

New Jersey Medicine

A JOURNAL OF MEDICINE AND HEALTH POLICY

**VOL. 99, NO. 9
SEPTEMBER 2002
OFFPRINT**



**NJ MEDICAL HISTORY:
Continued Learning
Edward J. Ill, MD, and the
Academy of Medicine
of New Jersey**



*Display case holding some of the rare books donated to the Academy of Medicine of New Jersey by Dr. Edward J. Ill.
Reprinted through the courtesy of the Academy of Medicine of New Jersey.*

Continued Learning

Edward J. Ill, MD, and the Academy of Medicine of New Jersey

HENRY H. SHERK, MD

Were he alive today, Dr. Edward J. Ill might regard the recent legally mandated requirement for physicians to acquire CME credits with a certain irony. He and his colleagues in Essex County considered the opportunity for life-long study as one of the satisfactions of a medical career, and one can surmise that they looked upon continuing medical education, not as an onerous burden, but as a source of intellectual fulfillment. Education and the broadening of their professional horizons concerned them deeply.

New Jersey did not have a medical school during the sixty-one years that Dr. Ill practiced (1874–1935), but he and his colleagues took up the issues of medical student education, physician certification, and continuing education in ways that set the national standard. For example, in 1854 the New Jersey legislature passed the law that placed certification of doctors in the hands of the educators. Any individual with a diploma from any medical school could practice in New Jersey. The law did include educational requirements, however, and fraudulent diploma mills sprang up, letting loose upon the public unqualified and dangerous practitioners. Responsible New Jersey physicians righted this wrong by convincing the legislature to pass the Medical Practice Act of 1890, creating the Board of Medical Examiners. This law made certification the responsibility of a presumably objective body of appointed physicians who, under the authority of the executive branch of the state government, would administer standard tests to qualified applicants. One of Dr. Ill's colleagues in Essex County,

Dr. James T. Wrightson, conceived of and guided this legislation to its successful enactment.

Continuous professional development after graduation and certification, however, remained a problem. The metamorphosis of medical training occasioned by the rise of the state boards, the creation of the Johns Hopkins Medical Faculty as an avatar and model for medical education, and finally the Flexner report in 1913, which defined the standards for the schools, raised the bar for the creation of a medical school within the state; it was found to be too expensive and too difficult. New Jersey physicians, therefore, were at a disadvantage. Physicians in the northern part of the state had to look to the New York medical schools, and physicians in southern New Jersey had to look to the colleges in Philadelphia and Baltimore for advancement of their professional knowledge and skills. Furthermore, the dizzying pace of progress in medicine that began in the late nineteenth century meant that doctors who could not focus these developments on their patients' problems would probably lose out. Without convenient access to the faculties in these cities, New Jersey doctors struggled to remain abreast of the advances, and the men and women of the profession hungered for ways of gaining this new knowledge. Many early-twentieth-century physicians attempted to do this through the county medical societies, but these organizations and the Medical Society of New Jersey lacked resources and tended to focus on economic issues at the expense of intellectual and educational pursuits. In this environment, physicians in Essex

HENRY H. SHERK, MD, is historian of MSNJ, the Camden and Somerset County medical societies, and the author of Colleagues and Competitors: One Hundred and Fifty Year History of the Camden County Medical Society. He is professor of orthopaedic surgery, Medical College of Pennsylvania, Hahnemann University, in Philadelphia, and he edits the Medical History section of New Jersey Medicine.

County attempted to create a means by which they could keep up with the new medicine.

THE ACADEMY OF MEDICINE

In 1878 Dr. William Pierson organized the Orange Mountain Medical Society, which later became the William Pierson Medical Library Association. In 1902, it was replaced, more or less, by the Newark Medical Library Association when Dr. Frank Pineo and Mr. John Cotton Dana, head librarian at the Newark Public Library, agreed to maintain a medical library there. They formally convened the Newark Medical Library Association in 1905, but the growing number of books made a new and more broadly based organization necessary.¹

The leading physicians in northern New Jersey supported the idea. This group included a roster of five superstars, whose actions and achievements affected the lives of hundreds of thousands, or perhaps millions, of people. Dr. James Wrightson (1853–1927) made it possible for New Jersey citizens to receive treatment at the hands of properly trained and duly certified physicians. Dr. Henry Coit (1854–1917) led the effort to make available only pure, clean, and uncontaminated milk, thereby eliminating dysentery, typhoid fever, and brucellosis from the list of deadly diseases. Dr. Peter Hewlett (1846–1906) founded the Newark City Hospital in 1882. Charles J. Kipp (1838–1911) founded the Newark Eye and Ear Hospital. Dr. Edward J. Ill, the fifth member of this distinguished group, led the way in the surgical revolution of the late nineteenth and early twentieth centuries that was engendered by Listerism and anesthesia.

