

## **Rational medicine / by R.E. Dudgeon.**

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# RATIONAL MEDICINE.

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R. E. DUDGEON, M.D.

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aut ferat.—BACON.



LONDON:

HENRY TURNER, 170, FLEET STREET, E.C.

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STANDARD EXHIBIT

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## RATIONAL MEDICINE.

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THE great medical reformer of our times, the modern Hippocrates, called the first edition of his work, wherein his reforms were aphoristically enunciated, *Organon of Rational Medical Science*. But he published the later editions of that work under the title of *Organon of the Medical Art*, or, as Dr. Wesselhœft will have it, *Organon of the Art of Healing*. He was evidently of opinion that his first chosen title was unsuitable, and to me it seems that the second title is inappropriate. For his reformation is a reformation of therapeutics, *i. e.* of the treatment of diseases by drugs,\* and the medical art does not solely consist of therapeutics, for a doctor's prescriptions are not all drawn from the *Materia Medica*. The title *Organon of Rational Therapeutics* would best express the character of the book, for Hahnemann's work was essentially an attempt, and as I believe a successful attempt, to establish therapeutics on a rational basis. But, as before said, therapeutics are not the whole of medical science or medical art, and in spite of Hahnemann's labours all therapeutics cannot yet be said to be rational. A great deal of the empirical and not a little of the conjectural still cleaves to therapeutics, and even those who are convinced of the truth of the great law

\* I am fully aware that the word *therapeutics* (from *θεραπεύω*) has etymologically no such limited meaning, but as it is usually employed in the sense of *drug-treatment* I shall so use it in these pages.



of cure discovered by Hahnemann and are most enthusiastic in their practice of his rational therapeutics find the occasional necessity of resorting to the empirical and conjectural in their treatment of diseases.

But cases, and those not few in number, present themselves to every busy practitioner where therapeutics or drug-treatment is inadmissible and unavailing. And yet these cases belong just as much to the domain of the "healing art"—*ars medendi*—as do those that require drugs for their cure. The sphere of medical practice is very extensive, and the rational practitioner would have his power of doing good sadly curtailed were he to be limited to drug-giving. Outside the domain of therapeutics we are all rational practitioners. But those who are conversant with homœopathy are the only medical artists who claim for their therapeutics the character of rational. All the champions of orthodoxy in medicine agree to throw up the sponge when the question is as to the rationality of their therapeutics. The confessions of the coryphæi of old physic on this subject have been quoted again and again, they are all of the same tenor. A recent saying of Virchow, one of the greatest of living authorities in the old school, expresses curtly what they all admit with more or less circumlocution, "*We have no rational therapeutics.*" In opposition to this the united voice of Hahnemann's followers declares, "*We have rational therapeutics.*"

As Hahnemann said long ago, there are but three possible modes of applying medicines to the cure of diseases :

1. To give a medicine capable of causing in the healthy a morbid state the *opposite* to that of the disease to be cured.

2. To give a medicine capable of producing in the healthy a morbid state *different* from that of the disease to be cured.

3. To give a medicine capable of causing in the healthy a morbid state *similar* to that presented by the disease to be cured.

Now, the first mode, expressed by the formula *contraria*



*contrariis curentur*, has only a superficial semblance of rationality. For in the application we have first to determine what are the opposites of diseases, and if we reply truly we can only say, the opposite of a disease is health. But it will hardly be said that drugs are health, so this rule is incapable of application; it is, therefore, irrational. We may grant that there are certain *symptoms* whose opposites may be imagined; thus, the opposite of heat is cold, and when we find a patient with an elevated temperature we may plunge him into an ice-cold bath and so reduce his temperature.\* But heat is only one symptom of a disease, and never the whole disease; so to treat heat with cold or cold with heat is to treat but one symptom of a disease and not the disease itself; therefore, this application of the rule *contraria contrariis* is mere unscientific symptomatic treatment, and cannot constitute a rational treatment. Again, the opposite of diarrhœa is constipation, the opposite of a diminished renal secretion is a free flow of urine, but these are only single symptoms of a disease, and never the whole disease; so here again treatment by the rule *contraria contrariis* is symptomatic and irrational. "The doctors, like the bishops, have the keys of binding and loosing" sneered Bacon; but what avails the binding or loosing of a single symptom when the whole of the remainder of the disease is left untouched?

Still less claim to rationality has the second mode of applying medicines in disease. To give a medicine that shall excite a different morbid state to that of the disease is to produce a new disease in a part not previously involved in the disease. Thus, to treat a head affection by developing a diarrhœa is as sensible as would be the advice of a shoemaker, when we complained of his shoe

\* This is the present fashion of treating diseases with increase of temperature, such as typhoid fever and pneumonia. But, as Sydenham long ago remarked, "This method of merely introducing different qualities can no more effect the direct destruction of specific diseases than a sword can quench a flame. What can be done by cold, or heat, or wet, or dry, or by any of the secondary qualities that depend on them, against a disease whose essence consists in none of them?" But we have got wiser than Sydenham, and expect to cure with cold a disease whose essence consists in something quite different.



pinching us, to give ourselves a headache by putting on a hat too tight for our head. This rule is, no doubt, easily acted on, for there is no disease in which we cannot find some organ of the body exempt from suffering on which we may work our wicked will. But it is not easy to understand how the patient will be benefited by adding a fresh disease to that he is already afflicted with. However, this mode of treatment was ever the favourite, because, though utterly irrational, it is so simple. It does not require a great knowledge of *materia medica*. A few powerful drugs known to act on the bowels, the kidneys, the skin, are all that is required. If the disease has spared the bowels, give a purgative and add a diarrhœa to the existing malady; if the kidneys are unaffected, give a diuretic and add diuresis to the original disease; if the skin is exempt, give a sudorific or clap on a blister to bring the cutaneous organ into a harmonious morbid state. Here the doctor is the *minister nature* with a vengeance. He carefully examines the patient to discover what organ has been spared by the disease, and having found it he straightway proceeds to repair the neglect of nature by making this organ properly ill. "See," he might say to the patient, "you are ill, very ill; your head, chest, liver, heart, and kidneys are all involved in morbid action, but the disease has spared your bowels. I will soon remedy that omission; take this excellent purge and your bowels will soon be as actively diseased as all those other organs. And," he might add, "if this treatment does not shorten your disease, it will at least convince you of the power of my drugs, and impress you with a due sense of my cleverness in their application, a conviction cheaply purchased at the expense of a few days more of illness than the unassisted disease might have inflicted on you." But, of course, he would not speak this way to the patient nor even think this way to himself, but would think and talk learnedly according to the traditions of his school about counter-irritation, alterative treatment, elimination of the *materies morbi*, and what not. These delusions still cling to orthodox



medicine, and to many of its adherents and especially to their patients these phrases are as meaningless but as comforting as was the word "Mesopotamia" to the pious old lady of the story. One unfortunate result they have, and that is that they blind those who employ them to the real character of the treatment they euphemistically indicate, and keep them in a fool's paradise of content with things as they are. "If the patient is no better, but rather worse, for this sort of treatment, that is his fault; at least it is owing to the perversity of his disease, which refused to eliminate its *materies morbi* by the way we indicated, or would not allow itself to be counter-irritated in the manner we proposed, or objected to the alteration we suggested for its advantage. We, at all events, have done our duty, and our medicines have acted splendidly on the organs we set them to attack. There are some obstinate diseases which, like some serpents, will not listen to the voice of the charmer, charm he ever so wisely, plague on them! but will keep on their own perverse course, flying in the face of all authorities from Hippocrates to Abernethy." *Sanantur in libris, moriuntur in lectis*, and so it has ever been. Unfortunately, diseases will not march in the course prescribed for them by the great men who have taken them under their particular care. They seem to say—

"Alas! what is 't t' us  
Whether 't was said by Trismegistus,  
If it be nonsense, false or mystic,  
Or not intelligible, or sophistic?  
'Tis not antiquity, nor author,  
That makes truth truth."

These two modes of applying medicines in diseases constitute a portion only of orthodox medicine, and being under some sort of rule may be termed "regular" methods of treatment, though it does not follow that because they are "regular" they are therefore "rational." The rules they acknowledge being false, they are necessarily the reverse of rational, and we may call them "regularly irrational." But in addition to this regular though irrational



practice there is a great deal of very irregular practice in the old school, and indeed the irregular practice is, we may say, the rule, while the regular is the exception. The Nizams are few, the Bashi-bazouks numerous, in the army of the self-styled true believers. This irregular practice is founded on no rule, but simply on conjecture. As thus: the physician from the symptoms forms his hypothesis respecting the inner nature of the disease, its hidden seat or proximate cause, and he attacks this hypothetical essence with a medicine respecting whose essential nature and power he has also formed a hypothesis, for he scorns to adopt the obvious and common-sense mode of ascertaining the powers of medicines by proving them on the healthy. And when the result does not correspond to his anticipations, when the disease, in place of being put to flight by his medicine, is not altered or only aggravated, he either tries some other hypothesis with regard to disease and medicine, or perseveres with his first conjecture until the disease wears itself or its victim out. Speculation being the order of the day in this method of applying medicine to disease, every doctor thinks he has as good a right to speculate on the nature of diseases and the powers of medicines as his neighbour. *Quot homines, tot sententiæ*. When it is an affair of opinion, one opinion is as good as another, if not better. "Whom do you regard as the head of your branch of the profession?" enquired an innocent layman of a doctor. "We are all heads," was the rejoinder. Which was a true answer as regards this conjectural method. Each speculates for himself and despises the speculations of his colleagues.

"The Galenist and Paracelsian  
Condemn the way each other deals in."

