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BRIEF EXTRACTS

FROM

HIGH AUTHORITIES

*Exposing the Evils of Vaccination*

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BRIEF EXTRACTS

FROM

HIGH AUTHORITIES

# Exposing the Evils of Vaccination

THE GREAT MEDICAL DELUSION OF THE  
NINETEENTH CENTURY, NOW  
EXCITING POPULAR  
INDIGNATION.

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PROVIDENCE, R. I.  
SNOW & FARNHAM, PRINTERS,  
1891.

Annex

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BRIEF EXTRACTS

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PRINTED FOR PRIVATE CIRCULATION.

# NOTES

ON

# VACCINATION.

DEDICATED TO

*The Board of Guardians for the Union of  
West Bromwich.*

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OLDBURY:

THE MIDLAND PRINTING COMPANY, LIMITED, SIMPSON STREET.

*To the Members of the West Bromwich Board of Guardians.*

GENTLEMEN :

We, the undersigned, defendants in the recent prosecutions taken against us by your instructions for the non-vaccination of our children, beg to submit the following remarks for your consideration, and trust the facts contained herein may at least induce you to refrain from any further prosecutions for medical heresy until the present Royal Commission has issued its report on the practice of vaccination.

*(Signed),*

WILLIAM ARNOLD, Solicitor's Clerk, Oldbury.

ARTHUR T. CARR, Solicitor, Birmingham.

THOMAS PROVERBS, Engineer, Langley Green.

A. TROBRIDGE, } Analytical and Manufacturing  
Chemist, Langley Green.

*Sept. 28th, 1889.*

Glax-Cursio 8-14-47

## NOTES ON VACCINATION.

1.—Vaccination is no protection from, and has not diminished, Small-pox.

Vaccination was made compulsory by Act of Parliament in the year 1853. The Act was further amended and made more stringent in 1867, and again in 1871; yet each succeeding epidemic since 1853 has proved more fatal than those preceding it.

	Date.	Deaths from Small-pox in England and Wales.
1st Epidemic	1857-58-59	14,244
2nd "	1863-64-65	20,059
3rd "	1870-71-72	44,840

In the Report of the Metropolitan Asylums Board for 1887, 53,000 cases of small-pox are recorded, of which 41,061 are *admitted* to have occurred in vaccinated persons.

Sheffield, according to Dr. Barry, is a town in which vaccination has been most thoroughly carried out, 98 per cent. of the births being efficiently vaccinated; yet in the 1871-72 epidemic 1,007 *deaths* from small-pox occurred, the population then being 240,000. In the recent epidemic (1887-8) 7,001 cases were reported, with 648 deaths in a population of 316,000. Of these 7,001 cases, 5,851 are admitted by Dr Barry to have been previously vaccinated; whilst 221 of the above cases occurred among the *re-vaccinated*, and included twelve soldiers and six hospital attendants.

At Ashton-under-Lyne there were 108 cases of small-pox, of which 95 were admitted to have been previously vaccinated, including two re-vaccinated hospital nurses.

In the fifteenth report of the Medical Officer of Health for the Hereford Union, which has just been issued, 56 cases of small-pox are recorded, 54 of which are entered as occurring in the vaccinated. Of the two unvaccinated cases, one was that of a baby two months

old, who took the small-pox from its re-vaccinated father. There were three deaths, the whole of which occurred in the vaccinated. Of the 54 vaccinated cases, five are reported as having been re-vaccinated, whilst one (in the parish of Marcle) occurred in a gentleman "who had been vaccinated and *re-vaccinated no less than four times*, with any amount of marks therefrom." He had "a very sharp attack," and communicated the disease to four other members of his household, three of whom had been recently re-vaccinated, the fourth being a baby which had been vaccinated about twelve months previously.

[For outbreak of small-pox amongst the vaccinated inmates of St. Joseph's Industrial School, Manchester—See Appendix B.]

2.—The Medical Faculty are at hopeless variance as to the nature of vaccine, the source from whence it may be obtained, and the method of vaccinating.

The following are a few of the many sources from which vaccine is obtained :

(A) *Horse-grease*—either used direct from the greasy heel of a horse, or indirectly by passing it through the system of the cow. This was the *only* vaccine recommended by Jenner, who described horse-grease as "the genuine life-preserving fluid."

(B) *Cow-pox*—arising spontaneously in the cow—declared by Jenner to be non-protective against small-pox, but extensively used and propagated by Drs. Woodville and Pearson.

(C) *Small-pox Virus* inoculated on the cow—declared by Dr. W. B. Carpenter to be the only vaccine possessing a scientific basis. This small-pox lymph was largely propagated by Mr. Badcock, of Brighton, who vaccinated more than 14,000 persons with it himself, and supplied it to more than 4,000 medical practitioners. This is still the principal variety of lymph in use in Brighton, and is constantly being propagated from arm to arm throughout the country.—*Vide Nineteenth Century Magazine* for October, 1881, p. 552.

In reference to this lymph, Dr. Cameron,—a member of the medical staff of the Local Government Board,—writing to *The Times* of November 24th, 1879, says :

“ Now what I want to know is what has become of this lymph?  
 “ My reason for asking the question is that more recent and search-  
 “ ing experiment has demonstrated that it is not vaccine lymph at all,  
 “ but *small-pox* lymph, capable of being inoculated apparently with  
 “ greater safety to the individual than ordinary small-pox, but, like  
 “ the mildest inoculated small-pox, capable of propagating that dis-  
 “ ease in the most virulent form by infection.”

When doctors differ who shall decide?

### 3.—The Medical Faculty now admit that syphilis and other inoculable diseases are spread by vaccination.

Dr. George Wyld, M. D., Edinburgh, an ardent advocate of vaccination, says: The in-vaccination of syphilis “ was long denied  
 “ by medical men, but it is now admitted, and therefore, of course,  
 “ you require to exercise very great care how you vaccinate.”

The deaths from syphilis in children under one year old have increased since the date of compulsory vaccination from 607 to 1,738 per million of births per annum.—*Vide Parliamentary Return*, November 5th, 1880. [Appendix A.]

Dr. Charles Creighton, M. D., a leading authority on Pathology, states that “ The so-called syphilitic properties of vaccine are not a  
 “ contamination of it by another virus, but a revival of those in-  
 “ herent properties of cow-pox, to which it owes its original collo-  
 “ quial name of a pox.”

### 4.—Vaccination is a direct cause of death.

The Registrar General records 316 deaths from “ Cow-pox, or other effects of vaccination,” during the six years, 1881 to 1886.

This is only a small proportion of such fatalities. At Norwich, in 1882, four children were killed by the effects of vaccination; at Great Cornard, in November, 1883, three children met a similar death, whilst at Gainsborough a similar set of disasters resulted in the death of eight children. These fifteen deaths were certified, after official inquiries, as due to vaccination, but in only *one* case had vaccination been mentioned in the death certificate.

Dr. Henry May, Health Officer to the Aston Union, in an article on Certificates of Death, says: "In certificates given by us voluntarily it is scarcely to be expected that a medical man will give opinions which will tell against or reflect upon himself in any way. As instances of cases which may tell against the medical man himself, I will mention erysipelas, arising from vaccination and peral fever. A death from the first cause occurred not long ago in my practice, and although I had not vaccinated the child, yet in my endeavor to preserve vaccination from reproach I omitted all mention of it in my certificate of death."

In July, 1869, Dr. Lankester, the Coroner for Middlesex, refused to recognize vaccination as a cause of death, and altered a verdict, which had been returned as "Death from the effects of vaccination," to "Death by the visitation of God." The cause of death was thus registered at Somerset House.

In face of these statements, it is no surprise that in the above recorded fifteen deaths from vaccination a certificate to that effect was only given in one instance. Assuming this proportion of correct certificates to cases to be general throughout the country, the above 316 deaths recorded by the Registrar General indicate a death-rate of 790 per annum from "Cow-pox and other effects of vaccination."

For every death from vaccination there are many cases of life-long injury.

5.—A large and influential number of medical men have declared themselves against the practice.

Dr. John Epps, twenty-five years director of the Royal Jennerian Institute, after vaccinating about 120,000 people, finally declared in 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 small-pox. It is neither antidote nor corrigent, nor does it neutralize the small-pox, but only paralyses the expansive power of a good constitution, so that the disease has to fall back upon the

“mucous membrane. Nobody has a right to transplant such a mischievous poison compulsory into the life of a child.”—London Vaccine Institute Report, 1863.”

Dr. W. J. Collins, L. R. C. P., Edin., M. R. C. S., England, whose son is a member of the present Royal Commission on Vaccination, stated before the select committee of 1871, that—“He had ceased to vaccinate for ten or twelve years. He had known persons who had been vaccinated and re-vaccinated suffer dreadfully from small-pox; two of whom died of the most hideous confluent form after successful vaccination and re-vaccination, one of them three times vaccinated. He had vaccinated thousands, but at last abandoned the practice, and gave up at least £500 a year by so doing. He found that cow-poxing weakened the powers of vitality and often proved fatal.”

Dr. R. H. S. Carpenter, the Hon. Secretary of the Medical Alliance Association, in a long letter to the *Hospital Gazette*, of September 22nd, 1888, points out the attendant dangers of vaccination, and records several terrible disasters from the practice. He strongly condemns the compulsory infliction of an operation attended with such ghastly results. The editor, in a foot note, declares vaccination to be “one of the burning questions of the day,” to both sides of which the columns of the *Hospital Gazette* will be open.

Dr. Charles Creighton, M. D., Demonstrator of Anatomy in the University of Cambridge, and a man of high standing in his profession, is the author of the lengthy article on “Vaccination” in the recently issued “*Encyclopædia Britannica*,” which deals a severe blow to the practice in question, and marks an epoch in the vaccination controversy. This article has fairly taken the medical world by surprise, and the weighty arguments against vaccination therein have, as yet, met with no attempt at refutation. In one of the latest productions from his pen, on this subject, he says: “Anti-vaccinists . . . have scrutinized the evidence” for and against vaccination” to some purpose; they have mastered nearly the whole case; they have knocked the bottom out of a grotesque superstition.”

6.—The enforcement of the Law is entirely at the option of the Guardians.

The President of the Local Government Board—Mr. Ritchie—said in the House of Commons, on February 17th, 1888, in reference to the “Order” of October 31st, 1874, setting forth the duties of Guardians as to prosecutions, that it “Was not binding on “Boards of Guardians; the Order was merely a communication “and it rested entirely with Boards of Guardians to exercise their “discretion in the matter.”

Vaccination is rapidly becoming unpopular throughout the land, as is indicated by the increase of active resistance against the enforcement of the law. During the five years ending 1886, the number of prosecutions for non-vaccination amounted to 12,800, notwithstanding the fast increasing number of Unions in which the Guardians decline to prosecute. Among such may be mentioned—Banbury, Barrow, Biggleswade, Bingley, Dewsbury, Falmouth, Gloucester, Halifax, Haworth, Hull, Keighley, Kettering, Leicester, Luton, Oldham, Penzance, and the Metropolitan district of Shore-ditch. In Eastbourne no magistrate can be found to sit upon vaccination cases, and no prosecutions have taken place since 1884. In other towns no auctioneers can be found to sell the goods of persons distrained upon under this odious law; whilst many Boards of Guardians have suspended prosecutions awaiting the report of the Royal Commission now sitting.

The granting of this commission is an official admission that vaccination is open to question, and those who regard it as a useless and hazardous delusion are at least entitled to the benefit of the doubt, whilst the question is *sub judice*.

The power to enforce this unequal law, or not, is entirely in your hands, and you have an absolute discretion as to its exercise.

We therefore appeal to you to withdraw from the vexatious prosecution of parents who feel compelled, on conscientious grounds, to protect their children from what Sir Thos. Watson, M. D., F. R. S., has described as the “ghastly risk” of vaccination.

[APPENDIX A.] **PARLIAMENTARY RETURN (Condensed)**

SHOWING

Deaths of Infants under one year per Million of Births, in England and Wales, from Nine Specified Causes, in three Periods, with the Annual Averages.

(1st Period—Vaccination Optional. 2nd Period—Vaccination Compulsory. 3rd Period—Vaccination strictly enforced by Acts of 1867 and 1871.)

Years.	Syphilis.	Scrofula.	Tabes Mesenterica.	Skin Diseases.	Erysipelas.	Pneumon including Pyæmia.	Bronchitis.	Diarrhoea.	Atrophy and Debility, including Premature Births.	Total of the preceding causes.	All other causes.	YEARLY AVERAGE.
8 Years. 1847 to 1854.	4,860 607	2,930 366	24,340 3,042	1,405 175	6,590 823	1,543 193	41,570 5,196	97,026 12,128	298,939 37,367	479,203 59,900	772,579 96,572	YEARLY AVERAGE.
12 Years. 1855 to 1866.	14,369 1,197	7,286 607	39,765 3,313	3,056 254	9,466 789	3,178 265	108,088 9,007	155,089 12,924	468,241 39,020	808,538 67,378	1,019,378 84,948	YEARLY AVERAGE.
12 Years. 1867 to 1878.	20,859 1,738	10,798 900	52,268 4,356	4,038 337	9,778 815	2,092 174	168,797 14,066	212,053 17,671	468,856 39,071	949,539 79,128	875,854 72,996	YEARLY AVERAGE.

General Register Office, Somerset House,  
5th November, 1880.

BRYDGES P. HENNIKER,  
Registrar General.

## APPENDIX B.

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The case of St. Joseph's Industrial School,  
Manchester.

In July, 1888, an outbreak of Small-pox occurred amongst the inmates of the above school, which contained at that time 146 children, with sisters and attendants. The regulations of the establishment require the production of a certificate of vaccination on admission; and the superintendent, Mrs. Gunning, says she knows of only one exception—that of a girl entering the institution where there was some doubt as to her vaccination. Every sister is required to be re-vaccinated on taking service in the institution. Small-pox broke out on July 6th, and during the same month 3 sisters, 5 attendants and 58 children—more than one-third of the total inmates,—were removed to the Monsall Hospital suffering from the disease.—Vide *The Times*, August 10th and 15th, 1888.

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“What renders the Cow-pox Virus so extremely singular is, that  
“the person who has been thus affected is for ever after secure from  
“the infection of the Small-pox; neither the exposure to the variolous  
“effluvia, nor the insertion of the matter into the skin, producing  
“this distemper.”—JENNER'S INQUIRY, 1798.

"If an offense come out of the Truth, better it is that the offense come than the Truth be concealed."

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# SMALL-POX

AND

# VACCINATION

BY

ALEXANDER MILTON ROSS, M. D., M. A., F. R. S. L., Eng.

*Member of the College of Physicians and Surgeons of Ontario, Quebec  
and Manitoba.*

*Member of the British and French Association for the Advancement of Science;  
Etc., etc., etc.*

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## TO THE READER.

I SHOULD be false to myself, and false to the best interests of humanity did I not record my conviction, based on irrefutable facts, that vaccination is an unmitigated curse, and the most destructive medical delusion which has ever afflicted the human race. I know full well that the vaccinator sows broadcast the seeds of many filthy diseases of the skin, the blood, the hair and the eyes, which are transmitted from generation to generation—an ever-abiding curse to humanity. In the interest of health, purity and truth, in the interest of true science, on behalf of tens of thousands of children, I ask you, to give this indictment a fair and righteous judgment.

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Toronto, Canada:

THE BUDGET PRINTING & PUBLISHING COMPANY, 64 BAY STREET.

1888.

### Telling Unpopular Truths.

**T**ELLING unpopular truth to the public is not pleasant, still unpopular truth should be told; for good may follow, though one cannot tell how or when. It may be contradicted, or it may find here and there a disciple; or the author of it may be reviled, persecuted, imprisoned, or held up to the scorn and ridicule of the public. In one or other of these ways attention may be drawn to the subject, and a spirit of inquiry excited which may result in the overthrow of the existing error.

# SMALL-POX

AND

# VACCINATION.

---

BY ALEXANDER M. ROSS, M. D., F. R. S. L., ENG.

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**S**MALL-POX is a member of the group of diseases termed zymotic, or fermenting, which have their origin in unwholesome conditions of life, and, in common, are diminished or prevented by the reduction and removal of these conditions.

A very wide diversity of opinion exists among medical writers regarding the antiquity of small-pox. It is quite certain, however, that we have no authentic description of any disease possessing the characteristics of small-pox till the sixth century, A. D., when it is described as breaking out in Arabia. It was widely disseminated by the wars of Mahomet and first appeared in Europe during the invasion of Spain by the Moors. The terrible scourge rapidly extended over Europe, and into whatever country it penetrated, amongst whatever people it found a home, and wherever its ravages decimated the people, the conditions which formed its development and its diffusion were one and the same. It was born in filth and nourished by filth, and claimed its victims where uncleanness dwelt, a selection, indeed, which is a common characteristic in connection with the rise and spread of all zymotic diseases. "During the middle ages," says Sir Lyon Playfair, M. D., "not a man or woman in Europe ever took a bath." Personal and domestic cleanliness was utterly ignored. Man is his own worst enemy. Ignorance and superstition have made him view this pestilence as a thing of superhuman origin and a punishment for national sins; whereas,

it is too true, that the small-pox and cholera plagues of the present time, like those of centuries past, owe their existence to the unhealthy condition by which we are surrounded, and to the irregular and unsanitary lives which characterize a great majority of the human race. Disease is the fruit of disobedience, and we must learn the fact that to obey is better than to sacrifice—that cleanliness is the only natural, hence scientific protection from filth diseases.

### Causes of Small-Pox.

The causes then which give rise to and propagate small-pox are within our control and are preventable. They may be summed up briefly as follows: Overcrowding in unhealthy dwellings or workshops, where there is insufficient ventilation, and where animal and vegetable matter in a state of decomposition is allowed to accumulate; improper and insufficient food, habits of intemperance, idleness, immorality, and unsanitary habits of life, such as neglect of ablution and the free use of pure water, and other irregularities of a like nature. To the removal, therefore, of the causes which are disease producers, the effort and skill of the sanitarian and philanthropist must be directed. The perfection of our sewerage system, the prompt attention to outbreaks of infectious disease, the immediate isolation of the infected, the purification of our atmosphere, the preservation of open breathing spaces, a pure and plentiful water supply, the inculcation of cleanly habits among the people, with the cleanliness of our streets, courts, and alleys, the prompt removal of decomposing matters, these and many other duties demand the constant attention and vigorous efforts of our sanitary authorities. Legislation can do much, the people can do more, but the people must be taught the importance of the subject in all its relation to their daily life; our children must be educated in the science of life how to promote it and how to preserve it. Social and sanitary science, by producing a healthy mind in a healthy body, will teach a man how to regulate and economize his life.

### What I Believe.

(1.) That epidemic diseases are the creation of municipal and personal neglect of cleanliness. That any medical theory which sets

aside the laws of health, and teaches that the spread of natural or artificial disease can be advantageous to the community, is misleading and opposed to science and common sense.

(2.) That exemption from small-pox, cholera, and other filth diseases, is not to be found in vaccination, but in the enforcement and extension of wise sanitary regulations, such as better habitations for the people, perfect drainage, pure water in abundance (and free to the poor), wholesome food, and inculcating amongst all classes of the community habits of personal and domestic cleanliness.

(3.) That vaccination is *utterly useless* and affords *no protection whatever* from small-pox. For proof, I refer to the official reports of the Montreal small-pox hospitals, showing that hundreds of thoroughly vaccinated people were stricken with small-pox, and that scores of them died, having on their bodies *one, two*, and in some cases *three* vaccine marks. And further, the fact that the ravages of the epidemic were confined *exclusively* to that section of Montreal noted for uncleanness and non-observance of sanitary regulations.

(4.) That vaccination (during an epidemic of small-pox) is an active and virulent factor, in propagating small-pox by creating a susceptibility to the disease.

(5.) That vaccination is not only *useless* but absolutely dangerous, as it frequently causes troublesome swellings of the arms and glands, and filthy diseases of the skin, blood, hair and eyes.

(6.) That compulsory vaccination is an outrage on the natural and inalienable rights of man and should be resisted by physical force if peaceful means fail.

### Vaccination.

In times when the laws of health were imperfectly understood the fanciful discovery was made that by poisoning the human blood with the virus of small-pox (1720), or cow-pox (1800), a future attack of small-pox would be prevented. Before the present system of vaccinating with cow-pox was introduced the practice of inoculating with the virus of small-pox was followed (1720-1800). The effects of this inoculation were greeted with the warmest praise. It was considered certain that small-pox would be completely "stamped out" by this means. For eighty years inoculation claimed its annual

sacrifice of deluded devotees. Roused from this sleep of death, the fact forced itself upon all classes that they were sacrificing their offspring at the shrine of a fetish more vengeful than any of which heathen nations ever worshipped. History furnishes no parallel to the useless and destructive havoc which was wrought by medical men of that period. It is said that the physicians of the time (1720-1800), were slow to admit the pretended virtues of inoculation; but when they did accept it they asked no more questions, but with the remorseless instincts of a class of men but half removed from a state of semi-barbarism they continued the loathsome and destructive practice until Parliament put an end to a rite which, whilst it was an enormous source of revenue to the medical profession, threatened the extinction of the race. When inoculation was relegated to the same tomb with other abandoned medical delusions, then this hideous fallacy of vaccination was introduced, substituting the putrid pus of diseased cattle for the syphilitic and scrofulous exudations of filthy men.

The founder of this monstrous fallacy—vaccination—was Edward Jenner, a native of Gloucestershire, England. In 1798 he called public attention to his discovery (?) that cow-pox virus introduced into the human body was a protection *for life* against small-pox (see Baron's *Life of Jenner*). In order to convince those who doubted the value of this pretended discovery he experimented by inoculating with small-pox virus those he had previously vaccinated with cow-pox virus. Some of the persons thus experimented on did not have the small-pox, but unfortunately for his discovery, others fell victims to his experiments. He then discovered (?) that there were two kinds of eruptions on the udder of the cow, one of which was spurious, while the genuine cow-pox was produced by contagion with *grease* in the horse. The cows in his neighborhood were sometimes milked by men as well as by women, and men would sometimes milk the cows with hands foul with the *grease* from dressing the heels of horses afflicted with what is called *grease*, a filthy exudation from sick horses. With this *grease* the dirty fellows poisoned the cows' teats, which soon became covered with running sores, or *horse-grease cow-pox*. This is what Jenner finally pronounced a *sovereign antidote against small-pox*. (See Baron's *Life of Jenner*, Vol. 1, p. 135.)

As Jenner's *horse-grease cow-pox* soon fell into disrepute as a preventive of small-pox, as originally asserted by him, *humanized cow-pox* was resorted to by arm to arm vaccination, and for many years this delusion was adhered to until proof was laid before the British Parliament that scrofula, syphilis, and many other foul diseases of foul men and women were transmitted to infant children through vaccination. Then this miserable delusion was abandoned, after having filled the world with untold misery and woe.

At the present time the vaunted prophylactic is *calf-pox virus*. It is said by the advocates of vaccination that Jenner's *horse-grease cow-pox* has lost its power as a preventive, owing to transmission from arm to arm. Hence to retrieve the credit of vaccination the calf project has been started, with the unscientific nonsense about resorting to *pure lymph from the calf!*

#### How Vaccine Pus is Obtained.

The vaccine *virus* or *corruption* is obtained by passing either small-pox, cow-pox, or humanized pox through cattle as follows: A calf or heifer is inoculated on its shaved abdomen in about sixty places. Upon the punctures thus made *vesicles* form. The vesicles run their due course, and the vaccine virus which they contain is ready for use in about six days—for use, namely, from the living animal for the purpose of vaccinating human beings, and for collection in a fluid state into tubes, or in a dry state on ivory points. After seven days the calf is returned to the butcher for ordinary use—namely, as food for those fond of *calf meat*.

The pus thus obtained from the calf is called *calf lymph*, but it is *not calf lymph*. It is the serum of a particular disease of the calf thrown out upon the skin. Calf lymph is the natural fluid that circulates in the lymphatic vessels of the calf—a healthy thing, as remote from *scabs* and *pox* as day is from night. It is this *virus* from the calf that our children are now being poisoned with; thousands of *points* and *tubes* filled with this filthy *pus* are now being used by vaccinators. *Nobody has the right to transplant such a mischievous poison into the life of a child!*

### What is Vaccine Pus?

It is high time, in the interest of humanity and science, to stop and ask, What is *vaccine pus*? How does it injure our race?

Vaccine pus—for it is not lymph—is constituted of blood corpuscles in progress of destructive fermentation; and for that reason alone it is a physiological crime to infuse it into the blood of a human being. Fungi are also present in *vaccine virus*, in the form of small round cells, which have molecular movements. These cells are in a state of *ferment* or *zymosis* and are the *micrococci vaccinæ*, or pathogenic globular bacteria. These bacteria are found in large numbers in *vaccine virus*, of which they are not only the active element, but the factor in transplanting filthy diseases of the blood and skin in the human body. Truly this *vaccine virus* is a poisonous ichor, a heterogeneous substance, a blood-poison by means of which is planted the germs of numberless diseases which destroy the lives of thousands upon thousands of our race.

### A Colossal Medical Fallacy.

More than twenty years ago I began a careful study of the subject of vaccination, and before I got through I was forced to the conclusion that vaccination was the most colossal medical fallacy that ever cursed the human race. Few physicians attempt to investigate this subject for themselves. They have been taught to believe its efficacy. They have vaccinated because it was the custom and they were paid for it. They have supposed vaccination would prevent small-pox because the best authorities said it would, and they accept it without a question. To such I would say that thirty years ago the entire medical profession believed that blood-letting afforded the only relief to all kinds of fever, and that a drink of cold water given to a fever patient was certain death. A few reformers denounced this barbarous practice, and some of them lived to see its complete overthrow, while the *leading physicians* fought for their lancets to the last. The leaders of the anti-slavery movement in the United States were regarded as lunatics. Some of them were killed and others narrowly escaped death at the hands of a mob, but they lived to see their principles triumph and their labors applauded by the

civilized world. Thus it has ever been with every effort of reform, with every struggle of truth against error, and so it will be in this opposition of organized medical despotism to the enlightenment of the people regarding this beastly and barbarous practice of vaccination.

### An Unpopular Cause.

Those whose interest it is to uphold vaccination endeavor to make it appear that anti-vaccinators are ignorant cranks, and, therefore, not entitled to credence. The truth is that they are not ignorant, but have been compelled to abandon vaccination after giving the subject an impartial investigation. They have refused to vaccinate and relinquish quite a considerable sum of money yearly in vaccination fees. They have espoused an unpopular cause and have made many sacrifices to uproot what they believe to be a grievous wrong. They have had everything to lose and nothing to gain in entering upon this crusade, and they are confident that every candid person who will honestly investigate this subject will see what a hideous delusion vaccination is. Anti-vaccinators are convinced that they are right and can afford to smile at the mean inuendoes, personal abuse and ridicule of interested, indifferent and stupid physicians who find it their interest to perpetuate this delusion. So completely has vaccination become a hobby of this period that ribaldry and abuse are the chief arguments employed to sustain it against criticism and question. Pro-vaccinators show by this that vaccination is defenceless against attack from scientific inquiry.

Every remedy should be left to justify itself by its own efficacy, and its acceptance should be left to the discretion of the individual. The convictions of the individual should be as inviolable in the domain of medicine as that of religion or politics; and coercion in that is nothing less than tyranny, and should be resisted to the uttermost. It is but two or three centuries ago that we were torturing Quakers, drowning witches, and racking and staking heretics. The spirit of intolerance is now passing from the priest to the doctor, accompanied, as usual, by fierce demands for official recognition—for office, privilege and power. What avails it that we have rid ourselves of ecclesiastical despotism if we are to be handed over, bound

hand and foot, to the tender mercies of a place-hunting, dollar-worshipping, medical priesthood. The Compulsory Vaccination Act, of Ontario, is a filthy blot on the escutcheon of the Province. The greedy, needy, political doctors who framed that despotic Act; the ignorant, stupid legislators who hurried it through the Legislature; and the time-serving newspapers who were criminally silent whilst doctorcraft was busy in forcing the passage of this iniquitous Act, merit, and will receive, the contempt and scorn of coming generations of intelligent Canadians. The Ontario Legislature has no more right to command *vice* and *disease* than it has to forbid *virtue* and *health*.

### A Shifting Dogma.

Edward Jenner, the introducer of vaccination, maintained that *one vaccination* protected a person for life. This, however, was soon found to be untrue. Then, one vaccination in infancy and one after puberty were deemed necessary. This also proved a delusion. Its advocates then advised a third vaccination at maturity. Then it was thought necessary that vaccination should be repeated every seven years; and now, to be thoroughly protected, it is claimed that every one should be vaccinated every two or three years. This is the position occupied by the profession at present, although even in this there is a diversity of opinion among the so-called leading physicians. The fact is, no two physicians agree as to what constitutes effective vaccination.

If vaccination and re-vaccination does certainly protect against small-pox, why do vaccinators insist on the enforcement of quarantine regulations. Why do they exclude unvaccinated children from the public schools? Why are those who have been protected by repeated vaccinations so panic-stricken when a case of small-pox is discovered in their midst? Certainly these facts prove that they have no faith in their vaunted prophylactic. If vaccination is the protection it is claimed to be, why not prove that none but the unvaccinated are stricken by small-pox—while the vaccinated never are attacked?—why, because the truth is, that vaccination never protects against small-pox, the vaccinated and unvaccinated are alike susceptible to small-pox if surrounded by unsanitary conditions. If

vaccination is the safeguard it is said to be by vaccinators, why not depend on it alone? Why not prove by facts that the vaccinated never take the small-pox but are safe under all circumstances, while the unvaccinated are certain to take the disease whenever exposed to it? This cannot be done, but, on the contrary, thousands of the vaccinated take the small-pox and many die with it just as the unvaccinated do.

Until the advocates of vaccination are willing to depend on this one prophylactic, they should cease to enforce it upon those who have no faith in it.

### Official Proof that Vaccination does not Protect from Small-Pox.

The following official evidence is from vaccination sources and proves conclusively that vaccination does not protect from small-pox. It further proves that during a small-pox epidemic the vaccinated, as well as the unvaccinated, are equally susceptible to the contagion if surrounded by unsanitary conditions. Much of what transpired in the Montreal small-pox hospitals was suppressed, especially whatever was likely to operate against the progress of vaccination, which proved a golden harvest to the vaccinators. But notwithstanding the conspiracy of silence a few official reports pregnant with proof against vaccination, and proving beyond question that a large proportion of the patients admitted into the Montreal small-pox hospitals had been vaccinated, and that many of them died, some with *two*, and others with *three*, vaccine marks upon their bodies.

I refer to the official report from the "Civic Hospital," dated August 17, 1885: "Up to this date, 133 patients suffering from small-pox have been admitted to the Civic Hospital; of these *seventy-three were vaccinated*, 56 had *one* mark, 13 *two* marks, and 4 *three* marks."

I refer to the official report from "St. Roch's Hospital," dated October 22nd, 1885: "Number of vaccinated patients admitted since April, *one hundred and ninety-seven*."

I refer to the first official report from the "St. Camille's Hospital," November 1st to 7th, 1885: "There are now in this hospital 188

small-pox patients ; of these *ninety-four are vaccinated*. Among the dead are *twelve who were vaccinated*."

I refer to the first official report from "St. Saviour's Hospital," covering a period of fifteen days, that is, from Oct. 15 to 31, it was stated there had been in all 67 patients admitted, of whom *sixty had been successfully vaccinated, THIRTY-SIX having two vaccination marks, 2 having three, and actually 3 having four*.

I refer to the second official report from "St. Saviour's Hospital," November 1st to 7th, 1835 : "Thirteen small-pox patients admitted ; of these *nine were vaccinated and four (only) unvaccinated*."

I refer to the third official report from "St. Saviour's Hospital," November 28th up to and including Dec. 6th, 1885 : "Number of patients admitted, 6 ; of these *four bear evidence of vaccination, and two were not vaccinated*."

I refer to the official report from "Crystal Palace Hospital," Nov. 28th up to and including Dec. 5th, 1885 : "Number of patients admitted, 36 ; of these *nineteen were vaccinated*."

During the small-pox epidemic in Montreal in 1885, the medical profession was so intent upon collecting vaccination fees, that whatever was likely to depreciate vaccination was withheld from the public. No record was kept of the number of vaccinated victims of small-pox, but it was well known to the public vaccinators that a large proportion of those stricken were fully *protected* (?) by vaccination and re-vaccination.

Determined to reach the truth, if possible, I kept a record of the name, nationality, age, and residence of every man, woman and child who died of small-pox from April, 1885, to Jan. 30, 1886, and had I not been seized with illness would have personally discovered who were vaccinated and who were unvaccinated, from inquiry among the relatives and friends of the deceased. However, I employed a capable and trustworthy medical man (not an anti-vaccinator) to do what I had proposed to do myself. The labor has been delicate, arduous, and expensive, requiring great patience, *finesse*, and tact ; but the work has been faithfully done, and I append the following summary of results, proving conclusively that nearly one-half of those who died from small-pox were *protected* (?) by vaccination :

## Summary of Montreal Small-Pox Epidemic, 1885-86.

AGES AT DEATH.	French Canadians.	Other Nationalities.	Protestants.	Vaccinated.	Unvaccinated.	Totals.
Under six months.....	194	12	6	48	165	213
Six months to one year.....	299	15	10	138	186	324
One year to twenty.....	2,243	113	49	1,062	1,343	2,405
Twenty to fifty.....	144	36	29	128	81	209
Fifty to ninety.....	13	10	3	24	2	26
Total.....	2,803	187	97	1,400	1,777	3,177

*Latest Official Testimony from England.*

I refer to the following summary of the last report of the Registrar-General of England, which proves conclusively that vaccination does not diminish or protect from small-pox :

In the first 15 years after the passing of the Compulsory Vaccination Act, 1854 to 1868, there died of small-pox in England and Wales.....	54,700
In the second 15 years, 1869 to 1883, under a more stringent law, ensuring the vaccination of 95 per cent. of all children born, the deaths rose to.....	66,447
Total for 30 years.....	<u>121,147</u>
Of these, there died under five years of age.....	51,472
From 5 to 10 years of age.....	<u>16,000</u>
Total under 10 years.....	<u>67,472</u>

Herbert Spencer, in reference to the above, says : "The measures enjoined by the vaccination acts were to have exterminated small-pox ; yet the registrar-general's reports show that the deaths from small-pox have been increasing.—*Social Statics*, p. 367.

Sir Thomas Chambers, Q. C., M. P., recorder of the city of London, says : "I find that of the 155 persons admitted at the small-pox hospital, in the parish of St. James's, Piccadilly, 145 were

vaccinated. At Hampstead Hospital, up to May 13, 1884, out of 2,965 admissions, 2,347 were vaccinated. In Marylebone 92 per cent. of those attacked by small-pox were vaccinated.—*Official Report, 1884.*

“Of the 950 cases of small-pox EIGHT HUNDRED AND SEVENTY, or 91.5 per cent. of the whole cases, have been vaccinated.”—*Dr. Marston's Report of Highgate Hospital for 1871.*

“There were 43 cases treated in the Bromley Hospital between April 25 and June 29, 1881. Of confluent small-pox, there were 16 cases; of discrete, 13; of modified, 13. ALL THE CASES HAD BEEN VACCINATED—THREE RE-VACCINATED.—*F. Nicolson, L. R. C. P., Lancet, August 27, 1881.*

London *Standard*, February 24th, 1883, says: “It is well known that the small-pox patients in the hospitals of the Metropolitan Asylums Board are three-fourths of those persons who had been successfully vaccinated in infancy; and amongst such vaccinated persons there occur some of the worst cases of small-pox in which the eruption is confluent.”—*From Leader on “St. Pancras Manslaughter Case.”*

Can anyone after this be found to contend that vaccination is a protection against small-pox?

### *Official Evidence from Scotland.*

From the Scots Registrar-General's Returns we extract the following:

Deaths by small-pox in Scotland of children under one year of age in 1871-3:

Year.	Vaccinated.	Unvaccinated.
1871.....	64	142
1872.....	314	64
1873.....	139	39
Total.....	517	245

It can hardly be alleged that in the instance of these 517 babes their “protection had worn out by age,” or that constituting a tenth of the victims of the epidemic their deaths were “rarities.”

Official Proof from British India that Vaccination is Useless, that Hygiene and Sanitation Afford the Only Reliable Protection against Zymotic Diseases.

The Government Blue-book, entitled, "Report on Sanitary Measures in India in 1884-5," is now issued. It is, in the main, a report for 1884. Of the population of 254,000,000 the number under registration of death causes, &c., is 198,000,000. The year's deaths were 5,239,218, of which small-pox contributed 335,382. The vaccination staff of India is composed of 4,261 persons. The number vaccinated during the year by this special establishment was "no fewer than 5,834,861."

The facts and inferences in this Blue-book in respect of small-pox and vaccination are of extraordinary interest, being characterized by an impartiality and an absence of the *suppressio veri* and the *suggestio falsi* not always observed on the vaccination question, and which we are glad to recognize.

Upon this subject the Army Commission observe :

"We are thus brought face to face with the fact that, *notwithstanding the existence of an active vaccination service, small-pox swept over the provinces just as if there had been none.* It is clear that vaccination has been incompetent to deal with the disease in its epidemic form, as is shown by the large staff of 4,261 vaccination officials. These remarks are not intended to call into question the utility of vaccination. But, in presence of the facts, the question is a perfectly relevant one—namely, whether dependence can henceforth be placed on vaccination as a protection against a small-pox epidemic? The question, of course, answers itself. . . . This and similar experience appears to show that the remedies, if such be available, will have to be extended beyond vaccination, *and will have to deal with epidemic causes affecting localities and their inhabitants. If sanitary work be neglected, no more dependence against small-pox epidemics can be placed on vaccination. The true remedies lie elsewhere altogether* (p. 203).

"The great differences which exist between adjoining population groups in their liability to epidemic attacks of small-pox, fever, and cholera are tolerably constant and not merely accidental, and these

are our safest guides to sanitary work. The facts before us show even now where work requires to be done for lessening the liability of the people to attacks of the whole epidemic tribe of diseases, and amongst them of small-pox, which in an epidemic year *escapes from the influence of vaccination alone*, and occasions such results as we have described." (p. 205).

