Dispensaries : their origin, progress, and efficiency / by Wm. S. Ludlum.

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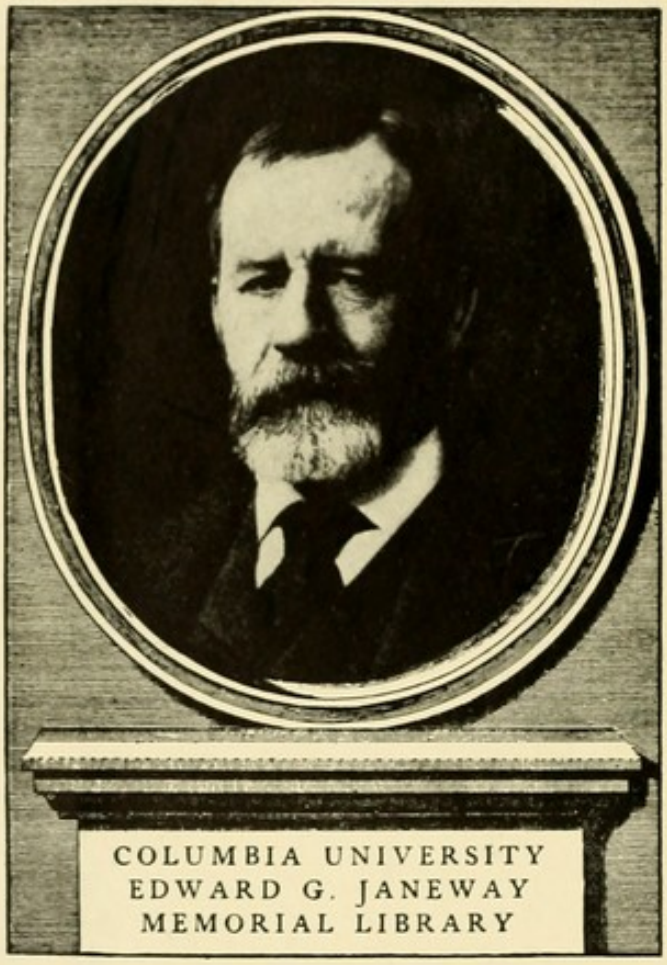
DISPENSARIES, THEIR ORIGIN



DISPENSARIES

THEIR

Origin, Progress and Efficiency

BY

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DISPENSARIES;

THEIR

ORIGIN, PROGRESS AND EFFICIENCY.

Read before the New York Medical Journal Association, on Friday Evening, April 21st, 1876.

"MR. PRESIDENT AND MEMBERS OF THE ASSOCIATION:

"Your attention is first invited to a partial consideration of the latter portion of my subject, viz., 'The Efficiency of Dispensaries.' I shall begin with the re-publication of a certain anonymous volunteer contribution of my own, which appeared in the New York *Daily Times*. I was aroused to write this article on account of the previous appearance in the same journal of an inflammatory account of the case of an English woman named Ann Tipple, who was brought before the magistrates in the City of London for violation of the requirements of the Vaccination Act. This article of mine contains quotations from that inflammatory account, and gives certain dispensary statistics and personal experience connected with vaccination, in which department of medical service Dispensaries have done peculiarly effective work. And one object which I have in view in re-publishing it on the present occasion is to correct certain typographical errors which were

overlooked by the proof-reader. Here follows the article in question :

"*To the Editor of the New York Times :* 'Is Vaccination Dangerous?' This question was propounded in the New York *Times* on Monday, August 30 (1869), and with it an invitation for the doctors to come forward with reasons for their *faith* in vaccination. But the burden of proof naturally lies with those who doubt the efficacy of vaccination. Those who make the general statement that vaccination is dangerous, might be very properly called upon to establish the general fact, and the appeal can be made to general experience. If the general verdict of the world is against vaccination, the fact would be beyond the range of either faith or discussion. Waiving, however, the right usually conceded to the defence with regard to the burden of proof, this much may be said now, viz., that Ann Tipple's experience amounts to nothing ; and if it were multiplied fifty-fold, it would make but slight difference among the almost infinite number of cases where vaccination has *not* been followed by deleterious results. Exceptions to the general rule do not militate against it.

"Ann Tipple, it appears, was so unfortunate as to lose *one* of her children three days after it was vaccinated, but how many children, in the course of time, died in consequence of taking the small-pox from the other four who were not vaccinated ? and how many other children were exposed to danger by such neglect ? If in this woman's experience is summed up the indictment against Jenner's discovery, let us have *all the facts*, in order that we may form an intelligent and logical conclusion respecting this narrow aspect of the case, as it is given to us. Let us grant, for the sake of argument, let us grant that death was the consequence of vaccination in the case of one of Ann Tipple's children. Even then vaccination, with

all its dangers (if it have any danger in itself), would be preferable to allowing the general mass of children to incur the risks they are naturally liable to if not protected by vaccination. If one child in ten were actually lost in consequence of vaccination, the general good would be promoted in giving the other nine the benefits of vaccination. Anomalous cases are, after all that may be said, of very little account.

