend's presidential address had been referred to a committee of three for study and report. The committee reported as follows: "Your committee, to whom was referred the Presidential Address, would respectfully report that they have especially turned their attention to that part of the address, which suggests a more liberal, less exclusive and more national organization; one which shall unite the profession at large and which shall bring up at our yearly convocations a fair representation from every portion of our extended country.

"The committee feel that the profession occupies now a very different position from that which it did when the Society was first organized.

"That however admirably adapted the organization was then for the work assigned to it; yet having accomplished as we believe, that
work; and been of vast service to the profession, a broader basis for action is now demanded.

"The Society was organized before we had a dental literature or any effective or well organized system of dental education.

"In the brief period of its existence, the work of a century has been accomplished, and the impetus which has wrought such progress demands a new set of machinery, that we may keep pace with the active spirit of the age.

"The committee would therefore recommend that a call be issued by the President of this Society in accordance with the Sixth Article of the Constitution to take into consideration the general subject of associations, and the dissolution of this society; said meeting to be held in Philadelphia on the day previous to the holding of the meeting called by a number of dentists of that city."

(James Taylor, E. J. Dunning, W. H. Goddard, Comm.)

After a full discussion the resolutions were unanimously passed and adopted: "Dr. Dunning then reported having found accidentally a much superior stone to the Arkansas stone; it is called the Missouri oil stone." Adjourned Sine Die.

Post Script. "The secretary will note with pleasure the very general satisfaction expressed by members, with the meeting generally and which was believed to have grown out of the practical character of the discussions which had been held." This meeting might well be called the "funeral" services of the American Society of Dental Surgeons. "The final interment took place in New York, August 7, 1856."

A SPECIAL MEETING

A Special Meeting was held in Philadelphia, August 1, 1855. Ten members were present at the meeting: "Drs. Townsend, J. S. Clark, L. R. Parmly, Cone, Dunning, Miller, Allen, Arthur, Goddard, and Bonsall." The purpose of this meeting was "to consider the propriety of dissolving the Society." It was "Resolved to continue the Society and hold the next annual meeting at the Astor House in New York, on the first Tuesday in August, 1856.

THE SIXTEENTH ANNUAL MEETING

The Sixteenth Annual Meeting was held in the Astor House, New York, August 5-7, 1856: no quorum. There were only six members
present at the morning session and as no quorum was present, they adjourned to meet at 3:30 in the afternoon at the same place. There was no quorum again in the afternoon. The same six members were present. The secretary was requested to notify all members who could be reached in time that a meeting would be held Thursday morning (August 7) at Hope Chapel, 718 Broadway, for the purpose of deciding finally as to the dissolution of the Society. The Society met Thursday, August 7, at 9 A.M. Nine members were present: "Drs. Townsend, E. J. Dunning, J. Parmly, R. Arthur, John Allen, S. P. Miller, J. Taylor, P. P. Field and C. Bonsall." The committee appointed to consider and report on the propriety of dissolving the Society reported as follows:

"Your committee to whom was referred the subject of the propriety of dissolving the Society heretofore in existence as the American Society of Dental Surgeons, would respectfully report, that having given the subject that consideration which its importance demanded, they agree to offer the following resolution:

"Resolved that we deem it expedient to dissolve this Association and that it be and is hereby adjourned sine die."

The report was accepted and a committee appointed to examine the treasurer's books and to distribute the funds of the Society according to the constitution. The Society then adjourned sine die.

(Elisha Townsend, E. J. Dunning, John S. Clark, Robert Arthur.)

"Charles Bonsall, Rec. Secy."

Thus, after an honorable, stormy and noble career, on August 7, 1856, was appropriately laid to rest the body of the American Society of Dental Surgeons in Hope Chapel, in the City of New York, the place of its birth.

This minute book of the American Society of Dental Surgeons, from which the facts in this historical sketch were taken, is the authentic official record of the first national dental society, and should therefore be of profound interest to every student of the history of dentistry, and an intimate acquaintance with its contents indispensable to every dental historian.
This report was submitted by the Survey Committee to the Executive Committee of the Academy and subsequently to the general meeting. By this body it was ordered sent to the American Association of Dental Schools for consideration as to the possibility of extension among schools now teaching the subject and within other schools not teaching this important phase of dental education. It has been considered by the Executive Committee of that body; it has been published in the Journal of Dental Education, (19, 129; 1955), and in due time will be given that attention which the Academy might desire. Subsequent to the presentation of the report to the Academy, the chairman read the following paper. (Ed.)