Dr. Ill's leadership and support made the Academy of Medicine of Northern New Jersey a reality at a time when the need for continuing medical education was very great.² His colleagues elected him president at their first meeting, which Henry Davidson, MD, described as follows:

The doctors came streaming into the public library building, some walking across Washington Park from the fashionable houses that in those days were located in the down-town section of Newark. Some came on bicycles,

some in buggies, and some chugged along Washington Street in high-fendered open-topped automobiles. They came from Newark, Jersey City, Hilton, Comunitaw, Elizabeth, and Vailsburg. By ten o'clock there were nearly one-hundred of them, crowded into a shelf-lined corner, perched on chairs and stools and book boxes, eager to give the breath of life to the age old idea of an Academy of Scholars.¹

In 1911, the idea of a life in academe, with its implications of the collegial and scholarly pursuit of intellectual goals, appealed to this group. The Academy they organized not only provided the necessary up-to-date information they needed in their practices, but it gave them the patina of intellectual respectability. Both Rutgers and Princeton universities had decided not to develop schools of medicine, and the Academy gave its members the feeling of a university; it was an intellectual and professional home base. The organizers and members have succeeded wonderfully in keeping that spirit alive, and so the modern drum beat mandating continuing medical education (CME) credits and hours resonates oddly among the members of an organization that, for almost one hundred years, has had continuous learning as its primary goal.

The bylaws, drawn up in the early years, clearly state the goals of the founders: "to advance medicine, provide for continuing education and research, maintain a library, and promote public health."¹ Dr. Ill, however, went beyond these goals and, in an address he gave in 1934 after nearly sixty years in practice, said, "the Academy will ever be a school for advancing our beloved profession, and also to produce a standard of ethics—a place for those interested in the book knowledge of the present day and the glorious history of the past."³

To achieve these goals the Academy had to adapt to changes. The membership overflowed the Newark Public Library and the Academy moved, first, to the Newark Department of Health building on Plane Street, then to 671 Broad Street, and, in 1920, to a brownstone at 91 Lincoln Park. Dr. Wells Eagleton's subsequent donation of the adjoining property substantially increased its space. In 1951 the Academy moved to Bloomfield and in 1973 to Lawrenceville.

The library, a major focus for the Academy, grew to thousands of volumes. Books, journals, monographs, rare, old, new, and up-to-date, filled the available space. The collection grew rapidly as a result of gifts from Dr. Ill, Dr. William Disbrow, Dr. James Condin, and others. Princeton University Library, the New York Academy of Medicine, the Essex County College of Medicine and Surgery, several county medical societies, and the New Jersey Association of Osteopathic Physicians and Surgeons often contributed to this massive collection.¹⁴ Eventually, it outgrew the Academy itself. In addition, and perhaps more telling, Academy members gradually ceased to use the library and its maintenance proved to be too great an expense. In 1971, under the leadership of Dr. Sherman Garrison and Dr. Morris Saffron, the Academy donated and transferred its entire collection to the library of the College of Medicine and Dentistry of New Jersey (now UMDNJ). The journals and contemporary volumes went to the George F. Smith Library of the Health Sciences in Newark. The Morris H. Saffron collection (523 rare books dating from 1513) commemorates his interest in the Academy and his effort in maintaining the Academy's library mission. Some of the rare books now reside in the special collection section of the Robert Wood Johnson School of Medicine Medical Library in Piscataway, and the New Jersey Historical Society has accepted the task of preserving the archives of the Academy. Books by Eustachius, Harvey, Ambrose Pare, Morgagni, Paracelsus, Albinus, and others exist in these libraries because of the Academy. The personal records and scrapbooks of Dr. Harrison Martland, which were rescued from a dumpster by the alert Dr. Samuel Berg, are now in the Saffron collection in Newark.

