Thomson M. S.

MEDICAL REFORM AND ALLOPATHY:

BEING

A VINDICATION

OF THE

DOCTRINES, PRINCIPLES AND PRACTICES OF THE FORMER, FROM AN ATTACK MADE UPON THEM BY THE LATTER, IN A RECENT PAMPHLET BY J. DICKSON SMITH, M. D., OF MACON, GA.,

TOGETHER WITH

A REVIEW

OF TWO ESSAYS ON MEDICAL ABUSES FROM THE SAME AUTHOR

BY

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AT MACON, 1859.

EXPLANATORY.

Having always conceded to the advocates of Allopathy, the privilege of saying what they pleased in their journals, without note or comment, except through a like medium of our own, we yet have deemed it proper when the popular press has been made the channel of their communications, to notice them through the same media, in such a manner as their matter and spirit seemed to demand, and the "fairness" for which the American Press is so distinguished, has, till now, enabled us to do so in the same paper. That courtesy, however, was denied us by the Editor of the Christian Index, who had, voluntarily it seems, selected the article for publication that attacked us, and when a respectful rejoinder was tendered for his columns, it was declined. This did not surprise us, as we ourselves thought that a religious paper was not a proper medium for the discussion of Medical subjects, and we presumed that the Editor found that he had already introduced more "Medical lore" than was healthful for his columns, and therefore thought proper to decline more; but we now think we were mistaken as to the motive, for we find the very man that introduced it to the popular press, and refused to let his readers see the reply, prejudging the controversy—in the new paper he has started, and declaring that it never should have appeared in the newspaper press at all! If it had not, or if *he* had acted *fairly* in the mat-

ter, Dr. Smith would never have been "surprised" by a "rejoinder" from us, and the "columns of a public paper whose readers had never seen his article" would never have been selected as the medium of its appearance. The "refusal to publish," referred to with such gusto by Dr. Smith, is explained in the simple statement that the Editor referred to is—an Allopath!—perhaps *that* explains his want of fairness, too.

Be that, however, as it may, upon his "refusal,"—for the reasons stated on its face—we had it inserted in the Georgia Citizen, which shortly after, in its usual manly way, inserted the article referred to, with the "exordium" of Dr. Smith "prefixed," and the same week the Editors of the Journal and Messenger, struck doubtless with the many *truths* contained in it, selected for publication the article on the Abuse of Medicine. This brought that article also within the rule, and in review of both, our second article of "rejoinder" appeared, which though good enough to quote from, and comment on, did not suit the Doctor's purpose to publish, and therefore the readers of his pamphlet must guess at the meaning of many of his allusions.

Being desirous as far as possible of obviating such necessity on the part of our readers, we have given the whole series, and endeavored to make up for the impossibility of copying his last pamphlet, by inserting in the Citizen the following notice:

MEDICAL.

Mr. Editor:—Allow me to inform such of your readers as take an interest in medical matters, that a review of my strictures on the articles of Dr. J. Dickson Smith, has just been issued from the Telegraph Press, in a pamphlet of fifty-six pages, which opens up the question of the comparative merits of both systems of practice, with a view to the "VENTILATION" of the whole subject; and as from the smallness of the edition it may be intended merely for private circulation, and as I mean, by and by, to present another good tempered "rejoinder," I trust that all who can will secure a copy, that they may be able to judge, each for himself, whether there be not in existence a specimen of the genus BUG of the HUM species, so large that in comparison with it the highest magnifying microscopic lens could hardly discover Barnum.

This, however, will require time, and as *I* am not a man of *leisure*, writing for "*pleasant pastime*," I would bespeak indulgence till it becomes possible to procure it.

As it is, if Dr. S. would only join me in giving life preserving remedies, and throw his poison to the dogs, he might have his time much more profitably occupied in attendance on patients to whom I am often painfully compelled to deny it, and if I could only get him to understand what he says, the greatest "GUMP" could "learn by heart and follow with

his eyes shut," the numerous believers in the Botanic system in Macon, would put a lasting period to the necessity of his casting about for something of which to make a "pleasant pastime."

Respectfully, M. S. THOMSON.

As to the matter of *cost*, which seems to trouble the Doctor so much, we have but to say that in defence of the system and principles we advocate, *that* never enters as an element of calculation, and—thanks to the Allopathic system of Medical practice, that has made more cases for us than *natural* disease—there is no necessity on our part of witholding our hand, so that when a proper object presents itself money flows like water, and the confidence in our remedies that *results* (not pretensions) have inspired, keeps up the supply, so that like the meal in the widow's barrel, there is always "a little more left," which enables us to discharge our obligations, even to our printers, without the slightest appearance of sponging, and without laying ourselves under even an implied obligation to collect an Editor's subscriptions, or do any other "chores" that his absence might make necessary. Hence it is that if Dr. Andrews charges for his space as well as for his trouble in putting up our communications, which did *not* appear in his advertising columns, it will all be right, and if he were at the same time to charge us for the article and exordium of Dr. Smith, we would think it only right that we should pay, for justice required he should be heard; Dr. A. was too liberal to refuse him, but we had produced the necessity; and if Dr. Smith sees any thing wrong or dishonorable in all this, we think that a little study into the relations of *meum* and *tuum* would convince him to the contrary: but the man that can be "surprised" that another, whom he has, even indirectly, accused of "criminality," should defend himself, and then call that defence an "attack on him," has yet much to learn of the ways of civilization, that may not be taught in the backwoods of Georgia or the pine-log school houses of the country.

These are minor matters, however, when compared with the fact, that a mutual concurrence of opinion exists as to the necessity of "ventilating" this subject "for the public good," for we have not the shadow of a doubt that good and not evil will result to all those who give this matter a calm, careful, fair and unprejudiced investigation, and as this is the only attempt that Allopathy has made in Georgia for many years to define her position, and as, through consultation with her advocates in Macon, this is

probably the *best* that she can do, we embrace the opportunity presented to review the pamphlet of Dr. Smith, at some length; considering him merely the representative of his system, except in so far as he may have overstepped that capacity, and made statements as an individual that may require correction, or charges that require rebuttal.

In doing this, we shall not transgress the rules of fair criticism, shall introduce no *hearsay* evidence as *proof*, nor shall we find it necessary to characterize Allopathy any more "harshly" than many of her highest and best advocates have done before, or than Dr. Smith himself when speaking of some of her practices.

Truth is what we seek, and *Truth* in Medicine, we believe we have found, and though the principles on which we give medicine are as opposite from those on which Allopathic remedies are administered as the east is from the west, and though it be just as impossible to mix them, effectively, as "oil and water," we know that we are right, since every change that is making in the old practice is in our direction, and the lights of science, "microscopic research," and mature experience but confirm the fact, and point with undeviating finger to the principles first enunciated by Samuel Thomson about the end of the last century, as the principles "par excellence" of scientific medicine!!

Rational vs. *Routine and Book Practice of Medicine.* By J. Dickson Smith, M. D., of Macon, Georgia.

Medicine claims to be both a *science* and an *art*, and the two are so intimately blended, that it becomes difficult to define the extent and the limit of each. It is denominated the "*Healing Art*," but the simple term, *art*, does not express the true character and claims of medicine. It possesses all the defining elements necessary to constitute it a *science*, and the term is as appropriately applied to medicine as to any other system. It is a regularly organized system of general principles and legitimate deductions, from empirical facts and clinical observations. The term, art, as applied to medicine, expresses only the mechanical administration of a drug, or the ingenious application of a remedial agent. Science declares the reason and the philosophy for such appliances.

In the practice of medicine, there is much that is empirical, but it is not all mere experiment and speculation. We claim to have certain fundamental principles, as land-marks and beacon-lights, to guide and govern us; and directed by these, we shall be enabled to steer our bark safely into port, and to give our patients the entire benefit of medicine, no matter under what circumstances, or under what Sun, we may find them. Guided by these beacon-lights, we shall not be very liable to err, for they will point us to a careful consideration of all the modifying circum-

stances connected with the treatment of diseases. Are we combating disease in Georgia, or on the banks of the Mississippi? In the swamp, or on the mountain top? Amongst the equatorial heats, or the Siberian snows? these land-marks will guide us aright in every instance.

With the ingenuity and the tact of art, and the engineering power of science and philosophy, we shall be prepared to encounter disease any where, and to effect all the good that medicine, in its wisdom, proposes.

Away, then, with the doctrine of sectional medicine, which requires the medical student to study where he intends to practise his Profession. If the human system and its Physiology be the same every where; if the prominent features of disease are similar, and the settled principles of treatment founded upon the same basis, how can it matter as to where—in what country or school—the physican has been educated, so that he has been taught aright. If his mind has been properly and thoroughly imbued with the great principles of Therapeutics, and if his knowledge of the theory of medicine has been familiarized and confirmed by practice, the medical man will be competent, with due care and precaution, successfully to practise medicine anywhere; and to dispense the benefits of his art, as well to the Arab as to the American; and as well to the rice farm slave, as to the mountain herdsman.

But is it true, it may be asked, that all practitioners follow and practise physic according to those established principles? or is there not much of habit and routine in our profession? I am well satisfied that the latter is true, and equally well convinced that this is one of the great sources of failure in medical practice in accomplishing its desired object. In obedience to the fact that there are generally present certain leading indications of treatment in certain classes of disease, the doctor unconsciously gets into the habit of advising a particular round of remedies in every case bearing the same name. He contracts the habit of prescribing for names instead of for symptoms. He directs his remedies to certain diseases by name, disregarding the peculiar circumstances under which these attacks have originated, and over-looking some unaccustomed, yet very important, feature they may present. Is the case diagnosed Pleurisy? the lancet must be used. Does he call it Rheumatism? colchicum is forthwith written in the prescription. Is it Inflammation? mercury is the great antiphlogistic, and must be employed. No allowance is made for idiosyncrasy, for malignant tendency of disease, or for any other circumstance. The names are recognized, and the remedy known. The employment of certain drugs, and certain recipes soon becomes a confirmed habit, and every person affected with the prevailing disease of the neighborhood, irrespective of complication of the various modifying circumstances of each, meets the same treatment. This is empirical vs. scientific practice, and cannot claim that success which is expected of medicine. The practitioner ought to study each individual case, applying the resources of his art, with care and discretion—according to all the modifying circumstances surrounding his patient. In this consists the science and philosophy of medicine.

Another prevalent error of practitioners, and particularly of those just entering the arena of practice, is the habit of looking to their text-books and relying upon them in the treatment of disease. Instead of prescribing for, and combating existing symptoms—excited by peculiarities and

various complications—they seek to give definite names to every case, and to institute that course of treatment marked out in the books for that particular case. This course is impracticable from the very fact of the diversified complication of disease. In many cases we cannot pronounce any definite name. The symptoms are heterogeneous. Perhaps we can not decide which of several diseases predominate. Here again we see the necessity of looking to symptoms and not to names, for it is often easier to prescribe for a case than to name it. Every practitioner must be his own doctor. He must cast aside his books, and act upon his own judgment in the case. Have we general principles? we must apply them according to our own judgment from the circumstances around us. The method of treatment instituted in one case may not be applicable to another case of the same name and character. So many modifying circumstances are perpetually occurring, that we cannot decide that any two cases are precisely identical.

This inclination and attempt to practise medicine from books is an unfortunate one. It leads the practitioner into many perplexities, and to constant disappointment. The success of his practice will not be commensurate with his laudable desires. The practitioner can better appreciate the exact condition of his patient, and the precise character of his disease, than can the author of his book, who has not seen the case. Upon careful clinical investigation must depend our success in treating disease, for it is only in this way that we can "find out what the matter is," and this we must do "before we can safely go to work to cure it." Book practice of medicine, then, is to be condemned because of its impracticability; and because it is less expedient than clinical tact and clinical study.

There is still another habit in the practice of medicine that is objectionable and exceedingly devastating in its consequences and tendency. I allude to routinism. It has been said that more persons have fallen victims by the hand of routine practitioners of medicine, than have ever fallen by the sword. Whether this be true or not, it is undeniable that such persons are unsafe practitioners, and are not to be trusted with the management of multiform disease. This habit consists in indulging a regular round of prescriptions for almost every case they meet—not seeking by close investigation to discriminate nicely between diseases, and between symptoms. They incline too much to the maxim of the Botanics, that all diseases originate in the same exciting cause, and consequently are amenable to the same course of treatment. The Botanics were, at one time, criminally guilty of this kind of routinism. They had one "course of medicine" through which they carried their patients, and the same "course" was repeated again and again, till the patient was cured or dead.—But "medical reform" has of late seized upon them, and they have measurably abandoned this heroic routine.

In this same manner the lancet has been most mischievously abused, and this same error is still operative in some sections. The routine practice was to bleed, and accordingly in almost every case, the lancet was popped in, regardless of the character of the pulse, the strength of the patient, or the Typhoid tendency of the disease; and many a case has thus been bled down, irrecoverably. But happily, this practice, also, has measurably yielded to the persuasions of healthful reform, and this

instrument is now used comparatively seldom. Through the same kind of habit, many of our important remedies have been employed as hobbies, and made the instrument of mischief.

In the investigation and management of disease, it is not only necessary to attend to symptoms, and to combat the most prominent as they occur, but to inquire into the organ that is suffering, and to ascertain the precise nature of the existing lesion. The practitioner must discriminate narrowly, for the same symptom may be present in diseases of very different character. But the importance of looking to these points is not recognized by the routinist. He disregards the peculiar and special feaures of the case, adhering to his accustomed habit. He knows what particular drug, or recipe he has used in previous cases, and at random he employs the same.

Cotemporary with his efforts to modify the symptoms, and to give comfort to the patient, the practitioner should inquire into the *causes* of the malady he is treating. This may be all important, for, like the "thorn in the flesh," the disease may not yield until the offending cause has been removed. It is important, in every morbid condition, to seek out the cause in order to remove it, if practicable. The maxim "Tolle causam cessat effectus," is *often*, though not *invariably*, true. This consideration is generally overlooked by the routinist. He contents himself with simply combating the phenomena present, caring nothing for the *source* of the disease, or its ultimate tendency.

We have thus reviewed several practical errors prevalent in the Medical profession, and which, we consider, fruitful sources of unsound practice. They all need to be rebuked and sedulously guarded against. In indulging them we violate the plain principles of Therapeutics, and turn aside from those scientific land-marks that are to guide and govern us in the cure of disease, and in the alleviation of human suffering. If medicine be a science then let us use it as a science, giving our patients the entire benefit proposed.

The error we pointed out in reference to book practice, is mainly indulged by the younger practitioners, who are just launching out into the field of practice. While students, they read and comprehended the books, flattering themselves with the idea that every thing would be equally plain and intelligible at the bed-side. But in this they are doomed to disappointment. They do not find things exactly as described, for no two cases are met with, which are precisely identical. Books are mainly useful by way of imbuing their minds with a knowledge of the great general principles of medicine; but when they reach the clinical room, they are left to draw upon *their own heads* as text books. They will there find demand for the exercise of *all their reasoning powers.*

There is an easy, and almost natural inclination, on the part of practitioners of medicine, to become routinists, and consequently we find the older physicians most addicted to this error, and most amenable to this charge. Insidiously habit entwines itself around their actions, and unconsciously they yield to its dominion. The unlimited confidence they acquire in their own tact for perceiving and recognizing at a glance, the precise nature and character of the case, destroys in their own minds the necessity of thorough investigation, as well as the great practical importance of scrutiny and nice discrimination.

Medical men should be always on the alert, looking out for some new feature of disease, and ever taxing their ingenuity, and drawing upon the resources of science and its philosophy for expedients adequate to the emergencies. In the midst of all our experience and imagined skill, we must not lose the guidance of reason and philosophy. We cannot safely depart from those land-marks, the general principles of Therapeutics and the established laws of medical science.

The profession of medicine is honorable, beneficent, noble! Freed from the shackles of empiricism, and the paralysing restraint of habit and routine, and guided by the engineering power and skill of science and reason, it is to be hailed as a welcome reprieve, the greatest boon from the mind of man to man's estate. Let us then as the votaries of so *noble a calling*, guard well its sacred portals. Let us seek to block up these avenues of mal-practice by thoroughly imbuing our minds with a knowledge of the fundamental principles of medical science, and bestiring ourselves to that energy and ambition that will not be content with doing less for our confiding patients than the vast domain of medicine proposes. Its design is benevolent, and its application, in order that its contemplated benefits shall be realized, must be vigilant and faithful. "Thus fortified and guided by all the lights which illumine the Profession in its present advanced and advancing condition, the practitioner will be enabled to shine as the well-informed and rational physician, happy in his own resources and a blessing to the community whose confidence is reposed in him."

From the Georgia Citizen.

MEDICAL.

Dr. Andrews: *Dear Sir.*—The following strictures were sent, as indicated, to the "Christian Index," but for reasons that I presume were satisfactory to the Editors, were not published. I have no fault to find with their evident desire to avoid making their religious paper the medium of a medical controversy, but I would suggest as the best means for carrying out that policy, that in future they select articles of a less controversial character, for their health department.

Thinking that the subject now broached, might be ventilated with advantage to the public interest, and being unwilling that such an imputation as "criminality" on the part of the "Botanics" should be passed in silence, even though conjoined with a like charge against Allopathists, I hand you the article, and ask for it a place in your independent sheet.

T.

To the Editor of the Christian Index:

Dear Sir.—In the Health Department of your issue of the 26th of April last, you extract from the "Oglethorpe Medical and Surgical Journal," the "argument" of an article by J. Dickson Smith, M. D., of Macon, Ga., which contains sentiments reflecting with unnecessary severity, on a class of Practitioners, many of whom doubtless are patrons of your paper, and would hardly expect an attack through that medium. Nevertheless, if your object be to place before your readers medical as well as theological truth, all complaint on that score will be obviated by the opening of your columns to a moderate, good tempered and respectful rejoinder.

We have no objection to urge against the exposition of the errors of his professional brethren, so boldly undertaken by Dr. Smith; *that* he has a perfect right to do, and we are bound to say that he does it most scathingly; but we have a decided objection to his placing us upon the same footing with Allopathic "routinists," as we have no desire for any such association, and would be pleased to have the opportunity of placing ourselves right before your readers, if you will indulge us in a few comments on that portion of his article to which *you* have given currency.

In order to a proper understanding of the position occupied by "Botanics," it may be necessary to state some of the points in which we seem to be agreed in reference to Allopathy itself—and first as to the character of its practices: Dr. Smith says that in that "there is much that is *empirical.*" That is candid to begin with, and far be it from us to cast a doubt upon the statement, for *we* are convinced that it is truth itself. We also subscribe cheerfully to his next proposition: "If the human system and its physiology be the same everywhere, if the prominent features of diseases are similar, and the settled principles of treatment founded upon the same basis; how can it matter as to where the physician has been educated, *so that he has been taught aright?*"

The italics are ours, and we think that makes all the difference. Upon the first part of the proposition is our system founded, theoretically, and it is the only system that gives those principles practical vitality, as will be shown.

After stating the proposition, Dr. Smith inquires, "Is it true that all practitioners follow and practice physic according to those established principles, or is there not much of habit and routine in our profession?" In reply to which, he says, "the latter is true," and "is the great source of failure in medical practice," and we are far from casting the shadow of a doubt upon the statement, so far as it refers to his own system.

He further says that Doctors contract the habit of prescribing for names instead of symptoms, which leads them into all sorts of error, and instances the mere naming of Pleurisy, Rheumatism, and Inflammation, as leading directly to the employment of the "lancet," "colchicum," and "mercury," without regard to the peculiar circumstances which have originated the attacks. This he designates as "empirical," but seems, himself, oblivious to the fact that a simple COLD will produce all three, and that what will cure the cold, will cure either of those seemingly dissimilar conditions! This, however, by the way; his idea of what constitutes "the science and philosophy of Medicine," consists of the study of each individual case by each individual practitioner, according to all the modifying circumstances surrounding each individual patient, and then "applying the resources of his art" with such "care and discretion" as he may possess, having first "cast aside his text books!" as unworthy of consultation, and constituted himself, as Dr. S. expresses it, "his own doctor." We don't quote this as one of coincidence of views; far from it—but to show that what he calls the "science and philosophy of Medicine," is just what we would call EMPIRICISM RUN WILD, in which each man pursues his own course, having no text books, and no two of them thinking alike! Having entered this "Dedalian labyrinth," just see how the Doctor gropes around. He says: "In many cases we cannot pronounce any definite name; the symptoms are heterogeneous, and perhaps we cannot decide which of several diseases predominate."

In this dilemma, he gets but poor comfort from what is understood as "treatment," for he says "the method of treatment instituted in one case may not be applicable in another of the same name and character, and the same symptoms may be present in diseases of a very different character." "So many modifying circumstances are perpetually occurring, that we cannot decide that any two cases are precisely identical!" This state of things would present a fine chance for SCIENTIFIC display, on account of the certainty (?) with which all will prescribe!

Nosology recognizes more than fifteen hundred diseases or shades of disease, each shade of difference requiring a different remedy. In the materia medica there are recognized about three thousand different remedies, that it is said are each applicable to a particular shade of disease; now, scientific (?) medicine requires that the practitioner shall not only know the particular shade of difference in each case, but he must apply the particular remedy adapted to that difference. Will any one acquainted with the evolution of numbers take these figures, and the number of Allopathic practitioners even in Georgia, and say what the chances would be for any two of them to agree once in a million of cases? And if each man is to be "his own doctor," to cast aside his books, and act upon his own idea of the case, what becomes of the science? Where is the certainty, without which there can be no science? for science is ASCERTAINED TRUTH, and the inference is fair, that it must be wanting in that system, no two of whose practitioners hardly ever agree, either as to the disease or the remedy, though they may have read the same books, heard the same lectures, and in other respects had their medical instruction identical; and the same want, perhaps, explains the fact that what has been regarded as quackery in one age, is accepted as scientific truth the next, and in the next is thrown aside, as the most arrant and destructive humbug!

Disease, according to the Doctor's estimate, must be some dancing devil, or Frenchman's flea, the "symptoms" of whose presence must be "discriminated very narrowly," "in order that the most prominent may be combated as they occur," by giving just the proper remedy at the proper time; devolving upon the physician the double duty of watching the remedy as well as the disease, in such way as to enable him above all things, to avoid another habit which Dr. Smith says his brethren have got into, which is "objectionable and exceedingly devastating in its consequences," viz: "routinism," in giving a description of which, his candor is greatly in excess of his prudence—especially when, in referring to bleeding, he gives an instance; he says "the routine practice was to bleed, and accordingly, in almost every case, the lancet was popped in, regardless of the character of the pulse, the strength of the patient, or the typhoid tendency of the disease, and many a case has thus been bled down irrecoverably!" That is, bled to death. And nobody that recollects the common practice of twenty years ago—that then was considered scientific, and for denouncing which, medical reformers of that day were called quacks—will gainsay that proposition; and but few will doubt his correctness when he says that, happily this practice has yielded to the persuasions (demonstrations?) of healthful reform, and this instrument is now used comparatively seldom. Dr. Smith is no doubt right again when he says, "Through the same kind of habit, many of our important remedies have been employed as hobbies, and made the instrument of mischief, having been,

without regard to the causes of the malady, given at random!" That is saying a good deal for the system the world has so long been trusting for life and health, and considering the fact that the "important remedies" belonging to that school, are confessedly the deadliest poisons, and that Mercury and Morphia have been the principal "hobbies," the admission that they have been given at "random," justifies the statement that the results have been exceedingly devastating, and we honor Dr. Smith for the manliness with which he has come forward to confess it.

We think, however, that he is mistaken in attributing all the "mischief" to "routinism," for there could be no harm in giving a safe medicine repeatedly, if the exigencies of the case required it, to effect the object in view; and if the physician knows just what is needed, and knows at the same time that the remedy he prescribes will effect that result, just as certainly and indubitably as food relieves hunger, or water thirst, it would be "criminal" in him if he did not persevere in its use, and repeat it until the object be attained in the one case, just as it is in the other, and if the process be somewhat routine, it will correspond none the less certainly with all the other operations of nature, of which scientific men have any knowledge; and the fact that so much trembling watchfulness is necessary to what Dr. Smith thinks a proper method of administering Allopathic remedies, proves that certainty of result cannot be one of their attributes; and we would advise that those articles which require such close watching to keep them from doing "mischief," be shunned as men are, who require to be subjected to the same process. The practitioner that cannot calculate the effect of his remedies with almost mathematical precision, and is not able at the same time to apply them on scientific principles to the case in hand, is compelled to grope in the dark, and must be very careful and watchful, or he will, if using poison, do "mischief;" and hence the application of the term scientific to such proceedings would be a misnomer, and it would only require the dismissal of "text books," and the constituting of "every man his own doctor," to make them the very essence of empiricism and quintescence of quackery.

