

WILDER (Alex.)



# Vaccination a Medical Fallacy.

BY

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“ Thus bad begins, and worse remains behind.”—SHAKSPERE's *Hamlet*.

“ I have clearly perceived the progressive, dangerous influence of Vaccination in France, England and Germany.

“ ALEXANDER VON HUMBOLDT.—*Letter to Mr. Gibbs, President of the Anti-Vaccine League, London.*”

“ It is certain that Scrofulous and Tubercular diseases have increased since the introduction of cow-pox, and that the vaccine favors particularly the prevalence of various forms of scrofula.”—COPLAND : *Medical Dictionary*.

To take issue with a popular idea requires moral courage transcending any common audacity. Only the conviction of being right enables one to speak when thus confronted. In the medical profession especially, innovation upon accepted methods is bitterly resented. New remedies, new modes of treating the sick, and new ideas of pathology, are alike unwelcome. They disturb the sleep of ages, and show

men faulty who had been regarded as well nigh infallible. Such offences are rarely condoned. The person committing them receives generally proscription and abuse, but rarely a candid hearing.

With the present century vaccination has become the hobby, rather than the conviction of medical men. It is accepted, with almost an unreasoning deference to the opinions of others; indifference to any intelligent view of the subject, and a disposition to follow in the groove established by precedent, without a thought whether that precedent is right or wrong, rational or fallacious. As in the case of other notions which have not commended themselves to popular acceptance, its advocates do not rest content with submitting the matter to rational enquiry, but seek to procure compulsory obedience by law and penalty. This is but a form of violence; and the resort to it is equivalent, therefore, to an acknowledgment on the part of these men, that they are actually in the wrong. Truth can afford to wait the ages; but error would expire on the way.

Vaccination is physiologically and morally wrong, and its advocates are interiorly conscious of it; or else they would trust to argument and conviction.

Virchow, speaking on this subject, has very justly remarked:—

“When the public sees a doctrine, which has been exhibited to them as certain, established, and claiming universal acceptance, proved to be faulty in its very foundation, or discovered to be wilful and despotic in its essential and chief tendencies, many lose faith in science.”

The first argument against the dissenter is always browbeating; the second, ribaldry; the third, proscription. The man or the cause that can outlive these three, is perennial, and is certain ultimately to win.

They who bow obsequiously to opinion, however dogmati-



cally or arbitrarily enforced, are the enemies of mankind. They almost justify oppression by their willingness to accept its yoke.

The impulse of the period, we regret to say, has been to devolve all upon the government, and curtail the freedom of the individual, and to subject the private to the public conscience, as is done in the religious establishment of the Old World.

We have never so learned our lesson. Our veneration for science and truth is deep and broad ; but no dogma, in whatever department of thought, has even the commonest title to our respect if it cannot show some other title except the antiquity which invests it with mystery, or the imposing names which give it currency.

Vaccination, however popular a delusion it may be, has fortunately no antiquity to consecrate it for our veneration. It came to the public knowledge through sources which entitle it to little consideration. It never had a scientific basis origin or character. Nor is there any specific principle in vaccine virus, of any kind, however produced, to arrest or prevent small-pox, or any other disease. Jenner, who first introduced vaccination, was not in any essential respect, a physician or scientist. He was for some time a pupil of Hunter ; but never studied medicine to any considerable extent. Finding the degree of Doctor of Medicine to have some importance in the popular mind, he purchased one from the University of St. Andrew's in Scotland, as others purchase degrees in this country and elsewhere, who never learned medicine, or had any actual relish or even capacity for the study. Even this, however, might be passed over, if the "discovery" possessed merit and conferred benefit on others. We can afford to learn from those who are not recognized in the scientific world, whatever they know that is of value. The gold, without a stamp, is precious ; but baser substances need to be made legal tender by statue, or nobody would accept them. Upon this principal, the supporters of vaccination and other things denominated *regular*, are afraid

to trust themselves with the public, without a penal law, or at least a public opinion, credited by Mrs. Grundy and her coterie, to keep them from sinking out of good society.

#### SMALL POX OR VARIOLA.

The distemper known as small-pox, is supposed to have been introduced into Europe by the Moors and Saracens, about a thousand years ago. It is a common disease in Asia where it seems to be of an unknown antiquity. It was regular in its recurrence as an epidemic in Europe, as far back as it is known. But in no century had it ever been known to be more deadly than in the seventeenth, after the thirty years' war. Among the aboriginal inhabitants of the American continent, it was entirely unknown, till it was carried thither by white men; since which time it has been a powerful auxiliary to the other vices in extirpating the natives. It prevails as an epidemic in the different countries, coming and going with a regularity similar to that of other pests.

In its characteristics, small-pox belongs in the category with erysipelas, measles, scarlatina, diphtheria and varicella. The predisposing causes are similar; the form of the outbreak is probably occasioned by circumstances of atmospheric character. It may be treated like the others, with little regard to its specific character. It is epidemic at different periods of time; and when this is the case it seems to be a little amenable to ordinary prophylactic agencies. When the Asiatic cholera has prevailed in a community, small-pox is very likely to follow. This favors the conjecture as a like *materies morbi* in both complaints.

During the Middle Ages the Black Death, and small-pox and other pestilences overran Europe, almost at stated periods. Whole districts were depopulated; and, in fact, mankind seemed to degenerate there as in no other known region of the globe. In every country population was sparse, and the average duration of life less than twenty years.



So prostrate was the human intellect at these visitations, that when syphilis passed over the different countries in the fifteenth century, it was also regarded as an epidemic. It certainly prevailed very generally in all walks of life, sparing neither Francis I. nor Hodge the peasant.

#### VACCINATION AND SMALL-POX.

The history of vaccination, perhaps, affords some aid in exhuming the sources of variola. Jenner, it is well known, first promulgated the idea that persons having contracted the vaccine disease by infection with virus from cows, enjoyed permanent immunity from small-pox. As if to disconcert his theories, several vaccinated patients took variola, and he was compelled to invent a new hypothesis. He declared that the pustules of cow-pox, the disease originating with kine, was in no respect a preventive of small-pox. This, by the way, is the particular virus which is just now most popular with advocates of vaccination. But, declared Jenner, the pus from the heels of a horse diseased with "grease," is a prophylactic, and indeed, the sole one. Horse-pox, then and not cow-pox, was the disease which it was necessary to disseminate, to counteract small-pox.

We have already mentioned that the latter distemper is supposed to have been introduced into Europe by the Moors and Arabians. We may now perceive that there is a peculiar significance in this fact. Both these peoples were very fond of horses, associating with them almost as freely as with the members of their families. It is a suggestion worth studying whether the distemper may not have been communicated to them from their equine favorites. We know that glanders and some other forms of consumption may be thus transmitted. The vaccine pest, if it has any relation whatever to variolar disease, owes it to such kinship.

The Hindus and Chinese endeavored to avert the great mortality of epidemic small-pox, by the introduction of the practice of inoculation. The Turks learned it from them, and it was carried into Europe. Lady Mary Wortley Mon-

tague introduced it into England. Whatever the benefits were, need not be asked ; but it certainly kept small-pox active in countries and districts, where otherwise it would not have prevailed. Indeed, one great reason why there are fewer epidemics and endemics of the malady in the nineteenth than in the eighteenth century, doubtless is from the discontinuing of small-pox inoculation.

#### THE VACCINATION MANIA.

On the 14th of May, 1796, Jenner began his experiments in vaccination, substituting cow-pox lymph for small-pox lymph. Two years afterward he promulgated his discovery. Since that time vaccination has been the only preventive employed. It is known not to be unfailing, as small-pox has repeatedly appeared with great severity ; but it is declared to be a means by which the person is rendered less liable to the distemper. Very able medical men have at all times opposed the practice ; but as they proposed no other preventive, and did not explain the character of either variola or vaccinia, their opposition failed to receive attention. It has been suggested that their condemnation was too sweeping ; as vaccination did exert a little prophylactic influence, but by no means to that degree which its advocates asserted.

