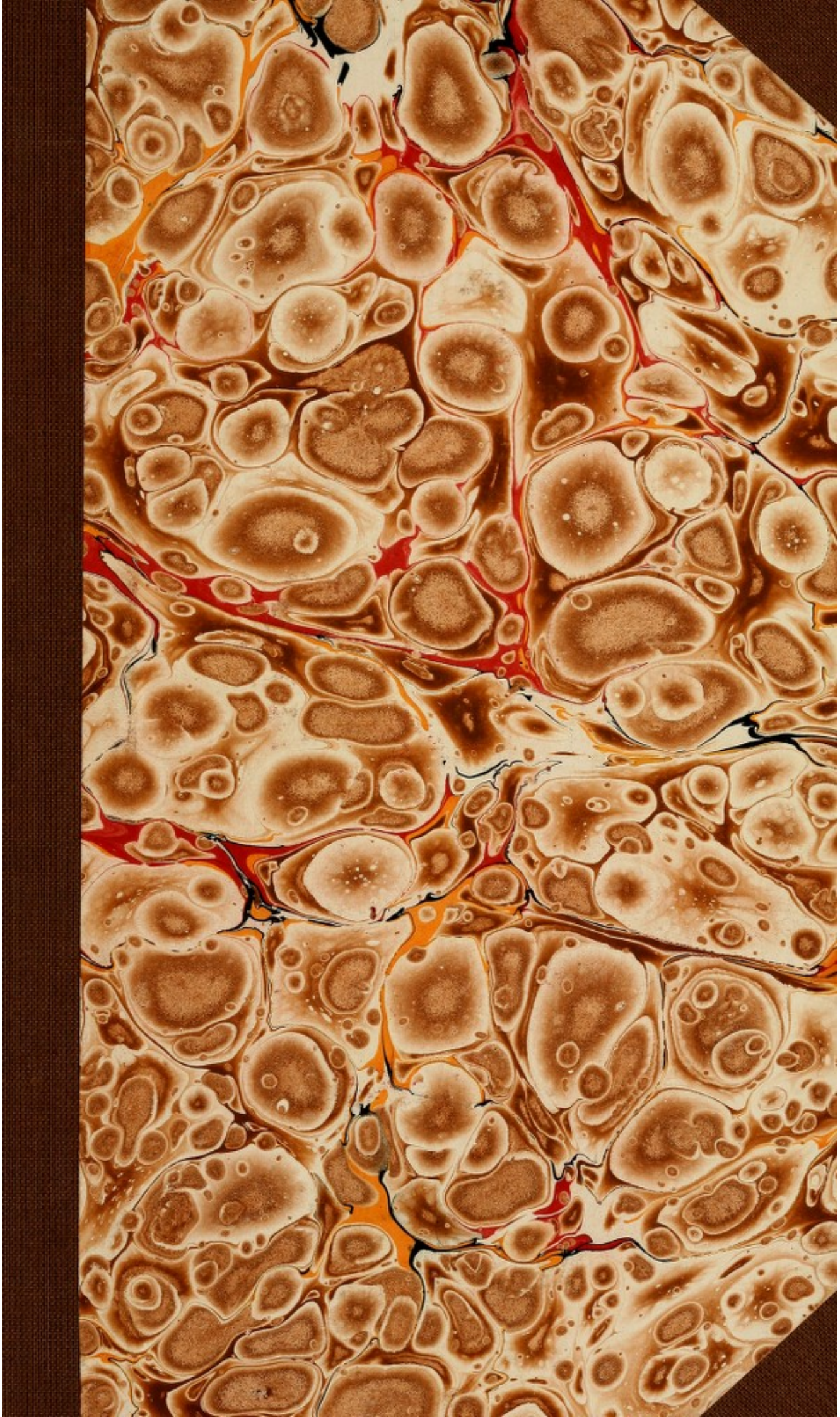
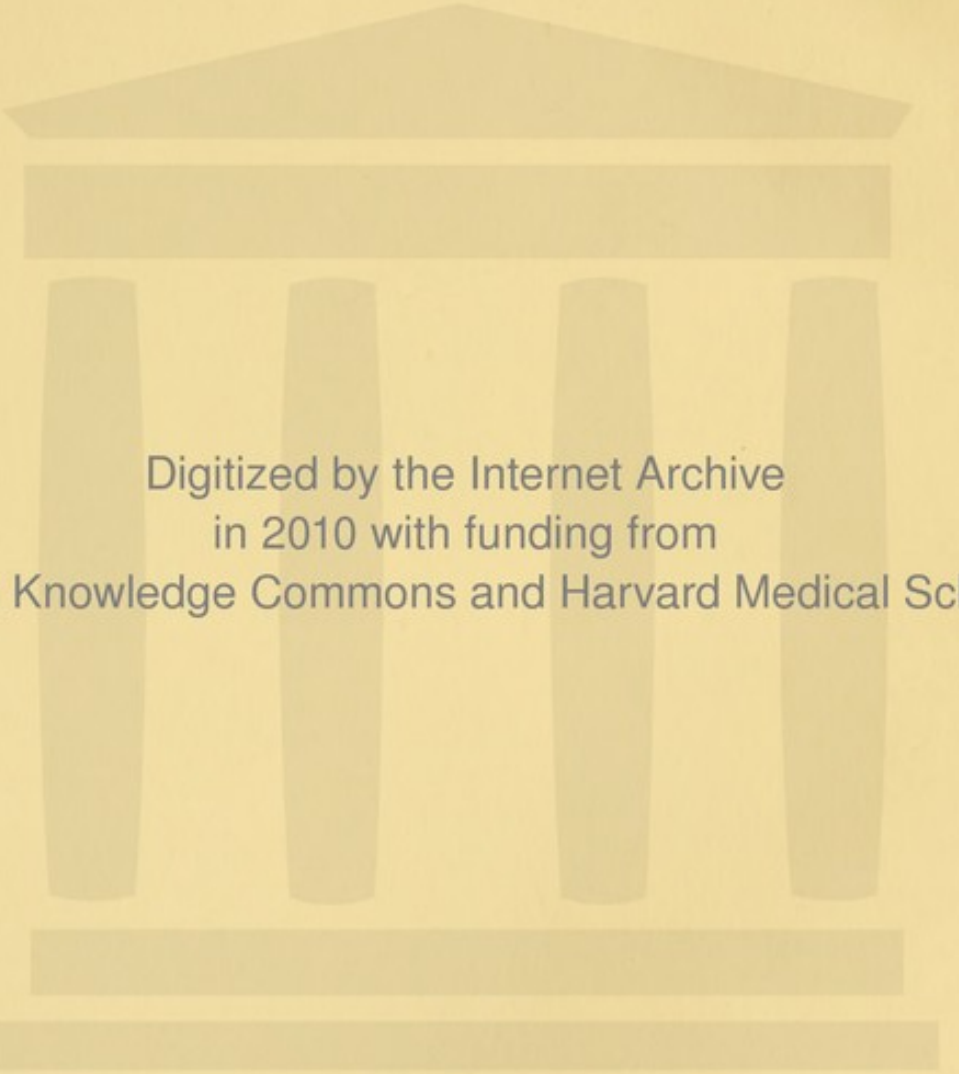
An appeal for homoeopathy; or remarks on the decision of the late Judge Cowen, relative to the legal rights of homoeopathic physicians / By F. Vanderburgh, M.D.