The "thorn in the flesh," instanced by the Doctor, is an apt illustration; for in all cases of disease "the offending cause must be removed." How is that done in the case of the thorn? If removed at once, the disturbance is slight and no diseased condition of consequence follows; if not removed, a certain action is set up called inflammation, which some doctors might try to subdue by bleeding perhaps; but as that is evidently intended for the removal of the thorn, others would more scientifically encourage and assist in such a way as to attain the desired object as soon as possible; heat and moisture would be employed, in the shape of poultices, to the part, and a little internal stimulus might be used to give vigor to the circulation, and though the practice might be "routine" and would have to be repeated and repeated still, yet the practitioner would not have a doubt of his success, even from the first, and if there be sufficient energy in the system he must succeed; there can be no doubt about it, because the practice is based upon laws just as certain as those that sent Newton's apple to the ground, or that maintain the worlds in space. But there might be a thousand thorns or obstructions in the flesh, and a high degree of inflammation indeed would be got up for their removal, but would that change the principle? The aim of nature, so to speak, would be the same

in both instances; bleeding, in the first case, might only partially thwart her efforts—in the last, it might be fatal, because by it the forces are destroyed that are brought to bear upon them for their removal; but if assistance is rendered by applying heat and moisture externally, and the internal energies are increased, not destroyed, the result is again assured unless both the energies and assistance be overtaxed. Well, if thorns by the thousand can be thus removed, may not smaller obstructions by the million—giving rise to the state called fever—be also removed on the same principle, and if your agents are well chosen, by the same means; and if we can, by stimulation and relaxation applied both internally and externally, control fever and inflammation invariably, and have our agents few and well chosen, would not that be reducing Medicine to a science in fact, and casting to the winds the crude and heterogeneous notions of bygone ages, that have hitherto had, without meriting it, the name? Well, if fever and inflammation be thus controlled by agents that act in perfect harmony with the laws of life, neither poisoning the system nor withdrawing the blood, in what consists the "criminality" of their frequent repetition? Does not the criminality rather consist in the closing of the eyes to such light as Medical Reform 'par excellence' has thrown upon these subjects, and with willful and inveterate prejudice clinging to obsolete notions "that confessedly lead the practitioner into many perplexities and constant disappoiniment, and result in consequences exceedingly devastating?"

But the Doctor thinks a routine practice can never be scientific. If so, Medicine is the only exception, for every thing scientific in other respects is routine, and we maintain that nothing really scientific can be otherwise. The laws that govern chemical affinities are so unvarying, that the absence of a single condition is fatal to the desired result. The operations of mathematics are all routine, and the surveyor of to-day can track his predecessor of a hundred years, by due observance of them; the astronomer of to-day, by the routine calculations of mathematical science, can foretell the eclipses of the sun and moon, the planetary transits, the distances of the heavenly bodies, &c., just as well as Newton could; and by the same routine calculations, the mariner can navigate his ship over the trackless ocean with as much certainty as if he had finger posts and milestones all the way! But let either of these despise the routinism to which science subjects him, and he, like the Allopathist, soon finds himself at sea without rudder or compass, the sport of every wind, till brought up suddenly on some hidden rock, when, with "exceeding devastation" all around, he is able to appreciate the state of those who give "peculiar drugs at random."

But 'routinism' does not stop here; it is evidenced in all the physiological laws that govern the animal economy; eating and drinking, secretion and excretion, are always going the same rounds from day to day, throughout the generations of men, and will so continue; and if so, why should it be supposed that no routine laws control disease, making it subject to a routine "course" of treatment, that may be repeated with the best effects, should the first effort fail in producing the desired result.

A "course" of Medicine that may thus be relied on, the "Botanics" have adopted and practiced with such success that the most ignorant of them have cured diseases that the most learned Allopathists have abandoned as

incurable; and though efforts have been made repeatedly to trace some "mischief and devastation" to that treatment, not a case has occurred in which it could be substantiated. There is, therefore, nothing "criminal" in the routine of the Botanic "course;" that there is in the Allopathic, we have the evidence of Dr. Smith, and a host of others to prove; and we trust that henceforth its advocates will speak of it with that modesty that becomes their acknowledged position, and though misery loves company, refrain from their attempts to drag down to their own level that of the "Botanics." Respectfully, M. S. THOMSON, M. D.

Abuse of Medicine. By J. Dickson Smith, M. D., Macon, Georgia.

It has been a question in the minds of some, as to what extent the world has been benefitted by medicine. Or whether—in the aggregate—it is not doing as much harm as good. It is humiliating to the votaries of medical science, and to those engaged in the practical duties of the Profession, that such a question should, in this day of medical progress, be propounded. Indeed, to think that all the efforts that have been made by men, in every age of the world, in behalf of mankind's depraved physical state, and to rear medicine to the stature of a science, have proved only abortive, is enough to humiliate the pride of the profession.

For thousands of years men have been laboring in this benevolent cause. The genius of human intellect has been taxed to its utmost. The human system has been carefully dissected: every artery, and nerve, and fibre traced to their ultimate microscopic terminations. Phisiology, and all the laws of life, have been thoroughly studied. The system in all the minutia of its parts and functions, has been faithfully examined, in health and in disease. The universe has been scanned for antidotes to disease, and for remedies to counteract its fatal effects. The Materia Medica has been studied in its mechanism and modus operandi in the cure of disease. From a vast accumulation of empirical facts, men have endeavored to deduce general principles, and to establish a rational system of cure.

But have all these indefatigable efforts to build a science, whose avowed object has been the melioration of afflicted human nature, but resulted in the perpetration of a system whose benefit is blight, and whose "balm" is death? Is it true, after all, that there are no such things as remedies? and that physic is a humbug? Nay! the science of medicine, correctly viewed and properly applied, is not to be considered a humbug, but a God-send to suffering humanity. As one of its votaries, I exult in its achievements, and consider that the world could not dispense with its benefits.—There is a "balm in Gilead," and there is truth and virtue in the "healing art." The draught, as administered by the intelligent physician, has given comfort and assisted nature in the restoration of health. The timely dose has stayed the sentence of death, and added years of usefulness to the criminal's life, as avouched by the testimony of myriads of living witnesses. According to the lowest estimate that can be justly formed of the medical art, it must hold its pre-eminence as one of the greatest boons that human intellect has ever elaborated for the benefit of man's estate. With all its feebleness, and all its uncertainties, it possesses, and ever

must possess, a sufficiency of solid truth and solid power to make it worthy of the study and pursuit of the noblest intellects and tenderest hearts.

From what source, then, comes this inquiry, as to the aggregate results of the use of the various remedial agents employed in the treatment of disease? Evidently from the noted ill-consequences resulting from these agents indiscriminately employed. From the prostitution and abuse that has insidiously crept into medical practice. That healthful system of medication, suggested by sympathizing nature, and reared by the strong arm of science, has been most wrongfully prostituted. Remedies that promised good have, by reckless employment and profligate use, effected only mischief.

In order, correctly and fairly, to answer the question as to whether medicine is doing as much harm as good, it will be necessary to take a general view of the employment of remedies. The doctor must not alone be held responsible for all the damages claimed at the hands of physic, for his office has been illegitimately used, and his power usurped by the ignorant masses. We must look, then, at physic as employed unauthoritatively by the people, as well as by those legitimately authorized to prescribe and administer it. We must consider it as in the hands of the vain and mercenary pretender, and the conscientious philanthropist. We must estimate its results as administered by the reckless, incautious practitioner, and as carefully advised by the accomplished and scientific physician. We must look at medicine as dosed out and swallowed, by every body, and in every possible form and shape—rational medicine, and quack nostrums—patent panaceas, elixirs, &c.

If we look upon the picture as thus drawn, the view is anything but gratifying. If here we attempt to answer the question, whether medicine cures more than it kills? the nerve of the candid medical man will tremble in pronouncing the decision. If, however, the honest answer as extorted, should tend to disparage the legitimate members of the profession, the explanation has already been indicated. It is found, not in the assumed fact that there is no truth, no reality in physic, but in the fact of its misapplication and reckless abuse.

The medical art is in high favor with the people. It comes to them by tradition, as a "divine art," and in view of the fact that they have such instinctive confidence in remedies, and know so little of the powers of nature in curing disease, it is not strange that they should employ them extravagantly. If the doctor will not dose them with rational prescriptions, they will drench themselves with domestic remedies, and the various patented "stuffs" flooding the country. This is truly an age of "doctoring" and the business of dosing is far from being restricted to the M. D. and regular licentiates. The sovereign right is claimed by the people, and they exercise it without prudence, discretion, or restraint. Every body is a doctor, and knows something that is "good" for every disease. The world is flooded with "cures;" prescriptions, from the simplest domestic recipe, to the most absurd, heterogeneous combination of stuffs. The amount of physic consumed in this way is really enormous, and the aggregate of mischief done utterly incalculable. In consequence of this, much discredit has been brought upon the medical art; and in this way, has medicine acquired much of its unwholesome reputation.

It is strange, then, that medicine should be charged with doing mischief?

Or is it not absolutely certain that it really does a vast deal of injury to the human family? used as it is, abusively, in ignorance and stupid credulity.

This habit of drugging is not at all restricted to cases of disease, but is indulged officiously to the interruption of comparative good health. For every pain and ache, they must "take something," and nauseous draughts are thus administered in thousands of instances where there is no occasion for doctor or medicine. Admitting there may be some trivial disturbance of the system, the unaided efforts of nature would perhaps, be fully adequate to the task of restoring healthy equilibrium. In all such cases, let the claims of physic be ignored, and nature trusted to regulate her machinery in her own peculiar way. A well directed regimen, and careful observance of the laws of health, will effect more towards regulating the system and maintaining good health, than doses of physic.

Infants and children are sadly the recipients of this reckless and imprudent practice, and the extent to which it is indulged by nurses and mothers, is quite astonishing. It amounts to an outrageous abuse. These helpless little victims are drugged on all occasions, with all manner of physic, to the annoyance of health and destruction of life. Many a dwarfish looking child, and many a bereaved mother may bear testimony to this fact. A little more sun-light and exercise in the open air, and less physic, would produce a salutary change as regards the physical appearance and development of children.

Doctors themselves are chargeable, to a considerable extent, with the same crime. They are too much inclined to distrust nature, and the inherent powers of the system in the cure of disease, and to indulge implicit confidence in remedial agents. The consequence is that they give physic too often and too much. There is an evident tendency in most attacks of acute disease to terminate in health when left alone to nature's own resources. Particularly is this true in reference to the diseases of children. Their systems are full of life and vigor and recuperative energy, giving them the power of resisting the onslaught of disease, and the ability of repairing its ravages. We are not to suppose drugging essentially necessary in every case. The restorative powers of the system, without any artificial aid, suffice, in the majority of instances, so to modify the actions constituting disease, as to relieve or cure them.

There is too great precipitancy, often, on the part of the practitioner in the administration of his drugs. The principle is the same upon which a medicine may "cure" or "kill." If it be possessed of power, that power may be wielded against the patient and not for his good. It may aggravate, instead of calming the violence of the malady. It cannot be doubted that diseases, which if undisturbed, would have spontaneously terminated in health, have often received an unfavorable turn from officious interference. "If we would study the dangers as well as the virtues of every drug we use, and their relative powers upon the system, in its varied conditions, we would be better qualified to do good and avoid evil." The risk incurred in the exhibition of a drug often overbalances the prospect of good. Physicians should consider well the responsility that is upon them, and the power that they wield in the use of these mighty medicinal agents. That these trusts are often abused, there can be no doubt.

Another error, common among practitioners, is the reckless and excessive employment of physic. Many a patient has been over-dosed, and the doctor's heart made to bleed with anguish and remorse at the mischief he had done. He gave that dose of Morphia inconsiderately, not weighing well all the circumstances and peculiarities of his patient. The drug was a potent one, the dose too large, and alarming narcotism was the consequence. The patient was well nigh being killed instead of cured ! Is not this the confession of many a practitioner of medicine ?

The young practitioner, in his indecision and want of nice discrimination, and the "Old Fogy" in his vaunted knowledge and tact from experience, are too much inclined to fly from one drug to another, and to repeat, in rapid succession, their doses—not allowing sufficient time for the action of each. In this way too much medicine is given, their effects accumulate in the system, and an excessive out-burst of action is ultimately the result. I would repectfully suggest, whether practitioners generally do not give too free indulgence to their propensities for dosing ? Whether we are not too much inclined to persist in giving active medicines during the whole course of disease, to the neglect of other valuable adjuvants, such as diet, regimen, &c. Are not patients frequently worried and oppressed with incessant dosing ? no time being allowed for the system to react, and no play given to nature's restorative powers ? Let us stand aside at the proper time, that we may admire the ingenuity and tact of nature, in regulating her own functions, and restoring a healthy equilibrium. Greater wisdom may be displayed in the withholding of medicine, than in prescribing it. We are to assist nature, but in no case to trammel her own tact and skill.

Let us look well to this point, and be sure that we, in our zeal for doing good, have no cause to reproach ourselves for having done positive mischief. Our curative remedies are but few, and our office, as physicians, mainly restricted to the assisting of nature, by placing the patient in that position most favorable for the operation of nature's laws, and removing obstacles to the favorable action of her conservative powers.

The Lancet and Calomel, Lobelia and Steam, have all had their run as routine and hobby remedies ; the respective powers of each have been dreadfully abused. Opium—by far the most valuable article of the Materia Medica—has done an incalculable amount of mischief in the world. Empirics know not its potency, and even the well informed physician is apt to become careless and unguarded in its use—forgetting that it is an instrument of death, as well as a soother of pain.

The nature and character of the diseases now prevalent in Middle Georgia, call loudly for reform as regards the employment of very active, heroic remedies. The lancet cannot be safely employed—as formerly—even in active inflammatory affections ; and all depleting and drastic remedies, are to be used with much caution. There is an evident tendency in disease of late years, to assume a low, typhoid character—a tendency to prostration of the powers of life. This feature of modern disease enjoins the necessity of husbanding the strength of the patient, frequently from the very commencement. The powers of life must be sustained, or else in the declining stage, the patient will fall an easy victim to debility.—We meet much of typhoid fever, in which purgatives and drastic medicines are death to the patient, and in which the best motto generally is to

give as little physic as possible, sustain the patient's strength, "until nature cures the disease."

Fortunately, however, these important facts have not been entirely unobserved by the watchful eye of science, and a healthful spirit of reform is already dawning upon us. The practice of medicine is not what it was twenty years ago. The change is owing both to the spirit of progress, and to the vigilant observation of the fact already indicated, that the character and types of disease have materially changed within this specified time, and requiring corresponding modifications of treatment.

It behooves us, then, to exercise great care and discretion in the use of the means we employ to combat disease. Let us use so as not to abuse them. Let us give physic only when it may be clearly needed, and when the indication is at all doubtful, let us throw the responsibility upon nature. Better do too little than too much, for we have seen that officious medication results disastrously. The safest rule is to employ the simplest remedies capable of fulfilling the existing indication—resorting to desperate means only in desperate cases.

Dr. Andrews:

Dear Sir.—Much to my amusement, I notice in your issue of the 17th inst., a "rejoinder," by M. S. Thomson, M. D., to an extract made by the "Christian Index," from an article of mine published in the April number of the "Oglethorpe Medical and Surgical Journal," of Savannah.

In reply, and as an all-sufficient defence of my article from the uncalled for sparrings of Dr. Thomson, I submit the *article entire*, as it originally appeared in the Journal, and ask you to spread it before your readers. Let them read and "ventilate" it for themselves.

The prominent errors that I pointed out—as proceeding from unguardedness and a want of proper vigilance on the part of my Allopathic brethren—are defended by Dr. Thomson as the *true principles*—the *fundamental doctrines* of Botanic Medicine. *Routinism* has no *legitimate* existence in Allopathic Medicine, and it is candor—*noble*—in Dr. Thomson to acknowledge the fact that it is an *essential integral* in the structure of the whole system of Botanic practice.

I meant no fight upon the Botanics. I intend not to combat error as a *radical defect* in another system, but to rebuke it as a *wolfish intruder* into our own borders. I had no knowledge of, or agency in the re-publication of "that portion" of my article by the Christian Index; and that all may know what it is that Dr. T. is cutting at so fiercely in his *ex-parte* "rejoinder," I hand you the original paper, which, *in itself*, contains all the defence that I shall offer—through this medium—to sustain its *truth* and its *proportions*.

Respectfully, J. DICKSON SMITH.

From the Georgia Citizen.

MEDICAL.

Dr. Andrews: *Dear Sir.*—However much "amusement" Dr. J. Dickson Smith may have found in the subject that gave occasion for my "rejoinder," or even in the "rejoinder" itself, I apprehend that it involves matters of too serious import to be so lightly thought of by the community, for if his own statements are credited, they occupy the position of the frogs in the fable, for what seems "sport to him may be actual death to them," and if the "errors" of the Allopathic system are such as he feels constrained to designate "*wolfish intruders*," it becomes an act of prudence on their part to see to it that they be driven from the fold.

Taking this view of the case, and presuming that the Doctor was in earnest in his endeavors to correct those "errors," and not writing merely for his own "amusement," I deemed it proper so to emphasize his "facts," as to call public attention directly to them, with a view to the better accomplishment of his laudable purpose; at the same time that I endeavored to disabuse the public mind in relation to certain statements he had made, not germain to the issue, but which were calculated to mislead in a matter involving questions of life and death, happiness or misery to the whole human family. I, therefore, think that my remarks were *not* "uncalled for," neither were they "*ex parte*," seeing that they were, in great part, but a repetition of his own statements, which for "fierce"-ness of assault and "cutting" invective against the practice of his own brethren, I have not seen equalled in this locality, even by the "Botanics," and if they, either from consciousness of the truth of the accusations, or the want of ability to defend themselves against them, choose to let them pass without notice, that is no reason why we, oppressed with no such consciousness, should not exert the power that God has given us, however feebly, in defending from unjust aspersion our own conduct, as well as the glorious cause of Medical Reform, that in some sense has been entrusted by Providence to our hands. Though I am thus ever ready to defend the cause I advocate, and at the same time "give a reason for the faith that is in me" medically, I yet have no quarrel with Dr. Smith; indeed I have but little knowledge of him---only from his writings---and, judging from them, I must say that I admire his candor and applaud his pluck in "rebuking" that "*wolfish intruder*," while others have so long shown themselves only intent on putting on it "*sheeply clothing*," and as I had been engaged, frankly, openly, and aboveboard, for the last twenty-four years, in exposing the "*wolfish*" character of the animal that has been flaunting those vestments in all the security of seeming innocence, I was greatly pleased to welcome to the field such an efficient ally as the Doctor has shown himself to be, and the publication of his first article in your columns, and his second in those of the 'Journal & Messenger,' enables me to point with confidence to two of the most destructive broadsides that Allopathy in Georgia has yet sustained. It is true he does not enter that field of conflict with the same views that I entertain, however much they may tend to the same result; he attacks the *conduct* of his *brethren*---I, the *system* on which they operate; he accuses them of producing "*only mischief*" by the careless, reckless, and profligate use they make of remedies which are *poisons*, I denounce the *system* of giving *poisons* in its totality, and maintain that *nothing but mischief*, in some shape, can result, sooner or later, from their administration, no matter how carefully or skillfully they may have been administered, for I believe, with Dr. Smith of the Boston Medical & Surgical Journal, that "*poisons*, however they may differ in other respects, all agree in this, that they rapidly and certainly diminish or extinguish the vitality of the system." He upholds the *anti-phlogistic system* of medication, while he denounces as the result of carelessness, the "*mischief*" that necessarily follows the use of anti-phlogistic remedies; I denounce the *system and the remedies*, and maintain that the anti-phlogistic or depleting *theory*, is the true cause of all the "*mischief*," for on that is founded the *supposed* necessity of using such destructive agents, and until that *fundamental* "*error*" is corrected, Dr. Smith may as well dash straws against the wind as hope to eject that "*wolfish intruder*;" for it has been to meet that *supposed necessity* that bleeding came in vogue, and the whole host of weakening and depleting remedies have been invented; and the moment the medical mind is disabused of that absurdity, the whole tribe of them becomes useless, and the sustaining and invigorating remedies of the Botanic or Phlogistic system, will take their place.

Much, however, as I denounce the *system*, and believe the exhibition of the remedies (?) in use, destructive to health and life, I must yet say that I cannot

endorse the Doctor's estimate of those who practice it, for though mistaken in their views, as I believe, and full to repletion, as they generally are, of the prejudice of education, I should not be doing them justice as a class, did I neglect to say that I think far more highly of them than it seems he does, and appreciate to the full the difficulties of their position, when their "*hearts are made to bleed with anguish and remorse at the mischief they have done*," not because they may have given "Morphia," or any other poison, "*inconsiderately*," but because in obedience to that theory they are *compelled* to do it, in order to carry out what they have been taught and conscientiously believe to be right.

It is no business of mine to decry the *men*. Many of them are nature's noblemen, and Macon, I am pleased to say, need not be left to go in search of them, but from mistaken views, and being constantly in the use of agents that destroy, I am not prepared to say that even they have not been subjects of that "*anguish and remorse*" that Dr. Smith says is the "confession" of many practitioners. Neither am I prepared to say that they have "*dreadfully abused*" the powers of the agents they employ, though I have no doubt, that between them, their patients have sometimes been subjected to "*dreadful*" sufferings.

Supposing the Doctor to be correct, however, in stating that "the healthful system of medication has been most "*wrongfully prostituted*," that "the remedies that promised good have, by reckless employment and profligate use, effected only "*mischief*," and that the "powers which physicians wield in the use of these mighty medical agents is, *without doubt, often abused*,"—what is to be done? We cannot depend on "Books," says Dr. Smith, nor on the "indecision and want of nice discrimination" of the young practitioner; neither can we put confidence in the "Old Fogie," in his vaunted knowledge and tact from experience. What then? And the question still recurs, WHO is to be trusted? I say, unhesitatingly, that man, and that man only, who uses none of them, who eschews ALL poison, draws no blood, but who, "removing the obstacles that exist to the favorable action of nature's conservative powers," by means that act in due conformity with the laws of life, and as unvarying as those laws themselves, thus giving nature the needed chance of "regulating her own functions" and restoring "a healthy equilibrium." That this is being done daily, without the intervention of a single poisonous dose, or the loss of a single drop of blood, is patent to all unprejudiced observers, but as in days of old, "Ephraim was joined to his idols," so in our times, "none are so blind as those who WILL not see," and if in this matter, the blind continue to lead the blind, and both fall into the ditch, or open grave, who shall say that such a fate is not deserved, if the warning voice of Dr. Smith be still unheeded?

But, however much the Doctor and myself may be agreed in regard to the necessity of a radical change in the *system*, on my part, and the present *mode* of procedure on his, there seems to be no likelihood of our concurrence on the subject of his great bugbear "routinism." Such a "*dreadful*" significance is attached to it by him, that I verily believe he would go without his dinner, rather than trust for the support of nature to-day, the same 'routine' dish that sustained him yesterday; and if he is as distrustful of nature on the subject of nutrition, as he evidently is on that of disease, the office of his cook can be no sinecure---for I presume he calculates with "nice precision," the particles of food necessary to building up the various tissues of his body, allowing so much for hair, so much for bone, and so much for nails, skin and brain, and is very "watchful" for the "symptoms" that indicate exuberance of either, that he may "combat" them as they arise!

He appeals strongly to Therapeutic *laws*, at the same time that he declares that "routinism has no legitimate existence in Allopathic medicine." No *routinism*---and yet we have *laws*. What an anomaly! They are laws because

they are "routine," and it is their unvarying character that makes them such; for, without "routinism" there can be *no laws*---and that mode of medical practice that has no "legitimate routinism," is no *system* at all, and must, of necessity, be *empiricism.*

For what purpose do we give Emetics, Cathartics, Diaphoretics, Diuretics, Expectorants, Sialagogues or Errhines? Is it not that each may produce its "routine and legitimate" effect upon the system? and would we not call a man a fool who showed himself so ignorant of those "routine laws" that govern their action, as to give the one for the other, and then wait expectantly for the desired result? If we give an emetic, does not the patient vomit? If an expectorant, shall he not spit, and if a good errhine, must he not sneeze? Yea, verily; and however routine it may seem to the Doctor, even *he* must put in exercise his "routine" knowledge, if he would succeed in effecting the one or the other, in a scientific way.

That such "routinism" does exist in, and form an "essential and legitimate integral" of the *system* of Botanic practice we advocate, will always be acknowledged with pride, and pointed to with pleasure, and I do not despair---considering the discontented state of the Doctor's mind with his own system---of yet convincing him that ours is the only rational theory of disease, that is sustained throughout by the adaptation of such agencies, as by *always sustaining the natural effort* results in the ejectment of that "*wolfish intruder*," disease.

Respectfully, M. S. THOMSON.

DR. SMITH'S "DESIGN."