The result is chaos. The reasoning may be correct, but the premises are false. Correct reasoning from false premises is the rationality of Bedlam. Here is the result as summed up by a recent orthodox writer in that most orthodox medical periodical, the *Weekly Medical Gazette of Vienna*:—"Building goes on briskly at the therapeutic town of Babel. What one recommends another condemns;



what one gives in large doses, another scarce dares to prescribe in small doses, and what one vaunts as a novelty another thinks not worth rescuing from merited oblivion! All is confusion, contradiction, inconceivable chaos! Every country, every place, almost every doctor, has his own pet remedies, without which he imagines his patients cannot be cured, and all this changes every year, aye every month!" Evidently conjectural therapeutics have no claim to be considered rational.\*

\* I may give a concrete example of this conjectural method. I take up the very last volume of *Ziemssen's Cyclopædia*, the latest outcome of scientific medicine, and it opens at the article *angina pectoris*. The disease is characterised by the following group of symptoms: *pain in the region of the heart, occurring in paroxysms, which usually radiates over the left side of the thorax and the left arm, more rarely over both sides and both arms; the pain is usually associated with a peculiar sensation of anxiety and constriction, and often also with other motor, vaso-motor, and sensitive disturbances.* In the first place the names by which it has been known betray the variety of pathological speculations as to its nature:—asthma convulsivum, asthma dolorificum, diaphragmatic gout, asthma arthriticum, syncope anginosa, sternalgia, stenocardia, pneumogastralgia, cardiodynia. It has been variously ascribed to be due to gout, to ossification of the coronary arteries, to enlargement or dislocation of single organs of the abdomen pressing mechanically on the heart. Some have assumed an exclusively nervous origin for the disease, or else have assumed the existence of a nervous dynamic form in addition to the organic or heart disease. Its seat has been laid in various nerves, as the phrenic, the intercostals, the vagus, and the sympathetic. Some have stated it to be a neuralgia of the nerves of the heart, others an epileptiform neuralgia, others, again, a hyperæsthesia of the cardiac plexus. Others have considered it a paresis or paralysis of certain nerves, others a weakness from fatty heart; others, again, as the opposite to this, a hyperkinesis of the heart with hyperæsthesia; others a hyperæsthesia with spasms of the heart; others as due to over-exertion of the heart owing to mechanical obstacles to its activity; others have called it a trophoneurosis of the heart; others a vaso-motor neurosis. Others have ascribed it to increased excitement of the vaso-motor centre, others to reflex excitement due to irritation of abdominal organs, &c. Now, the particular pathological speculation as to its origin adopted by the physician would influence him in the selection of his remedy, but as speculation was equally rife as to the mode of action of every remedy it will easily be seen how improbable it must have been that the doctor could be right in his speculations both as to the nature of the disease and as to the action of his remedy. Let us look at the remedies recommended for its cure—general and local bloodlettings, frictions, mustard poultices, stimulating baths, stimulating embrocations, valerian, musk, camphor, succinate of ammonia, narcotics of all sorts, cold, heat, inhalations of ether, oxygen, chloroform and amyl nitrite, narcotic clysters, hypodermic



But though in conjectural therapeutics, as a general rule, physicians have mostly acted on their own inspirations like Cicero's wisest man, "Sapientissimum esse dicunt eum cui quod opus sit ipsi veniat in mentem," in some cases they have acted the part of his second-rate character, "proxime accedere illum, qui alterius bene inventis obtemperat," and been content to follow some one whom they regard as an authority, just as the flock of sheep follow their leader, some wise-looking bell-wether, without troubling themselves to think whether or no he is properly qualified to lead them. In this way many absurd and pernicious practices have received a sort of traditional sanction and been perpetuated through ages, until some accident has shown their hurtful character or revealed a better mode of treatment. In medicine it is particularly true that

"All the inventions that the world contains  
Were not by reason first found out, nor brains,  
But pass for theirs who had the luck to light  
Upon them by mistake or oversight."

The history of the treatment of gun-shot wounds is a striking example of this. Some one in the early days of gunpowder had authoritatively pronounced that the proper treatment of wounds inflicted by firearms was to pour boiling oil into them. Why he said so it would be hard to guess. To be sure, the good Samaritan, we are told, poured oil into the wounds of the half-dead traveller. It is not stated that he poured in boiling oil, but then those wounds were certainly not caused by firearms. No doubt the sage who suggested boiling oil for gun-shot wounds reasoned thus:—If cold oil is good for wounds caused by cold steel, for which we have Scripture warrant, hot oil is the appropriate remedy for wounds caused by hot bullets.

injections or the internal administration of morphia, atropia, coniin, nicotin, aconitin, delphinin, veratrin, physostigmin. Besides these, courses of steel, sulphate of zinc, nitrate of silver, arsenic, bromide of potassium and calcium, quinine, phosphoric acid, digitalis, prussic acid, anti-arthritic remedies, the wearing of a magnetic plate, the application of irritating plasters, issues, setons, the induced current, faradization, &c., have all had their advocates. Truly, as Eulenberg, the writer of the article, says, "the remedies are many, the cures few."



However that may be, boiling oil was the universally accepted treatment for gun-shot wounds, and no doctor of the period would have questioned the propriety of the treatment or neglected to employ it, any more than he would have doubted the efficacy of or refrained from using phlebotomy in inflammation or diuretics in dropsy. Now it so happened that in the course of time a French army was sent into Italy, and in crossing the Alps it had a smart engagement with the enemy in which many gun-shot wounds were inflicted. The celebrated surgeon Ambrose Paré was with the army, and having collected the wounded he proceeded to treat them *secundum artem*. But on applying to the storekeeper he was told that not only was there no oil, but not even a stick to make a fire to boil it with had there been any. "Mon Dieu!" we can imagine him exclaiming, "what am I to do? No boiling oil to be had for these poor sufferers! What neglect! To think that the comfort of these brave fellows should be so infamously sacrificed! I cannot even substitute boiling water for the oil, for there is no fuel to boil it with! I will certainly write to the *Times* (I mean its French equivalent) the first post town we come to. But in the mean time what is to be done? Faute de mieux, I will dress the wounds with cold water. Pauvres blessés! how I feel for them deprived of the solace of boiling oil for their wounds!" And so he proceeded to dress the gun-shot wounds with the only thing at hand, viz. cold water, no doubt apologising all the while to his patients, and protesting that it was not his fault that they did not get nice boiling oil poured into their wounds, but instead those nasty damp cloths applied to them, but it was all owing to the careless bungling at headquarters; everything, even indispensable medical comforts, such as boiling oil, having as usual been sacrificed to the exigencies of the mere fighting element. But they might rest assured that the very next town they came to he would lay in a good stock of oil and the means of boiling it, so that no wounded soldier would have to complain of the treatment hereafter.

We may fancy the trembling anticipations of evil that



possessed the good and humane surgeon when he looked next morning at his water-dressed wounds, and his delight on finding that, in place of gangrene or erysipelas having set in, the wounds looked altogether better than he ever saw them under the usual treatment, and the patients had been spared the dreadful torture of the orthodox remedy (for anæsthetics were not as yet). In place of writing to the papers to complain of the neglect of the commissariat, he forgot all about that and wrote to the French *Lancet* of the period, if there was one, or, as is more in accordance with the custom of those days, perhaps he published a ponderous folio in latin, with his name altered to Ambrosius Paræus, showing the superiority of the water-dressing to the boiling-oil treatment in gun-shot wounds. Not without stout resistance from the old conservative party did the new treatment prevail and eventually supersede the old. We have no doubt heaps of old army surgeons of the most humane and benevolent disposition went on to the end of the chapter serenely pouring boiling oil into the wounds of their patients, all the while denouncing, in perfect good faith, that innovating upstart Paré, and calling on the authorities to prohibit his unscientific cold-water treatment, which was contrary to reason and common sense, opposed to all the traditions of the faculty, and fraught with incalculable evils to our brave and helpless soldiers, who ought to be protected by the state they served against the dangerous experiments of visionary enthusiasts.

But eventually boiling oil for gun-shot wounds went out, as bleeding in inflammation has gone out, at least everywhere except in Italy, the land of antiquities, where mighty kings, illustrious statesmen and insignificant peasants are still bled to death with sanguinary impartiality; as issues, setons and perpetual blisters have gone out—or nearly so.

It is difficult to imagine how some of the practices that have disfigured the medical art could ever have originated. The practice of bleeding, for instance. Tradition says it was introduced into medicine by the Egyptian doctors, who observed the hippopotamus rub his round rump on rough riparian rocks till the blood flowed amain, which seemed to



make him comfortable. But it is hardly likely that these grave and reverend signiors would condescend to be taught anything by such a stupid beast as a hippopotamus. More plausible is the notion that bleeding in diseases is an instinctive habit transmitted to the human race through some ancestral pachyderm who had discovered for himself the relief afforded to him by scraping his own thick hide against sharp corners. We all know how habits are retained by descendants long after they have ceased to be useful, just because they were adopted for special purposes by some remote ancestor. Thus, our pet dog turns himself three times round before he settles to his couch on the rug, because the ancestral jackal found this revolving action useful for smoothing the grass on which he made his lair. So the habit of drawing blood, useless, nay injurious though it is, is no doubt the remains of an ancestral practice not without its uses in primeval times. Like those rudimentary organs found in animals of superior organization, it indicates a thing that formerly had its uses, but for which there is now no longer any necessity. That it is a pure instance of what the learned call *atavism*—"progeniem usque ab atavo proferens"—is, I think, evident at once from its hoar antiquity (for it dates from prehistoric times), its long continuance and its universality. *Leech* is old English for *doctor*; when an animal was discovered whose only talent was to draw blood, it was significantly called *leech*, as though "doctor" and "bleeder" were synonymous terms. When doctors grew learned and assumed their Latin title, they abandoned their vernacular name to their humble annelidan representative. The chief medical periodical of this country is the *Lancet*, showing that when it was first set up (about 1823) bleeding was regarded as the chief end of a medical man; though some of the *Lancet's* supporters may now say: "nous avons changé tout cela, et nous faisons maintenant la médecine d'une méthode toute nouvelle." Its utter uselessness is another proof of its being a mere rudimentary survival. Even the *Lancet* acknowledges its uselessness, for a few years since, when a French ambassador died in London of pneumonia, the



periodical named after a phlebotomizing instrument severely censured the attending doctor for having bled the illustrious patient. The doctor's excuse for his bleeding resembled that of the *traviata* of the story for her inopportune baby: "It was only a very little one." It might be thought that the *Lancet*—the periodical we mean—would have judged it advisable to change its name when the surgical instrument—its godfather—went so completely out of fashion, but as it has not thought fit to do so we presume it anticipates a time when lancets may again become the *mode*. Similarly Mr. Windham, it is said, was always very civil to the classical gods, taking off his hat to statues of Jupiter, Mars, Mercury and the rest of the Olympians when he chanced to see them in a gallery, with the remark that we did not know but that their turn might come again, so it was prudent to keep on good terms with them.