AN APPEAL

FOR

HOMŒOPATHY;

OR,

REMARKS ON THE DECISION OF THE LATE JUDGE COWEN,

RELATIVE TO THE LEGAL RIGHTS

OF

HOMŒOPATHIC PHYSICIANS.

BY

F. VANDERBURGH, M. D.

NEW-YORK:
WM. RADDE, 322 BROADWAY.
1844.

TO THE READER.

The following letter was written and addressed to Judge Cowen before his death. The news of his illness detained it, and his death has delayed its publication until now. As the object of the vindication, however, will be equally attained by giving it publicity at this time, it is thought best not to alter the address.

The following circumstances called for this letter. Dr. Paine of Newburgh presented his diploma to the Medical Society of Orange County, for admission to the privileges of membership. He was refused on the ground of his being a Homœopathist. On applying to the Supreme Court for a mandamus to compel the Society to receive him, Judge Cowen, who presided, decided against his application.

F. V.

Hon. E. Cowen—

Sir,

The judgment of quackery rendered by your Honor against Dr. Paine of Newburgh, has long since demanded some notice from homœopathic physicians. In vindicating their cause, I am not actuated by friendship for Dr. Paine as an individual, for I have not the honor of his personal acquaintance, although I am familiar with his character and his medical essays, and with the high standing of his friends, his patrons, and his preceptor; nor am I moved by the fact that I have been associated with him in the same system of practice, nor by any personal or private interest, for all these motives have passed away in my retirement from business; but I feel bound, by the respect I entertain for the memory of Samuel Hahnemann, by the obligation of gratitude, and the duty I owe to society, to vindicate against your Honor's charge, a science which survives its author to bless the present and all future generations. And although my connexions are now severed from my patrons and the patrons of this science, yet I cannot be unmindful of the deep and solemn obligations I owe to them, for their generous confidence and noble magnanimity in sustaining me amidst the cares and anxieties of establishing a new system of medical practice, and in submitting their lives

and the lives of their families to the trial, looking on with alternate hope and anxiety, fearing yet trusting, believing but not convinced, until repeated trials triumphed over every doubt and fixed them in the conviction of the blessings of the improvement. I could name many of these patrons who will now stake their lives on this science and practice, who are distinguished friends of your Honor—some of whom add dignity to the bench, and others are ornaments to the bar—men whom your Honor would be the last to charge with yielding to a blind and enthusiastic sentiment. With such friends to cheer me, the shafts of ridicule fell harmlessly at my feet, and with such support no obstacles could embarrass, no enterprise could fail.

I beg your Honor's indulgence while I question your decision and state my opinions of this science, which, whatever may be their value, have not been hastily formed, and, as a requital for your kindness, I will be as concise as possible in what I have to offer to your consideration.

The first point which I wish to present relates to the jurisdiction of courts of law, of which I confess myself technically ignorant and therefore I will not deny their competency to decide on the merits of medical science and medical practice; but it appears to me that, if courts of law have jurisdiction on the vested rights of a subject, and exercise the power to deprive him of his rights, they ought also to possess the power of granting them.

Now the exercise of either of these powers implies a knowledge of the merits of the question submitted, and if this be conceded, then courts of law, and not medical professors, should be the only competent authorities to confer our degrees upon us.