REPORT OF THE SURVEY COMMITTEE

In making this survey, fifty questionnaires were sent to dental schools within the United States and Canada, including four to associated institutions which have no teaching function, therefore, the total requiring reply was forty-six. Of these forty-four replied. The following represents an analysis of the returns:

Item 1. (a) Do you offer a course in the history of dentistry?

Yes, and required ........................................... 35 schools
No .......................................................... 9 schools

(b) If so, during what year and semester is the course offered?

During 1st year, 1st semester ............................... 5 schools
2nd semester ................................................. 3 schools
Semester not indicated ................................. 2 schools

During 2nd year, 1st semester ............................... 0 schools
2nd semester ................................................. 2 schools
Semester not indicated ................................. 2 schools

1 Presented before the annual meeting of the Academy of the History of Dentistry, Miami, Florida, Nov. 5, 1954. Members of this Committee are G. B. Denton, J. Ben Robinson and Nell Snow Talbot and John E. Gurley, Chairman.
REPORT OF SURVEY COMMITTEE

Winter quarter ........................................ 1 school
During 3rd year, no semester indicated .................. 1 school
During 4th year, 1st semester ................................ 5 schools
   2nd semester ........................................... 4 schools
   1st and 2nd semesters .................................. 2 schools
   3rd quarter ............................................. 2 schools
   Semester not indicated ................................ 1 school
During 1st and 3rd year, 1st, 2nd and 3rd quarters ......... 1 school
During 1st and 4th year, 2 trimesters ...................... 1 school
Year not indicated, 1st semester .......................... 2 schools
Neither year nor semester indicated ....................... 4 schools
Quarterly, but not indicated ................................ 1 school
Additional, but not indicated ............................. 5 schools

(c) How many hours of instruction are given?

5 hours .................................................. 2 schools
10 hours .................................................. 3 schools
11 hours .................................................. 1 school
12 hours .................................................. 8 schools
15 hours .................................................. 4 schools
16 hours .................................................. 6 schools
20 hours .................................................. 1 school
32 hours .................................................. 1 school
66 hours .................................................. 1 school
Not indicated ............................................ 17 schools

Item 2. What is the aim of the course?

Factual knowledge of development of the profession ........ 32 schools
Development of professional character of dentistry .......... 12 schools

Item 3. Is the course taught separately or with other branches of dentistry?

Separately ............................................. 33 schools
Other .................................................. 9 schools
Not indicated ........................................... 2 schools

Item 4. How is instruction given?

<table>
<thead>
<tr>
<th>Instruction Method</th>
<th>Yes</th>
<th>Not Indicated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lecture</td>
<td>38 schools</td>
<td>6 schools</td>
</tr>
<tr>
<td>Quiz</td>
<td>32 schools</td>
<td></td>
</tr>
<tr>
<td>(Lecture and quiz)</td>
<td>22 schools</td>
<td></td>
</tr>
<tr>
<td>Seminars</td>
<td>4 schools</td>
<td>40 schools</td>
</tr>
<tr>
<td>Textbook assignment</td>
<td>15 schools</td>
<td>19 schools</td>
</tr>
<tr>
<td>Library assignment</td>
<td>21 schools</td>
<td>23 schools</td>
</tr>
<tr>
<td>Thesis required</td>
<td>7 schools</td>
<td>37 schools</td>
</tr>
<tr>
<td>Eras</td>
<td>43 schools</td>
<td>1 school</td>
</tr>
<tr>
<td>(All eras)</td>
<td>18 schools</td>
<td></td>
</tr>
<tr>
<td>(Part of)</td>
<td>25 schools</td>
<td></td>
</tr>
</tbody>
</table>
Medicine included .................. 17 schools 27 schools
Social, political or economic phases included 19 schools 25 schools

Does your library have:
  a. Early journals .................. 28 schools 16 schools
  b. Rare books ........................ 29 schools 15 schools
  c. Dental and medical classics ........... 24 schools 20 schools

Do you have a museum? .................. 15 schools 29 schools

Item 5. Qualifications of instructor:

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Not Indicated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dentist</td>
<td>34 schools</td>
<td>10 schools</td>
</tr>
<tr>
<td>(historian or student of history)</td>
<td>28 schools</td>
<td>14 schools</td>
</tr>
<tr>
<td>Knowledge of general history</td>
<td>28 schools</td>
<td>14 schools</td>
</tr>
<tr>
<td>(2 schools not determined)</td>
<td>14 schools</td>
<td>18 schools</td>
</tr>
<tr>
<td>Literary (dental) qualifications</td>
<td>14 schools</td>
<td>18 schools</td>
</tr>
<tr>
<td>(12 schools not determined)</td>
<td>14 schools</td>
<td>18 schools</td>
</tr>
</tbody>
</table>

Following my own study of the returns from the colleges the material was sent to another member of the Committee for further comment. The following is quoted from the study by Dr. Denton. He says:

"Of 45 schools in the United States and Canada replying to the questionnaire, 39 reported a required course in the History of Dentistry and 6 reported no course in that subject. Twenty-eight reported the course to be taught independently of other subjects.

"The number of hours ranged from 5 to 66 with a median of 12 and the arithmetic mean of 15.3.

"All the schools used the lecture method although only 10 depended upon the lecture method solely. Eleven reported no test of the students.

"Five schools reported the course to be taught by a person other than a dentist, 24 claiming the instructor to be well informed in general history. Sixteen of the instructors are members of the Academy."

Questionnaires were not sent to new schools recently organized. While nine schools were indicated in Item 1 as having made no reply, some did however make comment on other items. There was some irregularity with regard to the semester in which the course is offered which may account for some discrepancy in the figures as presented. However, the survey reveals a very satisfactory response from the schools and a desire, shall we say, in the presentation of the course in The History of Dentistry.
Report of Survey Committee

Recommendation Presented to the Academy of the History of Dentistry by a Special Committee

Recommendation—The Committee on the Survey of Teaching Dental History finds much to commend in the present condition of dental history teaching in most of the dental schools of the country. On the other hand, it notes with concern a lack of interest in the subject in some schools, and a wide range of approach to the plan of organization and the methods of teaching among the dental schools.

Therefore, it recommends that this Academy communicate its findings to the Committee on Teaching of the American Association of Dental Schools, with the request that it make the course in dental history a subject of study and discussion in a meeting of a general session of the American Association of Dental Schools for the benefit of the teachers in dental history and for the information of the deans.

Respectfully submitted,

G. B. Denton
John E. Gurley
J. Ben Robinson, Chairman

*Submitted to the American Association of Dental Schools and published in the J. Den. Ed., 19, 129; (March) 1955.*
On Teaching Dental History

JOHN E. GURLEY, D.D.S.

Comment on teaching the subject of dental history by one teacher may not be amiss and it may even be acceptable. The term Philosophy of Dentistry is a desirable heading for the subject because it permits something of the interpretative; it lets us see progressive values; it lets us see that dentistry, even as other avenues of learning, is in reality a means to an end and not an end in itself; and it lets us think in terms between the real on the one hand and the ideal on the other. Or perhaps more succinctly stated and as suggested by Leroy Loemaker,¹ "the value of philosophy lies within the realm of four possibilities: 1) it serves to clarify the importance and the value of the particular field under consideration; 2) it recognizes professional experience; 3) it also gives due consideration to the professional, historical and cultural implications of professional experience; and 4) it aids in the clarification of ethical implications." We ought to be idealistic, but we must never overlook the realistic. There is an old poem, the last line of each verse of which reads, "Hitch your wagon to a star." But there is danger ahead—you are too likely to fall off. Rather you should gain that concept which finds a place only within you or your mind and thus guides you or directs you. You cannot always raise yourself by your own boot straps, but as you let principles become a part of you, the rest is easy.

The history of any subject or general history, may be taught chronologically, i.e., through a listing of events and discoveries or inventions, with their dates and authors; or the same may be taught in narrative form by telling the story. A study of history may even be endless, if one chooses to go into great detail of discoveries and inventions and the biographies of men. Especially is this latter true, for nothing would have been done were it not for men, and untold numbers of men have made definite contributions from the most

¹ Professor of Philosophy, Emory University; The Christian Scholar; 37, 496-504; 1954 (Dec.).
insignificant to the most striking. It is also a well known fact that
the big things of life are made up of the minutiae. Therefore, it may
appear reasonable to consider this subject from the philosophical
standpoint, through which those who have made really munificent
contributions will be named with some thought given to the condi-
tions of the times, the incentives provided, and the men themselves.
This means then that there are terms to which attention must be
directed and concerning which we must have some understanding.
They will be considered in order as follows:

I. HISTORY—What is it?

Webster defines history as “a narration of facts and events ar-
ranged chronologically or otherwise, with their causes and effects;
(or) “a knowledge of facts.”