There are other practices which cannot claim such a high antiquity as we have ascribed to bloodletting, but which, though quite artificial, nevertheless seem to come almost instinctively to medical men, as pointer puppies stand to their game as their sires were taught to do, without instruction. Such is the use of *Quinine*, *Iron* and stimulants "to give strength;" whereas experience shows that these powerful agents are more frequently promoters of weakness. Still, the idea that they are absolute, not conditional strengtheners has been transmitted through several generations of doctors, and reappears in the cerebral protoplasm of the very latest recipient of a medical diploma.

Again, there are practices which barely survive one or two generations of doctors, such as those of Brown and Broussais, just as qualities, and those chiefly of the defective sort, are sometimes transmitted from parents to children. Thus, we have read of mutilations and monstrosities being reproduced in the offspring. Cases are recorded of a parent with an amputated limb begetting children without that member, six-fingered fathers having six-fingered children, and we know of a pair of deaf-mutes having six children, three of whom have the parental



defect. There are, however, certain mutilations that have been practised for many ages, and yet have not become by long use implanted on the progeny. Such is the initiatory rite of the Hebrews, which has been performed since the days of Abraham, and is still required by his latest descendants. "De minimis non curat lex (hæreditatis)."

"There's a divinity that shapes our ends,  
Rough-hew them how we will."

The third and only remaining\* mode of applying medicines in disease, that, namely, expressed by the formula *similia similibus curentur*, is the only one that fulfils all the requirements of a rational method. By proving drugs on

\* There is yet another way of practising medicine, as we must by courtesy call it, though, like "lucus a non lucendo," medicine is only conspicuous by its absence, which we can only notice in a footnote. This is what is called euphemistically "the expectant system"—*medicus exspectat dum defluat morbus*—and is much in favour with the new physiological school, especially in Germany, though it has not taken deep root in Britain, where the prejudices of both patients and doctors will not allow them to suffer a disease to go through its course without medicine of some sort. The nihilistic therapeutics of the German physiological school make their works on practice of medicine very queer reading. Diseases are described with a minuteness and accuracy of detail in every respect that is simply admirable. Etiology, pathology, diagnosis, are all there; but therapeutics, the chief thing in the practice of medicine—the Hamlet of the play—is left out, or only alluded to in an "aside" and with a sneer. Our German contemporaries seem to fulfil accurately the part assigned to doctors by their great countryman—

"Ihr durchstudirt die gross' und kleine Welt,  
Um es am Ende gehn zu lassen  
Wie's Gott gefällt."

Perhaps they satisfy their minds with the philosophic reflection: *quod ratio nequirit sæpe sanavit mora*; or they may say with the Frenchman, "tout réussit à celui qui sait attendre," but then only, one would suppose, if they adopted the view of the hyper-physiological doctor, "the chief duty of the physician is to verify his diagnosis on the dissecting table." Thirty-two years ago Sir John Forbes said, in reference to the therapeutics of that time: "Things have arrived at such a pitch that they cannot be worse. They must mend or end." Evidently the physiological school have abandoned as hopeless the task of *mending* them, so they have adopted the other alternative and *ended* them. We remember an old professor in Edinburgh saying: when a man has been twenty years in practice he should be able to write his pharmacopœia on his thumb-nail; but for the pharmacopœia of this modern school a much smaller writing space would suffice.



the healthy we can produce definite morbid pictures which can be compared with natural diseases. All we have to do in the application of this method is to find a medicine that can cause a morbid state like that of the disease, and to give this medicine in an appropriate dose. The truth of this therapeutic rule is attested by experience, and does not depend on any theory of the nature of disease or the supposed qualities of the medicine. Theories may be and have been invented to explain why such a medicine cures the disease, but the theories may be false, and yet the fact, vouched for by experience, remains. The arguments against homœopathy touch only the theoretical explanations, but no way affect the great fact that medicines given on this principle cure diseases, and this is all that is required by a *rational art*. Here there is no treatment of a single symptom, as by the *contraria contrariis* method; no attacking a healthy organ that the disease has spared, as in the allopathic method. The medicine is applied exactly to the parts affected by the disease as ascertained by the similarity of the symptoms of both drug and disease, and on these points it exerts its medicinal or healing power. How it cures is a matter for speculation and belongs to the domain of science, but the law remains true however erroneous may be the speculations. So the truth of the law of gravitation is independent of the speculations as to the cause of gravitation. It should always be borne in mind that the application of the law is an art and not a science. It is by forgetting this that so much irrelevant criticism has been wasted on the subject. Thus, we read in Lewis's work on the *Influence of Authority in Matters of Opinion* (p. 36) :

“Mock sciences are rejected after a patient examination and study of facts, and not upon a hasty first impression, by the general agreement of competent judges. . . . Mesmerism, homœopathy, and phrenology have now been before the world a sufficient time to be fairly and fully examined by competent judges; and they have not stood the test of impartial scientific investigation, and therefore have not established themselves in professional opinion,



they may be safely, on this ground alone, set down under the head of mock sciences."

There are several errors in this brief passage. First of all, homœopathy is not, as above said, a science, but the practice of a law of cure—an art. Whenever it has been fairly and fully examined by competent judges its truth as a law of cure has been acknowledged. It is not a subject for scientific investigation apart from the application of practical tests. That most of those trained to the practices of traditional medicine reject it is no proof that it is untrue; this rejection is only owing to the circumstance that they have not tried it and will not try it. Like any other art it must be practically tested, not condemned untried. No doubt the vast majority of the old women who earned their livelihood by knitting stockings failed to see the excellence of Lee's stocking-frame and denounced it untried. Had it been left to the "professional opinion" of the knitters the stocking-frame would have been utterly condemned and abolished. But stocking-wearers wanted cheap stockings, so they encouraged the frame and the knitters had to give in. And thus, as patients wanted to be cured speedily and cheaply, they encouraged the homœopathic method and forced the orthodox to abandon many of their favourite practices and to assimilate their treatment ever more and more to the homœopathic method.

It is curious to observe that the attacks upon homœopathy from the earliest to the latest are invariably directed against some theoretical explanation of the law of similars, and nothing like a practical refutation of it by a careful testing at the bedside of the sick has ever been attempted, for the so-called trial of Andral was a glaring instance of an attempt to apply the rule of similars to the treatment of single symptoms, which is utterly opposed to the whole spirit of the homœopathic method.

The very latest article on homœopathy by an adherent of the orthodox school, entitled *Examen critique de l'Homœopathie par le Dr. D. J. G. Ollivier* in the *Archives de Médecine navale* of last November, is an illustration of what we have said. He attacks the explanation given by



Hahnemann of the supposed rationale of the homœopathic cure, viz. that the natural disease is converted by means of the appropriate remedy into a similar but stronger artificial disease, which in its turn yields to the reparative action of the vital force;\* which may be true or false, but its truth or falsity no more affects the fact of the homœopathic cure, than the truth or falsity of the undulatory theory of light affects the fact of the decomposition of white light by the prism. If the undulatory theory does not explain all the phenomena of the reflexion and refraction of light, so much the worse for the theory. In like manner if Hahnemann's theory of the action of the homœopathic medicine does not explain all the facts of the homœopathic cure, not even the most fanatical Hahnemannist would imitate the celebrated French theorist and say: *tant pis pour les faits.*

The following passage shows how thoroughly Dr. Ollivier understands and appreciates the facts of homœopathy, and how well fitted he is to pass a judgment on the doctrines of Hahnemann.

“Vomitus vomitu curatur, said Hippocrates [by the bye we were not aware that Hippocrates spoke Latin]. Just so, all my doctrine is there! boastfully cries Hahnemann. [Hahnemann never cried or even whispered anything of the sort—but let that pass]. No doubt vomiting can be cured by vomiting; but this vomiting, which disappears after the ingestion of an emetic, does not constitute the true disease, it was the natural effort employed to relieve the stomach of the saburral or bilious matters, the proximate causes of the morbid symptoms. It is not by the law of similars that can be explained the case of cure by *White hellebore* of a biliary flux termed cholera, reported in the book on *Epidemics*.† The same error occurs in his explanation of

\* This very theory has been adopted by the great orthodox luminary Trousseau, who tries to smuggle homœopathy into “legitimate” medicine under the name of “médecine substitutive.”

† In the first and third books of *Epidemics*, which are the only ones generally credited to Hippocrates, there is no mention of any case of this sort. Plenty of cases are given, but no treatment mentioned, at least no drug-treatment.



the mode of action of certain other drastics. *Jalap* cures colics by emptying the intestines, not by producing colics. *Colchicum* stops the course of a dropsy due to insufficient urinary secretion, by opening a way of elimination, not by causing anuria. When *Ipecacuanha* causes a fit of asthma to cease, it is not because in the form of powder it produces a more or less serious spasm of the bronchial passages, because it is never given in this form. It is because, when introduced into the stomach it determines, by reflex action, an augmentation of the mucous secretion of the bronchial tubes, which is deficient in the fits of dyspnoea characterising the suffocative attacks of asthmatics."