The advances occasioned by the discoveries of Koch, Virchow, Roentgen, Lister, and many others made doctors infinitely more effective in dealing with human suffering. The need for continuous medical education was underscored by such things as the 1900 Newark smallpox epidemic; rampant typhoid fever, which killed hundreds; diarrheal diseases, which carried away infants and small chil-

dren; and tuberculosis of the lungs and musculoskeletal systems, which destroyed the lives of many in that mosquito-infested city in the New Jersey marshes. Newark physicians, however, had begun to address these problems with vaccinations, clean water, clean milk, mosquito control, diphtheria antitoxin, and many other measures. The Academy of Medicine served them well as medicine progressed through the decades, and the old nemeses of humankind came under control. Despite variations in the size of the membership during wartime, by mid-century the Academy had grown to over fifteen hundred north Jersey physicians. It had addressed the issues of specialization by creating "sections" (on surgery, medicine, obstetrics and gynecology, and otolaryngology) as early as 1911. In 1915 it added a pediatrics section, and later, sections on general practice, oral medicine and surgery, and occupational medicine, among others.

A STATEWIDE SOCIETY

In 1953 the Academy of Medicine of Northern New Jersey was renamed the Academy of Medicine of New Jersey. By so doing, it took on a larger role in the state and extended its reach into the southern counties. Efforts to reach an increasingly less local audience began in the 1930s when the Academy held meetings of some of the sections at hospitals instead of at the headquarters in Newark. In the 1960s and 1970s it began organizing visiting symposia that were held at many hospitals throughout the state.

The list of speakers and the topics at the Academy's many meetings reflect the progress of medicine through the twentieth century and reveal the dynamics of an organization (by now an institution) that has adapted to the sweeping changes of the last hundred years. In 1913 and 1914 it hosted George Crile, John B. Deaver, Fred Albee, John Erdman, and Thomas Cullen. In 1919 it held a definitive symposium on influenza. In 1922 it hosted Howard Lillienthal and George Lewis, president of the Rockefeller Institute. Dr. Frank Lahey spoke on the treatment of goiter in 1926.

EDWARD J. ILL

The annual meeting in 1939 was mostly celebratory. At it, began the tradition of the awards that recognized individual physicians for outstanding service and for achievement. The premier and most coveted of these awards was the Edward J. Ill Award.

Dr. Ill's father, Dr. Fredolin Ill, came to America from Germany in 1848 and settled in Newark, where he practiced medicine in a poor section of the city called "Stump Town." In his early years, cholera swept the city, and he treated many of his patients without charge. He wrote that "they were swept away by the hundreds." Born in Newark in 1854 at the height of the cholera epidemic, Edward was graduated, first from local public schools, and then from the medical department of Columbia College in 1875. Upon graduation, he went to Europe, where he studied at the universities in Strasbourg, Frieburg, and Vienna. He returned to Newark in 1877 and at once began a surgical practice, continuing with it until his death sixty-five years later at the age of eighty-eight. He schooled himself in the principles and techniques of Listerism and antiseptic surgery, and in 1883 he reported on two patients on whom he had successfully performed bowel resections with re-anastomosis of the intestine. Routine today, surgeons who specialized in limb amputations, then, had to rethink their approach to their profession.⁵

Dr. Ill's energy and longevity resulted in a prodigious professional and academic output. One biographer stated that Dr. Ill "never stopped studying"⁵ and another wrote that he "never wasted ten minutes."¹ An individual possessed of ambition, energy, and unusual intelligence accomplishes a great deal, and, thus, Dr. Ill serves as the model of the complete physician.

Early in his career, he specialized in gynecology. With Papanicolau, he participated in the development of techniques for the early diagnosis of cervical cancer, and, with him and others, he worked on the histology of the cyclic changes in the uterine mucosa. He pioneered the use of the Rubin insufflation test for sterility. Surgical hyster-

ectomy had an unacceptable mortality prior to the technique developed by Stimson. The technique called for ligation of the uterine and ovarian arteries, which prevented exsanguination following excision of the uterus. The young Dr. Ill, already a highly skilled surgeon in 1889 when Stimson first performed the procedure, had the courage and ability to perform this type of surgery routinely in his practice.⁵

Edward Ill served on many hospital staffs in northern New Jersey: St. Michael's, St. Barnabus, Beth Israel, All Souls in Morristown, Mountain Side Hospital, and Rahway Memorial Hospital. Resigning from the German Hospital (later the Clara Maas Hospital) when its board fired a staff physician for admitting only poor patients he asked: "Is it right that honest practitioners whose clientele is among the poor should be thus treated?"⁶

Dr. Ill served as an early president of the American College of Obstetrics and Gynecology (ACOG), in 1898, and he served on the Board of Governors of the American College of Surgeons. His prolific literary output ended in 1935 with the publication of a paper he wrote about Moses Maimonides, the famous physician and Sephatic Jew from Cordoba, Spain, on the eight-hundredth anniversary of his birth.⁶

Dr. Ill never tired of reading, learning, studying, and seeking new and better ways to practice his "beloved profession."³ Continuing medical education was, in fact, his life, and the committee that awards a medal in his name has the heavy responsibility of ensuring that they suitably honor Dr. Ill's iconic career.

