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ANTITOXIN
HOMOEOPATHY

I. M. BARUCH

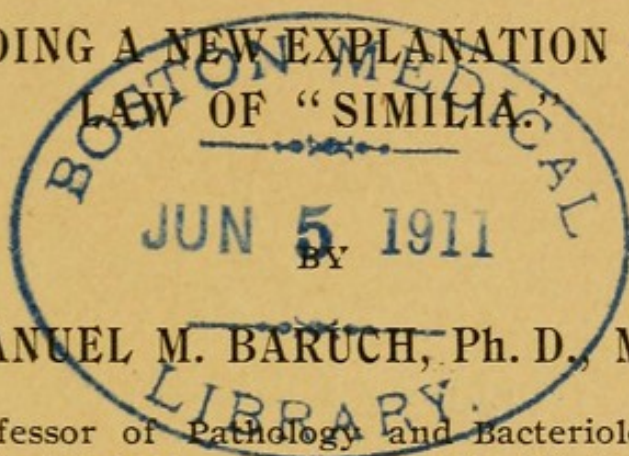




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ON THE
Relations of Antitoxin Treatment
To Homoeopathy.

INCLUDING A NEW EXPLANATION OF THE
LAW OF "SIMILIA."



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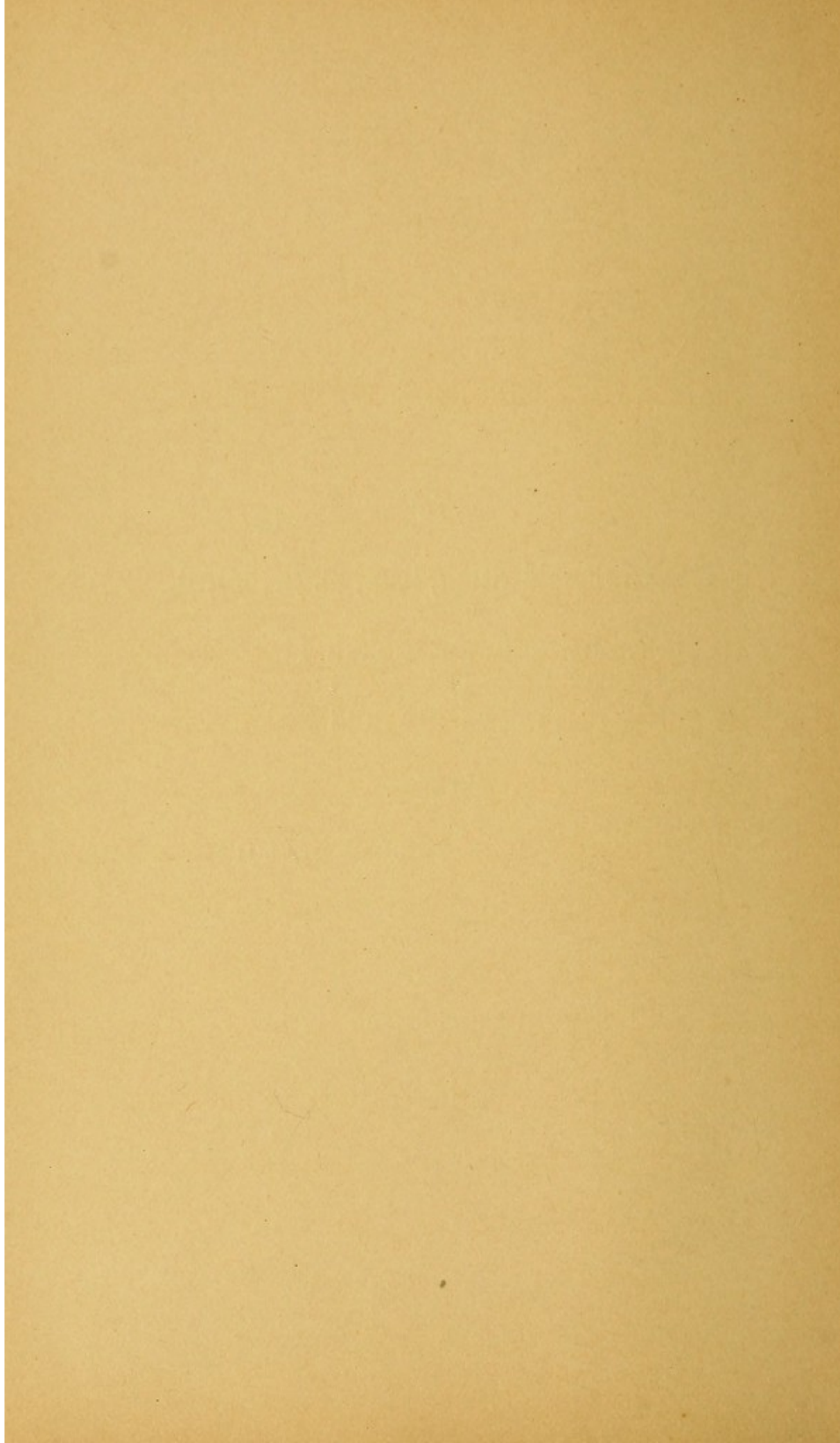
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Timothy Field Allen, Esq., M. D., LL. D.,
as a slight token of
friendship and
esteem.