Vomiting cured by vomiting is not Hahnemann's homœopathy, but vomiting cured by a medicine capable of causing vomiting in the healthy, but in a dose so small as to be incapable of producing its physiological effects—that is Hahnemann's homœopathy. Of course I do not deny that vomiting caused by the presence of irritating substances in the stomach may be cured by an emetic in full dose, but that is not homœopathy, it is the mere mechanical removal of an irritant, just as picking a thorn out of the skin it is inflaming cures the inflammation. Most assuredly the cure of cholera by *Veratrum* is not *explained* by the law of similars, it is only an *illustration* of that therapeutic law. *Jalap* will cure certain colics in doses so small as to be capable of causing neither colics nor evacuations. If *Colchicum* removes dropsical symptoms by acting as a diuretic, this is an illustration of allopathic treatment, which we are far from denying to be sometimes successful. That *Ipecacuanha* will sometimes relieve an attack of asthma in very minute doses is an undoubted fact, and it is equally a fact that practitioners have been led to use it for this affection by its ascertained power of causing dyspnoea. Whether Dr. Ollivier's learned jargon about reflex action and so forth is the true explanation of its mode of action in minute doses, is quite beside the question, and does not affect the fact that the guide to its selection was the law of similars.



These and many equally illogical passages in Dr. Ollivier's work show that he is either incapable of understanding the elementary principles of homœopathy, or that he has wilfully misrepresented them. At the commencement of his inquiry he says, "I am not one of those who say with Riolan, 'Malo cum Galeno errare quam cum Harveyo esse circulator.'\*" We should accept truth from whatever quarter it may come. In scientific discussion sincerity marches *pari passu* with logic. Nothing can be durable or solid without sincerity. Therefore I shall act with perfect good faith in this critical study. I shall bring to it all the loyalty that is due to a medical subject of such great importance, because questions of this nature affect the most direct and the dearest interests of humanity." After this declaration it would be impossible to doubt Dr. Ollivier's sincerity and good faith, so we can only ascribe his misrepresentations to incapacity. When there is a doubt as to whether we must consider our opponent a knave or a fool, it is apt to cause us some embarrassment, but in the face of Dr. Ollivier's solemn asseverations we are precluded from the notion of attaching any suspicion of knavery to him when he presents such an erroneous picture of the system he means to criticise. Like his namesake, the last prime minister of the second French empire, he goes to war with a "cœur léger," and like him he thinks he is thoroughly ready for the attack even to the last button on his gaiters, but, still following his political prototype, it is only in gaiter-buttons that he is ready, his fighting forces are of the most miserable description.

Dr. Ollivier concludes his laboured diatribe with the words "Si mihi desint vires in me est voluntas!" We can testify that the *vires* are wanting, and we are ready to believe that the *voluntas* to upset homœopathy is present in full intensity—only in scientific matters it is not usual to take the will for the deed.

I have dwelt on Dr. Ollivier's article, not because it is

\* I doubt very much if Riolan ever said this. He was much too conceited to acknowledge that he could by any possibility err, either with or without Galen. The saying was, no doubt, some student's jest.



the best or the worst of its kind, but only because it is the last. It differs in degree only, not in kind, from all the other allopathic criticisms of homœopathy I have seen, from Simpson, Forbes, and Routh, down to Brodie, Bushnan, Jürgensen, Barr Meadows, and Ollivier. Each successive writer thinks he has "dished" homœopathy—Barr Meadows even celebrates his imaginary victory by some lines he imagines to be poetry—but not one has ever attacked the essence of the homœopathic method, they have wasted their energies in assaulting some useless out-works and detached forts, but the citadel of homœopathy, founded on the impregnable rock of experience, has remained unscathed amid the storm of ill-aimed projectiles. No assailant has yet shown that homœopathy is not a rational method of treatment, and no one has yet been able to prove that any other therapeutic method has the slightest claim to be considered rational. "We have no rational therapeutics," say all our opponents, from Forbes to Virchow. There is a bitterness and affected contempt in all the criticisms on homœopathy we have read, that do not promise much for the millennial concord of the two schools of which we have lately heard so much. The wildest fanatic for reconciliation would certainly fail to discover any tendering of an olive branch in our direction by this Ollivier.

"Wer nicht im alten Gleise geht,  
Der muss es bitter büssen ;  
Denn was die Menge nicht versteht,  
Das tritt sie stets mit Füßen."

But in spite of their protestations they do occasionally practise rational therapeutics, we will not say without knowing it, but at all events without confessing it. We have only to look at the periodicals of the orthodox persuasion *passim* for proof of this. I take up the last number of the *Practitioner* for this month of February in which I am now writing, and I find a series of cases of mania treated by *Hyoscyamine*, as the author calls it, but the preparation used is really the extract of *Hyoscyamus*. The author, Dr. H. Clifford Gill, of the York Lunatic Hospital, says with charming naïveté, "If a moderate dose of *Hyoscyamine* be



given to a healthy man he will exhibit many of the phenomena of an attack of mania, plus certain well-marked physical conditions; he becomes loquacious, incoherent, rambling, and has certain well-marked hallucinations of vision and audition, great weakness, especially of the lower limbs, and considerable loss of co-ordination, similar to that seen in a drunken man, intermittent drowsiness, hypermetropia, dryness of lips and throat, and, not uncommonly, vomiting. Now it was once thought that if in a person already the subject of disorganised brain action another process could be induced, a reaction might take place, and a changed condition for the better be the result. Be that as it may, as a fact great benefit and amelioration does take place in many classes of cases, and this, too, when all the more common forms of narcotics, such as the various preparations of *Morphia*, *Chloral*, *Cannabis indica*, *Conium*, &c., not forgetting the universal neural panacea, *Bromide of Potassium*, have been tried and have proved failures."

Here the doctor for once practises rational therapeutics, that is to say he is guided to the use of *Hyoscyamus* by the fact that it causes in the healthy a series of morbid phenomena similar to those of the disease to be treated, and he has every reason to be satisfied with the result, and he measures his doses by eighths of grains.

The adoption of the rational therapeutics of Hahnemann by the nominal adherents of the orthodox sect, or, as we may term it, the school of irrational therapeutics, is not limited to isolated instances, but more or less pervades the whole old-school practice, as a cursory glance at the most recent works on therapeutics in England will convince any one. If things maintain the pace they are going at present, in a few years the whole of the practice of the orthodox sect will become rational, though, like Drs. Gill (just quoted), Ringer, and the rest, they may be practising pure homœopathy without mentioning the word. In phrases more or less veiled they intimate that the remedies they employ excite in the healthy morbid states similar to those of the diseases they cure, and inferentially imply that the rule for the selection of these remedies is *similia similibus*. Acting



on the Talleyrandian idea that the use of language is to conceal thought, they do not name the word homœopathy, but that does not much matter provided they give their patients the benefit of homœopathic treatment. The present race of doctors is, perhaps, too near that past generation that committed itself publicly and irrevocably by denouncing Hahnemann and all his works with all the arrogance of ignorance, to allow us to expect that it will take the generous and manly course of acknowledging the services to medicine of the discoverer of the homœopathic law. But time will gradually efface the inherited animosities even of doctors, and many years will not elapse before the name of Hahnemann will excite no more passion than does that of Harvey (though he was hated and reviled by his contemporaries as much as ever Hahnemann was\*), when the practice we owe to his genius, which is superseding the old Galenic medicine even in the strongholds of tradition, shall be acknowledged as Hahnemann's by every teacher of medicine. In the mean time it is annoying to see our *Materia Medica* rifled by the enemy; and we have no opportunity of reciprocating their attentions, for they have no treasures to steal. Their happiness is never clouded by the thought that any one will ever think of stealing anything from them.

“Cantabit vacuus coram latrone.”

But though the allopathic lion is not quite ready to lie down with the homœopathic lamb, and though it has not yet abandoned its inherited *penchant* for blood and flesh, and acquired the simple tastes of its innocuous rival, it has abandoned many of its sanguinary and carnivorous propensities, and gives promise of the eventual shedding of its cruel fangs and claws.

Before concluding my remarks upon rational therapeutics, I should mention that although Hahnemann inveighed against the tendency to pathological speculations in the treatment of disease, homœopathy cannot be practised

\* “Towers are measured by their shadows and great men by their calumniators.”  
—Chinese proverb.



without a certain admixture of these very pathological speculations which Hahnemann denounced. He himself practically confessed this when he promulgated his doctrine of chronic diseases. The *psora theory*, as it is termed, is a purely pathological speculation, and its pendant, the doctrine of antipsorics, is a therapeutic speculation. It differs no way in kind from the older doctrine of phlogistic diseases and antiphlogistics. Both set out with the idea that there is a certain class of diseases distinguished by a certain definite pathological character common to them all, for which there is a certain set of remedies, to each single one of which is attributed a peculiar power over this pathological character. Against his own theory of psora and antipsorics Hahnemann's denunciation of the pathological and therapeutical speculations of previous physicians would apply with equal force; so also would his objection to arranging diseases into classes and genera; for in his theory of chronic diseases and the corresponding remedies he has arranged diseases into classes for precisely the same objects as those he condemns, viz. in order to be able to treat them in a more general way and by a more limited number of medicines than if he had insisted on his previous maxim of strict individualisation of each case and selection of the remedy with sole reference to the similarity of symptoms. Few now believe in the psora theory as Hahnemann propounded it, and not even the most bigoted Hahnemannist would hesitate to treat a so-called psoric disease with any medicine that offered a homœopathic similarity to it in its symptoms, whether it belonged to the class of antipsorics or not. But we all occasionally act on the principle contained in Hahnemann's famous theory of chronic diseases, and are guided to the selection of certain drugs more by their correspondence to what we believe to be the pathology of the disease than by the mere similarity of symptoms of disease and drug. In fact, cases are constantly occurring where we can find little or no symptomatic correspondence in the pathogeneses of our medicines, and where we must either speculate regarding the pathological characters of disease and drug, or leave them untreated. The great and



real advances made by pathology of late years render this not such a hopeless task as it was in Hahnemann's time, and the excellent provings of many of our drugs enable us to form a very plausible opinion as to their pathological sphere of action. Still this—though a perfectly rational practice when it is successful—is tainted with the blemish of uncertainty on account of the risk that our idea of the pathological nature of the disease may be wrong, or that our inference respecting the physiological sphere of action of the remedy may be erroneous, or that both may be incorrect. In every case, when practicable, a selection guided by close similarity of symptoms of disease and drug is to be preferred as at once the most rational and the most successful. The speculative plan is only to be adopted as a *pis aller*, in the event of failure to discover among the recorded effects of drugs the *simile* to the symptoms of the disease. When there can be no doubt about the pathology of the disease and drug, our selection of a remedy among a number presenting similar symptoms will be much facilitated, and we can even suppose cases where there is no correspondence between the ascertained symptoms of the drug (from imperfection of proving) and those of the disease, where a knowledge of the general pathology of disease and drug would suffice to enable us to select the right remedy. But even in this extreme case there is no departure from rational therapeutics; we give the medicine that has a pathological relation to the organ or tissue affected by the disease, *e. g.* *Iodine* in periostitis.

