STOMATOLOGY

You know, the Duke of Edinburgh,—the poor man—is married to the Queen of England, but he is intelligent. And he was overheard a half year ago complaining that he never knew what orthodontics was and he hoped to learn from orthodontics how you could put into your mouth. That is what I am going to do now.

The almighty of American dentistry is perhaps more known to the onlooker, the Europeans, who has met American dentists on the continent of Europe, as I did in Egypt, and have seen their immense popularity and importance of roles they have fulfilled there. I am set out to give you a few examples but my question will have something to do with orthodontics and the plurality/effects of signs like dentistry has, the fields through which it has gone: there is dentistry, there is orthodontics and R. Johnson wrote in the American Medical Journal on Stomatology—that is one field more, you see. So we already have three phases, dentistry, of which you have surgeon dentists, then you have the dentist proper then you have the orthodontists and now you have the problem of stomatology.

The dentists with whom I had taught in Europe, being people with whom you can study and then the influence of one fateful accident in three generations. For the first example, I would like to take from a dentist in Cologne, a Dr. Marring, probably not one of you will know him: I came to a house in Cologne, a very beautiful house and I asked the architect who had built it. Oh, they said, the son of our dentist built it so their architect was known only as the "son of our dentist". The daughter of the house, was only 8 years old. She was suddenly found bleeding, that this man was called in and he sat down on the bedside and then, how do you say it, squelched the bleeding but holding the thumbs and later is found a little tooth it was that had caused the bleeding.

So from this very moment he became a friend of the family, something that is unusual. A dentist sits down in the home of a family and does this and later, the girl who has told me this herself, believe that he gave her the little silver that was mixed, the color was obviously American make and this was the nicest furniture of her playroom. So when it came to building a house, he immediately remembered that this friend had a son who was studying architecture and he got his first chance in this way and built his finest business hour on the Rhine River.

Another case, I went on a freighter to Egypt and we had three weeks on the boat from Brooklyn to Alexandria and we became fast friends with a Dr. Henry and he had been the court dentist in Cairo to this strange King Farouk and also to the whole diplomatic core, all the ambassadors and ministers there and that was his story to us as we were on
the boat. He found that I had been a dentist in Kansas out in 1872 and the United
Presbyterians had run their mission for meeting or something of this kind and
the next day he was so moved that he entered the office and said "what can I do for the
kingdom of the Lord?" and he said "Go to Egypt". Doing what there? Art. Well, we
want to establish the mission that would act as it should in an Islam country and not
in a fashion of but of showing them what they are not able to do—how
to run things. And he went to Arfeud—it is still a flourishing centre of American
missions and if you will, maybe 250 schools now depending on this one centre, a hospital,
a training school, 80 churches all over Egypt, all run because Mr Henry in Kansas City
decided in 1872 that he should run this. He

But, more than this, he was a dentist and there weren't any dentists in Arfeud
and he forced a son of his who later went to the court in Cairo, to study dentistry, whose
son wanted to become a surgeon. No, said the father, dentistry is the right thing. In
this country that is needed much more than anybody else--nobody knows what dentistry is
in Egypt. As you know, it is a country of squalor and poverty and the dentists you have,
feel, still, contact with the whole population. And so, when I met Dr. Henry, Jr., he said
was 65 or 68 years of age, himself and, well, it nearly broke my heart that I couldn't
become a surgeon but I think my father was right, I became much more confident of the men
in the know, anything about and anything of general politics, people will discuss them with
me, having this confidence. If you are so close to men who sits in your chair, you can
help them, that creates a bond.

An he was a most influential person, white man, in Cairo in the sense that
there was trouble. The Americans wanted to give a hospital after the war for tropical
diseases. Nothing moved and Mr. Henry just spoke to the patient to such and such a minister
in a chair and things began to move.

The third generation of this family—I think that has to go with my story a
little bit—became then, our diplomatic representative then in Judaea with King Saud of
Arabia and so, in three generations, this dentist family has deserved their
mobility of such a dentist who carries all his thing with him can be of service there
right away in any situation has made a lasting impression.