"As a *general rule*, vaccination is of great benefit, and the fact is established by the strongest testimony that man can have, viz., the testimony of his own senses. That vaccination is beneficial is not a matter of faith or belief *now*, but a matter of fact. Repeated trials, conducted through a long series of years, have settled the question whether vaccination is beneficial in the long run or not. And how is it beneficial? In two ways. First, it is beneficial as a preventive. Under its protection the vaccinated have gone fearlessly among patients sick with small-pox, and, as a general rule, escape contagion; whereas, as a general rule, the unprotected thus exposed, become infected. This has been tested time and again all over the world, and the general verdict of mankind is that a reasonable reliance may be placed upon vaccination as a protection against the virulence and dangers of small-pox.

"'But,' you say, 'Vaccination is not a certain preventive in every case.' Granted. There are exceptions to most rules, perhaps to every rule, as far as our knowledge extends. But vaccination is known to be capable of modifying the course of the disease in those persons who happen to have small-pox subsequently. According to general experience, that is a well-established fact. And this is the second way in which vaccination proves to be beneficial.

"Small-pox, as a rule, is a protection against itself, but that rule is liable to exceptions. If small-pox itself is no absolute protection against recurrence of the disease, it is no

very great wonder that vaccination in some individuals, under certain conditions, fails to protect them. But such exceptions do not militate against the general rule.

"The benefits of vaccination consist, then, either in *preventing* the disease altogether, or in so *modifying* the constitution that the disease runs a milder course. 'But vaccination, in certain cases, has been followed by unexpected and lamentable results.' Granted. *Untoward results sometimes* follow the application of vaccine matter, *even of the purest kind.* For example, ten children are vaccinated with the very same matter, ground up into a paste of uniform consistency and character throughout; the arm of one of those ten children inflames greatly, perhaps; gangrenous erysipelas sets in and the child dies; but no such result obtains in case of the other nine, vaccinated with the self same matter and applied by the same vaccinator with the self-same instrument. In the nine the vaccine pustule, undisturbed, runs a natural and easy course. Now, what is the reason for this difference? It is clearly not traceable to the matter employed in the vaccination. The untoward result in the one case is simply associated with the vaccination on account of certain indefinite and perhaps unknown contingencies. Other circumstances must be ascertained and taken into account, and these circumstances vary with each particular case.

"From constitutional and other causes, untoward results occasionally follow very simple surgical operations, but the means employed are good in themselves, and they should be employed, notwithstanding all the risks; for by avoiding such operations, you do not escape danger, but on the contrary, become liable to greater dangers. This is especially the case in regard to vaccination, as a precaution against danger. It can not prudently be neglected. It is as illogical as it is unwise to single out individual cases and give them undue

importance. The proper mode of studying out this question is to consider its bearings on communities. Then it will be learned that small-pox is more prevalent and more widely fatal among those who systematically neglect vaccination; but the disease is less common and less dangerous among communities where vaccination is systematically encouraged, and especially when it is enforced by regulation or law.

"Among sanitary laws and regulations, those relating to vaccination are among the most salutary and least troublesome of any that have ever been devised. Those now standing on the statute books of various European countries (1869) have proved to be the best bulwark against a loathsome and terrible scourge.

"The comparatively low rate of mortality from small-pox at present (1869) is owing to the fact that the advantages to be gained from vaccination have been so extensively embraced.

"If such sanitary regulations were persistently disregarded, the neglect would undoubtedly be followed in a few generations by the appearance of small-pox in its old-fashioned vigor, to decimate communities now comparatively free from the ravages of the disease.

"In answer, then, to the question, 'Is vaccination dangerous, *per se?*' I for one answer, 'No!' and appeal to facts in support of the answer.

"Isolated facts furnish a very insecure and fallacious foundation for forming a correct opinion in any matter. Exceptional cases oftentimes furnish the most potent proofs of the general rule which they seem to invalidate, when you come to examine them *thoroughly*. The fullest account that we have received of poor Ann Tipple's experience is very meagre, to say the least of it. She had too much interest, moreover, in making an unfavorable statement, in order to avoid the penalty with which she was threatened. The testi-

mony of a prisoner at the bar is worth very little, unless corroborated. But suppose her individual experience was truly understood by herself as a witness, and truly reported without exaggeration, the personal experience of the writer will more than counterbalance it.

"The writer was vaccinated in infancy, as he is informed, and bears the mark of it well impressed on his left arm, without any disadvantage in consequence. With equal safety he was consciously vaccinated twice subsequently during childhood and youth. As is commonly the case, the vaccinations subsequent to the first one in infancy were attended with less marked manifestations than those which accompanied the first vaccination.

"Subsequently, during adult life, having professional duty to discharge in a hospital devoted exclusively to small-pox patients, as a matter of precaution I vaccinated myself (that being the fourth vaccination in the course of my life), prior to entering on daily duty, and spent many days among the patients under my care, visiting them at least twice a day.

"If any one was ever thoroughly exposed to the contagion of small-pox, I was; and if there be any protective power in vaccination, my immunity from the disease is manifestly traceable back to the first vaccination; for the subsequent trials of the vaccine virus upon my person in childhood and youth amounted to next to nothing, and the vaccination in adult life, three days prior to entering on duty in the small-pox hospital, did not take at all. From these facts one of two inferences naturally follow, viz., either that effectual vaccination in infancy wrought such a change in my constitution that I had lost all susceptibility to the contagion of small-pox for the time being, or else I was born without any susceptibility to the disease.

