

Editorial

The Future of Medical Psychology

There are some men so constituted by temperament or by training or both, that the worst thing which can happen to a good cause is that they should get hold of it. Such men are moody, irritable, and intolerant of the views of others; they do not distinguish between knowledge and mere opinions; they are

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forever mistaking metaphors for proofs, and in the advocacy of their beliefs they repel rather than gain adherents. Not that they intend to do these things; it is rather that their enthusiasm gets the better of their judgment. Should you tell them that their propaganda is marked by party spirit they are surprised, perhaps even hurt; yet all the while their cause is really good. Medical psychology is a good cause which has suffered in this way.

...There is still in medical psychology a great mass of information which can be turned to practical uses. To seek out the more or less hidden mental causes of various bodily symptoms; to investigate the mutations and permutations of instinctive tendencies which hinder or frustrate personal development; to resolve certain moral conflicts which make for unhappiness; to give point and direction to the will; to rob some fears of their significance and to dull the edge of others, all this and more is the business of medical psychology.

Failures there will be, and those too in

plenty, but whoever justly condemned a thing because it is not always successful? As well cease to operate because some patients do not recover. Moreover, medical psychology is nothing esoteric; it ought to be and can be part of every physician's therapeutic outfit. And yet we are perhaps not far wrong when we say that the helps of medical psychology are not utilized as freely as they might be. There is no more difficulty about acquiring a fair working knowledge of medical psychology than there is in acquiring knowledge of the principles of immunity, perhaps not as much. If our professors of therapeutics spent less time discoursing about the supposed virtues of musk and more

on the elucidation of some simple psychological procedures the difficult task of physicians would be rendered a little easier.

We do not wish to enthuse over much, for assuredly a becoming restraint ought to be with us always. Yet we cannot help thinking that here is a field of fertile endeavors where the workers are all too few. And lastly may we indulge the hope that when the history of twentieth century medicine comes to be written, the chapter on psychology will be as impressive as the ones on physics and chemistry? Our own foibles will be forgiven us because we have played successfully, in however modest a way, the role of ancestors. ❖

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Miscellaneous

Growth of medical science gives rise to new journals

The rapid development of the special branches of medical science is in no way better illustrated than in the establishment of journals dealing with the specialties. The New Year has seen the inauguration of several such journals, at least three of which have come to our desk. We extend our best wishes for a long and successful career to:

The American Review of Tuberculosis. Monthly.
First edition March 1917.

Endocrinology: The Bulletin of the Association for the Study of the Internal Secretions. Quarterly.
First edition Jan. 1917.

The Journal of Urology. Bimonthly.
First edition Feb. 1917.

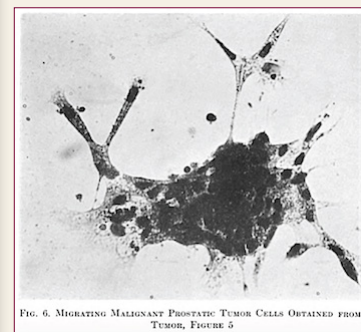
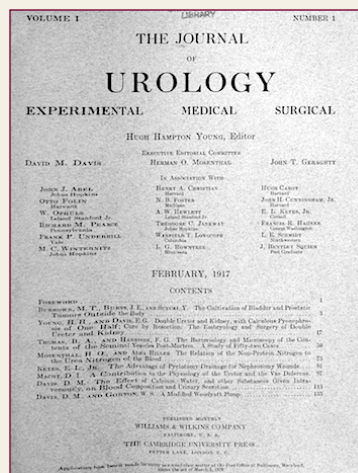
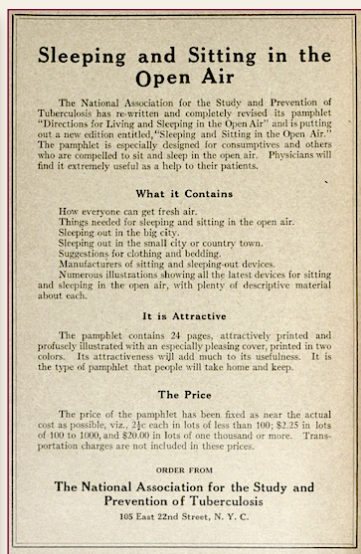
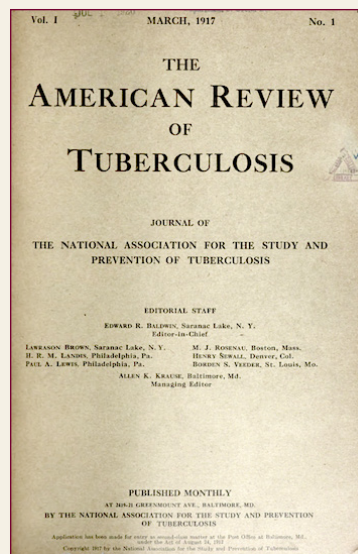
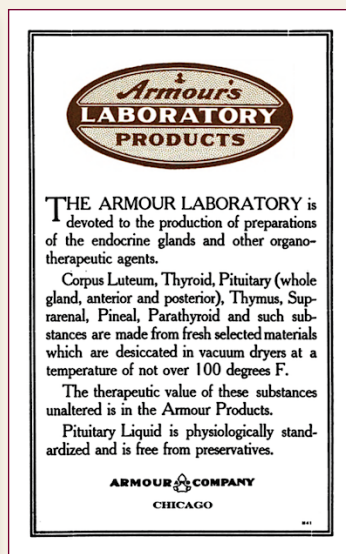
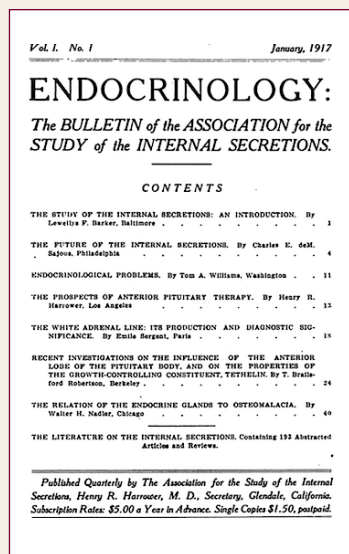


