

THE TWO PATHIES

A DIALOGUE GIVING THE
COMPARATIVE STUDY OF ALLOPATHY
AND HOMŒOPATHY

451

Drs. ALLON & HOME

Collected & Arranged by

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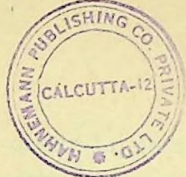
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The Two 'Pathies—A Dialogue

Between Dr. Allon of the Old School, and
Dr. Home of the New.

DR. ALLON.—I am pleased to meet you again. I don't forget that you and I were fellow-students at the Edinburgh University, and were such chums that the fellows dubbed us "Damon and Pythias." You remember we were capped on the same day. Our paths have widely separated since that time, for while I stuck to the old ship, you floated away on the heretical raft of homœopathy. I have often wondered how a person of your intelligence could take up with such a manifest absurdity—so, at least, it appears to me.

DR. HOME.—It is from your own study and trial of the system that you have been convinced of its absurdity.

A.—Well, not exactly. I have been content to abide by the opinions of those who profess to have studied and tested it. I accept the conclusions respecting it arrived at by those eminent men, Andral, Simpson, Brodie, Gairdner, Forbes, Bushnan, Brunton, Routh, and others.

H.—The only one of those you have mentioned who pretended to test homœopathy was Andral, and as he knew nothing about the system, and, indeed,

had formed a completely erroneous idea of it, his so-called trials were utterly futile. Simpson's tirade was triumphantly replied to by Henderson in a work which perhaps you have not read.

A.—I confess I have not.

H.—As for Sir Benjamin Brodie's articles on homœopathy, he showed his incompetence by his ludicrous mis-statement of Hahnemann's doctrine. Gairdner, Forbes, and Bushnan certainly endeavoured to state the homœopathic doctrine fairly, but their writings on the subject are mere special pleading, and their denials of the truth of Hahnemann's method are unsupported by any trials of his method. This mode of treating the subject is denounced by F. Hoffmann in the following terms:—"Duo in medicina fulcra sunt: ratio et experientia. Experientia præcedit, ratio sequitur; hinc rationes in rebus medicis non conditæ nil valent." As for Dr. Lauder Brunton, he may be cited as an authority in favour of homœopathy, for he admits that the rule *similia similibus* is occasionally true: he only denies the universality of its application; and he shows his belief in its truth by "conveying" a large number of our medicines into his book, and giving their homœopathic uses. Routh, no doubt, wrote a book called "The Fallacies of Homœopathy," but it should rather have been called "The Fallacies of Allopathy," for the only important part of it is carefully-compiled tables of the comparative success of the two methods of treatment of various serious diseases in hospitals;

and these show that the mortality in every case is much smaller under homœopathic than under the ordinary treatment. So that Routh may be regarded as a witness on the homœopathic side, for his "*experientia*" is all in our favour, and as his "*rationes*" are not based on his "*experientia*," we may say with Hoffmann, "*nil valent*"—they are of no account.

A.—If Hahnemann's therapeutic rule of *similia similibus curentur* were the true rule for the selection of the remedy, it is impossible to suppose that it could never have been discovered by some of the illustrious and careful observers who have cultivated medicine during the 3,000 years in which it has been practised as an art. But Christison, our great authority on *materia medica*, says of homœopathy: "There has been no shadow cast before the coming event, no antecedent approximation, no universal adoption, no intruding claimant."

H.—Christison was blinded by his anti-homœopathic zeal, and this statement of his is the exact contrary of the truth. It has frequently been shown by the partisans of homœopathy that the great truth which Hahnemann devoted his life to promulgate was foreshadowed in the writings of his predecessors from the very earliest times until his own day; that there was an antecedent approximation to it in remote as well as more recent times; that intruding claimants to its discovery were no wanting; and to us it appears that its universal adoption cannot be long withheld. Thus Hippocrates, in his treatise on

“The Places in Man,” says that, though the general rule of treatment is *contraria contrariis*, the opposite rule, *similia similibus*, also holds good in some cases; and in illustration of the latter he states that the same substances that cause strangury, cough, vomiting and diarrhœa, will cure these diseases. Galen himself, the champion of the therapeutic rule *contraria contrariis*, admits the occasional truth of *similia similibus*, and says that moist diseases sometimes require moist remedies, dry diseases dry remedies, hot diseases hot remedies, and cold diseases cold remedies. Basil Valentine says; “Likes must be cured by means of their likes, and not by their contraries.” Many passages might be quoted from Paracelsus to show that he was opposed to the Galenic formula of *contraria contrariis*, and taught the doctrine of *similia similibus*. In many other respects the teachings of Paracelsus bear a striking resemblance to those of Hahnemann. Indeed, the learned Schulz wrote a book to prove that homœopathy was merely a resuscitation of the method of Paracelsus.

A.—But Paracelsus was a quack!

H.—So his enemies said, but that was because he denounced their practice as unscientific and pernicious, which, no doubt, it would be considered now-a-days. For the same reason Hahnemann was called a quack, because he inveighed against the practice that prevailed among the physicians of his time, which practice could find

no defenders at the present day. I could multiply quotations from various authors down to Hahnemann's own day, to show that the therapeutic rule *similia similibus* was acknowledged to be in many cases the best guide to the selection of the remedy. Hahnemann has cited many passages from the writings of his predecessors to show that the homœopathic rule was occasionally acted on for the cure of diseases.

A.—If the homœopathic rule was acknowledged by so many, why was it not more generally acted on? Why was its application limited to such a small number of diseases?

H.—The reason is that the pure or positive effects of so few drugs were known, and it never occurred to any one to set about a methodical plan for ascertaining the positive action of drugs on the healthy human organism. It was only some of the coarser effects of drugs that were known, either from their administration in excessive doses in disease, or from accidental or intentional poisonings. It was a master-stroke of genius in Hahnemann that led him to perceive—after he had convinced himself that medicines cured by virtue of their power to cause symptoms similar to those of the disease—that the remedial powers of drugs had to be ascertained by carefully testing them on the healthy human organism. In this way only could a perfect *materia medica* be constructed. Hahnemann at first endeavoured to practise homœo-

pathically with the scanty material already to his hand in the recorded cases of poisoning and in the alleged effects of some drugs; but he found the former too coarse and the latter too imaginary to serve as guides to the selection of remedies for any considerable number of diseases. So he set himself the gigantic task of constructing an entirely new materia medica, based on the pure positive effects of drugs ascertained by experiments—at first only on his own person, latterly on a band of zealous enthusiasts and intelligent pupils.

A.—But Hahnemann was not the first to ascertain the powers of drugs by testing them on the healthy organism.

H.—Undoubtedly there have in all ages been enthusiasts who have attempted to ascertain the action of certain drugs by such trials. Without going too far back, I may mention Storck, who flourished not long before Hahnemann. But, though he proved a number of drugs, his object was not so much to ascertain how they acted or what morbid symptoms they produced, as to find out what doses he might administer to patients without imperilling their lives. The illustrious Haller, indeed, wrote that medicines should first be tested on the healthy before being prescribed for the sick, but he did not act on his own recommendation, and no one else did so, so his advice remained a mere dead letter, and Hahnemann and his followers may be considered as the sole authors of the only

scientific *materia medica* where the real pathogenic powers of drugs are recorded.

A.—Well, I grant that your *materia medica* shows that you homœopathists have expended a considerable amount of labour, and have even undergone much suffering in its construction, but I may ask—*cui bono*? It appears to me to be so much labour lost, for, after all, you don't cure more cases than we do. In fact, Dr. C. J. B. Williams says that whenever a comparative trial of allopathic and homœopathic treatment has been instituted, homœopathy has always shown a larger mortality than the old system.