"As far as my own conclusions extend, I am inclined to

believe that my immunity from small-pox for forty years (I may now add for forty-seven years) is clearly owing to the fact that I was well vaccinated in infancy.

"Relying on this safeguard, I would not hesitate in the least about approaching a small-pox patient, as far as I am personally concerned. To claim any special privilege above the majority of my fellow men in regard to innate immunity from the disease seems to me preposterous and absurd. But your readers may draw their own conclusions and accept either horn of the dilemma. Thus much with regard to vaccination in my own person, with regard to vaccination in others, I can say that in every case that has come within the sphere of my observation, no such result as Ann Tipple says that she experienced in one of her children occurred in a single instance.

"In the year 1865, when there was considerable anxiety among the community in the city of New York with regard to small-pox, and mothers came in great numbers to one of the dispensaries of this city (viz., the Northern Dispensary to which I was then attached) to have their children vaccinated, some difference was noticeable among the children after vaccination, but such difference had no direct connection either with the virus employed, or the mode of its application. During the months of January, February and March (in 1865 at the Northern Dispensary) 8,741 children were vaccinated (by Dr. E. B. Warner, myself, and others who took part in the work), and there was not a fatal case among the whole number. Among such a large number there was, of course, a difference of manifestations connected with the course of the vaccine pustule, but this difference invariably arose out of circumstances connected with the previous condition, surroundings, and original constitution of the child in whom the difference was exhibited.

"Even healthy children are not all alike in respect to irritability of temperament, and the course of the vaccine pustule will be governed accordingly, but once in a great while *perhaps* one child out of a vast multitude might have a highly inflamed arm subsequent to the insertion of the vaccine virus, and in consequence of neglect, or mismanagement, mortification and death ensue, as in the case of poor 'Ann Tipple's child.' But such an extraordinary case is an anomaly. The occurrrence of exceptional cases may be very sad to contemplate but their importance should not be unduly magnified. (Some careless feeders have choked themselves to death in eating roast-beef even of the very best quality.)

"The great practical object to be aimed at is to secure the greatest amount of good to the greatest number of persons (in vaccination and other matters.) As a preventive measure against the spread and virulence of small-pox, vaccination is practically the best method. That is the general verdict of all who have had anything like extensive acquaintance with regard to vaccination and small-pox. It is a very fallacious line of argument that is based upon exceptional cases.

"There are contingencies which are beyond the science and art of men to control, and such contingencies unfortunately exist in every department of (life as well as in) medicine and surgery. If such contingencies and the failures in guarding against them in medical art and surgical practice are to be unduly magnified, we might as well abandon all remedial measures, for the best remedial measures have never yet been invariably successful (in all cases.) As science advances we may, perhaps, be able at a later day to confine the dangers arising out of obscure contingencies within (still) narrower limits (than at present.) As far as small-pox is concerned, the path of safety lies not in discouraging but in encouraging universal dependence in vaccination as practically the best known pre-

ventive and modifier of such a terrible disease (and the managers of the public prints will be doing good service if they avoid publishing accounts of extraordinary cases, as sensational matter, even if true.)

"According to the bills of mortality in the City of London from 1700 to 1800, before the introduction of vaccination, the average annual mortality from small-pox was 1,780, in a population of 261,233, that is, *one* in 147. From 1800 to 1855, after the introduction of vaccination, the average annual number of deaths (from small-pox) was reduced (by vaccination) to 821, with a population of 2,250,000, that is, one in 2,740.

"According to the record kept at the Royal Military Asylum, it appears that out of every thousand boys admitted, who had been vaccinated effectually, only 7 $\frac{6}{100}$ were subsequently attacked by small-pox, and not one fatal case occurred among those affected with modified variola.

"From the records kept at the London Small-pox Hospital, where patients of all ages are to be found, the mortality among those who had been effectually vaccinated was less than $1\frac{1}{2}$ per cent., while the mortality among those who had not been vaccinated averaged $27\frac{1}{2}$ per cent. The facts with regard to vaccination and small-pox have been thoroughly studied out in England, and the statistics of that country can be relied on.

"The Act of Parliament which Ann Tipple violated, was passed in 1853, and under its provisions parents and guardians are obliged to have every infant vaccinated within four months from birth, *unless* the state of the child's health renders it necessary to postpone the operation. It is one of the best legislative acts ever passed. It is not based on theory or faith in a result to be expected, but it is the fruit of practical observation, extending as far back as the year 1795. For more than half a century evidence has been accumulating that

vaccination, as a general rule, is of great practical benefit. There are, and there perchance always will be, occasional exceptions to the uniformity of the results. But, sum up all the unfortunate cases to be discovered and credit them to the various accounts to which they properly belong, as for example, 'gross carelessness,' 'unskilfulness,' 'mismanagement,' or 'unavoidable contingencies,' and still the maxim holds good that it is better for the community at large to rely on vaccination than to do without it." * * * * * *
—*N. Y. Daily Times, Sep.* 5. 1869.

So much for this article, as revised, corrected, and slightly amplified by the author. I have introduced it here in order not to break the continuity of thought in other matter, by another hand, relating to the same subject, which I will reach subsequently.