THE AUTHOR.



RELATIONS OF
Antitoxin Treatment to Homœopathy.

In an essay published early in 1895, setting forth the relations of Serotherapy to Homœopathy, the author took occasion to state that "Homœopathy had found a wider and more general support than ever before in this modern form of bacteriological therapeutics." This statement was not met without antagonism from various quarters; and it was then promised that another article setting forth

the grounds for this contention and giving a new explanation of the law of "Similia" would soon follow. Although the article was written at the time, the author could not find the courage to come forward with it till now, when the claims of antitoxic treatment have been well substantiated, and it becomes a duty to help establish the claims of Homœopathy upon one of the most brilliant and most significant therapeutic successes of modern times.

Every progress in science must of necessity mean a progress in

Homœopathy, if Homœopathy be science. It need, therefore, not fear its powerful search-light; the strongest ally of Homœopathy is science, and it may be due partially to the circumstance that this fact has not always been duly appreciated, that the law of Similia has not won the unanimous recognition which in time it must achieve.

Thus, when that most modern and most important product of the medical investigation of this era first formed itself into a science, there were those who viewed this

new science with suspicion, unmindful of the fact that every truth newly discovered in the wide realm of nature enhances the value of every truth already found, and that every deeper understanding of the laws of nature in general renders deeper and better our understanding of the application of nature's laws to the human body.

Infectious diseases being caused by bacteria, it was argued that these diseases could only be removed by removing their cause, *i. e.*, by destroying the germs pro-

ducing them. As this could only be accomplished by strongly disinfectant measures, it was further argued that Homœopathy had lost its validity, at least in regard to this form of disease. Nothing could have proved more fallacious. The law of Similia is one of the great laws of nature. It is a law of the universe. We find its analogies in magnetism, in electricity, and frequently it would appear as though the tremendous import and wide application of this law, or these laws, had not always been sufficiently realized and ap-

preciated. A law of such universality could not fail in its application to a factor, so potent in the economy of nature and so important to the maintenance of life, as are micro-organisms.

Clinically, antiseptic therapeutics have proved a failure; and those who have worked most earnestly and most faithfully in this field of therapeutics, have most completely acknowledged this failure.

Lately it has been stated, upon eminent authority, that "disinfection of the living organism is for

all time impossible." Experience has proved that the cell of the living animal organism is more severely affected and more rapidly destroyed than the cell constituting the bacterium; and Prof. Behring, undoubtedly, is justified in stating that "the animal body suffering from an infectious disease will be killed by the antiseptic remedy long before this remedy is able to prevent the growth of the bacterium in the blood or in the organs of the body." Thus the much-vaunted subject of antiseptic therapeutics

has in every direction proved a source of disappointment.

A different aspect was lent to bacteriological therapeutics when Behring set forth his system of Serotherapy.

Efforts in this field had not been wanting. Pasteur and Koch had very decidedly approached Homœopathy, when inoculating with the modified products of the germs, producing the disease, patients suffering of the very disease which the germs had produced.

