

Petition against blood-letting : to the legislature of the State of New York.

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Turner, William, -1858.
New York (State). Legislature.
National Library of Medicine (U.S.)

Publication/Creation

[New York?] : [publisher not identified], [1851?]

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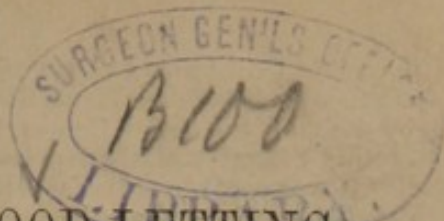
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Turner (Wm)



PETITION AGAINST BLOOD-LETTING.

29876

TO THE LEGISLATURE OF THE STATE OF NEW YORK.

THE prayer of your petitioner respectfully sets forth:—

That he commenced the study of Medicine in New York, his native city, nearly a third of a century ago, and that he is now practising physic there. That the result of his study and of his observation of the experience of others is, that the practice of blood-letting in diseases is destructive, and he therefore prays that the use of the lancet for that purpose, may be made penal, by statute. Your petitioner has the honor herewith to present your honorable body with a copy of the "Fallacies of the Faculty," written by Dr. Samuel Dickson, of London, containing arguments derived from experience, the reason, and logical induction, against the practice, which arguments have now been before the public fifteen years, and which the profession have not so much as even attempted to refute.

Your petitioner is aware that some time ago, when an eminent physician presented a similar petition to the King of Prussia, he was laughed at from one end of Europe to the other; but fortified by the arguments referred to, your memorialist is not at all intimidated by the mortifying example.

Your petitioner might produce many further proofs of the alleged destructiveness of medical abstraction of blood, but he contents himself by referring to the memorable case of General Washington, who succumbed in twenty-four hours to the sanguinary treatment resorted to for a simple sore throat; and to the more recent cases of Generals Harrison and Taylor, whereby the government of the country was changed, and the will of the people thwarted, by an ignorance of the laws which constitute the economy of the human body, not to be found even among nations the most barbarous.

And your petitioner, as in duty bound, will ever pray.

WM. TURNER, M.D.

NEW YORK, March 17, 1851.

In view of the fact that no counter memorials, in favor of blood-letting, have been presented to the Legislature, the *New York Tribune*, of May 3, quotes the following:—

THE LANCET.—The proposition before the Legislature to make blood-letting in diseases penal is unopposed. The lancet is without a defender. Judgment must be taken against it *pro confesso*. When we remember the unanimity with which the indispensability of this insidious instrument was insisted upon, less than six years ago, the revolution is most extraordinary.—*N. Y. Sunday Courier*.

The *New York Evening Post*, in publishing Dr. Turner's Memorial, precedes it with the following remarks:—

"The author of the following petition is at least entitled to the praise of directness and openness in his mode of proceeding. Instead of asking that power be delegated to a public body to persecute those who adopt a different method from himself in the treatment of diseases, he calls on the Legislature to prohibit that method by instituting processes and penalties against it.

"He is right. If we are to have medical persecution at all, let it come in such a shape that its nature may be fully appreciated; let us have it without any disguise. Let the penalties be certain, so that any body who enters upon the practice of Medicine may be fully aware of the danger he incurs by adopting illegal methods of cure."

From the *New York Tribune*, April, 1847.

IS THE BLOOD ALIVE?

To the Editor:—One of your correspondents noticed the other day the discovery by a French physiologist, of the vitality of each globule of blood. To show that this fact had been observed before, I beg leave (at the imminent hazard of giving mortal

offence to Dr. Stearns and his *soi-disant* 'New York Academy of Medicine,') to quote the following from Dickson's Chrono-Thermal System of Medicine—a work approved by the great Sir Astley Cooper, the most eminent Surgeon of modern times—not excepting Valentine Mott and Alex. H. Stevens.

"It was once a question whether or not the blood be *alive*. That matter is now definitely settled. JOHN HUNTER, to the conviction of everybody, *proved that the blood lives*; and every drop that artificially leaves the system is admitted, even by those who take it away, to be a drop of life. He who loses a pint of blood loses a pint of life. Of what is the body composed? Is it not of blood and blood only? What fills up the excavation of an ulcer or an abscess? What reproduces the bone of the leg or thigh, after it has been thrown off dead, in nearly all its length? What but the living blood, under the vito-electrical influence of the brain and nerves? How does the slaughtered animal die? Of loss of blood solely. Is not the blood then, in the expressive language of Scripture, "the life of the flesh?" How remarkable that while the value of blood to the animal economy should be thus so distinctly and emphatically acknowledged, blood-letting is not even once alluded to among the various modes of *cure* mentioned in the Sacred Volume. We have 'balms,' 'balsams,' 'baths,' 'charms,' 'physic,'—poultices,' even—but loss of blood never! Had it been practiced by the Jews, why this omission?"

Last summer I inquired of one of our most accomplished Hebrew scholars (Judge Mordecai M. Noah) whether there was any sanction in the writings of the ancient Hebrew Physicians for resorting to blood-letting in disease. He expressed his surprise at the idea,—said that the question was new to him, and that he should certainly investigate it. On my next interview with him, he declared that he had been unable to find any trace of such a mode of practice in the works referred to.

Your obt. serv^t,

WM. TURNER,
'Chrono-Thermal Practitioner.'

So much for the philosophy of blood-letting and its boasted antiquity!

We take the following searching analysis of the terrible mischiefs of bloodletting, from that monument of medical wisdom of Dr. Dickson, of London, "The Fallacies of the Faculty, with the Principles of the Chrono-Thermal System of Medicine," published (14th edition) by Long and Brother, New York:—

Blood--Letting.

While with one class of practitioners, Medicine is reduced to the mere art of purification, with another class it consists in the systematic abstraction of blood; every means being resorted to in the mode of doing this, from venesection, arteriotomy, and cupping, to the basest application of the leech. In the remarks, Gentlemen, which I am about to make on the subject, instead of discussing the preferable mode of taking blood away, I shall bring before you some facts and arguments that may convince you of the perfect possibility of dispensing with the practice altogether.

"The imputation of novelty," says Locke, "is a terrible charge amongst those who judge of men's heads as they do their perukes, by the *fashion*—and can allow none to be right but the received doctrine." Yet, in the words of the same acute writer: "An error is not the better for being common, nor truth the worse for having lain neglected; and if it were put to the vote anywhere in the world, I doubt as things are managed, whether Truth would have the majority; at least while the authority of men, and not the examination of things, must be its measure." In the same spirit Lord Byron asks:

"What from this barren being do we reap?
Our senses narrow, and our reason frail
Life short, and TRUTH a gem that loves the deep,
And all things weighed in *Custom's* falsest scale.
Opinion an omnipotence,—whose veil
Mantles the earth with darkness—until right
And wrong are accidents—and men grow pale
Lest their own judgments should become too bright,
And their free thoughts be crimes, and earth have too much light!"

The operation of Blood-letting is so associated, in the minds of most men, with the practice of physic, that when a very sensible German physician some time ago petitioned the King of Prussia to make the employment of the lancet *penal*, he was laughed at from one end of Europe to the other.