"In large towns where the subsoil has become dangerously polluted by long neglect, the people are living in a state of health which may at any moment give way under the first breath of an epidemic. In the present case the great small-pox epidemic ravaged the provinces *in spite of the persistent efforts of the vaccination service*; and it may be well, once for all to recognize that what may be called 'epidemicity'—a condition of these epidemic diseases which may show itself at any moment—is *connected directly with the conditions under which the people live, and that, when it has once shown itself, the penalty of past sanitary neglect is certain to be exacted in spite of all palliative measures.*" (p. 207).

Certainly, no intelligent person will claim that vaccination protects from small-pox after reading the above official and unprejudiced report from vaccination officials.

### Testimony of Vaccinators.

The evidence of the most observing among the vaccinating officers employed in Europe and America, proves beyond a question the integrity of my claim that vaccination is both useless and dangerous.

Dr. George Gregory, for fifty years director of the small-pox hospital in London, published the following declaration in the *Medical Times* of London: "Small-pox does invade the vaccinated, and the extirpation of that dire disorder is as distant as when it was first heedlessly 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."

Dr. W. J. Collins, for twenty-five years public vaccinator of London, England, testified before a committee of the British House of Commons that he had vaccinated thousands, but at last abandoned the practice and gave up at least £500 a year by so doing." He further testified that, "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 often transfers filthy and dangerous diseases without offering any protection whatever."—*I Albert Terrace, Gloucester Gate, N. W., September 2nd, 1882.*

Dr. John Epps, twenty-five years director of the Jennerian Institute, London, Eng., had vaccinated about 120,000 people, but finally declared: "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 neutralize the small-pox, but only paralyzes the expansive power of a good constitution, so that the disease has to fall back upon the mucous membrane." And again: "If the vaccine lymph does not produce the vaccine disease, it produces something else—*i. e.*, a noxious agent is introduced to poison the system against the poison of small-pox; but if it does not produce this effect it still poisons, without the benefit super-added of protection from small-pox."—*London Vaccine Institute Report, 1863.*

Dr. Stowell, M. R. C. S., of London, Eng., (thirty years a public vaccinator), says: "The nearly general declaration of patients enables me to proclaim that vaccination is not only an illusion, but a curse to humanity. First, it was asserted that vaccination protected for life. When this proved a failure, re-vaccination in every seventh year was proposed; but this also failed."—*From Letter to the Lancet.*

Thomas Skinner, M. D., L. R. C. S., Liverpool, says: "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. I saw a case the other day where the little patient has never slept for three weeks, or very little, and it cannot be touched without screaming. It is much emaciated and otherwise very ill. All this has arisen and dates from the date of its vaccination."—*Report on Vaccination, 1884.*

Dr. Brereton, Sydney, New South Wales, says: "In my experience I have seen more evils result from vaccination than I ever saw from small-pox. I have seen direct, fatal results from vaccination. I have seen chronic—incurably chronic—disease the result of vaccination, and death after the lapse of many years; and I have seen diseases of a destructive character introduced into the system through vaccination. Small-pox has steadily increased and is increasing as the practice of vaccination is more generally enforced."—*Evidence given before the Cabinet and Legislature at Sydney. From the Sydney Morning Herald, October 25th, 1881.*

## COMPULSORY VACCINATION OF INFANTS.

William Hycheman, M. D., of New York, 1880, writing after forty years' practice as a physician, says: "I have recently dissected more than a dozen children, whose deaths were caused by vaccination, and no small-pox, however black, could have left more hideous traces of its malignant sores, foul sloughing, hearts empty or congested with clots, than did some of these little victims. Shame! Indeed, scarcely a day elapses but I am called upon to witness the sufferings of vaccinated children, in the form of cerebral and gastric complications, persistent vomiting, bronchitis, diarrhoea, with pustules in the mouth or throat, (pharynx), on the eyelids, and ulceration of the cornea, which remains opaque, and may lead to blindness."—*N. Y. Medical Tribune*, 1880.

Dr. Fortescue, Sydney, New South Wales, says: "There are cases in which children having some inherent delicacy of constitution, only wait for some depressing cause to develop symptoms of disease, and no doubt vaccination acts as the depressing cause, and the children are made ill in consequence of that depression, and indirectly by the process of vaccination."—*Sydney Morning Herald*, October 25th, 1881.

Professor Bock, M. D., of Leipsic, Physician to the Saxon Army, says: "I have, in a forty years' practice, seen far more evil than good from vaccination."

Dr. Hoeber, Hamburg, says: "Vaccination is extremely prone to develop disease, being an attack upon the system in early childhood, when, owing to teething, there is always a great predisposition towards disease. This lowers all the natural powers of resistance in the child, and, as a consequence, illness of various kinds, scrofulous, bronchial, etc., frequently follow."—*Der Praktische Arzt*, January, 1878.

Dr. B. F. Cornell, president of the Homœopathic Medical Society of New York, says: "It is my firm conviction that vaccination has been a curse instead of a blessing to the race; every physician knows that cutaneous diseases have increased in frequency, severity and variety to an alarming extent."—*Address delivered before the Homœopathic Medical Society of New York*, February 11th, 1868.

Dr. Leander Joseph Keller, Chief Physician to the Austrian State Railways, kept a record of the mortality amongst the company's servants and their families of 373 small-pox cases during 1872. Dr. K. concludes his paper thus:

"1. Generally more vaccinated than unvaccinated persons are attacked by small-pox.

2. Re-vaccination did not protect from small-pox, and did not lessen the general mortality.

3. Neither vaccination nor re-vaccination exercised a favorable influence upon the small-pox mortality."

Dr. Joseph Hermann, Chief of the Imperial Wiede Hospital, Vienna, from 1828 to 1864 (from the *Naturarzt*), says: "When a man has treated hundreds of cases of small-pox, both under sporadic and epidemic condition, through many years and at all seasons, he comes to the decided conclusion that vaccination has not the remotest effect on the outbreak, course or issue of the disease. Vaccinated persons, bearing unmistakable marks of the process on their arms, frequently have confluent small-pox; while, at the same time, unvaccinated people have it in the mildest form. \* \* \* \* \* I am convinced that vaccination is the greatest mistake and delusion; a fanciful illusion in the mind of the discoverer; a phenomenal apparition, devoid of scientific foundation, and wanting in all the conditions of scientific possibility."

Dr. Frank Hastings Hamilton, late Lieutenant-Colonel, Medical Inspector United States Army, says: "Vaccination almost constantly produces the same results (*i. e.*, ugly and untractable sores), and is in many cases followed by abscesses in the axillary, cervical and other glands."—*Treatise on Military Surgery*, quoted by PROFESSOR JONES in *Researches upon Spurious Vaccination*. P: 26, 1867.

Robert Liveing, M. D., F. R. C. P., A. M., Physician to the Skin Department, Middlesex Hospital, says: "Vaccination frequently produces an attack of eczema, simply by setting up local irritation."—*Treatment of Skin Diseases*, p. 7. 1877.

Mr. Brudenell Carter, F. R. C. S., L. S. A., Ophthalmic Surgeon to St. George's Hospital, says: "I think that syphilitic contamination by vaccine lymph is by no means an unusual occurrence, a large proportion of the cases of apparently inherited syphilis are in reality vaccinal; the syphilis in these cases does not show itself until the age of from eight to ten years, by which time the relation between cause and effect is apt to be lost sight of."—*Medical Examiner*, May 24th, 1877.

Dr. Niemeyer, of Tubingen, 1879, (*Text-Book of Medicine*, 1879,) says: "It cannot be denied that vaccination sometimes endangers life, and in other cases leaves permanent impairment of health, especially cutaneous diseases and other *scrofulous* affections, due to the debilitating influence of the fever accompanying the vaccinia."

Sir James Y. Simpson, M. D., Edinburgh, says: "Small-pox can never be exterminated by vaccination." 1878.

Dr. Simon, medical officer to the Privy Council of England, says : "Small-pox after vaccination has been a disappointment both to the public and the medical profession."—*Report to the Privy Council.*

Thomas Brett, M. D., London, says : "After 50 years' experience, I arrived at the conclusion that vaccination was not only useless as a preventive, but dangerous ; I decline the risk of vaccination, and would not vaccinate my bitterest enemy."—*Speech*, April 17th, 1883.

Sir James Paget, Surgeon Extraordinary to Her Majesty, says : "The progress of the vaccine and variolous infection of the blood shows us that a *permanent, morbid condition of that fluid is established* by the action of these specific poisons on it."

T. Mackenzie, M. D., F. R. C. P., Edin., Jan. 26th, 1882, says : "I can produce children of three different families where scrofula was never heard of till they were vaccinated, but whose necks are now a sad sight to see."

William Forbes Laurie, M. D., Edin., St. Saviour's Cancer Hospital, Regent's Park, says : "Being anxious not to do mischief to my fellow-creatures 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."

*The Lancet* (London), January 21st, 1871, says : "From the early part of the century, cases of small-pox after vaccination have been increasing and now amount to four-fifths of cases."

*Birmingham Daily Gazette*, March 26th, 1886, says : "It is totally unnecessary to go outside of England in order to find proofs of death and disease arising from the practice (of vaccination)." *From Leader on "Vaccine Diseases in the Army."*

W. Bruce Clarke, M. B., F. R. C. S., records a state of "Pyæmia, after vaccination—Death," in a child at 14 weeks. Nothing unusual was noticed until after the 8th day ; an abscess formed in the left axilla, and others on the right forearm, right thigh and left wrist. The temperature rose to 103.4, and the child died exhausted on the 19th day after the vaccination.—*St. Bartholomew's Hospital Reports*, 1879. *Vol. XV.*

Dr. Caron, Paris, late Government Physician to Paris Prisons, says : "Vaccination, so called, modifies not one tittle of either the virulence or the consequences of the small-pox. I have long since refused to vaccinate."

Prof. Emer. Francis W. Newman, of Oxford University, says :

“Nothing is clearer to anyone who will open his eyes than that what is now called vaccination has no effect in lessening small-pox, and has frequent and terrible effect in doing mischief.”

Sir Henry Holland, Bart., M. D., F. R. S., says: “It is no longer expedient in any sense, to argue for the present practice of vaccination as a certain or permanent preventive of small-pox. The truth must be told, as it is, that the earliest anticipations on this point have not been realized.”—*Medical Notes and Reflections*. London: pp. 401, 415, and 416.

*The Students' Journal and Hospital Gazette*, January 14th, 1882, says: “Many deaths have undoubtedly resulted from vaccination and an unknown number of children have had their constitutions cruelly injured through vaccination.”

Sir Joseph W. Pease, Bart., M. D., M. P., says: “The President of the Local Government Board cannot deny that children die under the operation of the Vaccination Acts in a wholesale way.”—*House of Commons*, 1878.

Sir Thomas Watson, M. D., of London, Eng., says: “I can sympathize with, and even applaud, a father who, with the presumed dread in his mind, is willing to submit to judicial penalties rather than expose his child to the risk of an infection so ghastly as vaccination.”—*Parliamentary Committee*, 1879.

The Right Hon. Earl Percy, M. P., says: “Each (small-pox) epidemic since Jenner's system has been more severe than the preceding one.”—*House of Commons*, 1877.

Alexander Von Humboldt says: “I have clearly perceived the progressive and dangerous influence of vaccination in England, France and Germany.”—*Letter to Hon. R. Cobden*.

Dr. Alfred R. Wallace, of England, the distinguished scientist and co-discoverer with Darwin, of the principle of natural selection, says: “I stepped out on my special path to strike a blow at this wretched superstition as soon as I became thoroughly convinced of its errors, and of the cruelty and danger arising out of its compulsory enforcement.”—*Letter to the Author*.

J. R. Newton, M. D., Boston, Mass., said in 1879: 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. 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. S. Swan, New York, maintains that vaccination is an unjustifiable poisoning of the system, and mentions—of twenty-three children who were vaccinated, that it “produced terrible ulcers on the arms of some of them, two inches in diameter, the arms being inflamed, swollen, and very painful, with large abscesses on other parts of the body, causing great suffering.”—*Homœopathic World*, May, 1883.

Dr. C. Spinzig, St. Louis, Mo., says: “Vaccination is tantamount to ‘inoculation’ and constitutes *septica poisoning*—a criminal offence to human health and life—it is statistically proved to afford no protective or mitigation power over small-pox; and scientifically, in the nature of the case, it cannot possess any.”—*From Variola, its Causes, Nature, and Prophylaxis*,” p. 7. St. Louis, 1878.

### The Fallacy of the Mitigation Dogma.

Demonstrated by a comparison of the fatality of hospital small-pox cases in England before and since the adoption of vaccination, refuting the last claim of vaccinators, that if vaccination *does not prevent small-pox* it mitigates an attack. Now, if vaccination neither prevents nor mitigates, then it is useless.

#### After 40 to 90 Years of Vaccination.

Date.	Authority.	Cases.	Vaccinated.	Deaths.	Deaths per ct.
1836-51	Mr. Marson's Hospital.....	5,652	3,094	1,129	19.97
1852-67	“ “ .....	7,929	7,304	810	10.2
1870-72	Metropolitan Hospitals.....	14,808	11,174	2,764	18.66
1876	“ “ .....	1,470	.....	338	23.0
1871-77	Homerton Hospital.....	5,479	4,236	1,065	19.43
1876-80	Metropolitan “ .....	15,171	11,412	2,677	17.6
1881	Deptford “ .....	3,185	2,654	552	17.3
1881	Fulham “ .....	1,752	1,542	250	14.26
1876-80	Dublin “ .....	2,404	1,956	523	21.7
1881-82	Rochdale Medical Officer.....	906	745	105	11.59
1883	Gateshead “ “ .....	177	118	30	16.6
1883	Homerton Report.....	325	237	47	14.5
1883	New Cross “ .....	145	109	27	14.7
1883	Stockwell “ .....	101	85	10	10.0
1884	Metropolitan Asylums Hospitals.	6,396	4,872	1,013	15.8
1884	Birmingham Medical Officer....	1,591	1,384	102	6.4
1884	Sheffield .....	203	154	21	10.3
1884-85	Monsall Hospital, Manchester...	229	190	28	12.2
		67,923	51,266	11,491	16.9

## Before Vaccination.

Date.	Authority.	Cases.	Vaccinated.	Deaths.	Deaths per ct.
1723	Dr. Jurin, quoted by Dr. Duvillard	18,066	None.	2,986	16.5
1746-63	London Small-pox Hospital.....	6,456	“	1,634	25.3
1763	Lambert, quoted by Dr. Duvillard	72	“	15	20.8
1779	Rees' Cyclopædia .....	400	“	72	18.0
		24,994		4,707	18.8

This table has two important bearings :

1. It shows that before the introduction of vaccination the percentage of deaths from small-pox was no higher than it is at present. And, inasmuch as the deaths in the second division include a large majority of vaccinated persons, demonstration is afforded that vaccination has had no effect in diminishing the mortality.

2. That small-pox as treated now, and small-pox as treated by the medical men of the eighteenth century, is the same *unmodified* disease. That the infrequency of *pitting* from small-pox at the present day is entirely owing to our methods of prevention.

It had its origin then, as now, in filth, it was nourished then, as now, by filth, it exacts the same ratio of victims to cases, runs the same course, and is as fatal now as then, and any division by marks, of patients suffering from an eruptive fever, which yields results disproved by the general result, is unscientific, misleading and erroneous.

## The Simple Truth.

The simple truth is, that all the protection we have against small-pox comes from our improved knowledge of hygiene and sanitation, and if one-quarter the money now spent in vaccination was applied to improving the conditions of life in localities where small-pox and other zymotic diseases originate, we would not only “stamp out” small-pox, but all other zymotic diseases. Of all the practical sciences, public hygiene is the one that of late years has taken the greatest strides. In the ages of faith, earthly matters were of little moment, and people lived and died in miserable homes close by the

churches which enclosed all their hopes, and to which everything was sacrificed. In our days, love of health and of existence are in the ascendant. Medicine has its doubts, sanitation has none. It is hard to uproot old theories and beliefs. It is still harder to uproot popular fallacies; but, that vaccination is doomed to follow into oblivion, inoculation, arm to arm vaccination, blood-letting, and many other discarded medical delusions, is absolutely certain.

### Cleanliness—Nature's Protection.

Cleanliness is the only scientific, because natural, protection against all diseases, and especially the contagion or infection of zymotic or filth diseases. All other so-called prophylactics or protectives are empirical, unreliable, and worthless subterfuges. There is no other protection within the domain of nature, of science, or of art, which can compare with CLEANLINESS!—Nature's antidote for Filth.

Pure air, pure water, (inside and outside), plain, wholesome food, total abstinence from all intoxicants, plenty of exercise in the open air, these are natural health-producing and disease-repelling agents.

If the people would only think; if they would fairly examine all those arts, superstitions, and practices of artificial devices and unnatural and unsanitary (so-called) remedies which abound, each one of which has its influence in limiting the range of human life, they would discern how the natural tendency of such a practice as vaccination is attended with perils of such magnitude that the remedy—vaccination—is seen to be an evil infinitely more portentous than the disease—small-pox.

### Anti-Vaccination.

The agitation against vaccination is based on truth, justice and and liberty—a trinity which must prevail. When human slavery was a legal and sacred institution in the United States, anti-slavery men were stigmatized as incendiaries, infidels, disturbers of the peace, negro thieves and traitors; they were hated, despised and ostracised by the church, the state and society at large. When slavery was abolished, every cowardly, weak-kneed opponent to the anti-slavery cause said "they were always opposed to slavery, and

recognized that it was doomed to fall." In this experience of anti-slavery men we have prefigured what will happen in a very few years when vaccination is abolished—then every poodle in the profession will wag his tongue in chorus with the so-called "leading minds" of the profession, in shouting that "they were always opposed to vaccination, always knew it to be a fallacy, and rejoice that it is abandoned."

### The Medical Practice of To-day.

The members of the medical profession are plesiomorphic—they act in herds—do no independent thinking or acting, but follow the "books" and obey the *dictum* of their *moss-grown* leaders.

The medical practice of to-day has no more foundation in science, philosophy, or common sense, than it had one hundred years ago. It is based on conjecture and improved by sad blunders, often hidden by death. A drug which forms the favorite remedy for many forms of disease at one period, will, in a short time, be discarded as inert and useless, and speedily replaced by some other, and that in its turn will soon fall into oblivion as some new medicine comes into fashion. Yes, there is fashion in medicines, and the theories on which they are adopted and administered are largely hypothetical. If the deplorable consequences which frequently result from medical blunders, delusions and conjectures were visited upon the doctors themselves it would be a righteous punishment, but unfortunately it is the people who suffer by medical fallacies; the people, who, by custom and early education, have been taught to believe "*that the doctor knows best.*"

### The Great Majority of Medical Men.

Pro-vaccinators insist that vaccination must be right because the great majority of medical men sustain it.

The "great majority" of medical men opposed Harvey's discovery of the circulation for forty years. The "great majority" bled the people for a century, and slaughtered thousands in the quiet sick chamber. The "great majority" denied a cup of cold water to the patient consuming with fever. The "great majority" gave the people calomel till their teeth dropped out, the flesh rolled off the bones,

and the bones themselves crumbled into dust. The "great majority" have inoculated the people with syphilis, eczema, consumption and small-pox. The "great majority" have bitterly opposed every real and scientific reform in the healing art; they have filled the world with incurable invalids, and given respectability to "quackery" by the outrageous *quackery of the profession itself*, disgusting all sensible and thoughtful men by their fallacies and delusions, of which JENNERISM is the greatest and most destructive.

TORONTO, October, 1888.

THE  
SWEDISH  
SMALL-POX STATISTICS'  
FRAUD:  
THE REAL TRUTH OF THE MATTER.

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BY  
MRS. HUME-ROTHERY.

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*(Re-printed from the National Anti-Compulsory Vaccination  
Reporter, November 1, 1882.)*

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# THE SWEDISH SMALL-POX STATISTICS' FRAUD:

## **The Real Truth of the Matter.**

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DR. OIDTMANN, one of our most energetic and indefatigable fellow-workers in Germany, delivered a public address at Frankfort on the Vaccination Question on the 28th of August last. The principal feature of this address was a long and able dissertation on, and exposure of, the fraud perpetrated on the whole of Europe by the pro-vaccination party in the matter of the famous Swedish statistics. This fraud—in its origin probably only a misapprehension to which the wish might well be father, but which through persistent reiteration has degenerated into a fraud—took shape, we regret to say, in the first instance, in our English Parliamentary Report on Vaccination of 1857, issued under the direct responsibility of one whom we name with regret in such a connection—Mr. Simon, long head of the Board of Health and chief medical adviser of the Government. The table of Swedish statistics, published by him at pp. 185, 186 of the Blue Book in question, recording the small-pox mortality of Sweden, from 1749 to 1855, showed indeed as was desired to be shown, a very great decrease in small-pox mortality from the beginning of the nineteenth century down to the year 1855, at which the table (then) inevitably closed; but when a note by the Swedish Board of Health was appended to these tables stating that these documents “*need no comment TO PROVE BEYOND DOUBT the great influence of vaccination in Sweden as an invaluable though not absolute preventive against one of the most destructive diseases that ever afflicted mankind,*”—when such a note as this, we say, was appended *without*

comment on the glaringly false assumptions it parades, then we say that nothing but a preconceived blind faith in vaccination could account, (in one whom we personally know to have been absolutely incapable of intentionally misleading the public mind) for such negligent reproduction of so glaring a fallacy by the compiler of this Report on Vaccination, who lay under the grave responsibility of furnishing the British Parliament with all the best light and information obtainable on so important a question. But to assume that these tables should have again and again been handled by pro-vaccination statisticians without detection or suspicion of this negligence, and of the utter misdirection of public opinion to which it led, till the fraud, whether intentional or unintentional, was exposed by Anti-vaccinators, is to make a heavy draft on the charity of those against whom such a weapon has been employed. And yet we are ourselves inclined to accept the assumption. Even learned men of science are prone to follow their leader like sheep, (or geese?) especially if that leader be taking the direction in which they desire to follow. How utterly baseless and deceptive is the assertion above quoted that these Swedish statistics *prove* the value of vaccination, has now been publicly acknowledged by the pro-vaccination party in Germany; Professor Flinzer having openly stated at the Medical Congress at Eisenach in 1879, that "if one looks over these tables (reprinted in Germany, from the English Blue Book, by Küssmaul) one is convinced that the *ebb-curve* of small-pox mortality set in long before any results of vaccination were possible." But as the *English* pro-vaccination party still unscrupulously parades these Swedish statistics, it will not be amiss to give the English public a little more information on the subject. Not very long since a writer in the *Times* (Sept. 7th) promulgated the amazing falsehood that "in Sweden the effect of authoritative vaccination had been to reduce an average of mortality for small-pox for 20 years from 12,000 to 11;"\* and doubtless thousands of unfortunate dupes swallowed the propos-

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\* The same inventive and intelligent writer reduces Prussian small-pox mortality on a similar average of 20 years from 472 to 1!—"forgetful all" that in the one year 1872 there died of small-pox in Prussia 69,839 persons! It would take a long period to get an average of one out of that! We may have something more to say about Prussian statistics on another occasion.

terous assertion, any correction or refutation of which was, of course, refused insertion by the great mock Jupiter. Let us see how the facts, or at least the figures, really stand. We are not at all fond of inflicting dry figures on our readers, but in this instance we must ask them to excuse our so doing, as it is impossible for us without this to lay the real truth of the matter before them.

The figures in our table up to the year 1855 are the same as those of the Blue Book or Parliamentary Report so often referred to; those up to 1876 have been supplied to us from the official records by Dr. P. A. Siljeström, of Stockholm, an ex-Member of the Swedish Parliament.

*Official Statistics of Small-Pox Mortality in Sweden from  
1800 to 1876.*

<i>Year.</i>	<i>Small-pox Deaths.</i>	<i>Year.</i>	<i>Small-pox Deaths.</i>	<i>Year.</i>	<i>Small-pox Deaths.</i>
1800	12,032	1826	625	1852	1,534
1	6,057	27	600	53	279
2	1,533	28	257	54	204
3	1,464	29	53	55	41
4	1,460	30	104	56	52
5	1,090	31	612	57	560
6	1,482	32	622	58	1,289
7	2,129	33	1,145	59	1,470
8	1,814	34	1,049	60	708
9	2,404	35	445	61	193
10	824	36	138	62	148
11	698	37	361	63	307
12	404	38	1,805	64	741
13	547	39	1,934	65	1,336
14	308	40	650	66	1,217
15	472	41	237	67	1,061
1816*	690	42	58	68	1,492
17	242	43	9	69	1,474
18	305	44	6	70	764
19	161	45	6	71	329
20	143	46	2	72	346
21	37	47	13	73	1,122
22	11	48	71	74	4,063
23	39	49	341	75	2,019
24	618	50	1,376	76	604
25	1,243	51	2,488		

\* In this year vaccination was made compulsory in Sweden.

It will be seen from a glance at the above table that though in one year (1800) a mortality of 12,032 deaths from small-pox is recorded, yet within the ten years following it fell (1810) as low as 824 and in 1811 and 12 to 698 and 404 respectively. An average of 12,000 for 20 years is therefore a simple absurdity.\* It will further be seen that though in the year 1822 the mortality fell to 11, yet three years later in 1825 it rose again to 1,243! So much for the average of 11 for 20 years! This, however, in passing. It is not the ludicrous mistakes fallen into by an unknown writer to the *Times* with which we are chiefly concerned, but rather with the general question as to what may be learned of vaccination from these Swedish statistics. And we may observe that though we have not thought it worth while to print them at length, we have before us, and may make casual reference to, the similar tables from the middle of the last century beginning with the year 1749. Nor have we thought it worth while to trouble our readers with the figures of population steadily rising from 2,347,303 in 1800 to 4,429,713 in 1876. For, as will be seen, this in no way affects the question of the influence of vaccination on small-pox. Because we concede from the outset that there has been a great decrease in small-pox mortality in Sweden, deaths in 1800 having amounted to 12,032, and in the last great epidemic year, 1874, only to 4,063, and in 1876 as may be seen only to 604; and *if this reduction could be proved or even rationally supposed to result from vaccination*, that reduction would be amply sufficient to establish the value of vaccination, without any multiplication by increase of population; whereas *if it be shown that such reduction is not and cannot be owing to vaccination*, the amount of the reduction—due to other causes—is quite immaterial to our argument. We must first beg our readers' attention to the fact that Compulsory or "authoritative vaccination," to quote the *Times* writer once more, was only decreed in Sweden in the year 1816; (Dr. P. A. Siljeström on "The Vaccination Question," p. 22); and as the author remarks, "As it cannot be supposed that it was thoroughly introduced for a year or two after that, we shall

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\* The highest average of small-pox deaths for even ten years recorded in Sweden, after the date when deaths from measles ceased to be reckoned as small-pox, that is, from 1779 to 1788 is 5,179, and that for the following decade, 1789-98, is 3,810.

probably be right if we reckon the general introduction of vaccination as comprised within the decade 1819–28." Now it will be at once seen that even in the year 1801 the small-pox mortality fell to 6,057, almost one-half, and in the year 1802 to 1,533, scarcely more than one-eighth of that of the year 1800. Now as vaccination was only just beginning to be heard of in England about that time, it cannot rationally be supposed to have reached Sweden; indeed, Dr. Siljeström informs us that though vaccination was beginning between 1809 and 1818 to be pretty generally practiced, even that decade must be regarded as a transition period, while all before was a pre-vaccinational era. It is clear then that vaccination (unless indeed as a coming event casting its shadow before!) could have nothing whatever to do with this great decrease of seven-eighths of the small-pox mortality within two years. In the year 1814, two years prior to the introduction of Compulsory Vaccination, the small-pox mortality had even fallen to 308; but if it be suggested that the growing practice of vaccination, though still voluntary, might have to do with this, we must inquire, why then this growing practice permitted the death-rate to rise in 1815 and 1816 to 472 and 690 respectively? It is admitted that in the year 1822 the small-pox mortality fell to 11, and this is of course assumed as a grand triumph of vaccination which had now been in full operation for some few years. But what then was Compulsory Vaccination about when only three years later, in 1815, the small-pox mortality rose to 1,243, four times that of 1814 before vaccination was compulsory at all, and greater by about an eighth than that of the year 1805 before vaccination had begun to be practiced at all—viz., 1,090? Again, if Compulsory Vaccination reduced small-pox mortality in 1829 to 53, why, while compulsory vaccination bore sway as before, do we find that mortality rising in 1833 to 1,145, and in 1838, 1839, to 1,805 and 1,934? These same fluctuations continue throughout the table. If in 1843, '44, '45, '46, we find the small-pox mortality sinking to the extremely low ebb of 9, 6, 6, and 2 for these years respectively, we again find it rising in 1850, '51, '52, to 1,376, 2,488, and 1,534. In 1855 the Blue Book table closed very gratifyingly, no doubt, for believers in the vaccination superstition, with a small-pox mortality of only 41; but is it conceivable—we will rather say, would it, but

for the known fact, have been conceivable—that men of common sense, not to say science, should have confronted the flagrant fact that in the year 1851, *after 35 years of compulsory vaccination*, supposed to have been more perfectly carried out in Sweden than in perhaps any other country, the small-pox mortality of 2,488 *more than doubled* that (1,090) of the year 1805 when vaccination in Sweden was still a thing of the future; and *yet* have promulgated these Swedish statistics as proof absolute of the value of vaccination? The records of the last twenty years up to 1876 present the same extraordinary fluctuations in small-pox mortality (with a very considerable general rise however as compared with the previous twenty). In 1856 there were 52; in 1859, 1,470; in 1862 there were 148 (the lowest figure subsequent to 1856) and in 1869, 1,474 deaths from small-pox in Sweden; finally in 1871 there were only 329, while in 1874 there were 4,063, sinking again in 1876 to 604, and in all probability the small-pox death-rate has sunk still lower in the succeeding years for which we have as yet no records. Now can any human being ever so little accustomed to rational and logical reflection, suppose for one moment that Compulsory Vaccination which has, since the year 1816, been what we may call a constant factor in the case—a force, that is, in continual operation—can possibly account for the changes in the small-pox death-rate, which presents such utterly irregular and contradictory variations, such ups and downs as the above official tables record? If these tables prove anything in the matter, they prove conclusively that Compulsory Vaccination most carefully and thoroughly carried on throughout a whole country, is absolutely unable to control small-pox or even to modify its effects. The number of deaths in the year 1874 falls not very much short of four times the number of deaths in 1805, years before the introduction of vaccination. Nor will the increase of population from 2,427,408 in 1805, to 4,341,559 in 1874 help pro-vaccination arguments here. The population *had not doubled*. The deaths had *very considerably more than trebled*; while in 1851 (the year in which the highest small-pox mortality had occurred previous to 1855 where the table published in our Blue Book closes) the population had risen from 2,427,408 to 3,517,759, that is, *not one-half*, while the small-pox deaths as

already pointed out had *considerably more than doubled* (viz., risen from 1,090 to 2,488). How then, it may well be asked, was it possible even in 1855 for pro-vaccinators to delude themselves, or to delude others into a belief that Swedish statistics argued in favor of compulsory vaccination? Would not a mere glance at the tables refute it? The question may well be asked and the answer is a painful one. It would hardly, we think, have been possible, even in an *expert-ridden* Legislature like our House of Commons, *that is, if anyone ever read the Blue Book, or looked at its tables at all,*—but for a falsification of the date of the introduction of vaccination into Sweden (which Dr. Oidtmann's address above-mentioned has brought to our notice) in a colored plate inserted in the guilty Blue Book in question;—not relegated to the appendix with the tables we have been examining, but placed “in the forefront of the battle” at page 22 of the Report itself. This table is, we regret to find, colored so as to *bring every year subsequent to 1801* under the supposed influence of the great enchanter, Vaccination! thus hiding and giving the lie to the unwelcome fact, that by far the greatest and most rapid fall in small-pox mortality on record, viz., that from 1800 to 1805 took place not only before the decree of Compulsory Vaccination in 1816, but before vaccination could well have been much heard of in Sweden, let alone begun to be voluntarily practiced in 1808 or thereabouts. We do not say that even had the date assigned in this colored plate to the influence of vaccination been correct, there was not enough in the tabular record of small-pox mortality prior to 1800 to have roused the suspicions and enlightened the minds of careful and impartial critics; for here also we find the small-pox mortality, which in, for instance, 1763 amounted to 11,662, suddenly falling in the very next year to 4,562, while the most terrible mortality on record, that, namely, of 16,607 in 1778, fell in 1779 already to 5,102, and by 1781 had gone down to 1,485. Now if small-pox mortality could fall in this way *without vaccination, before 1800*, what ground could there be for supposing that a similar fall *after 1800* was due to vaccination, even had this been in operation? But clearly in those days careful and impartial critics were not forthcoming.

But what are we to say of this unlucky colored plate, of which

Dr. Oidtmann forcibly and truthfully says that the date thereon assigned to the introduction of vaccination into Sweden is a lie? Incredible as it might seem, we can only infer that the compiler was in ignorance,—not perhaps of the date of the Compulsory Vaccination decree in Sweden; that we fear must have been left out of sight by a convenient *suppressio veri*, (though *even* such negligence as not having ascertained *that*, is conceivable to us who know something of official proceedings directed to a specific object) but at any rate—of the date at which vaccination could reasonably have been supposed to become operative in Sweden. We who know what was the nature and rapidity, or rather slowness, of communication with foreign countries in the year 1800 and later on all through the great war, can see at a glance that a medical practice only just beginning at that time to be popular in England (it was only in 1802, and then only by a majority of 3, even under the pressure of royal influence, that Jenner got his first £10,000 voted by Parliament) must necessarily have taken some years to spread to and take such deep root in a distant country like Sweden as to have any appreciable influence—if it did or could ever exercise any anywhere—upon small-pox mortality. But in the year 1857, when the only anxiety of the official compiler was to amass material to justify the tentative Compulsory Vaccination law passed in this country in 1853, to say nothing of more stringent ones looming in the future, we can well suppose that no such reflections, no minute analysis of facts or dates troubled the official mind. There were the figures, and there was the deduction desired to be drawn, nay, so temptingly drawn ready to hand by the Swedish Board of Health, and how could it but be made use of, and the table, without too much exactitude, colored to convenience at the very best year that could have been pitched on to suit the deduction? Vaccination might be supposed to be just heard of in Sweden in 1801 (at least there was a committee appointed to inquire into vaccination in Denmark in that year—and that was near enough for those days)\* and down goes the death-

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\* Since writing the above we find in a recent publication by Prof. Vogt that in Nov., 1881, vaccination had not been even heard of in Sweden, and that some vaccination experiments were, by royal command, tried in the hospital in Stockholm for the first time in January, 1802! No doubt these hospital experiments did the business.

rate by one-half! A little more talk of it in 1802, and down goes the death-rate to about one-eighth of the fatal figures of 1800! And as there is almost nothing too preposterous for belief by those determined beforehand to believe, we can and do suppose that this sudden fall was really believed to be owing to vaccination, by the Mr. Haile who prepared this fatal colored plate, and by Mr. Simon who incorporated it in his Report; whence in later years this recorded triumph of vaccination was extracted by Küssmaul and probably other German pro-vaccinators, and made use of as a chief corner-stone for the edifice of Compulsory Vaccination in the German Empire. We need say no more. The one fact that under the highest possible pressure of Compulsory Vaccination, (for the terrible epidemics on the continent in 1871-2 alarmed Sweden into the most vehement *furore* of vaccination and re-vaccination in 1875) the small-pox mortality of Sweden in 1874 *very greatly exceeded that of 1805 even in proportion to population*, is sufficient to overthrow any allegations in favor of vaccination that could ever have been advanced on the ground of these statistics; while the continuous fluctuations from one extreme to the other, which mark the whole period of the reign of vaccination, serve to render such allegations absolutely ridiculous; for if Compulsory Vaccination could bring small-pox down to 2 in 1846, why did it not *keep* it down, instead of letting it run up again to 2,488 in 1851? Indeed, it would be quite as rational to affirm that vaccination *raised* the death-rate in the *second*, as that it *lowered* it in the *first* of these instances. It was equally in operation throughout the whole period, and may just as well be credited with one result as with the other. We trust, therefore,—not that we shall now have heard the last of these famous Swedish statistics in proof of the beneficent effect of the great Jennerian curse; *that* would be too much to expect from the opponents we have to deal with, but—that we have proved conclusively to every rational and candid reader that *whatever cause may have influenced the decrease of small-pox mortality in Sweden, vaccination can no more have been that CAUSE*, than the sun, moon, and stars which, like it, have looked down on the ever-recurring increase as well as decrease of that dreaded malady.

It is quite true that, when all has been said and done, small-pox

mortality is on the whole “considerably less in Sweden now as in other countries—taken on an average of any ten or twenty years—than it was during the last century;” but there are other factors in the case amply sufficient to account for this. In the first place, the discontinuance of inoculation, which, as now admitted, spread small-pox broadcast, will account for a vast diminution in the disease it so carefully disseminated; in the second place, the well-known insane medical treatment of small-pox patients formerly practiced has been abandoned, and that was amply sufficient to kill three times as many patients as the disease itself carried off; while in the third place, a wide diffusion of sanitary knowledge and millions spent upon sanitation, especially in great towns, should surely have had some saving influence. And yet—for all this—while the highest small-pox death-rate per million recorded in Sweden, even in the last century (in 1779), was 7,196, the small-pox death-rate in Stockholm, the capital of Sweden, in 1874, amounted, says Dr. Siljeström, to about “8,000 per million!”\*—a fact which we beg most liberally to place at the disposal of the *Times*, Dr. Carpenter, Dr. Alfred Carpenter, and all pro-vaccination essayists, lecturers, and fanatics in the kingdom.

MARY C. HUME-ROTHERY.

The Pines, Cheltenham, Oct. 13th, 1882.

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\* Absolutely rather more, having been 1,206, out of a population of 150,446.

