

**Jenner or Christ? : an appreciation of the Jennerian legend made in 1903, the jubilee year of compulsory vaccination in England / by a Christian.**

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# JENNER OR CHRIST?

BY

A CHRISTIAN

An Appreciation of  
the JENNERIAN LEGEND made in 1903,  
the JUBILEE YEAR of Compulsory  
Vaccination in England

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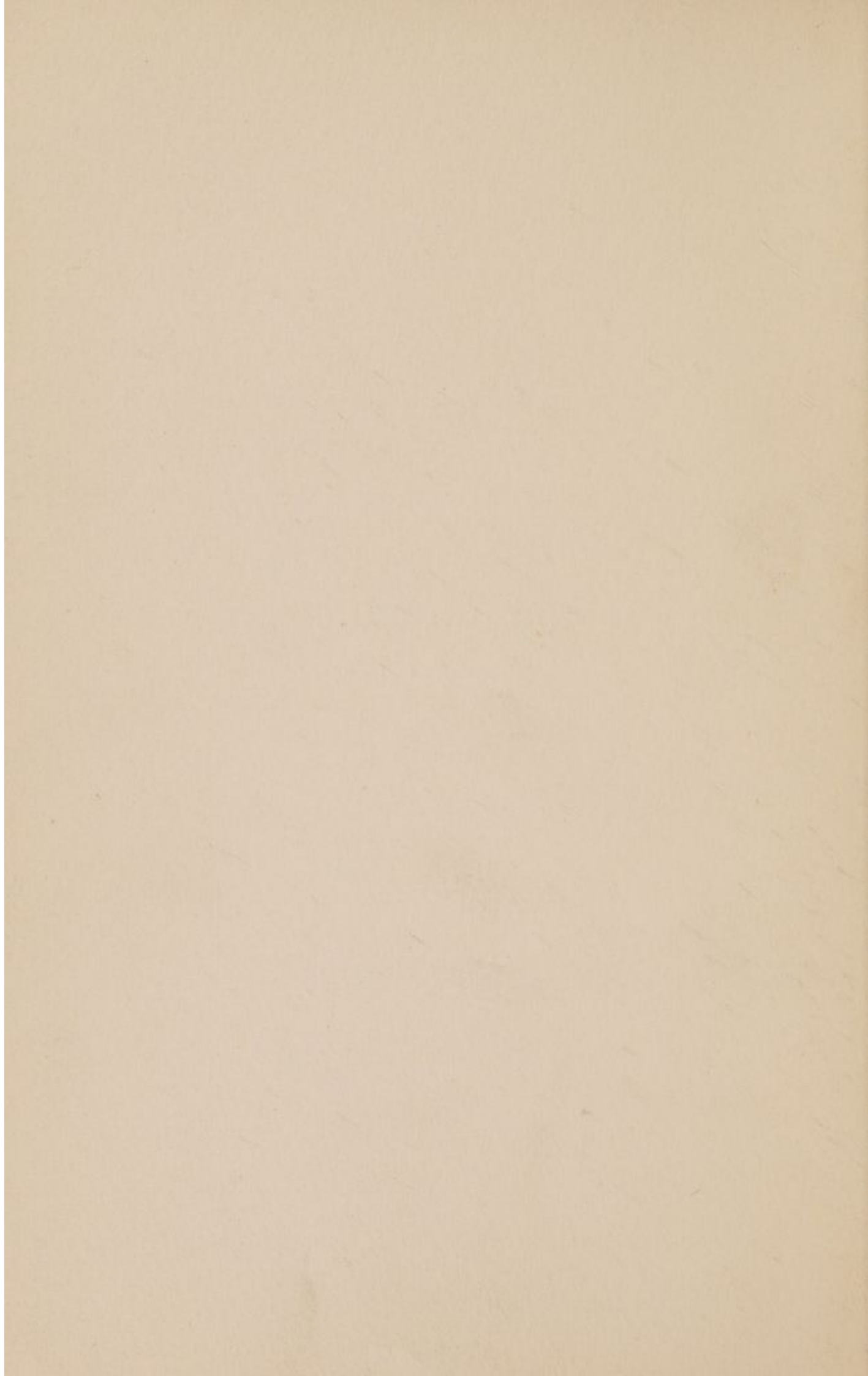
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## ERRATA.

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- p. 17, l. 18.—For “operattas” read “operettas.”  
p. 19, l. 15 — ,, “above” read “below.”  
p. 21, l. 8 — ,, “death-rate” read “deaths.”  
p. 48, l. 30 — ,, “alternative” read “alterative.”  
p. 95, l. 3 — ,, “Rhodesia” read “Orange River Colony.”  
p. 98, l. 17 — ,, “deaths” read “deaths per million.”

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- 1. "The 'operative' and 'operative'"
- 2. "The 'state' and 'labor'"
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## A P O L O G I A

*I was baptised and confirmed in the Church of Christ:—*

*I was vaccinated and revaccinated at the shrine of Jenner.*

*Finding, later in life, that the two creeds were perfectly incompatible, I have discarded the latter, my enquiries into the claims and tenets of which have led to my publishing the following remarks, which very likely nobody will read.*

*That I cannot help:—dixi, et salvavi animam meam!*

---

We have now had fifty years of compulsory vaccination.

With what result?

Smallpox is where it was, while most other illnesses have increased to an alarming extent.

The poor man hates and distrusts it more and more, and those interested are urging the Government to exact more compulsion.

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A wonderful and horrible thing is committed in the land;

The prophets prophesy falsely, and the priests bear rule by their means; and my people love to have it so: and what will ye do in the end thereof?

## JENNER OR CHRIST?

'HAS it ever been found that the whole world has conspired together to believe a lie'? asks Dr. South, and answers unhesitatingly 'yes.' The history of the world's progress is the history of discarding fallacies, and what is an article of faith in one generation is subsequently treated to scornful amusement.

To keep to medical matters, I would point out that from 1058 to 1714 scrofula was cured by the King's touch. Charles the Second touched 92,107 persons, and, according to his physician Wiseman, nearly all were cured.

Stone was cured so effectually by a secret known only to the discoverer, Joanna Stephens, that in 1739 the Archbishop of Canterbury and other wise men of the period, feeling that it was a national question, subscribed the £5000 demanded for the surrender of the secret: the medicine that had for years worked such wonderful cures consisted of snails and egg-shells.

For years it was believed that health could only be maintained by blood-letting twice a year, and this practice was vigorously pursued. The whole of the medical profession as well as the educated lay world subscribed to and preached these creeds. Where are they now? Does any one believe a word of them?

To come to our own times. Till quite lately the whole medical profession taught that the only chance for a consumptive patient was to be kept in a temperature of 70°, and carefully debarred from ever breathing a breath of fresh air. That creed is now entirely reversed.

I quote these cases to show that so far from medical opinion having proved a guarantee of truth, the doctors seem to have always blindly followed any fashion that was in vogue until some reformer arose.

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Before the divine law of cleanliness was fully understood, men suffered from congregating too thickly in towns, and being conditioned by dirty surroundings. This gave rise to sundry dirt diseases, of which smallpox seems to have been most dreaded on account of its liability to disfigure. It is not, and never was, particularly fatal nor specially contagious, but it marked the face, and possibly caused blindness; and as no cure for it was known, and its treatment was childishly wrong, it came to be looked upon as the national scourge. The theory was then formulated that it was an inevitable evil, that it was always lurking and waiting to pounce upon every man who had not the special protection of having already got through it; which experience gave him complete exemption for the future.

Hence inoculation was hailed as salvation and practised by the whole medical profession.

As dirt was the condition, if not the cause of this disease, one would have thought that it required very little discernment to realise that, if these conditions were removed, the disease would disappear.

And with the advent of sanitation the other diseases did disappear. The Plague, the Black Death, Gaol-fever, Typhus, Scurvy, etc., one by one all disappeared. We no longer fear these, not even Cholera, in this country: and yet smallpox remains. And smallpox is the only one of all these for which we have a specific. The former specific—inoculation—was very soon found to be the cause of the continuance of smallpox, and was made a penal offence.

What is keeping it up now?

Smallpox is the only disease for which we have a specific prophylactic or preventive almost universally applied: and yet, the disease is nearly four times as deadly as it was before the prophylactic was applied: in pre-vaccination times from 14 to 18 per cent. of those attacked died: now from 50 to 60 of the unvaccinated attacked die! Such, at least, is the statement of the vaccination authorities.

It is the prophylactic—vaccination—that I want to consider; and it is a most difficult matter to treat of, for it holds a position that nothing else has ever held since the world began.

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First of all, the great majority of people refuse to discuss it; apparently they are afraid of having their highest faith tampered with; they will discuss any other question, even the doctrines of Christianity, but not vaccination: it is above discussion. The public press refuses its pages to discussion of this one subject only: thus the world generally can know very little about it. Anything in praise of it is, however, gladly printed and promulgated, and this cry of 'Great is Vaccinia of the Jennerians'—the only argument that has ever been adduced in its favour,—except fictitious figures and abusive language—has now been shouted for a hundred years, with noise enough to drown the voice of the critics, though the critics are the only people who have studied the question or who profess to know anything about it.

It is entirely above reason, and logic, and religion, and law.

The Jennerians tell us that it has diminished smallpox, and in the same breath that smallpox is now four times as fatal as it was before Jenner was invented.

They tell you that its success is proved by its failure, for vaccination having failed, revaccination must be applied.

They tell you that a vaccinated man is perfectly free from

all liability to catch smallpox, and that therefore he must compel his neighbour to give himself the same immunity, lest he who cannot catch smallpox should catch smallpox.

For fifty years they put in prison men who refused to do what it is now illegal to do, and they now are prepared to send to prison men who do what they were formerly imprisoned for not doing.

They think they are doing the behests of their god Jenner, and they are really doing the one thing that he said was perfectly useless. They do not know what they are doing, nor profess to know. All they do know is that they 'vaccinate'; what that is nobody pretends to know.

As long as the poisonous pus out of the sloughing sore of a man or beast, which nature under Divine guidance is trying to throw off from the poor victim, is put into your pure blood and you are blood-poisoned, their law is satisfied.

This blatant buffoonery represents the rite called vaccination, and this is the sort of nonsense that intelligent, honest, Christian men are not only asked to swallow as medical science, but are fined or imprisoned if they refuse the draught.

The whole thing from beginning to end is the most outrageous blasphemy against God, against nature, and against reason that ever entered the heart of man. Historically it is one tissue of lies, logically it is self-destructive, morally it is below the level of the lowest paganism, scientifically it is pure nonsense.

God's law is embodied in a system which we call Nature; if we outrage nature we are committing blasphemy. Nature says that the filth of wounds shall be thrown off from the body: we outrage nature by arresting and inverting this operation, and wilfully putting nature's refuse into a healthy body. The art of medicine is assisting nature by such artifice as our skill has devised; vaccination is *anti-doctoring*. Let us do evil that good may come, is its text.

We have most of us been taught in our childhood that we were made 'in the image of God'; that 'God saw that it was very good'; that as cleanliness was a doctrine of the Mosaic law, so was purity of the teaching of Christ. In His creed there are also allusions to liberty and loving one's enemies, and to treatment of the poor; there are also references to 'a millstone,' and 'one of these little ones,' which suggest themselves.

But all this is nonsense; God was entirely mistaken. He created man a thing 'more dangerous than a mad dog,' 'an open sewer,' 'a centre of contagion,'—until Jenner—Jenner is the real Messiah who was sent to complete the imperfect work. What baptism is to the soul, vaccination is to the body. No man is at liberty to follow his own conscience if it clashes with Jennerianism. Loving your enemies! It is your duty to boycott and excommunicate the whole human race if they deny Jenner. And though you cannot touch the rich, you are bound to insult and imprison the poor who refuse to bow the knee. The poor must be sacrificed that the rich may be saved.

This is the openly avowed faith of the Jennerian, and if it does not clash with Christianity, it is because it entirely supersedes it, and is on a far higher plane. They have their Inquisition—the Imperial Vaccination League. This is a chamber organised by a lady—Mrs. Garrett Anderson—her henchmen are (or have been) the Primate, the Bishop of Stepney, and other notabilities. This highly Christian institution is formed avowedly to bully and constrain the consciences of the weaker brethren. Drunkenness is said to be 'ten times worse in a woman.' So it was inevitable that in this diabolical ecstasy a woman should 'go one better.' The scheme of this amiable combination is to force their views by a system of universal boycotting. The unvaccinated man is to be hounded to his grave or to the workhouse. He is to be treated as a leper at every stage of his career. He

is to be refused education, admission to any of the services, or any mercantile employment. Thus he must either starve or be supported by the rates.

Boycotting, it should be remembered, however, is two-edged; some day we may see in advertisements 'no vaccinated person need apply.' It would be quite reasonable for a man to protect himself by refusing to engage a diseased person.

The Children's Holiday Fund Society made vaccination a condition of their charity this year. This led to a very great reduction of numbers, and is a magnificent specimen of what Jennerian boycotting can lead to.

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The inquisitors of old, when they burnt their conscientious objector's body, had at any rate the excuse of believing, or pretending to believe, that they were saving his soul. The Jennerian has no such excuse, all he is thinking of is his own worthless body.

In the imposition of this obligation, the clergy send their most respectable parishioners to gaol without a qualm: the magistrates insult and browbeat the objector, and constantly break the law in refusing him the exemption that he has a legal right to. Masters and mistresses, who are otherwise gentlemen and ladies, compel vaccination on their servants, or dismiss them. Employers of labour do the same with their employees, as well as all government officials.

This is the moral and political aspect of the question, and it certainly shows a conviction much stronger than any religious feeling. It says in effect: there is one evil in this world of such overwhelming dimensions, as to justify any steps taken in self-defence, and to override entirely all ordinary moral obligations, and that evil is smallpox. And there is one and one only preventive of it, and that is vaccination. This is the axiom, and tilting against it is

hopeless. This creed seems to daze men's intellect as it stifles their conscience.

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The Royal Commission, which sat for seven years to enquire whether vaccination had any *locus standi*, make the following statement with the charming *naïveté* of five years old: 'The question we are now discussing must, of course, be argued on the hypothesis that vaccination affords protection against smallpox'!!! That is just it: the whole question must be conditioned by a *petitio principii*. It is tantamount to the judge's saying: 'Gentlemen of the jury, before trying the prisoner, we will assume, please, that he is guilty, and any evidence to the contrary we will consider as tainted.'

The net result of deliberations that began thus was what might have been expected. The Commission did not think it worth while to hear Dr. Vogt, who had made the statistics of vaccination throughout Europe the study of his life, nor did they take any notice of Mr. Biggs's very valuable statistical tables, either of which would have flooded with light the apparently impenetrable subject before them: but having listened patiently for seven long years to all the conventional twaddle on the advantages of vaccination, they summed up to the effect that *they thought they were on the whole inclined to think that probably vaccination was all right, but that they easily understood that others might equally reasonably think it all wrong.*

Under these circumstances they recommended that those who wished for it should have it forced upon them, and that those who conscientiously objected to it should be exempt from compulsion, such exemption to depend entirely upon the taste and fancy of Dogberry. And into his hands were placed the scales for weighing consciences. And a pretty scandal this weighing has been ever since.

*'While they promise them liberty, they themselves are the servants of corruption.'*

The Royal Commission seems to have been a sort of Mother's meeting, at which the presiding mother says: 'Oh no! we had better not hear that story; I don't think it is quite suitable for us!' There were on it, however, half-a-dozen *hommes sérieux*, men who wanted to sift the chaff; whether, had Bradlaugh lived, vaccination would by now have been a thing of the past, is a question.

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The position assigned to smallpox itself arises from profound ignorance. It is one of a set of diseases, and a very second-rate one at that. It is neither a very fatal, nor a very contagious disease, and one which no clean person is now the least likely to contract. Moreover, in years when it rages most, the death-rate is always particularly low, so that it might almost be called a benefaction.

In the last epidemic we might read in the papers, that there were some 372 cases of smallpox, and 3800 of fever in the London hospitals. Nobody cared two straws for the fevers which were going to kill ten times as many as smallpox, but then there is no vaccination for fevers, and it is only when vaccination comes in that the world is the least interested, just as it is omniscient.

#### BRISTOL'S DEATH-RATE.

Bristol's medical officer of health in his annual report issued yesterday, states that measles caused 411 deaths, a larger number than were due to smallpox, diphtheria, typhoid, and scarlet fever put together. Tuberculosis was responsible for 415 deaths. Bristol's death-rate was exactly the average of 76 large towns which are grouped for statistical purposes.

The official returns issued by the Metropolitan Asylums Board last night state that there are fifty-two smallpox sufferers in the hospitals of the Board, and 2740 fever patients.

Everyone *knows* that vaccination averts smallpox, and to doubt this is the national crime; hence, on this point, men's feelings and passions are instantly heated to white-heat, and that super-religious ecstasy which conditions the whole question.

Being an anti-vaccinationist—or, which is the same thing, one who has tried to learn something about it—I know that vaccination has as much to do with averting smallpox, as green cheese has to do with the changes of the moon. But that does not matter, for even granting that it has an effect, it still remains too bestial and wicked for a thinking man to use. As Cobbett said on its first introduction: 'Even if it were true, I should object to it on the score of its beastliness. Some things are surely more hideous than death, and this is one of them.'

But whether it has ever averted smallpox is a mere matter of history. It was born of fiction, and has been fed on lies ever since its birth.

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Its history is this. The rustic population of certain parts of England had noticed that milkmaids did not suffer from smallpox, in consequence of catching a disease from cows which they called cowpox. This belief gave rise to the idea, that by deliberately contracting the cow disease a man would be safeguarded against smallpox, and from the name 'pox' being common to both, arose the absolutely false belief that cowpox was mild smallpox. As has been pointed out, they have as much to do with each other as a horse-chestnut with a chestnut horse.

Faith was lately defined by a small school-girl as 'believing what we know cannot possibly be true': and she might have added, 'and refusing to surrender that belief, even after it is shown to be demonstrably false.' Faith enters in where reason dare not follow, thus its tenets cannot be

criticised. We know, for instance, that the sun shining on a fire puts it out: that the weather depends upon the moon; that a potato carried in the pocket averts rheumatism, and so on. None of these things are scientifically true, but that makes no difference to the strength of the belief. People have 'noticed' that the sun puts out the fire, and that is enough for them.

Such beliefs hurt no one, but a fallacious faith if acted upon to the detriment of the human race, must be a most momentous evil.

And such a faith is vaccination. No scientific man has ever examined into its action without finding it detrimental, but that makes no sort of difference to the Faith which nurtures it.

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Amongst the many fallacies current in the world, only one seems at all comparable to vaccination, and that is bearing-reins. Nine-tenths of the people of England believe (and they ought to know something about horses, and did, until they gave up horses and took to killing one another with motor cars), that a horse is saved from falling down by having its head tied to its tail. The exact opposite is the fact; the bearing-rein *must* prevent a horse's saving itself if it stumbles. Any one who cares to try the effect of moving about, or say skating, or jumping a hurdle, with his hands tied to his waist, will realise how utterly helpless he is with his 'balance-pole' gone. This is the condition of the horse with its head tied up.

What the bearing-rein really does is to inflict constant and cruel pain to the horse, to ensure its falling hopelessly if it stumbles, to bend its wind-pipe till it is ruined, and to curtail its life by about five years, and in the case of draught horses, to diminish largely their power of drawing. The veterinary world knows this well enough, and so, thank

goodness! do cab and omnibus drivers. But all the coachmen and carters think it right, therefore it must be so. I have never spoken to a carter on the subject, who has not argued that if he took off the bearing-rein the horse would fall down!

This evil is at any rate limited to damage done to the individual horse, and does not transmit tainted blood to future generations.

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Having 'noticed' this immunity of milkmaids, an old farmer, Benjamin Jesty, cowpoxed his family—though not himself. History does not record the results, for no interest was excited till a man of 'patient scientific research,' Edward Jenner, stole the old man's patent without acknowledgment, and 'boomed' it for his own advantage. He very soon, however, had to acknowledge that it was all humbug, he therefore chose a still filthier thing called horse-grease, and said this was the real elixir of life.

Here Jenner might well end, for this filth was too filthy even for that filthy age, and people refused to have anything to do with it. But at this point Jenner appears in his true colours, as the greatest impostor the world has ever seen. Rather than miss his chance he gave up his faith, and henceforth preached what he knew was a false faith. He then proceeded to make on people experiments of such transparent imposture that it seems incredible that anyone can have been taken in by them. But the world swallowed it.

