

**An argument for and against the compulsory vaccination of school children : Dr. C. N. Haskell, representing the Bridgeport Medical Association, in the affirmative and Major Thomas Boudren, representing the Bridgeport Anti-Vaccination Society, in the negative ; "Compulsory vaccination is the introduction of disease, by law, into the healthy body."**

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W. H. Brewer

1908

AN ARGUMENT



# FOR *and* AGAINST

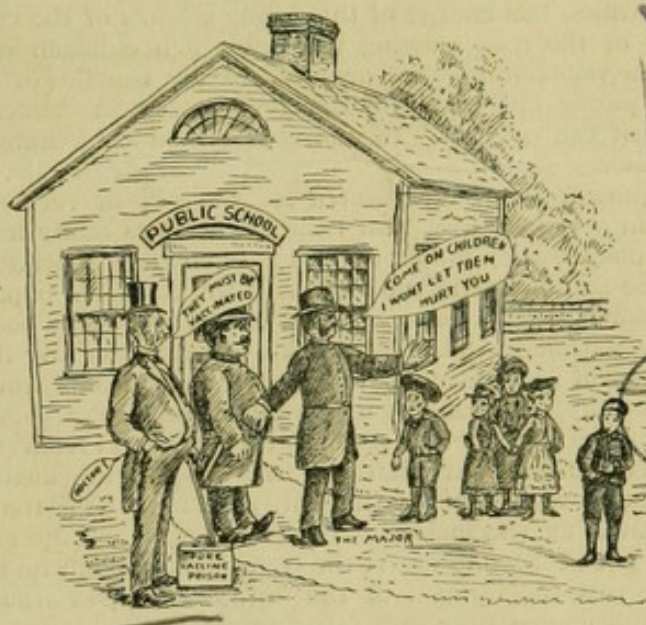
## The Compulsory Vaccination of School Children



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**Dr. C. N. Haskell, Representing the Bridgeport  
Medical Association,**

**IN THE AFFIRMATIVE**

*and*

**Major Thomas Boudren, Representing the Bridge-  
port Anti-Vaccination Society,**

**IN THE NEGATIVE**

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**“Compulsory Vaccination is the Introduction of  
Disease, by Law, Into the Healthy Body”**

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Printed Under the Auspices of the Bridgeport Anti-Vaccination Society

INOCULATION  
VACCINATION

Pamphlet



## PREFACE

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This little pamphlet contains an argument for and against the compulsory vaccination of school children. Quite recently the undersigned introduced a petition to the Board of Education of Bridgeport, Conn., which has charge of the public schools of the city, asking for a repeal of the then existing rule by which children who would not submit to vaccination were deprived of the benefits of an education at the public charge. The Bridgeport Medical Association appeared against the petition. It was represented by a number of its members, among whom was Dr. Charles N. Haskell. Dr. Haskell's paper was quite the ablest presented for the side of vaccination, but it betrayed, in a typical way, how little the doctors really know about the artificial disease they inflict, and how much they depend upon tradition and the statements in their books. Dr. Haskell's paper showed the usual amount of borrowing without credit, from text books. Also it will be seen that he did not hesitate to abandon the authorities which he himself had selected, when their conclusions would injure his case. Notably was this true of his claim that lockjaw is not communicated by vaccine virus. Among the writings from which he largely helped himself were those of the pro-vaccine doctors, Dock and Councilman, who confirm the anti-vaccinist claim that lockjaw is communicated by vaccination. Yet Dr. Haskell, as the reader will perceive, did not hesitate to assert the contrary, although he must have known what was the opinion of the authorities upon whom he relied. Both sides were fully and fairly heard by the board, in which was included several able lawyers. As a result the compulsory feature of the rule was repealed. It will be noted that the vaccine doctors endeavored to keep facts alleged by them, in favor of vaccination, from the public and they used every means to keep Dr. Haskell's paper out of print. Note their communication to the editor of the Bridgeport Farmer which will be found upon the last page hereof. In order that the public may fairly judge the merits of the case I have, with the advice and consent of the Bridgeport Anti-Vaccination society, printed Dr. Haskell's argument with my own. The only advantage that I receive over him, is that my own argument is given the choice of position, and is therefore first in order in these pages. I need not reiterate that, after exhaustive consideration of the evidence, I am satisfied vaccination is a crime, and that I shall continue to do what I can to prevent the infliction of the vaccine rite upon the people of this country.

Respectfully yours,

THOMAS BOUDREN.



Inoc  
Vacc

## Major Boudren's Reply to Dr. Haskell.

To the Editor of the Farmer:

Sir:—With your kind permission I will express my views of the arguments advanced by Dr. Haskell on behalf of the Publicity Committee of the Bridgeport Medical association in his paper favoring compulsory vaccination of children, which I understand you are to print to-day. If you will be so good as to print my answer also you will give the people of Bridgeport a chance to hear both sides of this important question such as they have not before enjoyed; for it has been one of the difficulties of my situation that my medical friends have been very scant in argument and thus the people, hearing only one side of the question, have had small opportunity to know how conclusive and how unanswerable the proof of the anti-vaccinationists really is.

### Doctors Talk by Rote.

Dr. Haskell has attempted a more ambitious defense of compulsory vaccination than the body he represents has before permitted. Dr. Haskell's paper was prepared at the request of the Publicity Committee and he is, therefore, the especially selected champion of the vaccinist doctors. A careful study of the several papers submitted to the board of education by the Publicity Committee convinces me that the writers have not investigated the vaccination question, but have more or less imperfectly assimilated the conclusions of their text books. Of individual research, comparison, reasoning, they have contributed nothing.

### Haskell Borrows Without Credit.

This is especially true of the arguments submitted by Dr. Haskell who has adopted large portions of his paper verbatim, from the article on "Vaccination," by Dr. George Dock, and from the treatise on "Smallpox," by Dr. W. F. Councilman, both of which will be found in Vol. 2, "Osler's Modern Medicine," which is perhaps the latest English authority on its subject.

Dr. Haskell does not give credit to the writers whose ideas and whose language he has appropriated. In cer-

tain instances he has made slight changes in the language used by Dock and Councilman, with the effect of altering the intent of what they said.

Pages 5 to 7 inclusive, of the paper by Dr. Haskell, are almost verbatim from Dock and Councilman, but paragraphs from each are so mixed together, that either author would find difficulty in separating his own.

### What Doctors Are "Scoundrels"?

Let me say at this point that I have not the slightest personal feeling against any doctor. Whenever in speaking or writing I have referred to the members of the medical profession as "Scoundrels," "Murderers," or "Robbers," I have intended to refer only to those who vaccinate for hire, knowing that the practice brings death and suffering in its train, and not to those who, like Dr. Haskell, vaccinate in the belief that vaccination is a justifiable operation.

If I have referred to portions of the paper by Dr. Haskell as borrowed, it is not to fix the charge of plagiarism upon him, for I am not a member of an Author's copyright association, but to make it clear that my answer is not to him alone, but to the experts Dock and Councilman, who appear to have attempted independent investigation.

### Dumping Dr. Dock.

Knowing as I do, what authorities Dr. Haskell had in front of him, I cannot escape the conclusion that it was his purpose to be less than candid with the board of education.

Dr. Haskell, thinking independently, uses this language: "All sorts of diseases, from pimples and boils, to consumption and syphilis, have been attributed to vaccination. But it does not seem that such charges can appeal to the lay mind of even average intelligence. Before the days of antiseptic surgery \* \* \* \* when arm to vaccination was practiced, \* \* \* \* such accidents infrequently happened. At present such occurrences are impossible. Vaccine virus is in no sense a vile poison. Diseases such as syphilis, tuberculosis, lockjaw, etc., are not introduced by it."

