

Medical Mission of Formosa, Taiwan

Publication/Creation

1866-1868

Persistent URL

<https://wellcomecollection.org/works/ftvvtj5h>

License and attribution

Conditions of use: it is possible this item is protected by copyright and/or related rights. You are free to use this item in any way that is permitted by the copyright and related rights legislation that applies to your use. For other uses you need to obtain permission from the rights-holder(s).



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

THE
MEDICAL MISSION
IN
FORMOSA.

REPORT FOR 1866.

BY
J. L. MAXWELL, M.A., M.D., E.D.



TO THE MEDICAL FRIENDS AND OTHERS

IN BIRMINGHAM,

WHO,

DURING THE LAST THREE YEARS, HAVE GENEROUSLY

CONTRIBUTED

TO THE MEDICAL MISSION

IN FORMOSA,

THIS REPORT IS RESPECTFULLY DEDICATED.

308 569.



Oriental Room

Case 10

REPORT.

It is the habit of Medical Missionaries to issue, from year to year, some statement of their work, for the better information of those who are interested in missions, and for the purpose of assisting to establish the yet disputed assertion that the medical element in missions is one of high importance. Medical Missions are still so much in their infancy as to necessitate such yearly reports; and if personally I have not hitherto ventured to make any special statement concerning my work as a physician in this island, it is simply because I have been so engrossed in other work of prior importance as to leave myself no room for such special noting of medical work as should render any report of it either of value or of interest. To the Medical Missionary, as well as to the Missionary properly so called, (that is, the preacher of the Gospel), an acquaintance with the language of the people to live and labour amongst whom he has devoted himself is of the *first* importance. He may be useful, it is true, as an instrument in healing the sick without such knowledge, or with but very slight knowledge, of the language, but such usefulness would be a miserably limited sphere for any one bearing the name of Missionary to occupy. A Medical Missionary in China must learn to speak easily the dialect of the province in which he resides—must so learn to speak it as to be able to use it for evangelistic purposes. There is a very great danger that if he does not do this he begins to lose the fervour of the missionary spirit, and from inability to speak himself, and take an active interest in all that concerns the working of the Mission around him, he be led the more easily to engage in work which, while it be medical, is not missionary. For the sake of those who come out—to China at least—as Medical Missionaries, and who by their profession are exposed to many difficulties in the matter of close study, and not only to difficulties, but to severe temptations to leave mission work altogether, I should be glad to see such regulations adopted by the Mission Societies at home as should help to secure that every medical missionary became a fluent speaker of the language of the region in which he resides. Personally I have found the study of Chinese, as it is spoken here and in Amoy, a task so difficult and laborious, that I have not ventured until last summer to extend my medical labours further than the immediate care of the patients with whom I have had to deal. Last summer the Mission premises in Takao were completed, and these included a commodious dispensary. Since the beginning of Septemoer, 1866, I have endeavoured by myself, or Chinese assistants when I was engaged elsewhere, to keep a pretty regular note of all the

new cases that have come under treatment at the Takao Dispensary. This note of cases does not include a large number whom I have been called to see at their own homes, nor those—by no means few—seen at our out-station at Sa-te-choo, nor a large number seen by me in various villages, whither, with my assistants, I had gone on evangelistic work. If these were all added the record would probably be doubled. I here subjoin a table of the cases recorded from the 7th September, 1866, to January 1, 1867, a period of four months:—

FEVERS AND SAPULAR.

Malarial Fever	165
Splenic Tumour	11
Malarial Cachexy	19
	<hr/>
	195

OPIUM SMOKING.

Men and women seeking to be cured of the habit.....	109
---	-----

EYE DISEASES.

Corneal Opacity	20
Conjunctivitis, Simple	24
Granular	6
Keratitis, Acute and Chronic	26
Purulent Ophthalmia	1
Iritis	1
Trichiasis	5
Cataract	5
Pterygium	5
Glaucoma	2
	<hr/>
	95

SYPHILITIC DISEASES.

Syphilitic Diseases	33
---------------------------	----

SKIN DISEASES.

Herpes Circinatus.....	21
Scabies	5
Eczema	4
Frurigo	4
Psoriasis	2
Tinea Favosa	1
Erysipelas	3
Furunculus.....	1
Carbuncle	2
Ulcers	20
	<hr/>
	63

DISEASES OF RESPIRATION.

Bronchitis, Acute and Chronic ...	9
Phthisis	6
Asthma	7
Pleurisy	1
Haemoptysis	1
	<hr/>
	24

DISEASES OF DIGESTION.

Stomatitis	1
Tooth Extractions	6
Dyspepsia	10
Hæmatemesis	1
Melaena	2
Diarrhœa	4
Dysentery	5
Internal Hæmorrhoids	3
Peritonitis	1
Lumbrici	2
Cirrhosis of Liver.....	1
Enlargement of Liver	1
Acute Hepatitis.....	1
	<hr/>
	38

DISEASES OF NERVOUS SYSTEM.

Neuralgia	5
Epilepsy	3
Hemiplegia	1
	<hr/>
	9

NOT CLASSIFIED.

Leprosy	4
Abscess	13
Acute Rheumatism ..	1
Chronic ..	31
Rheumatic pain after old bruise...	13
Spinal Curvature	1
Pæas Abscess.....	1
Anchylosis of joints	2
Bites of fist, (dog)	2
Bursal effusion	1
Anæsthesia of hand	1
Paralysis from pressure	1
Wounds	5
Amenorrhœa ..	2
Menonhagia	1
Sprain.....	2
Deafness	1
Suicidal mania	1
	<hr/>
	83

Total, 649.