H.—There Dr. Williams made a statement not only untrue in every particular, but the exact reverse of the truth. No comparative trial of the sort he mentions has ever been made. Offers have repeatedly been made by persons favourable to homœopathy to pay all the expenses of such a trial in some of our public hospitals, but they have always been contemptuously refused. The late Mr. S. Gurney and our lamented Major Vaughan Morgan both offered to maintain at their own cost wards in the London hospitals for the purpose of testing the homœopathic treatment, but the governing bodies of the hospitals to which the offers were made, while urgently appealing to the public for funds, would have nothing to do with the munificent offers of these philanthropists, though by accepting them they would have been enabled to open wards that

were closed for lack of funds, and to test the value of the homœopathic treatment, which is conscientiously believed to be the most successful by a large number of highly-educated medical men, and by a large proportion of the public. Trials of homœopathy in the wards of allopathic hospitals have been made in several countries, and these trials have always resulted in a demonstration of the great success of the homœopathic treatment, but they were generally brought to an abrupt conclusion of the allopathic authorities. An account of these will be found in Tract No. 11 of the Homœopathic League. The most complete comparison of homœopathic and allopathic treatment will be found in Dr. Routh's "Fallacies of Homœopathy," where, as I have already stated, the comparison is all in favour of the homœopathic treatment. One of the most remarkable and convincing illustrations of the superiority of the homœopathic method was shown in the treatment of cholera. In the epidemic of 1831, when the disease raged severely in Moravia, the mortality under allopathic treatment was 42 per cent., while, under homœopathic treatment, only 10 per cent. died. In the epidemic of cholera in Vienna, in 1836, the mortality in the allopathic hospitals was 67 per cent., whereas in the homœopathic hospital it was only 33 per cent. In the epidemic of 1854, in London, the mortality in the allopathic hospitals averaged 51.8 per cent., whilst the homœopathic hospital had a mortality of only 16.4 per cent.

A.—If the superiority of the homœopathic treatment is so decided, how is it that it has not made more converts among medical men in this country, where it has been practised for so many years, and has had no lack of zealous and talented advocates ?

H.—There are several reasons for the smallness of the number of professed converts to homœopathy in this country. We are a very conservative people. We have an innate prejudice in favour of ancient and time-hallowed institutions and an instinctive antipathy to innovations and revolutions. Our conservative spirit is exemplified in the recent dictum of an eminent statesman: "It is better to stick to a stupid plan that is old, than to adopt a wise plan that is new." The schools of medicine where our students are taught, are all, without exception, in the hands of the allopathic sect, whose interests and prepossessions are all against the admission of the claims of homœopathy to a superiority over, or even to an equality with, the dominant methods. The teachers accordingly either entirely ignore homœopathy, or only allude to it as an unscientific absurdity, or denounce it as a system of dishonest quackery. They warn their pupils against having anything to do with the unclean thing. If any of them incautiously advocate fair-play towards homœopathy and its partisans—as was done in 1881 by Dr. Bristowe and Mr. Hutchinson—all the organs of so-called "orthodox" medicine assail them with abuse, and denounce them as

betrayers of the sacred cause of "scientific" medicine. Professors and teachers know that they would imperil their position in the universities and colleges were they to admit, even partially, the scientific truth of the homœopathic doctrine; so, fully alive to the excellence of the saying, *beati possidentes*," they continue to misrepresent it, to pass it over in silence, or, if they allude to it at all, to ridicule some of its technicalities wherein it differs most widely from traditional methods, and by so doing they retain a firm hold of their lucrative chairs.

A.—But surely those who have finished their university or collegiate education, and are emancipated from the routine of the medical schools, would be disposed to inquire into and adopt a practice which promises such successful results as those you claim for it ?

H.—Not at all necessarily. You must remember that they leave the schools deeply prejudiced against the system by the instructions of their respected teachers. They know that almost every college in Great Britain and Ireland has fulminated anathemas against homœopathy; that candidates for diplomas have been rejected, and even refused to be admitted to examination, unless they would make a solemn promise not to practise homœopathy. They know that a suspicion of leaning towards homœopathy would preclude them from obtaining any of the honours and emoluments of the profession, from being admitted to any of the orthodox societies, or

from gaining a post in any of the old-school hospitals. They could never hope to be called in consultation by, or to obtain the professional assistance of, their non-homœopathic colleagues.

A.—But would not the prospect of rapidly obtaining a lucrative practice outweigh in their minds the disadvantages you have enumerated ?

H.—Whatever may have been the case in the early days of homœopathy, the large practices do not now fall very often to its share. The medical neophyte must see that the emoluments as well as the honours of the profession are only given to the partisans of Galenic physic. He must also know that, if the assertion of homœopaths is true that diseases are cured by the homœopathic much more quickly and certainly than by the, ordinary treatment, practice under homœopathy must be considerably less remunerative than under allopathy. He is, therefore, from a mere trading point of view, prejudiced against a system that diminishes the profits of his *metier*. Besides, he must have noticed that among the believers in homœopathy, the services of the doctor are seldom sought for slight diseases. With their domestic guides and their innocuous medicines, the heads of families fearlessly treat all the milder maladies, occurring in their families, and do not consider it necessary to call in the doctor except for serious affections, and not always for them. Thus his education, his ambition, his love of ease and his interest all combine to deter the young practitioner

from inquiring into the homœopathic method, and from enrolling himself among the disciples of Hahnemann. In the United States of America, where the conservative spirit is hardly known, where tradition and antiquity do not exist, and where all prejudice is mostly in favour of novelty, the practitioners of homœopathy now number nearly 14,000, the number of colleges and schools in the possession of the homœopathic school furnishing full courses of a complete medical education, and legally entitled to grant degrees is thirteen, and the annual number of graduates is about 400. Homœopathic periodicals and homœopathic doctors abound, and the homœopathic lay public is enormously greater than in any other part of the world.

A.—I am hardly surprised to hear it, for we know that the Americans, like the Athenians of old, are always seeking after what is new, and homœopathy in the United States is not much more than fifty years old.

H.—Half a century is considerable antiquity for a state which is little more than a century old. I would rather ascribe the readiness to adopt homœopathy of our American cousins to their quick intelligence, and their habit of judging things for themselves and not being biassed by the opinions and dicta of others.

A.—Well, I shall not dispute what you say. May be circumstances unknown to us have conspired to prepossess the Americans in favour of homœopathy.

But if there is any truth in your homœopathy, if it is as superior in the cure of disease as you allege it to be, it ought surely, ere now, to have produced a decided effect on the general practice of medicine. Is there any proof that it has done so?

H.—Undoubtedly. When you and I commenced practice, diseases were commonly treated by bleeding, blisters, setons, moxas, actual cauterly, mercurial salivation, drastic purgatives, and other violent and painful remedies. Now the practice of medicine is entirely changed; anodynes, narcotics, stimulants and tonics are the chief means used for combating disease. If pills are given they must be sugar-coated or given under the form of tabloids, granules or parvules—palpable imitation of our *piules*. Purgatives are only given apologetically as it were, and these only of the mildest character, chiefly in the form of lozenges, mineral waters or enclosed in gelatine capsules. Everything ill-tasted is scrupulously avoided, and instead of inflicting pain you do your utmost to mitigate or stifle it with morphia, cocaine, and other narcotics. Sleeplessness is looked upon as a disease *par se*, and is at once met by bromides, chloral, sulphonal and what not. The increased temperature of febrile diseases is treated by antipyretics, of which more than half a dozen have been discovered. In short, the practice of to-day is entirely different from that of fifty years ago. What has occasioned this great change?