NATIONAL  
**Anti-Compulsory-Vaccination League.**

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# Sir Lyon Playfair's Logic.

BY

W. J. COLLINS, M. D., B. S., B. Sc. (LOND.)

UNIVERSITY SCHOLAR AND GOLD MEDALLIST,

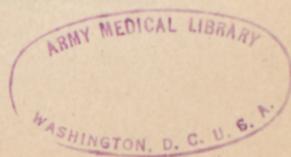
MEMBER OF THE ROYAL COLLEGE OF SURGEONS OF ENGLAND.

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1883.



## SIR LYON PLAYFAIR'S LOGIC.

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To those who, like myself, looked to Sir Lyon Playfair for a scientific solution of the question of compulsory vaccination, his speech must have proved a bitter disappointment. It contained nothing novel to those acquainted with the subject; even the fallacies that crept into it were not new; and there was a lack of judicial impartiality from the beginning to the end.

Facts favorable to vaccination were dwelt upon with emphasis and in detail; adverse facts were laughed at, ignored, or explained away, while the great sanitary and moral questions, more important than either, were thrust aside as quite insignificant.

I am not concerned either to defend or oppose vaccination. But, so long as it is endowed and enforced by the State, it is fair to insist that its reputed virtues shall be demonstrated, conclusively, unmistakably, and beyond all question.

I offer the following criticisms in no hostile spirit, but with a sincere desire, by means of scientific inquiry and discussion, to arrive at logical conclusions, and with a just respect for the author of the speech in question.

The first objection with which Sir Lyon Playfair dealt was the charge of the communicability of inoculable diseases by vaccination; and he satisfied himself that he had disposed of it by a reference to the report of the Committee of 1871, and by stating that "they knew that, since 1853, 17,000,000 children had been vaccinated in this country, and it was very doubtful whether there were three or four specific cases where this disease (syphilis) had ever been produced." Now, in the first place, it does not betray scientific accuracy in being satisfied with information twelve years old, more especially as pathological research in this particular department of infective diseases, and their mode of transmission, has been greatly extended of late, and has completely revolutionized the antiquated

opinions quoted, which were received, nevertheless, with approval and cheering by hon. members. As to the "three or four specific cases," suffice it to say that Mr. Jonathan Hutchinson, in a few years only, came across no less than twenty-four cases of vaccinosyphilis, and some of the facts respecting these twenty-four are so striking and suggestive that I venture to quote them. Mr. Hutchinson, be it understood, is a "firm advocate of compulsory vaccination," so that his evidence is the more unassailable; yet he opines—"there can be no doubt that the danger of transmitting syphilis is a real and very important one." His first series of cases he summarizes thus:

"Twelve persons, mostly young adults, vaccinated from a healthy-looking child. Satisfactory progress of the vaccination in all. Indurated chancres on the arms of ten of the vaccinated in the eighth week. Treatment by mercury in all. Rapid disappearance of the primary sores; constitutional symptoms in four of the patients five months afterwards, the vaccinifer showing condylomata at the age of six months."

These cases, Mr. Hutchinson states, were brought to the notice of the medical officers of the Privy Council, and Dr. Seaton requested that he should investigate them. I call attention to this to disprove a widely current inaccuracy, an example of which I extract from Mr. Ernest Hart's "Truth," to the effect that "No case of syphilis caused by vaccination has ever been discovered by the Medical Department of the State during the twenty years that it has supervised the vaccination of the kingdom."\*

Mr. Hutchinson's second series is not less instructive. The cases are thus summarized: "Unquestionable symptoms of constitutional syphilis in nine children who had been vaccinated from the same patient, suspicious symptoms in six others, and entire escape of a certain number; vaccinifer a fine healthy-looking child, but with slight local symptoms indicative of inherited syphilis." And respecting the vaccination of these he adds: "Nothing had occurred to excite the vaccinator's suspicions, not a single one of this series having been taken back to him on account of the unhealthy condition

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\* "The Truth about Vaccination," by Ernest Hart. 1880.

of the arm. On making inquiries at the houses of the patients, however, we found that no fewer than nine had chancres on the arms, and that six were suffering from well-marked and copious syphilitic rashes."

Sir Charles Dilke, in a somewhat casual reference to vaccino-syphilis, intimated that it was only when blood was admixed with lymph that syphilitic infection was possible. Here again, official information is strangely out of date, and the medical authorities of the Local Government Board would do well to endeavor to keep abreast of pathological research, especially in the matter of inoculable disease. In 1877 Mr. J. Hutchinson wrote: "Next, we may ask, is it absolutely necessary that blood should be used in vaccination in order to convey syphilis? It seems highly probable that it is not. At any rate, there is not the least evidence in three of the series of cases which I have recorded that the lymph used was visibly contaminated with blood."\*

From these premisses respecting vaccino-syphilis I draw the following conclusions: First, that the danger of transmitting syphilis by vaccination is real and important, and cases of the kind not very uncommon; † second, that inasmuch as a syphilitic vaccinifer may betray no sign of the disease, and that admixture of blood is not essential to infection, we as yet know of no safeguard against arm-to-arm infection; third, that it is possible for wholesale syphilisation by vaccination to go on "without even exciting a vaccinator's suspicions"—a fact which somewhat detracts from the value of the

\* Illustrations of Clinical Surgery, Fasc. VI. pp. 130.

† Lancereaux has published the following cases of Vaccino-Syphilis—

By Ceriola.....	40	By Lecoq.....	2	By Chassaingnac... 1
" Tassani.....	46	" Galligo.....	14	" Hérard..... 1
" Surgeon B.....	19	At Rivalts.....	46	" Adelasio..... 2
" Hübner.....	8	By Trouseau....	1	" Monell..... 1
" Marcolini.....	40	" Maronni.....	34	
" Viani.....	2	" Devergie.....	1	Total..... 258

To these may be added the following published cases—

By Hutchinson....	24	At Lebus.....	18	By Fuqua..... 52
" T. Smith.....	1	By Depaul.....	59	" Cullimore..... 1
" Hulke.....	1	" Sebastian.....	1	In Algiers..... 58
" Oldham.....	3	" Collins.....	2	
				Total..... 478

assurance of public vaccinators, who have vaccinated thousands and never seen a bad result, and who, as a rule, lose sight of their patients after the eighth day.

Respecting the accusation that diseases of the skin and erysipelas follow and are caused by vaccination, the learned doctor imagined he answered it by a story about a policeman who attributed a recent eruption to seven years' antecedent vaccination, by asserting such cases were instances of the *post hoc ergo propter hoc* fallacy, and by denying that erysipelas was increasing or had any relation to the question before them. And Sir C. Dilke followed in the same strain when he said: "The one disease which has been put forward as being distinctly caused by vaccination is erysipelas, and yet there has been a distinct decrease in the mortality from that disease." Now, such statements as these are both unfair and misleading, and quite unworthy of any scientific inquirer. As it happens, deaths from erysipelas resulting from vaccination are classified separately from erysipelas arising from other causes, and, while it may be true that the latter are decreasing, Sir Lyon Playfair and Sir Charles Dilke would, if they had taken the trouble, have found it equally true that the former are rapidly increasing. I extract the following from the yearly returns of the Registrar-General:

DEATHS FROM "ERYSIPELAS AFTER VACCINATION."

1859.....	5	1870.....	20
1860.....	3	1871.....	24
1861.....	2	1872.....	16
1862.....	3	1873.....	19
1863.....	11	1874.....	29
1864.....	13	1875.....	37
1865.....	10	1876.....	21
1866.....	10	1877.....	29
1867.....	4	1878.....	35
1868.....	9	1879.....	32
1869.....	19	1880.....	39
Total in 22 years.....		390	

The table shows these deaths have increased nearly eightfold in thirty years, and, when it is borne in mind that all such cases are not returned as such, in order, according to Mr. May, M. R. C. S., "to save vaccination from reproach," that not one of the cases at Gainsborough and only one of the cases at Norwich were certified

thus, it will be seen that these figures only represent a portion of the whole truth. In my review of the Norwich inquiry\* I have shown, contrary to the opinion of Sir Lyon Playfair, and in strict accord with the views of the immortal author of vaccination, that a very close relation indeed does subsist between vaccination and erysipelas—in fact, that vaccine lymph is a septic fluid containing micrococci, and, as such, is capable, *per se*, of causing erysipelas by inoculation, and that the normal vaccine areola is simply a local and mild erysipelas.

Sir Lyon was absolutely incorrect when he asserted that scrofula was decreasing, as the following table, which gives the average yearly deaths under one year of age per 1,000,000 births from six diseases which have been asserted to be communicable or caused by vaccination, clearly shows. The figures are given for three periods, in accordance with the changes that have been made in the Vaccination Acts, whereby more general vaccination has been secured:

	England.		
	Voluntary Vaccination, 1847 to 1853.	Obligatory Vaccination, 1853 to 1867.	Enforced Vaccination, 1867 to 1878.
Scrofula.....	351	611	908
Syphilis.....	564	1,206	1,738
Erysipelas.....	817	781	834
Skin diseases.....	183	253	343
Pyæmia (not distinguished before 1862).....	—	(155)	180
Mesenteric disease.....	2,981	3,371	4,373

Sir Charles Dilke truly remarked: "There has been on the whole a steady diminution in the death-rate of the country, from 22.4 in 1840-50 to 21.4 in 1870-80, and 19.3 in 1881-82." Surely the learned President must see that the onus then lies with him to show why it is that, with diminishing general mortality, we have a steady increase of certain inoculable diseases, especially those which it has from the first been asserted were peculiarly communicable by vaccination. Surely this points to some inoculable cause at work, and it is for the oracle of the Local Government Board to indicate what that cause is, in order that it may be speedily removed.

\* "A Review of the Norwich Vaccination Inquiry," by W. J. C.

Upon the slender premisses which I have indicated above, Sir Lyon Playfair founded an argument which, for faulty analogy, it would be difficult to equal. He asked: "Were they to dispense with a remedy which was efficacious over the whole community because a few very rare cases of injury might occur, any more than they were to prohibit the use of anæsthetics because a patient occasionally died under them, or prohibit drinking water because people sometimes got typhoid from using polluted water?" I must candidly confess that any analogy between the prohibition of certain articles which individuals use at their own risk, and the abolition of the compulsory enforcement of that whose very claim is to render voluntary acceptance of it indifferent to the action of others, may be more apparent to the legal than to the medical mind. And again, to invoke the name of logic to justify a comparison between the assertion that, because certain diseases have in individual cases been proved to be conveyed by vaccination, an increase in collective cases, as shown by statistics, points to a casual relationship, and a fanciful connection between small-pox and Fenianism in Ireland, is an assumption of the scientific method which is only conspicuous by its absence.

In dealing with the question of the protective influence of vaccination against attack and death by small-pox, Sir Lyon Playfair began by commenting on the mildness of small-pox subsequent to vaccination; but what says Dr. Seaton concerning the epidemic of 1871-74: "In every country attacked, so far as our information extends, the peculiar intensity of this epidemic was manifested by the extreme diffusiveness of the disease, by its attacking in unusual proportions persons who were regarded as protected against the disease, whether by previous small-pox or by vaccination, and by the occurrence with quite remarkable frequency of cases of malignant and hæmorrhagic type, and a consequent unusually high ratio of deaths to attacks."\* And, again, of 24,994 cases of small-pox occurring before the year 1780, and therefore all unvaccinated, 4,707 died, or 18.83 per cent.; † while of 48,248 cases of small-

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\* "Public Health Reports," New Series, No. 10, p. 51.

† Jurin, Duvillard, and Rees' Cyclopædia.

pox occurring between the years 1836 and 1880, of whom 34,423 were vaccinated, 8,926 died, or 18.5 per cent.\* Either the diluent effect of vaccination was *nil*, or, on the other hand, if it made the disease milder for the vaccinated, it (or some cause associated with it) made it also more severe for the unvaccinated, for the mortality remained at precisely the same rate per cent. as before.

The facts respecting small-pox this century and last may be told in a few words. Early last century and in the latter half of the seventeenth century—therefore prior to inoculation—small-pox was a considerable item in London mortality; from 1660 to 1700 it caused about 56 out of every 1,000 deaths. Inoculation, introduced in 1721, and practised till the end of the century, pushed up the death-rate from small-pox to 108 per 1,000 deaths in 1760–70. After this, *prior to vaccination*, and *in spite of inoculation*, and *pari passu* with a like decline in fever, and, therefore, owing to some great radical change at work, the small-pox death-rate steadily declined. As Dr. Farr observes: “Small-pox attained its maximum after inoculation was introduced; this disease began to grow less fatal before vaccination was discovered; indicating, together with the diminution in fever, the general improvement in health then taking place.”†

The figures for the last fifty years of the eighteenth century are:

	Small-pox deaths per 1,000 deaths.
1750–1760.....	100
1760–1770.....	108
1770–1780.....	98
1780–1790.....	87
1790–1800.....	88

Now, if small-pox could decline while inoculation was in full swing, disseminating contagion far and wide, how much the more should we expect it to decline when inoculation received a check by the introduction of vaccination at the beginning of the century? And, again, when the former practice was made penal in 1840? Vaccination may or may not have caused the decline; but what I complain

\* Collected from various Hospital Reports, by A. Wheeler.

† McCulloch's "British Empire."—Art.: Vital Statistics.

of in Sir Lyon Playfair's argument is that he has entirely ignored all other explanations which leave vaccination out of the count. If the decennial periods be continued, the figures are as follows :

	Small-pox deaths per 1,000 deaths.
1800-1810.....	64
1810-1820.....	42
1820-1830.....	32
1830-1840.....	23
1840-1850.....	18

Vaccination was introduced when small-pox was a diminishing quantity, and by its introduction checked a fertile source of its propagation. Has Sir Lyon Playfair estimated the value of these two factors, and, after allowing for them, what difference does he find with which vaccination, and vaccination only, can be credited?

Mr. Marson, when asked before the Committee of 1871: "Do you not think that the lesser prevalence of small-pox in the first quarter of the present century may have been due, to a great extent, to the discontinuance of inoculation, rather than to the practice of vaccination!" replied: "Very likely it was";\* and Mr. Marson was probably not far wrong.

I next come to the remarkable figures which Sir Lyon Playfair quoted from the forty-third Report of the Registrar-General, as follows :

Sub-periods.	Mean Annual Death-rates from Small-pox per Million Living.
1847-53.....	205
1854-71.....	223
1872-86.....	156

I need not point out the inequality of the periods compared—seven years with eighteen years, with nine years—but I must complain that the periods chosen are not those which are coeval with the most important improvements in the Vaccination Acts. It was by the Vaccination Act of 1867 that vaccination was first made really and truly compulsory in England, but this does not correspond to the com-

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\* Report of Select Committee, May 23, 1871. Quest. 4,648.

mencement of a period in the table ; and again, the Act of 1871 would seem to have had but small effect on the rate per cent. of successful vaccinations to births, for in 1872 (the first year of Sir Lyon Playfair's last period) this was 82.6, whereas in the previous year it was 87.4 ; so that the improvement in the Act did not tend in the direction of increase of the rate per cent. of vaccinations to births.

Hence, to draw a line between 1871 and 1872 in respect of improved vaccination is to make a division where none exists.

Now, the progressive diminution shown in the table is a result of a mere statistical trick, unworthy of a scientist like Sir Lyon Playfair. And, if the year 1871 be taken with the last period instead of the second, we get a strangely different result, thus :

Sub-periods.	Mean Annual Death-rates from Small-pox per Million Living.
1847-53.....	305
1854-70. ....	171*
1871-80.....	235*

In order to make this clear, and exhibit the whole thing at a glance, I add the deaths from small-pox per million living for each year from 1847 to 1880 :

1847.....	246	1864.....	373
1848.....	398	1865.....	309
1849.....	264	1866.....	144
1850.....	263	1867.....	118
1851.....	396	1868.....	96
1852.....	409	1869.....	72
1853.....	174	1870.....	118
1854.....	153	1871.....	1,022
1855.....	136	1872.....	831
1856.....	121	1873.....	102
1857.....	206	1874.....	92
1858.....	335	1875.....	40
1859.....	197	1876.....	99
1860.....	140	1877.....	174
1861.....	66	1878.....	74
1862.....	81	1879.....	21
1863.....	293	1880.....	25

\* These figures are calculated according to the Registrar-General's own formula, which he kindly explained to me. It consists in calculating the rate per million of the average annual small pox deaths upon the estimated population of the middle year of each period.

“These great reductions in the rate of small-pox mortality I believe to be due wholly to vaccination,” says Sir Lyon. Sanitation is not the cause, he says, for it would “diminish all other diseases”; but these have only diminished 6 per cent., whereas small-pox has diminished 80 per cent. in children under five. Six per cent. only of the reduction can be ascribed to sanitation!

Now, if the whole decline be really due to vaccination, it is as magnanimous as inconsistent of the learned doctor to allow 6 per cent. to be due to sanitation; but even he would probably not be prepared to seriously maintain what he hastily asserted, that *all* diseases other than small-pox are likely to be affected by sanitary measures. Take, for instance, fractures, premature births, suicides, drowning, old age, and teething, which constitute not an inconsiderable item in national mortality.\* To compare small-pox with all diseases other than small-pox is to compare things totally incomparable. Let a comparison be instituted between small-pox and that great class of diseases closely allied to it, and grouped together under the name of fever—viz., typhus, typhoid, and simple continued fever, and let Sir Lyon Playfair’s own periods be taken (with the exception of the years 1847–49, for which the Registrar-General does not give the figures for fever) and see what is the result:

	Deaths per Million Living.	
	Small-pox.	Fever.
1850-53.....	310	(986)
1854-71.....	223	940
1871-80.....	156	473

Now, if the ratio of the first to the last period of small-pox death-rate be compared with that of the fever death-rate, it will be found that the latter shows a decline 2 per cent. greater than the former; and the difference left to be accounted for by vaccination, therefore, on this reckoning, becomes a minus quantity. Curiously enough this same concomitant decline of fever and small-pox, was noted by Dr. Farr as having occurred at the beginning of the century at a time when small-pox was said to be flying before the advent of vaccination. Dr. Farr says: “Fever has progressively declined since 1771; fever

\* In 1881 no less than 55,238 deaths in England were ascribed to the above-named causes, or one-ninth of the total deaths.

has declined in nearly the same proportion as small-pox,\* and the figures he gives are these:—

	Deaths per 10,000 Living.		
	1771-80	1801-10	1831-35
Fever.....	621	264	111
Small-pox.....	502	204	83

One more piece of statistical information respecting England and Wales, which Sir Lyon Playfair did not give, I will furnish: the deaths from small-pox in the first ten years after compulsory vaccination was enacted, 1854-1863, were 33,515; during the second ten years, 1864-1873, there were 70,458. I cite this simply to show how, by dividing the periods differently, a very different complexion is put upon the statistics of the question.†

In regard to Scotland, Sir Lyon Playfair speaks with authority, for on July 6, 1870, he said: "There could not be the slightest doubt that compulsory laws—where properly applied, as in Scotland and Ireland—were perfectly equal to stamp out small-pox in a country."

And figures seemed to support his assertion, for in that year only 114 small-pox deaths were registered in the country. On June 19, 1883, the same authority declared, "Scotland in 1872-73 had a most serious epidemic of small-pox. This time he certainly was correct; for within that period 3,572 persons died of small-pox in Scotland. But then, the explanation is forthcoming. "Stamping out is not keeping out;" stamped out in 1870, epidemic in 1871! And Sir Lyon Playfair thinks "his phrase 'stamped out' was justified by fact!"

The statement that "the whole case of the anti-vaccinators depends on epidemic years" reminds one of Dr. Ballard's undertaking

\* McCulloch's "Statistics of the British Empire."

† The following figures from the 4th Annual Report of the Registrar-General just published are instructive:

	Deaths from Small-pox.		Death-rate from Small-pox per 100,000.	
	England.	London.	England.	London.
1841-50 (6 years).....	(29,522)	8,416	29	40
1851-60 .....	42,071	7,150	22	28
1861-70.....	34,786	8,347	16	28
1871-80.....	57,422	15,539	24	46

that he could make the whole case plain if he might be allowed to leave the epidemic years out of consideration; and the declaration that when epidemics come "they first engulf the unvaccinated" is disproved by fact wherever evidence on the subject can be obtained. Thus, in the Cologne epidemic of 1870, 173 vaccinated persons were attacked before the first unvaccinated one.\* In Liegnitz, in 1871, the first unvaccinated to suffer was 225th on the list;† and in Bonn, in 1870, the first unvaccinated victim was the forty-second attacked.

Sir Lyon Playfair dealt cautiously with the London statistics. The Registrar-General puts the whole matter tersely in his report for 1880, when he says: "The decennium which closed with the year 1880 was one of lower mortality in London than any of the preceding decennial periods. . . . These facts are strong evidence that the sanitary efforts of recent years have not been unfruitful. . . . The evidence in support of this position is rendered still stronger, if, instead of fixing our attention upon the total mortality, we take into consideration its causes. For it will be found that the saving of life was almost entirely due to diminished mortality from causes whose destructive activity is especially amenable to sanitary interference—namely, the so-called zymotic diseases. . . . The death-rate from fever fell nearly 50 per cent. . . . that of scarlatina and diphtheria fell 33 per cent. . . . *One disease alone in this class showed exceptionally a rise, and no inconsiderable one. This was small-pox, which, owing to two great outbreaks of 1871-72 and 1877-78, gave a death-rate nearly 50 per cent. above its previous average.*" That is to say, the only disease against which a special prophylactic is invoked has increased, while those fought on common, rational, sanitary grounds have decreased. Is it that vaccination has blinded us to the real cause of small-pox, and that the fashionable fiction that "sanitary measures have no influence on small-pox," is bearing its pernicious fruit?

One great fact goes behind all Sir Lyon Playfair's statistics, and falsifies them; he has omitted to prove his major premiss—he has not shown that less small-pox means fewer deaths, and he cannot

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\* Dr. de Pietra Santra—Lettre à Messieurs de la Chambre des Députés, Feb. 16, 1881.

† Quoted from petition to the Reichstag in A. C. V. Reporter, June 1st, 1881.

show it. As long as zymotic disease exists, it continues a quantity, composed of varying proportions of the same elements; one epidemic predominates for a time, but it is at the expense of others, and it scarcely affects the total death-rate at all. The test of improvement is the decline, not of one zymotic, but of the total class death-rate.

Dr. Farr puts the same thing thus:\* "It is by no means proved that the general mortality, under unfavorable sanitary conditions, is much reduced by rendering a person insusceptible of one type, while he remains exposed to all other types of zymotic disease." And again: "To operate on mortality, protection against every one of the fatal zymotic diseases is required, otherwise the suppression of one disease element opens the way to others." If statistical proof be desired, it is at hand. In Prague, from 1796-1802, the general mortality was 1 in 32, at a time when the small-pox mortality was 1 in  $396\frac{2}{3}$ ; but in 1832-55, when the small-pox mortality was only 1 in  $14,741\frac{1}{3}$ , the general mortality was still 1 in  $32\frac{1}{3}$ .† Again, in India, the same fact comes out: in a recent Blue-Book it is stated "the vaccination returns in India show that the number of vaccinations does not bear a ratio to the small-pox deaths. Small-pox in India is related to season, and also to epidemic prevalence. It is not a disease, therefore, that can be controlled by vaccination, in the sense that vaccination is a specific against it. As an endemic and epidemic disease, it must be dealt with by sanitary measures, and if these are neglected small-pox is certain to increase during epidemic times. Vaccination has no power, apparently over epidemic small-pox. It would scarcely answer, in the face of these facts, to go on vaccinating the people to protect them from small-pox, while leaving them surrounded by such disease causes as the reports would show to exist in all the villages affected."‡ So that it would seem to be a just conclusion from the foregoing that vaccination is inoperative in the absence of sanitation and superfluous in its presence; that if you could put out one zymotic disease by vaccination, people would die at the same rate as before, unless you abolish all by universal sanitation.

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\* Letter to Registrar General, 30th Annual Report, 1869, p. 213.

† Papers relating to Vaccination. Simon, 1837.

‡ "Report on Sanitary Measures in India, 1879-80." Vol. XIII. 1881.

I must next refer to the figures giving the small-pox mortality respectively among vaccinated and unvaccinated children in London. These, according to Sir Lyon Playfair, give a ratio of the latter to the former equal to 44 to 1.

Now, in order that statistics of this kind may have any value, it is necessary to ascertain the ratio of vaccinated to unvaccinated persons in the general population of London; and, secondly, to be sure that the two classes compared are in all respects other than vaccination practically on a par. Now, it is safe to assert we have no means at our disposal to gauge accurately the extent to which Londoners are vaccinated. Sir Lyon Playfair pretends only 2 or 3 per cent. are unvaccinated—*i. e.*, 98 or 97 per cent. vaccinated; the higher the figure, of course, the better, for his argument. Now for years past 6 to 8 per cent., and more, of London children have remained unaccounted for as regards vaccination, and these figures only relate to the registered births. Some two years ago an examination of a number of children was made in Bethnal Green, one of the better vaccinated parishes, and then 13.8 per cent. of them were found to be unvaccinated. Now  $98 - 13.8$  does not equal 100. So that Sir Lyon Playfair's unvaccinated class is much too restricted. Again, in 30 per cent. of small-pox deaths,\* there is no information respecting vaccination, and how are we to know whether the desire "to save vaccination from reproach" was stronger than the hesitation to witness to transgression of the Vaccination Acts, which has been drily suggested as an explanation of "the not stated cases"? Then, with regard to the comparability of the two classes; are they identical in other respects? Sir Lyon says they are (his argument would be worthless were it otherwise). "They were living," he says, "under the same conditions; they were living in the same houses, they were eating the same food, they were breathing the same epidemic air." Dr. Buchanan, with greater assurance, declares: "No one suggests that the vaccinated and unvaccinated classes live under conditions differing from each other in their influence on small-pox, unless it be this one condition of vaccination." But in the *British Medical Journal*, Oct. 25, 1880, we read: "The high death-rate in

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\* Buchanan: "Small-pox in London in 1881." Report to the Local Government Board.

the unvaccinated must not be compared with the lower rate in the vaccinated, nor with the general mortality from small-pox before the discovery of vaccination, without a fair consideration of all the facts which may help to arrive at a just conclusion. It is probable that a large proportion of unvaccinated persons is to be found among the ignorant, dirty and wretched inhabitants of the slums of London, and very few, indeed, among the educated and better-fed members of society. The disease is much intensified by over-crowding." Dr. Bakewell, who gave evidence before the committee of 1871, observes: "It must not be forgotten that in all European countries the unvaccinated are taken from the poorest and most neglected classes of the community, and may fairly be expected to be bad subjects for any disease like variola. This should be borne in mind in estimating the mortality of vaccinated and unvaccinated."

I do not say that this will explain the whole of the disparity between the two death-rates, but I do say that Sir Lyon Playfair, by not only not allowing for this, but even denying any difference other than vaccination, has proved himself a better special pleader than an impartial investigator.

Let us turn for a moment to the incidence of small-pox attacks, not small-pox deaths, for this is the all-important point in the plea for compulsion.

If vaccination only mitigates small-pox when it comes, and does not lessen liability to attack, the last shred of argument for compulsion is torn away; for mild small-pox, all authorities agree, is as contagious as the most severe; hence there is no more danger to others from a malignant unvaccinated case than from a discrete vaccinated one. Now, in the epidemic of 1871, 91.5 per cent. of the cases admitted to the Highgate Hospital were vaccinated, and at the same place in 1881, of 491 cases only twenty-one were not vaccinated, and this at a time when certainly not more than 90 per cent. of Londoners were "protected;" and, indeed, in an outbreak at Bromley, comprising forty-three cases, every one of the victims had been vaccinated and three re-vaccinated,\* so that it would seem, as regards the relative incidence of small-pox, vaccination has very little effect. If I wished to improve the occasion, after Sir Lyon Play-

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\**Lancet*, April 27, 1881.

fair's example, I might quote Dr. Browning, who gives particulars of 469 cases of post-vaccinal small-pox, of whom ninety-nine died, or 21.108 per cent. of whom he says, "many of these sufferers showed good vaccine marks of the kind that would be deemed worthy of an extra grant from the government inspector, and yet they took small-pox—some within six days, some within six months, and some within six years of their vaccination date."

Sir Lyon Playfair found fault with Mr. Taylor for having said that 150 years ago inoculation was in full practice, and Mr. Taylor may have been thirty years out in his reckoning, but Sir Lyon was not much more than a century wrong when he informed the House that the black death (1348-49) followed in the wake of the Wars of the Roses (1455)!

The whole of the argument about the relative amount of small-pox in the French and German armies hinges on the point which it seems impossible to arrive at—viz., the condition of the French army in respect of vaccination and re-vaccination. But of what avail is an argument that, because unre-vaccinated French soldiers, destitute, defeated, and dejected, suffered severely from small-pox, therefore vaccination should be compulsory all over England, and in parts where small-pox is unknown? The 23,469 deaths from small-pox in the French army, though cited in St. Petersburg and Berlin, twice published in the *British Medical Journal*, approved by Dr. Carpenter, proclaimed by Sir Lyon Playfair, and declared by Sir Charles Dilke to be simply "crushing," have been proved, nevertheless, to be a pure fabrication, there being no statistical data of the Franco-German War worthy of the name. The one certain fact about the matter seems to be that 263 well re-vaccinated German soldiers died of small-pox.

Diseases are specific, said Sir Lyon, and vaccination can convey no disease but itself—theoretically true, practically an absurdity. If it were possible to filter off the vaccine germs from vaccine lymph and use these alone, it might be possible to avoid all other taint; but vaccine virus, what is it? It is the serum of blood, containing also blood-cells in small numbers along with the vaccinal germs, and the constituents derived from the blood may naturally carry with them any poison contained in the blood. Vaccine lymph can, therefore,

convey any disease whose cause can reside in the blood, and therefore in the lymph of a vaccine vesicle.

Respecting the oft-told tale of diminished pock-marked faces, it is curious and instructive to quote the following extracts, the one from the National Vaccine Establishment's Report, for 1825, the other from the *Lancet*, June 29, 1872. The former asks: "What argument more powerful can be urged in favor of vaccination than the daily remark which the least observant must make, that in our churches, our theatres, and in every large assemblage of the people to see a young person bearing the marks of small-pox is now of extremely rare occurrence?"

That is to say, twenty-five years before vaccination was made compulsory, pock-marked faces were all but banished; whereas, nineteen years after the introduction of compulsion, the *Lancet* laments "the growing frequency with which we meet persons in the street disfigured for life with the pitting of small-pox. Young men, and still worse, young women, are to be seen daily whose comeliness is quite compromised by this dreadful disease." Both statements are worthless as evidence to one who has acquainted himself with statistics. It is true pock-marked faces are rarer than they used to be, because small-pox is rarer and better treated than it used to be; but so, also, is fever, and the decline of fever is simply not so markedly observed because people do not carry "the stamped receipt" of fever about them on their persons. It is true, and no one can deny it, that small-pox in London declined at the end of the last century and the beginning of this, in a remarkable way, and in nearly the same ratio as fever; but it is equally true that for the last thirty years (under compulsory vaccination) the number of deaths by small-pox in London has increased, and it is not surprising that pock-marked faces have multiplied accordingly. Here are the figures:

1851-60	...	...	...	...	7,150
1861-70	...	...	...	...	8,347
1871-80	...	...	...	...	15,539

The foregoing are the criticisms which suggested themselves to me while listening to Sir Lyon Playfair's speech. If I have put the opposite side of the case more strongly than fairly—and I do not think I

have—it is in order to show that this well-nigh interminable question is not to be summarily dismissed as undebatable and one-sided. Of course the public prints which are not scientific in their way have accepted with unquestioning faith Sir Lyon Playfair's "semi-scientific" exposition, and the following piece of concentrated ignorance and inaccuracy I quote from the *Globe* of June 20 :—

“In fine, every fact, every circumstance, every experience supports the conclusion that, were the law to be altered in accordance with Mr. Peter Taylor's views, the immediate result would be to very largely increase the rate of mortality.”

I might rewrite it thus :—No fact, no circumstance, no experience supports the conclusion that were vaccination able to abolish small-pox, the death-rate would be lowered in the least, so long as insanitary conditions prevail. And, in fine, if sanitation prevailed, the very *raison d'être* for vaccination, to say nothing of compulsion, would be everlastingly destroyed.



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HISTORY AND PATHOLOGY  
OF  
VACCINATION

VOL. I.—A CRITICAL INQUIRY

BY

VOL. II.—SELECTED ESSAYS

EDITED BY

EDGAR M. CROOKSHANK, M. B.,

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OGY OF ACTINOMYCOSIS; IN REPORTS OF THE AGRICULTURAL DEPART-  
MENT OF THE PRIVY COUNCIL.

AUTHOR OF "A MANUAL OF BACTERIOLOGY," ETC.

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A FACSIMILE of the FIRST FOLIO of the MS. of JENNER'S ORIGINAL  
PAPER.  
A FACSIMILE of an UNPUBLISHED LETTER from JENNER to Mr. HEAD.

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LONDON: H. K. LEWIS, 136 GOWER STREET, W. C.

EXTRACTS  
FROM THE  
AUTHOR'S PREFACE.

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IN this preface I have thought it necessary to lay before the profession the circumstances which have led to the production of these volumes.

I had devoted myself for some time to pathological researches in connection with the communicable diseases of man and the lower animals, when the discovery of an outbreak of Cow Pox, in 1887, led me to investigate the history and pathology of this affection. At that time I accepted and taught the doctrines, in reference to this disease, which are commonly held by the profession and are described in the text-books of medicine.

In endeavouring to discover the origin of this outbreak, it was proved beyond question that the cows had not been infected by milkers suffering from Small Pox. This fact, together with the clinical characters of the disease in the cows, and in milkers infected from the cows, and the certainty that I had to deal "not with an infectious disease like cattle-plague or pleuro-pneumonia, but with a disease which is communicated solely by *contact*," convinced me that the commonly accepted descriptions of the nature and origin of Cow Pox were purely theoretical. As the natural Cow Pox had not been investigated in this country for nearly half a century, it was obvious that a much neglected field of comparative pathology had been opened up for further inquiry.

While attending at the National Vaccine Establishment of the Local Government Board I was unable to obtain any exact details, clinical or pathological, of the source of the lymph which was employed there. From my experience of this and other vaccination stations I found that both official and unofficial vaccinators were com-

pletely occupied with the *technique* of vaccination, to the exclusion of any precise knowledge of the history and pathology of the diseases from which their lymph stocks had been obtained. Thus, at this early stage of my investigation, I felt that what Ceely said, in 1840, was still true: "The imperfect knowledge which we at present possess on many points connected with the natural history of the *variola vaccinae*, and the numerous and formidable impediments to the improvement and extension of that knowledge, demand the continuance of vigilant, patient, and diligent inquiry."

In January, 1888, while I was studying the literature of the subject at the Library of the Royal College of Surgeons, Mr. Baily, the librarian, to whom I am indebted for much courteous assistance, was engaged in re-cataloguing the Library. He found a parcel of MSS., which he thought might prove of interest to me. It contained letters from Hunter to Jenner and a manuscript which was thought to be the MS. of Jenner's *Inquiry*. On carefully perusing it I discovered that it differed in many respects from the published *Inquiry*; it was, in fact, Jenner's *Communication to the Royal Society*. I was so struck by the contents of this paper, and the small amount of evidence upon which Jenner had first ventured to propose the substitution of Cow Pox inoculation or *vaccination* for the old system of Small Pox inoculation or *variolation*, that I was induced to carefully look into the life of Jenner and the early history of vaccination, as contained in Baron's Biography, and in the correspondence and articles on the subject in contemporary medical and scientific periodicals.

I gradually became so deeply impressed with the small amount of knowledge possessed by practitioners concerning Cow Pox and other sources of vaccine lymph, and with the conflicting teachings and opinions of leading authorities in both the medical and veterinary professions, that I determined to investigate the subject for myself. From antiquarian booksellers in Paris, Berlin, and in this country, I succeeded in a very short time in obtaining a large number of works dealing with the early history of vaccination.

They at the same time forwarded many works on Small Pox inoculation, and thus my interest was aroused in this subject also, and

its bearing upon the history and pathology of vaccination was soon apparent.

In February, 1888, I resolved to consult the leading authorities in France, and to obtain, if possible, the history of the Bordeaux Lymph, and of the outbreaks of Cow Pox which had been met with in that country during the time that the disease was supposed to be extinct in this.

For reference to some works, copies of which I have not hitherto succeeded in obtaining, I have availed myself of the British Museum and our medical libraries.

The difficulty in gaining access to these works is no doubt the reason why the originals have been so little read. It would hardly be possible for the practitioner with but little time at his disposal, and, if in the country, without access to many medical libraries, to undertake such an inquiry; but I trust that the system which has been followed in this work of giving copious extracts will induce others to study the original authorities.

EDGAR M. CROOKSHANK.

# WANTED! WANTED! WANTED!

Members of Parliament, Noblemen, Government Officers,  
Judges, Lawyers, Parsons, Councillors, etc.,  
whose moral characters ARE GOOD!

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## READ THE FOLLOWING EXTRACTS.

*Christian World*, JANUARY, 1888.

