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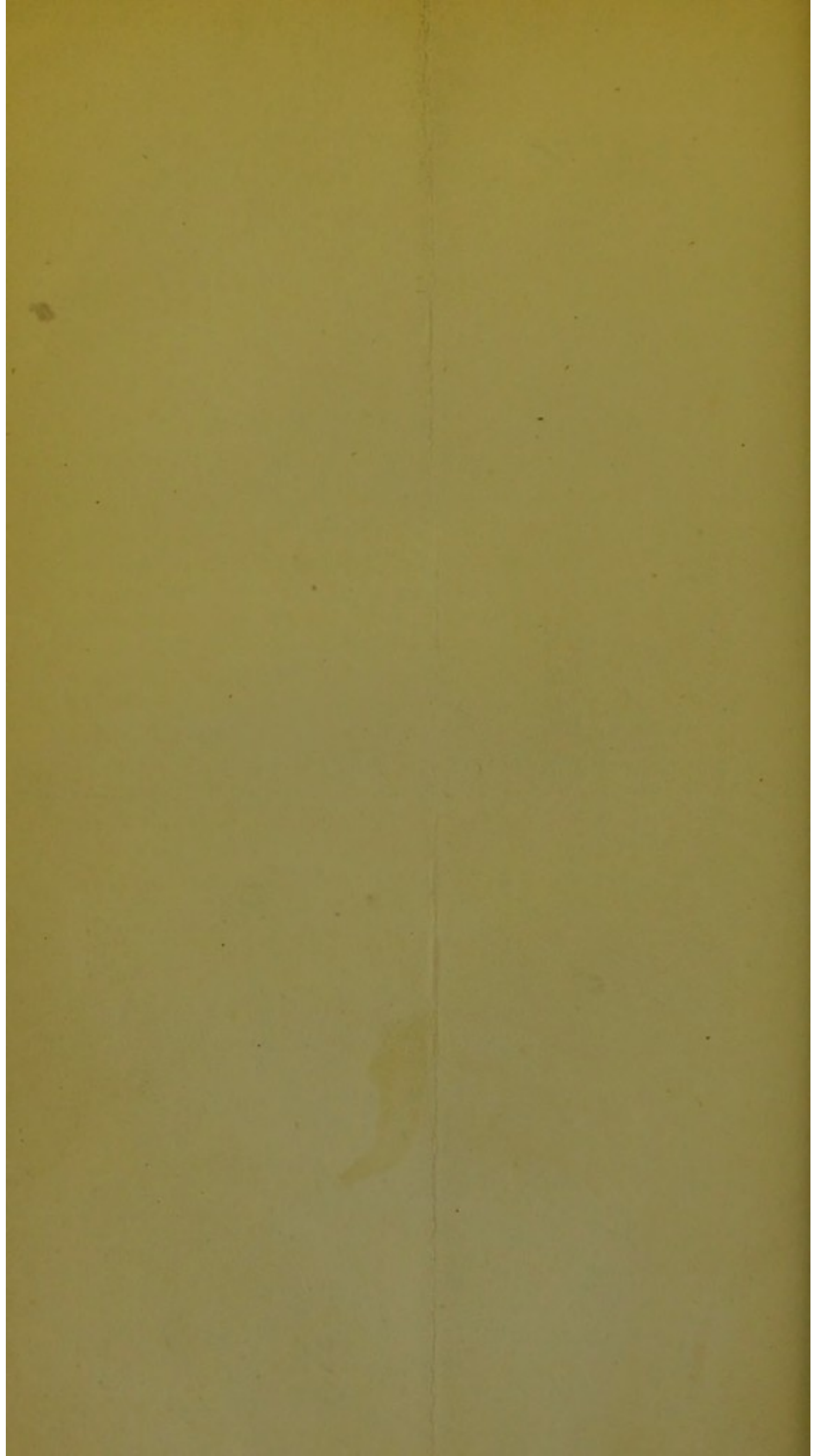




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LONDON MEDICAL PRACTICE:
ITS SINS AND SHORTCOMINGS.

PRICE HALF-A-CROWN.



LONDON MEDICAL PRACTICE :

ITS SINS AND SHORTCOMINGS.

BY A PHYSICIAN.

LONDON:
SIMPKIN, MARSHALL, AND CO.,
STATIONERS' HALL COURT.

1860.

“ CAN you doubt the true reason that Physic is suspected of treachery to the patient—and, therefore, by many feared and avoided—and charged with the deaths at almost all the funerals? The PHYSICIAN may, indeed, be the author of your ruin, but he is moved by another's hand. He is under the force and necessity of obeying the orders and commands of those whom your folly has made his *superiors*; who cannot live if they suffer any instances of recovery *without many doses.*” * * * “The Apothecary having the *power in the family*, has the liberty of *naming what Physician he pleases*; and, therefore, never fails to introduce one that will *countenance his practice*, and make *large prescriptions*. The young Physician, when he comes from the University, is quickly informed of this, and that he cannot hope to rise but through the Apothecary's recommendation; which, therefore, obliges him to follow the mode, and, consequently, hinders any reformation. The Roman senators *expelled* the Greek physicians for the SAME CRIMES which are here practised.”

Crafts and Frauds of Physic Exposed. London, 1703

LONDON MEDICAL PRACTICE.

FOR many years back it has been the annual custom at the London College of Physicians, for one of the Fellows to deliver an oration in Latin, commemorative of the discovery of the Circulation of the Blood by the great HARVEY. The Orator for the year is chosen by the President of the College for the time being, and to him the oration is submitted before it is read to the assembled members. Whatever statements it contains, have, therefore, the official sanction of the highest authority of the College.

In the oration for the present year, 1860, delivered by DR. PAGE in June last, there occur certain statements, which, for the convenience of such of my readers as happen to be ignorant of Latin, I shall translate as literally as the idiom of our own language will permit. The exact words will be found in a foot-note. Reduced to English, Dr. Page's statements run thus:—

“In the beginning of this century, the favourite practice of physicians was Depletion in all its forms,” [meaning thereby the abstraction, during a state of corporeal disrepair, of the *living material of all repair*, by bleeding, leeching, cupping, purging, &c.]

“At the present day, the employment of Stimulants, chiefly wine, brandy, and the like, has been much on the increase.

“Of this method of treatment, many assert that Dr. Todd was the author; but in truth, neither to Dr. Todd nor to any other person, do we owe this plan of cure,—a plan which, from some atmospheric change perhaps, or from some change in the condition of men’s bodies, has gradually come into vogue.

“The annals of our hospitals, if I mistake not, show all this very clearly. At St. George’s Hospital, the records of which have been carefully kept for the last thirty years, this change must strike everybody who inspects them.

“During that time, phlebotomy there has been becoming more and more infrequent. The use of leeches and cups, yearly diminishing, is now all but given up; while, on the contrary, the expenditure for wine, brandy, and malt liquor, steadily on the increase, is at the present moment greater than it ever was at any former period.” *

That a great revolution has of late years taken place in the English practice of medicine, is incontestible; but Dr. Page’s account of the manner in which this revolution

* In hujusce seculi initio Depletio omnigena medicis quam plurimum placuit. Stimulantium hodie, vini præsertim, spiritus vini Gallici et similia, obtinuit largior usus. Hujusce methodi auctorem multi Toddium asserunt. Verum enimvero, non Toddio, non uni aut alteri debemus hanc curandi rationem,—quæ gradatim mutatis aeris forsan, necnon corporum conditionibus prævaluit.

Nosocomii cujusvis annales hæc, ni fallor, plane demonstrant. Cuivis in Sancti Georgii Nosocomii annales per annos jam actos triginta servatos inspicienti hæc vicissitudo patet. Venæsectio per id tempus singulis annis ibi rarior fit. Cucurbitulorum, hirudinum usus quot annis diminutus hodie vix ullus est. Vini, contra, spiritus vini Gallici cerevisiæ expensa, perpetuo aucta, supra modum jam ampliatur.” Oratio ex Harveii instituto a Gulielmo E. Page, M.D. Oxon, 1860.

was brought about, will scarcely be so satisfactory to thinking and observing men out of doors, as it would appear to have been to the erudite auditory he addressed. The questions therefore still remain,—How came blood-letting to be put down? Wherefore was it put down? When was it put down? And who first, in the face of a jealous profession, openly substituted stimulants and tonics,—both of which now go hand in hand,—for the exhaustive measures, that from the time of Hippocrates till within the last few years, were the all but universal practice of medical men?

Theories which attribute everything to masses and nothing to individuals, are always in great favour with colleges and corporations. To the corporate mind, “a change in public opinion,” “the march of intellect,” “the requirements of the age,” and other abstractions equally vague and unmeaning, very readily account for the greatest events. “It is too much the present fashion,” says Sir John Herschell, “to ascribe all progress, at least all modern progress, in the inductive sciences, and indeed in every department of human thought and action, to ‘the age;’ as if there were some magic in the word, and as if by its use it were possible to elude or abate down the acknowledgment of an individual pre-eminence.”

To the “age” and “the requirements of the age,” many very clever medical men have attributed the recent revolution in physic. How to “elude or abate down the acknowledgment of individual pre-eminence” in this particular instance, has been one of the difficulties of modern medical science. Dr. Page thinks he has solved the problem. According to him, the revolution in question was begun by nobody. Before the assembled magnates of the College of Physicians, before the large body of practising apothecaries, who have recently been admitted members of that time-honoured

institution, Dr. Page held, that for this revolution the world is indebted to no one man's tongue or pen. He ascribed this all but complete REVERSAL of medical practice to a gradual change, either in the constitution of our English atmosphere, or in the condition of the human body itself; he did not pretend to say which! Is Dr. Page quite sure any such change has actually taken place in either the one or the other? Not quite; he qualifies his assumption by that most awkward of adverbs, "*forsan*," perhaps!

This hypothetical dictum of Dr. Page was received, nevertheless, with the most implicit respect by the solemn gentlemen whose ears it was intended to tickle. Of all the assembled "medical philosophers," who met on a pleasant day in June to do honour to the shade of Harvey, not a single individual signified his dissent from a proposition so absurd and illogical. On the contrary, when the oration was finished, the solemn gentlemen, for once in their lives at least, relaxed their professional gravity, and cheered Dr. Page to the echo!

June passed; July came, and went; August appeared, and congratulations still poured in upon the Orator of the year 1860. The beautiful manner in which he had fulfilled the task confided to him gave satisfaction to all. Dr. Page's oration was pronounced a marvellous success.

Could it be possible that a secret understanding existed between the authorities of the College and Dr. Page, in reference to the subject matter which, after the usual hackneyed laudation of Harvey, was intended to be the telling point of the oration? Why explain to the members of the College what the members of the College knew as well as himself—that the fashion of physic had changed? Why go into the fact of a gradual decrease of phlebotomy, and other exhaustive practices, and a corres-

ponding increase of expenditure for wine brandy, &c., in the London Hospitals? And why, in the year of grace 1860, of all years in the world, fix the date of the decrease of depletion in St. George's Hospital at *thirty* years ago? Was this exposition meant solely and entirely for the members of the College? Or was the oration of the year 1860 a mere farce, got up for a special purpose between the College authorities and their mouthpiece, Dr. Page? Perhaps these astute gentlemen thought the time had at last arrived when, by adroitly concealing facts, and by falsifying dates, they could, without compromising themselves in the eyes of their patients, give their sanction to a change of practice which, in common with the majority of their brethren, they had for years opposed as dangerous and unorthodox. Be that as it may, the orthodoxy of this complete change of practice was in 1860, for the first time, recognized thus publicly by the College authorities. But while doing so they made an important omission. A great physiological discovery—the greatest perhaps of this or any other age—the discovery, in a word, on which the present practical change actually originated, was on that occasion carefully kept in the background.

Discoveries that militate against the interests of powerful bodies of men, may often be crushed down for a time; but, sooner or later, there is a day of reckoning. This may yet be the case here. The medical profession in civil life, as shall in due course be seen, have the most powerful of all motives for shelving a discovery which, in spite of every effort on their part, rendered it impossible for them much longer to uphold the practice of blood-letting—a practice, be it observed, that, amid a thousand changes introduced from time to time into the *Materia Medica*, had, in Europe at least, continued to be the dominant fashion of physic

for thirty centuries. If that was the object of Dr. Page's oration, the farce was badly got up, and the performance was a mistake!

The month of August, we have seen, found the Orator of the year 1860 still radiant from his triumph. But just as the second week of the same month had come to a close, the fiction that a change had "perhaps" taken place either in the circumambient air, or in the constitution of men's bodies, was blown to the winds! On the 16th of August came a letter to Dr. Page, which must have dispelled his day-dream. It bore the signature of a brother Fellow—a grandson, by the way, of one of the greatest ornaments of the College of Physicians in an age gone by—the celebrated HEBERDEN. Reader, that letter, being now published, is very much at your service.

"Park Street, Grosvenor Square, 16th August, 1860.

"DEAR SIR,—I have been prevented by circumstances from tendering to you, until now, my acknowledgments for the copy of your Harveian Oration, which you were so kind as to send me above a week ago. While thanking you for a composition couched in such elegant Latin, I regret to find it contains some statements with which I cannot concur.

"It is quite true, as you say, that at the beginning of this century depletion of every kind was in great favour with our physicians; and it is equally true that stimulants, more particularly wine, brandy, and the like, are more freely used now than formerly. True it is, also, as you state, that those who ascribe the introduction of this method of cure to the late Dr. Todd are in error. Whether as regards the substitution of wine, brandy, &c., for abstinence; or the exhibition of bark, steel, &c., for

blood-letting and other exhaustive measures, Dr. Todd, if I am not misinformed, was anticipated by many medical men both within and without the walls of our own College.

“But in the teeth of facts,—facts patent alike to the majority of the profession and to the better instructed portion of the public,—I cannot agree with you that for this revolution in practice we are indebted to no one man in particular. Your assumption that this revolution may, perhaps, have been the gradual result either of some change in the condition of the atmosphere or of some alteration in the human body, you will pardon me for saying, I consider altogether groundless and unphilosophical.

“The records of our hospitals, you say, bear you out in this belief. I am glad you qualify that statement with the words “*ni fallor* ;” for here assuredly you labour under a misconception. Your impression that the annals of St. George’s Hospital show that this great change of practice began there *thirty years ago*, can scarcely be correct. Dr. Chambers, who was senior physician of that hospital at the date you refer to, used depletion very largely up to his retirement from practice ;—and his retirement, if my memory serves me, did not take place till about fifteen years afterwards.

“You are right, nevertheless, when you say that venesection is every year becoming rarer ; and that cupping and leeching, yearly diminished, are now little employed ; while the expenditure in our hospitals for wine, brandy, and malt liquor, has on the contrary increased. You say nothing of the increased expenditure for Quinine and other supporting remedies.

“This complete REVERSAL of a practice which existed from time immemorial must not only have had a beginning,

but it must, moreover, have had some one to begin it. It is not in the nature of things that so sudden and so important a Revolution could originate in many minds at once. If you will turn to the last July number of the *British and Foreign Medical and Chirurgical Review*, you will find that the initiative of this revolution, "in this country at least, must be assigned to Dr. DICKSON, the Apostle of Chrono-thermalism, who has long reviled antiphlogistic proceedings, and lauded a treatment essentially supporting. We do not know (the Reviewer continues) whether our friends will be pleased *stare sub nominis umbra*; but it is certainly true that Dr. Dickson long ago asserted much the same as what the two English Physicians [Dr. Bennett and Dr. Todd] teach."

"On comparing dates, it will be found, that though Dr. Todd anticipated Dr. Bennett in his opposition to the hitherto orthodox practice, Dr. Todd himself only followed in Dr. Dickson's footsteps.

"Dr. Dickson began his crusade against blood-letting in 1836. Dr. Todd waited till the year 1850; in which year, while assuming that all diseases originate in "poisoned blood," he adopted the all but identical practice introduced fourteen years before by Dr. Dickson;—bark, steel, and stimulants, according to Dr. Todd, being the 'antidotes' to this hypothetical 'blood poison.'

"In 1836 Dr. Dickson took a surer ground. Appealing to his great discovery, the Unity, Remittency, and Periodicity of all Disease, whereof he considered Ague, or Intermittent Fever to be the type, Dr. Dickson advocated the early employment of bark, steel, wine, &c., in almost every form of disorder—pneumonia and apoplexy included. Holding Remission to be the most unfailing clue to all good medical treatment, Dr. Dickson addressed himself to

the prevention of paroxysmal return, and adopted for his motto '*principiis obsta.*'

'Principiis obsta—on the outset act
And crush disease at once by skill and tact ;
Crush it ere from neglect the frequent fit
Becomes a habit difficult to hit.'