A.—The progress of knowledge, the investigation by physiologists of the effects of drugs on men and animals and the great strides made in pathological science have contributed to the complete revolution in therapeutics that has taken place during the last half century, and led medical men to abandon many of the methods that were in vogue in former periods.

H.—Still it is strange that during the many centuries that medicine has been practised as an art, no material change was effected in therapeutics until Hahnemann showed that diseases could be more successfully treated without those violent and painful measures that, up to his time, were universally employed. The fact is that Hahnemann would have preached in vain to the profession; they would have treated his denunciations of their practice with scorn, and have continued to bleed, blister, burn and salivate their patients to the crack of doom, had it not been that the patients rebelled against their sanguinary and torturing methods, and showed a decided preference for the mild medication of homœopathy. The profession, seeing that if they persisted in their old methods they would assuredly be abandoned by their patients, made a virtue of necessity and quickly relinquished all their most cherished modes of treatment; but in order to let themselves down gently and save their reputation for infallibility, they invented the astounding doctrine that diseases had suddenly changed their type,

that whereas they had formerly required bleeding, blistering, salivation and other violent remedies, they could now no longer bear such perturbing measures, but required tonics and anodynes and simple dietetic treatment. Indeed, many went so far as to relinquish all medicinal treatment whatever, and this they called "the expectant treatment." The coincidence of this *volte-face* of therapeutics in the old school with the publication of the reports of the success of the treatment in the homœopathic hospitals is too remarkable to allow us to doubt that it was owing to the spread of homœopathic knowledge probably more among the public than among the profession; for medical men would not admit that the small doses of homœopathy had any power to cure disease, but held that its treatment was equivalent to giving no medicine at all.

A.—Just so. We look upon the successes in the treatment of disease obtained by homœopathy as merely owing to your abstaining from giving medicine and bestowing great attention to diet.

H.—Well, do you not see that that admission is a condemnation of old-school therapeutics? For even granting, for the sake of argument, that homœopathy is only equally successful in the treatment of disease as allopathy, this would show that all the tortures inflicted by the latter on patients, with its violent medicines and painful and debilitating procedures, were useless; but as homœopathy undoubtedly cures more and more speedily than

the old treatment, the latter must be not only useless but injurious. If the diet enjoined by homœopathy is to be considered the main factor in its superior success, this is as much as to say that allopathy—which has from time immemorial been devoting particular attention to dietetics, and has produced hundreds of works on it—has failed to discover a rational system of dietetics, and must yield the palm in this essential element of therapeutics to its despised and juvenile rival which has never done more than formulate one simple rule for the diet of patients, viz., that they should avoid all articles of food having medicinal qualities which might interfere with the action of the remedies prescribed.

A.—If homœopathy be, as you allege, a general rule for the treatment of disease, how does it happen that its practitioners occasionally depart from the rule, and treat their patients with remedies that do not come within the rule? Dr. Williams says, indeed, of homœopaths who prescribe non-homœopathic remedies, “they deserve to be denounced as *swindlers*, practising and obtaining money under false pretences.”

H.—We are physicians first and homœopathists afterwards. Medicine does not consist merely in the administration of drugs, with which alone homœopathy has to do. We have to cure, or where cure is impossible, to relieve our patients, and to this end we must avail ourselves of all the

resources of hygiene, dietetics, climate, exercise, bathing, and other sanitary measures, which are apart from drug prescribing. We, equally with yourselves, adopt friction, massage, electricity, hypnotism, poultices, and hydropathic appliances. We employ strong drugs to destroy the parasites that infest the body. In cases of poisoning we give the appropriate antidote in sufficient doses to counteract the toxic agent. We occasionally give a purgative or an enema to remove a mechanical obstruction caused by an accumulation of feculent matter. We may even give anodynes to relieve pain in the case of incurable malignant disease, or to assuage the temporary suffering caused by the passage of a calculus, but in doing so we do not pretend that we are practising homœopathy, which is a remedial system, but palliation, for the relief of transient suffering, which, when it is past, allows us to employ the curative or proper homœopathic medicine. We do not, as so many of your school do, immediately fly to narcotics in all cases of pain, sleeplessness and cough—almost always a futile, and often a dangerous practice; we hold it to be more scientific and more satisfactory to search for the remedy that will cure the state which causes the pain, sleeplessness or cough.

A.—But surely you will admit that the relief of pain, the procuring of sleep, and the suppression of irritating cough are urgent desiderata, and are, therefore, the bounden duty of the physician.

H.—Certainly, if these can be effected without endangering the life of the patient, or interfering with the cure of the diseases on which these symptoms depend. But by giving narcotics for pain and sleeplessness you only afford transient relief, with the probability or certainty of the return of the symptoms in probably an aggravated degree, while you seriously interfere with, or render impossible, the employment of any remedy for the cure of morbid condition on which these symptoms depend. In the case of irritating cough, with copious secretion, if you yield to the ignorant importunity of the patient and his friends, and prescribe a narcotic, you may suppress the inclination to cough, and thereby prevent him getting rid of the phlegm, which accumulates in his bronchial tubes, and threatens or actually causes, suffocation. There is no more dangerous treatment of bronchial catarrh, especially in elderly subjects, than the administration of narcotics, as experience has over and over again demonstrated.

A.—I see there is no chance of our agreeing as to the relative merits of our different systems, so we need not pursue the subject further. Hufeland, who had a high opinion of Hahnemann in many respects, says that if his system were to prevail, it would prove "the grave of medical science," and I quite agree with him, for did not Hahnemann reject and denounce pathology, which is the very basis of all medical science?

H.—Hahnemann very properly condemned the pathology of his time, and I doubt if it could find any apologist in the present day. It consisted mainly of fanciful hypotheses respecting the nature of diseases, which varied from year to year almost, and yet these illusory and ever-varying speculations were held to be the only scientific guides to the treatment of diseases by drugs whose qualities were only guessed at, but never ascertained by any rational experiments. Hahnemann exposed the futility of this speculative pathology, and denounced its disastrous effects on therapeutics. But Hahnemann was no enemy to pathology, and in the latter part of his life he showed that he, too, could form pathological hypotheses. His theory of chronic diseases is of this character, and, if not absolutely correct, is still a good working hypothesis, which the pathological theories of his predecessors were not. As regards his three sources of chronic diseases—psora, syphilis and sycosis, "psora" is almost identical with Autenrieth's theory, and is very similar to the modern view of French pathologists expressed in the term "diathese herpetique;" "syphilis" is universally recognised as a source of chronic disease, and "sycosis" is identical with the modern doctrine of gonorrhœal dyscrasia.

A.—I was under the impression that Hahnemann rejected pathology *in toto*, but it seems I was mistaken. As regards his therapeutic rule or formula, *similia similibus curentur*, it is so opposed to the

principles taught and sanctioned by our school through all the ages of medicine, that to admit its correctness would be to repudiate the teachings of all our esteemed and venerated authorities.

H.—You talk of the principles taught and sanctioned by your school, but can you name any principles whatever that have served as guides to treatment in your school, either in ancient or modern times ?

A.—The principle, *contraria contrariis curentur*, commonly attributed to Galen, may surely be credited to our school.