History may consist of a series of facts, but however one may view
it, it takes ‘man’ to possess the knowledge of these facts and that is a
pretty large dose. More than that, if history consists of a series of
facts, man must have had something to do with it; therefore a better
definition might be proposed as follows: History is the story of man’s
achievement, or if you prefer, the late President Woodrow Wilson
submitted the following: “The history of Nations is spiritual, not
material; a thing, not of institutions, but of the heart and the imag-
ination.”

This question of history, general or special—national, social or
professional, has been succinctly stated by a writer in “The History
of Dentistry in Missouri,” (p. I): “History is more than a chronologi-
cal arrangement of evolutionary events; it embodies more than a
factual account of a Nation’s rise and fall; more than a list of dates
and names of wars to be remembered (and more quickly forgotten).
It is a correlation and an interpretation of man’s achievements; it is
a record of his reactions to happenings that occur to the individual
and, through the individual, to the generations. Just so is the history
of dentistry more than a record of the logical and chronological
sequence of events. Like the development of any particular science,
it is involved in and interrelated with other sciences in their devel-
opment. In short, it is part and parcel of the history of medicine, but
by differentiating its purpose and technique, dentistry emerges a
particular profession.”
There are extant today two dominant schools of historical thought; one of which views human history in the light of its heroes and the other seeking history as a progression of ideas. In either case man is involved. Biographies are hard to write—they ought to be faithful, but too often they are fictional. History may thus be distorted. Creative men do not live in isolation nor do their thoughts spring out in full bloom. History, a record of discoveries and achievements, is rooted in ideas and all that goes to make up the environment in which men lived at that time. We really write the histories of the times of men, made up of the ideas current at the various times, and influenced by the total environment of the times. Men's names come in as a part of the history.

Emerson says: "There is properly no History—only Biography." Or anonymously, "History is to the world what memory is to the mind . . . or fertilizer to the plant."

Again, "if we tried to sink the past beneath our feet, be sure the future would not stand."

Toynbe is reputed to have said: "It is the disturbed periods of history that are really the creative periods."

But whatever may be your own idea about history, it is not a succession of meaningless events. It is a succession of events with a definite meaning—it is purposeful—it is objective (with some detours, of course).

(A) Chronology—lists the events—depicts the evolutionary process.
(B) Biography—lists and presents men, the "doers"—we deduce the spirit.
(C) Narrative—tells the story.

A formula for historical growth or development might be suggested: 3

1. There is first an idea (sweets cause tooth decay—Fauchard Circa, 1746. 4
2. This is followed by expansion and acceptance of the idea.
3. Then comes a decline—(It can't happen here).
4. Then a possible fourth phase may be designated a renais-

4 J.A.C.D.—21, 7; 19, 54.
sance. This renaissance is a rebirth of the original idea in order to perpetuate the (original concept) and to prevent its demise by lack of interest. But also, events during the intervening years have tended to prove its truth.\(^5\)

Such thinking is closely related to research and research should be conducted by all schools, original study and thinking by teachers, thus introducing the same kind of attitudes to undergraduates as suggested by the late Wm. Bebb\(^6\) “... for how is it possible for the average graduate to take an interest in that which he seldom saw and rarely ever heard mentioned during his school years?”

Kipling suggests six serving men:

I keep six honest serving men,
They taught me all I know.
Their names are “What,” and “Why,” and “When,”
And “How,” and “Where” and “Who.”

History has at least four objectives:

I: It helps our understanding of
(a) Material conditions
(b) Political institutions
(c) Philosophical and religious thoughts
(d) Military exploits
(e) Personal liberty

II: Experiences of the past indicate future possibilities

III: It shows up limitations

IV: It teaches us to hope

Quoting Donald Culross Peattie: “Robert E. Lee knew that, in a life or a nation, it is not the outcome of any struggle that is decisive, but the direction taken by the spirit. And the spirit of man, I believe with Lee, tends (like other growing things) upward toward the light. That course is our real history. The milestones on it are not merely the improvements we have made in practical living—from the electric light to penicillin—which meant “progress” to the boy at the gas pump.

