Peter English’s “‘Not Miniature Men and Women’: Abraham Jacobi’s Vision of a New Medical Specialty a Century Ago” [1] provides important insights into the history of pediatrics. Using the writings and speeches of early pioneers in American pediatrics, he has described some of the arguments these leaders used to convince fellow physicians and the public of the need for a medical specialty whose sole concern was children. In recounting how early leaders in pediatrics demonstrated that children were not “miniature men and women,” Dr. English necessarily covers a number of topics in a short space. He gives a very close-up view, from the perspective of the participants themselves. In this commentary, I will take a few steps back and survey more of the scene to gain a sense of how the arguments English presents fit into the larger picture of turn-of-the-century medicine and society.

I include society here because the development of pediatrics as a specialty in the United States and Europe at the turn of the century stemmed in part from the recognition of a severe social problem (the care of needy and unwanted children) and from its resolution as a public policy issue (e.g., through the establishment of foundling homes). Unlike other medical specialties that focused on body systems or on approaches to therapy, pediatrics singled out people of one age group and considered all aspects of children’s mental and physical development in society as being within its purview. So consistently and well did pediatrics fulfill this goal of general concern for children’s well-being that until the 1930s, at least one respected medical historian has argued, “the specialty had a social rather than a scientific rationale” for its existence ([6], p. 219). Such an assessment probably exaggerates reality, and would likely have caused Abraham Jacobi to respond heatedly and defensively. English uses the words and ideas of pediatrics’ founders to demonstrate that early practitioners did offer more than social policy justifications for the introduction of a children’s medical specialty in late nineteenth and early twentieth century America, though these policy issues certainly played a major role. What were the medical and social contexts?

Actually, interest in pediatric problems was growing in both Europe and
the United States throughout the nineteenth century ([3], pp. 84–124). By
1850, for example, Friedrich Ludwig Meissner could publish, in Leipzig, a
huge bibliography of pediatrics covering the period 1472–1849. The
founding of children’s hospitals, the publishing of books and articles on
various aspects of children’s diseases, and a growing awareness of the social
and medical plight of children further attests to rising concern for the well-
being of children. Many nineteenth-century European medical schools even
taught pediatrics along with other aspects of medical practice. No doubt
Jacobi’s medical training in Europe included courses on and clinical work
with children. So he brought with him to an already interested United States
that special training and strong personal concern for the health problems of
children that allowed him to become the first full-time instructor in pediatrics
in this country.

Why did this new discipline arise and take root in the United States after
Jacobi took those initial steps to establish it? Both children and physicians
had been in the United States for a long time, yet few healers, until the late
nineteenth century, devoted their full energies to treating just that patient
population. Why was that? One can ask the questions negatively: Did general
physicians not care about children? Did they not perceive children’s
problems as unique? Were they afraid they would not earn enough money
treating only children? Was medical knowledge not far enough advanced to
establish and maintain such a specialty? Though there were, in these and
earlier times, physicians interested in limiting their practices to children,
conditions were not proper for support of pediatricians in the United States.
We can phrase the question more neutrally: What was occurring in late
nineteenth-century America that allowed, even fostered, the development of
pediatrics?

Pediatrics did not develop alone as a medical specialty in the late
nineteenth century. Other groups of physicians were beginning to limit their
practices to, for example, women, otolaryngology, surgery, neurology,
dermatology, genito-urinary problems, and gastro-enterology, and to form
specialty societies in order to keep up with new knowledge and with
colleagues in these fields. William Rothstein, a sociologist writing about the
nineteenth century American medical profession, has proposed several
necessary conditions for the formation of specialties:

Specialization could not develop in medicine until a number of conditions were
fulfilled: (1) a medically valid body of medical knowledge and techniques had to
develop in a given specialty; (2) urban population aggregates had to become