The manufacturers of Listerine are proud of Listerine—because, it has proved one of the most successful formulae of modern pharmacy.

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Pharmacal elegance, strict uniformity in constituents and methods of manufacture, together with a certain superiority in production of the most important volatile components, enable Listerine to easily excel all that legion of preparations said to be "something like Listerine", including the Liquor Antisepticus Compositus of the U. S. Pharmacopoeia, which is generally recognized as an undeclared tribute to Listerine.

The success of Listerine is based upon merit
The best advertisement of Listerine is—Listerine

Lambert Pharmacal Company
St. Louis, U. S. A.
THE
MEDICAL MISSIONARY

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FEBRUARY, 1909

THE CONFERENCE

The Interdenominational Medical Missionary Conference which took place last month was pronounced by all who attended it to be a grand success.

It was certainly the most important gathering of its kind ever held in the country. The bringing together of such a number of veteran workers from so many lands, and representing such varied denominational interests, was in itself a great triumph and furnished means for encouragement and rejoicing.

Another pleasant feature of the gathering was the presence of such veterans as Bishop Thoburn of India, Dr. Nassau of West Africa, and Dr. Hartwell of China. The combined services of these three men has totaled nearly a century and a half. And seated between them at the opening session were two elderly ladies, widows of veteran medical missionaries, the one being Mrs. James L. Phillips of India and the other Mrs. Moses P. Parmelee of Turkey. The total years' service of the five amounts to two hundred and forty years.

To see these veterans was an inspiration; and to listen to their burning words of appeal on behalf of the cause of medical missionaries, and to grip them by the hand and speak with them was indeed a great privilege.

It was hoped that the veteran Dr. J. C. Hepburn, who went to China in 1841, and Dr. Clara Swain, the first woman medical missionary, who went to India in 1870, would have been present, but their enfeebled condition forbade the taking of so long a journey from their homes. A special feature of the Conference was not only to accord those in attendance a hearty reception, but to remember those unable to be present; and special letters were sent individually to Dr. Hepburn and Dr. Swain, and one to all medical missionaries the world over.

One of the most pathetic incidents of the Conference was the reading of the Honor Roll of Departed Medical Missionary Heroes, numbering in all over one hundred devoted men and women.

The subjects considered were full of interest, one whole session being given up to hearing of the condition of women in non-Christian lands—all the speakers, six in number, being women.

Each session was devoted to the consideration of some aspect of medical missionary effort, and a great deal of valuable, up-to-date testimony was given regarding the importance of medical missions and the need for their development and multiplication.

For the twofold purpose of sharing with our medical and non-medical missionary brethren the good things that were enjoyed by those present, and further to inform the young people of the country through our Young Men's and
Young Women's Christian Associations, a full account of the Conference will be given in this and succeeding numbers.

Surely nothing else could be so germane to the aim and purpose of this journal and its promoters than in this way to disseminate the statements presented and appeals made.

It was a pleasant sight, too, to see all the delegates wearing the emblem and colors of the Conference, i. e., the double cross and the colors of scarlet and white. The red cross is accepted universally today as the badge or sign of medical aid; and while the medical missionary adopts this and follows its emblematic teachings, he also aims at the spiritual good of his patients, as set forth by the white cross of St. Andrew backing the one in red, Andrew being the first man to bring another man to Christ, according to the Gospel record.

One thing was a matter of regret,—perhaps the only one, too,—that was that the list of Departed Heroes was not more full and perfect, and the editors will be glad to be furnished with any additional names and other data to those given on the list.

While welcoming and honoring those yet able to engage in active service, we must never forget the brave men and women—our predecessors—who did so much to lay the foundation of the noble cause of medical missions.

**PERSONNEL OF THE PHOTOGRAPH**

Those on the floor in front are children of missionaries, and reading from left to right, are as follows:

- Frank and Lila Frederiekson, Kongo.
- Jennie Chappell, Japan.
- Miss Ruth Parmelee, Turkey.
- Polly and Doreas Dye, Kongo.

The twelve persons seated on the first row are:

- Mrs. Peter Frederiekson, Kongo.
- Mrs. Joseph Clark, Kongo.
- Dr. G. D. Dowkontt, Secretary.
- Rev. J. B. Hartwell, D. D., China, 1856.
- Mrs. Moses P. Parmelee, Turkey, 1863.
- Mrs. James I. Phillips, India, 1864.
- Dr. J. H. Kellogg, Chairman.

- Mrs. W. Y. Jones, Japan.
- Mrs. Royal Dye, Kongo.

Those in the second row are:

- Miss Ella C. Bond, Assam.
- Miss Anna E. Long, Assam.
- Mrs. C. W. Hall, China.
- Mr. J. H. Orbison, India.
- Miss Eva McNaughton, Turkey.
- Miss Ruth Woodside, West Africa.
- Dr. Emily D. Smith, China.
- Miss E. M. Soper, Japan.
- Rev. B. Chappell, Japan.
- Miss Rose Armbuster, Japan.
- Rev. W. Y. Jones, Japan.
- Miss L. Rolstone, China.
- Mrs. H. V. S. Pecke, Japan.

The third row is composed of:

- Miss Katherine Gerow, India.
- Mrs. H. P. Allen, Oberlin.
- Mrs. A. L. Kennan, India.
- Mrs. James P. McNaughton, Turkey.
- Mrs. G. D. Dowkontt.
- Mrs. A. F. Grant, Egypt.
- Mrs. I. L. Stone, India.
- Mrs. R. M. Winget, wife of Secretary.
- Mrs. R. S. Hambleton, Turkey.
- Dr. Emma T. Miller, Persia.
- Miss J. S. Farwell, Chile.

The back row of men are:

- Rev. Peter Frederiekson, Kongo.
- Rev. Victor, India.
- Dr. Andrew F. Grant, Egypt.
- Rev. Mathewson, Japan.
- Dr. J. H. McCartney, China.
- Rev. M. C. Wilcox, Ph. D., China.
- Rev. Winget, Secretary.
- Dr. R. S. Hambleton, Turkey.
- Rev. John H. Freeman, Siam.
- Rev. W. B. Boomer, Chile.

In addition to those composing the group picture, the following were present during the Conference:

- Mr. R. Methany, Turkey.
- Mr. A. Hambleton, Turkey.
- Mrs. John H. Freeman, Siam.
- Mrs. B. Chappell, Japan.
- Mrs. J. A. Hanna, Chile.
- Rev. John A. Brunson, Japan.
- Miss Catherine Seaper, Venezuela.
- Dr. A. J. Read, Society Islands.
- Mrs. Foster, S. E. Africa.

Total, sixty missionaries and their children.

The following denominations were represented: Presbyterian, twelve; Methodist, eleven; Baptist (North), ten; Baptist (South), one; Congregational, nine; Church of Disciples, five; Free Baptist, three; Evangelical Lutheran, three; United Presbyterian, two; Reformed (Dutch) Church, one; Reformed Presbyterian, one; Free Methodist, one; Union Church, one. Total denominations represented, thirteen.
The Interdenominational Medical Missionary Conference

BATTLE CREEK, MICHIGAN, JAN. 19-21, 1909

PRESIDENT
BISHOP JAMES M. THOBURN, D. D.
India, 1859

HONORARY PRESIDENT
REV. JAMES C. HEPBURN, M. D., LL. D.
China, 1841; Japan, 1859

VICE-PRESIDENTS
REV. R. H. NASSAU, M. D., D. D.
Africa, 1861

REV. J. B. HARTWELL, D. D.
China, 1858

Committee of Arrangements

CHAIRMAN
JOHN H. KELLOGG, M. D.

SECRETARY
GEORGE D. DOWKONNT, M. D.

ASSOCIATE SECRETARIES
R. H. HARRIS, M. D.
GEORGE C. TENNEY

The above Conference convened in the Battle Creek Sanitarium. It was in many respects a most remarkable and unique gathering. The President, Bishop Thoburn, India, 1859, and the two Vice-Presidents, Rev. Dr. J. B. Hartwell, China, 1858, and Rev. R. H. Nassau, M. D., D. D., West Africa, 1861, representing a total of a century and a half of service. These three men, Methodist, Baptist and Presbyterian, respectively, from their three fields of labor, were thus brought together as never before, and each came over a thousand miles to attend the Conference, Dr. Hartwell coming from South Carolina, and the other two from Pennsylvania. There were sixty missionaries present, representing thirteen denominations, and twelve mission fields.

The opening session was a very joyous one, not only the missionaries being present, but over fifty students of the Medical Missionary College, and a full attendance of the local ministers and other friends. It was held in the beautiful Sanitarium chapel, where all the meetings convened. Preceding it, a generous luncheon was provided in which over one hundred and fifty participated, welcome being accorded the guests by Dr. Kellogg, the head of the Sanitarium.

Following the “Words of Welcome” accorded the guests, and responded to by the veterans, Dr. Nassau, Dr. Chappell, and Bishop Thoburn, time was given to mention and honor those not present at the Conference.

The Honor Roll of Departed Medical Missionary Heroes was read by the Secretary, and some letters submitted and approved addressed to the veteran Dr. Hepburn, Dr. Clara Swain, Miss Var- tan of Nazareth, and one to all the Medical Missionaries throughout the world.

A detailed report of the Conference follows, which is full of interest, and is doubtless the best collective testimony ever given upon Medical Missions.

FIRST SESSION

Tuesday, January 11, Afternoon, 3:00 to 5:00
Preceded by Prayer Meeting, presided over by Bishop James M. Thoburn, D. D.

After singing the Doxology, Bishop Thoburn read the 72d Psalm, and the grand old hymn, “Our God, Our Help in Ages Past,” was sung, followed by prayer offered by Dr. Nassau, Dr. Chappell, and Bishop Thoburn.
The Chairman: I have now the pleasure of introducing Dr. Kellogg, who has some words of welcome, I believe, for the Conference.

Dr. Kellogg: Mr. Chairman and Friends: I assure you it is a very pleasant task which is assigned to me by your secretary to say a few words of welcome to you. Some forty years ago when a little company of men, about a dozen, put their purses together and invited a few others to join them, and started a work upon this hill in a little two-story cottage farmhouse, I am sure that none of them had any expectation that such a day as this would ever come. The purpose of these men was truly altruistic; it was **REALLY A MISSIONARY ENTERPRISE**, although it was narrow in its scope and was unfinished and undeveloped even in its recognized objects; but as time went on, the enterprise grew, its purposes enlarged, and the scope developed, so that ten years later when I took charge of this institution—some thirty-three years ago—there was a good start. We did not have very much else however. There were twelve patients and twenty helpers, a few cottages, and great opportunities. I was interested in devoting my life to this work because I understood it to be altruistic, Christian, philanthropic and broad in its spirit, and reaching out to Christian people of all denominations and ready to co-operate with all Christian people. Our work has gradually gone on and developed. In a few years we had to have larger buildings, and then still larger ones; and by and by a fire came and swept them all away; then we had the task of erecting another building. This institution has been going through vicissitudes all the time, difficulties and perplexities almost beyond belief. As I was saying to a friend of mine the other day who has been well acquainted with our work from the very day I came into this institution, I saw nothing but a blank wall staring me in the face. Every step forward has been in the direction of **APPARENTLY UNSURMOUNTABLE DIFFICULTIES**.

It has not seemed possible to go ahead and do the things that must be done, and there have been always a great number of people looking on and saying, "It is impossible," "It is absurd." I remember very well when our first building was put up here, I heard it was called about the town, "Dr. Kellogg's folly." That was our first building, which was erected just thirty-one years ago. And when the present building was dedicated, I was told by a friend that a very wise-looking gentleman stood out upon the street and looked up saying, "Another Dr. Kellogg's folly."

Now, my friends, if there had been nothing more than Dr. Kellogg in this work, if there had been nothing more than human agencies in it, it would have been folly, because from a business standpoint, a financial standpoint, a human standpoint, it was perfectly absurd to undertake to do what the management did in erecting this building; and the same might be said of the other buildings before. The work that has been done has always been in the face of difficulties. I am only mentioning this so you may know how much **this day means to us**. It is, as I said at the dedication day when I stood on the front porch and made a few remarks: When this institution was built, the management BUILT IT ON THEIR KNEES.

Day by day we asked God to help us through the difficulties, for every day we were surrounded with difficulties so great we did not know how to get through them. And I may say the same thing is true to-day. But we have been going straight ahead over impassable roads so long, and we have been walking right straight toward a blank wall for so long a time, that we have come to believe and to know that God has footprints in the seas, a path in the great sea—that where we can not see, he has opened the way—and it is because it had a missionary purpose and because I believed in its missionary purpose, that I have been willing to stand here under pressure that it has sometimes seemed would crush my poor brain into atoms.