The first and most important class of diseases noted in the above table are the Malarial Fevers. They are the most important, inasmuch as they directly destroy by far the largest number of lives, and when they do not actually destroy life, they—in an immense number of cases—radically impair the constitution. To give a more exact idea of the prevalence of these fevers in the south of Formosa, I made a note on each of the 649 cases in the table, and found that 433 of these patients had been or were then sufferers from marsh fever. I do not doubt but that a more careful investigation would have added considerably to this number. During a considerable period, when the fever is most prevalent, every slight cold immediately takes on the aguish form, and, once established, may last a long time. As I have seen it here, the malarial poison may exhibit itself either in the form of intermittent, remittent, or continued fever. I use the latter term “continued” as applying to those cases, by no means few, when you can detect no remission of the fever at all. There may have been on the first or second days some signs of remission, but thereafter none, only a steady febrile condition with a rapid pulse, and a decided tendency to a rapidly fatal issue. At first I was puzzled with such cases, seeing them only when the permanently febrile condition had been established, and I tried quinine in vain. I had lost several cases of fever thus, when in the course of reading I came on a singularly valuable paper “On the Treatment of Malarious Fever,” by Mr. E. Hare, (*Braithwaite's Retrospect*, vol. 51, p. 24.) The argument of that paper is that quinine, if given in sufficient quantity, is a certain antidote for the worst forms of malaria, for malarious fever, where there is no intermission at all, and where without quinine in large doses, the certain issue would be death. The paper further suggests that *all* the fevers met with in India are caused by malaria, and so are under the power of the same remedy. As the fatal cases I had seen of continued fever in this region were neither typhus nor typhoid, I felt encouraged to conclude that the cases which had proved fatal in my hands were also malarial in their origin, and might have been saved by very large doses of quinine. Of this I now feel quite positive, having since that time met with not a few very dangerous cases of a similar character, but which have recovered under large doses of quinine. By large doses of quinine I mean such doses as 15 to 20 grains three times a day. I believe that in the south of Formosa, (and from what I saw in Sainarpo, and in the central valleys where the savage tribes of Formosa are, and from what I can learn from parties who have resided in the north end of Formosa, I believe that what applies to the south will apply equally to the whole of Formosa), there is only one fever, the malarious, and that it is in all forms amenable to treatment by quinine, provided it is seen ere the fatal issue is quite close at hand. The importance of this fact can scarcely be over-estimated. Not only are you enabled to act rapidly and with decision in every case of fever, but you are enabled also easily to instruct your

Chinese assistants how to deal with the largest proportion, and relatively, the most dangerous set of cases to which they may be called. It is unfortunate that quinine should be a remedy which, in a malarious region, proves exceedingly expensive. Hitherto I have used it only, or nearly so, in the treatment of malaria. Until I felt clear on what, at all times, might prove a safe treatment, I did not feel warranted merely on the ground of expense to betake myself to such a remedy as arsenic, especially as from time to time I have to trust to assistants who are not by any means so sufficiently educated as to be entrusted with the independent control of remedies which are also dangerous poisons. As a matter of extreme interest, and it may be also of permanent value, I have now, however, begun a series of observations on the treatment with arsenic, and I hope in another report to bring forward some results elucidating still further the value of this remedy.

The second class of cases recorded in the table are headed "Opium Smoking." It is scarcely correct to speak of this as a disease, unless indeed in a category with dipsomania, &c., when medical assistance is required to cure a noxious habit. It is well known in Europe that opium smoking is one of the great vices of the Chinese, and in Formosa it is distressingly prominent, both amongst rich and poor. There are more opium than provision shops in Takao, and it is very painful to see—especially amongst the lowest class of labourers—the number of thin sallow faces which have their origin in this deplorable habit. Most of them commence the practice from that perversity of disposition which makes young men especially so much desire to learn that which is evil in their companions' habits, and the practice once established, it generally becomes permanent, simply from the moral, sometimes also physical, inability to sustain the trial of giving it up. In not a few cases, however, the practice is commenced in connection with some ailment accompanied with severe pain or other bodily distress, sometimes on the advice of a physician, but more frequently on the advice of a neighbour who is himself a smoker. I have found in noting this point that dyspepsia is the most frequent cause of what we might call medicinal opium smoking, and that bronchitis and malaria, and the bodily distress which accompanies it, are the other most frequent causes. It is begun sometimes as early as the age of 13 or 14 years, and not a few of the female population of Takao are also slaves to this pernicious habit. Many of the working men will consume two-thirds of their daily wage on opium, and the remaining third, if so much, on food. The result is that he is generally very ragged, and if attacked by illness extending over a few days, he is in imminent danger of starvation. The keepers of opium shops are, as might be expected, not distinguished by anything like generosity to those who haunt their shops; so soon as the money for the opium is not forthcoming. I remember one instance of this very vividly. A poor man, an opium smoker, was severely affected by malaria, and by

a last great effort had gathered two or three of his little rags of clothes and some rice together, and had crawled to the Hospital. He walked in before me, his last effort, and then lay down to die, as I saw at once, in the course of an hour or two. He was already at that point of collapse and exhaustion that no amount of stimulants or of quinine were of the least value. But as he lay there dying, the craving for his opium stimulus came powerfully upon him, and, though directly against Hospital rules, I could not refuse the poor man his entreaty for the opium pipe. I sent my servant into the adjoining shop, the owner of which is the landlord of the Hospital premises, asking for a little opium and the use of a pipe, for a man very ill. The only answer I could get was that the opium might be had for money, but that no pipe would be lent. Happily, there was another opium shop not far off, whose master had oftentimes been a patient of mine, and from him I succeeded in obtaining what I wanted, and so the poor man had his last wretched solace. But I have oftentimes had occasion to remark the exceeding heartlessness of the small opium dealer, and I do not wonder at it. I find that out of the total 649 recorded cases, the number of opium smokers amounts to 247, a tolerably large average, inasmuch as the table includes both women and children. Of these 247, 109 persons presented themselves for assistance in getting rid of the habit. Some are induced to do so by the pressure of poverty, especially if they have a large family dependent on them; others come at the request of friends who are wise enough to warn the smoker of the dangerous consequences of the practice; others, because the habit consumes a considerable portion of working time and a very few because they *feel* that the habit is an evil in every sense. The method of cure is simple enough. It consists in the administration of pills of camphor and opium, the quantity being regulated by the amount of opium consumed daily in smoking. In this way the habit of smoking is broken off, while the intense craving for the accustomed stimulus is lessened by the action of the pills. These pills are gradually reduced in quantity, and finally withdrawn. It is not to be supposed that all the 109 whose names I noted during the last four months are now cured of opium smoking. Many break down in the process of cure, and if one-half succeed I am indeed thankful. These camphor and opium pills are the only medicines for which I demand or receive money at the hands of the Chinese. I did not do so at first, and the result was that my kindness was thrown away, many being glad to present themselves for opium pills to stave off present cravings, to gratify which they had no sufficient funds, but having no intention of giving up the habit, however willing to protest that such was the case. I accordingly changed my plan, demanding a small sum according to the amount of pills consumed, and so I escaped a large number of those who would fain have deceived me. In this way also I am enabled to cover the expense both of camphor and opium.

The next class of diseases in the table are Eye Diseases. Proportionally they are numerous in Formosa as in all other parts of China. Habits of cleanliness would do a great deal to diminish the number. I am fully persuaded that many of the cases of dull corneas, and most of the cases of trichiasis and entropia I have seen are a result of simple filthiness and neglect to wash eyes, suffering, it may be, in the first instance, from simple conjunctivitis. I have found in cases of trichiasis that the removal of the edges of the lid, so as to include the roots of the hairs is the only operation likely to give much satisfaction *here*. Patients will come from a great distance once to see you, but the majority not twice, unless under specially urgent suffering; and so it is a point to secure as much by one operation as will ensure a certain amount of success at least. Removal of the edge of the lid does do this, and I have sometimes been astonished at the rapidity with which a dull cornea will clear up by the establishment of an open wound on the edge of the lid. But the cases of corneal opacity have been those of most interest, as well as those productive of most anxiety. I have performed the operation of indictomy for artificial pupil above a dozen times in the course of four months. Some of the cases were from the first not very hopeful, adhesion to the cornea, very extensive, and the amount of clear cornea extremely limited. On these I operated only because of the urgent desire of the patients who had come thirty or forty miles to see me, and I considered it well to try, even though I had almost no hope of success; and in two at least I had no success at all. But the rest did as well as I could have expected, and a large measure of sight was restored to men, some of whom were totally blind.