"For the last twenty-four years, in various publications, all powerfully and perspicuously written, Dr. Dickson has never ceased to urge the total and entire abolition of blood-letting in each and every of its forms,—giving quinine, steel, and stimulants, in cases where for thirty centuries the great majority of the profession advocated exhaustive measures. For this innovation he has had to pay the penalty of all truly great Reformers, persecution and injustice !

"The illustrious HARVEY, to the perpetuation of whose fame your oration is dedicated, and JENNER, scarcely less dear to Medicine, were both, as we all know, decried and oppressed in their life-time by their professional brethren. With these examples before me, I cannot doubt that so great a benefactor to mankind as the Author of *The Fallacies of the Faculty*, will ere long, like these discoverers, be appreciated as he deserves by the distinguished body of which yourself and I have the honour to be Fellows.

"In the interest of Science, and on public grounds, I propose to print this letter,—for the length of which allow me to apologize. Your oration being now published, I do not anticipate any objection on your part to the course I mean to pursue. Believe me to remain,

"Yours, my dear Sir, very truly,

"THOS. HEBERDEN."

"DR. PAGE, F.R.C.P."

Dr. Heberden is right in his facts.—All honour to him for his bravery and independence.

It was as he says. In 1836, Dr. Dickson published the *Fallacy of Physic as taught in the Schools, with new and important Principles of Practice*.

What were the new and important principles developed in this work? Precisely what Dr. Heberden states—The Unity, Remittency, and Periodicity of all Disease;—whereof Intermittent Fever or Ague was shown to be the type. Upon the successful treatment of that type of disease, by bark, steel, and stimulants, Dr. Dickson based his treatment of all disorders. For all disorders, apoplexy, paralysis, and pneumonia included, he prescribed bark (in the form of quinine), iron, and febrifuges generally; and for each and all he moreover advocated the use, not the abuse, of wine, brandy, &c., in opposition to the anti-phlogistic fallacies then taught in every school and university of Europe, as indisputable truths!

In 1838, Dr. Dickson again published his revolutionary views, under the unmistakable title of the *Unity of Disease*. And yet again, in 1839, under the title of *The Fallacies of the Faculty with the Crono-thermal System of Medicine*; which last mentioned work, after passing through many English editions, has been translated on the Continent and re-printed in America, times without number.

Reader! we are now dealing with facts and dates; be pleased carefully to note what was the hospital treatment pursued by the most eminent London physicians, when Dr. Dickson first printed his Views in 1836.

Mühry, a German physician, who came to England that very year, expressly to see the practice of our London hospitals, thus writes:—

“Mercury, purging, and blood-letting, are the three

leading therapeutic means in England." "The English physicians hold the human system to be so constituted, that it can bear a considerable loss of blood." "Even in chronic inflammation, bleeding is much depended on."—*Mühry's State of Medicine in France, England, and Germany, in 1836.*

Does Mühry make any exception in favour of St. George's Hospital, where, according to Dr. Page, the practice began to change six years before the visit of this foreign physician? He does not. And the records of St. George's Hospital, so far from corroborating the statement of Dr. Page, that a change of practice began there in the year 1830, make it clear to all who will take the trouble to examine them, that the physicians and surgeons of that hospital, held out against all change, longer than those of any other hospital in London. Dr. Page's statement on that point is not worth the paper it is printed upon.

Throughout the annals of this grovelling age,
Where will you find a more deceptive PAGE?

Having proved by the testimony of an independent foreign physician, the kind of practice prevalent at the London Hospitals in 1836, let us now see what English practitioners were doing ten years later. Sir John Forbes, physician to Her Majesty's Household, thus describes the practice of 1846:—

"One of the besetting sins of English practitioners at present, is the habitual employment of powerful medicines, in a multitude of cases that do not require their use; mercury, iodine, colchicum, antimony, drastic purgatives, and excessive blood-letting, are frightfully misused in this manner."—*Lancet*, 1846.

Sir John Forbes calls all this "one of the besetting sins

of English practitioners," Marry come up!—it was wholesale butchery. What of that? it was the practice, of the leading physician of the metropolis at that epoch; Dr. Watson to wit. Dr. Watson, every Londoner knows, was the man whom the West-end medical practitioners then most delighted to honour; and he it is whom many of their number still prefer to call to their "consultations." By his fruits ye shall know him. In the second edition of his *Practice of Physic*, published in 1845, Dr. Watson recommends bleeding, leeching, cupping, purgation, and calomel, for every kind of disease! Reader, you will find Dr. Watson's book in every medical library; it is the most approved text-book in some of our universities still!

Thus much for English practice. What about the Scotch? Long after Dr. Dickson began his crusade against blood-letting, blood-letting was in high favour with the Edinburghians. Until within the last ten years, Dr. Alison was the leading physician of Scotland; for many years he was the Professor of Medicine in the University of Edinburgh, and Senior Physician to the Royal Infirmary of that city. What was the practice of Dr. Alison until within a year or two of his retirement from his professorship? Take it from his own pen:—

"In all cases of inflammation the only antiphlogistic remedy on which absolute reliance can be placed is blood-letting. And there is no other remedy for any other kind of diseased action which can be put in competition with this in efficacy and importance."

A short time before his death Dr. Alison modified his practice, on the pretence of a change in the type of disease!

Cross we now the Irish Channel, and let us see what for years was the practice of the great Hospitals of Dublin. In the *Medical Times* of 1854, Dr. Stokes gives the fol-

lowing account of his own experience in the Meath Hospital:—

“ There was hardly a morning at the Meath Hospital that some twenty or thirty unfortunate creatures were not phlebotomized largely. It was dangerous to cross the prescribing hall for fear of slipping. Patients were seen wallowing in their own blood like leeches after a salt emetic ; and these disgraceful scenes continued for many years.” —*Medical Times*, 1854.

Let me ask a question here. Could men who acted in the insane manner shown above, have had the slightest notion of the nature of the vital principle, whether in health or disease? Impossible!

Throughout the three kingdoms this, nevertheless, was the universal treatment of what the doctors called “ inflammation.” Nor was it confined to these shores. All over Christendom, until within the last few years, the great body of medical practioners were equally inflammation-mad!

Woe to the man who dared to lift his finger against this hitherto universal practice—against a practice which it was boastingly said had stood the test of thirty centuries! From the moment Dr. Dickson published a discovery which made it as clear as day that almost everything the medical profession had been doing for centuries was a mistake, he was marked for destruction. From 1836 to the present hour he has had a professional enemy in almost every English home to calumniate his motives and decry his practice. Dr. Seymour, one of the Censors of the College of Physicians, had the hardihood to tell a Committee of the House of Commons, that “ the Chrono-thermal man ” had nothing but a foreign diploma ; though, had Dr. Seymour looked into the “ Medical Directory,” he would have found that Dr. Dickson possessed the double qualification

of a Glasgow degree in Medicine, and a diploma of the Edinburgh College of Surgeons; and had, besides, served in India and elsewhere, as a medical officer in the British Army!

In spite of all this the rules for the Treatment of Disease, which Dr. Dickson so fearlessly propounded in 1836, have, one by one, been gradually adopted by physicians and surgeons, who in the innocence of the public pass for paragons of honour and virtue, while actually refusing to meet in consultation the man whose system, when it suits them, they daily and hourly plagiarize! The facts which shall appear in these pages, would be absolutely beyond belief, if not proved by evidence the most incontestable. Reader, that evidence shall in due time be forthcoming.

Finding the opposition to himself still as fierce as ever, while his views were in this manner being gradually adopted by the men who continued to defame him, Dr. Dickson, in addition to the works above mentioned, in the year 1850, commenced a monthly journal, entitled, the *Chrono-Thermalist; or People's Medical Enquirer*; and this he continued, single-handed, for two-and-twenty months, to the manifest advantage of the public. Resting on his oars for a season, he resumed his pen once more in 1853, in which year he published the first of four editions of the *Destructive Art of Healing; a Sequel to the Fallacies of the Faculty*. While showing to what extent his theory and practice of physic had from time to time been plagiarized by the most eminent medical men in England, these various publications afford the best refutation to the malignant misrepresentations that were everywhere spread about by his professional brethren in civil life—for, to the honour of the medical officers of the different public services, we must except them from a charge so disgraceful.

We must except also the late Sir Astley Cooper, Dr. Heberden, Mr. Fergusson of King's College, Dr. Rutledge, and other honourable men in civil practice.

All this time not only had Dr. Dickson to contend with the great body of the medical profession throughout the country, but, with one or two exceptions, he had the conductors of the medical press, all more or less against him. The simple advertisement of his works was denied admittance in the advertising columns of the *Lancet*—when tendered with the money.

But this was not enough: again and again when his views were openly pilfered, Dr. Dickson found it next to impossible to let his voice be heard in any medical quarter. Depending on the profession for the sale of their publications, the conductors of the medical press have rarely dared to let him speak for himself. For twenty-four years he has thus been the victim of a great professional conspiracy, a conspiracy having its affiliations in every city and town of the empire. During all that period, whether in England or the Colonies, his discoveries, as the sequel will show, have been alternately denied, decried, and plagiarized. The *British and Foreign Medical and Chirurgical Review* of July last, referred to by Dr. Heberden, is almost the only medical journal that has in any way acknowledged his merits.

In an article relating principally to a recent publication by a physician of the name of Inmann, the Editor of that journal refers at some length to the theory and practice of the late Dr. Todd. He also refers to a controversy which took place some ten years ago, between Dr. Alison and Dr. Hughes Bennett of Edinburgh, on the subject of bleeding in pneumonia. After some general observations on the practical views of Drs. Inmann,

Bennett, and Todd, the Editor of the *Review* makes the qualified admission to which Dr. Heberden alludes, and which we will here quote entire:—

“And to give every one his due, it must be allowed that whatever merit belongs to these three, the PRIORITY, to a great extent, in this country at least, must be assigned to Dr. Dickson, the Apostle of Chrono-thermalism, who has long reviled antiphlogistic proceedings, and lauded a treatment essentially supporting. We do not know whether our friends will be pleased *stare sub nominis umbrâ*; but it is certainly true, that Dr. Dickson long ago asserted much the same as what the two English physicians teach.”

In all this there is but scant justice to Dr. Dickson. Whether Dr. Dickson contented himself with the mere act of simply *reviling* antiphlogistic proceedings; and whether in respect of treatment “*essentially supporting*,” he did no more than *assert* “what the two English physicians teach,” will appear in the sequel. My readers have doubtless remarked how timidly and grudgingly the merit of “priority” is awarded to the right man here. The Reviewer, Dr. Sieveking, evidently feels himself on tender ground. He has his reasons for being afraid of the touchy gentlemen who subscribe to his journal.*

What does Dr. Sieveking mean by the words “to a great extent?” Dr. Dickson carries out the principle of support in every form of disorder, apoplexy, paralysis, and pneumonia included. Instead of bleeding, he gives stimulants and tonics in these diseases, where required, as freely as in any other complaint. It is not very easy to see how he could carry the supporting principle further. He certainly did not fall into the error of Dr. Todd, who,

* Dr. Sieveking has since retired from the Editorship of the *British and Foreign Medical and Chirurgical Review*. This fact is significant.

according to a statement in Dr. Page's Harveian Oration, gave stimulants occasionally to excess, to the manifest injury of his patients.

Then as regards the phrase, "in this country at least," the present writer will be glad to know in what other country, and by whom, Dr. Dickson has been anticipated in his "essentially supporting" practice in all complaints. It was not in France, at all events, as may be seen from the note below.*

The Reviewer styles Dr. Dickson "the Apostle of Chrono-thermalism." Dr. Dickson, on the contrary, is the Founder of the System; and here it may be as well to say what Chrono-thermalism means.

The term Chrono-thermalism is a compound of two Greek words, the same words from which we derive the names of two instruments in daily use, namely, the Chrono-meter and Thermo-meter. It has therefore a certain relation to *Chronos*, Time, and to *Thermà*, Temperature.

In health, the human body keeps time in all its parts like a watch. Every organ and atom, and consequently every function of our frame, whether in health or disease, keep more or less perfect time. But for this, how could the nose on the face, or the finger with which we

* "It is curious to watch the opinions expressed by the *élite* of French Physicians on the effect of Stimulants in diseases; their dread of using them, and yet partial belief in, and astonishment at, their utility. They are still frightened because they can find no explanation of the fact. 'We admit,' says the *Gazette Médicale*, 'that this has been our difficulty; despite of ourselves, the instinctive fear of a fire (*de l'incendie*) has prevented our acceptance of this treatment; and we have always acted with the greatest timidity in giving generous wines in these kinds of affections. It was in vain that we saw the tongue become clean, and the appetite increase, under their influence; prejudice and dread of some unknown evil always remained behind. Our judgment accepts the facts before we give our adhesion to them.'"—*Medical Times*, October, 1860.

point, preserve its shape? Moreover, there is a certain temperature, beyond which, if the body, in whole or in part, rises or falls, we find disease;—which disease may be either a cause, a consequence, or a coincidence of such increase or decrease of temperature.

“ So long as Life’s Chronometry is true,
And all ’s well thermally, ’tis well with you ;
Therefore,—to shame the doctors of the Schools,
Who work so often with destructive tools,—
Whate’er to Chrono-thermal comfort tends,
Promotes in all things Physic’s aims and ends.”

When the savage for the first time sees a watch, his exclamation is, “ It lives !” Why? Because of its life-like movements. The watch keeps periodic time like the beating of his own heart! The body of man, like a watch that strikes the hour, is a repeater and a time-keeper throughout. The nearer you bring the movements of any machine to the movements of animal life, the more perfect you make the machine. There are chronometers that play and sing like a bird; could they do either without a main-spring? Considering the amount of regular work a man does every day of the year, and every year of his life, the inference is, his body must have a main-spring somewhere.

So far as the chronometry of his body is concerned, the main-spring of man is the Brain. Like the main-spring of the machine that tells the hour, this organ regulates the movements of every wheel and pulley of his frame. But having far higher functions to control than the machine of man’s invention, the brain’s rule does not stop here. The brain is not only the main-spring of Time, but the main-spring of Temperature also; for in addition to its chroanal force, it has thermal power, the power to heat and cool. You may find this daily exemplified in your own person; every passion and emotion of the mind being attended by some thermal change.

“ The brain, moreover, to a great extent,
 Can mend the wheels themselves when broke or bent,
 Whether, observe, the local flaws begin
 From outward sources or disease within !”

If a healthy man be cut or wounded, the injured parts may, in numerous cases, get well without any surgical appliance whatever. And where local complaints, on the other hand, have been the result of long continued constitutional wrong,—wrong induced by starvation, excessive heat or cold, or by hard work, whether of body or mind,—the cure may be materially helped by wine, brandy, bark, steel, &c., all of which, every body *should* know, tell on the brain ! Now to this organ there are many avenues. When you want to touch the brain, you do not bore a hole in a man's head ; you usually go to it through the stomach. It is here the food and drink, the sources of his daily support, are digested ; and it is through the stomach that wine and medicines enter the system, and finally help or hurt it,—for they may do both,—by their action on the only organ by which the body can be moved—the Brain. But you may get at the brain, whether for profit or loss, by various other paths. Through any one of the five senses, the brain may be reached, favourably or unfavourably, whether in health or sickness. Men, for example, have been cured of their fevers by music ; others have recovered from their complaints through pleasant or unexpected sights. Titilation, on the other hand, has thrown people into convulsions ; and things disagreeable to the taste or smell, have brought on febrile relapses, and even death, where convalescence had been actually established. Shakspeare says, and says truly, you may

“ Fetter strong madness with a silken thread,
 Cure aches with air, and agony with words.”

In all these cases the source of influence, whether curative or the reverse, is the Brain. There are few diseases that have not been caused or cured through the medium of the passions. The head, not the heart, is the seat of the passions and emotions. The heart in truth is a mere mechanical contrivance to circulate the blood ; and although the brain could not continue its functions many minutes without the support of the heart, the heart itself, like every other organ of the body, is dominated by the brain.

One of the readiest roads to the head is through the lungs. You may reach the brain in a minute with chloroform, for example. The power of this drug is something marvellous. When under its influence, a man may have his limb cut off without any sensation whatever ; and even when he recovers from the artificial trance, he may still have neither pain nor uneasiness. Why ? Have you ever seen a person after a fit of epilepsy ? After a fit of that kind, people have no remembrance of anything done to them during the fit. During the epileptic paroxysm, the brain is all but completely torpid. The same thing happens after the anæsthetic sleep of chloroform. In neither case can a man remember what he never felt ! But mark what may happen after amputation performed on a patient under chloroform. The same man who felt no pain in the stump either during or after the operation, may continue for many successive months to be attacked with the identical *local* symptoms for which his limb was removed, at the hour of the day or night when he was wont to suffer martyrdom before its removal. And more than this, if seized by his old enemy during sleep, he may wake exclaiming, "Oh my leg ! my leg ! it pains me the same as when it was on !" More curious still, he may tell you, he can, so far as his own feelings are concerned, actually move the foot of the

amputated limb! What do these facts prove? They prove—

1. That the Brain is the source of all motion and all sensation, morbid or sane. They prove inversely—

2. That the Brain is the source of rest and remission, sleep included. They further prove—

3. That the Brain is the source of all paroxysmal recurrence, whether the more prominent symptoms be general or local.

“ How else when once our maladies remit,
And ease succeeds to the distressing fit,
How could the ORGANIC MEMORY recal
The local symptoms, pain and heat and all,
In sense at least even in the very part,
Removed for ever by the Surgeon's Art!”