Meanwhile, in the principal countries of Europe, and to some extent in American cities, vaccination is not only generally accepted, but it is made compulsory by penal law. This is bad statesmanship and worse morality ; but nevertheless men who profess to be scientific, recommend it ; legislators pretending a regard for the public welfare and to be the defenders of popular freedom, frame it into law ; and others who are often denominated "liberal," approve of the enforcement. This practice is Vaccination.

Children going to school are vaccinated perforce ; and now, as if there must be no protection for the dissenting and skeptical, their attendance, and in sequence, their vaccination are made compulsory.

Such is the outcome of our science ; and legislation, which is but the aggregating of brute force, has put on the coping.



Vaccination is the "legal tender" currency of our modern practice ; not its gold.

Venesection was an old-time mania of doctors, and every patient almost was bled on sight. A man who would not bleed or dose with mercury, no matter how scholarly and accomplished, was certain to be refused if he asked for a physician's diploma ; and yet was made liable to fine and imprisonment if he treated a sick man without one. We have the statement of the late William Cobbett, undenied, that George Washington was bled beyond power of recuperation, and blistered till the poor old man besought his medical attendant to cease the barbarous torturing, and let him die in peace. In 1830, a physician who would not bleed and deplete was accounted eccentric, irregular, and empirical ; now only the Bourbons do it. When they die these methods of treating the sick will be enumerated by some future Wendell Phillips, among the "Lost Arts."

So completely has vaccination become a hobby of this period, that ribaldry and abuse are the chief arguments employed to sustain it against criticism or question. The advocates show that it is at best only an expedient, and has no known foundation in truth or philosophy. It has no real merit or principle. It is defenseless against attack from scientific enquiry. I now add the prediction that the principal attempt, if any is made, to answer this will be an evasion of the argument and an application of the lawyer's advice : "There is no case ; abuse the plaintiff's attorney."

#### VACCINATION IS NOT PROPHYLACTIC AGAINST SMALL-POX.

There is nothing in the nature or elements of vaccine pustule or of the ferment of the body of the patient which vaccination creates, to counteract small-pox tendencies, or to eradicate them. It is simply the outcome of a filthy disease. The idea of employing such an agency to purify the constitution from any poison is repugnant to the plainest principles of common sense. The act of vaccination is simply the contaminating of a patient's body with a blood-poison. Its most fitting eulogy is that found in the *New Testament* : Satan casting out Satan. The conclusion is inevitable in each case, *it will not be done.*

It has never been my fortune yet to meet a person whom I had any good reason to believe, had obtained exemption from small-pox in this manner. I have encountered numbers who had the disorder; but whenever I made enquiry, I always learned that they had been vaccinated. It is customary with physicians to denominate such cases *varioid*, and to declare that they were milder, because the patient's constitution had been influenced by the vaccine disease. But the infection of the complaint is as sure to disseminate small-pox, as in the case of unvaccinated patients; and as for the severity, I have never been able to find good cause for giving credence to the representation. Varioid is also a fallacy, not worth spending a sensible man's time to talk about. Dr. Jenner's proposition that a person once inoculated with the cow-pox virus can never afterward take the small-pox has been abundantly shown by experience, to be untrue.

The evidence of the most learned of our medical authors is in point. "I do not believe," says Sir James Y. Simpson, "that either vaccination or drugs can give absolute security to any population against the inroads of small-pox. When every care has been taken, the vaccinated person has been known to be attacked by small-pox. In an epidemic of the disease such cases are extremely common.

Professor Ennemoser writes about vaccination as follows: "*A more infernal mystification the world has never experienced since its existence*; the belief in witches can only be compared with it. It is certainly not to be comprehended how a poison in the organism, can be extinguished by a similar poison."

Professor Bock of Leipzig, says: "I have in a forty years' practice seen far more evil than good from vaccination, and therefore vaccinated my own children only in their third and fourth year, when they were hearty and strong. *But I would never have vaccinated them but for an indirect compulsory vaccination.*"

Professor Kranichfield, of Berlin, gives his conclusions most emphatically of all: "I, too," says he, "*have vaccinated my fourteen children at a time when I did not know how in-*



*jurious it was. To-day I would resist the authorities and the police law.*"

Marc D'Espine shows in the *Echo Medical* for July, 1859, that of vaccinated people, 65 per cent., and of the non-vaccinated, only 23 per cent. were attacked by the most malignant form of small-pox. When, from want of physical strength, the eruption did not break out, there died of one hundred vaccinated, 56; while, according to Perrin, of such as had not been vaccinated, only 8 per cent. died at the *Hotel Dieu*.

During the year 1863, 1864, 1865, small-pox prevailed to an enormous extent, not only in England, but also in Germany, Hungary, France and Sweden, notwithstanding the general compulsory vaccination. In upper Bavaria, where the compulsory law is strictly executed, there were, at the time, 1346 attacked by malignant small-pox, 1,256 of those vaccinated and 90 not vaccinated; so that vaccination has not even made the disease milder.

A boast has sometimes been made that small-pox had once been eradicated in Sweden; only fourteen dying from it in a certain year. A closer enquiry showed however, that only a few thousand of the population had been vaccinated at that very time.

#### TESTIMONY OF VACCINATORS.

The evidence of the most observing among the vaccinating officers employed in England, is equally in point, and seems to be conclusive. Doctor Gregory, director of the Small-pox Hospital in London, published the following declaration in the *Medical Times*, June 1, 1852. "Small-pox does invade the vaccinated, and the extirpation of that dire disorder is as distant as when it was first heedlessly, and in my humble judgment, most presumptuously anticipated by Jenner." He also declares further: "The idea of extinguishing the small-pox by vaccination, is as absurd as it is chimerical; it is as irrational as presumptuous." *He refused to permit his children to be vaccinated.*

Dr. Stowell for twenty years Vaccine Physician in England, says: 'The nearly general declaration of my patients

enables me to proclaim that vaccination is not only an illusion, but a curse to humanity."

Dr. Epps, director for twenty-five years of the Jenner Institute, says: "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 small-pox, but only paralyses the expansive power of a good constitution, so that the disease falls back upon the mucous membranes. *Nobody has the right to transplant such a mischievous poison into the life of a child.*"

Doctor Letheby, in 1860, made special observation on ninety-three cases of small-pox. Out of thirty-four that died, twenty-one had been vaccinated. Those results were published in the *London Medical Times*.

Dr. Collins, for twenty years Vaccine Physician in London and Edinburgh, writes: "There really exists no change in the virulent character of the small-pox, notwithstanding the vaccination laws; and of those attacked by the disease, at least two-thirds were satisfactorily vaccinated. \* \* I have not the least confidence in vaccination; it nauseates me, for it often transfers filthy and dangerous diseases from one to another, without offering any protection whatever."

Dr. Pearce, for thirty-five years Vaccine Physician in Edinburgh and London, asks: "How can the historian fall into the error of ascribing the changed mortality from small-pox to vaccination? In the first thirty years of the last century there died of 1,000 small-pox patients, 74; in the last thirty years of the same century, after inoculation, there died of 1,000, 95."

Dr. Greenhow, of North Shields, England, in the *Medical Gazette* of January 22, 1833, asserted: "It is a well-known fact that the small-pox after vaccination has become of frequent occurrence."

Dr. George Sexton, a British Eclectic, relates the following personal anecdote: "A few weeks ago (1870), I went up to London from this town (Sheffield), and hearing that an old friend of mine, a man well known in theatrical circles, had his four children all ill, I called upon him. On enquiring how



they were, he asked me if I knew what was the matter with them. I replied that I had heard that they were suffering from phrenitis. 'No,' he said, 'they are all down with small-pox; but I have not made it known for fear it would drive away my customers.' On seeing the children, I found that in two of them the disease had assumed a confluent form, and presented a most threatening aspect; in the other two it was much more mild. 'Have they been vaccinated?' I enquired. 'Two of them,' he replied; 'the other two, I am sorry to say, I neglected to have done.' 'And which two,' I asked, 'have been vaccinated?' 'The two oldest,' he answered. 'Well,' I said, 'considering that those two have got the disease in the very worst form, and are in a far more dangerous condition than the others, I do not know why you should be sorry that vaccination has not been extended to the whole four.' In the sequel, one of the vaccinated children died, and the other recovered, but was terribly pock-marked. The two that had not been vaccinated were speedily restored to health, with no trace of the disease to be observed on their faces.