Syphilis, in all its forms, is quite prevalent on this part of the Formosa coast. With regard to the more inland places I cannot yet speak surely.

Skin Diseases, as might be expected, are prevalent enough. The Chinese have almost no regard for cleanliness. Cold water they abhor, both inside and outside, and as warm water is not quite so readily had, no water at all is the rule. The number of cases of *scabies* set down in the table is I find only five, *i.e.*, only five persons came complaining of it; but I think I should not far err in saying that a half of the whole population of this place has this filthy disease. *Herpes circinatus* is wonderfully common, sometimes the whole body being covered with large patches. A powerful liniment of iodine is sufficient to destroy the fungus and cure the disease. *Tinea favosa* in well marked forms is also frequently seen amongst the population here. But *ulcers* which for want of a better system I class here with skin diseases, are terribly numerous. I have no less than four men and two women as in-patients in Hospital at present, all of them from villages about eight miles off, and all suffering from very bad ulcers of the lower extremities. It certainly is not pleasant to secure a reputation for healing large ulcers. Chinese ulcers, from

long neglect, and ignorance how to treat them, grow to be terrible sores, inflaming and sloughing, and sometimes exuding quite a thick covering of tenacious albumino purulent matter. A large number of people die from them. In Hospital, most wretched and hopeless looking sores after a time begin to do well, and with the help of quinine and rest, the patient's bodily health is easily improved.

Diseases of Respiration, as Bronchitis, Phthisis, Asthma, are not unfrequent; and they appear to me to be no more or less amenable to treatment than in England. The prevalence of asthma, I strongly suspect, is a consequence of the malarial poison, but it is difficult to follow up enquiries on this point, especially those bearing on treatment, the Chinese being so inconstant in their visits to Hospital were not very hardly pressed by their complaint. That phthisis should be found in aguish districts seems to me very natural, even though in other respects the climate is mild and favourable.

Diseases of Digestion are common. Dispepsia is a frequent result of over-eating. A field labourer or boatman after a good day's work will consume at a meal six or seven good sized bowls of cooked rice, with some vegetable condiments, or possibly fish or flesh. That his stomach should rebel against the labour thus imposed on it is very natural, and the result is an ailment, lasting it may be for years, and sometimes appearing in aggravated and distressing forms. Happily the remedy is within easy reach, but is not borne with more complaisance by Chinese than by Englishmen. It is a striking commentary on Chinese medical knowledge that almost all the diseases of the stomach receive their names from the heart, and are referred to it. While Western nations in 1866 have been scourged with cholera, we in the East have escaped, nor have I heard of its having prevailed anywhere on the main land. But we had it severely in the summer and autumn of 1865. Nor have diarrhoea or dysentery been felt here to any extent during last year.

Lumbrici are so common that the people here do not take any account of them until associated with some other complaint more urgent in its symptoms.

Hæmorrhoids, both external and internal, are also frequent, but as yet I have operated on very few; the vaunted courage of the Chinese in facing the ordeal of pain, whether for long or short time, being rather mythical. There are exceptions here as in all countries, but the vast mass are as sensitive to pain as among Western peoples.

Epilepsy is not common, and I have seen only a few cases of paralysis from apoplexy, or from diseases of cerebral substances.

The unclassified diseases involve many points of great interest, connected with *Leprosy*, *Rheumatism*, *Anæsthesia of Extremities*, &c., but into these I shall not at present enter.

About the middle of September I opened a small building, opposite the Mission Chapel, for the purpose of receiving In-patients, especially such as came from a distance and needed to be operated

upon. It consists of two apartments, an upper and a lower, and contains eight beds. There is a small place behind for cooking, and another equally small for a bath room. It is very much too small for my purposes, but I cannot get a larger place at present without removing the Hospital from the vicinity of the chapel, which I am loath to do, as it would involve another Dispensary and another assistant, and would give me personally much more labour, which, as the Mission stands at present, I have no time to afford. During three and a half months I admitted about 40 patients, most of them from a considerable distance, and the great majority of these were discharged either cured or notably relieved. Several young men who from time to time were brought in insensible from malaria, were saved from otherwise inevitable death. I feel very thankful to have this little place in which to receive patients. I am quite sure that it is doing good, not only as a place of refuge for the sick, but as a valuable testimony against the barbarity of heathenism, as it displays itself in Formosa. It is conveniently close to the chapel, so that the patients have every facility for hearing the Gospel. Except at the hour of dispensing, however, when a brief service precedes the reception of patients for examination, no constraint is laid upon the patients in the matter of being in the chapel when it is opened at other times. The patients as a rule should supply themselves with rice sufficient for their food while in Hospital, but it is a rule which must often be broken. The expense of feeding a Chinaman is very little, and rather than that they should go away only half recovered, I much prefer to feed them myself. Thus I have generally had to supply about half the patients with their daily food. The patients as a rule have been most respectful and obedient, and sometimes have given me pleasing proofs of their gratitude for benefits received in Hospital or at the Dispensary. On several occasions, when absent for a time on Evangelistic work, Dr. Manson, of this port, has kindly superintended the medical department of the Mission, and has then, and at other times, rendered me much assistance.

I would add a word or two on what I believe to be the main purpose of a Medical Mission. It is to aid in breaking up the way for the Gospel, that it may reach not only the sick, but through them to the whole people. It will not do to measure its value by any number of conversions, or by any fewness of conversions amongst patients themselves. We may expect God's blessing on spiritual labour expended in that direction as in any other, but that is not the main *object*. The great object is to open the way that the good seed may be sown broad-cast over the whole region in which the Mission is planted. If by medical skill and attention, joined always to believing prayer, we can secure a hearing where otherwise it would be denied us; if in far distant villages we can raise up for ourselves friends whose houses will be open to us as Evangelists when all others are closed; if by labours of love whose fruits are evident in every

place, we can commend the Gospel of our Lord and Saviour to the hearts of a people who see nothing of love at the hands of their idols, we do a work, it appears to me, of far higher importance than any which is limited merely to Dispensary or Hospital patients. This I trust is the tendency of our work in Formosa. I have taken a moderate share in the Evangelistic work of my Chinese brethren, and have seen how in distant places, not only a favourable hearing was secured for us, but how old patients opened their doors and provided for us with much kindness.