There is something pathetic in observing a whole nation in panic terror of smallpox, and having learned the falseness of their one safeguard, inoculation, clutching at any straw, even at one that the inventor pronounced rotten. It would be wholly pathetic, if it were not so wholly unreasoning, and wicked.

After half a dozen experiments the great *pronunciamento* was thundered forth: 'Whoever has had cowpox is for ever after perfectly incapable of contracting smallpox.'

This from the man who had just stated that it was all nonsense seems incredible at first sight. But it must be borne in mind that in the Jennerian system there is no law of identity, that effect precedes cause, etc., etc.

After a few weeks' observation this prophet was able dogmatically to state what was the life-long effect of his cure.

Here was the philosopher's stone gratis for all the world! And all the world accepted it. And the doctors all began cowpoxing—and Jennerianism was the established religion. The doctors went on cowpoxing, and the cowpoxed went on having smallpox or horrible sequels to the cowpox—hitherto unknown diseases—and Jenner said it was a lie: as it has gone on ever since. And when the doctors were driven one by one to write to Jenner and tell him it was all humbug or worse than humbug, he entreated them to hold their tongues, or called them 'scurrilous liars,' or crushed them by 'silent disdain.'

Then suddenly a bright thought struck him. He promulgated a new doctrine, 'there is a real cowpox and there is a spurious cowpox': failures were due to the latter.

So far we have three doctrines.

- i. Horse-grease is the only cure—cowpox is useless.
- ii. Cowpox is the only cure, and is a life-long protection.
- iii. There is a real and there is a spurious cowpox.

This last contention is of course unanswerable, for if after vaccination you get smallpox, it only proves that the vaccination was spurious.

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The whole theory was founded on the belief that if you have once had smallpox you cannot have it a second time: and that cowpox was mild smallpox.

The first assumption is a fallacy. Naturally the chances are against having any given illness a second time, but Dr. Vogt after examining the statistics of the whole of Europe concludes that a previous attack of smallpox gives susceptibility to a second attack, rather than immunity: and as to the second point, scientific men are agreed that whatever cowpox is, it assuredly has no connection with smallpox. But granting that it has, how is it that if it protects from smallpox, it does not protect from itself? If it can avert the thunderstorm, how is it that it has no sort of power against the passing shower? Therefore revaccination is a contradiction in itself—as Jenner himself implied: and it is for revaccination that the Imperial Vaccination League is thirsting and clamouring. Every one knows of course that revaccination can take place any number of times, which in itself totally disproves the value of vaccination.

Again, if a man's vaccination does not 'take,' which ought to prove exactly what he wants to prove, namely that he is proof, he is most distressed, and has another trial of it: and if it does 'take' at last, thus proving that he is *not* proof, he is perfectly happy.

How can an ordinary intelligence worship this Protean god, whose success is failure and whose failure is success?

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And the incidence is adjudged as follows. You are either vaccinated or not, and you either get smallpox or not: and smallpox is either mild, severe, or fatal.

If unvaccinated you get smallpox, it is only natural: if you have it mildly, you are very lucky: if severely, it is no wonder: if fatally, 'There you are; we told you so.' If vaccinated you get it mildly, you may thank your vaccination: if severely, 'without vaccination you would have died': if you die . . . 'well, there was something wrong some-

where,' the vaccination was either too long ago or too recent, or there was a fault in the lymph. What is never proved is that vaccination has nothing whatever to do with it.

Would that it never had anything to do with it! But who will dare to say that it has not when babies die, as they constantly do, of mild smallpox, *which never kills*, just after being vaccinated?

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The returns issued from the Hospitals to prove its preventive efficacy are of this sort:

SMALLPOX DEATHS

Vaccinated 10    Unvaccinated 72    No statement 204.

The vaccinated public read this with a feeling of intense satisfaction, as tending to prove how safe they are. It does not seem to occur to them that such a statement is an insult to their understanding, and may prove anything, as the 'no statement' set may be put on either side. Furthermore they do not realise that as all pretence of *no vaccinated people* dying of smallpox has long ago been given up, the whole case falls to pieces. If *one* vaccinated person can die of smallpox, the whole case has gone. Any one person can be that one.

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The vaccinationist statement is roughly this: since vaccination has been introduced smallpox has visibly diminished. Granting the fact, it is surely childish to pretend that a *post hoc* is necessarily a *propter hoc*. And if 'railway-trains' is substituted for 'vaccination,' the argument remains the same. As a matter of fact trains have had much more to do with the diminution of smallpox than vaccination; but that may pass.

When critically analysed their case comes to something like this in every instance: the notable decline of smallpox which occurred between the years 1760 and 1820 is due to Jenner's having vaccinated six people in 1796; or the almost total disappearance of smallpox from Germany since 1873, is due to their strict vaccination laws, which came into force in 1834.

Surely the broad question is this: If whenever and wherever vaccination has been thoroughly carried out, then and there smallpox has invariably declined, vaccination is obviously the cause of the decline. Unfortunately the opposite is the case, hence has arisen a total disbelief in vaccination, in those who have cared to notice.

Large populations, which have been through a severe epidemic of smallpox and have been able to note the effects of vaccination for good or evil, ought to be the best judges of the question. Such are amongst others the towns of Leicester and Gloucester. Learning by experience that vaccination had, if any, only bad results, they have unani- mously rejected it. Are we to suppose that hundreds of thousands of educated and experienced people are mad, or that they want to court disaster? In the case of these two towns the movement is headed by their doctors. For thirty years Leicester has had practically no vaccination and no smallpox, and their infant death-roll is the smallest in the kingdom. 'Wait till smallpox does come, and then . . .,' say the Jennerians. Well, they have been waiting for thirty years, during which smallpox has knocked at their doors forty or fifty times, only to be turned out as quickly as it came in. It seems impossible to wish for a more crucial test than Leicester affords. Naturally the Jennerians say very little about it, but they are never tired of pointing in triumph to Gloucester, as showing what want of vaccination leads to. Their story in this case as in all others is absolute fiction. The vaccinated started the late epidemic in Gloucester, as

they invariably do, and the disease, when once started, did not pay the slightest respect to vaccination. In like manner they point in triumph to the well-vaccinated Prussian army escaping, and the unvaccinated French army being decimated by smallpox after the Franco-Prussian war. In vain you show them from the official registers that every single French soldier was revaccinated before entering on the campaign: they go on repeating their statement and presumably believing it. You cannot argue with people who prefer to believe a lie. As a lady put it to me, 'If an angel from heaven told me it was untrue, I should still believe it.' Or as that amiable Christian lady, Mrs. Garrett Anderson, says, 'We must not be too fastidious as to the statistics not being strictly true in all directions.'

If true statistics are beside the mark, and only invented ones are to be reckoned with, the whole thing is topsyturvydom from beginning to end. The philosophy of Mr. Gilbert's operattas is the wisdom of Solomon compared with Jennerianism.

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Here are a few of the 'statistics' on which their faith is founded.

Dr. W. B. Carpenter, one of the chief vaccination prophets, stated in the *Spectator* of April 1881, 'that a hundred years ago the smallpox mortality of London alone, with its then population of under a million, was often greater in a six months' epidemic, than that of the twenty millions of England and Wales now is in any whole year.'

The facts are as follows: The very highest smallpox mortality in the eighteenth century in a year was 3,992 in 1772, while in 1871 it was 7,912 in London, and in England and Wales it was 23,000.

Another prophet, Mr. Ernest Hart, editor of the *British Medical Journal*, in his work 'The Truth about Vaccination,' states that in the 40 years, 1728-57 and 1771-80, the average

annual smallpox mortality in London was about 18,000 per million living. The actual average mortality was, as a matter of fact, a little over 2,000.

Another of his statements in the same work is that at the town of Ceara in Brazil, 40,000 deaths from smallpox occurred in 1878-9, out of a population of 70,000. In one cemetery from August 1878 to June 1879, 27,064 victims of smallpox had been buried. *Fact.*—The total population of Ceara was only 20,000 at this date, and still exists.

The medical officer of health at Birmingham admits himself that when a patient dies of vaccination, he returns it as a death from something else, making no mention of vaccination.

And so on for ever. Deliberate misstatements would be called 'lies' amongst Christians. Jennerians are not 'too fastidious.'

Any creed that entails a total loss of moral sense must be a false one. This creed entails lying, coercion, and defilement. And as to lawlessness, there is no pretence of any justice.

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We are officially told that 'no risk of any injurious effects from vaccination need be feared.'

The Registrar-General gives the deaths of 889 children from vaccination between the years 1881-1898, an average of nearly 52 a year. Amongst Christians this would be murder. The Jennerians say quite openly that a few may be sacrificed for the benefit of the many. I commend the morality of this to the ecclesiastical authorities of the I. V. League. It would disgrace a Pagan creed; and King Thebaw, who only impaled 36 women per annum to produce rain, and Herod, who for high political motives, killed off one generation of babies, might laugh at us. We sacrifice one baby per week at the shrine of Jenner. The Jennerians, however, realising how fatal these returns are, have arranged that in future the Registrar-General shall say nothing about

it. All vaccination-murders must now be looked for under the euphemistic heading 'chicken-pox,' which is of course a fatal disease only *pro hac vice*.

Another favourite Jennerian dogma is, 'If everyone were vaccinated, smallpox would disappear.' This implies that if there were no unvaccinated, there could be no smallpox. Greater nonsense than this could hardly be formulated. It means that A and B are liable to get smallpox because C and D are not vaccinated. It implies that the unvaccinated originate the disease, which is untrue: *the vaccinated invariably originate smallpox epidemics*.

After all, prophecy without inspiration is only conjecture. It is easy to say what would be.

But they claim to have their proof in Germany. I have mentioned above the result of thirty years' strict vaccination in Prussia, which is what they mean by Germany. Since 1871 Prussia has spent millions on improving sanitation and has applied most stringent police control to the enforcement of isolation and notification of all contagious diseases, with the natural result of nearly exterminating them.

We have the equally crucial instance of Leicester, from which diseases, including smallpox, have been banished by stringent measures of sanitation, together with total abolition of vaccination. It seems, moreover, idiotic to claim that the implanting of a disease in every man—for vaccination, they say, is smallpox—is the way to annihilate that disease, especially as it is at variance with all scientific knowledge. Does having influenza save a man from having it again?

We always learn from the newspapers that 'a tramp' introduced smallpox, not 'an unvaccinated tramp,' but a tramp. That tacitly implies an unvaccinated man. It should be noted that nearly all tramps are old soldiers and therefore revaccinated men.

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At the risk of being thought over-fastidious I append

some official statistics, which will enable any one at a glance to gauge the value of vaccination as a prophylactic.

Vaccination was made compulsory in 1853. More rigidly enforced in 1867. The result was that by 1869 the whole of England was almost perfectly protected against smallpox. Between 1853 and 1873 we had three epidemics of smallpox.

1st.	1857-58-59,	.	.	deaths	14,244.
2nd.	1863-64-65,	.	.	„	20,059.
3rd.	1870-71-72,	.	.	„	44,840.

Increase of population between the first and second epidemic 7 per cent. Increase of smallpox nearly 50 per cent. Between the second and third epidemic, increase of population 10 per cent. Increase of smallpox 120 per cent.

Deaths from smallpox in the first ten years of compulsion, 33,515.

Deaths from smallpox in the second ten years of compulsion, 70,458.

#### PRUSSIA.

Vaccination and revaccination were made compulsory in 1834, and rigidly enforced under police supervision—ten wounds on each arm. After thirty-four years of this protection came the epidemic of 1871-72. Deaths from smallpox, 124,948.

#### BAVARIA.

Bavaria was held up as the pattern state in the matter of vaccination. In the 1871 epidemic there were 4,784 deaths from smallpox, of which 3,994 were vaccinated.

And so on, of all countries and communities.

#### LEICESTER *v.* ARMY AND NAVY.

After the 1871 epidemic the Army and Navy were revaccinated more rigidly than ever: Leicester gave up vaccination as a failure after their terrible losses as a well-vaccinated community in 1872.

The following is the result in twenty years, taking the equivalent ages of Leicester.

Army death-rate (1873-94) per million,	. 37.
Navy                   "                   "                   "	. 36.8.
Leicester (ages 15 to 45)                   "	. 14.4.

Since then Leicester has had practically no vaccination and no smallpox.

#### LEICESTER SMALLPOX DEATH-RATE.

YEAR	1884	1885	1886	1887	1888	1889	1890	1891	1892	1893	1894	1895
Deaths, . . .	0	0	0	0	0	0	0	0	6	15	0	0

Their infant mortality has in the same years become the smallest in the kingdom.

In the London smallpox hospitals the number of vaccinated cases admitted increases progressively every year.

In every epidemic the vaccinated always sicken first, and in most cases many more vaccinated die than unvaccinated. In the small epidemic of smallpox in Sheffield in 1892-93 all who died were vaccinated; one was revaccinated, and died at twenty-eight; all the unvaccinated recovered. Of those quarantined only two developed smallpox, and one of these was a girl of twelve, revaccinated in 1887.

In 1887-8 Sheffield was one of the most insanitary towns in the Empire. Smallpox was manufactured on the spot. No other town was in so bad a case, and only three large towns in the country suffered a tithe of the mortality from smallpox in that year.

The total deaths in England in 1888 were 1,026: 409 in Sheffield; 52 in Preston; 48 in Caistor; 47 in Bristol and Clifton; 34 in Ashton-under-Lyne; 30 in Chesterfield; the remaining 406 deaths were spread over the whole country. In towns where there is little or no vaccination, such as

Leicester, Keighley, Dewsbury, Halifax, Oldham, Blackburn, and Gloucester, there was no smallpox at all.

In 1890 the Asylums Board reported 26 admissions for smallpox: 5 were unvaccinated, of whom none died; 19 were vaccinated, of whom 1 died; 2 were revaccinated, of whom both died.

Dr. Seaton stated to the Select Committee of the House of Commons that in Mold, population 13,834, 'all the children born and remaining in Mold had been successfully vaccinated, from 1853 to 1871.' In the smallpox epidemic of 1871-72, no less than 50 of these successfully vaccinated ones died of smallpox, a rate of 3,614 per million. In Leicester, population 150,000, out of 1,200 births only 23 were vaccinated. In their epidemic, 1892, there were only 146 cases and 21 deaths.

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Surely any man can see for himself, even without the supposed superior advantages of a surgeon, that the maximum of vaccination has been followed by the maximum of smallpox. Never before nor since has the English nation been so perfectly protected as in 1871, and at once occurs the most fatal epidemic on record. Since then, vaccination has been largely given up, and smallpox has largely decreased, especially in the one place in which it has been entirely given up.

And we are fined and imprisoned for refusing to shut our eyes to all facts and figures and to stultify such wits and conscience as God may have given us. And we are told not to look at home (where there is a registrar-general as well as a Mr. Hart) but to look at India, Iceland, tribes in the middle of Africa, Germany—anything except what lies before our noses and can be verified.

If vaccination is all right, what need of all the lying and concealment and compulsion that prop it up?

The only crime of the anti-vaccinator is that he knows something about it, which his persecutors do not. And any man who does learn anything about it *must* become an anti-vaccinator. And anybody can learn nearly all about it with a few hours' reading.

Mr. Walter Long, however, says that the more he reads about vaccination the more he is convinced of its efficacy. It would be interesting to know what he does read: probably the works of Mr. Ernest Hart and Dr. Carpenter.

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So far I have only pointed at what vaccination does *not* do. What it does do is perfectly awful to contemplate. And it is this which makes the anti-vaccination case so strong. If it only failed in its avowed purpose, it would not matter. But there is an awful question to ask, and only one answer to it.

Why is it that the whole human race in civilised countries is rapidly degenerating?

Sir John Gorst said lately: 'The British nation is advancing fast towards physical degeneration, leading, of course, to general degeneration.'

At a meeting of the London School Nurses' Society—

Lady Jeune thought that anyone who had visited the schools must have seen how necessary it was that some elementary care should be taken of the children's health. Delicate eyes and bad teeth should particularly be looked to if these little ones were to grow up with strong constitutions. At present they could only work on the fringe; but she hoped that their operations would soon be extended. Great numbers of children grew up small and delicate simply through bad digestions and want of proper care.

In Manchester in 1899, 8,000 out of 11,000 applicants for military service were rejected as physically unfit; in 1899, 1900, and 1901 the percentage fit for service was only 28 per cent.

Again,

The annual Conference of the British Dental Association was opened at the Royal Pavilion, Brighton, yesterday, when the members, about 300 in number, received a cordial official welcome from the Mayor (Mr. Alderman Buckwell). In his Presidential address, Mr. Walter Harrison (Brighton) said the archives of the Association bore favourable comparison with those of any other large scientific Society: 'Something attempted, something done' was marked upon every annual record, and they hoped the Brighton meeting would not fail in this respect. In Government Schools the eyes of the children were to some extent examined, and they would fail in their duty if they did not place the importance of the examination of the teeth prominently before the public. They were in a position to forcibly demonstrate the necessity of a Royal Commission to inquire into the condition of the teeth of poor children. Education reform had occupied the attention of our Senators for months, and surely a few hours ought not to be denied to inquire into one of the primary causes of natural physical degeneration. They were all familiar with the fact that an enormous number of recruits in the Army were rejected on account of defective teeth. Two years ago, during the late War, necessity compelled the appointment of the first dental surgeons, who were sent to the front, but the Navy had not yet benefited in this respect.

Sir W. Taylor concludes:—'Information is wanted as to the causes of physical deficiency and as to the best available methods of remedying defects and improving the natural health. Such an inquiry might fully be undertaken by a Commission, as to the composition of which the advice of the Colleges of Physicians and Surgeons might be asked. As the matter is one of the utmost importance from the recruiting point of view, it is suggested that the Secretary of State might take the initiative in the matter of getting the opinion of the Councils of the Colleges with regard to: (a) the necessity for such an inquiry; (b) the ground to be covered by a Commission if appointed; (c) composition of Commission.

## THE PHYSIQUE OF THE JAP.

We have heard much of late of the advance of Japan, more especially with regard to the intellectual development of its people. Their physical condition has, however, deteriorated. This is very unmistakably shown by the recruiting returns, and by the reports of the medical officers entrusted with the examination of the recruits. Year by year (says *The United Service Gazette*) the doctors state the conscripts who present themselves before the examining boards are of ever-increasing feebler constitution. For instance, during the last ten years the average weight of the recruits has decreased by about 5lb., and this, in view of the fact that the Japanese are naturally a small and light people, is a very serious diminution. One of the most eminent Japanese surgeons has, in fact, declared that in his opinion, eight or nine of every ten conscripts called are not really in every respect fit for military service. Last year, 1902, only about 44 per cent. could be passed by the doctors.

## VACCINATION IN JAPAN.

The Japanese have been called the monkeys of civilization; they imitate what they suppose to be 'correct' unreservedly. Consequently they have enacted a vaccination law of extreme stringency. Besides vaccination in the first year of infancy, it provides for at least two subsequent revaccinations at intervals of from five to seven years, so that by the time a child has reached its fifteenth year, it will have been vaccinated three times. In addition to this, during epidemics of smallpox, local authorities have power, when they deem it necessary, to order the vaccination of all the inhabitants of their districts, irrespective of the vaccination required by the law.—*The Vaccination Inquirer*. Feb. 1886.

Cancer has lately increased to such an alarming extent in Ireland that a Commission was appointed to enquire into it.

The High Court of the Ancient Order of Foresters was continued at the Albert Hall, Sheffield, yesterday. Returns were presented showing that the membership deaths from consumption averaged 1,200 a year. Deaths

from cancer were said to be quite as numerous. The question of taking special steps to deal with consumption was referred to the Southampton executive.

The National Society for the Prevention of Consumption publishes the following:

#### IMPORTANT FACTS.

1. Tuberculosis causes at the present time *one in every eight deaths in this country.*
2. *One half* of the deaths occurring between 25 and 35 years of age are due to Tuberculosis.
3. At this moment 200,000 persons in Great Britain are suffering from Tuberculosis.
4. Tuberculosis is *curable*, and much may be done to save future generations from its scourge by further knowledge on the subject being taught.
5. There is great reason to fear that many cases of the disease, especially in young children, are due to the consumption of raw milk containing tubercle germs.

Does this last sentence imply that mothers have only just lately been inspired with the idea of feeding their babies on milk, and that they will have to revert to feeding them on 'raw' water? or that cows have only lately taken to having tubercle germs? And if they have tubercle germs, how fitting it seems to put their disease-matter into babies' blood!