This you will not wonder at if you consider that the multitude always think "whatever *is* is right;" but a little reflection will teach you that there must have been a period in the world's history when the lancet was unknown as a remedy; and that many centuries necessarily elapsed before it could even be imagined that loss of blood might alleviate or cure disease. Nations, nevertheless, grew and prospered. To what daring innovator the practice of physic owes the *Curse* of the lancet, the annals of the art leave us in ignorance; but this we know, that its introduction could only have been during the infancy of Medicine, when remedial means were yet few, and the mode of action of remedies totally unknown. It was the invention of an unenlightened,—possibly, a sanguinary age; and its continued use says but little for the after-discoveries of ages, or for the boasted progress of medical science.

It was once a question whether or not the blood be *alive*. That question is now definitely settled. John Hunter, to the conviction of everybody, proved that the Blood lives; and every drop that artificially leaves the system is admitted, even by those who take it away, to be a drop of life. He who loses a pint of blood loses a pint of his life. Of what is the body composed? Is it not of Blood, and Blood only? What fills up the excavation of an ulcer or an abscess? What reproduces the bone of the leg or thigh, after it has been thrown off dead, in nearly all its length? what but the living BLOOD, under the vito-electrical influence of the Brain and Nerves! How does the slaughtered animal die? Of loss of blood solely. Is not the blood, then, in the impressive language of Scripture, "the life of the flesh?" How remarkable, that while the value of the blood to the animal economy should be thus so distinctly and emphatically acknowledged, Blood-letting is not even once alluded to, among the various modes of *Cure* mentioned in the sacred volume. We have "balms," "balsams," "baths," "charms," "physics,"—"poultices," even,—but loss of blood, never! Had it been practised by the Jews, why this omission? Will the men who now so lavishly pour out the Blood, dispute its importance in the animal economy? will they deny that it forms the basis of the solids? that when the body has been wasted by long disease, it is by the Blood only it can recover its healthy volume and appearance? Has not nature done every thing to preserve to animals of every kind,

"The electric Blood with which their arteries run!"—BYRON.

She has provided it with strong resilient vessels—vessels which slip from the touch, and never permit their contents to escape, except where their coats have been injured by accident or disease. Misguided by theory, man, presumptuous man, has dared to divide what God, as a part of creation, united; to open what the Eternal, in the wisdom of his omniscience, made entire! See, then, what an *extreme* measure this is! It is on the very face of it a most unnatural proceeding. Yet what proceeding so common, or what so readily submitted to, under the influence of authority and custom? If, in the language of the Chemist Liebig, the blood be indeed "the SUM of ALL THE ORGANS that are being formed," how can you withdraw it from one organ without depriving every other of the material of its *healthy* state? Yet enter the crowded hospitals of England—of Europe—and see how mercilessly the lancet, the leech, and the cupping-glass, are employed in the diseases of the poor. Look at the pale and ghastly faces of the inmates. What a contrast to the eager pupils and attendants thronging around their beds—those attendants with bandage and basin, ready at a moment's notice to take from the poor creatures whatever quantity of *life-blood*, solemn Pedantry may prescribe as the infallible means of relieving their sufferings! Do that, I say, and refrain, if you can, from exclaiming with Bulwer, "when Poverty is sick, the doctors mangle it!" What are the causes of the disorders of this class of people? In the majority of cases, defective food, and impure air. By these has their blood been deteriorated—and for what does the (so termed)

man of science abstract it? To make room for better? No! goaded on by the twin-goblins, "congestion" and "inflammation," to deteriorate it still further by starvation and confinement. Gentlemen, these terms play in physic much the same thing as others, equally senselessly misused, play in the common affairs of the world—

Religion, Freedom, Vengeance, what you will,
A word's enough to raise mankind to *kill*,—
Some *party*-phrase by *cunning* caught and spread,
That GUILT may reign, and WOLVES and worms be fed!—BYRON.

The first resource of the surgeon is the lancet—the first thing he thinks of when called to an accident is, how he can most quickly open the flood-gates of the heart, to pour out the stream of an *already enfeebled* existence. Does a man fall from his horse or a height, is he not instantly bled?—has he been stunned by a blow, is not the lancet in requisition? Nay, has an individual fainted from over-exertion or exhaustion, is it not a case of FIT—and what so proper as venesection!

You cannot have forgotten the fate of Malibran—the inimitable Malibran; she who so often, by her varied and admirable performances, moved you to tears and smiles by turns. She was playing her part upon the stage; she entered into it with her whole soul, riveting the audience to the spot by the very intensity of her acting. Just as she had taxed the powers of her too delicate frame to the uttermost; at the very moment she was about to be rewarded with a simultaneous burst of acclamation, she fainted and fell; fell from very weakness. Instantly a medical man leapt upon the stage,—to administer a cordial! No—to bleed her! to bleed a weak, worn, and exhausted woman! And the result? she never rallied from that unfortunate hour. But, Gentlemen, Malibran was not the only intellectual person of the thousands and tens of thousands who have prematurely perished by the lancet. Byron and Scott—those master-spirits of their age—those great men who, like Ariosto and Shakspeare, not only excited the admiration of temporary millions, but whose genius must continue, for generations yet unborn, to delight the land that produced them—they, too, fell victims to the lancet—they, too, were destroyed by hands which, however friendly and well-intentioned, most undoubtedly dealt them their death-blows. Is not this a subject for deep reflection? To the cases of these great men we shall recur in the course of this lecture; but for the present, we must turn to other matters—to events that have just passed before our eyes. The affair of Newport, in Wales, is still the topic of the hour. You must, therefore, remember it to its minutest detail—the attack by the rioters upon the town—the gallant and successful stand made by Captain Gray and his little detachment of the 35th regiment—the prisoners captured, and the investigation which afterwards took place. In the course of that inquiry, a prisoner, when under examination, *fainted*. What was done with him? he was carried out of court and immediately BLED! On his return, the newspapers tell us, an extraordinary change had come over his countenance. From being a man of robust appearance, he had become so wan and haggard, so altered in every lineament, the spectators could scarcely recognise him as the same prisoner. Yet, strange to say, not one of the many journals that reported this case, introduced a single word in condemnation of the utterly uncalled-for measure, which brought the man to such a state; so much has *Custom* blunted the sense of the public to this the most dangerous of all medical appliances!

Gentlemen, a coroner's inquest was held upon a person who died suddenly. I shall read to you what followed from the Times newspaper of the 20th December, 1839, suppressing, for obvious reasons, the name of the witness. "Mr. ———, surgeon, stated that he was called upon to attend deceased, and found him *at the point of death*. He attempted to BLED him, but ineffectually, and in less than a minute from witness's arrival, deceased expired. Witness not being able to give *any opinion* as to the cause of death from the

symptoms that *then* exhibited themselves, he afterwards, with the assistance of Dr. Ridge, 37, Cavendish Square, made a *post-mortem* examination, and found that a large cavity attached to the large vessel of the heart, containing blood, had burst, and that that was the cause of death." So that while the man was actually dying of *inanition* from internal bleeding, the surgeon, utterly ignorant, according to his own confession, of the nature of the symptoms, deliberately proceeded to open a vein! How happens it that the lancet should be so invariably the first resort of IGNORANCE?