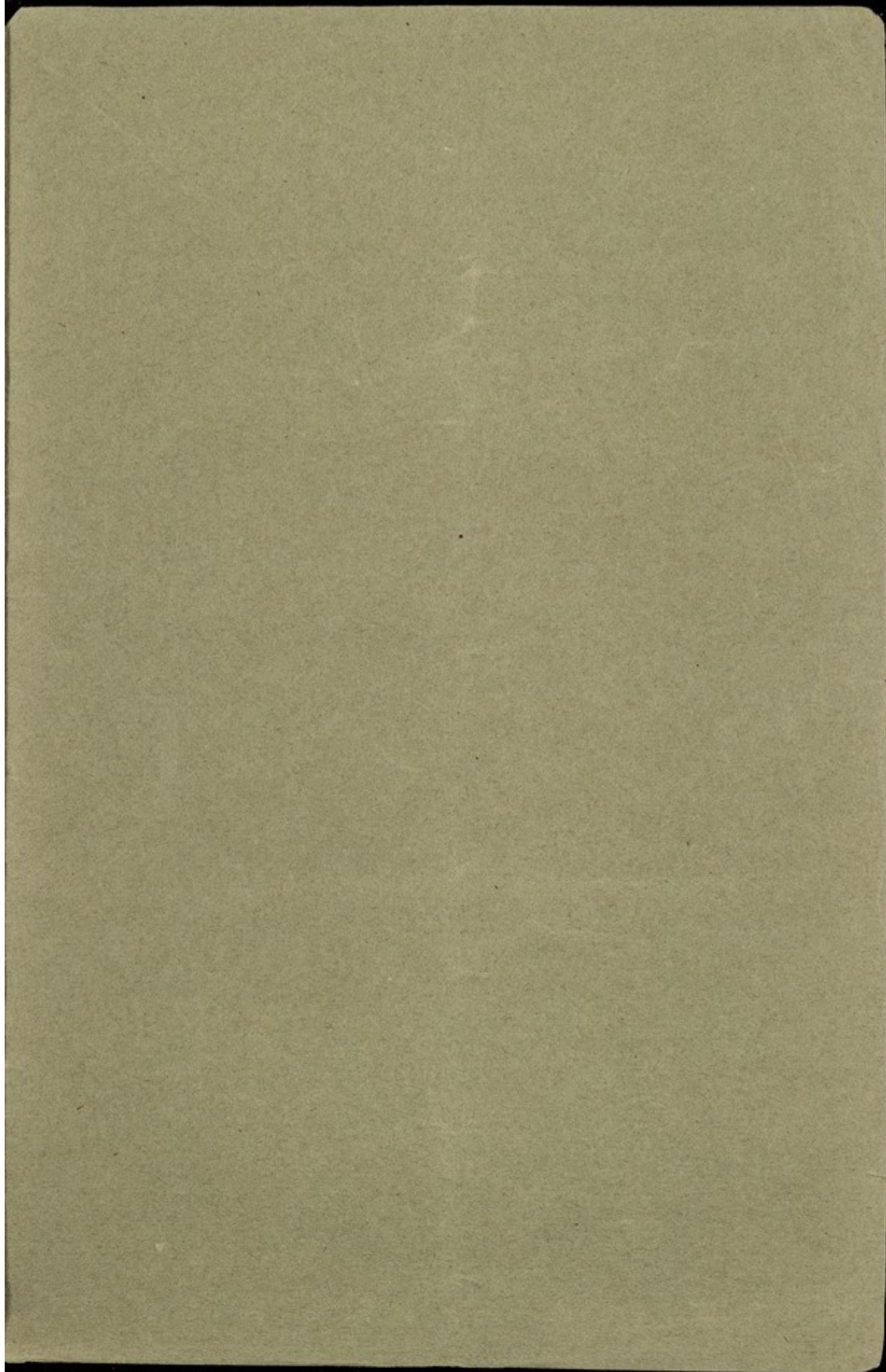
Up to this time four men have been received by baptism into the Church here. There are others, enquirers, of whom we hope that some may be received ere long, but the Church is still without a pastor, and we are therefore dependent on the occasional visits of brethren from Amoy. The Church at home is earnestly engaged in looking out for another missionary for Formosa; and it will be a cause of great joy to us here when, by the goodness of God, we hear of his having been found.

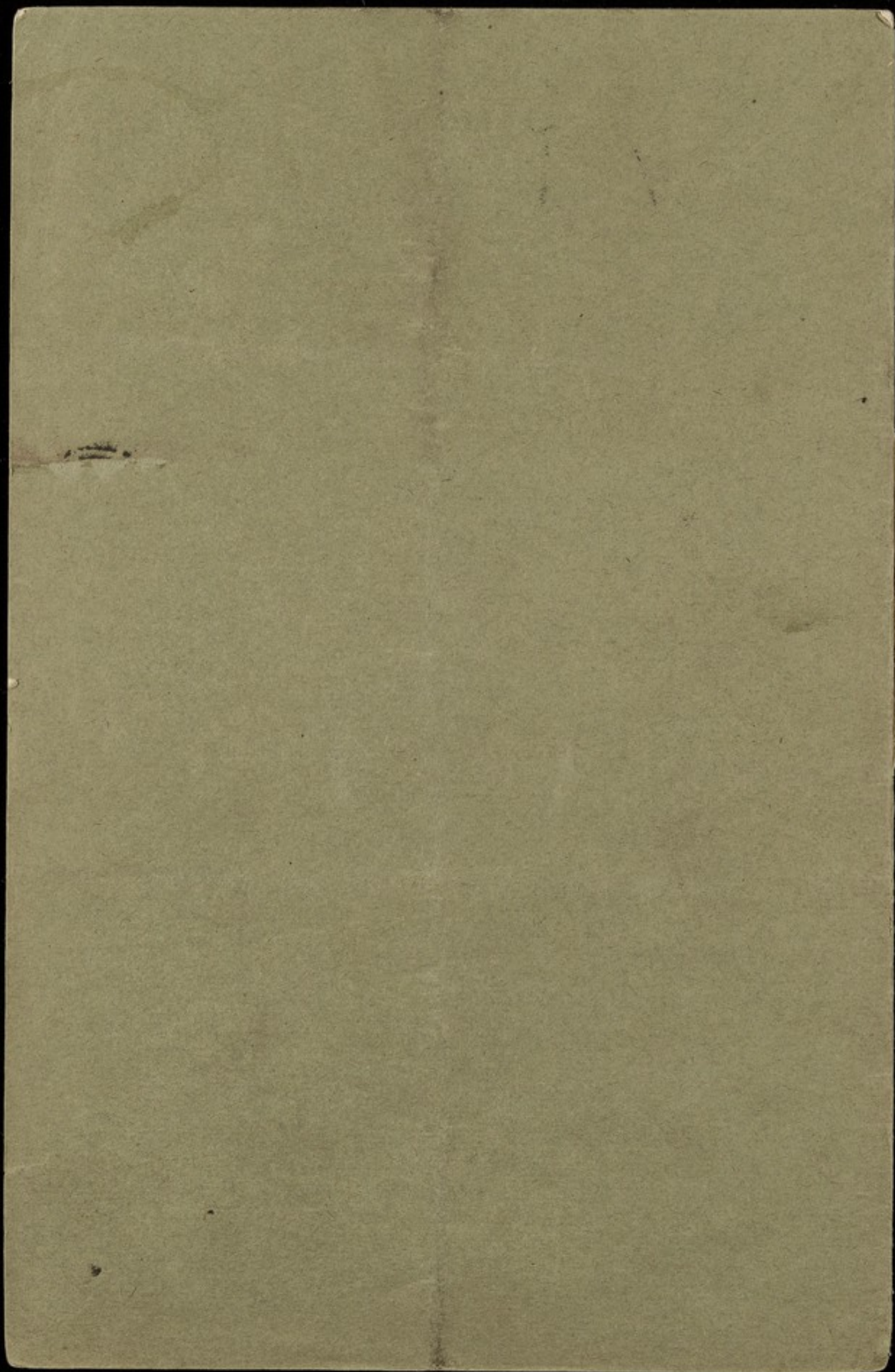
To the prayerful sympathies and continued liberality of dear Christian friends in Birmingham and elsewhere, I beg to commend the Medical Mission in Formosa.