Now, we have had for the last five years particularly, a most distressing and perplexing time. We could not see every day what Providence meant by leading us along such roads, could not
see what was coming; but there has always been before me exactly what we see to-day—a time when the Battle Creek Sanitarium might be a recognized headquarters for missionary enterprise, for missionary effort, not only in the home field, but in foreign fields, in every field. Fifteen years ago I remember.—our superintendent of nurses, Mrs. Foy, will remember also,—when we started a missionary training-school for nurses, and we adopted a rule that no young man or young woman should be admitted to our training-school for nurses unless he would agree to devote at least five years of life to missionary work; and those who were here at that time remember what a struggle we had, and how hard our nurses had to work. We sometimes had nurses doing double duty right along, day after day, week after week, because we could not get enough Christian young men and women who were willing to devote their five years of life to missionary effort to constitute our corps. Our work grew rapidly, more rapidly than our classes did, but by and by we had the satisfaction of seeing more than three hundred young men and women who were all willing to devote not only the five years, but their lives, to missionary effort. But it was a struggle. We found many of our plans did not carry through as we expected. We found obstacles in the way; but we had the satisfaction of seeing the whole generation that has been spent by these noble men and women in foreign fields, away from the privileges and the luxuries and the comforts of home—it is a proud day when we are able to entertain them as our guests; and I assure you that the management feel highly honored at having under their roof

**NURSES DOING DOUBLE DUTY**

When I look about here and see these splendid missionaries, these noble men and women who have gone out and devoted a whole lifetime to missionary work, giving their whole lives—fifty years in Africa—think of it!—away from civilization, as Dr. Nassau has done; fifty years in India, in that hot, trying climate, where Bishop Thoburn has been; and fifty years in China, where our friend Dr. Hartwell has labored,—the whole generation that has been spent by these noble men and women in foreign lands, nearly seventy medical missionary students who are here to be inspired by the lives and the experiences and the noble example of these men and women, making a missionary body of one hundred and thirty or more, which is beyond the most brilliant expectations I have ever dared to entertain; and I feel, as I said before, this is the proudest day this institution has ever known.

It seems that this plant which has been developing all these forty years is just beginning to blossom; and I trust it may blossom at least once a year in this same way; and we hope next time we shall have a longer time for preparation, and a larger convention. We want these missionaries all to feel at home under our roof, and trust that the atmosphere here will be congenial to them, and that they will come often to meet with us, and will send others here. I hope this association may be of mutual advantage. I certainly trust that our students will find this such a source of inspiration and of lasting encouragement to them, that not one of them will ever relinquish the purpose he has formed in his heart to give his life to this same noble work.

I have to thank these missionaries for thus honoring us with their presence
here to-day. I trust this Conference will be of great interest, and that it will be the beginning of still greater things. I am very sorry I shall not have an opportunity to spend all the hours with you, but I shall spend every moment I can possibly spare from my duties enjoying this occasion with you.

THE CHAIRMAN. BISHOP THORBURN: I might just "throw in a word" as we pass along. I would say that while sitting here and looking at the audience before me, it occurred to me that there are more persons in this room now (about 400 being present) in the interests of foreign missions than there were in the Presbyterian and Congregational and Baptist and Methodist churches in the United States WHEN I FIRST BECAME A MISSIONARY. That is, if those four churches could have called home their missionaries from China and from India and from Africa and from the islands of the sea and brought them all together, they would not have had an audience as large as this. You people of the present day can hardly realize what immense progress has been made during the past fifty years. We will now have further "words of welcome" from Rev. W. S. Potter, for the city and its pastors.

Address of Rev. W. S. Potter

Mr. Potter: Fellow Christian workers, when Dr. Kellogg told us that he had come through many trials and difficulties and deferred hopes to the most joyous day of his life, I could not but think that he had seen the travail of his soul and was satisfied. I have often wondered at the extent of his generosity and the variety of inventiveness and ingenuity of the hospitality of this institution; and I am sure since you have received such a cordial welcome from the Doctor to-day, preceded by the proffers of hospitality before, that you must feel your welcome formally assured; and it is scarcely necessary for me to detain you to assure you further of your status and place in that regard. However, I have been honored by being appointed to say a word for the pastors of the city, and it ought to be assumed without any word from me or any one else, that this is A GREAT DAY FOR THE PASTORS of our city, and that we are very, very glad indeed to have the profit and the inspiration and pleasure of your presence. If I were permitted to say the word that is nearest to my heart to-day, it would be that we owe you more than we can tell—our debt to you for what you have done for us at home, for ministerial life and aim and purpose and preaching—and I also recognize our debt to the students for what they are going to do for us.

Now, it seems to me that you who have been especially engaged in foreign missionary work have done several things for us ministers at home, for the church, and the people at home. One of them is that you have rediscovered and

RESTORED THE COMMISSION of Jesus Christ, "Go ye into all the world and preach the gospel to every creature." You have given to us more truly a world-view of the needs and intent and application and stability of the gospel. You have, like Ludlow, the English exile, said, "To whom God is a father, every land is a fatherland." Like John Wesley, you have said, "The world is my parish." You have said that Christianity has no headquarters; its center is nowhere; its circumference is everywhere. You have practically announced and proved that the commonwealth of God has no frontiers. You have also shown us that in God's intention and view his sky roofs over but one family, and that family is made up of all HIS CHILDREN IN ALL NATIONS.

Then, you have simplified the gospel for us. You have relieved it, in your practical work, of much that was cumbersome and is cumbersome to us—its speculations, philosophies and the like; and you have preached the simple gospel of Jesus Christ, because you are required to do so to meet the exigencies of the case in your work. You have reduced Christian doctrine to its lowest terms, which are also its highest terms. The truth of the godhead, the divinity of Christ, man,—his sorrows and his sins,—the necessity of the atonement, the personality of the Holy Spirit, the glory of
the cross and the promise of the crown,—those are

THE FUNDAMENTAL THINGS,

I believe, in the gospel of Jesus Christ. They are not the only things, and whatever else God has revealed to us in connection must be important; but you have magnified the essentials and you have minimized the non-essentials, and you have reduced denominationalism to its lowest terms. You have found, so I am informed, that it is absurd and ineffective and almost ridiculous to perplex and disturb and distract the heathen mind by telling them of half a dozen different kinds of Presbyterians, and half a dozen different kinds of Baptists, and I don't know how many different kinds of Methodists.

Then it has seemed to me that we owe you a great debt because we have had such splendid OBJECT-LESSONS IN HEROISM.

I speak with thoughtfulness when I speak in your presence. I would bring you no flattery; but when Thomas Carlyle wrote his "Heroes and Hero Worship," you remember he gave several types,—the hero as divinity, the hero as priest and prophet and king, man of letters, and poet, and warrior and the like. I take the liberty to add to Thomas Carlyle's list the hero as a missionary. Then it seems to me that we owe you much for the reflex action of our interest in the work; we owe you much because your faith has touched ours and revived it, and broadened it and deepened it. It seems to me that often you people must feel that you are almost ALONE WITH GOD OVER THERE;

that you have not the accessories of Western civilization and all those things upon which we lean—too much probably; and so you have lived with God, and you have lived from him, and by him, and in him and through him. And you have cast your bread upon the waters,—and, thank God, after many days it has returned. You have planted orchards, and the fruit is now evidently very abundant. These are some of the obligations that occur to my mind that we owe to those who have gone bravely and unreservedly into this great work. You have lost your lives, but you have found them. And Bishop Thoburn gave us all

A GREAT INSPIRATION AND UPLIFT

the other night in his sermon—he seemed somehow to impress us with the idea that better and larger things were imminent, that we were just on the era of the break of a greater day; and it is a great thing to think that after all the waiting and the hope deferred, that now we are going to see missionary work more wonderfully successful than in any part of the history of the past. I was thinking about the Panama Canal and how much time it has taken to prepare for the construction of it. The French tried it first, as you remember; then we took it up, and we had many engineers and surveyors, and we discussed different routes, and it is not finished yet, and millions and millions of money must be yet expended upon it; but now a day is coming—just the day before its completion, we will say—when everything has been attended to, and all the preliminary work and the construction have been finished, and that next day there will be a moment indeed,—just before the time when the Atlantic meets the Pacific, and when there shall be

A HIGHWAY FOR THE NATIONS

from one ocean to the other.

It seems to me that we are on the very daybreak of great things, and I feel thankful myself, as one of the pastors of this city, and one who is laboring in the home field in our own country that still needs much Christian work, as we know, that I am here to-day to share in the rejoicing and the hope and the promise of this missionary conference.

Address of Dr. R. H. Nassau

In response, Dr. R. H. Nassau, of Africa, spoke as follows:

Dr. Kellogg, members of the reception committee, Brother Potter and brethren of the ministry of Battle Creek, and friends of Battle Creek, properly to respond to your very generous courtesy, I feel as though the conditions in my speaking to-day ought to be Pentecostal in their linguistics. I do pray that they
may be Pentecostal in the presence and power of the Holy Spirit. Actually

THEY ARE PENTECOSTAL

in the nationalities represented. When, as the representative of seventy missionaries here to-day, I bring to you India, China, Japan and Assam, and then, going over to South America, Chile, and across to the islands, Hawaii; and then over to Europe, Turkey, and the great continent of Africa—North Africa up by the Nile, and West Africa, and the iniquitous Congo—and misty Labrador,—we bring all these to you here to-day. It is almost a repetition of the Medes and the Parthians, and the Greeks that gathered that day at Jerusalem. And if I should ask these brethren whom I have the privilege of representing to-day, I think they would suggest that I should come with some of the linguistic variety of the Pentecostal day; and it might be very interesting if the brethren would stand up and express their thanks to Dr. Kellogg and to this committee in languages that they could not understand, and yet with language which the face and the heart would tell meant thanks. Now, sirs and brethren, I am really distressed for a poverty of language. With almost three hundred thousand words in the English dictionary, I can not find the proper one to-day to say, Thanks. And so you must let me go back to the limited vocabulary of my people in Africa, with only five thousand words in their language, and say, Akara; for when the guest there goes to the host or hostess and says, “Akara,” he says, “You have surpassed me.”

Dr. Kellogg, you have surpassed us. And it will be hard work these coming three days for the rest of us to try to catch up to you in anything that we can do or say for you. I want to congratulate you, friends, who have welcomed us so very kindly, and congratulate ourselves, too, for this, that we are living in an era when philanthropy is almost synonymous with Christianity; that we are not living in a pagan era when the sick, the deformed, the aged, were cast aside in the forest, cast aside into the rivers, hurried off to an untimely grave, in order to be rid of them; that we are not living under Mohammedanism, where the very pilgrims on their way to Mecca to win the path to heaven, because they are going to Mecca pass by the fellow pilgrim that has fallen on the way, sick and faint, and leave it all to Allah and Kismet; but that we are living in a day when the hospital goes along with the church, and where one of the exponents of our Christianity is the hospital.

IN FOLLOWING THE NAZARENE,

we have followed also the Samaritan. I want to congratulate Dr. Kellogg, and it is not invidious also to add, Dr. Dowkontt, on what we see to-day,—my friend Dr. Dowkontt, one of the faculty of the medical missionary school,—I have wondered again and again how he has kept up that perennial cheerfulness of face and word and voice, when I know the cruel difficulties and trials that he has gone through in his efforts to establish an institution of the kind in New York,—and now that he has seen this day, I don’t want him to say, like one good man of old, “Now, Lord, let thy servant depart in peace, for mine eyes have seen thy salvation.” He has seen it, but may the Lord keep him with us for many days yet.

WHAT AN INSPIRATION,

what a splendid thing is this gathering! I have been in other conventions,—political, scientific, and other varieties of conventions,—but nothing like what this means in its spirit, that has brought from so many different countries, at this inclement season of the year, such a number of men and women, and I must say too, little children also, for when I forget all you older ones, I am not going to forget these two little girls who came from the Congo, and also my dear little girl that I brought from Africa. My friends, I have been trying to speak for you seventy; but I have spoken really only for myself. You will have to say your own some other time, or in some other way. If we can make this by God’s grace Pentecostal, then we will each one of us go away, not simply with the blessings of friendship from these earthly friends who have honored us here, but the blessing of the Father in heaven.
Address of Benjamin Chappell, D. D.

Rev. Dr. Benjamin Chappell, of Japan, responded for the non-medical missionaries. He said:

I have known our good Dr. Dowkontt long enough to know that when he asks one to do anything, the shortest and best way is just to do it; and as he has seen fit to impress me since I came to the platform to take the place of the Rev. Mr. Hartwell, of China, who has not yet arrived, I must just do as he says. I think we who have been some time at the Sanitarium have been impressed anew by the greatness, the nobility, the beauty, of the medical profession. I recall a quotation from a story; I don’t remember just the words, but the heroine, who was the doctor’s wife, said they didn’t have much money,—just enough to get along,—but whenever she went into the street the little children would look up at her and smile, and many an older one would cast a look of gratitude,—and I remember the closing words of the paragraph, ‘IS NOT THAT TO BE RICH?’

And oh! the riches that come to the true physician who heals and helps and comforts. What a Christlike service it is!