#### INFANT MORTALITY AND MILK.

*To the Editor of the 'Standard.'*

SIR,—Dr. Griffiths, at the meeting of the British Medical Association, held at Swansea, attributes the increased infant mortality in towns chiefly to the inferior quality of the milk which enters so largely into their food supply, and which is caused by the insanitary arrangements in the rural districts.

Why has milk suddenly become inferior? or why have country farms and dairies become more insanitary? Not from overcrowding. Is our sanitation really so inferior to that of our forefathers? It is so easy to make such a statement, but what does it mean?

## THE HIGH DEATH-RATE OF CHILDREN.

*To the Editor of the 'Standard.'*

SIR,—At the recent meeting of the British Medical Association at Swansea, the President pointed out that, while the general death-rate of the country had diminished, the death-rate of infants and young children had actually increased during the last few years. Many Medical Officers of Health, both in the Metropolis and the Provinces, have also recently called attention to the high death-rate among young children. Dr. Duffield states that while the infantile mortality per 1,000 births registered for the district of St. John's, Paddington, was, for the ten years 1857-1866, 146 males, and 108 females, yet for the decade 1892-1901 they were no less than 190 males and 185 females. Dr. Harris (Islington), commenting on the mortality following on measles—a disease which is the primary cause of a large number of deaths among young children—says that, unfortunately, in many cases no medical advice is called in until pneumonia has supervened. Improper feeding and diarrhoea are the causes of a large number of deaths of the infants, and ignorance and carelessness of mothers in other ways add greatly to the death-roll.

It will be seen that the high death-rate is, to a considerable extent, preventable, and we do not wonder that Dr. Duffield, remarking on the associated phenomena of a 'declining birth-rate' and an 'increasing infantile mortality,' says that 'the time has come when more efforts must be made to limit the waste of native-born children.' The efforts of many and various agencies will be needed to effect this important object, but I propose now only to show what can be done in this direction by the Local Government Board, without any new legislation or any expense to the Treasury. It is evident that a considerable number of deaths among young children would be prevented if only competent medical advice was called in at an early stage of the illness, whether occasioned by improper feeding or infection, or in any other way. Of course, where parents can afford, they should pay for their own doctor. If, however, they are unable to do this, the Guardians can give medical relief, and this will not (like ordinary relief) disfranchise the parent. As this

power of the Guardians is well known, it would hardly have been necessary for the Local Government Board to take any steps in the matter, but, unfortunately, a certain school of so-called Poor Law reformers has of late made a 'dead set' against medical relief, and in consequence in a number of Unions all medical relief is only given on loan in the first instance, and in St. Pancras, and, probably, some other Unions, applicants for medical relief are required to come before a Committee of Guardians. The practical effect of both these plans is largely to reduce the numbers in receipt of medical relief from the Guardians.

#### THE NATIONAL PHYSIQUE.

*To the Editor of the 'Standard.'*

SIR,—During the past few months a constant stream of letters has appeared in the public Press on the subject of the decadence of the national physique. The facts adduced by the many authorities who have thus stated their views have been painfully emphasised by the Report of the Royal Commission on Physical Training (Scotland), and more lately by the evidence of the various Military authorities given at the inquiry into the recent War. The remedies proposed consisted in the main of three plans:—1. Greater attention to physical education at school. 2. Volunteering. 3. National conscription.

The first proposal is now practically adopted, more or less thoroughly, by all public or private schools, and notably and with immense success, by the School Board authorities. The third plan is obviously an impracticable one for the present; while the second, owing to the latest War Office Regulations, is less available than in the past, and, as is shown by the latest Returns of volunteer recruiting, it may be feared will even become still less available in the future. We are thus left with practically our entire adult male population, more especially that of the middle class, thrown on its own resources for the development and retention of that physical strength upon which the future of the nation depends. It is for this state of affairs that a remedy has to be sought.

The essential features necessary in a remedy for this condition of affairs are that it be within the reach of all classes pecuniarily, and especially that it be immediately available in point of time. As representing the three oldest London Gymnastic Clubs, we claim that this remedy is to be found in the various amateur Gymnasia throughout the United Kingdom. In the gymnasium the strength of our manhood can be maintained where it already exists, can be built up where lacking. Physical development and recreation can be procured simultaneously, together with that voluntary discipline, the absence of which is so frequently apparent in the public streets, and which is so necessary during the first few years after a boy leaves school.

But what is now required is that our public men of every class should lend the weight of their influence to enforce on the attention of all grades of society the value of these gymnasia and the necessity for their more general use; that the clergy of every denomination should recognise the immense moral force they can be made; that the medical profession should recommend them for their preventive value; that schoolmasters act up to Juvenal's maxim, and admit and teach that only *in corpore sano* can the *mens sana* exist; that employers of labour, especially sedentary labour, should realise that in them is to be gained that strength of body and mind combined which produce the most profitable work; that parents should see that their sons continue in them that physical exercise which too often ceases on leaving school, but which is doubly imperative as the youth approaches manhood; and that the Press—above all, the Press—gives its unstinted, its continuous, and its guiding aid to this present effort to stem the downward course of the Nation's physique.—We are, Sir, your obedient servants,

ARTHUR G. MEARS,

*Hon. Sec., the German Gymnastic Society.*

J. H. WILLIAMS,

*Hon. Treas., the St. James's Athletic Club.*

GEO. M. OHLSON,

*Hon. Sec., the Orion Gymnastic Club.*

London, September 25.

## THE NATIONAL PHYSIQUE.

*To the Editor of the 'Standard.'*

SIR,—If I may be allowed I will add a few remarks to the letter which appeared in *The Standard* to-day on this subject. The physical education of our children is left too much to chance and inclination. They receive a very inefficient training at the various schools, and as far as I have seen at the Board Schools, under bad conditions and in their ordinary clothes, taught by teachers who know very little of the subject at all. When the children leave school there is no compulsion, and very little inducement, to devote their attention to perfecting their physique, and the result seems to be that, with the exception of a number of enthusiastic physical culturists and gymnasts, our young men are content to go on their way through life with bent figures, hollow chests, thin arms dangling from round shoulders, and ungraceful deportment. So long as they can walk, run, kick, jump, cycle, or box, they are content to remain physical monstrosities to the end of their days. What we really want is a system of compulsory physical education in all our Government and Public Schools, under efficient instructors, who understand the human body and the laws of health and exercise, who will take an interest in each pupil, noting and correcting by exercise and advice all physical weaknesses and deformities. This should be a part, an essential part, of any educational system. I have found, during the last few years, training boys in a company of the Boys Brigade, with the object of perfecting their bodies, that almost any physical weakness can be corrected, and boys made perfect models if trained early and wisely. If our youths were turned out from our schools healthy, strong, and graceful, in short, real athletes, they would not take long to find congenial recreation in their leisure in our gymnasiums. The fact is, very often our young men do not attend our schools of physical culture, etc., because of the laborious work they must put forth to alter their figures and make up their deficient strength.

In closing, I would add I am not advocating any special system of exercises, but I think that for our boys it would be best to frame a system that would be interesting as well as instructive, and combine the fanciful

exercises on the gymnasium apparatus with the more uninteresting exercises of the various systems of physical culture.—I am, Sir, your obedient servant,

F. W. STEVENS.

31 King's-road, Leytonstone, *September 28.*

Until I read the above remarkable letter, I confess that it had never occurred to me that it was by such methods that our forefathers kept their health.

Facts like those adduced by the Royal Commission on physical training in Scotland are very ugly reading, but it is no use shutting one's eyes to the fact. The British as a nation are physically deteriorating.

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All the above must presumably be true. There can therefore hardly be a more momentous question than the enquiry into its cause. Why should we want gymnasiums (or gymnasia), sterilised milk, special medical arrangements, etc., to keep us up to the standard of our grandfathers?

We are gravely asked to believe that our deterioration is due to our sedentary lives, to our living in towns, to our eating exciting food, drinking hot tea and coffee, and so on. All of which may do for the Jennerian with his head in the sand, but which as pure nonsense is about on a par with his 'statistics.'

Are we to believe that our grandfathers played more cricket, golf, football, etc., than we do? Did they live on the river and 'walk to Brighton' oftener than we? They lived in the heart of the city of London over their shops, which they seldom if ever left. No one at all lives in London now: by eight o'clock P.M. there is not a soul, beyond a caretaker, left in the city, and every young man of the sedentary life is amusing himself in the country, thanks to the trains; and the same applies largely to all other big towns. Besides, London, which was formerly deadly, is now one of the healthiest spots on earth. As

for hot tea, boiling point is now the same as it was then, and so is the temperature of the human body, I believe; do we pretend that our ancestors did not drink hot drinks?

I am gravely told, moreover, that the superior brain effort of the modern man and woman destroys their health, the young man of the present day being in that respect so much more strenuous and capable than those of the past, such as, say, Lord Kelvin, Herbert Spencer, Alfred Wallace, and others. The truth is that athletics absorb modern life almost exclusively: a 'half-back' of some noted football team is held in far higher esteem than a Balliol scholar; young men live more and more in the open air; and girls know nothing of the indoor pursuits of their grandmothers: the harp, the harpsichord, the distaff, the 'sampler,'—the mother of embroidery,—have had their day; but throwing all the grace of maidenhood to the winds they don black breeches like a man, and try to play hockey, football and cricket, and otherwise spend their life on a bicycle. Although this dirty garb compromises them as far as their power of fascination is concerned, this modern out-door life cannot be what is maiming their constitutions, and judging from results, the exigencies of the High School can hardly be accused of over-taxing their brain power to a dangerous extent.

No—our lives are in every respect much more healthily conditioned than those of our grandfathers were, and yet we are deteriorating rapidly. It is true we smoke, and do not live exclusively on beer, nor get drunk as they did, but nobody has, as far as I know, ventured hitherto to attribute the difference to this. As a matter of fact no man nowadays, young or old, can, for some mysterious reason, drink beer at all. The whole population seems to be a collection of professional invalids.

There must therefore be some violent and artificial poisoning going on which we cannot detect. I can see no way out of this.

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All the statistics of alleged vaccination benefit sink to nothing compared with such considerations as these: the really interesting ones would be enquiries as to whether unvaccinated people now contract cancer, tuberculosis, etc., as they certainly did *not* do of old. For it comes to this, that our modern sanitation has annihilated all the old dirt-diseases which afflicted our forefathers—all except smallpox which we artificially cultivate—and left us with an entirely new and far more deadly set. This new set can hardly be due to sanitation.

Nobody denies that nine-tenths of the civilised world have no teeth at all, that a large proportion have no eyesight, that baldness is rapidly increasing, that tuberculosis, cancer, and most other horrible diseases, not to mention lunacy, are advancing with rapid strides—why? Is our sanitation so much worse, our living so much more unhealthy, our doctors so much more ignorant than in the time of our grandfathers?

If not, what do we do that they did not do? One thing—*we vaccinate*: that is, we poison the blood of every child born into the world, so that its organs whilst forming are fed with a poison that is beyond analysis. If the organs can thrive on such nutriment, there must be a scientific miracle performed in every case.

Look around you at your own immediate circle, and note the sickness that afflicts poor humanity. You will probably have in your neighbourhood some wonderful old people, men of eighty as hale as ever, mysteriously hale: and then look at the young ones that go down, like sheep in a murrain, under the blight of some unknown disease: people apparently perfectly sound till something comes upon them which nobody can account for. Your children probably spend half their lives at the dentist's, some of them have to wear spectacles, etc., etc. Why? This was not the case with your grandfathers.

It would, however, perhaps be 'too fastidious' to venture the suggestion that two and two sometimes make four.

A dental expert has visited every accessible country of the world, and has verified his suspicion: that decay of teeth, except by accident, is unknown in regions into which vaccination has not penetrated, and has found that in every place into which it has been introduced there is general decay.

Another expert has visited all the leprous regions of the earth and convicts vaccination of being one of the chief causes of the spread of leprosy.

That calf-lymph would be expected a priori to produce cancer has been stated, after much enquiry, by several doctors. And *pari passu* with the extension of calf-lymph-vaccination has Ireland, hitherto notably exempt from it, shown the steady increase of cancer which has led to the appointment of a Commission. (The examination of this case can be read in the *Vaccination Inquirer* of June 1903.)

#### ANNUAL DEATHS IN ENGLAND PER MILLION LIVING.

AVERAGE OF 5 YEARS.	1850-54	1855-59	1860-64	1865-69	1870-74	1875-79	1880
Smallpox, . . .	279	199	191	148	433	82	25
Syphilis, . . .	37	51	64	82	81	86	84
Cancer, . . .	302	327	369	404	442	493	516
Tabes Mesenterica,	265	261	272	316	299	330	371
Pyæmia, etc., .	20	18	24	23	29	39	—
Skin disease, .	12	15	16	17	18	23	22
Total, . . .	636	672	745	842	869	971	993
Progressive increase,	—	36	109	206	233	335	357

The diseases above are inoculable by vaccination, no other cause for their steady increase can be suggested than vaccination. The fact of these tables not being up to date does not vitiate the inference. The Registrar-General gives an average

of fifty-two deaths per annum due *directly* to vaccination. He also states that the deaths returned under chickenpox are really vaccinated smallpox. All those maimed for life or who die of disease induced by vaccination, are naturally not recorded.

Mr. Alfred Milnes, a noted statistician, estimates that the fifty-two children's deaths per annum must be at least multiplied by twelve to approximate to the truth. And Dr. Alfred Wallace has calculated that in England alone 10,000 people per annum must be killed by vaccination.

That all the above disasters are due to vaccination is nonsense, say the Jennerians; very well, then what is it due to? There must be some cause, and the *onus probandi* rests with them. They furthermore have the unwisdom to say, 'What! Tuberculosis at twenty-one, years and years after vaccination?' apparently being too witless to see that as long as they claim for the prophylactic power of their poison, so long is the cause of disease active; in fact one might fairly question whether blood once poisoned ever fully recovers its health; and that would be only confirming Jenner.

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'Besides,' say a great many, 'it is entirely a question for the doctors.' It is nothing of the sort, it never has been a doctor's question. It was not invented by a doctor, it was administered by anyone: parish clerks, midwives, old women, anyone vaccinated. Jesty was not a doctor. Jenner had never passed an examination of any sort in his life; his only claim to be called a doctor was that he bought a degree for £15. The crusade is entirely carried on by laymen, ministers of state, the bishops and clergy, schoolmasters, employers of labour, shopkeepers, etc. Are we to understand that these people have ever studied a word of the subject on which they so coolly dogmatise, and so tyrannously legislate, a subject far more recondite than astronomy and more subtle

than Bacon's enquiry into heat? Newspaper writers dogmatise on this with their usual omniscience, an omniscience which is pulverised by anyone who knows something of the subject on which they instruct the world.

The following are instances that I have lately gathered from the daily papers.

Under existing circumstances every unvaccinated person is a public danger, and revaccination is highly advisable for those who have not made trial of the lymph. That will render them practically immune, for it is not the good seed only that perishes when it falls on inhospitable ground—a similar fate attends the microbe of disease.

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In hardly any parish in Scotland is the objector on conscientious grounds prosecuted more than once on account of each child which he refuses to have vaccinated. To those who believe in the efficacy and benefits of vaccination in shielding the population from the scourge of smallpox—in other words, to the vast majority of intelligent men and women—it will seem that this is going quite as far in the direction of considering the individual conscience as the other and greater duty of considering the public safety will permit . . . The Act of 1898 was, whatever the anti-vaccinators may say or think, a concession made not so much to conscience as to prejudice and ignorance; and it was a concession made at public risk . . . In fact the conscientious objector, though he may manage to make some noise and cause some trouble, *is a small and diminishing quantity*. The anti-vaccinators, like other *one-ideal* and *fanatical* people, always forget that other men have consciences as well as themselves. It is a matter of conscience, or at least a matter of duty, with the legislative and governing authorities of the nation to *protect* it against the introduction and spread of disease. In this case the individual conscience which opposes itself to the performance of this duty cannot be satisfied without widening the field and adding to the materials on which the disease can work, and thus increasing the public risks. To most people it will seem better that a conscientious objector here and there should suffer fine, or, if he carries

conscience so far, even imprisonment, for not complying with a law the necessity and the beneficence of which has been '*proved up to the hilt,*' than that an opening should be left for the entrance of one of the foulest kinds of pestilence.

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THE METROPOLITAN ASYLUMS BOARD'S REPORT ON  
VACCINATION.

The statistics showed that during 1901, 1,017 cases of smallpox occurred, of which 247 ended fatally. The percentages were:—Vaccinated 760 cases, deaths 108, percentage 14.21; doubtful, 63 cases, deaths 41, percentage 65.08; unvaccinated, 194 cases, deaths 98, percentage 50.52. These figures showed the unquestionable advantage derived from vaccination. After pointing out that revaccination is compulsory for all persons employed in smallpox hospitals, the report continued:—'Of 2,198 persons employed at the smallpox hospitals between 1884 and 1900 inclusive, only seventeen persons contracted smallpox, of whom thirteen were not revaccinated until after they had joined the ship, and four were workmen who escaped medical observation.' And again:—'Not one of the staff of the hospital ships has ever died of smallpox, not one has even suffered from the disease for the past eight years.' It is only necessary to add that these facts are only novel in the sense that they relate to the new epidemic. Exactly similar facts have characterised every previous epidemic. Unfortunately, there are many persons in England, especially among the uneducated classes, who prefer their personal fancies to proved facts, and who will persist in believing what they wish to believe in face of overwhelming evidence that their faith is a mischievous folly.

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The conscientious objector to vaccination is too abundantly present at Sessional Benches in county and city. In all cases of delicate children the medical man attending can defer vaccination to a convenient time. There are objectors who treat Jenner and his great discovery and the experience of the medical faculty with contempt. Old and middle-aged people can remember how abundant were people in streets and villages marked

with the smallpox—disfigured; now to see a person thus permanently marked is almost impossible, and this has arisen from Jenner's great discovery and its application. Whether the conscientious objectors' action will bring about a renewal of the terrible disease remains to be seen. It is interesting to read and reproduce an advertisement of the *Times* published a century ago this month. It is as follows:—

'From the *Times* of Wednesday, January 19, 1803.

'Extermination of the Small Pox.

'London, January 10, 1803.—The invaluable discovery of Dr. Jenner for the extermination of the smallpox having undergone the most rigorous investigation and received the sanction of Parliament, a meeting will be held at the London Tavern, Bishopsgate Street, on Wednesday, the 19th instant, at 12 o'clock, to consider of the best means of carrying the same into effect, when the company of every gentleman disposed to concur in this laudable undertaking is earnestly requested. The chair will be taken by the Lord Mayor precisely at one o'clock.'

In the old files of the *Hampshire Chronicle*, 1774, there are terrible records of smallpox at Waltham; so bad was it 'that people were afraid to go out of doors.' In Winchester 600 patients were under the care of operators in city and suburbs. 'Country people flock in to be inoculated.' 'John Smith, surgeon, living at Palm Hall (now Alderman Dyer's house), boasted he had inoculated 700 people and not lost a single patient.' Vaccination replaced inoculation.

In this matter of revaccination the entire profession in London is actively in accord. Medical men lose no opportunity of recommending it. The experience of the present visitation confirms them in the belief of its general efficacy. South Africa affords a remarkable confirmation at the moment. In certain districts smallpox is prevalent amongst the natives, while few, if any of our soldiers have contracted it. The reason is not far to seek. One of the chief questions in the attestation paper is: 'Are you willing to be revaccinated?' so that every soldier is thus far fortified. The same lesson is taught by the experiences of the American

troops in the Philippine Islands. During the earlier stages of the American Spanish War smallpox was rife amongst the negroes of these islands. The hastily-raised American troops were attacked by the malady. They had not been inoculated, but arrangements were at once made for universal revaccination, and the epidemic was stayed. In January 1899, there was a very serious outbreak of this disease in Porto Rico. No less than 800,000 people were revaccinated, and by October of the same year there was not a single case of smallpox on the island. There is no need to instance the case of Germany, where there were only fifteen fatal cases of smallpox in 1898, when the population stood at fifty-two millions.

The time was not far distant when the only safeguard against this terrible disease would be vaccination and revaccination. (A voice: 'Bosh!') He could not imagine that the bulk of the people knew that revaccination, with its very small inconvenience, was, so far as experience went, a complete protection against smallpox.

Here is a practical result of the prejudice and ignorance of the one-idead and fanatical, which is almost amusing:—

#### PATIENTS' STAMPEDE.

At the Newcastle Dispensary, yesterday morning, during the examination of out-patients in a room at the back of the premises, it was discovered that a woman was suffering from smallpox. The doctor notified the medical officer, who, upon his arrival, intimated to the other patients the desirability of their all being vaccinated at once. A scene of wild disorder ensued, and there were many loud protestations from the patients. Some of them made a stampede for the doors, and one woman, in a state of excitement, smashed a large window and dropped a child on to the roadway. With difficulty order was restored, and the smallpox patient was conveyed to the isolation hospital.