At this point I may now, however, introduce one of the most recent opinions delivered by an English authority in respect to the efficiency of methods employed for preventing the spread of small-pox. In this country we have largely contributed to that end by means of dispensaries. From the opinion expressed by Wm. Squire, M. D., M. R. C. P., Physician to St. George's Dispensary, Hon. Secretary of the Epidemiological Society, &c., &c., in a paper entitled "On Sanitary precautions against the Infectious Eruptive Diseases," read before the last meeting of the "National Association for the Promotion of Social Science," in the Public Health Section, as reported in the "*London Practitioner*" for February, 1876, pp. 163 and 164, we may learn what dangers appear to threaten the English people from remissness in this direction. Mr. Squire says, among other things, "Until quite of late we have retrograded in the matter of providing against infectious eruptive diseases, and the old buildings, once com-

monly known in England as the 'pest houses,' have disappeared, without being replaced. * * * * * Vaccination so far suppressed small-pox that those refuges became vacant; less accommodation of this kind is now needed, or more rarely required, but it is not safe or right to do away with this prime necessity in dealing with infectious diseases; unless the first unit of disease be controlled, we cannot be sure how far it will extend; circumstances might at any time arise which would make it spread; cold, want, war, famine, or even the temporary predominance of the social errors, which find expression in anti-sanitarian societies, might admit pestilence. What this last element may do in again disclosing to us the ravages of small-pox I will illustrate by some facts from that greatest of modern medical observers, Wünderlich of Leipzig. In 1868, he tells us that the number of children vaccinated in Leipzig—a town then of 106,000 inhabitants—was 3,443; in 1869, the number vaccinated was 1,970, and in 1870 it had fallen to 1,340.

"Anti-vaccination leagues, clubs, and papers, had so prevailed, that one half of the children born at this time were unvaccinated. One reason of this was, that for twenty years small-pox was almost unknown in Leipzig. But now came the war with France; prisoners were received in Leipzig, and with the French prisoners came in small-pox; in little more than a year from the end of 1870, one thousand and twenty persons died of small pox in Leipzig, or one per cent. of the entire population; of the deaths 312 were adults, and 715 *children*, instead of the number of deaths being greater in those over 15 years of age as in protected communities. Imagine such a state of things to be arrived at in London, and thirty thousand children would be swept off in one year, * * * by a form of death from which the adults, who allow it are exempted by the very means of safety which they

deny to these helpless victims." I pass now to the first topic of my paper, viz., the Origin of Dispensaries, and in regard to this matter I shall borrow liberally from another, and give his own words entirely.

Among other remarks made at the 36th annual meeting of the subscribers of the Northern Dispensary, held at the Institution January 9th, 1863, Judge Charles P. Daly spoke as follows: *

"In contrast with hospitals, dispensaries are of comparatively recent establishment; and it is curious that so little has been collected in relation to their origin and history. We would naturally suppose that an institution so useful and so widely disseminated would, ere this, have found a chronicler; that it would be necessary only to look into the encyclopædias, those books of universal reference, to find a condensed account of all that was known respecting them; but it may surprise my hearers to learn that these works are almost barren of information upon the subject, and the remark applies not only to those in our own language, but to the more elaborate works of this kind in France and Germany. Even in the very last of these productions, the American Cyclopædia, from which, having the advantage of all that preceded it, we should expect to find a greater variety of subjects embraced; the word Dispensary does not even occur. As I happen to have gathered, in discursive reading, some information upon this subject which is not very easily obtained, as it is scattered over many works differing widely in character from each other, it may prove interesting on an occasion like this to communicate it.

"It appears strange to us that among nations so refined and cultivated as the Romans and the Greeks, no hospital or

* 36th Annual Report of the Board of Trustees of the Northern Dispensary, 1862.—N. Y., 1863, p. 7, *et seq.*

institution, where the sick could be taken charge of and cured, was established.

"The first hospital, at least, of which we have any knowledge, was founded by a benevolent bishop, named Nonus, at Edessa, in Mesopotamia, A. D. 460, a place then famous for its school of theology; and the first institution of the kind in Europe was built in the same century, at Rome, by Fabiola, a Roman lady, a friend of St. Jerome. In the sense, however, in which we understand it, an institution devoted exclusively to the reception and care of the sick, the hospital cannot be said to have existed until the eleventh century, as the establishments in use before that time were not designed alone for the sick, but also for the reception and refreshment of travelers and pilgrims.

"By the statutes of nearly every monastery, the tenth of its proceeds or revenues was devoted to the poor; and to carry out this charitable design, a stone building was erected, generally close to the church, called the '*Almonry*,' from which we get our modern word '*Almshouse*.' In connection with the building was a very active officer called the '*almoner*,' who had the management of this establishment, and who, among many other benevolent duties, was required to find out the sick and infirm poor, and to administer to their wants and necessities.