### “Twenty-Five Times Fined.”

SIR,—The wide circulation of your paper, and the respect in which I know it to be held, prompts me to ask powerful support in an appeal I desire to make to every liberty-loving Englishman, wherever he may be found. A cruel persecution is being carried on by the East Ashford Guardians, towards a parishioner named Charles Hayward, whose only offence is that he declines to have his child vaccinated, believing, as I do, that to inoculate a healthy child with poisonous matter, from sources unknown because unknowable, is itself a crime. Hayward is a mechanic in the employ of a railway company, and at the instigation of these so-called Guardians, after having been summoned and fined twenty-five times, between May, 1885, and the 19th of last month, the fines amounting to £40 5s., has now been again served with two summonses. Now, Sir, whether vaccination be right or wrong, it never was the intention of the Legislature that an Englishman should be thus persecuted because he will not do violence to his own conscience. My sympathy with Hayward has been intensified this week by my own personal experience. I have myself been summoned before the magistrates for the second time for a similar cause, but by the intervention of my solicitor, I am relieved of all personal inconvenience, the fines imposed

being a matter of indifference to me. In the ordinary course of affairs, one does not covet the distinction of figuring in a public court; but the only sense of shame. I am conscious of in the present instance arises from my neglect of so vital a question as vaccination, until it was forcibly brought under my notice by a dear sister of mine nearly losing her life by this dangerous operation, since when I have studied this question deeply, and am convinced that as certainly as inoculation was proved to have propagated small-pox, so surely will vaccination be proved to propagate syphilis and other diseases. But I maintain, Sir, supposing that vaccination does all that Jenner ever claimed for it, that is, renders the patient operated upon proof against small-pox, it follows that if my neighbour vaccinate his children, they cannot take small-pox from mine; and hence, I submit, no rational man can argue that the State has a right to compel me, as a father to jeopardise the health and lives of my children in the name of the public weal.—I am, Sir, your obedient servant,

JOHN LEWIS.

Spedan Tower, West Heath,  
Hampstead, N. W., Jan. 2.

---

FROM THE *Anti-Vaccinator*, SEPTEMBER 25, 1869.

“Vaccination Viewed Politically.”

LETTER FROM PROFESSOR NEWMAN.

DEAR MR. PITMAN,—You call my attention to an article in the *Lancet*, commenting on a private letter of mine to you, which you have thought fit to publish. You kindly desire to print some reply from me. I really think I may claim that you or other anti-vaccinators will make the reply, which is not at all difficult. I have no taste for detailed controversy, especially with an anonymous opponent, and with a medical man on a medical topic. But I regard the political side of the question as the primary. It is not developed in that letter—which I never intended for the public; but I will now enter upon it somewhat more fully.

*It does not rest with Parliament* to enact how a disease shall be treated. If a Bill were proposed to enforce that every one who is seized with apoplexy shall be bled, the *Lancet* would probably be foremost in outcry. I should expect it to propound that Parliament is no authority in medicine; that to protect us from *dangerous* treatment by ignorant pretenders, Parliament enacts medical degrees as mere tests of knowledge, but it must not dictate to those who have displayed their knowledge by gaining the degree.

Nor is it to the purpose to say that Parliament took advice of physicians before it legislated. Some 30 or 40 years ago, when homœopaths first disused bleeding for apoplexy and fever, the disapproval of their conduct by the orthodox medical faculty was so universal and so vehement, that Parliament might easily have got medical warrant to enforce bleeding. Nay, 100 years ago, physicians were zealous for inoculation. My father was with difficulty saved from it by the sturdy refusal of his mother, who said (as she told me) —“If God send small-pox on my child, I must bear it; but never will I consent to give it to him on purpose; how can anyone know what would come of it?”

At that time Parliament might have been advised by educated and learned physicians to make inoculation *compulsory*; and I make no doubt those physicians spoke as dogmatically to my grandmother in favour of it as any can now speak of vaccination: yet, by the advice of physicians, inoculation is now made *penal*. It is certainly possible that by the advice of physicians vaccination also will hereafter be made penal. Medicine is a changing and (let us hope) progressive Art; it has no pretension to be Science, or to have any fixedness at all. The Editor of the *Lancet* has probably read the article in the *Quarterly Review* of April, 1869, entitled “The Aims of Modern Medicine.” It is a storehouse of detailed fact for those who are too young to remember what it narrates of unanimous medical error, pernicious on the hugest scale. Medicine cannot improve, unless the younger and fresher minds among physicians are left perfectly free to deviate from the routine of their elders. Nothing can justify Parliament in enacting a medical creed, or enforcing any special medical procedures.

But if physicians must have hands unfettered, have patients no right to choose their physician?—no right to repudiate treatment which they think quackery? We all ought to be re-vaccinated periodically, according to the *Lancet*. Does then Parliament dare to enact such a thing? It does not; else I might be taken by force and vaccinated to-morrow. And if I understand the argument for compulsory vaccination, it cannot rightly stop short of this. I may be told that extreme dangers require extreme remedies. Well—I will put really extreme cases. In an age and country of barbarism, I am seized with the plague, or with a highly-infectious leprosy. If I have the plague I am to be shot dead with arrows, and mould is to be heaped over me where I lie. If I have the leprosy I am to be hunted into solitude, and there live, if I can.

The law is hard, yet I might accept my fate without murmuring. One who is *dangerous* to society, whether from contagion or from mania, cannot retain ordinary social rights. Better for me to die outright than to infect my kind nurses, for the miserable chance of lingering. To put me to death for plague is sharp law, no doubt; but the legislature would at least know that a pestilential body, once well covered with earth, does no further harm, so that the despotism effects its end:—at least it stops contagion. I should feel that I died for my country's good. But if he enacted that I should be bled, or should have the sore places cut out, or that poison should be infused into my veins, he could never be sure that the public gained any benefit from his cruelties. A far more overwhelming proof is needed by the legislator than so very shifting a thing as *medical advice*. And here it is advice from one country only in all the world, and that where men peculiarly experienced in vaccination condemn it.

One who carries disease with him is ostensibly dangerous. This—and this only—justifies legislation against him. But when a man or child is ostensibly healthy, no case is made out for legislation at all. To enact that a healthy person shall have a disease lest hereafter he get a worse disease, is a form of despotism hard to parallel; and what is peculiarly disgraceful, it is directed against innocent infants alone, because, they are helpless: it does not dare to attack us adults. This fact justly arouses parents to indignation. Let Parliament enact that every M. P. shall be at once vaccinated, and that it shall be done

from arm to arm among them, every four or five years, as the doctors may prefer, if they will enact such things concerning children. The law now says to a parent—"We are alarmed to see that your child has no disease. Cow-pox (for the public good) it must have, with the chance of other hideous diseases: submit, or else make yourself a criminal, have your hair cropped, and dress in prison garb."

Such legislation implies that Parliament is a Medical Pope, and would justify no end of monstrous violations of sacred personal right. The *Lancet* "begs respectfully to tell me" that in the matter of "vaccine lymph," "the State(!) and private practitioners take great care." Is this very comforting—very reassuring—to one who has read Ira Connell's frightful case? I have a paper before me—reprinted from the *Lancet* of Nov. 16, 1861—which contains a detailed account of 46 children in Piedmont being infected with loathsome disease—soon fatal to some of them—from receiving the lymph (called vaccine) out of the arm of one child called (and supposed to be) healthy. As a surgeon cannot be omniscient, he cannot know the diseases hidden in a particular child; he is not to blame for not knowing; but this is precisely the reason why Parliament ought much rather to forbid than to enforce the vaccinating of one child from another. It makes the enforcements so indefensible, that one is unwilling to affix the right epithet.

But even if cows would kindly get cow-pox for our convenience, so that each child might have the disease direct from the cow, even so it would be blind tyranny for the law to say to a parent—"You shall not keep your child in perfect health; that is too dangerous a course." When to this the parent replies by defiance of the law, and is treated as a criminal, the law-makers are (in my opinion) the real criminals before God and man. Parents who become martyrs by resisting the law, deserve a sympathy akin to those who are martyrs of religion.

Truly yours,

F. W. NEWMAN.

---

FROM THE *Anti-Vaccinator*, SEPTEMBER 25, 1869.

### "Blood-Poisoning."

In the *Anti-Vaccinator* for to-day I observe a series of propositions upon the "Hygeian System of Medicine." This leads me to pen a few remarks on blood-poisoning.

“The blood is the life.” Then what feeds it feeds the life. Now, human life is propagated, like animal life, as to successive subjects of it ; and the orderly condition for the propagations of human subjects of life is—marriage of one male and one female. The life of these two, by cohabitation, becomes bodily one. But if the blood of the female be the receptacle of the propagations of several males, the result is the well-known venereal disease.

Now, what is the use of beating about the bush in this matter, when the results of the corrupt human poison thus generated are so patent to all? The truth is, all deadly poison to human blood, and all diseases of the kind called “pox” originate in this wicked violation of the law of creation by debased mankind ; and the corrupt matter engendered in the female system by this death-and-disease-originating sin is the all-potent human blood-poison all the world over. Small-pox, and all other kindred diseases, are the result of the Creator’s laws operating in the human system to rid that system of this circulating death, and the corrupt substance thereof, which is traversing the frame in all its blood vessels.

Talk about the origin of diseases, and say — “All disease is caused by the introduction or retention of foreign and impure substances.” What substance is so impure, so corrupt, as that matter which is the result of the wicked co-mixture of several kinds of human seed in one female system? Death and rottenness only can result. This is proved to all the world. It is no secret. Yet physicians, vaccinators — aye, and anti-vaccinators — are willing to talk and write about anything, rather than about this emperor of diseases, his birth-place, and his parents.

Now, the great mischief of vaccination is, that it introduces the poisonous spawn of this monarch of diseases from one infant system to another ; and it may well be discerned that, just as the natural infirmities of any individual are more easily borne, and less hurtful than blows and wounds and bruises from outside sources — so the corrupt or otherwise impure substances generated and retained in any one’s own blood, are less hurtful to the health of the individual, and more easily rejected than substances introduced from a foreign source. Hence the great evil of vaccination ; and hence the almost uniform result of good health to those who recover from small-pox naturally

gone through ; because the blood is thereby purged of the inherited poison, and has none introduced from any other source.

Only let the above-named fruitful source of small-pox be removed, and the disease will disappear ; but neither vaccination nor anti-vaccination will ever rid the world of it so long as men and women persist in this deadly sin against God, against their own souls and bodies, against humanity — and especially the humanity of yet unborn generations.

T. R.

Newton Heath.

---

FROM the *Anti-Vaccinator*, OCTOBER 2, 1869.

“Compulsory Vaccination and the Contagious Diseases Act the Fruits of Medical Tyranny and Fatuity.”

LETTER FROM PROFESSOR NEWMAN.

*Dr. Nicholson's Pamphlet—Compulsory Vaccination and the Contagious Diseases Act—Insidious Medical Tyranny—The Privy Council a Despotism—Vaccination makes work for the Doctors—They ask for more Hospitals, Medicine, and Money—Brutal Treatment of Women—A Standing Army and Barrack Life Demoralising—Shut the Drink Shops—The Doctors would make things pleasant for Adulterers, instead of removing the Causes of Disease—They take for granted that Men are to be vicious, and Women the Victims—Vaccination opposed to God's law.*

Dear Mr. Pitman,—You request me to write some critique on the vaccination pamphlet of Dr. H. A. Nicholson. That gentleman is son to an intimate friend of mine, and is known to me from early boyhood. I respect my young friend's science and talents, and many amiable qualities too much to covet the task of opposing him personally. He claims that the existing agreement of medical men in approval of vaccination constitutes the collective sense of the medical profession ; that “the collective sense of the medical profession is the collective sense of the nation” (p. 37) ; and that “it strikes at the very roots of government and law” if “an individual, relying upon his own wisdom, refuse obedience to a law which has been passed for the general weal.” He is also pleased to call agitation against

the law "unreasoning agitation." Facts and events will show him that he expects too much submission from us.

I thought I had sufficiently burdened the pages of the *Anti-Vaccinator* already; but a new packet of tracts sent to me from a different quarter, shows me that dangers are more imminent than I had been aware of, and that you are fighting a battle not against vaccination only, but against insidious medical tyranny, which is as conceited and fatuous as it is immoral. I carefully consider every epithet which I here use. I count them five; and I find every one to be just, to be specifically appropriate, and necessary to be uttered. The bill for extending the Contagious Diseases Act passed the Commons, and was barely stopped in the Lords; whilst the newspapers kept such silence that the nation did not know what was going on. Is not this insidious? Certain physicians have the ear of the Privy Council, and indoctrinate it. The Privy Council moves the ministry — if it be not quite the same body; and the whispers of the Ministry carry the doctors' bill through Parliament. The newspapers (I conjecture) think the subject too disgusting to argue, and therefore are silent. Thus we are under an insidious despotism. But I proceed to the facts, of which I had no previous knowledge. There is a well known vice, ruinous alike to body and soul, to industry and to property, to family life and to national welfare. The doctors propose measures which are certain to multiply this vice double or threefold; and then fancy that by their clever treatment they will be able to extirpate the disease which it naturally causes. This I call fatuous and conceited. Of course, they are to have an immense increase in the number of hospitals — at least one in every town — to treat this single class of diseases. (The hospital at Plymouth alone has already cost above £20,000.) When they fail in removing disease, they will with truth say there have not been enough hospitals, enough nurses, enough medical treatment, or enough money. But further — their mode of stopping disease is to seize on women (only women, not men!) *suspected* of having it, and violently submit them to a disgusting surgical operation, in order to ascertain whether or not they have it! The examination is to be once a month: whether on 20,000 or 100,000 women, no one can tell. It ought to be once a day, to be effectual. A woman who refuses submission may be sent to prison

with hard labor for three months, and if she still refuse, the punishment may be repeated; and so on, for her whole life. Of course, it is calculated that so awful a threat will constrain immediate submission. I should be right to call this medical bill tyrannical even if this were all, but those who read the details and the comments by Mr. Thomas Worth (a surgeon of Nottingham) will see that I have not said half that is needed, or half exhibited the detestable cruelty and stupidity of the bill. The whisper of a policeman, or the opinion of a tipsy soldier, or the spite of a brothel-keeper against a woman whom she has failed to seduce, may subject any ill-protected woman to the frightful process of this bill, and may *impart* to her the disease for which they are searching. The immorality pervading the bill is appalling. According to morality and religion, vice is worse than disease, sin than pain; virtue is a higher good than ease and comfort; but according to this bill, the doctors are to be allowed to try their hand at stopping disease by a process which they fancy is to make vice comfortable and safe — a wholesale process itself likely to demoralise a whole neighbourhood, as well as tyrannical on individuals.

Now, I ought, perhaps, to apologise for obtruding this disagreeable topic on your pages; but I wish to point out to your readers that if we do not fight the battle against the Faculty on the vaccination tyranny, we shall certainly have to fight it afterwards. We have the calamity of an over-occupied Parliament, and of a ministry still more over-occupied. Hence they cannot bring fresh minds to a quarter of the topics which beset them. I think it manifest that to the medical profession immense knowledge of detail often overweighs their good sense. They believe too much in art and cleverness. Disease or vice, when on any great scale — when it can be calculated on and predicted — arises from bad or defective national institutions. No one consults physicians how to improve these; yet to *remove the causes* is the only mode of removing evil effects. When a military barrack — that scourge of maid-servants — causes a conflux of dissolute women, and presently saps the health of the soldiers, no physician dares to name the only remedies that can be effectual. To prohibit drink shops within five miles of the barracks would cut off a large part of the evil. The doctors might at least urge this;

but, "collectively," they are for the drink. Further, unless you do away with martial law in time of peace — or limit its operations to the minutes during which a soldier is handling deadly weapons—you cannot prevent a standing army from being a demoralising institution. Barrack life is as unnatural as it is wearisome, and needs to be brought to a *minimum*, and all martinet discipline to be made impossible. Of course, no physician opens his lips on such topics. He takes for granted that men *are to be* vicious, that women *are to be* the victims; and then considers how his beloved art may best counteract God's law — that disease shall follow vice. So, in vaccination, he does not consider how parents may be able to keep themselves and children in perfect health — the natural state. But as in the former case vice, regulated by art, is to evade disease, so here disease regulated by art, is to supercede health. I am not sure that a registered medical man, who persuades a youth to vice by telling him that it is the road to health, ought to be unpunishable by law; but certainly physicians, when their advice that we will accept a disease is rejected, must not be allowed to take us by the throat, and stab us with a poisoned lancet — neither *us* nor *our children*. Dr. H. A. Nicholson should consider that one who says — "You will do better to accept my proofs, for if you do not, we shall operate on you against your will" — virtually bids us to regard his argument as superfluous.

F. W. NEWMAN.

---

FROM THE *Anti-Vaccinator*, OCTOBER 2, 1869.

"What We Owe the 'Faculty.'"

Let us not forget that we are dealing with national questions. It is not with the crochet of this anonymous writer or that — be he faithful or unfaithful — that we have to deal, in the matter of Anti-Compulsory Vaccination: it is with the liberty of Englishmen to obey the laws of God, if they choose, that we are concerned. And no tarring or feathering of any class of men, or faculty or profession, must be allowed to blink out of sight this foremost object to be attained. This premised, let us consider for a moment the question—What do we owe the Faculty of Medicine?

As a nation, we owe them much ; for the great bulk of the people are ready to put faith in doctors, faith in pills, faith in brandy, rum, and gin, faith in tobacco, faith in beef steaks and plum puddings, faith in stock-jobbers, faith in joint-stock company directors ; in short, faith in any imaginable " faculty " on earth, rather than faith in God. For faith in God implies, in reference to the " laws of health," a willingness to trust in the power of God to preserve in health and soundness the living mechanism of the human body, which He only has formed, and which He only can form. And who is so capable of keeping a steam engine in working order as the man who puts it together, and knows exactly the relation of each part to the whole? Let those who have to pay the piper bear testimony to the endless blunders and expense resulting from the common practice of sending one man to put up a steam engine, and then sending other less skilled hands to adjust it, when the racket of wear and tear has thrown it out of gear. But seeing that, as a nation, we have lost faith in the ability of the Divine Mechanist, and do not believe that He is present to drive and tend the machines He makes, therefore we must needs have a Faculty of human machine-menders, who stand to us in the relation of policemen, to clear the way for God to do His work in us : and we, as well as many of them, have so far forgot their true function, as to regard them as veritable physicians of life, rather than the livery servants of the One only true Healer. Still, we owe them much ; for the great bulk of us are so careless to study and obey the laws of health — which are expanding before the mental eyes of every grown man, and give him, by pain and prostration of powers, daily admonition when he transgresses the laws of God in his bodily life ;— I say we are such obstinate, self-willed defiancers of these laws, or such idle and blind loungers and gropers along the road of life, that we fall into all kinds of worse than beastly habits of drunkenness, debauchery, gluttony, and pride ; and when our bodies revolt, and will obey their tyrants no longer, we are all ready enough to call in the " Faculty," in the person of some favorite doctor, whom we believe to be either an experienced bodily policeman or a *bona-fide* doctor of health.

Now, granted that the " Faculty " has very little faculty — what of that? It is because our cases and general states require so little.

Very few, comparatively, are the cases in which the doctor has need to exercise much medical knowledge. All he has got to do, as a general rule, is to keep us from laying violent hands on ourselves for a while. It may be that he is as great a professional blockhead as we are non-professional ones, and then, in his blind self-importance, he will go on drugging at a venture, and benumbing our friendly pains to please our cowardly whims; and thus put us so far out of gear that neither he nor ourselves can tell whether we mend or get worse; and the diseased frame will go on reeling to and fro like a drunken man, till, falling at last into the ditch of suffocation, the life departs. Professional manslaughter is committed in many cases like the one we have described. But when this happens, it frequently only prevents suicide; for we are so determined to disregard the laws of health, or so woefully and willfully ignorant of them, that if the doctor does not kill us, and for a time can keep us from killing ourselves, we go on striking blow after blow till the fatal one falls at last. Think of the wagon-loads of pills which are taken, and any of which might contain deadly poison for ought the consumer knows; and if they do not, it is owing to the "Faculty" and not to the gormaudising consumers. Now, since there must needs be so much manslaughter, while we are such a nation of barbarians — miscalled "civilized" — is it not better that we should have some authorized method of doing it? Maybe, after all, less of it is done than would be if we had not. I remember a very clever old surgeon in Newtonbeath (Dr. William Pegg) — a very eccentric man, but one who worked hard (and his wife, too, as a midwife) during a long life, chiefly among poor people for little pay. He used to come to our house when I was a boy, and my grandfather and he were often chatting together. One time he said — "Robert, the difference between you and me is this: if you kill a man they'll hang you for it; but, you see, I have a license to kill people." Yet this man probably saved the lives of hundreds of people, humanly speaking; and not seldom by preventing less skilled practitioners from killing their patients through ignorance.

Again I say, we owe the "Faculty" much, speaking nationally; and if they have stolen a march upon the nation in getting compulsory vaccination made the law of the land, and sought their own

interest in doing so, this is only what kings, queens, lords, commons, and people have been doing from time immemorial, when they could get the chance. What anti-compulsory vaccinationists have now got to do, therefore, is not to throw stones at the doctors, but to vindicate and agitate for the liberty of every English citizen to obey God rather than man, when it is clear that the liberty to do so is so manifestly wrenched from them. Let those continue vaccination who are still blindly wedded to its charms; but let those have the liberty to discard it who see it to be a daring innovation of the sacred precincts of divine Healership.

T. ROBINSON.

Newton-heath.

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FROM THE *Anti-Vaccinator*, OCTOBER 16, 1869.

**“A Woman's Protest against the Proposed Extension of the Contagious Diseases Act.”**

I have just been reading, with feelings of horror and indignation which I scarcely know how to express, the statements in Mr. F. W. Newman's noble letter, in your issue of October 2, relative to a certain “Contagious Diseases Bill,” and some proposed extension of it, which (it seems) actually passed the House of Lords, and was with difficulty stopped in the Commons. I, for one, tender my thanks to every member who voted against it.

I am well aware that many people will cry shame upon a woman for writing on such a subject: let them. If we, the happy and protected members of our sex, blessed with the shelter of married homes, whose sanctity no medical ruffian dare invade, do not raise a voice in behalf of our less-favored, our wretched trampled-on sisters—the victims of man's vicious self-indulgence and brutality—who can be expected to do so? I use advisedly the term “medical ruffian.” That any treatment could be more ruffianly, or a more complete and dire outrage on all feelings of decency and humanity (if humanity includes women at all), than that to which, it appears, this Bill proposed to subject defenceless women, I deny, and am ready to maintain, let who will strive to extenuate it. No man whose moral sense had not been blunted by the complacent assumption underlying the prevalent relations between man and woman—that men have a

right to sin with impunity, and that their sin must be visited upon their female victims could ever have conceived the idea of legislation so monstrous, or have assisted in framing and passing the Bill in question. Truly it is time we should have women in Parliament, if it contains a majority of men capable of such brutal use of their legislative functions—capable of so far forgetting any spark of respect towards the sex to which their mothers belonged, that they stick at no outrage upon the most miserable and most-to-be-pitied members of that sex, which they blindly hope may enable their own sex to sin with impunity.

I have long held strong opinions as to the bad and immoral tendencies fostered among medical men by the indecent custom which sanctions their presence, even as mere boys, in the sacred precincts of the chamber where a new immortal is ushered into the world. How utterly this, among other evils, must have corrupted their better and manlier feelings, the Bill alluded to (emanating, of course, from the medical profession) sufficiently proves. Not that I would class the whole medical profession as one under this deserved censure. For many of its members I have a profound respect as excellent and philanthropic men; and God forbid that any such should have soiled their souls by participation in such a measure! But, as Mr. Newman truly says, the nation knew nothing of such proposed atrocities. Now I say let us know all about them: let us know what House of Commons passed this Bill, and what members voted for it both in Commons and Lords, and let us cry shame on every one of them! Truly I could not have believed that there were Englishmen fallen so low as this.

With respect to the grievous social evil this Bill seems to have been designed to foster into comfortable security for the chief sinners, at the expense of their miserable victims, what is to be done then? There is nothing to be done; there is no help in heaven or on earth, *unless men will cease to sin*, and learn to live pure lives of wholesome self-restraint and self-denial. Then, and then only, will God cease to punish their sin, because then only could relief from the punishment be anything but cruelty to the sinners. I am, of course, writing on the assumption that Mr. Newman's statements are correct; but from his well known high character and principles I cannot entertain any doubt of their being so.

MARY C. HUME-ROTHERY.

3 Richmond Terrace, Middleton,  
Manchester, October 2.

FROM THE *Anti-Vaccinator*, NOVEMBER 20, 1869.

“Medical Public Advisers.”

LETTER FROM PROFESSOR NEWMAN.

DEAR MR. PITMAN,—Mrs. Hume-Rothery has counted too much on my accuracy. I was but half-informed: and I *underrated* the progress which had been made by certain detestable Acts. At the very end of last session the third Bill was made an Act—multiplying nine-fold the area around each town to which the Act of 1866 limited the powers of the police against women whom they do but suspect to be unchaste, besides adding new towns. By such stealthy strides do our despotic materialists proceed.

Perhaps I must apologize for intruding this loathsome subject again into the *Anti-Vaccinator*; yet, while the daily papers suppress it, it deserves a corner in every periodical. Besides, it has this in common with vaccination—that we must charitably suppose the legislators to be ignorant of the facts, while allowing official doctors to think for them. I frankly confess how recent is my own enlightenment. I was vaccinated from the cow, and had one small mark in my arm which I regarded as a mere nothing. A few months ago I had not the slightest idea that what they now call Vaccination is no such thing, but is taken from the blood of a child, and often covers unhappy children with sores from head to foot. May not a majority of M. P.'s be alike ignorant?

You know that I prefer to treat the question of *Compulsory Vaccination* solely on its legal side—as a question of jurisprudence. I deny that Parliament can be justified (1) in commanding any medical process at all; (2) in legislating at all against the body of one who is confessedly free from contagion. I add (borrowing a phrase from Dr. Pearce) that it is a “crime against nature” to *compel* the infusion of disease into one who is healthy; and that when fatal results follow, it is an infamous and foul murder. But the topics are not exhausted.

First. If Parliament chooses to rest its legislation upon medical advice, it is irrational and reprehensible to shut its eyes either to the enormous differences of opinion among medical men of the same

school, or to the existence of rival—I may say hostile—schools. Packed medical evidence is an utter abomination. No physicians are so trustworthy as those who are accounted Heretics—*i. e.*, those who show us that they *think for themselves*. When Dr. Collins, after near twenty-five years of vaccination, declares against it, his testimony is ostensibly worth a hundred votes given by men of routine in favor of it. There is a close similarity between the training of young divines and of young physicians. The youth learns from books and from his elders. If he breaks loose from both, it is hard to get into practice; established physicians cannot act with him, and he must make his own connection as he best may. Just so, the young divine has no promotion unless he go in routine; else he must gather a congregation for himself. In each case the Heretic suffers a great pecuniary fine; this is, to us outsiders, a valuable guarantee of his earnestness beyond what we have in the case of the others; and if we see him to be a man of well-balanced faculties as well as of erudition, we regard him as on a higher plane of honor from the fact of his martyrdom. But he who gets into routine is in a groove from which it is hard to extricate himself—especially if he be in large practice, or be a high Church dignitary. For elder and successful men it is doubly difficult to see realities with fresh eye, or follow truth when seen. These topics are notorious to all. I infer that Parliament, in *all* sanitary legislation, should adopt only that in which able physicians of *every* school concur. That alone has any ostensible certainty—any probable fixedness; and common sense is sure to back up what physicians even of opposite schools approve.

Further. The public has a right to claim, that if the Privy Council or any central board has medical officers, these shall be taken from different schools. In Allopathy, Homœopathy, Hydropathy, Herbalism, Hygiene, we find educated practitioners bearing the Queen's diploma. Within Allopathy itself there are as many opposed sects as among the Established clergy. An outcry is made in the Colonies against the "establishment" of Episcopalians only; and in England, against appointing bishops all from *one side* of Episcopalianism. Each outcry is justified by our public men. When so large a part of the educated and the aristocracy practically show their vehement distrust of the school which lately bled, blistered and purged, *ad*

*infinitum*, and now so largely relies on brandy and other fierce poisons, it surely is a public hardship, unfairness and mischief, that the officers whose advice is necessarily so weighty, should be taken from one school.

You have plenty of able writers who will deal with that favorite and much abused argument of medical men—statistics. To me it seems clear that physicians, like divines, too often are quite unaware what sort of things cannot possibly be proved—things opposed to first principles. Here, also, they labor in vain. First—by confession of all medical men of every school, many diseases (and those dreadful ones, enter the *blood*. Even tobacco-smoking notoriously poisons the blood. They all tell us the same of scrofula, and “syphilis,” and (I believe) of cancer. This being a fact, to infuse diseased blood into healthy blood is an impiety—a deadly fanaticism; and they know it; yet they cannot know that a particular child’s blood is *not* thus diseased. Hence, what they call Vaccination (but is not) has no standing place at all. Next—All physicians of every school agree that the stronger the vitality within, the greater the power of resisting contagion from without. Hence it is madness to impart disease in order to increase the power of averting disease. This suffices to disprove inoculation from a diseased cow or horse. Thirdly—Jenner, *by his own account*, had no *a priori* scientific ground for believing that cow-pox was a defence against small-pox; he believed it, simply because a country lass so told him. He had absolutely no means whatever of verifying her theory. If I inoculated myself with erysipelas to escape scarlet fever because a rustic girl told me it would be effective, what a consummate fool all doctors and all men of common sense would judge me! Yet, as far as I can see or learn, Mr. Jenner had absolutely no better reason for believing the girl than I might have.—Sincerely yours,

F. W. NEWMAN.

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FROM THE *Anti-Vaccinator*, DECEMBER 25, 1869.

“The Social Evil.”

DEAR MR. PITMAN,—I just write a few lines in confirmation of Mrs. Hume-Rothery’s able and pithy notice of Professor Newman’s

pamphlet upon "The Cure of the Great Social Evil," etc. [*Anti-Vaccinator*, No. 16.] I have just read the copy you kindly sent me, and since then this nobly outspoken feminine estimate and summary of it. This has precluded the remarks I had determined to make to a great extent. They are already made by a more suitable, because female, reviewer. And I need only add that this is a pamphlet which every man and woman in the nation laying any claim to virtue and good citizenship—religion apart—ought to lose no time in getting to see. And, once in hand, they will peruse it, or with but few exceptions, I think. There are times when the most bashful lay aside their blushes, and with true human courage set about the important work of the moment. That time, on this matter, seems more nearly at hand than with reference to "compulsory vaccination."

To the future of Europe it matters comparatively little to what conclusions the Pope's Grand Council come, when put in the balances against the results of that mighty struggle which is here impending. The sin, the vice, the disease comprehended under the designation—"The Great Social Evil"—is the vanguard of the devastating army of the prince of the nether regions; and now the trumpet sounds for battle. Unless the God of Heaven and purity can bring to bear a sufficient army of faithful soldiers (male and female) to repel the desolating hellish force, an awful future awaits the so-called Christian nations of Europe. Depopulation, devastation, utter desolation, stand at the doors. All the warlike weapons of bygone days are powerless here. Learned doctors and lawyers and their subordinates, renowned statesmen and their partisans, Church dignitaries and their long line of inferior clergy, and all the multiplied institutions for increasing this literary army of defence, are but as chaff before the winds in this vital struggle of life or death to the human race in Christendom. It would greatly promote the desirable object of a national perusal of this important pamphlet if an edition were printed to sell at about one-third the price. I should like this to be considered by the author or publisher; no abridgement would do much good.

T. R.

Newton Heath, Dec. 13.

FROM THE *Christian World*, MAY 24, 1888.

**"Disgracing the Empire."**

The acts of the Government of India are not calculated to make one proud of the name of Englishman. The civil government is everywhere forcing upon unwilling localities licensed stills and public houses for the sake of revenue. We found India sober; we are making her drunken. The military authorities are doing even worse. Out of the office of the Quarter-Master General at Simla, by the instructions of General Sir Frederick Roberts, Commander-in-Chief of the British Forces in India, there has been sent to the general officers commanding divisions and districts a "circular memorandum" horrible beyond conception in its cool and callous immorality. This precious document, which is dated 17th June, 1886, deliberately encourages the practice of vice in every military cantonment. It not only "regulates," but it declares the necessity, and enjoins the proper housing, of the unhappy creatures who are to be sacrificed to their own destruction and the destruction of the soldiers. It is vain to say that it is only desired to localize an evil already existing. The memorandum, in conjunction with previous instruction of the same kind, explicitly and strongly recommends the increase of the number of victims and rewards the miserable agents of the traffic. Mr. Alfred S. Dyer has made a sketch of the cantonment at Bareilly, which, as exhibited on a large canvas at Exeter Hall on Friday evening, flanked by other two plans, made the ears of all who beheld it tingle with shame that such things should be. On one side of a public road is the encampment of the East Kent Regiment. On the other side of the road is the encampment—in sixteen Government tents—of the officially-encouraged and officially-rewarded degraded women. And this minor encampment is placed in immediate proximity to the native church! In seventy-four other cantonments in every part of India the same thing is to be seen. Another sketch showed the Lock Hospital at Madras, and the connected house—where licenses for the practice of vice are issued—insultingly set down between the Wesleyan Chapel and a Church of England place of worship, and within a short distance of nine other churches, chapels and schools!

A thousand ladies at St. James's Hall on Friday afternoon, and a crowded audience at Exeter Hall in the evening, demanded the total and immediate repeal of this almost incredible system. It is a pity that Lord Cross and Sir John Gorst were not present on behalf of the India Office. The officials have been forced to admit the authenticity of the disgraceful memorandum; but Sir John Gorst, in the House of Commons, has made replies to pressing questions by Professor Stuart, which, to say the least, were equivocating, and which Professor Stuart and other speakers on Friday denounced as deliberate falsehoods, intended to deceive, not on the part of Sir John, but on the part of those in India and at home who have furnished him with his information. Papers on the subject were promised, and they have been sent to the printers; but Professor Stuart, who has seen these papers, declared that all those of an incriminating nature have been omitted, and are silently passed over in the remarks of the military authorities. No wonder that these impudent attempts to hoodwink Parliament and the people have aroused a sense of burning indignation against all concerned in the shameful business.

Mrs. Josephine Butler, described by Dr. Clifford as the "God-given Deborah of this movement," who has been for twenty years working for the uplifting of the down-trodden of her sex, though suffering severely from bronchitis, spoke with great emotion on the subject. The insult offered to the women of India, she said, was an insult offered to the whole sex; and the iniquity would never be removed unless women kept well to the front. Mrs. Richardson, a Quaker lady of York, and Mrs. M. Baxter spoke in the same sense. Professor Stuart stated that a resolution would be moved in the House of Commons on the 7th of June; and Dr. Clifford said every chapel, church, and school in the country should make its voice on the question heard before that day. No one looking back on the history of the nations of the earth, he asserted, can, if this system be continued, forecast anything less for our Empire in India than first of all shame, next weakness and decay, and thirdly ultimate ruin. He was fully prepared to adopt the phrase, "Perish India!" rather than that these iniquities should be perpetrated in our name.

Rev. Hugh Price Hughes, Mr. J. B. Wookey, the Bishop of Waiapu (New Zealand), Mr. F. W. Crossley (Chairman), and

Rev. Sir Erasmus Phillips also strongly denounced the system. A very plainly worded resolution was adopted and telegraphed to Lord Cross and Sir John Gorst, and it was further resolved that a *verbatim* report of the meeting should be sent to every minister of the Gospel in the United Kingdom, and that Mr. Dyer should be thanked in the name of the meeting for his great services in gathering information in India. Stormy days are in store for the Government. The agitation which has been commenced with such enthusiasm will spread. The country will not permit the name of Englishmen to be degraded as it is being degraded in India by its representatives.

## THE TWO JENNERS: THE MYTHICAL AND THE ACTUAL.

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(Reprinted from "Daylight," Norwich, March 1st, 1890.)

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*Some men have greatness thrust upon them.*—Shakespeare.

MYTHS and legends, which, in the popular mind, are things almost exclusively associated with the heroes and demigods of remote and more romantic ages, still arise and survive in these latter more enlightened days of scientific enquiry and of matter-of-fact materialism. Mankind are, in essence, ever the same. Credulity now, as of old, forms a prominent part of the human mental equipment; the thing remains through the form of its manifestation changes. The illusions and delusions of past generations are learnedly explained away or scoffingly derided, while at the same time the scoffers, in their turn, greedily swallow equally great absurdities. Let but two or three specialist celebrities pronounce any new thing to be "scientific," and lo! the innumerable Johnsonian public will, as it were, at once grovel in the dust before this mushroom dogma of this Priesthood of Science. And what is worse, even when one of these modern crazes is laid bare and exposed as being pernicious to the nation, vested interests, personal and pecuniary interests, with professional pride and similar unworthy motives, may, as in the case of vaccination, long retard deliverance therefrom.

Perhaps no more conspicuous instance could be given in modern times of an undeserved reputation, of a mistaken hero-worship, than is afforded by the case of Jenner, the mis-called discoverer or inventor of vaccination. He has been ignorantly called "the immortal." Monuments have been erected to his memory, and Parliament influenced mainly by his powerful personal friends among fashionable and political society, granted him £30,000 as a reward. For nearly

a century a succession of official pedants of the Simonian type, who on their own showing, under the recent searching cross-examination of a Royal Commission, are absolutely ignorant of the root of the matter, have never tired of sounding the praises of this Prince of Humbugs—this Cagliostro-Dulcamara of the nineteenth century—and in terms as hyperbolic and high-falutin as they are false. Not until well into the present decade and almost within the present year, have the public at large been in a position to learn in full detail all about Jenner, and to distinguish the mythical from the actual Jenner. Thanks, however, to Mr. William White's admirably comprehensive *Story of a Great Delusion*, to Dr. Charles Creighton's work on *Cow-pox and Vaccinal Syphilis*, and his *Jenner and Vaccination*, and to Professor Crookshank's still more recent work on the *History of Vaccination*, the Jennerian legend is now at last in a fair way of becoming generally exploded, and its complete exposure will necessarily imply the downfall of compulsory vaccination.

With regard to the Mythical Jenner, perhaps the man of liveliest imagination, and who has done more than any other living man to popularize the Jenner of his teeming fancy, and to fasten compulsory vaccination on to the nation, has been Sir John Simon, formerly, though happily no longer, chief medical adviser to the Government. Following meekly and blindly the nonsensical rhetorical outbursts of Jenner's friend and critical biographer, Dr. Baron, Simon thus officially writes :

“Among the dairy folks of Gloucestershire was a curious tradition . . . that persons who had suffered from this cow-pox, as it was called, were by it rendered insusceptible of small-pox. Words to that effect were once spoken in the hearing of Edward Jenner, then a village doctor's apprentice in the neighbourhood of Bristol. They were never afterwards absent from his mind. Thirty years elapsed before their fruit was borne to the public ; but incessantly he thought, and watched, and experimented on the subject ; and the work on which he at length recorded the incomparable result of his labour may well have commanded the confidence of reflecting persons.”