The doctor relates a conversation with a gentleman, in regard to the duty to enforce vaccination by compulsory law.

"You see," said the gentleman, "if inoculating with vaccine lymph will prevent the development of small-pox, I have the right to compel you to have your children operated upon; because, by your neglect, mine may suffer."

"How!" asked Dr. Sexton?

"Because," he replied, "your house may become a hot-bed for small-pox; and if you live next door to me, it may extend to mine, and my family may take it."

"O, they may, may they?" exclaimed Dr. Sexton; "your children are all vaccinated, and therefore cannot take it."

The gentleman laughed as he acknowledged the force of the question. "Well, you have me there; I had not thought of that."

Indeed, this is, after all, the general belief. I remember an occurrence, many years ago, of having been called to visit a patient. I administered Lobelia and Asclepias, as was my practice in such cases. I made a second call in a short time,

and regarding myself as a novice, I requested a friend to go with me. No further obscurity existed as to symptoms; the case was small-pox. The terror evinced by my companion astonished me. He turned deadly pale, rushed into another room, and called the attendants to him. He directed them to notify the health authorities, and then made his way hurriedly from the house as if in an agony of dread; yet he had been vaccinated I think, repeatedly. Whether vaccination preserves its subjects or not, it certainly gives them no courage or assurance.

Even the Chinese have had a like experience of the inutility of the practice, and Dr. Rennie, in his book entitled *Peking and the Pekingese*, says: "Since 1820, vaccination has been practiced to a limited extent amongst the population; probably about one-fifth may be vaccinated. At one time it was believed to afford protection; small-pox not having been so common after its introduction. Of recent years, however, confidence in it has considerably diminished, owing to the frequency with which those are attacked who have been vaccinated."

#### SMALL-POX A RECURRENT DISEASE.

A swarm of theories have been hatched for the purpose of accounting for the universal failure of vaccination as a prophylactic against small-pox. One physician published a *brochure* to show that it was because patients were vaccinated only in one arm. A second hypothesis is that the virtue of the pox-pustule is exhausted after a few years. The supporters of this notion differ widely among themselves. "Vaccination," says one, "ought to be repeated every seven years." Another protests that that period is too long; patients should be vaccinated every three years. But such unlucky examples as this are common: "A young man was vaccinated as a child, by Dr. Sexton; when about 13 or 14 years of age he became a gentleman's servant, and was vaccinated again; and after that joined the army, and for the third time underwent this delightful operation, and had the small-pox after all!"

Perhaps one great reason why vaccination does not pro-



fect exists in the fact that small-pox is itself liable to occur again in the same individual. It is hardly possible that there can be a prophylactic sufficiently potent to avert the liability of such recurrence.

We have the evidence of Sir Thomas Watson, in the most unequivocal language. "You must recollect," he says, "that *small-pox itself is not a universal and absolute assurance against its own return.*" "During an epidemic in Scotland, Doctor John Thomson saw, from June, 1818, to December, 1819, 556 cases. Of these \* \* forty-one took the small-pox the second time, and Dr. Thomson knew of 30 other such cases, making 71 in all."

Dr. William Hitchman of Liverpool, addressing the Annual Conference of the British Medical Reform Association, held at Sheffield, July, 1873, made this statement: "Small-pox is now raging amongst the vaccinated. *Variola of a malignant type*, not only in this country, but in Thun, Inter-laken, and Bernese Oberland, *is often recurrent.*"

Dr. George B. Wood, of Philadelphia, who is hardly willing to accept any but the uppermost place, who believes in vaccination, mercury, venesection, and the other barbarisms of medicine, acknowledges that sometimes one attack of small-pox "does not afford complete security." He says: "It cannot be denied that fatal cases of secondary small-pox now and then appear; and instances are related in which the disease has occurred a third time in the same individual. Certain families appear to have an extraordinary susceptibility to the variolous contagion; so that individuals belonging to them *are much more liable to returns of the disease than others*, and generally also have it more severely."

In the London *Medical Gazette* of November 6, 1830, is a letter from Mr. J. S. Chapman, Assistant-Surgeon to the 11th Light Dragoons, and dated at Cawnpore, India. It has the following: "Small-pox has been playing the very deuce at this station. There appears to be no positive security against the disease, either by vaccination or small-pox inoculation; and I have seen several cases where the patients have caught small-pox twice, and have each time been very severely marked, and in two instances have died of the second attack

of small-pox. Certainly, by far the greater number of our small-pox cases have occurred in persons vaccinated in India twelve or fifteen years ago."

Sir James Y. Simpson mentions a case in which the patient, a woman, died from the *eighth attack* of real small-pox. In the Small-Pox Hospital in London, there were three cases in 1867, which occurred after a previous attack of small-pox; two, after both vaccination and small-pox, and four came after inoculation.

Dr. Wood asserts that "certain families appear to have an extraordinary susceptibility to the variolous contagion." This I also believe. In epidemic visitations, this susceptibility is more general, and it appears to diminish after the twenty-fifth year of life, and "some resist the disease altogether, though not previously protected in any known manner."

#### WHAT SHALL BE DONE?

The demonstration appears conclusive, that small-pox will never be eradicated, nor in any material degree mitigated in its severity, by vaccination or other contamination with blood-poison. I expect no favor or even lenient treatment, for uttering this conviction. The "dupe of a deep delusion," seldom cherishes kind feeling toward the individual who disturbed his quiet. He prefers to be left alone in his mistake. It is easier to break the thermometer than to acknowledge the true state of the atmosphere; to stone the prophet than to heed his words. A Brahman once broke a microscope, because it revealed to him the living creatures that constituted part of his food.

Mankind, even though they may not choose to be deceived and led by the nose, are much annoyed when they are required to think and act on their own responsibility. The charlatan has a larger following than the philosopher, and is certainly a great deal more noisy. But in the long run, the truth must prevail. There is nothing else permanent. Ill betide the man, who knows the truth and refrains from uttering it. God is at the man's side who has honest convictions and will speak them. I know, in this matter,



that I am right. Hence, at the necessary cost, asking justice only, and not favor, I declare my belief that vaccination is a fallacy, and that small-pox can only be arrested and uprooted as other diseases of an erysipelatous or septicæmic character, may be successfully combated.

Dr. Martyn Payne used to declare, that by the employment of medicines in the treatment of a disease, we were only substituting one form of morbid action for another. Whether this is true, or being true would be justifiable, deserves attention. It is a proposition, at any rate, which medical men have to meet. Certainly, the acknowledgment that deleterious and even poisonous drugs are employed to combat bodily maladies, is equivalent to the confession of almost supreme ignorance among physicians in regard to physiology, and the commonest laws of health. I forbear to press that question. But conceding, as I do, that in the present imperfect condition of medical knowledge, this method of treatment is probably the best at our command, I cannot admit that it justifies or even extenuates the contaminating of the blood of a healthy person, on the pretext of thereby absolving that person from the risk of contracting a worse malady.

Some years ago a great boast was made by the Metropolitan Board of Health, in the city of New York, about having "stamped out" cholera. The means employed seemed to be the almost general abandonment to certain death of those who were attacked by it. We were shocked at the brutality, and what we considered the crime. To be sure, in the presence of epidemic, the population, as a whole, appears so generally to lose human sympathy and become brutalized, that no cruelty to dying men awakens a protest. Animals slay their wounded and diseased ones, and savage nations do likewise. In this way, I acquired a prejudice, almost a detestation, for the phrase "stamping out," from which I expect never to recover. I now invoke Divine Providence, in regard to what is in store for me, never to let me be exposed, sick and helpless, to an army surgeon, or a public physician in the city of New York.

## VACCINATION DOES NOT PROTECT.

That small-pox never will or can be extirpated by general vaccination, appears conclusive. The fact that vaccinated persons, even those who have been several times successfully vaccinated, have after that, contracted the disease, should, we would suppose, be ample evidence of this. The subsidiary fact that small-pox recurs in the same person, sometimes once, twice, and even to the eighth time, as Sir James Y. Simpson has shown, proves it. The disease is analogous to cholera, typhus and relapsing fever; when epidemic, it will do its work almost irresistibly, and in other cases, is under the control of rational treatment.