The jurisdiction which grants the power should be held responsible for the qualifications on which the power is granted,

and, if the power be not abused, the subject should not be held responsible to any other jurisdiction than that which granted it. I respectfully submit to your Honor whether the constitution and laws of the state have not granted the power to the professors of its medical colleges to confer degrees and licenses to practice, on all those medical students who have graduated with honor to themselves and with the approbation of their professors; and whether the power so granted does not establish in the physician the right to exercise his skill *to the best of his knowledge and judgment.*

I beg your Honor's attention to the closing sentence, *to the best of his knowledge and judgment*—for, if this be regarded, Dr. Paine has not abused the power conferred upon him, unless it be by having learned more than was demanded of him; and, if this be a legal offence, then let the legislature pass a law that no improvements shall be made in medical science, and we shall know where we stand.

Now, you and I, and every other member of the community, have contributed to this granted power, and what is granted by *all*, your Honor will concede, it cannot be necessary to obtain the consent of *some* to practise.

If the professors of our medical colleges be the only competent authorities to confer these degrees, and if they recognize us as members of the medical profession, in full and equal standing with themselves, where do courts of law subsequently acquire jurisdiction over our privileges thus granted, unless we have abused them?

If a student has been examined with approbation by the legal authorities, on his qualifications for practice; if he receive their license, and practise according to the best of his knowledge and judgment, he complies with all the requirements of the law, and cannot be held amenable to any other authority than that of *public opinion;* if it uphold him, he has a right

to practise: if it reject him, he will do no harm. Must he conform to received medical opinions, right or wrong, at the peril of losing his professional rights? If so, the law is arbitrary, it violates the rights of conscience, and endangers the lives of the community.

All that God, in his merciful providence, requires of us, *his subjects*, is the exercise of the highest intelligence He has given us, in obedience to the laws He has laid down for our government, and on this he has promised us acceptance and forgiveness. Can human laws require more of us?

But it may be suggested by some that the ordinary doctrines of medical science have been abandoned for popular effect. In answer to this I would state that those men usually denominated quacks are generally sagacious enough to consult the tide of popular opinion; they never embrace an unpopular doctrine in opposition to the popular will, and especially a doctrine like homœopathy, which has been exposed from its infancy to every species of ridicule, insult, and injury.

Secondly—the office of a physician should be too solemn and responsible to admit of the intervention of any sinister motives betwixt him and his patient. But if these should gain the ascendency, and a physician be so fallen as to be allured by the profits of practice, then surely he would have double reason to adhere to well known and established theories, supported by long experience and the public favor, rather than to commit his success to a practice considered uncertain, imbecile, and ludicrous, and that had met with nothing but public reproach.

Thirdly—the public has the surest guaranty that medical opinions are not adopted for popular effect, in the fact that it is impossible for any man to hope for or expect success, who goes to the bedside of his patient with a want of

confidence in his own remedies. A belief, an honest persuasion that his practice is the only right one, is absolutely necessary. Doubt paralyzes his efforts, but belief begets energy and action and is the element of success, when associated with a conviction of the right understanding of the best system of practice.

Fourthly—having shown, and as I trust satisfactorily, that unpopular opinions on medical subjects cannot be successfully adopted for popular effect, I proceed to show that a difference of opinion on the principles of medical practice ought not to subject any system, at the present day, to the charge of quackery.

Of the higher laws of life we are yet mostly ignorant, and we must wait for the completion of experiments so happily begun, to furnish us with this most desirable information. Legallois, Sir Wilson Philip, and Magendie have done much to enlighten us; but that light only serves as yet to exhibit the darkness that is before us.

The depth of the ocean that has not been sounded must be guessed at; the map of a country that has not been surveyed can lay no claim to public confidence. The pathology of disease that is based on *supposed laws of life*, is liable to the same objections; and hence we see systems of practice, diametrically opposed to each other, adopted by men equally distinguished for talent, integrity, science, and learning.

Were medicine an *exact* science, were its principles and their application already perfected to such an extent that diagnosis and prognosis were certain and therapeutics unerring, then, indeed, might the magnates of our medical colleges rise up at the approach of Hahnemann, and say, "What need have we of you and your teachings? Away with this new thing." But this is not so. Men are sick even in this nineteenth century, and die too; and that, after having suf-

fered, like the woman in Scripture, "many things of many physicians."

At the early age of twenty-three, Hahnemann's mind embraced a full view of the embarrassed condition of medical science, and perceiving the impossibility of deducing principles of therapeutics solely from an investigation of morbid action, (disease,) or of curing the sick by blind experiment, he began a new career in testing the specific virtues and action of medicines, a step that has given birth to a science whose sun will never set; and it is by the guidance this light affords me, that I now propose to furnish you with a statement of the studies pursued in common in both schools of medicine, and then the additional studies imposed on the student by Hahnemann's experiments and discoveries. If no law be passed by the Legislature, now in session, that no improvement shall be made in medical science, I hope to satisfy you that Homœopathy is a most important improvement; and this is all that is claimed for it. If it dispensed with any of the studies claimed to be essential to old school science, we should not be so much astonished at its rejection; but, when we consider the determined opposition, maintained with virulence for fifty years, against Harvey's discovery of the circulation of the blood, I do not know that we should be so much surprised at that we meet with; for, if my memory serve me, medical students, in order to obtain their diplomas, were compelled, forty years after his great discovery, to swear they would not believe the heresy.