We have now reached the point where Dr. Haskell felt obliged to throw Dr. Dock overboard, body, boots and breeches. In the very article from

which Dr. Haskell borrowed so largely, Dr. Dock says, under the sub-title, "The Complications of Vaccination" (Page 321, Volume 2, Osler's Modern Medicine) that among the complications which may be expected are vaccinal ulcers, terminating in death; post vaccinal gangrene, in which death usually occurs in the second week; several pyogenic diseases, including erysipelas, which sometimes become epidemic; fatal hemorrhage, abscess, furuncles, lymphangitis, cellulitis, phlebitis, suppuration of the axillary glands, pyaemia, contagious impetigo, eczema, psoriasis, herpes circinatus, following infection by a common parasite of cattle and tetanus.

It is true Dock does not include tuberculosis as a disease that may be transmitted by vaccination. He does say, however, that vaccination "sometimes seems to accelerate the course of tuberculosis." Regarding the intro-

#### **Vaccination and "Lockjaw."**

duction of tetanus by vaccination, which Dr. Haskell declares impossible, Dock says:

"Tetanus (lockjaw) has a remarkable history in connection with vaccination. Macfarland was able to collect 52 cases \* \* \* and learned of 28 more. Tetanus bacillus may be present in the virus in small numbers derived from manure and hay. Wilson in 1902 found tetanus bacilli in vaccine virus, and Carini, in 50 different specimens, found tetanus bacilli five times. Glycerine is a poor protection against tetanus germs, as Rosenau has shown."

Does Dr. Haskell wish the Board of Education to understand that Dr. Dock is a reliable authority when he borrows from him and not reliable when I quote him?

Although neither Dock nor Haskell admit the transmission of tuberculosis by vaccination there is abundant evidence that it occurs. Some vaccine manufacturers advertise that they kill their calves and make an inspection to be certain that the disease is not present in the animal from which the vaccine poison is taken.

#### **Deaths Caused by Vaccine Virus.**

Only a small number of the deaths caused by vaccination are officially reported, but the report of the registrar general, 1895, table 17, page 52, shows for the 15 years from 1881 to 1895, that 785 British children were officially reported slaughtered by vaccination, an average of 52 a year. Alfred Milnes believes that the reported

number should be multiplied many times.

Jenner was of the opinion that vaccination does not protect unless it is accompanied by erysipelas.

#### **That 97 Per Cent. Argument.**

I agree with Dr. Haskell that vaccination does not guarantee actual immunity from smallpox in every case. If it does not in all, it cannot in any.

I agree with Dr. Haskell that 97 per cent. of those vaccinated (in civilized lands) do enjoy immunity from smallpox. I add to his claim that fully 97 per cent. of the unvaccinated enjoy the same immunity.

How many in this country are vaccinated and how many are unvaccinated? What does Dock say?

He says, "That the proportion of unprotected people varies in different parts. Perhaps the condition in Michigan is no worse than the average. Yet among several thousand people examined by the writer within the last ten years only 60 per cent. had been vaccinated at all and in most of these the scars were unsatisfactory."

Upon Dock's estimate it would seem as if less than half the people of this country are now, or ever have been, effectively vaccinated.

Now the population of Connecticut is substantially one million and there has been in 20 years among them 63 deaths from smallpox, which would figure about 500 cases, and this would give us 1,000 cases during 40 years, the average lifetime of a man. Let us assume that each of these thousand cases were among the half of the population which is unvaccinated. It will then appear that the degree of immunity from smallpox enjoyed throughout their lifetimes by the unvaccinated people of Connecticut was not 97 per cent., but 99 4-5 per cent.

Dr. Haskell's claim of 97 per cent. immunity is meaningless. It is one of the things he says that prove he has given the question of vaccination no real attention.

#### **Children Entitled to Protection.**

I agree with Dr. Haskell that it is, within limits, the duty of the authorities to protect children from the caprice of their elders and especially from the caprice of their elders in the medical trade who would contaminate the children of the land with a vile constitutional disease, frequently complicated, as Dock shows, with a multitude of fearful maladies.

### What Royal Commission Really Said

Dr. Haskell's lack of candor is again exhibited when he says that the Royal Commission arrived at the conclusion that the injuries resulting from vaccination were "insignificant."

Section B, paragraphs 378-434, majority report of the Royal Commission, concludes as follows:

"That, although some of the dangers said to attend vaccination are undoubtedly real and not inconsiderable in gross amount, yet when considered in relation to the extent of vaccination work done they are insignificant."

This is an entirely different statement. The Royal Commission admits that vaccination does a large amount of damage but claims that it does more good, a conclusion in which the minority of the commission entirely disagreed.

### Why "Cow Pox" is Confined to Cows.

If Dr. Haskell will read the evidence taken by the Royal Commission he will find that many medical men gave evidence of diseases caused by vaccination, including cases of syphilis and leprosy clearly due to vaccine poison.

Dr. Charles Creighton, M. D., M. A., author of the article on vaccination in the "Encyclopaedia Britannica," and of "The History of Epidemics," who is quoted with approval by the minority of the Royal Commission, believes there is a 'close analogy' between cow pox and syphilis.

When Dr. Munn asked the Board of Education the question: "Who ever heard of a bull having cow pox?" he meant to say that there are learned doctors who believe that cow pox is syphilis transmitted to the cow from the hands of the milker. The theory

### The "Immunity" Theory.

of vaccination, as expressed by Dr. Haskell, rests upon a fanciful medical idea that one attack of smallpox gives immunity from another.

Physicians having observed that in certain infectious diseases very few second attacks appear, and being poor statisticians were unable to account for the phenomena and invented the theory of immunity to cover it.

Let us see if we can find the true reason why second cases of smallpox are so seldom seen. The average annual death rate from smallpox in this country is 35 persons in 1,000,000. Over a long term of years the average death rate, will be 15 per cent., which means that every death represents 6.5 cases of smallpox actually occurring, which gives us for the United States, or

rather for the registration district of the United States, 213.5 cases per million per year.

If the average lifetime is assumed to be 40 years it appears that among any million living persons there will be 213.5 times 40, or 8,540 persons, among the million who have had smallpox.

Thus there is at the most for the United States but one chance in 116 that any particular person will have smallpox once during his lifetime and his chance of having it twice is 1 in 13,456, or  $116 \times 116$ .

The statistics of second cases are limited, but there are many authorities who believe that there are more second cases than there should be under the doctrine of probabilities and the claim probably is established that one attack creates a certain amount of susceptibility toward the disease.

The probability that any particular doctor in Bridgeport will ever see in his own practice a single case of smallpox is not very large. The probability that he will see a second case in the same person is enormously slight. The same reasoning appears to be true of the whole group of zymotic diseases, of which smallpox is one

### Scarlet Fever Relapses.

Thus in 5,000 cases of scarlet fever reported in Volume 2, "Osler's Modern Medicine," there occurred 15 relapses, 5 second relapses and in 10 instances patients were observed suffering with the disease after they had had it a first time from two to five years earlier and this was more cases than ought to have appeared under the doctrine of probability.

### Vaccine Virus Does Not Protect Against Itself.

If smallpox does not protect against smallpox what becomes of the claim that the analogous disease (smallpox passed through the cow) protects?

The virus of vaccine does not protect against itself. With much other evidence to the above effect the minority report of the Royal Commission, Paragraph 122, quotes a paper by Professor Smith entitled, 'How Long Does Vaccination Protect?' Professor Smith notes that in the English army the percentage of successful vaccination was 92.64 and that successful re-vaccinations were 88.37 per cent. Professor Smith concludes that after a successful primary vaccination it is possible to re-vaccinate a person twelve months later.