By the way, the pith of this “work,” a few pages of letter press, was that horse-grease was the origin of the cow-pox and of the true and genuine life preserving fluid ! Again Simon gushingly writes :

“ Little would ever be heard of objections to vaccination if all who undertake the responsibility of its performance, and all who feel disposed to resist its adoption, would but thoroughly study that masterpiece of medical induction and imitate the patience and caution and modesty with which Jenner laid the foundation of every statement he advanced.”

To properly estimate the Simonian type of intellect it is only needful to state that, despite the then long-existing and overwhelming evidence that many well-vaccinated people had subsequently taken small-pox, and that serious injuries were then as now caused by vaccination, yet this romancing and sand-blind “ scientist ” vehemently denied both points. And indeed it is very doubtful whether he ever made any original inquiries whatever to justify his bold assumptions and stupendous allegations. Creighton, who, like Crookshank, is a veracious historian and an experienced pathologist, has made original investigations into the Jennerian legend, thus sneers at Simon’s laudation of this “ masterpiece ! ” He says that after studying Jenner’s three essays on the subject of vaccination, he seemed to find himself :

“ Dealing with reasonings which were anything but masterly, and with a writer who was never precise when he could be vague, and was never straightforward when he could be secretive.”

And he speaks of Jenner’s artful and “ trumped up ” invention of the term *variola vaccinae* (or small-pox of the cow) as a “ master-stroke of boldness and cunning ” and “ diplomacy,” as it successfully humbugged both the lay and the medical public. And again Creighton writes :—

“ The apogetics of vaccination began in the mind of Jenner before his project was given to the world. The years of patient observing and proving, which have been the subject of so much rhetorical nonsense on the part of so many otherwise sane persons, were really a few years of indolent casting about by Jenner for the means of meeting the obvious objections to the scientific white-washing and professional adoption, which he intended for the vulgar cow-pox legend.”

Still more plainly does the same author speak of Jenner when the latter became fashionable. He writes, *re* one of Jenner’s pamphlets :

“ It would be charitable to assume that vanity had turned his head

and made him untruthful. At all events the piece is a tissue of lies."

And in another place he refers to :

"The many sly and impudent tales that Jenner told to the medical profession."

Crookshank and Creighton agree with their fellow-historian, White, as to Jenner's intellectual dishonesty. The typical incident of Jenner's falsification of Cline's letter, is retold by both. Cline, who was a famous London surgeon, had been supplied by Jenner with lymph, and the former wrote, in reply, saying, *inter alia*, that the *ulcer* produced by it :

"Was not large enough to contain a pea, therefore I have not converted it into an issue as I intended."

The young boy, it seems, for whom the lymph was required, was suffering from hip disease, and Cline desired by Vaccination thus to obtain a pea issue over the hip. Some time after, when Jenner published this letter, he coolly omitted the paragraph beginning "The ulcer was not large enough," and inserted instead the words "There were no eruptions"!! This, it must be confessed was a striking instance of the (Simonian) "patience and caution, and modesty"! Again, with regard to Jenner's earliest vaccinations. He was about forty-one when he made his first vaccination (in 1796). Two years elapsed and a couple of other casual vaccinations followed and he then at once precipitated his "masterpiece of medical induction"—*re* Simon—upon the world. More "caution and modesty," gentle readers! True, he had most successfully vaccinated his first child a few years earlier with swine-pox—not necessarily from a pig—but this does not count.

It is instructive to note how both Crookshank and Creighton (as experts) expose the trickery of Jenner with regard to his second recorded case of vaccination (in 1798), or as it should more properly be termed, indirect equination : or horse-grease vaccination. Their researches point to the highly probable conclusion that this case (John Baker) died, a victim to the operation. Jenner's own scattered references to the case are artful and misleading. This, however, was but in keeping with Jenner's ordinary practice. From his first adoption of the horse-grease theory up to the day of his death, he was

constantly mystifying and minimising, explaining away and generally humbugging. One has to follow his disingenuous and tortuous course as to his many poxes, "spurious" when needful, and "true" when useful, to do justice to this consummate self-deceiver or this most crafty of charlatans. In 1807, pressed by the College of Physicians to explain what he meant by "spurious" cow-pox, he had to own up that all he meant was it did not act as he expected! All the varieties of cow-pox thus simultaneously and instantaneously disappeared, to be cautiously resurrected by him as occasion might require. His vast (Simonian) experience at once also vanished, *pro tem.*, into thin air.

The propagators of the Jennerian legend are dumb as to the actual Jenner's arrogant truculence to all independent critics, and even to candid friends, honourable men such as Drs. Pearson and Woodville, and yet as will be presently shown, Jenner's own scientific attainments and professional standing were very low.

"He was" says Creighton, "vain, petulant, crafty and greedy, and he had more of grandiloquence and bounce than of solid attainments."

He even had the incredible meanness and folly to insinuate that Jesty, his precursor in the practice of Vaccination, was a myth invented by Pearson! While in reply to Dr. Watts of Glasgow, whose thoughtful and scholarly writings on Glasgow mortality are still admired, and still valuable, Jenner violently attacked him as having some malevolent object in view. Those writings were, he said, "shocking," and of "evil tendency!" It is doubtful however if the poor creature had sufficient mental power to grasp Watt's thesis. At any rate he carefully avoided grappling with it. As to his professional knowledge, it is enough to say that in 1792 he applied to the University of St. Andrews for the degree of Doctor of Physic. The inference is that it was granted, as White contemptuously says: "it cost £15 and nothing more." In fact, it was a purely commercial transaction, very much like buying a pound of cheese. Creighton remarks:

"It was only after several applications that the University of Oxford gave him (Jenner) the honorary degree of Doctor of Medicine in 1813," (only ten years before his death) "while the College

of Physicians refused to the last, even when he brought his Oxford diploma with him as a passport, to admit him to its fellowship on the same terms."

In other words this (Simonian) heaven descended and super-subtle genius was unable to undergo the then not very severe examination for that degree, though he would gladly have obtained it on the something for nothing principle. Creighton truly and philosophically remarks, with a suggestive picturesqueness, that the whole course of events had helped to place this Old Man of the Sea upon the backs of the medical profession. Much space will not be required to sum up Jenner's scientific acquirements and to further exemplify the "patience and caution and modesty" of the Simonian and Mythical Jenner. We read of an absurd and wondrous "paper" on the National History of Cuckoo, contributed by him to the Royal Society, and of a few meagre observations on the temperature of hedgehogs, with some fragmentary conclusions about the action of blood and other organic manures upon young plants. This latter in a letter to Sir Joseph Banks, President of the Royal Society. These were his earlier achievements: his later were equally unimportant and incomplete. His old friend and teacher, John Hunter, sounded Sir Joseph Banks on the subject of Jenner's admission as a fellow to the Royal Society and through this friendly influence he was elected.

"It says," says Creighton, caustically, "one of the evils of making a man a Fellow of the Royal Society that people will be apt not to recognize any subsequent nonsense that he may write in the name of science, for what it really is."

We shall presently further illustrate this truly sagacious remark. There is no evidence whatever that "incessantly he thought and watched and experimented" on the subject of vaccination, (*re* Simon). On the contrary we have good reason to infer from Fosbroke, and others, that Jenner only kept the subject causally in his mind. When, thanks far more to Pearson and Woodville's energy and watchfulness than to his own, vaccination was reinstated after its virtual collapse in his own hands, Jenner, as it were, pushed into notoriety. His meanness to all independent thinkers, even to friendly helpers and hearty co-workers, even such men as Pearson and Woodville, with his readiness to appropriate their results, and equal

readiness to reproach them; his scoldings, bullyings, and spiteful jealousies, are they not all (innocently) written at large in Baron's biography.

As to his vast experience! Pearson says that the whole of Jenner's experience then extended to only seven or eight vaccinations, of which only four were from human subject to subject, and that not until Woodville and himself (Pearson) had published several hundreds of vaccinations performed by them had Jenner any experiments to set alongside theirs. White says that they had to find out for themselves how to do everything which differentiates a suggestion from an art. So much for Jenner's "incessant experiments" (*re* Simon). In a letter written by Jenner only a few days before his death (1823), to his friend Gardner we find him bewailing that never had he been involved in so many difficulties! Vaccination was even then being found out. His boasted prophylactic has been successfully attacked from all sides; but true to his career, he just at that time placed on record his unalterable faith in it. Such are the contradictions in human nature!

Our readers can now plainly see that there were two Jenners, the mythical and the actual. Disciples of this arch-impostor, such as Simon, have from a few disjointed facts, and musty vulgar traditions, constructed an ideal Jenner, upon whom they have thrust greatness. These imaginative enthusiasts resemble in their action *minus* the complemental knowledge, those able naturalists or paleontologists, who from a single bone of an extinct and unknown animal will construct a perfect skeleton. The errors and frauds of Jenner would be to the mass of mankind of no importance were it not that they had been endorsed by those who should know better, with the result that the question is brought by means of compulsory vaccination into every home in the land. And how some of these successors of Jenner support his teaching we propose to show in the closing paragraphs of the present article.

We have already quoted Creighton as to the nonsense that a man may safely write after becoming a member of that mutual admiration body, termed the Royal Society; and we will now, as a practical lesson, and as a warning to our numerous readers not to be gulled by high sounding names and titles, proceed to quote a few choice

specimens and recent crucial instances of Royal Society Science and Royal Society Logic.

Referring to a proposal to abolish repeated penalties for non-vaccination (a punishment by the way not provided by Parliament but the result of "judge-made-law"), President Spottiswoode, who would seem to be a lineal descendant of the famous Professor Puddinghead, immortalized by Washington Irving, publicly said that the proposal appeared to "trench closely upon a scientific principle!" Prodigious! When interrogated upon his esoteric and mystical utterance, which in a common person would have termed simple stupidity, this Royal Society's "head" remarked that the "principle" he referred to was vaccination! To parody the divine William, if the Society be brained like this, it totters.

Another specimen of this portentous diletantism, which dwells in a serener atmosphere far above the vulgar herd has within the last week or two been afforded the public by a sample of that sweetness and light which is so exclusively the attribute of these men of light and leading. Professor Tyndall has publicly stigmatized Mr. Gladstone as "the wickedest man of his generation." The matter has no direct connection with the present question (except that Tyndall has written nonsense about vaccination equal to Huxley's), but it serves to show what poor things some of these big pots are when you can really see them. They should remember the adage about the cobbler and his last. By forgetting this, nescience and presumption seem at times their Alpha and Omega.

But yet another Jennerian champion and apologist remains to be noticed; one by the way who is always ready to dogmatically settle any disputed question from the Mosaic Cosmogony to the last delirium of political metaphysics. Professor Huxley (another Royal Society President), who, as he recently stated, has "an ingrained habit of scientific grovelling among facts!" has, needless to say, repeatedly delivered his soul as a true Jennerian, and with a cheap and unbecoming scorn of the common people—the "loblolly boys" of the community to quote his own felicitous expression, who of course are born only to endure and pay and to serve as the raw material for the manipulation of "scientists" and "philosophers." Strange as it may seem, we are not overwhelmed by Huxley's attainments as a

pathologist or as a statistician. As a mere assistant surgeon in the Navy, his professional attainments were probably about the needful average, and his opinions on vital statistics and pathology were probably worth about as much and no more than those of Mr. Surgeon A. B. round the nearest corner. But he has successfully and persistently exerted himself in other fields of inquiry, and like most pushing people, has been accepted pretty much at his own valuation.

It is to his discredit that he actively exerted himself a few years ago to prevent the repeal of the judge-made law enforcing repeated penalties on vaccination recusants. On one occasion, with a logic and pathos worthy of Puddinghead himself, this sapient philosopher wrote: "If my neighbour is to let his children go unvaccinated, he might as well be allowed to leave strychnine lozenges in the way of mine." A remark proving that a lower type of intellect may be found among the Fellows and Presidents of the Royal Society than among Hottentots and Patagonians. Then again, writing two years or so ago, he says, referring to vaccination:

"Two centuries ago England was devastated by the plague; cleanliness and common sense were enough to free us from its ravages. One century since small-pox was about as great a scourge; science though working empirically, and almost in the dark has reduced that evil to relative insignificance."

Considering that in London in the eighteenth century in no year did the small-pox deaths reach a total of four thousand, and that one year in the seventeenth century sixty-eight thousand deaths were caused there by the plague, we can simply term Huxley's statement as blatant and vulgar clap-trap, and quite oblivious of the action of certain foreign governments, such as Spain, Hungary and Germany, which in one degree or other have recently prohibited animal or human inoculations, he chants the praises of Pasteur and looks forward to the time when inoculations will obtain for various other human diseases! This is logically, his catechism.

Q. "Centuries ago the sweating sickness killed thousands. What caused it to disappear?"

A. "Natural causes and not vaccination."

Q. "The black death and the plague killed myriads, What caused their disappearance?"

A. "Natural causes and not vaccination."

Q. "Leprosy, Scurvy and fever were terribly fatal in old days, What caused their disappearance?"

A. "Natural causes and not vaccination."

Q. "When diseases die out or become milder What is the cause?"

A. "Natural causes and not vaccination."

Q. "When small-pox declines What is the cause of that?"

A. "Vaccination, nothing but vaccination!"

A cripple in the right way is safer than a racer in the wrong, and the unsophisticated common-sense and ample experience of the "lob-lolly boys" of the nation are safer guides in this matter than the Royal Society, past and present Presidents included. Those who support charlatans and quacks and in so doing expose their own nes-  
cience, while at the same time they despotically encroach on parental rights, and on the elementary freedom of the subject, must not complain if they meet with rough, downright and plain speaking criticism.

"The exact diligence of theology, pursuing the scientific ramifications of its mysterious doctrine to four times the length of the Athanasian Creed, must command the respect even of unbelievers, the more so as it is a Church maxim that salvation does not lie in dialectics. But what shall we say of pathology, which has not the candour even to recognize the juxtaposition of incompatible notions, which can show no better front to the world than a thin tissue of rhetoric or metaphor made to do duty as scientific authority, which shelters itself whenever it can, behind the establishment by law, of its own doctrine deliberately left undefined and unformulated?"

We commend these weighty words of Creighton's to Royal Societarians and to all and sundry.

# THE ROYAL COMMISSION ON VACCINATION.

THE Government has appointed the following Gentlemen Members of a Royal Commission, to inquire into, and report upon the subject of Vaccination, and the result of its enforcement by Acts of Parliament during the past 36 years :—

LORD HERSCHELL, *Chairman.*

SIR JAMES PAGET, BART., F. R. S.	DR. W. J. COLLINS, M. S., F. R. C. S.
SIR CHARLES DALRYMPLE, BART., M. P.	MR. J. S. DUGDALE, Q. C., M. P.
SIR W. GUYER HUNTER, K. C. M. G., M. P.	PROF. MICHAEL FOSTER, M. D., F. R. S.
SIR EDWIN H. GALSWORTHY.	MR. JONATHAN HUTCHINSON, F. R. C. S.
MR. W. S. SAVORY, PRES., R. C. S., F. R. S.	MR. J. A. PICTON, M. A., M. P.
MR. CHARLES BRADLAUGH, M. P.	MR. S. WHITBREAD, M. P.
DR. J. S. BRISTOE.	MR. F. MEADOWS WHITE, Q. C.

The terms of the reference are officially stated as follows :—

- 1.—The effect of Vaccination in reducing the prevalence of, and mortality from small-pox.
- 2.—What means, other than Vaccination, can be used for diminishing the prevalence of small-pox, and how far such means could be relied on in place of Vaccination.
3. The objections made to Vaccination on the ground of injurious effects alleged to result therefrom, and the nature and extent of any injurious effects which do, in fact, so result.
4. Whether any, and if so, what means should be adopted for preventing or lessening the ill effects, if any, resulting from Vaccination, and whether, and if so, by what means, Vaccination with animal vaccine should be further facilitated as a part of public Vaccination.
- 5.—Whether any alteration should be made in the arrangements and proceedings for securing the performance of Vaccination and in particular in the provisions of the Vaccination Acts with respect to prosecutions for non-compliance with the law.

You will thus see that some of the fundamental points in our agitation for the repeal of the Vaccination Acts are included in the scope of the Inquiry, viz. :—The failure of Vaccination as a protection ; its injurious consequences on the health of those who are submitted to the operation, the substitution of sanitation as a means of preventing small-pox, and the injustice of prosecuting and convicting conscientious parents for non-vaccination. This inquiry was suggested by the Right Hon. JAMES STANSFELD, when President of the Local Government Board, to a deputation of opponents of Compulsory Vaccination in April, 1886, as the most speedy and effective means of promoting a satisfactory settlement of the question, and it is the opinion of the leading friends of our cause in all parts of the country that Parliament would not be induced to repeal the Vaccination Laws without some such inquiry.

It is unnecessary here to refer to the unspeakable injustice, cruelty, and misery caused by the Vaccination Law of 1853, and subsequent Acts of Parliament and their utter failure for any good whatever, and it is because I realize this that I am anxious that the facts showing this mischief and failure shall be clearly demonstrated by competent witnesses in this important inquisition. I venture, therefore, to make the following suggestions as to what is needed at this juncture :—

In all towns and villages where Anti-Vaccination Leagues exist, meetings should be immediately convened, and, where no Leagues exist, special meetings of opponents of the law should be organized to co-operate in ascertaining :—

1.—The full particulars of local fatal Vaccination cases, or cases in which serious injury has resulted from Vaccination, and the names and addresses of witnesses who can give an intelligent and coherent narrative of the circumstances connected with each particular case.

2.—The name and address of the medical man who vaccinated in such cases, and of medical or other witnesses ; a copy of the death certificate, and whether the cause of death assigned in such certificate is correct.

3.—The addresses of medical men who are known to be averse to Compulsory Vaccination, or who have had cases of injury and death from Vaccination within their own experience.

During the past five years, censuses of householders have been instituted in over 70 towns, villages, and districts in England, disclosing a large number of cases of injury and death. The census-papers then sent in should be carefully re-examined, and those parents who have certified to such cases should be invited to attend the meetings before mentioned and furnish their evidence in detail, so as to see which are most suitable to go before the Commission.

In addition to the evidence relating to fatal Vaccination cases, the medical, statistical, historical, and sanitary features of the question will be dealt with by able and experienced witnesses, also proofs of the failure during more than a quarter of a century of compulsion to prevent or mitigate variolous outbreaks.

Children recently vaccinated, or of vaccinable age, should be kept under close observation, in order that should the Vaccination result in injury or disease, the facts may be at once brought forward, before the evidences are lost by lapse of time.

Witnesses should be instructed to confine their evidence to facts within their own personal knowledge, and to avoid extravagant statements; as any deviation from this course would be likely to prejudice the cause they are desirous of serving. Fortunately, those Members of the Commission who are opposed to compulsion will see that our witnesses are allowed fair play, and the ability and impartiality of the Chairman — LORD HERSCHELL, who is called upon to preside over this important inquiry — are well known.

I have to earnestly request early intimation of your intention to cooperate with the Committee, which please direct to our Organizing Secretary, MR. J. H. LYNN, Clova Road, Forest Gate, Essex.

On behalf of the Special (Royal Commission) Committee,

WILLIAM TEBB,  
*Chairman.*

LONDON, July 5th, 1889.

From the "Echo," London, October 15th, 1888.

## LEICESTER SMALL-POX AND VACCINATION.

TO THE EDITOR OF THE "ECHO."

SIR,—If evidence were wanting to illustrate the gigantic experiment being carried out by Leicester in its almost entire rejection of Jenner's prescription for the prevention of small-pox—called vaccination—it is furnished by the elaborate returns presented to the Leicester Board of Guardians at their meeting, September 11th, for the years 1873 to 1887 inclusive. While in 1873 no less than 3,730 successful vaccinations were registered out of 4,446 births, and, after deaths and other allowances, only *fifteen* were left unaccounted for, we find that last year the successful vaccinations had dwindled to 322 out of 4,693 births, and the enormous proportion of 3,732 are left unaccounted for. It thus appears that only one out of every fourteen or fifteen children born in Leicester are submitted to the vaccine rite. We are therefore justified in concluding that the objection to the practice deeply permeates every class of the community. A careful examination of the vital statistics of the borough, contained in the following tables, which refer to the last two decades, will show that we have not far to seek for the causes of this general defection from State regulated vaccination.

The small-pox mortality given in these tables includes the deaths at the small-pox hospital, which, although outside the borough, is always included in our statistics. The charge sometimes made that we exclude it, and thus apparently reduce our mortality, is untrue. The last column, headed "Other Zymotic Deaths," includes the other six principal zymotic diseases, viz., measles, scarlet fever, diphtheria, whooping cough, fever, and diarrhoea :

## FIRST DECADE, 1868-1877.

YEAR.	BIRTHS.	SUCCESS- FULLY VACCI- NATED.	DIED BEFORE VACCINA- TION.	REMAIN- ING UNVACCI- NATED.	SMALL-POX DEATHS.	OTHER ZYMOTIC DEATHS.
1868	3,589	2,477	493	619	1	684
1869	3,760	2,739	537	484	0	459
1870	3,800	2,933	542	325	0	673
1871	3,819	3,101	545	173	12	545
1872	4,156	3,426	550	180	346	463
1873	4,446	3,730	555	161	2	508
1874	4,365	3,590	643	132	0	398
1875	4,256	3,400	662	194	0	694
1876	4,773	3,650	679	444	0	572
1877	4,749	3,509	647	593	6	352
Total	41,713	32,555	5,853	3,305	367	5,348

## SECOND DECADE, 1878-1887.

1878	4,777	3,260	707	810	1	477
1879	4,695	3,086	722	887	0	358
1880	4,860	3,010	816	1,034	0	779
1881	4,712	2,948	687	1,077	2	546
1882	4,855	2,660	720	1,475	5	403
1883	4,819	1,732	612	2,475	3	329
1884	4,849	1,700	818	2,331	0	557
1885	4,690	1,376	421	2,893	0	453
1886	4,874	598	691	3,585	0	293
1887	4,693	322	553	3,818	0	438
Total	47,824	20,692	6,747	20,385	11	4,733

In the first ten years, 1868-1877, we have 32,555 successful vaccinations out of 41,713 births, only 3,305 being left unvaccinated or unaccounted for. The same period gives us 367 small-pox deaths. There was very little falling off in vaccinations during this decade; and it will be observed that the high death-rate from small-pox was almost concurrent with the highest period of vaccination.

\* This column includes those registered as insusceptible, postponed by medical certificate, and removals. After deducting these, there were left unaccounted for only 15 in 1873, but 3,732 in 1887.

The last ten years, 1878-1887, gives only 20,692 successful vaccinations out of 47,824 births, and we have the startling number of 20,385 left unvaccinated, *but only eleven small-pox deaths*. Now, if protection from small-pox increases in geometrical ratio to the amount of vaccination, and *vice versa*, as we are sometimes taught, what does Leicester experience teach? That in the vaccinated decade the small-pox deaths were about 360 per million, but in the partially vaccinated decade there were only about eight per million!!! Had the same small-pox death-rate prevailed throughout the whole period we should have lost during the last ten years no fewer than 460 by small-pox instead of only eleven.

But if the incidence of small-pox mortality is fatal, according to the number left unvaccinated, the deaths from small-pox should have been increased sixfold, and reached the appalling number of about 2,200, instead of only eleven. Opportunities for an epidemic have not been wanting, as nearly thirty known importations of small-pox have occurred during the last ten years. When we consider that an official estimate places the unprotected (that is, not vaccinated within the last ten years) population of Leicester at nearly 125,000 out of upwards of 140,000, we can well understand that the "Leicester experiment" is a hard nut for the advocates of vaccination to crack. Especially is this so when, after all that has been said of the terrors of small-pox to an unvaccinated community, out of a total of 10,459 deaths from the seven principal zymotic diseases during twenty years in Leicester, small-pox is only accountable for the insignificant number of 378.

Perplexed and mortified by the ruthless fashion in which these facts, as "chiels that winna ding," have pulverized the specious fallacies of the faculty as to the boasted protection afforded by vaccination, the *Lancet* and *British Medical Journal*, followed by a host of copyists, have repeatedly asserted that vaccination still preserves Leicester from small-pox. Dr. Drysdale has recently revived this exploded fallacy in a letter to the *Echo*.

How Dr. Drysdale can claim that "in Leicester even it is vaccination which preserves the poor unvaccinated children from the disease," is difficult to account for, excepting on the hypothesis that,

like the Bourbon, his mind has become fossilized. "He learns nothing, and forgets nothing."

When Dr. Drysdale visited our hospital after investigation of the Leicester method of treating small-pox, he declared in my presence that "*if you can deal with small-pox in this way, it is twenty times better than compulsory vaccination.*" If he supposes that eight or ten vaccinated or revaccinated hospital nurses and officials save the 140,000 people in Leicester from the ravages of small-pox, he must admit that double that number ought to have saved Sheffield, especially as it was already well protected without their additional protecting influence being exercised. Let the Doctor tell us why Leicester, which ought to suffer from small-pox, is free from it, while Sheffield, which ought not to suffer from small-pox, is devastated by it. This will be a far more practical exercise for the worthy Doctor's mind than raking up a few mythical relics of antiquity.

J. T. BIGGS,

Member of the Board of Guardians.

LEICESTER, Oct. 9, 1888.

P. S.—The Local Government Board, in a recent memorandum to Boards of Guardians, and representing, we suppose, the consensus of medical opinion, says that the protective power of primary vaccination lasts about ten or twelve years, and that a second vaccination protects for a similar period—possibly longer—but of this no man can be certain. Some think the protection lasts only five years, and even less than that. Taking the Local Government Board standard of ten years, we have only to ascertain the number of vaccinations or revaccinations during the past ten years to know how many, in their estimation, are now protected by vaccination in this borough. By this officially and medically-approved process we arrive at the following result:

The Registrar-General estimated the population of Leicester in the middle of 1887 to be.....	143,153
(Births 1878-1887 inclusive, 47,820),	
Of these successfully vaccinated, about.....	20,800
Estimated deaths after vaccination, about.....	3,000
Leaving children vaccinated within ten years.....	17,800
Add for revaccination the liberal estimate of 100 per annum (probably double the actual number).....	1,000
Total number supposed to be protected.....	18,800
Leaving so-called unprotected.....	124,353

## CITIZENS' RIGHTS TO HEALTH.

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In the last volume of the last edition of the Encyclopædia Britannica is an article on vaccination, by Dr. Creighton, A. M., M. D., whose own views lately changed from *pro* to *con* "as the outcome of an independent and laborious research," and who explodes the notion that vaccination is either a necessity as a State protective measure or useful to the individual—giving a careful digest of statistical data from many countries.

[The *British Weekly* says of his Encyclopædia article: "We hazard little in saying that this is the death knell to compulsory vaccination. Doctors can have their way almost entirely with the people *if they are unanimous*. Whenever the unanimity is broken the authority goes." This important work—the Encyclopædia, now nearly completed, will for a long time be looked upon as authority on hundreds of important questions, and there can be no doubt that Dr. Creighton's conversion, as published in the last volume, will have a great effect in the way of dispelling one great delusion of the nineteenth century.]

The matter of personal rights and liberty last considered, is the most important issue involved in such legislation; and assuming that there is something more than Buncombe in our talk about individual liberty and home rule, the right to life, liberty and pursuit of happiness (involving preservation of health), the purity of our homes, I STAND FOR THE RIGHT OF EVERY CITIZEN, RICH OR POOR, HIGH OR LOW, BLACK OR WHITE, MALE OR FEMALE—THE INDIVIDUAL'S RIGHT ABOVE ALL OTHERS—TO MAINTAIN THE PURITY AND INTEGRITY OF HIS PERSON AS AGAINST ALL THEORY OR PRACTICE OF UNSETTLED AND UNSOUGHT DEFILEMENT—HIS RIGHT TO RESIST EVEN STATE AUTHORIZED INVASION OF THE FOUNTAIN OF LIFE TO THE DEBASEMENT OF THE CURRENT COIN OF ITS REALM, and if there is any substantiality in the right of the citizen to be protected against invasion without a warrant, it is fair to ask the promoters of this bill to show the State's warrant for invasive compulsory vaccination.

It is claimed by the promoters of this bill that Health Boards are already endowed with *arbitrary powers*, and that precedents sanction this compulsory vaccination law. I remind you that arbitrary powers should always be carefully guarded and their domains enlarged only in case of real necessity and where *positive proofs* can be offered that the end justifies the means; but whatever justification may be argued in favor of laws to compel or enforce universally commended measures for protection of life and health, certainly cannot be made to apply to a debatable expedient involving a certainty of some impairment of health for the doubtful boon of an undetermined and undeterminable protection against possible disease. Whatever right the State has to compel the citizen to adopt means for preservation of health, who so bold as to argue that there is any basis for the assumption of the right of the State to compel a citizen to acquire a disease, or inflict on himself a poison (virus) of any kind!

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#### There's Money In It.

One consideration that legislators should not lose sight of in forming opinions about the justice, expediency or propriety of the compulsory vaccination bill is the fact that those who plead for it, and spend time engineering its progress, have something to gain in so doing, whereas those who oppose do so at their own expense and with no motive other than their desire to protect themselves, their friends and the public from unjust invasion. There is money in such measures for the doctors generally who practice vaccination, as it would drive thousands of people into private offices who would fear to trust the virus offered free by Health Boards, and the bill would make room for more doctors as health officials and inspectors, increase works and make a plea for higher salaries. It means the disbursement of hundreds of thousands of the State's dollars under the direction of health board officials, as well as much new business for doctor's private offices. It means fat contracts for favorite vaccine farms.

Evidently there are many persons, professional men and others, who would find it to their interest to spend time in pushing this bill, while the thousands of the general public who would oppose such interfer-

ence with their personal affairs, know nothing of the bill, or, if they know, do not take time and trouble to fight it, and hope to save themselves should it become a law, by buying immunity or practicing deception.

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*"If an offence come out of the truth, better it is that the offence come than the truth be concealed."*

### TELLING UNPOPULAR TRUTH.

Telling unpopular truth to the public is not pleasant, still unpopular truth should be told; for good may follow, though one cannot tell how or when. It may be contradicted, or it may find here and there a disciple; or the author of it may be reviled, persecuted, imprisoned, or held up to the scorn and ridicule of the public. In one or other of these ways attention may be drawn to the subject, and a spirit of inquiry excited which may result in the overthrow of the existing error.

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### FILTH AND DISEASE.

In March, 1885, my attention was called to a report that several cases of small-pox existed in the east end of Montreal. Knowing something of the filthy condition of certain localities, I made a careful sanitary survey of all that part of the city east of St. Lawrence Street, and southwest of McGill and St. Antoine streets. What I saw I will attempt to describe — what I smelt cannot be described! I found *ten thousand seven hundred cess-pits* reeking with rottenness and unmentionable filth — many of these pest-holes had not been emptied for years — the accumulated filth was left to poison the air of the city and make it the seed-bed for the germs of zymotic diseases. Further, I found the courts, alleys and lanes in as bad a condition as they possibly could be — decaying animal and vegetable matter abounded on all sides. Everywhere unsightly and offensive objects met the eye, and abominable smells proved the existence of disease-engendering matter, which supplied the very conditions necessary for the incubation, nourishment and growth of small-pox.

Knowing well the fearful consequences that would result from the presence of such a mass of filth in a densely populated part of the

city, I gave the widest publicity to the subject, hoping thereby to rouse the municipal authorities to a proper appreciation of the danger that menaced the health of the city. But I was called an alarmist; my advice went unheeded, and the filth remained as a nest for the nourishment of small-pox, which grew in strength and virulence rapidly, until it swept into untimely graves, from the very localities I have mentioned, *thirty-four hundred persons!*—victims of municipal neglect. Instead of removing the filth and putting the city in a thoroughly clean defensive condition by the enforcement of wise sanitary regulations and the adoption of a rigid system of isolation of small-pox patients, the authorities were led by the medical profession to set up the *fetish* of vaccination and proclaim its protective virtues, through the columns of an ignorant, tyrannical and time-serving press. Day after day the glaring, snaring head-lines of “Vaccinate, vaccinate,” “Alarm, alarm,” appeared in morning and evening papers. A panic of cowardice and madness followed, and tens of thousands of people were driven (like sheep to the shambles of the butcher) to the vaccinators, who reaped a rich but unrighteous harvest.

The truth of my predictions was amply and sadly verified, by the sickening and mournful fact, that *thirty-four hundred* persons, mostly children under twelve years of age, died from small-pox in the very localities I pointed out as abounding in filth. While in the West End, west of Bleury and north of Dorchester streets, where cleanliness prevailed, there were only a few cases, and these sporadic. I do not hesitate to declare it as my solemn opinion, founded upon experience acquired during the epidemic, that there would have been no small-pox epidemic in Montreal, if the authorities had discarded vaccination, and placed the city in a thoroughly clean and defensive condition, when I called upon them to do their duty.

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#### CRUSADE AGAINST VACCINATION.

During my crusade against vaccination in Montreal, I had to contend against a powerful and solidly united medical profession, supported actively or passively by every clergyman and every newspaper in the country, aided by the auxiliaries of ignorance, bigotry, coward-

ice, prejudice and indifference of the people. The seed I have sown has already taken firm root. Thousands of intelligent people who never questioned the virtue of vaccination before I began my warfare against it, are now opposed to it. Each of these converts will disseminate their views in the circle in which they move, and in a few years an intelligent public opinion will be arrayed against the absurd and filthy rite of vaccination, which will compel the profession to abandon it, as they have already abandoned other fallacies, such as bleeding, mercury and arm to arm inoculation. Medical fallacies die hard, and this fallacy of vaccination being a munificent patron, will be no exception to the rule. When I began my crusade against vaccination I expected obloquy, slander, lies and persecution. I expected the lineal descendants of Ananias, Sapphira and Judas would unite their efforts to crush me,—I have not been disappointed. I have sacrificed money, peace, and many friendships in this cause, and still I think the case worthy the sacrifice.

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#### WHAT I TAUGHT THE PEOPLE.

(1) That epidemic diseases are the creation of municipal and personal neglect of cleanliness. That any medical theory which sets aside the laws of health, and teaches that the spread of natural or artificial disease can be advantageous to the community, is misleading and opposed to science and common sense.

(2) That exemption from small-pox, cholera, and other filth diseases, is not to be found in vaccination, but in the enforcement and extension of wise sanitary regulations, such as better habitations for the people, perfect drainage, pure water in abundance (and free to the poor), wholesome food, and inculcating amongst all classes of the community habits of personal and domestic cleanliness.

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#### VACCINATION AND COMMON-SENSE.

*To the Editor.*

SIR,—It is often contended that the vaccination question is a medical question, and that persons who do not belong to the medical profession ought to defer on this matter to the great majority of those

who do. The monstrous nature of this assumption when used to justify compulsion has often been exposed; but I am not now referring simply to compulsion. I would go further, and would confidently maintain that the vaccine operation, as ordinarily performed and as defined in medical works, is one upon which a person of average common-sense is perfectly competent to form an opinion. I understand one who knows the difference between health and disease, but who does not necessarily understand the diagnosis of small-pox, typhus, typhoid, measles, etc., and who may be quite unable to say whether these names do or do not indicate different forms or developments of the same disease. He will not, therefore, be able to judge whether vaccination be or be not a protection against small-pox. For anything he knows to the contrary, it may be a perfect protection against small-pox, and yet be the greatest curse that ever afflicted humanity. A vaccination that killed straight off would, of course, protect from small-pox. A vaccination that inflicted an incurable disease might well be conceived to do so. Nor, again, will common-sense tell us that vaccination will work perceptible mischief in every case, for without medical knowledge we cannot tell how soon or under what conditions the effect may pass away. But we do know that vaccination, when effectively performed, induces disease, for that is part, and the only intelligible part, of its definition; and we do know that the tendency of disease is to destroy and not to maintain health. I contend, then, that we, who know nothing of medical technicalities, are entitled to presume that vaccination must, so far as it is effective, be mischievous.

To this it may be replied that drugs and particular diseases are beneficial in some cases. Why, then, should we regard the case against vaccination as so conclusive on *à priori* grounds? As regards drugs, their utility is beginning to be disputed; but, independently of this, there is an enormous difference between treating a person already diseased with a view to his cure, and diseasing a healthy person. If a person is in a diseased state, an attack of small-pox, with an eruption, may restore his health. The beneficial effect of non-fatal small-pox is recognised by the Vaccination Acts; how far correctly, I express no opinion. Thus any disease which expels peccant matter from the body by eruption or otherwise may be the means of

restoring health. But how can this apply to the case of a healthy child who has no peccant matter to expel? And it is just healthy children who are considered as proper subjects for vaccination; if a child be diseased, a certificate postponing vaccination would probably be obtained without difficulty.

Again, as we cannot tell how innocuous any particular vaccination may be, neither can we, on the other hand, tell how much mischief it may pass away without doing good or harm, or it may communicate some of the most horrible diseases that flesh is heir to. Neither the vaccinating doctor nor anyone else can assert with any confidence how it will turn out in any given case.

I am, yours faithfully,

H. N. MOZLEY,

*Senior Fellow of King's College, Cambridge, and Barrister of Lincoln's Inn.*

## LONDON SMALL-POX AND OFFICIAL STATISTICAL MALPRACTICE.

*To the Editor.*

SIR:—In giving out the official returns to the public, the whole four millions of our metropolitan population—rich and poor, old and young—are massed together for the purpose of yielding an average death rate; and medical official experts, whose salaries depend on the maintenance of this superstition in the public mind, are constantly on the alert to raise small-pox panics, pressing the authorities to spend money in inducing the ignorant to get “protected” by re-vaccination.