The reader who has attentively perused these pages thus far, will be posted as to the state of the controversy up to the time of the appearance of the Pamphlet to which reference has been made, and if he has saved a copy, will be able to enter with us understandingly, upon the further consideration of the subject.—To those who have not seen the Pamphlet, it is necessary to state its "design," which Dr. Smith says was "to explain and illustrate some of the main points in his article on Rational Medicine, and to enlighten the popular mind on the subject of Thomsonism, and to show it up in its true light."

In pursuance of that "design," the Doctor reiterates many of the charges against his Professional Brethren which he made in his first article, and on some of which we took occasion to compliment him, for the manliness with which he had came forward and made them, and endorsed them, so far as they applied to Allopathists; and must now say that the ability he displays in *proving* his points, and the pertinence of the points themselves, places "*some*" of the Allopathic fraternity *where he has been*, in very awkward circumstances, for he brings *home* his charges in the Pamphlet, and says that the "*mischievous errors*" that he had pointed out in his "simple" way, were such as he had "noticed" and "observed" in his ten years' practice, seven of which have been in the county of Monroe, and three, it is presumed, in that of Crawford!

He also reiterates some of the statements that we took occasion to remark on, and explains his meaning, at the same time that he endeavors to heap ridicule on the positions taken by us, though

the argument with which he meets them is rather sparce, and based upon assumptions that have little, if any foundation in fact, as will be shown.

In pursuance of his "design" to "enlighten the popular mind on the subject of Thomsonism, he takes up, Rip Van Winkle like, the oldest edition of Thomson's Guide to Health, we presume—since we cannot find his quotations in the tenth edition which we have—and, after the fashion of fifty years ago, when Dr. French flourished in Massachusetts, or, of a more recent, though still ancient period, when Dr. Deloney wrote for the Georgia Federal Union, against the same system,—meets with ridicule and sneers the pretensions of a system that then was in its infancy, but which now, having withstood the jokes and jeers of more than half a century, and overcome all open opposition in the shape of legal disabilities, claiming and retaining the confidence of a respectable minority of the people of these United States, has reached the period of life that as compared with other medical systems, that have "arisen, flourished, fallen and been forgotten," is respectable age! Yet, this system, that has now its Colleges throughout the country, and its principles elaborately set forth in large volumes of more than a thousand pages, is still represented by Dr. Smith, as depending on that little book of very antiquated date, for direction and guidance, and even then, before he *dared* introduce it, must *garble* it so that its own author would never acknowledge the paternity, by a system of quotation, which if pursued with the Bible, would result in the proof by the inspired writer, that "there *is no* God."

He repeats the long exploded dogma that Lobelia will *kill*, and quotes Thomson's description of the "alarm" as proof positive that it *will*, although in that, he states distinctly that it will *not!* He holds the six numbers of Thomson in great derision, as being entirely inadequate to the requirements of the Practitioner who would treat "multiform disease" scientifically, but is careful to withhold the information from his readers that there are *now* more than four hundred well established remedies belonging to our system! at the same time, he admits in his article on the abuse of Medicine, that "*their curative* remedies are but few," and every body knows that if they were deprived of even *four* of their principle agents, they would be at their wits' end almost, and sadly at a loss for expedients by which they might replace them. Take away, for example, *Opium*, *Mercury*, the *Lancet* and the *Blister*, and what would be left to Allopathy as known among the people, but the *rowelling implements*, *arsenic*, *digitalis*, *prussic acid*, *wolfsbane*, and some other such articles; so that all the gasconade that some writers indulge in about what is acquired from the tops of the mountains and bottom of the sea, is thrown in for Buncombe, with a view to its effect on the gullability of the "ignorant masses."

Dr. Smith says that "Dr. Thomson was repeatedly indicted for killing his patients, and in one case, heavy damages were obtained," but though we have read Thomson's narrative throughout, we cannot find the record of it, but have the evidence of Prof. Waterhouse, of Harvard University, which is the direct antithesis of Dr. Smith's statement.

In his Pamphlet, Dr. Smith denies that Samuel Thomson was the discoverer of the Medical properties of Lobelia, but does not favor us with the proof, though he asserts that it was already in the Materia Medica; but if he means by that, a printed Materia Medica, we take issue with him and will give an hundred dollars for a copy of the book! "He did not discover *steam*," we admit, for that had been in use among the Turks and Russians, and held as among their greatest luxuries for centuries before, but that "steam had been propelling steamboats many years" previous to the time when he applied it to his second daughter, to bring out the measles, in 1787, we deny, and have no doubt that any "school boy," even though a "*Gump*," could teach the Doctor better.

The Thomsonian *course* comes in for a goodly share of the Doctor's wit, though he seems entirely oblivious of the fact that it contains in itself almost every known Therapeutic agency that even those who treat "*symptoms*" recognize as essential in medicine.

These, and a great many other statements of a like character will be recognized by Reformers who read the Pamphlet as *old*, but Dr. Smith has discovered something new at last: He says that Thomsonians inculcate the idea that "*no vegetable remedies are poisonous*," and has the effrontery to predicate an argument containing some very pretty platitudes in relation to the known properties of prussic acid, opium, &c., upon such a basis! as if he really believed or could prove that any Thomsonian had ever said or written any such nonsense!

In this connection he takes Thomsonians sadly to task for daubing "us with the name Mineral Practice," and says, "they would have the world believe that *their* Materia Medica is made up *alone* from the Mineral Kingdom, and that the Vegetable Kingdom is not represented at all in their Catalogue of remedies, and reiterates, as if it were really so, that they, the Thomsonians, "leave the impression upon the ignorant masses, that nothing like a poison is known or can be found in the Vegetable Kingdom!"

Now if Dr. Smith knows no better—to quote his own words—"*we pity his ignorance*," for it is well known to every body else that we denounce the use of *poison* from *every* kingdom in nature; that we especially deprecate *vegetable* poisons as being most virulent and rapidly destructive, and find fault with Allopathy, not because it uses vegetable medicines, but because it enters that kingdom and in accordance with the *axiom* that "a medicine to do good *must* be able to do *harm*," selects the *worst* it can find, and rejects as worthless the life-sustaining, health-restoring reme-

dies that a beneficent Providence has so lavishly planted there! but as we said before, "so long as Allopathists adhere to the anti phlogistic *depleting* theory or system of treatment, so long will they find themselves *compelled* to give *poison*, and just so long will the most careful, conscientious and humane practitioners be filled with anguish and remorse for the mischief they have *innocently* done in following the *frightful* behests of such a theory.

Thank God! the light that has so long been clouded in these United States, has at last reached the seats of learning in Europe, and the principles that guided the immortal Thomson more than sixty years ago, are being reflected even in the University of Edinburgh, that has long in medical matters given law to both Europe and America, so that in the year 1858 the great Professor Bennett, after an eight years' test of a practice that "*instead of lowering supported the vital powers, and assisted the excretion of effete products from the system*," (Thomsonism to a T) declares, and proves it by the hospital books, that "the mortality of pneumonia has been diminished from 1 in 3, when treated on the old plan, to 1 in 21 cases," when treated on the new; and from his experience "cannot resist the conclusion that *the principles that led to an antiphlogistic practice in acute inflammations were erroneous, and are no longer in harmony with the existing state of Pathology*"!! (Clinical Lectures on Principles and Practice of Medicine, 2d ed. pp. 287-8); and yet Dr. Smith is so presumptuous as to affirm that the "existing state of Pathology" but *confirms* the truth of his system. "Knowledge," he says, "has been added to knowledge." "The present improving on and adding to the experience of the past," and thus it has "grown and strengthened," "*confirming* its parts and proportions," "and to-day," he says, "it stands a polished structure of truth and power, its summit far outreaching the petty isms and piratical humbugs of the age."

"HUMBUGS!!"

"Who shall decide when Doctors disagree?" Prof. Bennett says, the *principles* on which that "polished structure" stands are "*erroneous*," and "no longer in harmony with the existing state of Pathology," *i. e.* recent discovery has shown that their *philosophy* was *wrong*—Dr. Smith says it but "*confirms*" it!!! If the *principles* be *erroneous*, what can the system be that is *founded* upon them? If the foundation be insecure, how can it lift "its summit" even above the "pettiest ism"? Or how can the system that has such pretensions show its face among honest men at the very moment that the brightest intellect of its highest seat of learning is proclaiming to the world, that the very *principles* on which it is *founded* are *erroneous?!!!* And yet Dr. Smith prates about "*Humbugs*," and calls them "piratical," in the presence of the fact that the immense wealth of the Medical Profession has been

wrung from society through the instrumentality of depleting appliances, that not only robbed men of their wealth, but of their *lives* in the proportion of 1 in 3, when it is demonstrated that 1 in 21 need only have been lost!! "Humbugs"! "Piratical Humbugs"!! Man-slaying Humbugs as here CONFESSED!! Property-appropriating "Humbugs" as here demonstrated!! What Allopath can read the plain statements of Prof. Bennett, and not feel that he himself has been the victim of a "humbug" of the most gigantic sort, when suffering himself to be the instrument of *poison* distribution to the human family upon principles that are proved to be "*erroneous*," and so destructive of life that seven times more mortality has resulted than need to have followed their treatment, had they but "*instead of lowering, supported the vital powers, and assisted the excretion of effete products from the system.*" Had Thomsonism been embraced sixty years ago, what a saving would have been effected in human life! Could it but be adopted now, how many now alive would be saved from falling victims to such terrible practices as result from those "*erroneous antiphlogistic principles.*" Those yet unborn may see a better time, for the key-note has been sounded from head-quarters and now all the Allopathic musicians will strike up the same tune; and when it is known generally that mercury and bleeding lose 1 in 3, while stimulating and sweating lose 1 in 21 only, the rush for places on the Thomsonian platform will be "wonderful," while Allopathy as *now* known will be forsaken, as rats desert a sinking ship!!

Such as it is, however, Allopathy is the "Profession" to which Dr. Smith has "consecrated his life," and he feels obliged to do "whatever he may be able to promote its interest and accelerate its progress," and we have no fault to find with him for that, for if he thinks he is right we like him all the better for standing up for his principles, but if he *will* persist in viewing the "gigantic stature" of that "noble structure" through a powerful magnifier, and is determined to reverse his telescope when he looks at every other, he must not be offended if his judgment be questioned by others who see things through a medium less capable of exaggeration. We therefore turn our glass—that neither magnifies nor diminishes—upon the pamphlet, that we may see clearly what may be worthy of notice in that VINDICATION—and first, as to

EMPIRICISM.

In his first article Dr. Smith said, "There is much that is empirical in the practice of medicine," a statement which we took occasion emphatically to endorse, and we are pleased to find that he still contends for the same great truth, for he says, "the great mass of medical facts has been given us through *experience.*" "They have been ascertained from *experiment* and research" and further on adds: "these are the facts that I denominated *empirical*, and I glory in the thought that time-honored Allopathy has

been *founded* upon such established facts." Very well, but suppose Allopathy in former days had been as much opposed to "routinism" as the Doctor says it is now; having none that is "legitimate" from what source could that *experience* have been derived? Must not *experiments* be repeated with the same result to constitute *experience?* And if "time honored Allopathy" be *founded* on *facts* so ascertained, is it not a logical deduction that "routinism" not only forms an "essential integral" but the very *foundation* of Allopathy itself is *nil* without it?

But although Allopathy be thus *founded* in *empiricism* according to Dr. Smith, he, in his first article, declares that it has "*freed* itself from the *shackles* of *empiricism!*" that is, it has declared its independence of its very *foundation*, and is, what?—the *thing* that any of its practitioners like to make it, the *thing* that Dr. Smith advises they should make it, "*the creature of circumstances!*" and the practice is, where these are "unusual," the practitioner—following his own head—"uses remedies or combinations of remedies that he has never used before, or never read of in his books" he must resort, in fact, to a system of *experimenting*, Dr. Smith says, and every body knows *that* is the worst feature of *empiricism*, especially if the articles *experimented* with be *poisons*. "Routinism" of result is the very ladder on which Allopathy has raised itself, yet the Doctor kicks it down without ceremony, and does not hesitate to make mouths of derision at the very mother that gave it existence.

"PRESCRIBING FOR THE SYMPTOMS."

Having disposed of empiricism to his satisfaction, the Doctor next vindicates his position on the subject of "PRESCRIBING FOR THE SYMPTOMS," and insists upon it as the true doctrine in the practice of medicine, that we are to prescribe *for the case before us*, and not for the *name!!* That is the true doctrine long since enunciated by Dr. Samuel Thomson when he declared that names were "arbitrary," and if Dr. Smith would but content himself with "prescribing for the *case*," we could agree with him, but when he in the next breath announces that "we must prescribe for the *symptoms*," and contends that even if we knew the disease and could name it, we are not to treat the *disease* but—"*prescribe for the symptoms*—still," we beg to differ with him, and say, that we *treat conditions* rather than *symptoms*, and always prefer to remove the disease or the obstructions that are incident to it, and the *symptoms*, be they what they may, will invariably cease. But lest there should be any mistake as to the Doctor's meaning when he speaks of "prescribing for *symptoms*", he gives an illustration that is so very familiar, that any old lady in the country can understand it, and we are greatly mistaken if one of them will endorse his views, as to the proper method of treatment. The illustration selected is the "Frenchman's flea," to which we had

likened the Doctor's estimate of *disease*, and his method of treatment consists, not in putting his finger on him, but in letting him "*go*," and attending to the itching sensation, and thus relieve the "remaining *symptoms* of his presence"!! Here are the very words: "Now would it not be more *rational* to let the flea go, and content ourselves with simply relieving the remaining symptoms of his presence?" and adds, "this is an instance of what I meant by prescribing for symptoms"!! Here, then, is the case, a "flea" or other insect has been about, and the Doctor is called; he sees a symptom in the form of a "bite"; a careful "*clinical investigation*" follows, "to find out *what the matter is*," and this he "*must* do *before he can safely go to work to cure it*," he may not be quite sure that it is a flea-bite, and aware as he is that "the same symptoms may be present in different diseases," he must "draw upon the resources of his own mind" to enable him to ascertain if it might not be the "bite" of another and less active insect, or he may be of opinion that as "no two cases are precisely identical," a specimen of the bug genus, not of the hum species by any means, may have been about, and in order to a proper diagnosis it is *very* important to have it known which it was, because the method of treatment instituted in one case, might not be applicable to another case, and therefore it becomes necessary to "discriminate narrowly," for the remedy proper for each of these conditions might be incompatible with each other and do "*mischief*." In these "*circumstances*" "he taxes his ingenuity for expedients," "calls into play his calculating and reasoning powers" and adjusts a compromise "that" considering the *peculiar* circumstances of the case, may never have been seen in the "books" or heard of before" and commences the treatment of—"*the symptoms*"—that is, the bite: but while he is engaged in prescribing for one *symptom* the disease is progressing, the "flea" or insect is making more *symptoms* which have also to be treated, and as they progress the case becomes complicated, for if the "bites" on the feet are treated the same as those on the hands, or those on the face the same as those on the body, the worst consequences might follow; for the inflammation that may be excited in the one is so different from what it is when excited in the other, that they not only have a different name, but they must be treated differently, for "Inflammation is a multiform disease, comprising a large part of all the diseases of the human family," and to cure it by "the very same agents" in all these different localities, would constitute the very essence of "routinism" without regard to "circumstances" and is, of course, impossible!! *We* cannot understand it, and though Thomsonians say that "what will cure the inflammation in one place will cure it in another," and pretend that, to their minds, the philosophy of it is clear as a sunbeam, yet to us, who are the only representatives of *rational* medicine, it only looks "as clear as mud."

Dr. Smith believes nothing that he can't understand, and therefore has very little use for Thomsonism, and we begin to think that our effort in his behalf to enlighten him on that subject will not be successful, however well meant, but having done our duty we can only be sorry, knowing that where the soil is "hard featured" it would be presumption to expect much by way of crop, though before we close, we trust that many of the doctrines of Medical Reform that look "strange" and "marvellous" to him, may seem clear and intelligible to many whose *rational* powers are equal to the task, however much less they may be disposed to vaunt of them.

THE RATIONALE.

The *rationale* of the plan of the Reformers' procedure consists in treating, not the "*symptoms*" nor the "*name*," but the condition or *disease* itself, to the removal of which they at once direct their efforts, and the only use to which they apply symptoms is to guide them in the most direct manner to the seat of the disease. Is the *symptom* fever? They immediately infer that some considerable obstruction exists within the system to the free and equal circulation of the blood, which nature is endeavoring to remove, and they take their measures accordingly to help her. Unlike the Allopath, they do not set in upon, with a view to destroy—the symptom—the fever! They do not directly withdraw the blood, which is being propelled by the vital force against existing obstructions to remove them! They do not indirectly withdraw it by giving antiphlogistic or depleting medicines, which carry off by the bowels the very elements of the blood, without which nature is powerless! far from it, they leave all that for those to do who doctor *symptoms* and call it *rational*, and direct their efforts to the removal of the obstructions, the existence of which within the vessels has provoked the febrile conflict, and by the use of stimulants and relaxants, to give at the same time, vigor to the propelling force and remove the tension from the constricted vessels. This results in the promotion of perspiration "just as certainly as food relieves hunger or water thirst," and as "invariably," too, for as we said in our first article, "*if there be sufficient energy in the system* they must succeed" in producing that perspiration without which no disease of which fever was a *symptom* was ever yet cured, however much that ultimate result may have been retarded by unfriendly interference, in the reduction of the natural force, in the effort to reduce the pulse by other means than "assisting nature in the expulsion of effete products" by the promotion of perspiration, or by retroverting the natural effort inwards on the bowels, lulling the life power in false security by sedatives, crying peace, peace, when there is no peace, but the waging of the most deadly conflict, till nature either succumbs to the united attack of the disease and the remedy (?) or triumphs over both.

Instead of combatting the fever, which is only the *symptom*, not the disease itself, Reformers encourage and assist it, and do all they can to hasten the result that nature aims at. In other words, they have been treating fever and inflammation more than sixty years, on the very same principles on which Professor Bennett has been treating acute inflammation for eight. Instead of *lowering* they *support* the vital powers, and assist the excretion of effete products from the system, and were put in possession of this method of procedure in obedience to the laws that govern remedial action, by the genius of the immortal Thomson, while Prof. Bennett attributes the results attained by him to the advancement recently made in Pathological science, and says, (page 289,) "How often during the last sixteen years have we been asked, of what use are your stethoscopes, your microscopes, and your chemical analyses, at the bed side?" "In reply," he says, "we point to the *revolution* now going on in the practice of medicine, to the establishment of scientific *laws* instead of *empirical rules*, and to the *abandonment* of a *palliative* in favor of a *curative* plan of treatment!!"

So it seems that even Dr. Smith is behind the age, for while he in the back woods of Georgia is lauding the *empirical facts* on which that beautiful and "polished structure," Allopathy, is *founded*, they are being cast aside in Edinburgh, at the highest seat of Allopathic learning, as worthless, and *scientific laws* are being *established* in their stead, while he is declaring that even that is impossible! What can be thought by common people when one Allopathist in Georgia declares that recent microscopic discoveries but "*confirm* the parts and proportions" of Allopathy, while another at the highest seat of learning points to the *overturning* "REVOLUTION" that is now going on in the practice of medicine? Which is likely to be best informed? Then, again, they are *abandoning* a *palliative* and adopting a *curative* plan of treatment! *Abandoning* the old plan of treating "*symptoms*," and giving opiates to *palliate*, and adopting a *curative* plan which we show is nothing more nor less than the very Thomsonism that Dr. Smith derides!! Is it not "passing strange" that men of such experience and erudition should *abandon* such an "overtoping and polished structure," if they were not convinced, like Dr. Rush, that it is not only "unroofed at top, but cracked at the foundation," and altogether unreliable, no matter what *rational* men of Dr. Smith's calibre may say to the contrary.

CHOICE OF NAME, ROUTINISM, &c.

But the Doctor seems very fastidious about the *name* by which his system shall be designated, or by which his brethren shall be known. It is not expressive enough to call it "*mineral practice*," because they use vegetables also. He says they are

the true *Eclectics*, because they get their medicines from all sources, and that they are *empirics*, for *experimental* facts form the basis of their system. But notwithstanding Webster says it requires a repetition of results to constitute *experience*, and repetition of result constitutes routinism, yet of all the names in the calendar, that of "routinist" is the most hateful to him, and he will not allow us to cast upon him the reproach expressed in the anathema, "*routine practitioner!*" Well we are sure, since it would hurt the Doctor's feelings, it would give us no pleasure so to designate him, and if he prefers, as he says, to be called an *empiric*, we have no objection; or if he would rather be called an Allopathist, it is all the same to us, we will try to accommodate him, for after all, perhaps the last is most expressive, for it embraces the idea on which their practice is founded, which is "the substitution of *another* for the original disease! and the proposition of the famous Doctor—who, like Dr. Smith, had a case he did not know what to do with—to throw the patient into fits, for he was death on them!—finds an exact counterpart in Allopathic treatment, when they substitute the mercurial for other diseases, with this difference, that they leave *that* to nature, and can never cure it, for no relief is had till the Reformer gives it. This is a *routinism* that is *destructive* and *mischievous*, and we would not be ranked among its advocates on any account, because though this kind of routine practice has been going on for years and years, and its destructive tendency has been acknowledged and deplored, even by those who continued it, yet have they kept on in the same old beaten track; calomel, the lancet, opium, the lancet, opium, calomel, opium, calomel, and the lancet, until regardless of "circumstances," it seemed that the same "course" was known among the people as the most that could be done, varied, perhaps, by blue mass, cupping or leeching, and morphine, intermingled and reversed in the same way till, as we said before, the deprivation of the practitioner of these three resources would have rendered it questionable, whether he could have practiced at all! This routinism, objectless as it seems to us, yet destructive to thousands, is very properly rebuked by Dr. Smith, and we endorse the very worst that can be said of it; but when he becomes its apologist, and lauds the system that, so far as the people know, claims these practices "essential integrals," we are insensibly led to question his sincerity or his judgment, and ask in what he has pointed out to his brethren a different course of procedure? Is it not still *blue mass*, *morphine*, *blood letting*—not by the lancet it is true—the people have rebelled against that, but by cups and leeches? In what does Dr. Smith's own practice differ from this? Has he marked out for himself any new course since he has seen how "*mischief*" and "*devastation*" have resulted from it, or does he merely content himself with varying the order in which he uses them, being soli-

citous, above all things, not to give them in the same order twice, and thus avoid "*routinism?*" We, in common with many others, are curious to "know," and hope the Doctor will inform us.

But however much the Doctor may object to "routinism" in medicine, he is not insensible to the pleasures of it at the table; and the same "course," if a good one, his "conscientiousness," he says, is too "charitable" to reject. And although he can "calculate" the effect of a certain quantity of edibles, and knows that by perseverence in imbibition he will be just as sure to appease hunger as he is sure of existence, yet he cannot concede that there can be any *fixed* and *unvarying* laws controling health and life, or disease; but let him just try again and be convinced that a "*fixed* law" controls his appetite, for nature will reject another "course," just then, however "good" it may be! And if nature has fixed laws for the control of appetite, may it not be possible that she has others just as invariable for the protection of life and the removal of disease? And is it not just possible that as Dr. Smith thinks they cannot be, he has never looked for them, and is therefore still ignorant of their existence?—But because *he* is a "know nothing" in regard to them, is that a reason for saying they do not exist, or that others are unaware of it? But why should not *fixed* laws pertain to the animal economy just as certainly as to inorganic matter? Is it not *certain* that *poison* will *kill*, or does it kill by chance? Is not death an *invariable* result of total abstraction of blood? Is it not known that animal life is dependent on a free supply of oxygen, and is it not just as certain that it is impossible in nitrogen? Is there any uncertainty about a man's dying in water or a fish on land? Is not the result a "routine" one which "no circumstances" can avert, and just as certain to follow the infraction of the law as the stone let loose on the mountain top is to be governed by the force of gravitation? Keeping this state of facts in view, how foolish it must be to infringe those *laws* by giving poison, or by drawing blood; and how "criminal" it is to pursue the same "round" from day to day and year to year, cognizant of the fact, deploring the "devastation," the heart "bleeding with anguish and remorse at the mischief done," and yet continue it!!!

MEDICAL REPUBLICANISM.