"There was also attached to every monastery a large garden, devoted to the rearing of esculent plants and medical herbs. * * * * There was also an officer called an '*infirmarer*,' whose especial duty it was to take charge of everything designed for the sick, and in some of the monasteries an apothecary shop was kept, which was under his direction. To the almonry the sick-poor flocked from all quarters, and when it was necessary, the almoner visited them at their place of abode. This officer necessarily prosessed some little knowl-

edge of medicine, especially of the healing properties of plants, but it was very limited. The art of medicine had then made but little progress; bleeding was the remedy almost universally resorted to, with the application of plants to the healing of wounds, and probably the most effective service which the almoner rendered, was in supplying what is so necessary in sickness, nourishing food and drink. In that age, however, he was of inestimable value to the poor, uniting, as he generally did, the many offices of alms-giver, physician, apothecary, religious consoler and friend. * *

"As the knowledge of medicine advanced, physicians, pursuing the art as a calling, began to practice in the cities; and in Zurich and in many of the German cities there was what was called the *stadt-arzt*, or city physician, usually a man of eminence, on whom the duty was especially imposed of prescribing for and attending upon the poor of the city, he receiving from the city annually, in honorable recognition of his services, certain household benefits, such as his yearly firewood, a pipe of wine, or something of that kind, in addition to which he was repaid for the medicines which he supplied to the poor.

"After the dissolution of monasteries, the duty of visiting the sick poor at their abodes, and supplying them with gratuitous medical aid and assistance, was very much neglected. * * * * * A want was felt, and this led to the origin of the modern dispensary, the first step towards which occurred in the middle of the sixteenth century, and for which the world is indebted to a woman. Sattler tells us, in his 'History of Würtemberg,' that in A. D. 1559, a noble-minded and benevolent woman, the wife of Duke Christopher, then the reigning Duke of what is now the kingdom of Würtemberg, caused an apothecary's shop to be erected in the ducal palace at Stutgardt, for the purpose of supplying medicines to the

poor, which she maintained at her own expense. In 1560 her example was followed by the wife of Philip II., of Grubenhaugen, a princess of Brunswick, who supported, at her court, an apothecary's shop and still-room for the benefit of the poor; and it would, perhaps, be interesting to quote the language of the old writer by whom the fact is recorded. It is from Lettzner's Chronicle, 1596. 'By her apothecary's shop and still-room,' he says, 'we may discern what real compassion this Christian-like Electress showed towards the poor who were sick and infirm; for, by having medicines prepared, and by causing all kinds of waters to be distilled, she did not mean to assist only her own people and those belonging to her own court, but the poor in general, whether natives or foreigners, and not for the sake of advantage or gain, but gratis, and for the love of God.'

"Professor Spittler, in his 'History of Hanover,' informs us that in 1568 the wife of the reigning Duke of Brunswick kept, for the use of the poor, an expensive apothecary's shop in her palace; and Beckman, by whom this information is collected, mentions another instance, that of the Electress Ann, a Danish princess, who, in 1581, established an apothecary's shop at the Court of Dresden, which, in 1609, was renewed by another woman, Hedwig, the widow of the Elector Christian II., and which, I believe, is still in existence.

"We are thus indebted not only to a woman for the establishment of the first hospital that was founded in Europe, but we owe to five women the first attempts to meet a want which the modern dispensary supplies. In Germany, the dispensary, as a distinct and separate institution, does not exist; its place being supplied by the admirable hospital arrangement which prevails there. * * * * * * The dispensary and the hospital are wisely combined under one general system of management (in that country.)

"The dispensary as a *separate* institution, had its rise in England; and, as the history of its origin is curious I will narrate it. Before the close of the 17th century, the apothecaries of London had very generally adopted the habit of giving medical advice gratis, charging only for the medicines. The incorporated physicians denounced the practice as a device resorted to by men wholly uneducated in the healing art, solely from an interested motive, that they might increase thereby the sale of their medicines; while the apothecaries, on their part, declared that the miserable state of the sick poor, and the inability of that class to employ a regular doctor, rendered the giving of gratuitous medical advice, in connection with the sale of medicine, an act of necessity and charity. To remove this ground of complaint, the College of Physicians and Surgeons, in 1687, resolved by public act, that all its members should attend the neighboring poor without charge; and the apothecaries, who saw in this movement a serious diminution of their profits, managed to frustrate it, chiefly by fomenting dissension in the college, and, being an active body cemented together by mutual interest, they succeeded in arraying in their behalf a considerable amount of public support, and in keeping up a controversy which extended over a space of 16 years.

"Failing in their first effort, the doctors resorted to another measure. They turned the laboratory of their college, in Warwick Lane, into an apartment for the making up of medicines, which they disposed of, in a room adjoining, to all who applied at first cost. To the apartment they gave the name of the Dispensary, a term formed from two Latin words, *dis* and *pendêre*, meaning to take from a weight or mass and distribute; and which was derived from a well-known word in use in the middle ages, *dispensatorium*, afterward corrupted into 'dispensatory,' signifying in the early hospitals, the place

where the substances used in the preparation of medicine were kept, and from which they were distributed, and which term was also used as the title or distinguishing name of the first books which were published upon the natural history of the substances which enter into the composition of medicine. All the efforts of the apothecaries were now directed toward the breaking down this establishment of the doctors at their college in Warwick Lane, against which it struggled for some time with indifferent success. A paper war of unusual animation followed, a flood of pamphlets appeared, and the poets mingled in the strife. Sir Samuel Garth, an eminent physician, published a mock-heroic poem in six cantos, called 'The Dispensary,' which has taken its place in our literature, in which the leading apothecaries were most unmercifully ridiculed, and which had great popularity in its time. Dryden came to the support of his fellow-poet, in some stinging satirical lines against the vendors of drugs, a couplet of which I remember :

> "From random files a recipe they take,
> And many deaths with one prescription make."