In every case of *stun* or *faint*, the employment of this instrument must be a superadded injury; in all, there is a positive enfeeblement of the whole frame, evidenced by the cold surface and weak or imperceptible pulse; there is an exhaustion, which loss of blood, so far from relieving, too often converts into a state of utter and hopeless prostration. True, men recover though treated in this manner; but these are not *Cures*,—they are *Escapes*!

How few the diseases which loss of blood may not of itself produce! If it cannot cause the eruptions of small-pox, nor the glandular swellings of plague, it has given rise to disorders more frequently and more immediately fatal than either. What think you of cholera asphyxia—Asiatic cholera? Gentlemen, the symptoms of that disease are the identical symptoms of a person bleeding *slowly* away from life! The vomiting, the cramps, the sighing, the long gasp for breath—the leaden and livid countenance which the painter gives to the dying in his battle-pieces—these are equally the symptoms of cholera and loss of blood! Among the numerous diseases which it can produce, Darwin says—"a paroxysm of *gout* is liable to recur on bleeding." John Hunter mentions "lock-jaw and dropsy," among its injurious effects,—Travers, "blindness," and "palsy,"—Marshall Hall, "mania,"—Blundell, "dysentery,"—Broussais, "FEVER and convulsions!" "When an animal loses a considerable quantity of blood," says John Hunter, "the heart increases in its frequency of strokes, as also in its *violence*." Yet these are the indications for which professors tell you to bleed! You must bleed in every inflammation, they tell you. Yet is not inflammation a *daily effect* of loss of blood? Magendie mentions "*pneumonia*" as having been produced by it,—completely confirming the evidence of Dr. Hume upon that point. He further tells us that he has witnessed among its effects, "the entire train of what people are pleased to call *inflammatory* phenomena; and mark," he says, "the extraordinary fact, that this inflammation will have been produced by the very agent which is daily used to combat it!" What a long dream of false security have mankind been dreaming! they have laid themselves down on the laps of their mentors,—they have slept a long sleep; while these, like the fabled vampire of the poets, taking advantage of a dark night of barbarism and ignorance, have thought it no sin to rob them of their life's blood during the profoundness of their slumber!

Gentlemen, the long shiver of the severest ague, the burning fever, the *fatal* lock-jaw, the vomiting, cramps, and asphyxia of cholera, the spasm of asthma and epilepsy, the pains of rheumatism, the palpitating and tumultuous heart, the most settled melancholy and madness, dysentery, consumption, every species of palsy, the *faint* that became *death*, these—all these—have I traced to loss of blood! Could arsenic, could prussic acid, in their deadliest and most concentrated doses, do more? Yet I have heard men object to use the minutest portions of these agents, medicinally,—men who would open a vein, and let the life-blood flow until the patient fell like an ox for the slaughter, death-like, and all but dead, upon the floor! Do these practitioners know the nature of the terrible power they thus fearlessly call to their aid? Can they explain its manner of action, even in those cases where they have supposed it to be beneficial? The only information I have been able to extract from them upon this point, has been utterly vague and valueless. Their reasoning, if it could be called reasoning, has been based on a dread of "inflammation" or "congestion." From the manner in which they

discuss the subject, you might believe there was no remedy for either but the lancet. Ask them why they bleed in ague—in syncope—in exhaustion or collapse? they tell you it is to relieve congestion. After a stun or fall? it is to prevent inflammation. Bleeding, in all my experience, I have already stated to you, never either relieved the one, or prevented the other! Gentlemen, did you never see inflammation of a vein AFTER bleeding—inflammation caused by the very act? I have known such inflammation end *fatally*. Did you never know the wounds made by leech bites become inflamed, AFTER these reptiles had exhausted the blood of the part to which they were applied? And how came that about? Simply because, however perfectly you exhaust any part of its blood, you do not thereby prevent that part from being again filled with it—or rather, you make it more liable to be so, by *weakening the coats of the containing vessels!* Hundreds, thousands, have recovered from every kind of disease, who never were bled in any manner; and many, too many have died, for whom the operation, in all its modes, had been most scientifically practised! Have I not proved that every remedial agent possesses but one kind of influence,—namely, the power of changing Temperature? Let the schoolman show me that the lancet possesses any superiority in this respect—any specific influence more advantageous than other less questionable measures; and I shall be the last to repudiate its aid in the practice of my profession. The beneficial influence of blood-letting, where it has been beneficial in disease, relates solely to Temperature. To this complexion it comes at last, and to nothing more,—the equalisation and moderation of Temperature. In the congestive and non-congestive stages of fever—the cold—the hot—the sweating—the lancet has had its advocates. Blood-letting, under each of these circumstances, has changed the existing temperature. Why, then, object to its use? For this best of reasons, that we have remedies without number, possessing each an influence equally rapid, and an agency equally curative, without being, like blood-letting, attended with the insuperable disadvantage of abstracting the material of healthy organisation. I deny not its power as a remedy, in certain cases; but I question its claim to precedence, even in these. Out of upwards of TWELVE THOUSAND CASES of disease that have, within the last few years, been under my treatment, I have not been compelled to use it once. Resorted to, under the most favourable circumstances, its success is anything but sure, and its failure involves consequences which the untoward administration of other means may not so certainly produce. Have we not seen that all diseases have remissions, and exacerbations—that mania, asthma, apoplexy, and inflammation, are all remittent disorders! From the agony or intensity of each of these developements of fever, you may obtain a temporary relief by the use of the lancet; but what has it availed in averting the recurrence of the paroxysm? How often do you find the patient you have bled in the morning, ere night with every symptom in aggravation! Again you resort to bleeding, but the relief is as transitory as before. True, you may repeat the operation, and re-repeat it, until you bleed both the blood and the life away. Venesection, then, in some cases, may be a temporary, though too often a delusive, relief. The *general result* is depression of vital energy, with diminution of corporeal force!

Dr. Southwood Smith, physician to the London Fever Hospital, published a book purposely to show the advantages of bleeding in fever. One of his cases is so curiously ILLUSTRATIVE of his position, I shall take the liberty of transcribing it from the *Medical Gazette*, with a running commentary by the editor of that periodical:—"The case of Dr. Dill demands our most serious attention, and deserves that of our readers. It is adduced as an example of severe cerebral affection, in which case, Dr. S. affirms, 'the bleeding must be large and early as it is copious.' 'I saw him,' says Dr. Smith, 'before there was any pain in the head, or even in the back, while he was yet only feeble and chilly. The aspect of his countenance, the state of his pulse, which was slow and labouring, and the answer he returned to two or three

questions, satisfied me of the inordinate, I may say, the ferocious attack that was at hand.—P. 398.’