During the last few days I have had special reason to feel this depth of appreciation and gratitude; and I have thought that others may admire the ranks of glistening steel as they go forth to cut down their fellowmen amid all the abominations of war; others may shout their praises—there are always plenty who are ready to do it. Let me reverently speak the praises of those who go with their glistening steel to save life, to help and strengthen. And I have not thought only of the special charm of the medical profession, but also of the work of the medical missionary.

A few years ago, one Sunday morning, up in the heart of Japan, at the summer mountain resort, I took a walk before the morning service, and found a man standing by an old monument; and I thought I would do a little missionary work,—he was a foreigner,—and I asked him if he thought of going to church that morning, and he told me it was his intention to go; but I found afterwards that the person upon whom I had attempted a little missionary work was Dr. Grant, of Amoy. He stayed with us that summer, and oh!

HOW WE LEARNED TO LOVE HIM.

He was always doing something for others, though he himself was in very feeble health. It was the same as the motto in the order of the Misericordia of Florence, ‘At your service at any time.’ But I remember speaking with him one day and saying what persons I think are very apt to say, that skill in medicine was a means of opening the door so that people may be brought to Christ, that it was a means for preaching the gospel. He was one of the meekest of men, but he resented it instantly. I was reminded of Christ when he said, ‘Get thee behind me, Satan’; he did not mean Peter, but he meant the temptation he himself had met, and that had come to him through the mouth of Peter. I can not remember just how he put it, but I know he put it in such a way as to give me a new light,—that the medical missionary does not use his medical skill as a means for something else, but that he goes, and in that very act

HE TAKES CHRIST TO THE PEOPLE.

And it must be so. And of course he does more, you know, than that; but it is enough to go of itself, if he did not do any more, to take the Christ spirit in, and to go to help the suffering and the burdened, the needy and those who are oppressed. And so I would avail myself of this opportunity of saying to the Medical Missionary College students, that while it would be invidious to make a comparison between the work to which you feel that you are called of God, and other forms of missionary work, yet I am sure all your brother missionaries will rejoice with you if you feel in the depths of your heart that God has called you to go where the need is so great—to heal the sick. ‘Freely ye have received, freely give.’

Remarks by Geo. D. Dowkontt, M. D.

Dr. Dowkontt: If I should speak at all about this occasion, I should have to say much the same as Dr. Kellogg expressed himself, in some sense at any rate, as to its being
THREE MISSIONARY HEROES

BISHOP J. M. THOBURN

DR. R. H. NASSAU

REV. J. BOARDMAN HARTWELL
THE BEST DAY OF MY LIFE

as well as his. We have never had a Medical Missionary Conference like this occurring on this continent before. For thirty years I have been in this land working in this line. We have never had such a Conference as we have here today,—nearly seventy missionaries, including some children, and nearly seventy students preparing to become medical missionaries themselves,—these facts alone are tremendous facts, but I must not talk, but proceed with what I have to bring before you. You will have noticed on the little programs, that we have sought to honor those who could not be with us here, but who are still living. We tried very hard to get our friend Dr. Hepburn here; he went to China two years before I was born, and to Japan in 1859, and for forty years labored there. We had expected and hoped to have him here, but failed to do so. My son was to have brought him if it had been possible; but the Doctor has sent us a very cordial letter, and we have sought to honor his name and some others who could not be with us by making them Honorary Officers of the Conference.

We tried by every means possible to have with us Dr. Clara A. Swain, who was the first woman medical missionary to go to a heathen land from the United States, having gone to India in 1872. She was unable to come, unfortunately, as was Dr. Salmans, of Mexico, who has been some twenty years or more laboring in that great field; so we suggest the addition of these two names, Dr. Levi B. Salmans, Mexico, and Dr. Clara A. Swain, India, to the list of honorary vice-presidents of this Conference.

We have drawn some letters which I will read and which call for your approval, to be signed by the officers of the Conference.

A very pathetic, peculiar thing occurred, to which I will refer just now, and perhaps I can speak a few words upon it. I hold in my hand two letters which came to Dr. Kellogg a few days ago. One is dated the 8th of December, the other the 6th. The one whose hand wrote the letter dated the 8th of December passed away to his reward on the 3d. He was writing his mail, and had had the practice of dating his letters ahead for the day when the mail would go out, and the time for it to go out was the eighth of December, and he wrote this letter which I have in my hand, I believe, on the first of December. And on the third he had passed away. It is beautifully written for a man three-score and ten, and for forty-seven years he had labored, literally following in his Master's footsteps, in the very city of Nazareth where Jesus was brought up. There is a letter accompanying, an explanation, from his daughter; and we have drawn up a letter of sympathy to send to her.—Miss H. A. Vartan, Nazareth, Turkey in Asia. I was speaking to Dr. Grant of Egypt to-day, and found he had known the doctor and had seen him in his work in Nazareth.

Since we have done what we could to honor and to remember these particular friends in the way indicated, we felt that we also wanted to send a word of greeting to

ALL OUR MEDICAL MISSIONARY FRIENDS throughout the world from this Conference; so such a letter has been drawn up.

The Secretary then read the following letters, which were unanimously approved and afterward duly forwarded to those to whom they were addressed, after being signed by the officers of the Conference:

To the Rev. James Curtis Hepburn, M. D., LL. D.

DEAR DOCTOR: The members of this Conference desire to express to you their sincere regret that your advanced age and enfeebled condition prevent your attending this, the first Medical Missionary Conference of such extent held in the United States.

It was hoped that you would be able to honor this assembly by presiding over it; but in this we are disappointed. You have, however, sent an expression of your deep sympathy with the gathering and the object had in view, and your personal regret at your inability to be present, for which we thank you, and in return we, the members of this Conference, unanimously desire to express to you our deep sense of appreciation of the noble work done by you both in China and Japan since the year 1841, when you first went to China, and from 1859, when your services were transferred to Japan as the result of a striking and evidently providential experience. Your extensive work of translation,
added to your medical efforts and instruction of students, have been mighty factors in the molding of that nation, whose later history and development have been fraught with such marvelous signs of progress, not the least of these being the manifest influence of Christianity upon the hearts of that remarkable people and nation.

That God has spared you all these ninety-three years and more, and so honored you in his service, must be to you a source of sincere gratitude as it is to all of your friends and fellow Medical and non-Medical Missionaries gathered here; and they one and all send greetings of love and esteem to you for "your work's sake," and pray that the closing days of your long and useful life may be attended with an increasing realization of the Master's presence with you, until He shall summon you to be with Him, and welcome you with the well-earned plaudit, "Well done, good and faithful servant, enter thou into the joy of your Lord."

Dr. Clara A. Swain, Castile, New York.

DEAR DR. SWAIN: The members of this Conference regret exceedingly that it is impossible for you to be present with them at this time. It would indeed have been a great honor and privilege to have looked into your face and to have heard from you something of the great work which God enabled you to perform as the first woman Medical Missionary sent from America to a heathen land.

Through Bishop Thoburn of India, we have heard with great interest something of your early work in India, and the beginning of Medical Missionary work for women as inaugurated by you.

We rejoice that your life has been spared through all these strenuous years and that you are now permitted to return to the home land. We pray that God may give you yet many years of quiet service here, a fitting close to a life of such unbounded activity as yours.

May He whom you love and serve be your ever present help and guide.

Miss H. A. Vartan, Nazareth, Turkey, Asia.

DEAR MISS VARTAN: Your beloved father's letter to Dr. J. H. Kellogg, dated Dec. 8, 1908, but written by him some days before in readiness for mailing day, together with your accompanying letter of December 6 containing explanation and account of your honored father's death on December 3, were read to the Conference and deeply impressed those present, awakening a chord of sympathy in all hearts, especially for you in your sad and sudden loss and consequent loneliness; and the members of the Conference desire to express their deep sympathy with you in your sorrow and loss; and yet, mingled with these feelings there arises a spirit of gratitude and thankfulness that your noble father for nearly fifty years was able to "go about doing good" as his Divine Master did, and in the very city of Nazareth too, in which He lived and labored.

What a privilege indeed was his, in which too you must rejoice even in the midst of your sorrow. "The memory of the just is blessed," and it is also written, "Blessed are the dead who die in the Lord, they do rest from their labors, and their works do follow them." So surely is it true in the case of your devoted and heroic father whom some day you will rejoin and together rejoice for evermore. That such may be your happy experience at last, and that meanwhile you may have an increasing realization of the nearness of Him who came to comfort the one lone woman at the sepulchre, even though He tarried to do so on the way to appear before His Father, is the earnest desire and prayer of this company of Missionaries, Medical and non-Medical, gathered together from the ends of the earth.

To the Medical Missionaries throughout the World.

DEAR BROTHERS AND SISTERS IN CHRIST: The members of this Conference, gathered from many lands, and belonging to several bodies of the Evangelical Church, desire to send greetings and good wishes to you who are engaged in the Christlike and blessed work of Medical Missions in various mission lands throughout the world, and to express to you the grounds they see for your encouragement: 1st, In the deepening interest in the twofold office of "healing the sick and preaching the Gospel," 2d, In the increasing numbers of those who are being led to devote their lives to this service. 3d, In the improved facilities now provided for the education of Medical Missionaries, especially in the American Medical Missionary College.

The gathering together here at this time of so large a body of Medical and other missionaries, at this the first Conference of such extent ever held on this continent, affords striking evidence also of advance along the line in behalf of Medical Missions; and, while no invidious distinction or comparison is entertained regarding other forms of Christian effort, the great and crying need of medical aid for the suffering millions in many lands, and its value in so many ways in missionary effort, can not, when at all fully realized, but cause rejoicing at every advanced effort put forth in the furtherance of this Christlike agency.

Hence, we extend to you, our brethren and sisters in Christ, who are still laboring in the fields where some of us have labored, and where most of us hope ere long to labor again, not only our heartfelt greetings and good wishes for the New Year upon which we have entered, but we desire to encourage you in your efforts with the knowledge of the advanced development that has been made in the home-land to send you help and helpers as doctors and nurses, who shall lighten the heavy burdens now resting upon so many of you and bring necessary relief for body and soul to earth's suffering millions.

After the approval of the foregoing letters the Chairman called upon Dr. Dowkontt to read the roll call of de-
parted Medical Missionary heroes from both sides of the Atlantic.

Dr. Dowkontt: We now come to another part of our program, dear friends, and at this first Medical Missionary Conference we want not only to honor those who are still living but are unable to be here and to honor those who are here, but also to remember those who have gone to their reward. We have with us today the relatives of several deceased medical missionaries. Sitting on the platform here, we have a lady whose husband, Dr. James L. Phillips, was a medical missionary for some thirty years or more in India. Sitting on the other side of Bishop Thoburn is Mrs. Moses P. Parmelee, whose husband was for some forty years a missionary in Turkey, most of the time as a medical missionary; and sitting as the president of our Conference is

THE WIDOW OF A MEDICAL MISSIONARY,
Dr. Anna Jones Thoburn, Bishop Thoburn's wife. Thus we have here three friends in the center of our platform today, as representatives of those who did heroic service in foreign lands. And we have also in the audience, Mrs. Clark, whose brother, Dr. Milne, was a medical missionary on the Congo; and in addition to Mrs. Phillips, two sisters of Dr. Phillips, Mrs. Stone and her sister. We have Miss Ruth Parmelee, who has entered the medical college and is studying medicine to follow in her father's footsteps. We have also the son of the late Dr. David Metheney, who labored some thirty-three years in Mersine. We invited the secretaries and officials of the different mission boards, and I would like to read to you the cordial letters from several, including Mr. Robert Speer of the Presbyterian board, which I hold in my hand, and from Dr. Barton, the secretary of the Congregational board, Dr. Leonard, secretary of the Methodist board, and Dr. Haggard, secretary of the Baptist board. I can not take time to do this, but will simply explain that last week the mission secretaries held their annual Conference in New York, and could not be away from their post this week also. I will now proceed with what is both a pleasing and yet a somewhat solemn task.

I hold in my hand several lists that I have obtained from the different mission boards, containing the names of the Departed Medical Missionary Heroes of various denominations. I can do no more than just read these names over, and their grand work may be recalled to you, perhaps, as I read them. The first name that I will read is that of Dr. John Scudder, who was

THE FIRST MEDICAL MISSIONARY
to the United States for a heathen land, having sailed from New York ninety years ago, and whose seven sons all became missionaries, five of them medical missionaries; and now his grandchildren, grandsons and granddaughters, are doing that same kind of work. I will read their names: Dr. John Scudder, belonging to the Reformed Dutch church, 1818 to 1853, thirty-five years of service; Dr. H. M. Scudder, 1851; Dr. Ezekiel C. Scudder, 1855; Dr. Jared W. Scudder, 1858; Dr. Silas D. Scudder, 1860; and Dr. John Scudder, Jr., 1861. Dr. L. R. Scudder has been in India since 1888. Dr. Ida Scudder, another grandchild of Dr. John Scudder, has served about ten years as a medical missionary in India. Then we have on the same list the name of Dr. Jacob Chamberlain, who after some fifty years of service, having gone to India in 1859 (the same year as our esteemed bishop who sits with us today), finished his work and passed to his reward in March of last year. I have already referred to Dr. James L. Phillips, of the Free Baptist denomination. I am sorry I have not the facts that I would like in regard to the name of another noble worker, Dr. Otis R. Bachellor. I have known of him by correspondence for many years, but I have not the facts in conjunction with the number of years of service, but I believe it was between forty and fifty years. Then there is the name of Dr. John Newton, who was given that name following the world-famous hymn writer, and labored

FOURTEEN YEARS AMONG THE LEPERS of Sabathu, in India. I will now call the
Honor Roll of Departed Medical Missionaries.