Every one is aware of the prejudicial influence which a strong dislike to this practice engenders, and the difficulties under which a biassed mind labors in the examination of testimony adverse to a pre-existing judgment; and if your Honor had not already acquired fame by the impartiality of your decisions, and eminent distinction for your rigid observance

of law and evidence, I should despair of the patient re-hearing which I hope to have at your hands.

First then,—What is Homœopathy ?

It is supposed by many distinguished individuals, both in and out of the profession, that Homœopathy consists in giving small doses of medicine. I have been asked by those in the profession, if it made any difference what kind of medicine were administered, provided the dose were infinitesimal; thus confounding a great principle in science, with one of its inconstant and subordinate details.

This great principle furnishes a law or rule of action, which, if duly observed and understood, enables the physician to select the appropriate remedy for the disease before him: this is Homœopathy—the *laws* by which we are enlightened and guided in the selection of the right remedy for disease. Those who speak of a homœopathic dose of medicine, therefore, use a language not known or understood by any human being, since the term *homœopathic* merely expresses the (specific) *relation* of the drug to the disease, and has no reference to the *quantity* administered.

All bold innovation and improvement in medical practice have met, and probably always will meet, with a determined opposition from medical men. It is not so much their fault as their misfortune; they are always in the performance of delicate and responsible duties, and they feel that any experiment might hazard the lives committed to their charge. This has produced and sustained an excessive caution, and determined them not to quit their position until they are sure of a better. There is no set of men who have a deeper interest in the discovery of truth, none who desire and love it more, none who would give it a more hearty concurrence of opinion and support. Homœopathy they will not examine, because

it was born in contempt, and has grown up in prejudice; but I beseech them to examine it, it is too far in advance of Allopathy to be overlooked. It must be embraced, and yet, when it shall be tried by all the keen encounters it must meet with, I am aware it will be found far from perfect. Its principles cannot be subverted, but its practice is susceptible of great improvement.

The chain that binds Allopathy to its fixed position must be broken; it is a humiliating picture of medical science. The people see it to be a mere race between the physician and disease, as to which can reduce the patient first; while the medical standards show, as an established principle, that both disease and medicine act with a power proportionate to the debility of the patient.—(Magendie's Exp.)

Homœopathists are not compelled to differ from the old school system, at the very threshold;—in every department of medical studies claimed to be essential to medical science in the old school system, there will be found to be an entire concurrence of opinion, however widely we may differ in our ultimate conclusions. The course of studies therefore demanded by the Homœopathist, is the same as that pursued by the old school student to its consummation.

I am not then compelled to prove that Anatomy, Physiology, Pathology, Therapeutics, Surgery, Chemistry, Materia-Medica and Botany, are the basis of our studies, and the elements of knowledge on which we rely, in common with others, for future distinction and success. If proof were necessary, I would respectfully ask by what magic power do we get possession of our degrees of doctor of medicine from the medical colleges? Can it be supposed that we obtain them without that thorough examination which others undergo?—Far from it; a more searching eye rests upon us

than upon others. Have the colleges a private entrance for us, that is denied to others ?—Certainly not. Can we purchase them by bribery ? No one will entertain such a suspicion.

It must be conceded, then, that we have the highest honors conferred upon us that medical colleges can bestow, with the authority of all the professors' names appended ; and when we offer their diplomas, as we are bound to do by law, to the officers of the medical societies, they accept them, (with the exception of Orange county,) and we are admitted members in good standing. What foundation then, I ask, is there for this clamor of ignorance and quackery against us ?

Having gone on thus far in harmony, to the exhaustion of the acknowledged limits of old school medical science, here we separate, and in taking leave of our medical brethren, whom we leave behind us, they, on entering upon the untried, difficult and responsible duties of saving and preserving life, have our best wishes for their success and happiness; whilst we, with our degrees in our possession, feel that the dignity conferred will not guarantee the safety of lives committed to our charge ;—for we know that of all the trusts created by human agency, *that* is the highest, most solemn, and most responsible, which involves the exercise of medical skill ; and it becomes every man to pause and consider his position, before he enters upon the exercise of so high a function.

Having stated, as I hope clearly, the studies and qualifications that are held in common to be essential to both systems of medical science, and having shown an entire concurrence of opinion and agreement as far as relates to the old school studies, I proceed now to show the improvement to medical science and practice effected by the labors of Samuel Hahnemann.

I cannot enter into an examination of all the discoveries of Hahnemann, for they and their elucidation are spread over

several hundred volumes—but it is worth our while to examine the difference of the two schools, particularly as it regards their respective knowledge in that most intricate branch of the healing art, viz., Materia-Medica ; inasmuch as it must be self-evident, even to the careless thinker, that no one is competent to cure disease, who is not thoroughly acquainted with the effects on the human body of the agents he employs. Whatever may be his knowledge of disease, he cannot intelligently prescribe for it, unless he knows also the action of the appropriate drug. To understand, then, the operation of drugs upon the human body, is a grand desideratum ; a *sine qua non*, indeed, to the cure of disease.

The old school Materia-Medica is a single volume of about five hundred pages, which the student may learn in sixty days, and pass an examination on it, and be ready for practice.