Hence admitting that vaccination gives immunity for a year, which it do

not admit, excepting for purposes of argument, a person would need to be vaccinated 40 times during an average lifetime to be protected. In such event the deaths by vaccination would enormously outnumber the deaths by smallpox. My own opinion is that a successfully vaccinated person can be successfully re-vaccinated and re-re-vaccinated until he dies from poisoning by the virus.

If vaccination does not protect against vaccination, how can it protect against smallpox? Let Dr. Haskell collaborate further with Dr. Dock and Dr. Councilman and answer this question if he can.

Dr. Haskell offers in proof of the effectiveness of vaccination, that in Germany children are vaccinated at 2 years and that during a certain period two-fifths of the deaths from smallpox were of children under two years, who were presumably unvaccinated. Such a statement is valueless to show anything.

#### **Dr. Haskell Proves Too Much.**

Smallpox is a children's disease and children under two years ought always to be a greater proportion than two-fifths. Since they are a less proportion Dr. Haskell has shown simply that there are fewer deaths of unvaccinated than there ought to be and hence more deaths of vaccinated than there ought to be. Let us glance at the statistics of mortality for other children's diseases.

The figures are from "Mortality Statistics," U. S. Census bureau, for 1906. In that year there were reported 5,087 deaths from measles, 3,014 or three-fifths of which were of children under two years.

There were 6,324 deaths from whooping cough of which 5,059, or five-sixths, were of children under two years.

There were 1,737 deaths from croup of which 611, or one-third, were of children under two years.

In this connection it will be well to note what Dr. Haskell says of the ravages of the disease among children in Siam.

For the same period there is reported 95 cases of smallpox, 17 of which were of children under two years.

#### **Diseases That Demand "Worry."**

Just why my medical friends are so perturbed over a disease like smallpox which has reached its vanishing point; while they are less than exercised over deaths from other zymotic diseases, must remain a mystery to the layman. In 1906, in this country, measles was 50 times more fatal than

smallpox; whooping cough, 63 times more fatal; croup was 17 times more fatal; scarlet fever was 32 times more fatal and diphtheria was 90 times more fatal.

But why worry about the really giant diseases that slay our children when you can vaccinate for smallpox at \$1 a head?

And if Dr. Haskell is yet inclined to claim that vaccination is the reason why smallpox has diminished, will he also explain why there were only 95 deaths from smallpox in 1906 in a country where under the principle established by Dr. Dock there were 45,000,000 persons unvaccinated, or not effectively vaccinated?

Dr. Haskell has not presented his statistics for smallpox in London for 1884 in an intelligible form. The deaths from smallpox in London in that year were not 1,000, but 1,232 according to the report of the registrar general. If he cares to present them understandably I will be pleased to consider them.

#### **School Age the Healthiest of All Ages.**

A similar failure to appreciate the elementary statistics of mortality leads Dr. Haskell into another gross error of statement, page 18 of his paper, when he says:

"It is in childhood that individuals are most susceptible to contagious diseases. It is during school life that children contract most of the contagious diseases and it is in the schools that such diseases are disseminated. Therefore, I state without fear of contradiction," continues Dr. Haskell, "that any child attending our public schools without being vaccinated is a menace to public health in a degree equal to that of a child suffering from a contagious disease."

I agree with Dr. Haskell that in childhood the susceptibility to contagious disease is greatest. I do not agree with him that it is during school life children contract most of the contagious diseases. United States Mortality Statistics for 1906 show that, in the five years preceding, out of every 1,000 deaths, 271 were deaths of children under five years of age and of course under school age. Only 42 deaths in 1,000 were of children between five and 15 years of age. The school house and the school age are the healthiest combination in the world. Out of every thousand deaths 271 are before school age and 688 are after school age.

I invite Dr. Haskell and the publicity committee of the Bridgeport Medical Society to give with proof a single contagious disease of which it is true that "most cases of it are contracted during school life." I invite them to give with their proof, the name of any disease, contagious or otherwise, that finds its period of greatest prevalence "during the period of school life."

These are statistics for beginners. But simple as they are their very presence seems to be unknown for the most part, to the medical proponents of vaccination, who yet presume to deal with the relatively complex and massive statistics relating to the vaccinal rite.

#### Can Nonsense Go Further?

"Therefore I state," says Dr. Haskell," without fear of contradiction, that any child attending our public schools without being vaccinated is a menace to public health in a degree equal to that of a child suffering from a contagious disease."

Reducing this statement to its legitimate conclusion we find:

1. That an unvaccinated child is as much of a menace as a child with a contagious disease.

2. Smallpox is a contagious disease; therefore an unvaccinated child in a public school is as dangerous as a child with smallpox in a public school.

3. Therefore Dr. Haskell is without fear of contradiction.

Alas, for the welfare of our children, that the state of not being vaccinated is not contagious, as Dr. Haskell seems to think it is.

I agree with Dr. Haskell that smallpox rages in Siam and the East substantially as it raged in Europe before the days of sanitary reform. I agree with him that these peoples suffer also with cholera and the plague much as Europe suffered in the days before sanitation.

#### How Small Pox Was Kept Alive.

Vaccination was introduced in 1798. Eighty years earlier Lady Montague had introduced the practice of inoculation or the introduction of real smallpox virus into the body, and this practice had been operated on a large scale for eight decades with the result that smallpox was efficiently propagated and its quantity and deadliness increased.

In 1871 the greatest smallpox epidemic in the history of Europe swept over it. Vaccination had then prevailed for 73 years and pro-vaccinists for more than 40 years have been trying to explain that epidemic away.

Dr. Haskell in his concealed collaboration with Dr. Dock adds his trifle of explanation and incidentally says "it, smallpox, was kept alive by sporadic variolation (inoculation) not prohibited in England until 1840."

I agree with Dr. Haskell that at the time when vaccination was generally adopted smallpox decreased enormously but the cause of this decrease was not due to vaccination but to the gradual abandonment of wholesale variolation.

Vaccination made people sick and killed many of them but it was superior to inoculation because it was not contagious, because it was not smallpox, and because a vaccinated person would not usually give the smallpox to dozens of other persons as those who had been inoculated could.

When inoculation was abandoned the sanitary reforms which had reduced so many fearful scourges of mankind were permitted to have the same effect upon smallpox. The "great plague," "bubonic plague," "black death," as it has been variously called, swept off half the population of Europe in the Thirteenth century. It still rages in China and India but is easily put down in Europe and America.

In the middle of the Nineteenth century Asiatic cholera swept away thousands of lives in America. It is now easily controlled. The death rate from typhus fever has been reduced in England from 1,228 per million in 1838 to 140. Yellow fever has been conquered.

Dr. Haskell declares that he will not discuss vaccination with a "layman." Then he says that the proof that he has to offer consists in statistics, which he declares he has, but which he does not furnish. Cannot a layman interpret statistics as well as a doctor can? If not, why not? Without boasting, I believe that if Dr. Haskell will compare my ability to correctly interpret statistics with his own he will find at least one "layman" who is as competent as at least one doctor.

But Dr. Haskell confirms me in my claim that the question as to whether vaccination prevents smallpox is statistical and not medical. It is true, as the selected champion of the Publicity Committee of the Bridgeport Medical Society asserts, that vaccination has been opposed since its introduction by thousands of the wise, including many great physicians.