"And Pope espoused the cause of the doctors with some of his most trenchant verse. As the controversy progressed, the doctors gathered strength. In 1694, the college, by a positive edict, enjoined upon all its members the duty of attending the sick-poor gratis, and to maintain the Dispensary, fifty-three physicians, in 1696, entered into a liberal subscription of ten pounds each, after which measures the establishment became a complete success, as the poor very naturally resorted to a place where they could get their medicine at one-third less than the apothecaries charged, and where they had, in addition, the benefit of the very best medical advice gratis. The apothecaries now resolved upon a bolder course, that of visiting patients at their own houses, and prescribing for

them gratuitously. This, in the judgment of the physicians, was practising physic, and they waited but for a convenient opportunity to bring down upon their adversaries all the vengeance of the law. It soon occurred. A butcher named Scale fell sick of a distemper, and sent for a neighboring apothecary, called Rose. The latter went to the butcher's house, ascertained the nature of the disease, and prescribed for the patient, charging only for the medicines. The college immediately brought an action against the apothecary, in the Court of King's bench, for practising physic without a license. The prosecution of this action became a matter of great public interest, and the point involved was considered so doubtful, that the case was argued *three* times—a very unusual circumstance. Finally, the court decided unanimously, that practising physic was judging of the nature of the disease, and prescribing the proper remedy, which they held to be a physician's vocation; and that the business of an apothecary was to make and prepare prescriptions under the direction of a doctor. They accordingly gave judgment against Rose. An appeal, however, was taken to the House of Lords, and, by what has been regarded as a very questionable decision, the judgment of the Court of King's bench was reversed, to the great joy of the apothecaries. It is to this controversy that we owe the successful establishment of the Dispensary, for although the Royal General Dispensary of London, now the oldest existing institution that distributes medicine gratuitously, was not established until 1770,* it had its origin in the circumstances which I have narrated. * * * *

[So much for the establishment of the Dispensary in England.]†

"The Dispensary, as a permanent institution, was not established in France until 1803. About the middle of the

* Daly, in 36th Annual Report Northern Dispensary, in 1862.—N. Y., 1863, p. 12.
† Ludium.

previous century, however, Chamouset, the son of a distinguished judge, and who was himself advocated for the magistracy, having his attention drawn to the wretched state of the sick poor in Paris, from the want of medical attendance, studied medicine and devoted the remainder of his life, with the most untiring zeal and assiduity, to practising gratuitously as a physician among the poor. He not only did this, but devoted the whole of his fortune to the same noble object. He turned his house into a hospital for the reception of poor patients, whom he maintained at his own charge, and from which medicines and medical advice were furnished upon application, gratis; and at all hours of the day or night he was ready, at any summons, to visit the bed-side of the sick and wretched. This remarkable man was not simply a mere benevolent enthusiast, he was a man of great good sense, of acute observation, thoroughly acquainted with human nature, and of a practical and original turn of mind.

"He was the originator of the penny-post and of insurance against fires in cities; and, among other valuable suggestions, he devised and published a plan for the organization of an extensive association in Paris among the poor and working classes, by which every man, by the payment of a small sum of money, at fixed periods, might insure his being well taken care of, with the best medical treatment, in case of sickness. The suggestion was not lost, though nothing came of it until 1803, when the Philanthropic Society of Paris established five dispensaries for the relief of the sick poor. The beneficial effect became at once apparent, and similar institutions were almost immediately established in Lyons, Besançan, Nantes, Caen, Montpelier and Marseilles."*

Now I turn to General Mather's account of dispensaries, as given in the last annual report of the Demilt Dispensary in

*Daly, Ib. p. 13.

the City of New York, for the year ending December 31st, 1875.

Frederick E. Mather, Esq., the President of that Institution, has given a very elaborate account of dispensaries existing among those who speak the English language and its associate dialects. This account I will condense. He speaks first of the "Royal General Dispensary" above mentioned by Judge Daly, as the first institution of the kind in England.*

Then he passes to the results of the establishment of that dispensary, and says, "that within the next twenty years, nine other dispensaries were organized in London," and they all are still in existence. Then General Mather passes to dispensaries in Ireland. In that part of the British dominions an act was passed by Parliament as early as 1805, providing for the establishment of dispensaries throughout all Ireland, as well for the most sparsely settled parts as for the cities and populous towns. It was a defective plan, but in 1836 there were 494 dispensaries organized and in operation under it. The defects of this plan of dispensary service were particularly prominent in 1846 when famine, pestilence and death ravaged Ireland. But in 1851 Parliament made a radical change for the better, and the result was shown in this wise, viz.: that instead of there being 58,006 deaths from small-pox as from 1841 to 1851, there were only 12,727 deaths by the same disease from 1851 to 1861.

In the year 1863 vaccination was made compulsory, and as a consequence there were only 187 deaths from small-pox in Ireland in that year, and in 1867 there were only 20 deaths from the same cause, and in 1868 only 23.