Jenner first applied his art May 14, 1796. From that time till 1825, thirty years, there had not been a small-pox epidemic in the city of London. Vaccination all this time was voluntary and not compulsory. But since the general introduction of the practice, not a year passes exempt. In two years, from 1863 to 1865, more than twenty thousand died from small-pox, in London alone. During the same period, the scourge prevailed to an enormous extent, not only in England, but also in Germany, Hungary, France and Sweden, where the laws compel universal vaccination. In upper Bavaria, in that period, 1,346 were attacked, all but 90 vaccinated, with malignant small-pox. Doctor Bayard, an eminent French physician, has shown that the former mortality from small-pox was 7 per cent.; it is now from 15 to 20 per cent.

Statistical tables further show that from 1675 to 1761, the yearly average of deaths by small-pox was as follows: In London, 7 per cent.; in Edinburgh, 7.6 per cent.; in Paris, 7.2 per cent.; in Berlin, 8.1 per cent. After inoculation was introduced the mortality increased to 10 per cent. Vaccination has raised it to 15 per cent.

The disease reached its height in 1779, and in 1801 had nearly disappeared. But a species of typhus, called by some *Variola intestinalis*, now developed itself, and snatched away many thousands more than any epidemic of small-pox. Prof. Nittinger of Stuttgart, mentions this malady.



It is easy to see, therefore, that any apparent decline in the prevalence of small-pox is properly to be attributed to the fact that it was not epidemic at the time ; whereas, the increase has been in spite, if not in consequence of vaccination.

The conclusion is unavoidable, that the "stamping out" of small-pox by vaccination, or other expedient, except that of immediately murdering every patient as soon as attacked, is impossible. In this, we have the testimony of Dr. Gregory briefly. "The hope entertained by its illustrious and amiable discoverer, that vaccination might ultimately exterminate small-pox off from the face of the earth, appears vain and unfounded."

However, Jenner was neither illustrious nor a discoverer. There does not exist one single fact, in all the experiments and improvements made in science, which can support the idea of vaccination. The only basis is that of statistics, and these are very unreliable, especially when they are collected for the purpose of sustaining an idea. Yet the enumeration of patients in the small-pox hospitals, will show a larger number vaccinated than unvaccinated. The recurrence of small-pox in the several countries where the law has required everybody to be vaccinated, shows that there is no possible ground for the hope that vaccination can ever terminate its existence on the earth.

#### THE BETTER WAY.

I acknowledge that it is an unfortunate attitude, to assail any inefficient measure of a prophylactic character, without offering something putatively better. But I know of no royal road to health. It is only repentance that cleanseth sin ; the road back from Avernus is very steep and discouraging. Hence most prefer to leave matters as they are. He is a disturber, an agitator, an enthusiast, perhaps a fanatic, who unsettles the minds of people, and will not let them rest easy. I have often hesitated, for this reason. When any class of population appears to be willing to be fooled or enslaved, it seems a fearful task to show them anything better. Only those who are willing to pay the price of redemption

will ever be ransomed. For them and to them I will speak.

The human body in a state of integrity, will resist any contagious infection whatever. In a condition of relative soundness it is often proof against specific agencies for the dissemination of disease. We observe often that fever and ague, typhus, typhoid, and other malignant fevers, when seemingly epidemic, leave many persons unscathed. Cholera only seizes those who are directly liable from disorder, undue fatigue, or impairment of constitution. Men and women in a fair state of health, neat and orderly in their habits, are protected as by a wall of fire.

The same fact exists in regard to small-pox. Only those will be assailed who are directly liable; not so much from direct exposure to the virus or its emanations, as from some condition of disorder and deterioration of physical stamina. I am very confident that persons in a fair state of health will not contract the disease, even on exposure. It is sometimes epidemic, and then the peril is increased; but when sporadic, it requires little special attention. There are always persons who will not be infected, because they are assured against it by vigorous health and perhaps idiosyncrasy.

Health is as contagious as disease, and is easy to contract on exposure. Only the debilitated, those who are exhausted by fatigue, or mastered by fear, or whose bodies are impaired in their integrity, have much to apprehend from contamination by malaria, infection or other agencies disseminating disease. The inference, therefore, is that hygiene is the only preventive agency to be relied upon.

The perils of small-pox have been greatly exaggerated. They do not pertain, in any considerable sense, to the malady, but to the physical condition of the patient, aside from the complaint. Small-pox would never be confluent, except he had been in a bad state of health before. Indeed, that very disordered condition afforded a *matrix* or *nidus* for the reception and incubation of the infecting principle. Now that the disorder has been implanted, the common-sense proposition for its treatment is, that of destroying the receptacle, the pathological condition. The idea of Abernethy, in regard to *tic douloureux*, applies here with equal



precision. If you destroy one of the parents, there will be no more generation. Let the whole attention be directed to restoring the body to soundness, and the fury of the pestilence will die of itself. Perfect repose both of body and mind, cleanliness of the skin, clothing and apartments; pure sun-lighted air in abundance; food of the simplest character, constitute the essentials of good treatment.

I am not partial, as a general thing, to much medication. What I would suggest would be proposed with direct reference to neutralising and eliminating the blood-poison. I regard the various chlorine medicines with most favor. The ammonium chloride arrests the contamination of erysipelas and septicæmia; and whatever will do that must be the sure thing for variola.

#### DR. CARL BOTH'S THEORY.

In January, 1870, the St. Louis Medical Society appointed a committee to investigate the nature and causes of small-pox. One of that committee, Dr. C. Spinzig, presented the result of his enquiries in a pamphlet, entitled *Variola: Causes, Nature, and Prophylaxis*. It was at once disapproved as unsound in premises, fallacious in reasoning, and illogical in conclusion. But no attempt was made at refutation.

The *Medical World* was opposed to the writer, and so it was considered, that to deny was equivalent to disproving.

Dr. Carl Both, of Boston, has propounded similar views. They are certainly entitled to careful consideration. According to this writer, "Small-pox consists of an escape of something into the skin, which causes it to swell, and by a process of putrefaction destroys it, and not unfrequently carries off the patient. This mass which is thus exuded or thrown off into the skin, *must* necessarily come from the blood; therefore it must be something in the blood, which is abnormal, sickly, or bad, or there must be something which has deranged the whole system to such a degree, that the blood, as a consequence, is disturbed in an exceedingly peculiar way."

He accordingly calls attention to the constitution of the

blood—water, albuminous combinations and blood-salts. The albumen is the portion that nourishes the body. But there is a limit or bound to its usefulness. The sympathetic nerve, also, being abused by stimulants or improper living, may relax in the skin, and produce the condition known as measles, or scarlet fever, or chicken-pox or small-pox; or if the living membranes of the internal canals of the body, are affected, scurvy, typhus, cholera and the like, may be the condition. In case of a lack of albumen, the blood will no longer coagulate, and will flow or filter through the vessels, as in scurvy and also in typhus and small-pox, after fever has reduced the volume of that material.

In small-pox, an extraordinary nervous irritation has produced a spasmodic contraction of the peripheric portion of the nerve, and thus obstructs the free circulation of the skin, producing a dull headache from the congestion. The nerve suddenly relaxing, allows the blood to rush into the now powerless vessels, extending them to the utmost, until they either burst or remain in this overfilled condition. The exuded mass of blood begins to putrefy, destroys the surrounding tissues, and finally dries up, leaving the skin in a more or less mutilated condition; or else the patient dies from general blood-poisoning or exhaustion, in consequence of the total absence of a re-established digestion.

*In short, the predisposition to small-pox consists in an undue proportion of albuminous matter to the blood-salts.*

Dr. Both believes that small-pox may be evolved *de novo*, in this peculiar condition of the blood. "Without the daily use of salt," he declares, "the toper becomes more or less bloated in appearance, and is not only an easy prey to small-pox when exposed, but is in that condition under which *small-pox can originate in him at any time*. Therefore, we find small-pox among races or nations that use alcohol freely."

He also narrates the case of the commander of a vessel, who contracted small-pox, as he considers, in this spontaneous manner. The vessel left Europe having on board twenty-two sailors and one passenger; the fare consisted of pickled meats, starch, flour and potatoes. After being three



months out, two of the sailors were taken sick with small-pox. The meat had been pickled with saltpetre and not with salt, in order, probably, to avoid scurvy. It tasted so bitter after twenty-four hours of soaking, that he ate a good deal of starch and flour to counteract the taste. No salt was eaten at all.