And so on, and so on. Great is vaccinia! I suppose it is very comforting to the vaccinators to read all this constant reiteration. Vaccination is of proved benefit, and its opponents are fools! But to the opponent it is only piteous or laughable.

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The full measure of humbug can only be gauged by reading Jenner's life. It is difficult to estimate whether he was more fool or knave. As his claims for his discovery kept receding, people followed him quite contentedly. First he promised life-long immunity, then mitigation, then only as much protection as is afforded by a previous attack of smallpox. And then when Lord Robert Grosvenor, whom he had himself vaccinated, nearly died of smallpox, Jenner set to work to collect all the instances of people having two attacks of smallpox, not seeing apparently that the more he found, the more he cut the ground from under his own feet.

Which only proves that you must be revaccinated at puberty, then every ten years, then every year. In fact you must be kept permanently diseased, for fear of catching a disease !

And logically we ought to be infected with all the diseases as preventives. Typhoid, cholera, plague, tuberculosis, etc., can all be averted by means of their corresponding filths. So that instead of being the 'open sewer' of the Jennerian, we should be the far more deadly closed sewer of the amateur plumber. Here is the last discovery.

#### THE CURE FOR CONSUMPTION.

*From our Correspondent.*

*New York, Thursday Night.*

The Chicago department of Health has been making extensive experiments with the remedy for consumption recommended by Dr. Edouard Maragellano, of Genoa, and declares that the results obtained far surpass those of any other known treatment. The serum is introduced in the skin of the arm, and in the same way as vaccine lymph. It produces a sore, accompanied by a slight fever ; but the patient is said to be thenceforth immune from tuberculosis.

These patent tips I notice occur at frequent intervals in the newspapers, and are never heard of again. This one has the true Jennerian ring about it.

The following hodgepodge of all the filths seems rather a tasty dish for family consumption.

#### A NEW ANTI-TUBERCULOUS SERUM.

*Paris, Nov. 17.*

Dr. Marmorek, the Austrian bacteriologist, to-day read a paper before the Academy of Medicine describing an anti-tuberculous serum or vaccine which he has discovered. He explained the method of preparing the serum, which is somewhat complicated. Dr. Marmorek injects the serum from a horse into the patient. He has used it for more than a year, and it has always proved innocuous. In cases of tuberculous meningitis he has had no success, but he claims to have obtained favourable results in cases of tuberculosis. The method of obtaining the serum is as follows:—A particular species of Koch bacilli obtained by selection is reared in a special medium composed of calf serum into which white cobaye globules have previously been injected and of glycerinous essence of calf liver. In this medium the bacillus secretes a toxin which in turn is injected into horses. The difference between Dr. Marmorek's serum and Dr. Koch's tuberculine is that the latter injects a toxic substance while Dr. Marmorek injects an anti-toxin prepared outside the human organism. Dr. Marmorek stated, in conclusion, that he had sent in his resignation as leading chemist at the Pasteur Institute in order to take up the sole scientific and moral responsibility for his discovery.

From the following I gather that we may expect a new medical formula: 'when in doubt, vaccinate.'

Since Saturday seven fresh cases of, and one more death from, the mysterious disease at Cambridge, have been officially reported, making a total of 100 cases and seven deaths since the outbreak. The annual camp of the Cambridge Volunteers at Clacton has been countermanded by order of General Gatacre. The medical authorities of Cambridge have advised the householders to resort to vaccination, which is offered free.

This mysterious disease looks as if it must be some new result of vaccination. (It has since turned out to be small-pox pure and simple, apparently implanted by vaccination.)

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As it is with newspapers, so it is with the British public: they know all about everything that is beyond their ken. Give them a Bulgarian atrocity, or an Armenian massacre, and they all shriek in pious horror, and give their money too. But show them an anti-Jennerian who has lost his children from vaccination, has been insulted and defrauded by the magistrate, been sent six times to prison, or fined several pounds, his total income being eleven shillings a week, with which to keep his heart-broken wife and any remnant of his family that the vaccination laws may have left him, and you will find their hearts harder than stone. A man is not a prophet in his own country, and is only a Christian out of it. Applied Christianity is often quite a novel idea: fancy really loving your enemies, that is those who differ from you in the highest faith—the Jennerian! And as to justice: the conscientious objector is refused his certificate of exemption, which is illegal: he is repeatedly fined, which is illegal: he has often had hard labour in prison, which is illegal: his children are caught and vaccinated without his leave, which is illegal. But who cares? In the existing constitution he is only a pariah. 'The right of the needy they do not judge.'

Here is a fine instance. Mr. Thomas M. Young, J.P.—a man appointed to see that the laws of the land are duly obeyed—has just written to the *South Shields Gazette*: 'I shall in future sign no exemption order unless the applicant can convince me that vaccination is an evil.' This avowed law-breaker sits on a bench of magistrates, and sends people to gaol for breaking the law. Comment is superfluous.

In this last month (September 1903) I have read of seven

or eight men being sent to prison for conscientious objections, two of them having been given oakum to pick!

And it must be borne in mind that the vaccination of the 'gentleman's' child, and of the poor man's child are two very different processes: independently of the fact that the rich man can always evade it altogether.

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Wherefore, O Jennerian, believe, if you will, that God has not only forgotten to be gracious, but that He has lost His cunning and no longer knows what stuff to put into a man's veins—for vaccination is not a medicine for a diseased body, but poison inserted into a whole one to correct God's bad workmanship—only don't have the effrontery to stand up in church and say, 'I believe in God.' And if you are satisfied that you are right in imprisoning your fellow-creatures, for not believing in a medical recipe of your own, be content: only don't call yourself a Christian. A man cannot be a Christian just as far as it suits his programme, and there stop short. Where did you find your sanction for the treatment you give the anti-vaccinator? Not in the Gospels, but in the Irish Plan of Campaign!

All I can say is God forgive them, for assuredly they have not the least idea of what they are doing. If a man found out that he was killing his fellow-creatures in hundreds of thousands, in order to prop up a bunkum faith, his remorse, though it would not undo a tittle of the harm he had done, would surely kill him, or of a Saul make a Paul of him, which is the history of most anti-vaccinators. The kinder course is to assume a purblind ignorance on the part of the Jennerian, otherwise his criminality would be too awful to contemplate.

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The majority of doctors do not pretend to know anything about it, they are paid to believe and practise it: and a man

cannot be a doctor without having subscribed to it, as the parson has had to subscribe to the Thirty-nine Articles. And if they doubt, they are boycotted. A notable case occurred lately. Dr. Scott Tebb was dismissed by the Local Government Board from the post to which he had been appointed, because he had written the truth about vaccination.

And if it is a doctor's question, ask any doctor a few questions about it. Ask him what the stuff he puts into you is, what its effect on you is, how long its supposed efficacy lasts—how it ought to be applied, etc. And then ask the same questions of another doctor, and compare the answers. Ask him also to what he attributes your loss of teeth, hair, eyesight—which will probably be pertinent questions—and all the degeneracy alluded to above. Ask him how it is that if vaccination is mild smallpox, and can save you from smallpox, it cannot save you from itself, and smallpox cannot save you from subsequent vaccination, and you can have vaccination and smallpox at the same time.

Besides if it is a question for the doctors, which of them are the proper authorities? Presumably there are good, bad, and indifferent doctors, as there are painters, musicians, lawyers, etc. The best opinion must come from the best men. The two greatest specialists in the matter of vaccination are Dr. Creighton and Professor Crookshank, and they both condemn it utterly. The ordinary practitioner's opinion ought to have no weight against theirs; he has accepted the doctrine like other men in the street, and they have made it a special study.

In one sense it is indeed a doctors' question: they are not only paid for preaching it, but for practising it. The Public Vaccinator for Marylebone, for instance, drew in fees for one quarter last year £2,249.

It is, to say the least of it, very remarkable that the

doctors should display such a mighty philanthropic interest in saving us from smallpox, whilst not even professing the slightest concern about saving us from anything else. Who ever heard of doctors meeting together or leagues being formed to disseminate knowledge on the subject of other diseases? And wherein lies the special advantage of not dying of smallpox? If ten men die of leprosy or scrofula to save one man from dying of smallpox, where is the gain? Surely what ought to be aimed at is a reduction of the death-rate, not of the death-rate of smallpox, at any cost.

I do not know what sum of money is spent annually on vaccination, but it must be enough to make many thousands happy, instead of, as now, driving many thousands to despair. As if there were not sorrow and suffering enough in the world already, without our adding to it by poisoning and imprisoning one another!

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Sir Herbert Maxwell, M.P., in introducing the deputation, pointed out that while in England a sum of £10,000 was granted for the supply of lymph, and while in Ireland the sum was £1,250, the sum granted in Scotland was only £250.

Professor Sir Thomas Fraser, Edinburgh, the leading speaker of the deputation, pointed out that as vaccination had been rendered compulsory by the State, it did not appear to be unreasonable that, in order to make this vaccination as valuable and serviceable to the country as possible, the State should adopt what measures were required to ensure that the material with which the vaccination was performed should be obtained in an efficient and pure form. Arm-to-arm vaccination with human lymph had now been very largely, if not universally superseded by the use of calf-lymph, which the practitioner had to obtain from establishments where it was prepared from animals kept for the purpose of producing it, and as the only test of the efficiency of this lymph was the effect produced by inoculation, the use of imperfect or *deteriorated lymph*

became a great source of danger. The great importance of ensuring efficient lymph had been fully recognised by the creation of a national vaccine institution in England, at which the lymph was prepared under the most approved scientific conditions, and distributed under conditions to prevent deterioration. In Scotland, therefore, they did not think it at all remarkable that there should be a desire to have this advantage, or that the members of the medical profession and a considerable portion of the public were dissatisfied with the present condition of things.

Lord Balfour of Burleigh pointed out that what was done in England and Scotland were two very different things. In their memorial there was a good deal of what was inaccurate and misleading.

Sir Thomas Fraser stated that the English vaccine establishment at the present moment gratuitously distributed *guaranteed* vaccine matter to the public vaccinators of England, who, there was reason to believe, overtook about two-thirds of the vaccinations annually performed.

Dr. Farquharson, M.P., said he considered that from the abstract point of view of pure science every statement in the memorial would be absolutely borne out by scientific men. There was a great deal of feeling in Scotland upon this subject. They thought they had been shabbily treated, and, moreover, they considered that as they had always been ahead of England in the matter of vaccination they ought to get their reward now in the granting of the present request. He did not ask it as a favour. He asked it in the name of the people of Scotland as a right which they were entitled to expect. It was only right that the people vaccinated should have the assurance that the operation was properly performed, but at present there was no guarantee that the lymph was *pure*, and as a matter of fact there was a great deal of *inefficient* vaccination in Scotland now. Vaccination in Scotland was not now what it used to be in the days of Dr. Husband and others, under whom some of those present had studied. The result of employing badly prepared lymph would only be to foment agitation, and eventually introduce into Scotland the pernicious methods of the anti-vaccinator. Every practitioner ought to have the right to get an ample supply of calf-lymph to meet the wants of

his clients. The state of things in England was quite shabby enough, but that was no reason why Scotland should be treated shabbily as well.

Bailie Graham, Glasgow, directed attention to the practical difficulties which the Corporation of Glasgow experienced during the smallpox epidemic two years ago. During the twenty months of that epidemic they vaccinated upwards of 320,000 people, and they had the very greatest difficulty in getting lymph when the epidemic reached the acute stage. Much of it was immature, and had to be put aside before it could be used, and they were under the necessity of sending over to Paris to meet their wants. They considered that if the lymph was standardised and made at home it would be very much better for large towns in cases of epidemic. The cost also, although he did not wish to dwell on that, was very great. In the twenty months of the epidemic they spent no less than £4,500 in procuring lymph. Much of it was bad, and on examination by their own bacteriologists was found to *contain microbes* that ought to have been killed by the glycerine before it was made use of.

Councillor Lang Todd, Edinburgh, endorsed what had been said by the previous speaker. The Corporation of Edinburgh had similar difficulties to meet in getting an adequate supply of good lymph, and a considerable quantity of what they had obtained was really not in a *state fit to be used*. That could not but be a very undesirable state of affairs. In Scotland they did not hear so much as they did in England about the conscientious objector, but there were people who still held very strong views on the subject of vaccination, and he could conceive no more powerful weapon to put into their hands than a well justified complaint as to the quality and purity of the lymph supply. For that reason alone he thought they were entitled to press the question upon His Lordship's consideration.

Sir Michael Foster, M.P., speaking from his experience as a member of the Royal Commission on vaccination, said that vaccination was very much better carried on in Scotland than in England. One great strength of the anti-vaccination cause, he added, was the want of an adequate supply of perfectly trustworthy lymph, and he thought it should be supplied by the Government itself.

Does not the above betray the rottenness of the whole case? These are the sentiments of so-called scientific men in a deputation to Lord Balfour. We read of 'pure' lymph, which is pure nonsense. Who shall say it is *pure*, whatever *pure* may mean, and *guaranteed*, when it is avowedly beyond analysis? 'Deteriorated,' 'a source of danger,' 'immature,' 'not in a fit state to be used,' 'inefficient vaccination,'—is this science? Are other medicines liable to such terms?

It is the one black spot in the otherwise spotless character of the doctor that he dare administer such bunkum-medicine. If he dared do such a thing in the case of other drugs he would very soon lose the character for integrity, devotion, and discernment, which he now in other respects rightfully enjoys. Vaccination is admittedly, at the best, a medicine that may kill you, and only claims to be able possibly to mitigate a certain rare disease if it should happen to attack you exactly at the right moment.

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The chief argument in the newspapers in favour of letting motorists continue their homicidal pastime is derived from considerations of the 'danger to an important industry'! So the poor vaccinators must not be forgotten. It would be a terrible blow to their important industry if the British public ever really found out the truth about vaccination, and the chief province of the Imperial Vaccination League must be to keep the trade alive, for 'this our craft is in danger to be set at nought.' I do not see why it should otherwise personally interest Mrs. Garrett Anderson whether I am vaccinated or not, any more than it interests me to know whether she occasionally takes an alternative, or not; a subject on which I confess my most complete indifference, and I cannot conceive the circumstances that could induce me to form a society to ensure that she did.

The following conference of the foxes to consider what steps should be taken to put pressure on the farmers to compel their breeding an adequate supply of pheasants, is very instructive and suggestive.

ASSOCIATION OF PUBLIC VACCINATORS—ANNUAL  
MEETING

The annual meeting of the Association of Public Vaccinators of England and Wales took place, on Saturday, at the Trocadero Restaurant, Piccadilly, when Dr. E. Climson Greenwood (St. John's-wood Park) presided.

The annual Report stated that the fact of legislation coming up for revision next year made it imperative that public vaccinators generally should exert themselves to improve the conditions of public vaccinators. The crisis in public vaccination was sufficiently important to justify an appeal to each member to interest all those who were not yet associated. The Report of the Organizing Secretary said, whether, in view of the expiry at the end of next year of the Act of 1898, a Government measure would be introduced, or whether that Act would be continued for another twelve months, it was impossible to say at present, but the hands of the Council should be strengthened in view of the Government being approached by petition or otherwise when the proper time arrived. The Report of the Council of the Association contained the opinions of the Council upon the administration and practice of vaccination and the changes desirable therein. The Council were of opinion that the administration of vaccination should be removed from the Boards of Guardians and placed entirely in the hands of the Local Government Board, as they contend that '(a) The present administration is extremely unequal in various districts; (b) The Guardians in many Unions terrorise public vaccinators by threats of 28 days' notice and by vexatious restrictions; (c) Certain Boards of Guardians defy the Local Government Board, the members in many instances being simply elected by anti-vaccinationists. The Council recommend (a) There should be compulsory revaccination between the ages of twelve and fourteen, before leaving school; (b) That any certificate of ex-

emption from vaccination should simply suspend the operation until the child enters school, or in any event until the age of five years ; (c) That it was undesirable that all medical practitioners should be public vaccinators, because (a) There would be a great increase in the expense of vaccination, as private vaccination would become almost extinct, and nearly everyone would be vaccinated at the public expense ; (b) Difficulty in obtaining efficient inspection ; (c) Difficulty in the supply of lymph, and in keeping correct records of its use ; (d) The standard of vaccination would be lowered, as so many private practitioners had been teaching that one mark was sufficient ; (e) That the existing legal machinery for enforcing the Acts dependent on the Public Vaccinator's visit and offer to vaccinate would need complete reconstruction.'

The Report was adopted.

The President (who was re-elected) said the ensuing year would bring a good deal of work for the Association. They would, no doubt, be brought into contact with the powers that be on the question of drafting the new Bill, and they must see that their views were properly and efficiently represented before the Government drew up any Bill.

At the Conference which followed, papers were read on the subject.

The President said no public vaccinator should stand aloof from the Association at the present crisis, in view of the opposition to them daily growing in volume. On the whole, the Act of 1898 had proved a success. An official visit had often proved enough to make the wavering or careless parent take advantage of the most wonderful epoch-making discovery of the last century. They had had to meet the lying and pernicious literature of the anti-vaccinator, and, after a few words of truth, they had been allowed to add to the enormous total of protected children. There remain the residue, who, in the face of all argument and common sense, absolutely declined the operation. Undoubtedly, the use of glycerinated calf-lymph had largely aided the success of the Act, the more so, because it strengthened the hands of the public vaccinator by removing once and for all the remote chance of infection from syphilitic and tubercular diseases during the operation, but the main cause of the Act having so far proved a success

was the domiciliary visit. The fees of the public vaccinator had in the aggregate considerably increased, and many of their professional brethren had cast covetous eyes upon them. To those who had borne the burden and heat of the day this latter phase must have a bitter significance. Was it an honest attempt to procure for this country an efficiently vaccinated community? The domiciliary visit had, no doubt, laid them open to all kinds of accusations; but they were in a position to detect the motive of those who were guilty of circulating shameful slanders. Was it unreasonable to demand of the State that the administration of the Vaccination Acts should be removed from the sphere of local politics, and was it unreasonable to demand uniformity in the administration of those Acts?

Mr. Francis T. Bond, of the Jenner Society, contributed a paper in which he urged the need for an inquiry into the general subject of vaccination administration, and Dr. Edward J. Edwardes (Secretary of the Imperial Vaccination League) followed with a paper on 'Public Vaccination in Germany,' in which he contrasted the operation of the vaccination laws in Germany and England to the disadvantage of the latter.—Dr. A. Maude (Public Vaccinator for the Sevenoaks Union) dealt with 'Some Clinical Aspects of Revaccination,' and Dr. A. E. Cope (Public Vaccinator for the St. George's Hanover-square Union) spoke on 'Some Points in the Law and Practice of Vaccination.'

A discussion followed, and the Conference then concluded.

In the evening the members of the Association dined together, when Dr. Copeman, of the Local Government Board, gave a limelight demonstration of certain experiments he had carried out for the purpose of proving that glycerine made lymph absolutely harmless without reducing its effectiveness.

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It is to me impossible to realise how a man with a single wit in his head can believe in 'the hair of the dog that bit you' theory of medicine, that you can buy off the devil by sacrificing to him, that by diseasing health you can benefit

health: and still more, how a man with a heart within him can read the awful stories on this subject and not feel his blood boil with anger and his heart throb with compassion.

The story is pretty nearly always the same. It must of course occur in poor life—the rich man cannot be touched. A poor couple have their first baby, a fine healthy child who is all in all to them. Then comes vaccination: the baby simply ‘rots’ from that moment, and dies a loathsome death. Then comes the Coroner who says the baby did not die of vaccination, though the doctor and parents state that it did. Later a second baby, and this time the parents rebel. After insults from the magistrate the father is fined or imprisoned and the home broken up. All this for what? That the rich man may escape smallpox!

Mrs. Smallman said that she did not have the child vaccinated, as her last child died through vaccination.

The magistrates’ clerk said that if that were true it was no answer to the case in law. Mrs. Smallman produced the doctor’s certificate stating that her child died from vaccination. She further stated, ‘at the time of my child’s death my husband was out of work, and if it had not been for the kindness of two lady friends and my neighbours, I should have died too from want of food as well as rest. I sat up nine days and ten nights, and the tenth day my child died.’

The chairman after passing remarks *in favour of vaccination* fined defendant 5s. and 8s. costs; in default of sufficient distress, to be sent to prison for seven days.