Whatever may be the opinion of our readers, as to the above signs indicating a ferocious cerebral attack, they will one and all agree with us, that the ferocious attack was met with a ferocious treatment; for an emetic was given without delay, and ‘blood was taken from the arm, to the extent of *twenty ounces*.’ This blood was *not* inflamed. Severe pains in the limbs and loins, and intense pain in the head, came on during the night, and early in the morning, *blood was again drawn* to the extent of *sixteen ounces*, ‘with great diminution, but not entire removal of the pain.’ Towards the afternoon, he was *again bled* to sixteen ounces. ‘The pain was now quite gone—the blood from both these bleedings intensely *inflamed*.’ [*Inflamed*, according to Dr. Smith’s notions—but mark, in his own words—the *first* blood drawn was ‘*NOT* inflamed.’ Were the lancet a preventive of inflammation, how came the blood to be inflamed *AFTER* so many bleedings ?]

“During the night the pain returned, and in the morning, notwithstanding the eyes were dull, and beginning to be suffused, the face blanched (no wonder!) and the pulse slow and intermittent, and weak, *twelve leeches* were applied to the temples; and as these did not entirely remove the pain, more blood, to the extent of *sixteen ounces*, was taken by cupping. The operation afforded great relief; but the following morning, the pain *returned*, and again was blood extracted to the amount of *sixteen ounces*. ‘Immediate relief followed this second operation; but, *unfortunately*, the pain returned with great violence, towards evening; and it was now impossible to carry the bleeding any further. Typhoid symptoms now began to show themselves: ‘the fur on the tongue was becoming brown, and there was already slight tremor in the hands.’ What was to be done? Ice, and evaporating lotions were of no avail; but happily for Dr. Dill, the affusion of cold water on the head, ‘the cold dash,’ was thought of and employed; and this being effectually applied, the relief was ‘instantaneous and most complete.’ So that this case, announced as a severe cerebral affection, and treated, in anticipation, by copious blood-letting, *BEFORE there was any pain in the head, while the patient was yet only feeble and chilly*, which grew worse and worse as the blood-letting was repeated, until, after the abstraction of *ninety ounces* of blood, the patient had become in a state of ‘intense suffering’ and ‘imminent danger,’ and was relieved at last by the cold dash—this case, we say, is brought forward as a specimen of the extent to which copious blood-letting may sometimes be *REQUIRED!!* Most sincerely do we congratulate Dr. Dill on his escape, not from dangerous disease, but from a *DANGEROUS REMEDY*.”—*Medical Gazette*.

What could more completely exemplify the utter inefficiency of blood-letting, in almost all its forms, either as a certain remedy, or a preventive of fever? Yet such is the force of custom, prejudice, education, that this case—and I have no doubt, thousands like it—so far from opening the eyes of the physician to the London Fever Hospital, only served to confirm him in his error. He had his *methodus medendi*, and he pursued it; and notwithstanding the total failure of his vaunted remedy, he gives the case at length, as a perfect specimen of the most perfect practice. Mark the result of that practice! but for the “cold dash,” the patient must have perished. It is even now a question, whether he ever recovered from those repeated blood-lettings, for he died not many months after. Happy would it have been for mankind, that we had never heard of a “Pathological School;” happier for Dr. Dill, for to that school and its pervading error of imputing effect for cause—of arguing from the end as if it were the beginning—may we fairly attribute all this sanguinary practice.

Lord Byron called medicine “the *DESTRUCTIVE* art of healing.” How truly it proved to be so in his own person, you shall see, when I give you the details of his last illness:—“Of all his prejudices,” says Mr. Moore, “he

declared the strongest was that against bleeding. His mother had obtained from him a promise, never to consent to be bled; and, whatever argument might be produced, his aversion, he said, was stronger than reason. 'Besides, is it not,' he asked, 'asserted by Dr. Reid, in his *Essays*, that less slaughter is effected by the lance, than the *lancet*—that minute instrument of mighty mischief!' On Mr. Millengen observing, that this remark related to the treatment of nervous, but not of inflammatory complaints, he rejoined, in an angry tone, 'Who is nervous if I am not? and do not those other words of his (Dr. Reid's) apply to my case, where he says, that drawing blood from a nervous patient, is like loosening the cords of a musical instrument, whose tones already fail for want of sufficient tension! Even before this illness, you yourself knew how weak and irritable I had become; and bleeding, by increasing this state, will inevitably kill me. Do with me what else you like, but bleed me you shall *not*. I have had several inflammatory fevers in my life, and at an age when more robust and plethoric; yet I got through them without bleeding. This time, also, will I take my chance.'" After much reasoning, and repeated entreaties, Mr. Millengen at length succeeded in obtaining from him a promise, that should he feel his fever increase at night, he would allow Dr. Bruno to bleed him. "On revisiting the patient early next morning, Mr. Millengen learned from him, that having passed, as he thought, on the whole, a better night, he had not considered it necessary to ask Dr. Bruno to bleed him. What followed, I shall, in justice to Mr. Millengen, give in his own words:—"I thought it my duty now to put aside all consideration of his feelings, and to declare solemnly to him how deeply I lamented to see him trifle thus with his life, and show so little resolution. His pertinacious refusal had already, I said, caused much precious time to be lost; but few hours of hope now remained; and, unless he submitted immediately to be bled, we could not answer for the consequences. It was true, he cared not for life, but who could assure him, that, unless he changed his resolution, the uncontrolled disease might not operate such disorganisation in his system, as utterly and for ever to deprive him of reason! I had now hit at last on the sensible chord; and partly annoyed by our importunities, partly persuaded, he cast at us both the fiercest glance of vexation, and throwing out his arm, said, in the angriest tone, 'There you are, I see, a d—d set of butchers,—take away as much blood as you like, but have done with it!' We seized the moment, (adds Mr. Millengen,) and drew about twenty ounces. On coagulation, the blood presented a strong buffy coat; yet the relief obtained did *not* correspond to the hopes we had formed; and during the night the fever became STRONGER THAN IT HAD BEEN HITHERTO, the restlessness and agitation increased, and the patient spoke several times in an incoherent manner.'" Surely this was sufficient to convince the most school-bound of the worse than inoperative nature of the measure. Far from it. "On the following morning, the 17th April, the bleeding was repeated *twice*, and it was thought right also to apply blisters to the soles of his feet!" Well might Mr. Moore exclaim, "It is painful to dwell on such details." For our present purpose, it will be sufficient to state, that although the "rheumatic symptoms had been completely removed," it was at the expense of the patient's life; his death took place upon the 19th, that is, *three* days after he was *first* bled.—[*Moore's Life of Byron.*] Now I ask you, what might have been the termination of this case, had an emetic been substituted for the lancet, and had the remission been prolonged by quinine, opium, or arsenic! I solemnly believe Lord Byron would be alive at this moment; nay, not only is it possible, but probable, that a successful result might have ensued, without any treatment at all. When describing the effects of a former fever, Lord Byron himself says: "After a week of half delirium, burning skin, thirst, hot headache, horrible pulsation, and no sleep, by the blessings of barley-water, and *refusing to see my physician*, I recovered." Facts like these are indeed stubborn things!

I have preferred to give these two instances of what I conceive to be decided malpractice, to any of the numerous cases which have come under my own observation, as the first-named gentleman was well known to many of the medical profession, while the death-scene of the noble poet will arrest the attention of all who take an interest in his genius.