Saltpetre is a nitrogenous combination, and closely allied to albumen. The same seaman had never known or heard of scurvy and small-pox on the same vessel.

His sister, Dr. Both informs us, had the malignant small-pox twice, although she had been vaccinated.

The result of the superfluity of albumen in the blood, produces a nervous irritation, which may become sufficient to induce the blood to part with the superfluous element. It is thrown to the skin, and so constitutes the condition commonly called small-pox. "A person who does not exhibit this superabundance of albuminous matter in his blood, is *not* liable to small-pox under any circumstances of exposure, or contact with patients suffering from this disorder."

Dr. Both considers that the prevention afforded by vaccination, is due to the lessened or diminished amount of albumen in the blood, occasioned by the ulcer produced. There is nothing specific in the virus, whatever its source; and indeed, the vaccine virus generally employed is nothing but pus; the introduction of which into the blood is a criminal offense under any circumstances. Inoculation with pus or morbid organic matter is dangerous, producing malignant ulcers. Hence, swelling of the axillary glands, ulceration and other serious consequences sometimes have followed vaccination.

The employment of artificial ulcers to rectify the blood is an old expedient, and was employed by the Chinese long before our history began. It was done to remove "humors," as our grandmothers expressed it, from the blood. What the *humors* were, nobody could tell; but now we know them to be histolytic and other albuminous substances not properly eliminated. An ulcer consumes a great deal of albumen owing to the cell-formation constantly going on. If it is kept open long enough it would remove the superfluous

albumen, and thus procure immunity from small-pox. "The preventive power of vaccination lies in this waste of albumen, and in nothing else."

Any ulcer would have the same effect. In this waste of albumen, we have the explanation of the fact that patients suffering from chronic ulceration, do not contract certain blood-disorders. A consumptive person is never attacked by typhus or small-pox. But an ulcer will not invariably rectify the blood, except prompt nutrition and excretion are going on at the same time. Dr. Both further insists that nothing whatever, of a specific character, can be found in small-pox or vaccine matter, or in excreta in cholera or other disease.

His conclusions are, therefore: 1. That small-pox consists in the escape of *superfluous* albuminous substances, into the tissues of the periphery of the nervous centres of the body, caused, in the first place, by the want of salt. 2. A *proper* use of salt is the most certain preventive of small-pox. 3. The use of organic acids is the best means of freeing the blood from abnormal substances. 4. Alcohol eliminates the blood-salts. 5. Sugar may take the place of salt to the detriment of the blood. 6. In mental labor, more salt is brought into requisition than in muscular or physical labor; and, therefore, more must be used or taken into the body in that case. 7. A person who has properly-balanced blood cannot contract small-pox under any circumstance of exposure.

If these positions are correct, "the proper use of salt in the human economy will eradicate small-pox at once and forever."

#### REMEDIES FOR SMALL-POX.

A confirmatory testimony in favor of organic acids, as a means of purifying and correcting the blood, is offered by Edward Hine, in a letter to the *Liverpool Mercury*. "I am willing to risk my reputation," says he, "if the worst case of small-pox cannot be cured in three days simply by the use of cream of tartar. One ounce of cream of tartar dissolved in a pint of water, drank at intervals when cold, is a certain, never-failing remedy. It has cured thousands;



never leaves a mark ; never causes blindness ; and avoids tedious lingering."

A formula, accredited to the University of Paris, is said to be specific for small-pox, scarlatina, and other zymotic and exanthematous diseases. R. Zinci sulphat., digitalis foliarum pulv., aa, gr. j. Add a half-teaspoonful of sugar, and mix with two table-spoonfuls of water. Afterward add four ounces of water. Give the patient a table-spoonful every hour, or a proportionate dose to a child, according to age. Either disease, it is asserted, will disappear in twelve hours.

At a meeting of the Medical Association of Alabama, in 1872, Dr. G. D. Norris, of Huntsville, reported that during the prevalence of small-pox in that town, certain families, at the instance of "some unknown person," (an *irregular* practitioner, doubtless), had resorted to the free use of a decoction of the root of the black cohosh (*Cimicifuga racemosa*). They escaped the contagion ; and it was found impossible to affect them by vaccination till they had discontinued the use of the remedy.

Baptisia and hydrastis are mentioned by Dr. J. J. Garth Wilkinson as possessing analogous virtues. Some would employ the tincture of gelsemium, and very probably with benefit, to alleviate the congestion and other symptoms.

Having now suggested various methods to arrest and treat this malady, I will now resume the original topic, and call attention to the character of vaccination and the mischiefs which it is accused of producing.

#### WHAT IS "VACCINE VIRUS" ?

Jenner, it is well known, confessed that the "lymph" evolved in cow-pox was totally inoperative as a protection against variola. His modern disciples have departed from his teachings, and often make a specialty of procuring and using virus fresh from the calf. It is but just to remind them and the public, whom they are duping, that they are bepraising the very article that Jenner asserted to be useless.

No cow or bullock ever had the disease, which he relied

upon in the generation of his great prophylactic, except by having been contaminated from an alien source. The "vaccine disease" which he described was peculiar to certain dairies; and in those dairies Jenner ascertained that *men* were employed in milking. Following up this clew, he further made out that those men had also the charge of the farm-horses. Next, he learned that the teats of the cows generally began to exhibit the specific eruption at that time of the year when a complaint called "the grease" chiefly prevailed among the horses. Hence, he concluded that the malady was conveyed to the cows by the hands of the men, who had been dressing the heels of horses affected with "the grease."

This disease consists of an enlargement or swelling of the heels of the animal, from which exudes a quantity of filthy purulent matter, of a disgusting appearance, and having a most offensive smell. Jenner describes it as "possessing properties of a peculiar kind, and seemingly capable of generating a disease in the human body, which bears so strong a resemblance to small-pox, that *I think it highly probable that it may be the source of that disease.*"

Jenner frequently employed the virus just as it had been obtained from the horse's heels, and, indeed, was of opinion that *there could be no protection against small-pox in any system of vaccination, where the ichor had not this origin.* The manifestation in the heels is not a local but a constitutional disease. Dr. Collins has given us the pathological anatomy: "I have seen the fatty excrescence cut off and burned with nitric acid, and other local treatment had recourse to; but the grapy-looking mass gradually increased, the whole limb of the animal being implicated, and the fœtor from the breath very offensive, especially in the latter stage of the disease, when the animals were obliged to be slaughtered. The *post-mortem* appearances, by the way, must not be lost sight of, and are, in a pathological sense, very instructive. 1st. There was a general anæmic look of the body, wasting of the tissues, and an unusual thickening or fullness of the lymphatic glands. 2d. Lips, tongue and gums covered with peculiar cankerous-looking ulcers, and



much swollen ; the whole mucous membrane much softened and covered with dark livid spots ; ulceration of the larynx and trachea ; the lungs highly congested, and large cavities ramifying through the substance of the organ, filled with purulent matter, corresponding in every particular, both in fœtor and character, to that exuding from the greasy heels, and *which is seen in the last stage of consumption in the human subject.*"

The terrible fact is thus disclosed :

VACCINE VIRUS ORIGINALLY, IS THE ROTTEN PUS FORMED IN THE BODY OF A HORSE DISEASED WITH PULMONARY CONSUMPTION.

"Thus bad begins, and worse remains behind."

#### THE DEADLY RESULTS OF VACCINATION.

Attention has already been directed to the fact that persons in actual health, and not exhausted by fatigue or other cause, are exempt from small-pox and kindred maladies. Certainly, it is not good sense, to place in the blood of such individuals, the virus of any disease. If a person possesses a fair integrity of constitution, it should be preserved and protected. The endeavor to compel him to contract a disease is an outrage. He can never hope, after such contamination, to regain his former purity of body ; he is thenceforth tainted, and made liable to a host of ailments. The experience of syphilisation is in point. Persons who never contracted syphilis or gonorrhœa, are with impunity brought into frequent contact with the disease. But, when once infected, there ensues an impairment of healthy conditions, a peculiar and heightened susceptibility, which renders subsequent exposures almost certain to communicate disease.