I have tried to collect in the last ten years, fifteen years, more of this data
and, you all know, of course, the story of A. Weston Harris, the men who wrote on dental
infection and then spent 15 years going around the world and comparing notes about
nutrition and dental diseases, among the polynesians, etc., and he fabulously enough,
began his studies in the midst of Switzerland and I happened to live in this Swiss Village
where they started the experiment this last summer—the very same valley where he compared
notes between the food and the carriers and the state of the teeth in one town that had
access to the railroad and to traffic, you see, to the next little village in which there was no such connection and we had to eat the local flour in the hard bread, you probably noticed book, I have tried to spread it— I think it is a first rate investigation a comparison of the eating manners of the whole of humanity and I don't know how popular is this book. What is it called— Nutrition and Dental Disease— but is much more than a dental investigation, it is revealing about the habit and habitat of all the people on the globe. I am still always consulting this book and the Icelander Steph. Hansen, of whom you have heard, lived next door to me in Hanover, decided to buy the book on these problems raised by the dietary questions asked by Heiss wherever he went. Here again you have an example of the immense fruitfulness of the question of the dental man. He able, every dentist, to go into every town, and into every village, into every country, offer something immediately and he was well received. He did not ask, are you communist, are you this and that, or are your religion— he looked into their mouths and he didn't put his foot in, but he looked at them and counted their cavities and his statistics were proof, so to speak, that he was able to contact and able to win the confidence of people everywhere in a way I think nobody else could.

This direct approach is not given to an anthropologist, you see, who wants to find out about people's customs. He has to ask questions. The dentist, you see, gets his answers from the mouth of the patient and not from his words.

Now I would like to ask, you know more about the history of your field, than I myself, if isn't a pertinent question to ask now in this field of rapid turnover of methods and attitudes, that we have to learn to retain in all of these successive stages of a science, of a technique, of your field of action of dentistry, the best from every stage. I call this with a learned name I know, but you have to find some technical term, the of the successes. In the case of the Henrys, I was struck with the tenacity which dentists had three generations of dentistry kept under quite different circumstances: one, dentist in Kansas, second, missionary yet remaining a dentist and then his son following him to remain a dentist even though he didn't want to. Here are three different generations doing different things but in different habitat and yet doing the same and knowing of each other and, as a family, of course, being affectionate.

Exhibit I find I give, in Denver, you may remember, Dr. Drake, I give some examples of the forgetfulness of progress. "hat we call progress very often today is a turning away from things already known going not over just to better things, but simply to other things. In the last weeks I was faced with this. I tried to STERE CYAN, the leaves of which is an excellent drug used for 200 or 300 years or perhaps even much longer against bladder trouble. You cannot find it anymore in this country. It had practically disappeared. The teeth specialist in Boston who dealt with all the teeth
and everybody that I had contacted in New England, New York and Boston and in my little hometown and Ourre's — nobody knows anymore what that is. So I always ask you and I ask myself — how do we retain the things already known under the avalanche of progress? Are we cheating ourselves by saying that the next thing is better? We just don't know that something 50 years ago that had been known, by the wayside.

And there comes now, this word, Stomatology to my salvation, so to speak of tradition. I do think that you can only keep in progress the things that otherwise, would be lost and forgotten if, from the very beginning, the tooth and the mouth and the mastication and perhaps the speech too, I suppose, and development are firmly held under some general, by some general understanding. They must be held together at the various stages, of eating at 30 and eating at 70 and up, at what angle they are eating, of when they are 29 and of when they 90 and the stomatology —

It is all stomatology that dentists have already dropped, see, orthodontics have dropped and they say—. The only salvation of the thing is stomatology because that is a part of medicine and it should be part of medicine— they have a law in Italy now that the dentist is a doctor and that the doctor is a dentist and there should be no difference. I don't know if this is known in this country, but the Italians, they are very proud that they are in advance of everybody else in this respect.

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It is strange that it should be this way but stomatology is a term which I think would come into much later prominence and for one simple reason: our modern humanity and I think, partly under the leadership of you, gentlemen in the denture department, breaks through the black sea of foreign, or Greek tradition of medicine and of philosophy and I am amazed at looking at the books on orthodontics, nowhere did I find the clue of speech. I don't know how far you can separate the mouth from speech, after all, to me the mouth is most important because I speak and it is the mouth with whose help, I do speak and I think that the unity behind all the various phases of your medicine development is the fact that the mouth and the nose are harbouring two senses of which in the last 20 years have been mistreated, abused and been looked upon as secondary compared to the eyes and, at best, the ear. Now you and I live in a very strange crises of such as tennis, it may not have reached you but people, because of television and because of radio and the telethon® had come to realize that the eyes had an unjustifiable domination over all our thinking in the last 400 years because printing comes to you in the form of being seen even though it is spoken so that everything intellectual seems to make an entrance just as much as pictures and landscapes through the eyes and if you look at television and anything else, what we call today a philosophy, it is always based on the simple separation of object and subject. I SEE YOU, because in seeing, we always create two spaces, the
one space in which I stand and this object upon which I look and these pictures which I show you, show there is a second space upon which I can look and recognize the picture the same as a blackboard—what I put on this blackboard is in a separate space—separate