In the Medical Officer's (L. G. B.) Report for 1884 all reference to small-pox mortality in the metropolis is made in the aggregate. No mention is made of the particulars undermentioned. In like manner the Registrar-General's quarterly return ending June 30th, 1885, speaks only of the small-pox death rate as specified for England and Wales, and for the twenty-eight great towns as 170 and 210 per million, respectively. Those, however, who take the pains (alas, how few!) to eliminate the figures from the detailed returns, may find that

in the following areas and districts the proportion of small-pox deaths per million of population (annual rate) during that quarter was :

Nine districts of London (excluding the remaining twenty), some having a few sporadic cases only-----	430
One of which (Hackney) yielded-----	1,544
Another (Greenwich)-----	2,621
West Ham, sub-district, just outside, but a continuation of East London in the neighborhood of the Lea--	10,133
Dartford (ditto), Kent-----	38,122
<i>(i. e.</i> , four times more than the highest district (Grimsby) in the worst epidemic (1871) of the century).	

In the summer of that year such a panic was raised, but without the smallest excuse; for in the nine months ended September, 1884, the deaths from small-pox were seventy-four under the average of the previous ten years (during none of which was any severe epidemic experienced); moreover, forty-four per cent. of this mortality occurred in one only of the twenty-nine large districts into which London, for registration purposes, is divided. Nevertheless, during that summer large sums were expended by local authorities, instigated by the medical department, to induce the populace to hasten to the vaccination stations to save themselves from threatened destruction. The effect of this panic was the same as almost all such panics have produced. In the fourth quarter of 1884 the small-pox deaths in, or from, London were 340 *above* the average for the corresponding quarter during the decade (chiefly in poor hospitals). In the first quarter of 1885 the deaths were 271 above, and in the second quarter the deaths from small-pox exceeded the average by 302, *i. e.*, 573 for the six months, about 900 having died in pauper small-pox hospitals. Thus ignorance and fear are acted upon by superstition for its benefit, whilst thousands are struck down by every form of inoculable disease, and millions suffer a lingering existence, wrecks of humanity.

THOMAS BAKER.

Kingscote, Wokingham.

## “PURE VACCINE LYMPH”—WHAT IS IT?

*To the Editor.*

SIR,—Before any rational decision as to the advantages or disadvantages of vaccination can possibly be arrived at, another question must be answered without dissimulation, evasion or deceit—namely, “What is vaccination?” This question may be answered by the impudent assertion that “everybody knows that,” or, by an endeavor to raise some side issue so as to leave the questioner without any satisfactory reply. We may be referred back to the days of Jenner, and regaled with the interesting story of his conversation with a milkmaid, and his notions about horse-grease, swine-pox, ass-pox, and the like. But the question now is this—If I am desirous of being vaccinated with the best vaccine lymph, what is the nature and source of the animal virus which will probably be provided for me? I may, of course, shut my eyes and open my mouth, as is sometimes said to children when sweetmeats are offered to them; but vaccine “lymph” is not a sweetmeat, neither is it a “natural secretion like milk and butter,” as was once said by a quondam president of the British Medical Association. It is something which, Sir James Paget assures us, is very “beneficial,” although it produces “a permanent morbid condition of the blood.” According to my conception of the proper usage of words, what is called “vaccine lymph” is not lymph at all, but a fluid excreted from a sore produced by an animal virus, whose exact nature is the subject of much controversy amongst leading members of the medical profession, and which must continue to be the subject of controversy so long as it is derived from sources altogether different from one another.

Dr. Jenner stated in his largest work that the infection employed by him came in the first instance from the horse, originating in a complaint called “the grease,” which is attended by an oozing of thin matter from the heels of the animal; and this, according to Mr. Seaton’s evidence before the Parliamentary Committee in 1871, constitutes the principal supply for the United Kingdom. As the results of using this “lymph” have been severely criticised on all sides, and public confidence in its efficacy begins to wane, it has been foreseen by the advocates of the Compulsory Vaccination Acts, that unless

some substitute could be found out in which the public could still believe, the entire repeal of those Acts, with all their emoluments, would follow as a matter of course.

EDWARD HAUGHTON, M. D.

Spring Grove,  
Upper Norwood, Surrey.

THE acceptance as an established fact that apparently pure vaccine lymph from an infant inheriting syphilis, can communicate syphilis through Vaccination, naturally gives rise to some very grave problems.— *Lancet*, January 30th, 1886.

IN addition to the fact that people are ill after Vaccination, it is important to remember that people die after the operation, if not from the disease itself, at least from its *sequelæ*, notably erysipelas.—*British Medical Journal*, 1877.

THE REGISTRAR-GENERAL'S RETURNS SHEW THAT:—

In the first 15 years after the passing of the Compulsory Vaccination Act, 1854-68, there died of small-pox in England and Wales.....	} 54,700
In the second 15 years, 1869-83, under a more stringent law, ensuring the vaccination of 95 per cent. of all children born, the deaths rose to.....	
Total for 30 years.....	121,147

Will you vote for the repeal of a law whose failure is so conclusively demonstrated?

## VACCINE DISASTERS IN ST. PANCRAS.

From the *Weekly Dispatch*.

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The inquest held by Dr. Danford Thomas on the 16th of November, 1888, on the bodies of Adela and Ethel Packer, whose deaths, according to the verdict of the jury, were "accelerated by vaccination," is not calculated to restore public confidence in this form of State medicine. Nor are these the only victims to the rite in St. Pancras as the following will show :

1. The unfortunate infant Ada Lilian Williams was vaccinated in 1883, six days after birth, by Dr. Dunlop, at the St. Pancras workhouse. The verdict at the inquest, "Died of suppurating meningitis supervening on ulceration of the vaccine vesicle," was followed by the three days' trial of the vaccinator, Dr. Dunlop, for manslaughter, and produced a painful and widespread interest throughout the parish.
2. Mabel Emma Allen, vaccinated in 1883 with calf lymph by Dr. Renner, producing "a deep-seated ulcerous inflammation," which caused the thighs and legs to swell to twice their usual size. This case terminated fatally after six weeks' acute suffering. The coroner declined to give the father time to procure either legal or medical assistance, and a verdict, "Died from septicæmia, resulting from an abscess due to natural causes," was returned.
3. A few weeks later, George Andrews was vaccinated in five punctures by Dr. Claremont, which generated a large suppurating sore. Verdict by the jury: "Died from the natural constitutional irritation following vaccination.

4. Then followed the inquest held on the 18th and 26th of May upon Herbert Walsh, born in the St. Pancras Workhouse and vaccinated six days after birth by Dr. Dunlop, resulting, according to the medical evidence, in "chronic blood-poisoning." The mother of the miserable infant was also vaccinated by Dr. Dunlop, without her consent, the day after her confinement.
5. On May 2nd, 1884, Dr. Danford Thomas held an inquest in the same district on the son of Mr. H. Fullerton. Professor Pepper, F. R. C. S., made the post-mortem, and found that the child had been vaccinated in five places, producing ulceration and a series of abscesses. Under the instructions of the coroner a verdict was recorded of "Death following the absorption of pus from vaccine sores, the result of some septic influence, *and not arising from the vaccine lymph!*"
6. In the October following, the child of Mrs. Hagan of Edward Square, Calendonian Road, was vaccinated in five places, which, according to the *North-Western Gazette*, caused untold agony, and ultimate death by invaccinated syphilis.
7. On Nov. 4th, 1884, Richard Wheatley, of Hampden Road, Upper Holloway, died from erysipelas in the arm nine days after vaccination. "The inflammation extended from the ear to the toes." No mention was made in the medical certificate as to the primary and real cause of death.

Similar fatal vaccination cases are known in every part of London, and with a view of eliciting the truth I have again and again urged the press to institute, in the interest of the suffering poor, a house-to-house inquiry in some populous metropolitan district. An able scientific exposition of vaccination and its results in the new volume of the "Encyclopædia Britannica" will enlighten those who desire to know the true facts on this momentous question.

I am, Sir, yours, etc.,

WILLIAM TEBB.

Devonshire Club, St. James's, London, Nov. 20th, 1888.

## VICTIMS OF VACCINATION.

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Mrs. Emma Packer, of 5 Brailsford Road, Brixton, sends to us the following letter describing a mother's experience of vaccination: "Since the inquest held by the coroner, Dr. Danford Thomas, on November 16th, on my two children, I have been asked for a few particulars of my terrible experience. Adela, aged two and a-half years, and Ethel, aged fifteen months, were each vaccinated in three or four places on the 9th inst. by the doctor at St. Pancras Workhouse, where, owing to painful circumstances, I was obliged to take them. They were lovely children, and in perfect health, but in a few days their arms became inflamed, the punctures in Ethel's arm running into one large ulcer, and presenting a truly shocking appearance. Their eyes became very sore; their faces, particularly the youngest, were much disfigured with an eruption, and, after sufferings too painful to describe, they both died. My earnest request that I might take my darling little Ethel with me, or that I might be allowed to stay and nurse my dying child, was unfeelingly refused. The children were vaccinated without my consent, and I am told that this is the law, and that there is no redress. If so, is it not time the law was altered?"—*Pall Mall Gazette*, November 24th, 1888.

[From the BOSTON GLOBE.]

# POISON'S WORK.

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Death Caused by Vaccine Virus.

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HORRIBLE SUFFERINGS OF DR. WARREN STOKES,

OF THE

COLLEGE OF PHYSICIANS AND SURGEONS.

HIS FATE FORESEEN IN VISIONS BY FRIENDS.

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A WEIRD AND THRILLING TALE OF OCCULTISM.

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STOKES.—In this city, June 18, Warren S. Stokes, M. D. Funeral from the Harvard Street Baptist Church, Friday, June 22, at 2.30 o'clock. Relatives and friends invited to attend without further notice.

This was one of a score of death notices that appeared in yesterday morning's papers. It looks commonplace enough and yet there lies behind it a chain of circumstances into which were woven by unseen powers elements so marvellous, so cruel and unpitying, so pathetic, that their narration in the simplest possible form will seem like the creation of a hallucinated brain. And yet confirmation of the facts related in this article will be a comparatively easy matter for those who desire further proofs. Here was a man of brilliant promise, of robust health, whose life seemed to be just beginning, but whose death was vividly seen in visions by his friends three weeks before it occurred, only they did not foresee all its attendant horrors.

Dr. Warren S. Stokes was born in Vermont about thirty-two years ago. He graduated from the College of Physicians and Surgeons, 34 Essex Street, in 1882. Since then he has been connected with the faculty of the institution and during the past year has been lecturer on medical chemistry and instructor in pathology. His gen-

erous soul, his affable ways and his intellectual endowments endeared him to hundreds of friends in the city. Running over as his heart was with enthusiasm for his profession, he was deeply interested in all its phases, and devoted much time to the investigation of physical and psychical science.

One afternoon in the latter part of May he called on a lady friend who lives on Beacon street, and who has known him for years. As Dr. Stokes entered her parlor door and advanced to greet her she saw with perfect distinctness directly in front of him an apparently luminous and semi-transparent form. It was his "double," his Doppelgaenger, as the Germans call it, or his "spiritual body," as Buddhists would say. It was his exact counterpart, except that it appeared

CLOTHED IN WHITE,

whereas the doctor was dressed in black. When he had gone, the lady said to her husband: "Dr. Stokes had on his burial clothes, I know it, I am sure of it." The awful words proved true.

Two or three days after this premonitory incident there was a meeting of a secret brotherhood to which Dr. Stokes belonged, and which has for its object the study of occultism. He was present, with five or six others, including the lady above-mentioned and two well-known Boston physicians. It is not amiss to state that one of the aims of this brotherhood is the development of clairvoyant powers in its members by means of thought focalization. They concentrate their minds and eyes upon some object—a glass crystal, or prism, or sphere—raised on a pedestal in the centre of the room, and see what will there be revealed. The ghastly revelations on that night boded no earthly welfare to one of the loved members of that brotherhood, and showed how fixed and sure is every man's destiny. When the moment of focalization was past Dr. Stokes was the first to speak.

"Why, I saw nothing," he said; "the crystal seemed to dissolve into mist."

"I saw a man on a bed of sickness," said another; "he leaped from his couch, and I saw his bushy, brown hair."

"I saw a coffin," said the third who spoke.

"And I saw the letter S," said the fourth.

"That must be our friend, Dr. —," said Dr. Stokes, mentioning an aged physician whose name begins with S. "I heard that he is in feeble health."

But the other members of the company knew that Dr. Stokes himself was

#### THE FATED ONE.

There was an astrologer present, and he was asked to look at the doctor's horoscope. On referring to his books and getting the year, month, day, and hour of the doctor's birth, he said to him:

"The month of June will be a dangerous one for you; beware of infectious diseases."

Dr. Stokes scouted the idea, and turning to a physician who was present he said, laughing:

"Well, now, doctor, that's too stupid if it means me. Just feel of my muscles. I am perfectly healthy and was never sick a day in my life. If you were the one meant I should perhaps be inclined to think it reasonable."

Dr. Stokes may have been skeptical and possibly regarded the warnings with indifference, but their subterraneous workings in his mind were soon made apparent by an act, and here begins the melancholy, piteous portion of his life's last chapter. Perhaps that very night, darkly projected upon the secret mirror of his dreams, he saw in clear outlines the shadow of the dread sufferings of the coming days and determined to avert them.

He was engaged a great deal at the North End, being at the dispensary on Charter Street every day. Thrown almost continually into contact with infectious diseases, and not having been vaccinated since his early childhood, he determined to make himself doubly sure against danger. He talked it over with Dr. Wallace, and the latter, on Saturday, June 2, vaccinated him, using the virus in the dispensary. Dr. Wallace not only scraped off the skin on the left arm, as is customary in vaccination, but he also took his lancet and made two deep gashes crossing each other. "I'll give you enough," he said to Dr. Stokes, as he inserted double the usual quantity of virus.

Dr. Stokes lived at 44 Edgewood Street, Highlands, in the house of Dr. L. M. Tilton, a female physician and a fellow graduate of his at the College of Physicians and Surgeons. He had formerly been

associated with her on Dartmouth Street. On the Monday following his vaccination Dr. Stokes suffered terribly from nausea and other

#### SYMPTOMS OF POISONING.

Though feeling very ill he managed to keep on his feet and attend to his duties until Friday. On Wednesday he called on his Beacon Street friends. The lady was engaged at the time and could not see him. There must have come over the doctor then a sudden premonition of his approaching end, for he said to the lady's husband: "Bid your wife a farewell from me. She is a true and noble woman."

On Friday Dr. Stokes was so ill that he was forced to take his bed. Dr. Tilton, his hostess and friend, summoned Dr. Wallace and Dr. A. F. Pattee. They attended the case until last Saturday, when Dr. Stokes was removed to the City Hospital. The treatment of the sick man by his three friends, Drs. Tilton, Wallace and Pattee, is questioned by Dr. Stokes's other friends, including his brother, a prominent physician of St. Johnsbury, Vt., and his sister, Mrs. Davis, of Linden. It is said that the deceased had numerous friends in the city, all of whom had heard of his illness, and many of whom called at the house in Edgewood Street to see him were given to understand first that Dr. Stokes was suffering only from typhoid fever, then from slow fever, and finally malarial fever, with symptoms of erysipelas. Certain it is, however, that a week ago last Monday Dr. Stokes became raving insane. He had lucid intervals up to Thursday, and was able to recognize his friends at times. He exhibited all the symptoms of hydrophobia, frothing at the mouth, snapping his teeth, and biting his hands and arms. His family think the virus with which he had been vaccinated was obtained from an animal suffering from developed or

#### INCIPIENT HYDROPHOBIA.

It was not until Dr. Stokes had gone mad that his sister was notified of his illness. Her anguish was not mitigated by the assurances of the attending physicians that her brother's sufferings were not due to the effects of vaccination. There is no doubt that they fully believed that the virus was not the cause of the symptoms, and possibly they had their own theory of the case and were bound to prove it cor-

rect. However this may be, it is asserted they prescribed no antidotes for poison.

Dr. Stokes was sent to the City Hospital in an ambulance, with no attendant or nurse.

The ambulance bearing the lone sufferer arrived at the City Hospital about 10.30 last Saturday morning. From that hour until three o'clock in the afternoon, through some oversight or misunderstanding, the doctor lay

#### ALONE ON A STRETCHER

in the receiving ward, with no one to care for him. They did not even know who he was or where he came from. His brother had arrived in the meantime from St. Johnsbury, and it took three hours before the red tape was unwound sufficiently to permit him even to see the sufferer. The brothers met at last, but there was no recognition.

Let the veil be drawn over the painful scenes of the next two days. Dr. Stokes's agonies were ended by death at 4.30 on Monday afternoon.

A post-mortem examination revealed the fact that there was no typhoid, malaria or erysipelas in his system. Everything was perfectly normal. He had died of blood poisoning.

The sequel of this whole distressing affair will probably be a civil suit for damages against Dr. Stokes's attending physicians. Two members of the secret fraternity have arrived from the headquarters in New York to investigate the causes of their brother's death. They are satisfied that the medical attendance during his illness was not the proper one. What steps will be taken by Dr. Stokes's brother and sister will be definitely decided after the funeral.

A member of the Massachusetts Legislature said yesterday that the compulsory vaccination law was doomed, and that efforts for its repeal would be made in the next General Court.

The services this afternoon in the Harvard Street Church will impress on many minds the truth of the Psalmist's words: "In the midst of life we are in death."

## A "MONSTROUS" LAW.

*To the Editor.*

SIR,—The recent house-to-house censuses, taken already in between seventy and eighty towns and villages, show that multitudes do not believe in vaccination. Nay, more, they abhor it. It does not prevent small-pox. The vaccinated have small-pox like the unvaccinated, and die of small-pox. The majority of patients in every hospital are vaccinated. In towns where the inhabitants refuse to be vaccinated there is often less small-pox than in towns where all are vaccinated. The only sure preventive of small-pox is cleanliness without and within.

Vaccination is not harmless. It corrupts the blood, and brings on fever. Many die under vaccination. If they are weak, it makes them weaker. If they are ailing, it makes them worse. No one can tell what may happen when a child is thus poisoned, for no one can tell from whence the poison came, nor how it may develop, nor what extra disease it may carry with it. Many children in perfect health are never well after vaccination. Their constitutions are wrecked. Thus Sir Joseph Pease said in Parliament, "The President of the Local Government Board cannot deny that children die under the operation of the Vaccination Act in a wholesale way."

Among the numerous diseases communicated by vaccination is that disease which all regard as most loathsome and shameful. Since vaccination was made compulsory, the deaths from that disease among English children have increased fourfold. It is an awful fact. The deaths, moreover, represent only part of the mischief. Many who survive are enfeebled or maimed for life, and transmit the affliction to their own offspring. In this manner the vigour of our nation is sapped with deadly effect.

Hence, wise parents, knowing these things, and loving their children, refuse to have them vaccinated; and, because they refuse, are prosecuted and fined, and if they cannot pay the fines, are thrown into prison. Thousands are thus maltreated for faithful devotion to their children's welfare. Nor is this all. The prosecutions are frequently repeated, until the parents are ruined or driven out of the country. In view of such martyrdoms, Mr. Bright has said: "The law which

inflicts penalty after penalty on a parent who is unwilling to have his child vaccinated is monstrous, and ought be repealed.

WILLIAM WHITE,

(Author of "The Story of a Great Delusion.")

The Laurels, Cheshunt, Herts.

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## VACCINATION.

*To the Editor.*

SIR: The vaccination question being *tabooed* for the Medical journals it must be cheering to the heads of many families to find the public press is changing front in that respect. I presume the reason is not far to seek; to all save the indifferent, and those officially interested the formidable opposition to exceptional legislation in this direction sufficiently accounts for it. The glaring intolerance of compulsion is too much for the spirit of the age to last. Every class of the community makes itself heard. Even the medical vaccinator speaks out in terms of caution if not condemnation! This is gratifying to remark. The conservatism of the faculty has always been proverbial. Medicine if not doggedly opposed to change in what concerns it, prefers that it should at least originate with itself, and more from *esprit de corps* than from conviction. If direct expressions of sympathy with the heterodox cry is rare with the practitioner, there are few who do not number among their professional brethren one or more who hold that some concession is required in deference to objectors worthy of respect. Doctrinal beliefs in Pasteurian and Jennerian prophylaxis is sincere in many scientific quarters. We know and it is much to be regretted, that these two questions, viz., the protective efficacy of vaccination and its compulsory enforcement, should so generally be accepted as one and indivisible. To the honor of the profession be it said, there are exceptions, and these are much more numerous than is commonly imagined. And why should it be otherwise? Publicly, the conflict of opinion is simply for or against the protective *rite*; in the profession controversy hedges every aspect of the question, and naturally there are conscientious

thinkers and workers who hesitate to aid and abet a practice to objection on scientific as well as non-scientific grounds. To independent thinkers who are not enslaved by doctrine and routine, it should now be evident that the question and all its length and breadth will have shortly to be frankly faced by societies and schools, and the sooner the better. Vested interests, prejudice, and ignorance will, as usual, be difficult to deal with, but in a matter involving so much individual wrong and injustice without compensating general benefit, this should be no bar to thorough consideration of the unjustifiable institutions. Faculties and Parliament are not infallible, and delusions both in law and physic will have their day, which is sometimes well to hasten to a close—compulsory vaccination I conceive to be one of them. The medical student and practitioner who have given serious attention to the subject, and who, like myself, feel satisfied of the absurdity of the practise and injustice of the law relating to it, must see that the increasing agitation for at least amendment in both is sure to ultimately triumph, and, what is more, foresee that when it does the would-be scientific figment left will neither profitably nor reputably be worth retaining.

A. M. BROWN, M. D.

59 Keppel street,  
Russel-square, London.

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“NEW DEVELOPMENTS IN VACCINATION.”

SIR,—Having been a witness before the Royal Commission on the subject of vaccination, I may claim to know a little in a special manner on this vexed question. And it is in that capacity that I wish to offer a few words in criticism of the article by Sir Henry Roscoe, in your last issue.

It is now often stated that the practice of inoculation, which was the predecessor and the precedent for our vaccination, was not the fatal thing that experience has proved it to be everywhere it has been used. The article that I am criticising takes the same tone. It says inoculation never became general, either in this country or elsewhere, and for a very good reason. The very opposite is true—that inoculation of small-pox was general here, and in the East away back to a

great antiquity, and is now the *one special difficulty* that the Indian Government has, in the spread of the rival and more recent practice of vaccination.

This same practice is the difficulty in the way of the attempts of the French Government to spread the practice of vaccination in the colony of Tonquin, and also in the colony of Algeria. In the latter colony it is inoculation of small-pox that is the present popular practice, and vaccination is the unpopular one. To so great an extent was this fatal practice carried, that Moore, the friend of Jenner, and the historian of the small-pox, went so far as to say that it had caused the sacrifice of "millions of lives." And while no doubt this is an exaggeration, it must not be forgotten that it was an expression that was not used by a layman, but by this student of the ravages of the disease. Had this fatal and superstitious practice been out of the way we should not have the later one to combat. It was the adoption of it that caused a good deal of the excessive mortality by small-pox last century. If your contributor had read the work of Professor Crookshank on this subject he would have been more careful and accurate in his statements.

What, for instance, can he mean by this—"While the death-rate from small-pox was formerly 100, it does not now reach 4 or 5?" I must confess that unless there is a misprint, this is a most amazing statement that I find it impossible to understand. Formerly 100 what? Not surely 100 deaths in a hundred cases? No one could possibly say so. What is it? And yet of this so extraordinary a statement the writer says, "about this there can be no manner of doubt." Perhaps "The Gondoliers" is responsible for the quotation, and it slipped in thoughtlessly. The fact is, and I have verified it by the most careful collation of the facts, that the fatality from the small-pox is not much different in our day to what it was in the pre-Jennerian days, until—and this is the point—the hospital accommodation had almost outgrown the needs of our huge metropolis. While the accommodation was short of the needs, the fatality of the disease was from 18 to 23 per cent. of the cases. And that it was of old. Some of the old hospitals quoted by the Baron van Swieten, long before Jenner, gave as small a fatality as any of our own day.

The next thing that I have to complain of is almost incredible in its carelessness. The writer says, "Nor is it my purpose to inquire whether immunity is or is not granted for life by infant vaccination. . . . Up to recent times the immunity—the truth of which even the most advanced anti-vaccinationist must admit, if capable of giving an opinion at all on the subject—has been a unique as well as unexplained fact in medical science." This is simply a tradition and not a fact at all. Let me show what I mean. We are, let us remember, to see that vaccination confers an immunity from small-pox. This is the record of fact, made by medical men themselves:—In the old Small-pox Hospital of London, there were admitted from 1836 to 1851 over 5,600 patients, and of these more than 3,000 were vaccinated. In the same hospital in the following years up to 1867 there were admitted 7,900 patients, and of these 7,300 were vaccinated. In the orphan homes at Bristol in the 1871 epidemic 293 orphans had the small-pox, and *all* of them were vaccinated. In the London hospitals of the Asylums Board, they have had more than 53,000 patients, and of this immense number no fewer than 41,000 have been medically recorded as vaccinated. And so I could go on, not for our towns in England alone, but for Continental and American towns, until I had a great total of 130,000 cases, and had produced a total of medically recorded vaccinated patients to the extent of 81,000! And then the world is to be told that I and my friends do not dispute the *immunity* given by vaccination! I never remember to have had to answer so reckless a statement. I do not quite follow the reason for introducing the Pasteurian inoculations into this discussion, and so pass them by.

I am the more inclined to do so as in the *résumé* of them the author does verily seem to have allowed "the scientific imagination full scope for running riot;" for let me ever so humbly suggest that the Pasteurian inoculations are not vaccinations at all as we understand our enforced practice. We have not in them "a few drops of lymph," but a cultivated disease that has been stated in full detail to have given no immunity from death in 161 cases. If, again, the writer had only taken the trouble to study Professor Crookshank, he would have seen reason for doubting that the position of the two practices was at all alike.

But that is aside from my mark. I am concerned simply to protest in the most earnest manner against being misrepresented. What we affirm, and what we prove by the most irrefutable statistics, is this :

The great bulk of modern small-pox is in vaccinated persons. And they bear every sort and degree of vaccination. Good marks offer no protection from an attack or death, nor from the most loathsome forms of the disease. Our youth are confessed to be heavy sufferers from small-pox. And the young up to ten years enjoy no immunity in consequence of their vaccination. As in Leicester, so in other places, the saving that we enjoy from deaths by small-pox, as compared with a bygone time, is due, not to vaccination, but to sanitation and the better carrying out of the duties that an enlightened time has placed upon our health authorities. Our towns are cleaner, are less offensive, and more airy than of old. We have a water supply and a scavenging system that have cost many a million of public money. The return for this is found in the lessened incidence of fevers, small-pox included. In Leicester it is impossible to avoid this contention, and the resort is to prophecy a future epidemic. But the epidemic is long a-coming, and the vaccinations are almost abandoned in that town. This triumph of sanitation in Leicester is a fact full of importance. It must be met and not avoided. The secret of Nature is that well-being and health are to be had by an expenditure of toil and labor, and perseverance in them. There is no royal road to well-being through superstition and inoculation. It lies through the homely toil inseparable from cleanliness, be it municipal or domestic, and can only be maintained by following the old advice to keep place and person clean and pure. This is the real "new development" that all professors should encourage as the true road to local and national well-being.

I am, yours truly,

ALEX. WHEELER.

Darlington, Sept. 1, 1890.

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#### MORTALITY FROM VACCINATION.

To the Editor.— Sir,— At the present time there is an enormous defection from the almost universal and jubilant feeling of confidence

in Vaccination as a preventive of small-pox, which at one period of its history existed in the world. Thousands of cases have occurred, not only in the British Isles, but throughout Europe and America, of *mortality from Vaccination*. It should never be forgotten by the public that "the profession," in order to shield vaccination from reproach, usually attributes such *legalized* mortality to secondary or tertiary causes which have been discussed in some of the first medical societies at home and abroad; results, notably syphilitic, scrofulous, or tubercular infection, which can no longer be scientifically or philosophically ignored by *pro-vaccinationists*, since they are facts which have as much conclusive and invincible evidence in them, as any facts that can be found in the whole range of practical medicine: Lever, of London, Whitehead, of Manchester, Ackerley, of Liverpool, Martin, of Bristol, and others have confirmed them.

Again, small-pox has proved fatal in many persons, within my own observation and experience, on whose arm had been produced numerous vesicles, quite perfect, by means of *re-vaccination*, even on those who bore good cicatrices (four or six) from the first vaccination. In my opinion, the vaccine virus is rather identical than similar in nature, as to its relation to small-pox. Jenner believed and taught that small-pox, cow-pox, and horse-pox were one and the same disease, originating indeed from the same poison, and that a person who had been vaccinated, or gone through cow-pox, had *actually* gone through small-pox itself, and was, therefore, protected for life against possible recurrence of the latter. An inference, alas! which for fifty years I have seen woefully contradicted in hospital and private practice. And it is, moreover, an indubitable truth that many persons who were never vaccinated by humanised lymph, or a pustular eruption from the teats of cow, identical with the disease called "Grease" in the heels, &c., of horses, have been made the subjects of the crucial experiments of inoculation with small-pox matter, and have entirely resisted the virus! And what is, perhaps, a more striking test of the superfluity of *Compulsory Vaccination*, it has been grossly overrated as the only prophylactic, whilst ever doing incalculable harm.

This is the case in 1886, and really has been so, on the Continent especially, since 1836, when Theile, of Kasan, succeeded in obtain-

ing Vaccinia in the cow as a sequence to variolous inoculation. Unbelievers who care for the philosophical idea of cause and effect, may fairly suggest, I think, that the supposed successes of vaccination, in the prevention of small-pox are, after all, neither more nor less than mere coincidences. So wanting in *reasonable*, not to say complete success, is the existing compulsory poisoning of the people, that the enforced operation "by authority" is now looked upon by hundreds of *pro*-vaccinationists, with secret or open aversion and disgust; in short, there is not only a powerful reactionary feeling of abhorrence amongst vast numbers of the medical profession, but yet stronger and more avowed indignation is to be seen amongst thousands of educated and intelligent persons — clerical, legal and scientific — to whom must be justly awarded the palm for pure, calm reasoning, and philosophical analysis of the whole national grievance. They know that small-pox will never be stamped out so long as vaccination stamps it in. Were I to narrate *all* I have witnessed, pertaining to mortality from vaccination, and the injurious effects which its compulsory enforcement has exerted on the public by conveying into the system of the previously healthy, the "seeds" or germinal matter of dangerous implacable diseases, each column of this journal might be amply filled.

As Surgeon for many years to a large Workhouse Hospital, Public Vaccinator, and Medical Officer of a Poor Law Union district, I have vaccinated many thousands, and should probably have continued the operation to this day, had I not awakened enough to see the truth, a glimpse of which Dr. George Gregory showed me in 1841 at the London Small-pox Hospital. Unvaccinated children, for example, have sucked the maternal nipple, around which the skin was thickly studded with confluent small-pox pustules, and *have escaped quite unharmed!* Meanwhile, in hundreds of instances — cases vaccinated by others and myself — I have seen universal confluent eruption with very intense fever, the mucous membranes of the fauces and larynx being dangerously affected, every symptom, indeed, worse far than in the unvaccinated from the first, and the eye-lids so perfectly closed as never again to open in *this* world. What will later and better instructed ages think of us? Yours with respect,

WILLIAM HITCHMAN, M. D., &c.

62 Pembroke Place, Liverpool.

## WHOLESALE POISONING BY VACCINATION IN GERMANY.

To the Editor.—Sir,—The columns of the press have lately borne witness to the high encomiums of several correspondents upon the system, pursued in Germany since 1874, for eradicating small-pox by means of revaccinations; though the law referred to, it should be known, did little more than reduce to uniformity the stringent practice then in vogue in the various states of the German Empire, and institute a better mode of registration. In order to determine the merits of a particular system, it is important to see that no concomitant element is overlooked, including what are euphemistically termed “accidents.” A recent experience which has created a profound and painful interest throughout Germany would show that these unqualified commendations have, to say the least, been premature. I have just received from Dr. Koehler, one of the medical advisers to the Imperial Government at Berlin, some details from his own official inquiries, concerning an occurrence due to vaccination, which can only appropriately be designed as a disaster. On the 17th June, on the peninsular Wittow, Isle of Rügen, seventy-nine children were vaccinated with humanized *thymos* lymph, obtained from the Royal Vaccine Institution, Stettin, and with three exceptions all were attacked in the second week after the operation with a pustular eruption. The vaccinated children communicated the infection (*Impetigo Contagiosa*) to their parents, brothers and sisters, and the number of sufferers rose to 320 out of a population of 5,000. The disease, writes Dr. Koehler, was conveyed by the vaccination, but according to a most searching official investigation the vaccinifers were found to be free from eruption. Dr. Koehler says no adults died, and he omits to state the number of fatalities amongst children. Stringent regulations have been enforced by order of the Government Commissioners, for keeping the infected children from school, superintending their medical treatment and supplying deficiency in food, at the expense of the State.

Dr. Schwabe, of Leipsic, referring to the terrible mischief created by this serious occurrence, says: “At last, after ten years of the Imperial Law of 1874, central institutes for the regeneration of cow-lymph by means of calves have been organized by Govern-

ment, because the mischief done by humanized lymph can no longer be denied. And now comes the published account of wide-spread disease and infection caused by vaccinating with this regenerated lymph obtained from a Royal Central Institution!"

This disaster is even more extensive than the syphilization by re-vaccination of the fifty-eight unfortunate young recruits at Algiers in December, 1880; the facts of which, after being officially denied in Parliament, were confirmed to me personally last year at Algiers, by order of the General in command, and have already appeared in the *Times* and other journals.

Yours faithfully,

WILLIAM TEBB.

7 Albert Road, Regent's Park, London.

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#### BAD SANITATION A CAUSE OF SMALL-POX.

To the Editor.—Sir,—In the discussion on Vaccination, the reproach has often been directed against its opponents that they have no remedy to suggest, and that, on this account, the specific of Jenner, although far from being an absolute security, is, at least, better than doing nothing. This reproach is the result of unwillingness to listen to the arguments with which the Anti-vaccinators support their position. The facts are, that for more than twenty years a large proportion of the most powerful writers against the followers of Jenner have distinctly propounded the doctrine that small-pox is essentially a filth disease, engendered and propagated by the foul habits and the indescribable pollutions of lazy and intemperate populations; and that to such causes the development and dissemination of the various zymotics are wholly due. The upholders of these views are aware that such diseases can be inoculated and vaccinated into other people, but they maintain that the artificial infliction is an unnecessary evil to the human race, which can have no other result than the multiplication of patients in hospital or elsewhere.

The charge against Anti-vaccinators, therefore, that they have no proposal whereby small-pox may be mitigated or its epidemic form prevented, is wholly without foundation. Their leaders have, during the whole course of the agitation against the existing coercive laws,

persistently and unceasingly recommended the safeguard of public and private sanitation; and they have done so with such decisive and telling effect that the prominent medical and official doctrine previous to 1874, which proclaimed small-pox to be a disease over which sanitation had no power, is now almost wholly abandoned, and the medical profession themselves are now substituting the mitigated formula that vaccination and sanitation should go "hand in hand."

Witness the untiring efforts of Mr. H. D. Dudgeon, whose writings have done so much to substitute intellectual inquiry for blind submission, and to induce systematised sanitary amelioration in the town of Leicester. And those who wish to enter further into this all important subject should study the writings of Mr. John Pickering, of Leeds, Mr. Henry Pitman, of Manchester, Mr. W. Hume-Rothery, of Cheltenham, and Mr. William White, Dr. W. J. Collins, Dr. Nichols, of London, and Prof. Adolph Vogt, of Berne, in which this power of sanitation as the only scientific antidote, a power so long and so blindly disregarded by the vaccine propaganda, has continuously and consistently been advocated, until at length it is reaching the dimensions of a national belief. Dr. Oidtman, of the invading army of 1870-71, shows how the Germans suppressed small-pox in the uncleanly casements of the beleaguered French garrison towns by sanitary regulations; and facts from every part of the civilized world have been brought forward at the various International and general meetings of the Anti-vaccination Leaguers, showing that even in infected cities the rule is constant, that in the parts where the houses are well-constructed on elevated ground, and streets wide, and the surroundings healthy, the small-pox stands aloof.

The latest of the greatest small-pox epidemics—that of Montreal—in which the proportionate numbers of vaccinated and unvaccinated sufferers have not at present reached the public eye, tells the same tale of municipal neglect, and teaches the same lesson of the supreme value of municipal cleanliness. The late Dr. W. B. Carpenter, of London, the well-known vaccine advocate, who made personal researches in Montreal after a previous small-pox epidemic in 1874-75, declared in his controversial pamphlet addressed to the House of Commons in defence of compulsion, that vaccination was so well carried out in the above-named city in the year 1883, that "Small-

pox had become almost entirely extinct." Then came the great epidemic of 1885, of which the *New York Church Press* says: "Small-pox is a filth disease, and Montreal has for years been one of its abiding-places." This conclusion is confirmed by a medical resident of the Canadian city, Dr. Alexander Ross, who says: "Ninety-five per cent. of our small-pox deaths have occurred in the filthy lanes and alleys of the East End of the city."

Can any facts be more convincing?

Yours faithfully,

WILLIAM TEBB.

Devonshire Club, St. James's, London.

# A PERSONAL STATEMENT

OF THE

## RESULTS OF VACCINATION.

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IN compliance with repeated requests to furnish a brief statement for publication of my experiences of the results of Vaccination, as acquired during a period of over twenty years' investigation in various countries,

I offer the following :

It has been my experience to travel in all parts of the United Kingdom, from Land's End to the Shetland Islands, and in almost every State in Europe, from the Mediterranean to the North Cape, in countries intervening between the Tagus in the West, and the Volga, Danube, and Bosphorus, in the East, also in Morocco, Algeria, Upper and Lower Egypt, Asia Minor, Upper and Lower Canada Nova Scotia, and most of the States and Territories of North America ; also in Venezuela and British Guiana, South America, in the Virgin, Windward and Leeward Islands, the French and Danish West Indies, in the Archipelagoes of Greece and Hawaii, the Island of Ceylon, in Tasmania, New Zealand, and the colonies of Australasia.