The new or Homœopathic Materia-Medica numbers about six thousand pages and forms the bulk of the studies peculiar to the Homœopathist, and it is to the acquisition of this knowledge, after having given the requisite time to medicine as taught by Allopathic standards, that he must devote another equal period of diligent application, which will extend his studies from three or four to six years.

In the Allopathic works, we find the remedial agents marshalled under a few grand heads, to one or the other of which every remedy must belong, and its place in this wholesale generalization is determined by its leading or violent effects, when administered to the sound or sick in large doses.

Emetics, cathartics, diaphoretics, and narcotics, are some of the leading classes of medicinal agents ; other medicines, not rejected by the emunctories, but whose action is followed by some gradual modification of the vital powers, are turned

over to the alterants, the omnium gatherum class appointed to receive the perverse recruits, which refuse to conform to the artificial arrangement.

Such a mode is, indeed, well enough, as far as it goes; the fault lies in the fact that here it stops, and the investigation of the peculiar properties of the drug virtually ceases. Here Hahnemann's inquiry begins, and instead of classifying his remedies under heads, which necessarily overlook all nicer discrimination in drug action, he examines their peculiar differences, and shows that some fixed laws exist between drug and natural disease.

Your Honor will, no doubt, be surprised to learn that Hahnemann was the first discoverer of the specific virtues of medicine, and that his disciples are the only physicians who are acquainted with the specific properties of the medicines they prescribe. The declaration will seem almost incredible, that a work, which treats of the specific properties of medicine, should have been delayed until the eighteenth century. Yet such is the melancholy history of medical science.

Hahnemann's Materia-Medica consists of a series of volumes, comprising over 3000 pages, and nearly an equal amount has been added by the untiring adherents of the new practice, making in all about 6000 octavo pages.

These pages are records of the action of medicines, and they acquire their value and importance from the fact that they consist, not of doubtful reports of empirical cures, nor of loose speculations upon the properties of medicinal agents; nor again of their action on dogs, cats, rabbits, and vermin, as affected by French savans, but embody their results upon ardent, pains-taking men, seekers of truth, who submitted themselves to the experiments.

A single example will furnish an illustration of the comparative merits of the two plans; and I will select mercury

because it is the medicine most employed by Allopathists, and one which, it is to be presumed, they know most about. Hahnemann's treatise on mercury occupies eighty-six octavo pages and furnishes the student with a thorough knowledge of its specific virtues; detailing with great precision and accuracy nearly fifteen hundred symptoms of its action on the different organs of the body, and exhibiting the morbid changes developed by its use; and, if the student study it patiently, he will become familiar with all the phases of its action and power.

Pereira has given a fuller account of the curative powers of mercury than any other Allopathic author; as well as of the painful experience of medical men in the administration of this drug. But the misfortune of this painful experience is, that it cannot be imparted. It is like all other wisdom only gained to the individual by the repetition of the experiment on some other patient.

I would ask, if it be not the business of medical science to discover laws by which this wisdom can be gained without the sacrifice of life? and for this discovery, I refer all to Hahnemann's experiments.

In Pereira's introduction, we find the following remarkable statements:—"Scarcely two medicines give rise to precisely the same effects, and as we are unable to determine the nature of the modification produced by each, it is impossible to bring the substances used in medicine under a general good arrangement."

"Every writer who has attempted it, has found the facts hitherto ascertained insufficient for his purpose, and has, therefore, been necessarily obliged to call in the aid of *theory;* hence the so-called physiological classification of medicines is, in *reality,* founded *on the prevailing medicinal doctrines of the day, or on the peculiar notions of the writer!*"

Would it do to tell our patients this? He says:—

"Opium and mercury may be referred to in illustration of the author's meaning;—they are substances in ordinary use, and their effects are well known, yet writers are neither agreed as to the nature of the primary influence which these agents exercise over the animal economy, nor as to their proper position in a physiological classification."

This is truly a fearful acknowledgment in the preface to a work, whose agents deal in life—"that mercury and opium are medicines in ordinary use, and writers are not agreed about their primary influence."

Pereira proceeds to illustrate his meaning by stating that "mercury is, by several writers, (as Drs. Cullen, Chapman, Young, and Eberle,) placed in the class of sialagogues; by many, (as Drs. A. T. Thomson, M. M. Edwards and Vavasseur, and M. M. Trousseau and Pidoux,) among excitants; by some, (as Conradi, Bertele, and Horn,) it is considered to be sedative; by one, (Sir W. Philip,) to be stimulant in small doses, and sedative in large ones; by some, (as Dr. Jno. Murray,) it is placed among tonics; by another, (Vogt,) among the resolventia, alterantia; by one, (Sunderlin.) among the liquefacients; by the followers of Broussais, (as Begin,) among revulsives; by the Italians, (as Giacomini,) among contra stimulants, or hyposthenics; by others, (as Barbier,) among the *incertæ sedis!*

It would be painfully interesting to witness the examination of a student by a board of censors, and hear him detail the rules to be observed in the administration of this drug.

If mercury have this instability of character, I would suggest that it be expunged from the list of medicines, for its want of principle; unless it be embraced as a nostrum for its universal adaptation to the ever-changing conditions of dis-

ease, and its sycophantic obedience to the wishes of every man that prescribes it.