and analyze but that is subservient to your willingness to become one with this pain and to understand his growing forces, for example, and to enter upon it. It is a living process which in you have the honour of participating and is not just "here am I and there is this patient". If you can do this, you can certainly doctor him but I don't think you will do him much good. This first thing is that you know he is expecting you to enter into his life cycle, in some way, at a dangerous point, remove an obstacle that is in the way of his own. Now, the Jesuits and the stelographers and the many doctors in the field of psychology have become aware of this and intolerance, arrogance, I sense of our thinking, that we say we only know and we only have insight for things that we can see. You, gentlemen, are in a privileged position of having us to free ourselves from this completely unwarranted predominance of the eyesight, for understanding life or for living the good life too. That hearing is different from eyes—I did not stress that—it is quite well known. But you are dealing with two important senses which are not represented as yet in the modern day philosophies of debate by which sense, life really makes sense, by which sense we get our really most profound orientation in life. The nose and the smell and the scent which is produced there, determines the direction which we take to join groups or to avoid groups and you don't go over there to speak but you do go where it smells well. And if you can see, all of a sudden, that the eyes is to the brain, reporting, the smell is reporting to the genesis, the ear is reporting to the heart and now, I ask you, what is the sense of touch and mastication report or referring to? Obviously to the limbs, to, it is a contact, a touch, to the skin by which we also receive instruction of the universe and its true character.

I have the honour to show you that I am not alone in this instance—to build you up to sentimental science, so to speak, the dentistry, the dealing with the mouth, from stomatology can give the organs that informs us in a completely different way of the universe. If a child tries to take the box into the mouth, you see, the child things he will learn what the box is like. You laugh at his. Perhaps it is not such a bad idea—said that you could only know him by eating him. It is very seri us. Today, these churches are all, as you know, on the way out because the people have completely lost the under-
standing of the sacraments. The baptism with water, the contact on the skin and the eating of the cup and the bread. Now, I am of the opinion that he knew, living in a great civilization that the eyes is the great offender. That the eye is the greater offender than the eyes is all exaggerated (the centre). In our schools, in our type of learning, we always want to see things.---and the point I want to draw your attention to is

---in which the sense of smell and of chewing, eating, sense of taste, etc., that these two senses can just as well or (interruption) must be made the basis of our experience of the universe. This mouth of mine, after all, is an entry, the door of my experiences with the things, the creatures which I can eat.

All of our school for the last four years you have more and more said that you should think more and more of the "visual aids". Everything is done through vision, I think we are killing the soul of our children by teaching them only through the eye. When I show you—the eye is closed but the If you 10,000 pictures of cruelties, it was in the prison camps, so that you, basked, you only acquaint them with the cruelties and they will think nothing in the end of permitting these cruelties themselves. The eye is completely indifferent because it moves us out of the phase which this thing occurs in. It is not dangerous to look at this. All our mind is filled with, then is sensational stuff and---

too much whispering

---this may seem to you far-fetched but I can only assure you that this has been my hope for the last 30 years. If you look at the eye— the eye organizes things in outer space, are you looking at everything you are looking upon in the outer world and that the eye is the subject and out here are objects. In other words, the eye separates from my reality. You cannot see, you know, if you take this too close to the eye. By too large approximation, vicinity, you see, makes it impossible to even use the eye. The eye is only possible in separation of, between you and the world. But part of yours and my experience is that we are part of this universe and, as I said, a doctor is a part, we should.

You call in the doctor and the doctor finds that you have 40 degrees of fever and he takes over and the doctor must become a member or a part of the system. He becomes his reason, his intelligence. The patient surrenders. He says, "I couldn't—you tell me what to do. That is not looking, this is not seeing, this is identification. The doctor becomes a part of
his patient for the time being. It is like a — Now look at the other senses:
The ear: put you inside of the world forces. With the ear, you are inside of the waves that resound in your membrane here. This puts men inside of the universe and there is no way of separating you from this. You can only, a musical person hears a harmony by immersing himself into these musical tones—he is not the subject and music is not the object and that is why my friend, the Jesuits writes the article over the subduing of the eye—the exaggerated concentration of the eye by giving more rights to the ear.
I come before you to enlist your interest in a big dream, if you recall, that the two other senses, the smell and the taste, will have to become real in our organized society if we people want to live the good life. You cannot live on exclusively. Very few people can trust their senses—we have to overcome the All the more must they be. Now the dentists, I think, know something about the problems of mastication and taste.