But Dr. Smith is not merely solicitous about names for his system, he is desirous that its principles should be well thought of, and as he lives in a Republic, claims that they are Democratic and Republican! Hear him:

"The arbitrary policy of despotic governments is not to be taken as the rule of action in independent republics, neither are the imperative edicts of despotic (!) Thomsonism to be observed in our Democratic system of Medicine. We bow submissively to no Samuel Thomson—making 'vows of fidelity' to his 'great princi-

ples.' We would spurn as beneath notice, such imperative and unconditional *commands* as our Thomsonian friends are subjected to, as in the following *directions* given by the immortal Thomson," and then follow two *Recipes !*—one "General ℞ for Disease," the other a "Recipe for Worm complaints," which are given in the usual recipe style, in the form of *directions*, as Dr. Smith says, but which he calls *commands*. Well, if these are *commands*, the Allopathic Materia Medicas are full of them, for there never was a *recipe* yet made, that did not have *take* or *give* in it, both being equally mandatory, and the last is the only word used in these; there is not a *shall* or *must* in all Thomsonism! even in these *directions* the reason is given for using each article, and can hardly be said to be "unconditional." *Give* No. 3 to *guard against canker*, add No. 2 to *overpower the cold*, and add No 1 *to clear the stomach and promote perspiration.*" A most wonderfully despotic EDICT! and the second is like unto it. *Give* Composition or No. 2, *to warm the stomach*, a tea of No. 3, *to remove canker*, and the bitters of *either* of the articles described under No. 4, *to correct the bile!*' How imperative! What a wanton use of *despotic* power the Thomsonians have to submit to! or rather how little "*arbitrary*" must there be in Thomsonism when a keen eyed critic like Dr. Smith, with book in hand, could only discover these two specimens to support such an unwarrantable assertion! But he has made the most of it, and strange as it must appear to those who have not seen his Pamphlet, he has written page upon page on that *simple* assumption, and alludes to it as if he thought his readers would believe that he had shown them a Mede or Persian law!

Speaking of Recipes and their substance, however, let us ask, is Dr. Smith aware, that but little more than a century ago, Allopathic practices consisted in giving "boiled frogs, mashed lizzards, lions' brains, toads, filings of skulls, roasted snakes, crab's eyes, and rotted human livers;" these constituting in those days, the 'desperate remedies' resorted to in 'desperate cases,' in accordance with the practice that even the Doctor recommends now? Or, as he is "sojourning with a family that allows him *whatever* food his appetite demands," suppose, by way of delicacy, he should order some of the wizard broths and stews of Sydenham, the English Hypocrates? that would be a "change of diet," and would have this advantage in the Doctor's eye, that even in this age of French cookery, that dish could not possibly be "*routine.*"

It must sound strange to the people of Georgia, however, especially to those of Macon, or Savannah, to hear a representative of Allopathy declare that "*they* bow submissively to (no body)—making "vows of fidelity" to (no system.) Has Dr. Smith forgotten that famous *affirmation* or *oath* taken by the graduating class of one of the Savannah Colleges so recently? Was that not a vow? Was there no effort in that to fetter the mind and tie it down to old

rules, to prevent the *Revolution* that Profesor Bennett says is taking place in Medicine, and make Medical *Tories* of them? or can a system that makes such efforts to make medical *tories* claim any just affiliation with democratic republicanism? We think not, but will allow the reader to judge. Here is the document:

"You hereby promise and declare, on receipt of your Diploma, that you will maintain the honor, dignity, and respectability of the legitimate profession in which you have been educated, and that you will neither countenance nor affiliate with any system of irregular practice, nor engage either in the manufacture, sale, or recommendation of 'quack' nostrums, or patent medicines, nor countenance the practice of the senseless dogmas of Hydropathy, Homeopathy, or Thomsonianism, under the penalty of having the degree conferred upon you revoked by your Alma Mater!"

If that does not look like a "despotic policy" as well as an "imperative edict," indicating anything *but* a "liberal fraternity," and allowing anything *but* "freedom of thought and choice of action, then have words lost their meaning, and "*we* would spurn as beneath notice, such imperative and *unconditional commands*."—But what the poor fellows that took the oath are to do, after swearing they would neither manufacture, sell, or recommend any "*quack*" medicine, is a mystery. Was it not too bad to take their money and then tie up their hands?

TEXT MANUFACTURE.

That the reader may have an idea, before we proceed, of the method by which the Doctor *makes* and comments on his own text, we will mention the process of reasoning, by which he makes us say what we never did say—"*that all diseases are alike*," he says:

"Dr. Thomson makes the following quotation from my article, and *most wofully perverts its true meaning*. If the human system and its Physiology be the same every where; if the prominent features of disease are similar, and the settled principles of treatment founded upon the same basis, how can it matter where the physician has been educated, *so that he has been taught aright?*"

The remark that we made in reference to this, as the reader will see by turning to it, was: "The italics are ours, and we think *that* makes all the difference. Upon the *first* part of the proposition is our system founded *theoretically*, and it is the *only* system that gives those principles *practical* vitality, as will be shown."

"A most woful perversion" to say that OUR system is founded *theoretically* upon the fact that "the human system and its Physiology is the same every where." That is what we said, but see how he construes it: "*Dr. Thomson seems to understand me to say that the prominent features of all diseases were the same, and that they were all amenable to the same treatment.*" Was ever the "perversion" of the "true meaning" of a plain sentence "more woful?" or, was it ever put to a more illegitimate use than

the conclusion he draws from it? "Here then, he says, we have revealed to us this *point* of doctrine in the Thomsonian system—that all diseases are alike, and all cured by the same remedies." Where did the Doctor study logic? or where does he stow away his *conscienciousness* when he permits himself to enlarge to such extent upon a point arrived at so illogically? Reader, this *point* is the key to almost half his Pamphlet. Material must be very scarce when matter such as that is deemed "essential" in the manufacture.

But, however we may demur to his construction, we shall not deny him the benefit of what he says he meant, which was—"to declare that the human system was the same everywhere, and that the principles of therapeutic treatment were the same in every country and climate."

Exactly what we believe, and what we take every opportunity of declaring, only our way of showing it is rather different from that suggested by Dr. Smith, who, though the system be the SAME, and the therapeutic principle the same, yet treats the same system hardly ANYWHERE the same. One kind of treatment suits in London, another in France, another in Georgia, and another on the banks of the Mississippi; yea, even in adjoining counties, the Doctor says the treatment must be "different," yet there is such a sameness all round that he says "disease may be encountered ANYWHERE with the tact of art and the ENGINEERING power of science and philosophy." That, we suppose, must be a new kind of motor, intended, probably, to take the place of some of those *mischievous* therapeutic agencies that the routinist must give up; but Professor Bennet fixes all such ——— as that, when he unhesitatingly declares that the very PRINCIPLES relied on are ERRONEOUS, and however Doctors may do in London, Georgia, or France, at least in Edinburgh, they can save seven times more patients than either, by "abandoning heroic remedies," and "instead of lowering, supporting the vital powers," like any good Thomsonian Reformer in the United States.

THE ALLOPATHIC SYSTEM.

But whatever any body else may say, Dr. Smith is determined to sustain the Allopathic system of medicine, both as a "science" and an "art," and declares, notwithstanding his sad experience, that "that proposition is thoroughly sustainable." This is a question on which it were vain to argue, and therefore we propose to meet it by comparing the opinions of those whose opportunities of judging have at least been equal to those of Dr. Smith, and whose candor in speaking of the *system*, is not less striking than his is in speaking of the *men*, and as the Doctor seems desirous that this distinction should be broadly made, we give him the benefit of *again* saying: "He attacks the *conduct* of his *brethren*—I the sys-

tem upon which they operate ; he accuses them of producing "*only mischief*" by the careless, reckless, and profligate use they make of remedies that are *poisons ;* I denounce the *system* of giving *poisons* in its totality, and maintain that *nothing but mischief*, in some shape, can result sooner or later from their administration, no matter how carefully or skillfully they may have been administered !" Yet in the face of this broad distinction, the Doctor accuses us of "either wilfully, or for want of correct comprehension, construing his remarks into invectives against the *system*, rather than the *persons* of his brethren ! Really, "it seems to us that our meaning could not be misunderstood by any *intelligent* reader," nor do we think it is, though Dr. Smith has made a text of his version of it, and enlarged considerably for the benefit of OUR especial understanding ! ! ! Is the Schoolmaster yet abroad ? If so, it is hoped he will get home again before the Doctor's next appears, for while we take pleasure in defending our true positions, it becomes irksome, to reply so often to those which a little better acquaintance with Lennie or Murray, on the part of an opponent, would satisfy him, never had existence. We propose now, however, to speak of the *system*, compared with which *men* or "*persons*" are mere atoms on the wheel that rise or fall with it, and are beneath our notice in the present inquiry.

Dr. Smith says that "the proposition that medicine is both a *science* and an *art* is thoroughly sustainable," and of this the reader may judge when we have produced the testimony of the most distinguished Allopathists themselves, in regard to it.

Prof. CHAPMAN, of the University of Pennsylvania, in his Therapeutics, vol. 1. p. 23, says, "To harmonize the contrarieties of Medical Doctrines, is indeed a task as impracticable as to arrange the fleeting vapors around us, or to reconcile the fixed and repulsive antipathies of nature !" On p. 47, he says, "Consulting the records of our science, we cannot help being disgusted with the multitude of hypotheses obtruded upon us at different times. Nowhere is the imagination displayed to a greater extent ; and, perhaps so ample an exhibition of human invention might gratify our vanity, if it were not more than counterbalanced by the humiliating view of so much *absurdity, contradiction* and *falsehood !*"

Dr. GREGORY, of London, in his Practice, p. 31, says, "All the vagaries of medical theory, like the absurdities once advanced to explain the nature of gravitation from Hippocrates to Broussais, have been believed to explain the phenomena, (of disease,) yet they have ALL proved unsatisfactory." "Men of extensive fame glory in pretending to see deeper into the recesses of nature than nature herself ever intended ; they invent hypotheses, they build theories and *distort facts* to suit their ærial creations !" p. 29.

Dr. J. ABERCROMBIE, Fellow of the Royal Society of England, of the Royal College of Physicians in Edenburgh, and first Physi-

cian to his majesty in Scotland, says, "There has been much difference of opinion among philosophers in regard to the place which medicine is entitled to hold among the physical sciences, for while one has maintained that it rests upon an eternal basis, and has within it the power of rising to perfection, another has distinctly asserted, that almost the only resource of medicine is the *art of conjecturing*." Intel. Pow. p. 293.

Bechat, one of the greatest of French Pathologists, declares in his General Anatomy, vol. 1. p. 17, "Medicine is an incoherent assemblage of incoherent ideas, and is perhaps of all the physiological sciences that which best shows the caprice of the human mind. What did I say? It is not a science for a methodical mind. It is a shapeless assemblage of inacurate ideas, of observations often puerile, of deceptive remedies and of formulae as fantastically conceived as they are tediously arranged."

Sydenham, the English Hippocrates, declares that "Physic has ever been pestered with Hypotheses, the multitude and precariousness whereof have only served to render the art *uncertain*, *fluctuating*, *fallacious*, *mysterious*, and in a manner *unintelligible*."

Prof. Bigelow, of Harvard University, comes to the humiliating conclusion, that "while the other sciences within our own time, have attained to a degree of unprecedented advancement, medicine, in regard to some of its professed and important objects, is still an INEFFECTUAL SPECULATION."

Dr. Abercrombie, already referred to, quoting D'Alembert, says, "The following apologue, made by a physician, a man of wit and philosophy, represents very well the state of that science:—"Nature is fighting with disease; a blind man, armed with a club, that is a physician comes to settle the difference. He first tries to make peace. When he cannot effect this he lifts his club and strikes at random. If he strikes the disease he kills the disease; if he strikes nature he kills nature." "An eminent physician," says the same writer, renouncing a practice which he had exercised for thirty years, said, "I AM WEARY OF GUESSING," and Dr. Abercrombie adds: "The UNCERTAINTY of medicine, which is thus a theme for the philosopher and humorist, is DEEPLY FELT by the practical physician in the daily exercise of his art!"

Prof. Waterhouse, for twenty seven years a Professor in Cambridge University, in a letter to his friend Samuel L. Mitchell, of New York, in speaking of Samuel Thomson, says: "I am indeed SO DISGUSTED WITH LEARNED QUACKERY, that I take some interest in honest, humane, and strong minded empiricism, for it has done more for our art in all ages and in all countries than all the Universities from the time of Charlemagne."

Dr. W. Henderson, Prof. of Medicine and General Pathology, in the University of Edenburgh, in 1847, says, in Forbes' Young Physic, p. 94: "Some 80 or 90 per cent. of the patients who em-

ploy medical practitioners, would be better off without them," and in the same vol. p. 98, Dr. JOHN FORBES, whose titles would fill a large portion of this page, says: "The most important inferences unfavorable to Allopathy are:

1st. That in a large proportion of the cases treated by Allopathic physicians, the disease is CURED BY NATURE AND NOT BY THEM.

2d. That in a lesser, but still not a small proportion, the disease is cured by nature in spite of them; in other words, their interference OPPOSING, instead of assisting the cure.

3d. That consequently, in a considerable proportion of diseases it would fare as well, or better with patients, in the actual condition of the medical art, as now generally practiced, if all remedies, at least all active remedies, especially DRUGS, were ABANDONED."

So much for the "Art" and "Science" of Allopathy. Let the reader ponder on what their greatest men have said of it—and a hundredth part has not here been told—and then ask himself if Dr. Smith is not too hard upon the "PERSONS" whom he accuses of having done all the "mischief" he has WITNESSED, while he lauds the SYSTEM as a "polished structure of truth and power—its summit far over-reaching the petty isms and piratical humbugs of the age."

Would it not be a pertinent inquiry to ask how it is possible that men should not do mischief who practice on a system that one calls "the art of conjecturing," another "an incoherent assemblage of incoherent ideas," or "a shapeless assemblage of inaccurate ideas," which another says is "uncertain, fallacious, fluctuating, mysterious and unintelligible," which another designates an "ineffectual speculation," another compares to a "blind man striking with a club," of which another says when quitting it, "I am weary of guessing," and another "that its uncertainty is deeply felt by practitioners of it," while another having but a glimpse of the certainties of Thomsonism, exclaims, "I am disgusted with LEARNED QUACKERY!" another that "80 or 90 per cent. of patients would be better off without it," and another that "nature cures in SPITE of its OPPOSITION, and that it would be better for patients if DRUGS were ABANDONED!!" And yet Dr. Smith talks of humbugs, piratical humbugs! when his own system is acknowledged to be full of "ABSURDITY, CONTRADICTION and FALSEHOOD!"—The time has been when such statements as the Doctor makes would have been believed, but it is past, and the sooner the conviction enters HIS mind that Prof. Bartlett, of the University of New York, gave expression to some time ago, the better it will be for the credit of his observation and judgment. Dr. Bartlett says, p. 9, of an Inquiry into the certainty of Medicine: "I am only stating what every body knows to be true, when I say that the general confidence which has heretofore existed in the science and art of medicine, has within the last few years been violently

shaken and disturbed, and is now greatly lessened and impaired. The hold which medicine has long had upon the popular mind is loosened; there is a wide spread scepticism as to its power of curing diseases, and men are everywhere to be found who deny its pretensions as a science, and reject the benefits and blessings which it proffers them as an art." That is so, and the less some people say when "humbugs" are mentioned, the more credit will they enjoy for common prudence.

Cannot the Doctor discern the signs of the times? What mean the changes on changes that follow each other in such rapid succession in the system that he calls RATIONAL? Can REASON not be trusted any more than books? Is what is RATIONAL in Dr. Rush's time so very irrational in Dr. Smith's, that the methods of treatment pursued by the one are denounced by the other? or has Dr. Smith a greater stock of RATIONALITY than Dr. Rush had? Or is the long accumulating set of EMPIRICAL facts on which Dr. Smith relies for a FOUNDATION to the "science of medicine," so very recent? Verily, the RATIONAL system of Dr. Smith must be NEWER than that of Thomson, for it seems that many of its friends did not know it as such but a few short years ago, and the question may be pertinently asked: Is it likely that any body will know it as it is NOW known, five years to come? Most likely not, for CHANGE is written on its every feature, and its history is emphatically written by Dr. L. M. WHITING, of Massachusetts, when he says: "System after system has arisen, flourished, fallen and been forgotten in rapid and melancholy succession, until the whole field is strewn with the disjointed materials in perfect chaos, and amongst the rubbish the philosophic mind may search for ages without being able to glean from it hardly ONE SOLITARY WELL ESTABLISHED FACT." And yet such are the facts, that Dr. Smith glories in the thought that his time-honored system has been FOUNDED on! Rather SANDY, we should think; but Dr. Whiting continues: "If this is a true statement of the case, (and let him that doubts it take up the history of medicine,) if that enormous mass of matter that has been time out of mind accumulating, and which has been christened Medical Science, is in fact nothing but hypothesis piled upon hypothesis, who is there among us that would not exult in seeing it swept away at once by the besom of destruction?"

Dr. Smith objects decidedly, for that would sweep away "the vast collection of facts accumulating during many centuries" on which he "establishes his principles," and however much he may be willing to decry the "persons" who are, or have been his rivals, he is himself too old a "fogie" to give up the good old facts for which he is indebted to EMPIRICISM through the agency of experimental "routinism;" besides, what would that beautiful "polished structure" be without its foundation? Yet, he himself, finds that all this "LORE" will not do in the CLINICAL ROOM; THERE it is absolute-

ly USELESS, for nothing but the "HEAD," however young or green, is to be trusted there! But all this, it may be said, is only a difference of opinion among medical men, who, as already stated, "hardly ever agree." Admitted, but look at them; on the one side we have an array of talent, experience and erudition of the highest order; men who, though the very pillars of the system, are conscientiously impelled in the bitterness of disappointment after having "weighed it in the balance and found it wanting," to acknowledge it. On the other, we have J. Dickson Smith, M. D., of Macon, whose experience has already reached the period of ten whole years and a half, seven of which, was spent in the county of Monroe, and in the village of Forsyth, where, it is true, he OBSERVED some terrible results of Allopathic administration, in the shape of Book and Routine Practice, as well as the "prostitution" of the health restoring "sanative" and invigorating POISONS belonging to that school, the record of which is enough to freeze the blood of the survivors in that devoted county—to that is to be added the six months spent in the city of Macon, where he has already become famous as the corrector of abuses among his professional brethren, who, conscious, it seems, of the justice of his accusations, and the castigations he unsparingly administers, "grin and bear it," till now it is allowed that he is the greatest exterminator of "wolfish intruders" this side the Steppes of Russia or wilds of Siberia, and yet he only hunts for "pleasant pastime"! almost an admirable Creighton, we concede, but then we, like the rest of the world, rely more on the opinions of older men, and think that even Dr. Smith will admit, without much compromise of dignity, that the smallest of them MAY be just a little above him; and it is hoped his friends will agree that THAT is a RATIONAL conclusion. Should that, however, be demurred to, there is another "frog" fable on record, from which warning might be taken, and to which we would, in a friendly way, direct special attention; for however much we would rejoice to see his "system," with all its "errors," "swept away with the besom of destruction," we should yet deprecate for him, "personally," the BURSTING UP that might be incident to greater inflation, and hope he will desist.

"BOOK PRACTICE."

But there is another point on which, like Dr. Smith, it seems to us our meaning could not be misunderstood by any intelligent reader, and that is upon the subject of what he calls Book Practice. Let the reader refer to our article and see if he can find any thing that looks like this: "But Dr. Thomson thinks that a man can lay no sort of claim to being SCIENTIFC unless he follows books to the letter. That there is no possible chance for Doctors to agree unless they copy after the text books. He says there can be no certainty in medicine unless there is rigid adherence to books."

To prove that I said all this, Dr. Smith quotes the corollory of the argument I used to show his own absurd position from the premises which I quoted, the object being to show that where the books were "cast aside" with the "lore" they contained, as well as the "empirical facts" on which the system rested, and "nothing" was left but the "head" of the practitioner on which to draw, it was nonsense to talk about 'system' or 'science' for there could be neither one nor the other, where every man sets out to "experiment" for himself, after having first cast aside the books that contained the rules, as well as the facts on which they were founded; and we cannot conceive of anything short of the confusion incident to the confounding of language at the tower of Babel, more likely to result in absolute medical chaos, than just what Dr. Smith says "the science and philosophy of medicine consist" in, and which we took the libery of designating "empiricism run wild." But it is not respectable "empiricism" even, it is absolute "quackery" or a pretension to knowledge on the part of the medical practitioner that Dr. Smith admits they do not possess. He says they "MUST find out what the matter is" before they can "SAFELY go to work to cure it," and at the same time he says they can't do it, for so many modifying circumstances are perpetually occurring, that we cannot decide that any two cases are precisely identical," and even if the case is diagnosed or distinguished correctly, he says the method of treatment instituted in one case, may not be applicable to another case of the same name and character, and therefore, as Abercombie says, the practitioner must rely on the "science of conjecturing," or the art of "guessing" to help him out.—And if every man is to "guess" for himself, which they must do, for Dr. Smith says they cannot know, at the same time that such high pretensions to scientific knowledge are maintained before the world, it requires only Dr. Smith's showing to stamp Allopathy the verriest "quackery" extant, and the most stupendous humbug known to history.

Let the fifteen hundred or two thousand Allopathic practitioners in Georgia be thoroughly imbued with Dr. Smith's notions of disease; let them conceive that no two cases can ever be said to be *identical*, but that each requires different treatment; that the diseases of one county differ so much from those of another county, that they require to be studied differently—that the *symptoms* must be looked for and treated, rather than the *conditions*, and as the treatment for one set of symptoms cannot be relied on for the same set at a different time, even in the same case, with all the surrounding "uncertainties" of "circumstances" thrown in, it results, as a matter of course, that no two *can* think alike, except by the merest chance, and if such an array of *experimenters* be let loose on the people of Georgia, dealing out the deadliest drugs known to the Materia Medica, it requires no Solomon to foretell

the consequences, and none need wonder when they meet the many walking skeletons of those who have escaped for a short time the sextonal manipulations of which—unless some good Reformer forbids—they must ere long be the recipients, and of which if their own highest teachers, and Dr. J. Dickson Smith (not rumor) are to be believed, so many have *already* been the untimely partakers.

But though this be the legitimate result of what Dr. Smith contends for, it by no means binds us to the advocacy of "Book Practice," as he understands it. "The use of Books in the clinical room"! Who ever heard of a Doctor carrying round his books and looking up a case at the bed-side of his patient? Has Dr. Smith ever *observed* a case of that sort? Is that the way they practice in the counties of Monroe or Crawford? Or, if they do, is that the reason why he found so many of them in that section "*not reliable*"? We merely ask for information, never having been till now aware that the practitioners of any system claimed credit for not "using books *in the clinical room.*"

But Dr. Smith again mistakes when he says Dr. Thomson thinks "there is no possible chance for doctors to agree—in any case—*unless they copy after the text books*," for the very reason he gives for our thinking they *could* agree, is the very reason of all others why we know they could *not!* for if any man undertakes to practice by the Allopathic books, he will find himself in a "dedalian labyrinth almost without a clue", as Chapman says, and would find his "devious career dark and perplexed, like the gropings of Homer's Cyclops round his cave." Practice by the Allopathic Books, indeed!—*Impossible!* But the reader shall judge of what would be done by the practitioners who follow the books on the subject of

BLOOD LETTING.

Marshall Hall says:—"The subject next in order in treating of the Theory of Medicine relates to the use of certain important remedies, and among these, blood letting ranks pre-eminently *the first.*" Practice, p. 819.

Prof. Clutterbuck, in his Enquiry into the seat and Nature of Fever, p. 474, says:—"Blood letting unquestionably is the best, because the *most effective* remedy we possess, in the treatment of idiopathic fever, as well as inflammation in general."

Prof. Payne, in his Institutes, No. 836, says:—That for "inflammation and congestion, blood letting is known to be the most effective remedy." "General blood letting is the proper mode of depleting *in all forms of fever*, and in all the active inflammations of the internal viscera." No. 956.—"Under the conditions of disease for which in truth it is remedial, no substitute can be found or admitted for it."

Prof. PAYNES says:—"England has not yet abandoned the Lancet, and here, in America, it is as ever the *anchor of hope* in inflammations and congestive fevers."

J. DICKSON SMITH, M. D., of Macon, Ga., says:—"We hold the lancet as a good remedy in its place, and one for which there is no good substitute in the fulfilment of certain indications." p. 35.

CONTRA.

Prof. LOBSTEIN, in his Essay on Blood letting, says:—"So far from blood letting being beneficial, it is productive of the most serious and fatal effects—a cruel practice—a scourge to humanity."

SALMON, in his Synopsis Medicinæ, says:—"So zealous are the Blood-suckers of our age, that they daily sacrifice hundreds to its omnipotence, who fall by its fury like the children who, of old, passed through the fire to Moloch, and that without any pity left to commiserate the inexplicable sufferings of their martyrs, or conscience of their crimes, which may deter them in future from the commission of such villainies, the bare relation of which would make a man's ears tingle, which one cannot think of without grief, nor express without horror!"

Prof. ROBINSON, in his Lectures, p. 121, says:—"An eminent physician has said, that after the practice of blood letting was introduced by Sydenham, during the course of one hundred years more died of the lancet alone, than all who, in the same period, perished by war"!