The vaccinating of a healthy person is an act of this character. It is the infusing of a contaminating element into his system. Once implanted there, the body seldom or never regains its previous integrity. Dr. Dickson, the chronothermalist, used to teach that diseases were not recovered from, but that intervals took place between the attacks. Something of this sort is true about the vaccine, or as it should more accurately be designated, the *equine* disease.

It first destroys the stamina and purity of the constitution, so that the person is always afterward more liable than ever to contract disorder of an analogous character; and after that we may look for one and another attack, which nosology may call by another name, but which really is, as the Indian expressed it, "that same old drunk."

Consumption follows in the footsteps of vaccination, as certainly and as unequivocally, as an effect follows a cause. Wherever it is common to vaccinate, scrofula and tuberculosis are general. We have no right to expect otherwise.

The sputum of phthisis is itself as poisonous as the glander-poison of a horse; and will cause the development of tubercle in every person's body almost, who consents to be inoculated. The "grease" being itself consumptive, sufficiently taints or degenerates the body of the vaccinated person, so as to make that disease more general, and if possible, more deadly. Having that disease for its parent, it would be a marvel, indeed, if consumption should not be, as it is, its abundant offspring.

In Massachusetts, where great pains are taken to disseminate the terrible poison, consumption appears to be a perpetual epidemic. A few years ago the Governor of Connecticut made the mortality in that state from that destroyer a topic of his annual message.

The report of the Epidemiological Society of London shows that, while in England, in the twelve years extending from 1853 to 1865, deaths from small-pox diminished from 82,825, for twelve previous years, to 47,710, there were upward of 100,000 more dying of measles, scarlatina, whooping-cough, and croup, or, as we have the name new-fangled, diphtheria.

In the same period, the increase of deaths from consumption was barely short of 230,000.

The registrar-general's report for 1869 contained the record of 53,734 deaths from phthisis alone. The *Medical Times and Gazette* for January 1, 1854, acknowledged that consumption had widely spread since the introduction of vaccination; and during the proceeding ten years had slain 68,204 in the metropolis alone.

Prof. Bartlett, of New York University Medical College,



remarks: "In 208 children who had been vaccinated, 138 died of tubercular consumption, 170 of other maladies; in 95 who were not vaccinated, 30 only died of tubercular consumption, and 65 of other disease."

Many pathologists believe that scrofulosis is the precursor of phthisis. I doubt this, but not for reasons that are entirely conclusive to my judgment. I am of opinion, nevertheless, that the scrofulous fluid is of a character, as well as consistency materially different from that of the tubercle. It has been suggested that pork-eating was a disseminator of the complaint. The Jews, it is asserted by many, enjoy great immunity from struma, measles, and analogous disorders. This is attributed to their abstinence from pork. One of that Semitico-Phœnician race, however, has informed me that although the Jews may have been formerly exempt from scrofula, it has become very general among them since they were compelled to undergo vaccination.

Copland's *Medical Dictionary* would confirm this statement. "It is certain," says he, "that scrofulous and tubercular diseases have increased since the introduction of cow-pox, and that the vaccine favors particularly the prevalence of various forms of scrofula."

Niemeyer, a champion of the practice, nevertheless acknowledges that "cow-pox leaves scrofulous affections behind."

Borham declares that the lymph taken from unhealthy persons laid the foundation of scrofulous and tubercular disease. De Terzé, of Paris, asserts that "typhus, scrofula, and tubercles are transformed internal small-pox." Doctor Pearce, of England, declared that where vaccination was compulsory, he had observed an increase of mortality. Baron Michel showed that in the case of 25,000 soldiers at Paris, since vaccination, mortality had doubled. Doctor Schlegel, of Saxony, finds "the number of unfortunates who suffer from affections of the eyes, ears, speech, and mind infinitely greater now than before vaccination."

Doctor Dongan Bird is emphatic: "The blood of the whole British population is saturated with scrofulous and tubercular diseases, which are more destructive to the youth

and flower of the European races than ever were the cholera, plague, or most bloody wars of Napoleon."

Not only is this true of the British people, but in every country in Europe in which vaccination is compelled by law, almost everybody is scrofulous. The royal family of England, with its immense army of German cousins, overflows with ichor. The House of Hapsburgh has no happier record. The Bourbons, very naturally, all have the malady. The Romanoffs are no more fortunate. There are thirty-nine families in Europe that are *pure*-blooded and blue-blooded enough for royal princes to marry into, and all but two or three are scrofulous.

Yet, many pathologists would trace the taint to another origin. Four centuries ago Europe had an epidemic of syphilis. It traveled from south to north, from court to court, entering the French king's bed, and leaving its marks pretty much everywhere. In the track of this pest, scrofula has been firmly rooted ever since. Observation would seem to show that the taint, or hereditary liability, follows lineages like a very Nemesis. Even when it has been "cured" by mercury, and though there is no hydrargyrosis or tertiary manifestation, a disease appears to be present, to contaminate offspring or cause abortion.

The inference from all this is that the scrofula of Europe had its source in syphilis. The next inquiry will be whether it is an effect or a form of that disease. Broussais appears to be of opinion that scrofula is a kind of chronic syphilis, and that it can, under peculiar conditions, be rendered acute. In such event vaccination might, in certain cases, communicate syphilis from a scrofulous patient, and more certainly establish scrofula in the other instance, as well as the more active ailment. Whether the scrofulous taint is transmitted with the virus employed, or whether it is the sequel of atavic, or other forms of syphilis, are questions of some moment. But we suppose that the so-called bovine lymph would be recommended in such a contingency. Our own belief is that any form of the disease works a deterioration of stamina and degeneracy of constitution, of which scrofulosis is the off-



shoot. The comparative filthiness of the lymph is a secondary matter.

But it is hardly necessary to speculate in this manner. There is evidence enough of syphilis propagating itself both by the natural method and by the lancet of the vaccinators.

We have cited cases enough to sicken anybody. It seems as if a man who could tolerate vaccination after these examples, would fiddle if the world was on fire, at least till the flames came around his own seat.

#### OTHER DANGEROUS DISEASES.

St. Gervais, Hufeland, Hertwig, Most, Grisolles, Canstatt, Beduar and others, count up some thirty dangerous diseases as direct consequences of vaccination.

That vaccine virus should induce pyæmia and erysipelas, is obvious on first sight. On the body of the cow it produces inflammation and suppuration of the sexual organs. Dr. Nittinger, of Stuttgart, asserts that, "The membranes, particularly those of the organs of the senses and generation in adults, attest the sufferings and dangers originating in the inoculated kine-pox poison, ophthalmia, otorrhœa, fluor albus, prurigo, etc."

This author has been very explicit and forcible in his declarations upon the subject.\* In response to an application of the British Parliament, he made a statement of great length, setting forth the evils of the practice. One entirely new disease, the softening of the stomach,† he declares, "has been added since 1811-1813 to one immensely large catalogue of destructive diseases."

He enumerates the following, namely:

"1. An immense degree of sickly sensitiveness of the stomach and intestinal canal, accompanied by open and hidden disturbances in the whole digestive apparatus, namely, diarrhœa, dyspepsia, phthisis dyspeptica, liver and spleen suffering, never known before.

"2. An entirely new disease (since 1806) which domesti-

\* *Evils of Vaccination.*

† JAEGER & CAMERER.

cates itself every year more firmly, *the typhus*,\* which is a mucous fever, with ulcerations and pox-eruptions in the abdominal viscera.

“3. The daily more frequent appearance of a new children-disease, which Millar observed and presented (1755) as the first fruit of inoculation in England—the *Asthma Millari*.

“4. The unfortunate children have gained, or rather regained, in an immensely more malignant form (since 1806), the long-before forgotten inflammation of the wind-pipe, *croup*. As formerly in England, nature revolted (1738) against the inoculation of the human small-pox matter, and tried valiantly to remove the poison by means of *catarrhal gangrenous Angina* in the throat—as children, for nearly forty years, suffered the tortures of horrible strangulation-difficulties, and many thousands of them, wretchedly perished; so there appears now here, and everywhere when vaccination is introduced, the croup,—somewhat milder, because the kine-pox is somewhat milder—and tortures, frightens, sickens and kills the innocent victims.