But, as before said, it is only in therapeutics, or the treatment of diseases by drugs, that we find the broad division of practitioners into "rational" and "irrational." The medical art does not, however, consist entirely of therapeutics. Apart from therapeutics there is a large field of medical practice, and here there is perfect agreement among all sensible practitioners.\* We are here all equally rational or equally empirical, and where there is so much agreement it seems a pity that there should be such a great gulf of

\* "Nous ne trouvons guère de gens de bon sens que ceux qui sont de notre avis."



separation on account of differences respecting what is, after all, but one branch of the medical art.

Were the practice of medicine to be judged by the perusal of treatises on the practice of physic and the articles furnished to our periodicals it would seem to be almost entirely an affair of drug-giving. But these would give no truer idea of the ordinary employment of a medical practitioner than the dainty specimens we see in a mineralogical museum would give us a correct notion of the general appearance of the earth. As the earth contains much that is not thought worthy of a place in a museum, so medical practice presents a vast number of cases that no one would ever think of embalming in a treatise or in the columns of a periodical, and very much that is quite outside of drug-giving. The practitioner who would confine himself to prescribing medicines would cease to be rational, and would certainly fail to cure many cases that daily come under his care. Nay more, with all deference to my colleagues who boast that their practice consists entirely of prescribing homœopathic medicines, I will assert that in cases that require medicine he who would confine himself to homœopathic medicines only would fail to do all the good he might. In order to illustrate these points I propose to follow the example of our lamented colleague, Dr. Watzke, and give what he called "a day of my practice." I will not say that all the cases occurred in one day, but they happened sufficiently near to one another to render it at least possible that they might all have been seen on the same day. I select them from my case-book, as each illustrates some point of ordinary daily practice, and the whole prove (to parody the well-known lines)—

How few of all diseases men endure  
Are those that medicine alone can cure.

1. The first one I shall mention was my own servant, who announced to me that he had not been able to sleep all night nor to take a bit of breakfast on account of sore throat. I looked into his throat and found intense inflammation of the uvula, manifesting itself by bright redness, elongation, swelling and pain, especially bad on swallowing. I bethought me



of Bolle's rapid cure of uvulitis and determined to adopt it. Taking a solution of *Corrosive sublimate* in alcohol, one part of the metallic salt to ten of the spirit, I applied it to the inflamed uvula with a camel's hair brush. Instantly the uvula shrank up to its normal dimensions and the patient could swallow without difficulty or distress. Later on in the day I enquired how his throat was, and ascertained that it is was quite well.

This is a simple instance of empirical treatment. There was no guiding rule here, nothing but the experience of another in a similar case to lead me to do what he had done and found successful. Doubtless *Mercurius corrosivus* is homœopathic to inflammation of the uvula, but given in the ordinary way it does not effect a cure so instantaneously as when applied in this way, and it remains doubtful whether it cures here in virtue of its homœopathicity or by reason of its astringency. If the latter, then it is probable that another astringent metallic salt, like *Sulphate of Copper*, or *Alum*, or even a vegetable astringent like *Tannin* might produce the same effect, but of this I have no experience, and being quite satisfied with the effect of the alcoholic solution of *Corrosive sublimate*, I always now employ it in such cases; and as the result is in my experience always equally satisfactory, I am content to practise empirically in this affection without concerning myself about the rationale of the cure.

2. I was called to see a lady who was suffering from severe inflammation of one eye. She told me that while travelling by rail the previous day she suddenly felt acute pain in the eye, which forthwith began to water, and the pain and inflammation had increased so much during the night that she could get no sleep. She felt assured that something had got into her eye, as she had a sensation as if there were sand in it whenever she closed the eye. On examining the eye with a lens I perceived a minute black object right in the centre of the cornea, and apparently embedded in it. With some difficulty I removed this little black object on the point of a needle and found it to be a small fragment of coke. Its removal was followed by instant relief to the uncomfortable sensations, and in a few hours the inflammation quite disappeared.



There was no need for any medicine in this case, it was a simple example of *sublata causa, cessat effectus*. The treatment was entirely rational, but has no bearing on therapeutics.

3. The next case was one of inflammation of the eyes of a different character. The patient, a lady very subject to rheumatic and neuralgic affections, had, when in good health, driven out in an open carriage on a very cold day. She was soon afterwards affected with sore throat and fever (she had formerly suffered from ague) and the eyes became much inflamed and very painful and swollen. The sore throat had disappeared under *Belladonna* and *Mercurius* which she had taken of her own accord, but the eyes remained inflamed and painful, with considerable swelling of the lids, intolerance of light, and the conjunctiva much injected. Cold air and bathing the eyes with cold water temporarily relieved the pain and inflammation, which, however, always returned. Finding that her own remedies failed to cure the eyes she applied to me. I prescribed *Apis* 2, and she told me some time afterwards that the medicine acted "like magic," and in a very short time all trace of inflammation had disappeared.

This is an instance of pure rational therapeutics. *Apis* produces exactly the same kind of inflammation of the eyes as that she suffered from, and the knowledge of this led me to prescribe it with the result stated.

4. A gentleman, of middle age, came into my consulting room to see if I could do anything for the relief of his deafness. He had been deaf of one ear, he told me, for several years, and the deaf ear was also affected with a constant singing noise, like a tea-kettle, which was even more annoying than the deafness. Otherwise he was in perfect health. I ascertained that he could only hear the tick of a watch when closely applied to the ailing ear. I applied the vibrating tuning-fork to his teeth and bade him notice which ear he heard it with. He at once said with surprise that he heard it much louder on the deaf side than on the other side on which the hearing was perfect. I then told him that I thought I could soon cure him. On looking with the speculum into the affected ear I found, as I expected, the meatus



blocked up with hardened wax. On removing this by syringing with warm water, I found the membrane of the drum of the ear quite healthy, and he could immediately hear the tick of the watch at several feet distant, in fact, as well as with the other ear.

Here again the treatment was quite rational though not therapeutical. The cause of the deafness and singing in the ear was the accumulated wax, on the removal of which the abnormal symptoms at once ceased. I may mention that he had previously consulted several medical men, who had prescribed various remedies without benefit. By omitting to examine the ear they had failed to discover the cause of the deafness, and their treatment, however rational it might have appeared, was in fact irrational.

5. An unmarried lady, aged about 55, consulted me for noises in the ears. The right ear had for fifteen years been affected with constant buzzing noise, and the hearing of that ear was considerably impaired, she could only hear the watch at two inches. The left ear for two months had been subject to a "booming" noise, synchronous with the pulse, especially annoying when she lay down at night and often preventing sleep. The hearing of this ear is not impaired, she hears the watch distinctly at eight inches. Music, especially that of a street organ, is painful to the right ear, not to the left. She has some dull pain in the left ear. Before this ear became affected she suffered from a curious nervous affection of the legs up to the hips. She described it as feeling as if the bone was broken, and as if she had been stung with nettles. On the cessation of this affection of the legs, the booming noise in the left ear came on. It ceased on the recurrence of the pains in the legs, but recommenced when they went off. Damp weather aggravates the noise in the left ear and increases the pain in it. Nothing abnormal was to be seen in either ear on inspection with the ear-speculum. I diagnosed subacute inflammation of the periosteum of the middle ear and prescribed *Aurum* 3. After taking this medicine a week she reported that the noises in both ears were much worse. I now gave *Iodine* 3. After a fortnight she returned and complained that the noises were no better and her nights were miserable. Music was quite intolerable. Prescribed *Sulphur* 30. A fortnight later she reported, no improvement of the



buzzing in the right ear, but the booming in the left ear was somewhat less, so that she could now sleep at night. I now gave *Silica* 30. After taking this for a fortnight she reported that the booming in the left ear was much better, and the buzzing in the right ear considerably relieved. She could now sleep quite comfortably, and the sound of music was not so unpleasant. I gave the same medicine in the 15th dilution, which completely removed the booming noise in the left ear, and reduced the buzzing in the right ear very much. I saw her a year after this and the improvement still continued. The hearing was not altered.

In this case the selection of the remedy was assisted by speculation as to the pathological state on which the symptoms depended. Considering the buzzing noise synchronous with the pulse to be caused by a certain morbid condition of the periosteum of the middle ear, I gave medicines which are known to act on the periosteum, *Aurum*, *Iodine*, *Sulphur* and *Silica*. The first two only aggravated the evil, whereas the last two produced decided amelioration and eventually cured the symptoms, by, as I imagine, restoring the periosteum to the normal state. This may therefore be considered an instance of rational therapeutics, though by no means a model illustration of a homœopathic cure, for the symptoms were not numerous enough to enable me to decide from them alone which, among many remedies, was the proper one for the case. The supposed pathological condition of the ear enabled me to limit my choice among a small group of medicines, but did not at once enable me to fix on the true curative ones, because neither of these medicines, nor, I may add, any other in our *Materia Medica*, presents a perfect simile to the symptoms observed in this case. This was therefore one of those instances alluded to above, where pathological speculation has to be employed in order to direct the choice of a remedy. That the remedy was successful affords a strong presumption that the pathological speculation was correct.