Prof. HALL says, Cyca. of Practical Medicine, vol 1, p. 299:—"Among the immediate effects of the loss of blood, must be mentioned that of sudden and unexpected dissolution. The patient does not recover from a state of syncope; or without syncope he may gradually sink after blood letting. It has thus taken the most *able* and *experienced* practitioners by *surprise*"!

Dr. JAMES THATCHER, in his Practice, p. 208, declares:—"We have no infallible index to direct us. It is impossible from the state of the circulation in fever to point to any criterion for the employment of the lancet: the state of the pulse is often ambiguous and deceptive." Like Dr. Smith. he says "Circumstances require the nicest discrimination, as the result is often very different in cases seemingly analogous. A precipitate decision is fraught with danger, and a mistake has been *certain death.*"

Prof. MCINTOSH, p. 690, says:—"Some patients are bled who do not require it, and the consequences are injurious; others are bled who cannot bear it, and the result is *fatal.*" At 418 he says: "No physician, however wise and experienced, can tell what quantity of blood can be taken in any given case."

J. DICKSON SMITH, M. D, p. 8.—"The routine practice was to bleed, and accordingly in almost every case the lancet was 'popped in,' regardless of the character of the pulse, the strength of

the patient or the typhoid tendency of the disease, and many a case has thus been *bled down* irrecoverably." And p. 35 he says: "There are practitioners *now* in Georgia who, perhaps, use the lancet habitually, bleeding almost every patient they see"!

How would it be possible under this state of facts for any man to practice blood letting by Allopathic books—one saying it is pre-eminently the *first* among remedies—another that it is a cruel practice and a scourge to humanity! One says: "it is the best because the most effective"; another, that hundreds are "sacrificed to it daily." One calls it the "*anchor of hope.*" Another that more have perished by it than by war—and finally our friend, Dr. Smith, still holds up for the lancet as a remedy (?) for which Allopathy has found no good substitute, and though by it many have been bled down *irrecoverably*, yet we have no doubt that if the Thomsonian Reformers were out of the way and the *people* would stand it, the lancet would be popped in just as indiscriminately as ever. That it is not so now, to the former extent, is indubitably due to the influence of "Medical Reform par excellence!"

As a proof of this, it is only necessary to quote Dr. Smith's own statements in regard to blood letting.

He is *not* opposed to that practice on *principle.* He sees the change that has taken place in the practice of direct depletion by blood letting in the last twenty years, as every one must that has bestowed the slightest attention on the subject, but he attributes that change—not to the "revelations of the microscope," which he says have been "wonderful in these latter days," nor to the "many recent changes in Therapeutics," occasioned by an advanced knowledge of diagnosis and Pathology"—but to the fact that "the character and type of disease now prevailing do not demand it." The *principle* is "still the same" and those who flatter themselves that they are not suffering from depletion because blood has not been drawn directly from the vein, are deceived; for Dr. Smith says that Practitioners have but changed the process, and "have measurably yielded the lancet in favor of cups, leeches and indirect depletion"!! That is flagellating a certain ancient personage around the "stump" with a vengeance; so that however it may be made to appear to their deluded followers that the lancet has been "yielded" the fact, so far as they are concerned, does not inure to their benefit, for their doctors do "indirectly" what they *dare* not attempt *directly*, in Georgia, without forfeiting their practice, and if they are not "bled down" they are otherwise so depleted that in bad attacks it is seldom they get up again. To further show that Dr. Smith recognizes no change in the *principle* of blood letting, we quote a sentence: he says:—"The lancet may prove a valuable remedy in treating the diseases of one county, when, during the same season, it may not be admissible in another locality. Possibly at this very period, when we are using this in-

strument cautiously in this section of Georgia, it may be the Trojan remedy for the prevailing disease in London." So, as we have just said, the only safety that the people of Georgia can look for against the re-"popping in" of the lancet, and the "bleeding down" that follows it, is to be found in the demonstrations of healthful Medical Reform, for there cannot be a question about the fact, that to Reformers is due the immunity the people have enjoyed—such as it is—from its ravages for the last quarter of a century; for the advent in any quarter of a thorough Reformer, made the business of the settlement bleeder an impossibility, he has been fairly driven out, and if the Allopathic Practitioners themselves had not adopted an "indirect" method of depletion, they too would have had to go West or quit the field, as many of them have had to do already as it is. Therefore we say the believers in Allopathy, even, have been the recipients in part of the benefits that Medical Reform has conferred upon community, by the modifying influence that has been exerted on her practices, and if they wish to have their Doctors kept upon their good behaviour, and their families relieved from the dread of being subjected to practices that lead to "anguish and remorse" on the part of their practitioners, they should *encourage and countenance the Reformers*, for in their presence even the possessor of a London intellect would be safe in Georgia at the present period, from any direct depletion by the "popping" lancet.

But while Dr. Smith still says "bleed when there is plethora and active excitement," Professor Bennett says "These are exactly those cases that do best without blood letting," though he admits at the same time, that "such cases are those that *bear* bleeding best." Dr. Smith says bleed when the current of the blood is increased; that is, when there is active excitement; Prof. Bennett in view of the recent advance in Pathological science, says:—"Hitherto medical practitioners have supposed that this increased current is injurious, and ought to be checked by blood letting and antiphlogistics. The rapid flow of blood which is so necessary, they have sought to diminish, and the increased amount in the neighborhood of the inflamed part, which is so essential for the restoration to health, it has been their object to destroy. In doing so, we argue they act in opposition to sound theory, and as we shall afterwards attempt to show, to good practice also."—*Cl. Lects.* p. 270.

Arguing still against the same mistaken notions which have full control of Dr. Smith, Prof. Bennett says:—"That an accelerated and strong pulse in inflammation demands interference on the part of the medical practitioner, seems to be a principle that has been very generally acted on. In other words, because nature accelerates and strengthens the pulse, it has been thought that art ought to interfere and diminish its force and frequency. But

here again, as it appears to me, the result has been mistaken for the cause, and so far from getting rid of inflammation by weakening the pulse, we not only do not check it, but prolong the time for the transformation of the exudation." And on page 273, he thus continues, *a la mode de Thomson*, as if he had almost copied it from his sixty-year-old work:—"In short, we argue that the phenomena of fever, and excitability following inflammation have been wrongly interpreted, and that danger is to be apprehended from them not directly, but from the subsequent exhaustion which all great exertions of the animal economy produce. In themselves these are sanative, and indicate the struggle which the economy is engaged in when attempting to get rid of the diseased processes, and we only *diminish the chances* of that struggle terminating favorably by lessening the vital powers at such a critical juncture."

What a pleasure it is to a person who has been long struggling for these very doctrines, and encountering obloquy, sneers and derision for their sake, to find them endorsed at last by high authority, and in a fair way to become accepted as medical truth throughout the world!

But hear him again, and say, ye old Thomsonians, if another leaf has not been taken from the book of the "immortal Thomson?"

"It has been argued," continues Prof. Bennett, "that the relief which blood letting produces, justifies the practice. But this is a therapeutic question of the greatest importance and one which I venture to think has not been sufficiently considered by medical men. No doubt pain is a great evil; and mankind instinctively seek for its relief, and sometimes at any cost. But if the possession of life be an advantage, it is sometimes only to be maintained at the price of suffering more or less privation and pain, for in considering the question in its therapeutic or curative aspect, the great object of the physician is *first* to *cure*, but should his attempts in that direction fail, then to *relieve*. If both objects can be accomplished so much the better, but if the means of *relief* are opposed to those of *cure*, then to obtain the *latter*, the *former* must be unhesitatingly sacrificed. Assuming it as granted that the pain in some cases, is relieved by bleeding, and that in pneumonia the respiration temporarily becomes more free, at what a *cost* are these advantages obtained should the patient be so weakened as to be unable to rally. Even if he does rally, a large bleeding almost always prolongs the disease. It therefore follows from the arguments which have been adduced, that the past *principles*, which have indicated the practice of bleeding in inflammations are *erroneous*." —pp. 273, 274.

Dr. Smith's "symptom" treatment is not in high repute with Prof. Bennett, any more than his ideas on blood-letting, or his palliative rather than curative treatment; and while quoting from the work, we will introduce a few short sentences to show it. He says, page 259:

"It seems to me, however, that hitherto most remedies have been employed too much in reference to symptoms, and with too little regard to the pathological states producing those symptoms, or to the intimate relation existing between the nutritive and nervous functions. For instance, impaired digestion may cause head-ache and sleeplessness. We can relieve the latter symptoms by morphia.

But if this remedy increases the want of appetite, which it does, what have we gained? Only temporary palliation of the more urgent symptoms, whilst their cause, so far from being removed, is really intensified. This distinction between a palliative and a curative treatment, has been too much overlooked in medical practice. Drugs have been given to relieve symptoms, while the causes producing these have not been sufficiently attended to. Need it then excite surprise that, as our knowledge of pathology has advanced, and our means of diagnosis has improved, this discrepancy has become more apparent, and that we now direct attention more to the causes and less to the effects, or symptoms of disease."

Ah! Dr. Smith, let us advise you to procure a copy of Bennett's Work; it will well repay perusal; and if you can rise from it a mere treater of symptoms, a bleeder, or a believer in antiphlogistic principles and remedies, or glorying in the thought that time honored Allopathy is founded on empirical facts that are centuries old, you are more incorrigible than we think you, and far more conceited or prejudiced than we give you credit for being.—But lest it be possible that you will *not* look for yourself, we will give one more quotation, which may tend to narrow down your ideas in relation to inflammation being a multiform disease, and enable you to estimate at their true value the facts of which you seem so proud. On page 261, he says:

"Clinical observation, based on a more correct diagnosis and pathology, has demonstrated that artificial and nosological groups of symptoms bear no relation whatever to the internal inflammations they were formerly supposed to indicate, and has led to a mass of information connected with internal disease, which up to this time has never been correctly systematised.

"Again, more recent histological research, by exhibiting to us that inflammation is in truth a disease of nutrition, governed by the same *laws* that determine the growth and functions of cells, as they exist in the embryo and in healthy tissues, and thus uniting Physiology and Pathology into one science, has removed our *present* knowledge still further from the *traditional errors* of the past. Why then should we, in our onward course, be governed by the opinions of Cullen and Gregory, of Gaubius and Sydenham, of Aretaeus and Hyppocrates? These distinguished men all pushed forward medicine in their day, as far as they were enabled by the then state of science, and the means within their reach; but the principles which guided them ought no more to be considered laws to be followed *now* by practical physicians, than should the exploded astronomical doctrines of Copernicus and Tycho-Brache, be acted on by practical navigators. 'Medicine is not a scientific art which is dependent for its principles on the study of, and commentary on the older writers. What *they* thought or what *they* said are not, and ought not, in a question of this kind, to be our guide as to what was or is. On the contrary, it is the book of nature, which is open to all, that we ought to peruse and study; and why should we read it through the eyes of past sages, when the

light of science was comparatively feeble and imperfect, instead of bringing all the advanced knowledge of the present time to ellucidate her meaning. The lesson which a careful study of the history of medicine has forced upon me, is the necessity of re-investigating, with all our approved modern appliances, the correctness or incorrectness of existing dogmas, in order to establish an improved practice for the future.' "

But enough of extracts on this subject; we trust the Dr. will procure and read the whole—as it is the most recent and authoritative exposition of Allopathic advancement in principle and practice that we have—and thereby learn to put some faith not only in "Books", but in great governing "principles" and well "established laws," and be enabled to appreciate the difference between noble scientific simplicity and the thousand and one incongruities that characterise the Allopathic practice as portrayed in his pamphlet, and we have no doubt that when he has done so, many of the beauties of it, as he now sees them, will look so "hard featured" and repulsive, that he will hardly be willing to acknowledge their paternity.

But if they can't practice blood letting from the Books, could they with any other of their more prominent agencies? for instance

MERCURY.

Of this agent Pereira says:—"Mercury was first employed by the Nubian physicans Avicenna and Rhazes: but they ventured to use it only against vermin and in cutaneous diseases. We are indebted to the renowned *Empiric* Paracelsus for its administration internally."

Prof. J. P. Harrison, in his Therapeutics, vol. 1, p. 161, says: "Of all the remedies which chemical science has conferred upon the art of healing, there stands no single article so pre-eminently endowed with a diversified capability of curing disease as calomel." "Mercury is the great anti-inflammatory, anti-febrile alterant of the Materia Medica", and adds: "When we declare that its powers are unique and unrivalled, we only embody the general testimony of the profession in its favor."

Prof. N. Chapman says, in his Therapeutics, page 182: "It (calomel) is chiefly relied on in fevers, especially bilious fevers—in obstructions of the bowels—in cholera—and is unquestionably the most appropriate purgative in the early stage of dysentery." "Nearly devoid of taste and odor, and minute in dose, it will often be taken when other medicines are refused, and may be so *disguised* as to be *imposed* on the most *suspicious* or *unmanageable* of our patients."

Marshall Hall says: "Next to blood-letting, mercury seems to be our principle remedy in inflammation."

In WATSON'S PRACTICE, page 154, it is said to be "a very potent, but a two edged weapon."

In HOOPER'S Medical Dictionary, it is said, "There is scarcely a disease in which mercury, in some of its preparations, is not exhibited."

J. Dickson Smith, M. D., of Macon, says: "We do use it, (calomel,) and because we know it to be a valuable remedy, and one for which there is *no* substitute in many cases. The ill-fame and unwholesome reputation that calomel sustains in the eyes of the Thomsonians, has reached them through the irrational employment of it by 'quacks.'" Very likely.

CONTRA.

It is said, page 350, UNITED STATES DISPENSATORY, "Of the modus operandi of mercury, we know nothing, except that it probably acts through the medium of the circulation, and seems in many instances to substitute its own action for that of the disease."

DR. BELL says: "Mercury excites restlessness, anxiety, and a very distressing irritable state of the whole body. In some it produces delirium, in others palsy and epilepsy."

Prof. Drake, in the Western Journal of Medicine, vol. 2, page 636, says: "Mercury has been found in the bones, blood, brain and nerves." "Ulceration of the mouth is a well known effect of mercury. Ulceration of the throat is likewise a consequence of the use of this mineral," p. 589. "Various symptoms indicating a disordered condition of the nervous system, are met with in persons who have been exposed to the baneful influence of mercury, such as wandering pains, a tremulous condition of the muscular system, sometimes accompanied with stammering, and occasionally terminating in paralysis, epilepsy, or apoplexy."

PEREIRA, one of the "*quacks*" referred to by Dr. Smith, I suppose, says, page 587: "In some cases the gums slough, the teeth loosen and drop out, and occasionally necrosis of the alveolar process takes place. During this time the system becomes extensively debilitated and emaciated, and if no intermission be given to the use of the mercury, involuntary actions of the muscular system come on, and the patient ultimately dies of exhaustion." "I have repeatedly seen inflammation and ulceration of the mouth, and profuse salivation induced by a few grains of calomel, or some other mercurial."

Dr. WATSON, another of the Doctor's "quacks," says: "If you push this remedy in healthy persons, *inflammation is actually produced;* the gums become tender, and red and swollen, and at length they ulcerate; and in extreme cases, and in young children especially, the inflamed parts may perish." "Patients that are kept under the influence of mercury grow pale as well as thin, and Dr. Farre, who has paid great attention to the effects, remedial

and injurious, of this drug, holds that it quickly *destroys red blood* as effectually as it may be *destroyed by venesection.* The facts I have already mentioned, he continues, show that it works by pulling down part of the building."

"Quack" COOPER, in his Surgery, page 170, says: "Mercury occasionally attacks the bowels, and causes violent purging even of blood." "Mercury, when it falls on the mouth, produces, in many constitutions, violent inflammation, which ends in mortification."

Another of the "Quacks" through whom the ill-fame and unwholesome reputation of calomel has reached us, is Prof. THOMAS GRAHAM, of the University of Glasgow, who says:—Indigestion, page 132, "When I recall to mind the numerous cases of ruined health from the excessive employment of mercury, that have come to my own knowledge, and reflect on the additional proofs of its ruinous operations which still daily present themselves, I cannot forbear regarding it as a minute instrument of *mighty mischief*, which instead of conveying health and strength to the diseased and enervated, is made to scatter wide the seeds of disease and debility, of the worst kind, among persons of every age and condition." At page 134, he says, "There is not in the Materia Medica another article which so immediately and permanently, and to so great a degree debilitates the stomach and bowels, as calomel; yet this is the medicine that is prescribed and sent for on every occasion. Its action on the nervous system is demonstrative of its being an article inimical to the human constitution, since what medicine besides, in frequent use, excites feelings so horrible and indescribable as calomel, and other preparations of mercury?"

Prof. J. P. HARRISON, another "Quack," to whom we are indebted for a portion of the ill-fame that calomel sustains in our eyes, page 150, Therapeutics, says: "Mercury is often a very potent engine of mischief. An inscrutable peculiarity of constitution renders it a matter of great peril for some persons to take mercury in any shape. The smallest dose of blue bill or calomel will, in such individuals, create the most alarming symptoms, and death will sometimes result from taking a few grains of either." Page 157, he says: "By its rapid irritating impression on the gastric mucus tissue, or upon the skin, it may act as a poison." Page 160, he says: "A child of six took six grains of calomel, and lost his whole left cheek, and soon died. Another unfortunate victim of mercury lost a part of his nose, and most of the palate of his mouth, and died of phthisis pulmonalis!" And again, page 161, he says: "I have seen another case in which the child took several doses of calomel before the mouth became inflamed, and was saved with the loss of nearly all the teeth of both jaws, and a portion of one cheek!"

Prof. JAMES HAMILTON, of the University of Edinburgh, says:

"Among the numerous poisons that have been used for the cure of diseases, there are few which possess more active, and of course more dangerous power, than mercury. Even the most simple and mild forms of that medicine exert a most extensive influence over the human frame, and many of its chemical preparations are so deleterious, that in the smallest doses they speedily destroy life!" "In some cases, besides the ordinary ulceration of the gums, and loosening and final separation of the teeth, the tongue, movable palate, &c., swell and ulcerate to a frightful degree." Page 107, he continues: "From what has been stated respecting the injurious effects of calomel, upon some constitutions, and the impossibility of distinguishing those individuals to whom that mineral in every form, is apt to prove noxious, it must be evident that no physician can *calculate with any degree of certainty* on the safe operation of mineral purgatives; and no preparation of mercury *can* be administered without the risk of some consequences ensuing which could neither be intended nor suspected!"

From such "Quacks" as these have Thomsonians derived "the ill-fame and unwholesome reputation of calomel;" that its *irrational* employment by "quacks" may have been the cause of their having had it in their power to describe its effects, we will not deny, since it was introduced to the Profession by that Prince of "Quacks," Paracelsus; and if every man who has given it to the *injury* of his patient, rather than to his benefit, or who has employed it *irrationally*, as Dr. Smith says, be a "quack," a single *quack* from each would reverberate through the country with such a deafening din that all the "steam whistles" that have ever been blown would be *no where* as compared with it! And if nobody but a "quack" has ever been known to spread the ill-fame of calomel, or given it the unwholesome reputation it sustains in the eyes of the Thomsonians, what position shall we assign to Dr. Smith, who boldly declares that its "powers have been *dreadfully* abused?"

But then he *knows* it to be "a *valuable* remedy, and one for which there is *no* adequate substitute;" and when, like Chapman, he considers that it is "nearly devoid of taste and odor, so minute in dose that it will often be taken when other medicines are refused, and withal may be so *disguised* as to be *imposed* on the most *suspicious* patient," who having heard of its terrible effects becomes "*unmanageable*" when it is proposed to give it openly, he conjures the "terrible spectre" before which his patient "stands aghast," and *imposes* it on him in *disguise*, perhaps. But there is no cause for alarm, it is Dr. Smith who gives it, and there can be no danger of his employing it IRRATIONALLY, for the corrector of abuses in others is himself above suspicion; and the man who extracts "beams" from the eyes of others, must not allow the shadow of a mote to rest in his own; and those who know the

Doctor must admit that in this particular, at least, he is specially industrious and careful!

This, however, brings us back to the original point again, and the question arises still as to the possibility of any body practicing by Allopathic Books, who has the slightest idea of extending his research beyond *one* of them? If he tries to follow two or three, he will find it as impossible to do so as Dr. Chapman says it is "to arrange the fleeting vapors around us, or reconcile the fixed and repulsive antipathies of nature;" and Dr. Smith is decidedly wrong when he says that we say "there can be no CERTAINTY in medicine, unless there is rigid adherence to books," for it is as plain as two and two make four, that there can be *no* certainty if they are adhered to!

An appeal to the books would be attended with the same result in the exposure of Allopathic tergiversations in the use of any other of the principle agencies by which they treat disease, and we would deem it almost an act of supererogation to trouble the reader with more, were it not for the attempt of Dr. Smith to palm off

OPIUM

As a *safe* remedy; "an idea," that we think, "is calculated to do a vast deal of mischief, for it sets aside every thing like care and caution, and begets habits of recklessness and abuse," on the part of those who use it. "Not even a child," says the Doctor, "need ever be killed by it." "It is invaluable as a remedy, and *safe* in the hands of rational and prudent practitioners."

It is true he admits that it can be *made* as efficient a POISON as any mineral that can be mentioned, (a proposition that we have never heard gainsaid by any body,) and says "they *could* produce death with it, or other articles, if they choose to give them as POISONS rather than CURATIVE REMEDIES." From which it is fair to infer that when it kills it is because they *choose* to let it, and that not even a child need be KILLED when they *choose* to prevent it! So that no fault need be found with the article, or the system under which it is given, when MISCHIEF results, but the "person" who administers, according to Dr. Smith, must bear all the blame, and nothing short of "anguish and remorse" can atone for the act that consigned a fellow mortal to the grave, however small the dose, or however well the known rules of administration may have been followed. For the special edification of Dr. Smith, and to relieve the "bleeding hearts" of those who have been doing MISCHIEF with opiates, we will quote a few examples of what OPIUM has done, which may also be taken by way of warning by those who are disposed to believe with the Doctor that it is a *safe* remedy.

Prof. J. P. HARRISON says: "A very small portion of opium will sometimes produce convulsions in a very young patient. We

have known the half of a grain of Dover's powder, which is but the twentieth part of a grain of opium, induce fits in a delicate child of a few days old. Christison relates several interesting examples of death in children from small portions of opium. An infant three days old got by mistake about the fourth part of a mixture containing ten drops of laudanum. The child died in twenty-four hours. The administration of three drops of laudanum to a stout child fourteen months old, was followed by convulsions and death in six hours. Another child of nine months died in nine hours, after taking four drops." Opium stupifies for a while, he says, and forces the child into an unnatural sleep. It enhances nervousness. "If the brain is affected it increases the disease." "Inflammation of the stomach and bowels will be made worse, perhaps incurably worse by an opiate. It is hurtful because it is contrary to nature. Paregoric, Bateman's Drops, and Laudanum, lay the foundation for head complaints, such as inflammations, convulsions, and dropsy of the brain. The intellect of a child will be impaired by it, though years have elapsed after the practice has been abandoned. A permanent ill-conditioned state of the nervous system is induced by the repeated giving of opiates to infants, that never *through all subsequent life* is entirely got rid of by the most strenuous endeavors. A tendency, we doubt not, to insanity, is thus engendered or augmented. Such children pass through the process of teething badly. The stamina of the constitution is weakened by it. The stomach and bowels lose their tone, and cholera infantum is more apt to fasten on them."—Therapeutics, page 182.

Prof. Eberle calls opium a "treacherous palliative," under which "the appetite and digestive powers fail; the body emaciates, and the skin becomes sallow, dingy and shrivelled; the countenance acquires an expression of languor and suffering, and a general state of apathy and feebleness ensues, which ultimately often leads to convulsions, dropsy in the head, glandular indurations, incurable jaundice, or fatal exhaustion of the vital energies." Diseases of Children, page 199.

Prof. J. A. Gallup says: "The practice of using opiates as anodynes to mitigate pain in any form of fever and local inflammation, is greatly to be deprecated; it is not only unjustifiable, but should be esteemed unpardonable."

Dr. J. Johnson says: "The whole tribe of narcotics, as opium, hyoscyamus, hop and laurel water, or prussic acid, are dangerous sedatives, presenting allurements to the unwary, with all the suavity and meekness of the serpent of Eden, and the deception too often is equally fatal."