**United States of America.**

**American (Congregational) Board.**

<table>
<thead>
<tr>
<th>Names and Titles</th>
<th>Field Service</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>John Scudder, M.D.</td>
<td>India</td>
<td>1818-1835</td>
</tr>
<tr>
<td>Rev. Newton Adams, M.D.</td>
<td>Africa</td>
<td>1834-1851</td>
</tr>
<tr>
<td>Peter Parker, M.D.</td>
<td>China</td>
<td>1834-1888</td>
</tr>
<tr>
<td>Azariah Smith, M.D.</td>
<td>Turkey</td>
<td>1842-1851</td>
</tr>
<tr>
<td>Samuel F. Green, M.D.</td>
<td>Ceylon</td>
<td>1847-1884</td>
</tr>
<tr>
<td>Moses P. Parmelee, M.D.</td>
<td>Turkey</td>
<td>1863-1903</td>
</tr>
<tr>
<td>Henry S. West, M.D.</td>
<td>Turkey</td>
<td>1859-1876</td>
</tr>
<tr>
<td>Luther H. Gulick, M.D.</td>
<td>Micronesia</td>
<td>1855-1895</td>
</tr>
<tr>
<td>Rev. Edward Chester, M.D.</td>
<td>India</td>
<td>1859-1902</td>
</tr>
<tr>
<td>Dr. William H. Cogsood, M.D.</td>
<td>China</td>
<td>1869-1880</td>
</tr>
<tr>
<td>Rev. Edmund M. Pease, M.D.</td>
<td>Micronesia</td>
<td>1887-1907</td>
</tr>
<tr>
<td>Rev. Webster, M.D.</td>
<td>W.C. Africa</td>
<td>About 10 yrs.</td>
</tr>
</tbody>
</table>

**This Board (A. B. C. F. M.) was originally composed of three denominations, i.e., Congregational, Presbyterian, and Dutch Reformed, and Dr. John Scudder, a member of the latter church, went out under the combined Board.**

**Presbyterian Church—North.**

<table>
<thead>
<tr>
<th>Names and Titles</th>
<th>Field Service</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rev. C. V. A. Van Dyke, M.D.</td>
<td>Syria</td>
<td>1840-1895</td>
</tr>
<tr>
<td>Rev. A. P. Happer, M.D.</td>
<td>China</td>
<td>1844-1898</td>
</tr>
<tr>
<td>Rev. D. B. McCartee, M.D.</td>
<td>China</td>
<td>1843-1900</td>
</tr>
<tr>
<td>John G. Kerr, M.D., LL.D.</td>
<td>China</td>
<td>1854-1901</td>
</tr>
<tr>
<td>Samuel R. House, M.D.</td>
<td>China</td>
<td>1847-1857</td>
</tr>
<tr>
<td>Joseph P. Cochrane, M.D. Persia</td>
<td>Korea</td>
<td>1878-1895</td>
</tr>
<tr>
<td>J. W. Heron, M.D.</td>
<td>China</td>
<td>1885-1892</td>
</tr>
<tr>
<td>James L. Van Schoeck, M.D.</td>
<td>China</td>
<td>1890-1900</td>
</tr>
<tr>
<td>George Yardley Taylor, M.D.</td>
<td>China</td>
<td>Killed by Boxers</td>
</tr>
<tr>
<td>Eleanor Cheznut, M.D.</td>
<td>China</td>
<td>Killed by Boxers</td>
</tr>
<tr>
<td>Charles V. Hodge, M.D.</td>
<td>China</td>
<td>Killed by Boxers</td>
</tr>
<tr>
<td>Mary Brown, M.D.</td>
<td>China</td>
<td>Eleven years</td>
</tr>
<tr>
<td>Anna Larson, M.D.</td>
<td>China</td>
<td>Five years</td>
</tr>
<tr>
<td>James Thompson, M.D.</td>
<td>Siam</td>
<td>Twelve years</td>
</tr>
</tbody>
</table>

**Methodist Episcopal Church.**

<table>
<thead>
<tr>
<th>Names and Titles</th>
<th>Field Service</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>John B. Busted, M.D.</td>
<td>Korea</td>
<td>1893-1900</td>
</tr>
<tr>
<td>Fanny White Challis, M.D.</td>
<td>Bulgaria</td>
<td>1875-1877</td>
</tr>
<tr>
<td>Lucilla Green Cheney, M.D.</td>
<td>India</td>
<td>1876-1878</td>
</tr>
<tr>
<td>S. M. E. Goheen, M.D.</td>
<td>Africa</td>
<td>1837-1842</td>
</tr>
<tr>
<td>James J. Gregory, M.D.</td>
<td>China</td>
<td>1888-1897</td>
</tr>
<tr>
<td>Osman Hall, M.D.</td>
<td>China</td>
<td>1899-1903</td>
</tr>
<tr>
<td>William James Hall, M.D., China</td>
<td>1891-1894</td>
<td></td>
</tr>
<tr>
<td>Nancy Monelle Mansell, M.D.</td>
<td>China</td>
<td>1873-1903</td>
</tr>
<tr>
<td>Nat Dow Merriam, M.D.</td>
<td>Africa</td>
<td>1904-1906</td>
</tr>
</tbody>
</table>

**Walter Prettyman, M.D.** | Bulgaria | 1857-1901 |

**Mitt Bebott Richards, M.D.** | Africa | 1880-1881 |

**Julian F. Scott, M.D.** | China | 1902-1903 |

**Harry C. Sherman, M.D.** | Korea | 1898-1900 |

**Rev. W. R. Summers, M.D.** | Africa | 1885-1888 |

**Anna Jones Thoburn, M.D.** | India | 1882-1902 |

**Moses Clerck White, M.D.** | China | 1847-1900 |

**Iaac W. Wiley, M.D.** | China | 1851-1884 |

**Peachy T. Wilson, M.D.** | India | 1863-1898 |

**J. Harrison, M.D.** | Congo | 1887-1890 |

**Baptist Missionary Union.**

<table>
<thead>
<tr>
<th>Names and Titles</th>
<th>Field Service</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jonathan Price, M.D.</td>
<td>Burma</td>
<td>1818-1826</td>
</tr>
<tr>
<td>Thomas T. Devan, M.D.</td>
<td>France</td>
<td>1844-1853</td>
</tr>
<tr>
<td>D. J. MacGowan, M.D.</td>
<td>China</td>
<td>1843-1893</td>
</tr>
<tr>
<td>John Dawson, M.D.</td>
<td>Burma</td>
<td>1850-1861</td>
</tr>
<tr>
<td>C. H. Finch, M.D.</td>
<td>West China</td>
<td>1885-1901</td>
</tr>
<tr>
<td>Rev. George H. Jackson, M.D.</td>
<td>Congo</td>
<td>1892-1895</td>
</tr>
<tr>
<td>Rev. F. B. Malcolm, M.D.</td>
<td>West China</td>
<td>1893-1897</td>
</tr>
<tr>
<td>B. F. Pritchard, M.D.</td>
<td>So. India</td>
<td>1880-1900</td>
</tr>
<tr>
<td>Ellen Mitchell, M.D.</td>
<td>Burma</td>
<td>1879-1901</td>
</tr>
<tr>
<td>Caroline H. Daniels, M.D.</td>
<td>China</td>
<td>1878-1904</td>
</tr>
<tr>
<td>Calbra Graham, M.D.</td>
<td>India</td>
<td>1891-1905</td>
</tr>
<tr>
<td>Josephine M. Bixby, M.D.</td>
<td>China</td>
<td>1894-1897</td>
</tr>
<tr>
<td>Luie C. Fleming, M.D.</td>
<td>Congo</td>
<td>1887-1890</td>
</tr>
<tr>
<td>Oriassa W. Gould, M.D.</td>
<td>India</td>
<td>1893-1904</td>
</tr>
<tr>
<td>Robert R. Milne, M.D.</td>
<td>Congo</td>
<td>1890-1900</td>
</tr>
<tr>
<td>F. P. Sutherland, M.D.</td>
<td>Burma</td>
<td>1887-1907</td>
</tr>
<tr>
<td>Briton Corves, M.D.</td>
<td>China</td>
<td>1898-1908</td>
</tr>
<tr>
<td>E. E. Worley, M.D.</td>
<td>China</td>
<td>1903-1907</td>
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**Women's Home Missionary Society.**

<table>
<thead>
<tr>
<th>Names and Titles</th>
<th>Field Service</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mrs. Marion Wells Thoms, M.D.</td>
<td>Arabia</td>
<td>1898-1905</td>
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</tbody>
</table>

**Reformed (Dutch) Church.**

<table>
<thead>
<tr>
<th>Names and Titles</th>
<th>Field Service</th>
<th>Date</th>
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<tbody>
<tr>
<td>Rev. Henry Martyn Scudder, M.D.</td>
<td>India</td>
<td>1851-1895</td>
</tr>
<tr>
<td>Rev. Ezekiel C. Scudder, M.D.</td>
<td>India</td>
<td>1855-1896</td>
</tr>
<tr>
<td>Rev. Jacob Chamberlain, M.D.</td>
<td>India</td>
<td>1859-1909</td>
</tr>
<tr>
<td>Rev. Silas D. Scudder, M.D.</td>
<td>India</td>
<td>1860-1877</td>
</tr>
<tr>
<td>Rev. John Seudder, M.D.</td>
<td>India</td>
<td>1861-1860</td>
</tr>
<tr>
<td>Rev. Jared W. Seudder, M.D.</td>
<td>India</td>
<td>1862-1862</td>
</tr>
<tr>
<td>Henry Martyn Scudder, Jr., M.D.</td>
<td>India</td>
<td>1876-1895</td>
</tr>
<tr>
<td>Rev. Lambertus Riehuis, M.D.</td>
<td>India</td>
<td>1881-1888</td>
</tr>
<tr>
<td>Mrs. Marion Wells Thoms, M.D.</td>
<td>Arabia</td>
<td>1898-1905</td>
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**Free Baptist Church.**

<table>
<thead>
<tr>
<th>Names and Titles</th>
<th>Field Service</th>
<th>Date</th>
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<tbody>
<tr>
<td>Otis R. Batchelor, M.D.</td>
<td>India</td>
<td>1839-1905</td>
</tr>
<tr>
<td>James L. Phillips, M.D.</td>
<td>India</td>
<td>1864-1895</td>
</tr>
<tr>
<td>Ellen M. Phillips, M.D.</td>
<td>India</td>
<td>About 10 yrs.</td>
</tr>
<tr>
<td>T. W. Burkholder, M.D.</td>
<td>India</td>
<td>About 10 yrs.</td>
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**Reformed Presbyterian Church.**

<table>
<thead>
<tr>
<th>Names and Titles</th>
<th>Field Service</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>David Metheny, M.D.</td>
<td>Turkey</td>
<td>1870-1903</td>
</tr>
</tbody>
</table>

**Missionary Conference.**

<table>
<thead>
<tr>
<th>Names and Titles</th>
<th>Field Service</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rev. W. R. Summers, M.D.</td>
<td>Africa</td>
<td>1885-1888</td>
</tr>
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**American (Congregational) Board.**

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<tr>
<th>Names and Titles</th>
<th>Field Service</th>
<th>Date</th>
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<tr>
<td>Rev. W. R. Summers, M.D.</td>
<td>Africa</td>
<td>1885-1888</td>
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<tr>
<td>Anna Jones Thoburn, M.D.</td>
<td>India</td>
<td>1882-1902</td>
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<tr>
<td>Moses Clerck White, M.D.</td>
<td>China</td>
<td>1847-1900</td>
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<td>Iaac W. Wiley, M.D.</td>
<td>China</td>
<td>1851-1884</td>
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<td>Peachy T. Wilson, M.D.</td>
<td>India</td>
<td>1863-1898</td>
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<td>J. Harrison, M.D.</td>
<td>Congo</td>
<td>1887-1890</td>
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That completes the list for the United States, and it numbers some seventy—again another seventy. I have also prepared a roll call of Great Britain, but it is necessarily very imperfect and consists only of some twenty names, but includes among them some noble heroes.