FIG. 6. MIGRATING MALIGNANT PROSTATIC TUMOR CELLS OBTAINED FROM TUMOR, FIGURE 5

The cover and first pages of the new journals on endocrinology, tuberculosis and urology, which arrived at the *Rhode Island Medical Journal* offices this month for review.



District Societies

Dr. George A. Matteson and Dr. Lucius C. Kingman gave interesting descriptions of their experiences with the Harvard Unit in France to the **Providence Medical Association**. Dr. Matteson described the organization of the British Base Hospital at which the work of the Harvard Unit has been carried on since the early part of the war. Dr. Kingman described the variety of cases treated and some of the methods used.

Ambulance Corps

William H. Reese, '17; Frederick L. Lathrop, '19; and Hugh W. MacNair, '17, Brown University, will sail on May 17 to join the American Ambulance Corps in France.

State Board of Health

An examination for the license to practice medicine in this state will be held by the State Board of Health April 5-7, 1917.

Appointments

Dr. Dana E Robinson has recently been assigned to Providence as **United States Health Officer and Port Physician**. He succeeds Dr. Edward R Marshall, who has been assigned to New York.

Dr. J. Edward Tanguay of Woonsocket has been appointed to the **Board of Parole**.

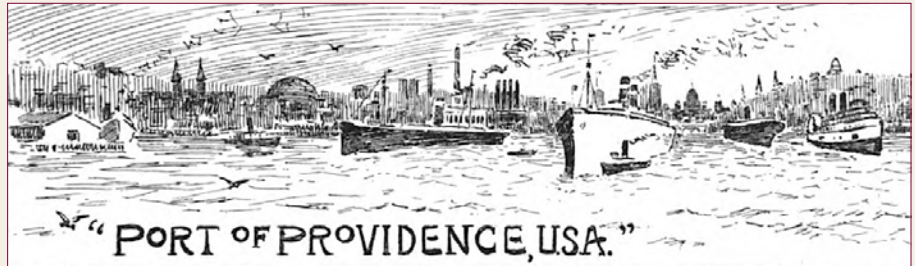
Dr. John W. Keefe has been appointed to the new **Penal and Charitable Commission**.

Hospitals

Rhode Island Hospital expands infant's ward; to hold flag-raising children's event

An addition to the infants' ward to accommodate 14 patients and to be used for the treatment of feeding cases is completed.

A flag-raising ceremony will be held on April 19, to be attended by all children who can be moved outdoors. Mr. Amos will act as master of ceremonies, which will consist of the singing of patriotic songs.



PROVIDENCE MAGAZINE, MAY 1917.

This sketch of the Port of Providence appeared in the Providence Chamber of Commerce's monthly magazine in May 1917.

The south ward has recently been equipped with a system of cubicles or isolation booths which are stalls with glass partitions so arranged that the children can be effectively separated for several days after admission to the hospital.