But, unfortunately for mercury, it has already committed some acts that have exposed it to suspicion in some minds, and to condemnation in others. Its friends admit its errors, but accompanied with appropriate apologies for its aberrations; such as, "it was unacquainted with the peculiarity of constitution on which it acted." So benevolence sometimes injures by its kindness, and why may not mercury in its innocence do the same thing?

In the treatment of mercurial poisons by Pereira, I see no antidote to its overaction precisely stated; each physician (as is usual in Allopathic practice) bringing to bear his own individual experience.

He says, "Mr. Hunter thinks that the patient need not change his diet, while Mr. Collis objects to this." They all speak of means to moderate its effects, such as exposing the patient freely to cold dry air, purgatives, (without designating kind or quality,) opium, astringent mouth-washes, stimulating liquids." Another recommends the solution of the chloride of soda, or of lime; another, of alum or sulphate of copper. Dr. Watson recommends brandy and water for a gargle, and the sentence closes with this fearful and emphatic declaration: "With regard to internal remedies, I have no confidence in any, as having a specific power of stopping salivation."

This painful experience, brought to light by Pereira, is in many respects appalling to patients; for he says, "excessive salivation produces sometimes ulceration of the gums, inflammation of the bowels, fever, eczema mercuriale, and, in feeble and irritable habits, mercury sometimes disposes to slough, (mortification,) and its metastasis produces convulsions."

Dr. Farré's rules for exhibiting mercury, according to Pereira, are derived from experience still more appalling to the patient. He says it is not to be given where there are certain idiosyncrasies, and illustrates the danger by the following case: "The late Mr. C. was consulted as to some trifling disorder of the bowels, and, *not knowing the peculiarity of the lady's constitution*, prescribed two grains of calomel. The next morning she showed the prescription to Mr. C., saying she was sure she had taken mercury, as she felt it in her mouth. In a few hours salivation ensued, in consequence of which she lost her teeth; her jaw exfoliated, and she ultimately, after a succession of ailments, (from mercurial poison,) died in about two years." Here the Allopathist confesses that he is obliged to let the arrow fly from his bow, and then attempt to recall it when beyond his reach. In this last great work, the pride and boast of the profession, are these frightful details and confessions: first, that they are in the habit of giving mercury; secondly, that it will destroy life; and lastly, that they have no confidence in any specific for stopping its ravages.

If medical gentlemen will forget their prejudices, and condescend to examine Hahnemann's Materia-Medica, they will find, first, the several antidotes that are specifics to the poison of mercury, adapted to different constitutions and temperaments; but, secondly, they will find there what is transcendently more important, that the science will point out to them the peculiarity of constitution (idiosyncrasy) that forbids the use of mercury before the fearful experiment is made upon the patient.

Pereira renders the excuse for the physician, "that he was unacquainted with the peculiarity of his patient's constitution." Is this humiliating confession to be made to the patient when

the drug is presented to his lips for acceptance? Is there nothing in medical science to teach us the peculiarity of constitution, on a careful examination of the case? Or, must we contrive to gain the knowledge by experiments upon the sick when they are least able to bear it? Is this nineteenth century, too, to be numbered with the dark ages in medicine? And are we to be told that medical science does not teach the physician the peculiarity of his patients' constitutions, on a right examination of the case, and their different susceptibilities to the influence of the drug he is about to administer?

Let me again beseech these gentlemen to examine homœopathic science, and if that does not satisfy them, I beg them to accept the offers of homœopathic physicians to sustain their science in any and every trial of this kind that may be offered to the exercise of their skill.

Such is a specimen of the knowledge which the old school Materia-Medica offers; open it any where, either by accident or design, and it throws no light on the special action of medicines.

It treats only of their violent action and operation, and hence old school practice must consist chiefly in evacuations, because the physicians are ignorant of any and every other property in the medicines they employ; whereas the homœopathist is familiar with both their violent and special effects, and they are the only physicians who have a right appreciation and full comprehension of the remedies they make use of in the cure of disease. Here lies the first great distinction between old and new school science and practice; and if the facts, as stated, are true, it is a startling difference; and your Honor can judge which class of physicians is best entitled to public confidence.

In order to show that ignorance in the special properties of medicines is fraught with great danger, I will state that

medicine which has the power of doing good, has the power to do harm; medicine that has power to cure, has the power to kill; and the good intentions with which it is given, if misapplied, will not divest it of its power; if we grant it power, it will execute the work committed to its charge, whether given in a right or wrong judgment of its application.

This brings me to another important feature in homœopathy. It must be confessed that physicians are as fallible as other men, and often misapply their remedies. The old school have no dynamic antidotes to the over-action or injurious results of their remedies, whilst the homœopathist is furnished with antidotes to every remedy he employs.

But the most fruitful source of mischief, arising from ignorance of the special effects of medicine, and one that brings the patient into most danger, is found in mistaking the morbid effects of medicine for the progress of disease. This is an every-day occurrence, because violent medicines are daily and hourly given, and it is supposed that they carry themselves off in their violent action; but those who are familiar with their special effects see that a remnant is left behind: this remnant of medicine is mistaken for the remains of disease, and another medicine is given to remove it, which leaves more traces of its own action behind it, and another remedy is employed for this, until disease, simple in the beginning, has become so multiplied as to require heroic treatment; this is adopted and pursued until the patient becomes exhausted, with all his physical energies broken down, and then, medicine being abandoned, he is left to rally by nature's unassisted efforts.