But what need of more—"by the mouth of two or three witnesses shall every word be established." But here are a cloud of them, than whom Allopathy elsewhere than in Macon, can boast

no better. They "seem not at all delicate in their style of denunciation;" they speak as if they felt what they said, and for our part we believe every word of it; and for that reason, unlike Dr. Smith, we denounce the "*system and the remedies*," and pity the "persons" who, in obedience to a theory that has been *proved* to be "*erroneous*," feel themselves compelled to pursue such a destructive course, while they so heartily deplore its consequences! If what they say is considered "*abuse*" by Dr. Smith, the key upon which they pitch it existed long before the "steam whistle" ever "reverberated over the hills of New England," and even since the "study of Pathological Anatomy" has proved the *fundamental principles* of Allopathy *wrong*, and inaugurated the "*revolution*" that is taking place in their practice of medicine, much of their talent and their time has been spent in the same kind of denunciation, so that the Thomsonians have not found it necessary to spend any time in "conjuring up expressions of vituperation," "slanderous" or otherwise, for they exist already in great profusion throughout Allopathic writings, and the two articles on medical abuses, by J. Dickson Smith, M. D., of Macon, are a perfect mine of them!! But whether the talent that produced them was "inspired?" or whether it has "gone to waste" in such "invective abuse?" or whether in "conjuring them up" a "scrupulous regard for *truth* has been observed?" is not for us to say.—These being questions in which the "persons" of his brethren have a peculiar interest, we leave it for them to answer yea or nay.

The most vituperative expressions *we* ever indulge in, are *quotations* from his own or his brethren's writings; and unless *truth* be "slander," we claim entire exemption from the charge of using any such weapons of attack, for we have ever exhibited such a "scrupulous regard for truth" in all that we have ever published as fact, of our own knowledge, that we will give Dr. Smith, or any other man, five hundred dollars to produce a single instance in which we have departed from it during the long period in which our name has been before the public! And since *he* has called it up, we hereby *dare* him to make a like proposition in regard to what *he* has published in the last three months.

We do call the Allopathic system a "system of giving poisons." And is it not so? What other system proclaims doctrines like these?

Hooper, in his Dictionary, says: "All our most valuable medicines are active poisons."

Prof. Paine, in his Institutes, No. 854, says: "The most violent poisons are our best remedies." "*Ubi virus ibi virtus.*" Where poison is there is virtue!

Dr. Smith says: "It is a plain axiom in medicine, that an agent that cannot possibly do harm, cannot do any good," and "one of the first lessons for the Doctor to learn is, that his remedies may *kill* instead of *cure*."

Dr. John Mason Good says: "The science of medicine is a barbarous jargon, and the effects of our medicines on the human system are in the highest degree uncertain, except indeed that they have *destroyed* more lives than *every pestilence and famine combined!!*"

Is it, then, "slanderous" to call such a system "a system of giving poisons?" Or is it necessary, in denouncing it, to be "delicate in the style?" Must a man who sees his neighbor's house on fire, be careful about the style in which he makes the announcement to him? Or must he treat gingerly the incendiary who applied the torch? If Jno. Mason Good was correct when he made the statement that their *poisons*—which are counted their best medicines—have *destroyed more lives* than every pestilence and famine combined! ought not every man possessed of the slightest pretention to *rationality*, "to spurn Allopathy as beneath notice?" drive it out as a "wolfish intruder?" and "hurl it as he would an adder from his door?"

INFALLIBILITY.

Continuing the application of our glass, however, to the "vindication," we find another text, which is manufactured in the usual way, and some of the very nicest writing predicated thereon, it is possible to conceive, in which is blended the pathetic, the didactic, the philosophical and the witty, interspersed with more admiration points and notes of interrogation than we care to count, and all predicated upon the assumption that "Dr. Thomson claims Thomsonian remedies *infallibly* successful!!" Strange, that a man who looks so closely to the "circumstances" and "conditions" that surround his patient, should be so blind to the conditions that so plainly apply to a proposition that he that runs may read! Are our positions really so strong that they *dare* not be fairly met?—Must other than the true issues be raised in order to make them at all assailable? It really seems so, and we take the Doctor's efforts to put words into our mouth that *cannot be quoted* from our writings, as highly complimentary to our judgment in selecting them, the more especially so, that on the false issues all his batteries are pointed, while we sit quietly by and see the "waste" of amunition that a "talent," un"inspired" by "rationality" is throwing away for want of a little "investigation" into the "circumstances" of his own case and the "conditions" that so palpably surround him.

"Infallibly successful?" here is what we say: "yet the practitioner would not have a doubt of his success even from the first, and *if there be sufficient energy in the system*, he must succeed, there cannot be a doubt about it, because the practice is based upon laws just as certain as those that sent Newton's apple to the ground, or maintain the worlds in space." Again, by way of emphasizing the condition we say: "But if assistance is rendered

and the internal energies are increased, the result is again *assured unless both the energies and assistance be overtaxed.*" Yet, with these conditions staring him in the face, Dr. Smith gets off such rhapsodies as these: "Has Dr. Thomson never lost a patient? Can they all stand up to-day and pronounce him blessed, and testify to the *infallibility* of his all-healing remedies? Can they?" But if some of them have died, why did they die? Why did not the Dr. cure them with his "infallible remedies?" Where is the "immortal Thomson," the progenitor of this immaculate "Botanic system?" Gone to the spirit land, where many of his patients went before him! Why was it that his "infallible herbs" did not save him *perpetually?* They grew indigenous all around him, and he gathered and sold them by the quantity. Ah! he forgot to keep the inward heat about the outward, and the fountain above the stream, else perhaps all would have been safe. His No. 2 and No. 6 must have failed him as stimulants. No. 3 could not "clear off the canker," and alas! he died." (at 80.) Why does not Dr. Arnold recommend the critical study of the noblest living language to his brethren, rather than the classics, or any minor modern language known? It does seem to us that a more critical knowledge of his own vernacular, would have saved the penning of such—Balderdash, a friend suggests—as this, and saved the Doctor's credit for that "n arrow discrimination" that he says is so essential to the well qualified medical practitioner.

Alas! like Dr. Smith, WE cannot boast of "universal infallibility," in the use of all the means we employ *in assisting nature* "to combat disease." "OUR hearts are sometimes saddened, and OUR feelings deeply humiliated, when WE see our friends die around us in spite of our best directed efforts to save them," and however well we may be aware of what OUR remedies *can* do, we also know what they *cannot* do; but however nearly we may calculate the *invariable* legitimate effect of them upon the system, we no where claim them "infallibly successful," unconditionally, and defy Dr. Smith, or any one else, to show that we do.

But while we deny all pretension to the use of remedies that are "infallably successful," we do claim that with our remedies success is *certain*, "if there be sufficient energy in the system," or "unless those energies and assistance be overtaxed" by the severity of the disease; and with these conditions precedent, we hold that with those remedies fever and inflammation can be controled *invariably*, or just as certainly as food relieves hunger, or water thirst. We do object, however, to Dr. Smith "judging every body by himself, or applying the nonsensical logic" of Allopathy to our new and vigorous system, which is grounded, not in "the lore of experience," *such* as we have shown his to be, but upon the immutable laws of nature that control the animal economy in health and disease by laws which are just as exact and fixed as those of gravi-

tation; and however WONDERFUL such a statement may be to him, the *fact* is doubtless now known far beyond "the walls of the Thomsonian College," for is it not proclaimed from Edinburgh that physicians there "point to the *establishment of scientific laws* instead of *empirical rules*," and what follows? "*The abandonment* of a *palliative* in favor of a *curative* plan of treatment; and they back themselves up with a showing of seven times less mortality following a treatment of which Dr. Bennett says, p. 288: "It has been further shown that in recent times our success in treatment has been great *just in proportion as we have abandoned heroic remedies*, and directed our attention to furthering the natural progress of the disease." Hence, we trust that although Dr. Smith be blind to the establishment of those great truths and principles, he will not give himself the slightest uneasiness about the optics of his neighbors, for the defect in his retina makes it dark only to him, where to them all is light and sunshine, and his good judgment might be doubted if he insists upon it that all must be in darkness when he shuts his eyes.

The ship that is unseaworthy may never reach port, and yet no blame be attachable to the mariner that sails her, or the laws by which she is guided; so, likewise, neither should the Doctor be blamed for the state of his patient's secretions, or the extent of the injury already caused by them, if he faithfully labors to correct the one and repair the other, through the use of agencies that cannot destroy; but should the mariner, through mistaken notions, bore a hole in the stern of his ship, in order to counterbalance a leak that is already in the stem, or the navigator through disregard or ignorance of the laws of navigation, run her upon a lee and rocky shore, the case would be entirely different; so, also, should the sapient Doctor conclude to open a vein at one place to arrest hemmorrhage elsewhere, and for want of knowledge of disease, and the *laws* that govern it, conclude to treat a *symptom* rather than disease, and it turns out that what would cure the *symptom* would *kill* the *man*, and the patient dies, not so much of the disease but of the remedy, that case is also, different, and should entail the heaviest responsibility as well as accountability; yet how often is it the case, that patients may be "*bled down irrecoverably*" by the thousand, and tens of thousands die by means that fill the heart of the practitioner with "anguish and remorse, for the mischief he has done," while he enjoys socially, the greatest *eclat*, and is praised for the ease he has given, and the skill with which he "smoothed the passage to the grave?" while the other, believing with the Edinburgh Doctors, a *curative* far better than a *palliative* course, pursues it, by means of agencies it may be as harmless as oil or young hyson; yet so frail may be the thread that holds to life that ere the state of the excretions are fairly discovered to be inimical to life, and long before they could possibly be removed, the brittle

thread is snaped, the frail bark has foundered, and the Doctor, or mariner might be blamed, but that does not deprive them of the consciousness of having done their duty; of having stood by their charge to the last, and fought the battle with the waves, or grim king, manfully, and when all is lost, no qualms of conscience disturb the mariner who used no auger and kept his vessel off the rocks, and no "anguish and remorse" is felt by the physician, for no *mischief* has been done by him since none could result from his remedies, that were given to *assist* nature, however inadequate both may have been to conjointly resist the attack.

We say that we *assist* nature in the cure of disease, and never thwart her efforts, by withdrawing her forces, or lulling her energies into false security by opiates, thus, Delilah like, shearing her locks and tying her hands, while the enemy is upon her, but come to her aid with such agencies as experience has proved efficient, yet harmless, and thus the Philistines are scattered that otherwise would have bound her hand and foot.

In doing this, however, the present comfort of the patient may be considered of secondary consequence and must frequently give way to considerations of more importance connected with the future good and even life of the individual; for with Prof. Bennett, (so often referred to, because the latest authoritative Allopathic writer at the highest seat of learning,) we consider "The real tests of successful practice are not to be sought for in the relief of *symptoms*, [as Dr. Smith contends,] but in the removal of the disease; and that treatment will be best, which *cæteris paribus* causes fewest deaths, and recovery in the shortest time." Pursuing, therefore, a *curative* rather than a *palliative* course of treatment, we readily admit that our system is not so well adapted as the Allopathic to the treatment of those who would rather doze away into eternity under the influence of opiatic dreams, under treatment directed towards combatting the "*symptoms*" that might cause disquietude, than meet like men the emergency that is upon them, and struggle for life as with an open enemy at any sacrifice.

It is also readily admitted that about our treatment, already alluded to, there is a *simplicity* and *oneness*, that to a practitioner who treats *symptoms*, looks absurd, but it by no means follows that because *he* cannot grasp the idea of a great principle, none such exists! Could not old Adam, so far as the principle is concerned, have communicated with his sons by telegraph, carried his daughters with their families a pleasuring on the Euphrates or Tigris by Steamer, or rode them by rail to the primitive cities of the plains, had he but known the manner in which it could be done? Did not the same laws control matter then as now?—Yet though these laws have existed through all these ages, the application of them has been hidden from mankind till our own time, when the demonstrations that are made through their agen-

cy confirms our belief in their existence; yet is it not a fact that scepticism possessed the minds of multitudes who denied the possibility, just as Dr. Smith does, till actual result made demonstration sure?

It is for the thinkers of the world to discover great principles, but all they can do is to present them; capacity to understand them is not theirs to give!

Dr. Smith very modestly concedes that they do not claim medicine as an *exact* science. How could they, so long as its treatment is based on symptoms that are so variable that no two cases are ever found alike? and of course must be as numerous as leaves on the trees!

But that does not prove that the laws of health and disease are not as fixed as those of gravitation, or that they cannot be known, or that they are not already known. It only proves that Dr. S. does not know them, and Prof. Bennett, in his introduction, p.16, gives the reason. "All these contradictions," he says, "depend upon imperfect attempts at correct theory, and this latter once rendered perfect, *it will be seen that health and disease are governed by laws as determinate as the motion of the planets and the currents of the ocean.*" So it will be seen that even among the Allopaths light begins to shine, and though Dr. Smith be still in the mist and under a cloud, there is yet hope for him, for doubtless even the *darkest corners* will be penetrated by the light of the sun of scientific truth, and the *waste places* of superstitious error will be presently exposed to his beatific beams.

Till then, however, we must take Dr. Smith just as we find him, a perfect type of what Dr. Harvey—the discoverer of the circulation of the blood—found his brethren when he said of them: "Any man who presumes to dispute their doctrines, or to practice in opposition to the prescriptions based upon them, is denounced as a quack and a murderer, and is visited with a malicious persecution that stops at nothing short of his destruction, root and branch!" for the same spirit is evinced on p. 33 of the Pamphlet, when he says "it will be our pride as its humble votaries to guard well its portals (swear the students?) by suppressing, if possible, all illegitimate and erroneous practices within our borders," and especially guard the "ignorant masses" against the Lobelia and Steam system, on account of certain "baneful errors," which through it are "legalized."

Well, where "baneful errors" are to be corrected, and "erroneous practices" exposed, we are always on hand and ready to help forward so "laudable an undertaking," and think we have already helped Dr. Smith with some effect, in directing particular attention to the articles he has written on medical abuses; but while we are always ready to throw away the tares, we are specially solicitous to save the wheat, and therefore feel compelled to

gather in and garner up the solid grain that Dr. Smith has cast away so lavishly, while treasuring the chaffy stuff that has no real value in the more enlightened judgment of many of his own brethren.

Truth is what we seek, and when found, accept her, regardless of her trappings, and make it a point of honor, if she be persecuted, to stand the closer by her, and when she is slandered and maligned, defend her fair fame, regardless of the *cost*, having no more doubt that

"Truth crushed to the earth will rise again"

than that the sun will shine to-morrow; but if the time should come when "all men speak well of her," we should scrutinize her all the more "narrowly" for fear she might be counterfeit.

"MEDICAL REFORM PAR EXCELLENCE."

Well, in medicine, we think and believe that some new and great truths have been discovered and enunciated, which, although "veritable," have not been received with such hosannahs by the people as Dr. Smith thinks they should have been, but that is easily accounted for when we consider that, like the doctrines of St. Paul, they interfered with the means by which certain parties "had their wealth," and they opposed them. They had the misfortune (?) to be enunciated by a poor illiterate farmer who had only been to school "a month," as Dr. Smith says, and had no more chance in the Nineteenth Century of the world's history, than those of the fishermen, whose schooling, it is hardly supposable, was quite so much, in the first; yet, notwithstanding persecutions, chains, prosecutions and imprisonments, the doctrines of the one keep steadily advancing just as the other did, until now not less than Five Millions of the people in these United States believe in them, and almost every man of the slightest pretension to *rationality* concurs in the belief that—whether these be the true doctrines or not, *reform* in Allopathic medicine is a *necessity*, because the light of Modern Science has demonstrated, that the antiquated bundle of *facts* (?) that Dr. Smith so relies on, having resulted from imperfect observation, gave rise to doctrines and principles that are now declared to be *erroneous*, and the practices based upon them, as compared with the results that follow the new, seven times more fatal to the deluded people who still cling to them, because they were once *thought* to be *scientific*, but now *demonstrated* to be *destructive* in that awful ratio by actual experiment in the Royal Hospital of the Edinburgh College, where the treatment is not only *simple* and easy of application, but so certain, as to put to shame the erratic and incomprehensible compromise practices of *symptom* treatment, so much lauded by Dr. Smith, and so "routine" withal, that the Doctor would be highly outraged were we to place him on the same level with the world renowned Professor

who is so nobly doing his whole duty in helping forward the *Revolution*, in medicine, which scientific "*knowledge*" has inaugurated, instead of holding, like Dr. S. to old "land marks"! and clinging to the practices whose results all deplore, and the doctrines that are *proved* to be "*erroneous*."

These new doctrines, as we have intimated, are purely Thomsonian, and the practices as nearly so as the state of their knowledge yet permits, but a better day is dawning even for the Edinburgh Doctors. Science is opening their eyes, but while it is doing that for *them*, it only shows our American Allopathists how foolish they have been to keep *theirs* shut for over fifty years, to truths then enunciated by the immortal Thomson, and since acted on before them, but by them despised, because their author was illiterate in the usual acceptation of the term, but full of real "*knowledge*," as his works testify, and recent scientific research shows.

These new doctrines, which long experience has proved demonstrable form the ground work of a system which, though much improved and refined since Thomson's time, yet claims him as their author, and though enunciated in such plain and homely style as a farmer who had the benefit of only "one month's schooling" would be supposed to use, they yet contain the elements of so much medical philosophy, that his followers at this day, have no difficulty in maintaining them before the world, because *all* the new discoveries in Medical Science—about which Dr. Smith so loudly boasts, but tend to confirm and verify their truth.

On the subject of Animal heat and its generation, the theory first enunciated by Thomson, and which Dr. Smith endeavors to ridicule, is now claimed by Leibig as his own, and endorsed by Carpenter, Draper and Paget, together with most other Physiologists of eminence at the present time. We will not say that Leibig borrowed from Thomson, but the fact is undeniable that Thomson's views upon that subject were in print and in the hands of thousands in this country, some twenty-five or thirty years before the appearance of Leibig's investigations, and were printed in England some ten years before the same period, and the inference is fair that Leibig had seen his book. Be that however as it may, Leibig's theory and Thomson's are almost identical, and Thomson was the first to scatter to the winds the old and preposterous friction and nervous influence theories, and maintain that animal heat originated from a combination of digested food and air, (carbon and oxygen) and instanced the fact that when digestion was perfect, heat was eliminated with more freedom, and the general health of the system promoted thereby.

Thomson's general position was, that heat was the supporter of life, and that its general depression constituted a diseased condition, or in other words, "that all forms of disease were attended with

diminished animal *heat*, and that the restoration, equalization or elevation of the temperature was the proper mode of restoring to health." As the animal heat therefore must be *increased* in order to cure the sick, it became a matter of first importance with him to know how to do this in the most direct way, and hence his efforts to procure agents calculated to sustain this heat and the selection of capsicum and ginger as two of the best. He did not pretend to explain the minutia of the processes by which heat was set free, that was beyond his power, but that he, at that early day, grasped the idea, put it in crude shape and made it his own, cannot be doubted: that Leibig made the same claim a quarter of a century later, is also true, and the question arises, Who was the discoverer? Who the copiest? Both *may* have been the former. Thomson could not have been the latter, though Leibig might, for in priority at least, America led Germany.

Having thus, though crudely, given the *first rational* explanation of the generation or production of animal *heat*, and been the *first* to promulgate correct views respecting animal heat as a dynamical force in sustaining life, and in preventing and expelling disease, his next great discovery was a part of, and was led to by, the same train of reasoning, so that he was the first to proclaim rationally to the world that what is called fever is not disease, but only a symptom of it; that the increased action of the heart and large arteries are efforts of nature to expel the real disease which consists of obstructions in the capillaries and smaller vessels of the system, and maintained that these efforts, instead of being thwarted, are to be promoted and assisted by every true physician.

He maintained that in fever and inflammation the heat and increased action are *curative* in their tendency, and are but the struggles of the healing power of nature to rid the system of those obstructions that exist in the shape of morbific matter that must be got rid of. He maintained that the physician who pursues a depleting course of treatment either with the lancet, drastic purges, narcotic poisons, or any other means that will depress the energies of the system, is contravening the plainest physiological laws, and diminishing the chances of his patient's recovery in proportion to their use, and that should they fail to destroy life, they yet left an impression upon the constitutional vigor of the system that was seldom or ever recovered from. These views, as we have already said, are being confirmed by the revelations of the microscope, the *rational* deductions from Physiological laws as *now* known, and the experimental or empirical results of clinical investigation, so that even here, the discoveries of Thomson that are older than half a century, are being hailed in Europe *now* as results of scientific research, and claimed as discoveries by those who propagate them.

Although we do not feel called upon, either to defend in *every*

particular whatever may have been said or done by Samuel Thomsom during the period of his long and useful life, or attempt to return the ridicule that Dr. Smith endeavors to cast upon his writings by showing up the fallacies of Hippocrates or the quackery of Paracelsus, we yet think it fair to give the public an opportunity of judging between the man who went to school "*a month*" and his reviewer, who, scholar though he may be, yet fears to quote him fairly, but garbles most wantonly, so as to destroy or warp the sense to suit his own purpose.

Here is an extract that explains the "color" of disease, referred to so facetiously by Dr. Smith:

"According to the writings of learned physicians there is a great variety of fevers, some more and some less dangerous. But to begin with a definition of the name. What is a fever? Heat, undoubtedly, though a disturbed operation of it. But is there in the human frame more than one kind of heat? Yes, says the physician, (strange as it may appear) there is the pleuritic heat, the slow nervous heat, the yellow heat, the scarlet heat, the spotted or cold heat, the typhus or ignorant heat, and many other heats, and sometimes, calamitous to tell, one poor patient has the most or the whole of these fevers, and dies at last for the want of heat. Is fever or heat a disease? Hippocrates the acknowledged father of physicians maintained that nature is *heat*, and he was correct. Is nature a disease? Surely it is not. What is commonly called fever is the effect, and not the cause, of disease. It is the struggle of nature to throw off disease; the cold causes obstructions and fever arises, in consequence of the presence of these obstructions, to throw them off. This is *universally* the case. Remove the cause the effect will cease. No person ever yet died of a fever, for as death approaches, the patient grows cold, till in death the last spark of heat is extinguished. This the learned doctors cannot deny, and as it is true they ought, in justice, to acknowledge that their whole train of depletive remedies, such as bleeding, blistering, purging, starving, with all their refrigerants, their *opium*, mercury, arsenic, antimony, &c., are so many deadly engines, combined with the disease against the constitution and life of the patient. If cold, which is the commonly received opinion, (and which is true) is the cause of fever, to repeatedly bleed the patient and administer mercury, *opium*, nitre, and other refrigerants to restore him to health, is as though a man should to increase a fire, throw a part of it out of the house, and to increase the remainder, put on water, snow, and ice"!!

Without stopping to inquire which seems the master mind of the two, or which in writing has the most forcible style, the collegian or the recipient of "a month's schooling," we would direct particular attention to the word *opium*, which we have underscored, to show the authority Dr. Smith possesses for saying "*the Thomsonian doctrine is, that vegetables are not poisons*", and would merely remark, that it requires a pretty "hard featured" cheek to make such a declaration in the face of the fact, that the vegetable poisons are the *first* denounced, yet he makes that the text of a considerable part of his pamphlet, though charity demands that we believe that he is not aware of what every body else is, that—*there is not a word of truth in it.*

In connection with the subject of fever, and the manner in which

he was *driven* to the treatment of it, we append another extract:

"I have found by '*experience*' that the learned Doctors are wrong in considering fever a disease or enemy. The fever is a friend and cold the enemy. This I found by their practice in my family, until they had five times given them over to die. Exercising my own judgment, I followed them and relieved my family every time. After finding a general principle in regard to fevers, and reducing that to practice, I found it sure in all diseases, *where there was any nature left to build on;* and in three years' constant practice I never lost one patient. I attended on all forms of fever peculiar to our country, and always used it as a friend. I soon began to give this information to the people, and convinced many that they might as certainly relieve themselves of their diseases, as of their hunger. This greatly disturbed the learned Doctors, and some of them undertook to destroy me by reporting that I used poison; though they made no mention of my using *their* instruments of death, *opium*, mercury, ratsbane and the lancet. I considered it my duty to withstand them, though I found my overthrow was what they aimed at. A plan was once laid to take me in the night, but I escaped. Next I was indicted as though I had given poison, and a bill brought against me for willful murder. I was bound in irons, and thrust into prison, to be kept there through the winter, without being allowed bail. I petitioned for and obtained a special Court to try the cause, *and was honorably acquitted* after forty days' imprisonment, and maintained my integrity in the place where my prosecution began."

We underscore the words above, for the purpose of showing that Samuel Thomson was not himself aware that he had been "repeatedly indicted for killing his patients," or that in even "*one* case heavy damages were obtained," as is asserted by Dr. Smith. But lest the Doctor should think himself slighted by having *his* assertion compared with that of Thomson, we append the statement of Prof. Waterhouse, who for twenty-seven years occupied the chair of Theory and Practice of Medicine in the Medical Department of Cambridge University, who had a personal knowledge of the whole matter. In a letter to E. G. House, Esq., of Boston, he writes: "Samuel Thomson, like most reformers, has endured in our county of Essex, as much severe persecution as ever was perpetrated in it; which is saying a great deal when we call to mind the days of the delusion of *witchcraft;* and though *capitally* indicted for murder by using lobelia, *he was discharged without a trial.*" And yet Dr. Smith, oblivious of the unenviable position he occupies on this subject, calls in question our statement when we said that "no case had been substantiated" as resulting in "*mischief* and *devastation*" from that treatment!