Compulsory vaccination is inflicted

by an exercise of political power. If Dr. Haskell wishes to implant the germs of disease in the pure blood of his own children, perhaps at this stage of our civilization I cannot have a law restraining him. They are his children. Formerly he might have knocked them on the head. The law forbids him that privilege now. But I have seen vaccinated children suffer by reason of their vaccination so that it would have been merciful if they had been slaughtered by quick violence.

If Dr. Haskell desires to use his political power to the end that my child must submit to blood poisoning at his hands for a fee, he should not complain if I use my political power to keep my child out of his clutches. And if he says that my motive is desire to attract attention to myself; I reply that the love of fame is not usually regarded as so powerful a motive as the love of fees. The love of fame is also a nobler affection than the love of fees. A man seeks fame by doing good acts; but frequently in seeking fees adopts for his motto: "Get the money, no matter how."

I am afraid I must insist that I do not seek either money or fame. I am an old man—older than the biblical allotment.—My years here are necessarily not many.

Vaccination is a crime against God, man and nature. Dr. Haskell would defile the fountain of life. I seek to show him that he is terribly mistaken. He does what he does, because others did it before him; who understood what they were doing as little as he does.

#### **Dr. Haskell Turns Lawyer.**

Dr. Haskell's discussion of the legal aspect of vaccination is principally valuable, because of his admission that vaccination does not protect for any particular length of time. Vaccination is legal, wherever it is legal; it is wrong, whether it is legal or illegal. Many states that formerly had compulsory vaccination laws have repealed them.

Nevertheless that is a very unusual exercise of legal power, which authorizes one man to invade the body and the very blood of another to inflict disease upon him without his consent, especially when, as Dr. Haskell must himself admit, there is a chance that the operation will kill him, or that he will get in addition to the disease it was intended he should have many others for the infliction of which the law made no

provision, as consumption and tetanus.

The only legal analogies I have been able to find are the laws inflicting capital punishment.

Indeed the laws inflicting vaccination by compulsion are without analogies.

It is one thing to invade the body of a man against his will even to putting him to death upon the claim that the health of other men will be protected. It is quite another thing to put a man to death for putting another to death.

I presume Dr. Haskell would be horror stricken if I would propose a law to hang any doctor who took the life of any person by inoculating him with calf poison against his will.

Dr. Haskell has brought together a series of typical illustrations of the efficacy of vaccination—typical from the standpoint of the physician. We have no doubt but that smallpox presents in the Far East the results described by Dr. Braddock and quoted by Dr. Haskell. The conditions that prevailed in medieval Europe prevail in the East, and not smallpox alone, but the entire group of diseases to which people are subject among whom the principles of sanitation are little known.

Dr. Haskell has referred to the decreasing and increasing prevalence of given diseases, and to the fact that for long periods a given disease will be virulently epidemic, and again only mildly epidemic.

But this is true. If vaccination will wipe smallpox out of Siam it should wipe it out of Japan. Japan is perhaps the most vaccinated country in the world, not excluding Germany. The Japanese law provides for at least three vaccinations of each person.

But in Japan from time to time appear smallpox epidemics as vast and as fatal as those described by Dr. Braddock. Hence we must conclude that vaccination and re-vaccination is not effective with the Japanese, or else we must admit the truth that vaccination is not concerned in the phenomena.

The same principle applies to the German army illustration. If vaccination has expelled smallpox from the German army it should expel it from the American army in the Philippines. It appears, however, that the smallpox cases among American soldiers are very numerous and extraordinarily fatal. Again the character of the vaccination laws in force in civilized states appear to

have no connection with the prevalence of smallpox. The Connecticut law is much milder than the Massachusetts law, but there is actually and relatively more smallpox in the latter state. Again the people of Japan are well vaccinated while it is doubtful if ten per cent. of the people of this country are effectively vaccinated within the definition of effective vaccination furnished by my medical opponent.

The vaccine of to-day is smallpox virus and tends to keep smallpox alive. Dr. Haskell evidently does not know that the vaccine producers in this country confess that they are using smallpox to originate their infection, and that spontaneous cowpox is an exploded myth. See letters from vaccine concerns to Dr. Z. T. Miller, published in Transactions 1904, American Institute of Homeopathy.

One important point is overlooked, in relation to the vaccination of to-day: that is, that, being smallpox which is cultivated and communicated, the vaccine disease may become contagious; all persons should shun contact with the vaccinated, while the infection is on. It is not unusual for smallpox to be acquired in this way, though not admitted by most doctors who try to trace it to some other source.

It is an error to say that "in 1874 the first law was passed providing for the vaccination of every child before the end of the second year," for a law had been in effect in Prussia for twenty-one years, enacted in 1853, which required every child to be vaccinated before one year old. (See the pro-vaccinist doctor, Sir John Simon's Papers on Vaccination, in Pearce's Vital Statistics.)

It is a juggling of statistics to compare Germany prior to 1874 with Germany subsequent to that year, representing the former as unvaccinated and the latter as vaccinated, and for this reason: From 1835 vaccination had been compulsory in Prussia; in Bavaria from 1807; in Baden from 1809; in Wurtemberg from 1818. So that the great epidemic of 1871-2 occurred in a well-vaccinated country. Pro-vaccination Dr. Seaton said in 1871 to a Committee of Parliament: "I know Prussia is well protected." But before the end of that year Prussia had lost 69,839 citizens with smallpox, and reference to Dr. Creighton's statistics in the 9th Ed. Encyc. Brit. will dissipate any idea that they were

chiefly deaths of unvaccinated persons.

As further proof that the Vaccine act of 1874 had nothing to do with the decreased smallpox mortality that followed the epidemic of 1871, the law did not go into effect until April 1, 1875, and before that date the epidemic was over. The deaths in Berlin were in 1871, 5,216, and in 1874, 101. Before the new law was operative the number had dropped to 23. It is time this ancient canard upon which the pro-vaccinist doctors rely were shelved.

Dr. Haskell should take another look at Leicester. When the vaccinations there equalled 90 per cent. of the births the general death rate was 27 per thousand. After 30 years, in which the people of Leicester have declined to be vaccinated, the general death rate has sunk to 12 per thousand.

And a study of the statistics will show that the practice of vaccination has a very great effect in increasing the death rate among the populations who are victims of the murderous rite.

#### The True Source of Health?

Progress has been made toward the conquest of tuberculosis, which claims more victims than smallpox ever claimed. This conquest will not be by vaccination, Dr. Haskell as prophet to the contrary, but by a better housing, feeding and sanitation. Nature cannot be cheated even by the Publicity Committee of the Bridgeport Medical association. Attempts to get rid of zymotic diseases without eliminating the foul conditions that nourish and distribute them, will be utterly futile.

Vaccination is opposed to the lessons of sanitary science. It is an awful mistake, most terrible in its effects upon the lives of the young.

I beseech Dr. Haskell to think where he has only read, and to reason where he has only memorized. If he will do this, being as he is, a reasonably sincere man, I have no fear but that he will join with me in favoring a repeal of the rule by which the germ laden pus from the bodies of sick calves is forced into the veins of the helpless children of Bridgeport.

The medical profession is not infallible. Doctors had dissected bodies for centuries before they discovered that the blood "circulates." Laymen had before them no multiplicity of earths upon which they might experiment, but they beat the doctors a century or more in discovering the circulation of

the earth about the sun. Long before the doctors concluded that the heart was a pump, laymen had discovered the law of gravitation and had proved that the earth is an ovate spheroid.

For many centuries did my medical friends administer powdered toads, crushed spiders and the dried blood of a child murderer drawn in the dark of the moon, to their confiding patients.

How many besides Washington did they bleed to death against the rules of nature and common sense?

Through how many weary centuries did they deny the cup of cold water to the lips of fevered humanity parched with thirst?