BIRMINGHAM:

PRINTED AT MARTIN BILLING, SON, AND CO.'S STEAM PRINTING OFFICES,
LIVERY STREET.

THE
JOURNAL
OF
THE
AMERICAN
MEDICAL
ASSOCIATION
PUBLISHED WEEKLY
CHICAGO, ILL., U.S.A.
Vol. 10, No. 1, January 1, 1917
Price, Five Cents
Subscription Price, \$5.00 per Annum in Advance
Entered as Second-Class Matter, October 3, 1911
Postpaid
Acceptance for mailing at special rate of postage provided for in Act of October 3, 1917
Authorized by Act of October 3, 1917
Copyright, 1917, by American Medical Association
Printed at the American Medical Association, 535 North Dearborn Street, Chicago, Ill.



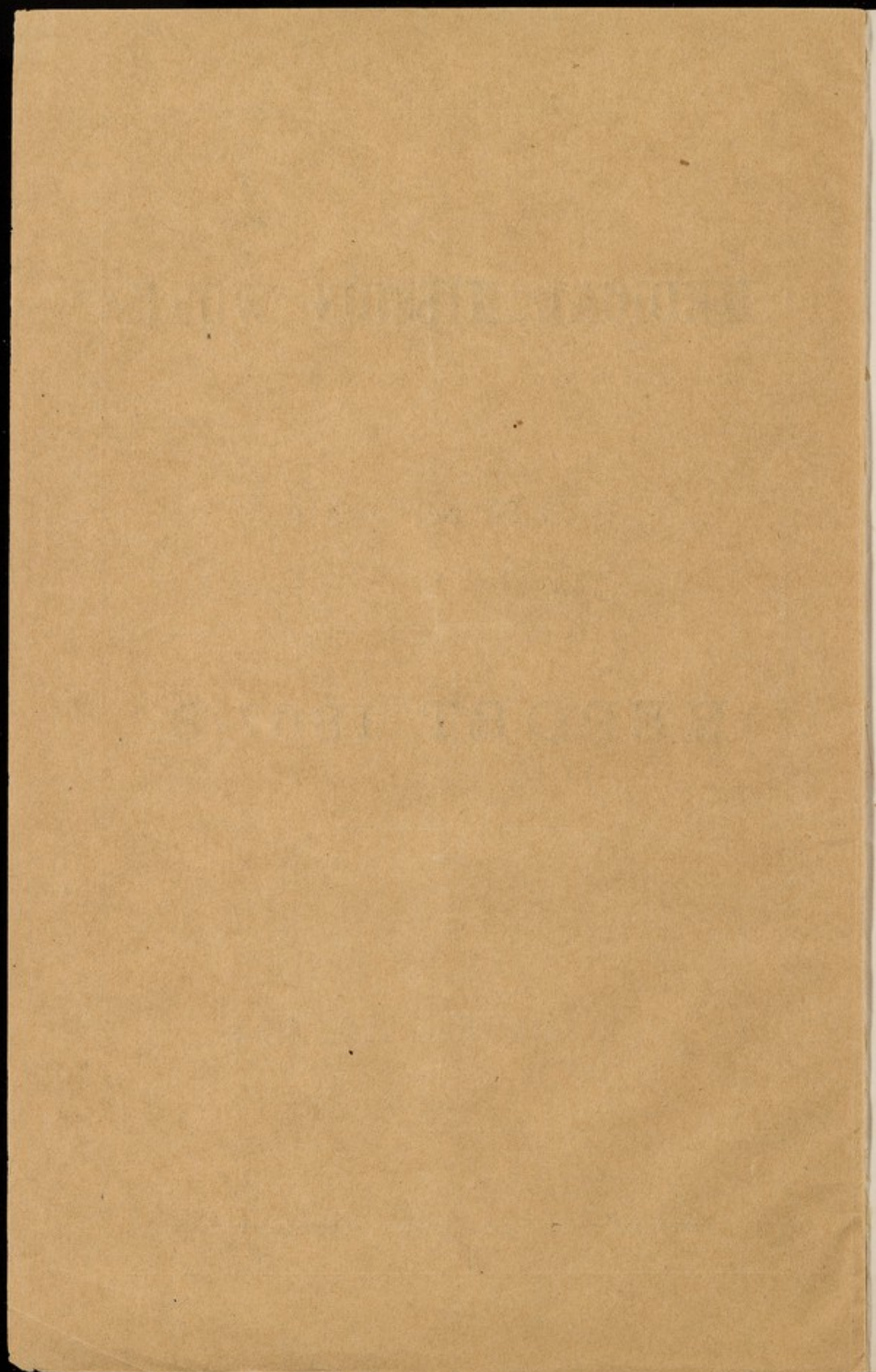


THE
MEDICAL MISSION WORK
IN
FORMOSA.

REPORT 1867-8.

BY
J. L. MAXWELL, M.D., EDIN.

BIRMINGHAM: MARTIN BILLING, SON, AND CO., PRINTERS, LIVERY STREET.



MEDICAL MISSION WORK

TO THOSE CHRISTIAN FRIENDS

IN BIRMINGHAM AND ELSEWHERE, WHO HAVE GENEROUSLY

CONTRIBUTED BY THEIR PRAYERS AND BY THEIR GIFTS TO THE

PROGRESS OF THE MEDICAL MISSION WORK IN FORMOSA.