In the generality of cases of disease, Gentlemen, it matters little what may have been the primary *Cause*. The disease or effect, under every circumstance, not only involves change of temperature, but produces more or less interruption to the two vital processes, *Digestion* and *Respiration*. In other words, it impedes SANGUIFICATION, or the necessary reproduction of that *living fluid*, which throughout all the changes of life is constantly maintaining expenditure. This being in the nature of things one of the first effects of disorder, let us beware how we employ a remedy, which, *if it succeed not in restoring healthy temperature*, must inevitably hasten the fatal catastrophe—or, in default of that, produce those low chronic fevers, which, under the names of dyspepsia, hypochondria, hysteria, mania, &c., the best devised means too often fail to alleviate, far less to cure. With the free admission, then, that the lancet is capable of giving *temporary relief* to local fulness of blood, and to some of the attendant symptoms, I reject it generally, upon this simple and rational ground, that it cannot prevent such fulness from returning—while it requires no ghost from the grave to tell us that its influence upon the general constitution must, in every such case, be prejudicial. If the source of a man's income is suddenly cut off, and he still continue to spend as before, surely his capital must, as a matter of course, diminish. Beware then, how, under the exact same circumstances of body, you allow a doctor to take away the little capital of blood you possess when disease comes upon you,—remember there is then no income—all is expenditure. And I care not whether you take inflammation of any considerable internal organ,—the Brain, Liver, or Heart, for example,—or of any external part, such as the knee or ankle-joint—with the lancet, you can seldom ever do more than give a delusive relief, at the expense of the powers of the constitution. The man of routine, who has not heard my previous lectures, giving up Fever, perhaps, and a few other disorders, which the occasional obstinacy of a refractory patient, contrary to “received doctrine,” has taught him may yield to other means than blood-letting—will ask me what I should do without the lancet in Apoplexy? Here the patient having no will of his own, and the prejudices of his friends being all in favour of blood-letting, the school-bound member of the profession has seldom an opportunity of opening his eyes. Mine were opened by observing *the want of success* attending the sanguinary treatment; in other words, the number of deaths that took place, either in consequence, or in spite of it. Was not that a reason for change of practice? Having in my Military Hospital no prejudice to combat, and observing the flushed and hot state of the patient's forehead and face, I determined to try the cold dash. The result was beyond my best expectations. The first patient was laid out all his length, and cold water poured on his head, from a height. After a few ablutions, he staggered to his feet, stared wildly round him, then walked to the hospital, where an aperient completed his cure. While in the army, I had a sufficiently extensive field for my experiments; and I seldom afterwards lost an apoplectic patient.

But, Gentlemen, since I embarked in private practice, I have improved upon my Army plan. With the aperient given after the cold dash, I have generally combined quinine or arsenic—and I have also, upon some occasions, at once prescribed hydrocyanic acid without any aperient at all. This practice I have found highly successful. That *Quinine* may prevent the apoplectic fit, I have proved to you, by the case given by Dr. Graves. The value of *Arsenic* in Apoplexy has also been acknowledged, by members of the profession; but whether they have been acquainted with the true principle of its mode of action, in such cases, is another thing. Dr. A. T. Thom-

son recommends it "in threatened apoplexy, after *Cupplings and Purgings*, when the *strength is diminished* and the complexion pale;" that is, you must first break down the whole frame by depletion—you must still further weaken the already weak vessels of the brain, before you take measures to give their coats the degree of strength and stability necessary to their healthy containing power! Upon what principle would *you*, Gentlemen, prescribe arsenic in threatened Apoplexy? Surely upon the same principle that you would prescribe it during the remission in ague—to prolong the period of immunity—to avert the paroxysm. Long after the Peruvian Bark came into fashion for the cure of Ague, practitioners still continued to treat that distemper, in the first instance, by depletion, till the complexion became pale. Do they treat it so now? No! Why, then, do they go on from day to day, bleeding in threatened Apoplexy? In the case given by Dr. Graves, depletion,—repeated depletion, did not prevent the recurrence of the apoplectic fit—but Quinine was at once successful. Sir Walter Scott had a series of fits of Apoplexy. What did the bleeding and starving system avail in his case? It gave him, perhaps, a temporary relief, to leave him at last in a state of irrecoverable prostration. Mr. Lockhart, his biographer, tells us how weak the bleeding always made him. But how could it be otherwise, seeing that I have proved to all but mathematical demonstration, that whatever debilitates the whole body, must still further confirm the original weakly condition of the coats of the blood-vessels, which constitutes the tendency to apoplexy? Had the cold dash been resorted to during the fit, and had quinine, arsenic, or hydrocyanic acid been given during the period of immunity, who knows but the Author of *Waverley* might still be delighting the world with the wonderful productions of his pen!

Shall I be told there are cases of Apoplexy, where the face is pale, and the temperature cold? My answer is—these are not Apoplexy, but *Faint*; cases which, with the cold dash or a cordial, might recover, but which the lancet, in too many instances, has perpetuated to fatality! If the practitioner tells me that the cold dash by no possibility can cure an Apoplexy, where a vessel is ruptured with much *effusion* of blood on the brain; my reply is, that in such a case he may bleed all the blood from the body, with the same unsuccessful result! In the case of effusion of blood in an *external* part, from a bruise for instance, could any repetition of venesection make the effused blood re-enter the vessel from which it had escaped? No more could it do so in the brain, or any other part. Why, then, resort to it in this case? If it be said to stop the bleeding, I answer, that it has no such power. Who will doubt that *cold* has? Surely, if the mere application of a cold key to the back very often stops bleeding from the nose, you can be at no loss to conceive how the far greater shock of the cold dash may stop a bleeding in the brain! When, on the contrary, there is no vascular rupture, but only a tendency to it, the cold dash will not only contract and strengthen the vascular coats, so as to prevent them from giving way, but will, moreover, rouse the patient from his stupor, by the simple shock of its application. But from theory and hypothesis, I appeal to indubitable and demonstrative fact.*

Let the older members of the profession seriously reflect upon the ultimate injury which may accrue to their own interests, by opposing their school follies and school prejudices to palpable and demonstrative truth. So long as colleges and schools could mystify disease and its nature, any treatment that

* M. Copeman, in 1845, gives the statistics of the bleeding and non-bleeding practice in Apoplexy. In 1836, when I first repudiated the lancet in this disease, the statistics were all on one side, the only cases of the *non-bleeding* side of the argument being my own. The following is from Mr. Copeman's table:—

Number bled, . . .	120	Cured, . . .	51	Died, . . .	78
Number <i>not</i> bled, . . .	26	Cured, . . .	18	Died, . . .	8

showing that in the cases where bleeding was practised nearly two out of three died; whereas in the cases treated without blood-letting, more than two out of three recovered! What is the worth of general assertions in the face of such evidence?

these proposed—no matter how cruel or atrocious—would be submitted to in silence; but when people find out that every kind of disorder, inflammation included, may be conquered, not only by external but by *internal* means, they will pause before they allow themselves to be depleted to death, or all but death, by the lancet of either surgeon or physician. The world will not now be deluded by the opposition of men who stick to their opinion, not so much because they have long supported it, as that it supports them; men who, in the words of Lord Bacon, would dispute with you whether *two* and *two* make four, if they found the admission to interfere with their interests.