With what oceans of nauseous drugs have they deluged the stomachs of sick mankind from whose bedrooms they excluded with religious zeal God's healing sunlight and His restoring air?

#### **A Single Woman Led Them.**

My medical friends admit that it was upon the simple suggestion of a sin-

gle woman who was a mere member of the laity, that they inoculated small-pox upon the bodies of the human race for 120 years, until the increasing pyramid of their slain caused society to restrain them by law from a slaughter of which they were as ignorant as a vaccinated baby is of the vile nature of the virus they inject into its veins.

And after 110 years of vaccination they are about to be restrained by law from further myriads of torturing slaughters caused through the agency of the rotting flesh of a calf suffering with syphilis, into which human small-pox has been introduced.

Surely a little modesty would be becoming to my medical friends, even to those upon the Publicity Committee of the Bridgeport Medical association, and they may be sure that if they will not discuss medicine with the laity, the laity will discuss medicine with them.

Yours Very Truly,

THOMAS BOUDREN.



## Dr. Haskell's Argument Before the Board of Education of Bridgeport, Conn.

The Honorable Board of Education.  
Gentlemen:—

As a member of the medical profession of the City of Bridgeport and also a member of the Bridgeport Medical Association, I have been requested by the Chairman of the Publicity Committee of that organization to address you on the subject of vaccination.

I most emphatically decline to enter into controversy with any lay person or persons on any medical subject whatsoever; but inasmuch as the Board of Education is evidently looking for enlightenment on the subject referred to, I feel that I should be derelict in my duty as a physician if I refused to impart some information which I may have at hand.

Personally, I feel as much disconcerted in being called upon to extol the efficacy of vaccination in preventing smallpox as I should if I were asked by one of your number, as your personal physician, if smallpox were a good spring tonic. I feel as much indignity when confronted with the untruthful statistics concerning the accidents incidental to vaccination, as would the Railroad Commissioners of our State if they were asked to abolish all railroad traffic, because a brakeman was killed while coupling cars in South Norwalk last summer.

Before referring to that which has been accomplished by vaccination, let your minds be disabused regarding its much attacked infallibility.

### **The 97 Per Cent. Argument.**

Vaccination does not guarantee absolute immunity in every case against smallpox. It does not guarantee immunity in every case for a life time. It is a fact, however, that fully 97 per cent. of those vaccinated do enjoy immunity from smallpox for a greater or lesser period of time. In a great majority of those vaccinated, who are later attacked by smallpox, the severity of the disease is much lessened. It should be

remembered, in this connection, that many who have been vaccinated were not successfully vaccinated, and although they are classed with the few who have been vaccinated and have thereafter contracted smallpox, they really have not been truly vaccinated.

### **Vaccination a Safe Procedure.**

Statistics, well authenticated and easily verified, substantiating the claims of the medical profession that vaccination prevents smallpox, and is, in itself, a safe procedure, are in such profusion that they can at present only be referred to briefly.

From the time of Jenner's discovery until to-day, vaccination has met with more or less opposition in spite of the scientific place in medical history which the procedure unquestionably maintains.

Among the early objections were those of a religious nature; then political and politico-legal arguments were advanced and much was said in connection with compulsory vaccination, about the liberty of the individual citizen, etc., etc.

And on every occasion it has especially influenced a great host of susceptible minds, who harbor in their breasts every known manly feeling, and who, as a consequence, look on themselves as the exclusive guardians of liberty. It is therefore intelligible that many political aspirants of the present day are wont to use anti-vaccination as a plank in their political platform, and thus attract the attention to themselves that cannot be done in any other way.

### **Vaccination Not Enough Without More.**

In relation to the pretended illegality of compulsory vaccination (and revaccination) we must energetically insist that, consciously or unconsciously, the opposition of their attacks proceeds from totally false premises in their conception of liberty. It must first of all be understood that personal liberty and free-will have legal limits, and must under no circumstances come into collision with the common weal, for otherwise presumed right might soon develop into actual wrong. And this would be the case with the

omission of a measure which, like vaccination (and revaccination), not only gives directly to the vaccinated manifest protection against smallpox, but likewise indirectly to the whole population of a region or country a safeguard that cannot be valued too highly against the epidemic spread of the disease. Since every new smallpox case creates a focus for other possible cases, every one who scorns the protection of his own person through ignorance is guilty of a negligence that may eventually do the greatest injury to others.

It is the humane duty of the authorities to take care of minors and protect them from the caprice of their elders. That is to say, the State should not allow children to suffer for the sins of omission of adults, and therefore it only remains true to its principles when it strictly demands the vaccination at least of children. This is even more justifiable, since variola is, especially for children, so dangerous a disease. Or shall civilization wink at the possibility of a return of a calamity that swept away children and left a track of intense misery, only because fathers and guardians, under the name of liberty, chose to deprive of vaccination the children and wards intrusted to their care, and thereby senselessly deliver them to the caprice of that demon? Where the practice of vaccination is not an absolute custom among the people, and unfortunately this is so nowhere up to the present, legal compulsion seems the only means for preventing a mischief that especially threatens the innocent.

Everything in a sanitary way that has been hurled at vaccination by the opposition has been proved foolish on closer investigation, or is at least a conglomeration of the most rash assertions.

#### **Vaccination is "Made" Smallpox.**

You are, no doubt all familiar with the fact that a disease exists among cows called cowpox, which is manifested by an eruption on the udders similar to that occurring on the skin of human beings suffering from smallpox. Couple this fact with two others, that cows are susceptible to smallpox infection when experimentally produced, and that cowpox in man contracted from the cow produces immunity from smallpox and you have the key to Jenner's discovery.

"Jenner's one great error was his belief in the life long immunity con-

ferred by vaccination." We now know that the period of immunity is variable, but that the safe period in most individuals is about fifteen years. This fact, which was not known one hundred years ago, has been made the basis of no end of argument by anti-vaccinationists.

The discovery of Jenner came at a most opportune moment. It is impossible to overestimate the influence which that has exerted in furthering civilization and the physical and moral advance of the human race. Without vaccination and with the present intercommunication, smallpox would be a pandemic raging over the entire world. It would certainly still the fears of those who dread an excess of population. At the present time the disease is chiefly seen in the most ignorant and wretched of the population, the strollers who do not acquire a residence so as to be subject to vaccination laws and the criminals who evade the laws. The disease is also kept up by a class of people who are either ignorant or have a peculiar order of mind which renders them incapable of sane judgment and who seek in every way to oppose vaccination. The saddest feature is that in every epidemic there are a number of unvaccinated children in no way responsible, who either die of the disease or are permanently disfigured.

Notwithstanding the fact that all infectious diseases, including pneumonia, influenza, or grip as it is more commonly called, and various diseases of like nature, have recurrent waves of virulence which lead to epidemics, the epidemics of smallpox with which we have been visited since the establishment of vaccination, have been of lesser magnitude, and they certainly diminish as time goes on. I mention this fact because the dissentors make this the basis of their chief argument against the efficacy of vaccination.

#### **When Vaccination Didn't Prevent.**

In the eighteenth century smallpox was the dominant disease and might well be compared to tuberculosis existing at the present time.

In England deaths from smallpox formed one-tenth of the entire mortality. In France 30,000 died of it yearly, and in Prussia alone in one year (1796) there were 26,646 deaths. This period of universal prevalence extended well into the nineteenth century. Deaths in Rus-

sia have been estimated as high as ten millions. It attacked both high and low, prevailing equally in the houses of the rich, the tents of the army, and the hovels of the poor.