But this, dark as it is, represents only the bright side of the picture; the melancholy tale is told in the misapplication of medicines when the patient's physical energies are weak, for then he becomes its victim. All medicines will kill if

misapplied under given circumstances—magnesia as well as arsenic—and it is only by a thorough knowledge of their special properties that their action can be anticipated by the physician, and the patient rendered safe in their application. Now, medicine is always misapplied when given to remove morbid signs of its own action that are mistaken for disease; and that this mistake is common I will quote the following authors to prove.

I am happy here to be able to quote from allopathic standards, (Elements of Practice, by R. Williams, Prof. London University:) "All medicines are poisons, and poisons, of whatever nature, are subjected to certain general laws. The most important of these laws are, firstly, that poisons have all certain definite and specific actions; secondly, that they lie latent in the system a certain but varying period of time before their actions are set up; and, lastly, that the phenomena resulting from the poison, when roused into action, vary according to the dose or the *predisposition* of the patient. First, the law of the definite and specific action of poisons results from physical principles; for, if it be supposed that agents acting on the human body do not produce their effects according to certain definite laws, and therefore not out of physical principles, we can neither determine the seat or course of any given disease, nor judge of the operation of remedies."

"The definite action of causes is the basis of human knowledge, and is equally true in medicine as in every other science. The action of poisons, though definite, is variously limited. Some poisons, for instance, act on one membrane, or on one organ, or on one system of organs, while others extend their influence over two or more membranes, or organs, or systems of organs of the animal frame."

Now, with such admissions as these—that all medicines

are poisons, have specific properties, and act discriminatingly on different membranes, organs, and systems of organs—it requires no great claims to prophecy to foresee that these admissions and researches must, sooner or later, result in the breaking up of their present arbitrary mode of arrangement, and lead to the conviction already avowed by the homœo pathist, that some fixed laws exist between drug and natural disease, and that such laws are absolutely necessary to make medicine a possible science.

Secondly, another important law of medicinal poisons is, that they are cumulative. "Antimony, a common remedy, is found to produce an extensive range of action, and one of its effects is found in gangrene of the lungs, (by overdosing;") Again, "that they lie latent in the system a period of time, which varies in different individuals, before they set up their specific actions." Again—"having the property of accumulating in the system, they act with an intensity proportioned not to the last dose, but to the aggregate of the whole quantity that has been administered."

These quotations cover the whole ground, and show conclusively the danger of giving medicine without a knowledge of its specific action, together with the organ or organs it will act upon.

It is seen that medicine is both accumulative and latent, and takes time to set up its action; and that, when its action is set up, disease and death may follow—and they inevitably must follow, if the physician should mistake it for natural disease: and how is it possible for him to avoid mistaking it, if he be ignorant of the morbid symptoms which medicine produces? Now, I ask, who can compute the thousands upon thousands who have found an early grave from the specific action of medicinal poisons, mistaken for the progress of dis ease?

Having shown that Hahnemann was the first discoverer of the special effects of medicine, I come now to state a second discovery that far transcends the first in importance, viz., that, in the course of his experiments, he discovered that different medicines addressed themselves specifically to different organs. This is, beyond all controversy, the most important discovery in medical science, as it opens an avenue to every organ in the body, and brings it within the range of the action of the remedy we wish to employ.

Before this discovery, and up to the present time, all physicians, with the exception of his disciples, addressed, and still address, their medicines to one set of organs chiefly, viz.—the digestive organs, which leads allopathic practitioners to regard disease as some foreign body which has effected a lodgment in one or another part of the frame, and whose removal is necessary to health. They make no distinction between an organ and its function, between the agent and the office it performs. Hence their remedial measures are all designed to expel some intruder, instead of substituting a healthy for a diseased action in any vital organ.

They personify disease as some impurity or foul accumulation in the digestive apparatus, and the physician has no difficulty in creating evidence to confirm the belief, by giving such medicines as make the patient declare there was no wonder he was ill.

No matter where the disease be located, nor how remotely the sick organ lie from the scene of action, the digestive organs, which are designed by nature for the stay and support of life, must have their functions suspended, and their healthy action destroyed by nauseating and disgusting medicines;—and why? for the avowed purpose of making well organs sick, to make sick organs well; i. e., whipping an innocent child for the sins of a guilty one. How does the

term, "philosophy of medicine," sound in the mouth of one driven to such extremes for reasons of practice? Can any reason be given for the hope that an artificial disease of the stomach, made by the violent action of medicine, will cure an inflammation of the brain?

If there be any sound reason in it, it is found in the resistance of the human constitution to the power of the agents employed. When a man has a pain in his side, a blister is applied to the surface; thus carrying out in another way the same rule of practice, viz., making the skin sick, in order to make the lung well.

If the patient be sick in one half his organs, the physician addresses his agents to the other half; and when the latter is broken down by medicine, they drive the pre-existing disease out of the other side. These are the rules of old school practice, and it is obvious that they have no means whatever of acting directly on disease; the stomach and bowels being their principal field of action.

This brings me to the consideration of the doses of medicine, so much eulogized in old school practice, and so much ridiculed in the new.