This Organic Memory is a very wonderful thing. It is on this memory, of which, by the way, the patient is himself mentally unconscious, that the paroxysmal recurrence of all diseases depends—wherever or however they may locally manifest their symptoms! Without this unconscious memory, Life, whether in health or sickness, could not last a day. The Organic Memory plays the same part in the interior economy, that the Mental Memory performs in respect of actions of which we are sensibly cognizant.

“ While this directs the various outward acts
Whereby the mind repulses and attracts,
And in the intervals of work and rest,
Recals the joys that give to Life its zest;
That for the inner workings of the frame,
Does in a silent manner much the same—
Preserving thus, where Health exists at all,
The pleasant sense we Britons “ Comfort ” call.
If as an offset where bad feelings cease,
The first renews the thoughts that wound our peace,

The second, in its movements more occult,
 Brings to the "physical" a like result,
 Causing even local injury and pain,
 To come when past by fits and starts again ;—
 But these two memories, differently fed,
 Spring from one source within the living head !"

It was BICHAT'S belief that the brain, during sleep, suffers collapse, and is at perfect rest. Dr. DICKSON, on the contrary, holds that cerebral action goes on both night and day: and he further maintains, that during sleep the cerebral action is *reversed*. According to him the brain is the source of Expenditure by day, while by night it presides over Nutrition and Repair. Dreaming he calls the "Insanity of Sleep;"—and certainly the delusions of insane people resemble dreams very closely. So also do the delusions of inebriated men. Without sleep there could be no growth; that is why growing children sleep so much more than adults. Growth, then, like Nutrition and Repair, has its source in the brain. The Organic Memory must play its part here. Without the Mental Memory, on the other hand, there could be no intelligence, neither could there be intelligent action. The law that regulates body and mind, according to Dr. Dickson, is one and the same. Both, when disordered, are subject to paroxysm and remission. The lucid interval of the maniac, whether perfect or partial, gives the lie direct to the assumption of the mad doctors that the brain is softened in insanity; so far, at least, as the word "softened" implies change of structure. The brain of an insane person, like every other organ of the body when diseased, "loses condition;" but, like muscles and other parts when weakened by long sickness, the insane brain may, in most instances, recover its former firmness and stability while the patient has a limb to stand on. Intelligence and the power of intellectual action are gifts of the

Creator which no animal is without; but the very highest orders of animals possess intelligence in a much less degree than man. Nevertheless, all animals think and reflect; and all are therefore liable to mental as well as corporeal disorder. Moreover, there can be no mental disorder without corporeal disease.

“ Order, disorder—sanity, insanity,
Do these exclusively concern humanity?
The horse, the dog, the fox become insane
By things that daily turn the human brain;
And drugs that stupify or sharpen men,
Serve birds and beasts the same, nine times in ten.
When these go mad, Remission, Fever’s law,
Shows as in man the nature of the flaw.”

Mania, according to Dr. Dickson, is merely a delirious fever, made chronic by neglect or ill treatment; and in the great majority of cases it may be cured by febrifuges simply. Of this he has given many examples. Taking advantage of remission, however partial or imperfect, and caring no more about the character of the patient’s delusions than about the delusions of a drunken man, Dr. Dickson, with bark, steel, wine, &c., prolongs remission here to permanent sanity. The mad doctors, who register the various delusions of their patients with an amusing minuteness, will say, of course, that this cannot be done; and they will bring you many very specious arguments against such “ a dangerous method of treatment.” Nor are these arguments, however sophistical, without their weight in certain quarters. The English people are naturally slow and cautious; but here, unfortunately, as in numerous other instances, their caution is exerted in the wrong direction. Putting their trust in men who, they think, “ must know all about it,” they seldom or never examine for themselves. The mad doctors, like other doctors, whatever they may say to the contrary, have their own

reasons for resisting quick cure ; but it is not to the friends of the patients they confide their private thoughts.

“ Where duty and men’s interests are at strife,
How not to do it, is the rule of life.”

Heaven help the rich patient, when once within the walls of a madhouse ! for it is not the mad doctors only who are interested in his detention. The very man on whose certificate he is incarcerated may receive, so long as the incarceration lasts, a quarterly commission on the large sum annually paid for the *keep*—not the *cure*, mark !—of the real or supposed lunatic. This was proved in a court of justice, in the recent case of Mr. Ruck, a sane man ; the recipient in that instance, and in many others then brought to light, being the philanthropist, John Conolly !*

But for this money question, there would be no difficulty in dealing with cases of lunacy. It is this question, nevertheless, which, according to the Chairman of the Lunacy Commission, Lord Shaftesbury, sooner or later tends to vitiate much that may be done on the part of the Government for the unfortunate patients. And it is this money question, if the truth may be spoken, which in the outset militates against every improvement in general medical practice at all likely to shorten sickness.

From this digression turn we now to the subject of Vital Periodicity. The Chronometry of Life, whether in health or disease, Dr. Dickson justly claims as his discovery. He it was who first showed that, like the heart’s action, all corporeal movement is, more or less, periodic or chronometrical ; and he it was who first further showed that Temperature and Time always influence each other. On this discovery, as we have seen, Dr. Dickson bases his

* A jury awarded Mr. Ruck £700 damages for his wrongful incarceration.

Chrono-thermal System of Medicine; the first system, be it observed, in which a natural principle is recognized and acted on in physic. Denied and decried for upwards of twenty years by the great body of medical men, this principle, within little more than twelve months ago, was plagiarized in the most impudent manner by no less a person than Professor Paget. In a lecture delivered at the Royal Institution, in the summer of 1859, Professor Paget, before an auditory, many of whom must have laughed in their sleeves, held forth at great length on the "Chronometry of Life;" taking care, at the same time, to show how nearly "the periodicities of organic life" are related to the thermal conditions of the body. Not once in the course of his elaborate lecture, did Mr. Paget name the name of the author of the Chrono-thermal System!

In spite of the reluctance of the conductors of the medical press to entertain the question, the originality of "Mr. Paget's Theory" began to be canvassed; and in their notices to some of their more importunate correspondents we find proofs of the fact. These did not escape the eyes of Dr. Dickson's friends. Accordingly, the same gentleman who afterwards, so much to his honour, demolished the sophistical suggestion of Dr. Page, made, with a few strokes of his pen, a still uglier hole in the reputation of Mr. Paget. Read his letter on the—

" CHRONOMETRY OF LIFE.

" *To the Editor of the Medical Circular.*

" SIR,—Among your 'Notices to Correspondents' of this week I find the following:—

" 'Mr. Paget's illustrations may not be new, but the merit of his lecture consists in recognizing Chronometry as a pervading law in the animal economy.'

“ If Mr. Paget’s illustrations are not new, to whom, let me inquire, do we owe the discovery that Chronometry is a pervading law in the animal economy ?

“ To whom, moreover, do we owe the knowledge of the important part played by *Temperature*, whether as a cause, coincidence, or effect of each and every of the movements that make up Life’s Chronometry—a part on which Mr. Paget dwells at considerable length in the lecture of his you have just published ?

“ ‘ The influence of *Time*, as an element of action,’ you admit, ‘ has not been dwelt upon by physiologists, who have talked a great deal about all kinds of mechanical and chemical forces.’

“ To whom do we owe the introduction of an element into physiology, which for some years back has been silently reversing the whole treatment of disease ?

“ ‘ Why vaunt the progress of our art and age,
Yet leave unnamed the individual sage
Whose genius brought to light the golden ore,
Whence drudging slaves drew only dross before ?’

“ *Sum cuique.* Yours, &c.,

“ THOS. HEBERDEN, M.D.,

“ Fellow of the Royal College of Physicians.

“ *Park Street, Grosvenor Square, June 18, 1859.*”

To this letter the Editor of the *Medical Circular* appended the following words, which appeared in brackets, thus :—

“ [Our correspondent obviously refers to Dr. DICKSON, whose merits on this and other questions his favourite law, ‘Time,’ will determine. We do not presume to anticipate the verdict. As our correspondent says—*Sum cuique.* ED. MED. CIRCULAR.]”

Short but sweet! Instead of "obviously referring" to Dr. Dickson, as the Editor of the *Medical Circular* states, Dr. Heberden obviously alluded to nobody at all. Dr. Heberden, doubtless, like every other well-informed physician, knew the only man to whom his questions could refer—but he studiously left the hiatus for others to fill up. That hiatus the Editor of the *Medical Circular*, of his own accord, filled up with the name of Dr. Dickson. But while doing Dr. Dickson this justice, his praise, as the reader has seen, was reserved, not for the discoverer, but for the person who, while recognizing "Chronometry as a pervading law of the animal economy," omitted to name the man who made the discovery! There is an old proverb which holds true in physic as in everything else—"The first inventor always goes to the wall." In England, at least, the imitator and the plagiarist very generally walk off with the reward. So much for the quickness of perception of the boasting Englishman! There is nobody slower than the "slow Saxon."

Before quitting the professorial chair, Mr. Paget promised his auditory another lecture on the "Chronometry of Life;" but from that day to this he has not had the face to show himself as a lecturer within the walls of the Royal Institution. Dr. Heberden's letter would appear to have effectually tied the tongue of the too modest professor.

Let me now draw the reader's attention to a remarkable passage in the writings of a progenitor of the gentleman who, in the cases of Dr. Page and Mr. Paget, did such good service to Dr. Dickson by his boldness and honesty. The following words from the pen of the *elder* Heberden show that, however lightly that celebrated man estimated the medical science of his day, he did not absolutely despair of Medicine:—

“The Art of Healing has scarcely hitherto had any guide but the slow one of experience, and has yet made no illustrious advances by the help of reasoning; nor will it probably make any till Providence think fit to bless mankind by sending into the world some superior genius, capable of contemplating the *animated* world with the sagacity shown by NEWTON in the *inanimate*; and of discovering that great principle of life upon which its existence depends, and by which all its functions are governed and directed.”

These words were prophetic! —Reader, you will find them in HEBERDEN'S *Commentaries on Disease*, a work which was not printed until the year 1802.

Up to our epoch—HEBERDEN was right—
 The Healing Art possessed no certain light;
 Though, had he lived, that able man, perchance,
 Had struck the path that just escaped his glance.
 The animate world, like the inanimate sky,
 Has since been scanned by an observant eye,
 And Medicine, so debased in ages past,
 Points to the great life-principle at last—
 At last revealed!—the Periodic Law,
 Seen in the sun and stars, as NEWTON saw;
 Seen in the storms and calms; seen in the tides;
 Seen in the seasons—chrono-thermal guides!
 The Periodicity of Nature's Plan,
 In all its parts, is now revealed in Man!
 Throughout the animate and inanimate *Whole*,
 Where but for this were order or control?
 Without this great ELECTRIC LAW, earth, sea,
 Sun, star, or living thing could never be—
 The highest mammal and the meanest worm,
 Through this preserve their species, type, and form;
 Through this man, beast, bird, reptile, fish, and fly
 Are born or bred, renew their race and die—

Die and yet live!—for through this Law of Laws,
 Death—their last sleep—is but a vital pause.
 Come weal, come woe,—no matter what befall,
 This with its tidal turns gives Life to all!

The harmony existing between all natural phenomena is very remarkable; and this harmony, to a certain extent, affords *primâ facie* evidence of the truth of Dr. Dickson's discovery, namely, the Chronometry of all vital phenomena, whether morbid or sane. But it was not on this sort of evidence only that Dr. Dickson rested his case. His proofs were of the most cogent and convincing kind, and applicable alike to health and disease.

So far as disease is concerned, if we except a few cases, and those chiefly of a mechanical kind, there is no form of disorder, whatever its real or presumed cause, in which examples of Periodicity may not be found.

The periodic disorder most familiar to medical men is Intermittent Fever or Ague. Whether recurring on alternate days or at shorter or longer periods, the paroxysms of ague keep time, in most instances, like the clock. But the periodicity, so obvious here, instead of being ascribed by physicians to its true origin, an *internal* chronometrical law of the living system, having its source in the brain, was, till of late years, universally believed to be the result of an *external* hypothetical cause, which, according to them, vitiates the blood. This myth they called "Malaria." With daily and even hourly examples before them of periodic remission and exacerbation of every symptom, whether local or general, in complaints proceeding directly from blows, burns, and other similar agencies, such, up to 1836, was the settled belief of the most eminent physicians. Wherever, says the eminent

Dr. Watson, of London, in his *Practice of Physic*, published in 1845,—wherever Periodicity can be traced, its “sole cause” is malaria!

It was a long time before Dr. Dickson could disabuse his professional brethren of this error.

The very fact of the Remittency of all diseases was, in the first instance, stoutly denied; nor could medical men at first see the value of Remission as a guide to the treatment of all disorders. Naturally enough, therefore, the critics in the medical journals sneered at Dr. Dickson for making “*Intermittent* Fever,” instead of “Fever in the *large sense* of the word,” the type of all disease. Their ignorance of the fact that all fevers being paroxysmal, must of necessity remit, more or less, from the commencement to the close, is here made very conspicuous. Full of their school notions that the proximate cause of fever must be either some “inflammation” or “congestion” of some internal part, or some local pressure or fixity more or less difficult to diagnose, these gentlemen had not the remotest idea that there never can be and never was since the world began, a fever of any description whatever without remissions more or less perfect in kind! And even when the remittency of all diseases was at last slowly and reluctantly conceded, it was almost impossible to convince the doctors that regularity in the period of paroxysmal recurrence is the rule, and irregularity the exception. But Dr. Dickson was not to be driven from his position here. The regularity of recurrence of all vital phenomena, whether morbid or sane, being a law of the living economy, he had no difficulty in showing by facts patent to everybody, that this is the law of paroxysm and remission in all complaints. Like other laws, it is, of course, subject to the interference of disturbing causes; and these causes here are twofold. Whatever

alleviates the instability of brain on which paroxysmal recurrence of every kind depends, will interfere with the regularity of recurrence to the benefit of the patient. Whatever, on the contrary, *aggravates* that cerebral instability, will do the reverse. While easterly winds, for example, atmospheric humidity, bad news, bleeding, and other exhausting medical treatment very generally render the paroxysms of every disease, not only more frequent, but more rebellious; westerly breezes, a dry atmosphere, good news, bark (quinine), steel, and the judicious use of stimulants, tend as generally to the advantage of the patient, by rendering the paroxysms less frequent and more feeble, or by stopping them altogether. Whatever debilitates and exhausts the brain, fosters a wrong habit; whatever strengthens and supports the brain, helps the patient to shake it off.

The opposition raised by medical men to the use of the Peruvian Bark in Ague, on its first introduction by the Jesuits, was, for obvious reasons, long and fierce. It comprised the leading doctors in every town in the empire. This opposition gave way at last: and it is but justice to the profession to say, that for years back, whenever the majority happened to detect regularity in the paroxysms of any fever, they prescribed bark at once, and stopped the fever. Most medical men give it now (in the form of quinine), wherever periodicity is traced. But their practice here, though right and proper, is to this hour dictated by a false hypothesis,—the hypothesis that the paroxysmal repetitions in all periodic complaints, spring, not from a law of the living economy, but from “malaria”—that bugbear of their own creation! Acting on this belief, their treatment of diseases which arise from palpable causes—burns, blows, &c., has, till of late years, been in almost every instance bad.

Their exhaustive practice, indeed, on the outset of almost all complaints, completely misled them here. Instead of alleviating or stopping the paroxysms, that practice almost always produced irregular paroxysmal frequency and continuance in cases where, without their interference, periodicity might have been easily detected; in which cases, doubtless, they might have cured their patients on their own "malaria" principle. The remissions natural to all disease, which in spite of their bad practice were sure to happen, the doctors actually mistook for the results of their own mistreatment! And thus it was, they ended as they began, by bleeding, leeching, and purging the patient on every fresh accession of the paroxysm, till within an inch of his life.

With these explanations, we have a complete key to the whole subject of the intermittency of disease, whether regular or irregular, partial or perfect. We have no difficulty now in understanding how, by bad treatment, the most regular and most easily curable fever may become the most irregular and most difficult to cure of febrile complaints; and why by good treatment a fever, in the first instance only partially or irregularly remittent, may, where exhaustive measures have not been used, return very briefly to the healthy state of body in which it originated.