Will any practitioner be so bold as to tell me that inflammation of any organ in the body is beyond the control of internal remedies? For what, then, I ask, do we prescribe mercury for inflammation of the liver and bowels? Why do we give colchicum for the inflamed joints termed gout and rheumatism? Do not these remedies, in numerous instances, lessen the temperature, pain, and morbid volume of these inflammations, more surely and safely than the application of leech or lancet? If, for such inflammation, then, we have influential internal remedies, why may we not have medicines equally available for diseases of the lungs? Have I not shown you the value of prussic acid in such cases? But I shall be told of the danger of such a remedy in any but skilful hands. In the hands of the ignorant and injudicious, what remedial means, let me ask, have not proved, not only dangerous, but deadly? Has not mercury done so? Are purgatives guiltless? How many have fallen victims to the lancet? With prussic acid, properly diluted and combined, I have saved the infant at the breast from the threatened suffocation of croup; and I have known it in the briefest space of time relieve so-called inflammation of the lungs, where the previous pain and difficulty of breathing were hourly expected to terminate in death. True, like every other remedy, it may fail; but have we no other means, or combination of means for such cases? With emetics and quinine, I have seldom been at a loss; and with mercury and turpentine, I have cured pneumonia.

But will the inflamed heart yield to anything but blood-letting? Fearlessly I answer yes! and with much more certainty. With emetics, prussic acid, mercury, colchicum, silver, &c., I have conquered cases that were theoretically called inflammations of the heart, and which the abstraction of half the blood in the body could not have cured. So also has Dr. Fosbroke, physician to the Ross Dispensary, a gentleman who had the felicity to be associated with Dr. Jenner in his labours, and one in whose success and fortunes that illustrious man took the warmest interest. [See *Baron's Life of Jenner*.] In some of the numbers of the *Lancet*, Dr. Fosbroke has given several cases of heart-disease, which he treated successfully without blood-letting; and with a rare candour he admits, that a lecture of mine on the heart and circulation had no small influence in leading him to dismiss blood-letting in the treatment of them.

The human mind does not easily turn from errors with which, by early education, it has been long imbued; and men, grey with years and practice, seldom question a custom that, fortunately for them at least, has fallen in with the prejudices of their times. For myself, it was only step by step, and that slowly, that I came to abandon the lancet altogether in the treatment of disease. My principal substitutes have been the various remedies which, from time to time, I have had occasion to mention; but in a future lecture I shall again enter more fully into their manner of action. That none of them are without danger in the hands of the unskilful, I admit; nay, that some of them, mercury and purgatives, for example, have, from their abuse, sent many more to the grave than they ever saved from it, is allowed by every candid and sensible practitioner. But that was not the fault of the medicines, but of the men, who, having prescribed them without properly understanding the principles of their action, in the language of Dr. Johnson, "put bodies of which they knew little, into bodies of which they knew less!"

Gentlemen, I have not always had this horror of blood-letting. In many instances have I formerly used the lancet, where a cure, in my present state of knowledge, could have been effected without: but this was in my noviciate, influenced by others, and without sufficient or correct data to think for myself. In the Army Hospitals, I had an opportunity of studying disease, both at home and abroad. There I saw the fine tall soldier, on his first admission, bled to relief of a symptom, or to fainting. And what is *fainting*? A loss of every organic perception—a death-like state, which only differs from *death* by the possibility of recall. Prolong it to permanency, and it *is* death. Primary symptoms were, of course, got over by such measures; but once having entered the hospital walls, I found that soldier's face become familiar to me. Seldom did his pale countenance recover its former healthy character. He became the victim of consumption, dysentery, or dropsy; his constitution was broken by the first depletory measures to which he had been subjected.

Such instances, too numerous to escape my observation, naturally led me to ask—Can this be the proper practice? It was assuredly the practice of others—of all. Could all be wrong? Reflection taught me that men seldom act for themselves; but take, for the most part, a tone or bias from some individual master

By education most have been misled;
So they believe, because they were so bred.

Gentlemen, I had the resolution to think for myself—ay, and to act, and my conviction, gained from much and extensive experience, is, that ALL diseases may not only be successfully treated without loss of blood; but that blood-letting, however put in practice, even where it gives a temporary relief, almost invariably injures the general health of the patient. Englishmen! you have traversed seas, and dared the most dangerous climes to put down the traffic in blood; are you sure, that in your own homes there is no such traffic carried on—NO GUINEA TRADE?

In connexion with blood-letting, in the treatment of inflammation, we generally find

ABSTINENCE OR STARVATION

recommended. Beware of carrying this too far! for “abstinence engenders maladies.” So Shakspeare said, and so nature will tell you, in the teeth of all the doctors in Europe! Abstinence, Gentlemen, may produce almost every form of disease which has entered into the consideration of the physician; another proof of the unity of morbid action, whatever be its cause.—You remember what I told you of the prisoners of the penitentiary; but I may as well re-state the facts at this lecture. In the words of Dr. Latham, then, “An ox's head, which weighed eight pounds, was made into soup for one hundred people; which allows one ounce and a quarter of meat to each person. After they had been living on this food for some time, they lost their colour, flesh, and strength, and could not do as much work as formerly. At length this simple debility of constitution was succeeded by various forms of disease. They had scurvy, diarrhœa, low FEVER, and lastly, diseases of the brain and nervous system.

“The affections,” Dr. Latham continues, “which came on during this faded, wasted, weakened state of body, were headache, vertigo, delirium, convulsions, APOPLEXY, and even mania. When blood-letting was tried [why was it tried?] the patients fainted, after losing five, four, or even fewer ounces of blood. On examination, after death, there was found *increased vascularity* of the brain, and sometimes fluid between its membranes and its ventricles.” Is not this a proof of what I stated to you in my last lecture, that the tendency to hæmorrhagic development does not so much depend upon fulness of blood, as upon *weakness of the coats of the containing vessels*?—starvation, you see, actually producing this disease—in the brain at least.

CANDID TESTIMONY

Glen Haven Water-Cure, Scott, Cortland Co. N. Y., May, 16, 1850.

WM. TURNER, M.D.—Sir, I have procured and read Dr. Dickson's Chrono-Thermal System of Medicine, and have been greatly interested and instructed by it. As a physician, I am anxious to get all the light I can; and I candidly confess there is about the Chrono-Thermal philosophy, a lucidness and simplicity that, *prima facie*, stamps it as truth. Will you, though I am a stranger, do me the kindness to give me the information I ask relative to the works of which Dr. D. is the author, and how many are republished in this country?

Connected as I am with an extensive Water-cure establishment, and having, during the year, a large number of persons affected with chronic complaints, I have a fine opportunity to test the truth of Chrono-Thermalism. In numbers of instances I have found that the patients in this cure have their paroxysms, and intermissions and remissions.

I remain, Sir, your ob't serv't,

JAMES C. JACKSON.

Portland, Maine, Aug. 29, 1850.