It is to be remembered that the objects of practice are totally different. The old school physicians require a prompt action of medicine on sound organs, and the new school a prompt action of medicine on diseased ones; and hence the dose must be large and violent for the purposes of one, and small, and addressed to the capacity of the organs to bear it, for the other. We confess that our doses would be entirely inert, if addressed to sound organs; and if we were driven to act on such organs, we should be obliged to fall back on old school practice, and employ their doses to effect our purpose; but our purpose is to let well organs alone, and we beg it to be borne in mind, that our remedies are addressed exclusively

to the sick organs, whose susceptibilities are greatly exalted by the conditions of disease: and we are obliged in all cases, to adapt the strength of remedies to this increased degree of susceptibility.

I will cite two cases for illustration, that will bring old school physicians on homœopathic grounds—grounds rarely occupied by them, and always occupied by us, and where both are compelled to act directly on the diseased organ; and then let us see how large their dose of medicine will be in a given case. I will first select acute inflammation of the stomach, (gastritis.)

Now, I ask the most wise and judicious men of the old school, if they would dare to give their ordinary, or any dose of medicine, in this case, until they had first exsanguinated the patient by bleeding, leeching, cupping, warm-baths, fomentations, and blisters; and after the acute disease were broken down, then, and not till then, would they venture upon medicine.

I will next take acute inflammation of the bowels, (enteritis,) and who does not know that an active cathartic would kill his patient. There is no physician so ignorant, as not to know that a violent dose of medicine, acting directly on a diseased organ, will not only aggravate the disease, but destroy its vitality, patient and all.

Here it is evident that when the two physicians occupy the same ground, with a mutual understanding of the motives of practice, there will be no division of opinion about the size of the dose. The old school is more infinitesimal than the new, for they dare not give any medicine whatever.

Having brought the allopathist on homœopathic grounds, we wish to detain him while we cite another case.

Suppose both to be in consultation over an acute inflammation of the brain, and that the homœopathist could per-

suade the other that he had a medicine which would act directly on the brain, and reduce the inflammation. What would be the first thought to strike the old school physician? If you have a medicine that will act directly on an inflamed organ, be careful how you use it: and especially be careful of the size of your dose, lest it overact and destroy your patient. This would be the language of every sensible man in the profession, and this is the reason of the disproportion of dose between the old and new school practice; one acts upon sick organs, the other upon sound ones.

But the dose is not so small as the world is taught to believe. So much pains has been taken to impress the public mind with the ridiculous, that pages have been covered with figures to prove that it would take the waters of the Atlantic to make the thirtieth dilution of medicine. This is a dilution rarely used; I never employed it but once, and then not having it, I made it, and it was finished in five minutes, with less than two ounces of fluid. Now the ratio of two ounces of fluid to the waters of the Atlantic, is about equal to the extravagance of ignorant pretenders to the knowledge of this science.

It is stated by others that Andral's experiments were learnedly performed and signally failed, that no man of distinction and science had ever embraced it: and that the practice was abandoned in the country of its birth.

I would ask if a practice could be abandoned in the country of its birth, whose statistics will show that its loss of life is only in the ratio of six to sixty of the old school practice?

Open the book of records in the city of New York, and take any two or three years of the practice of a homœopathic physician and compare it with that of any allopath, having an equal amount of business, and the above disproportion in the loss of life will hold good. This being true, would have precluded the

necessity of my advancing any other argument to your Honor, but it seemed necessary to disabuse the public mind in relation to this science, and to enter into an explanation of its studies, precepts and practice, for their enlightenment and satisfaction, and it is but adding a slight tribute to the vast stream of public opinion, which sooner or later must regulate the medical controversies of the whole civilized world.

In making the foregoing statement, I know that I shall wound the feelings of medical gentlemen whose friendship I prize, but my wish and purpose is any other than to excite angry feelings in any human being.

I am actuated by sentiments of sorrow and profound regret, called forth by the contemplation of the miserable condition in which society is placed, by the rejection of a system of practice abounding with so many rich consolations and comforts.

I assure medical gentlemen, and beg them to believe, that my comments upon their science and practice, are made with the desire to urge them to examine this new one, which I am recommending to their adoption.

I will close by stating to your Honor that motives of medical practice should not be lightly impeached.

The degree of Doctor of Medicine is the highest gift in the power of medical colleges to bestow ; it conveys the highest of all trusts, and invests the physician with the care and keeping of life. He who practises medicine for its profits alone, in seeking his own interests, will be criminally inattentive to the dearest interests of his patient, subverting the highest purposes of his profession, and defeating the great end of successful practice.

To be successful, he must love as his own the life confided to his care, and the highest exercise of his mental energies he should consider as only adequate to his trust. When

crises are approaching he must watch them; when danger is nigh at hand he must forget his sleep; and if he do not love such cases for their own sake, he is both constitutionally and essentially unfitted for the high trust reposed in him. The preservation of life must be his leading motive, even at the sacrifice of professional character. In this spirit he will succeed; the rich will reward him liberally, and the poor will give him their blessings, while the time-serving physician, who fears to meet opposition for truth's sake, will need some gentle hand to soften his pillow on a dying bed.

I have the honor to be,

Very respectfully,

Your obedient servant,

F. VANDERBURGH.

Rhinebeck, Feb. 1st, 1844.

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