“5. The whooping-cough has gained in severity and extent immensely.

“6. The human family, in general, has acquired a monstrous increase in consumptive and hectic diseases, which mostly originate in the digestive apparatus, phthisis dyspeptica, or dyspeptic consumption.

“7. An entirely new disease, softening of the stomach, has been added, since 1811–1813, to our immensely large catalogue of destructive diseases,

“8. Our young women have gained, since 1822, a generality of chlorosis and fluor albus, of which we did not dream before.

“9. The whole human family have been enriched by the

\*VILETTE DE TERZE: *La Vaccine, Ses Conséquences Funestes*. Paris, 1857 : “Typhus, scrofula and tubercle are transformed internal small-pox.

SAMUEL HENRY DICKSON: *Scrofulosis and Tuberculosis*. “Of the three similar cachexiæ, typhosis, tuberculosis and scrofulosis, we may regard typhosis as the most acute, tuberculosis as intermediate, and scrofulosis as the most chronic.



acquisition of the Bengalian poison-snake—*hydr-ophis*—the tropical wild-pox poison, the cholera, which has now established itself among us thoroughly and habitually.\*

“10. Our generation has, besides this, gained a far greater susceptibility for the small-pox poison, which will ravage in the above-mentioned diseased forms of the mucous membrane, till the feeding of the poison by vaccination, ordered even by laws, sanctioned by the usage and held up by the Faculty, is forbidden by severe penalty.

Others, as well as Dr. Nittinger, made analogous observations. The extraordinary sensitiveness of the stomach, now so common, has been noted, as well as the disturbances of the whole digestive apparatus, as diarrhœa, dyspepsia, dyspeptic consumption, disorder of the liver and spleen, etc. The typhus, a mucous fever accompanied by ulceration and a peculiar eruption resembling small-pox in the abdominal viscera, has become more common.

Pneumonia, or more correctly, pneumonical fever, is now of remarkable frequency; and the mortality from it appears to increase, year by year.

Spasmodic croup is more frequent among children. Whooping-cough is more common; and diphtheria has become a scourge of Nemesis. We acknowledge that we do not believe half of what is written about this latter complaint, and that its name is often whimsically applied in the daily newspapers. But we do agree with Dr. Nittinger, that it has become a general malady, and that this frequency and extraordinary malignancy is a sequence of vaccination. Dr. Gregory and other vaccinators believed that the mucous membranes were made thereby the seat of animal poison. It is well known that small-pox eruptions are found in the inner coatings of the body. The intestinal membranes of persons dying from abdominal typhus are covered with similar eruptions. An intimate relation exists between this disorder and cholera. Can it be that Asiatic cholera is a consequence of vaccination?

\*It has been observed not only that pox was observable in the intestines of cholera victims, but that epidemics of small-pox ensued after those of cholera.

The relapsing fever, which seems to have originated in the poorer and more crowded parts of London, and has been brought hither several times by emigrant ships, is possibly another visitation from the same prolific sources. It resembled the famine plague, which devastated Ireland in 1847, and, coming over in 1848, was accepted as cholera.

Verily, "diseases have changed." We have diphtheria for our children and consumption for our adults, in extraordinary proportions. No disease, not even small-pox itself, has been or can be checked by vaccination; but such as we have are rendered more deadly. Scrofula is obtaining a foothold that will require generations to uproot.

#### TESTIMONY TAKEN BY PARLIAMENT.

In 1855, Doctor Simon, who was opposed to compulsory vaccination, was commissioned by Parliament to procure the opinion of the highest medical authorities of England. He addressed 539 physicians, whom he had supposed to approve of vaccination, and received 235 answers of simply, "Yes," or "No;" 72 that only allowed the genuine Jenner vesicle; 16 that "approved unconditionally," and 216 that objected, as follows:

1. It directly endangers life.
2. It nurses and develops latent diseases.
3. Children frequently do not thrive so well, after as before vaccination, especially during teething, change of teeth and puberty.
4. It introduces new diseases into the body of the patient.

Dr. Skelton says: "I have belonged many years to the great army of vaccinators, but cannot take any longer upon myself the responsibility connected with the operation, because *vaccine does not protect, but it also produces other diseases.*"

Dr. Collins testified to the appearance of scrofula; Dr. Pearce to a large increase of consumption; Mr. Whitehead to syphilitic contamination; G. S. Gibson to large increase in infant mortality; Mr. Emery to ulcerous sores; Mr. Covington



to consumption ; Mr. Addison, who was compelled against his will to obey the law, to a rash which ended in death.

The Rev. Hume-Rothery testified : “ I had a healthy child which suffered from a very large series of very large boils, coming on three months after vaccination—which I believe to be the cause.

“ Another case, a healthy child, nine months old when vaccinated, was afterward afflicted with sore eyes for many years, and they are still weak. It was afterward found that sore eyes prevailed in the family from which she was vaccinated.

“ A third case, a fortnight after vaccination (at nine months,) became covered with an offensive eruption all over the body ; is now three years old, and has seldom since been free from sores and scabs. Her elder brother, not vaccinated, father and mother, and families are remarkably healthy.

“ A fourth case, now four years old, healthy before vaccination, has never since been so. Nine months after, foul sores broke out, which continued, and appear likely to continue. There is a hole in one hand, and the foot is probably crippled for life.

“ In the fifth case, vaccinated when a babe, the family on all sides perfectly healthy, *cancer appeared on the chin* at eighteen months old ; and she lost the left breast from cancer at thirteen. It was discovered on enquiry by the doctor, that *the mother of the child from whom the lymph was taken had a cancer*, of which she subsequently died.

“ A sixth case, exceedingly well before vaccination, was never well afterward. Its flesh rotted on the slightest scratch of a pin, and now and then broke out into scabs and sores. It died when twenty months old.

“ Six other children were vaccinated from this child, not one of whom survived.

“ A seventh case, a healthy babe before vaccination, became ever afterward an indescribable sufferer, and died at nearly eight, *his body being literally rotten*. His father, mother and five other children were all remarkably healthy.

“ In an eighth case, a healthy boy four months old, was vaccinated. Three months afterward the arm began to break

out ; the head was one mass of sores, which continued for twelve months. I believe it was syphilis. There had never been any disease in the parents' families.

"All these cases were in Middleton."

#### BLOOD-POISONING.

Other venomous and contagious diseases are oftentimes transmitted with the contaminating virus. Pyæmia is to be expected. Erysipelas is the legitimate sequence. Other disorders which erysipelas very aptly represents, may doubtless be included in that category. Mary Magdalene may have had seven devils cast out of her, but when vaccination occurs, a legion of devils comes in.

Dr. Siljestrom, a member of the Parliament at Stockholm, Sweden, states the question as follows: "I have always felt that if vaccination does not stand against small-pox, it is nothing; if it does so stand, millions to one but what it imparts other and more powerful disorders into the system. My own coachman's child took erysipelas concurrently with vaccination; and both the child and its mother who was nursing it, who had had the small-pox, died of erysipelas. I knew also the case of an eminent literary man, crippled with a skin-affection, a kind of eczema of the leg, ever since being re-vaccinated four years ago. I have often—almost daily—heard parents say: "My children have never been the same since they were vaccinated."

#### SYPHILIS.

It may be regarded as certain that a vaccinated person will contract syphilis and its associate disorders under conditions which, if he had not been thus blood-poisoned, would have suffered him to escape. Indeed, I am of opinion that it appears oftener under such circumstances than from a contagion otherwise encountered. The following is the testimony of witnesses who may be regarded as experts:

Ricord testifies: "Formerly I denounced the idea that syphilis could be transmitted by vaccination; to-day, I do not hesitate to proclaim that it is so propagated."



Doctor Bamberger, of Warzburg, says: "I am convinced that contagious disease—syphilis, for instance—is communicable with the lymph in vaccination; nay, such a case happened a short time ago in a town a few miles from this place. After due enquiry into the circumstances of the case, the practitioner was found guilty by the court of justice, and condemned to prison for several months."