A few more extracts from parts that have been garbled by Dr. Smith, will give an idea of the fairness with which Thomson has been quoted and commented on, at the same time that they convey a general idea of his treatment, which instead of being confined to any particular articles, is susceptible of the employment of as extended a list as experience shall demonstrate are compatible with physiological laws, and act in accordance with the great *principles* on which his system is founded. He says:

"Food and medicine originate from the same munificent hand, grow in the

same field, and are adapted to the same end or design, viz: to supply fuel to the fire of life, to sustain and nourish the animal machine by warming, dilating, and filling the vascular system, maintaining the action and supplying the wasting powers of the living state. Medicine removes disease, not only by removing obstructions, but by restoring and repairing the waste and decay of nature.

"To understand the cause and nature of life and death, or of warmth and motion, of cold and inaction, it is necessary to advert to general principles, and the analysis of nature. There is one general cause of the natural sensations of hunger, and one general method to relieve that want or satisfy and relieve that sensation, which is suitable food. In perfect accordance with this, there is but one immediate cause of disease. However varied the remote cause may be, the immediate cause of the sensation of disease is uniformly and invariably the same, differing only in degree, and incidental diversity of symptom, occasioned by local injuries, organic lesion or functional derangement, dependent on these, or whatever might predispose to a diseased state. As there is one general cause of the sensation of hunger to be relieved by one general method, viz: food, and the food may consist of sundry articles adapted to the same general end, so there is one general or immediate cause of the sensations of disease to be relieved or removed upon one general principle, though a *variety of articles* may be used.—But as a few simple articles of diet are better suited to maintain a healthy state of body than an epicurean variety, so disease is more readily and certainly removed by a few simple remedies that are best adapted to the human constitution. 'That medicine that will most readily and safely remove obstructions, promote perspiration, and restore a salutary action of the digestive powers, by exciting und maintaining a due degree of heat, and action through the system, is best suited to every state or form of disease, and *must* be universally applica, ble to any diseased state of the human system!!'"

As Dr. Smith says "*these* were the original and most *wonderful* conceptions of Thomson, upon which was based his 'new' theory of medicine, known in this day as Medical Reform par excellence," and we are obliged to the Doctor for so emphatically conceding that it was "new," for the time is coming, and the Doctor will not be very old when it arrives, when, whether "Plato," or any other old Fogie "would recognize it as philosophical" or not, *the medical world will*, and the best advice his friends can give him is, be cautious, for he may yet have to eat his words, and leek together and burn his pamphlets before he is permitted to occupy a place upon that universal platform of medical truth.

With Dr. Smith, we are now ready to ask "What was his practice founded upon this new theory? His Therapia had to consist of "*whatever would most readily and safely remove obstructions, promote perspiration, and restore a salutary action to the digestive powers.*"

To do this he required—First an *emetic* that would *readily* and *safely* eject offensive matter from the stomach, at the same time that it acted as a *relaxant* of the whole body, and an *expectorant* by removing obstructions from the lungs, and as a *diaphoretic*, or *sudorific* by producing copious perspiration.

These conditions were supplied by the Lobelia Inflata, which to this day stands unrivalled in all these particulars, and is the only *safe* article so far as we yet know, that will effect these objects, but should anything better be presented, there is nothing in the new

system that will prevent its adoption. This in all its preparations, he called his No. 1. In effecting these objects, however, he required other agencies—in "promoting perspiration" he needed stimulants, and accordingly introduced ginger, cloves, capsicum, &c., &c,; this class of remedies he called No. 2. Still, however, he required other agencies, and detergents were needed to cleanse and depurate the coats of the stomach and bowels—these were supplied by Bayberry, White Pond Lilly, Hemlock bark, &c., &c., and this class was No. 3; but he needed something also that would *restore* a healthy action to the debilitated system; this could be done by bitter tonics, and accordingly a host of them were ready at his hand, and that class of remedies he denominated No. 4. His No. 5 and No. 6, as well as Composition, were compounded remedies, and his nerve powder, as its name imports, was used for anodyne purposes, to allay nervous irritability while these processes were going on.

These are the agencies referred to by Dr. Smith, who is correct when he says "Thomson likewise made use of Steam," because, in carrying out that simple programme he found that the vapor of hot water had a wonderful influence in "promoting perspiration" and "removing obstructions," and not only did it *readily* but *safely* also, which in all his administrations was the *sine qua non*, for nothing had any value in his eyes that could not be *safely* given.

Well, the number of articles that can be ranked under these heads is immense, and the limited number that Thomson discovered have been greatly increased since his day, but that does not alter the principle of their application, and it is still for the practitioner to use "*whatever*" will most *readily* and *safely* effect those objects, and we still maintain even in the face of Dr. Smith's apology for Allopathic ignorance, that the practitioner that cannot calculate the effect of his remedies with almost mathematical precision, and is not able to apply them to the "case in hand" on scientific principles, has no business at the bed side of a patient, for if he cannot do that, he is "compelled" as we before said, "to grope in the dark," and if he is not careful while using *poison*, is certain to do such "*mischief*" as must fill his heart with 'anguish and remorse,' unless devoid of feeling.

From this it will be seen that Reformers are *not* bound down to a few articles, but that many or few may be used as to them may seem best; they may be so mild as to have their action scarcely perceptible, or they may be so powerful as to relax the system with great rapidity, and arrest the most alarming attacks of disease, before the Allopathist, with all his critical "acumen and *narrow* discrimination, could determine what "the matter is," at the same time that they are so *safe* that the *devastation* and *mischief* that Dr. Smith says sometimes follow the exhibition of Allopathic remedies need never be apprehended. There is not *one* of the recog-

nized Thomsonian remedies that *can kill* a well man, in quadruple the authorized dose, if at all—which we do not believe—the assertion of Dr. Smith that Lobelia and others will, to the contrary notwithstanding!

This, in the face of all that has been said and written to the contrary, is a strong declaration, but that it is indubitably true, thousands will testify; and it is not needful to leave Macon to procure the witnesses, hence the general verdict among those who know is, that on this subject at least, Dr. Smith is a "veritable" "KNOW NOTHING," and on them the fine writing it has cost him so much pains to elaborate, is entirely thrown away, as well as all that is predicated upon the fact that "the deadliest poisons come from the *vegetable* kingdom!!"

Who doubts it? Certainly not the Thomsonians, who have denounced them from the first. Who then? NOBODY; and nobody knows better than Dr. Smith, that *nobody* was answered when that tirade was penned that ends in the sylogism, "ergo they give no *poisons*," for "*vegetables are not poisonous.*" It is certainly strange, "*passing strange*," that a gentleman professing to be a searcher after *Truth*, and a lover of it too, should so wantonly misrepresent the position of an opponent, that even the shadow of a likeness is not recognisable. But "wonders will never cease," we suppose, so we pass this over and let it go for what it is worth.

IS LOBELIA A POISON?

But Dr. Smith asks: "Does any one doubt that Lobelia is poisonous?" and after quoting Prof. Wood, who says "its operation upon the system bears a close resemblance to tobacco. Its effects in doses too large or too frequently repeated, are extreme prostration, great anxiety and distress, and ultimately death, preceded by convulsions;" asks again, "Do our Thomsonian friends doubt that these are the properties of Lobelia, correctly stated? And avers—"If they do, I will confirm *every word* by the evidence of Samuel Thomson." And quotes his description of the Alarm, in which *not a word* is said that could possibly be construed into an admission that "death, preceded by convulsions," ever did result from it! So that he has *failed* to prove *every word* of it by Thomson; and every Thomsonian in the country *knows* that the properties attributed by Prof. Wood to Lobelia, are *not* "correctly stated." But the Doctor relies mainly on what Thomson says to prove "that the emetic herb is a violent narcotic poison," for he experimented and tried it thoroughly, and records it as the result of his experience, that "three doses" will produce *the very alarming effects he has described.*" And Dr. Smith avers, "that this is amply sufficient to satisfy the most scrupulous medical jurist that it is a POISON!!" Logical, very!! If medical jurisprudence has formed any part of the education of Dr. Smith, he certainly has a poor way of showing that he has profited by it; for as we

read it, it requires no "jurist" at all to say that he has *not* made out his case. Has the witness said that it would *kill?* Not at all; he has expressly stated it would *not*, and that it is only "alarming to those who are unacquainted with the true cause and effect." Dr. Smith himself says, that it produces the *same* effects upon the system as are produced by other poisons, (all but the killing,) and considers the description of Thomson *exactly identical* with Prof. Woods. Yet the one says it *will* kill, the other says it *won't;* a rather *peculiar* coincidence it must be allowed.

If the "jurist" in this case were to give a verdict in his favor upon the evidence rendered, describing the alarming symptoms, he might find himself in the predicament of that in which the murdered man walked into Court after the verdict of guilty had been passed upon his supposed murderer! for assuredly the man that gets into the "alarm" from taking Lobelia, *cannot die then*, and would be *sure* to be able to confront and rebuke such a "jurist," and give the lie to his verdict of POISONED." Medical jurisprudence would teach the Doctor that it is always important in cases of an attempt to prove death by *poison* or violence of any kind, to produce the *corpus!* And if Lobelia will *kill*, it is surely possible to prove it in Macon, if any where, for in the last eighteen years there have been a *thousand or fifteen hundred pounds* of it used within the corporate limits. But where is the *corpus?* Has any body died of whom it could fairly be said Lobelia killed him? If so, who? Why, then, refer to books for proof that it is poison? Dr. Smith says they can't be relied on, but if they are referred to at all, common justice requires that they be *fairly quoted.*

But is Lobelia a poison? We say it is not, and can prove it.—Toxicologists know that the more *active* and healthy the system is, the less real poison it will take to *kill;* and the more *inactive* or unhealthy it is, the more it would require to produce that result. That being the case, how would Dr. Smith account for the fact that *Lobelia, in authorized doses, will not vomit a well man, nor will it make him even sick at the stomach!!* To say that it is "*wonderful!*" or "*magical!*" and turn off with a laugh, will not do; it is a serious question, and should be seriously considered, for the lives of men that are living *now* are dependent on it, and the happiness of all may be more or less involved in the issue. If that is the case—and that it is can be proved in numerous instances—is it not indubitable evidence that it is *not poison?* On the other hand, where much is the matter, if the reactive power of the system be intact, the *less* it requires to produce its relaxing and emulging effect. Can Dr. Smith name a single poison of which *that* can with truth be said? But it may be said these facts have only been observed by the Reformers, and should therefore be taken after making some grains of allowance. Well be it so. Make all allowance possible, but still consider the fact that

the testimony of more than five thousand Reformers in the United States, who are in the habit of using it daily, and who have given it in all quantities, from a grain to several ounces, in all sorts of conditions, are universally agreed as to *its innocence of poisonous properties*, while all those Allopathists who have *sworn on the stand* that it was a *deadly poison*, admitted upon cross examination, that they had *never used it*, and knew nothing about it *practically*, and then say whose testimony is most reliable, their's or ours, and judge accordingly. But we think there is a better evidence still, at least to the people of Macon, that even the Allopathists of Georgia do not consider it poisonous, for some ten or twelve years ago, when the same question was up, we offered a reward of five hundred dollars to any Allopathic Doctor in the State who would *kill* any mature healthful viviparous animal with Lobelia, in any reasonable quantity short of comparative stuffing.—And though to our knowledge that amount would have been a perfect God-send to many of them, who sometimes get a little *seedy*, yet it never has been claimed.

We now make the same offer to Dr. Smith, if he will promise to act fairly with his "*jug;*" but before he begins, we trust he will inform *himself* as to the difference between *relaxation* and *paralysis*, and hope he will inform *us* whether "incoherent speech" and "raving insanity" are never present except as the result of "narcotism." But whether he does so or not, we are anxious that he should set at rest the question as to whether "Lobelia is a poison," and trust that with the assistance of his friend who knows where the *facts* are, will put himself to some trouble to make *that* one *appear;* for though he has broadly asserted it, he has thus far signally failed to show that "Thomson has demonstrated to the world that Lobelia was a POISON and would KILL!!" And unless he goes to work and *proves* it, how will he prevent the suspicion of ignorance from not only resting on himself, but also on the noble profession of which *he* has assumed the championship?—Indeed, on his ability to prove that assumption to be a fact, rests the whole "fabric" of his pamphlet; for if that be *false*, the finest writing turns out the veriest *twaddle*, mere "sounding brass," in fact; and what he calls rational medicine in Georgia would stand convicted of having the most irrational of advocates, for from the specimens we have seen, it would be safe to infer that whatever Plato might have said as to Thomson's Philosophy, Locke would never have recognized Dr. Smith's Logic!

But Lobelia *will* produce alarming symptoms sometimes, though, as Thomson says, it is only so "to those who do not understand it." We have seen quite a number of patients even in Macon have the "alarm," but have never seen it terminate fatally in a single instance. In this respect our experience corroborates that of Samuel Thomson, who states that he "generally found it the turning point of the disease, and is generally followed

by a rapid convalescence." We have never seen any of the "*fifty*" hour kind of cases, neither can we find that statement in *our* copy of the "Guide," which gives from two to eight hours as the duration, and adds, "they then awake like one from sleep, after a good night's rest, being entirely calm and sensible, as though nothing had ailed them." And Thomson, whose testimony Dr. Smith relies on to prove it will *kill*, concludes thus: "I have been more particular in describing these effects of the medicine, as they are very alarming to those unacquainted with them, and in order to show that *there is no danger to be apprehended.* They are certain evidences of a favorable turn of the disease."

If this, reader, is the *worst* that Lobelia can do, and if that *worst* is *certainly* to be followed by convalescence, as all experience proves, would you not much rather see your wife or child in it than to see them narcotized with opium or belladona, dozing their life insensibly away, equally unconscious, yet without the shadow of a prospect of recovery? In the one case "they wake up like one from sleep after a good night's rest;" in the other, alas! in this life they know no waking, but must in reality be "given up for DEAD!"

An easy *death* can always be procured by opiates, and some prefer that as the manner of departure; others, with the assurance of recovery, prefer the anxieties of the "alarm," if need be, for the longest period, and forget their fears in the joy of a happy recovery. Reader, which do *you* prefer? The opiate to "smooth the passage to the grave," or the struggle for life? If curious in these matters, we can point you to more than one in Macon in whose cases their physicians had adopted the former course, but the latter was pursued, and they are yet alive to tell the story of their deliverance!

"THOMSONISM STILL THE SAME."

But "Thomsonianism," Dr. Smith says, is "still the same."—What a tremendous blow that is! *Still the same in principle!!* After it has been in use for three score years and ten; after it has stood the test of prosecution, persecution, chains, and penal statutes, and out-lived them all, to be taunted with its age!! as if *truth* changed, or great principles were the sport of time! Its principles ARE the same, that is its glory; and that they will continue the same, however much better the practice may be adapted to them, through endless ages, is our firm belief, because those principles have their origin in laws as certain as the laws of gravitation, which neither time nor chance can change. And Dr. Smith has but to look around him to discover that every advance or improvement making in his own system, is tending in the same direction; the old "landmarks" are being left, *change* marks its present movements, and will continue to mark them in the future, until all shall acknowledge that to destroy the "symptoms" is to

oppose the natural effort that produces them, and to the extent it is done endanger the patient's life, while to aid the development of the "symptoms," by seconding the natural effort, will restore to life many that would have died under the old *irrational* method that Dr. Smith now advocates, and calls "*Rational Medicine!*"

"Still the same in principle!" And therefore it is just as impossible now that there should be any "association" between it and Allopathy, as there ever was, for "there is no more harmony or affinity existing between the leading doctrines of Thomsonism and Allopathy," as Dr. Smith understands it, "than there is between oil and water." But when the leading Professor of the first Allopathic College in the world, in 1858, announces that the results of the practice he has followed for eight years, "instead of lowering, supporting the vital powers, and assisting the excretion of effete matters from the system," have driven him to the conclusion which "he cannot resist," that "the principles which led to an antiphilogistic practice in acute inflammations, were erroneous;" and when he points to the establishment of *scientific laws* instead of *empirical rules* to which Dr. S. yet clings, and to the abandonment of a *palliative* in favor of a *curative* plan of treatment, the time cannot be far distant when the same great platform will be occupied by both, and then no medical man need be ashamed to venerate the name of the "immortal Thomson!"—Till then, however, we shall keep the even tenor of our way.—"They may come to us, we cannot go to them;" for with the objects we have in view, it must be most *irrational* in us to use many of the agencies which Allopathy presents us. Could *blood letting* be *rationally* adopted to remove obstructions? or would it not have exactly the opposite effect? Could *calomel* be used *rationally* to promote perspiration? or would it not rather have the reverse influence by drawing the fluids inwards? Could we *rationally* substitute for the innocent though powerful Lobelia, the *tartar emetic*, or any of the other preparations of antimony that we know to be a virulent poison? The *ipecac might* be used, but even that is immeasurably behind lobelia as a thorough relaxant, and often proves an irritating cathartic, which lobelia never does, though all Allopathic writers assert that the contrary is true.

Could we *rationally* use *opium* to remove obstructions in any shape? or would it not rather bind them in the system? Or could we *rationally* content ourselves with the removal of a few spoonfuls of serum, at the expense of the destruction of the cuticle, when we possess a pleasant, safe, and cleanly method of removing any quantity of effete matter by the skin, without injuring the most delicate structure? Or finally, could we, or can any body, *give to cure a sick man what would kill a well one*, and then turn round and claim the sanction of *rationality*, or *common sense* either, to sustain us in the act? We think not, and therefore are content to leave all such *irrational* practices for such *irra-*

tional people as pursue the *irrational* course of treating *symptoms*, while they let the disease *go*, and then so *irrationally* call it *rational* medicine!!! Such medical wise-acres, imbued with the full importance of Dr. Smith's *axiom*, that there is no *good* in what can't do *harm*, would never expect the slightest benefit medicinally from chicken soup, in reasonable quantity, because it might do *harm* if taken in excess; and to them the cup of cold water would be a cup of poison, because it but requires sufficient quantity to be capable of destroying life by drowning, and therefore might do *harm!* and thus fulfil the axiomatic condition.

Away with all such—we were going to say—nonsense, but will forbear, as our fellow townsman, Dr. Smith, thinks differently, but we must assure him nevertheless, that ere Thomsonism and Allopathy, in Macon, can possibly unite, all such doctrines must be thrown aside, and those of the University of Edinburgh, alias Thomsonism, assume their place, when we will be most happy to extend to him, and all the Macon brethren, whom we cordially respect, the right hand of professional fellowship.

LOCAL AND PERSONAL.

Having treated thus far, of matters that are general in their character, with no special applicability to persons or locality, we now propose to review briefly the local and personal aspect of the Pamphlet, in which it will be necessary to speak of Dr. Smith in the character he has assumed as a witness on the stand, and sift his evidence accordingly. As we have said, Dr. Smith has put himself to a great deal of trouble to ridicule the idea of treating disease successfully on a great general principle; HE does not see how it can be done; HE has no conception that any one acting on it, and assisting nature, should be able to CURE after those who treat SYMPTOMS—by doing their best to destroy them, and thus destroy the effort nature makes—have done their utmost and failed; HE cannot understand how it is possible to give a medicine that will act in accordance with known physiological laws and have its legitimate effect upon the system, just as certainly as food relieves hunger or water thirst, and just as invariably, too; HE conceives that it is impossible to treat cases at a distance, without seeing the patient and thinks we might just as well dash straws against the wind, as attempt to inaugurate such doctrines with "intelligent and rational people," &c.; HE has no conception that either or all of these can be done, ergo, they are impossibilities!

We have always thought that intelligent and "rational" people were generally possessed of more sense than to argue against facts, or to ridicule as FALSE, what is known to be indubitably TRUE, because after all the arguments have been advanced to prove its impossibility, and every effort has been made to cast ridicule upon it, there it stands, the same fact, the same truth, just as immovable as the Gibraltar pillar of the gate of Hercules, and the gibes and the jeers that have been thrown at it, "like straws dashed against the wind," return whence they came to endanger the eyes of him who threw them; and should he have been foolish enough to endeavor to defile it with a spittle, he soon becomes apprised that he has but succeeded in spitting in his own face.

Greater men than he have argued against the PROBABILITIES of accomplishing certain great objects, and have even gone so far as to declare such accomplishment impossible, as evidenced by the celebrated paper of Dr. Lardner, proving the steam passage of the Atlantic between the old world and the new, Eutopian; but it is reserved for Dr Smith to set himself up as a derider of facts *after* their accomplishment, and claim for himself in consequence, "intelligence and rationality!"

"CURING WITHOUT SEEING."

From the frequency with which he brings up the announcement that we made to the public in 1849, that "chronic cases at a distance could be cured by us without seeing the patient," we infer that he wishes to join issue on that question, and if so, we are quite ready to compare notes with him, and prove beyond the shadow of a doubt, that it has been done repeatedly, that it is being done now, and judging from the past "routinism" of result, we have not a doubt that it will continue to be done, even after the best Allopaths in the country—perhaps himself included—have "studied each individual case" and applied the best "resources of his art" with "care and discretion," according to all the "modifying circumstances" surrounding the patient; in fact, after the "science and philosophy" of Allopathic medicine, as understood by Dr. Smith and his compeers, have been weighed in the balance—not of public opinion, that is ephemeral—but of actual result, and "found wanting."

We deem it but fair, however, to state that Dr. Smith is in error, when he says "THE BOOK tells how to treat cases at a distance, without seeing the patient," for no book that we have seen does so, and we think it would trouble him to produce one that does, because we have never published one, and so far as we know, that practice originated with ourself, and is valuable in so far as it shows that Thomsonian principles can be carried out with very different remedies, and are not exclusively indebted to the six numbers of Thomson, as Dr. S. would have us believe, but may be carried out by "*whatever*" will fulfill the indications present in the case, in accordance with the known Physiological laws that govern the animal economy in health and disease. Hence it is that though we cannot use Lobelia, nor a "course of medicine" in treating those cases, we yet succeed in "assisting the removal of effete matter from the system" by other agencies equally safe, at the same time that the "vital powers are supported," and the tone and vigor of the system increased, with a view to keeping what is gained inch by inch as we proceed, and we are prepared to demonstrate that "*whatever*" safe agencies that are capable of producing these results, may be applied, they may be relied on as proper remedies in carrying out Thomsonian principles, whether Samuel Thomson ever heard of them or not, and therefore however different the treatment we have adopted in the cure of such cases may be from what is known as the usual Thomsonian course, it is yet in full accordance with those principles that are "still the same," as Dr. Smith acknowledges, and will be the same forever.

We entrust nature with our remedies as we do the food and drink that she needs, leaving to her the appropriation of them to her special wants, and never contravene her efforts by withdrawing her forces or depressing her powers when all are needed to expel the enemy. When she cries for

bread we give her no stone, when she cries for medicine we give her no serpent!

We have made this explanation in order that whatever may seem "absurd" in the matter of treating patients at a distance may, instead of being visited upon the system, be placed to our credit or discredit, as the case may be, and we will take all the responsibility of making it appear to men of real "intelligence and rationality," that what has been done repeatedly can be done again, and if any faith is to be placed in a recurrence of facts as a basis of experience, then the "foundation" of the system on which we treat those cases is laid more securely than that of Allopathy itself, for it seems the "empirical facts" on which Dr. Smith says THAT is founded are not recurring, and cannot be trusted in the "clinical room," where tmost needed, but fail just at the time when "no two cases being alike," the "remedies for the different states being incompatible," the patient, at the critical moment, is left to the uncertainties of a "compromise" of active poison probably, of one kind or another, "concocted in the head of the practitioner" to suit the "symptoms" that are never alike in any two cases! So that instead of being able to cure cases at a distance by it, they find it an impossibility to cure them at home, and the people find themselves COMPELLED, often, very unwillingly, to resort to others who, under all the disadvantages of distance, (for they are disadvantages) are enabled to restore them to health and strength without seeing them! by receiving a simple statement of the case through the mail! It was for the accommodation of just such people that medicines varied so as to suit the case, were prepared in such a way as to make it possible to send them by mail, and the numerous cases that have been cured and benefitted thereby, has left the possibility of so curing, no longer an open question, but an established fact! Still the Doctor raises the issue, and the question arises, how shall it be settled? We answer, bring up the living witnesses, subject them to interrogatories under the strictest rules of evidence, and abide the result. Subjected to this test, we hereby agree to forfeit the sum of FIVE HUNDRED DOLLARS for the benefit of any proper charity Dr. Smith may designate, or for the benefit of his reverend champion friend, (who thinks the facts all on his side,) if we do not prove that in one year we have cured more cases of chronic disease, that have been pronounced incurable by physicians, without seeing the patient, than he has in his whole life, with his eyes open and his greatest discriminating acumen in full exercise, in combatting symptoms; he to forfeit a like sum, for the benefit of the Wesleyan Female College Chapel, should the showing be against him.