H.—I think you would hardly find anyone now-a-days who would allege that the treatment of diseases by their contraries, or by medicines that act in a contrary manner to the disease, could be a general therapeutic law. In Galen's time, when all diseases and remedies were divided into hot, cold, dry and humid, such a formula might seem rational, but we now know that these qualities of diseases and remedies were purely imaginary, and without any foundation in fact. They have long since been abandoned, and with them the false maxim based on them. The treatment of constipation by purgatives, of diarrhoea by astringents, of suppressed kidney secretion by diuretics, of defective perspiration by sudorifics, of sleeplessness by opium and other hypnotics, of febrile heat by refrigerents and so-called antipyretics, is said by some to be an illustration of *contraria contrariis* ;

but granting it is so, it cannot make the Galenic formula a general therapeutic rule, for the illustrations are merely the temporary removal of one symptom, which is not scientific medicine, for diseases as a rule do not consist of one symptom only, and the contraries of most concrete diseases are absolutely unthinkable: *e. g.*, what are the contraries of gout, consumption, apoplexy, diabetes, rheumatism, pneumonia, pleurisy, syphilis, and a thousand other diseases?

A.—Well, I am not disposed to contend for *contraria contrariis* as a general therapeutic rule, but as many of our authorities speak of the principles of scientific medicine, there surely must be some such, though I cannot at present call them to mind. But I think you must allow we have a guiding principle, seeing that the name you give our practice—"allopathy"—implies as much.

H.—Hardly; for the name only implies that—unlike homœopathy, which prescribes medicines that act on the part diseased—allopathy prescribes medicine that act on some other part—any other part, in fact, than that morbidly affected. Thus, when you prescribe for a headache purgative, a mustard foot-bath, a blister behind the ears, a seton through the neck, a cold, wet towel to the head, a blue pill, or a dose of quinine, you prescribe allopathically, but no principle guides you as to which of these remedies you ought to select in preference to the rest. Some of your greatest authorities have denied

that medicine possesses any principles whatever. Thus, Girtanner, in the last century, says, "The healing art has no fixed principles;" and Dr. Wilks not long ago declared: "To say I have no principles is a humiliating confession. Our remedies are never suggested by any theoretic considerations whatever." In the face of such authorities—and many others of your school have made similar "humiliating confessions"—can you say that your school has any principles? As it has none, how can you say that homœopathy is opposed to principles which are non-existent? Is there, indeed, one single disease in regard to the treatment of which there is anything like agreement in your school? The *Semaine medicale*, a short time ago, made inquiries of the chief hospital physicians of Paris as to their treatment of pneumonia. Twenty-one replied, and the following is an abstract of their answers:—Six were more or less in favour of *bleeding* by venesection or cupping, 3 were opposed to all abstraction of blood, 12 made no mention of it. As regards *blisters*: 5 were in favour of them, 1 rarely used them, 1 only employed them when the local symptoms persisted after the defervescence, 9 were opposed to them, 5 made no mention of them. As regards *antimonials* 4 employed them, 5 condemned them, 12 said nothing about them. There is little evidence here of any principle whatever, by which the physicians of your school are guided. If the same question had been put to practitioners of your school at the

beginning of the century, there would certainly have been a nearer approach to unanimity, for one and all would unhesitatingly have declared blood-letting to be the chief, if not the only, indispensable remedy for pneumonia; but that was before Dietl had shown that under blood-letting 20.4 p. c. died, whereas when neither blood-letting nor any other remedy whatever used, only 7.4 p. c. died. Supposing the same question were addressed to homœopathic practitioners all over the world, an almost absolute identity of response would be given. They would not, to be sure, assert that any one remedy is the specific for pneumonia, but, taking cognizance of the fact that there are various forms of pneumonia, they would reply that *bryonia* was the remedy for such and such a form or stage of pneumonia, *phosphorus* for another, *antimonium tartaricum* for another, *iodine* for another, and so forth. And besides showing that they have a fixed therapeutic rule or principle, while your school has none, they would also show that their treatment, under the guidance of this principle, was vastly more successful than the unprincipled practice of your school.

A.—But the mortality in pneumonia under homœopathy, according to your statistics, is just about the same as under Dietl's expectant treatment.

H.—The difference is not very great. The statistics of the homœopathic treatment in our hospitals show a mortality of somewhat less than 6 per cent, which is, as you say, not much less than

that under Dietl's expectant method, but the advantage of our treatment is shown more particularly in the shorter duration of the disease. Thus, under the expectant treatment, in Dietl's cases, the duration of the disease averaged 28 days (under the bleeding system it was as high as 35 days), whereas under the homœopathic treatment of Tessier and Henderson the average duration of the disease was only $11\frac{2}{3}$ days, and as the remedies used in homœopathy do not exhaust and weaken the patient, there is no long convalescence required to recover from the effects of the treatment, as there always is after blood-letting and the other debilitating means employed in your school.

A.—We have only the testimony of practitioners of homœopathy for the statistics of the treatment of pneumonia and other diseases in their hospitals and private practice, and it has been stated by opponents of homœopathy that the homœopaths are either incapable of diagnosing diseases correctly, or fraudulently represent slight ailments they have treated, to have been serious diseases, for the purpose of enhancing the success of their treatment.

H.—Our opponents must be driven to sore straits to adopt such insulting and unworthy insinuations for the sake of discrediting our method of treatment. These practitioners who are represented to be ignorant and dishonest were educated at the same universities and colleges, and hold the same degrees and diplomas as their calumniators. Before they adopted

homœopathy they were regarded as capable and and honest, and to expect it to be believed that they should have become the exact reverse as soon as they became convinced of the superiority of homœopathy is to make too great a demand on the credulity of the public. Some at least of the allopathic school are more just towards their homœopathic colleagues. At the meeting of the British Medical Association in 1881, Dr. Bristowe, after testifying to Hahnemann's "learning, ability and power of reasoning," said: "The whole history of the movement and its present position are amply sufficient to prove that those who take the intellectual lead in it are men who believe in the doctrines they profess and in their mission, and who practise their profession with as much honesty of purpose and with as much confidence in their power to benefit their patients as we do. That all homœopathic practitioners are men of ability and education, it would be absurd to maintain; but it is absolutely certain that many men of ability and learning are contained within their ranks," and much more to the same effect. Sir John Forbes also rendered justice to the converts to our school. "Many among his [Hahnemann's] followers," he writes, "are sincere, honest and learned men." The most zealous partisans of allopathy could not say more for their own side, for it would be strictly true to say that *all* allopathic practitioners are "sincere, honest and learned men." There are probably black sheep in both schools, but homœopathy

assuredly does not possess more than its fair share of them. As regards the character of the diseases treated in homœopathic hospitals, we have plenty of allopathic evidence to show that they are what they have been represented to be by the physicians of these hospitals. Thus, Sir Williams Wilde, who made a careful personal investigation of the Vienna Homœopathic Hospital, says: "Whatever the opponents of this system may put forward against it. I am bound to say, and I am far from being a homœopathic practitioner, that the cases I saw treated by it in the Vienna Hospital were fully as acute and virulent as those that have come under my observation elsewhere, and the statistics show that the mortality is much less than in the other hospitals of that city." And Dr. Macloughlin, the allopathic physician who was appointed by Government to inspect and report on the treatment of cholera cases in the London Homœopathic Hospital in 1854, wrote: "That there may be no misapprehension about the cases I saw in your hospital, I will add that all I saw were true cases of cholera in the various stages of the disease; and that I saw several cases which did well under your treatment, which I have no hesitation in saying would have sunk under any other." To accuse your opponent of being ignorant or dishonest without any evidence to show that he is so, is a proof that you have no sensible reply to make to his arguments, and so are reduced to that paltry makeshift for argument—abuse.

A.—Your Hahnemann was not always very select in his language towards his opponents.

H.—You must consider the provocation he had. He was called by his adversaries all sorts of opprobrious names, and the grossest calumnies were published about him. He never condescended to notice them, but in his controversial writings confined himself to denouncing the authorised and orthodox treatment of disease, and did not imitate his calumniators by inventing calumnies respecting their private lives and professional conduct. The abusive style of controversy, if started by one side, is very apt to be adopted by the other; still, I do not think that you will find any trace of it in the writings of the homœopaths of the present day, though their allopathic opponents have not been so reticent, as witness the vituperations of the *Lancet*, the *Medical Times*, the *British Medical Journal*, and those anti-homœopathic champions, Simpson, Wood, Williams, Rigler, and others.