In all of these countries I have made it my business to inquire into the methods and results of Vaccination, procuring information from public officials and from intelligent private individuals, and I have hardly ever enquired without hearing of injuries, fatalities, and sometimes wholesale disasters, to people in every position in life, and these have occurred from the use of every variety of vaccine virus in use. My informants have included Governors, Chief Magistrates, Consuls, Professors of Medicine and Surgery in Continental universities, members of legislative assemblies, superintendents of leper

asylums, editors of medical and hygienic journals, chiefs of military and general hospitals, presidents and medical officers of State and Colonial health departments, superintendents of small-pox hospitals, clergymen of all denominations, missionaries, heads of educational establishments, and the best informed amongst old residents in the places visited.

In one country it was my privilege to be furnished with a general letter of introduction from a Minister of State (since Prime Minister), which gave me access to all the official and medical authorities. Often the fatality described to me has befallen the infant of a poor mother, who with dread forebodings in her mind has tried to shield her offspring from the vaccinator's lancet as long as she could, and, like a fugitive slave, only surrendered to the minister of the law when overtaken in pursuit or her place of refuge discovered; or, like that of a distinguished Moslem (Suffy Bey Adam), my travelling companion in 1884 from Damascus to Beyrout, who had lost a daughter, a nephew, and a niece (vaccinated together about a year before our interview), all of whom died of the operation, after the most acute suffering. At other times I have seen stalwart soldiers and post-office officials seriously injured, and in more than one instance crippled and ruined for life, by compulsory re-vaccination. I have personally investigated vaccine disasters at two military hospitals, one in Europe and the other in Africa, where in one case three and in another case thirty soldiers ultimately died of the operation, and more than twice this number were seriously and in most cases permanently injured. In Australasia I have personally inquired into a case of wholesale disaster—of acute septicæmia, exhibited by terrible ulcerations following vaccination with calf lymph—to several hundred persons, and have seen the sad consequences in permanently ruined health. I have received several thousand written statements from parents, who allege that their children have been seriously or fatally injured by vaccination. I have proved beyond doubt, by personal inquiries in various countries where leprosy is increasing, that the increase is largely due to vaccination, and have furnished the testimonies of numerous medical authorities and of official reports, (all mention of which have been omitted from our leading medical journals), in support of these incriminating allegations. These facts have been detailed by me in the

*Times, Nonconformist, Echo, Leeds Mercury, Manchester Guardian, and Examiner and Times, Leicester Post, Newcastle Leader, Glasgow Leader, Cardiff Daily News, Gloucester Citizen, Journal d'Hygiene (Paris),* and other influential and well-known English, American, and Colonial journals, and some of them were quoted by me with chapter and verse before the Royal Commission on Vaccination now taking evidence in London, and will be found in the third official report of the proceedings.

I may also mention that numerous facts of a sinister character were contributed by many of the delegates representing the leading European States at the International Anti-Vaccination Congresses held in Paris, Cologne, Berne, and Charleroi, the reports of which have been published and presented to the chiefs of Governments and of Public Health Departments in all countries. It seems to me, therefore, that, in view of these experiences and in presence of such unimpeachable facts, the opposition which has arisen, and is growing daily in nearly all countries, is a commendable and patriotic struggle, which should be encouraged in every possible way. The laws (often cruelly enforced) which compel the parents of this and other countries to put the health and lives of their offspring into the hands of irresponsible State officials, with the alternative of severe and not seldom ignominious punishments, is a grave national blunder, and constitutes a species of tyranny wholly indefensible; and it behooves every good citizen to endeavor by every constitutional means, in the interests alike of justice, of individual and parental rights, and in defence of the public health, and of our helpless children, to get these laws completely and permanently extinguished.

WILLIAM TEBB.

Burstow, near Horley, Surrey,  
June 1st, 1891.

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### THE DOWNFALL OF A GREAT DELUSION.

*To the Editor of the Torquay Times.*

Sir: The letter, "Right or Might" published in your last issue affords another instance of the existence and growth of a strong anti-vaccination feeling in this town. Conscientious objectors to vaccina-

tion would, however, do well to bear in mind that the ultimate victory of good is assured. There can, therefore, be no question as to the final issue of a conflict against an unjust law or an evil principle. The struggle may be protracted, dangerous and costly. Or as in my case, it may, although faced with the possibility of the utter ruin of local professional prospects, result in gratuitous advertisement and considerable pecuniary gain. A man who places the safety of his child before the security of his own person or pocket has Omnipotence behind his back. And he must therefore be victorious, for we have not yet been advised of the defeat of that force which is pledged to "save the children of the needy," and to "break in pieces the oppressor."

In my last letter to these columns, I was able to give a list of fifty-three Boards of Guardians who have decided upon non-prosecution. I now hasten to note further indications of progress. The *Weston-Super-Mare Gazette* of August 30th, reports that eight cases of non-compliance with the abominable requirements of the Vaccination Acts, were reported to the Axbridge Board of Guardians, by the Vaccination Officer for the Western-super-Mare district. The Chairman laboring under the delusion that the Guardians were bound to prosecute, proposed that the usual steps be taken, but an amendment to allow the matter to remain in abeyance pending the report of the Royal Commission, was carried by a large majority, one guardian wisely remarking that although the parent of a child was fined £1 for non-vaccination, the child after all went unvaccinated. So Weston is now free, Eastbourne has been for some time, and Torquay must shortly follow.

The *Manchester Guardian* of August 22nd states that in Keighley district last year there were 587 births, and only 11 vaccinations; in the Bingley district 304 births, and only 8 vaccinations; and in the Harworth district 98 births and 22 vaccinations. The North is evidently moving on.

Nor is the South lagging behind in the great struggle for liberty. The *Leicester Post*, of August 28th, informs me that a gentleman, with whom I have the honor to be slightly acquainted, John Farley Rutter, Esq., solicitor, appeared at the Shaftesbury (Dorset) police-court, in answer to two offences against the Vaccination Acts, a num-

ber of other persons being summoned at the same time. A fine of 5s. was inflicted, the Chairman expressing hatred of such prosecutions, but holding that he was bound to convict. Like poor deluded Mr. Bridges, of the Torquay Bench, he had evidently never read, marked, learned and inwardly digested the 31st section of the Vaccination Act of 1867, which expressly states that the judge "*may, if he see fit, make an order,*" etc., thus rendering the carrying out of the law entirely optional, and by no means compulsory.

But not only in the police-courts, but in the press as well, is the battle being fought. There is now passing through the latter a remarkable work from the pen of Mr. J. Pickering, F. R. G. S., F. R. S. S., F. S. A., etc., in which *inter alia* he undertakes to prove that sanitation is the only preventive of epidemic or endemic influences, and that as sanitation becomes more general in its application, disease forms of the zymotic type will disappear; that the faculty has no treatment suitable for small-pox or other eruptive fevers; that infection is the result of unskilful treatment; that "pittings" and other after consequences are due to unskilful treatment or defective sanitation; that vaccination has no place in science, does not protect from, or modify small-pox; that it is a communicator and disseminator of disease; and that it cost the United Kingdom from *fifty to one hundred thousand lives per annum*.

With these latter statements agrees the testimony of Dr. John Epps, twenty-five years director of the Royal Jennerian Institute. After vaccinating about 120,000 people, he finally declared in 1861, that vaccine virus was a poison, that it was neither an antidote to nor a corrigent of small-pox, and that, seeing that it paralysed the expansive powers of a good constitution, no one should have a right to compulsorily transplant such a mischievous poison into the life of a child. Surely this is vaccination wounded in the house of its friends, especially when we consider that it would be an easy task to flood these columns with medical testimony similar to that above stated. Instead of vaccination destroying one child out of 100,000, as your ill-informed correspondent of a few weeks ago rashly asserted, the Parliamentary returns for 1868 to 1886 show that while during that period out of every million children under one year old 68,923 died of ordinary diseases, 78,587 died of diseases proved to be the direct

product of vaccination, the increase of these diseases being in direct proportion to the increase of compulsory vaccination.

And when over against the quondam popularity of, and the now exploded belief in the so-called invention of that arch imposter, Jenner, we place the facts we have previously stated, together with others of the same kind, as well as the direct medical and statistical testimony as to the failure of vaccination to prevent or mitigate small-pox, the heart-rending record of death, disease, and injury caused by vaccination, and the extortion and persecution inflicted upon its opponents by the brutality and ignorance of the supposed representatives of law and order, we can only thank God that the day of liberty has at last arrived, and although it has not yet attained its meridian splendour, we confidently expect, and earnestly contend for perfect and complete liberty of conscience, knowing that "when that which is perfect is come, then that which is in part shall be done away." The dawn of liberty is the death-warrant of vaccination, and every prosecution is another nail driven into the coffin of the Vaccination Acts.

Yours truly,

ORLANDO A. MANSFIELD.

Mus. Doc., T. C. T., F. C. O., L. Mus., T. C. L., L. Mus.,  
L. C. M.

3. S. Mark's Place, Torquay, Sept. 2nd, 1890.

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### COMPULSORY VACCINATION IN THE UNITED STATES—THE VACCINATION OF EMIGRANTS.

SIR: A form of enforced vaccination practiced in the United States, but not tolerated in any European State, is that of the compulsory re-vaccination of all emigrants who are unable to produce to the inspecting surgeon certificates of recent vaccination.

The steamship the *Augusta Victoria*, of the Hamburg-American Line, had over eleven hundred passengers, of whom 670 were emigrants, occupying the steerage, including a considerable number of Jews driven out of Russia by the cruel May Laws of 1882. The saloon and second-class passengers were in no way interfered with,

but the unfortunate third-class passengers were subjected to inquisition and examination.

A considerable number remonstrated and refused on one pretext or another to allow themselves to be operated on, but would, as the doctor informed me, have to submit hereafter, and no fewer than 430 were obliged, under pressure, the day after leaving Hamburg, to submit to the disgusting rite, with the alternative of a month or six weeks' quarantine at Blackwell's Island or of being lodged in gaol and vaccinated by force. This is the right of asylum in a free country for refugees from oppression with a vengeance which would have shocked the signatories of the Declaration of Independence, and caused them to blush with shame. The surgeon, with a look of satisfaction, told me he had vaccinated the entire contingent of 430 (young, middle-aged, and old, strong and weak, sickly and healthy), in about five hours; the same dose of animal virus being administered to each of his unhappy patients.

Some of them afterwards complained bitterly of the injuries they received, but remonstrances were in vain.

The doctor admitted occasional disasters, but he knew nothing of them after eight days. After the operation each victim received a green-coloured pass card, containing the word "vaccinated," signed by the surgeon, although only twenty per cent. of the vaccinations were successful.

This occurred before I got on board at Southampton, and without at that time knowing the indignity that had been practiced I thought I had never seen a more wretched, downcast, undone body of emigrants in my life. It was some days before they recovered their wonted looks.

A fellow-passenger, an ex-judge of the Supreme Court of New York, from whom I sought information, allowed that the invidious selection of third-class passengers was a most undemocratic course of procedure. It was regarded as a police regulation, but in any case he held that neither the Supreme Court of the State of New York nor of the United States could take cognizance of an appeal, if made, as to its unconstitutional character. I informed him that the Honourable James E. Sewell, of Massachusetts, had some time ago expressed his opinion that the whole of the vaccination enactments

were unconstitutional, but were tolerated because no case had ever been submitted to the Supreme Court at Washington.

It is much to be regretted that this has not been done. The instances of injury caused by these careless, perfunctory, and indiscriminate vaccinations will never be ascertained, as neither the official vaccinators nor the boards of health keep any record of them. I am convinced that they are numerous and distressing. The victims, however, are only poor emigrants without the means, influence, or time to institute legal proceedings against the steamship companies for compensation, consequently little is heard about them. Dr. T. Devight Stow, formerly member of the Massachusetts Legislature, has sent me a photograph of one of the sufferers, Edward Jones, from Brierley Hill, Staffordshire, a strong, compactly built man in perfect health previous to vaccination. The operation was performed on board a Cunard steamer against his will, and produced terrible erysipelatous inflammation of the entire arm, high fever, vomiting and malaise. The vaccine ulcers were three-fourths of an inch in diameter, and the photograph now before me shows one arm to be entirely and the other partially covered with a pustular vaccinal eruption. Dr. Stow says he has not witnessed a more complete and disgusting case of invaccinated blood poisoning for many years. Three other cases of injury are reported by the same medical authority arising from vaccination at the same time. The *Boston Herald* a short time ago reported that the Cunard Steamship Company had been obliged to compensate Michael Tarpey, a steerage passenger, for injury caused by enforced vaccination on board the steamship *Catalonia*. At the close of the third International Anti-Vaccination Congress at Berne, Switzerland, in 1883, the delegates waited upon the American *charge d'affaires* with a memorial reciting numerous cases of injury to European emigrants through the imposition of re-vaccination previous to landing in America, which he promised to lay before his government. Nothing, has, however, yet been done, and Dr. Winterburn, an authority on the subject, says that they must now wait the issue of the report of the Royal Vaccination Commission for any hope of emancipation.

WILLIAM TEBB.

Murray Hill Hotel, New York,

Aug. 18, 1890.

COMPULSORY VACCINATION IN THE UNITED STATES. THE RIVAL SYSTEMS.

*To the Editor.*

SIR: The vaccine specialists in the United States appear to be more and more perplexed as to the relative safety and efficiency of the varieties of cow-pox recommended by rival purveyors and proprietors of "Vaccine Farms;" and boards of health are often at their wit's end in the administration of a troublesome and embarrassing business. Some years ago Dr. H. A. Martin, of Boston, issued a pamphlet on the "unfortunate results of vaccination," detailing the serious consequences attending the use of humanized virus, and succeeded to a considerable extent in discrediting for a time the use of arm-to-arm vaccine, and substituting in public favor cow-pox of his own manufacture. Dr. Martin's son has now one of the most extensive factories for cow-pox in the country. The public, however, are far from satisfied. A Cincinnati pro-vaccinal medical journal before me says that the jumping of physicians from one kind of virus to another and back again during small-pox outbreaks has been attended with indifferent success from either kind, and "has not left the professional mind in the most satisfied condition." If the medical profession are dissatisfied the reflecting portion of the public are by no means free from anxiety. The reports which I hear in all quarters of serious and fatal results from the use of bovine virus are quite as frequent as formerly obtained from human vaccine, but as neither the National Board of Health at Washington nor the State Boards of Health keep record of these disasters, it is impossible to learn their extent, and public inquests are rarely held upon them. The *New York Star*, March 24, 1890, reports the death of a child due to vaccination with animal lymph which, according to the evidence of one of the medical witnesses, was obtained from "the best cattle available." "There is no doubt," said Dr. Foote, of New York, referring to this case, "but that the little Nolan girl would be living to-day if she had not been forced into vaccination. It killed the child, and the vaccinators suppress the real cause of the death." The death in this instance was attributed by a medical witness "to the violence of vaccine fever." This method of preserving vaccina-

tion from contempt by attributing its fatal results to secondary causes is not unknown in England, and ought to be laid before the Royal Commission. American practitioners and others have furnished me with particulars of numerous instances of the sad results of vaccination in this country, some of which are recorded in medical journals; but to particularize them would occupy too much of your valuable space. Dr. Thos. Wood, secretary to the North Carolina Board of Health, says, after much experience, "the degree of sickness following the use of bovine virus is greater than when humanized lymph is used, and is more frequently attended with eruptions." The second annual report of the State Board of Health for Indiana contains the detailed testimony of ten local physicians as to the sinister consequences of bovine virus in the production of "eruptions over the entire body," "erythema quite common," "ulcerous-looking sores, lasting sometimes for six months," "bad arms," "phlegmonous abscesses and sloughing ulcers," "violent and troublesome ulceration," "severe dermatitis," and other troublesome symptoms. Dr. T. M. Rogers, of Fairfield, Illinois, reported that in his vicinity, in many instances, whole schools had been broken up for from one to four weeks, owing to the severity of the virus, the vaccinated arms presenting "dark red and sometimes almost black ulcers from one to one and a half inches deep, and from two to three inches in diameter," and so on. So widely is it believed by the more intelligent observers of the United States that the tendency of vaccination is not to improve or protect the public health, but to impair and destroy it, that the edicts of the Boards of Health in many districts are as much a dead letter as the Vaccination Acts in Keighley and Leicester.

WILLIAM TEBB.

Chautauqua, N. Y., United States,  
Sept. 18, 1890.

# VACCINATION.

## The Turn of the Scientific Tide.

The Article "VACCINATION," which occupies fourteen columns in Part 93 of the *Encyclopædia Britannica* recently published, marks a new era in the history of this stupendous delusion, and in the opinion of competent judges is a prelude to its speedy collapse.

The verities for which anti-vaccinists, upheld by the justice and rectitude of their cause, have contended for the greater part of a century, are virtually conceded in the article in question, which, as befits a work of reference, supplies readers with facts from the most unquestioned sources, which speak for themselves. Among other points, the very full evidence indicates :—

- 1.—That there is nothing in common between *Variola* or Small-pox, and *Vaccinia* or Cow-Pox, although it was from a supposed equivalence of the one to the other, that Jenner's teaching found favor at the outset.
- 2.—That Cow-pox is an infection attended by various risks to infants of a serious kind, including Erysipelas, and what has hitherto been called Vaccinal Syphilis.
- 3.—That Vaccinal Syphilis is an inherent risk, and not due to any syphilitic matter mixed with the lymph, although it is so far akin to Venereal Syphilis as to have been mistaken for the latter.
- 4.—That Vaccination neither protects from Small-pox, nor mitigates the severity of the disease in those attacked by it.

The appearance of this implied condemnation of Vaccination by a physician and pathologist of the first rank, simultaneously with the publication of a New Edition of—

"VACCINATION PROVED USELESS AND DANGEROUS," by the eminent Scientist and Naturalist, Alfred Russel Wallace, LL. D.,

who arrives at identical conclusions from a statistical standpoint, amply justifies the latter's view of Compulsory Vaccination, and his appeal to the sense of justice and humanity in our legislators thus tersely expressed :—

“ If these facts are true, or anything near the truth, the enforcement of Vaccination by fine and imprisonment of unwilling parents, is a cruel and criminal despotism, which it behoves all true friends of humanity to denounce and oppose at every opportunity.

“ Such legislation, involving, as it does, our health, our liberty, and our very lives, is too serious a matter to be allowed to depend on the misstatements of interested officials, or the dogmas of a professional clique.

“ The statistical evidence on which alone a true judgment can be founded, is as open to you as to any doctor in the land. We, therefore, demand that you, our representatives, shall fulfill your solemn duty to us in this matter, by devoting to it some personal investigation and painstaking research ; and if you find that the main facts as here stated are substantially correct, we call upon you to undo without delay, the evil you have done.

“ WE, THEREFORE, SOLEMNLY URGE UPON YOU THE IMMEDIATE REPEAL OF THE INIQUITOUS PENAL LAWS BY WHICH YOU HAVE FORCED UPON US A DANGEROUS AND USELESS OPERATION—AN OPERATION WHICH HAS ADMITTEDLY CAUSED MANY DEATHS, WHICH IS PROBABLY THE CAUSE OF GREATER MORTALITY THAN SMALL-POX ITSELF, BUT WHICH CANNOT BE PROVED TO HAVE EVER SAVED A SINGLE HUMAN LIFE.”

See this question more fully illustrated in the *Contemporary Review*, January, and in the *Westminster Review*, January and February, 1889.

WILLIAM YOUNG.

77 Atlantic Road, Brixton,  
February, 1889.

## DR. CREIGHTON AND THE JENNERITES.

(Reprinted from the *Newcastle Daily Leader*, March 21st, 1889.)

The combat deepens. It was only in January that we had to draw attention to the article on Vaccination in the final volume of the *Encyclopædia Britannica*, written by Charles Creighton, M. D. Again we referred to the powerful indictment of the compulsory vaccination laws by Allanson Picton, M. P., in the *Contemporary Review* for January, and the more radical attack on the entire practice by William Tebb in the *Westminster Review* for January and February.

No pretence of a reply has to our knowledge yet appeared; the supporters of the present law and practice are obviously stunned by the overwhelming character of the attack. Before, however, they can have recovered themselves they are met by another and more tremendous blow. The same Dr. Creighton, whose learning and qualifications no one can question who is acquainted with his work, published last week *Jenner and Vaccination, a strange chapter of Medical History* (Swan, Sonnenschein, 6s). Technical language, the author says in his preface, has been avoided as far as possible, and has, indeed, been little needed in dealing with a subject which is a commonplace of every household. There is a vivacity and a caustic humor throughout the fourteen chapters of this history which the subject would not lead one to expect, and, having in view the anger and resentment which will undoubtedly be aroused in the breasts of not a few of his professional brethren, we see in Dr. Creighton a man who loves truth above all things, and who well shows in this remarkable work what has been aptly applied to Rabelais, "a spirit of jollity, pickled in scorn of fortune." No one who will go through this deeply interesting book, *Jenner and Vaccination*, can doubt that Dr. Creighton has studied the question deeply and widely, historically, statistically, and pathologically, and however profound may be the disgust in orthodox medical bosoms, his final conclusions may be seen plainly enough when he says in his concluding chapter—"The anti-vaccinists are those who have found some motive for scrutinizing 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 scrutinized the evidence to some pur-

pose ; they have mastered nearly the whole case ; they have knocked the bottom out of a grotesque superstition."

This is a tremendous thunderbolt, and coming as it does after a lengthy and elaborate historical survey, it seems to carry the last citadel by assault. The present attitude of the public may be said to illustrate the truth of a maxim of Carlyle's: That no error is fully confuted till we have seen not only that it is an error, but *how* it became one. It is in Dr. Creighton's method of explaining *this how*, not only in regard to England, but the introduction and officialisation of vaccination in Germany, Italy, France, and elsewhere, that the originality and charm of the work lie. His foot notes are full of references to medical and State authorities, both British and foreign ; but even here his humour is seen, as, for example, to show how strong is the popular feeling against vaccination in Lusatia he quotes from the Vienna *Fremdenblatt* the following anecdote: A schoolmaster having asked, "Why was Moses hidden by his mother?" a small pupil replied, "Because his mother did not want him to be vaccinated."

In his handling of the character of Jenner himself, Dr. Creighton is free and sarcastic ; his early connection with the celebrated John Hunter ; his absurd essay on the natural history of the cuckoo, which was the means by which he got himself elected a Fellow of the Royal Society ; his repeated attempts to acquire the honorary degree of doctor of medicine from the University of Oxford ; the refusal to the last of the College of Physicians to admit him to its Fellowship ; his bungling over his patients, his cow-poxing and his horse-grease ; all this and much more is described in a manner that is caustic in the last degree, and with a literary freshness that is quite delightful.

Quoting from a letter from Marshall, one of the disciples of Jenner, whilst in Italy, describing with fervor the processions of men, women, and children to the hospital to be inoculated, headed by a priest carrying a cross, Dr. Creighton pungently adds :—"That was the missionary apostolic side of Marshall's cow-poxing zeal, but in private circles at Palermo his fee for vaccination was ten guineas to genteel families and five guineas in families of the middle classes."

In his rapid sketch of the Parliamentary history of vaccination, Dr. Creighton treads on ground already familiar to students. "Behind all the scientific good faith," he says, with which compulsory vaccination was recommended, "was also an Act for the maintenance of medical authority, and for *the saving of medical credit.*" "Unhappily," he says elsewhere, "the dearest interests of humanity had to give way before the dearest interests of the medical character." The laity know this already, but a thousand thanks are due to this writer for his courage to say so. "The blow to professional credit," he says, "can hardly help being severe." The task he set before him was to explain how the medical profession in various countries could have come to fall under the enchantment of vaccination. This he has done with a success which is remarkable. His *Jenner and Vaccination* will mark an epoch in a long struggle, the end of which, to quote the well-known saying of our day, is now within a measurable distance.

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### COMPULSORY VACCINATION: AN APPEAL.

*To the Editor.*

SIR,—Since the publication of the remarkable treatise on Vaccination in the last volume of the *Encyclopædia Britannica*, and the recent articles in the *Contemporary* and *Westminster Reviews*, numerous enquiries have been made with reference to the means which are being taken to arrest the wholesale mischief propagated by the Vaccination Laws. May I venture through your columns to inform those of your readers who are concerned for the defence of parental rights and personal liberty, as well as those who have witnessed the evil effects of the Jennerian system in their families, that the Executive Committee of the London Society for the Abolition of Compulsory Vaccination, are at present quite unable for want of funds to supply the growing demand for lectures and literature on this momentous subject, and the emancipation of the people from an intolerable injustice is seriously hindered. From recent inquiries instituted in the West Indies and in British Guiana, it appears that one of the most repulsive, incurable, and mutilative diseases—Leprosy—is according to high medical authorities, being disseminated by compulsory vaccina-

tion in these colonies, and as the people are practically without representation, their only resource is an appeal to the English people to assist them to put a stop to this hideous and irreparable medical blunder.

Subscriptions may be sent to the Hon. Treasurer (C. Pearson, Esq.),  
15 Harpur Street, London, W. C., or to

Yours faithfully,

WILLIAM YOUNG, Secretary,

London Society for the Abolition of Compulsory Vaccination.

77 Atlantic Road, Bixton, London.

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## HOW LEICESTER WON HOME RULE.

*To the Editor.*

SIR,—At the present moment when the whole of the civilized world is more or less absorbed in the problem of “Home Rule,” perhaps you will be good enough to allow me through the medium of your columns to briefly recite how Home Rule was obtained by, and works in a large and prosperous as well as beautiful town in the midlands of England. Leicester was, well — let the fact be recalled — a very Mecca of orthodoxy, as far as vaccination is concerned. How she was perverted or converted is a brief but interesting story. It sounds like a revelation to be told that at the present moment there are 20,000 unvaccinated persons in Leicester, and that at the recent election of Guardians, although several candidates were elected unopposed, there were no fewer than 44,000 votes cast for anti-vaccination candidates! That is enough to take away the breath of old maids and doctors, and yet Leicester has a clean bill of health as far as small-pox is concerned.

It all came about in this way. In 1872 almost every soul in the town was vaccinated, and yet the fire and brimstone of small-pox rained over the town, as if it had been a very Sodom or Gomorrah of unrighteousness. Thousands of people were struck down by the disease, vaccinated and re-vaccinated alike, till there was hardly a house free from the pestilence, and 346 persons — almost every one of them vaccinated — died.

They had trusted to the phylactery of vaccination, but the disease refused to be "charmed," and exacted its utmost victim. A few earnest spirits were not slow to turn this to account, and they proclaimed war *à outrance* against this fatal superstition. Clean bodies, clean houses, pure air, a regular, healthy life — these were the doctrines of the new crusaders. Vaccination, so far as any positive advantage was concerned, had been entirely negatived.

Men next began to go to prison for conscience sake, and the Acts at Leicester, as elsewhere, were enforced with the utmost despotism, and with an entire want of consideration. Indeed, Sir Richard Cross, M. P., who was Home Secretary in Lord Beaconsfield's Administration declared from his place in the House of Commons that the Leicester magistrates had been guilty of "a petty abuse of power." Later on came seizures of furniture, and the public sale of goods excited great popular indignation. Cases of terrible injury by the communication of disease through vaccination cropped up continually, and were so well established that medical certificates were given in two instances of death from vaccination.

The town, by a wise scheme, is kept entirely free from small-pox. Medical men are compelled under penalties, to report outbreaks of the disease within twenty-four hours, and the sufferers are at once isolated. The hospital is administered by the Corporation, and although the establishment charges are a mere trifle, no reasonable expense is spared in contributing to the comfort and happiness of the inmates. Infected clothing is destroyed, and houses are disinfected at the public expense; and yet the total cost of keeping Leicester free from small-pox for twelve years by this natural and simple process has not amounted to the cost of one year's vaccination fees! There have been about twenty-three to twenty-five separate attacks of small-pox to deal with, the disease in each instance having been imported into the town from well-vaccinated communities by vaccinated people, and in each instance the disease has been stamped out without spreading.

The position of affairs to-day is that there are now about 14,000 summonses to be issued, and the inhabitants have elected a Board of Guardians who, by a majority of twenty-six votes to eight, have stopped the Vaccination Officer from issuing a single summons!

The people, left to enjoy "Home Rule," decline to have their children vaccinated, and during the first half of 1886 out of 2,500 children born only 305 were vaccinated, although coercion was in active force for four of the six months. Does the town suffer? Not a bit of it. Curses there are loud and deep, but only blessings come. Other towns may persist in the vain attempt to "mitigate" or "charm" the disease; Leicester annihilates it.

Thus Leicester has, in its own way, established a system of "Home Rule" which it means to maintain. The Local Government Board have been communicated with, but as yet they have done nothing which would tend to deprive the right of a town of 140,000 people to manage their own health in their own way.

Leicester has "killed" vaccination; but it has done more. It has shown how small-pox may be most effectually stamped out; and if every town in the kingdom were only to do its duty as resolutely and as effectively, there is no doubt that this nasty, loathsome disease would soon be driven from the country.

Yours faithfully,

J. THOMSON STEPHEN.

28 Tower Street, Leicester.

## THE VACCINATION ACTS.

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### POWERS AND DUTIES OF MAGISTRATES AND GUARDIANS.

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THE vaccination question has assumed a position of very serious importance: the accumulated evidence of disastrous and fatal results following the operation has given an impetus to the reaction of feeling that is growing in the public mind. The tremendous indictment of the practice of vaccination—by Dr. Charles Creighton, a physician and pathologist of the first rank—which occupies fourteen columns in part 93 of the *Encyclopædia Britannica*, recently published, marks a new era in the history of this dangerous and stupendous delusion; and in the opinion of competent judges is a prelude to its speedy collapse.

The appearance of this condemnation of vaccination, in which the filthy and absurd superstition stands confessed for the hideous and fatal thing it is, simultaneously with the publication of the new edition of *Vaccination Proved Useless and Dangerous*,\* by the eminent scientist and naturalist, Dr. Alfred Russel Wallace, is sufficient to call for the widest and most earnest consideration from every parent in the land, and from all who have any part in the administration of the tyrannical vaccination acts.

With regard to the law upon vaccination, there is no *statutory* obligation on guardians to prosecute at all for refusal to vaccinate. Under Section 27 of the 30th and 31st Vic., cap. 84, it certainly was declared that guardians should prosecute, but that section was expressly repealed by a subsequent enactment. After the repeal of this section—by the act of 1871—the Local Government Board issued a “General Order” to boards of guardians, dated October 31st, 1874, which “Order” was held to set forth the legal duties of guardians with reference to prosecutions under the vaccination acts.

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\* E. W. ALLEN, Ave Maria Lane. 8vo., pp. 45. Price 6d.

However, that guardians can use their own discretion and decline to prosecute their neighbours under the provisions of the infamous vaccination acts is perfectly clear. With regard to the "General Order" above referred to, the President of the Local Government Board, Mr. Ritchie, asserted in the House of Commons on the 17th of February, 1888, that it "*was not binding on Boards of Guardians; the Order was merely a communication, and it rested entirely with Boards of Guardians to exercise their discretion in the matter.*" Mr. Ritchie also said in Parliament on the 5th of July, 1888, with regard to vaccination prosecutions, that the Local Government Board "could not interfere in the exercise by the Guardians of their powers," and that "enforcement of the Vaccination Act is committed to an elective tribunal, and they must use their discretion in the cases that come before them."

With these utterances of authority staring him in the face, it is impossible for any guardian to say he is obliged to put the infamous provisions of the present vaccination acts in force against those parents who object to run the risk of killing their children by vaccination!

The magistrates, also, have an *absolute discretion* in the Vaccination cases which are brought before them, although they constantly make the excuse that "*they have no option in the matter,*" that "*they must administer the law*"—that is, by convicting. These excuses are as utterly false as they are discreditable to those who vainly try to take shelter under them.

In a letter addressed to Mr. Sergeant Simon, M. P., by the Right Hon. G. Selater Booth, President of the Local Government Board, on the subject of Vaccination prosecutions, dated August 4th, 1876, he says: "It must not be overlooked that even where proceedings have been determined on by the local authority, *the decision to make or withhold the order for Vaccination is entirely within the discretion of the magistrates.*" And a subsequent President of the Local Government Board, speaking on November 28th, 1882, in his place in Parliament, in reply to Mr. Hopwood, said, with reference to Vaccination prosecutions, that "*it is open to the justices in any such case to impose a merely nominal fine, or decline to make an order for the Vaccination of the child.*"

What magistrate can have the audacity to say that he "has no option" in the case of Vaccination prosecutions? or that he "is bound to administer the law," by convicting under these circumstances? With reference to the 31st section of the Vaccination Act, 1867, under which authority so much detestable persecution takes place, the powers given by it to the magistrates are simply and *entirely permissive*; they are *not imperative* in the slightest degree. The words of the section are that the magistrates *MAY* *summon* the person declining to vaccinate, and he "*MAY, if he sees fit,*" make an order for the Vaccination of the child. He cannot enforce obedience to his "order" when he has made it. He can only *fine* the parent, and he has the power to fine him *one penny* without costs, if he likes. He has *absolute discretion* in the matter.

A considerable number of Boards of Guardians decline to put the Vaccination Acts in force, amongst which may be mentioned:—Banbury, Bingley, Kettering, Biggleswade, Keighley, Leicester, Gloucester, Oldham, Falmouth, Halifax, Dewsbury, Hull, Penzance, Luton, and the metropolitan parish of Shoreditch; while at the fashionable town of Eastbourne the local magistrates refused to sit on Vaccination cases, and Kettering will not even appoint a vaccination officer.

The returns of the Registrar-General show that within a given period of six years, no less than 316 children under one year of age, are certified by medical men to have been *KILLED BY "COW-POX AND OTHER EFFECTS OF VACCINATION!"*

How many more are killed indirectly and permanently injured it is not easy to estimate. This fact alone justifies any thoughtful parent in preserving his healthy child from the hands of the inoculator of nobody knows what.

No Government is justified in taking such a toll of child life as this, for the purpose of maintaining a medical dogma, *BEASTLY* in its conception, *DANGEROUS* and *FATAL* in its operation, and which the teaching of science, experience, and common-sense, has demonstrated to be one of the most gigantic delusions the world has ever seen.

## THE ROYAL COMMISSION ON VACCINATION.

### Where the Anti-Vaccinationists Have Scored.

[From *Pall Mall Gazette*.]

At the last meeting of the executive committee of the London Society for the Abolition of Compulsory Vaccination the following resolution was carried unanimously:—Resolved, that the attention of the public be drawn to the following points elicited in the examination of witnesses before the Royal Commission on Vaccination, and contained in its recently-published second report:—

Q. 6,814. 1. The official admission that in the epidemic of 1871-2 in Berlin 706 vaccinated children died of small-pox under ten years of age.

6,780. 2. The official admission that no official evidence exists for the statement in the Franco-German war that 23,469 French soldiers died of small-pox; there being no official statistics for those years whatever.

1,670, 6,790, 6,802. 3. The proven falsity of the statement that prior to 1874 there was no compulsory vaccination in Germany.

1,827. 4. The admission that good vaccination marks may wear out, from which admission it follows that the mere absence of visible marks in a small-pox patient is not sufficient evidence to prove that patient is unvaccinated.

1,855-6. 5. The inability of the pro-vaccination witnesses to explain the alleged higher rate of fatality among unvaccinated patients now than obtained in the last century, when all were unvaccinated.

1,794. 6. The admission that less care is exercised in the vaccination of the poor than is the case with the privately vaccinated children of the well-to-do classes.

2,370, 2,624-5. 7. The admitted falsity of the notice issued by the Sheffield authorities, that, in the outbreak from which that much vaccinated city suffered, not one single revaccinated case was reported as having died; a revaccinated death from small-pox having occurred in Sheffield before the issue of such notice.

4,159-67, 4,200. 8. The admission by Mr. Farn, the Government Inspector of vaccine lymph, that no examination of vaccine lymph, as conducted by him, will enable him to declare such lymph to be pure; and that no test applied by him will enable him to distinguish between lymph from a healthy and lymph from a syphilitic child; and that the Government has never guaranteed any lymph whatever.

3,133 and passim. 9. The total inability of the pro-vaccination witnesses to give any scientific information whatever as to the nature, origin and affinities of cow-pox.

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### THE FAILURE, MISCHIEF, AND INJUSTICE OF COMPULSORY VACCINATION.

*To the Editor.*

Sir,—I am often sorely puzzled to reconcile the unstinted approbation of the despotic vaccination laws with the affectation of sympathy on the part of Magistrates and others for those who suffer under them. If laws are instrumental in coercing the consciences of thousands of upright citizens, subjecting them to the cruel and ignominious punishments ordinarily reserved for malefactors, it is obvious that they, instead of being defended, ought to be repealed. No small amount of ingenuity is expended by vaccinators in explaining away the facts and official proofs of the failure of these Acts to prevent small-pox, and in minimising the evidence of their evil results. This, permit me to say, is not the way that the truth (which ought to be the object of every enquiry) is likely to be elicited, and the public health promoted. Before the advocates of vaccination can even approach this important subject from an impartial standpoint that should remove the coercive chains from the necks of the people; which could easily be done by means of an influentially signed memorial presented to Parliament. That vaccination has failed in its intent is allowed by all who have seriously examined the facts, and it is so obvious that no argument is needed to enforce it. This failure has been admitted by the most ardent pro-vaccinators no less than by its bitterest opponents. In his essay on "Vaccination," page 30, Dr. Ballard, one of Her Majesty's inspectors of vaccine, says: "Dr.

Jenner's prediction has not been fulfilled; experience has not verified it; small-pox is not eradicated. Let me add that scientific observations lend no countenance to the belief that it ever will be eradicated, even from civilised communities." And the late Dr. Ceeley, of Alesbury, who devoted a lifetime to the propagation of animal vaccination, told the Calf Lymph Conference of the British Medical Association, December, 1879, "They would not be able to annihilate small-pox by vaccination." In the year 1825, Dr. Baron, the biographer of Jenner, says, "Small-pox was nearly as prevalent in London as during any of the three great epidemics of the preceding century." This, then, was the result of voluntary vaccination. The *Lancet* of July 15, 1871, testifies to the discouraging results attending its universal infliction upon the people after 18 years trial: "The deaths from small-pox had assumed the proportion of a plague. Over 10,000 lives had been sacrificed during the past year in England and Wales. In London 5,641 deaths have occurred since Christmas. Of 9,932 patients in the London small-pox hospitals, no less than 6,854 had been vaccinated—nearly 73 per cent. Taking the mortality at 17 1-2 of those attacked, and the deaths this year in the whole country at 10,000, it will follow that more than 122,000 vaccinated persons have suffered from small-pox! This is an alarming state of things. Can we greatly wonder that the opponents of compulsory vaccination should point to such statistics as an evidence of the failure of the system? It is necessary to speak plainly on this important matter.