O glorious word vaccination, beside which Mesopotamia is lustreless! Is this the law of Christ or of Jenner?

Most of the cases I have read are too sickening to repeat.

Yesterday’s papers contained a ‘Death from Vaccination.’ The old story—the doctor said so, but the Coroner instructed his jury that there was nothing to show that vaccination had caused death: to their honour this jury refused to stultify their consciences and intellects, and found that there was.

I lately read of nineteen young men in an Indian village dropping down dead on the application of plague-serum.

ELEVEN CHILDREN SUCCUMB TO ANTI-TOXIN  
INOCULATION.

*New York, Thursday.*

A dispatch from St. Louis states that a great sensation has been caused in that city by the announcement that no fewer than eleven children have just died as the result of antitoxin administered to them as part of a new treatment for diphtheria. The eleventh child died just before noon to-day, and there are twenty-five other little sufferers who are being carefully watched. The cause of death in each of the eleven cases was tetanus and the physicians in attendance are unanimously of opinion that it was brought about by the antitoxin. A thorough investigation will be made of all the circumstances.—*Central News.*

A working man who was granted a certificate of exemption from vaccination for his child, at the Southwark Police Court, stated his objection thus: 'My first child was vaccinated—it faded and died; my second child was vaccinated—it faded and died; my third child was not vaccinated, and is all right. Now I want a certificate for the fourth child.'

SHOCKING DEATH FROM HYDROPHOBIA.

About six weeks ago a mad dog near Novara bit three boys and a young man aged twenty-six. They were sent to the anti-rabies institute at Milan, where all four were treated with Pasteur serum, and appeared perfectly recovered. This week, however, they all died, the three boys without suffering, the young man in horrible agony. He was quite conscious, and shut himself up in his room, bidding his parents and friends not to approach him, as he felt a maniacal desire to bite. The authorities were informed, and some physicians, carabineers, and attendants came up. Meanwhile the unfortunate man had jumped through a window on to the village square. Suffering under a furious attack of hydrophobia he broke doors and windows, biting the wood, ironwork, and stones, and striking his head

against the walls. He ran about shouting, and the panic-stricken inhabitants fled, nobody daring to approach him. A number of carabineers then arrived, and formed a cordon to prevent him from escaping. At last, in knocking himself against a wall, the wretched man fell, and the attendants bound him and carried him home, but he died immediately. The square, the house, and everything he had touched were washed and disinfected. The authorities have laid a complaint against the institute of Milan.

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Such stories are pretty common in the newspapers, and only a small percentage of them probably is reported. No comment is made, nobody cares about them. On the other hand we have at intervals the regulation flaming article in praise of the immortal Jenner! As Jenner said that cowpox was nonsense, and revaccination still greater nonsense, it seems curious that his name should be associated with the present rite, which consists of cowpoxing and re-cowpoxing.

Jenner is indeed immortal, and I do not grudge him the statues that grateful nations have set up to his memory. For a man to have hoaxed the whole civilised world, and entailed more disease and death than any Attila or Napoleon did, and to have left behind him a creed ten times as powerful as Christianity is no small feat and certainly deserves immortality. A creed of such importance that it has to be enforced by governments. Fancy a government saying 'you *shall not* have a certain disease, and *shall* take the patent medicine for it: it is true we cannot know what this medicine consists of, we cannot guarantee that it will not maim or kill you, but you *shall* take it for all that.' Why not have a compulsory Beecham's Pill or Mother Seigel's Syrup Bill? I apologise to the owners of these medicines for likening them to Jenner; their medicines are, I believe, perfectly efficacious, and are not suspected much less con-

victed of causing death, but I only do so by way of illustration. If the government have the right to compel the use of a wholly problematical and highly dangerous specific, how much more of really wholesome correctives.

Mr. Long, replying in the House of Commons yesterday to Mr. Corrie Grant, said that the lymph supplied by the Government was derived from calves vaccinated with lymph from other calves. None of it was derived by inoculating animals with smallpox; a pure culture of the organism of vaccinia could not be supplied in place of lymph; the strength of the virus could not be standardised so as to measure the dose administered. The Government gave no guarantee as to the purity and innocuity of the lymph they supplied, but made every effort to secure those qualities.

#### VACCINE LYMPH.

Mr. Weir asked the Lord Advocate, in view of the fact that the Local Government Board for Scotland had paid Dr. Cadell of Edinburgh, £15, 14s. 3d. for 419 tubes of vaccine lymph, would he state what facilities Dr. Cadell has for its production; and why glycerinated calf-lymph is not used for the whole of the work of parochial vaccinators?

Mr. Graham Murray—I am informed that Dr. Cadell, as superintendent of vaccination at the New Town Dispensary, Edinburgh, collects vaccine lymph from the arms of children vaccinated by him, and hitherto has had no difficulty in supplying all the lymph required by the Central Vaccine Institution for Scotland. To the second part of the hon. member's question the answer is that *there are a few parochial vaccinators who prefer humanised vaccine lymph, and they are supplied with it accordingly.*

#### PUBLIC VACCINATION IN SCOTLAND.

Mr. Weir (Ross and Cromarty) asked the Lord Advocate, in view of the fact that the use of human lymph by public vaccinators in England was discontinued on the recommendation of the Royal Commission on Vaccination, would he consider the advisability of introducing legislation prohibiting the use of human lymph by parochial vaccinators in Scotland?

The Lord Advocate—I am informed by the Local Government Board that the question of the supply of lymph in Scotland is under their consideration. The Secretary for Scotland cannot at present come under any obligation regarding legislation on the subject.

Notice that arm-to-arm vaccination is illegal in England, and is still enforced by fine and imprisonment in Scotland!

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In the last epidemic, 1901-02, the Registrar-General gives the London deaths between August and April as 1,015. Of these, 534—more than half—were admittedly vaccinated, and of 83 'doubtful' cases four-fifths were 'said to have been vaccinated.'

From the Registrar-General's report it appears that the deaths from smallpox in London last week numbered twenty-one compared with twenty-two in the preceding week. Ten of the persons who succumbed to the disease are returned as vaccinated, and seven as unvaccinated, while four are classed under the heading 'No statement.' An infant vaccinated when one day old died from smallpox at the age of five days.

Where does vaccination come in? The answer is supplied by such specimens as the following:—

At yesterday's meeting of the Marylebone Board of Guardians, Mr. E. White, Chairman of the General Purposes Committee, said the present outbreak supplied them with figures which were a triumph for vaccination. Eighty-one persons under the age of fifteen had been admitted to the hospitals, only twenty-four of whom were vaccinated. Of these twenty-four only one had died, while of the fifty-seven unvaccinated children thirty-eight had died.

You must not pay attention to official figures. You must learn your lesson from coroners, magistrates, and other inspired but not over-fastidious sources. But wherein lies the triumph of twenty-four vaccinated—more than a quarter

of the total—being admitted? That fact alone disproves vaccination *in toto*. And why advertise a triumph? We do not read that quinine has had a triumph in curing six people of fever without a single failure: *qui s'excuse s'accuse*. Are these lying pœans penned for the benefit of the anti-vaccinator? If so, the trouble might well be spared, for he is only thereby impressed with the utter ignorance or *mala fides* of the newspaper writer.

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#### ANTI-VACCINATORS FINED AT FALKIRK.

At the Sheriff Court yesterday, Joseph Russell, miner, Angle Park, Polmont, pleaded guilty of having failed to vaccinate his child. He said the child was in a healthy condition, and as he believed that vaccination was not preventative against smallpox he refused to have an operation performed. The Sheriff imposed a fine of 1s., with 21s. 6d. expenses, or seven days' imprisonment. The fine was paid. Thomas Barker, checkweigher, Polmont, member of Grangemouth Parish Council, pleaded guilty to a similar charge. He said it was very unfortunate indeed that he was a Scotsman, having a conscience and having no right to exercise it in the best interests of his children. He supposed he would have to suffer for safeguarding his children according to the dictates of his conscience. The Sheriff imposed a similar penalty. The Accused—Will I have time to consider whether or not I will pay the fine or go to prison? The Sheriff—Yes, you can consider for a little, but you will have to consider it somewhere else than here. The accused, after some deliberation outside the Court with the police officials, paid the fine.

#### ANTI-VACCINATORS AND 'CONSCIENTIOUS' OBJECTIONS.

Three respectable-looking men applied to Mr. Mead, at the North London Police Court to-day, for certificates exempting their respective children from vaccination. No. 1 said one child of his, born healthy, died from tuberculosis, consequent, as he believed, from vaccination. He got his certificate. No. 2 said that a niece

of his was attacked with lupus a month or so after vaccination, had been a life-long sufferer, and, though she had passed all her examinations for the Civil Service, had failed to get an appointment, because of her ailment. The doctor gave an opinion that the lupus started from vaccination. This applicant also got his certificate. No. 3 was not so successful, though he appeared to make out a stronger case. He said he knew a city man living at Brentwood, who was revaccinated, and since then he had had 'breakings out,' and been unable to resume work. And the revaccination took place six months ago. Mr. Mead: How do you know that this was consequent on the revaccination? The applicant: It is the natural inference. Mr. Mead: Who is the best able to judge as to the benefits of vaccination—a man who has studied medicine all his life, or a layman? The applicant: It pays the doctor to vaccinate. Mr. Mead: Do you think the half-crown fees pay the doctor better than an outbreak of small-pox? The applicant: The question is this, is my child, who is healthy, to be subject to a doubtful benefit? Mr. Mead: You have not convinced me that you have the conscientious belief required by the Act.

The *Vaccination Inquirer* of July 1903 gives the following:—

BACTERIOLOGIST AND MAGISTRATE.—A LESSON  
FOR MR. D'EYNCOURT.

From a copy of the *Ilford Recorder*, forwarded to us by some kind friend, we learn that Mr. Arthur T. Barnard, of 12 Queen's Road, Ilford, applied in May to Mr. d'Eyncourt for an exemption certificate under the conscience clause of the Vaccination Act, 1898.

He stated that he was a student of bacteriology, and that from personal experiment and research he was fully convinced that the operation, if performed, would be prejudicial to his child's health.

The Magistrate: Then you are an amateur bacteriologist?

Applicant: Yes, that is so; indeed, all bacteriologists are amateurs. I devote my leisure to this study, feeling that it is a highly important branch of knowledge.

Replying to further questions by the magistrate,

applicant said that vaccination did not give immunity from smallpox, for during the epidemic of 1871-2, 8,000 vaccinated babies died of the disease in England and Wales. Nurses at smallpox stations were practically immune, simply because they were sound in wind and limb, and, as a matter of fact, they enjoyed the same immunity from all infectious diseases; so that if vaccination protected them from smallpox he would ask what protected them from all other contagious fevers? Smallpox, like all other germ diseases, was doubtless disseminated by spores of a diameter, perhaps, not greater than a millionth of an inch. Neither the spores of this loathsome complaint, nor the plants which they produced, had as yet been identified. It was easy to demonstrate with the proper appliances that when a child was inoculated with calf-virus, spores of various kinds were sown in its tissues, and if the parent was of a sporting turn of mind he might well have a few shillings on the several diseases, and wait to see which came in first. To show that he had courage of his convictions, the applicant said that during the recent outbreak he had offered his services to the Metropolitan Asylums Board, but they were refused.

Mr. d'Eyncourt granted the certificate, saying he was glad the applicant's services had not been accepted, for the chances were that had he ventured unvaccinated into the smallpox hospitals his interesting career would have been cut short.

With this sage remark the magistrate no doubt considers he has scored off the anti-vaccinator. He would not dare treat an astronomer, musician, or any other expert with scorn, but anything is good enough for a conscientious objector. What a sense of humour these men have! Dogberry *v.* Newton, a fair type of the whole controversy. Here is the *Globe* of September 16, 1903, preaching *ex cathedra*:—

#### THE COST OF SMALLPOX.

The report of the Metropolitan Asylums Board in regard to the 1901-2 epidemic of smallpox should be carefully studied by the ratepayers, for whom it has a very practical and important interest. It proves anew

the efficacy of vaccination, but it also makes clear the costliness of the present system of isolation and nursing. It appears that the unpaid part of the debt incurred by the Board in the latter particulars now amounts to over three millions, of which £724,698 is directly due to smallpox cases. The question is, cannot such expenditure be very greatly reduced by the adoption of further measures in vaccination? All the figures go to prove that though vaccination is very efficacious in years of infancy it loses its power in proportion as the child grows into the youth and man. At all times the vaccinated have far greater immunity than the unvaccinated, but the immunity would be more complete if revaccination at the school age were made compulsory. There can be no question that revaccination ought to be undertaken at certain intervals in life. In the case of revaccination at school age the main thing is to convince the parents of its urgency and utility. They have but to study the report to which we refer in order, we think, to be convinced. To take the figures for 1902. In regard to the vaccinated, the deaths between the ages of fifteen and twenty were 2·6 per cent., between twenty and twenty-five 4·3 per cent., and between twenty-five and thirty 6·8 per cent.—an ascending scale which has its obvious significance. The corresponding figures in regard to the unvaccinated were, of course, very much larger—namely 25 per cent., 31·7 per cent., and 41·2 per cent. The believer in vaccination should, therefore, be the believer in revaccination, upon national grounds as well as upon those of economy in expenditure.

But of all these curiosities of literature the following from the *Times* of August 10, 1898, is perhaps champion:—

One of the most curious things in the controversy is the abundance of money which the anti-vaccinators have always appeared to command; and the question of the sources from which this money proceeds, and of the motives of those by whom it is contributed, has become an exceedingly curious one. It may fairly be assumed that the agitation, like other 'anti' agitations, is largely due to people who derive profit from conducting it, and who are called secretaries and so forth; but the difficult part of the problem is to understand why any possessors of money should be willing to part with it for the

furtherance of such a cause. The anti-vaccination 'literature,' so far as we have had opportunities of perusing it, is not of a particularly attractive character, and can hardly of itself be the secret of the prosperity of the movement. It is difficult to understand why a farrago of more or less erroneous statements, couched in what at best is only middling English, should be sufficient to frighten a Government with a strong majority out of its common sense, and to induce it to forego the performance of one of its elementary duties, the protection of the persons of those by whom it has been placed in power.

It further states, 'if all we hear is true, anti-vaccination is a tolerably lucrative profession.'

I do not attempt to express an opinion on the quality of the English indulged in by Mr. Herbert Spencer, Alfred Wallace, and the other anti-vaccinators, but I do say that the above article, unless it is meant to be funny, is far below any criticism. Its argument is on a par with suggesting that the Apostles ran Christianity on account of the large dividends that it returned them. It has been estimated that our doctors make two millions per annum out of vaccination, whereas the agitator against vaccination who has ever made two pence out of his agitation has yet to be found. On no other subject would a responsible newspaper dare to write such vulgar and drivelling nonsense.

The writer of the above article seems to imply that his opportunities of reading anti-vaccination literature (in inverted commas) have been few. He might perhaps get access to a work called *The Encyclopædia Britannica*, and read the article 'Vaccination' therein, the work of the chief of the anti-vaccinators—Dr. Creighton—which is instructive in spite of its indifferent English.

The Worcestershire County Council has passed the following Resolutions:—That primary vaccination be made compulsory (as under the present Act), that re-vaccination at about the age of twelve be made compulsory in the same way; that no certificate of vaccination

be recognised which does not comply with the requirements of the Local Government Board as to the number, area, and size of the vaccination cicatrices; that sufficient facilities should be provided for obtaining a ready supply of glycerinated calf-lymph; that the carrying out of the vaccination laws should be transferred to County Councils.

I do not suppose the Worcestershire County Council would venture to compose an oratorio for their Choral Festival, nor conjointly paint a picture for the walls of the Royal Academy, but being a County Council they of course know all about vaccination. Are they haply all doctors of medicine? or bacteriologists?

Smallpox and vaccination was the chief subject discussed yesterday by the British Medical Association, which is meeting at Swansea. Resolutions were passed urging the necessity of further legislation for vaccination and revaccination, and expressing the opinion that all children should, as in Germany, be vaccinated in infancy, and again at the age of ten or twelve.

VACCINATION AND THE SMALLPOX EPIDEMIC.  
INTERESTING FIGURES.

A meeting of the Metropolitan Asylums Board was held to-day. The decision arrived at on Monday by the Hospitals Committee to erect a new hospital for smallpox patients was confirmed. The hospital will contain accommodation for 800 additional patients, thus increasing the total accommodation of the Board to 2,540 beds, which is 160 below the maximum total suggested by the Royal Commission. An important report was presented to the Board by the Statistical Committee relating to smallpox and its prevention by vaccination. The gross mortality in the metropolitan area for the past year was 24·28 per cent. The total mortality rate per cent. from smallpox in vaccinated cases was 14·21, in doubtful cases 65·08, and in unvaccinated cases 50·52.

The statistics relating to the cases of smallpox treated in the Board's hospitals during the recent epidemic

disclose no new facts, but they strengthen the case for vaccination and re-vaccination. Of 9,659 smallpox cases admitted during the years 1901-2, 6,945 were vaccinated, the mortality amongst whom was only 7·34 per cent.; in 436 cases it was doubtful whether vaccination had been performed, amongst these cases the mortality rate was 39·22; and 2,278 were admittedly unvaccinated, and the mortality amongst them was at the rate of 33·06 per cent.

#### EFFICIENCY OF REVACCINATION.

The Medical Officer of Health for Enfield has prepared a Report on the recent smallpox outbreak in that parish, during which 102 cases of the disease occurred. On the subject of vaccination, he states, that taking the whole of the cases of which information was obtainable, 68 of the patients were vaccinated, of whom four died, a percentage of 5·8. Fourteen were unvaccinated, and five of these died, or 35·7 per cent. Twenty were revaccinated, and among this number there were no deaths. All the officials, nurses, etc., who came into contact with the cases were revaccinated, and not one of them was attacked.

The following is rather remarkable. First of all, the most interesting part of a health report is 'that which deals with vaccination.' Next, vaccination is spoken of as an end in itself—a sort of virtue—and the interesting question is how virtuous the people of England are, what effect vaccination has had is no part of the enquiry: the puff indirect is incorporated at intervals with consummate skill; and we learn that Leicester, which, do what it will, cannot get smallpox, is champion in being 'especially susceptible' to it. I have no reason to suppose that there is any truth in the figures.

#### THE COUNTRY AND VACCINATION—LOCAL GOVERNMENT BOARD'S REPORT.

The Annual Report of the Local Government Board for 1901-2, with Supplement, containing the Report of the Medical Officer for the same period, is now issued.

The most interesting portion of the latter Report is that which deals with vaccination. Statistics suffice to show, it states, that rejection by parents of infantile vaccination, which had steadily increased while the Royal Commission on Vaccination continued its labours, culminated in 1898 in the maximum so far observed of abstention from statutory vaccination; and that thereafter, under the new law enacted in that year, acceptance of infantile vaccination began generally and for the most part largely to increase. For England and Wales, as a whole, and for the Metropolis, as contrasted with the rest of the country, the following figures illustrate these facts:—

	Percentage of Births in each instance remaining unvaccinated in—			
	1893-97	1898	1899	1900
England and Wales . . .	21·0	26·6	20·8	19·9
„ less Metropolis . . .	20·5	25·4	19·4	18·7
Metropolitan Unions . .	23·9	34·4	28·7	26·8

‘ Except as regards the Metropolis, there is here seen in 1900 less abstention from infantile vaccination than in the five years preceding enactment of the new law. And Metropolis and country alike show a conspicuous improvement since 1898. Scrutiny in like fashion of the records county by county reveals similar very general decrease of abstention from infantile vaccination in 1900 as compared with 1898. Of 54 counties of England and Wales no fewer than 50 have improved in this sense; only four had more abstentions in 1900 than in 1898. There are, however, too many counties like London, in which the proportion of abstention from infantile vaccination has not yet been reduced to that of the five years antecedent to enactment of the new law. Counties in this unsatisfactory category, though less numerous than those which have followed the lead of England and Wales as a whole, number 21 out of the total 54 county divisions under consideration. Passing now to separate units of vaccination administration, namely unions, Metropolitan vaccination authorities deserve special attention in view of the disadvantageous position of London as compared with the rest of the country in the matter of protection against smallpox of its child population. Though the Metropolis, as a whole, has exhibited since 1898 increasing acceptance of infantile vaccination, it remained in 1900, as regards percentage

of births vaccinated, far behind the rest of the country. And further, London exhibited in 1900 an amount of abstention from vaccination greater even than in the five years antecedent to the enactment of the new law. In 1893-7 abstention from vaccination in the Metropolis amounted to 23·9 per cent. of the births; in 1900 the figures were 26·8 per cent. To this unsatisfactory state of affairs most of the 31 Metropolitan Unions contributed; but chief among offenders were eleven unions, Mile-end, Shoreditch, Bethnal-green, Poplar, Stepney, Hackney, St. Giles, St. George-in-the-East, St. Pancras, Holborn, and Southwark—all of which presented in 1900 a degree of abstention from infancy vaccination in excess of the mean for the Metropolis.