CONTINUED LEARNING

Whereas Dr. Ill and his colleagues in the Academy of Medicine of New Jersey looked on continued learning as one of the perquisites of becoming a physician, in recent years regulators have codified this part of the physician's life. The Accreditation Council for Continuing Medical Education (ACCME), founded in 1981, has, in effect, turned continuing medical education into an industry. With input from seven constituent organizations, including the AMA, the American Board of Medical

Specialties, and the Counsel of Medical Specialty Societies, the ACCME acts as the accrediting agency of sponsors of continuing medical education for physicians.⁷ Approximately thirty-seven state boards of medical examiners (including New Jersey's) now require that physicians document at least fifty hours of continuing education every year. Since the ACCME must put its imprimatur on the courses being offered, it has considerable control over how physicians continue to learn after their certification. Compliance with the ACCME standards requires that the sponsors of CME document participation. Universities, medical societies, some hospitals, and many specialty societies have found it expedient to do so, and, to its credit, the leadership of the Academy of Medicine of New Jersey realized early that the Academy should be able offer accredited continuing medical education to New Jersey's doctors. These CME credits, however, have become very expensive and time consuming to earn. Furthermore, much of what many physicians want and need does not necessarily qualify for official accreditation.

Finally, as the history of the Academy of Medicine of New Jersey shows, the mechanisms by which physicians can acquire continuing education have changed. A century ago, physicians relied primarily on books and journals, and the Academy responded by creating a large library. By 1970, however, the library no longer served the needs of the membership, and lectures, seminars, and symposia replaced it. Now, information is available to anyone, anywhere, and at any time, in cyberspace.⁸ The rigidities of the printed word have, to a considerable degree, eroded their usefulness for CME, and, similarly, the authority of the lecturing professor also has declined. Why should physicians have to spend thousands of dollars and give up

valuable days away from practice to listen to an "authority" when what they really need and want to learn is free online? Besides, in cyberspace one can talk back to professors and interact with colleagues anywhere about a subject of interest. In addition, the technology now allows surgeons and other practitioners to learn and practice procedures. Performance is graded much the way a video game keeps score or a flight simulator evaluates a student pilot. For many, the effect will be liberating. They might ask why continuing education should be made so burdensome when this new technology can restore the pleasure and excitement of a life of learning. The Academy of Medicine of New Jersey can play a vital role here, adapting, as it has in the past, to the new challenges that arise. By now, Dr. Ill might even have come up with a few suggestions. *NJM*

REFERENCES

The author wishes to thank Lois R. Densky-Wolff, head, Special Collections, University Libraries, University of Medicine and Dentistry of New Jersey, for all of her assistance.

1. M.H. Saffron. "The Academy of Medicine of New Jersey—A Brief History," *New Jersey Academy of Science* 9 (1964): 5.
2. W.S. Eagleton. "A Tribute to Dr. Edward J. Ill," *J. Med. Soc. of NJ*, 36 (Dec. 1939): 700.
3. E.J. Ill. "The Function of the Academy of Medicine," *J. Med. Soc. of NJ*, 31 (Dec. 1934): 368.
4. B.S. Irwin. "The Legacy of New Jersey Physician Book Collectors," *NJ Med.*, (Nov. 1992): 829.
5. G.W. Wood. "Edward J. Ill; The Versatile Man," *J. Med. Soc. of NJ*, 31 (June 1934): 361.
6. W.S. Eagleton. "A Tribute to Dr. Edward J. Ill," *J. Med. Soc. of NJ*, 36 (Dec. 1939): 700.
7. K. Boyden, ed. *Medical and Health Information Directory 1996-1997*, vol. 1 (Gale: Detroit, New York, Toronto, London): 4.
8. J.J. O'Donnell. *Avatars of the Word: From Papyrus to Cyberspace* (Harvard University Press: Cambridge, Mass. and London, 1998): 135.