Coincident with the rapid spread of vaccination was a marked fall in the extent and the mortality of smallpox all over the civilized world. As an example, in London in the years 1761-1800, the mortality in the successive decades was respectively 24,234, 20,923, 17,867, 18,477. In the first two decades of the nineteenth century it was 12,534 and 7,856. Toward the end of the second decade of the nineteenth century smallpox began to increase, and in some countries became almost as prevalent as it had been before. The causes of the recrudescence are not difficult to understand.

#### **How Doctors Spread Smallpox.**

Many people had been vaccinated so long before that they had lost their immunity wholly or in part. This was the time to settle the question as to the life-long protection which the early vaccinators so fondly believed in, but prejudices were still too strong. Many other people were not vaccinated at all, because smallpox was so much less frequent that the operation seemed unnecessary, and there was a smaller proportion than before not protected by smallpox. Smallpox virus existed in many places. **No efficient effort had been made to stamp it out, and it was even kept up by sporadic variolation, not prohibited in England until 1840, five years later than Prussia.**

Looking back it is clear that certain great changes had occurred in the smallpox situation since Jenner's discovery. The absolute mortality was less; the disease was not so frequent as before in the years following the usual age of vaccination; and these facts were most obvious in countries that had the most thorough vaccination.

The most striking test of the possibility of vaccination was made in the war of 1870-71, and depended largely upon the farsighted care of the German military authorities.

Smallpox became so prevalent in France in the preceding winter that efforts were begun to combat it, but the outbreak of the war not only prevented such action, but, as usual, caused a great increase of the disease, which rapidly extended over Europe. In Germany, where many prisoners of war carried the infection, the disease was widespread;

but it was a striking fact that the German soldiers were not only less frequently and less severely affected than the French, but that they were less affected than civilians of military age in the same towns. The

#### **Vaccination and German Soldiers.**

only difference was that all German soldiers under arms at the outbreak of the war had been revaccinated within two years. The following figures show the mortality of different classes at that time: Revaccinated, five per cent; once vaccinated, fourteen per cent.; unvaccinated, forty-five per cent. This object lesson was not lost on the newly formed German Empire. In 1874 the first law was passed providing for the vaccination of every child before the end of the second year, and of all school children in the twelfth year. The result of the operation was to be a matter of record, and failure to produce a satisfactory vesicle necessitated a repetition. In the civil population the mortality sank rapidly so that in 1899 the deaths in the whole empire were only twenty-eight, scattered over twenty-one different places. In the army, too, the death rate became lower than before, showing the protecting influence of widespread vaccination, since the soldiers had been vaccinated in the same way for forty years before.

#### **Those German Laws.**

The approval of the Vaccination Law by the German Reichstag was by no means unanimous, for many of the members were opposed to the measure for judicial reasons or from hygienic scruples. Some regarded the introduction of compulsory vaccination and revaccination as an inadmissible attack upon the personal liberty of the individual; others, as might have been expected from previous experiences, maintained that personal health might possibly be damaged. Repeated petitions and proposals were subsequently addressed to the Reichstag by the opponents of vaccination, more or less violently demanding the repeal of the existing vaccination law. The German Reichstag has, in this respect at least, fortunately proved itself worthy of its high mission, for, up to the present time, all these propositions have been defeated by a large majority.

In the meantime the German people have had no cause to complain of the effects of this law, since the results of compulsory vaccination

and revaccination in all parts of the empire have undoubtedly been extremely good. During the last twenty years smallpox upon German soil has become more and more an exotic growth, inasmuch as the personal susceptibility to variola, in the most outlying population, has been reduced to a minimum and the opportunity of acquiring smallpox is of rare occurrence in the central portion of the country.

The greatest diminution in the smallpox mortality is found in the early years of life, in which there is most vaccination.

In London in 1884, of 1,000 smallpox deaths, 343 were under ten years old. But this calculation includes both vaccinated and unvaccinated persons. In the vaccinated community the corresponding figures were not 343, but 86; and the unvaccinated not 343, but 613.

Vaccination, by lessening the opportunities for infection, and increasing the intervals between epidemics, has helped even the unvaccinated. Yet among the unvaccinated smallpox is still, to a great extent, a disease of childhood.

In prevaccination times, smallpox, measles and whooping cough were diseases of childhood. Measles and whooping cough are still diseases of childhood, but smallpox and especially fatal smallpox, has been to a very remarkable extent driven from childhood by means of vaccination. What still remains can be driven from later periods of life by means of revaccination.

In countries where there is much vaccination and revaccination relatively to the population, there is little smallpox. Beginning with the year 1816 it is found that in Prussia, previous to the German law of 1874, the smallpox death rate was 309 per annum per million of population.

I have at hand statistics relative to every country in the world which not only fully controvert the deliberately concocted misleading figures of the anti-vaccinationists, but are convincing to the most prejudiced minds. These statistics will be furnished you if so desired, though time and space forbid their incorporation in this paper.

In Germany the compulsory vaccination age is the second year of life, and investigation showed that in 1886-90 fully two-fifths of the few deaths that occurred from smallpox were under two years of age. Also most of the cases occur near

the frontiers of badly vaccinated countries.

#### **The Risks of Vaccination.**

Nothing done by human beings is entirely without risk, but the risks of vaccination have been grossly exaggerated.

All sorts of diseases, from pimples and boils to consumption and syphilis, have been attributed to vaccination, but it does not seem to me that such charges can possibly appeal to the lay mind of even average intelligence.

Before the time of antiseptic surgery, before the time of extensive knowledge of bacteria, in the days of stage coaches and kerosene lamps, when arm to arm vaccination was practiced because a sufficient supply of bovine lymph was not procurable, such accidents infrequently happened. At present such occurrences are impossible. Vaccine

#### **Haskell Abandons Dock.**

virus is in no sense a vile poison. Diseases such as syphilis, tuberculosis, lockjaw, etc., are not introduced with it. Through carelessness, ignorance or disobedience of physicians' instructions, lockjaw, the grand stand play of the anti-vaccinationists, may be introduced into a vaccination wound, as it may and often is into other open and unprotected wounds, notably into various accidental wounds on the Fourth of July; but the statements made that lockjaw following upon vaccination is due directly to it are false. The most startling and exaggerated adverse statistics on vaccination, which seem to appeal so profoundly to the uninformed, should be compared to the mortality statistics incidental to manufacturing and commercial life in our city or state and to which not a suggestion of protest is ever made. The former are too insignificant for serious consideration, even allowing them all to be true, which they are not.

Some of the earliest anti-vaccinationists held that the countenance of a vaccinated child might be transformed so as to assume "the visage of a cow." Later on, in the middle of last century, vaccination was accused of making people bald-headed, short-sighted, lazy, and of causing degeneracy in music, printing, oratory, poetry, etc.

Still later, the habit has been to get statistical returns of increasing and decreasing diseases from the registrar-general, and to attribute the increasing diseases to vaccina-

tion, and to use the decreasing diseases to illustrate the view that smallpox also might decrease without vaccination. But a disease may be increasing at one time and decreasing at another. Thus at one time cholera and enteric fever and scarlet fever were blamed on vaccination, but when these diseases began to decrease, their decrease was, and still is, held to show the needlessness of vaccination.

#### **Syphilis and Vaccination.**

One foul syphilis disease in particular used to be attributed to vaccination, but when the royal commission looked into the matter they found that after vaccination of Leicester infants had been largely given up that disease had increased there much more rapidly among infants than in the rest of England.