A.—I think our side had some excuse for using strong language when told by Hahnemann that the doses of medicine sanctioned by long experience were all wrong, and that his ridiculous infinitesimals should alone be used. Simpson calculates that a sphere of water having a radius equal to the distance of the planet Neptune from the Sun would not suffice to bring a grain of medicine to the thirtieth dilution which Hahnemann said was the proper strength for

a dose. Doses of such exiguity are contrary to reason and common sense.

H.—Not to reason, for reason judges of facts, and if the facts show that the thirtieth dilution cures disease, reason has to accept the facts, and make the best of them. To common sense, yes; for common sense is merely the expression of common experience and your school has no common experience of the effects of minute doses of medicine administered according to the homœopathic rule. “Before you condemn my system,” said Hahnemann, “give it a trial, but a careful and exact trial, and if it prove unsuccessful reject it; but if successful, adopt it.” But this is just what our opponents have never done, so their condemnation of homœopathy is valueless, since they have omitted to adopt the only method for ascertaining its truth. As for the ludicrous calculations about the quantity of fluid required to make the dilutions we use, which Simpson and his imitators amuse themselves with in order to bamboozle their readers, they are quite beside the question, for the actual quantity of fluid we use to make, say the thirtieth dilution, is just a little more than six ounces, while the quantity required to make the more customary dilutions, 3 and 6, is respectively under one and under two ounces.

A.—Still, even your third and sixth dilutions, not to mention your thirtieth and upwards, are doses of such extreme minuteness that the idea of their having any effect whatever on the human

body is opposed to all the experience of our school.

H.—It would be nearer the truth to say that your school has no experience on the subject. But that would not be quite correct; for the power of infinitesimal quantities of matter to cause very decided effects on the human organism has been well known to the medical world in all ages. We know the exact quantity of medicine contained in our dilutions, but who can weigh or measure the quantity of morbid material that will cause, measles, or small-pox, or scarlatina, or mumps, or whooping cough, or cholera, or yellow fever, or influenza? Can you tell the weight of the fit of anger that causes jaundice, of the paroxysm of fear that produces diarrhoea, of the passion of vexation that knocks down a strong man with apoplexy, of the emotion that in a few seconds will change a lively, sentient body into an inanimate corpse?

A.—The instances you have adduced are wide of the mark. Can you mention any medicinal substances known to us which in infinitesimal doses are known to cause decided pathogenic effects on the human organism akin to those you say result from your dilutions?

H.—Certainly I can. A grain of musk will continue for years to emit odoriferous emanations that will scent a whole room without apparently losing weight. And yet a susceptible person exposed for a few seconds to these imponderable emanations

will fall down in a faint, or even be violently convulsed. The emanations from powdered ipecacuanha will give some persons a severe fit of asthma. The odour of a hyacinth will cause in some persons an intense headache, and cases have been recorded where the smell of a rose has caused alarming syncope. There is no balance so cunningly and delicately contrived that could weigh these impalpable exhalations, the effects of which are strikingly obvious. Why, then, should it seem impossible that our refined medicinal preparations should be able to influence the organism that is rendered hypersensitive by disease to stimuli that have been ascertained to have an elective affinity to the actual seat of the disease?

A.—It seems to me you are begging the question. What proof have you that disease renders an organ or tissue of the body superlatively sensitive to its proper stimuli?

H.—Proof enough and to spare. The eye which, in its normal state, can enjoy the full blaze of light of a sunny day, is, when inflamed, painfully affected by the smallest ray of light. The ear which, when in health, can listen with pleasure to a full brass band or the roar of a park of artillery, when inflamed is agonised by the slightest sound. The stomach which, when sound, feels no oppression from a civic feast, when inflamed writhes in torture if a teaspoonful of food is swallowed. The healthy skin may be rubbed, and scrubbed, and kneaded, and

slapped without causing any but pleasurable sensations, but if inflamed, the slightest touch inflicts acute pain. In like manner the various organs and tissues of the body which in health require large doses of their specific medicines to produce any effect, when diseased become so sensitive to those medicines which have an elective affinity to these parts that they will often respond, only too actively, to the smallest doses homœopathy employs.

A.—It may be as you say; I have no experience on the subject *pro* or *con*. But even grant it is so, still reason, experience, and the consensus of all the recognised authorities in medicine condemn your homœopathic principle of giving for the cure of disease a medicine which is capable of exciting symptoms or morbid states similar to those presented by the disease. Such a plan is utterly opposed to reason and experience, for they teach us that such a medicine must inevitably increase the disease, and not cure it.

H.—So far from experience, even in your own school, being opposed to the efficacy of the homœopathic treatment, I have shown you that in all ages the homœopathic therapeutic rule has been recognised as true in some cases, and Hahnemann in his "Organon" gives a large number of examples from old-school authorities where medicines, whose known effects correspond to the symptoms of the diseases for which they were employed, cured these diseases. I think I can show you also that our

therapeutic rule is not opposed to reason. It has always been held, except by the nihilists in medicine, that medicines are the antidotes or remedies for diseases. It does not seem to be contrary to reason that the remedy or antidote should be applied as nearly as possible to the exact seat of the disease it is to antidote or cure. But its careful provings of medicines on the healthy body, homœopathy ascertains their precise effects, and it gives these medicines in cases where the same or similar effects are caused by disease. The similarity of the observed effects in both medicinal and natural disease shows that the medicine acts on the same parts as are involved in the disease, and thus we apply the antidote to the precise seat of the disease, which seems, methinks, the most rational thing to do. At the International Medical Congress of 1881, Professor Huxley actually stated this mode of treatment to be the ideal medicine of the future. He said:—"If we consider the knowledge [of the mode of action of certain drugs] practically acquired during the last forty years, there can surely be no ground for doubting that sooner or later the pharmacologist will supply the physician with the means of affecting in any desired sense the functions of any physiological element of the body. It will, in short, become possible to introduce into the economy a molecular mechanism, which, like a very cunningly contrived torpedo, shall find its way to some particular group of living elements, and cause an explosion among

them, leaving the rest untouched." If we translate Huxley's metaphor into common language, this is precisely what homœopathy does. It ascertains by its provings the precise parts of the body on which medicines act, and the exact way in which they affect its functions, and in its treatment of diseases it sends these medicines to the exact spots where the disease is seated, leaving the rest of the body untouched.

A.—At all events you must admit that, whether owing to the example of homœopathy, as you say, or owing to the more scientific modes of investigation now rife, as I contend, the general practice of medicine has greatly improved in modern times.

H.—Yes, it has, but how? Chiefly by abandoning those irrational and injurious methods it had practised for the last 3,000 years. If homœopathy had done no more for medicine than make its practitioners abandon the violent, painful and debilitating methods they had hitherto employed, it would have deserved the gratitude of the patient world. But homœopathy has done more; it has supplied your school with a large number of the medicines which you daily employ.

A.—Yes, we take our remedies where we can find them—from old wives, shepherds, and even from homœopaths. That shows our catholic, unsectarian, eclectic, and scientific spirit. I admit, of course, that Ringer, Brunton, Bartholow, Bruce, and others have introduced into their works a

number of medicines taken from the homœopathic *materia medica*, but I doubt very much if the practice of medicine has thereby been much improved. I can only say for myself that I have seldom found that the "tips" given by these authors in their works come off satisfactorily at the bedside, or that the remedies they have taken from you do what they and your school say they ought to and will do.