Bacteriological products, such as "tuberculin," have long been

used in Homœopathic practice under the name of "nosodes," and not without success.

Behring, however, has in his Serotherapy still further and more radically approached Homœopathy.

In demonstrating this we shall use as an example the Diphtheritic antitoxin as being the most widely tried and best understood of antitoxins.

It is fairly well established that the action of the various antitoxins is not identical, some merely fortifying the system invaded against the toxic action of

the germ-products, others also rendering innocuous or destroying the germs themselves.

Of the former Diphtheria-antitoxin, of the latter Cholera-antitoxin may be accepted as types.

But all antitoxins share in the one quality, that they represent the defensive efforts of the animal system against the invasion of infectious disease. It is, therefore, immaterial, which antitoxin is chosen as an example.

To produce Diphtheritic "Heilserum" Behring proceeds in the following manner :

A healthy animal—preferably a horse—is inoculated with Diphtheritic toxin, that is, with the poisonous substance produced by the Loeffler-bacillus in suitable media in the laboratory.

Being inoculated with steadily increasing quantities of Diphtheritic toxin, the animal gradually develops so strong a resistive power to this poison that it can comfortably tolerate 500 c.c.m. or 1,000 c.c.m. of the very toxin, to a few c.c.m. of which it would at the start have succumbed.

A sufficiently strong immunity

having been established, the animal is bled, usually by the jugular vein, and its blood received into sterilized vessels. The blood is then kept in a cool place, in order thoroughly to coagulate; and the serum is carefully pipetted off. For preservation Camphor (Roux), Carbolic acid (0.5 %, Behring), or Trikresol (0.4 %, Aronson) is added to the serum. Whether the addition of these chemicals, to which some physicians object, be really absolutely necessary for the preservation of the serum—at

least for a period of moderate extent—is an open question.

In reviewing this process attention must be called to the following facts :

1. Behring, at least in the beginning, modifies the laboratory toxin to be injected by the application of heat, or the addition of Trichloride of Iodine, although this practice is possibly not adhered to by all bacteriologists at present. At the same time the influence of Trichloride of Iodine upon the action of Diphtheritic

toxin is interesting and noteworthy.

2. Diphtheria is not a disease natural to animals; we find no true Diphtheria in the animal.

3. The disease is induced in the animal only with difficulty, and not in the same manner nor by the same channels as in nature.

4. The Diphtheria produced in the horse is not identical with the real, the human form of Diphtheria. It is only similar to it. It is equine Diphtheria, not human Diphtheria.

Thus it is evident that the

disease produced is not and, by the very nature of things, could not be identical with that found in the human subject; in short, that there has been produced not an "Idem" or an "Ison," but a "Simile." In other words, the substance producing the disease has been modified and planted upon a ground to which it is naturally foreign; it has been modified by modifying its medium. Furthermore, we must inquire as to the effect the toxin has exercised upon the animal inoculated. Its action has been twofold:

First, it has poisoned the animal; and, secondly, it has aroused its body to such action as will best defend the body against the effects of this poisoning, *i. e.*, as will best immunize it against the toxin itself.

In this instance we find that the defensive action of the system chiefly depends upon the presence in the blood of certain chemical substances, which, while not neutralizing the poisonous qualities of the toxin itself, render the body insusceptible, immune to their influence, the so-called "Anti-

toxins." These antitoxins are suspended in the blood serum. According to Dzerjgowsky and a not inconsiderable number of his followers these antitoxin bodies represent merely the original toxin in a modified form, while, in the opinion of a majority of scientists, they are entirely independent substances, newly formed in the system.

If the former explanation be accepted, the proof of the Homœopathicity of antitoxic treatment is not difficult.

Diphtheritic poison, that is, a

a poison producing the symptoms and conditions of Diphtheria, is modified in the manner described, and then inoculated, in order to cure a disease similar to that, which it produces. In order to cure disease, then, we inoculate the system with a poison similar to that, from which it is suffering. "Similia similibus curantur."

If, however, we accept the other view, which is not only the more widely accepted, but also the more thoroughly substantiated, viz., that the antitoxins are newly-formed bodies, produced by the presence

of the toxins, but entirely independent of them, then matters are more complicated.