6 A military officer, aged about 45, who had served in India, and had studied and practised homœopathy for many years, consulted me respecting a peculiar form of dyspepsia to which he



had been subject more or less for thirty years, and for which he had taken various medicines, among the rest *Arsenic*, *Belladonna*, *Chamomilla*, *China*, *Nux vomica*, *Rhus*, *Sulphur* and *Veratrum*. He was sometimes better, sometimes worse, but was never altogether free from his complaint. Latterly it had become much worse. It was always so much aggravated by tea, that he had long abandoned that favourite but neuralgia-producing beverage. For a long time past he had almost given up every kind of food except milk, which was the aliment he suffered least from. The main symptoms are a dead aching in the stomach, attended with flatulent eructations, coming on after all food or drink. He has a great tendency to diarrhœa, with straining at stool, and sometimes darting pain up rectum. When he can get a hot bottle applied to the stomach, the pain is generally relieved in about a quarter of an hour. As this gentleman had treated himself for so many years, and given a long trial to so many medicines, all apparently pretty well indicated for his complaint, I was precluded from employing any of those he had already taken without effect. My first shot was a bad one. I prescribed *Argentum nitricum* 3. This was persevered with for a couple of weeks, but did no good at all. The pain in the stomach after all food except milk was, as he expressed it, agonising. Huskiness of the throat frequently comes on after dinner, and sometimes a bruised feeling in the bowels on both sides. I now gave *Anacardium* 3, whose pathogenesis contains a very accurate picture of the symptoms of this case. It was perfectly successful. After a few doses the distress in the stomach went off completely, and he was able to eat a considerable variety of food with perfect comfort.

This case may be regarded as one where the remedy was selected entirely from the correspondence of the medicinal symptoms with those of the disease. There was no question of any guidance by general pathological suitability, for any previous idea I had formed of the pathological affinities of *Anacardium* was certainly not in the direction of gastralgia. Some of the other medicines taken by the patient, and the *Argentum* prescribed at first by myself, were much more strongly recommended by general pathological indications, but these had proved altogether illusory, and the cure was effected by a medicine selected by what may be



termed an unscientific comparison of drug-symptoms and disease-symptoms. But admitting the soundness of the homœopathic law, the treatment, though unscientific, was perfectly artistic and rational. A treatment guided solely or chiefly by general pathological inferences is apt to fail us on account of the difficulty of referring many diseases, with few and purely subjective symptoms, to their real pathological cause—pathology itself being an ever-shifting science, *opinionum commenta delet dies*—but if we can find an accurate resemblance of morbid and medicinal symptoms all round, we may prescribe with almost perfect assurance of a happy result, without concerning ourselves about pathological speculations and vain search after proximate causes. The inestimable advantage of a repertory, such as the *Cypher Repertory*, for ferreting out the simile among the vast collection of symptoms in our pathogeneses is self-evident.

7. A lady, age about 30, consulted me for chronic nettle-rash, which in spite of long homœopathic treatment has only become worse. Formerly it only used to come out at night after undressing, now it troubles her even during the day. It appears on various parts of the body. A long course of Turkish baths failed to give her any relief. She suffers from piles occasionally, and complains of soreness in the groins. I gave her successively *Arsenic*, *Calcarea*, *Graphites*, and *Apis*, without permanent benefit. She became pregnant and lost the nettle-rash until two months before her confinement, when it returned in all its former intensity. Fifteen months after her confinement she again visited me (she resided in the country at some distance from London). She still suffered from the nettle-rash as badly as ever, but had abandoned all hope of ever getting rid of it, and now she came to me on account of a new symptom that tormented her. This was a frequent sudden feeling as of scalding water in the left knee. For this I prescribed *Petroleum* 6, a dose three times a day. A month later she came and reported that while taking the medicine the painful sensation in the knee had quite left her, and to her great delight she had entirely lost the nettle-rash. She was not again in the family-way. Months have now elapsed without a recurrence of her former sufferings.



*Petroleum* is no doubt a remedy that has been recommended, though I am not aware that it has been used, in urticaria, but it was not for this symptom I prescribed it, but for the scalding sensation in the knee. Without this characteristic symptom I might not have thought of prescribing it at all in this case, as on the former occasions when the patient consulted me the knee symptom was not present. This latter symptom proved what our American colleagues term a "key-note" symptom leading to the selection of the right remedy for the whole morbid state. The cessation of the nettle-rash must be attributed to the *Petroleum*, as there was no other ascertainable cause for its disappearance. It was nevertheless an instance of rational homœopathic treatment, unbiassed by pathological speculation, as the medicinal symptoms corresponded to the totality of the disease symptoms.

8. Two ladies, a mother and her daughter, both attired in the latest development of fashionable costume, came to consult me. They suffered from the same complaint, viz. great pain in their toes when they walked. Their feet, which they displayed to me, were swollen and tender about the toes; the proximal joint of the great toe was especially tender, red, and swollen, but some of the joints of the other toes were also red and tender. I begged to look at their boots and found, as I expected, that they were constructed on the most fashionable and unscientific principles. The heel was at least two inches high, while the front was narrowed to an acute point. I explained to my fair patients that by wearing such boots the whole of the weight of the body was thrown upon the toes, which were squeezed into a space quite insufficient for them. While boots of this construction gave to their gait that peculiar mincing hobble now so much affected by the fair sex, and caused their bodies to assume that highly desiderated attitude called the "Grecian bend," these advantages could not be purchased without serious detriment to the complicated arrangement of joints and ligaments with which nature had, without regard to the exigences of fashion, provided the foot. I advised them to get boots with low heels and roomy in the toes, and promised them that they would then soon lose the redness and tenderness of their feet, and be able to walk with ease and comfort. They seemed quite too awfully sorry that I could



not suggest anything to enable them to retain their fashionable chaussure without the attendant torture, but they were forced to admit that my advice was perfectly rational.

9. A young gentleman while playing football received an injury to the back in the region of the lower lumbar vertebræ. He suffered much pain in the seat of the injury, and was confined to bed for some weeks. When at length he was able to leave his bed he found that the legs were so weak that he could hardly stand. The paralysis increased to such a degree that he could only move about the room with the aid of two sticks. He consulted many doctors, and was subjected to every variety of treatment. He spent some weeks at Wildbad without benefit, and when he consulted me he had been paralysed for three years. He had lost all the tenderness and pain in the back, and sensation was perfect. He was now about twenty years of age. I recommended him to try the Swedish regulated gymnastics, and sent him to Dr. Roth. After three months of this treatment, without any medicine, he was completely cured, and at present (three years after Roth's treatment) he is quite well and strong in his legs.

This is given as an example of rational treatment without therapeutics, and shows the advantage of an acquaintance with other resources of the medical art besides mere drug-giving and conventional prescriptions of mineral waters. Cases are constantly occurring in the practice of every medical man where physic is useless, and the doctor who trusts entirely to medicines will fail to cure, whereas by availing himself of some of the many appliances and modes of treatment within the domain of medicine, he may benefit patients to whom nothing in the whole pharmacopœia is of the slightest use.

10. A married lady came up from her suburban residence to consult me. Like John Anderson my Jo, "her locks were like the snow," though she had little more than half a hundred weight of years on her "frosty pow." She was by no means a robust person, having in former years suffered occasionally from severe attacks of nervous depression, and her appearance was anæmic. She had, however, enjoyed very good health for several years past. She now complained that for the last six weeks she



had every morning regularly, as soon as she got out of bed, a violent attack of diarrhœa accompanied by a sensation as if everything would come away. Living in the country at a distance from a doctor, and having an amateur's knowledge of homœopathy, she had treated herself with various remedies; but finding them of no use she had given them all up for several days. But as this renunciation of all medicine had been of no more service than the taking of her own medicine, she resolved to come and ask my assistance, which, of course, I was only too happy to give her. After carefully considering her symptoms I gave her two small phials of *Arsenic* and *Iris*, both of which seemed to be equally indicated, to be taken alternately three days each, beginning with *Arsenic*.

Treating patients who live at a distance and cannot come frequently to see their doctor, when the symptoms do not point very conclusively to one medicine, it is often advisable, as in grouse shooting, to have a double-barrel, so that if one misses the other may hit. I did not see my patient for three weeks, when she again visited me to consult me about her only daughter's health. "How about your own diarrhœa?" I asked. "Well, I have never had the slightest return of it since the day I was here." I felt gratified at the accuracy of my aim, evidently the first barrel had been enough. My self-satisfaction was short-lived. "But what do you think, doctor?" continued my patient, "I did not take a single dose of your medicine. The following morning I had no diarrhœa, so I ventured to wait and see if it would return before having recourse to your medicine; but from that day to this I have been perfectly well."

I was at a loss under what head to put this remarkable cure, until I read Dr. Ollivier's pamphlet, which teaches me that this is an example of pure homœopathic treatment. For Dr. Ollivier, describing the peculiarities of homœopathic medication says: "Enfin, il n'est pas rare, nous le savons, que la seule vue de ce flacon opère des actions thérapeutiques." Now that we know this on such unexceptionable testimony, all is clear; the patient was cured by the sight of the bottle containing the medicine. Hurrah! who after that will limit the powers of homœopathy? We would not have ascribed such a wonderful virtue to the sight of a bottle of homœopathic medicine ourselves, but when an



enemy asserts it we must accept his testimony as an involuntary tribute to truth—*fas est et ab hoste doceri*.

