THE ART AND SCIENCE OF MEDICINE

This twentieth anniversary meeting of the American Society for Clinical Investigation marks the active inauguration of a policy which has for its purpose the perpetuation of the youthfulness of the organization. The members who to-day retire to the emeritus list are those who formed the society and on whose shoulders for many years fell the burden of directing its course. During this score of years in this country has occurred practically the entire growth of medical clinics as we understand them to-day. The physical organization and intellectual direction of most of these clinics has fallen to the lot of our early members. As a result of this pioneer work the younger members of this society have at their disposal facilities for following careers as clinical investigators scarcely equalled anywhere in the world.

But points of view are probably more important than mere places for work. It is sometimes well to stop and survey our territory, our methods and our attitude. An anniversary event, such as we are to-day celebrating, offers an opportunity for such a survey.

Not unfamiliar to you are the terms “science of medicine” and “art of medicine.” Usually they are expressed in a manner which implies the existence of two mutually exclusive fields or manners of endeavor. It is true that custom gives meaning to words or phrases; but this is no excuse for allowing these phrases to fix unalterably our attitude towards the subjects which they symbolize.

In the expression “art and science of medicine” at least three separate ideas are included: medicine, art and science; hence it becomes desirable to attempt to define these terms. Medicine is that department of biology which considers disease in all its aspects. This assumes that disease is a departure from normal living, i.e., from physiological processes. Correctly speaking, it would exclude from study the manifestations of aging, for these in a strict sense must be considered as physiological, i.e., normal to life. But such definitions must be generally inclusive rather than specifically exclusive. In a field as broad as medicine we can define the aims, but the boundaries and ramifications must not be limited.

1 Presidential address before the American Society for Clinical Investigation, Washington, D. C., April 30, 1928.

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