Providence City Hospital opens outpatient department

The outpatient department of the city hospital at the Delaine Street Nursery will be opened early in April. The Department of Medicine physician in charge is **Dr. SH Matthews**.

The building in which the outpatient

work is to be done is the property of Hope Day Nursery and connected with the Grace Memorial Home on 2 Delaine St. Since May 1915 the City Hospital has conducted a clinic for tuberculosis in a room at the home. This clinic has attracted interest in that section of the city, and the late Lyra Nickerson within the year gave money for the erection of a two-story building. There are seven rooms and the waiting room on the second floor, and all are to be devoted to this outpatient work. City Hospital was asked to conduct these clinics and the Board of Hospital Commissioners voted to do so. ♦

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April 1917: U.S. enters World War I

Rhode Island Hospital forms Naval Base Hospital No. 4

MARY KORR
RIMJ MANAGING EDITOR



Spectators line both sides of the street in 1917 to watch the 1st R.I. Ambulance Company during a mobilization parade in Providence.

On April 6, 1917, the United States joined Britain, France, and Russia to fight in World War I. In the April 1917 issue of the *Rhode Island Medical Journal* the editors reported that Rhode Island Hospital had nearly completed the organization of a naval base hospital approved by the War Department. The unit would consist of 250 beds, 10 medical and surgical physicians, one dentist, 40 nurses, 14 nursing assistants, several pharmacists and a cadre of civilians to work as clerks, cooks and orderlies.

Dr. George A. Matteson was named director and chief of the surgical section and **Dr. Halsey DeWolf**, chief of the medical service. **Grace McIntyre** was appointed chief of nursing.

The American Red Cross raised \$17,000 to outfit the hospital. When the United States entered the war, the RIH unit No. 4 was taken into government service. Initially, medical staff members trained a corps of hospital apprentices from the U.S. Navy. The training included instructions in dressings, bandaging, care and handling of patients, and demon-

strations of laboratory and X-ray protocols.

By September 1917, according to a report in the *Rhode Island Medical Journal*, the unit increased the number of beds to 500, and added 8 physicians and 20 nurses to the staff. The Journal reported that the equipment for the hospital was practically complete and stored in the basement of Rhode Island Hospital. According to the report, "generous friends have donated three motor ambulances. One of these ambulances is now on exhibition in the windows of a motor agency in Providence."

Dr. Matteson, a U.S. Naval Reserves Lieut. Commander, was called to active duty. Two members of the unit, **Dr. Roland Hammond**, and **Dr. Alex M. Burgess**, took courses prior to being sent overseas. Dr. Hammond attended the School for Instruction in Military Roentgenology at Cornell Medical College. Dr. Burgess attended a school for laboratory methods

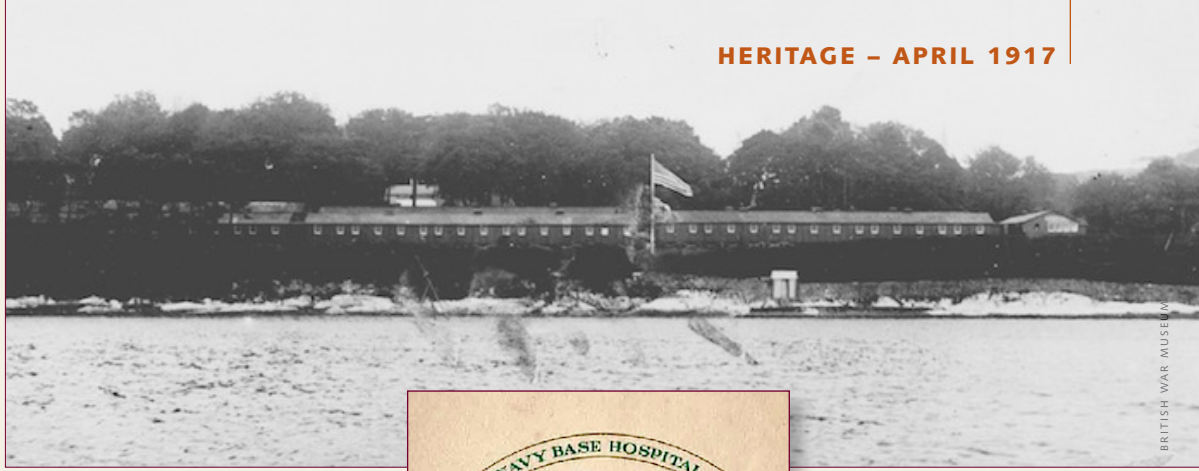
at the Rockefeller Institute under Dr. Simon Flexner.