So also erysipelas, while it decreased in England by sixteen per cent., increased in Leicester by forty-one per cent. Similarly, diarrhoea, dysentery, and bronchitis, all of which have attributed to vaccination, increased much more in Leicester than in England. The periods under comparison are 1863-67 and 1883-87. It is not to be supposed that the increase in these diseases was due to want of vaccination, but if instead of increasing they had diminished in Leicester, their diminution would, without doubt, have been attributed by anti-vaccinationists to diminution in vaccination, just as increase of many sorts of disease have been attributed by them to vaccination where vaccination is not neglected as in Leicester.

#### **Haskell "Quotes" Royal Commission.**

The Royal Commission made most careful search for injuries resulting from vaccination, and after the fullest consideration, arrived at the deliberate conclusion that such injuries were "insignificant" and "diminishing" and could be still further diminished. So insignificant were they that vaccination has been nowhere more nearly universal than in the families of medical men, who love their children as other men do, and who know much better than other men do the exceeding safety of vaccination.

Germany, which for many years has had the benefit of systematic primary vaccination and revaccination, is practically free from smallpox, and its smallpox hospital accommodation is merely nominal. When the Vaccination Act of 1898 was before Parliament, statements made on behalf of the Government led to the expectation that an act providing for revaccina-

tion, subject to the so-called "conscience clause," would be introduced in the following session. This hope was not fulfilled, and every outbreak of smallpox proves the continuing necessity of obligatory vaccination.

#### **Where Smallpox Conditions Prevail.**

Let me quote from a communication from Dr. Charles S. Braddock, of Haddonfield, N. J., former Chief Medical Inspector Royal Siamese Government:

"Among the diseases traveling in the train of civilization smallpox is one that easily leads in its terrible destruction of life and in blindness and disfigurement of the human countenance that it leaves in its wake.

The average man who lives at home, and does not have his attention particularly drawn to the matter, does not realize the terrible loss of life in the past, and which is still going on in the remote parts of the world.

In the South Sea Islands, in the Far East, in China, Indo-China, Siam, the Malay Peninsula, Arabia, Persia, Africa and many other parts of the world, the death roll in past epidemics has run into hundreds of thousands of people, who, if they had protection by vaccination, might have lived long lives of usefulness, not to speak of the thousands of blind and disfigured persons. It is no uncommon thing to see in some cities in the Far East six or eight totally blind persons being led in one line by a blind leader, each one with his hand on the shoulder of the one in front. Literally, as the Scriptures say, "Blind leaders of the blind."

In Siam up to recent years practically all of the new cases and the great death rate were among the children, for all of the older people had had the disease during successive epidemics.

In 1903 the death rate in Siam and its dependencies was 10,000 and this was only one epidemic. These epidemics have been recurring every few years. Dr. Peoples, a Presbyterian medical missionary in the province of Nan, one of the Laos provinces in the north of Siam, told me that in that province, which has now a population of 600,000 people, 100,000 had died of smallpox in the past thirty years. This is only a sample of what has been taking place all over the Far East with the exception of the British Colonies, where vaccination has been pushed by the British government. In Indo-China the French Government faces the situation that the population has decreased fifty per cent. since they first occupied the country, and efforts

are now being made to vaccinate and instruct the people in sanitation by government medical men. In 1903 Dr. H. Adamson, inspector general of hospitals, and myself called the attention of the Siamese government to the terrible death rate on Siam from smallpox and showed the great inroads it was making among the already sparse population of pure Siamese, who had also suffered so severely from cholera, malarial fever and dysentery, and was to have bubonic plague added to their troubles. But smallpox caused more deaths than all of the other diseases together.

All of the physicians in the Siamese service were put to work, and in two years we had vaccinated 400,000 people, mostly children, without a single death from tetanus.

Smallpox broke out in the town of Tatchin, situated at the mouth of the Tatchin river. In thirty days 145 children died of the disease, before we were notified of the outbreak. This meant about 500 cases, and we dispatched a fast steam launch with a number of vaccinators, and in a few days had vaccinated 4,000 people, absolutely stopping the epidemic at once, as there were no more cases after the period of incubation of those already infected was over, and even in those it modified the disease. Tatchin has never known smallpox since.

The Presbyterian missionaries in the north, in the Laos country, sent for supplies. As one of them expressed it to me, "Doctor, I have gone through hell in years past seeing my people dying by the score of smallpox and being helpless to stop it, and now we can stop it."

The work is going on from the Federated Malay States to the Indo-Chinese frontier and from Burma to Indo-China, so that in a short time smallpox will be absolutely a thing of the past in Siam.

Dr. Peoples told me that in the epidemic of 1898 he traveled over a large stretch of country in the Laos province of Nan, and on investigation found that in that epidemic alone seventy-five per cent. of all the children under seven years of age had died over a great part of the province, and this in only one epidemic. This meant that of 500 children in a village, 375 died of the disease.

One of the most heartrending things was to go into a village and have the dozens of totally blind children brought to you to see what could be done for them, all made blind by smallpox. The poor people had an idea that the Moh Luang, the king's

doctor, would be able to give them back their sight.

To-day the great campaign is going on among millions of people, and over hundreds of thousands of miles of territory. Too much praise cannot be given to the work and selfdenying exertions of the missionaries, both medical and lay, who have gone out on tours and have vaccinated thousands and thousands of children in the past two years. The great extent of this work was shown by the official reports sent to me by Dr. Dunlap, Dr. McDaniel, and Dr. Walker, who vaccinated nearly 10,000 children in one season, and of Dr. McKean, of Chengmai, who vaccinated 17,500 in one season. They are all attached to the Presbyterian mission.

After coming back to America after years of sojourn in the Far East, I have been utterly astonished and surprised to read articles in papers denying the protection of vaccination against smallpox, and learning of so much opposition from parents to have their children vaccinated, also the activity of anti-vaccinationists. I wish I could show some of these people the results of vaccination in the Far East, in Siam and Malay Peninsula. It might shame some of the ultra-civilized to see the gratitude shown by a poor heathen mother when she knows her children will not lose their lives or be blinded by this disease."

#### Does Haskell Advise "No Quarantine For Smallpox?"

To cite some facts nearer home let me tell you what the Minnesota State Board of Health has done. It has withdrawn quarantine from smallpox cases throughout the state. It will not enforce quarantine because it has found it inefficient, unscientific and unreliable.

It has positively proven by the experience of a century that proper vaccination is an absolute preventive of smallpox.

It would seem, therefore, that the state has done its full duty when it had provided an opportunity for proper scientific vaccination for each individual, and that if anyone refuses to accept this protection, he cannot, in justice, expect the state, the county or the city to go to any further expense to protect him from the disease. The result of the abolition of quarantine will be that when smallpox appears in a community the vaccinated will be safer, while the unvaccinated will be liable to contract the disease. Such a demonstration of the efficacy of

vaccination may cost the community dear, but it will be convincing and salutary.

I might here relate a conversation which I had recently with Dr. Francis Bacon, of New Haven. He stated that a number of years ago he discovered two cases of smallpox in the New Haven Hospital. There were sixty patients in the Hospital at the time, none of which had been vaccinated. They were all exposed to the disease. Fifty-nine of the number were vaccinated, one individual refused the opportunity, saying he did not believe in it. The fifty-nine vaccinated did not contract the disease, nor were there any untoward results from the vaccination. The one man who refused contracted the disease, and, while he recovered, he was very ill and terribly disfigured.

#### **But the Recently Vaccinated Die of Smallpox.**

Again, of seventeen cases of smallpox taken to an isolation hospital in a neighboring state recently, fifteen had never been vaccinated, two were vaccinated thirty-five years ago. The disease ran a mild course in those vaccinated, but was very virulent in those not vaccinated. If the compulsory law of revaccination had been in vogue here as in Germany, these cases would not have occurred.