Nor is the evidence of its impotency as a preventive more conclusively established than of its potency for mischief in the communication of some of the most loathsome maladies with which humanity is afflicted. Dr. Robert Cory, chief of the Government Vaccine Lymph Department, inopportunately contracted syphilis by experimentally vaccinating himself under conditions, which, according to the *Lancet*, are "common to all public vaccinations," and every parent, therefore, who sends his child to a public vaccination station is liable to similar risks. The enforcement of this risk in a country calling itself free, and amongst a people claiming to rejoice in liberty of conscience and the right of private judgement, is wholly inconsistent with these principles which once were the pride and glory of the

nation. Indeed, our ancient and most cherished rights—civic and parental—are ruthlessly outraged and trampled under foot by the vaccination laws. During the year 1884 there were in England over 2,300 convictions of conscientious and honest recusants, representing 5,000 prosecutions, and about 20,000 summonses and threatening notices. Demonstrations of vast bodies of exasperated citizens are becoming of not unfrequent occurrence—a state of things which, if permitted to continue, will inevitably lead to a breach of the peace and possible loss of life, for which the intolerant vaccinators will be wholly responsible. A medical prescription which can only be carried out by fines and improvements, handcuffs and gaols, and the seizure of household chattels, is not creditable to the wisdom or humanity of the profession through whose instrumentality it has been introduced, imposed, and fostered, and by whose support it is now mainly continued against the wishes, as is now clearly demonstrated, of an average of about 90 per cent. of the householders whose opinions have been canvassed upon this subject in 38 towns and villages in England.

I am, yours faithfully,

WILLIAM TEBB.

Devonshire Club, St. James's,  
London.

## The Royal Commission on Vaccination.

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“I am persuaded,” said SIR THOMAS CHAMBERS, in the House of Commons, “that when the bill (the Vaccination Act of 1867) is passed, an agitation will commence which will never cease until the Act is repealed.”

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COMPULSORY VACCINATION DESCRIBED IN PARLIAMENT,

BY

SIR THOMAS CHAMBERS, Q. C., M. P.,

*Recorder of the City of London.*

Vaccination is beyond all comparison the strongest form of “parental government” that was ever introduced into this country. It overrides and tramples down parental authority in relation to children. It takes them out of the care of the father and mother, who are ordained by Providence to exercise their parental care, and it insists upon a disease being infused into the blood of every child in order to prevent the contingency of its catching another disease. That might be justifiable; but it could only be justifiable, not upon medical theories, not upon the observance of innumerable precautions and the presence of favourable circumstances, BUT UPON A TRUTH UNDENIABLE, UNIVERSAL IN ITS OPERATIONS, CERTAIN IN ITS RESULTS, FREE FROM PERIL, AND AN ABSOLUTE PREVENTIVE.—*House of Commons, 1878.*

# THE RESULTS OF VACCINATION.

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## Promise and Performance.

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*To the Editor.*

SIR,— It seems to have been forgotten by those who are arguing for the defence and continuance of compulsory vaccination, on the ground that the vaccinators show a larger mortality amongst the cases returned as unvaccinated as compared with the vaccinated, that they are importing an element into the discussion uncertain in its nature and incapable of demonstration, and one which would have been ridiculed by the Legislature when the Vaccination Act of 1853 was introduced and adopted. The only point then considered pertinent was that of the protection afforded by the operation against both sporadic and epidemic small-pox, which was declared on the opinion of the entire medical profession to be absolute and beyond question. Four years later the belief was formulated by MR. JOHN SIMON, in his papers on the History and Practice of Vaccination, dated 1857, as follows:— “On the conclusion of this artificial disorder neither renewed vaccination nor inoculation with small-pox, nor the closest contact and cohabitation with small-pox patients will occasion him to betray any remnant of susceptibility to infection.”

Now for the result. In its issue of 15 July, 1871, eighteen years after the introduction of stringent compulsion, when the entire population had received the benefit of vaccination (whatever that may be), the editor of the *Lancet* thus delivers himself:— “The deaths from small-pox have assumed the proportions of a plague. Over 10,000 lives have been sacrificed during the past year in England and Wales. In London 5,641 deaths have occurred since Christmas. Of 9,392 patients in the London small-pox hospitals, no less than 6,854 had been vaccinated — nearly 73 per cent. Taking the mor-

tality at  $17\frac{1}{2}$  per cent. of those attacked, and the deaths this year in the whole country at 10,000, it will follow that more than 122,000 vaccinated persons have suffered from small-pox! This is an alarming state of things. Can we greatly wonder that the opponents of vaccination should point to such statistics as an evidence of the failure of the system?"

The same journal of 27 August, 1881, contains DR. FRASER NICHOLSON'S report of 43 cases of small-pox of which he had charge in the Bromley Union, viz., 16 confluent, 14 discrete, and 13 modified; two of the confluent cases died; all had been vaccinated, and three revaccinated.

On 23 February, 1884, the *Lancet*, referring to the small-pox epidemic at Sunderland, reported 100 consecutive small-pox cases, of which 96 had been vaccinated.

Referring to the epidemic in London, the *British Medical Journal* for 24 May, 1884, reluctantly admits that "against small-pox we cannot in all cases confer absolute immunity by any vaccination or revaccination."

The medical officer of the Taunton Sanitary Hospital reported in 1885 that there were 171 patients in the hospital, of whom 169 had been vaccinated.

And, lastly, from the Hand-book of the Metropolitan Asylums Board for 1886, I find that between 1870 to 1886 out of 53,578 small-pox patients admitted, 41,061 are returned as vaccinated.

The proofs of the disastrous failures of vaccination and revaccination at Montreal and Sheffield are of too recent occurrence to need recapitulation here. The history of the Jennerian system from its introduction in 1802 to the present time has been a continuous record of humiliation and disappointment which no ingenuity can palliate or explain away.

Yours, &c.,

WILLIAM TEBB.

Devonshire Club, St. James's, London.

## DESTRUCTIVE VACCINATION.

*To the Editor.*

SIR: During the recent general election many striking facts showing the destructiveness of vaccination were brought to the notice of the candidates. When referring to the danger and frequency of syphilis one of these gentlemen in my own Parliamentary division said: "I can well believe what you say, for an intimate friend of mine had this hideous disease imparted to himself, wife, and children by means of re-vaccination, and I need no further evidence." As the truth concerning vaccination, so long and so carefully suppressed, cannot in the interests of public health be too widely known, I hope you will kindly allow me to present to your readers a few out of hundreds of the cases which have transpired recently.

1. During the past four years the Registrar General has returned in his official reports 231 deaths due to "cow-pox and other effects of vaccination."

2. Dr. Koehler, medical adviser to the Imperial Government of Berlin, records in a letter in my possession the particulars of a disaster on the 17th of June last year at the Isle of Rugen, in North Germany, when 320 children and adults were infected with a disgusting skin disease (*Impetigo Contagiosa*) originating in vaccination with virus obtained from the Royal Central Vaccine Lymph Institute at Stettin. Another report says the infection is syphilitic.

3. In the vaccine catastrophe at Georgia (U. S.) in April, 1882, 100 students at the South Georgia Agricultural College, Thomasville, and 500 citizens were disabled with badly ulcerated arms from the use of bovine virus obtained from a New England vaccine farm in high repute.

4. Four deaths and five cases of inquiry at Norwich in June, 1882, from vaccination performed by the public vaccinator, Dr. Guy (See official report No. 385.) Several other deaths occurred from vaccination in Norwich about the same time.

5. Fifty-eight recruits syphilized by vaccination performed by the army surgeon at Algiers on Dec. 30, 1880, brought five times before Parliament. About half these cases terminated fatally. The full particulars obtained from medical and other witnesses at Algiers,

in April, 1884, are in my possession. Mr. Brudenell Carter, F. R. C. S., says that syphilitic contamination by means of vaccine lymph is by no means an unusual occurrence, the majority of the cases of apparently inherited syphilis being in reality vaccine.

Such instances of wholesale contamination are no doubt comparatively rare, otherwise the system must have collapsed long ago, but cases of injury and death are of daily occurrence. Mr. John Pickering, of Leeds, who devoted many years to investigating the facts, estimated the yearly deaths from diseases induced by vaccination in England and Wales at 60,000, and one of the most scientific observers of our day, Mr. Alfred Russel Wallace, says 10,000 children are destroyed every year by five diseases commonly conveyed by means of vaccination. Personally I have collected particulars of 600 cases, and at the Leicester demonstration in March, 1885, about three hundred of the delegates and members of the audience publicly testified to injury and death, due to vaccination, within their own experience.

Yours, etc.,

WILLIAM TEBB, F. R. G. S.

17 Albert Road, Regent's Park,  
London.

WE take from the *Christian Herald* the following lamentable story:

Leprosy attacked a missionary's daughter in the West Indies a short time ago, under the following circumstances: After coming three years ago with her father, a Wesleyan missionary, from England to the West Indies, she fell ill. On being examined by the doctor, it was found that the poor child had contracted leprosy. The only probable means of communication was by vaccination, and thus the parents, endeavouring to save their daughter from the remote danger of small-pox, inoculated her with the horrible poison that will make her life a living death and herself a loathsome and repulsive spectacle. Broken in spirit by the sad affliction that had overtaken him, and hoping that by returning to England he might get something done for his daughter, the missionary resigned his charge and made preparations for his departure. But a new trouble awaited

him. The Royal Mail Company's steamers could not take a leper as a passenger, and so he had to remain in the West Indies. At last one of Messrs. Scrutton's vessels agreed to take the sorely distressed family to England. They got on board and started on their voyage.

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### ALLEGED FALLACIES OF M. PASTEUR.

Five years have now elapsed since M. Pasteur startled the medical profession by his alleged cure for hydrophobia. In these five years controversy has waged thick and hot around his theory, advocates and opponents seeming equally persistent and determined. Dr. Thomas M. Dolan contributes to the July number of the *Contemporary Review* a careful statement of the case against M. Pasteur, which will repay reading whether one regard the Parisian scientist's efforts as failures or successes. Thirteen years' experience has led Dr. Dolan to formulate the proposition that, "if any one obtained a reputation for the prevention of hydrophobia, and if all the dog-bitten sought or took this remedy, the result would be statistically favorable." In other words, only a small percentage of dog-bitten persons die, and, if a physician or school of physicians declares a remedy for rabies and administers that remedy to the victims of canine bites, the credit for the cures which would follow, in the natural course of events goes to the new prophylactic.

M. Pasteur's statistics appear formidable, but Dr. Dolan says that a comparison with those of the years preceding the introduction of the new system shows that, while the number of persons supposed to be bitten by rabid dogs in France has increased extraordinarily, the average mortality from rabies in France remains almost constant. This indicates that, while a number of cases larger than ever before has come to notice, probably through the notoriety of the Pasteur School, the fatality attendant has not been affected by the Pasteur treatment. As many as died before die now, and as many as recovered before are cured to-day. Indeed, argues Dr. Dolan, the objection of science to the statistics is still more powerful. The action of the alleged prophylactic resolves into pure empiricism. In certain cases injections of the spinal cords of rabbits were followed by the

recovery of the patients, and therefore, it was argued, the prophylactic was the remedy. Nevertheless, in one series, cords based on one formula were used, and some "cures" and some deaths occurred. Then the formula was changed, being made more intensive by the introduction of cords which had been dried a shorter period, and a larger number of deaths resulted. A return to the first formula, with slight modification, still developed mortality. As an explanation of these deaths it was stated that the patients who died had presented themselves too late, but "cures" were effected in the cases of some people who appeared longer after they had been bitten than some of those who died. Indeed, as M. Pasteur himself wrote in the *New Review*, "It is never too late to begin the treatment, as, if not treated, the odds are against the patient," and again he says, "Madame Louisa Caressa came all the way from Spain to our Anti-Rabie institution. She had been bitten nearly one year before, on Sept. 16, 1888, by her dog. . . . A few weeks have now passed since the last inoculations were made on her. The latter will no doubt prove just as efficacious as if she had undergone the process immediately after being bitten in 1888." Yet in the case of Lord Doneraile, who presented himself for treatment eleven days after he had been bitten, Pasteur could only "delay the fatal event four or five months." Another scientific objection to the system, says Dr. Dolan, is the fact that we are ignorant of the action of these injections, knowing neither the rate of absorption of each injection nor anything of the physiological operations which occur.

M. Pasteur divides all patients into three classes, (A) cases in which the dog was proved to be rabid by the experimental test; (B) cases in which the dog was recognized as rabid by the veterinary surgeon, and (C) cases in which the dog was only suspected of being rabid. But this classification assumes that all the patients were bitten by rabid dogs, making no allowance for bites inflicted by non-rabid animals, and so, if M. Pasteur is to be trusted, an epidemic of rabies affecting thousands of dogs must have raged in France during the last five years. Sir James Paget of England stated a year ago this month that fifteen per cent. of those persons bitten by rabid dogs would suffer from the disease and fifteen per cent. would die. Again, in the report of the English Hydrophobia Commission, he agrees

with his associates, "that at least five per cent. of the persons bitten would suffer from the disease."

"In the 7,000 bitten," says Sir James, quoting Pasteurian statistics, "if fifteen of each 100 had died, there would have been as nearly as possible 1,000 deaths, but only 100 died. Pasteur has, therefore, saved already nearly 900 lives." But let us look at the mortality in France during the years preceding Pasteur's work, urges Dr. Dolan. If this system saved 900 lives in five years, there must have been an equal or proportionate mortality in France before. The facts, however, do not substantiate this conclusion. In 1863 the famous Tardieu reported to the Minister of Hygiene that twenty-five cases of rabies approximately represented the mean French mortality from that disease. Actual statistics for the years from 1850 to 1872, inclusive, as given by Dr. Dolan, show an average annual mortality of thirty-two for these twenty-three years. Later statistics show these facts: In the four years 1882-85 there were in the Department of the Seine thirty-eight deaths; in the four years, 1886-89, of Pasteurian treatment there were thirty-seven. These figures come from Dr. Dujardin Beaumetz, Director of the Sanitary Service of Paris. What becomes of Sir James Paget's statement regarding the 900 lives saved in five years by M. Pasteur when the French national statistics show conclusively that in no five years for the quarter-century preceding Pasteur's discovery did any such number of persons die from rabies? Other countries also, affirms Dr. Dolan, negative the statement.

Dr. Dolan attacks the theory of inoculation as well. The Pasteur system rests on the theory of a specific microbe on which rabies depends. In fact, however, we know nothing of the nature of the virus, and the present formula adapted by Pasteur has been determined empirically. Various intensities have been tried and found to be failures. At first the spinal cords of rabbits, dried five days or longer, were applied to patients, but deaths continued to occur, and the intensity of the injection was gradually increased, finally to one-day cords. Several patients died under this formula, however, one at least, with the suspicion attending his death that the intense injection had, at any rate, not delayed it, and, consequently, the formula was changed to its present ratio, patients being treated with cords dried at

least five days. But Dr. Dolan says that he is convinced, after long study, that five-day cords are mostly sterile, for patients not bitten by dogs have submitted to injections for the sake of experiment and have remained unaffected; patients bitten by rabid dogs have been treated in the same way, and patients bitten by non-rabid dogs have undergone the process without harm.

Finally, the proportion of those bitten who escape is surprising and reassuring. Before the Select Committee on Rabies, June 28, 1887, Prof. Victor Horsley testified that a very large proportion of both human beings and animals bitten by rabid dogs do not become rabid, and Sir Charles Warren, when examined by the Select Committee of the House of Lords, said that 186 constables employed in seizing dogs had been bitten by rabid animals and not one had died. Seven who were sent to Pasteur were "cured" indeed; but the 179 others as well, who were denied Parisian treatment, recovered. Among the policemen engaged in their regular work of killing rabid dogs there has never been a case of hydrophobia, and it is noteworthy that they have been bitten by the same class of dogs as were many persons who presented themselves to M. Pasteur. "Had all the police gone to him," says Dr. Dolan, "his statistics would have been swelled, and his apparent success would have been, under his five-days formula, still more pronounced. Had, however, his intensive treatment been employed, hydrophobia would, without doubt, have been known to the Metropolitan force."

WE have been favoured from the United States with the following cutting from a medical paper :—

The good effects of vaccination have been well shown recently in Holland. During the years 1870-1873, 20,573 persons died of small-pox in that country. Since then, as a result of the strict enforcement of the new vaccination laws, the prevalence of the disease has steadily declined. Last year but a single death from small-pox in the entire kingdom.

[And yet there are cranks, who claim to be intelligent, who deny the value of vaccination, and use the most absurd arguments against the use of the purest virus.]

Of the style of the extract we say nothing—it is only a matter of taste. But we would like to have the chance of making this very confident writer state the reasons whereby he is induced to attribute an alleged absence of small-pox from Holland to any recent changes in the direction of increased stringency of vaccinal administration. If vaccinated Holland has only one death from small-pox, unvaccinated Leicester and unvaccinated Keighley have no death at all. But this obvious answer would hardly have induced us to notice the paragraph but for the fact that Holland is an interesting subject to us. It is true that there have been of late years some changes in the Dutch practice concerning vaccination. On May 26, 1883, were vaccinated sixty-eight recruits on joining the colours of the army of Holland. A few days after, seven of them were found to have been seriously injured, and, after much suffering, three of them died. The Minister of War, Mr. Weitzel, was interpellated in the Second Chamber of the Netherlands Parliament by Mr. Fabius, with the result that the facts were admitted, and a circular issued by the War Office to make re-vaccination optional in the army of the Netherlands, instead of compulsory, as it had hitherto been. Can our contemporary have been alluding to this change when speaking of the immunity that Holland has enjoyed as a consequence of the recent changes in her vaccinal practice?

Reprinted from VANITY FAIR, April 26, 1890.

## VACCINATION,

BY A BACILLUS.

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PERHAPS you may not think that we germs know much about vaccination and inoculation and that sort of thing; but, as a matter of fact, we know a great deal more than people suppose. We are strongly in favour of all the varieties of inoculation which the kind-hearted Medicine Man encourages nowadays, as it immensely increases our facilities for bringing up our large families. In fact, now that those horrible sanitary people are doing away with our old-established haunts, we should hardly be able to survive if it were not for the inoculation which goes on; and really an anxious parent must confess to quite a debt of gratitude to the modern Medicine Man, although he does abuse and misrepresent us so.

You see, it is in this way. When any sore appears on a calf or a child it is because some bad stuff wants to come away. This of course constitutes a basis for us, or—at least for so many of us as are unemployed or dried up; and so of course we jump on to it at once. We don't care whether it is on a calf or a baby, it is all the same thing to us. So long as we get our grub we are not particular, especially when we have been dried up for any length of time. But you may easily see why we like vaccination and inoculation so much. It is not only that we get a primary basis to begin on; but when the vaccinator comes and takes what the cow or the baby does not want, he always takes some of us with him, and so we get a fresh start.

When we get transferred in this way to another body, we commonly find that it is unpleasantly healthy, and we begin to wish that we had not come—at least, our children do; but we old ones know better, and lie low accordingly. We find by experience that when we have been introduced in this way there will always be a basis for us sooner or later; and, in fact, many of us prefer to remain in one

body for an indefinite number of years, for we are confident of getting sufficient nourishment in time, even if the supply temporarily ceases and the person we are in seems pretty healthy. You see, we have such excellent opportunities for watching the course of events, such as no one else can have, because they are not really on the spot as we are. To an outsider it appears that, when a person is vaccinated or otherwise inoculated, all that happens is the formation of a local sore. But we know better, and on which side our bread is buttered; and we know why we would sooner have vaccination enforced rather than chance the return or non-return of the old small-pox. You see, we come of an old stock, and our knowledge has been very accurately transmitted from our progenitors, and extends back to long before the introduction of what the Medicine Man calls modern MEDICAL SCIENCE—all in capital letters; and we know that just because the wicked sanitary people take away our dear old cesspools and keep blowing infection away by disgusting systems of ventilation, so it is quite impossible for small-pox and that sort of thing to get a chance; and if the epidemics don't get a chance, how shall we get a proper amount of nourishment? I explained this when I wrote for you about epidemics a short time ago, and told you how that we always looked to find a basis in the neighborhood of medicine men and drains.

Well, well—to go back to the question of vaccination, and as to why we revel in all kinds of inoculation. It is because we find that all such performances tend—as your great philosopher, MR. HERBERT SPENCER, would say—to “alter the incidence of organic forces;” and this is a much more important matter to us than you can have any idea of. *We* know that all the functions of the body are set going in a certain definite way to fulfill, in the course of time, certain definite ends; and that if this order is directly interfered with by the introduction of undigested diseased matter, the chances are that there will be trouble sooner or later; and so that we shall have a good time.

All forms of inoculation are in reality of the same nature, whether it is vaccination, or what they call specific inoculation, or otherwise. It is like taking a cog out of one of the wheels of a delicately constructed watch. The harm you have done may be apparent very shortly, or not for a long time—depending on what may happen to

have been interfered with. One thing that makes us laugh so is the Commission which sits upon vaccination. We suppose they can't find anything better to sit upon—such as a germ-catcher, for instance—and they don't seem to know how to sit comfortably on this, as they only take the evidence of people who look at pustules outside the body and don't ask us to tell them something that is worth knowing. How can they, or the people that they call, know that the vaccination of one year may mean the consumption or the liver disease of some years afterwards, unless they have been to see, as we have? However, everything is turning out in our favor, so we don't really grumble. It is because the Medicine Man has been telling such scandalous stories about us of late that we think it only fair to tell the real truth occasionally.

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#### NOTES OF THE MONTH.

Tunbridge Wells has been the scene this month of the most active resistance to the Vaccination laws. The goods of Mr. Ingram were seized under a distress warrant in pursuance of the Acts, and a public sale of them was announced. The seizure was of a pair of counter scales, and the proceedings were accompanied with a storm of chaff from what is described as an enormous crowd assembled at the sale. Asked by one voice in the throng whether the goods were marked, the auctioneer's reply was anticipated by another voice, "Yes, with calf lymph," and roars of laughter. At a subsequent indignation meeting presided over by Alderman Clifford, the anti-vaccinators were received by the audience with the utmost enthusiasm. Mr. Ingram made a rattling speech, in the course of which he referred to the case of Mr. Mitchell, who was distrained on under these Acts while his child was lying dead and his wife dying, and whose fine, under these sad circumstances, the Society had paid. In reply to the usual vote of thanks, the worthy Alderman presiding said that he had been brought to first consider the question by noticing how a poor man was frequently sent to prison; another testimony to the splendid service done by those brave men who are willing to suffer in earnest for their earnestness. Alike in its comic and in its tragic elements, we would ask any calm-minded and rational pro-vaccinist whether such proceedings do not in his judgment militate against the decency of law, and the possibility of respect for it.

# HOW BABIES ARE KILLED BY VACCINATION.

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## WHAT PARENTS SAY.

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“My child was vaccinated when 13 weeks old; in two weeks it was dead. After vaccination it was seized with convulsions, which continued until death.”

“My child was vaccinated at the same time as the above, and with the same kind of matter; it also was seized with convulsions, which continued until death. After death it went as black as a coal; it was such a mass of corruption that the burial suit had to be thrown over it instead of being put on.”

“We believe that vaccination killed them both.

(Signed)

JOSEPH TAYLOR,  
RICHARD MATTHEW.”

SMALLBRIDGE, March 12th, 1871.

“I had a sweet little boy, sir; he was only four months old when he had to be vaccinated. I took him to the station to be done. I told the doctor I could not bide to see him cut, so he savagely took him out of my arms, and gave him to another woman to hold while he did it. The poor thing cried, frightened like, and when the doctor gave him back to me, I shall never forget his look. He seemed to say to me,—‘Mother, what did you let him do that for?’ I took him home; he seemed *smitten* from that very hour; he never looked up again, and he died in dreadful agony in less than six weeks. *I see that look now, and I shall see it as long as I live.*”—From the *Anti-Vaccinator*, August 1st, 1872, edited by JOHN PICKERING, F. S. S., F. R. G. S., &c.

# Blood Poisoning by Act of Parliament.

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*MOTHERS,—whose children have been killed, diseased, or injured by Vaccination,—are requested to send particulars to*

THE LONDON SOCIETY FOR THE  
ABOLITION OF COMPULSORY VACCINATION,

114 Victoria Street, Westminster, S.W.

(OFFICE HOURS:—10 A. M. till 4 P. M.)

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**It is estimated that more than 20,000 children are destroyed every year by this practice, whilst others are afflicted with life-long diseases.**

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## SPECIMENS OF ITS OPERATION.

“Albert Swain, born December 5th, 1882, a particularly strong and healthy child, was vaccinated by the Public Vaccinator, Dr. Wineworth, on April 12th, 1885. A few hours after the operation he became unwell and vomited considerably, continuing to grow worse, until death on April 24th, the cause of which was certified by the medical attendant, Dr. Burnett, as—‘Bronchitis, Exhaustion.’ The child’s sufferings were terrible to witness: for three days previous to death he was blind, and lay tossing and shrieking in the most distressing manner.”

“Every physician of experience has met with numerous cases of cutaneous eruptions, erysipelas, and syphilis, which were directly traceable to vaccination, and, if these could all be collected and presented in one report, they would form a more terrible picture than the worst that has ever been drawn to portray the horrors of small-pox.”—PROFESSOR ROBERT A. GUNN, M. D.

“Syphilis, scrofula, and probably every kind of blood-poison can be taken by Vaccination, which, so far from being a protection against small-pox, seems to have been one of the chief causes of the late epidemics. It is never safe to take matter from another body into our own; we risk taking all its diseases. There is no doubt thousands have been mortally poisoned by Vaccination.”—T. L. NICHOLS, M. D., F. A. S.

### PREVENTION IS BETTER THAN CURE.

*If unable to set the infamous law at defiance, the following suggestions may be acted upon—*

The action of the vaccine poison may be much modified, and sometimes destroyed, by giving the infant—every day for a few days before and after the operation—a few grains of milk of sulphur. As soon as possible after the vaccination, apply a warm bread poultice, made as follows :—

Dissolve a teaspoonful of borax powder in half a pint of boiling water, pour this on bread, and make a poultice in the usual way.

Some advise sucking the arm, and spitting out the vaccine.

### WHAT VACCINATION DOES.

*To the Editor.*

SIR: A short time ago, a respectable looking man called on me and told me that he had a child suffering very terribly from vaccination. I found his name was Wilks, and his residence in Victoria street, off John street, and I promised to call at his house as early as I could. An hour or two afterwards—accompanied by Mr. D. Thompson—I went to see the child, and I do not think I am wrong in saying that if the parents in Workington could have seen it as I saw it, there would have been few vaccinations for many a day. Mrs. Wilks, the mother, stated that the child was about three months old. It was healthy and doing well until it was vaccinated by the public vaccinator. Within a week from that time it had become a mass of sores, and when I saw it it was a most pitiable object. The poor mother said it had no rest since, but was in constant pain. No wonder! The vaccinated arm was swollen, much inflamed, and full of sores; the head and face were blotched, the inside of the mouth all sores, and parts of the body likewise; whilst the upper part of the thighs, and parts near, were indescribable. The father told me it was their only child, and had been a fine boy previous to vaccination, and he said he would go to Carlisle gaol forever before another child of his should be vaccinated. As I write

I am doubtful in my own mind whether the little sufferer will recover, but I am in no doubt as to the monstrous character of the Acts of Parliament that force parents to submit their helpless little ones to such a foul and senseless rite as that of vaccination. If not another case was on record, this case of Mr. Wilks's child is enough to convince anyone not pecuniarily interested in the thing, that there is great danger in allowing any doctor to cut a child's arm and inject his "pure lymph," or rather "pure rotteness," into its veins. There is only one way to get these tyrannical laws repealed, and that is for parents to defy them and disobey them at any cost.

Yours, etc.,

T. W. JOHNSON.

Workington.

P. S.—Since the above was written the child has succumbed to the State-enforced prescription.

## THE MITIGATION THEORY OF VACCINATION.

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Jenner's claims to the absolute protective influence of vaccination soon became untenable, owing to the prevalence of small-pox among the vaccinated. Numerous cases of the disease occurred in patients vaccinated by Jenner himself, but the climax was reached in the case of Robert Grosvenor, the child of Earl Grosvenor, who suffered from a severe attack of confluent small-pox a few years after Jenner had protected him "forever after" by vaccination. A council of despair was held at his bedside, and the mitigation theory was there formulated. "The child would have died but for the previous vaccination!" Thus were Jenner's confident assurances of absolute protection thrown to the winds, and the mitigation theory substituted.

Assuming the correctness of this theory, the rate of mortality from small-pox per cent. of cases should be considerably less, now that over 90 per cent. of the cases of small-pox occur in the vaccinated, than the rate of mortality from small-pox before vaccination was introduced. Such is not the case. The advance in medical knowledge has reduced the mortality from *fever* in the London Fever Hospital from 25 per cent. in 1839 to 1.9 per cent. in 1889, but the statistics of *small-pox* shew no such response to the credit of our improved methods of treatment. The mortality from this disease has been practically stationary since last century, to the complete refutation of the mitigation theory.

Professor Michael Foster thus summarises the evidence given before the Royal Commission on vaccination as to rates of small-pox mortality at different periods:

1760 (no vaccination)	18.8 per cent.
1830 (with " )	18.5 "
1870 ( " " )	17.3 "

The accuracy of these figures is now very generally admitted; but, to support the Mitigation Theory, we are asked to believe that the unvaccinated (who form less than 10 per cent. of the total cases) now die at the rate of 40 to 80 per cent., *simply because they are un-*

*vaccinated*, whilst the vaccinated only suffer a slight mortality of 6 to 10 per cent.!

Why are the unvaccinated of the present day so much worse off than the unvaccinated of last century? Is it that our medical men, with their improved methods and appliances are less successful in the treatment of small-pox than their 18th century predecessors?

Let us compare the figures :

Unvaccinated death-rate, present day,	. 40 per cent.
“ “ last century,	. 19 “

Balance to discredit of 19th century doctors, 21 per cent.

To support the Mitigation Theory we must either admit that doctors of the present day suffer from 20 to 60 per cent. of their cases to die, over and above what would have died under the treatment of their predecessors of last century; or we must admit that small-pox has gradually become a more fatal disease *exactly synchronous with the extension of vaccination*.

The true explanation is two-fold.

**I.—The un-vaccinated are now a quality as well as a quantity.**— One of the chief essentials of scientific comparison is that the two things to be compared shall be under exactly alike conditions, with the exception of the *one* condition which is to be tested. Such is not the case with the vaccinated and un-vaccinated in our present-day small-pox statistics.

The un-vaccinated may be divided into four classes :—

1. *Infants under the vaccination age.*
2. *Those in too feeble health for vaccination.*
3. *The dregs of our urban populations, living in insanitary lodging houses and weekly tenements, whose nomadic habits enable them to escape the vaccination officers.*
4. *Opponents of vaccination from intelligent conviction.*

Classes 1, 2 and 3 comprise such persons as would shew a very high rate of mortality from small-pox or any other epidemic disease. In fact, there is little doubt that, if the death-rates from, say, scarlet fever among the vaccinated and un-vaccinated were compared, the results would triumphantly “prove” that vaccination is equally a specific against scarlet fever as against small-pox.

This contention appears to be very generally admitted.

Dr. R. H. Bakewell, Vaccinator General for Trinidad, in his evidence before the Committee of the House of Commons on Vaccination, in 1871, said — “It must not be forgotten that in all European countries the un-vaccinated are taken from the poorest and most neglected classes of the community, and may fairly be expected to be bad subjects for any disease like variola,” (*i. e.* small-pox.)

The opponents of vaccination from intelligent conviction (class 4) are mainly confined to towns, like Leicester, Keighly, Gloucester, Northampton, &c., &c., where the Vaccination Acts are no longer enforced; and, as small-pox has been almost unknown for many years in these places, they do not to any extent affect the comparison.

The above considerations shew conclusively, that in comparing the small-pox mortality of the vaccinated with that of the un-vaccinated, we are comparing things which are quite incomparable.

## II.—The results are demonstrably untrue.

Small-pox cases may be divided into three classes according to the character of the eruption :—

*I.—Discrete cases*, in which the eruption is so moderate that the pustules are entirely separate one from another, and the disease rarely fatal.

*II.—Confluent cases*, in which the eruption is so severe that the pustules coalesce, the disease being fatal in about 50 per cent. of the cases.

*III.—Malignant cases*, in which little or no eruption is thrown out, the disease attacking the vital organs, blood poisoning usually supervening, and death resulting in almost every case.

We are informed by Dr. Gayton, the late Superintendent of the Homerton Small-pox Hospital, in his evidence before the Royal Commission, that the “mitigation by vaccination” is chiefly apparent among the second-class — the confluent cases — vaccination affording no odds in favor of those attacked by malignant small-pox, the severest form of all, and the very one where we should expect its benign influence to be most apparent!

The explanation lies in the faulty method of recording the particulars of the patients as to vaccination. The assurance of the patient or his friends as to his vaccination is not accepted; *the official vaccination registers are never referred to*, but the sole criterion is the presence or absence of the marks of vaccination on his arm. In the discrete and malignant cases of small-pox the pustules are so few and far between that the vaccination marks are rarely obscured, and the "Mitigation Theory" admittedly gains nothing by such cases. In the confluent cases, however, the eruption is so abundant that any vaccination marks that may exist stand little chance of detection, and the bulk of such cases are recorded as *un-vaccinated!* In the Glasgow epidemic of 1871-2 this method of classification was observed, but Dr. Russell's report contained this significant admission, "Sometimes persons were said to be Vaccinated, but no marks could be seen, very frequently because of the abundance of the eruption. In some cases of those who recovered, an inspection before dismissal, discovered Vaccine Marks, sometimes 'very good.'" Thus, some of the Unvaccinated who *recovered* were found vaccinated; but what of the *vaccinated* under similar conditions, who *died* with the full burden of the eruption upon them? They went to swell the lists of *unvaccinated* deaths, as "terrible warnings" to anti-vaccinators!

The experience of the Glasgow hospital is no isolated instance. The falsity of statistics compiled in such a manner has been repeatedly exposed; but one example, selected from many on account of the implied challenge as to its accuracy, must suffice:

In June, 1885, the authorities of the West Ham Union circulated a report, the accuracy of which was vouched for by Dr. Kennedy, "not as cooked statistics, but unvarnished facts," to the effect that in the small-pox hospital seventy-six unvaccinated persons had died of small-pox during the six months ending May 14, 1885. Through the intervention of Mr. Hopwood, then M. P., the addresses of the seventy-six patients were obtained and a careful investigation made. Owing to removals, etc., facts could only be obtained in forty-three cases. *Of these forty-three "unvaccinated" cases eighteen were found to have been vaccinated and three re-vaccinated.*

Such errors are inseparable from this method of compiling statistics, yet these are the figures upon which the "mitigation theory"

is solely based. We pay immense sums annually to maintain the machinery of Registration, but the Vaccination Registers appear to be maintained only for the purposes of bringing defaulters within the meshes of the law, and securing the much coveted "Bonuses" to the public vaccinators. Until these registers are made the criterion of vaccination in cases of small-pox, such blunders as the above,—which are constantly occurring, and as constantly being exposed to the discredit of the medical profession,—will be inseparable from all our hospital statistics. The present system of classification may be essential to the support of the "Mitigation Theory," but is surely undermining the prestige of the medical faculty.

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#### THE DIFFUSION OF DISEASE-GERMS BY VACCINATION.

*To the Editor.*

Sir,—The frightful reproduction and diffusion of disease-germs in vaccination explains why sanitary measures and appliances, perfected at great cost and skill during the last half century, are powerless to reduce the death-rate or disease-rate from causes which are known as "blood diseases." Not only are they powerless to reduce the disease and death-rate, but they are powerless to prevent a regular and systematic increase from year to year. In fact, the diseases referred to may be looked upon as chronic, and neither physician nor sanitarian seems the least anxious to fix the blame upon the one glaring criminal—vaccination. All the advance we appear to have made is in having effected a displacement, which has introduced artificial diseases, permanent and lethal, in the place of epidemics, which were filth diseases and easily combated and dispersed by sanitation. Thus, instead of plague, black-death, sweating sickness, small-pox and cholera—the epidemics of the Middle Ages—we have bronchitis, scrofula, pneumonia, syphilis and atrophy. The tyranny of disease and death holds its undisputed sway, and we err not in saying that it is mainly attributable to the vaccinal cachexiæ, which are as lethal in themselves as the individual epidemics above mentioned. It may be said with no small degree of truth that each of the quintuple diseases,

bronchitis, scrofula, pneumonia, syphilis, and atrophy, is a plague in itself, and that which aggravates the statement is the fact, well known to the anti-vaccinator, that the statistics of the diseases throughout and in totality are a one-sided affair. The members of the faculty are interested in hiding the real figures from the public mind, and they unblushingly admit that they give false certificates of death. The practice is done to an extent which renders the annual register of comparatively little value to the honest statistician. It is humiliating beyond endurance that the faculty fail us at every point—in the abominable rite of vaccination which they uphold, in the effective treatment of disease which they cling to, and in the untrustworthiness of the certificates of death which they issue. What an indictment! Who among them dares to challenge it? Stay the hand of the vaccinator for a single year, and trust to sanitation instead of vaccination, treat the patient with good diet, baths, and pure air, instead of a vile drug treatment; give us true certificates of death, *for which we pay*; and the record of diseases and the roll of death will amaze the profession, the statistician, and the public.

Yours respectfully, JOHN PICKERING, F. S. S.

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