“We can better mark the way by our advances beyond such dark uses as slavery, religious persecution or legal torture, and by the

\(^5\) Fosdick, L. S.: Reduction of the Incidence of Dental Caries, etc.; J.A.D.A.; 40, 133-5; 1950 (Feb.).

spread of democracy in the world. The development of man is long, slow, full of setbacks—but let us not forget it is full of hope too. Such history is for all of us to make—a little every day.”

II. PHILOSOPHY: By philosophy we mean—
1. We have a program—development of thought—mental discipline.
2. We have a reason—we know relationships.
3. We have an object
4. We have a passion, a desire
   Idea of systematic progress
These react upon the individual—
1. In the development of his attitudes
2. In developing his feeling of responsibility
3. In developing his concept of his rights
4. Finally, in the development of his personality

Philosophy provides a reason for dental service both to the dentist and to the patient. It answers Why? or What for? or How? Philosophy consists of “a body of principles or general conceptions underlying a given branch of learning or major discipline—and its application, as the Philosophy of History, etc. (Webster’s Dictionary).

Geier in Germany (Bull. History of Dentistry, Aug. 1954) takes as his thesis: “... all historical developments consist of two phases—'the spiritual incubation' and the 'realization of this spiritual situation.' The initial phase precedes the realization by a considerable period, during which the initiation of a new idea produces doubts, errors and confusions—'interference' to the realization of the earlier conceived development. Thus, current usage is always 'behind the times' and in opposition to the future outlook.” Contemplate these terms:

Teaching—in the last analysis, is helping each other to find the solution to life and the problem of living.

Learning—is finding the above.

Philosophy—is the application of that which is learned to the fine art of living.

The philosophy of dentistry is just that for the dentist and through him for the patient, as he proceeds to find the cause of trouble, discomfort, or variation from that which may be considered normal,

*S. F. Chronicle "This Week" 7/25/54, p. 2, by Donald Culross Peattie.
and then to solve the problem as he continues with treatment of what-so-ever kind, thus restoring the normal or with some modification, providing a partial return to normal function, or in the extreme, providing a substitute. In all of this a fault may be solved, and comfort provided for the patient, allowing him a better condition of living or a possibility of an improved life, both physically and mentally. The dentist is called upon to render help, not only through his fingers, but through his mind and the spoken word. This is especially true in dealing with children. Dental service does not begin with, nor end with, what one may accomplish with his fingers. The same responsibility obtains with regard to the spoken word. The mental agility of the dentist and his finger agility must balance. A knowledge of history and its philosophic interpretation will help in bringing about that balance.

Someone has suggested four directions in which one may look, it may help a thinking mind:

1. To the West—the dying day—the end—hopeless, so far as that day goes.
2. To the North—gray skies—cold—discouraging.
3. To the South—withering heat—suffocating.
4. To the East—the rising sun—the beginning—a new day—encouraging.

In the announcement of courses of the University of California, there appears the following statement (not quoted in full):

"Professional problems command careful consideration by practitioners in the healing arts." You are dealing with human beings, and there is not a point to be considered that has not life in it—human life. Therefore, "a review of these problems from the beginning of human activity and a study of their technical, scientific and ethical development down to the present time are deemed essential in preparation for dental practice."

It is interesting to note certain statements of Mr. Bernard Baruch, in a series of recent addresses:

"I have asked why man is able to perform such scientific and technological wonders as splitting the atom or conquering disease, and yet finds it so difficult to manage his own human affairs.

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"When it comes to such sciences as medicine, astronomy, or physics we seem like supermen. But with government and economics our fumblings are more like those of children.

Partly it is because we have not advanced so far in understanding the human sciences. In reading history one is struck by certain patterns which keep repeating themselves—such as the abuses that come from any man being given too much power, or how tinkering with the value of money too often ends in failure, or those curious madnesses which sweep over a whole people, like John Law's Mississippi Bubble or, in our own day, the 1929 stock-market craze.

"As we learn to distill the salt of wisdom from the vast ocean of man's experience, I believe we will discover that these patterns are clues to the natural laws that govern human affairs."

"Man cannot repeal the inexorable laws that somehow result from the great complex of our universe and world community. He might just as well try to repeal the multiplication tables. What man can and must do is to expand his understanding of those laws and to make these laws our allies and not our enemies."

It is generally conceded that men do not solve their problems but they must be smart and watch for the solution to materialize, then grab it.

Another statement by Mr. Baruch is interesting to dentists and to dentistry:

"...I do not believe that one can ignore economic or natural laws without paying for it.