The reader may now settle for himself the question, to which of two things we owe the recent reversal of Medical Practice,—to the discovery of the Unity, Remittency, and Periodicity of all Disease,—or, as Dr. Page and the College of Physicians would have the world believe, to some imaginary change of the atmosphere, or to some equally imaginary change in men's bodies, neither of which, by the way, they can themselves decide!

All our great philosophers and poets have made the phenomena of Life more or less their study. Shakspeare,

one of the most observant of men and things, and one of the profoundest and clearest thinkers of this or any other country, calls Human Life a "fitful fever." If this phrase in no way misrepresents the phenomena of Life in health,—if it in no way misrepresents the *orderly* phenomena of Life,—what can the modifications of the same phenomena which we call *Disorder* be, but modifications of Fitful Fever?

It will scarcely be denied by any reader of these pages, that the source of all dis-ease, like the source of all ease, is the brain; and no man in his senses can possibly doubt that the brain is the source of the passions and emotions. Now it is a well-known fact that, from ague to erysipelas, there are very few diseases which may not be caused by the passions. The resemblance between a fit of ague and a passionate fit,—a fit of fear, rage, grief, &c.,—is very remarkable; and this resemblance has not escaped the observation of thinking men. Shakspeare, for one, makes use of the phrase, "this ague fit of fear."

Ague is Fever in its least complicated form. That is why Dr. Dickson assumes it to be the Type of all Fever. And as no local complaint of a constitutional character can come without some general remittent wrong,—some fitful error both of Time and Temperature,—he assumes, moreover, that this Type of Fever is the type of all disease. All diseases, he contends, begin or end with Fever.

Whether, from its severity, a disease be termed an "inflammatory disease;" or, from the early prostration of the patient, it takes the name of "typhus;"—or, whether from some real or imaginary localism, the physician speaks of a given complaint as a gastric, a splenic, an hepatic, or an hysteric affection;—or whether, in fine,

"From some supposed blood taint,
Some humoral myth, he christens the complaint

Scrofula, scurvy, rheumatism, gout,—
 Those senseless terms men so dispute about,—
 Disorders, if we trace them to the root,
 All come to FEVER, chronic or acute."

Passing from diseases, the causes of which may be anything and everything the mind of man can conceive, to those disorders which can only be produced by a specific contagion—the *Exanthemata*, as they are called,—where can we find a better example of Unity of Type than in Small-pox? No physician, however able or observant, could on the first outbreak of Small-pox, tell this disease from any other fever; for here we have each and all of the three stages in which a regular paroxysm of fever consists,—the cold, the hot, the sweating;—and this paroxysm may remit and re-appear more than once, before the eruption give any hint of the true nature of the malady. Remission of the symptoms, whether local or general, is common to all complaints.

"Take chicken-pox, take measles, scarlatina,
 Diphtheria, influenza—take angina,
 Take any illness man may yet discover,
 All will be found remittent; all, moreover,
 In certain weakly frames, may sow the seeds
 Of any local evil ague breeds.

Further, in these and indeed in almost every other disease, you will find febrile paroxysms of more or less intensity.

"In jaundice, croup, consumption—what you will,
 The ague-fit is sure to meet you still.—
 Whate'er the external sources of Disorder,
 All our complaints come in this aguish order;—
 Chills, heats, and sweats belong to one and all,
 General or partial as they chance to fall;
 And all and each—unchecked by bark or steel,
 Or other influences that tend to heal—
 Follow a natural course of fit and pause,
 For periods varying with the case or cause.

But some may ask,—as they may fairly do,—
 What is Disease's most unfailing clue ?
 The answer is, 'Remission!' Short or long,
 This, as a rule, can never lead them wrong !"

Ah ! but the local complaints ! what clue, the reader will ask, have we for the treatment of the numerous local complaints that may grow out of the various febrile diseases just enumerated ? The answer is the same, REMISSION !

"Look at the local ills that, day by day,
 Grow out of febrile ailments—What are they ?
 Stripped of the technicalities of Art,
 Swelling or wasting of some given part—
 Leading, of course, to loss of form and function,
 A joint, for instance, thus may lose its unction ;—
 Morbid increase or decrease of a sense ;
 Spasms and palsies more or less intense ;
 Bleedings from lungs or windpipe, stomach, gum,
 Or other parts whence hæmorrhage may come ;
 Eruptions, ulcers, so called inflammations,
 Decompositions, disorganizations ;—
 No matter what men style the morbid thing—
 In these, as in the Fevers, whence they sprang,—
 Whether we look to size, pain, thermal change,
 Or other signs within disease's range,
 We find Remission still the common bond,
 The one grand key-note whereto all respond !"

Reader, let this be the key-note to your treatment of all medical diseases. The greater number of these diseases will, in individual cases at least, yield to bark or iron.

It is on the brain,—the source of motion and rest, the source of ease and disease,—the source of paroxysm and remission, that bark, iron, and every other remedy, whether passing into the blood by the stomach, lungs, or skin, sooner or later tell. Through the organ that FEELS the hurt, must the injured parts of the human frame be touched,

to ensure beneficial results from every kind of healing force. In diseases obvious to the eye,—diseases of the skin, for example,—what is the usual result of mere local measures? Rarely or never do skin diseases, whether chronic or acute, yield to local remedies. Why is this? Because the eruption that strikes the eye, is not the *beginning* but the *end*! Like all other local complaints not caused by direct mechanical or chemical agency, diseases of the skin gradually grow out of successive fits of febrile wrong. Accordingly, while resisting every kind of local tinkering, skin diseases will often readily yield to some medicine of a febrifuge character,—arsenic for instance,—arsenic, next to bark and steel, the most successful remedy for intermittent fever!

Dr. John Brown, who wrote a Book on Medicine some seventy years ago, divided all diseases into two classes,—namely, Sthenic and Asthenic diseases,—diseases of strength and diseases of weakness. In the first, he bled and purged; in the second, he gave opium and stimulants. Had Brown been aware that almost all diseases remit, and moreover periodically remit, blood-letting would doubtless have formed no part of his treatment. In that case, instead of the Duality of disorders, which he advocated, he must have anticipated Dr. Dickson in his discovery of the Unity of Disease. For want of this clue, John Brown's writings did little more than for a brief period unsettle the minds of medical men; but upon the practice of physic generally, they produced no change whatever,—as every person in the very least conversant with the medical literature of our own country knows full well. Until the last ten or twelve years, as we have shown, bleeding and other exhaustive treatment continued to be the English medical rule. And mark this significant fact—in the British schools, up to this hour, there is not a single text-book in which Blood-letting does not stand as the first of remedies!

But the reader may ask—Are there then no complaints which never remit at all? A few diseases of this kind there certainly are,—diseases of a purely surgical character,—such as strangulation from rupture, and other affections produced by mechanical obstruction. Wherever you have permanency of symptom, look for permanency of cause. Wherever the symptoms remit, the cause cannot be permanent. Therefore, whether for the detection or for the cure of disease, there is no clue which can be compared to Remission. In the case of permanency, surgical assistance may or may not be necessary; here at all events, doubts may arise. In the case of Remission, your course is clear.

“*Principiis obsta*—on the outset act,
 And crush disease at once by skill and tact;
 Crush it ere from neglect the frequent fit
 Becomes a habit difficult to hit.
 However fierce the storm, expect a calm;
 Now is the time for the preventive balm!
 Whether, as in the Ague’s simpler forms,
 Remission lasts a day between the storms,
 Or gives ten minutes’ respite to the frame,
 The principle of cure remains the same.
 What is that principle? As in the Ague,
 To stop recurrence of the fits that plague you.
 Strengthen the head, and leave the parts alone;
 You know the means to give the main-spring tone?
 Relying on the lull, however brief,
 Push Bark and Steel to permanent relief;
 And failing these,—for both may disagree,—
 Change to whatever else makes FEVER flee.
 If the Remission, treated thus, endure
 For an indefinite period, That is Cure!”

It is almost impossible to get rid of old familiar medical names. However absurd their origin, we must still use the words gout, rheumatism, scrofula, scurvy, &c., as counters to reckon by. But where the symptoms of any given case of dis-

ease remit or intermit, what does it signify, so far as the treatment is concerned, whether you call the complaint gout, rheumatism, scurvy, scrofula, hysteria, or anything else? Not one of these terms will in the very least help you to cure it. But with Remission for your guide, and with febrifuges like Bark, Steel, and stimulants for your tools, you may at once stop the paroxysmal recurrence of every form of disease, baptize it how you please. Having done this, you can scarcely fail to set down the laboured distinctions, which so captivate the schoolmen, at their true worth—so much twaddle!

A doctrine so uncomplimentary to the professors of the healing art was not received with particular favour by the heads of colleges and universities, in this or any other other country. Nor was it received very cordially by the great body of medical men in civil practice. By every grade, indeed, of medical practitioners in civil life—men who depend less on quick cure than on long attendance on their clients for their livelihood—the cold shoulder was naturally turned to the author of a discovery that shortens almost every kind of sickness. The opposition that met the first introduction of the Peruvian Bark as a remedy for Ague, meets to this hour the early use of the same substance (in the form of Quinine), in the thousand and one ills whereof Dr. Dickson discovered Ague to be the Type. And the source of this opposition is now as it was then—self-interest!

But it is not in physic only that the improvement of a science by which its cultivators live, may be opposed from interested motives. The same thing happens in law; and still more strange too in law, as in physic, the obstructives have almost invariably the advantage of being supported, in the outset of the struggle at least, by the public themselves, to the public damage. “The voice of all jurists,”

says Bentham, "is raised in concert to celebrate an established system; and the people, *misled by their unanimity*, do not stop to discover the self-interest which produces it." The people, therefore, as a matter of course, side with the majority.

Whether in England, the colonies, or the United States of America, so far as the great bulk of the medical profession is concerned, the same cause has produced the same effect—opposition, opposition—nothing but opposition to what will cure quickly.

Read the following from the *Boston Medical and Surgical Journal*, an American publication:—

"To establish the fact that the type of all diseases is intermittent fever, Dr. Dickson lays it down as a broad fact that all diseases commence with 'agueish fits.' Now every practitioner knows that very many diseases,—even very extensive and severe inflammations, and sometimes general fevers,—come on without any aguishness at all [a mistake, as any man may discover for himself who goes to the bedside, and not to books for his facts!] This attempt of Dr. Dickson to make out all diseases to come on with agues or chills [why does the reviewer leave out "heats?"] is intended to establish the periodicity of every movement in the body, both normal and abnormal. The discovery of the periodicity of all morbid and healthy movements, is that on which he mostly plumes himself, and tenaciously and exultingly claims as his own. He extends this theory of the periodicity of movement, not only to all vital, but to all physical actions, even to all stellar movements, and to earthquakes, tornadoes, and hurricanes. The doctrine of Unity of Action he extends through all Nature's works, up to the Deity himself, but he does not claim periodicity for the Supreme Being. If, by

Periodicity, Dr. Dickson means simply exacerbations and remissions, without any reference to regularity of time, we shall not differ from him [the reviewer has already shown Dr. Dickson means quite the contrary!] for morbid and healthy movements vary every hour in the day, and every day of the disease, just as the winds blow high or blow low [such changes occasionally disturb the natural periodicity of disease!]; and once in a year or two, or oftener, or not so often, we have earthquakes, tornadoes, &c. Now, we have no idea of calling the one or the other of these variations *periodical*; such theory is what we Yankees call a matter of moonshine, a pure creature of Dr. Dickson's heated imagination."

Thus much we read in the *Boston Medical and Surgical Journal* of December, 1845.

Plagiarized fourteen years afterwards by so eminent a professor as Mr. Paget, this pure creature of Dr. Dickson's heated imagination may now be looked upon as an established fact. But Mr. Paget is not the only medical man of eminence who has similarly demeaned himself. The list of gentlemen who stand in the unenviable position of plagiarists of Dr. Dickson's views, has been gradually increasing from the first promulgation of the doctrine; and this list now includes the names of Sir Henry Holland, Sir Benjamin Brodie, Dr. Todd, Mr. Skey, Professor Laycock of Edinburgh, and other practitioners of less note;—all of whom, in their various writings since 1836, have either more or less covertly acknowledged the Remittency and Periodicity of all vital phenomena, or have plagiarized the treatment based on the discovery. In the first instance, the leaders of the profession did all they could to extinguish the light. Failing in this, their next move was to extinguish the man; they calumniated where they could not refute. Their last desperate step was, if possible, to take the

light out of the hands of the discoverer altogether, and reduce it to the dimensions of a farthing candle!

To protect the rights of authors, there is a Copyright Act, but this Act, unfortunately, affords no protection to medical discoveries. Mr. Curtis, the barrister, in his work on Copyright, divides Plagiarism into three branches, and the following is his remark on No. 3: —

“No. 3. Piracy by imitation, or by reproducing with colourable alterations and disguises assuming the appearance of a new work. This is by far the most frequent form in which the Copyright of Authors is infringed.”—p. 253.

It was by a manœuvre of this kind the late Dr. Todd rose to eminence. Years and years after the publication of the *Fallacies of the Faculty*, Dr. Todd continued to treat apoplexy, paralysis, and pneumonia, by every form of depletion, according to the approved fashion of his early teachers—the Dublin Sangrados. Somewhere about the year 1850, the Professor of Medicine in King's College changed his tune. Then, for the first time, he published his “New Treatment of Apoplexy and Pneumonia by Quinine and Mild Tonics from the commencement.” Adopting Dr. Dickson's practice, Dr. Todd ignored Dr. Dickson's principle. For Remittency—a phenomenon traceable in all medical, and in most surgical complaints, Dr. Todd substituted an invention of his own, which he termed “Blood-poison.” All diseases, quoth Dr. Todd, spring from “poisoned blood,”—*ergo*, all diseases, for their cure, require bark, steel, and stimulants. Why? Because, according to Dr. Todd, these remedies act as “antidotes to poison!”

“As antidotes to poison—curious creed!—

A flimsy mask for a piratic deed,—

The usual practice here, as matters go,

When rogues would reap where men of genius sow.

Finding the chrono-thermal method sure,
 Todd, with an eye to fees, adopts the cure ;
 Prescribes Bark, Steel, and stimulants—yet ignores
 The principle whereon the plan restores,—
 Ignores disease's intermittent turns,
 Yet acts upon the very law he spurns !
 But, to disguise the coach wherein he rides,
 He darkens the escutcheon on the sides,
 Removes the owner's crest—a living head—
 And paints a horror of his own instead.
 What is 'blood-poison' doing,—tell us, please,
 During the intermissions of disease—
 During the periods when, from fever free,
 Pulse, tongue, and skin are as they ought to be !
 Remission thus repeated and repeated,
 Is no creation of a mind o'er-heated—
 Remission is a state you see and feel,
 The surest guide for Tonics—Bark and Steel.
 But 'poisoned blood'—whence comes it ? 'tis a myth
 Without a particle of proof or pith—
 A figment to bamboozle, and withdraw
 Attention from the great Remittent Law ;
 Making Disease's Unity depend,
 Not on the parts where hurts begin and end—
 Not on the brain, the source of pang and pause,
 But on the blood, changed by some mystic cause.
 A weak invention for the sake of plunder—
 A swindle, a perversion, and a blunder !”

What of that ? With his blood-poison figment, the
 Professor of King's College made a decided hit. The
 London apothecaries—general practitioners, I beg their
 pardon—were just at that moment in want of a leading
 card. Having themselves been compelled by the “requirements
 of the age,” to a great extent to change their practice,
 they looked about them for a substitute for Dr. Watson,
 who, it was notorious, carried depletion to its extreme point.
 In Dr. Todd they found a bird of their own feather,—a man

who met them half-way,—and him accordingly they called to their “consultations.” By this procedure they hoped to trip up the “chrono-thermal man” on his own ground.

“Silently, slowly pilfering piecemeal
 All of his system worth their while to steal,
 The sordid tribe, who live for pelf alone,
 Support a mongrel system of their own,—
 A cunning mixture of the old and new,
 The false so deftly blended with the true,
 And so conforming in its outward mould,
 Few can say which is pinchbeck which is gold;—
 Then in the room of Genius place a clod,
 And shout, ‘Behold the Esculapian God!’”