**Great Britain.**

Kenneth McKenzie, M. D. .. China 1874 1884
John P. Roberts, M. D. ... China 1885 1892
Wm. P. Lockhart, M. D. ... China 1838 1900
T. R. Coadge, M. D. ...... China 1872 1882
Benjamin Hobson, M. D. ... China 1840 1850
Alex. Pearson, M. D. ....... China 1830 1840
David Livingstone, M. D. ... Africa 1865 1895
David S. Leach, M. D. ... Africa 1888 1895
Sidney Comber, M. D. ... Africa 1882 1890
William Kaley, M. D. ....... Brazil 1850 1890
P. K. Vartan, M. D. ... Nazareth 1861 1908
W. Burns Thomson, M. D. ... Gt. Britain 1851 1898
Thomson Crabbie, M. D. .... Birmingham 1850 1890
David Meacham, M. D. ....... Manchester 1865 1895
James Elwyn, M. D. ....... Bristol 1880 1890
John Thomas, M. D. ......... India 1875 1891
William Elmslie, M. D. .... India 1860 1875
John Lowe, M. D. ........... India 1860 1890
Colin Valentine, M. D. .... India 1860 1905
Hudson Taylor, M. D. ....... China 1854 1907
James Cameron, M. D. ....... China 1875 1900
A. W. Douthwaite, M. D. ... China 1874 1884

Totals: United States, 81; Great Britain, 22. Total, 103. The list is imperfect in many ways, but is the best that could be done with the material at hand.

Although the name of Dr. David Livingstone of Africa is famous the world over, a great many people do not know that he was a medical missionary. The last time I was “on the other side,” I was in the city of Glasgow and was taken over the college in which he studied, and shown the finest picture of David Livingstone I have ever seen, and the old veteran professor who took me around—he must have been fourscore years—talked to me about him. A few days later I stood in Westminster Abbey and saw where they placed his body when it was brought home, and the tablet to his memory.

**Bishop Thorburn:** I would like to mention an incident here in connection with Dr. Livingstone. I was once entertained by a Mohammedan prince in India. He had his table set in European fashion, though he himself was dressed in his native costume and lived in the main in his native style. He, however, had a library, and asked me to go in and see it; and as I looked over it, I came upon the Life of David Livingstone, done up in very good binding; and I said to him, “I see you have Dr. Livingstone’s Life here.” He said, “Dr. Livingstone was a man who always somehow or other had my respect.

**I COULD NOT HELP BUT ESTEEM HIM.**

I have read his life very carefully.” He knew English fairly well, but he did not read English books habitually, and it seemed to be a very striking thing that away out there, not in Africa but in India, a Mohammedan, a member of a class who are less sympathetic with Christians than other natives are, should take the trouble to get the Life of Dr. Livingstone and keep it in his library.

**Dr. Dowkontt:** About twenty-four years ago, there came a young man to me in New York from the famous pastor, C. H. Spurgeon, of London, whom I had the privilege of knowing personally, and he wrote a note about this young man and finished it up by saying, “He will do.” I saw Mr. Spurgeon in London in 1888, when the Ecumenical Conference was held there, and I said, “You wrote about a certain young man, ‘HE WILL DO,’ and I report that he has done; moreover he is doing”; and he was there in North Africa at that time doing a splendid work. He had been there about four years then, and about three years later he was moved to another station—from Algiers to Sfax. He had been there but a few days when by some means which has never been discovered he was found murdered, his wife also and their little boy; but in the crib there was a little baby girl, only a few months old, and the murderers overlooked her. Whether it was done by fanatics or burglars could never be cleared up. This was Charles Sherrad Leach; and he was born in India, as I now recall, and was what we call a Eurasian. He went to England, and studied medicine in Edinburgh; then came to me in New York—a truly noble fellow.  

Dr. Sydney Comber of the Congo went
from England. He had two brothers, one of whom was a medical missionary also, and the other a clerical missionary,—all gave their lives for Africa.

Another famous name is that of Dr. Hudson Taylor, the founder of the China Inland Mission, who went out in 1854. Dr. James Cameron, of the same China Inland Mission, was designated the Livingstone of China. He traveled seven years, 1875-1882, in those early pioneer days, up and down every province in China but one, when it was worth a man's life to go into many parts of that land; and he afterwards came to New York and studied medicine, and went back to China, dying in 1900. Dr. A. W. Douthwaite was also of that mission, with a similar term of noble service. I believe. Dr. Kenneth McKenzie, of Scotland, you have all heard of. who went to Tientsin, and was honored by Li Hung Chang and his wife. His successor was Dr. Roberts, who went out in 1895 and labored several years. Dr. AVilliam Kaley labored for several years as a medical missionary in Madeira, and afterwards in Brazil, from about 1850 to 1890.

I have also here the names of four men who devoted their lives on “the other side” to medical missionary work in the slums of the great cities. We haven’t got quite to that point in America yet, but there are a number of men,—I suppose there may be fully twenty medical missionaries in the different parts of England, perhaps half a dozen in the city of London,—

WHO ARE GIVING THEIR LIVES

to this same medical missionary effort with great success among the sick and poor in the slums. Dr. W. Burns Thomson was the superintendent of the Edinburgh Medical Missionary Society from 1851 and edited the first medical missionary magazine, still being issued, and lived afterwards in London until the year 1885. He was a theological student in Edinburgh, and as he went around one day to see people, he called at one of the Scotch flats. As he knocked at the door,—he was a little fellow, too,—a powerful woman came out, one of the sort of women you would not want after you; and she said, “What do you want?” in such a way as to take all the speech out of him. He took a book out from under his arm and said, “Well, I would like to go in and read a little of the Bible.” Inside, the woman’s son was lying sick in bed, and hearing the young minister talking, he shouted, “Put him out, mother, put him out”—and she began to abuse him.

“WHAT USE ARE YE?”
she asked. “There is my son in there sick; and if you were a doctor, you might be of some use.” “Well,” said he, “I am something of a doctor.” “Oh, you are!” Very well, then; will you see my boy? Come right in.” The young minister-doctor looked wisely at the patient’s tongue and felt his pulse and concluded to give him some castor oil; and that was the beginning of his medical missionary service.

Dr. Thomson Crabb, who was named after Dr. Thomson, gave some thirty years of service in the city of Birmingham in England, and died there. Dr. David Meacham labored about forty years in the city of Manchester, and Dr. James Elwyn in the city of Bristol in England, putting in from thirty to forty years of work in the slums of that city. Now, dear friends, that I have read this list of more than one hundred heroes’ names to you, we will sing the hymn, “For All the Saints,” etc.

THE CHAIRMAN: Now we have had a most interesting first session; but before we close, it is possible that there may be some present who would like to say something regarding these departed heroes and their work. For myself, I COULD NOT MISS AN OPPORTUNITY to say something about Dr. Phillips. He was connected with the Free Baptist Mission in a little province south of Calcutta, and I had opportunities for seeing a great deal of him when I used to be in Calcutta. I did most of my work at that period when I was in Bengal in the English language. But Dr. Phillips was living in the province of Orissa to the south, and could speak the Ori language almost like his mother tongue, and also had some knowledge of the Bengali that was spoken by forty millions, but he was very useful in the English work at that time. I was working in English at that time,
and had to meet very large numbers of people, and I found Dr. Phillips most useful, because he was born in the country, and had grown up with a thorough knowledge of the English people and of the American people—he was American by race—and of the two classes of natives that were in that part of the country. It is very important for an American going to any of those Eastern missions to have a good knowledge of English and English people, for he is associated with them more than he is with his own countrymen, wherever he goes. But the great point with Dr. Phillips was his availability for anything in the missionary line. The last charge I had in India was as pastor of an English church up in the mountains of Northern India, where the people were nearly all influential officials. While there I met with an accident which caused a turn in my life, a revolution, you might say, that directed me into a new channel altogether. For two years I was laid aside practically, but God overruled it all. I had to get somebody to take my place up there, and the man I selected to have charge of that influential congregation of English-speaking people was Dr. Phillips. Somebody said to me, "Why, he is an American and would not suit an English audience." And others said, "He has never been associated with those people, and so many of them are English people, why did you select him?" It was because of the thought I have mentioned—his availability. I felt that no matter what position I should nominate Dr. Phillips for, I could trust the work in his hands.

He was not a member of our church. He was a Baptist and I was a Methodist, but I was ready to leave a Methodist congregation in his hands, and that is not any reproach at all to my own Methodist brethren, but it is because when you get in a tight place you want some one that you can tie to without any misgivings; and that was true of Dr. Phillips every time. Once we wished to have a revival meeting in Calcutta,—and such a thing was unknown there,—a union evangelistic meeting, we called it,—and he was the only man that could prepare the way. I remember one thing he did. He got up out of bed about midnight or later and went to an English missionary there in the city, and woke him up, and he said, "I have been lying in my bed and could not sleep;

I am thinking about this proposal to have a united revival service and get all the churches in it." They had never before united in anything of the kind, and they were not by any means so near together as you are accustomed to see people in this country. And he got that man out of bed, and down on his knees, and he said, "Let us pray about it." And the result was that he worked it through, and we had the first united revival services India had ever seen. It was a great thing. Yes, he was a dear, good man. His widow sits on my left here, and she was with him all through those years and knows the truth of every word I am saying, and knows how permanent the work has been that he engaged in afterwards—how it got a grip on some of the leading religious men of London where he represented the interests that he had been working for in India. He was comparatively a young man when God called him home.

DR. DOWKONTT: I would like to say a word or two about that grand man, Dr. John G. Kerr of China, who put in so many years of service there as a surgeon, second only to Sir Henry Thompson, of England. The number of patients he treated was something scarcely believable, some seven hundred thousand patients during his nearly fifty years of service. He has been a guest in this institution, and our friend Dr. Kellogg was particularly fond of him. I remember last year, when we had a gathering here much smaller than this, that Dr. Kellogg tried to speak about his friend Dr. Kerr, but he broke down. One of Dr. Kerr's daughters was with us at the time too, Mrs. McCandliss, wife of Dr. H. M. McCandliss, of China.

A double quartette of Medical Missionary students sang "Fling out the Banner," and the meeting was closed with prayer by Elder A. T. Jones.
SECOND SESSION

TUESDAY, JANUARY 19. EVENING SESSION, 7:30 TO 9:30.

SUBJECT, MEDICAL MISSIONS AS AN EVANGELIZING AGENCY.

Chairman, Rev. John A. Brunson, D. D., Japan, 1888.

After singing, prayer was offered by Rev. M. C. Wilcox, Ph. D., of China.

The Chairman then introduced the first speaker, Dr. R. H. Nassau, of Africa.

Address by Dr. R. H. Nassau

A doctor is a comparatively new and modern factor in missions. When I was going to equatorial West Africa in 1861, a good many people told me I would die. People going out to West Africa at that time were accustomed to die there; but I thought that God intended us to use means, and a certain means for health was to study therapeutics and my own physiology. I did not wish to be a practicing physician, but I took a regular course of medicine in order that I might make a clinic of myself and thus be enabled to discover the approach of a fever or any other disease twenty-four hours before I could have diagnosed it in another person. At that time there were no doctors out in our mission. I had to practice, though I did not want to do so; and when on my first furlough in 1872, I went to my own university in Philadelphia, having first gone to the secretaries of my Board to get their endorsement, to try and find a regularly educated physician,—one who had studied for that specific purpose. I went to the university, and there in my own university I could not get one of those professors to give me five minutes out of their lecture hour, that I might make a few remarks to the students about missions, and present a plea to them personally for some one to offer himself. The ground of objection, as stated by some of the professors, and probably in the case of all, was that they were afraid to introduce religion into their lecture room. I was permitted, however, to put a notice up on the bulletin board in the corridor, and out of their lecture hours—the students were very much crowded—those whose curiosity or interest, or anything else, would induce them to come, came to the amphitheater—I was allowed to use the amphitheater to make a plea for men to come out to Africa. One man did come, and I was sorry afterward that he did so.