These substances will cure a disease similar to the one which has produced them.

According to this view, then, a poison will cure in one individual a disease similar to the disease which it has produced in another, by the production of antitoxins.

We transplant the results of the antitoxic action of a poison in one individual into another individual suffering from the toxic effects of the same poison.

Upon previous occasions the author has taken opportunity to state that antitoxins were physiological products and acted simply physiologically. Certainly, every healthy body, that is, every body, whose cell-life is not yet paralyzed by the invading poison, produces antitoxin as a result of its natural self defence.

Antitoxins are healthy products of a system not yet subdued by the poison, are physiological to the peculiar condition in which the body is placed, similar to other peculiar physiological conditions of

the body under peculiar circumstances, such as temperature or climate.

While the antitoxines may be termed pathogenetic, inasmuch as they are the indirect result of toxic action, they are in themselves physiological.

The stronger and healthier the system, the stronger, the more enduring and resisting is its antitoxic action-in the widest sense of the word. This explains the peculiar fact that certain individuals are not at all, or but slightly, affected by bacteria, to which others

succumb completely. This may also explain the varying susceptibility to drugs. We find Diphtheria germs in a number of people who never develop Diphtheria. A number of subjects, chiefly physicians and nurses, show the presence of Tuberclebacilli, in spite of which they do not develop Tuberculosis.

In short, this explains the so-called "resistive power" which, in the absolutely healthy body, is almost absolute. Therefore, when a body is attacked by infectious disease, it is practically diseased

before the action of the infecting bacteria develops, except in those rarer cases, where the virulence and abundance of the bacteria is overwhelming.

The blood and the cells of every animal constantly produce antitoxins, for their bodies are constantly in combat with various bacteria. In fact, antitoxins have been demonstrated in absolutely healthy animals.* Therefore, they

* Fischl and v. Wunschheim, *Zeitschrift für Heilkunde*, 1895, XVI., 429.

Calmette, *Annales de l'institute Pasteur*, X.

Bolton and McFarland, *Journal of Experimental Medicine*, I., 3.

may be regarded as substances more or less frequently or abundantly present in healthy bodies. They are physiological products which the system, like some other physiological products, produces when it needs them.

But under such circumstances, how is it possible that the anti-toxin treatment is Homœopathic, *i. e.*, that it rests upon the principle of “*Similia similibus curantur?*”

What do these words signify; what is their meaning? In themselves they merely represent a

mechanical formula, like $2 \times 2 = 4$. This alone can hardly satisfy the scientific mind. As for himself, the author must confess that ever since hearing the formula pronounced, he has felt bothered as to its cause, its inner meaning, so to speak.

In observing the action of toxins upon the system we arrived at the conclusion that their action was two-fold, in that they, (1) poison the system, and, (2) arouse the system to antitoxic action in its widest sense.

And that is precisely, what Homœopathic remedies do.

All antitoxins act as Homœopathic remedies, all Homœopathic remedies act as antoxins. When we employ a remedy homœopathically, what is its action?

1. It poisons the system; it produces within it new symptoms, similar to those already existing.
2. It arouses the system to anti-toxic action.

It is furthermore a fact that every condition, every poison produces its own peculiar antitoxin, *i. e.*, an antitoxin complementary, so to speak, to itself.

You cannot cure Diphtheria

with Hydrophobia-antitoxin, nor Hydrophobia with Anthrax-antitoxin, nor Anthrax with Diphtheria-antitoxin. So that, while all poisons will produce antitoxins in the body, they will produce antitoxins peculiar only to themselves. Every poison, every force arouses in the system counter-forces peculiar to the original force; the counter-forces are in direct relation to the forces producing them. When in a given condition the toxic effects of a poison outweigh its antitoxic effect, then we must look for a

poison which will act upon the antitoxic forces of the system in a manner similar to that of the toxin, but without too severely aggravating the toxic condition under which the system is already laboring. The nearer the poison selected approaches in its effects, its toxic qualities, the toxic qualities of the disease-producing toxin, the nearer, the more similar will it be in its antitoxic effects to those of the disease-producing cause. The closer the poisons resemble each other in their toxic action, the closer will

they resemble each other in their antitoxic action.