308 569.



Oriental Room

Case 10

REPORT.

It may be assumed as almost certain that in any part of China the establishment of a Mission Hospital or Dispensary should attract to itself ere long a large number of Chinese patients; ere long, I say, for sometimes there are hindrances of superstitious fear, in the first instance, which delay such success. There are hindrances, also, of active hostility on the part of priests, street doctors, and the anti-foreign aristocracy, who are sure to be found everywhere, a hostility taking form in the shape of the vilest accusations, in insinuations of secret poisoning, murder, and other crimes, the mere reiteration of which is not without effect on the mass of the population. But in spite of all such opposition, the medical and surgical skill of the West cannot fail to commend itself beside the palpable inefficiency of the native faculty, and to win for itself the attention and the attendance of a great number of the sick. So it has been in Formosa, and so also I believe in other parts of China where Mission Hospitals have been established. The relation of these Hospitals and the labour associated with them to the advancement of the cause of Christianity in China is the most important element for elucidation in the reports of Medical Missions in China. It is an element of growing importance year by year, as the larger cities in the interior of China are being opened up to the labour of Christian missionaries. We are only on the threshold of this vast empire yet, but it cannot be more than a few years now before the whole empire is thrown wide open both to commercial and missionary effort, and ere that day comes, with its heavy but blessed burden of responsibility to the Churches of Europe and America, it is well to be earnestly studying and if possible coming to conclusions as to the various methods to be employed in seeking the conversion of China to Christ.

It is notorious that both in Great Britain and America the religious community are, as a whole, by no means persuaded that the medical element in connection with Missions is of material value. Clergy and laity alike stand largely in doubt of it. One Indian Missionary of the highest standing stated, not very long ago, that he never knew Medical Missions to be a means of winning souls, and after such statements it is not wonderful that the religious community generally should be in doubt. The impression seems to be that the work of Missions should be simply in the bold proclamation of the Gospel. That the proclamation

of the Gospel is the essential work of Missions no man will question, but that the bald statement or enforcement of it in the public street of a heathen city is the only way in which the Gospel is to be proclaimed, the only way in which the heathenism of a kingdom is to be overthrown, the only way in which souls are to be led into the Kingdom of God, is indeed a very frightful mistake. The very extensive efforts of so many of the Indian Missions in the direction of education is a direct protest against this mistaken idea, and the establishment of Medical Missions is another protest in the same direction.

Our plea is, in behalf of Medical Missions, that they are to be regarded as an agency of the highest value in the present and future evangelisation of China, and that the Churches both of Europe and America which have a missionary interest in the empire should endeavour with all possible speed to organise such Missions in intimate connection with the yet more important agencies of a directly evangelistic kind. For let me not be misunderstood. No true Medical Missionary would seek for a moment to exalt his function to the level of, and how much less above, the function of his Missionary brother who is an ordained Evangelist. That office has ever been and must ever be the chief in connection with Missionary labours, and Medical Missions would have their own condemnation written on their face if they neglected to exalt to the chiefest place pure evangelistic work. All that we plead for, and would urge upon the Churches, is, that it is their duty to recognise in Medical Missions a co-operative agency of the highest value for accomplishing the ends for which Missions are established.

1.—The first plea which I would urge on behalf of Medical Missions in China is the lowest of all, viz., that they advance scientific knowledge, and explode many of the base superstitions of the Chinese. In Formosa, and I believe also on the mainland of China, one of the most frequent and, I suppose, also one of the most sincere approaches to the idols on the part of their votaries is in connection with personal or family sickness. Up to this time seldom a day has elapsed without my ears being pained by the noise of the drum being beat before the idols, a noise which tells me that the sorcerer is there, tossing his body and muttering under the influence of the idol's spirit, as he says, some unintelligible jargon, till at length he utters the name of some medicine which the friends are to understand to be the medicine which the idol prescribes. How often such prescriptions are worse than useless I need scarcely mention, but not unfrequently when the idol has done its best, but has failed, and the patient is dying, my assistance is asked for. I have been enabled to save many from death who had previously but in vain sought unto

their idols. It is surely of value to be able to set over against the vile deceptions of these sorcerers the practice of medicine founded on the knowledge of disease, and daily, with the help of a little medicine and a little common sense, and the blessing of Him who is the Giver of Life, to be sending forth many freed from their sickness who would otherwise have been cleaving to their dumb idols for this help. Again, there are many things which we are enabled to do, concerning which the Chinese would never dream of asking their idols. Eyes long blind, chronic diseases of long standing—what Chinaman would think of praying to his idol about them? but in Hospital they are cured, and cured with comparative ease. It is surely well to fight this battle with superstition on a ground so excellent as the human body. The fight is larger than one might have expected, but we cannot fail to win.

2.—The second plea on behalf of Medical Missions is that they exhibit Christian action in combination with Christian teaching. The value of this combination in the working of any deliberately chosen field of labour must not be slightly estimated. Christian Missions in the present day, in China at least, are not conducted by a few Evangelists passing from place to place, declaring the message of Divine love in one city and then passing on to another city. The circumstances conditioning the admission of Missionaries to China would effectually have prevented such a plan, had it commended itself otherwise as the best. The limitation of foreigners to the open ports of China compelled in each instance the adoption of a plan which, while fully recognising the value of such evangelistic labours, constrained Missionaries to choose a central position from which they could bring the influence of the Gospel to bear on the surrounding district.

Missionaries have settled down in China much, I suppose, as squatters do in the Far West, each in the field of his own choosing, with the determination so to cultivate that field as that in every corner of it, if possible, it should bring forth fruit unto God. And the question has been ever, "What and how many influences can I bring to bear on this field?" This is the most sensible view, I believe, of the method of conducting Missions in China. There may not be quite enough of romance in it for many, who think of Missionaries as trumpet-tongued passing through a land, but there is abundance of hard, hard work in connection with it, and ample occasion for the trial of a Missionary's faith. Is it too much to ask of sensible Christian men to believe that, among the agencies which may be employed for bringing powerfully home in any given district the truth and the blessings of Christianity, the establishment of a Medical Mission by the side of the more important agency, is one which

may with all confidence be expected to bring forth much fruit. Wherever it is faithfully and lovingly wrought it cannot but do this. It is this lower healing work, this giving of eyes to the blind, and feet to the lame, this work of cleansing the body from its diseases and corruptions, which is, at once, the figure of the higher healing work of the Gospel and its sign; not a figure only but a sign—a witness that the work of the Gospel is a work of healing and a work of love. And is it a fact to be overlooked by those who would gather in all forces to the one great work of advancing Christ's Kingdom, that contemporaneous with the revival of the Churches of Christ in the beginning of this century, and contemporaneous with the opening up of the heathen world, the art of healing has in Christian lands advanced to such a degree as that appearing in heathen lands it is a perfect marvel? Is this vast power to have no share in assisting the cause of Christ?