In Montreal and lower Canada anti-vaccinationists had created a great deal of feeling and several leaders aroused a popular and widespread prejudice, akin to the one in this vicinity against the practice. Between the years 1876-84 a considerable unprotected population grew up, as will grow up in Bridgeport if the compulsory rule is rescinded. The soil had been prepared for an epidemic and only needed the seed which came with a Pullman car conductor from Chicago on February 26th, 1885. Within the next ten months thousands were stricken and 3,164 died. The principal agitator in Montreal during an epidemic was forced to submit to vaccination, but it was found that he had been secretly vaccinated several days previously.

#### **A Plague Vaccine to Plague Us.**

Quite recently a vaccine has been discovered which protects from bubonic plague, a most fatal disease, with which, fortunately, we are not familiar, but from which we may receive a visit at any time. If this dread disease were to make its appearance in our midst, and it is only prevented from so doing by the vigil-

ance of our national health authorities, medical men, by the way, and not fanatic agitators, the possibility of protection by vaccination with anti-bubonic virus would be a Godsend and hailed with delight by one and all.

#### **Haskell as Prophet.**

As we have considered the past and present, I wish now to ask you to look into the future and mark well the predictions. Within a period of twenty-five years these various matters of public health will be in the hands of the Federal Government, and such grave responsibility as you have taken upon yourselves to decide this evening, you will be relieved of permanently.

#### **State Medicine For All.**

Moreover, all such matters will be in the hands of scientific medical men, without political preferment or favor. Compulsory vaccination and revaccination will be a national law and will not only apply to school children but to every human being born into the world. In this way, and in this way only, will smallpox be absolutely annihilated. Such rapid advances are being made in preventive medicine and so widespread is the dissemination of knowledge and enthusiasm that in another half century preventable diseases, such as smallpox, tuberculosis, typhoid fever, malaria, bubonic plague, etc., will not be known to exist in civilized communities. Within the period

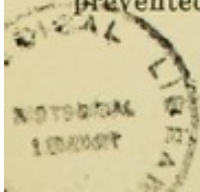
#### **But We'll Try Fresh Air First.**

of twenty-five years a vaccine will be discovered which when injected into the veins of human beings will insure immunity against tuberculosis; also every tubercular cow will be exterminated. Thus you will see the terrible death rate from tuberculosis, which is now more than ten per cent. of our total population, with a money loss to the United States of \$200,000,000 per year, drop to insignificant numbers in exactly the same manner as smallpox has done throughout the world where vaccination and revaccination is made compulsory.

It would be disgraceful for Bridgeport to take any part in a retrograde movement, such as is contemplated by your board, and which would belittle us in the eyes of thinking people throughout the country.

#### **Doctors Will Be Vituperated.**

But mind you this: there will still exist a handful of dissentors against this prospective advancement. Smallpox, tuberculosis, typhoid fever and various other preventable diseases can be eradicated from the face of the



earth, but the order of mind that protests against every advancement on general principles, will exist forever. And we shall be surfeited with untrustworthy statistics, with distorted and exaggerated statements purporting to be the truth, and the medical profession will enjoy no immunity from the vituperous and slanderous remarks, which the press shamelessly print, such as miserable scoundrels, murderers, robbers and thieves.

#### A Novel Statement.

It is in childhood that individuals are most susceptible to contagious diseases. It is during school life that children contract most of the contagious diseases, and it is in the schools that such diseases are disseminated. Therefore, I state, without fear of contradiction, that any child attending our public schools without being vaccinated is a menace to public health in a degree equal to that of a child attending school while suffering from a contagious disease.

I must propound to this Honorable Board of Education a half dozen questions.

1st. What manner of procedure is this which we have under consideration which is adopted by a majority of the governments of the world?

2nd. What sort of practice is this which is endorsed by ninety-nine per cent. of the medical profession throughout the world?

3rd. What faculty of the human mind can accredit selfish motives to those who favor a measure that unquestionably prevents the spread of a most loathsome disease?

4th. What disorder of the mental faculties allows the misdirection of energy which is manifested by those who oppose the prevention of such disease, when the same amount of energy expended in the right direction would save thousands of lives?

5th. Shall you always allow the lay mind to influence you on medical matters?

6th. Are you willing to abuse the moral obligation which will be imposed upon you and the financial obligation which will fall upon the city by the rescinding of this rule of your board, providing that, as a result of such action, an epidemic of smallpox gains headway in this community?

Before rescinding a rule wisely made by your predecessors, I beg you to fortify yourselves with more information than is possible to give you at this time. I beg you to picture the inevitable result of such action, viz: an insidious and perhaps unrecognized case of smallpox imported to our city; the disease carried to a school where dozens or hundreds of unvaccinated children are congregated; the dissemination of the disease throughout the school and families of these children; the loss of life and disfigurement following such epidemic; the financial loss to the city of Bridgeport. A graver mistake could not be made, and do not let it bear the popular label, "Made in Bridgeport."

Yours very truly,

CHAS. N. HASKELL, M. D.

Bridgeport, Conn.,

April 20, 1908.

## How Vaccinist Doctors Made Frantic Effort to Save Their Champion

**Publicity Committee Attempts To  
Keep Dr. Haskell's Arguments  
Out of Print.**

(From the Bridgeport (Conn.) Evening Farmer of Monday, June 8, 1908.)

The Farmer to-day received the subjoined communication from the Publicity Committee of the Bridgeport Medical Society:

To the Editor Bridgeport Evening Farmer.

Dear Sir:—Our attention is called to the announcement in your issue of Saturday, the 6th inst., that in the Farmer for Monday evening would appear the paper of Dr. C. N. Haskell, submitted through this committee to the board of education. We beg leave to say that if Dr. Haskell's paper is printed in your paper, in such relation as is outlined in your issue of Saturday, it is without consent of either the author or of the Bridgeport Medical Association, by whose authority the paper was submitted to the board of education. We are further informed that the board of education has not in any way authorized its publication. In consideration of these facts and in consideration of our repeated disclaimer of any controversy with any one or of any public discussion of this subject at this time, we protest against your proposed action in the matter and request your non-publication of the paper in the manner and way outlined in your issue. Moreover, we have no "champion of vaccination," as you suggest, but every member is a champion of the faith which is in him.

Very Respectfully,

THE BRIDGEPORT MEDICAL ASSOCIATION,

By its Publicity Committee.

**To Which the Bridgeport Farmer Replied "The Public Is Entitled to the Truth."**

It does not appear that any consent is required. The paper was read and presented at a public hearing given by the board of education upon the petition for the repeal of the compulsory vaccination rule. The newspapers were present by their representatives and took what they wanted. Dr. Haskell's paper and Major Boudren's reply thereto will be found elsewhere in this issue.

Major Boudren said this morning: "I do not quite know what the Publicity Committee is aiming at. If they are afraid that somebody will think they have invited me to reply to Dr. Haskell, I will frankly say they did not and will frankly add that I am certain they never will. Dr. Haskell presented a public argument, to a public board favoring the maintenance of a rule that seriously affects the public. I am making a public reply, quite unsolicited by my medical friends. I do not suppose that Dr. Haskell is the 'champion' of the Medical Association to any further extent than is indicated by his own statement, that he was asked by the Publicity Committee to prepare an argument, which argument the association endorsed and follows. He did certainly prepare the most elaborate defense of vaccination ever attempted by the association in this city. That is why I selected it for reply, rather than the papers submitted for the association by other members of the Publicity Committee."

How Vaccines Doctors Made Their Effort to Save Their Country

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THE BRIDGPORT MEDICAL ASSOCIATION,  
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