‘These unions are referred to as “offenders,” for the reason that abstention from vaccination in the Metropolis in 1900 was almost wholly without legal warrant. In no single union did “certificates of conscientious objection” amount to three per cent. of the births, while in three only of the eleven unions above named did objection of this sort exceed one per cent. As in London, so in the Provinces, particular unions and groups of unions have been responsible for degradation, statistically, of whole counties in the matter of infantile vaccination. Conspicuous among counties thus rendered *especially susceptible to smallpox* in their child population are Leicester, Bedford, Northampton, Derby, Wilts, Gloucester, and Radnor; all of which exhibit, in 1900, births “not vaccinated” in proportion exceeding 30 per cent. But among the unions constituting counties thus unfavourably *circumstanced to resist epidemic smallpox*, there is not observed, as is largely the case in the Metropolis, uniform disregard of the law.’

In dealing with the London smallpox epidemic of 1901-2, the Report states:—‘It has not been necessary, or indeed expedient, to differentiate in this Report degrees of excellence among those Metropolitan Boroughs wherein sanitary administration in the face of epidemic smallpox was, on the whole, of a high order, nor, on the other hand, to specify from among a plurality of Boards of Guardians those whose work in the smallpox emergency was specially and unenviably conspicuous for default of vaccination administration. One vaccination authority, however, among those whose action was found commendable, may be mentioned as having acted with great

efficiency on the lines of the Local Government Board's Orders, Circulars, and Memoranda. This was the Board of Guardians for St. Giles and St. George, Bloomsbury. Under this vaccination authority very thorough measures were adopted in control of smallpox at an early stage of the epidemic.'

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Considering the methods by which Jennerian statistics are manufactured, it would be wonderful indeed if they did not redound to the glory of vaccination. In their logic, roughly speaking, the vaccinated = those that recover from smallpox, and the unvaccinated = those that do not. Children vaccinated too recently are classed as 'unvaccinated' if they die, 'vaccinated' if they recover. The same applies to those who 'say they have been vaccinated.' The large class called 'doubtful,'—that is those likely to cast doubts on the efficacy of vaccination—for any doubts as to a man's vaccination are easily removable, more easily than doubts as to his being married—is left as an unknown quantity, to go on to neither side. And the children who die properly vaccinated are returned as dying of chicken-pox, a disease of which one cannot die. These and various other dodges enable them to invent such figures as the above. But unfortunately they topple over on the other side, and their transparent exaggeration is enough to discredit any other statement made by the priests of Jenner.

It is a well-authenticated and acknowledged fact that before Jenner was invented the maximum of deaths per hundred cases was eighteen. This was a very constant average and is the same to-day. And we are asked to believe that nowadays fifty or sixty per cent. of the unvaccinated die. In making this statement they either believe it or not: if they do, their intelligence must be below arguing point; if they do not, the same applies to their morality. For if it were true, it would prove that either vaccination or our modern sanitation had tripled the fatality of smallpox, or that

modern doctors are so much the more incompetent, or that the unvaccinated are wilfully maltreated. I do not pretend to know which explanation they offer.

This is what is called 'the other side.' This is the wisdom and these are the figures with which the public is fed, and on which the creed rests.

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But the generally accredited theory, that the doctors are unanimously in favour of vaccination, is a perfectly false one. Very few profess to know anything about it, and of those that do, no two seem to hold any view of its nature, action or application in common. But hundreds hold it to be an abominable wickedness. And if there are two camps, why should the interested one be right *à priori*? In no other suit should we allow the judge and jury to be interested parties. What have the anti-vaccinators to gain? Absolutely nothing. To the other side it is credit and actual existence.

So that as far as authority is concerned, we have on the one hand scientific investigators of the question, who are independent men, and others who have in many instances sacrificed their professional career in order to tell the truth: and on the other, an endowed official body whose existence depends on the acceptance of the heathenish doctrine that they are highly paid to maintain. Naturally, the priests of Baal believed in their god.

Dr. J. R. Newton says:—Vaccination is a practice that causes a vast amount of disease and suffering. Its effects are far more terrible than the disease it is designed to prevent. No matter how pure the vaccine matter may appear to be, virus is left in the system, which will, sooner or later, be developed in scrofula or some other filthy disease. Were I to relate a few of the cases that have fallen under my observation of persons injured by this practice, it would fill the mind with horror.

Dr. William Forbes Lawrie (St. Saviour's Cancer Hospital):—Being anxious not to do mischief to my fellow-creatures, and being, as regards my own family, liable to fine or imprisonment under the Compulsory Vaccination Act, I lately wrote to some M.P.'s on the subject. I asked them to come here and see for themselves the dismal results of vaccination in cases of paralysis, blindness of both eyes, hip-joint disease, consumption, and frightful forms of skin disease. Though I received replies they have not yet inspected the cases. I can add my testimony to that of Dr. Ange, who was seventeen years engaged in the Isle of Wight in curing cancer, to the great increase of cancer all over the kingdom. This is attributed by some medical men to the large amount of syphilitic disease with which vaccine lymph is impregnated; by others to the direct impregnation of healthy persons with lymph imbued with scrofulous and cancerous matter. In this way they account for the large increase of cancer in all parts of the body, throughout the kingdom generally.

Dr. Samuel Eadon, M.A.:—Is there any wonder, with such abominable fouling of the human body, that consumption, scrofula, syphilis, cancer, and the whole vile train of skin diseases, should start up, and rage on with maddening intensity, making life miserable, swelling to a dreadful extent the bills of mortality, and curtailing, by many years, the length of human life ?

Dr. Alexander Wilder, Professor of Physiology:—Vaccination tends directly to impair the integrity of the body. It is certainly the profaning of everything sacred in a person. When this impairment has occurred, the person will always be more liable than ever to sickness and epidemics. Hence a vaccinated people will always be a sickly people, shorter lived and degenerate.

Professor Robert A. Gunn, M.D.—Even if there was any evidence to prove that vaccination was a prophylactic

against smallpox, the appalling evils that have been and are still produced by it are sufficient to condemn the practice as a crime.

Dr. Thomas Skinner, L.R.C.S.—That there are many who die of vaccination I have no doubt whatever; that they are maimed for life I have no doubt; and that scrofulous and other forms of disease are rendered active by it every physician in family practice knows to be an almost every-day occurrence.

Dr. Stowell.—Vaccination is not only an illusion, but a curse for humanity—more than ridiculous—it is irrational to say that any corrupt matter taken from boils and blisters of an organic creature, could affect the human body otherwise than to injure it . . . I myself know the names of a hundred physicians who think like me.

Dr. Turnbull.—He was sure there was not a single medical man who would not alter his views respecting vaccination, if he studied the subject for thirty-six hours.

Dr. John Epps, twenty-five years director of the Jennerian Institute, had vaccinated about 120,000 people, but finally declared, 1861—The vaccine virus is a poison. As such it penetrates all organic systems, and infects them in such a way as to act repressively on the pox. It is neither antidote nor corrigent, nor does it neutralise the smallpox, but only paralyses the expansive power of a good constitution, so that the disease has to fall back upon the mucous membrane.

Dr. T. L. Nichols, F.A.S.—Syphilis, scrofula, and probably every kind of blood-poison can be taken by vaccination, which, so far from being a protection against smallpox, seems to have been one of the chief causes of the late epidemics . . . There is no doubt thousands have been mortally poisoned by vaccination.

Dr. Pearce.—This frightful mortality of infants is the direct consequence of vaccination; a natural result . . .

Compulsory vaccination may be defined to be manslaughter by Act of Parliament.

The above are a few specimens out of hundreds.

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It seems incredible that in the teeth of such damning evidence, the fiend-ship should sail on.

Ever since the days of Jenner vast numbers of doctors have been exposing it, and yet it goes on gaily dancing its dance of disease and death. How it interests such people as schoolmasters and shopkeepers to keep it going is to me quite unintelligible. Not only do they force it on their fellow-creatures, but they assume the right to dogmatise and even legislate upon it. Lately, a number of such people petitioned the government to enforce revaccination. *Quem Deus vult perdere!*

A deputation from the Imperial Vaccination League waited upon Mr. Long yesterday. Memorials were presented urging legislation, making revaccination at school age obligatory on all but the children of conscientious objectors, or those who may be for a time excused on the ground of ill-health. The President of the Local Government Board, in reply, said the only wonder was that it should be necessary in this part of the world's history, that a deputation should have to go there in support of vaccination, which ought to have the unqualified support of every intelligent person. The more he studied the matter the more difficult he found it to understand why vaccination was not believed in. His department would do nothing calculated in any way to lessen, what he believed to be the very great advantage of the general adoption of vaccination as a protective against the terrible scourge of smallpox.

Such people, I find, refuse to discuss the question altogether, or, if they do condescend to speak of it, treat you to their worn-out stock in trade. 'When I was a boy every other face was pitted with smallpox.' If they are sixty,

forty, or twenty years old, the statement is supposed to be of equal weight. To be of any value as an argument, their youth must have occurred before 1853, and the argument would equally point to the view that in old days people had smallpox, and survived, whereas they now all die. What I can confidently assert of my reminiscence of childhood, is that I never saw children wearing spectacles, which is now of everyday and universal experience.

Then we have the fiction of the hospital nurses. 'Hospital nurses are all vaccinated and never catch smallpox.' It is not true that they are all vaccinated, nor that they never catch smallpox. What is true is that doctors and nurses for various reasons rarely catch the disease they are nursing, whatever it may be. Further, as vaccinated persons who are not nurses *do* catch smallpox, it only proves that being a nurse is the prophylactic, and we cannot all be nurses, even if an intelligent and paternal government passed a 'Compulsory Nurse Bill.'

If we had compulsory cleanliness instead of compulsory uncleanness we might fairly hope to make an end to nearly all diseases.

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I must further quote Mr. John Pickering, F.R.G.S., F.S.S., F.S.A., etc., who has spent forty years in closely studying the question. 'It (Vaccination) is filling the homes of the people with disease, and disease susceptibilities. It is communicating directly the seeds of Syphilis, Scrofula, Eczema, Erysipelas, Erythema, Pyæmia, Cellulitis, Rickets, Psoriasis, Septicæmia, Marasmus, Impetigo, Meningitis, Pityriasis, Angio-Incitis, Mesenteritis, Prurigo, Gangrene, Blindness, Phthisis, Pneumonia, Tuberculosis, Bronchitis, Diarrhœa, and Convulsions: together with such diseases (often fatal) as Strumous Eruptions, Abscesses in Axillary Glands, Diseases of Bones and Joints, Boils, Ulcers, and Sloughings—this is

its work. And all for what? Ostensibly to save the peoples of the earth from smallpox! What a terrible, pitiable, panic-mongering sham! Of all the millions of vaccinations performed amongst the peoples of the world, vaccination never saved a single individual from having smallpox, and in no single case did it modify an attack of that disease—reckoning from the days of Jenner until now.'

I do not profess to know what the majority of the above diseases are. They sound like a merry crew: and I can understand that a mother who had as many children as vaccination would be hard put to it to find them all names.

This list was arrived at as follows. In 1883 a Committee of Enquiry, consisting of some thirty medical men, was formed with the object of ascertaining the opinions of the profession on some phases of the vaccination question. Seven circular questions were submitted. Of several hundreds of circulars posted, 384 answers were received. One of the questions was: 'What diseases have you in your experience known to be conveyed, or occasioned, or intensified by vaccination? The above list is made from their answers.

Appendicitis has now to be reckoned with: is that a new offspring of vaccination? and how about anæmia and others?

Perhaps the most ghastly of all is Leprosy, which vaccination is sowing broadcast, and introducing into places where it was unknown. A whole volume of evidence of this has been published by Mr. Tebb, from which I extract one letter.

ST. THOMAS, DANISH WEST INDIES,

*October 20, 1891.*

I have read the report of the evidence given before the Royal Commission on Vaccination in London with much interest, and with regard to the connection between vaccination and leprosy, an experience in these

islands of over twenty years, enables me to confirm the truth of this terrible indictment. On more than one occasion cases have come before my notice of leprosy in families which could only have been inoculated with the vaccine virus, none of the family having previous to vaccination been afflicted with this malady. Leading dermatologists in all parts of the world, and the most experienced physicians in the West Indies, are of the opinion that leprosy is spread most readily by means of inoculation, either through a wound or an abraded surface, and still more readily by puncturing contaminated vaccine virus into the arms of healthy persons. The reports of the medical officers of health and physicians to the leper asylums in the West Indies, show that leprosy, which thirty years ago was stationary or subsiding, has increased. This, I have every reason to believe, and it is also the opinion of other competent medical men, is coincident with the introduction and spread of vaccination, for there are a number of islands where the disease was almost unknown previous to its inoculation in this way. Were it not for the reluctance which all physicians have, to expose families tainted with leprosy, they could give evidence as startling as the cases mentioned by John D. Hillis of British Guiana, Dr. Bechtinger, formerly of St. Thomas, Dr. R. Hall, Bakewell, and Dr. Black of Trinidad. The possibility of spreading such a dire disease by means of the lancet, is one too grave to be longer disregarded, and it is needless to say, a serious matter for these islands, the most lovely in the world, where children, whose parents may be the most healthy, are liable to leprosy through arm-to-arm compulsory vaccination. May I venture to hope that the English Press will have the humanity and courage to speak out, and compel colonial authorities to withdraw the vaccination enactments, which on these grounds alone are so dangerous to ourselves and our families?

CHARLES E. TAYLOR, M.D.

The hope is indeed venturesome! The Press care as much about it as do the Imperial Vaccination League. What is the health of the West Indies compared to the fame of Jenner?

In 1888, in England and Wales, there died from

Bronchitis,	. . . 57,571	of these, 26,113	were children under 5.
Pneumonia,	. . . 30,844	„ 13,227	„ „
Atrophy and Debility,	20,741	„ 19,916	„ „
Diarrhœa,	. . . 12,839	„ 10,497	„ „
Convulsions,	. . . 20,764	„ 20,495	„ „
Measles,	. . . 9,784	„ 8,934	„ „
Scarlatina,	. . . 6,378	„ 4,205	„ „
Hydrocephalis,	. . . 6,743	„ 4,945	„ „
Whooping-Cough,	. 12,287	„ 11,859	„ „
Diphtheria,	. . . 4,815	„ 1,500	„ „
Tabes Mesenterica,	. . . 6,774	„ 5,588	„ „
Syphilis,	. . . 1,927	„ 1,566	„ „
Scrofula,	. . . 4,917	„ 2,505	„ „
Causes not specified,	2,814	„ 1,365	„ „

Mr. Pickering adds: 'I do not represent the above deaths as all being due to vaccination: I do say that a vast proportion of them are.'

It seems to be accepted as the natural order of things that infants should die in thousands of the above hideous diseases though born perfectly healthy: although the frightful increase of such deaths seems to be startling the world at last. And conferences or commissions enquire into it as an interesting speculation. This ghastly mortality is only found where there is vaccination. But it is, of course, nonsense to talk of vaccination as the cause of death! The baby dies of bronchitis, or pneumonia: very likely, but why does it get these diseases? If the hundreds of thousands of pounds spent in poisoning these children were spent in helping them to get better sanitation, this death-roll would be diminished. This view is not hypothesis, it is fact; wherever there is least vaccination there is least infant mortality. Any one that cares to, can read this for himself. It does not want the knowledge of a doctor to read and understand simple statistics, when intelligently and honestly compiled, but it takes very much more than the knowledge of a doctor to make them.

Drink, dirt, and vaccination seem to be the sole causes of death, other than accident and old age. In fact it is hardly exaggeration to say that vaccination *is* disease, and that without it there would be no disease; that is, infants would survive what they now die of; they die of bronchitis+vaccination, convulsions+vaccination, smallpox+vaccination, etc. The object of medicine is to get the intrusive poison out of the blood, poison being the hot-bed of disease, the patent method of the vaccinator is to put the poison in and keep it there.

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I subjoin Mr. Biggs's Leicester statistics: if a man is not convinced by these, he certainly would not be persuaded though one rose from the dead.

‘Perhaps in the whole range of vital statistics it would be impossible to find a more conclusive example of the superiority of sanitation, as compared with the influence of vaccination, than by contrasting the death-rate of Leicester—a town famous for its opposition to vaccination—with the death-rate of the whole of England and Wales. This test is severe, because it is a comparison between the death-rate of an *urban* and *manufacturing* population (Leicester), with an *urban* and *rural* population taken together (England and Wales). The following table sufficiently explains itself:—  
Comparison of the death-rates for Leicester and the death-rates for England and Wales, according to the returns of the Registrar General, in quinquennial periods from 1868 to 1889.

	1868-72.	1873-77.	1878-82.	1883-87.	1888-89.*
Average annual death-rate per 1000 living in Leicester . . . .	26·8	24·5	22·2	19·9	17·4
Average annual death-rate per 1000 living in England and Wales	22·2	21·4	20·2	19·2	17·9
Difference against Leicester . . . .	4·6	3·1	2·0	·7	·5 in favour of Leicester
Fall in the vaccination rate for Leicester, while in England and Wales vaccination remained nearly stationary . . . .	91·7	80·0	66·7	29·9	5·1

\* An average of two years only is taken, because when this table was prepared the Registrar General had not issued an annual report since that for 1889.

‘ It will be seen from the above table that in 1868-72, with the vaccination rate at 91·7, the death-rate for Leicester was 4·6 above the death-rate for England and Wales per 1000 living. The average annual population of Leicester during those five years of high vaccination was 92,873. Therefore, no fewer than 427 deaths took place in each year, or a total of 2135 more deaths for the five years than should have occurred, had the death-rate been the same in Leicester as that of England and Wales. During the five years 1873-77 the vaccination rate declines from 91·7 to 80·0, and the excess of deaths falls from 2135 to 1640 upon an average population of 105,913; the difference in the death-rate of Leicester and that of England and Wales having declined from 4·6 against Leicester to 3·1 per 1000 living. In the quinquennium 1878-82 the vaccination rate declines to 66·7, and the difference in the death-rate to 2·0, which on an average annual population of 120,059, gives an excess of 1200

deaths in Leicester for the five years. In the quinquennial period of 1883-87 the vaccination rate falls to 27·9, and the difference in the death-rate declines to ·7, which on the average population of 136,147, represents an excess of only 475 deaths in Leicester for these five years. The correspondence in the decline of the death-rate and the practice of vaccination is remarkable. Taking the two years 1888-9, when the vaccination rate has fallen to only 5·1, the death-rate for Leicester, which from the beginning of registration in 1837, had *always been higher* than the death-rate for England and Wales, *falls below*, and is ·5 in *favour* of Leicester. It must be borne in mind that England and Wales include all the rural districts where the death-rate is very low, and therefore this test is one of the most crucial that can possibly be applied.

‘These comparisons lead us to a far more important consideration. It is to enquire what would be the saving of life had England and Wales maintained the relative decline in the death-rate, which, with decreasing vaccination, was attained by Leicester. From its death-rate being 4·6 above England and Wales in 1868-72, it falls to ·5 per 1000 below for the years 1888-9, or a gain of 5·1 in favour of Leicester per 1000 living. This gives us the following astounding result:—Had the death-rate of England and Wales, with vaccination almost stationary, declined at the same rate as that of Leicester, with rapidly decreasing vaccination, taking the population at an average annual of the Registrar-General’s estimates for 1888-9, namely, 28,822,208, no fewer than 146,992 lives would have been saved annually, which were otherwise lost presumably through the untoward influence of vaccination. Even if we allow the 46,992 lost lives to be deducted from the calculation for possible error, the result is sufficiently appalling to arrest the attention of the most thoughtless mind in the country. Nor need this be considered an extravagant assumption, because, apart from the

fact that vaccination is now known to convey a large number of fatal diseases, and predisposes to others, yet, speaking generally, the progress of sanitation has been fairly equally distributed over the country, leaving no other cause than vaccination to account for this terrible loss of life.'

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No doubt the majority of the ordinary vaccinators are acting in perfectly good faith, though in utter ignorance, and believe that by vaccinating they are benefiting the human race, but the criminality begins when they refuse to learn why the objector objects, and when they only mete out abuse and boycotting instead of meeting their foe in fair fight. All the anti-vaccinist literature is as temperate as it is convincing, and the Jennerians put it into the waste-paper basket! Their one argument is abuse.