I HAVE to thank you, my dear Sir, for a copy of Dr. Dickson's "Fallacies." He began in the right way, and you are following fast after him. I go for "bearding the lion in his den, the Douglass in his hall;" and shall read the work with great pleasure, I know, from what I have already seen of it.

Yours, truly,

JOHN NEAL.

To WM. TURNER, M.D.

Louisville, Ky., Sept. 14, 1850.

I AM still continuing to be very successful in all cases, whether chronic or acute, by the Chrono-Thermal treatment; in cholera, as well as in severe cases of palsy, &c. I use emetics and other Chrono-Thermal remedies in cholera, and seldom fail, even in the collapsed stages of the disease.

Believe me truly yours,

H. J. JONES.

DR. TURNER.

Watertown, Jefferson Co., N. Y. Aug. 4, 1850.

DEAR SIR—At the earnest solicitation of an intelligent female friend some time since, I accepted the loan of a book, and promised to read it, with the assurance on her part that I should be pleased with at least *some part* of its contents.

I read the title page with some misgivings and prejudice; fearing, if I read further, I should be compelled to add the portion of time thus spent to the already accumulated mass of misspent and useless time, in poring over Medical Theories and Practice, which had in too many instances served but little other purpose, to me, than to "darken counsel by words without knowledge."

The book, or pamphlet, was "The Chrono-Thermal System of Medicine" by Dr. Samuel Dickson. The term "Fallacies of the Faculty" attracted my attention and secured my perusal of the work, and the acknowledgment is frankly made, that at the close, I entertained entirely different sensations from those embraced at the commencement.

Indeed, of the dissection and fallacy of old and long cherished systems and dogmas exhibited by the author in his short lectures, I could but say, "multum in parvo" of truth elicited and error exposed.

I have for many years been in the practice of medicine—in other and more appropriate terms, have made pretensions to the "Healing Art," and have derived some consolation during the arduous and responsible vocation, from the reflection that so many hapless victims committed to my charge, have escaped with life, from the blunders and ignorance of my profession, and returned to a tolerable state of subsequent health!

My age "admonishes me" to withdraw from the active duties of the profession and I shall soon obey the admonition; but I cherish yet—as I have long cherished and hoped for—an ardent desire for a *radical* reform, both in the theory and the practice of medicine. Sir, truly and without reserve is the admission made, that for years have I been befogged and bewildered in the mazes and mysteries of an imperious hierarchy of medical Pathologists, whose proffered light poured upon my pathway had but little other effect, than to make the already darkness more visible. The perusal and reperusal of the work under notice, have produced an unexpected, but highly acceptable corruscation of

medical light upon that darkness, which till then had palled like an incubus upon all my efforts to extricate myself from the meshes and everglades into which an obscure and false theory of the schools had plunged me.

Many of the ideas and principles contained and lucidly exemplified in the Chrono-Thermal Lectures of Dr. Dickson, and as antagonistic to the doctrines of "the fathers," are in my opinion incontrovertible, and their examination, faithfully and impartially, would lead to conviction, conversion and adoption.

I am yet open to the conviction of further medical truths, and think that Dr. Dickson and yourself can easily furnish me *data* for such conviction.

My object in thus addressing a professional stranger is, to obtain further insight to the new system and pathology of disease, and to advance, so far as my agency or subsequent practice may be requisite or efficacious, the true principles of medical science and practice.

To this, and without further obtrusion upon your time and patience, I have to request that you furnish me with such new publications (if any) as may have appeared or emanated from the pen of Dr. Dickson, or others, corresponding with his Chrono-Thermal views.

I am ignorant of any recent works of Dr. Dickson, or others, upon the same system, and will cheerfully confide in your discrimination and selection for any work pertaining to the subject above.

Any communication from you *personally* on the subject at *any time* will be gratefully and duly acknowledged.

I remain an unknown friend of medical investigation.

Respectfully,

REUBEN GOODALE.

DR. TURNER, N. Y.

Pawtucket, R. I., Aug. 15, 1850.

DEAR SIR—The principles developed by our immortal Dickson are destined to triumph over all opposition; indeed I deem the day not far distant, ere the doctrines for which we contend will have become the dominant system of medicine throughout the civilized world, and the "regular faculty" will either be compelled to adopt the system, or they, being weighed in the scales of an enlightened public sentiment, will find written upon the walls of their colleges the significant words, "Mene, mene, tekel, upharsin."

Already are the "regulars" in this vicinity preparing themselves for the transition from error to truth, preparing themselves for a renunciation of the blind and contradictory dogmas of the past and for an avowal of the truth as it is revealed in Chrono-Thermalism.

Not many days ago, one of our most popular physicians (a regular of the regular routine school) avowed to a late patient who had not been benefitted by regular practice, but who had found immediate and great relief under Chrono-Thermalism, that he "had about made up his mind the lancet was of little use; indeed he now seldom used it but in extreme cases;" what class of cases his extremes are I know not. But this I do know, that Chrono-Thermalism has driven him where it will drive all the Sangradoes of our land, to a renunciation of the "murderous lancet."

Most truly yours,

J. EMERSON KENT.

DR. TURNER, 224 *Twelfth Street, N. Y.*

"BEFORE this book was put into our hands, with a wish that we would carefully read it and give it the result of our observations, we had heard much of it, and were desirous of an opportunity of examining its claims to attention. The periodicity of movement of every organ and atom of living bodies; the intermittency and unity of all disease; the unity of action of both cause and cure, constitute the ground work of the Chrono-Thermal system. The treatment recommended is eclectic, and totally different from what has been usually practised; and some, allowed to be of the highest order of medical genius, have predicted that it will make a total revolution in the practice of medicine. Dr. Turner has successfully tested its principles, and nothing can better show the value of the system than the way in which it has been disguised, plagiarized, and claimed indirectly by medical men of standing and repute. The sections on apoplexy and rheumatism are well worth attention.—*N. Y. Christian Intelligencer.*

SAVAGES DO NOT BLEED THEIR FRIENDS.—Lahontan, in his voyages to North America (published in London, in 1703, vol. 2, page 49) says:—"The Indians are yet more astonished at our custom of bleeding, for," say they, "the blood being the taper of life, we have more occasion to pour it in than to take it out, considering that life sinks when its principal cause is moved off; from whence, 'tis a natural consequence, that after loss of blood, nature acts but feebly and heavily, the entrails are overheated, and all the parts are dried, which gives rise to ALL the diseases that afflict the Europeans!"

Sensible savages! The Academy of Medicine must black ball them, or fudge up an indictment against them. Brutes that they are, how dare they blaspheme the holy lancet of the blessed Sangrado?

ANOTHER SAVAGE!—Dr. John Forbes, of London, Queen's Physician, says in the London Lancet (queer place to say it in) that *excessive bloodletting is frightfully misused*. Where is the Grand Jury?

P. S.—SAVAGES ALL ROUND.—Dr. Reese, in his last New York Medical Gazette, refers to "the hue and cry which quackery (?) * has raised [against bloodletting] and to which popular ignorance and superstition has [have] succumbed." Which means, being translated, that patients will no longer stand the swindle of being robbed of their life-blood by the lancet of Sangrado. That accomplished traveller, Sir William Temple, says, that "the Chinese never let blood." Sensible chaps, those Chinese!