At this date (1868) the sanitary provisions and the medical arrangements for the sick poor in England, Wales and Scotland were substantially the same, but a general dispensary

* 25th Ann. Rep. Demilt Disp. p. 8.

system had not been established. By the act of 1851 the general dispensary system was established, and by the act of 1872 provision was made for rendering the dispensary districts symmetrical and compact. But there is room, in General Mather's judgment, yet for improvement across the water in regard to dispensaries, and he expresses the opinion that we in this country have improved upon the lessons taught us from 1770 downwards. It appears that the city of Philadelphia has the honor of being the first to establish a dispensary on this continent, viz.: "The Philadelphia Dispensary," which was established in April, 1786, and incorporated in the year 1796. The city of New York followed next in order by establishing "The New York Dispensary," in 1791, and it was incorporated in 1795. This dispensary was suggested by the Rev. Dr. John Rodgers. It first occupied an humble building on the northwesterly corner of Beekman and Nassau streets, *i. e.* to say it was in the southeasterly corner of the "Brick Churchyard," but finally it was located on the northwesterly corner of White and Centre streets, where it now stands.

The next dispensary was "the Boston Dispensary," organized in the city of Boston in 1796, and incorporated in 1801. This made the third dispensary in America. In course of time other dispensaries came into being, and there were, according to State Board of Charities' Report in 1874, in the State of New York, 49 dispensaries, and 29 of these are in the city of New York, and they are very good samples of dispensaries to say the least, but General Mather says that our dispensaries are better than those across the water, and I for one am very willing to believe that. But I will not waste time in glorifying our nation, and will pass at once to the last topic of my paper, viz.: the efficiency of dispensaries. According to one authority, "a dispensary is a place where you get

medicine in *your own bottles.*" But the late Charles Dickens, Esq., was always inclined to be jocular in his descriptions and definitions. Still he spoke the exact truth. This same truth, however, is very tersely and with all gravity set forth in the words of Theodore Roosevelt, Esq.,* our own countryman, as follows: "Dispensaries may be called preventive institutions, offering, as they do, free relief to the sick at the inception of disease, an item which is very important in the successful issue of many diseases; hence the poor need not delay on account of expense or poverty, for at the furthest in this city—New York—they have but a comparatively short distance to go to embrace the proffered benefit of an institution incorporated and maintained expressly for them."

"From careful observation of the workings of the system, it is but proper to state that patients are better treated and obtain more *real* benefit from *it* than *any other.*"†

"Through the efficient aid rendered by the officials many useful citizens are saved from protracted sickness and frequently from death, while their dependents and families are kept from becoming applicants for private or public charity. Family ties are not weakened or broken by the absence of a member in hospital; only those who cannot be properly treated at their houses need go into an hospital. The value of such service in *promoting public health, and removing or preventing the necessity for protracted charity cannot be overestimated.*"‡ * * * * * *

"The medical and surgical staff (he goes on to say), are selected usually from a large number of applicants from the ranks of the younger members of the profession, and those who are appointed are of a high grade as to attainments, per-

* Extract from 9th Ann. Rep. of State Board of Charities of the State of N. Y., relating to the present dispensary system of New York, transmitted to the Legislature, June 14, 1876. Albany, 1876.

† Italics, mine. ‡ Italics mine.

sonal character and fitness for their respective duties. The members of the medical staff, excepting the house and visiting physicians, receive *no pecuniary remuneration.*"* Let that be noted I say, for a contrary opinion is oftentimes encountered by the unpaid medical and surgical staff of every dispensary and every institution of a similar character in this city—"and the salary of the visiting physicians," *i. e.*, those who go from house to house, "are usually very meagre." To which I may add that the salaries of the house physicians and surgeons do not correspond with the labor and skill with which those offices are usually filled. "Diseases of every variety are treated." "Free vaccination is offered to all." "Dentistry in the most important of its varied branches, under the direction of competent men, has also its value in connection with the administration of dispensary charity." "The doors are closed to none, of whatever nationality, creed or color; all receive alike," [and in the order of application, first come, first served, whether white or black, brown or yellow,†] "all receive alike the same care and attention."‡ The subjects of Queen Victoria, from her American dominions, are treated with courtesy as human beings needing help.

The natives of Alaska and of Iceland, and the inhabitants of Cuba are not neglected when they apply for aid. Even the red man, the Sandwich Islander, and the heathen Chinee receive their due share of attention. Dispensaries are cosmopolitan. "Those whose illness will not allow them to attend at the dispensary, are attended in their homes by the visiting physician, and the medicines prescribed (by him), are furnished at the dispensary,"§ free of charge, on presentation of the written prescription presented by the messenger sent by the patient or his friends.) I have ventured to add this

* *Italics*, mine. † Ludlum. ‡ Ludlum.
§ Roosevelt, super. p. 5.

latter clause to Mr. Roosevelt's very complimentary notice, and I will venture still further to make myself the self-elected mouth-piece of all others engaged in this kind of service like myself, and say that we heartily thank him for his careful observation and kind words. From henceforth the ancient reproach, 'he's nothing but a *dispensary* physician,' has lost its sting. From henceforth, the dispensary physician may proudly hold up his head and say, as did the colored man down South, "I am no shoe-string nigger, but I am a gentleman."