Or, under a like test, and on the same conditions, we agree to a like forfeit, if we do not prove that we have cured more cases of chronic disease, abandoned as incurable by physicians, in the county of Monroe, where he lived seven years, and where we never lived at all, than he has. We will even extend the challenge, while our hand is in, and forfeit a like amount on the same conditions, if we do not prove that we have cured twice as many confirmed and abandoned cases of chronic disease, as any Allopathic Physician in Georgia, and we do not think the risk would be great, if we said, than all of them combined, unless they did it by prescribing patent or other nostrums!

What says Dr. Smith? What say ALL? Shall the Chapel have a

benefit, or shall our reverend friend who knows where the facts are, be the gainer? We trust he will take stock with Dr. Smith, for it would do us "good" to be the means of directing a few hundreds of his dollars into a channel to promote a cause, the advancement of which he is known to have so much at heart (?) Well, if that don't suit, and HE will risk nothing, we will give an hundred dollars to whoever Dr. Smith shall designate, if he will produce the living witness of a single cure that he has made with all the aids that his scientific acquirements could afford him, like that described in the following letter from the Rev. J. D. Anthony, of Floyd county, Ga.

"I hereby certify that my wife Emily, daughter of Wm. Baugh, of Gwinnette county, Georgia, was a subject of most distressing Asthma from the time she was three months old, until about six years ago. She was never free from the effects a minute, or from severe paroxysms more than a month at a time from our marriage, in 1847 to 1852, at which time, hearing of the skill of Dr. Thomson, in the treatment of chronic diseases, I wrote to him, giving the particulars of her case, and soon received his medicine by mail. From the first dose she took she began to improve, and has had but one slight attack since, and from that hour to this, she has had no symptoms of the disease.

J. D. ANTHONY."

It gives us no pleasure to have to refer to matters so purely personal in a controversy of this character, but as we are compelled, by the Doctor's allusions, to vindicate our course as well as principles, there is no other alternative, and though we might copy letter after letter, giving evidence of the same great fact that cases are being cured without being seen, we yet content ourself for the present, with one more, from another Reverend gentleman, of Union county, North Carolina, for the purpose of showing that even Dr. Smith's derisive call can be complied with, for there are not lacking those who can "stand up to-day and pronounce him blessed, and testify to the infallibility (almost) of his all healing remedies."

"Dear Sir.—The portion of medicine last sent is just consumed, and I am happy to inform you that I have realized much desired, but unexpected benefit from your medicine, under the influence of which, with the blessing of God, my eye-sight, the sense of feeling, and the use of my limbs have all been restored; the great nervous excitement allayed; my palpitating heart composed, and my much contracted chest expanded. I have had no violent attack or paroxysm of Asthma since under your administration, though still slightly affected, and I therefore want some medicine.

Dear Dr. Thomson, when I compare my present condition with the past, I am at a loss to express the thanks that I feel is due our Divine Benefactor for providing means and instruments for the relief of his poor suffering creatures while in this frail state of mortality.

Dear Doctor, accept of my thanks and that of my family for your kindness to me, and be assured that I do not remember the night when I have laid me down to take rest in sleep without giving God thanks for Dr. Thomson, and imploring his blessings upon you and yours, * * *.

Signed SOLOMON SNIDER."

Facts such as these, however, have no influence on the judgment of Dr. Smith, who, unless he has obstinately shut his eyes, must have been cognizant of the same sort in the county of Monroe, where they are just as patent to other eyes, as the existence of more than one Botanic Practitioner is in that same county, the statement of Dr. Smith, that "During his residence of seven years in the county it could not produce a single practitioner of that order" to the contrary notwithstanding.

THE COUNTY OF MONROE.

The Doctor seems very unfortunate in his statements, when he predicates them exclusively on his own observation; the one just alluded to is quite in point, and if all his *facts* are like that one, it would puzzle even his Rev. friend to "verify" them. In what part of the county did he hide himself? Did he ever get a call outside the village of Forsyth? Did nobody appreciate the "narrowness of his discrimination," and the faithfulness with which he was prepared to do the "double duty of watching the remedy as well as the disease," near Proctor's Store? Were they so well content with the "old fogies" in the direction of New Market that the Doctor was not appreciated there? Seven years in the county, and yet he declares with as much apparent sincerity as if it was true, that there was "not one Botanic Practitioner to be found in the county that once was head-quarters of Thomsonism"!! Surely by this statement the Doctor but proves himself unknown, or worse, he proves the recklessness of assertion to which he is capable of resorting, for we will not believe him capable of making and publishing a deliberate falsehood; but to put the matter to the money test, we will forfeit another Five Hundred Dollars if he can produce a single sane, responsible man in that county who will swear to the truth of it!!

But *supposing*, for the sake of argument, that statement to be true, what have the "citizens" of Monroe gained by starving out Thomsonism? Has not their county been the scene of Dr. Smith's experience for seven out of the ten years of his Practice? Is it not *there* that he "*noticed*" those "*mischievous errors*" on the part of "*some*" of his brethren, that he felt constrained to designate "*wolfish intruders*"? Is it not *there* that he "*observed*" the "too great *precipitancy*" on the part of the Practitioner in the administration of his drugs"? Was it not *there* that he noticed "diseases that if undisturbed" would have terminated in health, receive an unfavorable turn from "*officious interference*"? Was it not *there* that he witnessed the "abuse" of the Physicians' "trust" when using their "mighty medicinal agents" that might *kill*, and which he says have no "good" in them unless they "can"? Was it not *there* that he witnessed "the reckless and excessive employment of physic" by her practitioners? where many a patient has been over dosed? And was it not *there* that many a practitioner confessed that "his heart was made to bleed with anguish and remorse for the mischief he had done," in giving *poison* "*inconsiderately*"? Was it not *there* that he met some "Old Fogies" who gave so much medicine as to produce "an excessive out-burst of action" by their "rapid succession of doses" and their "flight from one drug to another", in pursuance of "their vaunted knowledge and tact from experience"? and was it not *there* that he met the "young practitioners" who did the very same things, because of their "indecision and want of nice discrimination"? Was it not *there* that he witnessed the *prostitution and abuse*, the *reckless and profligate* use of medicine? Was it not after his experience in *Monroe* that he felt himself constrained to enquire: "Is it strange that Medicine should be charged with doing mischief? Or is it not *absolutely certain* that it really does a *vast deal* of injury to the human family?"

But what constituted the media through which Dr. Smith gained his *terrible* experience? The people of Monroe, to be sure!! But did they

know it? Can we suppose that *rational* men knew they or theirs had been subjected to treatment that had caused "anguish and remorse" "for the mischief done" on the part of their polite, affable, but "trust abusing" practitioners, and yet continue to employ them? Surely not! Therefore, it is fair to infer that Allopathy is *most* popular where *least* is known of what it really is, for how otherwise can it be accounted for, than by ignorance of the people, that all this could happen in Monroe county, and yet the system under which such "most wrongful" and "profligate" acts are perpetrated, remain popular and "flourish"? Verily, if that is what they made by letting "Thomsonism utterly perish in the county", they "gained a loss," for which they have the consolation that their friends have died *secundum artem*, they attained to a popular *demise* and realized in their own persons how much better it is to be "out of the world than out of the fashion." Since the people of Monroe have learned *how* their dear deceased have been treated, and what it was that took so many of them hence in the last seven years, they will, if still adhering to Allopathy, have some idea and appreciation of the feelings of those who practice the abominations of the Indian Suttee, the committing of children to the waves of the Ganges, or the self-sacrifice of the worshippers of the fashionable Juggernaut!

How happy must those in the City of Macon who have lost their relatives be, when they reflect that their "beautiful city" has not been the theatre of Dr. Smith's experience, that he has not *noticed*, seen or *observed* such *devastation* and *mischief here*, but that even he can commend "a competent number" of his professional brethren in this city as "men of scientific attainments and sound sense, and having judgment enough to give drugs as medicines and not as poisons." Is there, then, such a vast difference between the Doctors here and the Doctors in Monroe? Have we no "old fogies" in Macon? Have we no "young Practitioners" devoid of "nice discriminating" powers? Have none of the Doctors here ever been guilty of "*dreadfully abusing*" the Lancet and Calomel, or done an "*incalculable amount of mischief*" with—the "most valuable article in the Materia Medica"—"Opium"? Have they all been equally successful in avoiding *mischief* from the exhibition of *other* poisons? if so, why has Macon had to mourn the loss of one of the brightest of her galaxy, who took the medicine he himself had prescribed, for a patient, and was dead within the hour? and before he left the house?

Is Dr. Smith so certain about the effects produced by "*poisons* given as Medicines," that he would be willing to risk the taking them himself? or does he suppose that if these same men of "sense" and "judgment" took their own prescriptions, they would all get home alive? Is *arsenic* in Macon innocent, and deadly in Forsyth? or has Morphia lost in Macon the narcotic power that makes its use so *dreadful* in Monroe?

Poison is poison everywhere, and whoever puts it in the human stomach, puts it beyond his own control, and no man can calculate its effect in any other sense than that it will KILL or deprive the system of a part of its VITALITY! and whether it be given in Macon by the most "scientific and sensible," or in Forsyth by the oldest "Fogie" there, the effect is just the same, for poisons will destroy to the extent of the power of the quantity given; and we think the Doctor a little unjust to his Monroe brethren, and a little partial to his Macon friends when he makes the contrast so

distinct between them. We can and do believe that some of the Allopathic Physicians of this place are "nature's noblemen," as much so as any others, but we entirely differ with Dr. Smith in our estimate of their powers, when he claims that even THEY can give poisons with impunity. Therefore, although Macon has not been the scene of Dr. Smith's experience, the happiness of friends, of deceased patients should not be too exuberant, for the fact that the articles of the Doctor have found such a ready echo in this city and Savannah, and been in a manner endorsed as generally true by the organs of both Colleges there, must leave a lingering suspicion on the mind that such doings are not confined to Monroe county, but are the common results of Allopathic practice throughout the State and country, and if so what a lamentable condition must that people be in who feel themselves compelled to resort to it for aid in the hour of their bitterest calamity? If what Dr. Smith says HE has SEEN in the small section of the State in which he has resided, be true—and we would not cast the shadow of a doubt upon his statement—and if the same state of things exists throughout the other counties of the State? WHO can assure himself that his dearest idol, for whose welfare he would have sacrificed everything, has died a natural death? What man can tell whether in any specified case the true science of medicine has not been "most wrongfully prostituted," and the "remedies that promised good, by RECKLESS employment and profligate use have effected only MISCHIEF." Who is safe from the "officious interference" that may give the disease an "unfavorable turn," or who can be sure that they or theirs have not already experienced the effects of it? Is it a pleasant reflection to the good people of Monroe to think that such DEVASTATION and MISCHIEF as Dr. Smith depicts has occurred THERE among them and in the bosom of their own families? Or is it pleasant for any citizen to contemplate the possibility of the same scenes having been enacted in every county in the State, so that, while many have been consoling themselves with the reflection that the "Lord gave and the Lord hath taken away," and schooling their breaking hearts to "bless his Holy name," therefor, it has turned out that the Lord did NOT take away, but the very means that their love and care had provided regardless of expense by "precipitate," "reckless," "inconsiderate" use have done the "incalculable mischief?" When such reflections as these have been allowed their weight, can any consolation be derived from the fact that they have turned away from, and refused the use of the only system of medication that can cure their maladies without a poisonous dose, without the abstraction of a drop of blood, direct or otherwise, and without the use of the torturing blister? I trow not, but if the people of Monroe, especially, have done this thing, and therefore, for fashion's sake, sinned against light and knowledge, who shall say that they have not been properly punished?

But we do not concede what was only allowed for argument's sake, for our Practice IS and has been long represented in that county, and faithfully, too, and judging from the promptness with which pecuniary obligations are met, we have not the slightest doubt that a fair modicum of "bread" is earned by THOSE who represent us.

Perhaps Dr. Smith is not aware that since he left, things have gone greatly "to the bad" there, for, but the other day, we saw a statement of an Allopath in that county, in print, giving his reasons for Apostatising from

the Allopathic faith and embracing the doctrines of Medical Reform "PAR EXCELLENCE." Does that look like it was NOT "flourishing" even in THAT county? Does that look like the "confidence of the people" was wanting?" It is indeed "passing strange" that such TRUTH could so long be kept hid "under a bushel," if you will, so that the "accumen" and "narrowly discriminating" sense of Dr. Smith should fail to find it.—Verily, unless the Doctor is more successful in "discriminating disease," there would be great hazard in trusting to his HEAD for the concoction of a remedy, and if he is not more careful, his own heart might be made to "bleed with anguish and remorse for the mischief he has done," by giving it so "inconsiderately." So much for the UN"certainty" of the Doctor's statements, and so much for "the evidences against the popular recognition" of our system in the county of Monroe, from whence our head-quarters have been removed with great advantage to the cause, just as Napoleon moved his from Genoa or Magenta, to Solferino.

THE CITY OF MACON.

But the Doctor wants to know where the "evidences of its power and popularity are" elsewhere, and localizes the question by asking the people of Macon to testify. We have always been averse to localizing questions of this sort, because in treating of them it is generally necessary to make statements that might grate upon the feelings of some that we would willingly spare, however cautiously they may be expressed; but when THAT question is brought home to us in Macon, it is surely not the Reformer who has reason to shrink from it. Little as we care for mere popularity, as such, and little as we would step out of the path of strict duty to secure it, we yet are gratified to know that as fair a modicum is ours, as falls to the share of some who have made greater efforts to secure it, and though there be still many that prefer the old to the new Practice in the city—for what reason other than that its supposed respectability and popularity, it might puzzle them to tell—we yet have no reason to complain of the want of appreciation, seeing that no "leisure" has been ours, since its first introduction, and not the slightest cause has arisen for jealousy of even the most prosperous of our Allopathic rivals. In proportion to the numbers on either side, it is believed that more patients have been treated by the Reformers than by the Allopaths, and so far as we are individually concerned, we would not shrink from a comparison of notes with the best of them, either as to number or result, since 1841; and if Dr. Smith wishes to risk something on it for the benefit of some charitable object, other than his Rev. Friend, we will meet him half way and pay the forfeit if we do not show that we have treated in the last eighteen years, double the number of any other in the city, with less than half the mortality! and if he puts the question on the amount of pecuniary recompense, we know of one who would not exchange clear earnings annually, with any six of his most worthy rivals, and take five thousand dollars to boot; and who *gives* away annually more than many of them make, or "to put a finer point on it," who would risk something on the fact that he makes more clear money in one year than Dr. S. has made in seven, in the county that was his own head quarters, but is now deprived of his valuable services.

But that is not the only means the people of Macon have of testifying to the prosperity of Medical Reform elsewhere, for unless, like Dr. Smith, they shut their eyes, they cannot help but see that the cause in the coun-

try is progressing rapidly. Indeed, many of them not only SEE but FEEL it to their great gratification, for is it not the means by which they put "money in their purse" and raise their families? From year to year since 1847, the classes in the College have increased, until they last year far out numbered those of TWO of the Allopathic Georgia Colleges put together, and doubtless left in Macon more than Thirty Thousand Dollars. Is that not evidence both of popularity and prosperity, not only of the cause, but of "this beautiful city;" and "the mass of intelligent citizens" are not only cognisant of the fact, but know how to appreciate the difference between those who assist them in building it up and those who are here only for what they can get. "How little apples do swim" to be sure!

It is generally considered that comparisons are odious, and they are, but when they are forced upon us what can we do but meet them? We have proffered our Allopathic friends in Macon a fair, honorable, manly rivalry; we have placed our system fairly on the test of merit before the public; we have held out no inducements to the people by offers of practicing at half price, either in Macon or Vineville, or in the country; we have taken our fair share, and perhaps a little more, in the charitable administration of remedies to the poor and needy, for even when the city employed a practitioner for the purpose, none were sent empty away FOR WANT OF THE MONEY, that he might seek elsewhere for greater kindness; we have not sought to alarm the patients of rivals by any means, indirect or otherwise, and have often refused to attend them before their former attendant had been courteously discharged. This is our record and we appeal to the Allopathists of the city, themselves, in confidence, for its confirmation. CAN they truthfully say as much for all the members of their own Body? And then, as to the recompense, cannot the PEOPLE of Macon testify that however much may have been realized, the widow and the orphan have never been distressed, and the homes of the poor have never been in jeopardy at the hands of the sheriff, at our instance? Can Allopathy say as much in Macon, or do its members sometimes find it necessary to grind the faces of the poor to enable even them to "make bread?"

"THAT STEAM WHISTLE."

But Dr. Smith is mistaken when he says the "acclamation to the afflicted, to come and be healed," "issues alone from the lecture room of the Thomsonian College," or from the mouth of our practitioners. It IS "heard from somebody else," and "DOES come from other sources."—Does he want an instance? we will furnish it, without, however, mentioning names, because those who are familiar with the circumstances know the facts. Within a less circuit than three miles of "this beautiful city," lives a gentleman of wealth and position, who for twenty odd years has been subject to a severe chronic disease that rendered life so great a burden that his desire was, either to be KILLED or CURED, and was indifferent as to which. During that time he has been under the care of the most eminent of the Macon Allopathic Doctors, whether living or now dead, but all without benefit. Having consulted his friend, an old Allopathic Doctor of a neighboring county, whose lengthened experience had dissipated the flowery images with which Dr. Smith bedecks his system, and opened his eyes to the fact that even Thomsonians have something "good" about them, was directed by him to call on us, as he had witnessed some cures effected in his own neighborhood that gave him confidence

that something might be done. That "steam whistle," reverberating from the lips of conscientious Allopathy had the desired effect; the application was made, the case stated, the command given to KILL or CURE, the medicines that did NOT require "watching," because NO poisons given, and to-day, though old, he has renewed his youth, and is as well as ever, and has VERY little use for Doctors whose "remedies" need "watching" as well as the "disease." Another might be mentioned of the sister of an Allopath who was cured of Epelepsy, especially as it happened in the county of Monroe! and more might be given if required.

Thus Allopathic confidence has been justified, but let the reader contrast this with the cases Dr. Smith BOASTS of the "Calomel Doctors" having got in the "families" of "some of our practitioners," and see the difference! On this point also, cannot the people of Macon testify? or is it necessary to appeal to the ashes of the urn for PROOFS of the "POWER" as well as "POPULARITY" of Allopathic medicine!? It is, and has been popular, there is not a doubt of it, and there is perhaps no better proof of it than the immunity from blame, no matter what the result that attends its ministrations. Indeed, in this respect we are entirely distanced, for thousands may be "bled down irrecoverably," and tens of thousands may die by means that leave the hearts of her practitioners "filled with anguish and remorse for the mischief they have done," and yet nothing be said to her discredit, but let the Botanic Practitioner lose a case, and the whole country is aroused, and however simple the remedy that has been used, it is ten to one if he is not accused by somebody of killing his patient! and Dr. Smith's "jurist," as well as a part of the public, would at once take their say so as valid testimony of the fact. The fairness, or justice of such a course will not bear comment, but the implied compliment is undoubted, for while it seems the public look for nothing else from them, it expects better things of us, and is surprised and disappointed at a failure on our part, showing that indeed, and in truth, it is to us they look for the "INFALLIBLES," and not to them.

But time and space would fail us, were we to notice all the "vagaries" of which the pamphlet is full. Neither is it necessary that we should, for many of them speak for themselves. What, for instance, could be more delicately witty or exquisitely puerile, than the following statement: "While quite a boy, 'driving the cows and minding the geese,' Samuel Thomson took his first lessons in Physic from Mrs. Benton, an old woman Doctor who used 'yerbs.' When she went out to gather herbs and roots, she would take SAMMY with her, and learn him the names of the plants, and what they were good for." Wonderful! It is said poets must be born, for they can't be made. May it not be the same with Doctors too; and if it is, would it be possible to begin to show the bent of the mind much sooner than "while quite a boy?"

Probably when Johnny or Dickey was "quite a boy" in Crawford, it was thought dangerous to permit goosely association, on the principle that "evil communications corrupt good manners," for it is known that "birds of a feather WILL flock together." As to driving cows, that would never do, for "color" is not confined to disease, and the fate of a certain celebrated personage in nursery literature, dear to little "boys," might have been realized, but for the care of his worthy parents, who kept him from

the pasture, and thereby laid RATIONAL medicine under an obligation that cannot be over-estimated!

Take another example of the PITH of the Doctor's arguments, and be convinced that it was an act of great temerity on our part to encounter so redoubtable a champion. He says: "They say they draw no blood, and yet they have surgeons who amputate limbs, and do various other cutting operations on human flesh!!" Rather a new method of BLEEDING, it must be said, and quite suggestive of another operation that cannot much longer be avoided, we fear, and that is, "Cutting for the Simples!"

But the Doctor has closed the controversy, so far as he is concerned, and regrets the necessity of having had to expose such a "hard featured" system as HE has made it; but he can't get off so easily. Does he mean to insult us by "hard" names, after having scarred our "features" with his own hand, in such a way that nobody that ever knew Thomsonism before, would recognize it again by his description of it? If he does, that insult cannot be borne, and we hereby challenge him to a mortal test to atone for the offence. As usual, however, we will be generous, and allow him all the advantages, and time to make his will before beginning; and though it is not the privilege of the challenging party to select, we suggest as weapons that "jug of Lobelia" and "bottle of Calomel," with the former of which, he says "he can kill five men to our one the year round," we using only the latter. Now we propose reversing this, and instead of killing so many men, make the test between us—we are the parties interested—and so far as we are concerned, we are willing to abide the actual test, and risk our life upon the qualities of Lobelia, as we state them, and challenge him to risk his own on Calomel. We think this is fair, especially as vegetable poisons are the most virulent,and "Lobelia is a violent narcotic poison," (?) by his own showing. Nevertheless, violent or virulent as he thinks it, we hereby DARE him to test the comparative powers of the two articles, in our own persons, we to take twice as much Lobelia as he will of Calomel, or if that will not suit, we will allow our dose to be doubled on the same terms, and take four times more than he dare of that harmless (?) drug, and give him the benefit too of taking it from one of the Macon Practitioners, who has sense and judgment enough to give DRUGS as MEDICINES and not as POISONS; so that HE will be perfectly SAFE whatever fate may befall us. Or if that will not suit, and some sensations of fear should creep into his mind, after reading of what Calomel is capable in the extracts we have given from the writings of men of experience, we will change the terms, and let him substitute that excellent and SAFE article opium, that he says need never kill a child even, and we will take not only four, but ten times as much Lobelia as he dare take of that "SAFE and most valuable article." But if he will do neither, then we must post him in the usual way, hoping that the reader will judge of him as charitably as possible, for with most of us it is much easier to *talk* about our "faith," than to prove it by our "works."

THE BOARD OF TRUSTEES

OF THE

REFORM MEDICAL COLLEGE OF GEORGIA,

TAKE pleasure in calling attention to the intimation contained in Dr. Smith's Pamphlet, that the head-quarters of Medical Reform have been removed from the village of Forsyth to the city of Macon, much to the advantage of the Cause and College, and greatly to the benefit of students, whose increase of numbers required an amount of accommodation not easily procurable in so small a place.

Since leaving Forsyth, too, the increasing popularity of the new system throughout the country, has reacted very beneficially upon our position, and our hands have been greatly strengthened by the liberality of the people's representatives, who have in obedience to the popular will, endowed our College from the public treasury, and thereby placed in our possession the means that have enabled us to present educational attractions to the students of our own as well as other States, that are scarely equalled by those of our own Allopathic neighbors, and not approached, it is believed, by any other Reformatory Institution in the country.

With an edifice equal to the present requirements of our Classes, full to repletion with various yet necessary specimens of Materia Medica, Natural History, Comparative and Morbid Anatomy, as well as Physiological and Pathological Specimens, Chemical, Electrical, and Philosophical Apparatus, &c. &c., and a Faculty full of energy and devotion to the cause they have so long and courageously upheld against all opposition, it cannot be doubted that the prospects before us are brighter than ever, and our progress must be onward with accelerated speed. Why should it not? When we compare our present prosperity with the past adversity that has been the lot of our system; when we think of the change in public opinion that has struck off the shackles with which Allopathy, through legislative influence, had endeavored to bind us, and when we see the evident desire of our whole people to put us on an equality with our rivals, and mete out even-handed justice to both, should we not be encouraged and act worthy of our high position, and demonstrate the fact before the world that we are entitled by *merit* to hold it; that we *can* hold it without the aid of any bolstering or repressive law, and that we *shall* hold it in spite of all and every effort to the contrary.

Allopathy herself is coming over—her practices are being greatly modified—her old principles are demonstrated to be erroneous, and those that are taking their place are strictly Thomsonian; so that being in the van of the great Medical Reformation—that shall sweep old notions away as with the besom of destruction—shall we not keep that position in honor of the immortal Thomson? nor suffer even the Edinburgh College to steal our thunder!