Thus, if a poison be employed Homœopathically, it effects two things, as mentioned. It poisons the patient; it actually produces in him a new disease, it actually starts in him a new diseased condition similar to the one from which he is already suffering, or possibly only heightens the toxic effects under which the body is laboring.

If this poison were given in a quantity sufficiently large, it might aggravate the patient's condition

to such an extent as to endanger his life or kill him. When given in Homœopathic form, the drug still creates a new diseased condition in his body similar to the first, but only to a moderate degree. This constitutes the so-called Homœopathic aggravation, which latter is a matter of daily verification.

The nearer, then, to a "simile" the remedy selected is, the nearer the poison selected approaches in its toxic effects the condition from which the body is already suffering, the nearer will it approach in

its antitoxic effects the antitoxic effect of the disease proper. If the effects of the disease are equal to x and the effects of the poison are equal to x , then must the antitoxic effects of both be equal to each other.

Nor is the antitoxic action of drugs confined to bacteriological poisons. It is a well-established fact that, for instance, Ricin produces in the blood "Antiricin," or that Abrin produces "Antiabrin," which substances, as Ehrlich has demonstrated, protect the system against the effects of these poisons

when introduced. And who would assert that antitoxins are merely products of the blood? No doubt, any organ of the body, any nerve cell, any lymphatic cell can produce its own antitoxic effects, and the antitoxins themselves, though found in the blood, have for the most part merely collected in this convenient vehicle from various channels, from various parts of the body.

When the system can arouse sufficient antitoxic power, it will, and does, in a majority of cases, recover by its own efforts. If not,

we may incite by the homœopathic method antitoxic effects similar to those which the body itself produces. And herein consists the fundamental difference between homœopathic and allopathic treatment.

That the antitoxic effects aroused in the system need not be identical, but only similar to those produced by the disease proper, is proved by the efficient use of Diphtheria-antitoxin. The Diphtheria-antitoxin is not absolutely identical with that of a child, for

the very simple but drastic reason that a horse is not a child.

The disease assumes a different form in the horse, and the very cells and blood which manufacture the antitoxin in the horse are different from those of a human being. It is not absolutely identical with human serum; it is only extremely similar; still the human body responds to it.

But how does all this apply to the case in question? To what extent is this principle employed in the antitoxin treatment?

The process has simply been

divided; it has been carried on in two organisms, instead of one. But by dividing it, you have not deprived it of its Homœopathicity.

You have inoculated a healthy horse with artificial laboratory poison, have thereby artificially produced in the horse a disease similar to the one from which the patient is suffering, and have thereby produced antitoxin similar to that produced in your patient. You have produced the aggravation, the toxic effect, and thereby the antitoxic effect in the horse, and completed the treat-

ment by transferring the results of this homœopathic cure to your patient.

Were it possible so to modify the Diphtheritic poison, not only in virulence, but also in the mode of its action, that it, so to speak, would become a "simile" of itself, the process might be carried out in one subject entirely. Under given conditions we must modify the drug by modifying the medium, the subject, in order to convert the "Idem" into a "Simile." This, however, does

not alter the Homœopathicity of the case.

The question may be raised why this form of treatment is applicable to such a wide range of cases, as it has always been one of the first and most constant demands of Homœopathy not to treat a disease but a diseased man, and individualization has, from the very start, formed one of its fundamental principles.

But, in reply, we need only demand why, for instance, *Spongia* applies to such a large number of cases of *Laryngismus striculus*,

or why Camphor—first used by Homœopathic physicians for this condition—is applicable to so many cases of Cholera? Simply, because these drugs cover a great majority of the symptoms produced by these conditions. The same holds good for the case in question.

But, does Diphtheria-antitoxin cure all cases of Diphtheria? By no means. The author has taken opportunity at some previous time to detail the conditions under which antitoxin fails in its curative effect. The large quantity of antitoxin necessary to a cure,

needs no further explanation after the allusion to it as a physiological substance and remedy; it being not the cause, but the result of homœopathic action.