The reign of this spurious object of professional worship, came to a close in the spring of the present year. Dr. Todd died last February, in the fulness of fame and fees; and great were the lamentations of the London medical men, when their favourite was gathered to his fathers. Immediately after his death, the press teemed with articles in his praise. An obituary notice appeared in the *Times* newspaper, which the conductors of that journal, with their usual caution, headed “from a correspondent.” Among other laudatory passages, that notice contained the following:—

“He (Dr. Todd) looked on all disease as *one*; thoroughly conversant with the several avenues and processes of the body deranged by it; and was thus enabled, not only to see comprehensively, and to teach decidedly, the phenomena before him, but with all the energy of a wonderfully active mind, to take a LEADING PART in *moulding* the theories that were current in his youth, into *conformity* with the requirements of an epoch [the requirements of an epoch,—the old story!] in which physiology has made greater strides than in all former periods combined” [with nobody’s assistance, of course!]

The point on which the writer of this paragraph dwells as most worthy of praise, is that whereon Dr. Todd most deserves condemnation. How Dr. Todd could contrive to reconcile error with truth; how he could contrive to bring Unity of Disease into harmony with the multitudinous hair-splitting of disorders taught in his younger days; and how he could—*except by a process of adulteration*—take a leading part in *moulding* the all but exploded practice of bleeding, leeching, purging, and salivation in Apoplexy and Pneumonia, into conformity with his own later treatment of both diseases by “Quinine, Iron, and Mild Tonics, from the commencement,” are problems that would defy anybody but a conjuror to solve! Come we to facts.

Do we owe to Dr. Todd the discovery of the Unity of Disease, which his friends seem so anxious to award him? We do not.

Was it Dr. Todd, or any friend of Dr. Todd, who first introduced the tonic practice in Apoplexy and Pneumonia in any stage of either disorder? It was not.

Whether as regards the doctrine of the Unity of Disease, or the great practical changes which for some years back have been silently taking place in medicine, Dr. Todd, and the friends of Dr. Todd, only followed in the wake of another man. Dr. Todd had neither the grace nor the honesty to acknowledge himself that man's disciple. He was a plagiarist simply; a plagiarist, with a mask so transparent, and an adulteration so coarse, the merest tyro in the profession could scarcely fail to see through the one and detect the other!

When accused—repeatedly accused—of these plagiarisms in the columns of the *Medical Circular*, Dr. Todd was silent. When accused of the same acts in the *Times* newspaper and elsewhere, by the man whose treatment

he pilfered, Dr. Todd was still silent; neither he, nor his friends for him, had a word of defence. *Magna est veritas et prevalebit!* In the teeth of these facts, will any sane man doubt the source of Dr. Todd's "new treatment of Apoplexy and Pneumonia by Quinine and Mild Tonics from the commencement?" For the extravagant employment of stimulants, with which Dr. Todd would appear to have coupled his "new treatment," the physician in whose footsteps he followed is in no way responsible. Dr. Dickson advocates the use, not the abuse, of stimulants.

So much for Dr. Todd himself,—so much for the man who "with all the energy of a wonderfully active mind," took "a *leading part* in moulding the theories that were current in his youth, into conformity with the requirements of an epoch in which physiology has made greater strides than in all previous periods combined!" And now comes the question, who assisted the professor of King's College here? Who took the other "leading parts" in this juggle?

We have mentioned the names of Sir Benjamin Brodie and Sir Henry Holland; the first is Serjeant Surgeon to the Queen; the second is Her Majesty's Physician in Ordinary. Without very good evidence, it would not be easy to convince most people that men so highly placed, could be implicated in a plot so disgraceful. But stranger things have happened ere this. Some fifty years ago, Sir Everard Home was what Sir Benjamin Brodie is now, Serjeant Surgeon to the occupant of the British Throne. This office he obtained through the influence of John Hunter, his connexion by marriage. On the death of Hunter, Sir Everard Home came into possession of the manuscripts of his distinguished brother-in-law. The bad use he made of Hunter's papers is matter of history. Having carefully gutted them of all that appeared valuable,

he published in successive volumes of the *Philosophical Transactions*, the matters thus purloined, as his own contributions to Comparative Anatomy. To conceal his fraud, Sir Everard Home burnt the Hunterian manuscripts!

Reader, it was at the feet of this Gamaliel Sir B. Brodie was brought up. Sir B. Brodie, for years, assisted Sir E. Home in his practice; and it was through the good offices of Sir E. Home he first attained a position as a London surgeon. How Sir B. Brodie managed to keep that position, is a question that does not concern us. He did not *then*, at all events, interfere with the orthodox practice. The question we have to deal with now is, how far Sir B. Brodie has since plagiarized Dr. Dickson,—how far he has sucked the brains of a man he, in common with so many of his brethren, still decries. Let facts speak.

In 1813, Mr., now Sir B. Brodie, came out as a specialist on *Diseases of the Joints and Spine*. In a paper which appeared in the *Medico-Chirurgical Transactions* of that year, Mr. Brodie, for the guidance of young surgeons, recommended bleeding, leeches, cupping, calomel, blisters, setons, and caustic issues, as the best treatment of these diseases. And so satisfied was he with the “advantageous” results of that treatment, even so late as 1834—after, in fact, TWENTY-ONE YEAR’S FURTHER EXPERIENCE of hospital and private practice—he held that nothing better could be done. Certain at least it is, that in an edition of his *Treatise on Diseases of the Joints and Spine*, published that year,—the year, by the way, in which he was made a Baronet,—Sir B. Brodie did not think it necessary to make any alteration in his treatment of them by leeches, calomel, and cupping—using those exhaustive and repulsive measures *then*, even in cases of “chronic inflammation.” And in so far as blisters, setons, and caustic issues are

concerned, this eminent surgeon still continued to express himself perfectly pleased with the "*singular benefit*"—I quote his own words—"usually" resulting from these "advantageous" remedies.

Now it is a curious fact, that so long ago as the year 1839, the author of the *Unity of Disease*, sent Sir B. Brodie a copy of that book, in which he denounced Sir B. Brodie's system of practice as a barbarism throughout. "In that book," writes Dr. Dickson, "I condemned everything he did. I condemned the bleeding, leeching, cupping, blistering, and aperients; I condemned the setons and issues; I condemned the abuse of calomel; I condemned the long confinement to the recumbent position, which he recommended his patients to undergo; I condemned Sir B. Brodie's whole practice, both local and general, so far as regards the management of diseases of the Joints and Spine. Each and all of these diseases, according to my view of the matter, growing out of a great *antecedent* constitutional wrong; each and all of them being special developments of a remittent or intermittent febrile affection of the whole frame; each and every of them I contended might be far more safely combatted by Quinine, Iron, and other internal remedies, proper to the treatment of remittent or intermittent fever, than by any *local* measures whatever. Over and over again I reiterated that statement, giving cases at the same time to verify my assertion."

It was a long time before Sir B. Brodie acknowledged his error; but he did at last acknowledge it, though as will by-and-by be seen, not in the handsomest manner.

In 1850—reader, mark the date!—turning his back on a practice which, though the practice of the greater portion of his life, he was evidently now very heartily ashamed of,

Sir B. Brodie published a new work, which he was pleased to call the "Fifth edition of his Treatise on Diseases of the Joints and Spine, with *Additions* and *Alterations*."

Many and great are the alterations here, but graver and greater are the omissions. One case in particular is omitted, which, as it was published in all the former editions, might reasonably be supposed to have been considered by him a model of his *superior* treatment. The case of an unfortunate boy whose head and *legs* he leeches and blisters, and whose body he purges for a periodic *head-ache* of "a few minutes' duration," has no place here! All is strangely mutilated and altered; yet Sir B. Brodie tells his readers how happy he is that all his "subsequent experience has tended to *confirm the general accuracy* of those pathological views which he was led to adopt" in his first publications! Such actually is the statement he makes in his preface to this new *Edition*—an edition wherein he absolutely abandons every one of the more prominent measures and opinions, on which he had, for upwards of *thirty years*, very particularly plumed himself. The "additions" with which in his title-page, Sir B. Brodie couples his "alterations"—he omits to tell his readers are neither more nor less than so many "subtractions" from the pages of a writer he and his friends had for years affected to despise as "the madman," who wrote the *Fallacies of the Faculty*!

In a chapter on *Neuralgia of the Joints*, which chapter, be it observed, has no place in his book of 1834, Sir B. Brodie in 1850, thus delivers himself:—

"By far the most frequent cause of Neuralgia, is a *hysterical* state of the constitution. It may therefore well be supposed that the disease is more in the female than in the male sex. The latter however is not altogether exempt from it."

Now the word "hysterical," being derived from the Greek word *ὑστέρα*, (*hysterà*) the *womb*, how are we to understand Sir B. Brodie? Does he mean that the male, as well as the female, is liable to a disease proceeding from or pertaining to the womb? That is the meaning of the word "hysterical." Is this sense or nonsense?—science or drivelling? But let Sir Benjamin proceed.

"Some years ago, a *large proportion* of the cases which were treated as diseased joints, were of this description; and looking back at the early part of my own practice, I am sensible that mistake is one which I often made myself."

What was the result of his frequent mistakes here? What might be suspected. Worn out by repeated torture, and by every kind of exhaustive medical treatment which mistaken ingenuity could devise, a "large proportion" of Sir B. Brodie's neuralgic patients, during the "early part" of his practice, were relieved of their limbs on the amputating table. Why does the eminent operator omit to tell us that the "early part" of his practice comprised something like thirty years of his professional life? Does not this omission look like a *suppressio veri*? Does it not savour of the *suggestio falsi*?

"The subject is now (he informs us) better understood by surgeons." This is satisfactory, so far as it goes; but Sir B. Brodie does not tell us who first taught surgeons to understand the subject better; though he admits "the same mistake is occasionally made even at the present time."

In this we can bear him out. A year or two ago, the writer of these pages was called to a lady who had her limb amputated for neuralgia of the knee; but the operation gave no relief. For months afterwards she continued to suffer from neuralgia in the stump!

"Occasionally," Sir Benjamin Brodie goes on to say, "occasionally, when a joint has been a considerable time

the seat of hysterical pain [what kind of pain may that be?], a slight degree of suffused swelling is perceptible in it, apparently the consequence of some effusion into the cells of the cellular texture external to it. This corresponds with what may be observed in some other cases of neuralgia. In a gentleman who was the subject of facial neuralgia (*tic douloureux*), attended with an unusual degree of suffering, there was the same kind of swelling of the face, although there could be no doubt that the real seat of the disease was not in the nerves, but in the brain itself."

The brain itself! Why, that sounds more like *cerebral* than *hysterical* disease. Sir Benjamin Brodie makes no mention of the brain in any of the former editions of his work, in connexion with local disorders. But—

"At other times (he informs us) there is a periodical change of temperature, not only of the affected joint, but even of the whole limb. In the morning it is *cold*, and pale, and shrunk; towards evening there is evidence of a more active circulation—the surface of the skin is *hot*, red, and shining."

Sir Benjamin Brodie says nothing of those general "chills and heats," on which Dr. Dickson lays such stress; but he makes the important remark that—

"During the night the heat and redness subside, and these alternations are as regular as the paroxysms of an *Ague*."

The *Ague*, or *Fever*, of which the local symptoms are developments, would appear to have escaped his notice!

"Such cases," nevertheless he tells us, "are not very uncommon, and they are always very perplexing to the practitioner who for the first time is consulted about them."

Not very uncommon! They are of daily and hourly occurrence, Sir Benjamin; and you know it. Every man of any standing in the profession knows it now! But taking

your own words, that they are "not very uncommon," why should any case of any disease in that category puzzle a properly educated practitioner? Why indeed? This is the answer. The Schools of Medicine do not teach medicine; they do not teach the remittent nature of disease. Till the schools do that, the practitioner must be in a perpetual state of perplexity in every kind of disorder. To practise medicine scientifically, without that knowledge, is an impossibility; and the want of that knowledge imposes on the practitioner the necessity of a daily succession of lie and subterfuge, to screen his ignorance. How came Sir B. Brodie to be wiser than his fellows here? He owed the discovery, he tells us, to his own "more enlarged experience." And what was the practical conclusion to which that discovery led? This:—

"The sulphate of quinine, preparations of iron, the citrate of quinine, and iron, may generally be exhibited with advantage."

Not one word of thanks to the man who, so far back as 1839, sent him the book that taught the proper treatment of the diseases of his own specialty! He had never read it,—perhaps. We recommend to Sir B. Brodie an advice of Lord Bacon:—

"Always when thou changest thine opinion or course, profess it plainly, and declare it openly, *together with the reasons that move thee to change*, and do not *steal it*."

Having given the reader specimens of the manner in which Dr. Dickson's discovery has been pilfered by the adulteration dodge, and the "more enlarged experience" dodge, we come now to the prophecy dodge, or plagiarism by prophecy—after fulfilment!

In Sir Henry Holland's *Medical Notes and Reflections*, a work which has run to three editions—we shall speak

of their respective dates by-and-bye—the reader will find what follows :—

“Has sufficient weight been assigned in our pathological reasonings to that principle which associates together so many facts in the history of disease—namely, the tendency, in various morbid actions, to distinct INTERMISSIONS of longer or shorter duration, and more or less PERFECT in kind. The subjection of so many diseased actions to this common law, establishes relations which could not have been learned from other sources, and which have much value even in the details of practice.” “It will probably be one of the most certain results of future research, to associate together, by the connexion of causes of common kind, diseases now regarded as wholly distinct in their nature, and arranged as such in our systems of nosology. This remark applies very generally through all the *genera* of disease. The influence of certain medicines, and particularly of Bark, in curing even the most anomalous varieties of intermittent disorder, is a fact of great interest. It enables us to denote and class together symptoms, apparently the most remote in kind, but which presumably, could not be thus relieved unless depending on some COMMON MORBID CAUSE.”

A mistake, Sir Henry ! Each and every one of the symptoms you mention, instead of depending on “some common morbid cause,” may proceed from any one of a thousand morbid causes, acting on a common centre—the Brain !

But for an instability of Brain common to all diseases, an instability of Brain which any cause of sickness may produce, there could be no such thing as an intermittent disorder. To the Brain, then, the source of pang and pause—the source of remission and exacerbation of every disease, general or local—local, so called—must we look

for the cure of all complaints. In the Unity of *source*, Sir Henry Holland—not in the Unity of *cause*—lies the secret of the Unity of influence of the Peruvian Bark!

“We can hardly touch on this subject of FEVER, (Sir Henry continues) without finding in it a bond with which to associate together numerous forms of disease, but withal a knot so intricate, that no research has hitherto succeeded in unravelling it.”

No research has hitherto succeeded in unravelling it! Sir H. Holland first printed this sentence in 1839; he repeated it in 1845; he re-repeated it, word for word, in 1856. In the teeth of the facts recorded in these pages, Sir H. Holland three times deliberately and knowingly repeated this gross mis-statement!

Of all the many forms which disease may assume, in one solitary complaint only—the Ague—did the profession, till of late years, endeavour with bark or iron to prolong to a cure those “intermissions, more or less perfect in kind,” which we have seen are common to the whole catalogue of human suffering. Utterly and entirely ignorant of the universality of this law of periodic remission and return,—instead of hailing the repeatedly recurrent immunity from suffering as a God-send, and by remedies preventive of the paroxysm taking advantage of it to stop all renewal of the disease,—the medical people to a man stood stock-still, and looked on with the complacency of infants during these intermissions, which, according to Sir H. Holland, have so “much value in the details of practice.” But with every recurrence of the Fever-fit, their activity recommenced; then the doctors, one and all, at once proceeded to bleed and bleed, leech and leech, purge and purge,—repeating and re-repeating this practice with every fresh fit! And when, in spite of all this, and more than this, the patient got daily

worse and worse, every and each of them next blistered and mercurialized their victim either till he died outright, or till his life was at the lowest ebb—to conquer what they believed to be a return of “inflammation,” “pressure,” or “congestion!” Till within the last few years, what knew the great mass of the medical people about paroxysm and remission as a law of all disease? What knew they of the “tendency in various morbid actions to distinct intermissions, of longer or shorter duration, and more or less perfect in kind?” What knew they of the “bond with which to associate together numerous forms of disease”—“Fever”—Intermittent Fever—AGUE? In all our text-books up to this hour, so far from being recognized as a *law* of all disorder, Periodic Intermission and Return are declared to be *exceptions* to the whole history of disease!

Every man in the profession knows better now. But do the public profit to the extent they ought to do by Dr. Dickson's discovery? They do not. Why? Because the public give, for placebo practice and long attendance, what they deny to talent and quick cure!