In China every large city that is reached demands not only the agency of an ordained Missionary, but the co-operating labour also of the Christian physician. I rejoice to know that on the mainland in connection with the Amoy Mission, the labourers there are so conscious now of the value of this agency, that on the one side the Missionaries of the English Presbyterian Church are seeking a Medical Missionary for the city of Chin-chew, while on the other a similar labourer is sought by the American brethren for the city of Chang-chew; and whilst this testimony is being borne by the experienced labourers in Amoy, to the excellency of the fruits of the Mission Hospital there, a similar testimony has proceeded from the Presbyterian Missionaries at Swatow to the value of Medical Mission labours in that region. They are at present seeking for a Medical Missionary to occupy the city of Chan-chan-foo. These are practical testimonies which approve the truth of the statement that, in the aggressive work of Missions in China, it is of high importance to have a visible exemplification of Christian action as well as of Christian teaching.

3.—My third plea in behalf of Medical Missions is, that they are of great value in the work of disseminating the truth. By this I do not mean the notoriety which an Hospital as such may obtain, and the knowledge of the fact that such establishments are in connection with the preaching of the Gospel, but something of much more importance. I refer to the large number of individuals who come from the country districts, and who, on account of sickness, are resident in the Hospital for a longer or shorter period until their recovery, and who during that period, under daily Christian teaching, acquire such a knowledge of the truth as enables them to become, in a certain sense, competent witnesses of it in very distant places. In not a few instances

these patients, themselves converted to the truth, have gone back and laid the foundation of prosperous churches, in places to which no Missionary or native Evangelist had ever come. The flourishing station of Rhibocy, about fifty miles to the south-west of Amoy, with its now numerous membership, was founded by a man who, as a patient, having heard and believed the Gospel preached to him in the Amoy Hospital, went home to spread the tidings in his village, and, ere long, to see in his own and neighbouring villages a great movement in favour of the Gospel. The station at Chhâu-thâu-po, belonging to the American Mission at Amoy, was founded in a similar manner. One or two of the stations in connection with the Swatow Mission of the English Protestant Church were planted by patients thus returning to their homes after a residence in Hospital. Surely, then, for scattering abroad the seed of the Word, these are agencies of the highest value; for even though the great majority of patients do not become converted men, yet their knowledge of the truth is such, that they are able, if asked, to give a tolerably correct account of it, and so prepare the hearts of those around them against the time when other circumstances, under the guidance and blessing of God's Spirit, should concur to make them ready to yield themselves to the Saviour.

4.—My final plea on behalf of Medical Missions is, that in connection with Dispensary and Hospital work, there is a precious field for direct labour in behalf of souls. Mission Hospitals are not mere institutions for the healing of the body; they are avowedly established in connection with, and to further the great end of, preaching the Gospel to the heathen. "The Gospel Healing Hall" at Swatow, "The Pure Religion of Jesus Hospital" at Amoy, and such other significant names, sufficiently attest the character of these institutions. The publicity of all that occurs in them, the daily preaching of the Gospel in the Hospital chapel, the avowed position of the Physician who presides over the working, prevent all mistakes on these points. Only such publicity could render evangelistic work in Hospital an easy matter. During residence in Hospital, Chinese patients are removed from their ordinary scenes of gambling and licentiousness which are so common in China. They are placed in an atmosphere of comparative purity and love; their bodily ailments are attended to with such skill as an educated physician can render; and at stated intervals the Word of Eternal Life is set forth to them in terms, the continued repetition of which they cannot fail in measure to understand; and the result is as might have been anticipated. Of eighteen persons who have been received into the Church during the last three years in Formosa, no less than five received their first impressions when resident as in-patients in Hospital, and one other while attending from week

to week as an out-patient. In the Swatow Hospital, which in this most important aspect is perhaps better wrought than any similar institution in China, a much larger number of persons have been led to accept of Christ; and in other places, as Amoy, well-marked spiritual results have been obtained.

I believe that if a fair consideration be given to these various pleas, it will be found exceedingly difficult to escape from the conclusion that in China the Medical agency is, in connection with the preaching of the Gospel, a most effective instrument in the aggressive work of Missions. I purposely avoid referring to Medical Missions in other countries, though, despite the contrary opinion, I believe the good results of Medical Missions in Travancore, in Beawr, in Madras, Cashmere, and elsewhere, will speak by their *facts* in a way that must defy contradiction.

During the last eighteen months, Mission work in Formosa has had rather a chequered character, and, to the outward appearance, would appear at this moment to be almost extinguished. We trust, however, that the course of time shall shortly reveal that the troubles through which the little church in Formosa has been made to pass have only been, in God's gracious providence, the means to further the opening up of the whole island to Christian labour. In the summer of 1867 a station was opened at Pi-thaû, the district city of this portion of Formosa. The place was secured with considerable difficulty; and to avoid question at a later period, it was duly registered in the Mandarin's office as a place to be used for a chapel by the Protestant Mission. Only fourteen days, however, after the opening of the chapel and the dispensary attached to it, a violent assault was made on it by the underlings of the Mandarin's office. The new benches and furnishings in the Chapel were carried off, the doors and windows were battered in, and threats were made to the native helper who remained throughout that if the place was opened again the consequences would be more severe. Next day Mr. Carroll, the then acting British Consul, went in from Takao, and at an interview with the Mandarin secured a promise that he would issue a proclamation on the subject, and that he would see that reparation was given for the damage inflicted. The duplicity of Chinese magistrates was unfortunately not to find an exception in this man; the property was not restored, but found its way to the possession of one of his officers; the guilty parties, whose names were again and again sent in to him, were allowed to go about glorying in their wickedness, and the proclamation was only issued on further considerable pressure. Two days after the assault the chapel was re-opened, and the work went on without any further marked interruption until the beginning of this year. The work consisted in preaching and healing. It was in