But His Honor Judge Daly, and General Mather, and Commissioner Roosevelt, all three, are silent on one very important point, which they naturally could not appreciate as well as the men actually engaged in dispensary service, viz.: the efficiency of dispensaries as training schools for the younger members of the profession, and as schools of instruction for students of every grade. This is a subject completely out of the range of thought of even such distinguished laymen. But we who have been for any length of time engaged in dispensary service are fully conscious of the facts in the case. We learn our proper business there, just like a clerk does in a banking house where large and varied accounts are kept. Dispensaries are not places for mere experimentation by a fresh hand, for there is an established routine, and every new man when he comes into the ranks must either stand in the line or fall out. But I need not enlarge on this point, I think that this plain statement will suffice. But there are defects in the dispensary system, I think I hear some one say. Very well. But can you point out any human institution which is devoid of defects, or into which aberrations may not intrude? Yes, there is at least one medical institution in the United States so happily arranged as to be perfectly satisfactory to all parties concerned—and that institution is in the

city of Philadelphia, which city seems to be coming in for all the honors just now—and if the expression of satisfaction by Dr. A. D. Hall on the completion of the improvements recently made in the "Wills Ophthalmic Hospital" in the city of Philadelphia is not exaggerated compliment to those who furnished the means for the improvements, it must be just about perfect. "As spokesman of my fellows," says Dr. Hall to the President and gentlemen of the committee on Wills Hospital, "as spokesman of my fellows, the surgeons of this house, I thank you for the beautiful and convenient wards you have just entrusted to our professional care. For the first time in forty-three years, we have wards built for the express purpose of treating the diseases and injuries of the eye, with all the improvements in ventilation and heating, bathing and drainage, that the latest science and experience can suggest. It is no exaggeration when I say that no eye hospital, in all the round world, has wards so well adapted to the business to be carried on within them."*

There is then at least one "satisfied soul" among the doctors, and Philadelphia has at last excelled New York city in *one respect*, viz., as to Ophthalmic hospitals, and what is more, they have struck out there an improvement in the dispensary system, which improvement has been practically tested, as appears from the following extract from the medical report of the eye and ear department of the Philadelphia dispensary, for the year 1875. "The *evening* service (from 6 to 7 in the evening), has been found a most valuable adjunct in providing for the laboring classes engaged during the day, and who otherwise would have been compelled to forego all treatment." Well, let Philadelphia have all her honors for the time being. But New Yorkers wake up. Philadelphia has caught you asleep this time in the matter of elymosynary

*Wills Ophthalmic Hospital Rep. for 1875, p. 14.

institutions, for the relief of diseases of very important organs in a commercial sense We want neither blind nor deaf clerks and paupers. We need to keep our city clear of them, as well as free from pestilence in another form. In conclusion, it is eminently gratifying to find three laymen in our midst who have written concerning this subject with such evident relish and acumen. The work we have done is appreciated by some beyond all question. But some one says that the rate of progress is not rapid enough for them. Well that is the case with everything good. "Nihil per saltem," is nature's law. You can not get up "rapid transit" on that line. You may salt the track as much as you please to get rid of the icy obstructions, but the "*nihil per saltem*" still remains. This fact has been more elegantly expressed by the poet, who says

* "The mills of God grind slowly,
But they grind exceeding fine."

There is more truth than poetry in these lines, and it behooves us to remember the sentiment. That is indubitably true, and what is true is good.

A few words more, and then I submit the matter to you.

The visiting physicians of the various dispensaries, who go about from house to house, wherever called, among the poor, go about the city in ordinary citizens' dress, and their dress is oftentimes of the least expensive character—sometimes from choice, sometimes from necessity; and but few persons realize how important their mission is. The citizens of this and other cities maintain police and fire departments for the safety of their valuables and houses and tenements. They maintain these departments well, and the well-dressed members of these departments, in addition to the work they do, make quite a show on the streets. But the visiting physicians of the vari-

* Tennyson, with amendments.

ous dispensaries, silently and unobservantly for the most part, guard you from enemies more insidious and deadly than either fire or thieves. They guard you citizens of New York against loss of those whom you hold dearer than your stocks and jewels, bonds, houses and tenements. They do their work, moreover, at a most ridiculously small expense to you, and you citizens allow the managers and trustees of dispensaries to go about, always begging for the wherewithal to carry on the work of dispensaries in all their departments, and when still harder times come to these underpaid public benefactors, you force the managers and trustees of dispensaries to cut down the salaries to a disgustingly mean figure. Now, if you want to see an old servant in the dispensary service, and at the same time to see a specimen of old New York, go and look at the Northern Dispensary. It reminds me of a sentry-box. It is just about the dimensions of a good sized guard house, in which its sanitary sentinels may assemble prior to going out on their rounds. If you go into the building, after taking a good look at the outside, you will find there a sanitary officer who can give you over twenty-eight years history of the place, and show you all its reports, and you can reckon up all the work it has done and count the cost. But I warn you not to occupy too much time at any one visit in such investigations, so as to interfere with the business of the place.

The other dispensaries of the city have been considerably altered and changed in appearance with the lapse of years, but the Old Northern Dispensary will always continue not much larger than a good sized sentry box, as long as it stands on its present site, but if it is not much larger than a good sized sentry box it is a very effectual sentry box in the matter of guarding against the incursions of pestilence and death, and the diseases which may attack the rich through their neglect of the sanitary condition of the poor. Citizens, as you value

your household treasures, take good care of the outposts and bulwarks, and then your habitations will be more safe than they can be otherwise. Take very good care of these sanitary outposts and bulwarks and then your domiciles will probably be, so far forth, the abodes of cheerfulness and health.

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