11. An old lady, very much disposed to bronchial attacks and bilious affections, had while residing on the sea-coast got a severe attack of congestion of the liver with jaundice to a very great extent. On the subsidence of these liver symptoms there remained behind the most violent and intolerable itching of the skin, which rendered life during the day a burden, and deprived her of almost all sleep at night. The skin was harsh and dry, but presented no sign of an eruption, except what was produced by the irresistible scratching. I tried various remedies without effect for some weeks, when it occurred to me to give her Turkish baths. Being beyond seventy and rather feeble, I had some difficulty in persuading her and her husband that there was no great risk in taking these baths. At length she consented, and finding they did her good she went on with them, at first every other day, then every day. After each bath the itching was perceptibly ameliorated, and when she had taken about twenty she was perfectly well, and has remained free from itching ever since, now three years.

In jaundice, as is well known, itching of the skin is a frequent symptom, but it is usually more a premonitory symptom, declining when the jaundice is fully developed. In this case it not only did not decline, but it became worse and worse after the entire disappearance of the jaundice, and lasted for many weeks, until it was cured by the Turkish baths. The treatment in this case was rather conjectural than empirical. I imagined that the skin being so dry and harsh, the itching might be caused by want of action of the cutaneous sweat glands, and knowing that the Turkish bath is a powerful purger of these glands, I put this and that together, and the result was a success. The treatment may be considered rational, because it succeeded. In medicine the Jesuitical maxim, that the end justifies the means, is not generally considered immoral. When the means succeed, we are always ready with a pathological reason for their success. When they do not succeed, we are equally ready with a pathological reason for their failure—*in utraque fortuna parati*.



12. I received a pressing message to go and see an old dispensary patient whom I had had under my care several years previously. She said she thought she was dying, but would like to see if I could suggest anything for her relief. I found her lying in bed, pale as a sheet, and bedewed with cold, clammy perspiration. Her pulse was extremely feeble and hurried. She told me her bowels had not acted for ten or twelve days, and she had been suffering intense pain and ineffectual straining for most of the time, and latterly constant vomiting, especially when she attempted to take any nourishment. She had been attended by the parish doctor, who had given her a good deal of medicine, all of which her stomach had latterly rejected. He told her he could do nothing more, hinted that the bowels were strangulated, and left her to die. Under these circumstances she had sent for me, but without much hope that I could do her any good. On making an examination I found the lower bowel obstructed by a hard mass of impacted fæces. I removed as much of this as I could mechanically with considerable difficulty. This gave her immediate relief, and in a short time a large motion was expelled naturally, and the patient speedily recovered without medicinal aid.

Here the treatment was quite rational, fulfilling the indication "*tolle causam.*" All this frightful suffering and danger might have been prevented had the doctor, relying less on the omnipotence of physic, taken the trouble to ascertain at first whether any mechanical obstacle existed to account for the constipation.

*Principiis obsta ; sero medicina paratur*

*Cum mala per longas convaluere moras.*

13. As I was sitting down to dinner the servant of a gentleman residing a few doors off came and begged me to go at once to his master. I hurried off and found the gentleman sitting at his table, with the dishes before him but with an anxious expression of countenance. He told me he had just eaten a bit of fish and a bone had stuck in his throat, and was causing him acute pain and made him fear he might choke. I looked down his throat but could see nothing, indeed he pointed out the seat of obstruction half way down his neck. I made him take a large mouthful of potato and swallow it. This he did, and though it caused him considerable pain, it carried the fish bone



along with it down to the stomach, and he was able to finish his dinner in comfort.

This is a trifling case, and would not be worth recording, were it not that it illustrates a not uncommon incident in practice, where the doctor has to resort to other means than drug-giving to effect a rational cure.

14. This is the last case I shall mention to complete the day's work. As I was going to bed I received a summons from a lady to come at once to see her husband, who had been taken suddenly ill with what she considered alarming symptoms. I found the gentleman in bed. He told me he had been out hunting that day and had got thoroughly chilled; on coming home, he felt severe pain in the left renal region, which had steadily increased but slightly changed its position. He had vomited, and was much distressed with sickness and flatus in the bowels. The pain was of a grinding intolerable character, and extended from the kidney down the left iliac region. There was also some urging to urinate, with pain at the end of the urethra. The urine, passed in small quantity, was clear. He thought he had caught cold in his kidney, and that it was now highly inflamed. As there was no heat of skin and the pulse was quiet I assured him this was not the case, but that he was suffering from an attack of gravel. I explained that a small calculus was in the act of passing down the ureter into the bladder, and that as soon as it reached its destination the pain would cease. I advised him to drink plentifully of barley water and to move about the room frequently, as by so doing he would hasten the progress of the offending body, and get the desired relief sooner. He said he thought he could not endure the pain. I gave him a prescription for a solution of one grain of *Acetate of Morphia* in six ounces of water, to take by teaspoonfuls every five minutes until the pains subsided or he fell asleep. This plan was taught me by Dr. Wyld, and I have found it very successful in procuring rest and relief from suffering during the passage of renal calculi. At the same time I told him that if he abstained from the narcotic and kept moving about and drinking plentifully he would greatly expedite the expulsion of the calculus. The following day he had several severe fits of pain, but he heroically resisted taking the narcotic, and towards evening the pain suddenly ceased and he had a good night's rest. When he awoke he felt



perfectly well, ate a good breakfast, and went to business. On examining the urine he had passed I found a small rough uric acid calculus, about the size of a hemp-seed. He had never suffered from anything of the kind before. I left him with some useful cautions respecting diet and indulgence in alcoholic stimulants, and he has not been again troubled with gravel.

Here the narcotic was prescribed (though it was not taken) not for any curative purpose, but simply to lull the pain for a time, and so enable the patient to pass through a process necessary for his relief more comfortably than he could have done without the soothing influence of the morphia. It may be thought by those who are in the habit of ordering large doses of opiates that the quantity of the narcotic prescribed in this case was ridiculously small, but practically I have found that from four to eight such doses of one forty-eighth of a grain each of morphia generally suffice to give the patient almost complete exemption from suffering, and enable him to get a few hours' refreshing sleep. The treatment here is rational though not curative, as the only cure of the affection is the expulsion of the calculus, and that is the work of time. The indication is to make the time pass as agreeably as possible. I do not say with Sydenham: "*Sine opio nolo esse medicus,*" but I contend that opiates have their uses in the ordinary practice of the rational physician, and we should be wanting in our duty to our patients did we refuse to give them in cases where they can give relief to intense suffering of a temporary character, without materially delaying the cure.

In the above cases, which very fairly represent the daily routine of a busy practitioner, it will be observed that only a small proportion exemplify pure therapeutical treatment; and though on many days the proportion of such treatment to non-medicinal treatment may be much greater, there are days when it is even smaller than in the specimen I have given. I might have multiplied to any extent, from my own case-books, the instances where we are compelled to resort to other than medicinal remedies, and many practitioners could do the like. How many cases of over-loaded stomachs, or fits of indigestion from eating indigestible things,



do we not cure by directing the patient to put his finger down his throat, or take copious draughts of warm water to rid himself of the "pernicious stuff" he has swallowed? How many cases of gout and rheumatism do we not relieve by employing an experienced rubber, or sending our patients to Aix-la-Chapelle, Wildbad, or Bath, or even by prescribing abstinence from alcoholic liquor? \* How many neuralgias have we not conjured away by the use of the induced electrical current, or by the magnetic rotary machine, or even by so-called mesmeric passes? How many lumbagos do we not cure by the Turkish bath or the lamp bath? How many cases of chronic cutaneous disease do we not remedy by similar means, or by the use of sulphur mineral waters? How many cases of brain-fag do we not send with advantage to Ragatz? How many cases of torpid livers and sluggish digestion, with all their concomitant sufferings, do we not cure by enjoining vigorous exercise in the open air, † or by some apparently trivial alteration in the diet, such as varying the everlasting bread made of emasculated and zymotised wheat, by a daily plateful of good oatmeal porridge? ‡ How

\* In spite of Sydenham's dictum: "Water alone is bad and dangerous, as I know from personal experience."—*Treatise on Gout*, § 47.

† Exercise, to be thoroughly beneficial, must be amusing, and should bring into play as many muscles as possible. The constitutional walk or the regular use of the dumb-bells soon becomes irksome; but rowing, fencing, racquets, cricket, golf, and other muscular sports which combine amusement with exercise do not so easily pall, and are to be preferred. Many of those most eminent in literature, science, art and politics recruit their energies by games such as those mentioned, or by hunting, shooting, fishing, or other muscular recreations. One distinguished legislator is a zealous bicyclist, and our most energetic and many-sided statesman is a skilful woodcutter. He seems to have had his prototype in very ancient times:—"A man was famous according as he had lifted up axes upon the thick trees."—*Psalms* lxxiv, 5.

‡ "OATS, *n. s.* A grain, which in England is generally given to horses, but in Scotland supports the people."—*Johnson's Dictionary*. Of course this was "meant sarkastic" by the great lexicographer, but Scotsmen may console themselves with the reflection that England displays the finest specimens of horses, while Scotland abounds in "bairdly chieils," of whom she has no reason to be ashamed. Whether the excellence of these animal products of the two countries is owing in any measure to their diet I am not prepared to say; but as we know that bees can make an august and sagacious queen out of an ordinary larva by feeding it on a particular food, it would be rash to deny that the peculiar



many cases of dyspepsia from excessive addiction to the pleasures of the table, late hours, and sedentary habits, do we not send with advantage to Homburg or Kissingen, or to a water-cure establishment? How many cases of congested wombs and deranged menstrual function do we not restore to health and fertility by the baths of Ems? How many cases of anæmia do we not benefit by sending the patients to Tunbridge Wells, Schwalbach, or St. Moritz? Then, again, with regard to remedial means in daily use, how often have we not occasion to employ poultices, fomentations, compresses, cold and hot, inhalations, frictions, heat, cold, steam and electricity? How often must we open an abscess to avoid extensive destruction of the skin, or even the fell disease pyæmia? How often must we use some vermicidal drug to kill the parasitical infesters of the body? How often employ an enema, or other mechanical means, to remove an accumulation in the rectum? Nay, how often do we not find it easiest and best to overcome this temporary obstruction by a simple purgative? The many prescriptions that we have daily to make regarding diet and regimen, need scarcely be alluded to—*cela va sans dire*. In short, the exigences of practice compel us to include in our armamentarium against disease an infinite number of implements besides those contained in our *Materia Medica*, and we are not the worse but the better for being as thoroughly conversant with the use of them as with the pathogeneses of our homœopathic remedies. The truly rational physician might parody Terence's well worn words and say: "Medicus sum, medicinalis nihil a me alienum puto."