Now, in regard to the doctor as an evangelizing agent, he must show a personal interest in the individual or the individuals to whom he is presenting that gospel call. It is not an effective means for the conversion of any man or of any people that you simply go and tell that gospel story, without having a personal interest in the individual or the individuals to whom you are presenting it. I think that is also true in this country. The pastor in this country is efficient, not simply because he stands in the pulpit on a Sunday and propounds and discusses and explains certain truths in regard to the divine Being, but because he follows up whatever intellectual impressions he may have made on Sunday by his personal influence as he meets members of his flock on the street, in his study, or in their own houses, and looking in their eyes and impressing on their hearts that he feels a personal interest, an interest that is pressing on his heart and his soul,—which says, "I am speaking to you, and this message is to you; won't you accept it?" That is the personality of it. I happen to know that there are missionaries who have gone out to foreign mission lands, and when they got on the ground, they felt an actual antipathy to those heathen before whom they stood; and I can understand that. It is not right, but I can understand it. I have a very dear friend who has been a missionary up in Alaska. Long ago he was my associate in Africa. He had to give up his work there because of his health, but with his missionary interest, when he came to this country, he went right off to Alaska, and he has been
A VERY SUCCESSFUL MISSIONARY

There. Only last week he was showing me photographs of those people, and I said to him, "How ugly they are; how exceedingly uninteresting they are; how did you get up any interest in their personality?" Of course we have an interest to uplift every fellow human being, however fallen, however degraded, and however ugly physically or otherwise; but the point I want to make is that in order to make effective the gospel story you or I or any other missionaries tell, you must feel a personal interest in the individual, and demonstrate it in some way. I told my friend I didn't think I could do anything up in Alaska; and yet, I will promise you, if God laid it on my heart and mind and soul that I ought to go to Alaska, then I would fight to overcome the antipathy which I confess I do feel toward the physical appearance of those people in Alaska.

I heard a missionary from India make that same acknowledgment—that when he went out to India and saw those dirty, degraded lower classes of India, he felt such a repulsion that he was conscious right away of the point that I am trying to make to you.—that if he presented the gospel to them feeling that way toward them, he COULD NOT DO THEM ANY GOOD AT ALL.

He felt that, and he said he had a long, long fight.—and where? Do you know where he had the fight? On his knees, on his knees, for God to help him to overcome that antipathy which I confess I do feel toward the physical appearance of the beings to whom he was to present something spiritual.

Now, as to this effort to demonstrate an interest in the individual, it is quite possible, in the forms of our civilization, to put on a pleasant face and assume a pleasant tone, and assume an interest that is not very deep seated, but that passes very well. I do not know how it may be in India or in China. I present to you my own personal experience and knowledge of Africa. Ignorant as those negroes are, without a written language until the missionaries went there, and therefore without any education in books, they nevertheless were educated in a very important part of education, and that was

THE KNOWLEDGE OF HUMAN NATURE, away beyond what you and I have, the study of physiognomy; and how they look at every muscle of our faces, our eyes, the movements of our lips and the movements of our bodies, our courage and everything, to see whether in our conversation with them we mean what we say! And we could be of no use at all, if any one of us had gone there with any antipathy to the negro,—you know, friends, how widespread in some parts of the country in America is that antipathy to the negro,—then I say the man who has that, if he can not get rid of it in this country before he goes out, ought not to go to Africa.

I remember we were discussing one time in the mission, when our Presbyterian Board sent out to us a proposition to send a negro lady to our mission; and I led the forces who advocated her coming; and one said,—and it was a woman’s voice that said it too.—

"WILL YOU EAT WITH HER at the same table?" And I said, "Madam, what did you come to Africa for if you are not willing to eat at the same table with her?" I don't think that woman had any right to go to Africa. So in demonstrating to the people out there that there was a personal interest, the natives saw that I had it; they saw by the very movement of my eyes, my lips, of my features, my actions, that I had not come out just from a general philanthropic idea that here was a race of people that were low down, and it was a Christian duty to try to lift them up, but because I liked them; and I do. I have found in those people so many, many lovable qualities, that I do like the negro race.

Another way of demonstrating interest in them is, as opportunity occurs, to help them out of their many, very many, physical difficulties. They do have so many physical difficulties, so many sicknesses, so many deformities, and life is physically such a hard life, particularly with the women of the country. Now here comes in the doctor. He can relieve so many of these physical pains, and we
have the highest example—the Saviour who healed, and the Saviour who stood at the grave of Lazarus and wept—the demonstration of a human, personal interest. Now, the doctor

HAS MORE CHANCE THAN THE PREACHER

has, and in that particular respect he has an advantage over the missionary preacher.

But next, I want to enforce very strongly that the doctor shall not go out simply as a doctor. I hold up my hands, and I say it with all my voice, if he is going out only for that, he'd better stay at home. I want him to be an evangelist, and he must have that same spirit of evangelism every day and every hour, just like the rest of us who have been ordained as ministers. He need not interfere with the church,—let him attend to his dispensary, and go out in the streets of the village, wherever he can

FIND THE SICK AND AFFLICTED,—

but along with every use of the scalpel, along with every use of any dose of medicine shall go the Christian thought and the Christian prayer; the very first act in the morning as he goes into the dispensary shall be a prayer there, and if he has a specially hard case, make a prayer on that case before he begins to use that scalpel.

Now, if he will carry that evangelistic idea everywhere, he will be a very, very efficient arm in the mission work. You may say, "What is the use of making all this talk about a thing that of course ought to be so?" Yes, of course, it ought to be so, but I tell you it isn't always so. There was that young man who went out on my representations, and I was very glad he came back to America two years later. There was another young man, and a very pleasant young man he was, too, in his intercourse with me. Well, a woman took her sick baby to the dispensary one day. I don't know what was the matter with the baby, but anyhow a dose of medicine was to be given. Well, you know how babies will cry, and kick, and throw up their arms; and object to having a spoon put in their mouth. And that doctor got impatient and struck at the baby, and the mother says,

"EH! YOU STRIKE AT MY BABY?"

And the doctor said, "Yes, and if you say anything more I will strike at you." Now that happened out in our mission. Could that doctor do any good in the mission with that spirit? I think not. We are not all sanctified yet, and that young man certainly had a long way to go before he reached sanctification. Perhaps he was annoyed that day. The African climate does get on our nerves. That is a great trouble with us all. If we escape the African fevers, our nerves begin to get on edge. I don't know that the young man ever repeated that astonishing act: but when that mother and her sister-in-law, who was with her, came back and told me about it.

I GAVE THEM SYMPATHY OPENLY.

I never took the position there that I would stand for the white man just because he was a white man, or that I would stand for the missionary just because he was a missionary. If the missionary made a mistake, and a native came to me I said to the native, "Why, that was wrong." And so it was.

But wherever the medical missionary will go out with a sincere, deep, strong love for the Saviour and for the proclamation of the simple story of Christ, and will use his scalpel or give the dose of medicine in the fear of the Lord, there he is going to be a very strong arm in our mission.

Address by Dr. J. H. McCartney of China

DR. J. H. MCCARTNEY: Our program tells us that the subject for this evening is medical work as an aid to the evangelizing of the countries in which we work. I agree with the speaker who has preceded me that if a medical man in China or any other heathen land would be a success, he must emphasize the evangelistic part of his work. I have always been a thorough believer in the idea that every medical man should be a preacher of the gospel as well as a healer of the body; and if one for one would not remain in China for twenty-four hours if I could not have the privilege of preaching the gospel to the people for whose bodies I am sent to care. We have been told that medical missionary work is a com-
paratively modern department of the work, and we know that to be true. But why it is so we are not able to say. After, the example left us by our Saviour, Christian people should have begun medical missionary work long before they did, because Christ emphasized that part of his work,—and I dare say he gained more influence among the people by his healing than he did by his preaching. I am sure that this is so in China.

I wish to say here this evening, in all due respect for the other countries that are represented, that China without question presents the greatest opportunities for medical missionary workers to-day in the world. I am glad that God called me to be a missionary and a medical missionary to the Chinese, because the needs are so great and the opportunities so many, for exemplifying the teachings of our Lord and Saviour Jesus Christ. No doubt many of you have read some of Dr. Smith's works on China, and if you have not, I would recommend you to do so; because the more you study that people, the more you are sure to admire them and respect them for what they really are.

We must remember that the Chinese are not like the people in Africa.

THEY ARE CIVILIZED,
and have been civilized for over two thousand years, and they have had what they call a system of medicine for at least that length of time, although from our way of looking at things, we would not regard it as a system of medicine. They have no medical schools, and no system of study, but a doctor in China is usually one whose father was a physician, and he has left to his son a legacy of his prescriptions, and the son has these prescriptions to go by. The customs there are different from what they are here. For instance, a patient may have fifteen or twenty doctors during a single illness. They call a doctor in to-day, and if the patient does not get better, they call another one to-morrow; and they keep that up until the patient either gets well or dies; and the last doctor that has the case gets either the blame or the glory. That is the custom, and one which European or American physicians have to contend against. It is certainly not very satisfactory to go to see a patient and prescribe for him, and if he does not get better at the first dose of medicine he takes, to have somebody else called. Frequently we try to contract, as the Chinese do, for the healing of the patients that we are called upon to see. The Chinese doctors generally gauge the charge for the healing of the disease by the wealth of the patient. And so, frequently, when we see we can cure the patient, we tell them we will take so much to cure the disease. And if you can get half the amount paid down at the first dose, with the understanding that when the patient recovers you are to have the other half, you are generally safe. That is the way the shrewd practitioners among the Chinese generally manage.

But, as I said before, there is no country where the

NEED OF MEDICAL MISSIONARIES IS SO GREAT
as in China; and I do not believe there is another country where the impression which medical missionaries make on the people is so telling for good as it is in China. Now, these needs are great not only in a physical way, and as far as the surgery we can practice or the medicine we can give goes, but it is also great in the way of teaching—that is, the inaugurating of schools of medicine throughout the empire. The one difficulty that stands in the way of this at the present time is the Chinese government itself. Medicine is the only branch of science the Chinese have not as yet taken up themselves.

Numerous medical schools have been started throughout the empire within the last few years by individual medical men or women, but these are always in centers where they are backed up and encouraged by the missions at home. Until the Chinese government will back up these schools by legislation, the teaching of Western medicine to the Chinese will never be successful; because the Chinaman is avaricious, like a great many in this country, and after he attends school for a year or two he thinks he knows it all, and he goes out
and sets up practice, and there is no law to protect the college or the doctor who has been teaching him; and so he goes on, and in time disgraces the system of medicine. We have had difficulty along these lines, so that several years ago I gave up trying to teach medical students, because I found that my time could be put in to better advantage in evangelistic work.

The need for medical work is great in a hygienic way. You have all heard that although the Chinese are civilized, they are not so civilized that they have come to look upon water as a necessity, that is,

WATER APPLIED ON THE OUTSIDE.

If there is one thing a Chinaman lacks and one thing he needs teaching and instruction on more than anything else, it is cleanliness of the body. I remember the impression the filth had upon Bishop Joyce when he made his itinerary through Western China some twelve or fourteen years ago. I had the privilege of escorting him, and I remember after having slept in a Chinese inn one night, he said to me, "Do you know what I have been thinking about? Well, I have been wishing I could bottle up all the smells I smelled here last night; and I would take them back to America and I would advertise a lecture on missions in China, and after the church was filled, I would order the doors locked and the windows closed; then I would remove the corks from the bottles and tell the people that that is what the missionary has to smell all his life in China, and ask them if they did not think there was room for medical missionary work." That was the impression of Bishop Joyce and the exact words, almost, as he gave them to me. I have seen our bishops and their wives traveling through the country, unable to eat their luncheon at noon, if we happened to reach no place where we could be secluded from the crowd, because the people are so inquisitive. They like to stand and look on, and if you are not watching pretty close, they like to examine the food you are eating, to find out what it is like.

I would like to tell you something about the results of the evangelistic work which I have had the privilege of carrying on in connection with the medical work for the last eighteen years. When I reached Chung-king, in the province of Szechuen, in the year 1890, there was
no hospital or organized medical work in all Western China. Although some of us might disagree with the assertion that medical missionary work was entirely modern, when we can look back, like our friend here who has been a medical missionary in Africa for the last forty or fifty years, we must admit that as far as West China at least is concerned, medical missionary work is a modern agency. West China is an uncertain quantity as far as the area goes, and as far as the actual knowledge we have as to the population of that part of the world. If you should look up the discipline of the Methodist Church, of which I am a missionary, you would find that they give the boundaries of the West China Mission as West China. Now, what that means I have no idea. West China and Thibet—those are the two countries that are included within the boundaries of the West China Mission. Neither have I any idea what that means.

Now, in the three provinces of West China, there are at least one hundred millions of people; and as I said, eighteen years ago there was not a single organized hospital in that part of the world. I had the privilege of building the first hospital in the west of China for the treatment of Chinese patients, and the money that I had at my disposal was twenty-five hundred dollars. And that was not given by the Missionary Society. It was a portion of an indemnity given to the mission after one of the riots we had there a few years previous, in which the buildings were destroyed. This was the balance that was left over after the buildings had all been restored, and they told me I might have twenty-five hundred dollars with which to build a hospital. Twenty-five hundred dollars here in America would not go very far. It would not put up a very large building. But we erected a small brick building, with accommodations for about thirty-five patients. It remained in that way, with perhaps a few additions to accommodate our increasing demand, until I came home on furlough in 1899; and at that time God so opened up the way and directed me to those stewards of his who had the means and were willing to give, that I succeeded in raising enough money to build the hospital that we are now in. And I want to say, friends, that in these eighteen years that work has become self-supporting. It has not only been self-supporting for the last few years, but it has been self-supporting for sixteen years. The present hospital, which was built and equipped under the superintendency of Dr. Hall,—Mrs. Hall who is here,—cost us in the neighborhood of fifteen thousand dollars. It is four stories high and has accommodation for one hundred in-patients, and at the time it was built was the largest building of its kind in all the west of China. The building was erected without any assistance from the Missionary Society, and the work has been carried on without any assistance from them. Last year we had an income of over twelve thousand dollars, and after all expenses were paid there was a balance left of nearly two thousand dollars; and that is equal to forty thousand dollars, for one dollar will go as far in China as twenty will here. Now, I don't know as this has anything to do with the evangelistic part of it; but it goes to show that the Chinese appreciate what is being done for them, because we are getting the means with which to carry on the work from the Chinese themselves, either by gifts or by practice from among the people.