Mr. Startin, of England, gives it as his opinion that the true Jennerian vesicle, in a subject suffering under constitutional or acquired syphilis, may be the means of transmitting this disease, and adds that "he has seen it many times transferred from such a vesicle."

Cerioti reports a case as follows: "In 1841, a child born of syphilitic parents, but having no symptoms of syphilis at the time, was used to provide lymph to vaccinate sixty-four persons, who were all syphilized. The first symptom was ulceration about the seat of puncture, followed later by copper-colored spots all over the body, ulcers of the groin, genitals, anus, and mouth. Eight children and two women died." \*

It is certain, that during the late civil war in the United States, syphilis was liberally disseminated by the surgeons, who ignorantly or recklessly vaccinated their patients with tainted virus.

#### LEPROSY.

Doctor Makewell, having been summoned before the committee of the British House of Commons, made the following alarming statement:

"There is a very strong opinion among medical men in the West Indies, that leprosy has been communicated by vaccination. They often apply to me for lymph from England, though there would be an equal chance of English lymph being contaminated by syphilis. I have seen several cases of leprosy in which vaccination seemed to be the only explanation. I have a case now, a child from India, a leper—both parents being English. I saw another, a Creole of Trinidad, also of English parents.

"Sir Ranald Martin agreed with me, that the leprosy arose

\* *Journal des Connaissances Medicales*, 1865.

from vaccination. I have seen several cases of leprosy resulting from vaccination. I arrived at the conclusion with reluctance, in the face of difficulties."

#### OTHER DISORDERS.

Other pests are transmitted, many of them disgusting and deadly. Abscesses, external ulceration, scab, prurigo, and a hundred annoying kinds of eruption and sore, are induced. The number is legion.

Langenbeck, Lebert and Follier, assert that cancer as well as syphilis can be thus transplanted; Villemin, Cornil, Simon and others, that the same can be done with tubercles.

Doctor Plaggè observes that the causes of increasing suicide and insanity, are not to be searched in social conditions, but in the terrible progress of the corruption of the human fluids. I have already recounted the variola intestinalis or abdominal typhus, scarlatina, croup, diphtheria, female diseases, and that bane of American life, dyspeptic consumption. I do not suppose any of these to be directly communicated by vaccination. The constitution is only tainted, made susceptible, its integrity impaired, so that these diseases readily appear.

#### A BUBBLE INFLATED AND PRICKED.

The Epidemiological Society of London has endeavored, with great industry, to prop up the practice by statistics. British legislation has spread it about by fines and imprisonment, despite the dissenting judgment of men like Sir Robert Peel, W. E. Gladstone, and Francis W. Newman. But, as Herbert Spencer aptly remarks: "Medical popery, which men think so defensible, is parallel to the religious popery which they think so indefensible."

A report of the society states that before the Compulsory Vaccination Law of 1853 in England, there died of small-pox, during twelve years, 82,825 persons; after 1853, in a like period, there had only 47,710 died of the same disease.

A further examination of this report, however, gives us some other statistics that require looking to:



1. During twenty-four years, 130,535 persons died of small-pox. The average mortality, from this disease, was 7 per cent. before the vaccine disease; so that it would seem that, despite universal compulsory vaccination, two millions of persons had small-pox.

2. Where small-pox decreased, there was an increase of other skin-diseases; thus, from 1853 to 1865, upward of 100,000 more persons died of measles, scarlatina, whooping-cough, and croup (diphtheria) than ever before.

3. Nearly 230,000 more persons died of consumption than ever before.

4. Of the small-pox patients, about 84 per cent. were vaccinated.

Sir James Y. Simpson, himself a supporter of vaccination, furnishes us with a more complete view of this matter. He declares "during the ten years, from 1856 to 1866, above 51,000 persons died of small-pox in Great Britain; and, if we calculate proximately from the population, above 12,000 more in Ireland, making upward of 53,000 in the United Kingdom. In the ten years from 1855 onward, there died in the United Kingdom, from scarlatina, above 280,000; from measles, above 130,000; from whooping-cough, above 150,000."

Herr Kolb, an eminent German statistician, presents the most specific, candid and reliable explanation of the statistics which had been submitted by the advocates of vaccination. He boldly declared it impossible that the disappearance of epidemic small-pox about the time of the introduction of that practice, could have been due to "the newly-introduced panacea." Small-pox, he asserts, was already on the decline in proportion as inoculation became less general. In 1802 there were in all Germany not more than thirty thousand vaccinated persons in a population of thirty millions; while in England, in 1807, according to a report of the College of Physicians, about  $1\frac{1}{2}$  per cent., or a little more than 164,000 were "protected." Allowing that this minority were rejoicing in their "absolute and life-long protection," how came it to pass that *this same immunity was granted to the remaining millions of unvaccinated people?*

"It is clear," says he, "that while so few were vaccinated, the *cow-pox* could not have formed the only possible safeguard against the spread of infection. Very striking is the experience of Sweden. In 1800, the small-pox mortality was fifty-one in ten thousand of population. In 1801 the number of vaccinated persons was only eight thousand, yet the mortality fell to twenty-four. In 1802, IT FELL TO SEVEN. But instead of drawing the very natural conclusion that small-pox was on the decline, the newly-vaccinated eight thousand were credited with spreading their salvation over the remaining 2,500,000 of inhabitants! And these are Vaccination Statistics!

It is hardly probable that with the sentiment of the most enlightened men of Europe forming and concentrating against the practice, it can long withstand the pressure. This "crime against nature," as Dr. Bayard styled it, predisposing the human family to boils and putridity, "doubling the mortality among young people;" multiplying disorders of the eyes, ears, speech, and mind, as Professor Schlegel asserts; shortening life, will doubtless, ere long, succumb before the Anti-Vaccination Leagues that are forming in all parts of that continent. Several European sovereigns have already forbidden re-vaccination in their armies, because of the increase in the mortality among vaccinated soldiers. As the world moves, blood-poisoning with venesection and drug-poisoning will disappear from its place in medical practice.

In this country, the profession will only *follow*. There is not the moral courage here that is displayed by men of learning in the Old World. There is a tendency exhibited toward the authorising of Medical Boards in the States, clothed with arbitrary powers. It was probably an outgrowth of the civil war, and is greatly to be deplored. With such legislation, men will learn to calculate the value of institutions. A free government is impossible where a privileged caste is permitted to make the laws. It is no better to have Health Boards or Medical Corporations establishing regulations, than common politicians.

I have noticed a timidity in public journals, in regard to this matter of vaccination. I do not know of a single daily



newspaper, that would admit a communication opposing the practice. Perhaps, the New York *Herald* is an exception. In 1874, I offered a paper to the late Samuel R. Wells, of the *Phrenological Journal*. He was a man of deep convictions, and had been very outspoken in his advocacy of "Hygiene" and opposition to medication. But he hesitated to publish so extreme an article. It was finally reduced to a series of questions, published, and *never* answered.\*

It is in Europe, where government is more despotic and public opinion more courageous, that abuses may be extinguished and denounced. I admire men like Kolb, who boldly depicts vaccination as "a mystical theory deprived of all scientific basis," and derides "the dogma of lifelong protection justified and proved by the experience of *two* important and eventful years."

Dr. Mitchell, member of the British House of Commons, was none too severe when he said: "Vaccination has made murder legal. Vaccination does not protect against small-pox, but is followed by blindness and scrofula. Jennerism is the most colossal humbug which the human race has been burdened with by fraud and deceit."

Professor Hamernick put on the copestone in his over-true declaration, that "vaccination is a disgrace to the practice of medicine."

The project imputed to Doctor Blackburn, during the civil war, to procure infected clothing, and sell it among the people of the Northern States, was justly stigmatized as a crime against civilization, against religion, against human nature itself. What better can be said concerning vaccination

\* Since writing this article, the Eclectic Medical Society of the State of New York, held its annual meeting at Syracuse. Vaccination had been announced as a topic of discussion. One speaker declined to consider it, asserting that it was a matter long since settled past question. Not willing to let it go by default, I obtained the floor, and debated it. Nobody attempted an answer; but at the recess taken a little while after, a well-known practitioner came to me, and begged me to desist from expressing my opposition. He was apparently afraid that something or somebody would be hurt by such a discussion.