N. Y. Sunday Courier.

WHAT GOVERNMENTS SHOULD DO.—Dr. Frank, one of the most accomplished of the "regular," or Allopathic, physicians in Europe, says with a frankness becoming his name and his character: "Governments should either at once banish medical men and their art, or they should take proper means that the lives of people may be safer than at present, when they look far less after the practice of this dangerous profession, and the murders committed in it, than after the lowest trades."

For the period of five hundred years, according to Pliny, the historian, Rome banished the doctors from the eternal city, and prohibited their medical practice.—*Ibid.*

The New York *Courier and Enquirer* of August 25th, 1849, published a communication entitled "The Humbug of Bloodletting," by "An Enemy to Quackery," which the editor welcomes to his columns, as being "from the pen of one of our most eminent physicians," whose "high professional and social standing repudiate the idea of prejudice on a subject which so closely involves the welfare or the ill of man." The author calls the bloodletting treatment, "a revival of the Sangrado practice. It is the revival of that practice, neither more nor less. Whether the fashion originated in Paris or London, is doubtful; they rival each other admirably in it, at any rate. Paris is now a daily scene of Sangrado murders, as London is fast becoming."

Dr. Turner's memorial against bloodletting threw two of the principal papers of Philadelphia, the *North American* and the *Ledger*, into spasms. The former paper refused, as an act of justice, to publish the letter below. The explanation for this strange conduct may probably be found in the following statement of the above-cited "Enemy to Quackery." "The head-quarters of bloodletting in this country are located in PHILADELPHIA! Here the lancet is continually in requisition, and thousands are, no doubt, hurried to the grave-yard by the pernicious effects of a practice that only needs a little PUBLIC REPROBATION to cause it to be discontinued altogether."

To the Editors of the Philadelphia North American.

In my memorial to the New York Legislature, praying that the use of the lancet in diseases may be made penal, I stated that "I commenced the study of medicine nearly a third of a century ago," and that I had arrived at the result that the lancet is destructive, from "my study and my observation of the experience of others."

In your columns, I am represented as saying that I have practised medicine for half a century, and that my experience convinces me that the habit of bleeding is destructive of health and life. As my memorial is short (only forty lines), such inaccuracy is inexcusable.

You are facetiously pleased to add:—"We may put down Dr. William Turner as a very modest member of the faculty." Verily, according to your representation, I say so, too! The man who publicly declares that he practised medicine before he was born, and who calls upon a legislative body to prohibit a practice which his own experience has shown to be destructive, can be nothing else but the incarnation of modesty.

I enclose a copy of my memorial, which will enable you (if not too great a strain upon your editorial conscience) to set me right before your readers.

Your obedient,

WM. TURNER, M.D.

NEW YORK, March 29, 1851.

* Physicians in all ages, according to John Wesley, have always branded as quacks "those who understood only how to heal the sick."

AUBURN, N. Y., Sept. 20, 1846.

My dear Sir—My copy of your reprint of Dickson is travelling through the neighborhood continually, doing much good.

There are two masses in society; the one obeys impulses of progress, the other resists innovation. They mutually check each other. The world sympathizes with those who yield to the impulse in the science of medicine. You are sure to have the world with you. But of course you must contend with those whose comfort and interests are involved in adhering to established systems.

I remain, faithfully yours,

WM. TURNER, M.D., N. Y.

WM. H. SEWARD.

Chancellor KENT to Dr. TURNER.

New-York, No. 26, Union Square.

"Mr. Kent begs leave to return his thanks to Dr. Turner for Dickson's 'Principles of the Chrono-Thermal System of Medicine.' He has dipped into it very superficially, but has read enough *sparsim* to say that it contains very interesting views of a science of which Mr. K. professes to be very ignorant, and speaks of it with great diffidence. He is one of that class of persons who never had much faith in physic, and has rarely permitted himself to be subject to its discipline. He has always had great horror at the pernicious practice of blood-letting, and prefers cold and warm water infusion, simple diet, temperance, exercise and cheerfulness, to the whole *Materia Medica*. By this means, and with the blessing of Providence, he has enjoyed uninterrupted health from early life to this day, and he will be eighty-two in July.

"He thinks that Dr. Dickson's book is calculated to be very useful, as well as very entertaining, and he avails himself of this opportunity to assure Dr. Turner of his very high respects.

"May 17th, 1845."

Sir ASTLEY COOPER to the Author of the "Chrono-Thermal System."

"Dear Sir: I thank you most sincerely for your valuable work. I have not the least objection to being *unchemical*, if I can be *useful*; and I agree with you that the living stomach is not a Wedgwood Mortar.

"Yours truly,

"Dr. Dickson, Clarges-street, Piccadilly.

ASTLEY COOPER."

New-York, Feb. 10th, 1840.

To His Excellency William H. Seward, Governor of the State of New-York:

The undersigned citizens, practitioners of medicine in the City of New-York, being acquainted with the character and standing of their respected associate, William Turner, M.D., and having great confidence in his integrity, believing him to be fully qualified professionally, and bearing witness to the importance and value of his long sustained political services, do earnestly and confidently, though respectfully, recommend him to your Excellency to the office of Health Commissioner to the port of New-York.

John W. Francis, M.D., G. S. Bedford, M.D., A. L. Anderson, Marinus Willett, M.D., John B. McEwen, M.D., Alexander B. Whiting, M.D., Charles S. Nichols, M.D., S. Sterry Lawrence, M.D., John H. Griscom, M.D., Wm. Halsey, Jr., M.D., John G. Conger, M.D., Samuel S. Kuypers, M.D., John H. Harlow, M.D., Wm. Everett, M.D., J. E. Stillwell, M.D., B. Drake, M.D., A. W. White, James Stewart, M.D., Chas. A. Lee,* M.D., Wm. B. Blakeman, M.D., Wm. Baldwin, M.D., Jared Linsley, M.D., Wm. Miner, M.D., Jas. R. Wood, M.D., P. S. Brady, M.D., John A. McVickar, M.D., Stephen D. Allen, M.D.

Another letter, dated Feb. 8, 1840, was signed by William H. Hobart,† M.D., Lewis R. Hallock, M.D., A. S. Doane, M.D., Dr. B. B. Edwards, S. R. Van Kleek, M.D., G. W. Embree, M.D.

The foregoing testimonials were unsolicited by the party recommended, and, as the following shows, were wholly gratuitous, uncalled for, and unnecessary:—

Albany, Feb. 12th, 1840.

MY DEAR SIR,—Your favor of the 8th has been received. I am not aware that there is any necessity for documentary proof of your ability and qualifications for the office of Health Commissioner. Your nomination has been already submitted to the Senate, and I have not the slightest doubt of its confirmation.

Very truly yours,

WILLIAM TURNER, M.D., New-York.

WILLIAM H. SEWARD.

* Late Editor, &c., of the New-York Journal of Medicine.

† Physician to the St. Nicholas Society, New-York.

THE END.