H.—The reason of that is obvious. Homœopathy treats cases, not names, of disease. Each case has to be studied for itself, and as cases of disease classified under the same name often differ among one another in their manifestations or symptoms, they must be treated differently. Your Ringers and Bruntons only give the vaguest indications for our medicines, such as: *aconite* is good for fever, *bryonia* for pleurisy, *corrosive sublimate* for dysentery, and so on. But *aconite* is not good for all fevers; *bryonia* for all pleurisies, *corrosive sublimate* for all dysenteries. There are fevers, pleurisies and dysenteries for which other medicines are indicated, and where *aconite*, *bryonia* and *corrosive sublimate* will do no good, but only harm. It is only by using these and all other medicines in strict accordance with the homœopathic rule that their good effects can be seen. Now, your school, when you take our medicines, omit to take our therapeutic rule with them, by means of which only can our medicines be successfully employed. You would fain practise with our small doses, but

you will not conform to our therapeutic rule, so you fail to obtain satisfactory results. I lately received from a wholesale allopathic chemist a number of little bottles containing small doses of various medicines incorporated with sugar of milk in the form of tabloids, such as are used in homœopathic practice. Among them were *aconite*, *bella-donna*, *digitalis*, *nux vomica* in doses of one drop of the tincture: *arsenic* and *corrosive sublimate* in $\frac{1}{100}$ of a grain: *antimonium tartaricum* in $\frac{1}{30}$ of a grain; *hepar sulphuris*, *quinine*, *iphecacuanha*, and *mercurius dulcis* in $\frac{1}{10}$ of a grain, and *mercurius biniodatus* in $\frac{1}{20}$ of a grain. These medicines in these doses could only be of use if prescribed according to the homœopathic rule. Of course, you well know that these medicines in these doses are such as are used in homœopathy, and therefore you ought to use them in the homœopathic way, but instead of doing so you use them empirically as you do all the medicines you take from us, prescribing them for artificial nosological names, not for real natural diseases, and then you turn again and rend us because our medicines improperly used don't cure. Moreover, even when you accidentally and unwittingly blunder into a real homœopathic employment of one of our medicines you spoil the chance of effecting a brilliant homœopathic cure by giving the medicine in such enormous doses that it only causes aggravation of the malady, and then you vow you have given homœo-

pathy a fair trial and think yourselves entitled to exclaim "it is naught!"

A.—Besides these medicines which you say we have cribbed from your *materia medica*, you must allow that we have in these latter years discovered and introduced into our practice a number of powerful and valuable remedies, such as the bromides, chloral, cocain, anti-pyrin, anti-febrin, sulphonal, and others.

H.—Powerful drugs, certainly—narcotics and anti-pyretics, but double-edged tools, the indiscriminate use of which has done at least as much harm as good. Your periodicals teem with communications from practitioners relating the injurious and sometimes fatal consequences that have followed the administration of these drugs.

A.—No doubt any powerful drug if incautiously used will do harm. Still, the beneficial results that have ensued from their careful administration are undeniable.

H,—The pity is that no precise rules can be given for their safe and successful use, and the injurious effects have been observed by some of the most careful and experienced practitioners of your school. Hence it comes that each new drug, after being hailed with enthusiasm and extensively employed, is gradually abandoned, being superseded by some other which is announced by its introducer to be perfectly safe and is believed to be so until experience shows that it, too, like its predecessors,

can cause very disagreeable effects, whereupon it is abandoned for the next novelty. Moreover, your lavish employment of narcotic and hypnotic drugs has had a disastrous effect on many patients who have continued their use beyond the period when they could be safely employed, and in larger and more frequent doses than you would recommend, and have thereby acquired what is called the 'habit' of the drug, and have developed a new series of drug diseases which may be interesting to the pathologist but are disastrous to their victims and are often incurable by the physician. Thus the inordinate use of the bromides, chloral, morphia and cocain have brought on mental diseases that have peopled our lunatic asylums. The excessive administration of your beloved tonic, quinine, even, is often followed by very disagreeable effects such as tinnitus, deafness, blindness and eruptions; and as Lord Dunraven recently remarked in the *National Review*, a form of ague indistinguishable from malarial fever. Though mercurialism is almost a thing of the past, we have now in its stead bromism, cinchonism, morphiomania, besides the cocain, chloral, sulphonal, chlorodyne and bromidia habit, all new diseases produced by the excessive use of your boasted remedies. "In poison there is physic," says Shakespeare, which is true; but the converse is no less true—"in physic there is poison," and this the poor victims of those drugs seem to be unaware of, and are hardly likely to hear it from your school,

whose free use of these poisonous drugs has led their patients to believe them to be only wholesome physic.

A.—Well, to pass from the supposed *laches* of our school, look at the real gains to therapeutics that we have accomplished of late years. You will not, I think, deny that a high abnormal temperature can be reduced and pain subdued in an amazingly short time by *antipyrin*.

H.—Undoubtedly, but the sudden reduction of temperature in febrile diseases is not invariably followed by restoration to health. You can quickly reduce temperature by plunging the patient into a cold bath with lumps of ice in it, as was the fashionable treatment of febrile and inflammatory diseases a short time ago. But experience showed that the diseases in which this treatment was employed were seldom materially benefited, but were often aggravated, and sometimes fatally so, and I do not suppose the practice is much resorted to nowadays. As regards the allaying of pain by *antipyrin*, you know that pains and disagreeable sensations are but the voice by which the organism tells us what disease it is suffering from. If we extinguish this voice by a narcotic, be it *antipyrin* or *morphine*, we deprive ourselves of the power of ascertaining what and where the disease is, and so applying a suitable remedy, for you don't suppose that the mere extinction of a single symptom, like pain, is the cure of the disease. On the contrary, you

know that after a longer or shorter interval the pain generally returns, and requires an ever larger dose of your narcotic for its removal. The pernicious effects of the *anti-pyrim* treatment have been so frequently observed and commented on, even in lay periodicals—as lately in the *Pall Mall Gazette*—that I believe that powerful drug cannot now be bought in chemist's shops without the prescription of a physician. The *Anti-pyrim* treatment of febrile diseases and pain is a conspicuous instance of the one-sided symptomatic treatment of your school.

A.—Why, that is the very accusation brought against homœopathy. It is said by its opponents that homœopathy only removes the symptoms but the disease remains.

H.—As disease can only be known by the objective symptoms perceptible to the physician and the subjective symptoms felt by the patient, when these are removed by the medicine administered, the disease is cured and perfect health remains. The only medical man I ever heard of who considered perfect health to be an "alarming state" was Dr. Quackleben, of St. Roman's Well, and probably you would not consider him a very high authority. Homœopathy selects a remedy which corresponds not to one prominent symptom but to the totality of the symptoms present, and when it has removed these the patient is cured. You devote all your energies to the reduction of some single prominent symptom, be it high

temperature, pain, sleeplessness, constipation, or some other, and having temporarily subdued that you fondly imagine you have cured the disease, but in this you are constantly disappointed—the disease remains, and often the heat, pain, sleeplessness or constipation returns, and your specific for these symptoms cease to produce the desired effect.

A.—I see you are determined to deny all merit to the practice of medicine in which you were educated and which is hallowed by the tradition of thirty centuries. But after all your boasts of the wonders of homœopathy, can you show a tonic at all comparable to our *sulphate of quinine*?