The RIH unit was then sent to Queenstown, Ireland, working alongside U.S. Naval Hospital Base No. 6. in the spring and fall of 1918. The hospital consisted entirely of prefabricated barrack-like buildings shipped from the United States



Medical personnel from Rhode Island Hospital served in the Navy Base Hospital No. 4 in Ireland.

Rhode Island Hospital's Naval Base Hospital No. 4 worked in Queenstown, Ireland, with U.S. Naval Base Hospital No. 6. The hospital consisted of two operating pavilions, seven wards, barracks, and supply rooms.

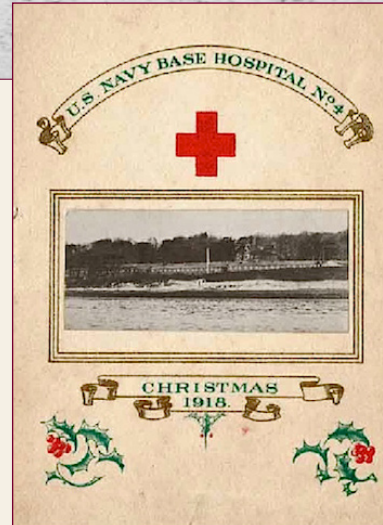


BRITISH WAR MUSEUM

in May 1918. The hospital opened Oct. 11, 1918. Within a few days after opening its wards were filled with victims of the influenza epidemic, according to Navy archives.

In the *History of American Red Cross Nursing*, Head nurse Grace McIntyre recalled the unit's first patients.

"Our hospital was opened thirty hours after our arrival, to meet an emergency caused by the *Aquitania*, which cut the *Shaiv*, a destroyer, in half. Several men had been killed and about twenty, I think, injured. 14 Dr. Carpenter, our commanding officer, was much pleased with the manner in which the nurses threw themselves into the work after their strenuous voyages, both across the Atlantic and the Irish Sea." ❖



Medical personnel sent this Christmas card from the RIH unit in 1918.

73 YEARS AGO – APRIL 1944



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American Red Star Animal Relief forms first branch in Providence

MARY KORR
RIMJ MANAGING EDITOR

In the early spring of 1917, The American Red Cross formed a local branch in Providence to raise funds for the war effort. What is less known is that at the same time the American Red Star Animal Relief national organization also started a local branch in Providence – the first in the nation – to assist the U.S. Veterinary Corps and raise funds for the care of sick and disabled Army animals serving in the war effort. Horses and mules were instrumental, especially in the early days of the war, in pulling ambulances of wounded soldiers to field hospitals. The local press reported that more than \$200,000 worth of horses and mules were an integral part of the Allied European forces.

The American Red Star Animal Relief organization began in April 1916, when the American Humane Association offered its services to the War Department for “the purpose of rendering assistance in the event of war to wounded animals employed by the Army.”

Secretary of War Newton D. Baker approved of the initiative and invited the Society to launch efforts similar to those of the American Red Cross. “Without horses it would be practically impossible to support an Army on the fighting field,” he said in giving his endorsement. “The work is a most commendable, patriotic and humanitarian one and I hope that it will be strongly supported all over the United States...the saving of a horse often means the saving of a soldier. Without horses and mules the Army would be paralyzed on foreign fields where conditions are such that any form of motor traffic is not to be relied upon with the certainty that the faithful animals give,” announced the Secretary.

The Society identified the areas of greatest need, which included establishing veterinary field hospitals, and purchasing medical supplies

and equipment to treat injured animals.

In total, more than 240,000 draft and combat horses, mules, and dogs were used by the U.S. Army during the war. The Humane Society noted that their “bravery and endurance were equaled only by the courage and the skill of their riders.”

Perhaps the most famous war horse of the era was Kidron, a sorrel horse with white hind socks ridden by the commander of the American Expeditionary Forces, Gen. John J. ‘Black Jack’ Pershing, and upon whom Pershing rode on in victory parades in Paris after the war. Gen. Pershing transported Kidron home on a ship, but the U.S. Dept. of Agriculture placed the horse in quarantine for several months, much to Pershing’s dismay, who had wanted his horse to appear with him in numerous victory parades around the country.

The *New York Times* reported: “While his master is being idolized by a grateful people in the principal cities of the nation, Kidron will be forced to play the ignoble role of a patient in the quarantine quarters of Newport News, where veterinarians will watch to determine if he has a contagious disease. The misfortune of Kidron is keenly felt by General Pershing and the public, who had looked forward to seeing the General ride his charger at the head of parades in his honor...a war mount has been considered as second only to the General himself in importance.” ❖



Gas masks for man and horse demonstrated by American soldier, 1917.

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