DR. CANRIGHT OF BATTLE CREEK

Not only was this hospital erected, but Dr. Canright, whose home is the city of Battle Creek, has succeeded in erecting in the city of Chang-Sha one of the finest hospitals in all China.—I dare say it is the finest from an architectural standpoint in all the Orient,—and nearly all the assistance has come from the Chinese themselves. There is still a debt on the hospital, but I hope that will soon be raised.

I said that the Chinese have no knowledge of medicine as we look upon it, and they certainly have absolutely none of surgery. They say there is nothing today that has not before existed some time or another. The Chinese are a people given to looking backward rather than forward; and a man always considers that his grandfather was pos-
sessed of more intelligence and knowledge than he has. I think that is one reason why the Chinese as a nation have not progressed more than they have,—why they have not wakened up the same as the Japanese,—because they have been looking backward rather than forward. You have heard perhaps of the custom they have there when a Western doctor heals a case where the Chinese physicians have been baffled—he is presented with a large lacquered board in gold letters, and generally on this board will be a phrase in which the Western doctor is likened to some great surgeon that lived two thousand years ago. I never considered that much of a compliment—to be likened to a doctor that lived two thousand years ago. I never asked them what they thought about our modern flying-machines, etc.; but if you should, I suppose they would tell you that they flew through the air some two or three thousand years ago.

**MYTHOLOGY IN MEDICINE**

There is a good deal of mythology mixed up with Chinese medicine. They have absolutely no knowledge of the anatomy of the human body, and the larger the dose, and the more nauseating and nasty from our standpoint the medicine is, the better they like it. It has a moral effect upon them, it would seem. One of the common remedies in China is tigers’ bones, tigers’ claws, and tigers’ whiskers; and they look upon them as being especially valuable medicines in anemia and general weakness. They argue upon the theory that because the tiger is strong, therefore his bones must be strengthening. The patient takes these prescriptions to the drug store, and the druggist puts them up. Then the patient takes them home, puts them into earthenware, sets them on the stove and boils them; then he draws off the liquor and drinks it all down at one dose. That is one of the difficulties we had in the beginning in the practice of medicine in China,—it was the fear that these Chinese patients would take the whole bottleful of medicine at one time; and my practice in the beginning was to have the directions stamped on the bottle in Chinese: "Take one teaspoonful three times a day." That is the first sentence I learned in Chinese; and that was stamped on the bottle, but you could not always be sure they would adhere to it, and you were afraid all the time that some one would come to report that a certain patient had taken an overdose of medicine. If you would argue with them, they would always reply, "Well, now, if a teaspoonful does good, why won’t a whole bottleful do more good?"

But I said I was going to tell you some of the results of the medical work in an evangelistic way. I want to mention at least two here, then I will finish. One of the first patients that was brought to our hospital after its opening in Chung-King was a little boy about five or six years of age. He had tuberculosis in the knee joint, and his mother was a widow woman. In China the widows, even more than in this country, are always looking forward to the time when their sons shall be able to care for them. When I had examined the boy, I told the mother that the best thing would be to amputate the leg. She said, "I can not submit to that, because if he got well he would not be able to earn anything to support me when he grew up." I told her we would do the best we could; and we took him into the hospital and resected the joint. The child lingered along about three months, but grew worse rather than better; and finally the woman got enough sense to see that if she was going to save the boy she must submit to the operation, and she told me I might amputate the leg. We did so, and in a very short time the child was all right again; but the mother disappeared; she was nowhere to be found when the boy was well enough to be taken away. We thought to do her a favor by saving the boy’s life, but she did not appreciate it. We were in difficulty. We had no money to care for the child, but we finally decided to put him in the school, and he was taught the trade of tailoring. He was there for several years and finally went out and earned his living as a tailor.

About this time or soon after, the Chinese government took it into their heads
to revolutionize things in a literary way, and they issued an edict that from henceforth all who came up for examination must have Western mathematics; so this boy, being a shrewd fellow, saw his chance. He had been rather clever at mathematics; so he left his tailoring, came back into the school at his own expense, and took a course in mathematics. He kept to himself what he was going to do, but after he had been there two or three years, he went out, took his examination, and at the very first trial he obtained his degree. And he became an educated man. Here was a Chinese literary man. That is, he had suddenly risen to the rank of a shosi, and a one-legged one at that. I often wished that that mother, who was then dead, had been alive to see that a one-legged boy, if he had any desire to make anything of himself, had just as good a chance as one with two legs. This boy, after getting his degree, thought he could go out and make more money than by remaining in the mission; so he went out as an editor and remained for two years; but the Holy Spirit got hold of him and would not give him any rest night or day; he had no peace because he knew that all he had—his life and his knowledge—he owed to the missionaries; and he came back to one of the missionaries and said to him, "I do not have any peace day or night, and I want to come back now and preach for the mission, if they will have me." So the missionary said he would do what he could for him; and at the next annual meeting he brought his case up, and the boy was accepted, taken back on probation, and now he is filling one of the strongest churches in the West China Mission most acceptably; and we look upon that as being the direct fruits of medical work in an evangelistic way. That is only one case, and how many souls that boy has won and brought into the kingdom nobody knows; but I feel proud of the fact that his life was saved, and that he obtained an education which enabled him to occupy the position that he now holds.

RECEIVED HIS SIGHT

We had another interesting case—of a man who was blind. He was a literary man, and a man of considerable influence in his community. He came to the hospital to consult us about an opacity that had grown over both corneas and caused blindness. We performed iridectomy on both eyes and he received his sight; and during the time he remained in the hospital, something like a month, he was so impressed with the gospel as he heard it from the native preacher and others, that he accepted the faith before he went back to his home; and through that one man all that district has become virtually a Christian district.

Now friends, I hope these two cases will serve as a sufficient example of what the medical missionary work, in that part of the world at least, has been enabled to accomplish in an evangelistic way. Now, as I said in the beginning, if I could not do evangelistic work in connection with the medical work, I would not stay in China twenty-four hours; and I have one request to make of this body, which I know is in sympathy with the work which we are trying to do there, and that is this: that you pray more for your missionaries. We need your money, and the Lord knows that better than I do; but we need your prayers and your sympathy; and I want to illustrate how we need them,—just along the line of patience, as our doctor from Africa stated. The missionary is inclined sometimes to use physical force when he should not do it, and he forgets he is there impersonating Jesus Christ, and does not show the spirit he should.

Now right in connection with the medical work is the training of our nurses which we have in the hospital. In China they do not look upon nursing as being of importance. If a patient gets so ill he cannot feed himself, they let him die; that is all. And when we instituted a system of training nurses in our hospital, we could not get any Chinese young men to come in to take the course, because they did not see that there was any prospect ahead of them; they did not see that China was awakening, nor realize the needs of the situation, because they were looking for
MEDICAL MISSIONARY CONFERENCE

money, and they were not going to take up a profession by which they could not earn anything; so we had to pay them a salary from the start.—and then they did not take any special interest unless we were looking after them very closely. Time and again my patience has been tried to the very breaking point. For instance, an operation of a serious nature is performed, and the night nurse is told he must watch that patient closely, and if anything should happen, he must come over to awaken the physician at once. You awaken at midnight; nobody has come, and you feel suspicious that perhaps the nurse has gone to sleep. You get up, dress, go to the hospital and tiptoe your way in, and you find that nurse in bed asleep with his patient. Now, friends, that is the time when you need lots of the grace of God in order to keep your hands off that man. It would seem justifiable, in this country at least, to take him by the queue, pull him out of bed and help him downstairs; but you can not do it in China—you must just have patience! I know, I have faith to believe, that eventually we are going to have nurses there just as effective and just as satisfactory as you have here; but that time is long in the distance—I know that; but I have faith to believe that it is going to come, just the same as I believe China some day is going to be a Christian country. I hope, friends, you will pray for us every day of your life, that God may give us grace to live lives worthy the name that we bear.

Address of Dr. A. L. Kennan, of India

I have been only a very short time in India—eight years and a half—and I can not speak for the whole of India by any means; for India is a very, very large country, and there are a great number of missionaries and medical missionaries in different parts of India. As I remember,—though my memory often plays me tricks,—there are something like three hundred medical missionaries in India. We have an organization there called the Medical Missionary Association, and this publishes a quarterly Medical Missionary Review. I have not traveled about much in the country. Some people, you know, are sick, and they can go away to the hills, where they come in contact with other missionaries and other medical missionaries.—some doctors have an opportunity to do that.—but I have been so distastefully healthy ever since I have been in India that I have had to stay right in my own state, and have not seen much of the other work of India; so you will pardon me if I talk mostly about my own station. I am sure. I know, however, from what I have heard and read of the other work in India, that there are many large and successful hospitals there, and that the medical missionaries in India are doing a very great and a very valuable and a very much appreciated work in all parts of India. And I believe most profoundly that they are by so doing preaching the Christ.

Out there on the edge of the jungle, among the Santal people, an old aboriginal people of India.—what is medical missionary work out there? What do we do? The work has been carried on for some twenty years.—for ten or twelve years by my predecessor, Dr. T. W. Burkholder, and then I took it up. Last year there were between eight and nine thousand patients at the dispensary at Birampur. The medical missionary work is carried on there along two lines especially; one is dispensary work, and one is the work as we travel about in the country,—the country work, or the mofossel work, as it is called. I very seldom go to the patient's home—they come to me. When I am in the dispensary they come to me; when I am in mofossel, they come to me. I locate a camp, have my tents erected, and the patients come—sometimes sixty, eighty, one hundred or more in a day. The distinctively evangelistic work, as the term is generally used, consists in preaching, or talking rather, by my native helpers. The class of people among whom I work would scarcely follow a formal address of any sort; there our preaching is almost all rather conversational in its tone, and we always have to hold the men—we don't have our audiences fastened down in seats—they are standing or walking about. The moment I have ceased to interest the individual, he passes on; there is something else to talk
about with somebody else; so that native preachers or the missionary himself must hold the attention of the individual all the time. Now, we do that; we preach, but we do not preach about some of the things that are preached about in this country—the people there would not understand them. We talk about sin, and their conception of it is entirely different from the one that is in our mind as we use the word—entirely different. So we have to go into the very simple things, and we have to explain them, and illustrate them in many ways.

RESULTS NOT IMMEDIATE

Speaking from my own experience and observation, I do not think that the work—the evangelistic work—that we do in medical missions is very largely successful in the immediate winning of souls to Christ. I cannot trace the conversion of very many of these heathen people immediately to the preaching that is done at the dispensary, or to that which is done by my native preachers while we are in the mofossel work. These people come long distances to the dispensary; they come up and have a benefit conferred upon them, and by that very fact their minds are more open to the other things that are said, more open to the gospel. The medical work that we do in the dispensary is the thin edge of the wedge; it is the steel on the ax that opens the way for that which is to follow; and I think, as I consider the medical work, not only in my own station, but what I know from reading of the medical work in other stations—I think that the medical work is very greatly useful in this way: It opens the way for the further teaching of the gospel of the Lord Jesus Christ. For example, an old Mohammedan came to me,—a man perhaps fifty-five or sixty years old,—the second year that I was in India, and the Mohammedans are a proud people; they are proud of their religion and of their history. He threw himself down on the floor at my feet, and took hold of my feet and said to me. "You must come to my home; you must come; you must promise to come to my home. I will not let you go unless you do." He said, "Sahib, I have had nine children; and all my children have died; and now God has given into my home another child, and the same sickness that possessed the other children and of which they died has come upon this child. Now, Sahib," he said, "you must come to my home." It was a very exceptional case, and I found time to go to that man's home, and because the blessing of God was upon my humble efforts, that child recovered. That old Mohammedan has not become a Christian, but we have had many talks together since that time, and because God's blessing was upon the simple thing that I did, that man's mind is open to the gospel as I could not have opened it by preaching or by anything else I could have done in any other way.