so far successful that towards the close of the year there were nine or ten candidates for baptism. There being no clergyman then present, however, they were necessarily delayed. In December, 1867, we were greatly cheered by the arrival of the Rev. Hugh Ritchie and his wife as permanent labourers in the Formosa Mission field. At the close of February I left Formosa for Hong Kong to wait the arrival of another permanent labourer for Formosa in the person of my bride. We reached Takao on our return journey in the beginning of May; but before that time events had transpired in Formosa which must largely influence the eventual history of the Mission. During the month of March a studied attempt to ruin both our work and that of the Roman Catholic Mission, if indeed it did not include the further programme of a general rising in the southern portion of Formosa, was begun by the simultaneous spreading in every direction of the most foul and wicked accusations as to our proceedings, as that we were secretly poisoning people by medicines on an enormous scale, poisoning the wells, poisoning the food, scattering poison on the roads, &c., &c. So vigorously was this plot carried out that in a brief time the whole south of the island was in a state of ferment and of considerable terror. This excitement was enhanced when an idolatrous procession in the country was suddenly led by a notorious ruffian of the district to attack and burn to the ground a Roman Catholic chapel. Three days later one of our catechists, passing through the streets of the district city, was attacked by some of the Mandarin's guard, was robbed and beaten on the street, and only saved his life by rushing into the chief Mandarin's office and loudly demanding his protection. The protection afforded was an imprisonment on the most unfounded and ridiculous charges, an imprisonment which only ended after seven weeks, on the very strong representations of the British Consul. An hour or two after the seizure of the catechist, the chapel itself was attacked, plundered, and torn down; the house of one of the Christians treated in like manner; another of the native assistants seized and severely beaten, the rest only escaping very narrowly by flight. In all these outrages the leading men were parties immediately connected with the magistrates' office, some of them being the very parties whom we accused last year on account of their first assault upon the chapel. These deeds of violence at the hands of such parties, and utterly unrestrained, not to say unpunished, by the magistrates, emboldened the evilly-disposed in all quarters to show their hatred towards the Christians. About five miles from Takao there is a village to which we have often gone preaching, and only eleven days after the seizure of the catechist at Pi-thaû, another catechist, passing through the village, was recognised as a Christian, set upon and cruelly murdered in the public street with knives and

stones. His body was cut in pieces, the more savage of the assailants showing their ferocity by various acts of indignity towards the senseless corpse. All other Christians and inquirers fled to Takao, and from that time to this it has been quite impossible for some of them to show face near their own homes. These various matters were taken up by the British Consul, and represented to the authorities at Taiwanfoo and at Pi-thaû, but his remonstrances were quite in vain. The presence of H.B.M. ship *Icarus* and of the gunboat *Bustard* to second the representations of H.B.M. Consul have proved equally unavailing to secure redress either on these points or on other points connected with foreign residents in Formosa. The Governor of the Island is unquestionably the leading offender, in tacitly sanctioning these outrages, and until something is done from Peking to bring him to reason, or remove him from office, there can be no security for the lives or property of Chinese Christians or foreign Missionaries. At the close of June my colleague, Mr. Ritchie, and myself forwarded a memorial on the whole subject to the British Ambassador, Sir Rutherford Alcock, at Peking. I believe that His Excellency has listened to the prayer of our memorial, and that at Peking he is insisting with the Chinese authorities on the necessity of redress for these past outrages, and of ample protection for the future. Thus, though there still may be some delay in the final settlement of the affair, we have little room to doubt but that in the end these persecutions will serve to open up the way for us far more effectually than a long period of patient labour could have done. It is a matter of great joy and thankfulness to God, that whilst these persecutions have been going on, the Christians and those who were applying for baptism have, with only one or two exceptions, adhered steadfastly to the truth. Some of them have lost their all, and have been driven out from their homes; all of them have been exposed to trial and shame for the name of Jesus. During the last three months, that is, while these persecutions have been going on, nine persons in all—eight men and one woman—have been received by baptism into the Church. The majority of these are connected with the district city of Pi-thaû, and can only as yet stealthily visit their homes; some, indeed, cannot do so at all.

The Medical Mission work during these last eighteen months has externally assumed a much more imposing aspect than in previous years. In the beginning of 1867 the pressure of in-patients was such that it became necessary to rent an additional building to that previously occupied, in order to accommodate them. These buildings, however, were exceedingly unsuitable for Hospital purposes, and forced on me the consideration of the question of a new and commodious building wholly for Hospital purposes. I am happy to say that this building has actually

been erected on a large open space by the sea side. It is in the form of an open square, the sides of the square being formed by the Hospital buildings. It is commodious enough to contain about fifty in-patients, divided amongst wards containing five persons each, and it is provided with a Dispensary, Chapel, Resident Assistant and Porter's room, a kitchen, store room, and bath room. To obtain so large an accommodation as this, and yet to avoid a very large expense, the building has been erected after the fashion of the Chinese in Formosa, the wall of bamboo, with lath and plaster, the floors of brick, and the whole well roofed in with tiles. The whole is raised two feet above the surrounding ground on a solid foundation of stone and lime. The whole cost of this building, including the purchase of the ground, amounted to about £300, and it is probably the most lightsome and cheerful of all the Mission Hospitals in China. Supposing some £12 or £13 sterling are required annually to cover the expenses of repair, and I do not think it should exceed this sum, it will be seen that this outlay is anything but excessive. This building was completed just as I was starting for Hong Kong, and the fierce excitement beginning to manifest itself soon afterwards, there has been but little work in it, until within the last two months. Since that time, though meanwhile we ourselves are shut out from the country, patients have begun again to come from the country, and at present there are from fifteen to twenty in-patients. Takao itself being small, the out-patients are not numerous, and vary from six to ten daily. During the last eighteen months, while moving about a great deal between Takao, Sutechoo, and Pi-thaû, I have not kept any regular record of the numbers of out-patients who have been seen by myself and my assistant. They have amounted, I doubt not, to several thousands. The in-patients whom I have noted in 1867 amount to one hundred and fifty. Of these no fewer than fifty-nine were cases of severe ulcer of the lower extremity, a form of disease which though in itself rather nauseating to the attendants, is rather welcome to me than otherwise. It is welcome because such patients do not leave in a hurry, and we may therefore expect that the daily influence of Christian teaching, kindness, and example should tell most powerfully upon them. Twenty-five patients were treated in Hospital for severe intermittent fever, or the anæmia consequent upon it. In general the recovery of cases of fever is both quick and satisfactory, and the cases of anæmia, though requiring more prolonged treatment, are also satisfactory in their results. Twenty-five operations were performed on the eye, in the majority with excellent results. Five cases were entered of acute and two of chronic rheumatism. These also afford favourable results. The other cases it is needless to particularise. Within the last month the first severe

amputation has been performed in a case of extreme disease of the ankle joint, complicated with considerable destruction of the external tissues. The leg was amputated immediately below the calf, and the patient is now nearly quite recovered. I have no doubt that the greater comfort and the increasing age of the Hospital will do much to attract severe cases from a distance; we cannot but live down the vile accusations of our slanderers, and if God helps us to be faithful we cannot but expect a large blessing in connection with this Medical Mission work. For the generous assistance which many kind friends in Birmingham and elsewhere have rendered to the Mission during these past years, I render my most hearty thanks. I beg of them to believe that we endeavour to use it faithfully, and I entreat of them to continue this assistance to a work which in the natural course of things should by the blessing of God increase more and more.



BIRMINGHAM:

PRINTED AT MARTIN BILLING, SON, AND CO.'S STEAM PRINTING OFFICES,
LIVERY STREET.