In the profession now, we have Specialists of every kind—one for this part, another for that—people who reduce physic to a mere system of local tinkering.—

“No longer looked on as a living Whole—
A clock-like Unity from crown to sole,
Whose every move the Main-spring must control!—
The Body now, like a dismembered thing,
Of ravenous birds becomes the toss and fling.
Owl, kite, and vulture, each with special mark,
Pounce on the spoil, and fatten in the dark.
One takes the ‘Heart’—another tries the ‘Lungs,’
O’er which they chatter in conflicting tongues;
A third, less dainty in his choice of meats,
The ‘Stomach and its difficulties’ treats;

This with the 'Liver' manages to dine,
 That banquets doubly from the 'Joints and Spine.'
 Some with the 'Spleen' their hungry bellies fill;
 Some feast on 'Kidney,'—devilled if you will.
 These take the 'Mucous Membrane'—these the 'Skin';
 Those with the 'Colon' their repast begin—
 No part so loathsome, no disease so foul,
 But has its furtive kite or peering owl,
 Who, with the instinct of his carrion caste,
 Sticks to the living quarry till the last.—
 But blackest, vilest, of the moral scum,
 Is that false harpy with the speculum!
 Out on the wretched quacks who would divorce,
 The body's fragments from the ruling force!
 Out on all specialists! while such exist,
 How can God's truth the public mind enlist?
 Nay, how or where, till the great human hive
 Themselves in Natural Science deeper dive,
 Can any but these tinkering creatures thrive?"

In London there are special hospitals for diseases of almost every part of the body—Hospitals for the Eye and Ear—Hospitals for the Chest—a Cancer Hospital—a Lock Hospital—an Hospital for Palsy, and an Hospital for Stone and diseases of the Urinary Organs! Within the last few months there has been a sort of reaction in the profession against this utter destruction of the Unity of Medical Science. But many, even of those who join in the cry against the "Special Hospital Nuisance," are very little better than impostors themselves. Professing an unlimited faith in the powers of Nature, numbers of medical men are now content to watch events. This they call studying the "Natural History of Disease;" and certainly it is very much better than killing people outright, as the doctors used to do by their exhaustive measures. But if this is all that Medical Science can accomplish for the sick, the sick may as

well be without its assistance as with it. Practitioners who act in this manner are traitors to their art. A very little reflection will prove the fact. Take the case of Ague;—this disease is either amenable to good medical treatment, or it is not. Who, with the smallest experience of the readiness with which the Ague-fit may be checked by Quinine, would withhold its use in that complaint till the patient, worn out by repeated paroxysms, finds himself at death's door? No man with a name to gain, or a character to lose. Why, then, permit any other of the thousand and one forms of disease—whereof Ague has been shown to be the type—paroxysmally to repeat and repeat itself, till recurrence becomes a habit so inveterate, the best remedial means may fail to stop it;—to say nothing of the local disorders, certain in many cases to ensue? Local complaints, of a constitutional kind, can only come through fever—they cannot come of themselves. Local complaints, like chickens, must be hatched! What better method could be devised to produce local diseases, than to let constitutional disturbance proceed, fit after fit, unchecked? Yet this is actually the course which is now, to a great extent, pursued in civil practice. This study of the Natural History of Disease is a mean pretence. Its object is procrastination. Those who recommend it are not physicians. To men of this stamp, the following lines are addressed, on the principle of Dean Swift's *Advice to Servants*:—

We've traced the Natural History of Disease ;
 Study it, doctors, while it brings you fees—
 Heaven grant the case may yield a golden crop—
 But how can people study what they stop ?
Festina lente—take a leaf from Law ;
 Do counsel hurry when they find a flaw ?

Mark in succession what the sick endure ;
 Nature is potent, give her time to cure.
 If, like the Ague, all complaints remit,
 Business is business, mitigate the fit ;
 Repeat the process every fresh return—
 Cheer men who shiver—cool them when they burn !
 With each new phase disorder undergoes
 Your interest in your patient deeper grows ;
 But how can he, or those about him know it,
 Without an opportunity to show it ?
 Save and except where Death is at the gate
 Why Nature thwart ?—why interfere with Fate ?
 Stop not a case, whatever else you do, sirs,
 Science and shop were equally the losers !*
 To watch disease, and profit by the act,
 Require no little management and tact.
 Study men's tempers and distempers well ;
 Note the weak point, and learn to make it tell ;
 Encourage all to take their favourite bent,
 And while they harp upon it, nod assent.
 If with "soft sawder" you contrive to please,
 And give a restive patient present ease,
 Then you may play upon him like a flute,
 And change his case from chronic to acute ;
 Making his well-lined pocket, so to speak,
 A "pail of milk" to last you many a week !
 To crown your work, be careful to instil
 A due respect for his physician's skill ;
 When, for example, paroxysms depart,
 Place the remissions to the effect of art ;
 On the recurrence of the chills and heats,
 Tell him to be more cautious what he eats ;

* " Our present *successful* plan of cure—for this, undoubtedly, *cannot* be made the subject of a difference of opinion [?]*—is, I apprehend, due to our general non-interference with the course of nature in the succession of morbid actions, SAVE—and THEN only—when we see them running on rapidly to a FATAL RESULT. The modern triumph of our art is more in the happy forbearance exemplified in our negative treatment, than in the positive success of any heroic remedy.*"—From an Editorial article in the *Medical Times*.

Should local mischief *follow*—change your ground,
 And say how glad you are the *cause* is found !
 Of local means exhaust the usual list,
 Then call some special artist to assist :
 While work is to be had, it must be done ;
 Two heads, of course, are better now than one.
 An oculist perchance may help you here ;
 An aurist through the throat may pierce the ear ;
 A stethoscopist, perfect in his part,
 Will find a flaw in the most healthy heart.
 The patient, if a lady, you presume
 May want some special doctoring for her womb ;
 Here, too, are pliant men to solve a doubt,
 And help a friend to ferret business out.
 In consultation—*Anglicé* collusion—
 Keep chrono-thermal influence from intrusion ;
 Daylight, unpleasant daylight, once let in,
 No one can tell where ruin might begin.
 Preventive practice—cry it up who may—
 As things are managed now, can never pay ;
 Do what you can to knock it on the head,
 And thus, like men of sense, preserve your bread.
 Damn every statement DICKSON dares to print,
 And treat his so-called facts with shrug and hint ;
 Or, if need be, with slander more direct,
 Send to perdition him and all his sect !
 While yet Expediency in Physic rules
 Leave abstract justice to good-natured fools ;
 Stand by your order—you are safe, at least
 So long as crowds are willing to be fleeced !
 Did all complaints with the first pill depart,
 Where were the triumphs of the Healing Art ?
 With fiddle-faddle few are discontent,
 But who will pay you simply to prevent ?
 Numbers will fee you twice a day while sick,
 Yet grudge a guinea where the cure is quick ;
 Thinking, no doubt, that what so nimbly flees
 May, after all, be no such grave disease !
 If then, while down, men pay without demur,
 By all means let the paroxysm recur ;

For cure rely on Life's repairing force,
 And leave disease to take its natural course ;
 Conduct it—guide it—till it mends or ends—
 Why stop a thing on which your bread depends ?

The simple-minded reader will laugh at all this, of course. The same man who looks sharp after his lawyer will give the most unbounded faith to his doctor—a great mistake !

The " Law's delay " is a proverbial fact ;
 But Physic apes it now in every act ;
 Now both professions use the same device
 To sell their Science at the highest price,
 And few in either craft account it sin
 To " nurse a case " so long as fees come in !

It is the common cry of the profession now that Fever will run its course, do what you will. And the same thing is said of small-pox, measles, chicken-pox, &c. Believe it not ! There are very few forms of general disorder which may not be shortened by good medical treatment. In Physic, as in most things, where there is a will there is a way.

Hitherto we have said nothing of the most efficient practice in disease during the paroxysm. What, for example, is the best method of shortening or alleviating the severity of the Fever-fit ? Any medicinal agency which will act as a cerebral Soother, or a cerebral Revulsive, may at once cut short the paroxysm of most forms of febrile disease. Of Soothers, Chloroform, skilfully and discriminately used, is much to be depended on. Of Revulsives, the best are Emetics. When you mention Emetics to some medical men, they will talk to you of Purgatives as equivalents. They mistake—Purgatives too often keep up wrong action—Emetics usually reverse it. Every paroxysm of disease that has a name may yield to

an Emetic, or a few inhalations of Chloroform administered in the outset. Followed up by Quinine, Steel, or some other febrifuge, this is by far the most successful plan of cure in Acute disorders. By this practice Asthma, Pneumonia, Pleurisy, Rheumatism, Gout and Mania may, in numerous instances, be arrested or subdued—proof positive that one and all of these diseases begin in the Brain! Small-pox, treated thus, is seldom or never confluent,—Diphtheria rarely fatal, What is the usual result of the present fashion of local tinkering in Diphtheria? In an overwhelming majority of cases – death! Dr. Dickson seldom interferes with the throat at all in diphtheritic disease. He treats the disease on constitutional principles with Emetics and Quinine; and as yet he has never had to deplore a fatal result in diphtheria. The effect of Emetics here is magical!

What a death-blow all this to the strawsplitting and elaborate distinctions of the men of the Anatomical Schools! It is a great mistake to suppose that diseases cannot be cured without a knowledge of Anatomy—a mistake the conductors of our popular literature have occasionally fallen into.

“Every living being,” says a writer in the *Household Words*, “every man, woman, and child, endures a certain ascertained amount of sickness during life; for the alleviation of which medical knowledge and skill are required. But medical efficiency in the treatment of disease cannot be gained unless the young doctor bases all his subsequent studies upon a thorough knowledge of the structure of the human body. This information can only be had by *the use of the scalpel on the dead*. The very notion is apt to send a thrill through every nerve of those unaccustomed to regard the subject in a philosophical light. But the terms are absolute—no dissection, no knowledge!”

Were this statement correct, we should at once lay down our pen. In that case it would be utterly hopeless to attempt to enlighten the public on the subject of medicine, presented to them in so repulsive a form. What can be more repulsive to the mass of mankind, than the blood and filth of the dissecting-room? Luckily for the human race, there cannot possibly be a greater mistake than the assertion that medical knowledge can only be obtained by dissection. In rare cases only is an acquaintance with the minutiae of the internal structure of our bodies at all necessary to the treatment of the various maladies that come under the charge of the Physician. But even this kind of knowledge may be very competently taught, without dissection at all. Anatomy, like geography, may be taught by maps and models. Far be it from us to deprecate the practice of dissection by professional men. However repulsive this may be in the first instance to the medical student, he is soon reconciled to it by habit and example. With the public at large, things are different. Medicine, to be a popular study, must be taught in a popular manner. To understand the right principle of curing most diseases—namely, the principle of Remission—a knowledge of Anatomy is not in the least necessary. Even the older physicians held Anatomy in contempt. Sydenham said, “Anatomy is a fit study for painters!”

The greater number of medical men, when they leave the schools, know almost as much Anatomy as their teachers. When Sir Benjamin Brodie commenced business as a surgeon, there was perhaps no better anatomist in London. Notwithstanding this, for upwards of thirty years, almost everything he did for the cure of the sick, by his own after confession, was a mistake.

“In the early part of my professional life (Sir B. Brodie

tells us) I was led to follow the practice which was then very generally adopted for treating caries (ulceration) of the spine by means of setons and caustic issues—one on each side of the diseased vertebræ. A more enlarged experience [since when?] has satisfied me, that in the *very great majority of cases*, this painful and loathsome treatment is not only *not useful, but actually injurious*. For many years past, [how many?] I have ceased to torment my patients who were thus afflicted in this manner, and I am convinced that the change of treatment [by what or by whom suggested?] has been attended with the happiest results.* In the *early* part of my practice, I was accustomed to regard the ulceration of the articular cartilages, as a disease which was to be relieved almost exclusively, by *local* remedies.”—“Experience has long since [he has his reasons for not giving the date!] led me to a very different conclusion, and has satisfied me that there are remedies [Bark and Iron he means] which, acting through the medium of the constitution, exercise a most beneficial

* Reader, contrast this with what Sir Benjamin Brodie wrote in 1834—the year he was made a Baronet, and when he had made money enough to support his new rank :—

“As the chronic inflammation is relieved more slowly [than the acute] in the first instance the joint should be kept in a state of perfect quietude ; blood should be taken from the part by means of leeching or cupping.”—“It will in general be right to repeat the blood-letting twice or three times, or even oftener.”—“A blister may be applied, and if necessary, several blisters may be employed in succession.”—“The blisters should be of a considerable size.”—“I have employed caustic issues, and seen them employed in a great number and variety of instances, and have found them to be *usually productive of singular benefit, where the cartilages are in a state of ulceration*.”—“Setons and blisters kept open by means of savine cerate, appear to operate nearly in the same manner, and may be used with *advantage* in the same description of cases.”

In that case, why did Sir B. Brodie change his practice? Why change a practice usually productive of singular benefit? What first opened his eyes to his mistake, and when and by whom were they opened?

influence over the *local* malady, and by the judicious application of which, many cases may be brought to a favourable termination, in which this could not have been accomplished otherwise.”—“Indeed, I must confess, in proportion as I have acquired a more extended experience in my profession, I have found more and more reason to believe that *local diseases, in the strict sense of the term, are extremely rare.*”

What, then, is the use of Anatomy here? What has the cure of diseases of a joint, or the cure of diseases of any other part of the body by Bark and Steel, to do with Anatomy? The doctors, who for centuries bled, leeches, purged, and exhausted their patients, were in most cases as good anatomists as we have in the present day. Yet when the Bishop of Exeter lately proposed to teach the deacons of his diocese a knowledge of medicine, it was objected by the medical men, that these gentlemen would run the risk of killing more than they could cure, on account of their ignorance of Anatomy! Where people object to what does not suit their interests, they generally give any reason but the right one.

Not many centuries ago, all throughout Europe, the clergy were the principal mediciners. Linacre, Physician to Henry the Eighth, and the founder of the London College of Physicians, was a priest. A little before his time, a knowledge of Physic, on more occasions than one, led to a Bishopric. In those days the Priesthood would have looked upon it as a dereliction of their sacred duty to neglect the precept of the Divine Founder of their Faith, “Heal the sick!” Most of them had some knowledge of simples at least; and in every monastery there were persons of experience to prescribe for the poor and afflicted. We owe to the Jesuits of Paraguay one of the best febrifuges in the

Materia Medica—the Peruvian Bark. On its first introduction, the leading Anatomists of London scouted the Bark as the most dangerous of remedies. So much for Anatomy and the Anatomists. My Lord Bishop of Exeter, we wish prosperity to you and your “Medical Diaconate.”

In each of the three so called “liberal professions,” very great changes of opinion are at this moment manifesting themselves. Whether as regards the Church, the Bar, or the Medical Profession, the necessity for reform is every day becoming more and more urgent; and it is gratifying to know, that in each of these professions, something has already been done to forward the march of improvement. The men who live by the Law, more particularly, have lately, to a certain extent, been compelled, however reluctantly, to bend to the intelligence of the age. In the establishment of the County Courts, England has obtained the first instalment of a great beneficial legal change—a change, which at no distant day, must be made to extend to the iniquitous proceedings of our so called “Courts of Equity.” The good example America has so recently set us in that respect, cannot much longer be resisted by any interest, or combination of interests, however powerful. Speaking of the new order of procedure, which has been so successfully introduced into the Courts of Law of New York, Judge Brown makes the following observations:—

“The Code, in the first period of its being, has been met by great opposition—not unnatural or unreasonable by any means—which every just and beneficial reform encounters, and which every measure of reform should be prepared to encounter upon its first application to the affairs of men. It necessarily unsettled many questions touching the practice of the Courts. It temporarily embarrassed the judges, perplexed the lawyers, and sub-

jected both to some inconveniences. It rendered the learning, labour, and experience of many years in the practical part of their profession in a measure useless—and required them to give up their time and attention to the study of an entirely new system. In this respect, men of the largest experience, and men just on the threshold of professional life, were reduced to a common level. Yet I venture to doubt whether there is an intelligent man amongst them all, who has witnessed its operation from the Bench or the Bar, who will deny to the Code of Procedure very great merit and superiority in many particulars over the old practice.”

Mutatis mutandis, how completely every word of these observations apply to the Chrono-thermal System of Medicine, and the changes which that system has already worked in the medical practice, whether of the old world or the new: for, in America, as in England, a great revolution is now taking place in the opinions and practice of the regular physicians.* From the universal darkness

* Ten years ago, Professor Draper, in his Introductory Lecture at the Medical College of New York, made the following extraordinary admission:—“So rapid is the advance of the great sciences—Anatomy, Chemistry, and Physiology—that most assuredly in less than twenty years the Great Physician will have come.—*The man is now born who will seize the grand prize.* Even those amongst us who have most upheld our old professional theories, and have tried to keep in reverence the old opinions and the old times, find that under the advances of the exact sciences our position is becoming untenable. The ground is slipping away from beneath our feet. *We are on the brink of a great Revolution.* Go where you will amongst intelligent physicians, you will find a deep, though it may be an indistinct perception, that a great change is imminent. In politics and religion, every crisis finds its representative and embodiment in some man. Is it too much to hope that in this nation of practical men, one may be found who will stand forth the teacher and master of Physicians—the greatest of all the benefactors of our race, who will do for Medicine what NEWTON did for Astronomy? And oh, what a glory if he should do it in these walls!”