Much has been said regarding the evil effects produced by antitoxin. But it must be acknowledged from the start, that such effects have only been reported in an exceedingly small percentage of cases, and even then have not always been well substantiated. In demonstrating, however, that antitoxins are physiological products, we have also demonstrated

that such effects cannot be inherent in the antitoxines, but must be due to some external causes. For, as mentioned, antitoxins may be contained in the blood of any healthy animal, and are certainly present in animals recovered from disease. Still nobody would hesitate to partake of the meat or blood of such animals, or to recommend its use to others. We do so every day. And antitoxin represents nothing more; it is simply the blood of an animal which has recovered from disease. Such blood is in

constant use. Therefore, antitoxin, when properly prepared, must be absolutely harmless and cannot in itself produce symptoms.

The evil consequences which have occasionally been noticed, are due to one or more of the following causes, viz.:

1. The animal has not sufficiently recovered from the disease induced; *i. e.*, it has been bled too early.

2. The animal has been suffering from some other disease besides the one artificially induced.

3. The serum has been contaminated.

4. An undue amount of chemicals has been added. (It being an open question whether these chemicals, to which some physicians object, could not be dispensed with altogether).

If the above factors are eliminated, antitoxin is purely a physiological product.

Under normal conditions the system, when menaced by a Diphtheritic invasion, rapidly produces enough antitoxin to help itself, and will recover without our aid.

If, however, the body is not in a normal state, or if the Diphtheritic poison is so virulent and so rapidly distributed through the system that it cannot produce enough antitoxin to help itself, then we simply secure a similar antitoxin from another animal, and pour into the body mechanically, artificially, that which it is too weak to produce itself.

Upon the same principle do we feed a starving system, or inject blood or saline solution into a subject suffering from hæmorrhage, in which case also the body cannot

sufficiently produce that which is natural to it.

That is the manner in which the action of antitoxin is to be explained and by which may be proved its innocuity.

A considerable period after the writing of this essay there came to the author's notice an excellent lecture, delivered by Prof. Behring at the University of Marburg, in which he pronounces Serotherapy to represent Isopathy.*

* Deutsche medicinische Wochenschrift, XXIV, 5.

That, in itself, would be close enough to Homœopathy. The boundary line between the two is not infrequently indistinct. But Serotherapy is not Isopathy; we have proved that. If Behring practiced Isopathy, he would have to give his patients more of the same poison from which they are suffering; and that he manifestly does not do.

Behring partially bases his argument on the theory of Ehrlich, which he states in the following terms, taking Tuberculosis as an

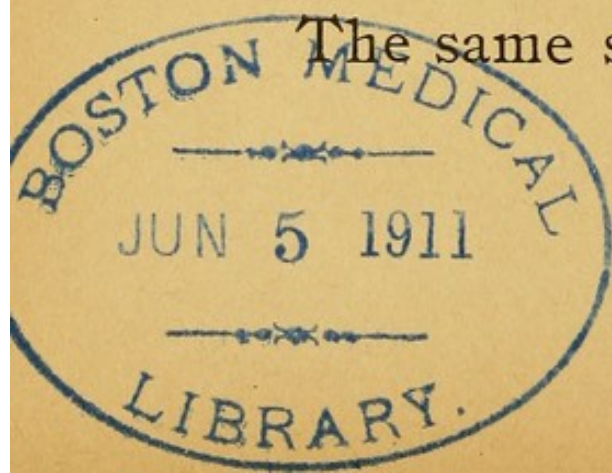
example for antitoxic action in general :

“ 1. The toxin of Tuberculosis is poisonous only for those persons whose bodies contain in their living cells or living tissues a substance, which chemically binds the Tubercular toxin.

“ 2. When this poison-binding substance passes from the living substance of the body into the blood-serum, then it proves an immunizing and healing antitoxin.

“The theory of Ehrlich may be expressed in fewer words, thus :

The same substance which, lying



in the cell of the living body, is the cause and condition of poisoning, becomes the cause of cure when in the serum of the blood. This sentence vividly reminds one of the dictum of Hippocrates: 'The same that causes a disease cures it.'