"Every excess has its aftermath—its hangover."

We are in an age of technology and specialization that to some of us who have grown a little older are matters of no little concern, notwithstanding the dictum of John Stuart Mill, that each generation will do a better job though in a different way.

Men are technicians, finger educated, and specialists, limited (ly) educated, and are not looking with sufficient clarity of thought on the whole of their scientific education that their technical procedures may be properly qualified and that the personal relationship may be properly established. Therefore, it appears well to bring up a belated knowledge of history philosophically interpreted.

Since the beginning of professional education, there have been until recent years arguments as to whether professional schools
should be incorporated into universities, the university being a rendezvous of scholars, and the scholarly attainments of professional men and their teachers have been questioned. Not so, now—that has been settled and dentistry is one of the university family. Is a profession in which one's life and time are engaged—a vocation, i.e., something by which he makes money or makes his living? Or is a profession a calling, that to which he has received an inner urge that prompts him to do something for people as a first impulse without too great regard as to what he may take from them?

Now comes a series of words with their connotations and which are worthy of your thought: (See Webster’s Dictionary)

**PROFESSION**—That of which one professes knowledge: the occupation, if not merely commercial, mechanical, agricultural or the like, to which one devotes one's self; a calling in which one professes to have acquired some special knowledge used by way of either instructing, guiding or advising others, or of serving them in some art, calling, vocation or employment.

**VOCATION**—A calling to a particular state, business or profession. Regular or appropriate employment.

**BUSINESS**—That which engages time, attention or labor as a principal serious concern or interest. Any particular occupation or employment habitually engaged in for livelihood or gain. Mercantile transactions: buying and selling: traffic in general. A commercial or industrial enterprise or establishment.

**OCCUPATION**—That which engages or occupies one's time and attention; the principal business of one's life.

**CALLING**—A divine summons or prompting to a particular act or duty. The persons collectively engaged in any profession or employment.

**COMMERCE**—Business intercourse, especially the buying and selling of commodities and particularly the exchange of merchandise on a large scale between different places or countries.

**AVOCATION**—That which calls one away from one's regular employment or vocation; a diversion. An avocation may be carried on for no pecuniary gain, although there may be some payment received.

It will be well for the student to study further and determine the meaning of such words as labor, task, job, position, work, employ-
ment and trade. These all have their meanings and will offer some suggestion, mentally at least, of value to one who continues making his living in this work-a-day world. And finally,

III. WHAT IS EDUCATION?

Education may be defined as both the acquisition of knowledge and the diffusion of knowledge, taking an important place as a vital element in all phases of life even to the direction of those phases.

Or Education may be defined as “the aggregate of all the processes by means of which a person develops abilities, attitudes, and other forms of behavior of positive value in the society in which he lives.”


Calendar of Meetings

CONVOCATIONS
September 30, 1956, Atlantic City, N. J.
November 3, 1957, Miami, Fla.
November 9, 1958, Dallas, Texas
September 20, 1959, New York, N. Y.

BOARD OF REGENTS
October 15 and 17, 1955, San Francisco, Calif.
February 5, 1956, Chicago, Ill.
The San Francisco Session
Fairmont Hotel

As usual, a full day will be devoted to the activities of the American College of Dentists in San Francisco, on Sunday, October 16, 1955.

At the morning session, President Ferguson will report on his stewardship and greetings will be brought from Norway by Dr. Knut Gard. Then, there will follow eleven ten-minute papers by chairmen of standing committees, which will highlight the efforts the College is making in "Meeting the Challenge of a Changing World."

In the afternoon, the convocation address will be delivered by Dr. Robert Gordon Sproul, President of the University of California. Following the conferring of fellowships, the William John Gies Award will be presented to three Fellows of the College.

Dr. Wendell L. Wylie will speak at the luncheon on the subject "California and Some Rugged Individualists."

Following the dinner and the installation of new officers and regents, Dr. Pruden will deliver his Inaugural Address.

The meeting will be closed with a presentation by Mr. John Speegle, radio and television commentator and humorist.

It is believed that we will have ample accommodations this year for all who wish to attend the luncheon and dinner functions. However, early reservations are desirable. When the reservation slips are received from the Secretary's office, with the program of the meeting (about September 15), it will be appreciated if the members will fill out the reservation slip and return it at once with check to cover. Your tickets will be held for your pick-up on Sunday when you register.