On this patriotic wish the Editor of the *New York Sunday Despatch*,

which prevailed throughout the medical profession before the announcement of Dr. Dickson's discovery, that announcement fell upon the doctors like a thunderbolt. If to some it gave light instantaneous, the greater number were only stupified by the suddenness and intensity of the blaze. Indeed, for the first few years after its introduction, the chrono-thermal discovery was still a dead letter to the mass of professional men.—It was not the interest of the medical press to give it currency. Directly, or indirectly, the English medical periodicals are the mere organs of so many London medical cliques—they support the men who support them. During the life-time of Dr. Todd, the conductors of the medical press were very shy of naming the “Tonic and supporting Practice” at all; but after his death, in the face of the facts with which the reader is familiar, one and all of them—with the single exception of the *British and Foreign Medical and Chirurgical Review*—ascribed the honour of the recent changes in Medical Practice to the “improved pathological views of the King's College Professor.”—Invaluable “pathological views” those, wherein the nervous or pathetic system is almost entirely ignored, and a figment of Dr. Todd's own brain—“blood-poison”—substituted for the Law of Periodicity!

Many persons only know the Chrono-thermal System through the distorted representations of men interested in keeping up the reign of Corruption. In the words of from which the above extract is taken, makes the following significant remark :—

“He has come already, Dr. Draper!—He has been on hand ever since 1836, when he, Dr. DICKSON of London, announced his discovery of the Law of the Periodicity of all Diseases—a law which was taught most impressively from the very chair you sat in when you made the above confession, by Dr. S. H. Dickson, now of South Carolina; but who was *crowded out of his Professorship in your Institution*, because of his teaching that important medical truth, a truth so unpalatable to those steeped to the lips in error.”—*New York Medical Despatch*, 1850.

St. John's Gospel, "The light shineth in darkness, and the darkness comprehendeth it not." So far as regards the great mass of professional men, these now secretly acknowledge that the science and the learning, on which in their early years they were so accustomed to pride themselves, were, all through, the greatest mistakes. Few of the seniors, even when admitting this, will forgive the individual who compelled them to lower their pretensions to superiority as men of Science. It would indeed be wonderful if they did; for, we have yet to learn that any men, or body of men, have ever been remarkable for magnanimity under such circumstances. What marvel, then, if the so-called Heads of the Profession should still exhibit the most determined hostility to the author of their humiliation—a humiliation so complete, that the practitioner of thirty years' standing found himself all at once reduced to the level of the last arrival from the medical schools! From Sir B. Brodie and Dr. Watson to the Graduate of a year, all were compelled to learn and unlearn; and some, as we have seen, to write down almost all they had previously written up! The greater number have done this with no very good grace. Pretending every kind of excuse for their change of practice but the true one, few or none now bleed or leech as they were accustomed to do during the first twenty or thirty years of their "early life." Here and there some grey-headed individual may possibly be found who still pours out the heart's blood as if it were so much ditch-water. Before the announcement of Dr. Dickson's discovery of the Remittency of all Disease, that practice was universal. But much still remains in the *practice* of physic to make it utterly nugatory as a Conservative Art. Before Medicine can be what it pretends to be—the art of shortening the sufferings and lengthening the lives of the

sick—the mode of remunerating the medical practitioner must be completely changed. His interest and the interest of the patient must not be as they are at present, in direct opposition. Skill and reward should go hand-and-hand here as in other professions. It is quite the reverse now; and yet, while human nature continues to be what it is, to make men of business prefer the interests of others to their own is impossible.

Until the medical profession are paid for talent instead of for time, the doctor, like the lawyer, will look for his reward more to the insidious procrastination of the diseases of those who employ him, than to any amount of benefit he may confer on them by his science and skill. Without such procrastination, as things are now managed, four-fifths of those who at the present time contrive to live by physic, would be doomed to starvation. Hence, with medical men now, procrastination is the soul of business. The public have only to will a change in the mode of remunerating their doctors, to produce such a change in the practice of physic as would ultimately secure the interests both of patient and practitioner. Until that is done, Quackery, both in and out of the profession, will ramp and flourish. The only possible manner in which the regular physician can compete with the homœopathists, and others of that class, by whose invasions his means are now so crippled, is to embrace the Chrono-thermal System in its entirety—not secretly and by stealth, like Sir B. Brodie, Sir H. Holland, and others—but openly, honestly, and unreservedly, giving to Cæsar what is due to Cæsar. This System is catholic and eclectic. It rejects no remedy, old or new, which can be shown to act as a remedial force. On the contrary, it gives a ready welcome to any new medicinal agent of a soothing, supporting, or revulsive

character. It moreover points out the true principle of the action and application of all febrifuge medicines, namely, attention to Temperature and attention to Time. When the chief business of the physician shall be to prevent the recurrence of the paroxysm of disease, whatever be its name or supposed nature, he need have no fear of any class of quacks. The increasing intelligence of the nation will bear him up against all dishonest opposition. But this, it is obvious, cannot be done without an alteration in the mode of remunerating him for this right application of his zeal and real science. The Public must make it his interest to shorten sickness. They should pay their ordinary attendant so much for yearly attendance, whether sick or well ; when calling in other assistance they should pay for skill and the case—the quicker the cure the better the reward !

It is the fashion of the schools to hold up great medical discoverers—HARVEY and JENNER more particularly—to the imitation of their respective pupils. *Cui bono ?* Harvey and Jenner, while they lived, were bitterly persecuted by their professional brethren. The rancorous opposition both encountered at the hands of the College of Physicians, only ceased with their deaths. Whether or not the Faculty may yet relent in their persecution of the discoverer of the Chronometry of Life, remains to be seen. Dr. Dickson has at least lived to accomplish one of his principal objects—the banishment of Blood-letting. Blood-letting and other exhaustive measures are now all but abandoned in practice. He still hopes to see the day when his efforts to shorten sickness may be equally successful. Professional bigotry and self-interest on the one hand, and the supineness of the English people on the other, have hitherto been the chief obstacles to a consummation so desirable.

London, November, 1860.

APPENDIX.

PERIODICITY.—“ But for this, the husbandman would neither know when to sow nor when to reap. Knowing this, the astronomer calculates and foretels to the day, hour, and even minute, the return of eclipses and comets. Without a knowledge of the Periodic Law in Disease, the man who undertakes the practice of Physic is little better than a Charlatan. Yet, in the cases detailed in the medical journals of the day, there is seldom or never any allusion to Periodicity. The Editor of the *Lancet*, on one occasion, went so far as to say, that the Periodicity of Disease is of little importance as a guide to treatment. If that be true, why count the pulse watch in hand ?

During Health the periodic repetitions of the movements of the Body are, with little exception, uniform in all. During Disease, on the contrary, the interval of paroxysmal recurrence, so far as different individuals are concerned, is as various as there are varieties in faces and forms. But whether in Health or Disease, the order of return, whatever the duration of the interval, is strengthened by habit. Each successive repetition of a movement, wrong or right, strengthens the disposition to a return of the same movement at the same period of *time*—more especially if the subject continues to reside in the same *place*. Some diseases, indeed, cannot be cured till the patient removes from the place where his disease originated : and every now and then instances occur where the tendency to paroxysmal repetition may, from neglect or otherwise, become so completely the law of the individual life, as to defy all the resources of the most enlightened physician to subdue it. Epilepsy, perhaps, more frequently than any other form of disease, affords an exemplification of this rebellion against the best resources of the Healing Art. The disposition to recurrence in all our vital movements, whether morbid or otherwise, applies to everything human. We trace it throughout the whole of Society—in our customs, crimes, prejudices, and every other good or evil involved in the destiny of man. In cities and communities man is a mimic—each individual is more or less the ape of each. His periods of movement and repose are regulated by the movements of the mass of which he is an atom ; and in the paroxysmal aberrations to which the body *corpórate*, like the body *individual*, is from time to time liable, man performs almost unconsciously his atomic and inevitable part. At such times public opinion and public action are as the action and opinion of one man ; hence our national wars, rejoicings, panics, and all the other passionate outbreaks observable in the Social system !

“ So far as relates to disease, the period of return, regular for the most part in the individual body, differs with different people in almost every case of the same disorder. Take the case of Ague, for example. The

paroxysmal repetition in one case will take place regularly every day at the same hour of the clock, unless arrested or interfered with by accident or art. In another it will come on with the same precision every alternate day. In a third case it may come on every third or every fourth day. Instead of one fit, certain individuals may have two fits on the day of recurrence. In particular cases the febrile revolution may recur once a week only; while in some the interval of immunity may be prolonged to a month or months. The disease, in certain instances, may return once a year only; and within a day or two of the same day of the same month on which it assailed the patient the previous year! I have met with cases where the disease returned every second year only. A gentleman applied to me with *Iritis* in one eye; the year before he had lost the sight of the other by a similar attack. For something like six years, in one of the autumnal months—I forget which—he had an annual attack of *Iritis*; but the disease each year alternated in the choice of the organ it assailed. This year it took the right eye, the next the left; and so on alternately during these six years, till one eye was completely destroyed. I was lucky in saving the eye for which he consulted me. He came to me from reading what I said on the subject of Periodicity, in the *Fallacies of the Faculty*. A young lady, for whom I was consulted for Pulmonary Consumption, had an attack of Fever, preceded by shivering, regularly every Sunday. The local disease was increased by each repetition of the Fever-fit, when medicine failed to keep it off. When I succeeded in that, there was improvement throughout. An old gentleman had a febrile fit, with symptoms of Insanity every second day, lasting from nine in the morning till three o'clock in the afternoon. The motion of a carriage broke it like a charm; but medicine had no power over it. A clergyman, subject to Epilepsy, had the disease regularly every third Sunday. A barrister had a return of the disease every fifteenth day.

“Some time ago I had myself the misfortune to be attacked with Neuralgia in my left arm. During all the time I suffered from it I fell asleep as soon as I got into bed; but at three o'clock in the morning, to the minute, I was attacked with excruciating agony in the muscles of the arm and shoulder, which forced me to get out of bed. On washing my hands and face, and taking a glass of cold water, I was so far relieved as to be able to lie down again; but the pain, though thus lessened, kept me from sleep. After eating I was much relieved. My breakfast did for me what nothing else would do. I was cured by large doses of Morphia, after having in vain tried Quinine, Iron, Arsenic, Prussic Acid, and other remedies, singly and in combination. During the year 1848, I had under my treatment somewhere about fifty cases of Neuralgia; all of which, with one exception, yielded to treatment; but no two in succession were cured by the same medicines.”—Dr. DICKSON, in the *Chrono-Thermalist*.

DR. DICKSON AND SIR HENRY HOLLAND.

STATEMENT BY DR. DICKSON.

“ Vilified and misrepresented by the medical press of the country, as the most ridiculous heresy of modern times, the Chrono-thermal Discovery, when first brought out, proved anything but a source of gratification to its author. I was, therefore, I confess, not a little agreeably startled to find so much of my own doctrines received with such complacency by Sir. H. Holland in his observations ‘ On Morbid Actions of an Intermittent Kind,’ as they appeared in his *Medical Notes and Reflections*, in 1839. But the disappointment which followed, when I saw no mention of my name in his volume, determined me at once to send the writer a copy of the ‘ *Unity of Disease*.’ A simple note of thanks told me of its receipt. It now became clear to me that Sir H. Holland wished to appropriate to himself the merit of a discovery that was even then beginning materially to change the medical practice of England. Being at the time engaged in writing the ‘ *Fallacies of the Faculty, with the Chrono-Thermal System of Medicine*,’ I took care therein to bring the conduct of the court physician before the world ; and as soon as my charge of plagiarism was in print, I thought it only just to send a copy to Sir H. Holland himself. A letter bearing his signature, marked ‘ *private*,’ came to me shortly afterwards by way of ‘ explanation :’—but it contained no explanation whatever—it was very full of civility, and fuller still of mystification. What right had Sir H. Holland, in the position of a man charged with a mean act, to address a ‘ private’ letter to the person who publicly denounced his conduct, in the expectation that his communication would be held as confidential ? I never was his confidant ; on the contrary, I was his accuser. At the bar of the profession—the extent of whose corruption I did not then know—I had openly charged Sir H. Holland with scientific larceny ; quoting in my printed charge the passages in his book which appear in these pages, and stating at the same time the dates of our respective publications in proof. Nevertheless, I have refrained from publishing his ‘ private’ letter. But this was what I said in my reply :—

“ ‘ If to YOUR OWN observations solely, or to the works of OTHERS, you, sir, owe the sentiments expressed in the quotations made from the *Medical Notes and Reflections*, I shall be too happy to retract any remarks of mine that may appear harsh or any way unfair. If, on the contrary, the passages I have quoted from your volume were SUGGESTED by MY writings, I think it would be creditable to yourself, and just to me, that you should still say so. In either case, I shall be glad to publish, in my next lecture, any statement you may wish to make to me on the subject.’ ”

“ Sir Henry Holland’s rejoinder was as great a curiosity as the private letter with which he first tried to talk me over and bind me to silence.

Scrupulously evading all reply to my question thus clearly and categorically put, in respect of the *authorship* of the Periodic and Febrile doctrine of all disease, Sir Henry again adopted a style of friendship which it was impossible for me to believe sincere. Reader, this letter *not* being marked 'private,' I make no scruple in giving its concluding paragraphs here, with a few running comments of my own:—

“ ‘Without expressing *any opinion* upon the General Doctrine *you* propose [I asked no *opinion*; I asked a *question*!], I may simply state, that no closer relation occurred to me between *this* and any passages I recollected in my own volume, than might naturally be expected on points WHOLLY SUBORDINATE TO YOUR LARGER CONCLUSIONS [a most important *private* admission which he has never yet *printed*]. To the few sentences you quote *taken from amidst old notes* [By whom made, and from what author?], I attach importance only as briefly expressing what I think to be true, and as bearing upon the topics under discussion. I did *not introduce* them as *new views* [another important *private* admission on the part of one who, with silent complacency, sees them daily placed to his credit, by his friends, in the medical journals!], nor dwell upon them further than as *subservient* to those topics. I feel assurance that you will be satisfied on these points. But, nevertheless, I do not avail myself of your kind offer to retract anything in your lecture [That offer rested on a condition as yet unfulfilled—a specific answer from him on the score of the authorship of the ‘views’ in question]. I may repeat (what I said before in perfect truth), that I feel at any time most anxious to avoid any sort of controversial publicity [To provoke controversy is not the best way to avoid it—all delinquents, whether morally or legally such, shrink from publicity!]; and I shall be satisfied in knowing that this topic will not come again into print in the same light [No doubt!]. It gives me pleasure to know that you find anything of truth, or useful *suggestion*, in what *I have published* [Where did I ever express myself thus?]; and I shall feel gratified by any opportunity which may hereafter occur, of talking with you on these subjects of common interest to us, *out of print*.

“ Ever, my dear Sir, yours faithfully, H. HOLLAND.”

“Such is the pith and marrow of a letter Her Majesty’s Physician in Ordinary thought it no degradation to address to a writer who had publicly charged him with the meanest thing of which a man can be guilty—literary larceny!

“The reader may be curious to know how Sir Henry Holland demeaned himself towards the same accusing spirit when an opportunity did ‘hereafter occur’ to have a little pleasant chat ‘on these subjects of common interest to us, out of print.’ The very first time he was asked to meet ‘us’ in consultation, he declined! And more clearly to mark his deter-

mination to avoid any 'controversial *publicity*,' on the score of 'the General Doctrine *you* (we) propose,'—to wit, the doctrine of the Periodicity, Intermittency, and Febrile Nature of ALL Disease—it was Sir Henry Holland's further pleasure utterly and entirely to ignore the 'proposer' of that doctrine on two subsequent and separate occasions, when he, Sir Henry, had the best opportunity of doing 'my dear sir' that justice in public he had, to a certain extent, though reluctantly, done him in *secret*. Having written and despatched that letter, he ought never, in common decency, to have published a *second* edition of his work, far less a *third*, without therein acknowledging openly, in the true spirit of 'ever, my dear sir, yours faithfully,' as he had already in his letter acknowledged secretly, that he, Sir Henry Holland, did 'not introduce' his observations '*On Morbid Actions of Intermittent Kind*,' as 'new views ; nor dwell upon them further than as *subservient* to those topics'—'on points WHOLLY SUBORDINATE TO YOUR (OUR) LARGER CONCLUSIONS.'—*Destructive Art of Healing*.

THE MEDICAL DIACONATE.

To the Editor of the Exeter and Plymouth Gazette.