This hypothesis of Ehrlich is evidently open to serious objections, as chief among these may be mentioned that:

1. Tuberculosis can be induced in every individual without exception, as experiment shows. Therefore, either every system

contains this cell-binding substance or it is not material to the production of disease.

2. If the hypothesis of Ehrlich be correct then each system must keep in readiness an incalculable number of different poison-binding substances, for, as we have seen, each toxin meets in the system its own peculiar and characteristic antitoxin.

And that assumption would be manifestly impossible.

What is remarkable in the above explanation, is its approach to Homœopathic therapeutics, in that,

for the first time to the author's knowledge, the cell-action of drugs is practically taken into account.

Another important acceptance of Homœopathic teachings, which may be mentioned in this connection, is constituted by what has been termed "Organotherapy," a practice long acknowledged and advocated by Homœopathy. There can be no doubt that certain substances show a certain affinity for certain organs of the animal system, and bacteriological investigations have recently also demonstrated that certain toxins have a

special affinity for special organs of the body, as, for instance, Tetanus-toxin for the large nerve centers, or Cholera-toxin for the blood-producing organs.

Naturally these organs also prove the chief sources of anti-toxins in these cases, and an anti-toxic Organotherapy may, therefore, be declared to a certain extent to be imminent.

Behring, furthermore, adduces as examples and proofs of Isopathy Pasteur's Hydrophobia cure, and Jenner's smallpox vaccination.

Of the former it is not easy to

speak with any degree of precision, as the germ of Hydrophobia has never been discovered, and Pasteur inoculated a modified disease product or possibly a modified toxin.

Jenner's vaccination is certainly not Isopathy, for the substance inoculated is not identical with the smallpox poison. There is no such thing as true Variola in a cow; just as little as true Diphtheria in a horse. It is only a "simile," not an "Ison."

But all these methods coincide with Homœopathy, in that they

merely try to arouse and increase the self-aiding, the antitoxic qualities of the system in the widest sense of the word, while adding as little aggravation as possible to the diseased condition of the case.

And this constitutes the principal and fundamental difference between Homœopathy and other forms of therapeutics. Of these, particularly, two have endured: Allœopathy, which is originally based upon the idea that the diseased body contains morbid, disease breeding substances, which

must be dislocated from more vital organs of the system to those less easily or less severely affected.

It is not necessary to waste words on this subject, it may be judged by itself.

The other form of therapeutics, is Allopathy, as a system based upon the principle of “*contraria contrariis curantur*,” that is—in the words of Behring—“a system employing for the cure of disease such drugs as will produce symptoms contrary to those to be treated.”*

**Berliner Klinische Wochenschrift*, XXIV, 5.

The dangers and limitations of such a principle are too evident not to have led to a practical discarding of it. And it must be stated that a large number of physicians admit this, and claim that, instead of following such a principle, they simply base their treatment upon their knowledge of nature.

But it is sad to confess that this knowledge is extremely limited.

Of the very fundamental principles of life we are ignorant.

Thus, the good old term of "Lebenskraft," "vital power," used

by Hahnemann has fallen into profound contempt. It has been laid aside as unscientific.

And what has taken the place of this term? Another term: "Protoplasm." What does this word mean? "The first formed;" the "Urstoff." It does not, however, signify a given quantity of "first formed" substance of unknown origin, but a substance which grows anew daily, and is in constant process of formation and destruction. What it is, we know not. We have simply covered our ignorance with a Greek word. For

a "force" we have simply substituted a matter; for a name, a name.

For if we reflect but for a moment upon all the wonderful powers and forces attributed to this miraculous substance, we merely find again the dear old term of "Lebenskraft" in disguise, attached to a tangible substance, but the same thing, only in different form.

Instead of candidly acknowledging our ignorance it seems preferable to most scientists to verify

that biting bit of sarcasm of the great Olympian :

“ Schon gut. Nur muss man sich
Nicht allzuaengstlich quaelen;
Denn eben, wo Begriffe fehlen,
Da stellt ein Wort
Für rechten Zeit sich ein.”