I remember two women, the picture of sorrow and distress, who came to my dispensary one day, and the younger woman had a little child in her arms that was very ill indeed. The older woman was already a widow, and as I inquired into the story I found it to be something like this: The younger woman had married, and in the course of time had several children, and these one after another had died; and now she had another baby, a little boy, and the boys are always more valuable than girls in India; and he was ill, and the father had turned her out of the house. He said, "You are a cursed woman; the curse of the gods is upon you; I will have nothing to do with you any more. All of my four children have died, and I will have nothing to do with you." So he turned her out, and she came to me in her distress. By the blessing of God this child recovered, and as the child showed signs of recovery, little by little you could see the mother changing and becoming a new woman, and by and by there was a reconciliation with the husband, and he took her back. The curse of the gods in some way had been removed, and again and again that woman has come back to the dispensary, and the husband has come, and they have expressed their gratitude again and again in many ways.

There are multitudes of cases like this, where the blessing of God has evidently been upon the work. Now, friends, these people do not at once become Christians; and yet they are much more kindly dis-
posed toward me, toward all my native preachers, toward all Christian ideas and ideals, than they would have been otherwise.

This is the **EVANGELISTIC SIDE OF THE MEDICAL MISSIONARY WORK**, and it is one that should by no means be neglected. It seems to me the ideal way is to have a season of prayer when we come to the dispensary in the morning, then a little talk on some phase of the Christian religion. If I can not do this myself, I have some of my native helpers do it. But it does seem to me, friends, that we have something more to do in these Eastern countries than merely saying to those people, "You are sinners, and you need a Saviour." If I understand the function of the missionary in foreign lands, it is not simply to say over words, but it is also to personify the Spirit of Christ anew in you. It is, if you please, to interpret Jesus Christ to the East, and to the heathen world; and how better can we interpret him than by doing these kindly and helpful things. If a man has the Spirit of Christ, that Spirit will find some way of expressing itself. It may be by making roads; it may be by teaching in the schools; it may be by showing a kindly and sympathetic spirit in one way or another; it may be as a medical missionary by healing men's diseases. The Spirit of Christ will, if it is in a man, find some way of expressing itself. And I take it that the medical missionary is in this way—by helping men when they are in distress, exemplifying the spirit of Christ. It is a chance to interpret him to them. And it seems to me, though we are not by word of mouth preaching the evangel, we are still preaching the gospel in those things that our hands do. We are speaking to them in a most effectual way. It seems to me, too, my friends, as though if we will look into the work of medical missions, we shall see that God has many times most wonderfully placed his sanction and blessing upon the work of the medical missionary.

As I look back over my eight and a half years in India, and think of the things that I have attempted for the people who have come to me by hundreds and thousands, again and again I can see the hand of God in it. It has not been my skill, it has not been the little knowledge that I possess, but it has been the hand of the all-powerful One who alone can do the work. It has been his hand that I have seen again and again and again in the work; and with his sanction upon the work, we need have no hesitancy in entering upon it and throwing our lives into it.

I know that some of the people in the homeland think of the work of the missionary as being a work of sacrifice; and to be sure there are sacrifices which those who have gone to foreign lands best appreciate; there are some hard things to bear; but, my friends, there are also satisfactions that are deep and abiding. Let me say again, I don't think that the work of the medical missionary as a doctor at once wins men to Christ; but I do think that the work of the doctor is a distinctively evangelistic agency; it brings the good word of the love of God to mankind. It illustrates the loving heart of our Lord and Christ to those people. It speaks to them in a **LANGUAGE THAT THEY CAN UNDERSTAND**. There is the language of the kindly, helpful hand that is pushed out from a full and loving heart, and that is a language that the medical missionary specially speaks and specially uses.

I am very glad to think that here in this place there are so many who are planning to enter upon this medical work, and I wish I might have just a word to them in closing. As I say, the work is a satisfying one, profoundly satisfying to the soul. It makes a man rich. I can not come here and bring any discouraging word whatever. I remember reading the story many years ago—a dray was going down the street and had on it a hogshead of molasses, and as it turned the corner, one of the wheels struck the curb, and the hogshead of molasses rolled off and burst on the pavement. A boy saw the sea of sweetness flowing out on the pavement there, and he started up the street and called out to the first boy he met, "Dick, Dick, get all the boys ever you can, and all the shingles ever you can, and hurry as fast as ever you can; there is a whole hogs-
head of molasses busted on the corner." He went on a little way and saw another boy, and he cried, "Jim, Jim, get all the boys ever you can and all the shingles ever you can, and hurry as fast as ever you can; there is a whole hog's head of molasses busted on the corner." Friends, young friends especially, I am something like that boy to-night; and to our worthy brother here, to Dr. Dowkontt, I say, Get all the missionaries ever can, all the medical missionaries ever you can; there is an opportunity over there for the medical missionary to illustrate the spirit of Christ; to speak not simply with his voice, but to speak also from his heart and with his hands in helping men and healing men. There is sweetness, a sea of sweetness, and satisfaction over there in doing this work for Christ, for Christ and for men.

RESOLUTIONS ADOPTED BY THE CONFERENCE

The following resolution was presented by Dr. J. H. McCartney, medical missionary of the Methodist Mission in China:

WHEREAS, The American Medical Missionary College, located in Battle Creek, Mich., with a faculty second to none and an equipment for laboratory work superior to most other medical schools in the country; whose religious atmosphere is congenial to spiritual growth; and possessing the additional advantage that students can "work their way" through college, has been instituted especially for the training of worthy young men and women who are preparing for their life work in this calling; and

WHEREAS, The friendly relation which this institution sustains to the world-renowned Battle Creek Sanitarium, furnishes an additional training not possible in any other medical college in the world;

Resolved, That, as representatives of thirteen Christian Churches doing medical missionary work throughout the world, we recommend the work being done by this College to the favorable consideration and cooperation of the various Missionary Boards of our Churches in the preparation of their prospective medical missionaries.

Approved by fifty-five missionaries present belonging to the following denominations: Congregational; Baptist, North and South; Methodist; Presbyterian; United Presbyterian; Church of Christ; Evangelical Lutheran; Free Baptist; Free Methodist; Reformed Presbyterian; Reformed (Dutch) Church; United Church.

Dr. Emily D. Smith, of the Congregational Mission in China, presented this resolution:

WHEREAS, Through the cordial generosity of Dr. J. H. Kellogg and the Board of Managers of the Battle Creek Sanitarium, there has been opened to returned missionaries at a nominal charge all the great privileges and advantages of this institution; and,

WHEREAS, During the past fifteen months, no less than one hundred and thirty weary workers from many foreign lands have gladly availed themselves of these privileges, thereby receiving new health and strength and courage for their work; therefore,

Resolved, That we, the missionaries, medical and non-medical, assembled at this first medical missionary conference, do heartily and sincerely offer our deep gratitude and appreciation to Dr. Kellogg, the Board of Managers and the entire medical staff of the institution, for all these benefits, and for making possible the splendid Conference which we have been enjoying, and also to Dr. Dowkontt, whose untiring and loving interest has meant so much to us; and that we pray God's blessing upon them and their work, and as we go back to our fields of labor in renewed health and strength, we gladly acknowledge their share in our labors.

At the final meeting the following resolutions were unanimously passed, and an invitation by Dr. Kellogg, to "come again next year," was heartily accepted and responded to.

WHEREAS, The grave and twofold responsibilities of the medical missionary are such as to demand not only natural ability and qualifications for the work, but a special training; and,

WHEREAS, The rapid advancement which is being made in many heathen lands in the arts and sciences and in the acquisition of modern education and culture, has created new conditions which did not exist even a quarter of a century ago; therefore,

Resolved, That those who propose to devote their lives to medical missionary work in foreign lands should be encouraged to secure the most thoroughgoing preparation, giving special attention to that sort of practical training which can be obtained only by hospital experience either during the course of study or by means of a year or two of hospital experience after graduation; and

Resolved, That the medical missionary in going to a foreign field to engage in practical medical work should be supplied by the Board under which he is sent out with ample equipment for carrying on medical work, including necessary laboratory work, in an up-to-date and scientific manner; and

Resolved, That in his work, the medical missionary should be granted by the governing
Board under which his work is carried on, the greatest amount of freedom and the most thorough co-operation possible in the development of the work, the needs of which his special knowledge and training render him best capable of determining; and

Whereas, The efficiency and success of the missionary, whether medical or non-medical, depends largely upon his physical health and condition,

Resolved, That we recommend that in every mission, courses of health study should be organized, the purpose of which shall be to call the attention of the mission workers to the importance of giving attention to their own physical needs and cultivating efficiency by strict compliance with the laws of normal and healthful living.

THE BURNING OF THE HASKELL HOME

Very early in the morning of February 5, the Haskell Home for Orphans, located about one mile west of the Sanitarium, was discovered to be on fire. The alarm was quickly given and the city fire department summoned by telephone, but the distance from the city was such and the building so inflammable that ere competent help could arrive the large and noble building was doomed. The family contained at the time about thirty-one children of various ages—from the infant to boys and girls in their teens. The institution was under the immediate care of Elder and Mrs. R. S. Owen, who for over a year have acted the part of father and mother to the motherless ones in such a faithful and loving manner as to win the hearts of all the children and please exceedingly the patrons of the Home.

On retiring at night everything was inspected as usual and found to be safe. The family was so small that the heating plant had been supplemented by stoves, but these were seen to with care and pronounced cool and entirely safe. The fire seems to have started not far from the dust bin, and a reasonable theory as to its origin is that a match had been swept up from the floor and cast into the bin with sundry crumbs, etc., and that rats or mice in nibbling the match had set the contents of the bin on fire and this was communicated to the building.

The first care was to get the children from the burning house. In this there were manifested deeds of true heroism by the children and others. Mr. and Mrs. Owen slept near the boys' dormitory, and they led the little fellows to safety except one colored boy, who by some means became separated from the others, and was lost. He was ten years of age, a bright lad and full of life. He was brought to the Home some time since by Mrs. Steele of Chattanooga.

Access to the girls' dormitory was soon cut off, as the fire started near there. One young girl, Mary Armstrong, of Iowa, and her brother James were the heroes of this escape. Mary was with the children in the third story overlooking a one-story addition. Her brother was outside on the low roof. Mary urged and forced the little girls out of the window and her brother encouraged them to jump from below and caught them as they fell. Mary would reach down as low as she could with her arms and drop the little ones into James' hands, and thus they were saved with but very slight bruising. Two girls could not be persuaded to make the leap. They were too timid, and being twelve and thirteen years of age respectively, were too large for Mary to manage, and so she had to leave them to their fate. The loss of the three children has cast a gloom over the entire city. It is this more than anything else that makes the calamity so great.

The building was partially insured and the means thus left will suffice for the building of a smaller and more suitable home for the family.

The institution was built sixteen years ago through the generosity of Mrs. Caroline Haskell, of Michigan City, Ind. The Home was to be for orphans of any and all denominations alike, was to be called after Mr. Haskell, and was to be conducted upon a nonsectarian policy. In consideration of these things, Mrs. Haskell gave $30,000 for the building, and in her will left $10,000 toward an endowment fund. The subsequent withdrawal of some of the former patrons and friends of the institution on account of their denominational propensities had the effect to reduce the size of the family considerably, and it is not now thought desirable to allow the family to become as large as it has been in the past. The
future of the institution is still bright. The sympathies of the community and of its many friends will surely defend the orphans in this hour of need, and tenders of help and sympathy are already coming in. The children were left almost without clothing, being obliged to get out in their night-clothes for the most part, but the citizens saw them clothed at once without any solicitation, being glad of the opportunity to help.

Ever since the inception of the Orphan’s Home, Dr. and Mrs. J. H. Kellogg and their associates at the Sanitarium have stood sponsors for the work, and they still are determined to do all in their power for the children who are thrown upon a cold world for help.

WOMAN PHYSICIAN WANTED FOR KITTYANG, CHINA

The Woman’s Baptist Foreign Missionary Society desires a woman physician to take charge of their medical work at Kittyang, China, and to reopen the new hospital of the late Dr. Bixby. Any one interested should address Miss Blanche G. Loveridge, Foreign Secretary, Waukegan, Ill.

China is without doubt the most needy field of the world, and just at the present time there are magnificent openings for missionary work, many of which will be closed in the not distant future. China is rapidly imitating Japan. An era of progress has been inaugurated. Within a few years schools including medical colleges will be established in many parts of the empire, and native physicians will be filling the places which might have been filled by Christian physicians if the opportunity had been improved. Now is the time to work for China!

HOW DID YOU FIGHT?

Did you tackle that trouble that came your way
With a resolute heart and cheerful?
Or hide your face from the light of day
With a craven soul and fearful?
Oh, a trouble’s a ton, or a trouble’s an ounce,
Or a trouble is what you make it,
And it isn’t the fact that you’re hurt that counts,
But only how did you take it?

You are beaten to earth? Well, well, what’s that?
Come up with a smiling face.
It’s nothing against you to fall down flat,
But to lie there—that’s disgrace.
The harder you’re thrown, why the higher you bounce,
Be proud of your blackened eye!
It isn’t the fact that you’re licked that counts;
It’s how did you fight—and why?

—Edmund Vance Cook.
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