O. W. Brandhorst, Secretary

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Committees 1954-1955

Auxiliary Dental Services
WILLIAM D. McCARTHY, Chm. 1955
ETHELBERT LOVETT, Vice-Chm. 1956
MERRITTE M. MAXWELL ............. 1957
PAUL L. CHEVALIER ................. 1958
ALLISON M. STINSON .............. 1959

Financial Support for Dental Education and Research
EDGAR W. SWANSON, Chairman 1955
FRED B. OLDS, Vice-Chairman 1956
LESTER W. BURKET ............. 1957
EARL B. HOYT ............... 1958
DOYLE J. SMITH ............ 1959

Education
WILLIAM F. SWANSON, Chairman 1955
ROY G. ELLIS, Vice-Chairman 1956
PHILIP E. BLACKERBY, Jr. .... 1957
FRANCIS J. CONLEY ............. 1958
HARRY B. McCARTHY ............. 1959

Health Relationship
E. HORACE JONES, Chairman .... 1955
JOHN STEEN, Vice-Chairman .... 1956
WILLIS R. OSMUN .......... 1957
HORACE L. CARTEE .......... 1958
JAMES E. JOHN ............. 1959

Human Relations
JOHN E. GURLEY, Chairman .... 1955
WILLARD C. FLEMING .......... 1956
Vice-Chairman
HARRY S. THOMSON ............ 1957
WILBUR McLARIN DAVIS ....... 1958
HAROLD H. HAYES ............ 1959

Journalism
CARL O. BOUCHER, Chairman .... 1955
LeROY E. KURTH, Vice-Chm. .... 1956
WALTER A. WILSON .......... 1957
THOMAS F. McBRIE .......... 1958
HARRY LYONS ............. 1959

Necrology (one year appointment)
GERALD A. MITCHELL, Chairman
GERALD A. DEVLIN
IRVING M. STRANSKY

Nominating (one year appointment)
EDGAR H. KEYS, Chairman
A. H. MERRIT L. W. THOM
R. F. SULLIVAN F. T. WEST

Preventive Service
CARL L. SEBELIUS, Chairman .... 1955
WALTER J. PELTON, Vice-Chm. .... 1956
RUTH MARTIN ............. 1957
D. ROBERT SWINEHART ......... 1958
DOROTHEA F. RADUSCH ......... 1959

Prosthetic Dental Service
WALTER J. PRYOR, Chairman .... 1955
HERBERT L. ESTERBERG .......... 1956
Vice-Chairman
LUZERNE G. JORDAN .......... 1957
ALLISON GALE JAMES .......... 1958
VICTOR L. STEFFEL .......... 1959

Public Relations
JOHN F. BURKE, Chairman .... 1955
FREDERICK C. ELLIOTT .......... 1956
Vice-Chairman
ALLEN O. GRUEBBEL .......... 1957
KENNETH R. GIBSON, Sr. ..... 1958
MARION F. JARRELL .......... 1959

Research
HENRY A. SWANSON, Chairman .... 1955
THOMAS J. HILL, Vice-Chm. ..... 1956
MYRON S. AISENBERG .......... 1957
WM. G. MCINTOSH ............. 1958
MAYNARD K. HINE .......... 1959

Student Recruitment
WENDELL L. WYLIE, Chairman .... 1955
RALPH J. BOWMAN, Vice-Chm. ..... 1956
FRANK P. BOWYER, Jr. ....... 1957
J. WALLACE FORBES .......... 1958
FRANK J. HOUGHTON .......... 1959

Socio-Economics
FRITZ A. PIERSON, Chairman .... 1955
THOS. R. MARSHALL, Vice-Chm. ..... 1956
DONALD H. MILLER .......... 1957
WM. B. RYDER, Jr. .......... 1958
RICHARD C. LEONARD .......... 1959

Continuing Educational Efforts
LEE ROY MAIN, Chairman ........ 1955
WILLARD OGLE, Vice-Chairman .... 1956
CYRIL F. STRIFE .......... 1957
GEORGE W. REDPATH .......... 1958
LESTER E. MYERS .......... 1959

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Sections, American College of Dentists

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WISCONSIN: Leonard C. Alexander, Secretary, 604 N. 16th St., Milwaukee, Wis.
Pledge of the American College of Dentists

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 proprietary interest, in commercial corporations supplying dental products or services to either the profession or the public; 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 that 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.

I subscribe to this Pledge of the American College of Dentists.