For instance, Dr. Dingle writes to the Secretary of the London Society for the Abolition of Compulsory Vaccination.—'All the good I wish the Society is that every member may die of smallpox within six months. I would not vaccinate one of them on any account.'

How would this letter read pointed the other way? 'All the good I wish the Imperial Vaccination League is that every member of it may die within six months, of leprosy, cancer or tuberculosis. I would not on any account let them know of the dangers of vaccination.'

And Dr. Blake to the same.—'To my mind, the person who offers obstacles to carefully performed vaccination, is a blockhead—or must be a murderous and unscrupulous knave. Too many such rascals are, I fear, to be found in my profession.'

This is the sort of thing that removes the last vestige of respect which the other side may have tried to feel for a loyal opponent; and when we read of Dr. Seaton telling the Royal Commission that the poor man goes to prison,

not for his conscience' sake, but to be made a martyr of, and 'to get a silver watch'—whatever he may mean; and Mr. Marson the great vaccinator, who tells them, that the working-man refuses vaccination in order that the babies may die and that he may have as few as possible to work for, we must be staggered in view of the lengths to which the cult of this goddess of uncleanness can drive a man, who occupies not only a respectable, but a responsible position in life.

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From the Imperial Vaccination League downwards, the Jennerians refuse all discussion; naturally enough, they know well enough what the result would be. And they affect to believe that the anti-vaccinator is an unlettered clown who is simply rebelling out of mere wantonness against good government. The anti-vaccinators are simply those who know something about the question, who refuse to shut their eyes to glaring facts, and prefer prison to seeing their offspring massacred. They have no Archbishop nor Home Secretary on their staff, but they have the highest medical authorities in the land, the greatest statisticians, and the most earnest thinkers. Dr. Creighton, Professor Crookshank, Dr. Alfred Wallace, Professor Newman, Herbert Spencer, are names that not even a Jennerian can afford to despise; not to mention the host of scientific doctors of all nations that belong to their ranks.

No professional Jennerian dares meet these men in argument, and as for the amateur, the schoolmaster, and the shopkeeper, it is not easy to see why his opinion should have an ounce more weight than that of the most ignorant clodhopper.

'The anti-vaccinists,' says Dr. Creighton, 'are those who have found some motive for scrutinising the evidence, generally the very human motive of vaccinal injuries or

fatalities in their own families or in those of their neighbours. Whatever their motive, they have scrutinised the evidence to some purpose; they have mastered nearly the whole case; they have knocked the bottom out of a grotesque superstition. The public at large cannot believe that a great profession should have been so perseveringly in the wrong . . . It is difficult to conceive what will be the excuse made for a century of cowpoxing; but it cannot be doubted that the practice will appear in as absurd a light to the common sense of the twentieth century as blood-letting now does to us.'

Vaccination was cradled by the aristocracy, and hence probably got its vogue. Had it sprung from the people it would never have been tolerated for a moment. But kings and dukes and bishops were its sponsors. It does not require all that patronage to persuade us that salmon is fit to eat, or that quinine is good for fevers; it stands condemned by the very fact that it requires all this touting and private societies to force it. Why the whole nation should have fallen into a religious ecstasy over so revolting a matter is not easy to see. One would not have expected so foul a subject to be capable of kindling such heart-felt enthusiasm. Is it its very foulness that is the cause? Is it a sort of unconscious revolt against the constraints of decency? Would any other filth get such a strong hold on the affections of mankind? Many other things are disgusting enough without being indecent, whereas vaccination is so revolting that one can tell only one half of the truth about it in public. Rider Haggard, whose knowledge of the subject is peculiar if not extensive, has written a novel upon it. Coleridge proposed writing a poem on it, though 'Inoculation, heavenly maid,' had already appeared. This 'heavenly maid' had, according to Moore, its historian, killed millions. For three-quarters of a century it occupied the position that vaccination has now held for a century. This latter was

very soon suspected of being an equal fraud, and was fully proved to be so when an epidemic came. And by degrees its deadly destructiveness was discovered. But it was highly endowed by the State, and had therefore to be bolstered up. Compulsion and lying, either of which alone is enough to prove it guilty, have kept it alive to this day; and to-day the question before an intelligent world is, whether its efficacy having been fully proved it should not be compulsorily doubled owing to its total inefficacy!

Vaccination is really far worse than inoculation. With this latter you knew at any rate that you were infecting a man with smallpox, now nobody knows nor pretends to know what a man is infected with, till some loathsome disease attacks him, which it does sooner or later in thousands of cases, however healthy and clean his life may be.

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We learn officially that opposition is rapidly decreasing, while, as a matter of fact, new societies for its suppression are springing up one after another in all the chief towns of the land. The following letter deals with this:—

#### VACCINATION STATISTICS.

32 UPPER PARK ROAD,  
HAVERSTOCK HILL, N.W.

SIR,—With regard to your interesting comment of Wednesday last on Lord Balfour's equally interesting speech to the Scottish anti-vaccinists, I should be glad if you would allow me to explain the English exemption certificate statistics, from which you have, in the absence of the necessary explanation, very naturally drawn wrong inferences. The certificates granted in the last quarter of 1898 were granted in respect of unvaccinated children of any age, and were in a multitude of cases given in respect of several children in one family. But in 1899, and since, these certificates could only be, under the statute, applied for in respect

of children not more than four months old at the date of application. Thus you cannot compare the statistics for 1898 with those for subsequent years. The figures for 1899 and subsequent years are fairly comparable, and show, as you say, 'no great increase' in the number of certificates granted. Still they do show an increase, not a decrease, and this in spite of the increasing disposition of Magistrates to intimidate applicants, and even to refuse to be 'satisfied' that the applicant is a conscientious objector.

I should like, if permitted, to add that in any case it is not possible to base any trustworthy argument on these statistics, because the sturdiest objectors of all repudiate the conscience clause altogether, and decline to ask any Magistrate for permission to refrain from communicating vaccinia to their healthy children. The increase of vaccinations in London is an equally untrustworthy guide on the subject of objection, and will remain so as long as vaccinations are not voluntary. Much cruel pressure has been put upon poor people in London to be vaccinated since the vaccination fees were increased, and the occurrence of smallpox enabled medical officers to play upon the fears of employers, and to persuade them to threaten conscientious objectors with loss of their livelihood. I observe that even the *Scotsman* still approaches the consideration of the conscientious objector with the assumption that he is 'one-idead and fanatical.' The deputation to Lord Balfour is an indication to those who have seen it to be a mistake to treat this question as a 'chose jugée' that the Scots are beginning to look into it without prejudice. You have more conscientious objectors in Scotland already than you know of.—I am, etc.

ALEX. PAUL.

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Vaccination is very like hiring a gang of thieves to guard your home against a certain well-known burglar, who is said to be always prowling about your neighbourhood. It is true you have only the policeman's word for this, but he lets out the professional thieves, and he ought to know: burglary is essentially a policeman's question. There are some who

say that this burglar—this bogey-man—is in reality a very harmless character, and that if you treat him civilly and keep your things locked up, he will leave your premises alone and never dream of attacking you. But the policeman tells you a very different tale. He knows all about the burglar's past career, and the police record against him is something awful! he used to rob whole towns once, but since the thief system has been discovered—it is called by a grand Latin word, *latrocinization*—he has grown much more shy. He never dreams of entering a house that is well peopled with thieves. It is true the householder misses his property at intervals just the same, or even more; the pocket-money he gives his children keeps mysteriously disappearing, but that is only when the thieves get sleepy. Some people, who are fools and idiots, have gone so far as to suspect the thieves themselves of having stolen the property, or of having secretly admitted the burglar, as nothing is known of their character, the policeman always refusing to give them one, though they all come from Scotland Yard and are all ticket-of-leave men. This suspicion naturally makes the policeman very angry. Some have gone even further, and suspect the thieves of being far worse than the burglar, especially as he seldom comes in reality, though the policeman is constantly calling to say he is just round the corner, and they are always on the spot admittedly. This has led to some suspecting even the policeman himself, so that some communities are in a perfect muddle on the subject, some of them not believing even that there is a burglar at all, and these have given up the thief system of defence altogether, though they have built a dungeon and forged fetters in case of need. But the municipal authorities in most cases very properly refuse to allow this, and imprison the leading inhabitants as a warning; for not only is the character of their own policeman assailed by this unorthodox slackness, but Scotland Yard itself is insulted: it is furthermore well

known that no dungeon or fetters can hold the burglar for five minutes; and every one knows from experience that the thief system has diminished burglary enormously, the inventor of which system was the cleverest man that ever lived, and those that think otherwise are fools and liars, and deserve to lose all their valuables.

Or it is putting a thousand demons into the blood to eat up a certain big devil, if he should happen to get in; but if he does not come, how do the demons avenge themselves? Do they lie still content to eat nothing for ever? Yes; and this is where the science comes in: this is the great Jennerian discovery. These demons detect the big devil with the cunning of serpents and go at him and devour him, and then go to sleep again and are as harmless as doves. They were specially designed to eat him and none other. And their birth is no less marvellous than their qualifications. You must first find a horse with a diseased heel, next get a stableman to touch this filth, then he must forget to wash his hands, and go and milk a cow, and the cow must contract a disease from his dirty hands, and this disease you must put into a human being. It sounds a rather elaborate recipe, but is really simple enough. It is not difficult to find a diseased horse, a dirty groom, and a cow to be milked. Oh, the boundless buffoonery of it all! How soon shall we have become the laughing-stock of the ages?

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As for the filthmongers generally, whatever corruption they cultivate wherewith to infect the human body, whether they keep calves permanently diseased, or a kennel of rabid dogs, not to mention the people who cut up live animals, they may be very clever, but let them not pretend that they are doing the service of God as revealed in the Bible, the God of love, mercy, and purity. Uncleanliness is next to devilry, and those who cannot see it must have had their eyes blinded by the devil whom they serve.

And we who say all this are only 'faddists.' When a man has called another a faddist, he seems to think he has given him the happy despatch. A faddist is a man who differs from the speaker in opinion, or one who, having given his attention to a given subject, has arrived at a conclusion at variance with that of the majority. Such men were St. Paul, Galileo, and others. But their being faddists did not prove them wrong. Personally I consider the titles 'faddist' and 'quack' the most complimentary in the language.

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There is one argument which the Jennerians might well use: 'If it is true that instead of being a benefit, vaccination is so well known to be a deadly danger, how is it that Dr. Creighton and the other high authorities do not put their foot down with firmness enough to quash it at once and for ever?'

I give them this, for I cannot answer it. All I can say is, that the truth has never yet been established by Act of Parliament, but has to grow like the grain of mustard. And, it seems, it must be the same in this case. The Imperial Vaccination League are to have emissaries to go about the country, like Kensit's preachers, to convert the people. It will be interesting to see whether they will fulfil this rash promise. If confident of their case, it seems odd that they should determinedly refuse to meet any opponent in discussion. Their consistent fear of the foe is very suggestive. The quality of their panoply can be judged by reading Dr. Bond *v.* Mr. Milnes in the *Daily News* of Oct. 31 last, or Peter Taylor's answer to Dr. Carpenter. Or take the following correspondence between Mr. Paul and the Chairman of the Statistical Committee of the Metropolitan Asylums Board:—

DEAR SIR,—In a statement of the Statistical Committee's Report, widely quoted, it is explained that the rise in the death-rate from 4·7 in vaccinated cases between 20 and 25 years of age to 18·07 in cases between 35 and 40 shows the diminution after the age

of 20 years in the protective power afforded by infant vaccination.

I observe from the table on p. 167 of the Report that there is also a rise in the death-rate of those supposed to be *indubitably unvaccinated* at the same ages. May I ask what is the theory of the Committee regarding the increased death-rate in their case, where there is no vaccination influence wearing out?—Yours sincerely,  
ALEX. PAUL.

*September 23rd, 1903.*

DEAR SIR,—In reply to your letter of the 23rd inst., I have to say that it is no part of the duty of the Statistical Committee of the Metropolitan Asylums Board to deal with theories—they are alone concerned with facts.—I am, yours faithfully,

WILLIAM R. SMITH, M.D.

The average schoolboy who did not know the meaning of the words 'fact' and 'theory,' and who dared to give a superior such an insolent and ignorant answer would, I hope, be flogged.

Or does the Statistical Committee issue two columns, the one that points to the triumphs of vaccination being labelled 'fact,' and the other 'theory'?

Explorers into the unknown regions of the earth, inquirers into the unknown realms of science are all admired and honoured: inquiry into this one secret—vaccination—is burked, and its explorers are browbeaten, boycotted, bullied, and blasphemed.

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The perusal of *Vaccination a Delusion*, by Alfred Wallace, will demonstrate to any impartial mind the fallacy of the whole creed; and William White's *Story of a Great Delusion* will give him the complete history of the movement, by which he can form his own judgment. In fact, if a man does not want to learn the truth, he had better read nothing, but nurture that plentiful lack of knowledge which tends to vaccination; if he does, the smallest pamphlet from the

library of 50 Parliament Street will teach it him. 'He that is filthy, let him be filthy still.'

I do not profess to know anything about medicine, but vaccination is not medicine but magic, and I do claim the power to see through a conjuring trick as clearly as a man who has taken a doctor's degree. I have read every book on the subject that I have been able to get hold of, and I cannot, without stultifying my reason, come to any other conclusion than that vaccination is the basis and hotbed of nearly all the modern diseases from which we suffer, including smallpox, and that its power to avert or mitigate smallpox is the same as its power to avert or mitigate earthquakes. And I must confess that I consider the man who does not care or who refuses to learn the truth of this most awful and momentous question as a criminal: no responsible Christian man has the right to shut his ears to the bitter cry of his fellow-creatures: and as for the man who has inquired and cannot see the issue, he is of course to be pitied, not blamed.

This suggests a thought, an absurd one no doubt—it is an absurd supposition that a Jennerian as such should ever step over the border into the realm of common-sense—but suppose that it one day were put into the heart of some responsible Jennerian, say an Archbishop or a Home-Secretary, to argue, 'These anti-vaccinators seem not to be exclusively the scum of the earth, amongst them are clever men; men like Creighton and Herbert Spencer must mean something by it, and though I fear neither God nor man in this matter, yet it would be interesting to know what they have to say for themselves, they seem to think they know as much as I do,' and he were to get up their case by reading something on the subject, why, by evening he would realise that he had hitherto been an active partner in a wholesale murder company, unlimited, and that he had been killing hundreds of thousands of his fellow-creatures.

What would result ? It is an idle question, but an interesting problem.

The following tissue of lies and nonsense is written in all seriousness, and is the whole Jennerian creed :—

#### THE ANTI-VACCINATION DELUSION.

The opponents of vaccination have lately held their annual meeting. They continue to abuse the most beneficent Acts that were ever passed. It is a curious study to notice the pilgrimage to Paris from every country in Europe and from America of those in danger of hydrophobia to take the chance of safety from a new and as yet unproved kind of inoculation, and the contemporaneous meeting of a few victims of the anti-vaccination craze in Bloomsbury to disparage and denounce the vaccination whose efficacy has been proved to demonstration by the all but absolute immunity of smallpox hospital nurses. Much was made of the freedom of Leicester and other places from smallpox. The test is to come, and then not a few who are now decrying vaccination will either rush off to the vaccination office, as those bitten by mad dogs are doing to M. Pasteur, or pay the penalty of disfigurement or death. After all, smallpox is the schoolmaster that drives people to vaccination and keeps green the fame of Jenner.—*Lancet*.

#### REVACCINATION.

In prospect of another epidemic of smallpox it is but our duty to place on record the more recent evidence of the wonderful completeness of the immunity from smallpox conferred by the revaccination of adults. Mr. Marson's remarkable experience is familiar to every member of the profession—that during the thirty-five years he had been medical officer of the Smallpox Hospital, he had never known a nurse or servant to contract the malady. He says, 'I revaccinate them when they come there, and they never have smallpox, although they are exposed to the infection every day.' But it may be said that this is old experience, and something newer is wanted. In the recent dreadful epidemics, has the reputation of revaccination survived the terrible test of life in a smallpox hospital ? It has done so splendidly, as the

following facts, from an article by Dr. Collie, in 'Quain's Dictionary of Medicine,' will show. During the epidemic of 1871, 110 persons were engaged in the Homerton Fever Hospital, in attendance on the smallpox sick; all these, with two exceptions, were revaccinated, and all but these exceptions escaped smallpox. In the epidemic of 1876-7 all revaccinated attendants escaped the disease, while the only one who had not been vaccinated took the disease and died of it. In the epidemic of 1881, of 90 nurses and other attendants of the Atlas Smallpox Hospital Ship the only person who contracted smallpox was a housemaid who had not been revaccinated. It must be clearly understood that the revaccination here referred to is what Dr. Collie calls successful revaccination. Revaccination that does not succeed is useless, and worse than useless—it deludes the patient into a false sense of security. It is most important that revaccination should be performed only with recent lymph, with enough of it, either direct from the arm or preserved in hermetically sealed tubes, taken from healthy children and with clean lancets. Revaccination so performed will result, in a large proportion of cases, in more or less vesiculation and slight malaise. When no result is produced, the operation should be repeated, with still more attention to the conditions of success we have mentioned. The troublesome people, who do not take easily, should not be given up till they have been vaccinated with lymph direct from the arm. Mr. Marson did not repeat revaccination; but when this operation is performed about puberty, or earlier, as it should be in epidemic seasons, it ought for safety's sake to be repeated once in adult life. The facts adduced by Dr. Collie are not less interesting as showing the liability of persons who have not been revaccinated to contract smallpox—generally, but not always, in a mild and modified form—than as showing the security of the revaccinated. It is enough to place these facts before the public and the profession. They are the despair of anti-vaccinationists, and they constitute the most brilliant illustration of the beneficence of the art of medicine. All protectives against smallpox, compared with this, are a sham. The best constitution in the best situation is mocked in its contest with this disease if not partially protected by vaccination, or wholly by revaccination.

—*Lancet.*

## SMALLPOX RISKS

While some members of Parliament are trying to make themselves conspicuous by attempts to disparage vaccination, the plague of smallpox is extending its deadly work in London and some of the provincial towns in a most painful manner. Mr. Hopwood bores the authorities of the local Government Board with attempts to find out whether a case of smallpox has not somewhere occurred after revaccination—not content with the fact that for fifty years revaccination has been protective enough to save all the *employés* of the Highgate Smallpox Hospital from an attack, excepting one unfortunate man, a temporary gardener, who refused the boon and paid for his folly with his life, and the similar experience of all the hospitals in London, not only as to the security of the revaccinated, but the almost unfailing attack of those who neglected or refused to be revaccinated. It is not necessary to pretend that revaccination is an absolute protection; but it is very nearly so. Smallpox itself does not absolutely protect from smallpox. Unreasonable people every now and again turn up who have a second or even a third attack. Good revaccination in adult life seems a much more complete protection than a previous attack of smallpox. But no sensible person would be surprised at an exceptional case of smallpox after revaccination. The broad and undoubted protection conferred by revaccinations remains, and staggers the detractors of a discovery which exceeds all others in its beneficence. It is most lamentable to have to record the occurrence of smallpox in Colonel Kennedy and others of the Canadian boatmen, since their arrival in London, on their way home from services so efficient on the Nile. There is a marked increase in the admissions of cases in the hospitals of the Asylums Board. It cannot be too plainly stated that no one is safe who has not been successfully revaccinated. Revaccination that does not take is a delusion and a snare. Let no one rely on Leicester impunity. The isolation of cases in this metropolis if ever practicable, is not so now. The turn of Leicester will come some day. Meantime, every unrevaccinated person is liable to an attack of the disease.—*Lancet*.