H.—Homœopathy does not profess to possess tonics in the sense of tone-givers, or absolute unconditional strengtheners, and, moreover, we deny that there are such medicines. We hold that when a medicine is given to a healthy person in sufficient dose it will make him weak and ill, and *quinine* is no exception to this. But, on the other hand, we contend that every medicine that operates curatively in a disease is a tonic, that is to say, it strengthens the body and improves its tone. How often do we meet with patients who have been overdosed with your famous tonic suffering from tinnitus, deafness, dimness of vision, loss of appetite and debility. But though you are well aware of such effects you continue to prescribe *quinine* for almost every disease attended by weakness, and when an epidemic like influenza comes, for which you know no remedy, you

advice healthy persons to dose themselves assiduously with *quinine* to keep off the infection, which quinine is powerless to do, but it often makes those who take it ill and consequently less able to resist the influenza when it attacks them. Some whist-players—not the best—say, “when at a loss play trumps,” so practitioners of your school say, “when at a loss give *quinine*,” in the spirit of the illustrious Mr. Wilkins Micawber—hoping that something good may come of it.

A.—At all events you cannot deny that our surgeons have brought their art to a degree of perfection that is perfectly marvellous, and that they now successfully perform operations never dreamt of a few decades ago, and which have restored to health and usefulness many patients who not long ago would have been considered incurable, and would have been left to die or to drag out a hopeless and wretched existence. This great gain to suffering humanity has been effected by members of our school, and I am not aware that any of your school have contributed to the development of the art of surgery.

H.—Surgery belongs to no school of therapeutics, but is equally the property of all the medical profession. The eminent surgeons whom you claim as belonging to your school have brought their art to perfection without any aid from the particular therapeutic doctrines they may have held. Most surgeons indeed, are neutral, if not absolutely sceptical, in regard to medical systems. As a rule they rely on

their operative skill, and do not trouble themselves about therapeutics. Still there are some instances of eminent surgeons who have been favourably disposed towards homœopathy, and who have employed homœopathic treatment for some of the accidental morbid states that are apt to attend surgical operations. Thus the illustrious Liston, the greatest surgeon of his day, in his lectures published in the *Lancet*, testifies to the value of small doses of *belladonna* in erysipelas, either following operations or arising spontaneously. And he acknowledges having been taught this successful method of curing that serious affection by the late distinguished homœopathic physician, Dr. Quin. Homœopathic practitioners eagerly, avail themselves of all the improved methods of modern surgery, and there are in the homœopathic school as skilful and successful surgeons as are to be found anywhere. You need only visit the London Homœopathic Hospital and you will see the most difficult and delicate operations performed by the surgeons there with a skill and success unsurpassed in any of the orthodox hospitals. In the United States of America there are many excellent surgeons who are avowed adherents of the homœopathic school and graduates of colleges where the professors all belong to Hahnemann's school. One of them, Dr. Tod Helmuth, of New York, has published a standard work on surgery, and is distinguished for his bold, original and highly successful operations. Surgery is a common field on which

both schools meet, and its latest developments are as eagerly adopted by practitioners of our school as by those of yours. The chief, or only, difference between us is, that we employ for the after-treatment of the operation medicines like *arnica*, *calendula*, *tamus*, *aconite*, *belladonna*, *symphytum*, *rhus*, *bryonia* and some others, which gives us a great advantage over your school, and contributes to the success of our operations.

A.—I think you will allow that a prodigious gain to scientific therapeutics has been made by the remarkable discoveries of those illustrious men who have enriched pathology by their researches in the new science of bacteriology, which have effected a complete revolution in our views respecting the nature of disease, that cannot fail to be of incalculable service to therapeutics. I am not aware that any members of the homœopathic school have contributed to this great achievement of modern medicine.

H.—Nor have the practitioners of your school. The science of bacteriology, as you call it, is the outcome of the researches of physiologists and naturalists and not of medical practitioners. As to its value to therapeutics, that has hitherto been *nil*. A few years ago it was seriously announced that carbolic acid is destructive of the microbes of typhoid or enteric fever. On this, a number of the physicians of the Paris hospitals set about administering doses of carbolic acid to their typhoid cases in order to

destroy the microbes. But after a sufficiently long trial they found that carbolic acid, in the doses in which they administered it, killed their patients but left the bacteria unharmed. A more recent instance of an attempt to apply bacterial knowledge to the treatment of disease is Koch's famous inoculation cure for tuberculous disease, which was attended by such a disastrous mortality among phthisical patients that none of its previous enthusiastic advocates have now a word to say in its favour. While all the medical and non-medical periodicals were extolling Koch and his wonderful discovery up to the skies, while distinguished and undistinguished members of your school were jostling one another in their helter-skelter rush to Berlin to secure a drop or two of Koch's precious lymph, it was from the homœopathic camp that there came a word of warning and a forecast of the disillusion that awaited the easy credulity of our allopathic friends. Hitherto the bacteriological lore in your school, when applied to therapeutics, has proved, as you will admit, a disastrous failure, and it does not seem to be appreciated by the public or the profession as much as formerly. When it was announced lately that Dr. Pfeiffer had caught the bacillus of influenza, this excited but a languid interest among those who had short time previously hailed Dr. Koch's capture of the bacillus of tubercle with such rapture. No medical baronets greeted it as one of the greatest triumphs of the age; even Sir Joseph Lister, whose honours were obtained

by his now discredited and abandoned carbolic spray and who was always foremost to endorse all the pseudo-discoveries of our time, such as Pasteur's vaunted prevention of hydrophobia, which he asserted had saved 12,000 persons from dying of that fell disease; Koch's marvellous lymph, to the incalculable value of which he testified, before he knew what it was made of; and Metschnikoff's microbe-devouring phagocytes; even he forbore to extol poor Pfeiffer's discovery. Nor has Professor Tyndall, whose gushing eulogies of Pasteur, Koch and other false prophets, astonished the public and amused the the cool heads of the profession, as yet announced that Pfeiffer's discovery of the influenza bacillus has brought us within measurable distance of the medical millennium when influenza shall no more torment mankind. Doubts are even expressed in various quarters, as to the reality of Pfeiffer's discovery of the bacillus of influenza, for he says that it is only to be found in the expectoration of influenza patients, and we all know that many cases of influenza are unattended by any cough or expectoration, and he does not tell us where the bacillus is to be found in such cases. Dr. Canon has, I believe, asserted that he has found it in the blood of patients, but medical practitioners do not seem to care much whether he has or not. In short, the great microbe "boom" is distinctly on the downward grade, at all events as an aid to therapeutics. The history of medicine records only one example

of the microbe theory of disease being of use to therapeutics. In 1832 Hahnemann alleged that cholera was propagated by minute organisms which were conveyed by the air, and he advised the administration of *camphor* in material doses in order to destroy these pestiferous microbes. Whether his theory was right or wrong I cannot say, but in every epidemic visitation of cholera, his followers have found that his practice founded on it was eminently successful; and no fact in medicine is better authenticated than that *camphor*, administered as Hahnemann directed in the incipient stage of cholera, cures that disease in the vast majority of cases. You will see from this account that Hahnemann anticipated the discovery of the microbe of cholera many years before the birth of Koch whom your school honours as its discoverer.

A.—Bravo! I suppose you will endeavour to persuade me that Hahnemann anticipated all the discoveries of modern times.

H.—Not quite all, but he was certainly far ahead of his contemporaries not only in therapeutics but hygiene, of which he may be said to be the founder, as he was of the therapeutic uses of cold water ages before Priessnitz. In chemistry, too, he was a consummate adept; he discovered the test for the detection of metallic impurities in wine, which is employed to the present day; he described and performed the operation for necrosed bone, which a generation later was reinvented by some eminent

surgeon,—if I remember rightly, Hey, of Leeds—and he advocated and successfully practised the non-restraint treatment of the insane before Pinel, to whom the credit of that humane method is attributed.