When a doctor in large practice solemnly assures the public that he treats all his patients entirely on the homœopathic principle, of course we are bound to believe him, food of the horses in England and the men in Scotland may have something to do with their good qualities. The Scotch seem to attach great virtue to their favourite cereal, as is evident from the first line of one of their popular rhymes:

"Parritch is the life o' man."

Our German neighbours likewise recognise the valuable properties of oats in their *Volksage*:

"Vernunft, Geduld und Hafergrütze  
Sind zu allen Dingen nütze."



“For Brutus is an honourable man, so are we all, all honourable men,” but then our belief is of that qualified character expressed in the saying of Tertullian, “credo quia impossibile;” and we are quite convinced that if the doctor who makes this statement were to hark back on his memory, he would recal many cases which would lead him to modify this statement, and not make such a great demand on our credulity.

No man’s practice consists entirely of cases for which drugs are the proper remedial means, still less does it consist solely of cases for which drugs given on the homœopathic principle are the true curatives. The examples I have given above bear me out in this. Again, cases occur in which the most diligent research will fail to find a simile among the medicines known to us in their physiological effects. Such cases, rare though they may be, must be treated, if with drugs or mineral waters, empirically, if with other means, then as rationally as possible. The line of homœopathic curability must be drawn somewhere by every practitioner. He who is most conversant with his *Materia Medica*, and has the necessary complement of this, a thorough knowledge of pathology and diagnosis, is able to draw the line so as to include the largest number of diseases. But the line must be drawn where knowledge fails, or where reason or experience teaches us that the cases are not proper ones for drug treatment.

In the face of this inevitable limitation of homœopathic treatment, in view of the large number of cases occurring in our daily practice which are altogether beyond the domain of drug-therapeutics, I am at a loss to understand how any practitioner can consistently call himself a homœopathist, or a homœopathic physician. True, in all cases where drugs are required, he prescribes medicines on the homœopathic principle when that is possible, but how about the cases in which drugs are not required? The assumption of this exclusive title appears to me as ridiculous as would be, in the opposite profession to ours, the conduct of the general who should call himself a “bayonetist,” because the bayonet formed part of his soldiers’ equipment,



forgetful of all his swords, lances, pistols, rifles, guns big and small, mortars, mitrailleuses, and so forth.

The physician who, when he selects his medicines, where medicines are required, according to the principle *similia similibus*, is merely a physician of advanced views. He has carried the principle of rationality into the matter of drug-prescribing. Those who do not adopt the homœopathic therapeutic law have discarded the light of reason at the threshold of the temple of *Materia Medica*, and stumble along in the dark, indignantly refusing the aid of Hahnemann's discovery, and moaning dolorously: "We have no rational therapeutics!" They remind us of Galileo's contemporaries. "Jupiter has no moons," they said. "Look through my telescope and you will see them," responded Galileo. "Telescope be hanged! how can that piece of metal tube, with a bit of glass at either end, show us anything?" "Only look," persists Galileo. "Never! have not all astronomers, Thales, Pythagoras, Hipparchus, Ptolemy, and the rest, proved conclusively that Jupiter can have no moons, and is the wisdom of these sages to be overturned by you and your miserable tin pipe? Hist! good dog, Inquisition, seize him, worry him well!"

And similarly we are seized and worried by our incredulous colleagues for daring to profess our confidence in Hahnemann's law as the sole safe guide in therapeutics. The persecution takes the form of professional ostracism, exclusion from the honours and emoluments of the profession, expulsion from societies, denial of the right of reply in medical journals to attacks and insults. And all this for having the honesty to confess our obligations to Hahnemann for his immortal discovery. Honesty is said to be the best policy, but, like some other virtues, it is sometimes its own reward. It is a pity, certainly, that our open declaration of confidence in a certain therapeutic law should excite the animosity of colleagues with whom we agree on every other point of the vast field of medical practice, or if we do not agree yet all agree to differ amicably. It is not very clear why the attempt to make therapeutics rational should be the red rag that puts the medical bull in a



fury. Time, the great effacer of scientific wraths, will no doubt extinguish this manifestation of the *odium medicum* as it has extinguished others.\*

The "physiological school," as it is termed, has distinguished itself by the minute and careful manner in which it has investigated diseases, and tracked them throughout their course, from their beginnings, through their periods of increment and decline, following them with all the aids and appliances of the highly developed and perfected machinery invented for this purpose by ingenious scientists, through all their phases in every tissue, organ, secretion, and function. It has accumulated in systematic treatises and monographs a wonderful collection of morbid phenomena and processes, presenting striking and faithful pictures of all diseases. The followers of Hahnemann, the cultivators of rational therapeutics, have done and are doing precisely the same for medicines. They have accumulated a vast array of faithful medicinal morbid pictures by their provings of the effects of medicines on the healthy human body.† The *Materia*

\* Perhaps the wrath displayed against their colleagues is sometimes dictated by a less exalted motive than scientific zeal. The prizes and honours of the profession being limited in number, it shows worldly wisdom on the part of the actual holders of the medical loaves and fishes to restrict the number of possible competitors—*beati possidentes!* So the orthodox monopolists give the homœopathic dog a bad name, and have reason to be satisfied with the result. But possibly the followers of Hahnemann have their compensations in other directions. *Quanto più la volpe è maladetta, tanto maggior preda fa.*

† It is physiological experiment which makes the practice of homœopathy possible. Its *Materia Medica* is a record of the agonies endured by those who have been subjected to the torture of drug-proving. In every case, except the accidental poisonings, the victims voluntarily submitted to the martyrdom for the good of science. They had vivisection without anæsthetics performed on them with their own consent. With self-denying courage they laid themselves on the rack and gave the signal for the physiologist to turn the screws, watch the torments of their quivering bodies, and record their shrieks and groans in his note-book. The minutely detailed sufferings of our self-immolating provers, arranged in methodical order, constitute the armoury whence we derive our defensive weapons against the inroads of fell disease. The man who daily consults this bulky record of aches and pains, of sharp and sudden agony, and "lingering sufferance" long drawn out, can scarcely feel a very lively horror at the physiological experiments carried on on animals—mostly under chloroform—for scientific purposes. Pain inflicted on dumb creatures for no useful purpose or only for our own amusement is not justifiable, but many physiological dis-



*Medica* of homœopathy is the therapeutic pendant of the results of the labours of the physiological school in reference to diseases. It is, in fact, the therapeutic complement of the latter. The rational medicine of the future is the application of the work of the physiological provers of medicines to that of the physiological investigators of diseases. The therapeia of the latter is a blank, pure nihilism. In order to make it a real therapeia, the physiological school must do for medicines what they have done for diseases, or avail themselves of the work already done in this direction by Hahnemann's followers, and complete it where it is still defective. When they are convinced of the necessity of this—and the work of Jörg, Harley, Ringer, and some others in this direction, shows that they are commencing to be so convinced—then they will cease to travel through therapeutics from Dan to Beersheba and cry "all is barren!" On the contrary, they will then be able to found a real and helpful medical art. The physiological

coveries of importance to human health and life have been made by experiments more or less painful on some animals. And yet, while the former scarcely evokes a comment from those hyper-sensitive humanitarians who love to hear themselves spout at public meetings, the latter has roused these feeling creatures into a fury of hatred towards physiologists and the medical profession generally as the aiders and abettors of physiologists, as it is the doctors, they allege, who profit by the wicked works of the vivisectionists.

After howling themselves hoarse at some public meeting denouncing the shocking cruelty of the vivisecting doctors, we can imagine the self-satisfied inveighers against cruelty to animals, after mutual congratulations on the success of their meeting (undisturbed by medical students), separating, one to have a "splendid run" with Her Majesty's staghounds, where he enjoys the exciting spectacle of a tame deer torn to pieces by a pack of hounds; another to engage in a grand battue of pheasants, hares and rabbits, in some friend's well-preserved coverts, where some thousand head of game are killed outright and probably an equal number get off wounded to die a lingering death of prolonged agony; another to play a lively salmon for an hour or two at the end of his line until the fish, exhausted by his desperate struggles, is drawn towards the bank and dexterously "gaffed;" another to assist at a "tournament of doves" at Hurlingham; another to chase a fox or a hare for hours till the agonised creature, incapable of further flight, is overtaken and rent to shreds by the dogs. It is wonderful to observe the curious optical effect of a beam in our own eye, how it magnifies a mote in our neighbour's eye. Thus we

"Compound for sins we are inclin'd to  
By damning those we have no mind to."



school and Hahnemann's followers are working in parallel lines. True medicine will result from the combined labours of both. Each needs the other's help. When the prejudices that at present prevail among the adherents of the physiological school are extinguished, they will see, as we have long seen, that the only possible way of creating a real art of medicine, is to join hand in hand with the cultivators of rational therapeutics. The most profound knowledge of disease is but a barren science if not complemented by an equally profound knowledge of the weapons with which disease is to be combated. That this fraternal and mutually respectful alliance between the zealous students of diseases and medicines will soon be consummated can hardly be doubted.

“ Then let us pray that come it may,  
 As come it will for a' that,  
 \* \* \* \* \*  
 That man to man the world o'er  
 Shall brithers be for a' that.”



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