"SIR,—Having already expressed to you my reasons for believing that a clergyman does not necessarily forfeit respect by combining in certain cases secular with spiritual duties, I now proceed to consider the dicta of the British Medical Association, that 'The attainment of medical knowledge is in itself a matter of a lifetime,' and that any one (a clergyman especially), venturing to relieve the bodily disorders of his poor neighbours, 'runs the risk of killing more than he cures.'

"It is doubtless quite true, that the observant medical practitioner may through life find many opportunities of adding to his knowledge, and in this sense the attainment of medical knowledge may be the matter of a lifetime. But if, by this dictum, it be meant to assert, that none can with any safety minister to the relief of bodily ailments but such as have made medicine their professional and well-nigh exclusive study, then, sir, I own, this appears to be but a piece of the same '*Red Tapism*' which led so many military authorities to ridicule the present great Volunteer movement for the defence of the country. I would willingly yield the palm of knowledge upon every subject to those who have studied it the most deeply and philosophically ; but this need not make it impossible for others to have acquired at least a very useful degree of knowledge on these same subjects. The *really liberal minded* and well-educated man, who devotes his life to that study, will always retain his position, and possess the largest power in ministering to the cure of bodies. But this is hardly the question at issue, but rather, whether it be not possible for the generally well-educated

gentleman to possess such a knowledge of man's constitution, and of those means which Providence has placed within his reach for the preservation of health, as will enable him to relieve his own ailments and those of his poorer neighbours, to a very considerable extent; and perhaps with as much success as those who, though legally qualified to practise medicine as apothecaries, may not always have carried their researches much beyond this starting-point in their profession.

"Of course, there will always be cases of incurable disease, and others such as to call forth the utmost skill of the most talented physician; but the successful treatment, after all, of the great mass of disease, does not seem so great a mystery as some would have us suppose.

"In 1836, if I mistake not, Dr. Dickson published his conviction, that there is a *unity* in all disorders, of which *ague* or *intermittent fever* is in his judgment the *type*. That again, all disorders, at least in their earlier stages, have periods of *remission* recurring with more or less regularity.

"And hence his simple method of treatment, which advises in every case, to take advantage of these periods of remission, to support and strengthen the patient for a successful struggle with the paroxysm of disorder, should it recur, and to *postpone* or *prevent* the recurrence of the paroxysm, by administering the various well-known remedies for fever.

"The simple question is (and it is one which every man of common sense can answer for himself), will this theory of the *unity*, *remittency*, and *periodicity* of all diseases, stand the test of experience?

"Let me ask, does not every one, on the approach of disease, use some such language as this: 'I am sure I shall be ill, I don't know what is come to me; I am so cold and chilly, or I am so hot and burning in my skin,' according as the hot and cold stage is present, and this *without the least reference to the peculiar development of the disorder* which may follow? It was by asking myself this and similar questions, that I first convinced myself that Dr. Dickson's theory was true; and by following the advice which, some two or three years since, he most kindly gave me, in favour of my poor neighbours, I may safely say that I have not practically found, novice as I was in the healing art, that I have 'run any risk of killing more than I cured'—although the diseases of my somewhat numerous patients have been pretty various, and not unimportant in their character.

"But, sir, one principal reason for this happy success has been, that my poor neighbours come to me as soon as ever they are ill, and do not wait for the development of their disorders. This, alas! they too often do, before applying to a medical man. They are afraid of the expense. They have no messenger to send to the distance at which he resides. The overseer is from home, and they cannot get an order for the medical officer of their union, and thus most valuable time is unfortunately lost.

"Now, the parson has none of these difficulties in his way, and thus is enabled to administer his simple remedies at the very earliest moment, and consequently with the best possible prospect of success.

"Dr. Dickson's instructions were given me during the short period of a professional visit to my wife, and have called forth great thankfulness to 'The London Doctor,' as they call him, from my poor neighbours.

"Where, then, is the impossibility of good and great results from a regular instruction of the clergy, especially of the country clergy, in the healing art; or, at all events, of such of them as are conscious of any aptitude for such a study?

"I believe among our own poor at home, quite as much as among the heathen inhabitants of other lands, the gospel truths will not be less readily listened to from the lips of the Ministers of God, whose head and hands have contributed to the alleviation and the cure of bodily disease.—I am, &c.,

"W. H. KARSLAKE.

"*Meshaw Rectory, Southmolton, October 3rd, 1860.*"

EVIDENCES OF MILITARY MEDICAL OFFICERS AND OTHERS, IN FAVOUR
OF THE CHRONO-THERMAL SYSTEM.

Dr. HUME, Principal Medical Officer at Fort Pitt, Chatham, writes thus :—

"Deny it who please, Dr. Dickson's writings have forced—though not to the full extent—a change upon the practice of the men who conspire to cry him down. They have all but worked a complete revolution in *Army* practice; and when I look to what is going on in *Civil* life, I may say the same of the whole medical world. It is as difficult at this moment to find a doctor or apothecary under forty who bleeds at all, as it was to find one who did not bleed in almost every case when Dr. Dickson first startled the profession with the announcement of his new manner of treating diseases. All now plagiarize him more or less—even those who abuse him most. My various Annual Reports to the Director-General of the Medical Department of the Army, testify to the success of the Chrono-Thermal practice, and to its immeasurable superiority over all other modes of treatment."—Dr. HUME, in *Chrono-Thermalist*.

Dr. DARTNELL, Inspector-General of Hospitals, thus writes to Dr. Dickson from Chatham :—

"The profession, for some years past, have been gradually adopting

your views without having the honesty or manliness to acknowledge them I can assure you that since I read your '*Fallacies of the Faculty*,' in 1843, I have never used a lancet; and my only regret now is that I had ever used one at all. Shortly before I left India, in 1831, I was bled largely myself, contrary to my own earnest entreaties, and the effect upon me was such, that from that time I very rarely used the lancet for others; and after reading your book, I gave it up altogether. In Canada I was once called to see an officer who had fallen down in an apoplectic fit—a powerful young man, of full robust habit. His family stared in astonishment and alarm when I declared that I should not bleed him, and even hinted that if I did not do so, they would lay his death to my door. I did not bleed him, and fortunately for me, as well as for my patient, he recovered. I treated him on your plan. His feet were put in a mustard bath while I poured a stream of cold water on his head. I have done the same many times since, and have not lost an apoplectic patient."

Dr. MACKINTOSH, Principal Medical Officer of Ordnance, Southsea, thus writes to Dr. Dickson:—

"Southsea, May 18th, 1857.

"MY DEAR SIR,—I have just re-read, with renewed interest and benefit, your '*Fallacies of the Faculty*,' and I fully subscribe to the value of your ideas and practice therein contained.

"I have been now seventeen years a Surgeon of Artillery, and have had extensive practice in different parts of the world. For the last sixteen years I have been practising medicine after your own model, and always with the most marked success. I was one of the first who decried *blood-letting*, leeching, cupping, and other butcher-like practice in our extensive Military Hospital at Woolwich, and fully proved to all who looked on, that your Chrono-Thermal treatment, more especially in the acute cases of young recruits, so abundant in that hospital, was the only scientific, and the most successful treatment.

"At page 193 of the '*Fallacies*,' you mention the name of my father (the late Dr. Mackintosh, of Edinburgh) in connection with blood-letting, in 1825. I used to attend cases with him in his after years, and I well remember that, although he never gave up the *lancet*, he used the cold douche, emetics, opium, and other remedies of your Chrono-Thermal System; and I am sure that had he read your '*Fallacies of the Faculty*,' he would willingly have admitted the great and valuable services you have rendered to mankind, by your fearlessness and talent.—Yours very truly,

"W. H. MACKINTOSH, M.D., Surgeon, Royal Artillery.

Dr. Dickson, 28, Bolton Street, Piccadilly.

Dr. JOHN FINDLEY, Surgeon, Royal Navy, while stationed off the African Coast, thus wrote in praise of Chrono-thermalism, in the treatment of the fevers of the tropics :—

“ Epidemics we do not lack, and, though not molested with influenza, or cholera, we have a fiercer enemy to contend with in the shape of Bilious Remittent Fever, peculiar to the tropics. During the last three months, I have had *sixty-six* cases without losing one. I have stuck entirely to DICKSON’S practice. None of your bleeding, leeching, salivating, and drugging; but QUININE in large doses! This knocks the disease on the head at once, and your patient recovers, not a blanched and wretched remnant of humanity, but in a few days is as useful as ever.”

Dr. MOFFIT, H.M.S. *Arethusa*, in corroboration of Dr. Findley’s statement, writes thus to Dr. Dickson :—

“ I must first tell you I was first led to employ Chrono-thermal medicines in a case of Remittent Fever, in Rio Janeiro, by one who had, without acknowledgment, adopted your practice; and the effects were so startling that I never dared return to the old practice; had I got your book then, it would have saved me a world of trouble, for I had all my old prejudices to contend with. A subsequent commission of nearly five years on the West and East coasts of Africa, brought me in contact with the Fever peculiar to these coasts; and although I had many very bad cases, all terminated favourably; and the great dread I felt of the African Fever gave way to the delightful feeling, that at last a remedy was found for this hitherto fatal disease, in Chrono-thermal treatment, which I look upon as the true KEY TO OPEN AFRICA to the commerce of the world. It affords me much pleasure to add, that I have been enabled to inoculate many of my brother officers with your doctrines; and I hope the day is not far distant, when the medical officers in Her Majesty’s Navy will be Chrono-thermalists to a man. I know well, if they once give the system a fair trial, they will never leave it off again, until the last trace of the bleeding, blistering, and calomelizing system is purged from their minds. During the whole of my practice in Her Majesty’s service, I am not conscious of having slain any one; and I think, under God, I am indebted to you for this happy result; and I will ever feel much pleasure in acknowledging you as my chief in the healing art, and sitting at your feet for further instructions.”

Dr. LACOMBE, Physician to the Military Hospital of Puerto Cabello, Venezuela, writes to Dr. Dickson under date 2nd April, 1850 :—

“ The Chrono-thermal practice is indubitably the most efficacious in

every kind of fever, as will be readily admitted by all capable of forming a fair judgment—should *interest* not interfere. In former years, the general practice of this country, in fever, was bleeding in the first stage of the disease; and the average of deaths was from 20 to 30 per cent. The average of deaths now, since bleeding is less used, is only from $2\frac{1}{2}$ to 4 per cent. Dr. Otto Urich, a respectable medical gentleman, of the Island of Trinidad, told me—some years ago, in Caracas—that the average of deaths, in the above island, when bleeding was profusely used there, was 48 per cent. in cases called ‘Fever.’ If the approval of your system of medicine, by one so out of the world, can be of any service to its extension, pray use this letter as you think proper.”

Dr. BRETT, a medical officer, attached to the Fever Hospital, Brownlow Hill, Liverpool, where fever is generally of the Typhoid form, under date November, 1847, writes thus:—

“I have treated 700 cases of the worst form of FEVER, Chrono-thermally, with extraordinary success. The general mortality of Liverpool has been 1 in 6. My deaths have been only 1 in $10\frac{1}{2}$. This is a great difference.”

Dr. DUNCAN, of Lochalsh, thus writes to Dr. Dickson:—

“*Lochalsh, Ross-shire, N.B., 4th Feb., 1859.*

“SIR,—I feel I owe you a debt both of honour and of duty, which I ought to have discharged long ago; however, it is ‘better late than never.’

“I have read several of your valuable medical works, with as much pleasure as I did Robinson Crusoe, or Don Quixote, in my school-boy days; and with infinitely more profit, in a practical point of view, than the most elaborate treatises on disease. I have in my possession the ‘*Fallacies of the Faculty*,’ the ‘*Unity of Disease*,’ the ‘*Chrono-Thermalist*,’ and ‘*The Destructive Art of Healing*;’ and have read them all over and over again, and each time with increased delight and instruction.

“I happened, one lucky day, to be ransacking the library of an old medical friend, in search of medical works, and accidentally came upon the gem—hidden amongst a lot of rubbish, ancient and modern—your *Fallacies of the Faculty*. ‘Fallacies of the Faculty!’ I ejaculated; ‘that’s surely a strange work.’ And having naturally a great liking for anything in the shape of satire, I promised myself some amusement from the perusal of it, conceiving that it must be full of jokes at the expense of the doctors, but not anticipating profit as well as pleasure.

“As I had no disposition to put implicit faith in the teachings of my

professional preceptors, and wished to reserve to myself the right of honest doubt, I can assure you that its doctrines and precepts fell like good seeds on a genial soil ready for their reception; and they have sprung up, and yielded me a crop of very precious fruits. I have ever since been a willing disciple and faithful follower of the system, and my success has been commensurate with its sense and simplicity. I have never once used a lancet or a leech in my practice.

“ In conclusion, allow me, sir, to express my great respect for you as the first reformer of medical abuses in this country; nay, more, as a general benefactor to mankind. I feel myself under many and great obligations to you, as the person who first taught me how—

“ ‘To render with my precepts less
The sum of human wretchedness,
And strengthen man with his own mind.’

Your writings were the means of strengthening my heart and hands, dispelling my doubts, and allaying my fears; so that my hopes are no longer vain, nor my efforts fruitless.—I am, honoured sir,

Most respectfully yours, “ GEO. DUNCAN, M.D.

“ *Samuel Dickson, Esq., M.D., Piccadilly, London.*”

Dr. EMERSON KENT thus writes to Dr. Dickson, from Rhode Island, 13th February, 1853 :—

“ MY DEAR SIR,—It affords me much pleasure to inform you that, at a meeting of the Board of Corporators and the Faculty of the Penn Medical College of Philadelphia, you were unanimously elected Professor (Emeritus) of the Principles and Practice of Medicine.

“ In communicating to you the above, believe me, dear sir, I only express the feelings of every member of the Faculty of the Penn Medical College of Philadelphia, when I assure you that your acceptance of the position to which you have been so unanimously elected will be a source of unalloyed pleasure to those whose teachings and practice are only the reflection of those great truths, for which we and the world are indebted to the author of ‘ *The Fallacies of the Faculty.*’ You will receive, ere long, from the secretary, an official certificate of election, attested by the corporate seal of the College. Wishing you health and long life, and hoping soon to see you face to face, I am, my dear Doctor, most truly and most respectfully yours,

“ J. EMERSON KENT,
“ *Prof. of Mat. Med. and Gen. Therapeut. in
the Penn. Med. Col. of Philadelphia, and
Chairman of Com. Correspondence.*

“ *Samuel Dickson, Esq., M.D., Bolton Street, London.*”

As the Penn Medical College is empowered by the Legislature of the State of Pennsylvania to grant degrees in medicine, the English reader may possibly peruse with some interest the following extract from the first announcement of an Institution which examines in physic on the Chrono-Thermal principles and practice:—

“The Faculty of the Penn Medical College believe in the Unity of ALL Diseases, as characterised by Intermittency and Periodicity;—a principle to be distinctly avowed and sustained as a fundamental principle in medical science; a principle first suggested by Hippocrates, more than twenty-three centuries ago;—a living principle in harmony with the harmonies of nature, and without the acknowledgment of which no system of medicine can possibly be of universal application.* The teachings of the Professors of the New College, so far as the subject comes within the province of the *proper chairs*, will fully develop, maintain, prove, and defend that harmonious system of medicine, which embraces the *Unity* and *Integrity* of the living body, the Intermittency and Periodicity of its functions, and the intermittency, periodicity, and changes of temperature which mark the revolutions of universal nature. *Time* or *Period* (Chronos) and *Temperature* or *Heat* (Therma) are elements of every system in nature; yet these universal elements are nowhere found in any system of medicine hitherto taught in the Schools. Such a system nevertheless exists, and for its development we are indebted to that master-mind—SAMUEL DICKSON, of London—a system which, in harmony with the universal harmony of all nature, acknowledges every power and principle in creation, and avails itself of all natural means in the treatment of disease; a system which boasts the fertility and not the paucity of its resources; which appeals from *authority* to *examination*, and, rejecting antiquated dogmas and conflicting theories, demands statistics; a system which employs little medicine, saves an immense amount of suffering, greatly shortens the duration of disease, and effects an unparalleled reduction in the number of deaths; a system from which the bleeding lancet, leeching, and every other form of blood-letting, is rejected, and rejected for reasons which are based upon indisputable truths. In proof of the safety and universality of the application of the Chrono-Thermal System, its supporters are ever ready to compare its results—its numerical cures—with the curative results of all other systems—disease for disease, case for case, period of continuance with period of continuance,” &c., &c.

* On which statement Dr. Dickson makes this remark:—“The only allusion to Periodicity that I can find in Hippocrates, is his doctrine of “critical days” in Fevers—days on which, according to him, when these diseases do not terminate fatally, a tendency to cure may be expected. In my own experience, I have failed to discover any such. The tendency to cure differs with almost every individual case. It may, moreover, be hastened or retarded, according to the treatment employed.”

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