It is just a hundred years ago that vaccination was performed for the first time, and, by a singular coincidence, that county of England which witnessed the

first actual experiment in what has proved so valuable a discovery to the world, is at this very moment paying a heavy penalty for systematically despising the achievement of its most illustrious son. Nor is it altogether creditable to Englishmen generally that the most striking celebration of the centenary should take place abroad—in Berlin, where an Exhibition is being held, of which we give some account elsewhere. It was on the 14th of May 1796 that EDWARD JENNER, then only a modest country doctor, practising in a Gloucestershire village, took his courage in both hands, and put to the test the theory on which he had been meditating for many years. He inoculated a boy of eight with vaccine taken from the hands of a milkmaid, who was suffering from cowpox, and six weeks later he tested the effects of the experiment by inoculating the same lad with smallpox. At that time, it should be observed, the practice prevailed of protecting from smallpox by giving the disease artificially. JENNER'S achievement lay in substituting the incomparably milder, but almost equally effective, form of the disorder observed in cows. His first case succeeded perfectly: the boy was found to be proof against the virus of smallpox. It was followed by an extensive series of experiments conducted in the same unostentatious manner, and two years passed before the results were made public in a memoir, entitled 'An Inquiry into the Causes and Effects of Variolæ Vaccinæ.' The evidence brought forward was so striking that it aroused the greatest interest in the medical profession, though, of course, there was no lack of opposition. However, in the short space of a year's time, the practice had won the complete confidence of a large and authoritative body of physicians, and then—the success of the experiment being conclusively established—attempts were made, as usual, to deprive the discoverer of the honour due to him. Happily, they failed completely. Indeed, no clearer case of individual credit exists in the whole history of discoveries. It was JENNER'S idea from first to last, founded on his own observations, and worked out by himself, in the teeth of influential disparagement. Others to whom he imparted his theory might have shared or even appropriated the credit—for he was the least self-assertive of men—but they lacked the insight to do so. It is a lasting blot on the scientific reputation of the great JOHN HUNTER that when JENNER, who was his pupil and friend, tried to arouse his

interest in the matter, he could see nothing in it. But if the Gloucestershire doctor's title to fame is exceptionally clear, his indifference to its rewards was still more exceptional. He stands out as a rare and noble example of the very highest type of scientific worker: a man in whose mind no inferior motives found, or could possibly find, a place. He laboured for the love of truth and the benefit of mankind without a thought of self-advancement. Honours which might have turned the head of the most hardened philosopher left him unmoved in his simplicity. 'Shall I,' he wrote to a friend, 'who, even in the morning of my life, sought the lowly and sequestered paths of life, the valley and not the mountain—shall I, now my evening is fast approaching, hold myself up as an object for fortune and fame? My fortune, with what flows in from my profession, is amply sufficient to gratify my wishes.' Such—so great, and so unaffectedly simple in his greatness—was the man whom Gloucester has good reason to remember to-day. The 14th of May is still annually commemorated—in the German town of Bückeberg. It is full time that the day and its lessons were brought to mind nearer home. The simple, obvious explanation of all the anti-vaccination nonsense which has been gaining ground for so many years, is that JENNER'S discovery has been too successful. People have forgotten what smallpox is, because, thanks to him, they have become accustomed to living in a community where it is practically unknown. They realize little or nothing of that awful scourge which used to terrify our forefathers—the most shocking and repulsive of all diseases, the one of the most deadly. Smallpox has been a comparative trifle for so long that popular fear has died out, and the good genius which banished the plague is despised. Nemesis waits on such blind ingratitude with slow but relentless step. The case of Gloucester is a slight warning to other places. It is too much to hope that they will take it, but, if they do not, then their turn will come as certain as that the 14th of May will come round again.

#### CAUSE AND EFFECT?

A serious epidemic of smallpox is raging in Madrid, there having been three hundred and thirty deaths from this disease during the last month. Twelve thousand persons were vaccinated during November.—*The Standard*, Dec. 7, 1903.

I must insert the following very typical piece of Jennerianism which I have just met with in a daily paper.

An unfortunate black sailor goes to hospital with a damaged hip. They therefore vaccinate him and give him smallpox! Then, when the rest of the crew have been vaccinated and thereby thoroughly protected against any liability to contract smallpox, begins the panic lest these *immune* men should contract and spread smallpox.

It would be impossible to invent such stories as these vaccinators tell against themselves.

#### THE SPREAD OF SMALLPOX.

Dr. Herbert Williams, Medical Officer of Health of the Port of London, reporting to the Corporation, states that on the 17th ult. the steamship Cheshire arrived at Gravesend from Rangoon, having touched at Marseilles on the 10th. A man suffering from smallpox was landed at the Port Sanitary Hospital. He had been admitted on September 14 to a hospital at Marseilles suffering with an injury to his hip, and, with other inmates in a general ward, was vaccinated for some reason which did not transpire. On October 5 he was discharged. When he embarked again there were a few spots on his forehead; but, being a negro of very dusky hue, the fact was not noticed until three days later, during which he had mixed with the other members of the native crew. The whole of these had now been vaccinated, and their effects and quarters thoroughly disinfected. They had been kept under observation during their stay at Gravesend, and no further case of smallpox had been detected among them. The vessel went on to Liverpool, and the Medical Officer of Health had been notified of the fact. Owing to the crew being Indian, and consequently kept by the ship, the danger of the spread of smallpox in this country from this case had not been great; but, on the other hand, had the crew been of European nationality, they would, on the arrival of the vessel, have been paid off and gone to various localities. These men would have been exposed to the risk of infection from October 10 for three days, and it was unlikely that any symptoms of the disease would have arisen until the expiration of ten days from exposure to the risk of infection. Of course, they would have been disinfected,

vaccination would have been offered them, and, judging from past experience, they would have refused. Their names and addresses would have been taken, which, in the case of sailors arriving from a voyage, was extremely unreliable, and thus a great danger to the public health from the spread of smallpox might have arisen, owing to the want of legal powers to keep these men under observation during the incubation period of the disease, or to detain them until such addresses given by them had been verified. The danger to the public health from allowing 30 men who would have been exposed to the infection of smallpox to go uncontrolled, and who must have been considered as potential sources of infection, would be readily understood.

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The Jennerian creed admits that a man may at any moment revert to the divine model of human purity as designed by God. A jealous eye must be kept on this, and he must instantly be diseased again. He must be re-vaccinated at intervals to ensure his being kept chronically diseased. And more, there is a stage beyond vaccination, viz. *Vaccinisation*, that is the body is so saturated and besotted with disease-matter that it finally refuses to absorb any more. This is the state of perfection, this produces the Jennerian admirable Crichton! He is like the drunkard in a state of *delirium tremens*, who is beyond being influenced by any further absorption of alcohol. And on the top of this Koch, Pasteur, and the other serum-mongers quoted above, ought logically to have their turn. So that in the end the perfect man's blood will be a seething mass of corruption, a hot-bed of microbes, bacilli, germs, spores, etc., etc.

If this is consistent with a belief in God, the sooner Divines let us know it from the pulpit, as well as from the Bench, the better.

And we propagate the Gospel in foreign parts and with it the gospel of Jenner, with the usual results, we sow

disease broadcast. In South Africa we have so thoroughly diseased them that even the resident doctors have protested. To our indelible shame we have just passed a compulsory revaccination law in Rhodesia. This is the greatest crime that has ever yet been committed.

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If the ordinary respectable citizen realised the abyss of filth into which this practice sinks, he would assuredly have none of it. He is probably taken in by the poetical term *pure lymph*. Look at this 'pure lymph' face to face. The pus of the wound, it may be, of a diseased pauper is put into a monkey, and when the poor beast is in its turn infected, the unhallowed mixture is put into the pure blood of your child. And this is supposed to be consistent with, I will not say Christianity, but with humanity and common-sense.

The poor man is the only real judge of it, the rich man's child is carefully treated throughout, and recovers seemingly with ease: and when at 21 something tuberculous arises, or at 30 something cancerous, he says it is *kismet*, and never dreams of connecting it with vaccination.

But the poor man sees it in all its horror at once. His child has probably been treated to the monkey brand, and in pauper life there can be no night nurses and luxurious surroundings to give the baby a chance, and it rots away to death at once, dying probably of bronchitis or convulsions or diarrhœa—and *there is nothing to show that its death was due to vaccination!*

This is how it is that the poor man loathes and fears it, and that the rich man does not detect it.

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There are some human beings of such magnificent constitutions that they can positively resist this foul poison, as they do smallpox. So there were in Jenner's day, luckily for him, for by them his great discovery was proved. These

splendid specimens of humanity instead of being given 'first prize' are rejected as rotten samples. For in Jennerianism the thing is *not* to be healthy—to be so is almost criminal—but to be a ready recipient of filth.

Whatever conception of a Deity any nation or people has hitherto formed, it has always been of something superior to oneself either in prowess or wisdom or goodness. It was reserved for the Jennerians to concoct a sort of goddess of offal, whose subjects wallow in disease and who are noble in proportion to the quantity of corruption they can assimilate. And all development means ascending the stepping-stones, except in this creed where the votaries should retrograde like the *Terra del fuegians*.

It is much more than a question of whether cowpox averts smallpox, it is a question whether the human body is to be made the happy hunting-ground for experimentalists in science very doubtfully so called.

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It is wonderful what a lot 'the man in the street' knows about it. I find that a man who does not profess to be a musician at all is disinclined to discuss the construction of Bach's fugues with me, but I have never yet met the man who hesitates to dogmatise freely on vaccination. He tells me that if I don't know that vaccination has diminished smallpox I must be a fool, and can know nothing of the statistics. If I ask him when and where it has done so, he is not concerned to answer.

Another says, 'I don't know that it does much good, but it certainly can do no harm, if you are careful.' Who is to be careful? The poor little devil into whom the poison is put? and careful of what? Or is it that the doctor is liable to be wanting in carefulness?

'Very likely,' says another, 'vaccination is no longer necessary now, but when we used to be decimated by smallpox, it was the only way of combating it.'

Or, 'If you knew the horrors of smallpox as I do, you would not resist vaccination.'

Or, 'Don't quote statistics to me, statistics will prove anything.'

These are specimens of the retorts I have got when I have attempted to interest men in this ghastly question, but far oftenest I have been answered, 'No, thank you! I am not going to discuss vaccination.'

One man in a thousand, at the outside, examines this question for himself, and the other 999 look upon him as a fool and a faddist, they knowing all about it by intuition. He finds to his surprise and horror that a most iniquitous and impious imposture has been for a century passing currency as science, and that hundreds of thousands of his fellow-creatures are being annually sacrificed to keep Jenner on his pedestal; this maintenance being in the hands of a highly endowed caste or clique; and the whole world a-gape at the glories of the unknown god: *omne ignotum pro magnifico* indeed, for it is more than unknown—it is unknowable.

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If vaccination is efficacious and harmless, let one of its champions stand forth. Let Mrs. Garrett Anderson come forward and refute, say, Dr. Hadwen. I am sure he would retire gracefully if discomfited in argument, and I am sure he is ready to fight, and such a victory would be of infinite value to the holy cause of the Imperial Vaccination League. Mrs. Anderson sits on a throne concocting bullying edicts: Dr. Hadwen nurses whole populations through epidemics of smallpox. She ought not to scorn such a foe, and of course cannot fear him.

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Surely the broad issue is simple enough, and within the ken of any man who cares to see. The Vaccinators claim

that vaccination has diminished smallpox; we defy them to produce any table of figures which gives colour to this. We maintain, on the other hand, that increase of disease always follows increase of vaccination, and is therefore an effect. If our case is not true, let them refute us. Let them show that this increase of disease is not taking place, that the official figures of the Registrar-General are untrustworthy. As for their own figures, seeing that they refuse to let them be seen, though they are bound by law to show them, they stand self-condemned. If a tradesman dare not show his books, it is capable of only one interpretation.

In support of the above, take any official tabular statement. Here are the smallpox death-rates of London from the date of compulsory vaccination:—

VACCINATION MADE  
COMPULSORY.

Year.	Deaths.
1853	86
1854	277
1855	408
1856	204
1857	59
1858	90
1859	425
1860	323
1861	77
1862	128
1863	687
1864	185
1865	214
1866	457

MORE STRONGLY  
ENFORCED.

Year.	Deaths.
1867	436
1868	190
1869	87
1870	302
1871	2422
1872	537
1873	34
1874	17
1875	13
1876	207
1877	710
1878	388
1879	121
1880	125

Year.	Deaths.	Percentage of children born not accounted for as to vaccination.
1881	619	
1882	111	
1883	35	
1884	313	
1885	357	
1886	6	7·8
1887	2	9·0
1888	2	10·3
1889	0	11·6
1890	1	13·9
1891	2	16·4
1892	10	18·4
1893	48	18·2
1894	20	20·6
1895	13	24·9
1896	2	26·4
1897	4	29·1
1898	0	33·0

How can any one pretend that the above figures can be made by any manipulation to reflect credit on vaccination? By 1871 the whole population practically was vaccinated; the deaths were 2422. By 1898 vaccination had fallen off

till one-third of the infants born were unvaccinated, and the deaths are 0. In 1886 the great and sudden drop occurs; the cause is well known, and certainly had nothing to do with vaccination.

And for the other side of the picture, take infant deaths from various diseases for a series of years.

I extract the following from William White's *Story of a Great Delusion*:—

‘What then is the evidence of Mr. Hopwood’s returns? Briefly this: they clearly illustrate that vaccination does produce, intensify, excite and inoculate disease whose issue is death. The record of infant mortality from fifteen specified diseases related to vaccination stands thus—

Prior to Vaccination Act, 1847-53—

Infants died, 1847, . . . 62,619,  
Out of a population of 17,927,609.

Vaccination Obligatory, 1854-67—

Infants died, 1854, . . . 73,000  
„ 1867, . . . 92,827  
Out of a population of 20,066,224.

Vaccination Enforced, 1868-75—

Infants died, 1868, . . . 96,282  
„ 1875, . . . 106,173  
Out of a population of 22,712,266.

‘Thus, while the population of England and Wales had increased from eighteen to twenty-three millions, the deaths of infants from fifteen diseases had risen from 63,000 to 106,000. Had the mortality kept pace with the population, the deaths in 1875 would only have been 80,000; that is to say, in 1875 there perished in England 26,000 infants who would have lived had vaccination remained as little in vogue as in 1847! The result though startling in the gross is precisely what might have been predicted. The infancy of a country cannot be systematically diseased, that is vaccinated, without exciting and aggravating other maladies, and thereby enlarging the harvest of death.

'If vaccination were a voluntary superstition, its prevalence would be sufficiently deplorable; but when we think of it as inflicted on the nation, and pressed on those who know it for an injurious imposture, language is apt to arise which it is expedient to repress.'

Personally I am not convinced of the expediency of this repression, and I have not studied to exercise it in what I have written. If I have railed and wailed, it is because the circumstances seem to claim it.

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With the marvellous art of Surgery at its present height, and the giddy pace at which Science is advancing in chase and capture of the hidden mysteries of Nature, that such a piece of bunkum, cruelty, and profanity as vaccination should be tolerated for a moment is to me perfectly unintelligible, even after subscribing to David's hastily-formed estimate of the whole of mankind, and Carlyle's deliberate one of the majority, and throwing into the scale the whole weight of the Jennerian who hath said in his heart 'Vaccination *shall* be true.'

The whole thing, I am afraid, can only be explained by reference to the vilest instincts of human nature. The old Adam comes out: the tendency to worship a fetish, the animal motive of self-preservation at any price, and the love of cruelty and bullying the weak, are where they were of old. As the Inquisitors delighted in burning the bodies of those that dared to differ from them in creed, so do these men delight in imprisoning and boycotting their conscientious opponents.

After all, the Inquisition only put to death some 32,000 people in 236 years; what vaccination may have done in the last half-century is horrible to contemplate. Dr. Wallace calculates at 10,000 per annum its victims in

England and Wales alone; Mr. Pickering at 80,000; and Mr. Biggs at 146,000 or 147,000.

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This is the greatest lie 'the world has ever conspired together to believe,' and as long as it is believed, so long apparently will the national health go on deteriorating until we are cowpoxed off the face of the earth.

It is the saddest and maddest chapter of the world's history, for it is nothing less than a fight for impurity against purity, superstition against science, devil-craft against enlightenment—Jenner against Christ.

## APPENDIX

### A CONTRAST

In *The Times* of January 10th, 1899, Mrs. Garrett Anderson announces the method of boycott recommended by the Imperial Vaccination League:—

‘Indirect pressure in support of vaccination can be applied to young adults. In the course of a few years many of those who survive childhood will be protected from smallpox by having already struggled through it. It will be possible to say to every one who reaches adult life, “You must prove that you have had smallpox, or that you have been vaccinated and revaccinated before you can be admitted to college, shop, warehouse, or factory, into ships or services, before you can insure your life or enter a sick-benefit society. . . .” Indirect pressure of this kind is already largely used, and it is submitted to with a good grace. No one has “conscientious objections” on such a score when it is a question of earning his living.’

The following are extracts from a letter of Mr. John Brown, a Scotsman and a member of the Mile-End Board of Guardians, to the Bishop of Stepney:—

‘Many thousands of men and women in your diocese regard vaccination as a sin, and it will astonish them to read the words of their spiritual father that in regard to vaccination you let others think for you. . . . The study of the question was a tremendous revelation to me. When I read Jenner’s own words, in which he told how the fetid disease horse-grease was the origin of vaccine lymph; how the loathsome disease cow-pox with its gangrenous ulcers, in addition to the horse-grease, was the channel by which “lymph” used in vaccination was obtained, no words can express the horror and disgust which filled my mind. Yes, I was ready to go to prison, and stay there for a long time, if by so doing attention could be so focussed on this ungodly and awfully impure method of fighting a disease which is amenable to cleanliness. Reading the story of vaccination down the intervening years, as told by pro-vaccinists, my feelings

were intensified. A whole multitude of unclean and sinful experiments, each one seemingly more vile and filthy than those which preceded it, stretched from the year 1801 down to the time when I was looking into the nauseating business. Worst of all were the specious promises which led to the passing of a compulsory law, not one of which promises dare now be made. . . .

‘From first to last the whole business is inexpressibly loathsome : it is wanting in humanity, both in regard to calves and to children, and it is grossly insanitary.

‘I am sure of this, that if my Kilmarnock friend sat down and looked into this so-called pure calf lymph business, he would do as I did, viz., he would register a vow in the presence of the Lord, that so long as he lived he would do all in his power to end that which is only fit for debased Pagans, and which would smirch the good name of an average heathen. A more unchristian practice than that of vaccination could not be imagined, and the worst of it is, that it is practised upon the little ones who know not their right hand from their left.

‘I became an anti-vaccinator because I came to know that vaccination is an evil practice, on which it would not be possible to ask God’s blessing.

‘I am working for the coming of the time when the diseases that are caused by uncleanness shall go the way of the plagues and pestilences of the middle ages ; for the time when it will be deemed a crime to attack health and sow disease in the human frame.

‘That time is nearer than pro-vaccinists think.’

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This latter extract, if in ‘middling English,’ shows the character of the anti-vaccinator that has to be dealt with.

As for the former, what is most striking is that an effusion of such astounding wickedness should be given a place in a leading newspaper of a Christian country on the eve of the twentieth century. It is more bloodthirsty than anything that has ever issued from nihilists or revolutionaries. It is a proposal to starve to death all those who differ on a medical point if they refuse to do violence to their consciences and convictions. A conspiracy to do your fellow-creatures out of their money is actionable, but this has the sanction of bishops and ministers.

The picture of the millennium that these people propose is a weird one. When all the undiseased shall have been starved off, the elect alone, the 'immune'—beautiful word!—will reign: and there will be no more smallpox: and there will be weekly, if not daily, vaccinations.

If vaccination is salvation, why does not this League migrate bodily to some swampy island and found their republic, and give the unbelieving world the convincing demonstration of their faith fully carried out ?

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The following death, *not* from vaccination, I take from to-day's paper, *Hampshire Chronicle*, December 19th, 1903:—

'AN INFANT'S DECEASE.—Mr. Henry White, City Coroner, held an inquiry at the Guildhall on Tuesday afternoon, respecting the death of the infant son of Mr. C. J. Gardner, foreman porter in the employ of the Great Western Railway, who resides at 3 East Cliff. Mr. E. Brown was foreman of the jury. The father stated that the child was healthy, and was 14 weeks old. It was vaccinated on the previous Friday, and death occurred on Sunday. Mr. A. Flower, *locum tenens* to Dr. Scott, spoke to having made a *post mortem* examination of the body. It was rather under the average weight, weighing 8 lbs. instead of 11½ or 12 lbs., but the organs were all perfectly healthy, and the *post mortem* revealed nothing to account for death, which, in his opinion, was the result of a convulsion. He was convinced that the recent vaccination had nothing to do with death, and was absolutely satisfied that there was nothing whatever improper in the case. The Coroner, in addressing the jury, said he directed the *post mortem* to be made, and it happened to be one of those curious cases in which such an examination did not reveal the cause of death. The suggestion had been made that it had resulted from vaccination, and it was desirable, especially in these days, to determine whether or not such were the case. The jury had heard from the doctor that vaccination had nothing to do with it, and also that there was nothing improper in the case, and he did not think there would be any difficulty in coming to a decision. The jury returned a verdict in accordance with the medical evidence.



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