A.—Go on! I wonder you don't claim for your admirable Crichton or a Hahnemann the priority of invention of lucifer matches, the spectroscope and the penny post. But please no more of him at present. May *Æsculapius* confound him and all his works! If your homœopathy is so pre-eminently scientific and successful as you try to make it out, it ought surely to have attracted some of the eminent men of the old school. Has it ever done so?

H.—Well, not so many as we might have hoped, still quite as many as we could have expected, all things considered. Eminent men are such as have obtained distinction by their achievements in a particular department of their art, and they are not eager to sacrifice the position they have gained by acknowledging their adhesion to an unpopular cause. Instances of the loss of well-deserved reputation, of honours and emoluments consequent on the avowal of a conversion to Hahnemann's doctrines, are not wanting to warn them of the risk they run. Even truth under such minatory conditions loses its attractiveness, and so those at the top of the tree refrain from confessing the belief they may feel in the truth of homœopathy, lest haply they might find themselves with truth at the

bottom of a well. So even when they are favourable to homœopathy they take good care not to say so. They find it most convenient and most conducive to the maintenance and even the enhancement of their own reputation to publish their homœopathic opinions and practice cryptographically, as it were, without alluding to the source of their knowledge, or even perhaps with an ill-natured sneer at Hahnemann and his doctrines. In this way the Ringers, Bruntons, Murrells, Bruces and Bartholows have produced books that have gained them fame and fortune, but which owe their chief value to the homœopathy they have appropriated without acknowledgment. Thus your eminent men have discovered how to make the best of both 'pathies; they take most of their treatment from homœopathy and pass it off as allopathy. Of course no one is deceived, but many are glad to be able to employ some of our admirable specifics with the sanction of an old-school authority, and the latter derives a considerable increase of *kudos* from his appropriations. With these books, and Burroughs & Wellcome's drop-dose and 1-100th grain tablets, the ordinary practitioner can now practise a kind of coarse homœopathy while still figuring as an orthodox doctor. But instances of public acknowledgment of a conversion to homœopathy by eminent men of your school are by no means unknown. And, curiously enough, a considerable number of academical professors of pathology (the science which you

erroneously imagined Hahnemann despised), have openly joined our ranks. Of these, I may mention D'Amador of Montpellier, Arnold of Zurich, Zlatarovich of Vienna, Rapp of Tubingen, and Henderson of Edinburgh. All these, except Rapp, continued to retain their chairs of pathology while still professing and practising homœopathy. Other distinguished converts to homœopathy are mentioned in Tract No. 10 of the Homœopathic League—men who sacrificed much for what they believed to be truth in medicine. But for obvious reasons such avowed conversions are seldom seen now-a-days, for homœopathy may now be practised by professing adherents of the old school without attracting attention or rousing the hostility of the of the authorities, provided nothing is said about it. It is not the treatment that is objected to, only the avowal that it is homœopathy.

A.—Just so. It is, as the London College of physicians in its famous resolution of 1881 declared your conduct in “trading on a designation,” that is to say, calling yourselves “homœopaths,” that is so reprehensible, as being contrary to the ethics and etiquette of the profession.

H.—The College of Physicians being unable to discover anything unprofessional in the conduct of the members of our school, and being determined to damage us if they could, invented this fanciful breach of professional etiquette for the purpose of injuring us. We do not “trade on a designation” any more than members of your own school who

announce themselves as oculists, aurists, dermatologists, alienists, gynæcologists, electricians, laryngoscopists, Weir-Mitchelists, and so forth. We do not put "homœopathist" on our door-plates or calling cards. All that we do is to advocate Hahnemann's medical reform in books and periodicals, and, when opportunity offers, in medical societies, and by practising it in our dispensaries and hospitals, and that is precisely what all your own specialists do ; so if we, in so doing, are guilty of "trading on a designation" the whole tribe of specialists are equally guilty and equally deserve to be discountenanced by respectable physicians. The College was evidently acting on the old maxim, "give a dog a bad name and you may hang him," but they forgot that other adage, "what is sauce for the goose is sauce for the gander," and so made a precious mess of it.

A.—In 1885, a selected body of representative medical men, presided over by Dr. Paris, President of the London College of Physicians, in a solemn memorial presented to parliament, pronounced homœopathy to be "an empirical practice." This, I think you will allow, was an authoritative condemnation of it.

H.—It is true that the President did so characterise it, but in so doing he stated what was not true. The circumstances under which this condemnation of homœopathy was pronounced are worth remembering. During the prevalence of the epidemic of cholera in London in 1854, the Board of Health,

being desirous of obtaining information as to the best mode of treating the disease, appointed a medical council, presided over by the President of the London College of Physicians, whose business it was to collect and report on the statistics of the various hospitals in the metropolis which had been arranged for the reception and treatment of cases of cholera. The London Homœopathic Hospital, then in Golden Square, was one of these hospitals. The Medical Council presented their report, which was published in a parliamentary paper, but it was found that the returns of one hospital which had been duly furnished to the Council—namely, the London Homœopathic Hospital—were omitted. By direction of Parliament, the President of the Medical Council was asked why these returns had been omitted from the report. The answer given was that if the Council were to admit them, “they would give an unjustifiable sanction to an empirical practice alike opposed to the maintenance of truth and to the progress of the science.” The real, apart from the alleged reason was, that while the mortality in the allopathic hospitals was 51.8 per cent., that in the homœopathic hospital was only 16.4 per cent. “Empirical,” as applied to the homœopathic practice is a ludicrous misnomer. “Empiric” according to Johnson, is “a trier; an experimenter; such persons as have no true education in, or knowledge of, physical practice but venture upon hearsay and observation only.” As homœopathic practice is guided by a rule, it is the

reverse of empirical ; that is a term more applicable to the ordinary method, which is guided by no rule or principle, but is essentially an empirical or experimental practice founded on "hearsay and observation only." Many of the leading authorities in the old school have deplored that practice of their school is altogether empirical. Sir Thomas Watson, author of one of the most esteemed works on the practice of medicine, thus describes the unscientific experimental character of modern medicine : "We try this, and not succeeding, we try that ; and baffled again, we try something else, and it is fortunate if we do no harm in these of our tryings." In this case the Medical Council, under the presidency of the illustrious head of the College of Physicians, attempted to excuse their neglect of the duty confided to them by a disingenuous and mendacious subterfuge, in the hope of concealing from the world that the homœopathic treatment of cholera had been vastly more successful than the methods they favoured. Luckily, their ignoble attempt did not succeed, for it only drew greater attention to the immense superiority of the homœopathic treatment of cholera.

A.—You are incorrigible . You have no respect for our venerated authorities in the past, for our highly-praised and titled celebrities of the present, nor yet for our dignified Colleges of Physicians. If this is the effect homœopathy produces on the mental organisation, I must keep clear of it in case I should

become infected by your dreadful anarchical principles, so I shall now say good-bye, and may you, as Burns says, "tak' a thocht and men," for I fear you are in a "parlous state."

H.—You are prudent to beat a retreat, for homœopathy is as infectious as the influenza, and should you catch the homœopathic infection you would find it hard at your time of life to be cold-shouldered by your professional friends, forced to resign your hospital appointment, lose your chance of being elected president of your medical society, and your prospect of being appointed a Court physician with its attendant title of baronet and the emoluments of a fashionable practice. As an offset and compensation for all these losses you would have the satisfaction of knowing that you were practising medicine scientifically and curing your patients more quickly and more thoroughly than you could do on the old system; but even that is not without its disadvantages—to the doctor. Adieu! I will not say "au revoir," as no doubt you think you have had a big enough dose of homœopathy to serve you for the remainder of your life.





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