As long as we have not even approached the solution of the fundamental principles of life, our efforts, to treat the human body in accordance with the principles of life will not prove a success. Indeed, the result of treating the animal body in accordance with our “shreds and patches” of knowledge—except in the field of me-

chanical treatment—has proved a dismal failure.

Each period in these centuries seemed to itself eminently efficient, learned and wise, and each period seemed as ludicrous to its successors, as its successors seemed ludicrous to those following them.

If we sum up the positive results of all the centuries of application of scientific knowledge to therapeutic effects, our results in the field of internal medicine are depressingly small.

At the present time they have actually resulted in a medical

nihilism—"dass wir nichts wissen koennen"—to which those have most strongly been impelled, who by experience and equipment were most thoroughly fitted for a due appreciation of the subject.

If therapeutics, applied in accordance with our knowledge of nature in general and the animal system in particular, are to be judged by their success in the past, then they forbode a most deplorable failure in the future.

They have resulted simply in the ever varying results of empiricism, discarding to-morrow,

what has been most highly praised to-day. What is wrong to-day cannot have been right yesterday, except when there has taken place a fundamental change of conditions.

At the present time not the physician, but the manufacturer has become the leader in therapeutics; and he "supplies physicians not only with the wares, but with the formulæ of their prescriptions," as an eminent authority recently stated in an address before the College of Physicians of Philadelphia, adding

that “more than \$200,000,000 annually are spent on proprietary medicines in this country.”*

But even in cases, the cause of which is, partially at least, known, as, for instance, in Typhoid fever, these methods of treatment have simply led to a purely symptomatic treatment — of which, indeed, Homœopathy had been scornfully, but wrongfully, accused.

Now, if these methods of correcting nature are better or more useful, or more successful or more scientific than the application of

* Philadelphia Medical Journal, II., 24.

medicine, in accordance with a fundamental system, the truth or untruth of which is a matter of daily, practical experiment, then it would be interesting to hear the grounds adduced for such a contention. Instead of trying to deal with forces we know not, we must simply try to observe the self-help of nature, and, by closely observing her efforts, not brutally put our hands into the wheels of this wonderfully intricate and delicate mechanism, but merely try to aid her in her efforts at aiding herself; for, except in mechanical

cases, we cannot help by ourselves.

Nature alone can help herself by spontaneous efforts; all we can do, is to awaken them. And that is what Homœopathy does, and that is all it does.

Inasmuch as all modern bacteriological therapeutics aim at this principle, they are Homœopathic. Antitoxin is not a medicine, in that it is a corrigant, in that it aims or tries to direct the "vital powers" into any one direction. It only supplies the body with the body's own re-

action upon the diseased condition from which it is suffering, just as a Homœopathic remedy awakens or heightens in the body its own reaction upon the diseased condition from which it is suffering. By what means the diseased condition is induced, is immaterial.

It is true that antitoxin has not been discovered by the methods generally approved by Homœopathy. But it must be a source of great satisfaction that the very acme of scientific research has resulted in a verification of its principle.

“There are many roads to Rome;” it matters less, how we arrived there, than that we can prove that we are in Rome. Nor need Homœopathy hesitate to accept this fine enrichment of modern therapeutic resources, for it merely forms another justification of the significant words of Sir John Forbes, the eminent English authority, who, in characterizing Hahnemann and his position in modern therapeutics, states that: “No careful observer of his actions or candid reader of his writings can hesitate for a moment to ad-

mit that he was a very extraordinary man, a man of genius and a scholar, whose name will descend to posterity as the exclusive founder of an original system of medicine, the remote, if not the immediate cause of more important fundamental changes in the practice of the healing art than have resulted from any promulgated since the days of Galen himself."

The medical profession has long instinctively felt Serotherapy and its allied forms of treatment to be Homœopathic in principle.

It has remained for one of the greatest men whom medical science has produced, for Rudolph Virchow, recently to step forward and state that modern bacteriological therapeutics rest upon Homœopathy as a basis*

If the modern scientific world is forced to acknowledge the truth of this law in the action of bacteriological toxins, it cannot logically deny it in the action of other toxins upon the animal organism.

* Berliner Klinische Wochenschrift, XXXI.

